

Lieut
I.D. number
No. d'identification

Buchanan
Surname
Nom de famille
KIA 19/01/16

Reginald Heber
Given names
Prénoms
Bancroft
Dunlop

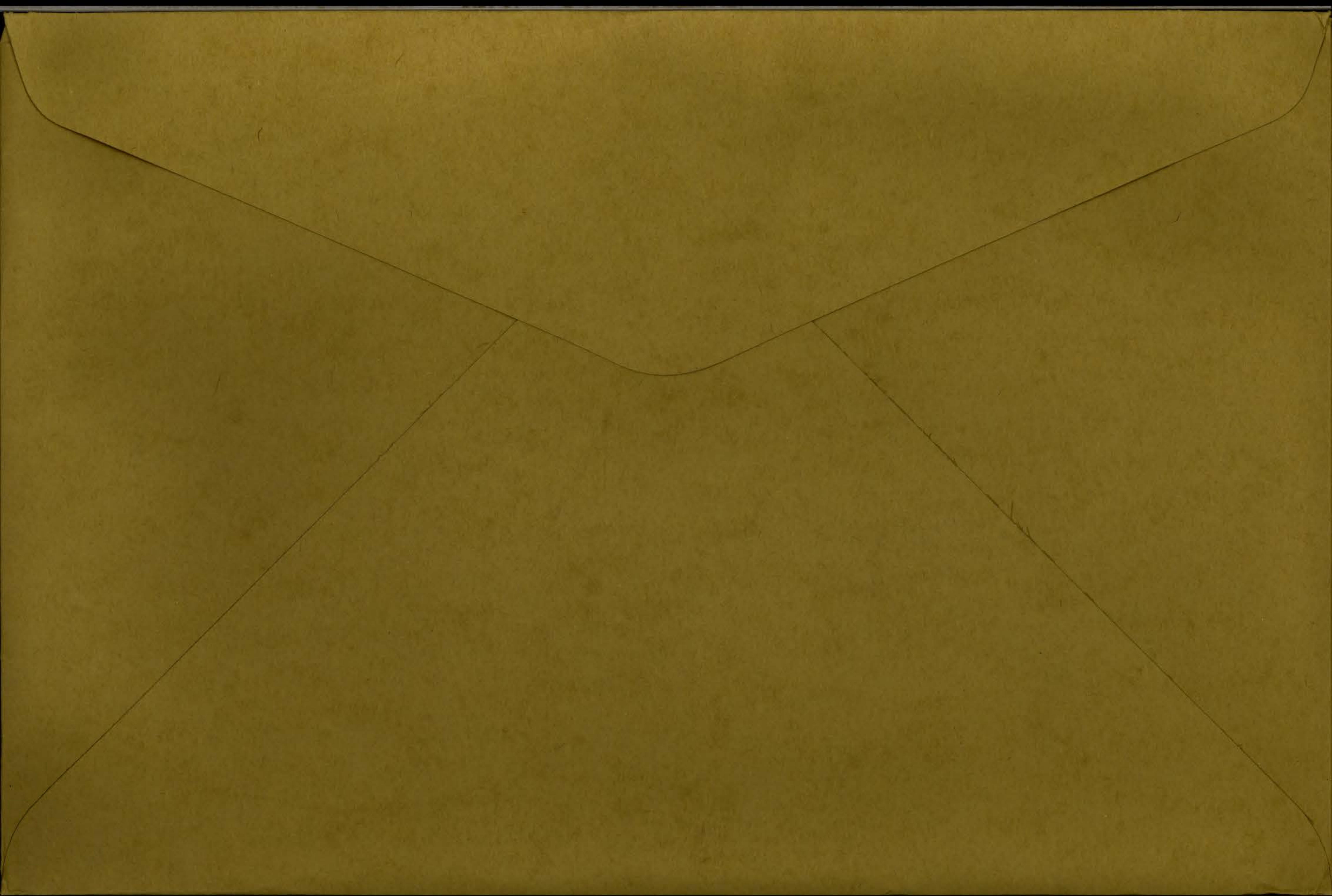
NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS
DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu

Box: 1231

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R. O. No.

H. Q. No.

Name *BUCHANAN REGINALD, Heber Bancroft*

Regt. No. Rank *Lieut*

Corps *24th Bn*

48638

Killed in action 19/1/16

med

24th Bn



BANCROFT

BA 403152

1234

ATTESTATION PAPER.

No. Leint
Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS).
1. What is your name?.....	<u>Reginald Heber Bancroft Buchanan</u>
2. In what Town, Township or Parish, and in what Country were you born?.....	<u>Montreal</u>
3. What is the name of your next-of-kin?.....	<u>R. H. Buchanan Father</u>
4. What is the address of your next-of-kin?.....	<u>40 Westmount Boulevard</u>
5. What is the date of your birth?.....	<u>Nov. 24. 1895</u>
6. What is your Trade or Calling?.....	<u>Student</u>
7. Are you married?.....	<u>No</u>
8. Are you willing to be vaccinated or re-vaccinated?.....	<u>Yes</u>
9. Do you now belong to the Active Militia?.....	<u>Yes</u>
10. Have you ever served in any Military Force?.. If so, state particulars of former Service.	<u>5 RMC</u>
11. Do you understand the nature and terms of your engagement?.....	<u>Yes</u>
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?}	<u>Yes</u>
	<u>R. H. Buchanan</u> (Signature of Man). <u>officer</u>
	<u>J. S. Sutter</u> (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I,, 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.

R. H. Buchanan (Signature of Recruit) officer
J. S. Sutter (Signature of Witness)
Date.....1914.

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.

R. H. Buchanan (Signature of Recruit) officer
J. S. Sutter (Signature of Witness)
Date.....1914.

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.....this.....day of.....1914.

.....(Signature of Justice)

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

.....(Approving Officer)

Description of Reginald Heber Bancroft Buchanan on Enlistment.

Apparent Age 19 years 0 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 36 ins.
Range of expansion 3 ins.

Complexion Dark

Eyes Grey

Hair Brown

Religious denominations { Church of England yes.

Presbyterian

Wesleyan

Baptist or Congregationalist

Other Protestants (Denomination to be stated.)

Roman Catholic

Jewish

Scar on back of head right side



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 October 29th 1914.

Place Montreal

W. L. Pavey, Capt.
Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

.....having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

.....(Signature of Officer)

Date.....1914.

Casualty Form—Active Service.

Regiment or Corps 24th BattalionRegimental No. _____ Rank Lieut. Name R.H.B. BuchananEnlisted (a) 29 10/14 Terms of Service (a) _____ Service reckons from (a) _____Date of promotion } Date of appointment } Numerical position on }
to 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				
<u>1/12/15</u>	<u>Wag. Base</u>	<u>Notification of embarkation to 24th Batty.</u>	<u>Embark.</u>	<u>1/12/15</u>	<u>Telcram KK 946</u>
<u>12/12/15</u>	<u>"</u>	<u>Reinforcement.</u>	<u>24th Bde</u>	<u>12/12/15</u>	<u>10/4/1915 N.I.</u>
<u>13/12/15</u>	<u>CAN BASE DER</u>	<u>LEFT JOIN UNIT</u>	<u>CAN BASE DER</u>	<u>2/12/15</u>	<u>K.R. 5-105.</u>
<u>13/12/15</u>	<u>"</u>	<u>JOINED UNIT</u>	<u>IN THE FIELD</u>	<u>2/12/15</u>	<u>K.R. 5-105</u>
<u>10/12/15</u>	<u>24 CAN BN</u>	<u>Killed.</u>	<u>"</u>	<u>5.12.15</u>	<u>B213</u>
<u>22/1/16</u>	<u>Q.Q.B., 5th 2.</u>	<u>Killed in action. 10.30 P.M.</u>	<u>"</u>	<u>19.1.16</u>	<u>C. 4634.</u>
<u>19/1/16</u>	<u>24 CAN BN</u>	<u>Two M.B. Bullets through abdomen entering through back.</u>	<u>"</u>	<u>18.1.16</u>	<u>137/114/24/19. This date verified as correct.</u>
	<u>CHAP 24 BN.</u>	<u>Buried.</u>	<u>Lafayette</u>		<u>Part II Orders No 5</u>
					<u>D/- 29/1/16</u>
					<u>W 3314</u>

N.E.

C.H. Smith

Lieutenant

for Lt Col. B. A. A. G.

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				

Do both eyes

Buchanan

Reginald

on 14 day of July 1915
at Fort St Barthelemy Montreal

Alfred Haeuss-

{ City or Town Montreal
{ County Que

Cent-A. M.O.

19

Student

5

 $\gamma^{\frac{1}{2}}$

Inches

137

Lbs.

Minimum 3 7/8 inches.
Maximum expansion 8 5/8 inches.

4 cad

None

	Right.	Left.
Arm		
Number	11	1 also

umber 3 left thigh also
1910 Feb 1910 22 17 10811

(a) Marks indicating congenital peculiarities or previous

None

(b) Slight defects but not sufficient to cause rejection

Two scars 5 in long back of head
over occiput h.
occiput

Date	Result
------	--------

VACCINATIONS.

Date	Result
------	--------

ANTI-TYPHOID INOCULATIONS ETC

28

miss

A

Montreal

24th Nov 1891

39^a Bal⁶ C⁶ E⁶ Lieut

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

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.

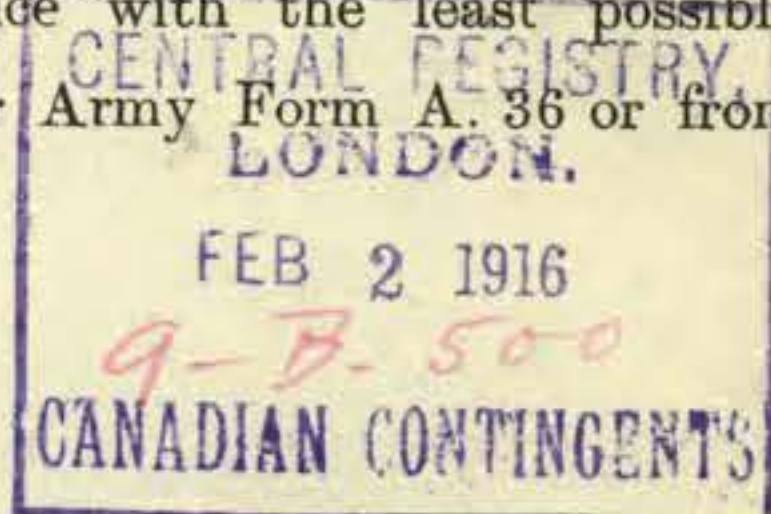
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FIELD SERVICE.

R.J.B.

K.I.

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form A. 36 or from other official documentary sources.



REGIMENT or CORPS } 24th. CANADIAN BATTALION. Squadron, Troop, Battery or Company }

Regtl. No. ----- Rank Lieutenant.

Name Buchanan, R.H.B.

Died { Date January 18th. 1916.
Place In the Field
Cause of Death* Killed in Action

Nature and Date of Report Letter K.I.137/Inf/24/19. 19.1.16.

By whom made O.C., 24th. Canadian Battalion.

* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation, or exposure while on military duty, or from injury while on military duty.

Burial { Place La Laiterie
Date Not stated.
By whom reported Chaplain attached to 24th. Canadian Battalion.

State whether he leaves a will or not { (a) in Pay Book (Army Book 64) Not known
(b) in Small Book (if at Base) Not known
(c) as a separate document Not known

All private documents and effects received from the front or hospital, as well as the Pay Book, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any information received as to verbal expressions by a deceased soldier of his wishes as to the disposal of his estate should be reported to the War Office as soon as possible.

A duplicate of this Report is to be sent to the Fixed Centre Paymaster at Home, or to the D.F.A.G., Indian Expeditionary Force, or Field Disbursing Officer, as the case may require, together with the deceased's Pay Book (after withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War Office with this Report.

Signature of Officer in charge of Section Adjutant-General's Office at the Base

J. K. Lamb Lieutenant.
For Lt. Col., D.A.A.G.
Can. Sect., 3rd. Ech. G.H.Q.

Station and Date ROUEN.29.1.16.

FOR ACTION

Buchanan.

R.

H.

B.

Lieut.

24th. Battn.

Reported from Base.

KILLED:- 18-1-16.

C.L. 22-1-16.

268.

14-2-16.

297.

B.

A.M.D. 2 DEPT.

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

Surname

Christian Name

Reg. No.

Rank

Unit

MEDICAL BOARD held at

Date

Serial No.

(1)

Other Medical Boards at

Date

Serial No.

(2)

(3)

(4)

(5)

Condition found by Board

Disposition Recommended

(1)

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at

Date.....

Disposition

Remarks

332-5-39.

CARD NO.

S. NAME. *Buchanan,*CHRISTIAN NAMES *Reginald Heber Bancroft.*

FOLL.

REGL. No.

RANK *Lieut.*UNIT *24th.**Battr.*FORMER CORPS *5th. R. H. C. Lieut 28-9-14. Auth. O.B.L. Nov 12th. 1915.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Buchanan, R. H.*

RELATIONSHIP TO SOLDIER

ADDRESS *40 Westmount Bod. Westmount
P. Q.*COUNTRY OF BIRTH *Canada,*

DATE

PLACE OF ATTESTATION

DATE

Sailed from Montreal Per S.S. Cameronia 11-5-15

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

Date of sailing 11-5-15. Date of apt 28-10-14. Auth. O.G. 4. nov 12th. 1916.

H. A. A.
5463

BUCHANAN, Reginald H. B. -- Lieut - 24th. BN
eligible for star. Lieut. 24th BN

MEDALS &
DECORATIONS

Reginald H. Buchanan (Father)
40 Westmount Boulevard,
MONTREAL. P.Q.

PLAQUE &
SCROLL

Father as above

Serial No 781895

CROSS OF
SACRIFICE

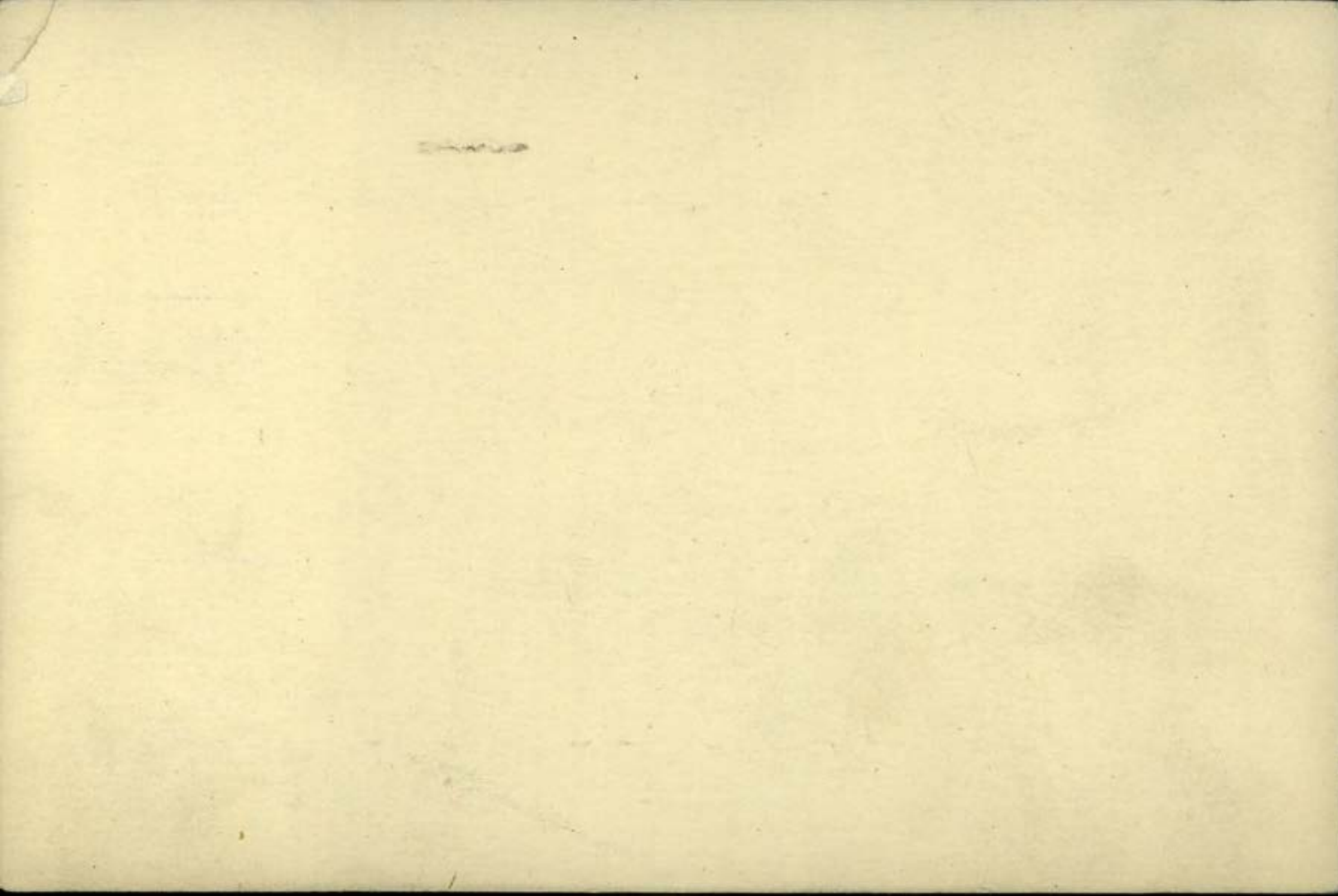
No one entitled

Scroll Desp. **FEB 17 1921** Regn. No. *2. 20231*

Plaque Desp. **APR 28 1922** Regn. No. *P 36452*



*5.7.3.0
10*



Number Rank *LIEUT* ✕

Surname *BUCHANAN*

Christian Names *REGINALD HEBER BANCROFT*

Unit Theatre of War *FRANCE* ✕

Dates of Service

Remarks D

Latest Address ... ~~*Capt A. F.*~~ (7)

Reginald H. Buchanan
40 Westmount Boulevard
Montreal P.Q.

Roll No. *"B"*

Page 1724

G. 11080 *Recd*

APR 13 1921

G. 5768

Recd SEP 24 1921

[illegible]

NAME

RANK AND CORPS

CABLE

No.

DATE

H. Q. FILE No. 649-

REGT'L No.

NATURE OF CASUALTY

NW3434

22-1-16

Killed in action Jan 19th.
Jan 18th. as per form B2090

NO.

3073

FOLL.

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

2686 Reported from base (tel. 271) 19-1-16

Killed 18-1-16 as per sheet
287

No.

RANK

Lieut.

NAME

Buchanan R. H. B.

T. O. S. 28-10-14

Nov. Paylist.

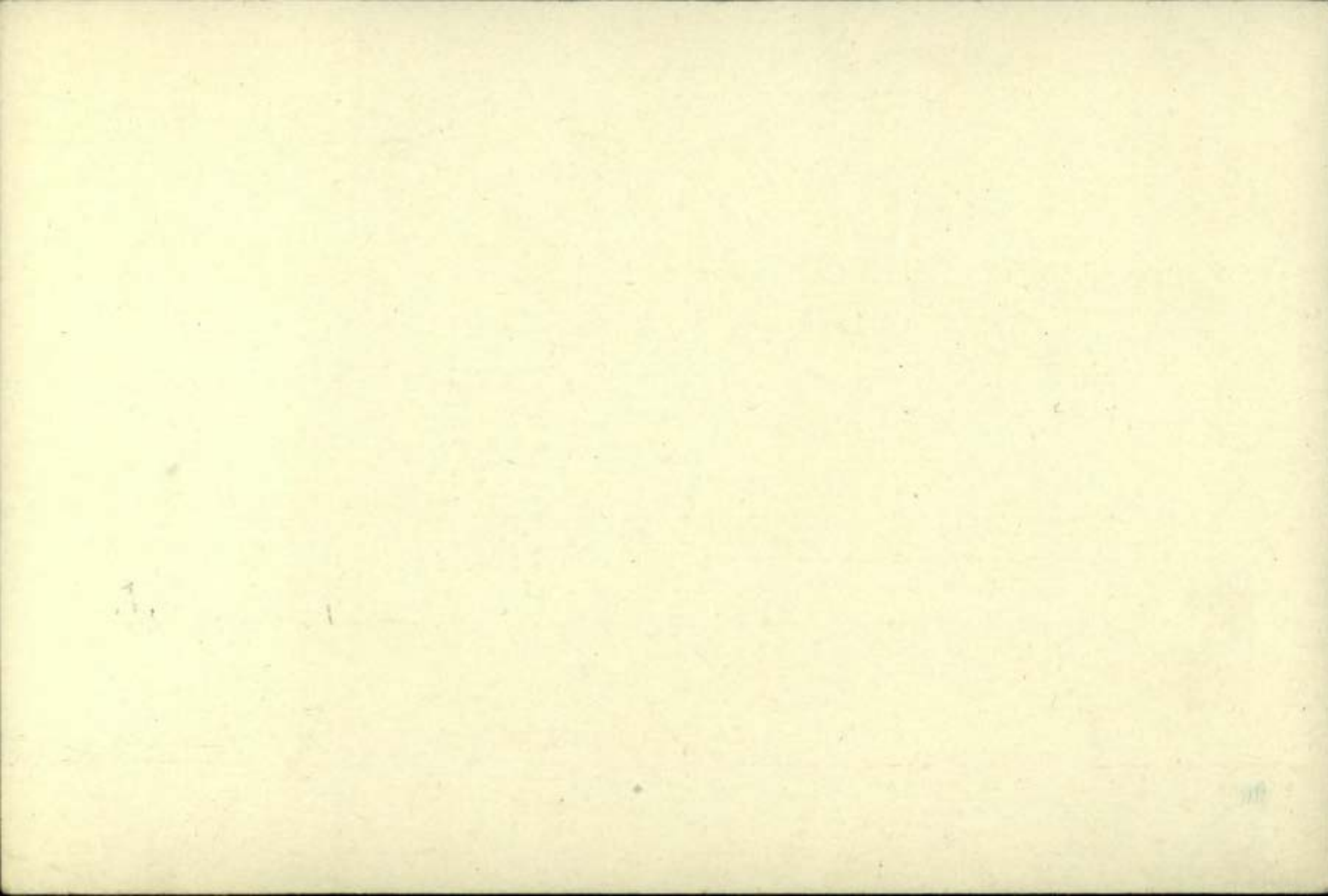
UNIT

24th Battalion

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914 28 Oct.	1914 31 Oct.	✓	<i>appointed provisionally</i>	<i>D.O. 41 of 19/12/14</i>
<i>Nov.</i>		✓		
<i>Dec.</i>		✓		
1915	1915			
<i>Jan.</i>		✓		
<i>Feb.</i>		✓		
<i>Mar.</i>		✓		
<i>Apr.</i>		✓		
<i>May.</i>		✓		

UNIT SAILED
MAY 11 1915



Rank and Name Lieut. BUCHANAN Reginald Heber Bancroft.

Regimental No.

Name and Address of Next-of-kin R.H. Buchanan. (Father)

Unit 24th Bn.

40. Westmount. Boulevard.

Date of enlistment Montreal. October 29th 1914.

Place of birth Montreal.

Married (Yes or No) Single.

Date and place of discharge

If in Permanent Force

Reason for discharge

Character on discharge

Promotions or appointments

Left Can. 11. 5. 15
Emb. list

A.F.B. 103

A.F.B. 103

158

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				
25.9.15 1/15	39 Bn. D.A.G. Base	Taken on strength Notification of embarkation to 24th. Battn.	West Saulding	25.9.15	74. ii. Ord 177 Telegram KP 946
18/12/15	24 th Battn Tel. 22/1	Taken on strength		2/12/15.	Pt II ad. 12.
22-1-16	from Base	Killed in Action		18- 1-16	C.L. 268(2) 6 L287.
29.1.16 8.4.16	24 Bn D.A.G. Base	Killed in Action Killed by Mac Gun fire whilst in/wh of Waring party 18/1/16		18.1.16	Pt 05.



8 NOV. 1918

[illegible]

[illegible][illegible]

P.T.O.

NAME

DATE OF APPOINTMENT

MARRIED (YES OR NO)

NEXT OF KIN:— NAME

ADDRESS

DATE NON-EFFECTIVE

AND CAUSE

Buchanan J. H. B.
Montreal Oct 29: 1914.

Lieut.

R. A. Buchanan - Father

40, Westmount, Boulevard.

19. 1. 16

Killed in Action Cf 268.

UNIT

24th Inftry Batta (1/2 seas for service with 24th Batt 2¹² P.O. 3894-3¹² 15

ASSIGNED PAY:—

MONTHLY AMOUNT

TO WHOM PAYABLE

BANK IN WHICH PAY & ALLOWANCES DEPOSITED

Bank of Montreal

1915-16

PERIOD	No. OF Days	Regl. Rate	PAY					RATE OF FIELD ALLOWANCE	ALLOWANCES				TOTAL PAY AND ALLOWANCES	ASSIGNED PAY	SUNDY DEDUCTIONS	NET P. A.	PAID IN CASH	DEPOSITED IN BANK	CARRIED FORWARD	REMARKS
			AMOUNT OF REGIMENTAL	COMMAND	ADJUTANT	GR. FROM PREV. ACCOUNT	TOTAL PAY		AMOUNT OF FIELD ALLOWANCE	P. F. ALLOWANCE	MESSING	SUBSISTENCE	TOTAL							
FROM 1915 ⁰																				
1/6 30/6	30	✓	60				60	60	18		30		48	108		108		108		
1/7 31/7	31		62				62		18 60		31		49 60	111 60		111 60		111 60		
1/8 31/8	31		62				62		18 60		31		49 60	111 60		111 60		111 60		
1/9 30/9	30		60				60		18		30		48	108		108		108		
1/10 31/10	31		62				62		18 60		31		49 60	111 60		111 60		111 60		
1/11 30/11	30		60				60		18		30		48	108		108		108		
1/12 31/12	31	✓	62				62		18 60		31		49 60	111 60		111 60		111 60		
1/1/16 31/1/16	31	✓	62				62		18 60		31		49 60	111 60		111 60		111 60		
1/2 29/2	24						24													
March							24													

SUNDY PAYMENTS

DATE	CHEQUE No.	PARTICULARS	AMOUNT					REMARKS
			\$	c.	£	s.	d.	
June 1915	1968	Outfit all.	100		20	10	11	

UNIT 24 Battalion

ASSIGNED PAY:—

Lieut. R. A. B. Buchanan

MONTHLY AMOUNT

TO WHOM PAYABLE

BANK IN WHICH PAY & ALLOWANCES DEPOSITED

Killed in action 19. 1. 16 bl. 868

G. B. & S.

NAME _____

DATE OF APPO

MARRIED (YES

NEXT OF KIN:

DATE NON-EFF

AND

PERIOD		No. OF DAYS	REGTL. RATE	PAY			CR. FROM PREV. ACCOUNT	TOTAL PAY	Assay RATE OF FIELD ALLOWANCE	Charges AMOUNT OF FIELD ALLOWANCE	Debit Balance P.T. ALLOWANCE	ALLOWANCES		TOTAL
FROM	TO			AMOUNT OF REGIMENTAL	F.A. COMMAND	Messing ADJUTANT						BANK SUBSISTENCE		
1 ⁷ / ₁₅	21 ⁷ / ₁₅	21	1 ⁷⁵ / ₁₀₀ 75	62	18 60	21		111 60						111 60
18 ⁸ / ₁₅	21 ⁸ / ₁₅	31		62	18 60	31		111 60						111 60
19 ⁹ / ₁₅	30 ⁹ / ₁₅	20		60	18	30		108						108
1 ¹⁰ / ₁₆	31 ¹⁰ / ₁₅	31		62	18 60	31		111 60						111 60
14 ¹¹ / ₁₅	30 ¹¹ / ₁₅	20		60	18	30		108						108
1 ¹² / ₁₆	31 ¹² / ₁₅	21		62	18 60	21		111 60						111 60
1 ¹³ / ₁₆	31 ¹³ / ₁₆	31		62	18 60	31		111 60						111 60
Money found on body.							24	24					24	774 00
Credit Balance:													24	
Oct 16										.74				Balians To Ottawa 1/6/16

W. E. Och 16

SEP 1 1918
Account rendered

SUNDRY PAYMENTS

[illegible]

ASSIGNED PAY.

UNIT.

NAME OF

DATE

AUTHORITY

RANK.

DATE

AUTHORITY

NAME.

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.

*Killed in action BL268*Name *Buchanan*Initials *R.A.B.*

Bank

Bank of Montreal

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialed by P.M. in every case

INITIALS

*1916**Apr 1 Brought forward**July 27 Tfr to N.E. Branch**24**24**Cr 24**0.*