

P. Arthur

7up 2784

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name?..... *Patrick Plogius Phelan*
 2. In what Town, Township or Parish, and in what Country were you born?..... *Port Arthur Canada*
 3. What is the name of your next-of-kin?..... *Matthew William Phelan* *Partner*
 4. What is the address of your next-of-kin?..... *136 South Algoma St Port Art.*
 5. What is the date of your birth?..... *17 November 1892*
 6. What is your Trade or Calling?..... *Chauffeur*
 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?..... *no*
 10. Have you ever served in any Military Force?..... *3 yrs. 96th U.S. Reg.*
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*
- *P. Phelan* (Signature of Man).
..... *E. Fowler* (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Patrick a phelan*, 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.

..... *P. Phelan* (Signature of Recruit)
Date..... *February* 1915..... *E. Fowler* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I,..... 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)

..... *P. Phelan* (Signature of Recruit)
Date..... *February* 1915..... *E. Fowler* (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..... day of..... *February*..... 1915

..... *[Signature]* (Signature of Justice)

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

..... *[Signature]* (Approving Officer)
DIV: AMM: PARK.

Description of *Patrick Aloysius Phelan* Enlistment.

Apparent Age *22* years *4* 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 *4 1/4* ins.

Chest measurement { Girth when fully expanded *34* ins.
 Range of expansion *4* ins.

Complexion *Medium*

Eyes *Blue*

Hair *Brown*

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

Small scar on palmar surface of middle finger of left hand

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 Over-Seas Expeditionary Force.

Date *13 February* 1915

Place *Soranto*

R. W. Taylor
A. A. M. 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.

Patrick A. Phelan 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.

P. Boussette (Signature of Officer)
L. Col. DIV: AMM: PARK.

Date *MAR 1 1915* 1915

REGIMENTAL DOCUMENTS

NAME Phelan Patrick Aloysius REGT. NO. 2784 UNIT _____ H. Q. FILE NO. _____

S

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

**M. F. W. 2505
REFERENCE**

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

DESERTION

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)

286
2

1
1

4
misc
19122

M

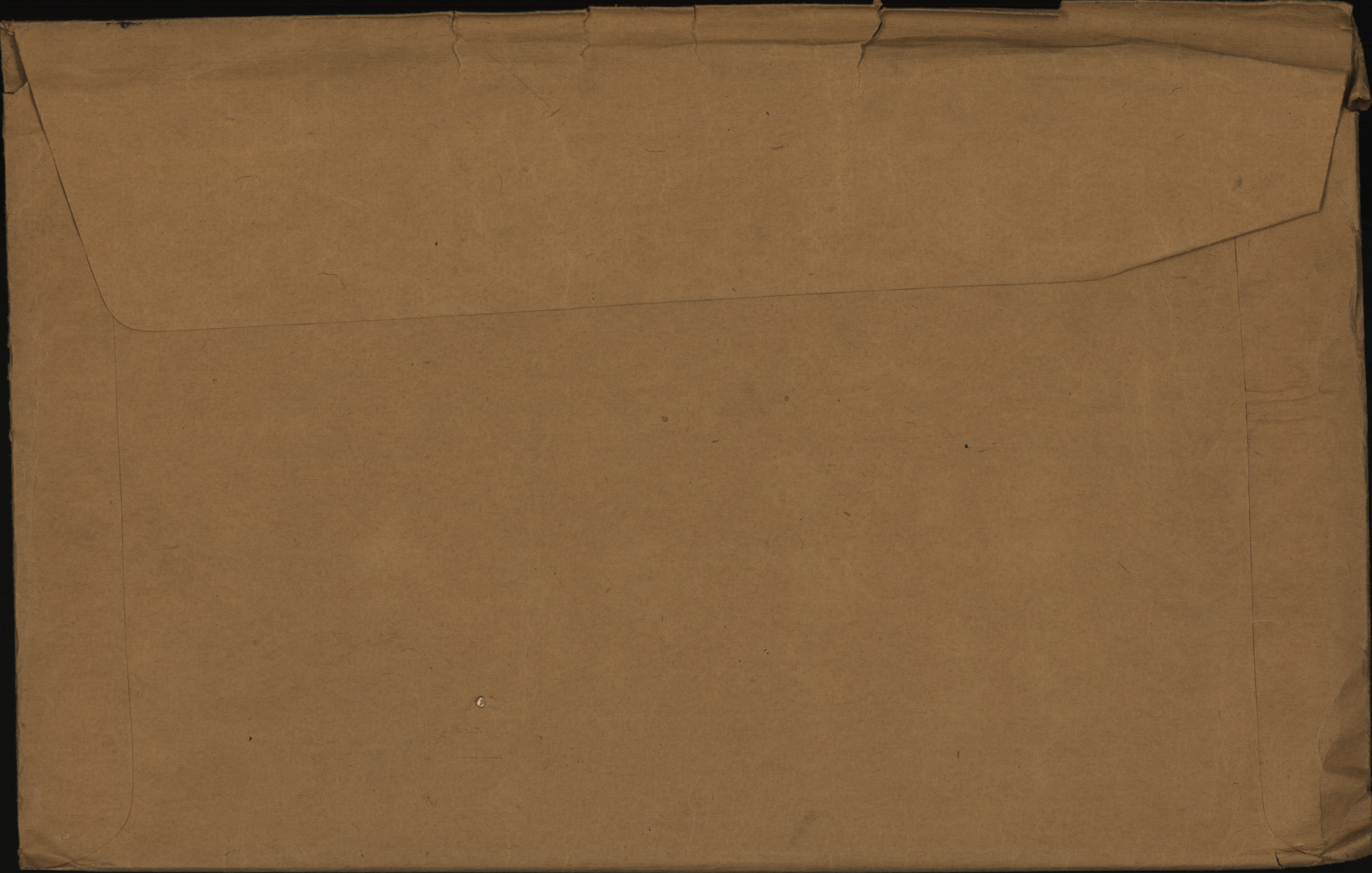
Deceased
11-5-60

6109

21-26
21-26
6 26

3

H



R.R.

B
X

Number ~~5784~~ Rank *Plé*

Surname *PHELAN*

Christian Names *Patrick Aloysius*

Unit *C.A.S.C.* Theatre of War *France*

Date of Service *29-1-16*

Remarks

Latest Address *South Raynham*

Fakenham: Norfolk

Roll No. *England*

Page 2581

GA 13880

Resp

JUN 1 0 00

Name ^{at risk} PHELAN, P.A. ^{regain} Rank Pte.

Reg. No. 2784.

Unit No. 1. Canadian Cavalry Bde Ammunition Pk.

Next of Kin CANADA.

| 1946. | Movement | Place | Casualty | List No. | Notified N/K O. | W.O. List |
|----------|---------------------------------|-------|----------|----------|-----------------|-----------|
| Apr. 17. | No. 7. Can. Cav. Fld. Amb. | | Scabies | A102. | Ec. | |
| " | 19. Trans to 3rd Can. Div. Rest | Stat. | do. | A102. | | |
| " | 29 Rejoined Unit | | do | A236. | Ec | |

NAME

Phelan Patrick Aloysius

S. U. S. D. 8-7-1908
Aft. U. S. D. 771-10-19
Demoti
RWing ccc
Witly

RANK & No.

Pte.

2784-384

CORPS

Divisional Ammunition Park

Aft. U. S. D. 771-10-19
RWing ccc
Witly

ENLISTMENT, PLACE

Troy, Mo.

DATE

February 1915

FORMER CORPS

96th L. S. Regt

COUNTRY OF BIRTH

Canada Port Arthur Ont

NEXT OF KIN

Phelan Matthew William Father

ADDRESS OF NEXT OF KIN

136 South Algoma St
Port Arthur, Ont.

DISCHARGE, PLACE

DATE

of 15/5/15-79
7.

REMARKS:



Surname

Christian Name or Names

Reg. No.

Phalen P.

2784

Rank Unit Co. Troop Batty.

Pte. 2nd Div. Am. I.R.

Hospital

Date of Admission

Diagnosis

Chancere. - yom

(1) Later Diagnosis (if changed)

(2)

(3)

Scabies

Additional Diagnoses, if more than one state present

To Unit. 29.4.16.

DISPOSITION (underline which)

Discharged to Duty

Date

6-8-15

Admitted Tent. St. Martins

Transferred to

Hosp.

1.7.15

Hosp.

9.6.15

#7 Can. Id. Amb.

Hosp.

17.4.16

Trans to 3rd Can Div. Rest Station

Hosp.

19.4.16

Discharged Invalid, England

Returned to Canada

Died

REMARKS

W.H.R. 2^v 7. 15

" 6-8-15

" 13-6-15

" 9.5.16 A.102

" 26.5.16 A105

My

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.F.C. London.

P.T.O.

2073

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

Disch.

Diagnosis.

1

2

3

4

5

6

7

Rank *PLC* Name **PHELAN Patrick Alogains** Reg'l No. **2784**
 Unit **2nd Div. Amn. Park** If in perm. Corps, }
 What Unit? } Married or Single **Single**
 Place and Date of Enlistment **Toronto, 13 February 1915** Place of Birth **Canada**
 Name and Address, Next-of-Kin **Matthew William Phelan**
136 South Algoma St. Port Arthur Relationship **Father**

Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship

Engineer

Discharge, Date and Place Reason Character

BC

| 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 | | | | |
| 2-7-15 | <i>Naup. List</i> | <i>Sut. for England "Meganitic" arrived in England</i> <i>Chaucer</i> | <i>St. Martin Plain</i> | <i>15.5.15</i> <i>25.5.15</i> <i>1.7.15</i> | |
| 9-8-15 | <i>2nd Div Amn Pk</i> | <i>Present with Unit</i> | <i>Sibgati</i> | <i>9.8.15</i> | <i>Norm Roll.</i> |
| 13-9-15 | <i>Sp of D.</i> | <i>Taken on Strength</i> | <i>Shorncliffe</i> | <i>11.9.15</i> | <i>PT II 86. & 8.</i> |
| 21-9-15 | <i>1/2 A.S.B. TO</i> | <i>Awarded. 3 days F.P. & 3 days pay</i> | <i>DO</i> | <i>21.9.15</i> | <i>Part II orders 93.</i> |
| 22-10-15 | <i>DO.</i> | <i>Awd. 1 day less F.P. Forfeit & 2 days pay.</i> | <i>DO</i> | <i>5.10.15</i> | <i>" " " 112</i> |
| 1-12-15 | <i>DO</i> | <i>Awd. forfeit. 49 days pay</i> | <i>DO</i> | <i>1-12-15</i> | <i>" " " # 151</i> |
| 28-12-15 | <i>Sp of D.</i> | <i>Struck off Strength</i> | <i>"</i> | <i>27-12-15</i> | <i>" " " 178</i> |
| 21-7-16 | <i>ORCCB. Sup. Cd.</i> | <i>Trans to 1st Can Cav Bde Amn Pk.</i> | <i>"</i> | <i>28-12-15</i> | <i>PT II 49.</i> |
| 9-5-16 | <i>C.L. Amn Pk</i> | <i>Adm # 7 Can Cav Hq.</i> | <i>Ambulance</i> | <i>17-4-16</i> | <i>C.L A102.</i> |
| | <i>AFB 103</i> | <i>Disembarked</i> | <i>Promu</i> | <i>29-1-16</i> | <i>L.R. 4559.</i> |

2784 Pte Phelan P.A

| 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 | | | | |
| 9.5.16 | C.L.A.M. Pks. | Trans #3 Can Div. Rest Station | | 19.4.16 | CLA102. |
| 16.5.16 | " | Rejoined Unit from above | | 29.4.16 | CLA106. |
| 31.5.16 | 1 C.C.B. or Sup Col | Absent from Duty Roll call & disobeying an order Sent #67 days 7 P.M. | In the field | 13.5.16 | PII 42 |
| 14.7.16 | " | Trans to C.A.S.C. Pool | " | 1-7-16 | PII 50.48. |
| 14.7.16 | Pool. | T.O.S. from C.C.B.C. } staff for B.M. T. Depot | " | 2.7.16 | PII D028 |
| 21.10.16 | C.A.S.C. Pool. | Trans to No 2 Amm Sub PR | Field | 8.10.16 | PII 0 No 67. |
| 22.10.16 | 90 No 2 Am. S-PR | T.O.S. of 2. C.A.S.C. Pool. | Plt | 9.10.16 | PII - 55. |
| 7.11.17 | " " | S.O.S. to case Pool. | Field | 25.10.17 | PII " 53. |
| 7.11.17 | case Pool. | T.O.S. from 2nd C.A.S.P. | " | 26.10.17 | " " 77. |
| 26.3.18 | 4 C.A.S.P. | T.O.S. from C.A.S.C. Pool | Plt | 14.3.18 | PII 114 No 35 Pool. |
| 22.4.18 | 72 Edn. Plt | T.O.S. on trans from 4th C.A.S. Plt | " | 14.4.18 | PII 45. |
| 27.4.18 | 4 P & Sub Plt | In confinement awaiting trial 23.3.18 Trial directed by 74 C.M. Drunkenness 23.3.18 Sentenced to 90 days & P.M. 1 - Confirmed by Gen. S. A. Williams | " | 5.4.18 | PII 16. |
| 24.6.18 | 72nd Bn | S.O.S. to Can. Eng. Reins Pool | Field | 15.6.18 | PII 79. 467 C.E.R.P. of 26/6/18. |
| 5.10.18 | C.E.R.P. | S.O.S. to 12 Bn C.E. | " | 20.9.18 | PII 101 9 12 Bn C.E. 22/9/18. |
| 27.3.19 | 12 Bn. C.E. | Permission to marry | " | 27.3.19 | PII 14 |
| 2.5.19 | 12 Bn. C.E. | Leave from 12 Bn C.E. | " | 15.4.19 | PII 12 Bn C.E. D.O. 19/26/19. |

29-1-16
14-4-18

3

15

2nd Page Records.

Rank *Pte* Name *Phelan Patrick Alogajns* Reg'l No. *2784.*
 Unit *2nd Div. Amn Park.* If in perm. Corps, }
What Unit? Married or Single *Single*
 Place and Date of Enlistment *Toronto 13th February 1915.* Place of Birth *Canada.*
 Name and Address, Next-of-Kin *Matthew William Phelan*
136 Algoma St. Port Arthur Relationship *Father*
 Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship
 Discharge, Date and Place *British 26/8/19* Reason *1st Page Records Filed in Envelope.* Character

N/E. R.B. No. *24232*
 File No. *ENG. ON*
 Category

| 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. | | | | |
| <i>30-5-19.</i> | <i>H Wing to C.C. T.O.S. from C.C.R.I.</i> | | <i>Witley</i> | <i>26-5-19.</i> | <i>D.O. 49.</i> |
| <i>14-7-19</i> | <i>R " T.O.S. from H wing</i> | | | <i>3-7-19</i> | <i>. 81</i> |
| <i>17. 7. 19.</i> | <i>C.C.R.D. S.O.S. to H wing</i> | | <i>"</i> | <i>26.5.19</i> | <i>DD. 198.</i> |
| | | <i>Disch'd in B.D.</i> | | <i>8.7.19</i> | <i>n.p. 899</i> |
| <i>1. 10. 19</i> | <i>R Wing</i> | <i>SOS Disch'd in B.D.</i> | | <i>8-7-19</i> | <i>FD 7</i> |

W.S.B. Selassie

ARMY FORM B. 103.
CANADIAN RECORD OFFICE
 Westminster House,
 7, Millbank, S.W.
 11.9.15
 M. J. H.

Casualty Form—Active Service.

Regiment or Corps 2 DIV. AMM. PARK. to C.A.S. CTD.

Regimental No. 2784 Rank Pte Name Phalan, Patrick A.

Enlisted (a) 13/2/15 Terms of Service (a) DURATION OF WAR. Service reckons from (a) _____

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N.C.Os. } 9-JUL-1916
 K61

Extended _____ Re-engaged _____ Qualification (b) _____

| 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. |
|-----------------|-------------------------------------|---|--|-------------------|--|
| <u>27.12.15</u> | | <u>Transferred to</u> | <u>1st CANADIAN CAVALRY BRIGADE</u> | <u>Am. Park.</u> | <u>27.12.15 Pte 178 d/27.12.15 C.A.S. CTD.</u> |
| | | <u>(Routine Order 1196)</u> | | | |
| | | <u>Transferred to</u> | <u>1st Canadian Cavalry Brigade</u> | <u>Supply Col</u> | <u>1/12/15 File KG III/65 Part 2 orders d/21/1/16</u> |
| | | <u>Disembarked at</u> | <u>Rouen</u> | <u>29/1/16</u> | <u>J.R. 4559.</u> |
| <u>9/3/16</u> | <u>6th Can. Cav. Fld. Amb.</u> | <u>Scabies.</u> | <u>Admitted 9th B.C.F.A.</u> | <u>17/4/16</u> | <u>A 36 D.C.D. 70/15 ✓</u> |
| | | | <u>Discharged 3rd Can Div Field Hos.</u> | <u>19/4/16.</u> | |
| <u>6/5/16</u> | <u>O.C. Unit</u> | <u>Rejoined from Hosp.</u> | <u>Field</u> | <u>29/4/16</u> | <u>B213a D.C.S. 7017 ✓</u> |
| <u>20.5.16</u> | <u>O.C. Cav. Col. Bde. Sp. Col.</u> | <u>Sentenced to 7 days F.P. No. 1</u> | | | |
| | | <u>13-5-16 for when on active service, (I) absent from labour roll call. (II) disobeying an order.</u> | <u>Field.</u> | <u>13-5-16</u> | <u>B2069. Pt. 2 Orders 42-31-5-16</u> |
| | | <u>12-5-16.</u> | | | |
| <u>14.6.16.</u> | <u>O.C. Unit</u> | <u>Sentenced to 14 days SP hosl.</u> | | | |
| | | <u>for when on active service</u> | <u>Field</u> | <u>10.6.16.</u> | <u>B2069. Pt. 2 orders No. 46 d/30/6</u> |
| | | <u>(1) Absent from duty</u> | | | |
| | | <u>(2) Breaking out of guard whilst under close arrest.</u> | | | |

(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, Shoening 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 | | | | |
| 28/6/16 | O.C. Unit. | Transferred to C.A.S. Pool. | Field. | 1-4-16 | Ann. P.A.O. aas. File K 8 5009/2. |
| | | Taken on strength of 181 Canadian Cavalry Bde Supp Column from 1st Can. Cav Bde Amm. Park. | Field. | 1-12-15 | Par 2 orders No 19 21-4-16. Amm. File 111/65. |
| 1/7/16. | A.A.C. Cav Section | Taken on strength of C.A.S. Pool on transfer from 1st Can. Cav Bde Supply Column | Field | 2/7/16. | K.E. 5009/2. Pt II order No 28. dt 14/7/16. |
| 17/8/16 | O.C. Base M.T. Depot | Sentenced to forfeit 10 days pay and 14 days C.B. for when on A.S. (1) Drunk in town 9/8/16 (2) Absent off pass from 3.0 pm until apprehended by the M. P. in town about 7.0 pm. 9/8/16 | Field | 11/8/16 | Broleg. Pt II order No. 33 dt 21/8/16 |
| 6/10/16. | O.C. Town Troops. Rouer | Sentenced to forfeit 5 day pay for when on "A.S" absent from ex training about 3.30 pm. 4/10/16 until reporting himself to the M. P. at 11. Pm. 4/10/16. | Field | 5/10/16 | Broleg. Pt II order No. 62. dt 10/10/16 |
| 14-10-16. | 2nd C.A.S. Park | Trans to 2nd Can. Amm. Sub Park as Reinforcement | Field | 8-10-16 | Broleg. Pt II order No. 67. dt 21-10-16 |
| do. | do | Taken on strength | No. 2 C.A.S. | 9-10-16 | B213a Pt. II ord 55 dt 22-10-16 |
| 7-12-16 | do. | Sentenced to 28 days. F.P. No. 1 for when on Active Service Drunk in the town of Amers | | 1-12-16 | B2069. Pt. 2 order 79 21.12.16 |
| | | | | 22-11-16 | |

Casualty Form—Active Service.

Regiment or Corps 2 CASPK

Rank Pte Surname Phelan Christian Name PA

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... | | | |
| <u>22.3.17</u> | <u>2 CASPK</u> | <u>Sentenced to 14 days F.P. No. 1 for broken on active service</u> | | <u>16.3.17</u> | <u>B. 2069</u> |
| | | <u>Absent from parade</u> | | <u>15.3.17</u> | <u>Pl. 2 order</u> |
| <u>4.8.17</u> | <u>do.</u> | <u>Granted leave</u> | | <u>28.7.17</u> | <u>B213a Pt 2 ord 44 11/17</u> |
| <u>11.8.17</u> | <u>do.</u> | <u>Rejoined from leave</u> | | <u>10.8.17</u> | <u>B213a Pt 2 ord 42 29/17</u> |
| <u>27.10.17</u> | <u>do.</u> | <u>Reposted to C.A.S.C. Pool.</u> | | <u>25.10.17</u> | <u>B213a Pt 2 ord. AAG. Pt 2 ord.</u> |
| | <u>do.</u> | <u>2 O.S. C.A.S.C. Pool. on reposting from No 2 Cdn Arms Sub Sqn.</u> | | <u>26.10.17</u> | <u>B213a AAG.</u> |
| <u>29.10.17</u> | <u>C.C. Reinf Camp</u> | <u>Arrived</u> | <u>C.C.R.C.</u> | <u>29/10/17</u> | <u>PHO 77 dt 7.11.17</u> <u>N.R. (4)</u> |

(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, &c.
 (6228) W. 13863/M1477 2,400,000 1/17 McA & W Ltd Forms B./103/4 (E. 886) **P.T.O.**

2784 Phelan P.A.

| 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 | | | | |
| 21. 11. 17 | OC. C.C.R.C. | 20. Cdn Corps S. Col. | Field | 21. 11. 17 | NR 13 K.R. 11657/18. 16/11/17 |
| 16. 3. 18 | A.A.G. | Posted to 4 th Cdn Amm Sub Park as Recruit | " | 13. 3. 18 | B213a - Pt. 20. 35 of 26. 3. 18 |
| 16-3-18 | 4 C.A.S.P. | T.O.S. of Unit as reinforcement from C.A.S.C Pool. | | 11/3/18 | B203a - K.R. 11657/18. d/16-11-17 Pt 20. 2d. 11 of 26-3-18 |
| | A.A.G. | Struck off strength of No 4 Cdn. Amm. Sub Park on being transferred to 72 nd Canadian Infantry Battalion | | 13/4/18. | K.E. 25065. W.O. letter 115/Hqn No 1103A. 6-2-6(5) of 16-6-16 Pt 2 Ord. No. 15 of 1918. |
| | | S.O.S 72 nd Batta | | 14. 4. 18. | Sub N 625065. Pt 20. 45 of 22. 4. 18. |
| 15. 4. 18 | C.C.R.C. | Arrived C.C.R.C. | Field | 15. 4. 18. | NR. 421. |
| 18-4-18 | O.C., No. 4 Jan. Ammuni- -tion Sub Park. | In confinement awaiting trial 23-3-18. Tried and convicted by F.C.C.M. of When on active service Drunkenness, 23-3-18, and sentenced to 90 days F.P. No. 1. | | 5 4 18 | B. 2069, and Pt. 2 O. of No. 4 Can. Amm. Sub Park No. 16 d/- 27-4-18. |
| 20. 4. 18. | C.C.R.C. | at 4 th Cdn Wing C.C.R.C. | Field | 15. 5. 18 | K 2 17/154. |
| 10. 6. 18 | 4 Div. wing C.C.R.C. | Placed under stoppage of pay to make good the cost of lost property lost viz. Shaving Brush value 3 ^{rs} . 1 Holdall value 6 ^{rs} . 1 Fork value 4 ^{rs} . 1 Spoon value 5 ^{rs} . | | 7. 6. 18 18. 5. 18 | B2069 Pt 20. 78 of 22. 6. 18. |
| 15. 6. 18 | A.G. G.O. | S.O.S 72 nd Bn on transfer to Canadian Engineers Reinforcement Det. | | 15. 6. 18 | Ign. Adv. 711 - ref file K.X. 29654. Pt 20. 79 of 24. 6. 18. |

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

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

Casualty Form—Active Service.

250M. 1-16.
H. Q. 1772-39-920.

Unit, Regiment or Corps _____

Regimental No. _____ Rank _____ Name _____
C. E. F.

Enlisted (a) _____ Terms of Service (a) _____ Service reckons from (a) _____

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. 38, 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. 38, or other official documents. |
|---------|--------------------|--|---------|--------------|--|
| Date | From whom received | | | | |
| 2/5/19. | C.E.F.D. | T.O.S from 12th C.E.F. and will be sailing in 14 days. Have 14-4-19 & 28-4-19 see last entry. | Seaford | (14) 15/4/19 | PT 21 D.O. 122 |
| | | <p>DISCHARGED IN ENGLAND, K.R. & O. PAR. 392, Sec. XXV.</p> <p><i>[Signature]</i> Captain Officer Commanding, No. 2 Canadian Discharge Dept.</p> | | | |

(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 | | | | |
| | | | | | |

Casualty Form Active Service.

Regiment or Corps... *C to R Pool*
 Rank... *Spr* Surname... *Phelan* Christian Name... *Patrick A.*
 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>15.6.18</i> | <i>aaay</i> | <i>Taken on strength CER Pool</i> | | <i>16.6.18</i> | <i>K/ 29654 P/67 June 1918</i> |
| <i>22.7.18</i> | <i>ccrc</i> | <i>Footpat 3d deploy 14.7.18 for absent from 9.30 pm to 9.40 pm 16.7.18</i> | | | <i>B2069 P/81</i> |
| <i>7.7-18</i> | <i>ccrc</i> | <i>Placed under stoppages of pay to make good the cost of Gover. property lost by neglect</i> | | | |
| | | <i>1 Shaving Brush 3 1/2 D</i> | | | |
| | | <i>1 Holdall 1/6 D</i> | | | |
| | | <i>1 Fork 1/4 3/4 D</i> | | | |
| | | <i>1 Spoon 1/5 D.</i> | | <i>7-7-18</i> | <i>B2069 P/84 d/1918</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, &c.
 W. 8635-M2733 2000m 9/17 (35611) C. P. & S., Ltd., Form B./103 E/1807. P.T.O.

| Date | Report | | Place of Casualty | Date of Casualty | Remarks Taken from Army Form B.213, Army Form A.36, or other official documents. |
|----------|----------------------------|--|-------------------|------------------|---|
| | 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. | | | |
| 5-8-18 | O.C. 1 Army Mine School | Permitted to 7 day Conf. to Barracks for W.O.A.S., Conduct to the pred. of good Order Mil Disc., Absent from Tattoo Roll Call 9:30 P.M. 3-8-18 till reporting at 4:15 A.M. 4-8-18 (absent 18-hrs 45 min.) | | | |
| 24-8-18 | b.c.R.C. | Granted 14 days LofA | to U.K. | 5-8-18 | B2069 & 87 d/24-8-18. |
| 14-9-18 | do | Rejoined from LofA | | 22-8-18 | B213 & 92 d/19-18. |
| 20-9-18 | do | S.O.S. to 12th Bn C.E. | | 8-9-18 | B213 |
| 20-9-18 | do | S.O.S. 12 Bn. C.E. | | 20-9-18 | R.R. 1165 & 101 |
| 28-9-18 | 12 Bn. C.E. | Joined Unit | Field | 21-9-18 | D.O. 22 d. 9.10.18 |
| 11-10-18 | do | Punished to 7 days F.P.M.S.1. for "W.O.A.S. Absenting himself without leave from 0800 hrs. 8.10.18 till 0600 hours 9.10.18" (22 hrs.) Forfeits one days Field pay under R.W. | | 22-9-18 | B.213. |
| 4.1.19 | do | Attch. D. Corps, Siege Park for Instructions | | 8-10-18 | A.F.B. 2069 d. 17.10.18 D.O. 26 d. 29.10.18 |
| 25.1.19 | do | Rejoined Unit | Field | 29.12.18 | B.213 |
| 15-3-19 | do | Granted permission to Marry in accordance with Order of Council, Canada P.C. 1872 | | 18.1.19 | B.213 |
| 17.4.19 | G.H.Q. | Granted 14 days leave to U.K. Posted to C.E.R.A. Seaford | | 8.3.19 | D.O. 14 d. 27/3/19 |
| | | | | 14.4.19 | G.H.Q. 1st. Cch. |
| | | | | 28.4.19 | 1-3-5 d. 14.2.19 D.O. 19 d. 26-4-19 |

[Signature]
 Capt. [Name]
 Section G.H.Q. 1st Echelon, B.E.F.

MEDICAL HISTORY SHEET.

ORIGINAL

Surname Phelan Christian Name Patrick Aloysius

Examined { on 13 day of February 1915
 at Toronto
 Birthplace { City or Town Port Arthur
 County Ontario

Approved by R. M. Taylor
 Rank St. A. M. C. M.O.

Apparent age 22
 Trade or occupation Chaffeur
 Height 5 Feet 4 1/4 Inches.
 Weight 134 Lbs.
 Chest measurement { Minimum 30 inches.
 Maximum expansion 34 inches.
 Physical development Good
 Small-Pox Marks none

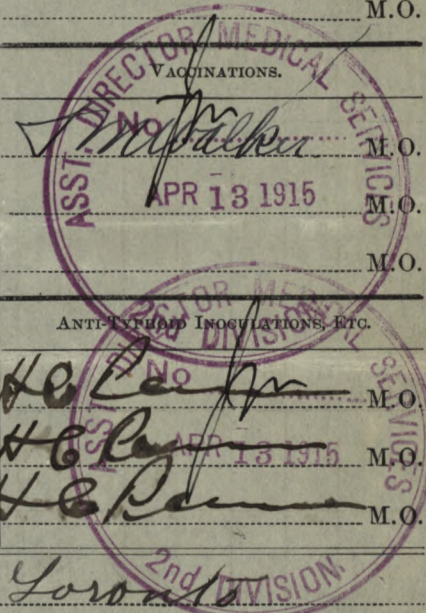
| Date | Fit or Unfit | EXAMINED FOR RE-ENGAGEMENT, |
|------|--------------|-----------------------------|
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |

Vaccination Marks { Arm Right Left.
 Number 2
 When Vaccinated last Infancy
 (a) Marks indicating congenital peculiarities or previous disease none

| Date | Result | VACCINATIONS. |
|---------------|---------------------|---------------|
| <u>5/3/15</u> | <u>H. C. Walker</u> | M.O. |
| | | M.O. |
| | | M.O. |

(b) Slight defects but not sufficient to cause rejection

| Date | Result | ANTI-TYPHOID INOCULATIONS, ETC. |
|----------------|---------------------|---------------------------------|
| <u>2-3-15</u> | <u>H. C. Walker</u> | M.O. |
| <u>8-7-15</u> | <u>H. C. Walker</u> | M.O. |
| <u>16-3-15</u> | <u>H. C. Walker</u> | M.O. |



Enlisted on 13 day of February 1915 at Toronto

| | CORPS. | REG'T NUMBER. | HABITS. | DATE. |
|----------------------|----------------------|---------------|---------|-------|
| Joined on enlistment | <u>De Ammuntantz</u> | <u>2784</u> | | |
| Transferred to.. | | | | |

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.

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DIV: AMM: PARK.

| 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 | | | | |
| Cent Hp Rochers Lines | | 9 | 6 | 15 | 20 | 6 | 15 | Gonorrhoea | 11 | Cured G | J. C. Petitclerc J.C. Petitclerc |
| Tent Hoop St. Martin Plain | | 2 | 7 | 15 | 7 | 8 | 15 | Chancere | 36 | Cured | |
| No 7 Can Cav Hld Amb | | 17 | 4 | 16 | 19 | 4 | 16 | Scabies | 2 | To No 3 Can Div Rest | A 102 A 105 |
| 3rd Can Div Rest Stn | | 19 | 4 | 16 | 21 | 4 | 16 | " | 10 | Rejoined unit | |

Duplicate Medical History Sheet
posted to here.
Medical Registrar
Record Office.

Surname *Phalen*, Christian Name *P.A.*

H. Wang, C.C.C.
B. Coy.

CANADIAN GENERAL LABORATORY

)))-----(((

PARTICULARS OF CASE FOR WHICH WASSERMAN TEST IS REQUIRED

The particulars below are required for statistical purposes and future reference.

Unless these are furnished the test will not be carried out.

Name Philip P. A. Regtl. No. 2784 Rank Spr

Unit H. Wing Date of first sore..... If T. Pallidum found.....

Secondaries if any..... Other symptoms.....

Treatment if any..... arsenical..... Mercury.....

Previous Wasserman, date June 1916 Result neg

Station and date Witley June 11/19

J. B. Sainsley Capt

RESULT OF WASSERMAN (ORIGINAL) QUARTER SYSTEM.

Date..... Serial No..... Result.....

**WASSERMANN
NEGATIVE**

J. Crawford Capt Major.
Officer Commanding

Canadian
General
Laboratory



Witley Surrey.

.....1919

95



RELATIVE

*H. Wing, C.C.C.
B. Coy.*

CANADIAN GENERAL LABORATORY

)))-----(((

PARTICULARS OF CASE FOR WHICH WASSERMAN TEST IS REQUIRED

The particulars below are required for statistical purposes and future reference.

Unless these are furnished the test will not be carried out.

Name *Robson P.A.* Regtl. No. *2184* Rank *Sgt.*

Unit *H. Wing* Date of first sore If T. Pallidum found

Secondaries if any Other symptoms

Treatment if any arsenical Mercury

Previous Wasserman, date *June 1916* Result *Weg*

Station and date *Witley June 11/19*

J. B. deansley Capt.

RESULT OF WASSERMAN (ORIGINAL) QUARTER SYSTEM.

Date Serial No. Result

**WASSERMANN
NEGATIVE**

B. H. Croft Capt.

Major.

Officer Commanding

Canadian

General

Laboratory

Witley Surrey.

.....1919



U.S. DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION
WASHINGTON, D. C. 20535

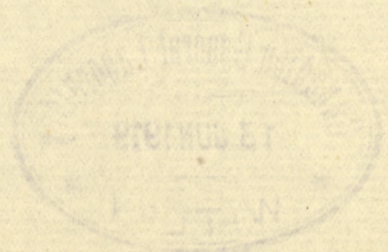
MEMORANDUM FOR THE DIRECTOR

SUBJECT: [Illegible]

[Illegible text follows]

NEGATIVE
FBI BUREAU

[Handwritten signature]



RECEIVED
FBI BUREAU
[Illegible date]

B. Coy

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters)

Phelan. P. A.

REGIMENT

RANK

Pte

No.

2784

Date of Examination in England

Date of Examination 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

PRESENT DENTAL REQUIREMENTS

1. FILLINGS

4-6-7-8-9-10-11-12-15-29

2. EXTRACTIONS

3-5-14-18-19-20-30-31

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

17-18-19-20-30-31-32

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

(b) In England

(c) In France

Signature of Dental Officer

W. L. Shepherd Capt.

4-2-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-100

1-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-100

H. W. C. C. C.
B. C. C.

(95)

CANADIAN GENERAL LABORATORY

)))-----(((

PARTICULARS OF CASE FOR WHICH WASSERMANN TEST IS REQUIRED

The particulars below are required for statistical purposes and future reference.

Unless these are furnished the test will not be carried out.

Name Phelan, P. A. Regtl. No. 2784 Rank Ser.

Unit 4th Bn. Date of first sore..... If T. Pallidum found.....

Secondaries if any..... Other symptoms.....

Treatment if any..... arsenical..... Mercury.....

Previous Wasserman, date Aug 1916 Result Weg.

Station and date Witley Aug 11/19

J. W. Dalmsley Capt
same

RESULT OF WASSERMANN (ORIGINAL) QUARTER SYSTEM.

Date..... Serial No..... Result.....

WASSERMANN
NEGATIVE

Shawford Capt Major.
Officer Commanding
Canadian
General
Laboratory

Witley Surrey.

.....1919



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Faint, illegible text, possibly bleed-through from the reverse side of the page.

Handwritten signature or scribble in blue ink.



Rank _____ Name **PHELAN Patrick Alogains** Reg'l No. **22 2784**
 Unit **2nd Div. Ann. Park** If in perm. Corps, _____
 What Unit? _____ Married or Single **Single**
 Place and Date of Enlistment **Toronto, 13 February 1915** Place of Birth **Canada**
 Name and Address, Next-of-Kin **Matthew William Phelan**
136 South Algoma St. Port Arthur Relationship **Father**

Assigned Pay Monthly \$ _____ Payable to _____

Relationship _____

Separation Allowance \$ _____ Payable to _____

Relationship _____

Discharge, Date and Place _____ Reason _____ Character _____

| Date | | 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 | | |
| 1915. | | | | | | | | | | | | | | | | | | | |
| 1 June | 30 June | 30 | 1 ⁰⁰ | 30 | 30 | 10 | 3 | 15 | 48 | | | | 40 | 8 | 3 rd class W. P. | | | | |
| 1 July | 31 July | 31 | " | 31 | 31 | " | 3 | 10 | 15 | 50 | | | | 57 | 60 | | | | |
| <div style="text-align: right;"> 57 60 107- 58 67- 15 50 } 108 27 15 81 } 31 81 31 81 } 53 81 43 21 } 77 31 69 7 } 39 47 39 97 } 74 07 52 4 } 39 67 29 22 } 61 12 18 71 } 52 81 44 08 </div> | | | | | | | | | | | | | | | | | | | |
| 1 Aug | 31 Aug | 31 | 1 ⁰⁰ | 31 | 31 | 10 | 3 | 10 | 15 | 50 | | | 92 | 46 | 15 81 | | | | |
| Sept | 1-10 | 10 | " | 10 | 10 | " | 1 | 5 | 31 | 81 | | | | 31 | 81 | | | | |
| | 11-30 | 20 | " | 20 | 20 | " | 2 | 10 | 31 | 81 | | | 73 | 0 | 43 21 | | | | |
| Oct | 1-31 | 31 | 1 ⁰⁰ | 31 | 31 | 10 | 3 | 10 | 43 | 21 | | | 68 | 14 | 77 31 | | | | |
| Nov | 1-30 | 30 | 1 ⁰⁰ | 30 | 30 | " | 3 | 10 | 69 | 7 | | | | | 39 47 | | | | |
| Dec | 1-31 | 31 | 1 ⁰⁰ | 31 | 31 | " | 3 | 10 | 39 | 97 | | | 14 | 60 | 74 07 | | | | |
| Jan | 1-31 | 31 | 1 ⁰⁰ | 31 | 31 | " | 3 | 10 | 52 | 4 | | | 10 | 46 | 39 67 | | | | |
| Feb | 1-29 | 29 | " | 29 | 29 | " | 2 | 90 | 29 | 22 | | | 42 | 41 | 61 12 | | | | |
| Mar | 1-31 | 31 | " | 31 | 31 | " | 3 | 10 | 18 | 71 | | | 8 | 73 | 52 81 | | | | |
| <div style="text-align: right;"> 44 08 29 09 59 40 </div> | | | | | | | | | | | | | | | | | | | |
| | | 305 | | | 3050 | 5207 | 387 | 57 | | | 29 | 09 | | 59 | 40 | 343 | 49 | 44 | 08 |

Checked.....*W.P.H.*

BALANCE TRANSFERRED TO NEW LEDGER.

WAR SERVICE GRATUITY and SEPARATION ALLOWANCE

Payable to Phelan Patrick A.

2784
Dependent Mrs Agnes Phelan.

Address South Lynnham,
Takesham, Norfolk

Address wife

| Date | Cheque No. | Gratuity | Payments | Balance Due. | Remarks |
|----------------------|------------|----------|----------|--------------|---------------------------------------|
| July 8 th | 49900 | | 14 7 8 | | |
| 10 | 42231 | | 6 3 3 | | |
| 11 | L.P. 6 | | 6 3 6 | | = 20.06 |
| 11 | 66 | 4 0 0 | | | |
| 24 | 53292 | | 4 0 0 | | 66 |
| Aug 1 | Gratuity | 86 6 0 | | | |
| 1 | S.A. | 36 19 9 | | 96 11 4 | |
| 11 | 75553 | | 14 7 8 | | Grat. 2nd |
| 11 | 75554 | | 6 3 3 | | Pa. 2nd |
| Sept 4 | 92006 | | 8 4 2 | | 3 rd Less S-Pat SpL f6.3.6 |
| 4 | 92007 | | 6 3 3 | 61 13 0 | 3 rd |
| Oct 8 | 116407 | | 14 7 8 | | 4 |
| " 8 | 116408 | | 6 3 3 | 41 2 1 | 4 |
| " 21 | 108269 | | 5 0 0 | 36 2 1 | on % to man auth # Flynn. |
| 23 | 108356 | | 23 15 4 | | 5 1 Final } Auth # Flynn |
| 23 | 108354 | | 12 6 9 | | 5 1 Final } |
| | | 124 5 9 | 124 5 9 | | |

FILE NO.

WAR SERVICE GRATUITY and SEPARATION ALLOWANCE

ISSUE DATE

Dependent

Payable to

Address

Address

Remarks

Balance Due

Payments

Gratuity

Order No.

Date

| Remarks | Balance Due | Payments | Gratuity | Order No. | Date |
|---------|-------------|----------|----------|-----------|------|
| | | 12-1-41 | | | |
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ASSIGNED PAY: ENGLAND OR CANADA * CANADA SEPARATION ALLOWANCE: ENGLAND OR CANADA * CANADA NAME: PHELAN, Patrick Aloquins NUMBER: 2784

EFFECTIVE DATE: 17/17 1/10/18 EFFECTIVE DATE: 20/5/14

AMOUNT: 20.00 20.00 1/1/19 AMOUNT: 30

NAME, ADDRESS, RELATIONSHIP & AUTHORITY: Miss S. Huggins
4 Mrs F Hayward
Hythe Villas
Exton Camps
Agnes Huggins PHELAN
12 Ullasingham Rd
South Raynham, Tatenham
Norfolk. (WIFE)

WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

AUTHORITY: Plc

DATE EFFECTIVE: 1/5/18

RANK OR APPOINTMENT: Plc

UNIT AND TRANSFERS

ORIGINAL UNIT: None

DATE ACCOUNT FIRST OPENED: None

AUTHORITY: 45

DATE EFFECTIVE: 1/5/18

DATE LEDGER SHEET T'S'D: 23/7/18

UNIT TRANSFERRED TO: CMSC 5/18
72 no Org
L.E.R.V.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

| DATE OF PAYMENT | NUMBER OF A.R. | UNIT PAID BY | AMOUNT | DATE OF PAYMENT | NUMBER OF A.R. | UNIT PAID BY | AMOUNT |
|-----------------|----------------|--------------|--------|-----------------|----------------|--------------|--------|
| 27/9 | 384 | H.C.C.C. | 973 | | | | |
| 30/9 | 544 | ✓ | 9433 | | | | |
| 4/9 | | London | 4864 | | | | |
| 5/9 | | ✓ | 4864 | | | | |
| 7/9 | | ✓ | 243 | | | | |
| | | | 13383 | | | | |

DAILY RATES OF PAY AND ALLOWANCES

| AUTHORITY | PAY | F.A. | P.F.A. | SUBS CE ALL CE |
|-----------|-----|------|--------|----------------|
| | 100 | 10 | | |

PARTICULARS OF RENDERING NON-EFFECTIVE: These have in England after 9.7.19 * 2 C.S.S. 9/1/19 D.B. Lt. P. D. Bal. 30.06.

| MONTH | PARTICULARS | CR. 1 | CR. 2 | PARTICULARS | DR. 1 | DR. 2 | DR. 3 | DR. 4 | BALANCE | DEFERRED | SEPARATION |
|----------|--------------|-------|-------|---|-------|--------|-------|-------|---------|----------|------------|
| 1918 | Med Mal fund | | | | | | | | 253 56 | | |
| | Apr P Pay | 33 | | A6750 L4 2-2 | | | 20 | | 266 56 | | |
| | | | | In confinement waiting trial 23/3/18 | | | | | | | |
| | | | | Sent to 90 days PPT 5/4/18 | | 112 30 | | | 153 26 | | |
| | | | | DO 16 27/4/18 4 C.A.S.A | | 113 30 | 20 | | | | |
| MAY 1918 | R.P. | 34 10 | | Lk A 69791 L4 2-2 | | | 20 | | 167 36 | | |
| JUN | P.P. | 33 | | Lk B 39783 L4 2-2 | | | 20 | | 180 36 | | |
| July | P Pay | 34 10 | | | | | 20 | | | | |
| | | | | Col. C 11712 | | | | | | | |
| | | | | Dismissed as Sick 27/6/18 4/18 | | | | | | | |
| | | | | AR 1274 16/7/18 20w cere 3 57 | | | | | | | |
| | | | | " 842 9.7.18 4 " " ✓ 1446 | | 8 03 | 20 | | 186 43 | | |
| Aug | P.P. | 34 10 | | C 60664 | | | 20 | | | | |
| | | | | AR 1001 3 R.J. 60 3/8 4 46 | | | | | | | |
| | | | | C.P.M. 26209 22/8/18 48 67 | | | | | | | |
| | | | | Sentenced to prison 3 day pay 17/7/18 | | | | | | | |
| | | | | about from 9.36 PM to 9.40 PM 14/7/18 20 32 198 | | 3 30 | | | | | |
| | | | | C.P.M. London 26473 24/8 48 67 | | | | | | | |
| | | | | AR 1917 20w cere 2018 3 57 | | | | | | | |
| | | | | Sentenced to 7 days confinement 2.10.18 9.30 PM | | | | | | | |
| | | | | 3/8/18 to 4.15 AM 4/8 1 day pay RW. B. 087 24/8 | | 1 10 | | | | | |
| | | | | AR 1924 2 wj cere 2018 13 38 | | | | | | | |
| Sept | | 34 10 | | C 79105 | | 118 75 | 4 40 | 20 | 77 38 | | |
| | | 33 | | | | | | | | | |
| | | | | C.P.M. 30661 5/9/18 48 67 | | | | | | | |
| | | | | AR 341 Cm S. Acc Dep 8/9 3 57 | | | | | | | |
| | | | | " 469 " 17/9 3 67 | | | | | 34 57 | | |
| Oct | | 33 | | | | | | | | | |
| | | 34 10 | | AR 6007 | | 55 81 | 20 | | | | |
| | | | | " 905 12 6 8 7/10 27 99 | | | | | | | |
| | | | | " 1033 " 14/10 3 73 | | | | | | | |
| | | | | Wk. for 08.00 8/10/18 to 06.00 hrs. 9/10. sentenced | | | | | | | |
| | | | | to 7 days 2 P 14 day P.M. DO. 26.29/10/18 12 6 6 | | 8 80 | | | | | |
| | | | | | | 31 72 | 8 80 | 20 | 8 15 | | |

* Strike out whichever inapplicable.

J

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)



27-2-32

1. No. 2784

2. Rank Spr

3. Name Phelan Patrick Aloysius

4. Unit 12CE

5. Date of Discharge ~~1/7/19~~
8.4.19 Place 2nd COS

6. Reason for Discharge.....

K. R. & O. Para. 392 Sec. XXV
(Being Demobilized in England-O.R.U. 5222)

7. Authority OB 4 7 19

8. Proposed Residence after Discharge.....
South Raynham
Fakenham, Norfolk

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. ? a 213 5079

Patrick Phelan
Signature of Soldier.

10. CONFIRMATION.
The discharge of the above named man is hereby confirmed.

Place London
Date 8/7/19

W. H. ...
Signature
(O. C. Discharging Unit.)



Declassified
11-23-60

SHORT FORM
PROCEEDING ON DISCHARGE
(Demobilization)

| | |
|-------------------------------------|-------|
| 1. No. | |
| 2. Rank | |
| 3. Name | |
| 4. Title | |
| 5. Date of Discharge | Place |
| 6. Reason for Discharge | |
| 7. Authority | |
| 8. Proposed Reimbursement Discharge | |

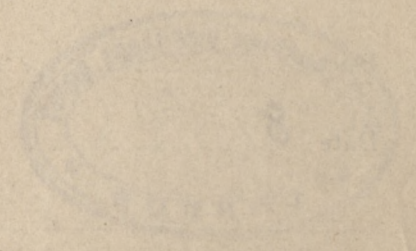
CERTIFICATE TO BE SIGNED BY SOLDIER

I hereby acknowledge that at the date of this certificate and date I received my discharge certificate

Signature of Soldier

FOR OFFICIAL USE ONLY

The following information is hereby certified:



LIST OF DOCUMENTS

| | | |
|---|-------|---|
| Minutes Form W. 111 | ..... | Attendance Form |
| Minutes Form W. 112 | ..... | of Proceedings of Board |
| Minutes Form W. 113 | ..... | Field Conduct Sheet |
| Minutes Form W. 114 | ..... | Special Form |
| Minutes Form W. 115 | ..... | Last Day Certificate |
| Minutes Form W. 116 | ..... | (Articles that are not documents are indicated) |
| Minutes Form B. 117 | ..... | Medical History Sheet |
| M. L. B. 211, A, B, 119, 120, A, B, 121 | ..... | Proceedings of Medical Board |
| Minutes Form B. 122 | ..... | Form History Sheet |
| M. L. W. 123 or 123A, 124 | ..... | Medical Report |
| Minutes Form B. 125 | ..... | Treatment Conduct Sheet |
| Minutes Form B. 126 | ..... | Company Conduct Sheet |

LIST OF DISCHARGE DOCUMENTS.

| | |
|--|-------------------------------------|
| Attestation Paper, Triplicate..... | Militia Form W. 23 |
| or Particulars of Recruit..... | Militia Form W. 133 |
| Field Conduct Sheet..... | Militia Form W. 178 or A.F.B. 122 |
| Casualty Form..... | Militia Form W. 54 or A.F.B. 103 |
| Last Pay Certificate..... | Militia Form W. 44 |
| Certificate that missing documents are unobtainable..... | |
| Medical History Sheet..... | Militia Form B. 313 or A.F.B. 178 |
| 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 |

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

- 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.
- 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."
- 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.
- Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
- If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
- A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
- Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
- 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 Witley DATE 14.6.19

1. 1 (a) Unit CERD (b) Regimental No. 2784 (c) Rank Pte
 (d) Surname PHELAN (e) Christian name PATRICK
 (f) Home address Fakenham Norfolk Eng
 (g) Next of Kin Mrs. Agnes Phelan (h) Relationship wife
 (i) Address of Next of Kin as above

2. Age last birthday 25 years Date of birth Nov 14th 1893

3. Enlistment, or Appointment (if an Officer) (a) Place Toronto (b) Date 13.2.15

4. Personal description: est.
 (a) Height 5' 4 1/4" (b) Weight 134 lbs (c) Complexion Fair
 (d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks, Scars, etc. Incaid scar 2" base of right thumb

5. Former trade or occupation Surveyor

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 14 Days 123

| | PERIODS | |
|---------------------------------|-----------------------|----------------|
| | From | To |
| Canada | <u>13.2.15</u> | <u>15.5.15</u> |
| England | <u>25-4-19 - Date</u> | <u>29.1.16</u> |
| France or other theatres of War | <u>29.1.16</u> | <u>25.4.19</u> |

7. Original disease, or injury V. D. SYPHILIS.

(a) Date of origin 2.4.15. (b) Place of origin England
 (c) Cause Infection

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

No apparent disability. (V.P.S.)

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.)

Objective

no active syphilitic lesions
Gen Laboratory Witley Specialist Report
13. 6. 19
Wasserman negative.
G. J. Gurofalo Capt. C.A.M.C.

Subjective

no disability

(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..... | no | 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 | | |

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

First noticed sore on penis 2. 7. 15 he was in Hospital for circumcision when it was first noticed and foreskin was removed next day; M.H.S. marked "Cured" 7. 8. 15. No secondaries or other symptoms. Last previous Wasserman June 1916 Negative.

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

V. D. of 9. 6. 16 to 20. 6. 16 "Cured"
Scabies 17. 4. 16 to 29. 4. 16 Reopened Unit

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

see 4 (2/1)

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.)

not applicable

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? **a) yes b) 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? **6 months**

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

2 Injections "606"
5 " " "Hg"

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? **Suggested**
(If the answer is "yes" state nature of treatment required and probable duration)

that the patient be dealt with on arrival in Canada in accordance with P.C. 47 dated 20.1.19.

16. Can the former trade or occupation be resumed? **yes**
(If not, briefly state why)

17. Recommendations

W.E. Jones Capt. C.A.M.C.
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 **P. A. Phelan** 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 **nil**

J.H.

Spr. P.A. Phelan Rank.
Signature of invalid examined.

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.

Concur

19. Is the invalid fit for

- (a) General service,
- (b) Service abroad, not general service,
- (c) Home service (Canada only),
- (d) Temporarily unfit.
- (e) Unfit for service in Categories A, B and C

- (Category A) (Yes or No.) yes A
- (" B) (Yes or No.)
- (" C) (Yes or No.)
- (" D) (Yes or No.)
- (" E) (Yes or No.)

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.)

It is suggested that he be dealt with on arrival in Canada in accordance with PC 47 of 20-1-19.

21. It is recommended that the invalid be discharged.

(When not for discharge add special recommendation.)

R.T.C. under auth A.G. Tel 908 3 21-11-19

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.....

DATE.....

[Signature] President.

[Signature] 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.

PLACE.....

DATE.....

APPROVED BY *[Signature]*

APPROVED BY *[Signature]*

Assistant Director of Medical Services.

Director-General of Medical Services.

DATE.....

DATE.....

A.D.M.S. HEADQUARTERS
 CANADIAN CORPS CAMP.
 17 JUN. 1919
 WITLEY SECTION.

WITLEY CAMP, SURREY. 15-6 1919

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital.
 Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of *PHelan*

Surname PHELAN Christian Name Patrick Aloysius

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Port Arthur County Toronto

Examined ... { on 13th day of Feb. 1915,
 at Toronto

Declared Age ... 22 years ... days.

Trade or Occupation ... Chauffeur

Height ... 5 feet 4 1/2 inches.

Weight ... 137 lbs.

Chest Measurement { Girth when fully Expanded 34 inches.
 Range of Expansion 4 inches.

Physical Development ... Good

Vaccination Marks { Arm ... Right Left
 Number 2

When Vaccinated ... Infancy

Vision ... { R.E.—V=
 L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease ... (a)

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

Approved by (Signature) N.A. Taylor.
 (Rank) Lt. A.M.C.
 Medical Officer.

Enlisted ... { at Toronto
 on 13th day of February 1915

| Joined on Enlistment | Corps. | Regtl. No. |
|----------------------|------------------------|-------------|
| | <u>Div. Amm. Park.</u> | <u>2784</u> |
| Transferred to | | |

Became non-effective by ...

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red ink have been taken from the Attestation Paper. (Signature) _____ day of _____ 1915

McMunnis (Rank) _____

ist in the case of Warrant Officers treated in quarters.

bearing on the cause, nature, or treatment of the case, likely to be of interest or of future
 e. In cases of syphilis, admissions and re-admissions to hospital will be shown. The
 subsequent progress, including particulars of treatment out of hospital, transfers, &c., will
 given in the special syphilis case sheet.

Signature of Medical Officer

Cured

F. Etherington. Lt. Col.

Cured

J. C. Petitchlerc. Capt. CAMC.

To No 3 D.R. S. In

A102

Rejoined unit

A105.

DUPLICATE.

For use of A.P. and S.A. Branch, Ottawa.

P. 851 A.

LAST PAY CERTIFICATE.

Military District.....
Dispersal Area.....

No. Rank Name THELAN P.A. Unit 11E

Nominated for embarkation to Canada: Date 11/19/19

| <u>CREDIT.</u> | | \$ | ¢ | <u>DEBIT.</u> | | | | \$ | ¢ |
|-------------------------------|--|----|---|---|----------|-------------|--------|----|---|
| BALANCE FORWARD | | | | <u>CASH PAYMENTS:—</u> Balance | | | | | |
| as at.....191 | | | | Date | A.R. No. | Paying Unit | Amount | | |
| <u>EARNINGS:—</u> | | | | | | | | | |
| From.....to..... | | | | | | | | | |
|days at \$..... | | | | | | | | | |
|days at \$..... | | | | | | | | | |
|days at \$..... | | | | | | | | | |
| <u>ANY OTHER CREDIT:—</u> | | | | <u>OTHER CHARGES:—</u> | | | | | |
| Interest on Deferred Pay..... | | | | | | | | | |
| | | | | <u>WAR LOAN INSTALMENTS CHARGED:—</u> | | | | | |
| | | | | | | | | | |
| "VICTORY" WAR LOAN | | | | <input checked="" type="checkbox"/> <u>ASSIGNED PAY</u> for period | | | | | |
| Amount Subscribed - \$..... | | | | from.....to.....at \$..... | | | | | |
| Amount Paid - | | | | per month in favour of:— | | | | | |
| Balance due - | | | | Name..... | | | | | |
| | | | | Address..... | | | | | |
| | | | | Relationship..... | | | | | |
| | | | | <input checked="" type="checkbox"/> <u>SEPARATION ALLOWANCE</u> , if any, in favour | | | | | |
| | | | | of same party as Assignment at | | | | | |
| | | | | \$.....per month | | | | | |
| | | | | <input checked="" type="checkbox"/> <u>BALANCE DEBIT</u> | | | | | |
| | | | | <input checked="" type="checkbox"/> <u>BALANCE CREDIT</u> | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

BALANCE GIVEN IS SUBJECT TO ANY CHARGES AND/OR CREDITS ENDORSED ON THE REVERSE HEREOF.

THESE PAYMENTS TO DEPENDENTS:— (Strike out whichever inapplicable.)
 Have been stopped Effective.....191.....and will only be re-opened on receipt of instructions from P.M.G., Ottawa, or Military District Paymaster, Canada.
or
 Being a Canadian payment, cancellation or otherwise of future payments will be dealt with by Ottawa.

COMPILED BY [Signature] CHECKED BY..... CERTIFIED CORRECT..... Capt. Lieut.

Date 11/19/19 191..... FOR BRIGADIER GENERAL PAYMASTER GENERAL, O.M.F.O.

