

ATTESTATION PAPER.

No. 22950

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

OK.

- 1. What is your name?..... *Frank K. Maguire*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *New Carlisle P.Q.*
- What is the name of your next-of-kin?..... *Isabelle Maguire*
- What is the address of your next-of-kin?..... *New Carlisle P.Q.*
- What is the date of your birth?..... *Oct 30 86*
- 6. What is your Trade or Calling?..... *Advocate*
- 7. Are you married?..... *no*
- 8. Are you willing to be vaccinated or re-vaccinated?..... *Yes*
- 9. Do you now belong to the Active Militia?..... *Yes*
- 10. Have you ever served in any Military Force?.. *7 yrs 61st Regt.*  
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?..... *Yes*

*Frank Maguire*.....(Signature of Man).  
*R.S. Minchin*.....(Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Frank Maguire*, 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.

*Frank Maguire*.....(Signature of Recruit)  
*R.S. Minchin*.....(Signature of Witness)

Date *29/9* 1914.

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Frank K. Maguire*, 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 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.

*Frank Maguire*.....(Signature of Recruit)  
*R.S. Minchin*.....(Signature of Witness)

Date *29/9* 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 entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at *Quebec* this *29th* day of *Sept.* 1914.

*W. MacWilliam*.....(Signature of Justice)

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

*W. MacWilliam*.....(Approving Officer)  
*at Col.*

Description of Frank Maguire Enlistment.

Apparent Age.....27 years..... 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. 7 ins.

*vaccination*  
*Scars on left arm*

Chest measurement { Girth when fully expanded.....42 ins.  
 Range of expansion.....4 ins.

Complexion.....Fair

Eyes.....Blue

Hair.....Brown

Religious denominations. { Church of England.....  
 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.....29 / 9..... 1914.

*R. H. Sutherland*  
*D.M.O.*  
 Medical Officer

Place.....Quebec.....

\*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 been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

Frank Maguire..... having been finally approved 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.

*R. H. Sutherland*..... (Signature of Officer)

Date.....29 / 9..... 1914.

*St. Col.*

MAGUIRE, FRANK

22950

LIEUT

2 BN

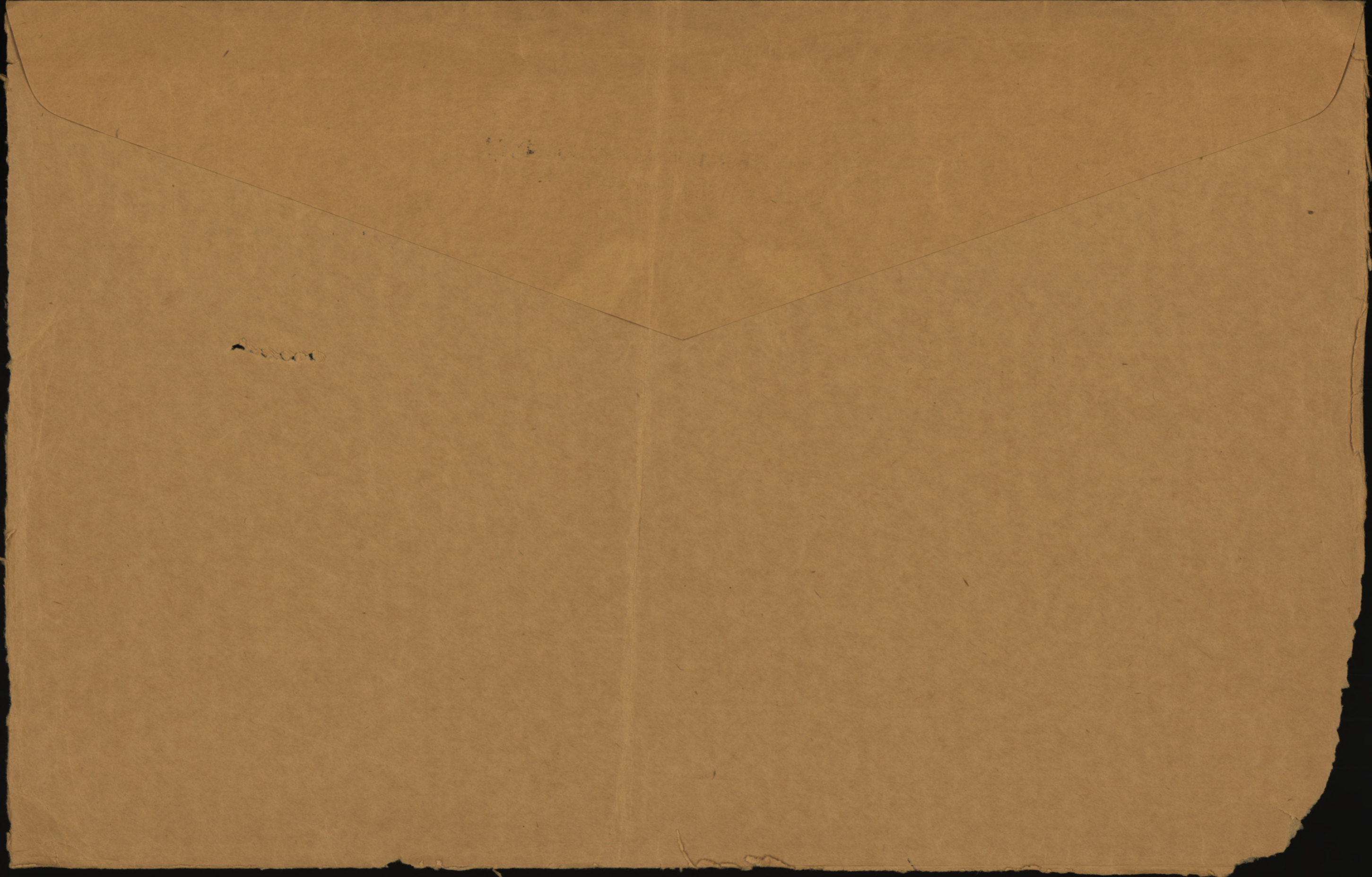
01449

C.E.F. REGIMENTAL DOCUMENTS  
WAR SERVICE RECORDS D.V.A.

K.A. 21-9-16

BT 6870





22950

I.D. number  
No. d'identification

MAGUIRE

Surname  
Nom de famille

Frank

Given names  
Prénoms

Open  
AIA

KIA 21/09/16

**NATIONAL PERSONNEL RECORDS CENTRE**  
**CENTRE NATIONAL DES DOCUMENTS**  
**DU PERSONNEL**

**PERSONNEL RECORDS ENVELOPE**  
**ENVELOPPE DES DOSSIERS DU PERSONNEL**

Location  
Lieu

Box: 6870

«CONTENTS CONFIDENTIAL»  
«CONTENU CONFIDENTIEL»



(6529-1)

CARD NO. **D**

SURNAME. *Maguire*

CHRISTIAN NAMES *Frank*

FOLL.

REGL. NO. ~~22950~~

RANK ~~plc~~ *Sgt. Temp. Capt.*

UNIT ~~12th.~~ *2<sup>nd</sup>*

*Bn.*

FORMER CORPS *61st. Regt 7 yrs.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Maguire, Isabelle*

RELATIONSHIP TO SOLDIER *Not stated.*

ADDRESS *New Carlisle, P.Q.*

COUNTRY OF BIRTH *Canada.* *New Carlisle* <sup>P.Q.</sup> DATE *Oct. 30th. 1887.*

PLACE OF ATTESTATION *Quebec.* *P.Q.* DATE *Sept. 29th. 1914.*

*Auth. Prom. 01515 Sept. 26/16*

L. L. 94304. M. & D. 6512. *15.4-10-14 12/14*

M. F. W. 22. 250M.-2-16. H. Q. 1772-30-330

~~From Quebec per~~ ~~S. S. Scotian 4-10-14~~

MARRIED

SINGLE

yes.

WIDOWER

TRADE OR CALLING

Advocate.

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

27 YEARS

MONTHS

HEIGHT

5 FEET

9 INCHES

CHEST MEASUREMENT

42 INCHES

EXPANSION

4 INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Brown.

DISTINGUISHING MARKS

Vacc. scars on left arm.

MEDICAL EXAMINATION.

PLACE

Quebec. P.Q.

DATE

Sept. 20th 1914.

Present Address. Not stated



No. 92900 D RANK Pte.

NAME Maguire J.

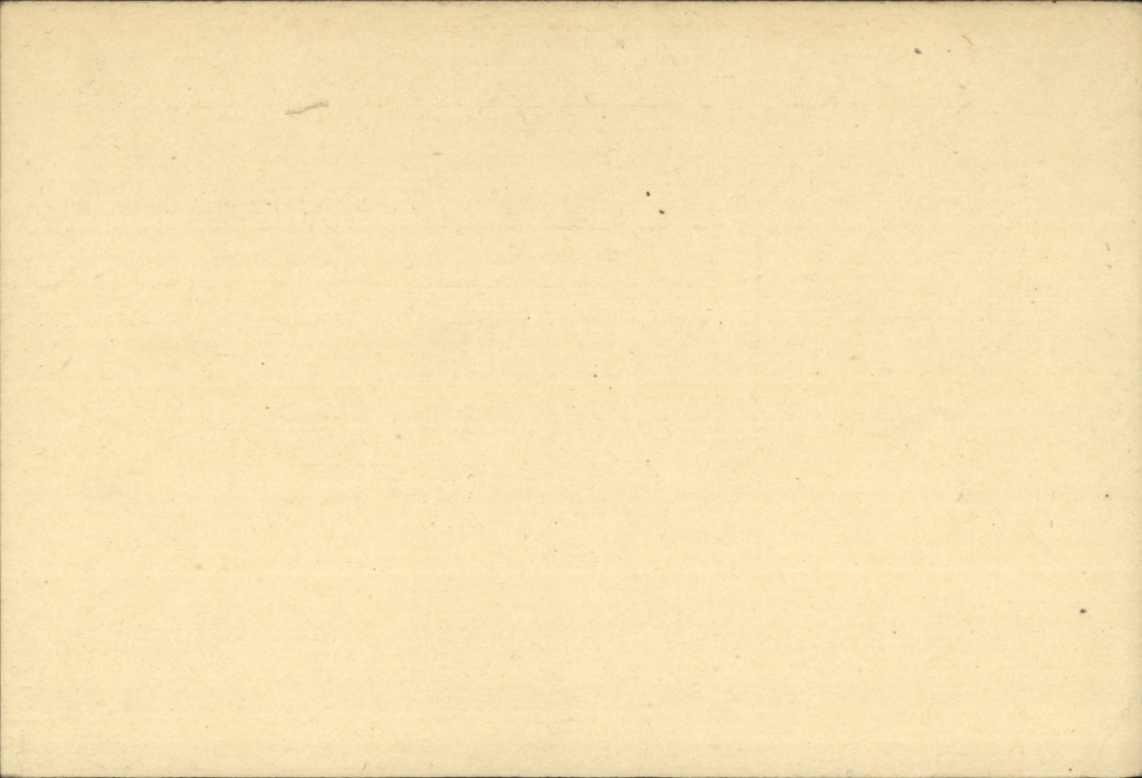
T. O. S.

UNIT 12th Battalion

M. D. Dal

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
1914 Sept 29	1914 Oct 31	✓		

UNIT SAILED  
OCT 3 1914



Eligible for Star - Pa # 22950. - Pa - 2<sup>nd</sup> Bn. Haq. 310 ✓

MAGUIRE, Frank, Capt. 2nd Bn.

MEDALS & DECORATIONS

Mrs. Isabella Maguire (Mother)  
114 Fraser St., Quebec, P. Q.

Scroll Desp. FEB 2 1 1943 Reqn. No. 221943

PLAQUE & SCROLL

Mother, as above.  
Plaque Desp. DEC 8 1943 Reqn. No. P19802

(Serial no. 783049.)

CROSS OF SACRIFICE

Mother, as above.

Not previously noted on Nominal Roll  
WJ  
45.

Desp 648







Number ..... Rank **CAPT**

Surname **MAGUIRE**

Christian Names **FRANK**

Unit **2<sup>nd</sup> Bn** Theatre of War **FRANCE**

Date of Service **22.9.14** **9.2.15** **21.9.16**

Remarks ..... **D**

Latest Address **Mrs. Isabella Maguire (W)**

**114 Fraser St.**

Roll No. **B Page 3332** **Quebec P. Q.**

S. 16817

Wey

MAY 3 - 1871



Surname

Christian Name

Reg. No.

MAGUIRE.

F.

Rank

Unit

Lieut.

2nd Battn.

MEDICAL BOARD held at

Date

Serial No.

(1) D.M.S. Office,  
London.

7-12-15.

Other Medical Boards at

Date

Serial No.

(2) D.M.S. Office.

7-1-16.

(3) D.M.S. Office.

2-2-16.

(4)

(5)

Condition found by Board

Ulceration over knee joint (R).

Disposition Recommended

(1) Unfit for any service for one month.

(2) Three weeks' leave,

(3) Fit for General Service.

(4)

(5)

PENSIONS &amp; CLAIMS BOARD held at

Date.....

Disposition

Remarks

Address.

Cecil Hotel, Strand, London.

" Penrice Castle, Reynoldston,

" Swansea.

" Hotel Cecil.

Maguire. F.

<sup>Capt.</sup>  
Lieut. 2nd. Battn.

1st. Can. Fld. Amb.	5-9-15.
Fld Amb.	29-10-15.
No. 5. Can Fld. Amb.	28-9-15.
No. 1. do.	28-9-15.

Queen Alex. Hosp. Millbank. 28-1-16.

No. 6. Can. Fld. Amb.	8-9-16.
to Officer Rest Sta.	8-9-16.

Diarrhoea. sick.  
Ulceration over knee joint.  
Gastro-Enteritis.

Discharged:-. 15-9-15.  
Rejoined unit:-. 1-10-15.  
Discharged:-. to duty:- 5-11-15.  
Rejoined unit:-. 6-11-15.  
Discharged:-. 31-1-16.  
do. 14-9-16.  
**KILLED IN ACTION:-. 21-9-16.**  
21-

C.L. 2-10-15.	174.
25-9-15.	163.
8-11-15.	205-2.
16-11-15.	212.
26-10-15.	186.
10-12-15.	233.
3-2-16.	278-2.
19-2-16.	292-2.
22-9-16.	476-4.

27-9-16. 480.

29-9-16.	482-4.
8-11-16.	516-4.

A.M.D. 2 DEPT.

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



R  
R

*Case  
ab.*

Register No. *DM953*

WAR SERVICE GRATUITY  
TO  
DEPENDENTS OF DECEASED SOLDIERS

*no file 175*  
A.P. File No. *11664-F-12*

Reg'tl No. .... Name *Frank Maguire*  
(Christian Name) (Surname)  
Unit *2nd Bn.* Rank *Capt.* Date of enlistment .....  
Date of casualty *22.9.16.* B.P.C. File No. *8390*  
Was service performed overseas? *yes*

DEPENDENT

Name *Mrs. Isabella Maguire*, Relationship *wid. Mother.*  
Address *114 Fraser St.,  
Quebec,  
P.Q.*

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

Eligible for Gratuity *Not Eligible* \$ *-*  
Less amount of Special Pension Bonus paid \$ .....  
Less Debit Balance of S. A. or A.P. \$ .....

Total deductions \$ *-*

Balance due \$ *-*

Cheque No. .... Date issued .....

REMARKS: *No. sa paid*

Clerk *At Home*

Audited by  
Date .....

M.F.W. 2652  
25M-6-20.  
H.Q. 1772-39-1473

# 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.

LL 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-1-19  
 1772-39-1140

Remarks:

NAME <sup>Maguire</sup> McGUIRE, Frank.

✓ 10

Regimental No. 22950

Name and address of next-of-kin

Unit 12th Battalion.

Mrs. Isabel McGuire, (Mother)

Date of enlistment 29 Sept. 1914.

New Carlisle,

Place of Birth. New Carlisle, P.Q.

P.Q.

Married (yes or no) No.

Date and place discharged

Amount of pay assigned monthly \$

Reason for discharge

COMMISSION

To whom payable

Character on discharge

C.E.F. 27.15



202

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.	Date					
29/9	31/10	33	1.00	33	33	10	330	3630	1		3630			3630	
1/11	30/11	30	1.00	30	30		3	33	1		3250			3250	
1/12	31/12	31	1.00	31	31		3 10	503460	1		3460			3460	
11/1	31/1	31	1.00	31	31		3 10	3410	1		3410			3410	
1/2/15	28/2/15	28	1.00	28	28		2 80	3080			5 -			5	
1/3/15	5/3/15	5	1.00	5	5	10	2 50	2580	6120		7 -			7	Promoted 4/3/15 to 2/3/15
6/3/15	5/2/15	26	1.05	27 30	26	10	2 60	2580	6120		4 -			4	Prom Spt. Btl May 9
Apr 1	Apr 30	30	1.10	33	30		3	5220	9020		15 -			15	
May 1	May 31	31	1.35	41 85	31	15	4 65	8620	13270		12 -			12	
June 1	June 30	30	1.35	40 50	30	15	4 50	11470	16270		6			6	
July 1		1	1.35	1 35	1	15	15	15070	15220						

14620  
497 Exchange Adjustment  
15117

Promoted from July 2nd to July 3rd transferred to pay!

TRANSFERRED TO  
P.M. LIABILITY ACCT









UNIT <sup>2nd</sup> ~~#~~ Battalion att'd. 12 Reg Bn.

NAME ✓ Maguire J. Lieut.  
 DATE OF APPOINTMENT  
 MARRIED (YES OR NO)  
 NEXT OF KIN: NAME Mrs Isabel Maguire mother  
 ADDRESS New Carlisle P.O.  
 DATE NON-EFFECTIVE AND CAUSE

1915-16

ASSIGNED PAY:—  
 MONTHLY AMOUNT  
 TO WHOM PAYABLE

BANK IN WHICH PAY & ALLOWANCES DEPOSITED

Bank of Montreal

G. B. & S.

PERIOD		No. OF DAYS	REGTL. 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
FROM	TO			AMOUNT OF REGIMENTAL	COMMAND	ADJUTANT	CR. FROM PREV. ACCOUNT		TOTAL PAY	AMOUNT OF FIELD ALLOWANCE	P. F. ALLOWANCE	MESSING								
2/7	31/7	30	2	60			146 20	60	18	30	4800	254 20			254 20		254 20		From Lieut 2/7/15	
1/8	31/8	31		62					18 60	31	49 60	111 60			111 60		111 60			
1/9	30/9	30		60					18	30	48	108								
1/10	31/10	31		62					18 60	31	49 60	111 60		9	9	49	25 85	111 60	Refund advance as per a/c.	
1/11	31/11	30		60					18	30	48	108		15 98			92 02	111 60	Ordinance issue on repay C.D.F. 29 30/7/15 to 759.	
1/12	31/12	31		62					18 60	31	49 60	111 60					111 60			
1/1/16	31/1/16	31		62					18 60	31	49 60	111 60					24 33	111 60	paid 4. Jan 16.	
1/2	29/2	29		58					17 40	29	46 40	104 40					80 07	104 40	To cover ch. 1/2/16	
1/3	31/3	31		62					18 60	31	49 60	111 60					111 60			
5332																				

SUNDY PAYMENTS

DATE	CHEQUE No.	PARTICULARS	AMOUNT					REMARKS
			\$	c.	£	s.	d.	
1915 Sept. 21	786	Outfit allow	250		51	7	5	P.O. 1704 4/8/15. to be repay to 2/7/15

NAME  
DATE OF BIRTH  
MARRIAGE DATE  
PLACE OF BIRTH

ASSIGNED BY  
HOWARD Y. HARRIS  
1944



ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.

2<sup>d</sup> Reg.  
12 Reg.

DATE AUTHORITY

20 5540 5%

Lieut.

DATE AUTHORITY

Name *Maguire*  
Initials *F.*  
Bank *of Montreal*

*Killed in action 28/7/16* *Bl. 516* *8 1/2*  
*Bl. 480* *27/7/16*

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								
April 27	Pay April (R)		108					
28	Bank			108				
May 24	Pay May (R)		111 60					
29	Bank			111 60				
June 9	"			<del>58 60</del>				
12	unpaid ck from cashier <i>be bank</i>			58 58				
19	Pay June (R)		108					
24	Bank			49 42				
July 22	Pay July (R)		111 60					
28	Bank	5569		111 60				
Aug 18	Pay Aug (R)		111 60					
26	Bank	7462		111 60				
Sept 1	Bank			67 85				
20	Pay from 17/16 to 31/16		67 85					
	Pay Sep (R)		142 50					
26	Bank			142 50				
					<i>Transferred to Mt. Branch 15/11/16</i>			
					<i>For Post. Officer</i>			



ASSIGNED PAY.

UNIT. <sup>2nd</sup> Reserve Bn.  
 NAME OF DATE AUTHORITY

RANK. <sup>Capt.</sup> Lieutenant  
 DATE AUTHORITY

NAME. ✓

Beneficiary

Address

Name Maguire,  
 Initials J.

Amount. \$

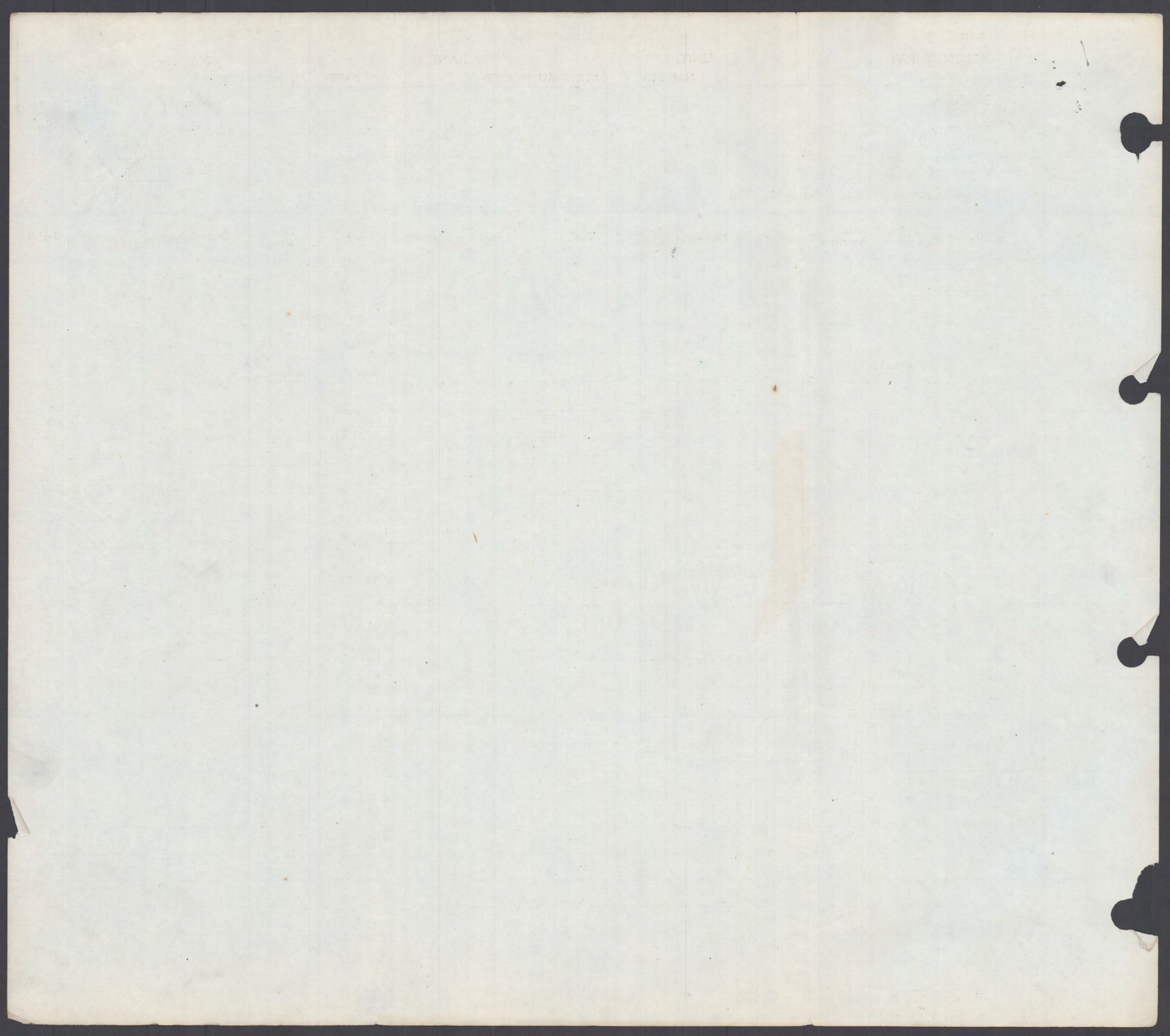
Separation Allowance issued. Yes or No.....

*Killed in action* ~~21<sup>st</sup> 8L 516. 8<sup>th</sup> 16~~  
~~22<sup>nd</sup> 9<sup>th</sup> 6L 480 27<sup>th</sup> 16.~~

Bank of Montreal

Date	No. of Days	Regt. Rate	Amount Regimental	F. A.	Messing	Other Credits	Total	Ass. Pay	Charges	Bank	Debit Balance	Credit Balance	Initials
2-7-15						*							
31-7-15	30	1.00/mess	60	18	30	146 20	254 20			254 20			cr from prev adv. Pay 5
1-8-15													
31-8-15	31		62	18 60	31		111 60			111 60			
1-9-15									*				
30-9-15	30		60	18	30		108		9	99			* refund advance as per adv
1-10-15													
31-10-15	31		62	18 60	31		111 60			111 60			
1-11-15									*				
30-11-15	30		60	18	30		108		15 98	92 02			* ord. Issue 6.0.V. 29 30/7/15 no 759
1-12-15													
31-12-15	31		62	18 60	31		111 60			111 60			
1-1-16													
31-1-16	31		62	18 60	31		111 60			111 60			
1-2-16													
29-2-16	29		58	17 40	29		104 40			104 40			
1-3-16													
31-3-16	31		62	18 60	31		111 60			111 60			
1-4-16													
30-4-16	30		60	18	30		108			108			
1-5-16													
31-5-16	31		62	18 60	31		111 60			111 60			
1-6-16									①				
30-6-16	30		60	18	30		108		58 58	49 42			① Unpaid cheque
1-7-16													
31-7-16	31		62	18 60	31		111 60			111 60			
1-8-16													
31-8-16	31		62	18 60	31		111 60			111 60			
1-9-16													
30-9-16	30		90	77 50	30		147 50			147 50			
1-7-16													
31-8-16	59	31. pay 15. 3A	59	8 85			67 85			67 85			Adj. rate from B-Capt after 40 bars for sett. 27 <sup>th</sup> 17

Statement of  
 FEB 22 1917  
 Account rendered



Rank and Name Maguire Frank.  
 Regimental No. 22950  
 Unit 12th. Battalion.  
 Date of enlistment 29th. Sept. 1914.  
 Place of birth P.Q.  
 Married (Yes or No) No.  
 If in Permanent Force

*Lieut Capt.*

Name and Address of Next-of-kin

Mrs. Isabel Maguire (Mother)  
 New Carlisle. P.Q.

SEP 1 1915

A.F.B. 158.

OCT 1915

MAR 1916

FEB 1 1916

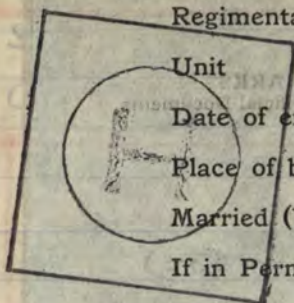
A.F.B. 108

APR 1 1916

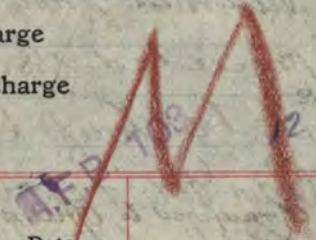
MAY 1 1916

Promotions or appointments

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				
6/3/15	Ob. 2 <sup>nd</sup> Bn.	Appointed Lt/Capt.	Rouen.	2/3/15	Part II Ord. No. 4 2 <sup>nd</sup> Bn
26-3-15	"	Promoted to Corporal	"	11-4-15	do 1-8-16 do 1-9-16
10-7-15	"	Promoted Lieut.	"	2-7-15	Ext. appts. Comm. & awards. List 37
20-9-15	D.C.S.	Admit <sup>d</sup> No 1 Can. Hld Am. (Diarrhoea)	Diecharged	5-11-15	1-2 <sup>nd</sup> Div G.O.C. 2 <sup>nd</sup> Inf B. Hqs. Pt II ord 24
9-10-15	2 <sup>nd</sup> Batty	Granted 7 days leave from	"	20-9-15	Part II ord 33.
7-12-15	London	Found unfit Gen Ser. by Med Board for 1 mth	"	1-12-15	PH 9. M-713. R. 2 89-2
11-12-15	2 <sup>nd</sup> Batty	Granted 8 days leave from	"	7-12-15	Part II ord. 42.
12-12-15	12 <sup>th</sup> Batty	Leave Gen. 1 month by M.B.C. from	Shorncliffe.	7-12-15	Pt II Ord 13 Pt II ord. 2172.
3 2 16	WBC	Fit for Gen Ser	"	2 2 16	CK 278. Pt II. Ord. No. 36
5 2 16	GoC	Attached to 12 <sup>th</sup> Res Batty	Shorncliffe	4 2 16	DO 564
19 2 16	HR.	Admitted Queen Alexandra's	Millbank	28. 1. 16	Ch. 292
5 5 16	GoC	qualified Lewis & Clark course.	"	17 4 16	Do 5588.



*LOR*



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				
10-4-16	G.O.C. C.D.				
		<b>POSTED TO GEN LIST</b>			
22-4-16	12 Bn	Returned from Mech Gun Course.		1-4-16	D.O. 1828.
26-5-16	G.O.C. C.D.	Proceeded ops. to 2nd Div.		22-4-16	Pf. Ord. 114.
7-8-16	2nd Bn	To be Temp. Captains		23-5-16	Pf. Ord 22 (2nd Bn) D.O. 2713.
22-9-16	D.C.S.	Adm. Ho. Co. Field Ambulance.		11-7-16	Pf. Ord 31 (2nd Bn) P.O. 2299 (1st Div)
29-9-16	D.C.S.	Transferred to Office Hospital		8-9-16	P.L. 476. Pick
27-9-16	Del.	Repts from Base Killed in Action		8-9-16	P.C.T. 482. Gastro Enteritis
				22-9-16	P.L. 480. P.O. 54 (2nd Bn) 26-9-16
				21-9-16	P.O. 54 (2nd Bn) 23-9-16
					C.L. 516
					A.F.D. 104-93-2090A
					Estates 10-11-16

L  
B  
F



## Casualty Form—Active Service.

Regiment for Corps 12 Bn. C.E.F.Regimental No. 22950 Rank Private Name Maguire, FrankEnlisted (a) 29/8/14 Terms of Service (a) \_\_\_\_\_ Service reckons from (a) \_\_\_\_\_Date of promotion to } \_\_\_\_\_ Date of appointment } \_\_\_\_\_ Numerical position on }  
present rank } \_\_\_\_\_ to lance rank } \_\_\_\_\_ roll of N.C.Os. }Extended \_\_\_\_\_ Re-engaged Yes Qualification (b) \_\_\_\_\_

Report		Record of promotions, reductions, transfers, casualties, etc., during active service reported on Army Form B. 203, 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				
8.2.15	2 Bn	Proceeded Overseas with 2 Bn	France	8.2.15	hon roll
14.3.15	OC 2 Bn 4/4/15	To be Lance-corporal	"	6.3.15	at B 213 (4)
22/15	"	" corporal	"	26.3.15	" " (7)
2/5/15	OC 2 <sup>nd</sup> Bn	To be <u>Sergeant</u>	"	1-5-15	" B213
10/7/15	App'ts Comm'd and Rewards	To be Lieutenant	2 <sup>nd</sup> Bn 2 <sup>nd</sup> Bn	2-7-15	List 37
17/7/15	London Gazette	To be Temp. Lieutenant	2 <sup>nd</sup> Bn	2-7-15	# 29242.
10/9/15	2 Bn	To Hospital	To 1 Bn Amb	5.9.15	32/7/2
12/9/15	16 Amb	Diarrhoea	Ad 1 Bn Amb	5.9.15	A36
25/9/15	2 Bn	Rejoined Unit	Field	15.9.15	32.7.2 <sup>29</sup> / <sub>9</sub>
3.10.15	OC. 2 Bn	Rejoined front line	Field	1.10.15	B213.

(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.

By Capt. Leir J. Maguire.

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				
26.9.15	2 Pm	Granted 7 days leave Rejoined from leave	of absence field	20.9.15	B213
3.10.15	do			27.9.15	B213
31.10.15	2 Pm	Sick to Bronchitis acute. Adm 31/10	field Ambee	29.10.15	B213
6.11.15	5.67 am.			25.11.15	A36 3/10
7.11.15	2 Pm	Rejoined unit	field	6.11.15	B213
6.11.15	2 RS (off)			4.11.15	A36
12.12.15	2 Pm	Bronchitis, admitted 31/10 left without permission Granted 8 days leave Struck off strength on being medically boarded	field	29.11.15	B213
10.12.15	Local Recd. office			7.12.15	Officers Casualties No 233

*C. M. M. M.*

Lieutenant

for Lt Col. D. A. A. G.

26/5/16 G.O.C.  
C.T.D. Proceeded to 2nd Batt

23/5/16 D.O. 2713 K.A. 18

*J. Bunker*  
Major

23.5.16 Base Com.  
Boulogne Taken on strength. 2nd Bn

28.5.16 2nd Bn Arrived at unit

29.7.16 apptd Comdants To be temp capt

18.8.16 London Gazette do

9.9.16 G.C. & A. Gastro Enteritis adm

14.9.16 Oelims Rejoined Unit field

FOR LT. COL. I/O RECORDS; C.E.F.

23.5.16 WIR 1317 AT 2076 22 of 31 5/16

B213

4.7.16 P/11 No 31 of 7-8-16 list no 93

4.7.16

8.9.16 A36 Dec. 361 d/15-9-16

14.9.16

B213

367.

CONFIDENTIAL.

PROCEEDINGS OF A MEDICAL BOARD

assembled at 86 Strand London on 2<sup>nd</sup> Feb 1916

by order of D.M.S.

for the purpose of examining and reporting upon the present state of health of  
(Rank and Name) Lieut F Maguire (Corps) 2<sup>nd</sup> Battalion

Age 29 Service 18 mos Disability Ulceration over right knee joint

Date of commencement of leave granted for present disability 7<sup>th</sup> Dec 1916

Date on which placed on half-pay for present disability \_\_\_\_\_

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

This officer had disability as noted above. The result of 3 weeks treatment in Millbank Hospital has been excellent, the part is practically healed and the Board recommend this officer as fit for duty.

Stolid Cert.

The opinion of the Board upon the questions herein is as follows:—

- (1.) a. Is the officer fit for "General Service"? Yes
- b. If not so fit, how long is he likely to be unfit? not applicable
- (2.) a. If unfit for General Service, is he fit for service at home? not applicable
- b. If not so fit, how long is he likely to be unfit for service at home? not applicable
- (3.) Was the disability contracted in the service? Yes
- (4.) Was it contracted under circumstances over which he had no control? Yes
- (5.) Was it caused by military service? Yes
- (6.) If caused by military service, to what specific conditions is it attributed? Infection from abrasion

I require in the findings of the Board of Medical Officers here recorded. 22  
Major, C.A.M.C.  
For D.M.S.  
Canadian Contingents.

Signatures { David Donald <sup>Major</sup> President.  
T. G. Mallon <sup>Capt. C.A.M.C.</sup> Members.

## Instructions.

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1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Question 2 is only to be answered by the Board, when specially instructed by the convening authority.

4. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

~~272~~  
CONFIDENTIAL.

Army Form A. 45.

PROCEEDINGS OF A MEDICAL BOARD

assembled at London. on 7th Jan. 1916.  
by order of D.M.S. Canadian Contingents.  
for the purpose of examining and reporting upon the present state of health of  
(Rank and Name) Lieut. T. McGUIRE. (Corps) 2nd Battn.  
Age 29. Service 11 mths. Disability Ulceration over knee joint right.  
Date of commencement of leave granted for present disability 7th Dec. 1916.  
Date on which placed on half-pay for present disability \_\_\_\_\_

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that  
this Officer sustained an injury to superficial tissues of  
right knee, as described in Army Form A.45 of 7th Dec. 1915.  
Apparently the condition has slightly improved, but the  
Board is of the opinion that hospital treatment is absolutely  
indicated, and for this purpose recommends three weeks'  
extension of leave.

If concur in the findings  
of the Board of Medical Officers  
here recorded. *Blair*

Major, C.A.M.C.  
For D.M.S.  
Canadian Contingents.

7. 1. 16

Address. Penrice Castle, Reynoldston, Swansea, WALES.

The opinion of the Board upon the questions herein is as follows:—

- (1.) a. Is the officer fit for "General Service"? No.  
b. If not so fit, how long is he likely to be unfit? Three weeks.
- (2.) a. <sup>any</sup> If unfit for General Service, is he fit for service at home? No.  
b. If not so fit, how long is he likely to be unfit for service at home? Three weeks.
- (3.) Was the disability contracted in the service? Yes.
- (4.) Was it contracted under circumstances over which he had } Yes.  
no control? }
- (5.) Was it caused by military service? Yes.
- (6.) If caused by military service, } Infection following abrasion.  
to what specific conditions }  
is it attributed? }

Signatures { (Sd) DAVID DONALD. Major, C.A.M.C. President.  
" T.A. MALLOCH. Capt. C.A.M.C. } Members.

2

## Instructions.

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1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Question 2 is only to be answered by the Board, when specially instructed by the convening authority.

4. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

9 M-372

FIELD SERVICE.

A.F.B. 2090A forwarded to Ottawa on 24-11-16

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 } 2nd. Canadian Battalion. Squadron, }  
or } \_\_\_\_\_ Troop, Battery }  
CORPS } \_\_\_\_\_ or Company }

Regtl. No \_\_\_\_\_ Rank Captain.

Name MAGUIRE F.

PAYMASTER  
NOV 4 1916  
CANADIAN  
OVER-SEAS BASE

Died { Date 21st. September 1916  
Place France or Belgium.  
Cause of Death\* Killed in Action.

Nature and Date of Report Letter dated 27-9-16 and A.A.G. Can Sec. K.I. 137/1436.

By whom made O.C. 2nd. 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 \_\_\_\_\_  
Date \_\_\_\_\_  
By whom reported \_\_\_\_\_

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

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 } W. J. ... Captain, for Lt-Col. A.A.G.

Station and Date Rouen, Part 11 Orders No. 57 dated 30-9-16

1917

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1917



FOR HEADQUARTERS, C.A. ADIANS

Army Form A. 45.

CONFIDENTIAL.

PROCEEDINGS OF A MEDICAL BOARD

assembled at Snaw on Dec 7-1915  
 by order of D.M.S. Canadian  
 for the purpose of examining and reporting upon the present state of health of  
 (Rank and Name) Lieut. F. McQuinn (Corps) 2<sup>nd</sup> Bn.  
 Age 29 Service 1 3/12 Disability Ulceration over knee joint  
 Date of commencement of leave granted for present disability Dec 7<sup>th</sup>  
 Date on which placed on half-pay for present disability \_\_\_\_\_

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

This officer had two severe attacks of influenza while in France, after recovering from the second he sustained a slight abrasion of the skin over the right knee. This became infected, and now there is an ulcer of about 1/2 in. deep and 1 in. in diameter with area of induration of 3 in. diameter.

address Capt Hotel  
Snaw.

The opinion of the Board upon the questions herein is as follows:—

- (1.) a. Is the officer fit for "General Service"? no  
 b. If not so fit, how long is he likely to be unfit? one month
- (2.) a. If unfit for General Service, is he fit for service at home? no  
 b. If not so fit, how long is he likely to be unfit for service at home? 1 month
- (3.) Was the disability contracted in the service? Yes
- (4.) Was it contracted under circumstances over which he had no control? Yes
- (5.) Was it caused by military service? Yes
- (6.) If caused by military service, to what specific conditions is it attributed? infection.

I enclose in the findings of the Board of Medical Officers here recorded.

Major, C.A.M.C.  
For D.M.S.  
Canadian Cont...

Signatures { D. R. ... President.  
... Members.

## Instructions.

---

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Question 2 is only to be answered by the Board, when specially instructed by the convening authority.

4. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

# ORIGINAL.

ARMY FORM B. 178.

To be used (a) for recruits enlisting direct into the Regular Army and (b) for men of the Territorial Force when they are admitted to Hospital Army Form B. 178<sup>A</sup> to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

## MEDICAL HISTORY of

Surname MAGUIRE, Christian Name FRANK.

### TABLE I.—GENERAL TABLE.

21-2-16

Birthplace ... Parish New Carlisle. County Quebec.

Examined... { on 9th day of October 1914  
at H.M.T.Scotian.

Declared Age ... 29 years ... days.

Trade or occupation ... Barrister-at-Law.

Height ... 5 feet 10 inches.

Weight ... lbs.

Chest Measurement { Girth when fully Expanded 37 inches.

{ Range of Expansion 4 1/2 inches.

Physical Development ...

Vaccination { Arm ... Right Left  
Marks { Number ...

When Vaccinated ...

Vision ... { R.E.—V=  
L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease ... { (a) Small lipoma over the sternum small scar on right hip.

(b) Slight defects but not sufficient to cause rejection ... { (b)

Approved by (Signature) C.A.Young.

(Rank) Captain. A.M.C.

Medical Officer.

Enlisted ... { at Quebec.  
on 29th day of September 1914

Corps.	Regt. No.
<u>12th Batt:</u>	<u>LieutP</u>

Became non-effective by

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.

on \_\_\_\_\_ day of \_\_\_\_\_ 191 .

(Signature) H. Young

(Rank) Lieut.-Col.

The Medical History sheets of all men proceeding overseas, must be returned by the Officer commanding their unit to the Record Office when they leave England.

Lieut.-Col. In Charge of Records Canadian Contingent

*H. Young*

*C*



List in the case of Warrant Officers treated in quarters.

Notes bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.

Signature of Medical Officer

*Small superficial abrasion on Rt knee*

*which cleared up in three days*



Duplicate Medical History Sheet posted to here.

Medical Registrar

Record office.

*J. M. Graham*  
*Capt R. A. ...*



NAME

Maguire Frank,

H. Q. FILE No. 649-

REGT'L. No.

RANK AND CORPS

Capt.

2nd Battn 101st Airborne Div.

CABLE

NO.

DATE

NATURE OF CASUALTY

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
482-4	No 2. Gau. Hld. Amb. to Officers Rest. Stat.	8-9-16	Gastro-Enteritis
482-4	" " "	14-9-16	" " Dis. to duty.



NAME

Maguire Frank.

H. Q.

6529-1

REG'TL. NO.

RANK AND CORPS

Lieut. (12) (2nd Battalion)

CABLE

NO.

DATE

NATURE OF CASUALTY

Capt.

01515

26-9-16.

Killed in action Sept  
22nd. 1916. ✓

NO. 42

X FOLL.

ARFB 2090A

Killed in action Sept.

Rouen 30-9-16

21<sup>st</sup> 1916.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
163	No 1 Can. Fld. Amb.	5/9/15	Diarrhoea (D.C.S. 163)
174	Rep. from Base (Nos. 171)	15-9-15	Rejoined unit - Diarrhoea
186 .1	No 1. Can Fld. Amb (D.C.S. 180)	28-9-15	Sick.
186 .1	Reported Base (D.C.S. 180)	1-10-15	Sick (rejoined unit)
205. 2.	Fld. Amb (D.C.S. 200)	29-10-15	Sick.
212.	Disch to duty (D.C.S. 205)	5-11-15	Acute Bronchitis.
212.	rejoined unit from	6-11-15	Base (Acute Bronchitis)
233 (2)	Unfit for service for 1 mo	7-12-15	Ulceration over knee joint
278 2	Med. Boards	2-2-16	Fit for Gen. Serv.
292 12	Admitted Queen Alexandra's Mil Milbank S.W.	28-1-16	Septic R. knee
292 13/	Discharged	31-1-16	Septic R. knee.
476-4	No 6. Can. Fld. Amb	8 ● 9-16	Gastro Enteritis
488-1	Rep. from Base, (Del Base)	22-9-16	Killed in action