

**ATTESTATION PAPER.**

No. *B 8211464*

Folio. *43*

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

**QUESTIONS TO BE PUT BEFORE ATTESTATION,**  
(ANSWERS.)

1. What is your surname?..... *McCarthy*
- 1a. What are your Christian names?..... *George*
- 1b. What is your present address?..... *635 Frontenac St., Montreal*
2. In what Town, Township or Parish, and in what Country were you born?..... *Pembroke, Ont.*
3. What is the name of your next-of-kin?..... *Elizabeth (Roma) McCarthy*
4. What is the address of your next-of-kin?..... *635 Frontenac St., Montreal*
- 4a. What is the relationship of your next-of-kin?..... *Wife*
5. What is the date of your birth?..... *February 19th., 1879*
6. What is your Trade or Calling?..... *Motorman*
7. Are you married?..... *Yes*
8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... *Yes*
9. Do you now belong to the Active Militia?..... *No*
10. Have you ever served in any Military Force?..... *No*  
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?..... *Yes*
12. Are you willing to be attested to serve in the }  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *Yes*

**DECLARATION TO BE MADE BY MAN ON ATTESTATION.**

I, *George McCarthy*, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force**, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

*George McCarthy* (Signature of Recruit)  
*Pte A. Miland* (Signature of Witness)

Date..... *February 11th* 191*6*

**OATH TO BE TAKEN BY MAN ON ATTESTATION.**

I, *George McCarthy*, do make Oath, that I will be faithful and bear true Allegiance to His Majesty **King George the Fifth**, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

*George McCarthy* (Signature of Recruit)  
*Pte A. Miland* (Signature of Witness)

Date..... *February 11* 191*6*

**CERTIFICATE OF MAGISTRATE.**

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act. The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at *Montreal* this *11<sup>th</sup>* day of *Feb* 191*6*.

*Althe* (Signature of Justice)  
*prop*

148TH OVERSEAS BATTALION OF THE CANADIAN OVERSEAS FORCE  
 Description of George McCarthy on Enlistment.

Apparent Age.....36.....years.....11.....months.  
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

Height.....5 ft. 9 1/2 ins.

Chest measurement { Girth when fully expanded.....40 ins.  
 Range of expansion.....3 ins.

*Scar on bridge of nose  
 Scar on left cheek*

Complexion.....Fair.....

Eyes.....Blue.....

Hair.....Brown.....

Religious denominations { Church of England.....Yes.....  
 Presbyterian.....  
 Methodist.....  
 Baptist or Congregationalist.....  
 Roman Catholic.....  
 Jewish.....  
 Other denominations.....  
 (Denomination to be stated.)

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him\*.....fit.....for the Canadian Overseas Expeditionary Force.

Date.....February 11th.....1916

*Attn: A. M. C. D. C.*

Place.....Montreal.....

*A. M. C. D. C.*

Medical Officer.

\*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

*George McCarthy*

.....having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

*A. M. C. D. C.*  
 ..... (Signature of Officer)  
 O. C., 148th "Overseas" Battn. C. E. F.

FEB 18 1916

Date.....191

MC CARTHY GEORGE

041464

148TH BN

03220



C.E.F. REGIMENTAL DOCUMENTS  
WAR SERVICE RECORDS L

P.S.



PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

148TH "OVERSEAS" BATTALION, C.E.F.

(1) Name of Overseas Unit which Soldier joins.....

(2) Regimental Number ... 841464 .....

(3) Full Name of Soldier..... McCARTHY George .....

(4) Place of Birth..... Pembroke Ont. ....

(5) Are you married, or not? ..... Yes .....

(6) If married, state,  
(a) Full name of your wife..... Elizabeth Roma McCarthy .....

(b) Present Postal Address..... 635 Protenac St. Montreal, Que. ....

(7) Are you a widower? ..... No .....

(8) Have you any children? ..... Yes two girls .....

If so, give number of boys and girls..... Aged 6 and 4 years. ....

Also their names and ages.....

Hazel Majorie McCarthy age 7  
Gertrude May McCarthy age 4.

(9) Is your Father alive? *No*

If so, state name and address

(10) Is your Mother alive? *No*

If so, state name and address

(11) If your Mother is a widow *No*

Are you her sole support, or not? *No*

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

*No*

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

~~Wife + 2 children~~

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

*Yes*

(15) Are you insured? *No*

If so, in what Company? *No*

Have you made arrangements for payment of your Insurance premium? *No*

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date AUG 4 1916

*Alman*  
Officer Commanding  
O. C. 148th Overseas Battalion, U.S. F.

NAME

M. E. Carthy George

REGT'L NO

841464

RANK AND CORPS

Osteo. 24th. Pn. (Farm 148th. Pn)

H. Q. FILE NO. 649-

FOLLOWS

NO.

CABLE

No.

DATE

NATURE OF CASUALTY

FOLLOWS

No 2347 21-4-17

Adm to # 22 Gen. Hosp. Camiers  
Apr. 11th. 1917 Contusion Shldr.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
a 498	22 Gen. Carriers	11-4-17	contusion shoulder
a 502	No 6 Conv. Ref. Staples	15-4-17	" "
a. 502	22 Gen. Carriers	15-4-17	" " Discharged
a 572	Ref from Base to duty	18-5-17	" "
a 109 <sup>(2)</sup>	# 18. Cab Reg. Sln.	4-1-18.	V. D. G. 1st. Div.
a 113-3.	No 51 <sup>st</sup> Gen. Staples.	8-1-18	V. D. G.
a-164 <sup>(2)</sup>	Div.	12-2-18	" " "



No. 841464 RANK

Pte

NAME Mc Carthy Geo.

T. O. S. 11-2-16 UNIT

148<sup>th</sup>

Battalion C. C. I

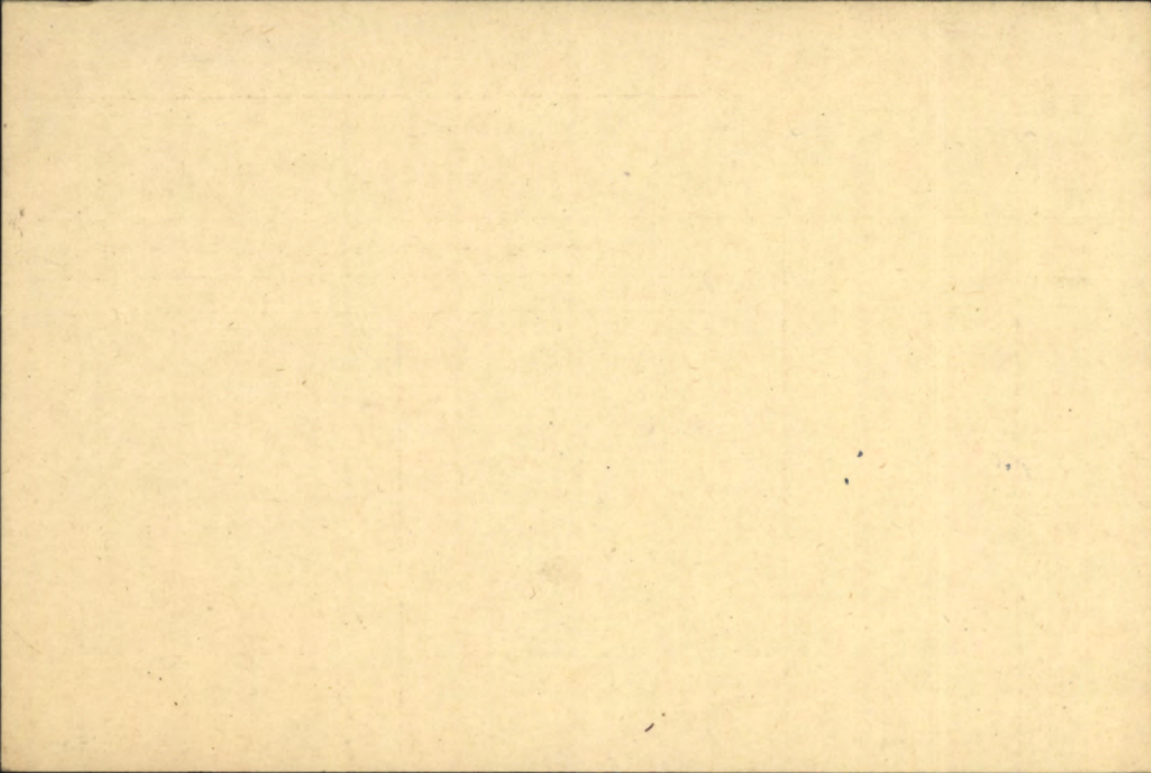
(Do 36 of 12-2-16)

M. D. 4

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
1916 Feb. 11	1916 Feb. 29	✓	Prom. L/cpl. 24-2-16	Do 48 of 26-2-16.
Mar.		✓		
Apr.		✓		
May		✓		
June		✓		
July		✓		
Aug.		✓		
Sept.		✓		
			3 days pay forfeited	Aug paylist.

UNIT SAILED

SEP 26 1916



24  
1  
20  
SURNAME.

*Mc Carthy,*

CHRISTIAN NAMES

*George*

REGL. NO.

*841464*

RANK

*Pte*

UNIT

*148<sup>th</sup>*

FORMER CORPS

*Nil*

*4*

CARD NO.

*S.O.S. Disc 19-2-19*

*Demob FOLL.*

*N.O. 1420.*

*Batt.*

NEXT OF KIN.

NAMES IN FULL

*Mc Carthy Mrs E. (Roman)*

RELATIONSHIP TO SOLDIER

*Wife*

CHANGE OF ADDRESS

*646<sup>A</sup> Frontenac St.,  
c/o Mr. Lambton,  
Montreal, Que.*

COUNTRY OF BIRTH

*Canada, Pembroke Onto*

DATE

*Feb. 19<sup>th</sup> 1899*

PLACE OF ATTESTATION

*Montreal, P.Q.*

DATE

*Feb. 11<sup>th</sup> 1916*

*Sailed from Halifax per S.S. Laconia  
1/6. 25/11/19 200*

L. L. 90589.-M. & D. 6312

*26/9/16*

M. F. W. 22. 100m.-1-16. H. Q. 177239339

*Pte.*

MARRIED *yes*

SINGLE

WIDOWER

TRADE OR CALLING

*Motorman*

RELIGION

*Church of England*

DESCRIPTION.

APPARENT AGE

*36* YEARS

*11* MONTHS

HEIGHT

*5* FEET

*9 1/2* INCHES

CHEST MEASUREMENT

*40* INCHES

EXPANSION

*3* INCHES

COMPLEXION

*Fair*

EYES

*Blue*

HAIR

*Brown*

DISTINGUISHING MARKS

*Scar on bridge of nose, scar on left knee.*

MEDICAL EXAMINATION.

PLACE

*Montreal, P. Q.*

DATE

*Feb. 11<sup>th</sup> 1916*











Surname **McCarthy** Christian Name or Names **G** Reg. No. **841464**  
Rank **Pte** Unit **24th Batt.** Co. **1st Qul.** Troop  Batty.

Hospital **22 Gen Camiers** Date of Admission **11-4-17**  
**Transferred 6<sup>com</sup> Etaples** Hosp. **15-4-17**  
**18 Cas. Clear. Stet.** Hosp. **4-1-18**  
**51 Gen. Etaples** Hosp. **8-1-18**  
Hosp.

Diagnosis **Contus shldrs. gl**  
(1) **V.D.G. 2w**  
(2)   
(3)

Additional Diagnosis: if more than one state present

DISPOSITION  
**C.L.20-4-17 A 498**  
**25-4-17 a 502**  
**25.7.17 A 572**  
**10.1.18 @ 109.2**  
**15.1.18 @ 113.3**  
**19.2.18. @ 167 ②**

REMARKS **To duty. 18.5.17** Date  
**Dis- 12-3-18.**

# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

MCCARTHY, Geo.

\*Name ..... Rank Pte. Regtl. No. 941464

Original unit 148th Bn. Present unit DD 4 M. or S. M Age 39 Religion C.E. Fyle Depot 19-11-021 Ref. H.Q.

Port, ship, and date of arrival Halifax. Emp. of Br. 22-1-19

Next of kin Elizabeth Roma McCarthy, 635 Frontenac St. Montreal (W)

Address on leave .....

Address on discharge .....

Transportation issued Yes No Date ..... Character on discharge .....

Previous occupation Motor-man Date and place of enlistment Feb 11-16 Montreal

Diagnosis ..... Date of Medical Boards .....

Date.	Remarks	Pt. 2 Order No.
30-1-19	Y.O.S. from O/S 12-1-19 posted to Gas. Coy .23-1-19	
	Fur. O/S to 8-2-19	30

\*—Name will be given in full; surname first.

Date.

Remarks.

Pt. 2 Order No.

21-2-19

SOS Discharged R.O. 1420 Para C Unfit

752

Eff. 1922-19 Cat AIII

# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

This is to Certify that No. 841464 (Rank) Private

Name (in full) MC CARPHY George. enlisted in  
the 148th Battalion

CANADIAN EXPEDITIONARY FORCE at Montreal, Que. on the 11th  
day of February 1916.

HE served in FRANCE

and is now discharged from the service by reason of Medically unfit

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:—

Age 40 years

Height 5 feet 9½ inches

Complexion Fair

Eyes Blue

Hair Brown

Geo M. Carthy  
Signature of Soldier

Marks or Scars

Small scar on left shoulder.

[Signature]  
Issuing Officer Lieutenant,

Officer in Charge Discharge Section, District Depot No. 4.

Rank

Date of Discharge February 19th, 1919.

Appointment

Signed at Montreal, Que. this 19th. day of February 1919.

in Military District No. 4

File Reference No. DD4 19-M-821

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. .... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

Medals and Decorations .....

Remarks .....

Signed at ..... this ..... day of ..... 19 .....

.....  
Name of Officer

.....  
Rank

.....  
Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.

(YM)

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44. 1133 (D.P. 250M-12-18. 1772-89-908.

LAST PAY CERTIFICATE

Regimental No... 841464 Rank... Pte Name... Mc CARTHY George (Surname first) Unit... 148th Bn who was\* Discharged On... 19-2-19 1911, to... \*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from... 1-1-19 to 19-2-19 1911... the inclusive date of transfer or discharge.

Table with columns Dr, Cr and rows for various pay items: Bal. Dr. or Cr. from prev. month, Regimental Pay, Field Allowance, Separation Allowance, Clothing Allowance, Post Discharge Pay, \*Other Credits, Advances, Separation Allowance and Assigned Pay Cheque, \*Other Charges, Balance on transfer or on discharge, Total.

A monthly stoppage of \$... 20.00 (†) has... (‡) been paid on account of Assigned Pay for the month of... Feb... 1919 and Separation Allice. for month of... 19-2-19 1911 (to) Assignee Mrs. E. Mc. Cathy 646 Frontenc St. Montreal. QUE;

ON TRANSFER OF AN OFFICER. Outfit Allowance of \$... has been paid by Paymaster, Military District No.....

REMARKS:— State (1) date of enlistment... 11-12-16 married or single... (2) Separation Allowance, entitled or not... Yes (3) Reason for discharge... (4) Authority for discharge or transfer... D.D. 4. 19-M-821

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier. Date... FEB 19 1919 Place... DEMOBILIZATION PAY DIVISION

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916. (B) For purposes of transfer it is to be made out in triplicate. (C) For purposes of discharge it is to be made out in duplicate. (D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificate will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.





700  
C 900  
Number..... 841 464 ..... Rank ..... Pto B

Surname..... MCCARTHY

Christian Name..... George V

Units..... 24th BN Can Inf Theatre of War France

Date of Service..... 7/12/16 D

Remarks..... widow - Mrs Elizabeth McCarthy  
239 Papineau St. Montreal 16 1/2 3

Latest Address..... ~~446 a Frontenac St~~  
~~Montreal~~

Roll No. B. Page 635-8 Que.

DESP. JAN 20 1923

GEN

*[Handwritten signature]*

33161

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supp card 8 3-21

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✓  
41st C.F.C.

✓  
✓  
✓  
✓  
McCarthy, G., Pte. 841464 24th Bn. 649-M-10957

Med. & Dec. (Widow) Mrs. Elizabeth McCarthy.  
239 Papineau St 646a Frontenac St.,  
Montreal 16 1/2 Montreal, P. Q.

P. & S. ("idow") Address as above.

(Ser. # 811964)

Mem. Cross. (Widow)

J.R. 23-5-21

not dig, 1/15  
dig, U.S.  
B.W.M.

MAY 1 1921  
Serial Desp. Reqn. No 242431  
Plague Dept. JAN 11 1922  
Penn No P24403

Elizabeth McCarthy

W 641784

1004

JAN 19 1921

Plaque returned 23-1-22

Plaque redesp. 16-1-23 E 895.

Scroll redesp. 28-3-24. (2741.)

X

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters)

McCarthy J. MD4

REGIMENT

C.Y.C.

RANK

Pte.

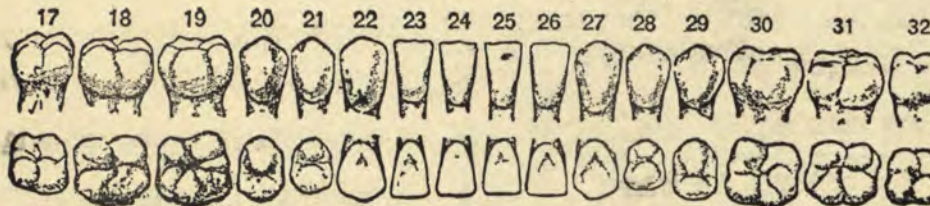
No.

T41464

Date of Examination in England

T/1/19.

Date of Examination in France



PRESENT DENTAL REQUIREMENTS

1. FILLINGS

12

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

(a) In Canada Yes

(b) In England

(c) In France

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.

2. Figures as per chart will be used to designate teeth concerned.

3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

KINMEL PARK, NORTH WALES.

Signature of Dental Officer

[Handwritten Signature]

STATE OF TEXAS  
DEPARTMENT OF COMMERCE  
REGISTRATION DIVISION

THIS IS TO CERTIFY THAT  
I HAVE RECEIVED FROM  
THE REGISTRAR OF DEEDS  
FOR THE COUNTY OF  
[County Name] TEXAS  
A CERTIFICATE OF REGISTRATION  
FOR THE YEAR 19[Year]

IN WITNESS WHEREOF  
I HAVE HEREUNTO SET  
MY HAND AND SEAL  
AT THE CITY OF HOUSTON  
THIS [Date] DAY OF [Month] 19[Year]

REGISTRAR OF DEEDS  
COUNTY OF [County Name]  
STATE OF TEXAS

NOTARY PUBLIC

My Comm. Expires  
[Date]

[Handwritten signature]

*Copy*

Register No. *Orme 952*

WAR SERVICE GRATUITY  
TO  
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. *12144-G-2*

Regt'l No. *841464* Name *George* *McCarthy*  
(Christian Name) (Surname)  
Unit *148 Bn* Rank *pte* Date of enlistment *11/2/16*  
Date of casualty *24/1/20* B.P.C. File No. *115184*  
Was service performed overseas? *yes*

DEPENDENT

Name *Mrs Elizabeth McCarthy* Relationship *widow*  
Address *646-A Frontenac St*  
*Montreal*

Amount of Special Pension Bonus \$ *80<sup>00</sup>* Abstracted by *Mrs. Colan*

Eligible for Gratuity \$ .....  
Less amount of Special Pension Bonus paid \$ .....  
Less Debit Balance of S. A. or A.P. \$ .....

Total deductions \$ .....

Balance due \$ .....

Cheque No. .... Date issued .....

Clerk *J. Hebert*

REMARKS: *Soldier disch'd - 19/2/19 -*  
*not eligible in receipt*  
*of W.S.G.*

Audited by  
Date .....

*Noted Dy 17*  
*20/8/20*

M.F.W. 2652  
25M-6-30.  
H.Q. 1772-30-1473





**ASSIGNED PAY.**

MILITIA AND DEFENCE

M. F. W. 11.

50m.—6-16.

H. Q. 177-39-818.

**SEPARATION ALLOWANCE**

Name *Mrs. G. (Elizabeth) McCarty*

Name of Soldier

*McCarty. G*

Address *635 Frontenac St.*

Regtl. No.

*841464*

*Montreal*

Rank

*Pl.*

*P. Q*

Corps

*24<sup>th</sup> Bn*

Relation to Soldier

To what Corps belonging

wife, child or mother

when called out

*\$ 20<sup>00</sup>*

**SPECIAL REMITTANCE**

*Decd 357.18.4.17*

**PAYMENTS**

**ALSO ACCOUNT IN CURRENT LEDGER.**

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apr.				
May		<i>9486</i>	<i>20 -</i>	
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



*256*

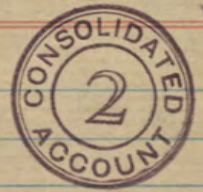


MILITIA AND DEFENCE  
 ASSIGNED PAY  
 OVERSEAS CONTINGENTS

To Whom *Mr. Eliz. Mc. Carthy* <sup>(Wife)</sup>  
 Address *646 635 Frontenac St.*  
*Montreal.*  
*P. Q.*  
 By Whom Assigned *Mc Carthy Geo.*  
 Regtl. No. *841464-13*  
 Rank *Pte.*  
 Corps *148 Batta.* *H. 2<sup>s</sup>*  
 Rate *\$ 20<sup>00</sup>* OCT 1 - 1916

PAYMENTS SEE ALSO ACCOUNT IN SPEC. REM. LEDGER,

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
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Dec.				
Jan.	1916			
Feb.				
March				

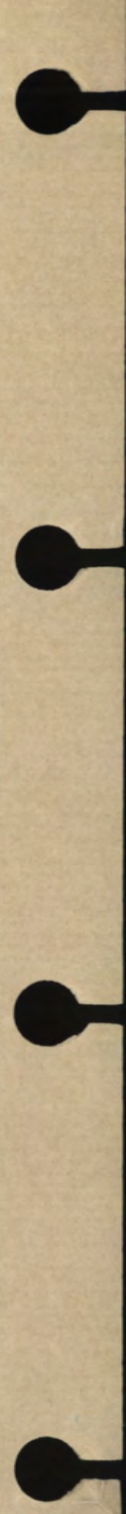


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1-3-16

## MILITIA AND DEFENCE

M. F. W. 11.  
20m.—11-15.  
H. Q. 1772-39-818.

## SEPARATION ALLOWANCE

Name Elizabeth McCarthy  
 Address 1635 Frontenac St  
646 Montreal  
PR

Name of Soldier McCarthy GeorgeRegtl. No. 841464Rank PteCorps 148<sup>th</sup> Batt<sup>n</sup>

Relation to Soldier

wife, child or mother

} Wife

To what Corps belonging

when called out

## PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March		<u>N28621</u>	<u>20</u>	<u>20</u>



1943

1943

1943

1943

# ASSIGNED PAY

Sheet No. 2. Mrs. Ely McCarthy (Assignee) (wife)  
OVERSEAS CONTINGENTS  
L. L. Job 5470—Req. 6888.

Name of Soldier McCarthy Geo.  
PAYMENTS. (841464 - B) 148 B Co. Pte.

Month.	Year.	Cheque No.	Am't.	Remarks.
			720 <sup>00</sup>	OCT # 3916
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		B24166	20	
Nov.		W29803	20	
Dec.		F34883	20	
Jan.	1917	P39482	20	
Feb.		P4504	20	
March		H50541	20	20 B
April		G3096	20	20 W
May		G9985	20	20 (W)
June		F15804	20	∞
July		G22893	20	W
Aug.		R30211	20	OB
Sept.		N37048	20	W
Oct.		S44049	20	
Nov.		349127	20	
Dec.		W56731	20	\$300.00
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

300<sup>00</sup>  
17

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

**PAYMENTS.**

Name of Soldier \_\_\_\_\_

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				



## SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

L. L. Job 89002.-Req. 6213.

*Elizabeth McCarthy**wife*

PAYMENTS.

Name of Soldier

*McCarthy George*

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	<i>O 3704</i>	<i>20</i>	<i>20</i>
May		<i>W 4503</i>	<i>20</i>	<i>20</i>
June		<i>T 7886</i>	<i>20</i>	<i>20</i>
July		<i>S 9105</i>	<i>20</i>	<i>20</i>
Aug.		<i>N 13439</i>	<i>20</i>	<i>20</i>
Sept.		<i>W 16672</i>	<i>20</i>	<i>20</i>
Oct.		<i>O 20178</i>	<i>20</i>	<i>20</i>
Nov.		<i>V 23414</i>	<i>20</i>	<i>20</i>
Dec.		<i>V 26154</i>	<i>20</i>	<i>20</i>
Jan.	1917	<i>E 29966</i>	<i>20</i>	<i>20</i>
Feb.		<i>E 32985</i>	<i>20</i>	<i>20</i>
March		<i>E 36294</i>	<i>20</i>	<i>20</i>
April		<i>E 2034</i>	<i>20</i>	<i>20</i>
May		<i>75710</i>	<i>20</i>	<i>20</i>
June		<i>F 9292</i>	<i>20</i>	<i>20</i>
July	<i>12 June</i>	<i>F 12597</i>	<i>20</i>	<i>20</i>
Aug.		<i>N 15195</i>	<i>20</i>	<i>20</i>
Sept.		<i>U 17662</i>	<i>20</i>	<i>20</i>
Oct.		<i>B 22526</i>	<i>20</i>	<i>20</i>
Nov.		<i>N 24532</i>	<i>20</i>	<i>20</i>
Dec.		<i>P 27492</i>	<i>20</i>	<i>20</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*646 Frontenac St, Montreal, Que**\$ 440.00**440.00*

MILITIA AND DEFENCE  
**SEPARATION ALLOWANCE**

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier \_\_\_\_\_

**PAYMENTS.**

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

Perforated sheet for Will from Pay Book of

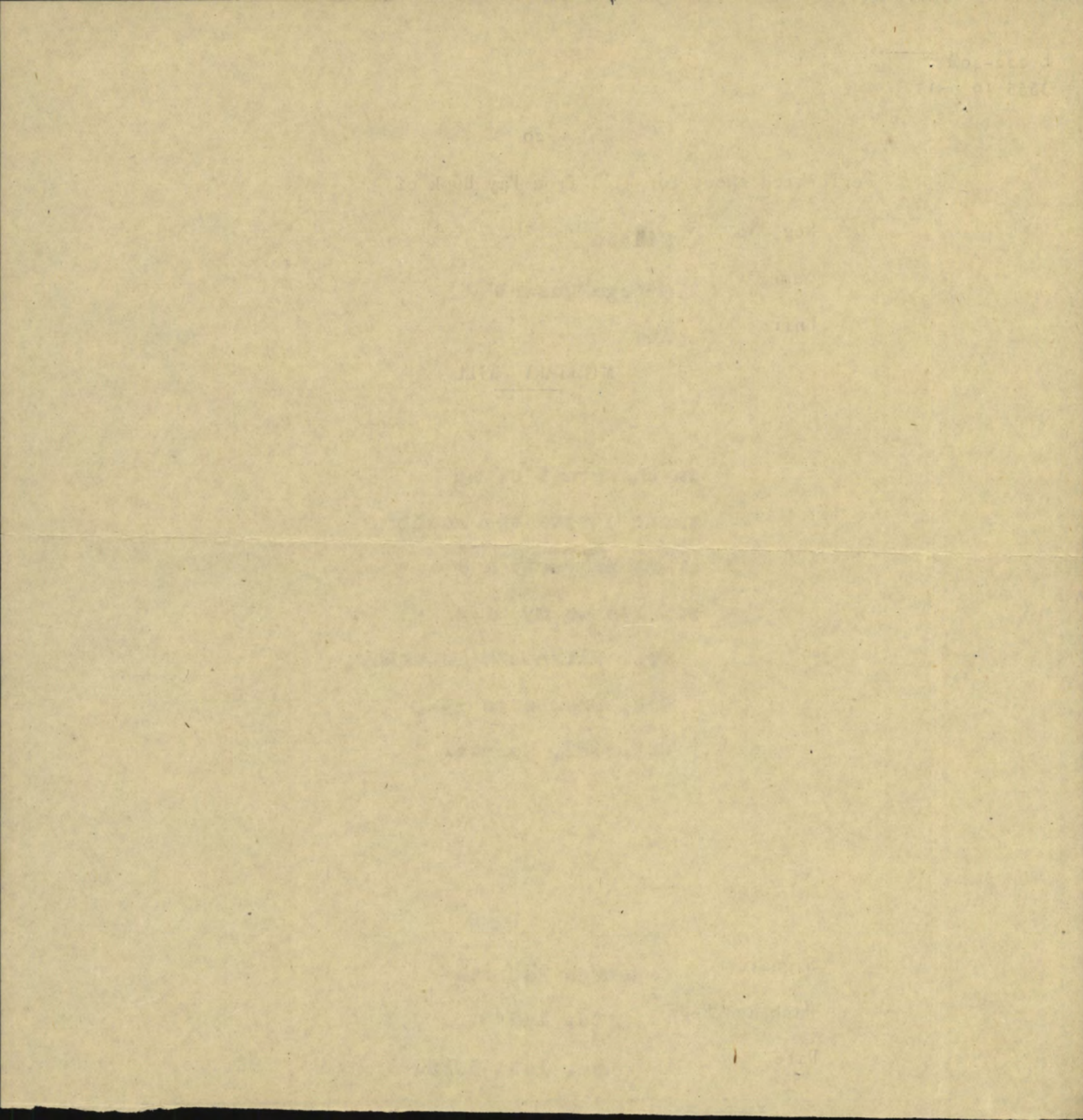
Reg. No.        841464  
Name            George McCarthy  
Unit            148

MILITARY WILL

In the event of my  
death I give the whole  
of my property and  
effects to my wife

Mrs. Elizabeth McCarthy,  
636, Frontenac St.,  
Montreal, Canada.

Signature        George McCarthy  
Rank and Regt.   Pte. 148 Btn. C.I.  
Date              Dec. 1st. 1916.



72055

- 20 -

Perforated sheet for Will from Pay Book of Reg.

No. 841464

Name

George McCarthy

Unit

148

Military Will.

In the event of my death I give the whole of my property and effects to my wife Mrs. Elizabeth McCarthy 635 Frontenac St. Montreal Canada.

Signature

George McCarthy

Rank and Regt.

148 Bn C.F.

Date

Dec 1<sup>st</sup> 1916.

ESTATES BRANCH

FEB 21 1920

MILITARY WILL



**Casualty Form - Active Service.**

Regiment or Corps *Edw Lab Pool*  
 Rank *Pt* Surname *McCarthy* Christian Name *George*  
 Religion ..... Age on Enlistment ..... years ..... months  
 Enlisted (a) ..... Terms of Service (a) ..... Service reckons from (a) .....  
 Date of promotion to present rank ..... Date of appointment to lance rank .....  
 Extended { ..... } Re-engaged { ..... } Qualification (b) .....  
 or Corps Trade and rate .....  
 Occupation ..... Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
			Embarked ..		
			Disembarked ..		
<i>18/4/18</i>	<i>2<sup>nd</sup> Co. B.D.</i>	<i>2<sup>nd</sup> Co. B.D.</i>		<i>18/4/18</i>	<i>NR 789</i>
<i>18-4-18</i>	<i>2<sup>nd</sup> Co. B.D.</i>	<i>arrived from 2<sup>nd</sup> Co. B.D.</i>		<i>17-4-18</i>	<i>NR 789</i>
<i>1-5-18</i>	<i>do</i>	<i>20<sup>th</sup> Co. B.D.</i>		<i>1-5-18</i>	<i>NR 1199</i>
<i>1-5-18</i>	<i>do</i>	<i>Sgt Edw Lab Pool on trans to</i>		<i>7-5-18</i>	<i>NR 16276</i>
		<i>41 Coy B.F.C.</i>			<i>Pt 1080d 878</i>
	<i>A.A.G.</i>	<i>T.O.S. of 41<sup>st</sup> Coy. B.F.C. on</i>			<i>NR 16276</i>
		<i>Transfer from. Com. Lab. Pool.</i>		<i>2/5/18</i>	<i>Pt 2 No. 32</i>
<i>31-5-18.</i>	<i>43rd Co. C.F.C</i>	<i>Admonished 26-5-18. For Absent without</i>			<i>A.F.B. 2069</i>
		<i>Leave from 10 P.M. 24-5-18. until <del>XXXXXX</del></i>			<i>Pt 2. Ord. No.</i>
		<i>10-30 P.M. 25-5-18. Forfeits 2 days</i>			<i>Field. 24-5-18. 33 d/21-6-18.</i>
		<i>pay by R.W..</i>			

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) Signaller, Shoeing Smith, & W 8635-M2-3 20001 9/17 (35611: C. P. & S., Ltd., Form B.103 E/1807. P.T.O.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A. 36, or other official documents.
Date	From whom received				
25/7/18	41 Coy. C.F.C.	sent to 5 days F.R. #2 23/7/18 for W.O.A.S. A.W.N from 10 P.M. 22/7/18 to 5.30 P.M. 23/7/18 (19 1/2 hours) forfeits 2 days pay by R.W.			B. 2069 P2/41 dated
2/11/18	do	Granted 14 days leave to U.K.		31/10/18	B213 W 2 no 624 1918
23/11/18	do	Rejoined from leave		14/11/18	B213
14-12-18	CGRD	Trans. to Eng. posted to b. Fil. Depot. Sunningdale		14/12/18	WR 5.
					Lieut. for Lt.-Col. A. A. G. Canadian Section, G. H. O. 3rd Echelon. B. E. F.
17.12.18		Off. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale for 410 France		17.12.18	Pt. 11. D.O. 300 Lt. & Adj. For O.C. Base Depot, Canadian Forestry
		Attached G.C. Signal Park for return to Canada			
		Part II Order			
		Ceases to be attached G.C. Signal Park on			
12-1-19		Embarking for Canada Part II Order No.			
		J. Sharp Longue Pointe 4-5: C. W. King			
19.2.19	SO S	Discharged Cad. 03 med. Unif			P 24/00/50



Fill in Only.—Unit, Number, Rank and Name.

M. F. W. 54. (A. F. B. 103.)

# Casualty Form—Active Service.

250M.—1-26.

H. Q. 1772-35-220.

Unit, Regiment or Corps 148TH "OVERSEAS" BATTALION, C.E.F.

Regimental No. 841464 Rank Private Name McCarthy, George.

Enlisted (a) 11/2/16 Terms of Service (a) War & 6 Mos. Service reckons from (a) 11/2/16

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }

Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) Motorman

**CERTIFIED CORRECT.**  
 19 DEC. 1916  
 CAN. RECORDS, LONDON.

Report Date	From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked Canada	Halifax	27-9-16	
		Disembarked England	Liverpool	6-10-16	
	O.C. 148 <sup>th</sup>	Proceeded Overseas for Service with 24 <sup>th</sup> Bn	WITLEY CAMP.	5/17/16	D. O. PT. II No. 257 148 <sup>th</sup> BN CANADIAN INFANTRY
7-12-16	6 B Dep	Reinforcement ex 148 <sup>th</sup> Bn	6 B Dep.	7-12-16	NR - PE II O. 89. d/- 27-12-16
8-12-16	"	left to join unit.	Field	8-12-16	NR
15-12-16	24 <sup>th</sup> Bn	Joined unit.	"	10-12-16	B 213- 265 d/- 31-12-16
11.4.17	22 Bn	(Wa) Conton Back & Shldr	22 Bn	11.4.17	#303H
18.4.17	24 <sup>th</sup> Bn	Wounded	Not dated	9.4.17	K/16/2491 300 d/- 25/4/17
12.4.17	30 CCS	Conton Back & Shldr	30 CCS d.	11.4.17	} a36. 301 d/- 28/4/17
12.4.17	"	"	112. a 21N	11.4.17	
15.4.17	6 <sup>th</sup> Bn Dep	"	6 <sup>th</sup> Bn Dep	15.4.17	#303H
15.4.17	22 Bn	"	"	15.4.17	#303H

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
18.4.17	6 Con Dep	Comba Back Stead. Md.	5 Con Dep	18.4.17	#3034
18.4.17	5 " "	" " " "	" "	18.4.17	#3034
13.5.17	CB Dep.	Class J. B.	CB Dep.	13.5.17	DF3
17.5.17	" " "	left join unit	in the field	17.5.17	NR 266.
11.5.17	5 Con Dep	Com. Back Stead. Md.	B.D. Kave	11.5.17	#3034 #458
1-6-17	24 <sup>th</sup> Pn	joined 24 <sup>th</sup> Pn.	Field	18-5-17	B213-315- d/11-6-17.
21-12-17	" "	Granted 14 days leave	U.K.	15.12.17	B213 #10116 d/31-12-17
4.1.18	" "	Rejoined ex leave	Field	30.12.17	B213
2.1.18.	H.C.F.A.	V.D.S.	H.C.F.A.	3.1.18	a36 65787
2.1.18	" "	" "	5 CFA	3.1.18	a36 66487
3.1.18	5 " "	" "	" "	3.1.18	a36 66487
4.1.18	10 " "	General's	10 C.F.A.	4.1.18	a36 - 66628.
4.1.18	10 C.F.A.	V.D.S.	18 C.C.S.	4.1.18	a36 66846
4.1.18	5 " "	" "	10 C.F.A.	4.1.18	a36 66846
4.1.18	18 C.C.S.	" "	18 C.C.S.	4.1.18	a36 66846
8.1.18	51 Con	" "	51 Con.	8.1.18	#3034 66954
5.1.18	18 C.C.S.	" "	28 a 211	6.1.18	a36 64051
11.2.18	51 Con	Receiving treatment.	51 Con	11.2.18	#11474
13.3.18	26 ABD	Class A	26 ABD	13.3.18	NR 261
12.3.18	51 Con.	Foreign Ga 950/1st diem from 8/1/18 to 12/2/18 (64 days) 9D	51 Con	12.3.18	01643-2151-920.27 d/18/3/18
12.3.18	" "	9 D. M. A.	20 Dady	12.3.18	#3034 D4711
27.3.18	26 ABD.	Class A. Board Daily	26 ABD.	27.3.18	NR 277
2.4.18	" "	" "	" "	2.4.18	NR 278
17.4.18	65 BD.	Class. B2X. 2 off. 21st (64 days) Pn on trans from Italian Pool	65 BD	16.4.18	NR 789 920.38 d/20/4/18
Do	Do	20. 2 Lab Pool	Field	17.4.18	#10.52 d. 22 1/2
16-4-18	2nd EIBD	Classified B2X	" "	16-4-18	W 3339 1.55

LTR Rank Name **McCARTHY, George** Reg'l No. **841464**

Unit **148th, Bn.** If in perm. Corps, }  
What Unit? } Married or Single **Married.**

Place and Date of Enlistment **Montreal, February, 11th, 1916.** Place of Birth **Pembroke, Ont.**

Name and Address, Next-of-Kin **Elizabeth Roma McCarthy.**  
**635 Frontenac St., Montreal.** Relationship **Wife.**

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

Discharge, Date and Place Reason Character

N/E. H. B. No. **4,769**  
 Filing Category **CAN. CR**

H. W. & V., Ltd.—7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
	<b>C</b> <b>ARRIVED</b>	<b>IN ENGLAND S S</b>	<b>LACONIA</b>	<b>6 10 16</b>	
5.12.16	148th Bn.	Trans. to 24th Bn. O.S.	Witley	5.12.16	Part II R.O. 25/
27.12.16	24th Bn.	T.O.S. from above.	Field	7.12.16	" " 89
10-4-17	✓	Adm 22 General Hosp	Camiers	11-4-17	C 27 498 Contusion etc.
25-4-17	✓	To 6 bandaged dept	Staples	15-4-17	C 27 450 3 Contusion
25-7-17	✓	To Duty	Field	18-5-17	—572 —
20-4-18	✓	SOS to Lab Pool	"	17-4-18	D.O. 38
22-4-18	B.S.P.	7 P.S. ex. 24th Bn	---	17-4-18	—52
8-6-18	---	SOS to 41st B.F.C.	---	1-5-18	—80 (R 20 32 of 12-6-18 at Coy C.F.C. 70 S)
17.12.18	B.C.F.C.	T.O.S. from 41 Co. C.F.C. 1 Dale	"	15/12/18	" 300 (41 Co. C.F.C. Part II 674/24 1/18)

A.F.B. 103 CHECKED  
13 DEC 1916

*mx 11-1-21*

*CAC*

*100*

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
31. 12. 18	BDCFC	On Comate Rhye	St Saau	30. 12. 18	- 310
		SOS to CEF CAN. MD-4 pti			
		12. I 19			
		BDCFC, Pt 11023 d23.1 19			





ASSIGNED PAY. ENGLAND or CANADA. SEPARATION ALLOWANCE. ENGLAND or CANADA. NAME: **McCARTHY, George**  
 EFFECTIVE DATE: **1/10/16** EFFECTIVE DATE: **261** NUMBER: **841464**  
 AMOUNT: **20<sup>00</sup>** AMOUNT: **-**

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE. }  
**Mrs Elizabeth McCarthy (Wife)**  
**635 Frontenac St.**  
**Montreal, P. Que. Can.**  
**104 64 Frontenac St**  
**A.M. 2/6/18** **Eff. 1.8.18.**

PARTICULARS OF RANK OR APPOINTMENT  
 AUTHORITY DATE EFFECTIVE RANK OR APPOINTMENT  
**Pte.**  
 UNIT AND TRANSFERS  
 ORIGINAL UNIT: **148<sup>th</sup> Batt<sup>n</sup>**  
 DATE ACCOUNT FIRST OPENED: **1/10/16**  
 AUTHORITY DATE EFFECTIVE DATE LEDGER SHEET T'S F'D UNIT TRANSFERRED TO  
**30.52 22/4/18 1/5/18 21/5/18 24<sup>th</sup> Batt<sup>n</sup>**  
**32. 28.18 1.7.18 23/7/18 41<sup>st</sup> C. C. F. C.**

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK }

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
9/12/18	6205		4 65	4/11/19			
24/12/18	5651	B.D. C.F.C. £2	9 73	9/11/19			
			14 37				

DAILY RATES OF PAY AND ALLOWANCES  
 AUTHORITY PAY F.A. P.F.A. SUBS'CE ALL'CE  
 / 10

PARTICULARS OF RENDERING NON-EFFECTIVE: **Disch to Canada 3/12/18. Authy. CTC NR 500. 24/12/18**

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
1918									3 83		
Mar. 31	Bal. Fwd.								9 17		
Apr.	PP	33		Can ad. Apl.				20	4 71		
				AR 2 209AD 6/4/18	4 46				25		
				AR 185 do 21/4/18	4 46				20 00		
					8 92						
		33 00									
May	7 Pay	34 10		Can ad. Pay				10	14 35		
				AR 1929 11/5/18 C.F.C.	4 46				9 89		
				AR 368 11/5/18 #1 C.F.C.	2 68				7 21		
				" 710 22/7/18 C.F.C.	4 46				2 75		
		34 10			11 60			10			
JUN 1918	7 Pay	33		Can ad.				20	15 75		
				AR 898 7/6/18 C.F.C. Home	3 57				17 18		
				Forfeit 2 dep pay R5 No 33 21/18			10		9 98		
				AR 1009 #1 Dis C.F.C. 22/7/18	3 57				6 41 mil		
		33			7 14			10			
July	Ptes Pay	34 10		Can ad.				20			
				AR 1206 6/7/18 #1 C.F.C.	3 57				13 37 mil		
				" 1426 22/7/18	3 57						
		34 10			7 14			20			
Aug.	Ptes Pay	34 10		Can ad.				20			
				5 dep pay 2-23-7-18 for 15.0.0. S. adv. from 10 P.M. 22/7/18 until 5-30 P.M. 23/7/18 (19 5 hrs)			6 60				
				Forfeit 2 dep pay by No. 41 5/6/18 #1 C.F.C.			2 20				
				AR 1862 22/8/18	3 57				17 30		
		34 10			3 57		6 60	20			
Sept.	do	33		Can ad.				20			
				AR 2132 6/9/18 #1 C.F.C.	3 57						
				" 2416 23/9/18 #1 Dist.	3 57				23 16		
		33			7 14			20			

\* Strike out whichever inapplicable.

*stopped 11 Jan. 1919*

*reopened 30.9.18. P.850.*

P.T.O.

NUMBER 941464 RANK *Plt* NAME *McCarthy G.*

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
	<i>Blce Invd</i>								23 16	<i>hil.</i>	
<i>Oct.</i>	<i>P.P</i>	<i>34 10</i>		<i>ban AP</i>				20			
				<i>AR 2654, 7<sup>10</sup>/<sub>18</sub> #, Dist</i>	3 73						
				<i>" 2865, 23<sup>10</sup>/<sub>18</sub> ✓</i>	3 73						
				<i>" 2966, 28<sup>10</sup>/<sub>18</sub> ✓</i>	3 73						
				<i>" 6790, 28<sup>10</sup>/<sub>18</sub> ✓</i>	29 20						
				<i>CP 58526, 4<sup>10</sup>/<sub>18</sub> London</i>	14 60				<i>17 73</i>		
		<i>34 10</i>			<i>54 99</i>			20			
<i>Nov.</i>	<i>P. Pay</i>	<i>33</i>		<i>ban AP</i>				20			
				<i>CP 62991, 13<sup>10</sup>/<sub>18</sub> London</i>	2 43						
				<i>AR 3255, 29/11/18 1 DIS</i>	6 53						
				<i>ban AP</i>							
				<i>AR 6045 9/12/18 C.T.C</i>	4 66						
				<i>" 5651 24/12/18 B.C.T.C</i>	9 73						
<i>Dec</i>	<i>P. Pay</i>	<i>34 10</i>							<i>13 98</i>		
		<i>67 10</i>			<i>23 35</i>			<i>40 80</i>			
				<i>AR 1488, 9/11/19 Kimmel</i>	2 43				<i>16 41</i>		
				<i>F.P.C. Endorsed.</i>	2 43						
<i>Feb</i>											

*\* Bal 13.98*

A.S.M. FORM 1  
 DISCHARGED  
*Canada 3/14/18*  
*27.12.18*  
*NY - Bal. 13.98 27.12.18*  
*C.T.C. NR 500 24/12/18*  
*Chas F Gale*  
*Attest: Williams*

*601 Bal Dr. 16<sup>41</sup> AR 1488, 9/11/19, 2<sup>43</sup>*





WAR SERVICE BADGE  
 Class "A" No. 93684 ISSUED

WAR SERVICE BADGE  
 No. 25733 ISSUED

This space to be for numbers.

M-5232

**Proceedings on Discharge.**

57

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

No.	841464
Rank	Pte.
Surname	MC CARTHY,
Christian name	George.
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	148th Bn.
Date of discharge	Feb. 19, 1919.
Place of discharge	Montreal, Que.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age.....40.....years.....months.	Descriptive marks  Small scar on left shoulder.
Height.....5.....feet.....9½.....inches.	
Complexion Fair	
Eyes Blue	
Hair Brown	
Trade Motorman.	
Intended place of residence } 646a Frontiace St. (To be given as fully as practicable.) } Montreal, Que.	

2. The above-named man is discharged in consequence of

Medically unfit Category C3. R.O.1420 Para A.

Authority for discharge.....

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

3. Conduct and character while in the service have been, according to the records, etc.

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

M. F. B. 218.  
 200M.—5-18.  
 H. Q. 1772-39-113.

Medical Documents  
 forwarded to  
 S. C. R. or B. P. C.  
 on  
 19/3/19

MCD 20220

(OVER)

5. He is in possession of the following number of G. C. Badges:

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company, (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date).....

Commanding.....

**8. Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and that I have received my permanent discharge certificate.

(Place)..... Montreal, Que. Geo McLeathy (Signature of Soldier.)

(Date)..... Feb. 19, 1919. J. W. Boyle (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

**9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

..... (Signature of Soldier.)

**10. Statement of Service.**

Service toward Engagement to..... (the date to which the Record of Service is completed)..... years..... days.

Total..... years..... days.

**11. Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place)..... Montreal, Que......

(Signature)..... [Signature]..... Lieutenant.....

Officer i/c Discharge Section, District Depot No. 4.

(Date)..... Feb. 19, 1919......

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

List of Discharge Documents  
**NO RESERVATIONS**

*Geo M'Carthy*

Reg. Certificate	W. 178
Statement of Service	W. 178
Statement of Character	W. 178
Statement of Conduct	W. 178
Statement of Health	W. 178
Statement of Education	W. 178
Statement of Family	W. 178
Statement of Religion	W. 178
Statement of Political Opinions	W. 178
Statement of Moral Character	W. 178
Statement of Social History	W. 178
Statement of Physical History	W. 178
Statement of Mental History	W. 178
Statement of Medical History	W. 178
Statement of Surgical History	W. 178
Statement of Pathological History	W. 178
Statement of Prognosis	W. 178
Statement of Treatment	W. 178
Statement of Results	W. 178
Statement of Discharge	W. 178

I hereby certify that the following documents are in possession of the soldier named above and that he is entitled to receive them.

\_\_\_\_\_  
Adjutant General

\_\_\_\_\_  
The Adjutant General

## List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263</p> <p>Squadron }          Battery } Conduct Sheet, " B. 263a          Company }          or          Field Conduct Sheet " W. 178</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia form B. 313</p> <p>Casualty Form " W. 54</p> <p>Medical Report for Invalid§ " B. 227</p> <p>Dental History Sheet " B. 465</p> <p>Last Pay Certificate " W. 44</p> <p>Duplicate Discharge Certificate " W. 39A</p> <p>‡Form of Will " W. 82</p> <p>§Only if discharged "Medically unfit."</p> <p>‡Only if man has not been overseas.</p>	<p>Attestation Paper Militia Form W. 23          or          Particulars of Recruit " W. 133</p> <p>Proceedings on Discharge " B. 218</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="padding-left: 40px;">(a) Proceedings on Discharge</p> <p style="padding-left: 40px;">(b) Attestation.</p> <p style="padding-left: 40px;">(c) Medical History Sheet.</p>
--	--

Documents not accompanying this form should be crossed out.

*I hereby certify that the following documents are unobtainable.*

*Officer Commanding.*

*N.B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.*

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

M. OR S. REGT. No. 841464 RANK *Pfc* NAME (IN FULL) *McCarthy, Geo.*

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?
ADDRESS		<i>T.O.S.</i>	<i>12/1/19 20.30/1</i>		<i>148th Bn.</i>	
IS SEPARATION ALLOWANCE PAID? <i>yes</i>	DATE EFFECTIVE				PLACE OF ATTESTATION	TRANSFERRED TO
TO WHOM PAID	RELATIONSHIP				<i>Montreal</i>	<i>X</i>
ADDRESS		<i>T.O.S. \$ CLR 8.5.19</i>		<i>10.12.19</i>	DATE OF ATTESTATION	TRANSFERRED TO
<i>same address</i>		<i>\$ 0 \$ " 5.12.19</i>		<i>" " "</i>	<i>11-2-16</i>	
		<i>Y.O.L. B.R. 6.1.20</i>		<i>9.1.20</i>	ASSIGNED PAY, \$	DATE EFFECTIVE
					<i>20.00</i>	<i>1-2-19</i>
					PAYABLE TO	RELATIONSHIP
					<i>Mrs. E. McCarthy</i>	
					ADDRESS	ANY CHANGE IN ASSIGNEE OR ADDRESS
					<i>646 Frontenac St Montreal</i>	
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE
					DISCHARGED	REASON
					<i>Montreal 19-2-19</i>	<i>A.D. 4-19-20</i>

*Feb*

*SO 52-225*

MONTH	PAY AND F.A.			OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT			COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3					DEBIT	CREDIT	
Balance from previous account																		<i>SO 52/2a</i>
JAN.					<i>720</i>													<i>J. W/S. 23/19-8/2/19 P.O. 30.</i>
31-1918	<i>Jan Feb</i>	<i>50 10/10</i>	<i>55</i>	<i>720 R 640 35</i>	<i>55 51 60</i>													<i>D. 1061</i>
					<i>193 60</i>				<i>84 32</i>									<i>Jul. ap. clu. all.</i>
	<i>S.A.</i>			<i>19</i>	<i>19</i>				<i>30</i>									<i>W 5 H</i>
				<i>OTHER CREDITS</i>	<i>222 60</i>				<i>WAR SERVICE GRATUITY</i>				<i>OTHER DEBITS</i>	<i>U.S.G. S.A.</i>	<i>222 60</i>	<i>30</i>		<i>SOLDIER DEP'T.</i>
<i>19-2-19</i>				<i>420 00</i>	<i>580 00</i>								<i>40 00</i>	<i>30 00</i>	<i>100 00</i>	<i>350 00</i>	<i>750 00</i>	
<i>19-3-19</i>													<i>40 00</i>	<i>30 00</i>	<i>200 00</i>	<i>280 00</i>	<i>120 00</i>	<i>225520</i>
<i>19-4-19</i>													<i>70 00</i>	<i>30 00</i>	<i>100 00</i>	<i>210 00</i>	<i>90 00</i>	<i>233305</i>
<i>19-5-19</i>													<i>70 00</i>	<i>30 00</i>	<i>100 00</i>	<i>140 00</i>	<i>60 00</i>	<i>305354</i>
<i>19-6-19</i>													<i>70 00</i>	<i>30 00</i>	<i>100 00</i>	<i>70 00</i>	<i>30 00</i>	<i>310353</i>
<i>19-7-19</i>													<i>70 00</i>	<i>30 00</i>	<i>100 00</i>			<i>1071526</i>

*Original*



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

1-3-16

# Separation and Assigned Pay Branch

Oct. 1/1916

OVERSEAS CONTINGENTS

**m** 1085

RATE OF SEPARATION ALLOWANCE

<del>20</del>	\$ 25.00	30-2753
	1-12-17	1-9-18
	P.C.32500	33330.

RATE OF ASSIGNMENT

30			
----	--	--	--

826102  
as

PARTICULARS OF SEPARATION ALLOWANCE

No. 841464  
 Rank Pte. Promoted Reverted Discharge  
 Soldier's Name Geo. McCarthy  
 Battalion 148 Bath. H. G.  
 Beneficiary Eliz McCarthy  
 Relationship wife  
 Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Eliz. McCarthy (Wife)  
 Address 648 Frontenac St. Montreal  
 Change of Address P.Q.  
 1 646<sup>2</sup> Frontenac St., Montreal, Que  
 2  
 3  
 4

22-16-18  
m 7 w 2554

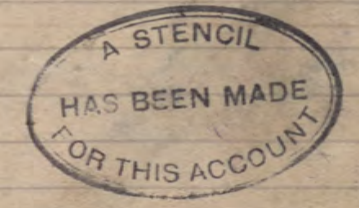
Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					
Dec. 31		440 00	300 00	740 00	
Jan	T 60656	30	20	50	See also account in Spec Rem. Ledger.
Feb	T 72621	25	20	45	
March	L 91791	25	20	45	
April	D 4519	25	20	45	
May	N 14181	25	20	45	
June	A 26578	25	20	45	
July	N 32053	25	20	45	
Aug	L 36105	25	20	45	
Sept	M 49485	25	20	45	
Oct	S 53711	25	20	45	
Nov	M 59053	25	20	45	
Dec	L 65700	45	20	65	
1919	Jan	S 70217	30	50	
		795	560	1355	

12144-9-2

M. F. W. 128  
400M-6-17-1772-89-141  
L. L. 2330-M. & D. 7588.

MPD  
33388

.....A/c Closed 31-1-19  
 .....Re'd by [Signature]  
 .....Date 29-1-19  
 .....Clerk [Signature] No 4



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date

Cheque No.

Amount S/A

Amount A/P

Total

REMARKS

M. F. W. 128  
 40036-6-17-1772-39-141  
 L. L. 23320-M. & D. 7593.



ORIGINAL  
ORIGINAL

## MEDICAL HISTORY SHEET.

Surname McCarthy Christian Name George

Examined { on II day of February 1916  
at Montreal P Q

Approved by Arthur Condeck  
Rank Lt. amp. M.O.

Birthplace { City or Town Pembroke  
County Ont.

Apparent age 36yrs.

Trade or occupation Motorman

Height 5 Feet 9 1/2 Inches.

Weight 171 Lbs.

Chest measurement { Minimum 37 inches.  
Maximum expansion 40 inches.

Physical development

Small-Pox Marks

Vaccination Marks { Arm Right Left  
Number Childhood

When Vaccinated last Childhood  
(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection  
Montreal Corps FEB 26 1916  
Slight botanical Res MAR 3 1916  
MAR 11 1916

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.

Date.	Result.	VACCINATIONS.
<u>9/16</u>	<u>Good</u>	<u>Hay Wines. Capt.</u>

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>FEB 26 1916</u>	<u>Good</u>	<u>500 million Hay Wines</u>
<u>MAR 3 1916</u>	<u>Good</u>	<u>1000 Hay Wines</u>
<u>MAR 11 1916</u>	<u>Good</u>	<u>1000 Hay Wines</u>

Enlisted on II day of February 1916 at Montreal P Q

CORPS.	REG'TL NUMBER.	HABITS.	DATE.
	<u>8211464</u>		

Joined on enlistment 1st "OVERSEAS" BATTALION, C.E.F.  
Transferred to 24th Bn.

### EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Etaples</u>	<u>12/12/18</u>	<u>Tachycardia</u>	<u>Discharge</u> <u>Dr. Condeck</u> <u>Capt.</u>
<u>Montreal</u>	<u>15. 2. 19.</u>	<u>D.S.H.</u>	<u>6 1/2</u> <u>R. G. Condeck</u> <u>Capt.</u>

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

Surname *W. C. M. George* Christian Name *George*

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
G.H. Camiers		11	4	17	15	4	17	Cont. Shldr.			
Conv. Depot	Etaples	15	4	17	18	5	17	"	R.F.B. To Duty	A498 ID. A502/A572 ID.	

G.H. Camiers  
 Conv. Depot  
 Etaples  
 15 4 17  
 18 5 17

A498 ID.  
 R.F.B. To Duty  
 A502/A572 ID.

Reserved for M.H.C.

Regt. No. *84464* Rank *Pvt.* Surname *McCarthy* Christian Name *George*  
 Unit or Corps—(a) Overseas from United Kingdom *41st Co B Co.* (b) in United Kingdom *1st Bn*  
 Born at—Town *Pewaukee* County or Province *Ontario* Country *Canada*  
 Date of Birth—Day *11* Month *February* Year *1879* Age *39* yrs. *10* months.  
 Joined at *Montreal* Date *Sept 11 1916*  
 Former trade or occupation *Motorman*

Permanent Marks or any peculiarity that will serve for future identification—*Scar on forehead of nose, Scar on left knee,*

Height—feet *5* inches *9* Colour of eyes *Blue*  
 Signature of Soldier (for identification purposes) *Geo McCarthy*

### Medical Report

Read carefully the instructions on last page of this form.

#### 1. DISABILITY.

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (a)

*Ischaemia*

Disabilities Group (b)

Disabilities Group (c)

#### 2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(i.) As to Group (a) above.	<i>Ischaemia</i>	<i>France</i>	<i>Nov. 1917</i>
(ii.) As to Group (b) above.	—		
(iii.) As to Group (c) above.	—		

#### 3. Is the disability due to disease contracted or injuries received prior to Active Service?

- (i.) As to Group (a) above? *No.* If yes, has Active Service aggravated it? —  
 (ii.) As to Group (b) above? If yes, has Active Service aggravated it?  
 (iii.) As to Group (c) above? If yes, has Active Service aggravated it?

#### 4. Is the disability due to disease contracted or injuries received while on Active Service?

- (i.) As to Group (a) above? *Yes.*  
 (ii.) As to Group (b) above?  
 (iii.) As to Group (c) above?

5. MEDICAL HISTORY. Condition started in France. He would get very excited under shell fire, heart would palpitate. He would often have to drop out on short marches. States he was boarded in England Apr 16/1918. No records of it obtainable, other than pay book. Marked category B2 X 16-4-18.  
 M. H. S. Record. Genl. S. H. Lt., 11-4-17.  
 Hosp 4 days, Conv. Depot one month.

6. PRESENT CONDITION. Chestwell signs. Pulse rate sitting 100 after slight exertion 140 per minute. No murmur of heart. Irregularity. S. increased of hardness. Dullness to the left, apex heart most markedly felt in supple line. He is dially looking for loss of weight.  
 Ure. Analysis: - Normal,  
 Urinary system. }  
 Hardness " } Normal,  
 Gastrointestinal " }  
 Nervous " }  
 Pulmonary " }

7. OPERATION. (i.) Was one performed? Not applicable.  
 (iii.) Was one advised and declined? -

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto, unless there is evidence to the contrary.

8. (i.) Is there loss or decay of teeth attributable to Active Service? No  
 (ii.) If so, describe. -

9. DO YOU RECOMMEND:—  
 (a) Fit for duty? (state category) eps, B11  
 (b) Invalid to Canada? No.  
 (c) Discharge from the Service as permanently unfit? No.

Date of Report.....191...  
 Station.....  
 Signed... [Signature] Capt. [Signature]  
 Officer in medical charge of case.

I have satisfied myself of the general accuracy of the above Report, and concur therein \*except  
 not in hosp. (Officer i/c Hospital) Strike out one (S.M.O. Brigade) of these  
 Dated at ..... Station, on..... 191...  
 \*Delete if inapplicable.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

10. Is the disability fully described in Part I. (1)?  
If not, describe it.

Yes.

11. Is the cause of the disability fully described in Part I. (2)?  
If not, describe it.

no -  
Strain of general service in action.

12. From the medical information now adduced, was the disability caused or aggravated by:—

(a) Negligence of the Soldier

Caused? no  
Aggravated? no

(b) Misconduct of the Soldier

Caused? No.  
Aggravated? No.

13. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?  
(Estimate at none, 5%, 10%, 15%, 20%, etc.)

20%

14. THE DISABILITY DUE TO SERVICE.—(See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.)  
What part of the entire disability estimated next above (13) is due to causes arising during Active Service?  
(Estimate at none, 1/10, 2/10, 3/10, etc., or all.)

all

15. Permanency of the Disability due to Service estimated next above in (14).

(i.) Is it permanent?

yes

(ii.) If not permanent, what is its probable minimum duration (in months)?

not app.

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable?

not app

17. Can the former trade or occupation be resumed?

yes.

18. REMARKS:—

There is definite hypertrophy - There may be improvement in civil life under proper surroundings.

under 7B179

AG 9083 11/11/18

19. RECOMMENDATION:—

(a) Fit for duty? (state category)

no

(b) Invalid to Canada?

no

(c) Discharge from Service as permanently unfit?

yes

Date of Board

12/12/18

Signatures of the Board

J. H. Anderson Major Comd.  
S. L. Walker Capt. President.

Station

Can. Base Staples

Approved

J. R. Brown A.D.M.S. Station

Dated at

Can Base Staples



McCarthy G.

THE FOLLOWING IS SPECIALIST'S REPORT DATED FEB/10-1919

EYES

R.V.  $\frac{20}{30}$

L.V.  $\frac{20}{50}$

Hyperopia 1/00  $\frac{20}{30}$

1/50  $\frac{20}{30}$

Fundâ normal

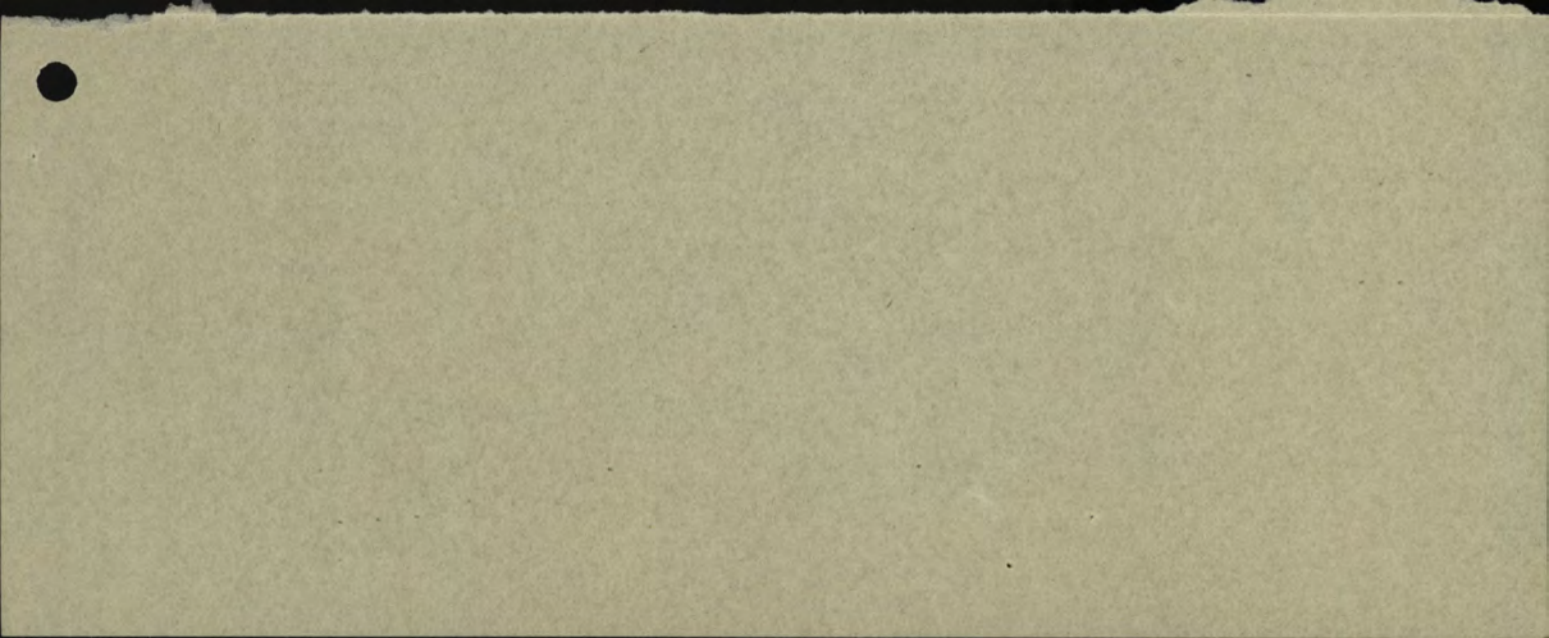
1/00 for reading.

No disability Fit A.2.

G. Bramley-Moore.

Oculist S.M.B.

M.D.#4.





REQUEST FOR EXAMINATION

Montreal 8/2/19.

No. 841464

Clinical Diagnosis

Rank. Pte.

Defective Vision.

Name McCarthy G.

Unit D.D.4.

Kindly carry out examination on marginally noted with special reference to -

EYES.

Reasons for examination

Final Board proceedings.

Short Medical History

Attached.

Signature M.O. (Requesting) Wesley Bourne Capt.

Report

nr 20/30

lv 20/50

Hyperopia +1.00 20/20

+1.50 = 20/30

Fundi Normal

0/ +1.00 in reading

No disability Lt H 2

Signature of Medical Officer (Reporting)

J. Bramley - Montreal  
Capt. R.S.M.B.M.O. #4

This man is not to be admitted to hospital for this report to be made out, but is to be returned to his unit on completion of examination.

This form, on completion is to be forwarded direct to M.O. requesting same.

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
WASHINGTON, D. C.

Office Memorandum

Faded typed text, likely the main body of the memorandum, mostly illegible due to fading.

Amount: \$1.00

1/20/30

1.20 - 2/30

1/20/30

1/20/30

1/20/30

+ 1.00 for ...

No disbursements

Approved: [Signature]  
Special Agent in Charge

Faded text at the bottom of the page, possibly a footer or additional notes.

THIS FORM WILL BE USED FOR ALL RANKS  
**MEDICAL HISTORY OF AN INVALID**

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION.....Montreal..... DATE.....Feb. 15th, 1919

1. 1 (a) Unit.....D.D. No. 1..... (b) Regimental No.....641454..... (c) Rank.....Pte  
 (d) Surname.....McCarthy..... (e) Christian name.....George  
 (f) Home address.....646 St. Frontenac St., Montreal, P.Q.  
 (g) Next of Kin.....Elizabeth McCarthy..... (h) Relationship.....wife  
 (i) Address of Next of Kin.....same as above.

2. Age last birthday.....39..... Date of birth.....Feb. 19, 1880.

3. Enlistment, or Appointment (if an Officer) (a) Place.....Montreal..... (b) Date.....Feb. 11-16

4. Personal description:

(a) Height.....5 ft. 10"..... (b) Weight.....175..... (c) Complexion.....Median  
(stripped)

(d) Colour of hair.....Grey Black..... (e) Colour of eyes.....Blue..... (f) Identification marks, Scars, etc.....

Small scar on left shoulder.

5. Former trade or occupation.....Motor man, Street Railway.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3	

	PERIODS	
	From	To
Canada..... <u>148th Battrn.</u>	<u>Feb. 11-16</u>	<u>Sept. 1916</u>
England..... <u>" " 24</u>	<u>Sept 1916</u>	<u>Dec. 5-16</u>
France or other theatres of War..... <u>24th Battrn.</u>	<u>Dec. 1918</u>	<u>Jan. 14-19</u>
	<u>Dec 5-1916</u>	<u>Dec. 14-1918.</u>

7. Original disease, or injury.....(1) Debility, D.A.H.

(a) Date of origin.....(1) & (2) Nov. 1917..... (b) Place of origin.....1, & 2, France.

(c) Cause.....1, & 2, Service conditions

McCarthy G.

THE FOLLOWING IS SPECIALIST'S REPORT DATED FEB/10-1919  
EYES

R.V.  $\frac{20}{30}$

L.V.  $\frac{20}{50}$

Hyperopia - 1.00  $\frac{20}{20}$

Fundi normal

- 1.50  $\frac{20}{30}$

1.00 for reading.

No disability Fit A.2.

A. Bramley-Moore  
Oculist S.M.B.

M.D. #4.

nervous and shaky on least excitement, breaking into free perspiration  
Examination of chest: Lungs negative. Respiration 22 sitting, 28 on  
running up short flight of stairs. Heart apex beat in 5th interspace.  
No enlargement no murmure. Pulse 122 at rest. P.P. touching toes  
ten times, 145, returning in three minutes to 130. B.P. 90 to 135.  
Man is nervous and on coming into Board Room for examination trembled  
and there was marked tremour of fingers on extending arms. This  
disappeared on sitting for a while, due probably to his Tachycardia  
his pulse being 145. Specialist's report on Eyes signed A.B. Moore,  
Feb. 10th 1919 :- R.E. 20/30. L.E. 20/50. Hyperopia with a minus 1.00  
20/20. Left eye minus 1.50 20/30. Minus 1.00 for reading No dis-

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above?  
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System No Cardio-Vascular System no Genito-Urinary System no  
(If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.)  
Special Senses see below Respiratory System no Integumentary System no  
Disturbances of Mentality no Digestive System no Muscular System no  
Osseous and Joint Systems no Any other general condition no  
ability Fit A.2. "Fundi normal".

Neurological Examination :- The marginally named is diagnosed as  
debility and D.A.H. on M.F.B. 227. The disability is not, in my  
opinion, of a functional neurological type, recommend full pension  
according to description of disability. Signed) H.B. Wright, Major.

10. (a) History (of the condition referred to in Section 9 (a).)

Man saw 25 months active service in France, being 15 months with 24th  
during which he was constantly up in front lines. Was transferred to  
Forestry Battn on account of not being able to carry on. Left For-  
estry Battn, Dec. 1-1918 for evacuation to England.

8. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Marked debility with general weakness. Dyspnoea and con-  
Tachycardia.

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Man of large frame fair nourishment and musculature. Anxious expression, looks fully five years older than stated age. (Complains of dyspnoea on least exertion and is conscious of beating of his heart. Feels nervous and shaky on least excitement, breaking into free perspiration

Examination of chest:—Lungs negative. Respiration 22 sitting, 28 on running up short flight of stairs. Heart apex beat in 5th interspace.

No enlargement no murmurs. Pulse 128 at rest. P.T. touching toes ten times, 145, returning in three minutes to 130. B.P. 90 to 135.

Man is nervous and on coming into Board Room for examination trembled and there was marked tremour of fingers on extending arms. This disappeared on sitting for a while, due probably to his Tachycardia

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Feb. 10th 1919 :- R.E. 20/30. L.E. 20/50. Hyperopia<sup>RT</sup> with a minus 1.00

20/20. Left eye minus 1.50 20/30. Minus 1.00 for reading No dis-

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above?  
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System no Cardio-Vascular System no Genito-Urinary System no  
(If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.)

Special Senses see below Respiratory System no Integumentary System no

Disturbances of Mentality no Digestive System no Muscular System no

Osseous and Joint Systems no Any other general condition no

ability Fit A.2. "Fundi normal".

Neurological Examination :- The marginally named is diagnosed as debility and D.A.H. on M.F.B. 227. The disability is, not, in my opinion, of a functional neurological type, recommend full pension according to description of disability. Signed) H.B. Wright, Major.

10. (a) History (of the condition referred to in Section 9 (a).)

Man saw 25 months active service in France, being 15 months with 24th during which he was constantly up in front lines. Was transferred to Forestry Batta on account of not being able to carry on. Left Forestry Batta, Dec. 1-1918 for evacuation to England.

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

Contusion left shoulder 9-4-17. G.S.W. No disability.

(c) (Here give a description of wounds, scars and deformities.

Nil.

11.—(a) Did the disabling condition have its origin before enlistment No.

(b) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

N.A.

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? No

The regimental documents will be referred to. (If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Six months.

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

Has not had any.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? No. (If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed? Not at present. Tachycardia. (If not, briefly state why)

17. Recommendations.

C.S.

*W. J. Andrews Capt*  
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned... *pte.* ... have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of... *nothing.*

*Geo McCarthy* Rank.  
Signature of invalid examined.

*R.O.*

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

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.....  
.....  
.....  
.....

19. Is the invalid fit for

- (a) ~~General service,~~ (Category A) (~~Yes or No.~~)
- (b) ~~Service abroad, not general service,~~ ( " B) (~~Yes or No.~~)
- (c) ~~Home service (Canada only),~~ ( " C) (~~Yes or No.~~)
- (d) ~~Temporarily unfit.~~ ( " D) (~~Yes or No.~~)
- (e) ~~Unfit for service in Categories A, B and C~~ ( " E) (~~Yes or No.~~)

C.S.

20. It is certified that the invalid

(a) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)

- (b) Does not require treatment.
- (c) ~~Should pass under his own control.~~
- (d) Should not pass under his own control.  
(Strike out condition not applicable.)

21. It is recommended that the invalid be discharged. (When not for discharge add special recommendation.)

Category: C.S.

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

PLACE..... Montreal.....

DATE..... Feb. 15th. 1919.....

.....  
*R. G. ...* President.  
*H. E. ... capt*  
 } Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....  
 Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

..... President.  
 PLACE.....  
 DATE.....  
 } Members

APPROVED BY ..... APPROVED BY .....  
 for *R. S. ... Lt-Col.* .....  
 Assistant Director of Medical Services. Director-General of Medical Services.  
 DATE..... Feb. 15th. 1919..... DATE.....