

encl. H.A.M.
8-6-16

DUPLICATE
ATTESTATION PAPER.

No. 925792

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.
(ANSWERS.)

1. What is your surname?..... Maddough
1a. What are your Christian names?..... Percy
1b. What is your present address?..... Oxbow Sask.
2. In what Town, Township or Parish, and in what Country were you born?..... Hamilton. Ont.
3. What is the name of your next-of-kin?..... Benjamin Maddough
4. What is the address of your next-of-kin?..... Dundas, Ont.
4a. What is the relationship of your next-of-kin?..... Father
5. What is the date of your birth?..... Nov. 9th., 1895
6. What is your Trade or Calling?..... Farm laborer
7. Are you married?..... No
8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
9. Do you now belong to the Active Militia?..... No
10. Have you ever served in any Military Force?..... No
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? }

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Percy Maddough, 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.

Date May 13 1916 Percy Maddough (Signature of Recruit)
B. Hamilton (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Percy Maddough, 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.

Date May 13 1916 Percy Maddough (Signature of Recruit)
B. Hamilton (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 Estevan this 13th. day of May 1916.
L. L. L. L. (Signature of Justice)

Description of Percy Maddaugh on Enlistment.

Apparent Age 20 years 6 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. 6 ins.

Chest measurement { Girth when fully expanded 39 ins.
Range of expansion 3 ins.

Complexion Medium

Eyes gray

Hair brown

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

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 Eastern May 13th 1916.

Place

R. N. Tripp
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.

Percy Maddaugh 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.

G. H. H. H. H.
(Signature of Officer)

Captain & Adjutant

152nd Overseas Battalion

Date Eastern May 13th, 1916.

Deserters

DISCHARGE DOCUMENTS

R. O. No.

H. Q. No.

Proceedings of Court of Inquiry or on men
reported Missing on Active Service..... 2

Attestation Papers..... 84 4

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet..... 1

Compulsory Stoppages..... 1

Casualty Forms..... 1

Proceedings on discharge.....

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet..... 2

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

Declaration 2

mid card

Name

Regt. No.

Corps

Maddaugh

925792

152nd

Deserter

C

Sent to B.P.C. 3-18 Ret.

10.1 Batt.

L00629

H

SURNAME.

Maddaugh. 049-M-11124.

CARD NO. ✓

CHRISTIAN NAMES

Percy.

FOLL.

808. Res. 13/9/16 10

REGL. NO. 925 792.

RANK Pte.

UNIT 152nd.

Bn.

FORMER CORPS Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Maddaugh, Benjamin.

also notify
Miss Pearl Maddaugh

RELATIONSHIP TO SOLDIER

Father.

493 Catharine St.

ADDRESS

Dundas, Ont.

Hamilton, Ont.

92-4-8-91.

COUNTRY OF BIRTH

Canada, Hamilton, Ont.

DATE

Nov. 9th. 1895.

PLACE OF ATTESTATION

Estevan, Sask.

DATE

May. 13th. 1916

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Farm Labourer.

RELIGION

Baptist

DESCRIPTION.

APPARENT AGE

20 YEARS

6 MONTHS

HEIGHT

5 FEET

6 INCHES

CHEST MEASUREMENT

39 INCHES

EXPANSION

3 INCHES

COMPLEXION

Medium

EYES

Grey

HAIR

Brown.

DISTINGUISHING MARKS

nil.

MEDICAL EXAMINATION.

PLACE

Estevan, Sask.

DATE

May 13th. 1916.

Present Address: Oxbow, Sask.

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.

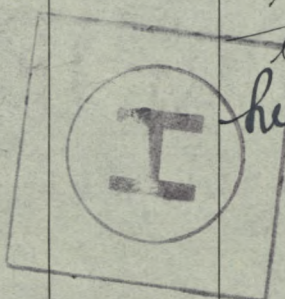
Unit, Regiment or Corps. 152nd OVERSEAS BATTALION

Regimental No. 925792 Rank Pte Name Mad dough, Percy

Enlisted (a) 13/12/16 Terms of Service (a) C.E.F. Service reckons from (a) 13/12/16

Date of promotion to } Date of appointment } Numerical position on }
present rank } to lance rank } 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. 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				
16-9-16	152nd.	civil 23-8-16. No. 1 Deserter by 6. of ong. held 22-9-16	Camp Hughes	~~23-8-16~~ 23-8-16	pt. I. O. 236 after order 25 d/20-11-22
					
<i>obly de 1. Scott!</i> <i>for Wof P.</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) 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				

MEDICAL HISTORY SHEET.

Surname Maddough Christian Name Percy

Examined	on <u>13</u> day of <u>May</u> 191 <u>6</u> at <u>Estevan Sask.</u>	Approved by <u>R. N. Tripp</u>
Birthplace	City or Town <u>Hamilton</u> County <u>Ont.</u>	Rank _____ M.O. _____
Apparent age	<u>20</u>	
Trade or occupation	<u>Farmer</u>	
Height	<u>5</u> Feet <u>8</u> Inches.	
Weight	<u>175</u> Lbs.	
Chest measurement	Minimum <u>36</u> inches. Maximum expansion <u>3</u> inches.	
Physical development	<u>Good</u>	
Small-Pox Marks		
Vaccination Marks	Arm _____ Right _____ Left _____ Number _____	
When Vaccinated last	<u>never</u>	
(a) Marks indicating congenital peculiarities or previous disease		
(b) Slight defects but not sufficient to cause rejection		

Enlisted on	<u>13th</u> day of <u>May</u> 191 <u>6</u> at <u>Weyburn</u>
Joined on enlistment	CORPS. <u>152nd O.B.</u> REG'TL NUMBER. <u>925792</u> HABITS. _____ DATE. <u>13/5/16.</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.

McAddough Christian Name *Percy*

Date of Arrival
at the
Station.

DATES OF

Admission into Hospital

Discharge from Hospital

Day

Month

Year

Day

Month

Year

DISEASE.

[illegible]

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.

MEDICAL HISTORY SHEET.

Surname Maddaugh Christian Name Percy

Examined { on 13 day of May 1916
at Estevan Sand

Approved by

R. N. Tripp

Birthplace { City or Town Hamilton
County Ont.

Rank

M.O.

Apparent age 20

Trade or occupation Farmer

Height 5 Feet 8 Inches.

Weight 175 Lbs.

Chest measurement { Minimum 36 inches.

Maximum expansion 3 inches.

Physical development Good

Small-Pox Marks

Vaccination Marks { Arm Right — Left —
Number —

When Vaccinated last never

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

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

Date.	Result.	VACCINATIONS.
4/7/16	Good	J. H. Tripp
		M.O.
		M.O.
		M.O.
Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
14/6/16	Good	J. H. Tripp
		M.O.
24/6/16	Good	J. H. Tripp
		M.O.
4/7/16	Good	J. H. Tripp
		M.O.

Enlisted on 13th day of May 1916 at Estevan.

	CORPS.	REG'T NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>1520. B.</u>	<u>925792</u>		<u>13/5/16.</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.

Christian Name *Mercy*

Christian Name.

[illegible]

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

-
- (1) Name of Overseas Unit which Soldier joins. 152nd Overseas Battalion
Estevan Detachment
 - (2) Regimental Number 925...
 - (3) Full Name of Soldier Percy Maddough
 - (4) Place of Birth Hamilton Ont.
 - (5) Are you married, or not? no
 - (6) If married, state,
(a) Full name of your wife.....
.....
(b) Present Postal Address.....
.....
 - (7) Are you a widower?
 - (8) Have you any children?.....
If so, give number of boys and girls.....
Also their names and ages.....
.....
.....
.....
.....

(9) Is your Father alive?

If so, state name and address

(10) Is your Mother alive?

If so, state name and address

(11) If your Mother is a widow

Are you her sole support, or not?

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

(15) Are you insured?

If so, in what Company?

Have you made arrangements for payment of your Insurance premium?

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

Officer Commanding.

Date