

C. φ

ATTESTATION PAPER.

No. 23337

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... A. R. Duggan
2. In what Town, Township or Parish, and in what Country were you born?.....
What is the name of your next-of-kin?..... Duggan, Mrs. La.
What is the address of your next-of-kin?..... 53 St. Michael St. Quebec
What is the date of your birth?..... Out. Coll. Concordia 29-9-17 P.Q.
3. What is your Trade or Calling?..... Libs 92-3-17.
4. Are you married?.....
5. Are you willing to be vaccinated or re-vaccinated?.....
6. Do you now belong to the Active Militia?.....
7. Have you ever served in any Military Force?..
If so, state particulars of former Service.
8. Do you understand the nature and terms of your engagement?.....
9. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?.....

.....(Signature of Man).

.....(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.

.....(Signature of Recruit)

Date.....1914.(Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I,....., do make Oath, that I will be faithful and true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Country, 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.

.....(Signature of Recruit)

.....1914.(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 entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

me, at.....this.....day of.....1914.

5 H. F. Ingham.....(Signature of Justice)

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

H. F. Ingham.....(Approving Officer)

2/26/14
Description of A. T. Duggan on Enlistment.

Apparent Age 40 years 3 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. 9 ins.

*Six flaps tattooed on breast
Tattooed right & left forearms
Two Vaccination marks
& right arm.*

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

Complexion Dark

Eyes Dark

Hair Grizzled

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

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 27th August 1914.

Place Valcartier

[Signature]
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 have been recorded, I certify that I am satisfied with the correctness of this Attestation.

[Signature] (Signature of Officer)

Date.....1914.

31/7/18 ans

DISCHARGE DOCUMENTS

R. O. No.

H. Q. No.

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

S

W

Name *DUGGAN ARCHIBALD REGINALD*

Regt. No. *23337* Rank *Sgt.*

Corps *San. Ordnance Corps*

Died 1-3-15

Goodwin

38148

H

Index Card.....

Casualty Card.

Non-Effective Card.....

Part II Order Card.....

Change of Address Card.....

Honour & Award Card.....

15-11
34-11
32-11
1

W. G. Goodwin
M. F. W. 3

1/21/20



Name Duggan. A. R. Rank Sgt.

Reg. No. 23337.

Unit 1st Heavy Battery. C. F. A.

Next of Kin

Date - 1915.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1. 3.	Death at Sailly. France.	Heart Failure	8.			
(In 12 th Batta cannot trace 1 st R. H. B. C. F. A) for Records 26/7/15.						
From Stencil Sheet No 8:-						
DEATH						
At Sailly France						
1-3-15. 23337. Sgt A. R. Duggan. Heart Failure						
Cannot trace in R/Dpts.						

Date

Movement

Place

Casualty

List
No.Notified
N/K O.

W.O. List

SURNAME.

Duggan.

CHRISTIAN NAMES

A. R

REGL. NO.

23337

RANK

Armr/Sgt

UNIT

12th Heavy Bty

Bn.

FORMER CORPS

NEXT OF KIN.

NAMES IN FULL

Duggan, Mrs L.

RELATIONSHIP TO SOLDIER

not stated

ADDRESS

*53 St. Michael St. Quebec
P. Q.*

CHANGE OF ADDRESS

COUNTRY OF BIRTH

DATE

PLACE OF ATTESTATION

DATE

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

Church of Eng.

DESCRIPTION.

APPARENT AGE

40

YEARS

3.

MONTHS

HEIGHT

5-

FEET

9.

INCHES

CHEST MEASUREMENT

36

INCHES

EXPANSION

2.

INCHES

COMPLEXION

Dark

EYES

Dark

HAIR

Grizzled

DISTINGUISHING MARKS

6 flags tattooed on breast. Tattoo
right & left forearms. 2 Vac's right arm.

MEDICAL EXAMINATION.

PLACE

Valcartier P.Q.

DATE

Aug 27th 1914.

NAME *Duggan A. R.*

H. Q. FILE No. 649-

REGT'L. No. *23337*

RANK AND CORPS *Sgt. Cav Heavy Bty. & Ammunition Column*

CABLE

NATURE OF CASUALTY

NO.

DATE

C1942

24/3/15

deed of heart failure. Mar. 1st 1915 -

A. 7 B 2090 A

Romen 20-315

NO. *1431.*
XX FOLL. X X

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

✓ 8.

At Saily, France.

1/3/15.

Death. Heart failure.

copy
Ham

Number *23337*

Rank *Pl-Sgt*

Surname *DUGGAN*

Christian Name *Archibald Reginald*

Units *C. G. A.* Theatre of War *France*

Date of Service

Remarks

Latest Address *Mrs. L. Duggan (W.)
53 St. Michael St.,*

Roll No. *B Reg 15709* *Quebec, P.Q.*

*DUE TO SERVICE
*NOT DUE TO SERVICE

DESP. REGD. SEP 22 1922
REGD. N. S. 11/2/22

HOSPITAL AS AN ADMISSION

WHERE FROM)

IT

IN CATEGORY

INVALID

WHERE TO)

CONDITIONS DIAGNOSED

ADDRESS

HOSPITAL

STATION

* CROSS OUT CONDITION NOT APPLICABLE.

frag

649-D-26

Duggan, A.R. Sgt. 23337 1st Heavy Bty.

Elig. for star Sgt. 1st. St. Bty.

Med. & Dec. (Widow) Mrs. L. Duggan,
53 St. Michael St.,
Quebec, P.Q.

Scroll Despl 1 FEB 14 1921 Reqn. No 2-19873

Plague Despl MAR 14 1922 Reqn. No P 3284
P & S. " " Mrs. L. Duggan,
address as above.

Serial No 749909

Mem. Cross " Mrs. L. Duggan,
address as above.

Mem. Cross. (Mother) Mrs. C. Duggan,
Mazagone, Bombay, India.

m

30584

Desp 11-11-20 (w) C 30124
Desp 11-11-20 (m) C 30219

B21

W/M

766

MX Ret'd 25/3/21 no Reason Stat'd.

Surname

Christian Name or Names

Reg. No.

Duggan

A. R.

22237

Rank

Unit

Co.

Troop

Batty.

Sgt
Hospital

1st Hwy Batty (C Pa)

Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

Heart Failure

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses, if more than one state present

DISPOSITION

8

Date

Col. 24-3-15

Died at Saily

1-3-15

REMARKS

A.M.D. 2 Dept.
Beh: of B.G.M.S. O.M.F.C. London

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Register No.

DD423

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No.

Regt'l No. 23337 Name Archibald R. Duggan
(Christian Name) (Surname)

Unit 1st Heavy Btty Rank Sgt Date of enlistment

Date of casualty 1. 3. 15 B.P.C. File No. 1618

Was service performed overseas? Yes

DEPENDENT

Name Mrs Lillie S Duggan Relationship Widow

Address 218 St. Oliver St.
Quebec

Amount of Special Pension Bonus \$ 68 Abstracted by M. Knox

Eligible for Gratuity \$ 180.00

Less amount of Special Pension Bonus paid \$ 68.00

Less Debit Balance of S. A. or A.P. \$

Total deductions \$ 68.00

Balance due \$ 112.00

Cheque No. 4184794 Date issued JUL 30 1920

Clerk J. W. Muller

REMARKS :

Audited by
S. Broadbent
Date 27. 7. 20

D. B. 24.

M.F.W. 2652
25M-6-30.
H.Q. 1772-80-1473

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname

Christian Name

Regimental Number

Rank

Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Rates:—Regimental pay \$ per diem; Field Allowance \$ per diem. Separation Allowance \$ per month.

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

M. F. W. 127
300M-1-10
1772-39-1140

Remarks:

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

To Whom *Duggan, Mrs Lillie*
Address ~~*53 St Michel St*~~
112 Scott St. Quebec

By Whom Assigned *Duggan, A.R.*

Regtl. No. ✓

Rank *Bn Armiⁿ*Corps *12 Bn Staff*Rate *45⁰⁰* per month.

PAYMENTS

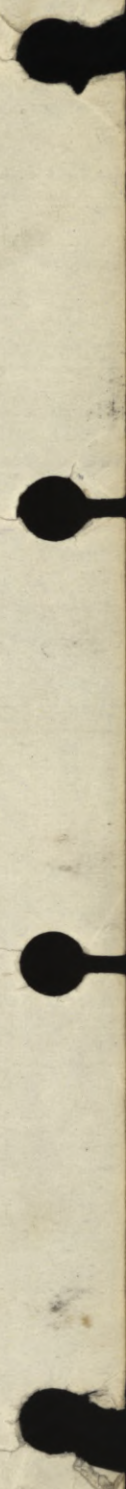
Cancelled

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.		<i>740</i>	<i>45</i>	
Nov.		<i>A1573</i>	<i>45</i>	
Dec.		<i>D2546</i>	<i>45</i>	
Jan.	1915	<i>A3192</i>	<i>45</i>	
Feb.		<i>B4719</i>	<i>45</i>	
March		<i>8555</i>	<i>45</i>	<i>Stop Payment - in Col Ward 24/15 1915 Died - Inert</i>
Apl.				
May				
June				
July				
Aug				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

*J. X 11/5/16**8/7/15**23331**6/10*

THE UNIVERSITY OF CHICAGO
LIBRARY

1955



MILITIA AND DEFENCE
SEPARATION ALLOWANCE

70

Name *Duggan, Silbis*
 Address ~~*53 Mitchell St.*~~
112 Scott St. Quebec
City.

Relation to Soldier

wife, child or mother

*Wife*Name of Soldier *Duggan, A.R. ✓*Regtl. No. *2333 ✓*Rank *1st Lt. Prev. Batt.*
(transferred from 2nd div.)Corps *Serg.*

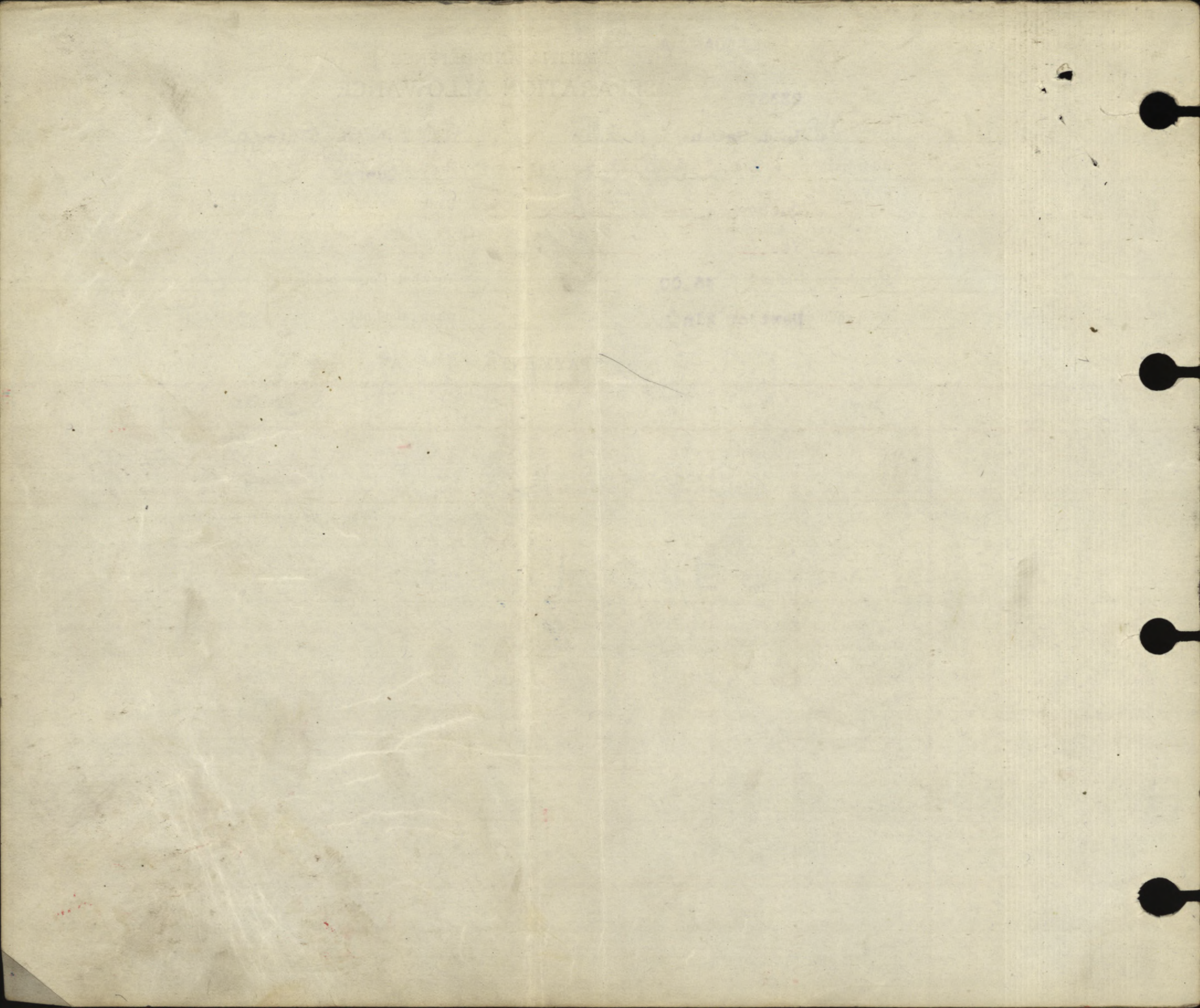
To what Corps belonging

when called out

2nd R.R.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Died March 1/15 heart failure</i>
Sept.		<i>C 1304</i>	<i>20 -</i>	<i>Cable Mar 25/15</i>
Oct.		<i>C 1868</i>	<i>20 - ✓</i>	<i>ADVA</i>
Nov.		<i>B 2522</i>	<i>20 - ✓</i>	
Dec. <i>1/2 adj.</i>		<i>B 4402</i>	<i>30 -</i>	
Jan.	1915	<i>B 4804</i>	<i>22 50 adj.</i>	
		<i>94904</i>	<i>25 -</i>	
Feb.		<i>C. 5983</i>	<i>25 -</i>	
March		<i>A 7220</i>	<i>25 -</i>	
Apl.		<i>C 8408</i>	<i>25 -</i>	
May		<i>B 10693</i>	<i>25 -</i>	
June			<i>237 50</i>	<i>Granted Pension</i>
July				
Aug.				
Sept.				<i>Overpayment \$94.19 collected</i>
Oct.				<i>by Pensions Month of June 1915</i>
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



29247

NAME DUGGAN, A. R.

Am Sgt OV ✓

Regimental No. 23337
 Unit *No 1 Heavy Batt*
 Date of enlistment *Sept 18, 1914*
 Place of birth *Quebec*
 Married (yes or no) *Yes*
 Amount of pay assigned monthly \$ 45.00 ✓
 To whom payable *Next of kin.* ✓

Name and address of next-of-kin
Lettie Duggan (Wife)
53 St. Michael St.,
Quebec
 Date and place discharged *Disc 1/3/15*
 Reason for discharge *Transferred to ~~disc~~ Heavy Artillery*
 Character on discharge

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days			Rate	Amount					
22/9	31/10	40	^{1.35} 54	40	15	6	30	90	-	45	45	90	Stocking Pay.	
1/11	30/11	30	40	50	30	4	50	2250	6750	2250	45	6750		
2/12	31/12	31	41	85	31	4	65	2325	6975	2475	45	6975	Trans to Heavy Batt 31/12	
1/15	31/15	31	235	72	31	4	65	77	50	15	45	60	P. D. W. P. W. P. Sgt.	
12/15	28/15	28	235	65	28	4	20	17	50	87	50	50	Assigned Pay stopped for march	
13/15	13/15	1	235	2	35	1	15	37	50	40	1	11225	deceased March 1/15	
							40	299	4299	4299				Part 11 order to 4.50 3/16
							4299	4299	4299	4299				4299 for'd to Ottawa
							Bal's: nil							4299 for Sept '16 11/16

N. E. Branch
 Advances Branch
 Report *nil.*
 See letter on file from ass. ch. P. M. re W.P. note of 1.00

Statement of
APR 3 1916

CHECKED BY OFFICE, N. E. BRANCH
 DATE SEP 17 1915
 CANADIAN CONTINGENTS

A

J. R. A. MADON

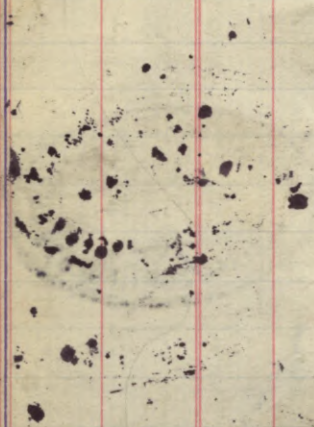
Date		PAY		Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate			Amount	No.					

33 St. Michael St.
 Quebec

45.00

Next of kin.

Quebec
 Yes



Casualty Form—Active Service.

Regiment or Corps Canadian Ordnance Corps



Regimental No. 2333 Rank Sgt Name Duggan, A.R.

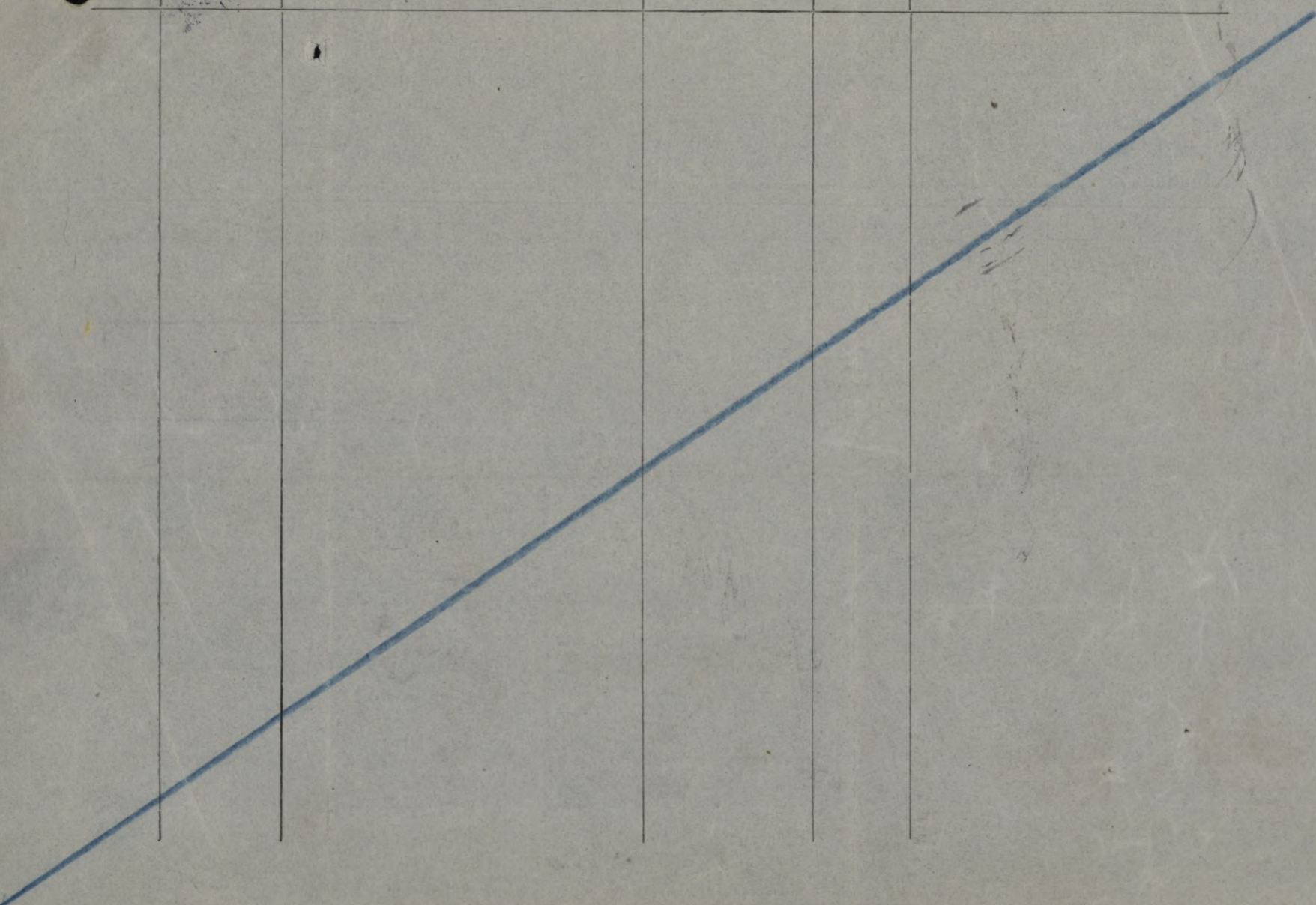
Enlisted (a) _____ Terms of Service (a) _____ Service reckons from (a) _____

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

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>23/15</u>	<u>Capt. Chown, W. Batty.</u>	<u>Died Near Sailure. Buried at Sailure.</u>	<u>Sailure</u>	<u>1-3-15</u>	<u>John J. ... Officer in Charge</u> <u>OFFICER in CHARGE</u> <u>CANADIAN SECTION G. H. Q.</u>
<u>20.3.15</u>	<u>1st Lt. H.B.</u>	<u>Decided. Heart Failure France</u>		<u>1.3.15</u>	<u>Rank: 2nd Lt. Para. 1</u> <u>J. H. ...</u> <u>LIEUT.</u> <u>FOR LT: COL: I/C RECORDS, C.O.M.F.</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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties. I.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				
					

Rank and Name DUGGAN, A. R.

Regimental No. C 23337

Unit 1st. Heavy Battery

Date of enlistment Sept 26. 1914.

Place of birth Ireland.

Married (Yes or No) Yes.

If in Permanent Force

Promotions or appointments

Name and Address of Next-of-kin

Mrs. L. Duggan (Wife)

53 St. Michael Street.

Date and place of discharge 1-3-15 Sully P.2.

Reason for discharge Deceased.

Character on discharge

Max.
3/11/20m.f.



Sgt. ✓ Sgt. 1 Heavy Battery Envelope 1334.

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				
20-3-15	Cy # 1813.	Deceased Heart failure	France	1-3-15	Part II O# 4. Para 1
27-3-15	N.O.	Deceased " "	Sully.	1-3-15	Care sheet # 8

X

D. W.

