REGIMENTAL DOCUMENTS H. Q. FILE NO. M. F. W. 2595 NON-EFFECT DATE FORWARDED TO WHOM FORWARDED CONTENTS DATE RECEIVED REFERENCE DEATH ATTESTATION PAPER (M.F.W. 23, 133, or 51) Category 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.F.B. 263 or A.F.B. 120) COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121) DISCHARGE MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178) Category 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) DESERTION 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.D. 268) PARTICULARS OF CHARACTER (A.F.W. 3226) COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

ORIGINAL225762

ATTESTATION PAPER

5

Can. Mounted Rifles.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BE	FORE ATTESTATION. (ANSWERS.)				
1. What is your surname?	MONKMAN				
1a. What are your Christian names?					
1b. What is your present address?					
2. In what Town, Township or Parish, and in what Country were you born?					
3. What is the name of your next-of kin?					
4. What is the address of your next-of-kin?					
4a. What is the relationship of your next-of-kin?					
5. What is the date of your birth?					
6. What is your Trade or Calling?	- Baragan -				
7. Are you married?					
8. Are you willing to be vaccinated or re-					
vaccinated and inoculated?	Yes.				
9. Do you now belong to the Active Militia?					
0. Have you ever served in any Military Force?					
1. Do you understand the nature and terms of your engagement?	Yes.				
2. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force?	Yes.				
Force, and to be attached to any arm of the service there existing between Great Britain and Germany should that after the termination of that war provided His Majesty shischarged. Onte April 27th 196.	war last longer than one year, and for six months hould so long require my services, or until legally (Signature of Recruit)				
OATH TO BE TAKEN BY M.					
T, Wellington Caldwell Monkman, oear true Allegiance to His Majesty King George the F of duty bound honestly and faithfully defend His Majesty Dignity, against all enemies, and will observe and obey and of all the Generals and Officers set over me. So help	of, His Heirs and Successors, in Person, Crown and Il orders of His Majesty, His Heirs and Successors, me God.				
· W.C	Monhamman(Signature of Recruit)				
Date April 27th, 1916.	(Signature of Witness)				
CERTIFICATE OF MAGISTRATE.					
The Recruit above-named was cautioned by me the questions he would be liable to be punished as provided in The above questions were then read to the Recruit I have taken care that he understands each questionally entered as replied to, and the said Recruit has made	in the Army Act. in my presence. on, and that his answer to each question has been				
pefore me, at Toronto, Canada this 2	7th day of April 1916.				
mul	(Signature of Justice)				

M. F. W. 23. 600M.—2-16. H. Q. 1772-39-841.

Description of Wellington Caldwell Monkman on Enlistment. Apparent Age ________months. Distinctive marks, and marks indicating congenital peculiarities or previous disease. (To be determined according to the instructions given in the Regulations for Army Medical Services.) (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). 5 ft 74 ins. Height Girth when fully ex-36ins. panded. Range of expansion Mole left shoulder. Complexion Frash... Eyes Blue Brown Hair Church of England Presbyterian Presbyterian Methodist..... Baptist or Congregationalist..... Roman Catholic..... 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. for the Canadian Over-Seas Expeditionary Force. Toronto, Canada. Place.... Medical Officer. *Insert here "fit" or "unfit." nebo. 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. Wellington Coldwell Monkman, 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.

O. C. Depot Regt., C

Signature of Officer)

THE

If in perm. Corps, Unit No.6.dft.Dep.Reg.CMR What Unit?

Married or SingleSingle.

Reg'l No.225762

Place and Date of Enlistment

Toronto, 27.Apr. 1916.

Place of Birth York Co. Ont.

Name and Address, Next-of-Kin

Joseph Monkman, & Jeseph Emma Monkman,

Box 46 Richmond Hill, Ont. Canada. /

Relationship Mother.

Character

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

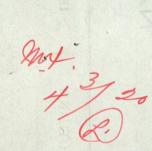
Relationship

Discharge, Date and Place

Reason

Report. Record of promotions, reductions, transfers, REMARKS Place. Date. casualties, etc., during active service. Taken from Official Documents From whom Date. The authority to be quoted in each case. received. Arrived in England per SS Mauretania 31.10 16 2. 11. 16 29 NRR. Jakew ow Stringth S'ceffe 111.16 S.O S trans to 11' Rw Taken on strength.

Report.		Record of promotions, reductions, transfers	A Though the			Manda Bara
Date.	From whom received.	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.	
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	15-16-2					
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	Elitaryon Piki					
and the state of			SCN: No.			



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

JOB.

M. F. W. 54. 150m. 10-15. H.Q. 1772-39-920.

Casualty Form—Active Service.

MOUD raftto Unit, Regiment or Corps DEPOT REGIMENT, CANADIAN MOUNTED RIFLES, C. E. F. 225762 Monkman, Wellington Caldwell. Name 27-4-16 Terms of Service (a) Service reckons from (a). Numerical position on Date of promotion to Date of appointment roll of N. C. Os. present rank. to lance rank Qualification (b) Shipping Clerk Extended Re-engaged. Report Record of promotions, reductions, transfers, Remarks casualties, etc., during active service, as retaken from Army Form B. 213. ported on Army Form B. 213, Army Form Place Date Army Form A. 36, or other From whom Date A. 36, or in other official documents. . The official documents. received authority to be quoted in each case. Embarkod GANADA 25-10-16 "Mauretania"! Debarked ENGLAND 31-10-16 "Mauretania" Taken on strength 49.71 R.K. of F.C.H. R.R. Bhornel iffe PGHRR.R.O.Pt. 2. No.144.d/2-11-16. O.C.Regt Transferred to 4th. Canadian Training Bdo. Shorncliffe 3-11-16 PGHRA, R.O. Pt. 2. 114 Nes Bon. .Nc.145.d/3-11-16. Adjutant Fort Garry Horse nest ment. Taken on strength Pt. II. BA. C. 263. lith Battalion. Alth Trans to 27th Battn Overseas 14-2-17 Bn. C. 36

Pate From whom period on Amy Form B 23, Amy Form A 28, or other official documents. The authority to be quoted in each case. Style="block" Style="block"	73	Report	Record of promotions, reductions, transfers, casualties, etc., during active service, as re-			Remarks	
Streng.h Mad Cdn. Bn. My P. II. M. M. Mom. I. on Mom. I	Date		ported on Army Form B. 213, Army Form A. 36, or in other official documents. The	Place	Date	taken from Army Form fB, 213 Army Form A. 36, or other official documents.	
No. C. 62nd Bn. Arrived Unit for duty 10 mg. 213 of 118 mg. 10.19413 Int. 010 Hell. hr under the control of the	15%	C C. B	strength 12nd Cdn.			0. 10 39	
Major for LtCol., A. A. G. Canadian Section. G. H. Q. 3rd Echelon B.E.F.	337	- do		5 10 M B.	213 d	4	1,8,
dalladidi desudi. d. 11, d. 31 d. Edilodi. d.	W 3 7/1	ny fi			11 %19	16.16.19413. 184910. Des. 44	וי ע
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Lates mores har Joseph Mondensey Out-Poll No Page 570

9 1046984 am AUG 27 1921

SURNAME. Monte man (49-11-22149)	
CHRISTIAN NAMES Wellington Galdwell	FOLL.
REGL. NO. 225 762 . RANK 3/2.	1
UNIT Supol Regt, G.M. R. (6th. R.D.)	
FORMER CORPS NUL	
NEXT OF KIN.	CHANGE OF ADDRESS
NAMES IN FULL Monkman, Ms. Emma	
RELATIONSHIP TO SOLDIER Morther	
ADDRESS Box 46 Richmond Hill, Unt.	
COUNTRY OF BIRTH Ganada Work Go, Unt. DATE	apr2012, 1894
PLACE OF ATTESTATION LOCATE ULT. DATE	apr 27 ch 1916
L. L. 94504. M. & D. 6512. M. F. W. 22. 25	0м.—2-16. H. Q. 1772-39-339.

SINGLE yes WIDOWER MARRIED TRADE OR CALLING Shipping glers Presbyterian DESCRIPTION. APPARENT AGE YEARS MONTHS FEET 414 INCHES HEIGHT EXPANSION 5 INCHES CHEST MEASUREMENT 36 INCHES EYES Blue HAIR Brown COMPLEXION Fresh DISTINGUISHING MARKS mole & shoulder DATE Wer 27th. 1916 PLACE Toronto Unt. MEDICAL EXAMINATION.

Fresent address 1306 youngest. Foronto Unt.

NAME MONEMAN Wellington Catholington Catholi " " Noted (25-10-17) M. F. W. 42-50M.-5-17.

H. Q. 1772-39-893.

L. L. 20497-M. & D. 7908

HOSPITAL LIST No. a1-1 Reported from Base 21-8-17 Killed in action. Mank.

MONKMAN, W.C., Pte. No. 225762, 27th Battalion, not eligible for , 4/15 Mar. DECORATIONS. Father - Joseph Monkman. Box 46. Richmond Hill, Ont. & S. Father- as above. er # 795956 Mother- Mrs. Emma Monkman, address as above. Desp APR 21 1020 6 5453

Sh. 3362 No. P32730

Wallington Caldwell Name Workman. Rank Frient Reg. No. 225 7/6 2. Unit M th Br. Next of Kin banda M-5711							
Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List	
21-8-17	Rept Base Kelled in	action	Ćv.	.1	m	.002	
					2.		

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
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No. 225762 RANK Jor. NAME monkman, Hellington Calldwell J. 104. 29-4-16 Unit Can. Snounted M. D. 2 PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PAID SIG. PAID OR FROM TO REC'T PARTICULARS AUTHORITY 1916 6 the of Snaft -

SURNAME	CHRIST	IAN NAME OR NAMES	FORM	REG. No.
Mon	knam	W.C.	2	25762
RANK	Unit Man.	co. 27th. B	TROOP	BATTY.
HOSPITAL				ADMISSION
1.			Hosp.	
2.			Hosp.	
3.			Hosp,	
DIAGNOSIS			11035,	
2-				
3.	Stilled	in action	21	-8-17 R
DISPOSITIO	A			DATE
C.L. 4-	9-17	RE RE	MARKS	
			M.S. O.M.F.	3. London.
		0.9	,.M.S. O.M.	
		Boh. of		

EPITOME OF HOSPITAL TREATMENT

	HOSPITAL	ADM.
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2,		***************************************
3,		
4.		
5,		
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ORIGINAL

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Mo.	nkman	_ Ci	hristia	n Nan	re Well	lington to	aldwell
(on 27th	day of April,	164	App	roved by	//	, /	
Examined /	Toronto, Cal				Don	den	ace
City or Town	1			_ Ra	nk E	alt	M.O.
Birthplace { County You	ck, Canada.		Date.	Fit or Unit.		ruitingdepo	- Албанданованог Т.
Apparent age					- 101		
Trade or occupation						***************************************	M.O.
Height 5							M.O.
Weight							M.O.
(hest measurement)	nimum 31						M.O.
Physical development							M.O.
Small-Pox Marks						3	M.O.
(Ar	m Right. Let	t.	CHIEF ADDRESS AND ANY CHARLES	SALE POLICE AND DOCUMENT	WANTED COMPANY OF THE PARTY OF		M.O.
Vaccination Marks Nur	nber		Date.	Result.	-/-	VACCINATIONS.	-11
When Vaccinated last	Nil		14/8/16	X	H.W	Martin	M.O.
(a) Marks indicating	congenital peculia	rities or					M.O.
previous disease	Nil						M.O.
(I) (II) 1 ()			Date.	Result.	ANTI-T	YPHOID INCCULATIONS, E	Pro.
(b) Slight defects but no	ot sufficient to cause	rejection	31/7/16	X	2410.	Martin	caff
	197,15		7/8/16	×	2/10	Martin	cliff
		MAT.	14/8/16	Х	2100	Martin	East
Enlisted on 27th day	a Ammil		1//	6	Памах	- F	
Treested on DI th day				16 at		to, Canada.	
	Corps.	REGT'L N	GMBER.	H	ARITES.	DATE.	
	Can. Mounted Rifles.	22	5785	Yo		apr. 2	-d/6
Transferred to	(CANADIANS)			Go	od	3 NOV 1916	
Transferred to	27th Bn						
EXAMINED OR DISCHARGED BY A MEDICAL BOARD.							
STATION.	DATE,			NASS.		RESULT.	
	-		ALCO DE LA CASA DEL CASA DE LA CASA DEL CASA DE LA CASA DEL CASA DE LA CASA D		The value of the v		

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.

DATES OF 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. Name Wellington Caldwell Date of Arrival Number of Signature Admission into Hospital. Discharge from Hospital. STATION. at the DISEASE. days in of Medical Officer. Station. Hospital. Day Month Year Day Month Year Christian 200 Aug 1 料理病 Monkman Surname

FORM OF WILL

I ,	Wellington Caldwell Monkman,	(Name in full)				
Regimental	Number 225762 serving in Depot	Regt. C.M.R.				
of the Cana	adian Expeditionary Force, do hereby revoke all former	Wills by me made and				
declare this	s to be my last Will.					
	I devise all my real estate unto					
	nil	Name and Address of person or persons to whom it is to go.				
absolutely,	and my personal estate I bequeath to					
	Father, Mr. Joseph Monkman, Richmond Hill,	Name and Address of person or persons to receive				
		personal estate* (See note).				
	Ont. Canada	(bee note).				
NO	TE					
This space appointn Execu- necess	nent of tor if					
IMPOR' NOT This must and Dar THE SOT HIMSE	TE this 5th day of 00 to be be signed ted by LDIER Wellington Caldwell Minkman	Signature of Soldier.				
	acknowledged by the Testator as and for his last Will					
	at at the same time, who in his presence, at his request, have hereunto subscribed our names as Witnesses.	and in the presence of				
	Signature of First Witness	ieut				
	Address of Witness 80 St Louis St. Qu	ebec				
THE TWO WITNESSES	THE TWO Occupation of Witness Commission Agt.					
MUST SIGN HERE	Signature of Second Witness					
	Address of Witness 19 Cliff Ave Hamilt	on Ont.				
	Occupation of Witness Accountant					
M. F. W. 82. certified a trie copy.						
300м12-16. 1772-39-983.	for Offi	cer 1/c Estates.				
	mille	I to herewit herework				
	3-119	Jarrelus goronti-				