DUPLICATE

ATTESTATION PAPER.

No. 2363897

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	McPherson
1a. What are your Christian names?	Roderick
1b. What is your present address?	CNR Restaurant, Port Arthur, Ontario, Canada.
2. In what Town, Township or Parish, and in what Country were you born?	Antigonish, P.O., Morar County, Nova Scotia, Canada.
3. What is the name of your next-of kin?	Mrs. May McPherson,
4. What is the address of your next-of-kin?	Antigonish, P.O., Morar County, Nova Scotia, Canada.
4a. What is the relationship of your next-of-kin?	Mother
5. What is the date of your birth?	September 15, 1882.
6. What is your Trade or Calling?	Laborer
7. Are you married?	Single
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
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit?	No
14. If so, what was the nature of the disability?	
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?	Yes
16. If so, what was the reason?	Medically unfit.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Roderick McPherson, 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.

Roderick McPherson (Signature of Recruit)

Date April 26, 1918. 191 . Albert Louxineau (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Roderick McPherson, 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.

Roderick McPherson (Signature of Recruit)

Date April 26, 1918. 191 . Albert Louxineau (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 Port Arthur, Ontario, Canada. this 26th day of April 191 8

W. D. Bartram (Signature of Justice)

Major

O.C. "H" Company 52nd Regt.

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

Description of McPherson Roderick on Enlistment.

Apparent Age 35 years 7 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 4½ ins.

Chest measurement.
- Girth when fully expanded 36 ins.
- Range of expansion 2 ins.

Complexion Medium

Eyes Grey

Hair Brown

Religious denominations.
- Church of England
- Presbyterian
- Methodist
- Baptist or Congregationalist
- Roman Catholic Yes
- 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 he declares that he is not subject to fits of any description.

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

Date April 26, 1918. 191 .

Place Port Arthur, Ontario, Canada.

G. R. Brown major

J. W. Cousin major

J. Pratt Lieut

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.

McPherson Roderick 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.

J. M. Sutton, (Signature of Officer)

Major

O. C. "H" Coy. 1st. Depot. Battalion, Manitoba Regiment.

Date April 26, 1918. 191 .

L.P.
3-12-18

Deserter's

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name McPHERSON RODERICK

Regt. No. 2383897 Rank Pte

Corps 4 Depot Bn. Man Regt.

S.O.S 17-5-18

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

Attestation Papers..... 4

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..... 1

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate..... 1

M3B259 — 1

A2B122 — 1

M3W113 — 1

33771

M. F. W. 62.
50M.- 9-16.
H. Q. 1772—39 - 935.

SURNAME. McPherson

CHRISTIAN NAMES Roderick

REGL. NO. 2383897 RANK Pte

UNIT Man Regt 1st Dpo Bn

FORMER CORPS Nil.

CARD NO. 16

S.o.S. Dep. 17-5-18. Auth. DO Pt II #270

FOLL. of 27-9-18 4 M.R.

T. O. S. April 26 1918

D.O. Part II No 120

NEXT OF KIN.

NAMES IN FULL McPherson, Mrs. May.

RELATIONSHIP TO SOLDIER Mother

ADDRESS Antigonish, N. S.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Nova Scotia DATE Sept. 15th, 1882

PLACE OF ATTESTATION Port Arthur, Ont. DATE April 26th, 1918

L. L. 26989 M. & D. 8191. M. F. W. 22. 100M.—8-17. H. Q. 1772-39-339.

MARRIED SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar

1. Surname McPherson. Christian name Roderick.
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule Volunteer
3. Consecutive number on schedule of men reporting for service (if he appears on it)
4. Address (including street and number, if any) Antigoinash Morar. Nova Scotia N.S.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 26th. day of April 1918, by the undersigned medical board sitting at Port Arthur. Ont.

5. Age as stated 36 Years 7 Months.
6. Apparent age 36 Years 7. Months
7. Height 5 Feet 4½ Inches.
8. Weight 127. Pounds.
9. Chest measurement: Minimum 34 Ins. Maximum 36 Ins.
10. Complexion Medium. Eyes Grey. Hair Brown.
11. Physical development Good. (Good / Fair / Poor)
12. Smallpox marks None.
13. Number of vaccination marks: Right arm / Left arm None.
14. When vaccinated last Never.
15. Distinctive marks and marks indicating congenital peculiarities or previous disease None.
16. Slight defects but not sufficient to cause rejection None.

The man denies having had Rheumatism / Tuberculosis / Syphilis. We find no evidence of past Rheumatism / Tuberculosis / Syphilis.

(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 2.~~ a 2

17. (a) Vision R. 20/30 L. 20/30
(b) Hearing. R. Normal. L. Normal.

J. A. [illegible] Major President.

G. W. Brown Major Member. J. [illegible] Lieut Member.

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
		M.O.			M.O.
		M.O.			M.O.
		M.O.			M.O.

Joined 26th *day of* April *191*8 *at* Port Arthur, Ontario, Canada.

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment / Transferred to	"H" Co'y 1st. Depot Battalion M.R.	2383897		April 26, 1918.

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.

M. F. B. 313.
300M.—10-17.
1772-39-439.

Signature of Man: Roderick McPherson

Surname McPherson Christian Name Roderick

STATION.	Date of Arrival at the Station.	DATES OF Admission into Hospital			DATES OF Discharge from Hospital.			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.
		Day	Month	Year	Day	Month	Year				
									1		

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

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps "H" Co'y 1st. Depot Battalion, M.R.

Regimental No. 2383897 Rank Pte. Name MCPherson Roderick

C. E. F.

Enlisted (a) 26-4-18 Terms of Service (a) Period of War Service reckons from (a) April 26, 1918.

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) Civil Laborer Military Nil

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				
		Struck off strength	Pt Arthur	17-5-18	B.O. 270-27-9-18

(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				

ORIGINAL

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 2383897 Rank Pte. Name Mc.Pherson R.

Corps I.D.B.M. who was* struck off strength

On 17.5.18 191..., to as a deserter

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 12.4.18 191...,
to 17.5.18 191..., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances by Cheques No.			Regt'l Pay 36 days at $ 1 c	36	00
Advances by Cheques No.			Field Allow. 36 days at $ c 10	3	60
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges			Other Allowances*		
absentee 26.4. to 17.5.18	24	20			
Payment on transfer or discharge No.			Other Credits*		
reverts to Public	15	40			
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	39	60	Total	39	60

*Give particulars.

A monthly stoppage of $.....(†) has.....(‡) been paid on account of Assigned

{Pay for the month of.....191....
{and Sep'n Allce. for month of N I L 191....} (to) Assignee.....

(Address) .....

.....

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer

Outfit Allowance of $..... has been paid by Paymaster, Military District No.....

REMARKS:—

State (1) date of enlistment 12.4.18

(2) if married and if a Separation Allowance Card has been submitted no no

(3) cause of discharge as a deserter authority B.O. 270

(4) authority for transfer .....

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date October 8th. 1918

Place Winnipeg Man.

1st. DEPOT BATTALION, MANITOBA REGT.

..... Capt.
Paymaster.

Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

100M.—1-18.
H. Q. 1772-39-903.