DUPLICATE. Band 12/4/16

115th Battalion, C. E. F.

ATTESTATION PAPER.

No. 742762

Folio. 24.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS)
1. What is your surname?	McKnight
1a. What are your Christian names?	Frederick Arnold
1b. What is your present address?	Oak Bay Char. Co. N.B.
2. In what Town, Township or Parish, and in what Country were you born?	Oak Bay Char. Co. N.B.
3. What is the name of your next-of-kin?	Ruth M. McKnight
4. What is the address of your next-of-kin?	Oak Bay Char. Co. N.B.
4a. What is the relationship of your next-of-kin?	Mother
5. What is the date of your birth?	June 13th 1893
6. What is your Trade or Calling?	Farmer
7. Are you married?	no
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? If so, state particulars of former service.	no
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, Frederick Arnold McKnight 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.

F A McKnight (Signature of Recruit)

Date Feb 22nd 1916 D R Smith (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Frederick Arnold McKnight 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.

F A McKnight (Signature of Recruit)

Date Feb 22nd 1916 D R Smith (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 St John N.B. this 22 day of Feby 1916

C F Sanford (Signature of Justice)

M. F. W. 23
200 M—9-15
H. Q. 1772-39-841

Description of McKnight Frederick A on Enlistment.

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

Waist 31

Height..... 5 ft. 9 ins.

Chest measurement.
- Girth when fully expanded..... 37 1/4 ins.
- Range of expansion.. 2 1/2 ins.

Complexion.... Ruddy

Eyes..... Blue

Hair..... Brown

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

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.)

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 declares that he is not subject to fits of any description.

I consider him*.... Fit.....for the **Canadian Over-Seas Expeditionary Force.**

Date.. 22 Feby.....1916 ... Wm. Warwick P.....

Place.. St John NB.. ..... Capt.....
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.

Frederick A McKnight 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.

[signature] Lt. Col.
O. C. 115TH OVERSEAS BATTALION, C.E.F. ..(Signature of Officer)

Date.. MAR 30 1916.....191 .

Proceedings of Court of Inquiry or on men Reported Missing on Active Service.....

Attestation Papers..... 2

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet 1

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet..... 2

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name Mc. Knight, Frederick Arnold

Regt. No. 74276 Rank Pte

Corps 115th O. Bn. C. E. F.

Medically Unfit.

24243

3
2-29
2-29

M. F. W. 62.
50M.—9-16.
H Q. 1172—39-935.

No. 742762 RANK Pte. NAME McKnight G. A.

T. O. S. UNIT 145th Battalion

Trans. from 115th Bn.
21-7-16. D.O. 176 of 28-7-16.

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
July 21	July 31	N		
Aug 1	Aug 28	V	Discharged M.U. 28-8-16	D.O. 202 of 28-8-16
			a/c closed by payment 1'8'	

UNIT SAILED
SEP 25 1916

649-M-7933

CARD NO.

SURNAME. Mc. Knight,

S.O.S. Dis. 28-8-16.

CHRISTIAN NAMES Frederick Arnold,

FOLL. 5.

REGL. NO. 742762 RANK Pte.

UNIT 115th. Batt

FORMER CORPS Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Mc Knight Mrs. Ruth M.

RELATIONSHIP TO SOLDIER mother

ADDRESS Oak Bay, Charlotte Co. N.B.

COUNTRY OF BIRTH Canada, Oak. Bay N.B. DATE June 13th. 1895.

PLACE OF ATTESTATION St. John. N.B. DATE Feb. 22nd. 1916

Sailed from Halifax per SS "Olympic" 23/7/16. 496

L. L. 94504. M. & D. 6512.

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED SINGLE yes, WIDOWER

TRADE OR CALLING Farmer, RELIGION Church of England,

DESCRIPTION.

APPARENT AGE not YEARS stated MONTHS

HEIGHT 5 FEET 9 INCHES

CHEST MEASUREMENT 37 1/4 INCHES EXPANSION 2 1/2 INCHES

COMPLEXION ruddy, EYES blue, HAIR brown,

DISTINGUISHING MARKS

Nil.

MEDICAL EXAMINATION. PLACE St. John, N.B. DATE Feb. 22nd. 1916,

No. 742762 RANK Pte NAME Mc. Knight Fred A.

T. O. S. 12-2-16 UNIT 115th Battalion C. E. F.
DO 47 of 23-2-16

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1916 Feb. 12	1916 Feb 29	✓		
Mar		✓		
Apr.		x.	Cheque adv pay april redeposited	april paylist.
May.		—		
June.		✓		
July 1.	July 20	L.	M. U.	July [illegible] UNIT SAILED JUL 23 1916

a/c carried forward. N

To be made out in duplicate.

DMM

H.Q. 54-21-23-53

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.

---

(1) Name of Overseas Unit which Soldier joins: 115th O/S Battalion C E F.

(2) Regimental Number: 742762.

(3) Full Name of Soldier: M'Knight - Fred Arnold

(4) Place of Birth: Oak Bay Charlotte Co N B.

(5) Are you married, or not? No

(6) If married, state,
(a) Full name of your wife: No

(b) Present Postal Address: Oak Bay Charlotte Co N B.

(7) Are you a widower? No

(8) Have you any children? No

If so, give number of boys and girls: —

Also their names and ages: —

M. F. W. 67.

200M.—3-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes.

If so, state name and address Mc Knight - Robert - Oak Bay Charlotte Co N B.

(10) Is your Mother alive? Yes.

If so, state name and address Mc Knight - Ruth Ann Oak Bay Charlotte Co N.B.

(11) If your Mother is a widow.....

Are you her sole support, or not?.....

(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.

.....

.....

(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.

.....

.....

.....

(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.

.....

(15) Are you insured? No

If so, in what Company? —

Have you made arrangements for payment of your Insurance premium —

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

Date May 16 - 1916

[illegible] Lt. Col.
Officer Commanding.
D.C. 115TH OVERSEAS BATTALION C.E.F.

DEPT.
MILITIA & DEFENCE
OCT -1 1916
CANADA

MEDICAL HISTORY OF AN INVALID.

1.—Station. Valcartier Camp

2.—Regiment of Corps. 115th O.S. Baltn. C.E.F.

3.—Regimental No. and Rank. 742762 Pte

4.—Name. Frederick Arnold McKnight

5.—Age last Birthday. 21

6.—Enlisted on Feb. 12/16 at St. Stephen, N.B.

7.—Former Trade or Occupation. Farmer Date 7/19/16

8.—General remarks on his :—

(a) Conduct. Good

(b) Habits. Temperate

(c) Temperance. Moderate

(For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

9.—Service.	Years.	Days.
	PERIODS. From	To
115th Baltn. C.E.F.	12/2/16	July 19/16

10.—Disease or Disability. Traumatic Malformation L. Knee

11.—Date of origin, cause, present condition and whether the same is the result of service or climate. 1913 — Injury No

Some limitation of movement L. Knee

Has it been aggravated by intemperance, vice or misconduct? No

2

Carded 7-10-16 No Mo

J. 27-12-54

M. F. B. 227.
20m.—10-15.
H. Q. 1772-39-117.

[OVER]

12.—In gunshot wounds, or other injuries, state how caused ; whether received in action or in Field Service, and at what place, and whether on or off duty. If not received in action, was a Court of Inquiry held ?

not applicable.

13.—In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

not applicable

14.—If aggravated, though not primarily caused by his service as a soldier, explain how it has been so aggravated.

no

15.—Is the disability permanent ? If not, state its probable duration. To what extent will it prevent his earning a full livelihood ?

yes

16.—Full particulars of medical treatment of case up to date of invaliding.

none

17.—If previously proposed for discharge on medical grounds, state the date, the disability, for which recommended for discharge, and the cause of remand of Corps.

not previously proposed

18—State if for discharge on account of unfitness for service.

Yes

E. Stock Capt Ame

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

(In which it should be stated how far the Board concurs in the above Report.)

The Board concurs and recommends his discharge as medically unfit,

Signatures :— Walter L Barbour Capt Ame President.

Station Valcartier — Ramer Asst. Capt. Ame

Date 19 7/16 — C J Garofalo, Capt AMC — Members.

Date 19 7/16 — [illegible]

Assistant Director of Medical Services.

Approved.

Date 5.10.16 — Oscar A Carmon Capt

Director of Medical Services.

[OVER]

Carded 7-10-16. [illegible]

(At Station or Hospital where finally disposed of.)

Station and Hospital } ..... Arrived from } .....

Date .....

If admitted.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
Index No.	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

Date of final Medical Board or decision. } .....

Administrative Medical Officer.

Militia Form B. 227.
20m.—10-15.
H. Q. 1772-39-117.

DETAILED MEDICAL HISTORY OF INVALID.

Station

Corps

Regimental No. Rank

Name

Disability

Date

Hospital or Station transferred to for final disposal. }

Date of final disposal }

How finally disposed of }

The original Report is invariably to accompany the discharge documents of invalids.

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 115th. O.S. Battalion, C.E.F.

Regimental No. 742762 Rank Private Name McKnight, F.A.

Enlisted (a) 22-2-16 Terms of Service (a) C.E.F. D of W Service reckons from (a) 22.2.16

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)

Report: Date	Report: 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.
28-7-16	145th Bn	T.O.S on transf from 115th Bn	St John N.B.	21-7-16	DO 176 of 28-7-16
31-8-16	145th Bn	S.O.S. "Medically Unfit"	Valcartier Camp.	28-8-16	Aug. pay list (DO. 202 of 28-8-16)

H

D. Guthrie
Capt.
for D of R

(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.

[P.T.O.

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				

762

B.

MEDICAL HISTORY SHEET.

Surname McKnight *Christian Name* Frederick Arnold

Examined { on 22nd day of February 1916 / at St John NB

Birthplace { City or Town Oak Bay / County Charlotte Co

Apparent age 21

Trade or occupation Farmer

Height 5 Feet 9 Inches.

Weight 155 Lbs.

Chest measurement { Minimum 34 3/4 inches. / Maximum expansion 37 1/4 inches.

Physical development good

Small-Pox Marks none

Vaccination Marks { Arm Right. Left. / Number

When Vaccinated last never

(*a*) Marks indicating congenital peculiarities or previous disease none

(*b*) Slight defects but not sufficient to cause rejection

Teeth good

Vision Rt D20 Lt D20

Approved by Wm. Warwick P.

Rank Capt. M.O.

Date	Fit or Unfit	Examined for Re-engagement,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
		M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
8/7/16		Wm. Warwick P. M.O.
		M.O.
		M.O.

Enlisted on 12th *day of* February 1916 *at* St. Stephen, N.B.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment		742762		22/2/16
115th Overseas Battalion, C. E. F.				
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
V Stanley	18/7/16	Traumatic Mal-formation Knee	Discharged Unfit

[signature]

Lieut. Colonel
A. D. M. S. Valcartier Camp, P. Q.

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.

M. F. B. 313.

100M.—1-15.
H. Q. 1772-39-439.

Surname McMurphy Christian Name Fredrick Arnold

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.
St John NB	22/2/15	16	4	16	17	4	16	Measles	1	Transferred to General Public Hospital	H. E. Bishop Capt
"		5	6	16	8	6	16	Bronchitis	3	Mild	Crutchley
Valcartier	JUN 20 1916										
Valcartier Camp Hospital		AUG 17 1916			AUG 22 1916			Trauma. Malformation knee	6	To Unit - awaiting discharge	R.A.B. Capt. Major, O.C. A.M.C. Training Depot No. 4.