

ORIGINAL

ATTESTATION PAPER.

No.

Folio.

CANADIAN EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname ?..... *McCarthy*
- 2. What are your Christian names ?..... *Dalton Edmund*
- 3. What is your present address ?..... *Britannia Bay Ont.*
- 4. In what Town, Township or Parish, and in what Country were you born ?..... *Ottawa, Co. Leblon, Ont.*
- 5. What is the name of your next-of-kin ?..... *Mrs Emma McCarthy.*
- 6. What is the address of your next-of-kin ?..... *Britannia Bay Ont*
- 7. What is the relationship of your next-of-kin ?.. *wife*
- 8. What is the date of your birth ?..... *July 2nd 1888*
- 9. What is your trade or calling ?..... *clerk*
- 10. Are you married ?..... *yes*
- 11. Are you willing to be vaccinated or re-vaccinated and inoculated ?..... *yes*
- 12. Do you now belong to the Active Militia ?..... *no*
- 13. Have you ever served in any Military Force ?..... *no*
If so, state particulars of former service.
- 14. Do you understand the nature and terms of your engagement ?..... *yes*
- 15. Are you willing to be attested to serve in the } CANADIAN OVER-SEAS EXPEDITIONARY FORCE ? } *yes*
- 16. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit ?.... *no*
- 17. If so, what was the nature of the disability ?.... *-*
- 18. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected ?.... *no*
- 19. If so, what was the reason ?..... *-*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I DO SOLEMNLY DECLARE that the above are answers made by me to the above questions and that they are true and I HEREBY ENGAGE AND AGREE to serve in the CANADIAN EXPEDITIONARY FORCE in any arm of the service for the duration of the war now existing between Great Britain and the Central European Powers, and for the period of demobilization thereafter, and in any event for one year, provided always His Majesty shall so long require my services.

Dalton E. McCarthy.....(Signature of Recruit.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

Dalton Edmund McCarthy do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Dalton E. McCarthy.....(Signature of Recruit.)

CERTIFICATE OF MAGISTRATE, JUSTICE OF THE PEACE OR ATTESTING OFFICER.

The Recruit above-named was cautioned by me that if he made any false answers to any of the above questions he would be liable to be punished as provided by law.

The above questions and answers 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 *Ottawa, Ont.* this *22nd* day of *June* 191*8*.

Robert E. Captain } Signature of Magistrate, Justice or Attesting Officer.

1st Lt. Det. Co. C. } Office or Rank and Unit or appointment.

O. C. H. Q. DET. C. O. C.

Description of Dalton Edmund McCarthy on Enlistment: AND CERTIFICATE OF MEDICAL EXAMINATION.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 18th day of November 1918, by the undersigned medical board sitting at Ottawa, Ont.

- | | |
|---|--|
| 1. Age as stated <u>30</u> Years <u>4</u> Months. | 2. Apparent age <u>30</u> Years <u>4</u> Months. |
| 3. Height <u>5</u> Feet _____ Inches. | 4. Weight <u>136</u> Pounds. |
| 5. Chest measurement { Minimum <u>34</u> Ins.
Maximum <u>36</u> Ins. | 6. Complexion <u>med</u> { Eyes <u>Blue</u>
Hair <u>Brown</u> |
| 7. Physical development <u>good</u> { Good
Fair
Poor | 8. Smallpox marks <u>none</u> |
| 9. Number of vaccination marks { Right arm <u>0</u>
Left arm <u>1</u> | 10. When vaccinated last <u>childhood</u> |
| 11. Distinctive marks and marks indicating congenital peculiarities or previous disease <u>nil</u>
(should the Medical Officers 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). | |

12. Slight defects but not sufficient to cause rejection

- | | |
|---|-----------------------------------|
| 13. The man denies having had { Rheumatism,
Tuberculosis,
Nervous or Mental disorder. | Epilepsy,
Syphilis,
Asthma. |
| 14. no evidence of past { Rheumatism,
Tuberculosis,
Nervous or Mental disorder. | Epilepsy,
Syphilis,
Asthma. |
- Strike out disease admitted or suspected)

We have examined the above named man in accordance with the C.E.F. Regulations for medical examinations, and he is placed in Category

A ¹¹/₁₁

15. (a) Vision. R. 6/8 L. 6/8
(b) Hearing. R. n L. n

Member. _____

President.

Member.

(Any special remarks of Medical Officers may be added below.)

RELIGIOUS DENOMINATIONS.

The Recruit states he belongs to the Denomination noted below.

Church of England _____ Methodist _____ Jewish _____
Roman Catholic yes Baptist or Congregationalist _____ Other denominations _____
Presbyterian _____

CERTIFICATE OF OFFICER COMMANDING UNIT.

_____ 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.

Robert J. Captain (Signature of Officer)

Date 22nd June 1918.

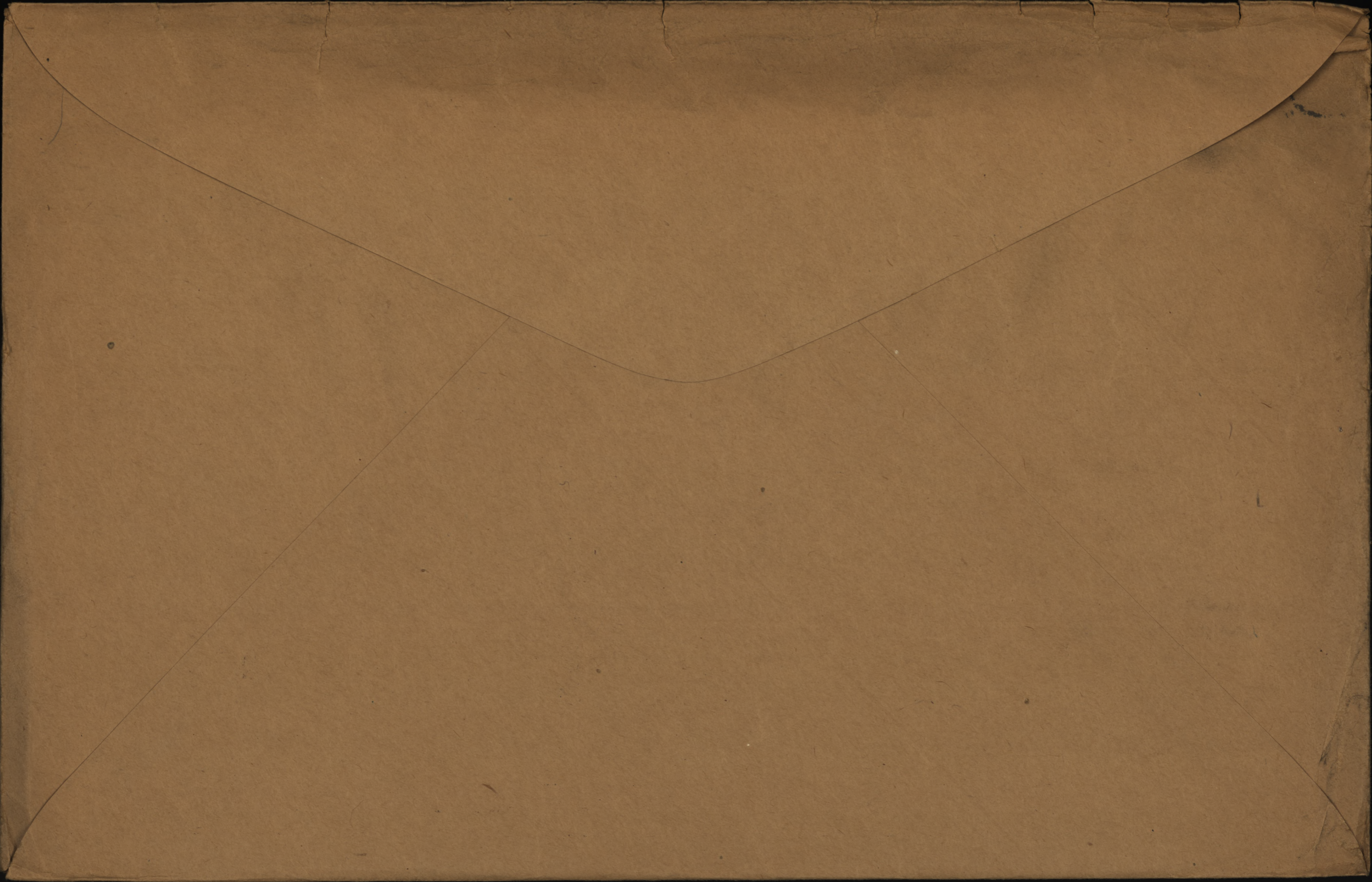
O. C. H. Q. DET. C. O. C.

REGIMENTAL DOCUMENTS

NAME *S. Sgt. Mc Carthy* *Edmund* REGT. NO. *2776865* UNIT *L.C.C.* H. Q. FILE NO.

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)					I DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
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)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					<i>Remot</i>
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)				03154	
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
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)					
<i>M.F.W. 125-</i>					
<i>Miss</i>					





CANADIAN ORDNANCE CORPS

M. F. W. 71-500M.-6-1A

1772-30-96L

NAME *McCarthy* *Dutton Edmund*

REGIMENTAL NO. *2776865* RANK *Sergeant*

ENLISTED AT *Ottawa* PROMOTIONS, &c. AND DATE

DATE *June 22, 1918.*

IF SERVED PREVIOUSLY, STATE UNIT, &c.

MARRIED, WIDOWER, OR SINGLE *married*

NEXT OF KIN *Emma McCarthy* RELATIONSHIP. *wife*

ADDRESS OF *Britannia Bay, Ont.*

ASSIGNMENT OF PAY \$ C. TO

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT *Entitled*

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

CASUALTIES, &C.

NATURE E.G. ABSENCE, PROMOTION, &C.	PART II. D. O.		REMARKS IF IN HOSPITAL, NOTE NAME, &C.
	Nó.	DATE	
Transferred from P. F. to the strength of the C. F.	2	11. 1. 19	
Promoted Cpl	60	16. 9. 18	
Promoted Sgt	70	24. 10. 18	
Promoted S Sgt.	120	16. 7. 19	
Discharged	172	17. 8. 19	

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 2776865 Rank S/Cpl Name MCCARTHY DALTON E.
(Name in full in block letters.)

Age 31 Address after discharge Britannia Bay - Out.

Unit or Corps COE, CEF Birthplace Ollivier Out.

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

1. GENERAL DESCRIPTION:

Physique Good Weight 132 lbs. Height 5 ft. 7 1/2 in. Colour of Eyes Blue
 Nutrition Good
 Pulse 72 Regular
 Condition of arteries Normal
 Vision Rt. 6/6 Left 6/6
 Hearing (conversational voice) Rt. 24 ft. Left 20 ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin.)

mole on left cheek

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No.") (Subjective evidence may be sufficient in certain cases.)

Nervous System No Genito Urinary System No Cardio-Vascular System No
 Special Senses No Integumentary System No Respiratory System No
 Disturbance of mentality No Muscular System No Digestive System Yes
 Osseous and Joint System No Any other general condition No

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

typhoid fever when seven years of age.

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS.

4. THIS SECTION FOR USE OVERSEAS—

Examined at..... (Overseas)

Date Signed M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

5. THIS SECTION FOR USE IN CANADA—

Examined at *Albion*..... (Canada)

Date *21-8-19*..... Signed *William J. Cal.*..... M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature *Wm. Cal.*.....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET. ^{C.O.C.} 2776865

1. Surname McCarthy ²⁷⁷⁶⁸⁶⁵ Christian name Dalton Edmund
 2. Number of report for service or claim for exemption according to Postmaster's Receipt or schedule
 3. Consecutive number on schedule of men reporting for service (if he appears on it)
 4. Address (including street and number if any) Britannia by dent

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 18th day of Nov 1918, by the undersigned medical board sitting at Ottawa dent.

5. Age as stated 30 Years 4 Months. 6. Apparent age 30 Years 4 Month
 7. Height 5 Feet.....Inches. 8. Weight 136 Pounds.

9. Chest measurement { Minimum 34 Ins. 10. Complexion med { Eyes Blue
 { Maximum 36 Ins. { Hair ABrown

11. Physical development Good. { Good Fair Poor 12. Smallpox marks none

13. Number of vaccination marks { Right arm 0 14. When vaccinated last child hood
 { Left arm 21

15. Distinctive marks and marks indicating congenital peculiarities or previous disease Nil.

16. Slight defects but not sufficient to cause rejection
 The man denies having had { Rheumatism, Epilepsy, We find { Rheumatism Epilepsy
 { Tuberculosis, Syphilis, no evidence { Tuberculosis, Syphilis
 { Nervous or Mental disorder. Asthma. of past { Nervous or Mental disorder. Asthma
 (Strike out disease admitted or suspected)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category

17. (a) Vision. R. 1.15 L. 6.15
 (b) Hearing. R. 7 L. 7
Anderson President.
W. S. ... Member.

Signature of Man McCarthy

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
		M. O.			M. O.
		M. O.			M. O.
		M. O.			M. O.

Joined 25th day of November 1915 at Ottawa Ontario

Joined on enlistment	CORPS	REG'TL NUMBER	HABITS	DATE
	<u>40 Det 206</u>	<u>2776865</u>		
Transferred to.....				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT

N.B.—This sheet is 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.

If raised in category, record category in a square. The M. O. will initial and date.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 3

M.F.B. 465.
200M-6-18.
1772-39-950.

NAME OF SOLDIER D. E. MCCARTHY,

REGIMENT C. O. C. C. CEF.

RANK SGT.

No. 3776865

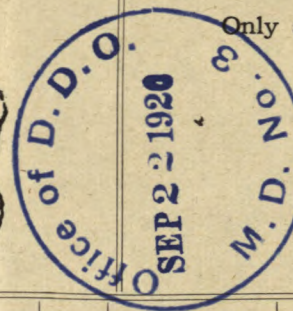


INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.



Condition on first Examination	Date	Amalgam	Temporary Filling (a) G. F. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhea	Synthetic Porcelain	Extracting	DENTURES			Gold Clasp	Gold Filling	CROWNS		Bridge Work	OPERATOR	Military District	REMARKS	
												U	L	P			Gold	Porcelain					

I hereby acknowledge having received the above treatment.
 (SIGNATURE)..... D. E. McCarthy, Sgt.

Completed Feb 1921
Stewart CAPTAIN
 DISTRICT DENTAL OFFICER, M.D. NO. 3

2.4.14.18.21.25.32
 31
 6.7
 27
 18 to 21
 13 to 17
 12

+ Part Lovenzittel
 2 drops
 19 June

July Amputation
 74 Spinal
 Ottawa

LIBRARY OF THE
MUSEUM OF NATURAL HISTORY
LONDON

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 3

NAME OF SOLDIER McCarthy

REGIMENT C-6-8

RANK Sgt

No. 2776865-



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show :

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

Date	Amalgam Temporary Filling (a) (G. F. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhea	Synthetic Porcelain	Extracting	Dentures			Gold Clasp	Gold Filling	Crowns		Bridge Work	OPERATOR	Military Dist.	REMARKS
										U	L	P			Gold	Porcelain				
NA 22									9 1.5-12.15 4.7/1920 30											Car-# 27-28.

Leon M. ...

INSTRUCTIONS

1. On the left side of the page, the position of certain marks is indicated by a diagram in red ink.

2. On the right side of the page, a report form is provided for use.

Only such marks as are made on the left side will show.

3. Check on the right side of the page.

4. Position on the left side.

5. Position on the right side.

XXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXXXX

XXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXXXX

MADE IN CANADA

DEPT. OF DEFENSE
WASHINGTON, D.C. 20301
FORM 100-10 (REV. 1-57)

Perm. Force - Belame C.E.F. 22.6.18 Ro. 795
 Fill in only.—Unit, Number, Rank and Name.

M. F. W. 54. (A. F. B. 10s.)

500M.—9-16

H. Q. 1772-39-9.0.

Casualty Form—Active Service.

CANADIAN ORDNANCE CORPS

Unit, Regiment or Corps

Regimental No. 2776865 Rank S. Capt. Name McCarthy Dutton Edmund

22.6.18

Enlisted (a) 25.11.15 Terms of Service (a) C.E.F. Service reckons from (a) 25.11.15 22.6.18

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) Clerk

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				
22.6.18	C.O.C. P. 4.	Transferred from P. 4. to strength of the C.E.F.	Ottawa	22.6.18	D.O. 2 d/11.1.19 Resingled Captain of O. C. H.Q. DET. C. O. C.
22.6.18	C.O.C. C.E.F.	Promoted Corpl	"	"	D.O. 60 d/16.9.18 Resingled Captain of O. C. H.Q. DET. C. O. C.
30.9.18	C.O.C. C.E.F.	Promoted Sergt	"	30.9.18	D.O. 70 d/24.10.18 Resingled Captain of O. C. H.Q. DET. C. O. C.
16.7.19	C.O.C. C.E.F.	Promoted S. Sgt.	"	16.7.19	D.O. #120 d/16.7.19 Resingled Lt Col of O. C. H.Q. DET. C. O. C.

(1) 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.

(2) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

Casualty Form - Active Service

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. 8. 19	COC E27	Discharged	Ottawa	18.8.19 DD 17² ^{Sept 9. 1919}	A. H. Anderson 1 Lt Col OCHA DER COC

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 2776865 (Rank) S. / Sgt.

Name (in full) McCarthy Dalton Edmund listed in
the Canadian Ordnance Corps

CANADIAN EXPEDITIONARY FORCE at Ottawa Ont. on the 22

day of June 19 18

HE served in Canada

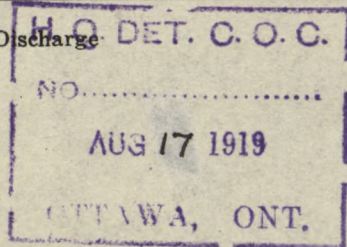
and is now discharged from the service by reason of Demobilization.
Medical Unfitness.

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

Age 31 yrs 2 months Marks or Scars Mole
Height 5 ft 7 1/2" on left buttock.
Complexion Dark
Eyes Blue
Hair Dark

Dalton Edmund McCarthy
Signature of Soldier

Date of Discharge



Issuing Officer

A. H. Anderson

Rank

Lt Col

Date 18th August 19 19

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.

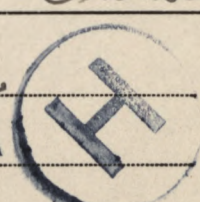
CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

Name of Soldier		Rank	
Service Number		Regiment	
Date of Discharge		Place of Discharge	
Reason for Discharge		Remarks	
Signature of Officer		Signature of Soldier	
Date		Place	

This certificate is to be used by the soldier to obtain his discharge pay and to be presented to the appropriate authorities in the country to which he is being discharged.

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

1. No.	2776865		
2. Rank	S. / Sgt		
3. Name	McCarthy Dalton Edmund		
4. Unit	HQ Det C.O.B.		
5. Date of Discharge	17. 8. 1919	Place	Ottawa Ontario
6. Reason for Discharge	Demobilization 		
7. Authority	R.O. 1420		
8. Proposed Residence after Discharge	Brettania Bay Ontario		
9.	CERTIFICATE TO BE SIGNED BY SOLDIER. I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. 39		
	<i>Dalton Edmund McCarthy</i> Signature of Soldier.		
10.	CONFIRMATION. The discharge of the above named man is hereby confirmed. Place <i>Ottawa Ontario</i> Date <i>18-8-1919</i>		
	Signature <i>A. Anderson Lt Col.</i> (O.C. Discharging Unit.)		

SHORT FORM
 PROCEEDINGS ON DISCHARGE
 (Demobilization)

1.	No.	27786		
2.	Rank	Private		
3.	Name	Theodore Walter Brown		
4.	Unit	Co. 2, 1st Div., 1st Army		
5.	Date of Discharge	Place	1919 Ottawa, Ontario	
6.	Reason for Discharge	Physical disability		
7.	Authority	1st Army		
8.	Proposed Residence after Discharge	1214th Street, Ottawa		
9.	CERTIFICATE TO BE SIGNED BY SOLDIER			
	I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. 3			
	_____ Signature of Soldier			
10.	CONFIRMATION			
	The discharge of the above named man is hereby confirmed.			
	Place	Ottawa		
	Date	1919		
	Signature	_____ (O.C. Discharging Unit)		

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Minuta Form W. 23
or Particulars of Recruit	Minuta Form W. 133
Field Conduct Sheet	Minuta Form W. 178 or A.F.B. 132
Casualty Form	Minuta Form W. 64 or A.F.B. 108
Last Pay Certificate	Minuta Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Minuta Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 48
Dental History Sheet	Minuta Form B. 465
Medical Report	M.F.W. 123 or D.M.S. 1375
Regimental Conduct Sheet	Minuta Form B. 293
Company Conduct Sheet	Minuta Form B. 292a

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Certificate that missing documents are unobtainable	
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Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report.....	M.F.W. 129 or D.M.S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a