ORIGINAL

6 M. D. First Depot Battalion Nova Scotia Regiment

Regtl. No. D3187867

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One)

1. Surname: Murphy
2. Christian name: Christopher Patrick
3. Present address: South Side Cape George, Antigonish Co, N.S. Sufficient Address
4. Military Service Act letter and number: 6I0134 GC.
   (If man is defaulter, i.e., has not registered under Proclamation, this fact should be stated, together with date of apprehension. or surrender)
5. Date of birth: December 18, 1894
6. Place of birth: Cathedral Lane, Dublin, Ireland.
   (town, township or county and country)
7. Married, widower or single: Single
8. Religion: Roman Catholic
9. Trade or calling: Farmer
10. Name of next-of-kin: Mary McDonald, (Mrs John D.)
11. Relationship of next-of-kin: Foster-parent
12. Address of next-of-kin: South Side Cape George, Antigonish Co, N.S. Sufficient Address
13. Whether at present a member of the Active Militia: No
14. Particulars of previous military or naval service, if any: None.
15. Medical Examination under Military Service Act :—
    (a) Place: Aldershot, N.S. (b) Date: June 7, 1918 (c) Category: A 11

DECLARATION OF RECRUIT

I, Christopher Patrick Murphy, do solemnly declare that the above particulars refer to me, and are true.

Christopher Patrick Murphy (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age	23	yrs.	mths.
Height	5	ft. 4	ins.
Chest measurement — fully expanded	33		ins.
Chest measurement — range of expansion	3 ½		ins.
Complexion	Dark		
Eyes	Grey		
Hair	Black		

Distinctive marks, and marks indicating congential peculiarities or previous disease.

J. W. Grant Major

For O. C. First Depot Btln.

Nova Scotia Regt.

Place: Aldershot, N.S. Date: June 6, 1918.

M. F. W. 133.
500M.—5-18.
1772—39—1158.

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name MURPHY CHRISTOPHER PATRICK

Regt. No. 3187867 Rank PTE

Corps 1st DEPOT BN NS

DEMOBN

39697

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

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms ..... / .....

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 ..... / .....

Proceedings of Regt. Court Martial .....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate ..... / .....

Inventory of Kit.....

Last Pay Certificate ..... / .....

M T W 71 — 1
A Z B 122 — 1
M T W 129 — 1
M T B 465 — 1
M T W 113 — 1

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

H. Q.

M. D. No. 6

Surname Murphy

Christian name Christopher Patrick

Regtl. No. 318786 Rank Pte.

Unit N.S. Regt. 1st Depot Bn.

T. O. S. June 5 1918

D. O. Pt. II 153 of 4-6-18

S. O. S. Dis 16-1- 1919.

Reason Demob.

Auth. do 15/1/19 1st Bn

Next of kin Mc Donald Mrs John Relationship Foster Mother

Address South Side Cape George Also notify:

Antigonishe Co NS

BORN—Place Ireland Dublin Date Dec 18th 1894

ATTESTED—Place Aldershot NS Date June 26th 1918.

O/S R/C

W. 22—75M-5-18. 1772-39 839.

M. F. W. 71—500M.—5 18.
1772—39—961.

M.S.A.

NAME MURPHY, Christepher

REGIMENTAL NO. 3187867 RANK Pte.

ENLISTED AT Aldershot Camp, N. S. PROMOTIONS, &c. AND DATE

DATE Ordered 5-6-18 D.O.153

IF SERVED PREVIOUSLY, STATE UNIT, &c.

MARRIED, WIDOWER, OR SINGLE

NEXT OF KIN RELATIONSHIP

ADDRESS OF

ASSIGNMENT OF PAY $ C. TO

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

G.C. 610134
C. 2367-A.

CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II. D. O.		REMARKS IF IN HOSPITAL, NOTE NAME, &c.
	No.	Date	
Harvest furlough		6-8-18 to 2	7-9-18
"	264	28-9-18 to	31-10-18
"	300	1-11-18 to	18-11-18
" "	311	16-11-18 to	1-12-18
"	324	2.12.18	till recalled

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. 1st. DEPOT BATTALION, Nova Scotia Regiment.

Regimental No. 3187867 Rank Pte. Name Murphy, Christopher Patrick
C. E. F.

Enlisted (a) 6/6/18 Terms of Service (a) WAR and 6 Mos. Service reckons from (a) 6/6/18

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }

Extended. Re-engaged. Qualification (b) Farmer

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				
		~~Embarked~~	HALIFAX N.S.	5-8-19	~~Struck off strength~~ MAJOR. for Com'dg "E" Co. 1st. Depot Bn. N. S. Regt.
		SOS Demobolization O.O. Part 2. # 15	Halifax	16-1-19	Capt Adjt 1st Depot B'n N. S. Regiment

(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				

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 3187867 (Rank) Pte

Name (in full) Christopher Patrick MURPHY enlisted in

the 1st. Depot Battn. N. S. Regt.

CANADIAN EXPEDITIONARY FORCE at Aldershot on the 6th

day of June 1918

HE served in Canada

and is now discharged from the service by reason of R.O. 1357-1-a Reporting off harvest leave for disposal. Demobolization

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

Age	24 years 1 mo	Marks or Scars	
Height	5 ft. 4 ins		
Complexion	Dark		
Eyes	Grey		Nil
Hair	Black		

Signature of Soldier

(Sgd) W. D. Simpson
Issuing Officer

Capt for Lt-Col.
Rank

Date of Discharge Jany 16th, 1919

1st. Depot Bn N S R
Appointment

Signed at Halifax this 16th day of Jany 1919

in Military District No. 6

File Reference No.

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

.....

Name of Officer

.....

Rank

.....

Appointment

On demobilization the particulars called for on the back of this certificate will not be completed

Repts

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

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

No. 318767 Rank Pte Surname Murphy.
(Given name in full) Christopher Patrick.
Unit or Corps 1st Batt. Birthplace Dublin Ireland.

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

1. GENERAL DESCRIPTION:

Physique good Weight 139 lbs. Height 5 ft. 4 in. Colour of Eyes Hazel

Nutrition good

Pulse 74

Condition of arteries good

Vision Rt. 20/30 Left 20/6

Hearing (conversational voice) Rt. 21 ft.

Left 19 ft.

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

Vaccination

Opinion as to general health and physical condition good

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

Nervous System No Genito Urinary Sytem No Cardio-Vascular System No

Special Senses No Integumentary System No Respiratory System No

Disturbance of mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition No

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

Cat-A

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at ..... (Overseas)

Date ..... Signed .....M.O.

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

Signature .....

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

THIS SECTION FOR USE IN CANADA—

Examined at Halifax ..... (Canada)

Date 15.1.19 Signed [signature] Capt. M.O.

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

Signature Christopher Murphy

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

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

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

M.S.A. 15.

MILITARY SERVICE ACT, 1917

MEDICAL HISTORY SHEET.

Original

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 Murphy Christian name Christopher

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 610134 P.E.I.

3. Consecutive number on schedule of men reporting for service (if he appears on it)

4. Address (including street and number, if any) South Side. Cape George, Antg. Co.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 7th day of June 1918, by the undersigned medical board sitting at aldershot N.S.

5. Age as stated 22 Years 5 Months. 6. Apparent age 22 Years 5 Months

7. Height 5 Feet 4 Inches. 8. Weight 130 Pounds.

9. Chest measurement { Minimum 30½ Ins. / Maximum 33 Ins. } 10. Complexion dark. { Eyes Grey / Hair Black }

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

13. Number of vaccination marks { Right arm / Left arm two } 14. When vaccinated last June 6/18

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

16. Slight defects but not sufficient to cause rejection

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

(Strike out disease admitted or suspected.)

V.R. 20/60 20/40

Hearing 15/- each ear.

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 II]

A H Bruce A.M.C. President.

B H Cartwright M.O. Member. Member.

Date	Result	Vaccinations		Date	Result	Anti-Typhoid Inoculations, Etc.	
6-6-18	ok Parke		M.O.	21/6/18	ok Parke		M.O.
			M.O.	13-7-18	Sgt Jurel		M.O.
			M.O.				M.O.

Joined 6th. day of June 1918 at Aldershot, N.S.

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	1st. Depot Bn. N.S.Reg.	3187867		
Transferred to.....				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
aldershot N.S.	June 7/18	Nil	A II

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.

Signature of Man Christopher Murphy

Surname Murphy Christian Name Christopher Patrick

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				

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

District 6

Name of Soldier Murphy, Christopher

Regiment 1st Depot Bn., N.S.R.R. Rank Pte. D No. 3187867

INSTRUCTIONS

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

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

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

	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoea	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
Condition on first Examination	13-6-18										16									J. R. Smith	6	Cavities 12.14

M.F.B. 465
200M-1-17
1772-39 950

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. 3187867 Rank Pte Name Murphy C.

Corps 1st D.B.A.S. who was* discharged

On 16/1/19 191..., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1/1/19 191...

to 16/1/19 191..., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Balance Cr. from prev. month	11	60
Advances by Cheques No.			Regt'l. Pay 16 days at $ 1.00 c.	16	—
No. Recovered (Rec'd)	15	40	Field Allow. 16 days at $ 0.10 c.	1	60
Assigned Pay and Sep'n Allce. No. M/C 52	19	99	Separation Allowances* (Monthly)		
Other charges Red Cross		10	Other Allowances*		
Payment on transfer or discharge No. 8177	46	71	Other Credits* Clothing	35	—
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	64	20	Total	64	20

*Give particulars.

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

Pay for the month of 191...
and Sep'n Allce. for month of 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.

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

REMARKS:—

State (1) date of enlistment 5/6/18

(2) if married and if a Separation Allowance Card has been submitted

(3) cause of discharge authority DOR 15 (R.O. 1357-1-a)

(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 16/1/19

Place HALIFAX, N. S. A. A. Cameron Lt

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.

H.Q. 1772-39-903.
100M-9-18. D.P. 874.

B

1-2-1918

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 3187867

2 Rank. Private

3. Name. Christopher Patrick MURPHY

4. Unit. 1st. Depot Bn N S Regt.

5 Date of Discharge 16-1-19 Place Halifax

6 Reason for Discharge Reporting off harvest leave for disposal DEMOBOLIZATION

7. Authority. R.O. 1357-1-a

8. Proposed Residence after Discharge

South Side, Cape George

Antigonish Co, N. S.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.? 39

Christopher Patrick Murphy

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Halifax, N. S.

Date Jany 16th, 1919

Signature [signature] Capt.

for (O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

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