

TATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? *Percy Plato*
 2. In what Town, Township or Parish, and in what Country were you born? *Sherbrooke Que*
 3. What is the name of your next-of-kin? *William Plato*
 4. What is the address of your next-of-kin? *Geneva St St-Catharines*
 5. What is the date of your birth? *Dec 17th 1896*
 6. What is your Trade or Calling? *Electrician*
 7. Are you married? *No*
 8. Are you willing to be vaccinated or re-vaccinated? *Yes*
 9. Do you now belong to the Active Militia? *Yes 7th C.F.A.*
 10. Have you ever served in any Military Force?..
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*
- Percy Plato* (Signature of Man).
Percy W. Peel (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Percy Plato*, do solemnly declare that the above answers made by me to the above questions 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.

Date *16th January 1914* *Percy Plato* (Signature of Recruit)
Percy W. Peel (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Percy Plato*, 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.

Date *16th January 1914* *Percy Plato* (Signature of Recruit)
Percy W. Peel (Signature of Witness)

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 *Toronto* this *16th* day of *January* 1914.

[Signature] (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

J. Percy H. Cathin, Lieut. (Approving Officer)

4 Bde C.F.A.

Description of

Percy Platts

Enlistment.

Apparent Age.....*19* years.....*1* 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. *8* ins.

Chest measurement { Girth when fully expanded.....*36½* ins.
Range of expansion.....*2½* ins.

Complexion.....*Dark*

Eyes.....*Black*

Hair.....*Black*

- Religious denominations. { Church of England.....
- Presbyterian.....
- Wesleyan..... *X*
- Baptist or Congregationalist.....
- Other Protestants.....
(Denomination to be stated.)
- Roman Catholic.....
- Jewish.....

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*.....for the Canadian Over-Seas Expeditionary Force.

Date.....*January 4th* 191*5*.....*W. H. Lawrence*

Place.....*Exhibition Grounds Toronto Ont*.....*W. H. Lawrence*
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.

Percy Platts.....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.

W. H. Lawrence.....(Signature of Officer)

Date.....*January 16* 191*5*

REGIMENTAL DOCUMENTS

NAME

Plato Percy

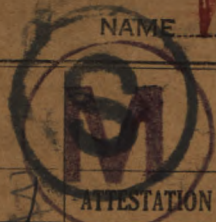
REGT. NO.

53141

UNIT

H. Q. FILE NO.

100-11-19



CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

TRAINING HISTORY SHEET (M.F.W. 113)

FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)

COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

DENTAL HISTORY SHEET (M.F.B. 465)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

MEDICAL EXAMINATION (M.F.W. 129)

TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

LAST PAY CERTIFICATE (M.F.W. 44)

PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

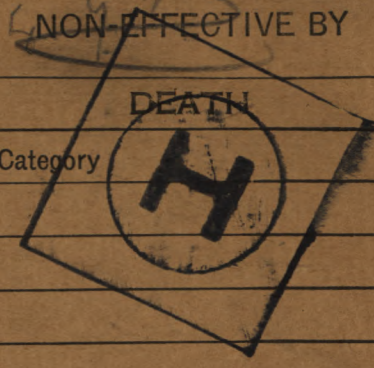
PARTICULARS OF CHARACTER (A.F.W. 3226)

COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

1 a F. 1231
1 a F. 13181
1 a F. 149
1 a F. 153016
1 a F. 161

24920

Category



DISCHARGE

Category

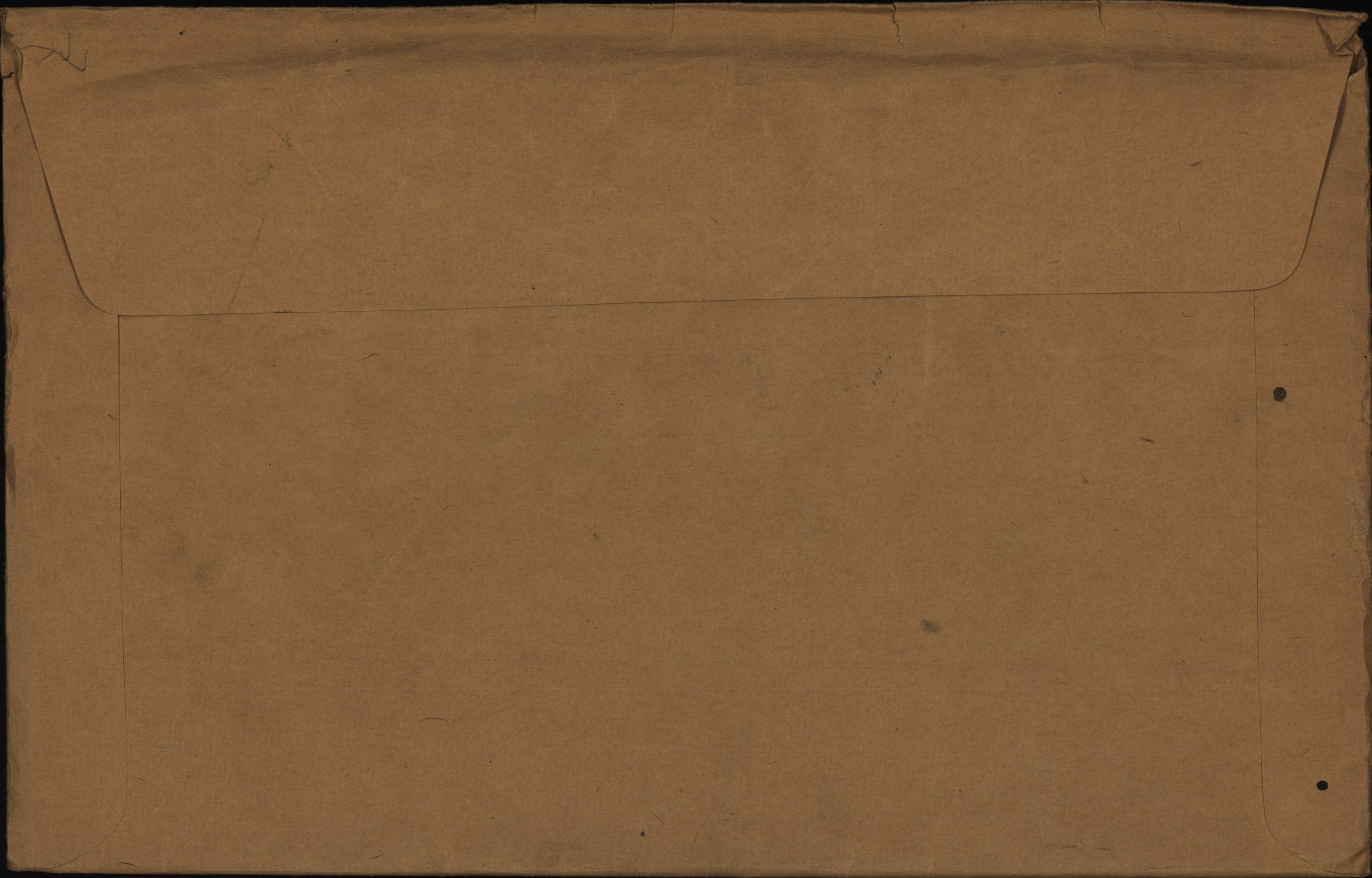
DESERTION

520

5

23 - 1
23 - 1
2 - 2





NAME

Plato Percy

(649-P-1767)

D

RANK & No.

9 M.

83141

CORPS

Ammn Column

4th Brigade C.F.A.

ENLISTMENT, PLACE

Toronto

DATE

15th Jan. 1915

FORMER CORPS

4th C. F. A.

COUNTRY OF BIRTH

Canada, Sherbrooke, Que.

NEXT OF KIN

Plato William

ADDRESS OF NEXT OF KIN

Geneva St. St Catharines

Ont. Canada.

DISCHARGE, PLACE

DATE

Also notify: - Miss Effie M. Plato, c/o Dr. Fitzgerald, 65 St Paul St. St. Catharines, Ont. M. F. W. 22-50m.-9-15. H. Q. 1772-39-839. Auth 649-P-1767

1/5. 1/6. 5-15. 8/14

Name Plato, ~~XXXXXX~~ Rank ~~XXXXXX~~ Reg. No. 83141.
 Percy. Sig.
 Unit ~~4th~~ Brigade, Canadian Field Artillery.
 6th. How. (Second Division).
 Next of Kin Canada. File No. 25-P-714.

Date	Movement	Place	Casualty	List No.	Notified N/KO.	W.O. List
1915.						
23.8.	5th. F.A. Tent Hosp. at		Cold.	8.		
25.8.	Discharged.	Otterpool.		8.		

31-5.	Rpt. From Base. KILLED IN ACTION.			A107.	M9281.	
	G.R.C.No.7411.Dickebusch Mil.Cem.6000.Yds.S.W.of Ypres. BCR.No.50. 4-7-16.					

CANADIAN CONVALESCENT HOSPITAL,
MONKS HORTON.

ADMISSION CARD.

Regt. No. **83141.**

A. & D. No.

A 703.

Rank **Gunner.**

Name **Plato. Percy.**

Corps **C. F. A. 4th Brigade.**

Religion **Meth.**

Age

19.

Disease **Pluro. Pneumonia.**

Admitted **14-7-15.**

Discharged **20/7/15 to unit**

Place in Hospital

M. H. Rec'd

M. H. Requested

M. H. Ret'd

Transferred

Results

for duty

REMARKS:

8 Aug. 1914-15 Star Gnr. 15th Bty.

Page

649-P-1767.

Plato Wm. Pte. #83141-C.E.F. *V.C.F.A.G. & Bde.*

Medals
& Dec. (father)

Wm. Plato, Esq.,
R. R. No. 2,
St. Catherines, Ont.

P.&S. (father)

ditto

FEB 1 8 1921

Serial No 781009

Scroll Desp. Reqn. No. 2-20432

Plague Desp. 26 ⁷/₂₂ Reqn. No. P.43208

Mem. Cross. (mother)

Mrs. Sarah Plato,
(Address as above)

Handwritten mark

desp. OCT 4-1920

(M) C25466

Handwritten number 25814

M

393

NAME *Plato, Percy*REGT'L. No. *83141*

RANK AND CORPS

Edw. 6th Hussars (4th Brigade C. I. A.)

CABLE

Sign.

NATURE OF CASUALTY

NO.

DATE

NO. *1152*
X FOLL. X*M9281**4-7-16**Killed in action May
31st, 1916. c**A. F. B**2070 a**" " "**May 31st-1916**Rouen.**30.6.16*

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
✓ 8	5 th Fld. Amb. Tent, Otterpool.	23-8-15	Cold.
a107.	Rep. from Base	25-8-15 31-5-16	Discharged. Killed in action.

No. 83141

RANK *Private*NAME *Plato P*

T. O. S.

UNIT *Ammunition Column. 4th Brigade C.F.A.**C E F*M. D. *2*

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
<i>1915</i> <i>Jan 4</i>	<i>1915</i> <i>Jan 31</i>	<i>L</i>		
	<i>Feb</i>	<i>L</i>		
	<i>Mar</i>	<i>L</i>		
	<i>Apr</i>	<i>L</i>		
	<i>May</i>	<i>L</i>		
	<i>Aug</i>	<i>L</i>		

UNIT SAILED
MAY 16 1915



Mc
com

Number, *83141* Rank, *Gen.*

B
F

Surname, *PLATO*

Christian Name, *Perry*

Unit, *C. F. A.* Theatre of War, *France*

Date of Service, *15-9-15* *D*

Remarks, *Father*¹

Latest Address, *Wm Plato Esq.*

R. R. No. 2.

Roll No. *B. Page 2782* *St. Catherines, Ont.*

g. 14487 *slip*

APR 25 1879

Surname: *Plato* Christian Name or Names: *P.* Reg. No.: *83141*
 Rank: *Bdr.* Unit: *4th Batta* Co.: Troop: Batty:
 Hospital: *5th L. Amb. (Genl) Otterpool* Date of Admission: *23.8.15.*

Transferred: Hosp.
 Hosp.
 Hosp.
 Hosp.

Diagnosis: *Cold.*
 (1)
 Later Diagnosis (if changed)
 (2)
 (3)

Additional Diagnoses, if more than one state present

Killed in Action
31-5-16

DISPOSITION: *Dischgd* Date: *25.8.15.*

C. L. *6.9.15* REMARKS: *Reported from Base*
5.7.16 A107

A.M.D. 2 DEPT.
 Beh. of D.G.M.S. O.M.F.G. London.

8

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Rank _____ Name **PLATO, Percy.** Reg'l No. **83141.**
 Unit **4th Bde Amn Col.** If in perm. Corps, What Unit? _____ Married or Single **Single.**
 Place and Date of Enlistment **Toronto. 16th Jan. 1915.** Place of Birth **Sherbrooke. Que.**

Name and Address, Next-of-Kin **William Plato. Geneva Str. St Catherines.**

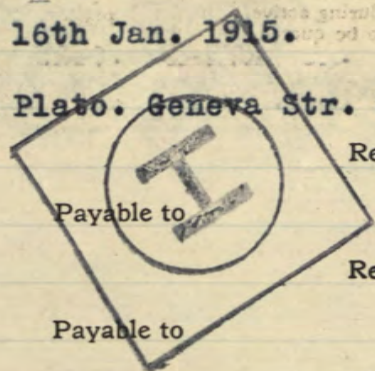
Assigned Pay Monthly \$ _____ Payable to _____ Relationship _____

Assigned Pay Monthly \$ _____ Payable to _____ Relationship _____

Separation Allowance \$ _____ Payable to _____ Relationship _____

Discharge, Date and Place _____ Reason _____ Character _____

24 9 20
24 8



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				
		Embarked S.S. Corinthian	Canada	17.5.15	
		Landed	England	27.5.15	
23.7.15	W.O.	Discharged to duty	C.C. Hospital Moxley Horton	21.7.15	
6.9.15	" "	aan. 5 th F. Amb. Tani Hosp.	atterpool	23.8.15	Cold. Cas. Rep. No. 8
6.9.15	" "	Discharged fr. "	"	25.8.15	" " " 8.
15.9.15	<i>Diags 8C 4th Bde</i>	Embarked for France	Southampton	14.9.15	
14.2.16	<i>A. Base</i>	Posted to 15 th Bty. from	In field	21.1.16	Part II O.S.
4.6.16	"	S.O.S. on transfer to 6 th Bde	"	21.5.16	Part II O.S.
"	<i>6th Bde</i>	T.O.S. posted from 4 th Bde	"	22.5.16	" p 31

W.A. B.R.
REMARKS
Taken from Official Documents

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

5-7-16	6 th Bde	Killed in action -	France	31-5-16	Cos. List: A107. O.N. M9281
30.6.16	"	Killed in action -	In the field	31-5-16	P: II 034.

Casualty Form—Active Service.

Regiment or Corps 4th Bde. Am. Col. C.F.A. (2nd C.E.F.)Regimental No. 83141 Rank Ser Name Plato LucyEnlisted (a) 4/1/15 Terms of Service (a) One year or during the War and for six months after the War Service reckons from (a) 4/1/15

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) _____

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				
<u>14²/16</u>	<u>Off Unit</u>	<u>Arrived in France</u> <u>Posted to 15th Battery</u>	<u>15-9² Field</u>	<u>21-1-16</u>	<u>B 213. P.D.O. No 14-df-14-2-16</u>
<u>20-5-16</u>	<u>C RCA</u> <u>2nd C D A</u>	<u>Struck off being trans</u> <u>to 6th Bde C FCA on reorg</u> <u>of estab,</u>	<u>Field</u>	<u>21-5-16</u>	<u>Pt 20 25 d/7-6-16</u>
	<u>do</u>	<u>Taken on 6th Bde C F A</u>	<u>do</u>	<u>22-5-16</u>	<u>do</u>
<u>2:6:16</u>	<u>Off Unit</u>	<u>Killed in Action</u>	<u>Field</u>	<u>31:5:16</u>	<u>B. 213. 2:6:16.</u> <u>Pt. 20. # 34. 30:6:16</u>

W Bentley **Capt.**
OFFICER IN RECORDS
CANADIAN SECTION G.H.Q.
3RD ECHELON

(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.

147-15
141

MEDICAL HISTORY SHEET.

Surname Plato Plato Christian Name Percy

Examined { on 6 day of January 1915
at Toronto Ont.

Approved by W.C. MacLellan

Birthplace { City or Town Sherbrooke
County Que.

Rank Private M.O.

Apparent age 19 yrs 1 mo.

Trade or occupation Electrician

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.

Height 5 Feet 8 Inches. M.O.

Weight 160 Lbs. M.O.

Chest measurement { Minimum 34 inches. M.O.
Maximum expansion 30 1/2 inches. M.O.

Physical development Good M.O.

Small-Pox Marks no M.O.

Vaccination Marks { Arm Right Left
Number - -

Date	Result	VACCINATIONS,
<u>30/1/15</u>	<u>both</u>	M.O.

When Vaccinated last no.

(a) Marks indicating congenital peculiarities or previous disease

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>1/19</u>		M.O.
<u>20</u>		M.O.
<u>Feb 2</u>		M.O.

(b) Slight defects but not sufficient to cause rejection

Enlisted on 6 day of January 1915 at Toronto

	CORPS.	REG'T NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>B.A.C.</u>	<u>83141</u>		
Transferred to.. ..	<u>4 B Coy</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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 *Plato*

Christian Name *Percy*

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				
<i>Toronto</i>	<i>Jan 4/15</i>	<i>22</i>	<i>2</i>	<i>15</i>	<i>28</i>	<i>2</i>	<i>15</i>	<i>Influenza</i>	<i>7</i>		
		<i>2</i>	<i>5</i>	<i>15</i>	<i>6</i>	<i>6</i>	<i>15</i>	<i>Pandulitis</i>	<i>4</i>		
<i>Moore Remarks</i> <i>Cum Hoop</i>	<i>11.6.15</i>	<i>11</i>	<i>6</i>	<i>15</i>	<i>14</i>	<i>7</i>	<i>15</i>	<i>Pain in side</i>		<i>Transferred to Monks Horton</i>	
										<i>Geo. Roberts. Capt.</i>	

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MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

2nd Contingent

na
to
E
m.n

To Whom *Mrs Sarah Plato*
Address *RR. #2. Geneva St
St Catharines
Ont*

By Whom Assigned *Plato Percy*
Regtl. No. *83141*
Rank *Gur*
Corps *Amn Col 4th Bde 67A*

Rate *\$15.00* MAY 1 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<div style="border: 1px solid red; padding: 10px; display: inline-block;">Casualties</div>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May		<i>P11135</i>	<i>15 -</i>	
June		<i>Q2822</i>	<i>15 -</i>	
July		<i>A1017</i>	<i>15 -</i>	
Aug.		<i>W1866</i>	<i>15 -</i>	
Sept.		<i>X1248</i>	<i>15 -</i>	
Oct.		<i>42638</i>	<i>15 -</i>	
Nov.		<i>L5362</i>	<i>15</i>	
Dec.		<i>N10405</i>	<i>15</i>	
Jan.	1916	<i>P12109</i>	<i>15</i>	
Feb.		<i>R13891</i>	<i>15 -</i>	
March		<i>715732</i>	<i>15 -</i>	

*Killed in action May 31 1916
C.L. 4-7-16 H.Cab.*

*Also 3 M. July 6/16
J.H.*

UNITED STATES
ASSISTANT
SECRETARY

1914

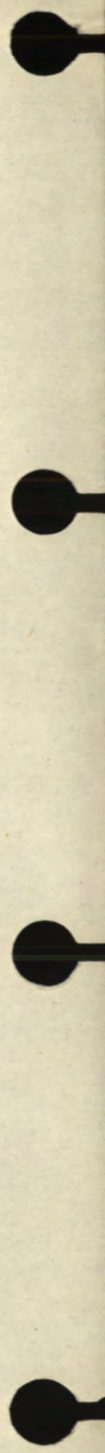
1914

1914

1914

1914

1914



MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

197
 F. W. 12a.
 G.O.M.—12-15.
 1772—39—819.

Sheet No. 2. Mrs. Sarah, Plato.

Name of Soldier Plato, Percy.

PAYMENTS.

L. L. Job 89002.—Req. 6213.

Amr Col. Hth Bde.

Month.	Year.	Cheque No.	Amt.	Remarks.
				\$15.00
April	1916	7345	15	
May		765104	15	
June		73608	15-	Account closed
July				
Aug.				2 ¹⁰ FX 6/12/16 8412
Sept.				Casualties
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

2.10

cas.

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.				

Rank *C.F.A* Name *PLATO, Percy.*
 Unit *4th Bde Amn Col.* If in perm. Corps, }
 What Unit? }

Reg'l No. *83141.*

Married or Single *Single.*

Place and Date of Enlistment *Toronto. 16th Jan. 1915.*

Place of Birth *Sherbrooke. Que.*

Name and Address, Next-of-Kin *William Plato. Geneva Str. St Catherines.*

Relationship

Assigned Pay Monthly \$ *15⁰⁰*

Payable to *M^{rs} Sarah Plato, R.R. No. 2, Geneva St. St. Catherines*

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place *31/5/16.*

Reason *R, in. A.* Character *6 C.F.A Order 34. 30/6/16.*



Date 1915		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
<i>June 1</i>	<i>June 30</i>	<i>30</i>	<i>1.</i>	<i>30</i>	<i>30</i>	<i>10</i>	<i>3</i>		<i>33</i>				<i>15</i>		<i>15</i>	<i>18</i>	
<i>July 1</i>	<i>July 31</i>	<i>31</i>	<i>1.</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3 10</i>	<i>18</i>	<i>52 10</i>		<i>10</i>	<i>10</i>	<i>15</i>		<i>25</i>	<i>27 10</i>	
								<i>27</i>								<i>27 37</i>	
<i>Aug 1</i>	<i>31</i>	<i>31</i>	<i>1.</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3 10</i>	<i>27 10</i>	<i>61 47</i>		<i>34 06</i>	<i>15</i>			<i>49 06</i>	<i>12 41</i>	
<i>1-9-15</i>	<i>30-9-15</i>	<i>30</i>	<i>1 00</i>	<i>30</i>	<i>30</i>	<i>10</i>	<i>3</i>		<i>33</i>		<i>5 11</i>	<i>15</i>			<i>20 11</i>	<i>25 30</i>	
<i>1 Oct.</i>	<i>31</i>	<i>31</i>		<i>31</i>	<i>31</i>		<i>3 10</i>		<i>34 10</i>		<i>2 61</i>	<i>15</i>			<i>17 61</i>	<i>41 79</i>	
<i>Nov.</i>	<i>30</i>			<i>30</i>	<i>30</i>		<i>3</i>		<i>33</i>		<i>5 29</i>	<i>15</i>			<i>20 29</i>	<i>54 50</i>	
<i>1/12/15</i>	<i>31/12/15</i>	<i>31</i>	<i>1 00</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3 10</i>		<i>34 10</i>		<i>16 82</i>	<i>15 -</i>			<i>31 82</i>	<i>56 78</i>	
<i>Jan</i>		<i>31</i>		<i>31</i>	<i>31</i>		<i>3 10</i>		<i>34 10</i>		<i>2 67</i>	<i>15</i>			<i>17 67</i>	<i>73 27</i>	
<i>Feb.</i>		<i>29</i>		<i>29</i>	<i>29</i>		<i>2 90</i>		<i>31 90</i>		<i>7 86</i>	<i>15</i>			<i>22 86</i>	<i>82 31</i>	
<i>Mar</i>		<i>31</i>		<i>31</i>	<i>31</i>		<i>3 10</i>		<i>34 10</i>		<i>5 23</i>	<i>15</i>			<i>20 23</i>	<i>96 18</i>	
				<i>305</i>			<i>30 50</i>		<i>27 335 77</i>		<i>89 59</i>	<i>150</i>			<i>339 59</i>		

Checked *SK*

Statement of
 SEP 9 1916
 Account rendered

Cash found in effects *Notes*

MARRIED OR SINGLE *S*

PLACE OF BIRTH *Canada*

NAME AND ADDRESS OF NEXT OF KIN *William Plato
Geneva St. St Catharines*

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>killed in action</i>	<i>21.5.16</i>	<i>6 C7A Order 34 30-6-16</i>

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L. No. *83141* RANK *Gr.* NAME *Plato Percy*

IF IN PERM. CORPS | WHAT UNIT *1st Bde Bns* TRANSFERRED TO *N.E.* DATE *26/7/16* AUTHORITY

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION *Toronto* TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION *16th July 1915* TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ *15⁰⁰* DATE EFFECTIVE *Mrs Sarah Plato RR #2 Geneva St.* RELATIONSHIP *next of kin St. Catharines*

PAYABLE TO

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *5-7-16* EFFECTIVE *1-7-16* REASON *killed in action*

DISCHARGE DATE AND PLACE *31/5/16* REASON AND AUTHORITY *6th Bde How. Pr II Order 34*

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *26/7/16*

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)



DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS											
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2				3	4				CREDIT	DEBIT									
			\$	c.						\$	c.																	\$	c.	No.	DATE	No.	DATE	No.	DATE	No.
<i>1916</i>									<i>335 44</i>									<i>289 59 96 18</i>																		
<i>Apr 30</i>	<i>30</i>	<i>1⁰⁰</i>	<i>30</i>	-	<i>30</i>	<i>10⁰⁰</i>	<i>3</i>	-	<i>33</i>	-	<i>7⁰⁰</i>	<i>10.6.16</i>	<i>48</i>	<i>20</i>	<i>4</i>	<i>16</i>		<i>262</i>	<i>2</i>	<i>61</i>	<i>15</i>		<i>20 23</i>	<i>108 95</i>												
<i>May 31</i>	<i>31</i>	<i>31</i>					<i>3</i>	<i>10</i>	<i>34</i>	<i>10</i>	<i>396</i>	<i>24</i>						<i>256</i>	<i>2</i>	<i>55</i>	<i>15</i>		<i>20</i>	<i>11</i>	<i>122 94</i>			<i>killed in action</i> <i>31-5-16.</i>								
<i>June</i>	-	-	-	-	-	-	-	-	-	-	-	-						<i>15</i>	-	<i>15</i>	-	<i>107 94</i>														
																								<i>107.94</i>												
<i>Checked by [initials]</i>																																				
<i>W.B. 1700/16</i>																																				<i>Bal on Left to N.E. Bde.</i>
<i>Pub June 17</i>																																				
<i>July 17</i>									<i>24 00</i>	<i>24 00</i>															<i>12 00</i>		<i>12 00</i>								<i>12⁰⁰ Bk #5679. 12-6-17</i>	
<i>N.E. June 17</i>																																				<i>12⁰⁰ Bk #5679. 12-6-17</i>
																																				<i>12⁰⁰ Bk #5679. 12-6-17</i>

Cash found in effects *No rep.*



1107

MEDICAL CASE SHEET.*

XXX

No. in
Admission
and
Discharge
Book.

1107

Year

1915 -

Regimental No.

83141

Rank.

Gr.

Surname.

Plato

Christian Name.

Percy

Unit.

C.F.A. 4th, Bgd.

Age.

19

Service.

4/12

Station
and Date.

Moore Barracks
Canadian Hosp.
June 2nd
1915

Disease

Pleurisy

Complains

Pain left side

Cough.

History

During couple days had felt pain in side. Suddenly became so acutely painful could scarcely breathe. Came to hospital. Had pleurisy middle April. was 2 weeks in hosp. Physical condition pulse and temp normal Resp. shallow and fast. Patient complains of pain in left side. lower part of lung in axilla. Is dull.

14th

Shows rales in left lung in axilla over 6th and 7th ribs and interspaces. Friction rub on deep breathing.

Jamson Roberts Copt. C.A.M.C.

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station
and Date.

MEDICAL CASE SHEET

A series of horizontal lines for writing, forming a large rectangular area for notes.

CLINICAL CHART.

Corps 4th Bgd. C.F.A.
 No. 83141

Rank & Name Gr. Percy Plato
 Admission June 11th 1915 Discharge Aug 19

Home Boonville Canadian Hosp
 Service 4/12
 Result Result

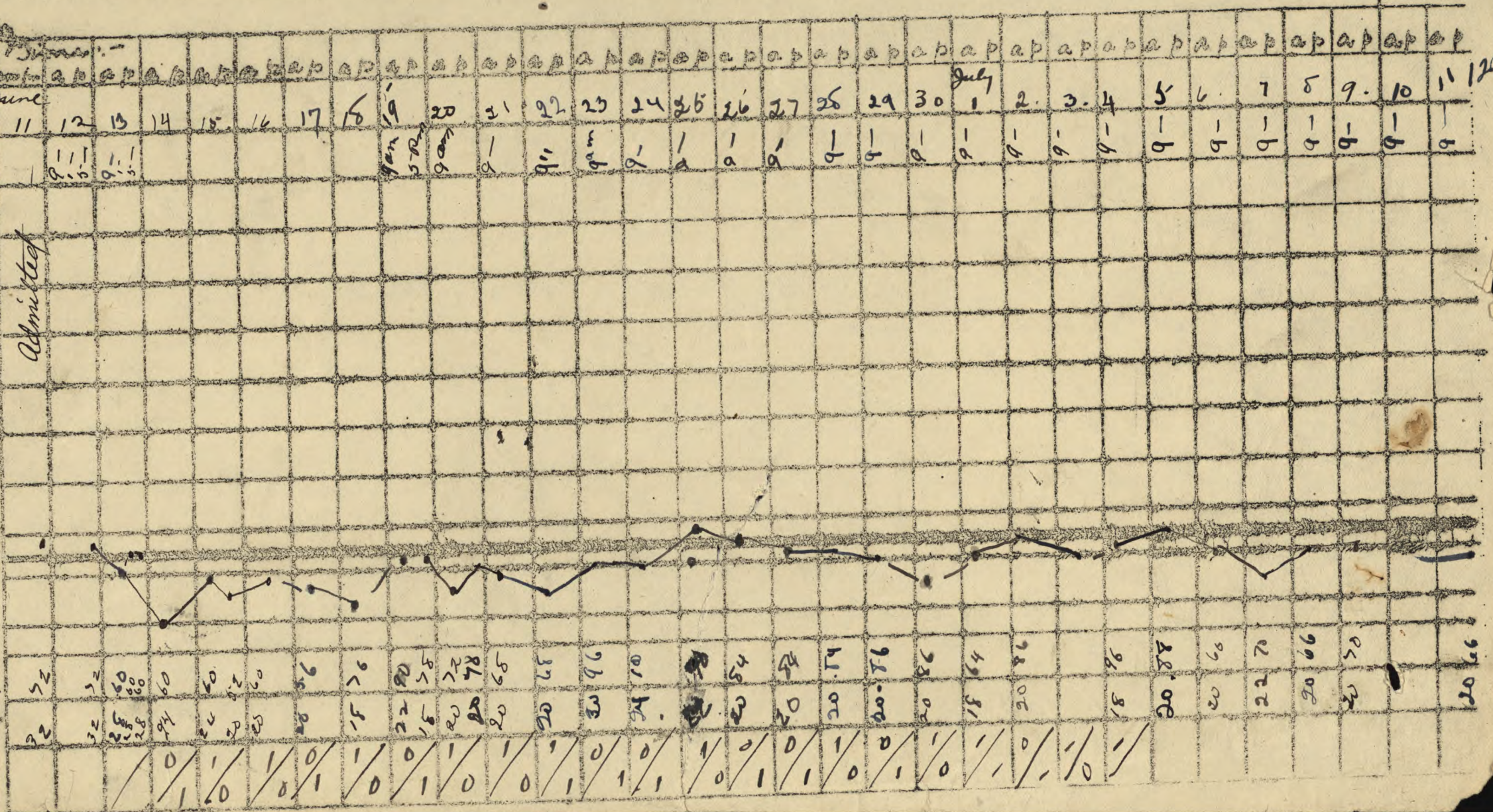
Date of Admission

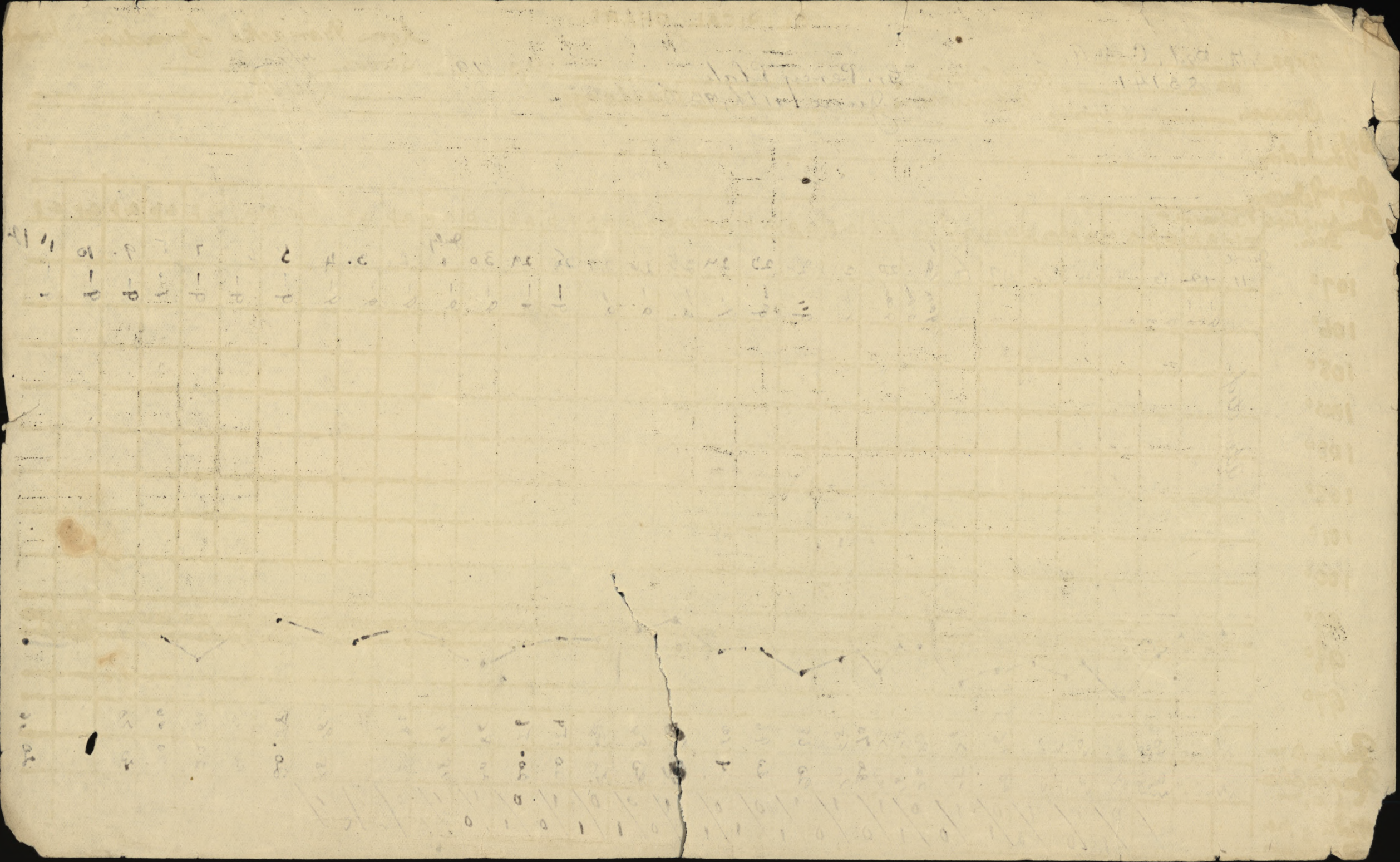
Day of Week

Temperature
 Fahr.

107°
 106°
 105°
 104°
 103°
 102°
 101°
 100°
 99°
 98°
 97°

Pulse per
 Respiration
 p.m.
 Movements per
 24 hours





CLINICAL CHART.

Army Form B. 181.

(To be attached to Case Sheet.)

Corps 4th Bgd. C.F.A.

Military Hospital M.B.C.H.

No. 53141

Rank and Name Sm. Percy Plato

Age _____

Service 4/12

Disease _____

Date of admission June 14th 1915

Date of discharge _____

Result _____

Dates of Observation	July																												
Days of Disease	13 14 15																												
Temperature Fahrenheit	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time
	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.
107°																													
106°																													
105°																													
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103°																													
102°																													
101°																													
100°																													
99°																													
98°																													
97°																													
Pulse per Minute																													
Respirations per Minute																													
Motions per 24 hours																													

CELESTIAL CHART

