

REGIMENTAL DOCUMENTS

NAME

BAGLEY

Jos.

REGT. NO.

829508

UNIT

144th Bn

H. Q. FILE NO.

NON-EFFECTIVE BY

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

DEATH

Category

DISCHARGE

Category

DESERTION

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FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

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R. O. 6045

D. M. S. 1345

663

19122

Ref. R. La. Os 248

FORM OF WILL.

84840

I, Joseph Bagley (Name in full),
 Regimental Number 829508 serving in 144th Battalion
 of the Canadian Expeditionary Force, do hereby revoke all former Wills
 by me made and declare this to be my last Will.

I bequeath all my real estate unto

Name & Address
 of person or
 persons to whom
 it is to go.

absolutely, and my personal estate I bequeath to

Mrs F. Bagley (Mother)
487 Queen Street St James
Manitoba.

Name & Address
 of person or
 persons to receive
 personal estate*
 (see note).

In Witness whereof I have hereunto set my hand

this 5th day of June A.D. 1917.

Joseph Bagley Signature.

* N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in
 the presence of us both present at the same time, who in his presence, at
 his request, and in the presence of each other have hereunto subscribed
 our names as Witnesses.

Name of Witness David Faulkner

Address of Witness 117 Mildmay Rd London England

Occupation of Witness Clerk

Name of Witness D. J. Evans

Address of Witness 40 Trust Loan Co of Canada

Occupation of Witness Clerk

To be made out in duplicate.

H.Q. 54-21-23-53

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.....**14th Overseas Battalion C.E.F.**
- (2) Regimental Number.....**829508**
- (3) Full Name of Soldier.....**Pte. Joseph Bagley**
- (4) Place of Birth.....**Birmingham England**
- (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?.....**No**
- (8) Have you any children?.....

If so, give number of boys and girls.....

Also their names and ages.....

.....

.....

.....

.....

(9) Is your Father alive? Yes. Harry Bagley, 487 Queen Street, St. James Man.

If so, state name and address

(10) Is your Mother alive? Yes Phoebe Bagley same address

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? No

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.


Lieut.-Colonel
Commanding 14th Overseas Bn. C. B. F.
Officer Commanding.

Date JUN - 6 1916

ORIGINAL

100th OVERSEAS BATTALION C.E.F.

5-M

MEDICAL HISTORY SHEET.

Surname Bagley

Christian Name

JosephExamined { on 26th day of Feb 1916
at Winnipeg Man

Approved by

*Harry J. Watson*Birthplace { City or Town Birmingham
County EnglandRank 144th Batt

M.O.

Apparent age 17yrs 5mthsTrade or occupation PlastererHeight 5 Feet 9½ Inches.Weight 142 Lbs.Chest measurement { Minimum 31 inches.{ Maximum expansion 5 inches.Physical development Good

Small-Pox Marks

Vaccination Marks { Arm Right Left 2
Number 2

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Middle Finger Right HandEnlisted on 26th of Feb 1916 at Winnipeg Man

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>144th Battl CEF</u>	<u>929508</u>		<u>26. 2. 16</u>
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Dubgali</u>	<u>16 8 '17</u>	<u>Flat Feet</u>	<u>Bt. Dr. Macpherson Capt</u>
<u>Seaford</u>	<u>8-11-18</u>	<u>do</u>	<u>Bt. Dr. Macpherson Capt</u>
<u>do</u>	<u>20-11-18</u>	<u>do</u>	<u>Bt. Dr. Macpherson Capt</u>
<u>do</u>	<u>23. 4. 19</u>	<u>do</u>	<u>Bt. Dr. Macpherson Capt</u>

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.

Joseph;

H. J. Watson

Reserved for M.H.C.

Regt. No. 829508 Rank PTE Surname BAGLEY Christian Name JOSEPH
 Unit or Corps—(a) Overseas from United Kingdom.....(b) in United Kingdom M.R.D. (18)
 Born at—Town BIRMINGHAM County or Province.....Country ENGLAND
 Date of Birth—Day 19 Month OCTOBER Year 1898 Age 20 yrs. 1 months.
 Joined at WINNIPEG Date FEB. 26. 1916
 Former trade or occupation PLASTERER

Permanent Marks or any peculiarity that will serve for future identification:—

*Two vaccine marks on left upper arm.*Height—feet 5 inches 9 1/2 Colour of eyes BLUESignature of Soldier (for identification purposes) *J. Bagley***Medical Report**

Read carefully the instructions on last page of this form.

1. DISABILITY.

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (a)

PAIN IN FEET.

Disabilities Group (b)

Disabilities Group (c)

2. CAUSE OF DISABILITY

	Place of origin.	Date of origin.
(i.) As to Group (a) above.	<u>BIRMINGHAM ENGLAND</u>	<u>PRIOR TO ENLISTMENT.</u>
(ii.) As to Group (b) above.		
(iii.) As to Group (c) above.		

3. Is the disability due to disease contracted or injuries received prior to Active Service?(i.) As to Group (a) above? YesIf yes, has Active Service aggravated it? No(ii.) As to Group (b) above? —If yes, has Active Service aggravated it? —(iii.) As to Group (c) above? —If yes, has Active Service aggravated it? —**4. Is the disability due to disease contracted or injuries received while on Active Service?**(i.) As to Group (a) above? No(ii.) As to Group (b) above? —(iii.) As to Group (c) above? —

Received for M.I.C.

Permanent Marks or any peculiarity that will serve for future identification:—

Medical Report

I. DISABILITY.

2. CAUSE OF DISABILITY

*Delete if inapplicable.

NOT IN HOSPITAL

Proceedings of a Medical Board on the Soldier mentioned in Part I.

10. Is the disability fully described in Part I. (1)? *Yes.*
If not, describe it.

11. Is the cause of the disability fully described in Part I. (2)? *Yes.*
If not, describe it.

12. From the medical information now adduced, was the disability caused or aggravated by:
(a) Negligence of the Soldier { Caused? *no* Aggravated? *no* }
(b) Misconduct of the Soldier { Caused? *no* Aggravated? *no* }

13. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(Estimate at none, 5%, 10%, 15%, 20%, etc.) *none.*

14. THE DISABILITY DUE TO SERVICE.—(See Part I. (3).) Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.
What part of the entire disability estimated next above (13) is due to causes arising during Active Service?
(Estimate at none, 1/10, 2/10, 3/10, etc., or all.) *none.*

15. Permanency of the Disability due to Service estimated next above in (14).
(i.) Is it permanent? *not applicable.*
(ii.) If not permanent, what is its probable minimum duration (in months)?

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable? *not applicable.*

17. Can the former trade or occupation be resumed? *Yes.*

18. REMARKS:
Authority A.G. Telegram 9083 8/11/18.

19. RECOMMENDATION:—
(a) Fit for duty? *Yes - B7*
(b) Invalid to Canada? *no*
(c) Discharge from Service? *no*
(as permanently unfit?)

Date of Board	20-11-18	Station	Seaford	Signature of M.O.	<i>[Signature]</i>	Signature of the Board	<i>[Signature]</i>	President.	<i>[Signature]</i>
Approved	<i>[Signature]</i>	Dated at	Seaford, Sussex	Station	A.D.M.S.	20 NOV 1918	191		

Statement of the Soldier

(This is to be completed only in the case of the Soldier taking his Discharge in England.)

(Sections 1, 2, 5, and 6 are to be read to the Soldier.)

I, the undersigned.....Joseph T. Bagley.....have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of:—In the

Signature of Soldier examined.

Instructions to Medical Officers

Question 1.—State the disability in terms of a diagnosis, that is, a diagnosis of the existing condition as distinguished from the disease or injury which caused it. It should be noted that in medical cases the disability may be the actual disease; for example, Tubercle of Lung, Chronic Bronchitis, Myalgia, Gastric conditions and so forth. (Follow the nomenclature as laid down in the "List of Diseases" of 1915, and amended by A. C. I. No. 1587 of 1917.)

Question 2.—The cause of the disability when known should be stated and care should be taken to establish as correctly as possible the place and date of origin. This is important in view of the relationship of Questions 3 and 4 to Question 5.

Questions
3 and 4.—NOTE—By Active Service is meant Service with the Colours in Canada, the United Kingdom or elsewhere during the present war, (since the 4th August, 1914.)

Question 5.—MEDICAL HISTORY.—State concisely the essential points of the history of the case as supported by documentary evidence. If further evidence is considered necessary to complete the Medical History, the same not being supported by documents, this should be obtained by questioning the soldier, but should be distinctly shown as "Patient's Statement." It is considered advisable that these latter statements be grouped apart from the evidence supported by documents available to the Medical Officer.

Extracts should be made from all entries on the Medical History Sheet.

If answers to Nos. 2, 3 or 4 show that the Soldier is suffering from some condition which pre-existed enlistment, it is advisable that these answers be substantiated as far as possible by statements obtained from the Soldier showing history of previous illness or injury.

Question 6.—PRESENT CONDITION.—As this question is primarily intended for the Medical Officer's report, in answering show clearly the condition of the Soldier at the time of examination.

It is directed that the objective and subjective matter be arranged in separate groups. The objective matter is considered to be the more important, in that it consists of a statement of the Medical Officer's actual finding.

Specialists' reports bearing on the PRESENT CONDITION should be attached.

In addition to description of the disability, a report on "all systems" is required in order that the whole when completed may be a true pen portrait of the Soldier's condition.

The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be wholly in the handwriting of the Medical Officer. The copies may be typewritten but must be signed by the Medical Officer who must be responsible that these are true copies of the original.

Finally the O. C. Hospital or S. M. O. or an Officer delegated for such duty by the A. D. M. S., is required to sign a certificate at the bottom of page 2, which reads as follows :—

" I have satisfied myself of the general accuracy of this report and concur therewith, except....."

This is a most important part of the paper and one to which the attention of the Officers concerned should be frequently drawn as it is by such strict supervision that the accuracy and good results of Medical Board work can be assured.

ENTRIES OF RECATEGORIZATION

[illegible]

PROCEEDINGS OF A MEDICAL BOARD.

Dated at August 16th. 1917.

No. 829508. Rank Pte. Name Ba yley. J.

Local Unit L8th Res. Overseas Unit ----- Age 18 ¹⁰₁₂

Examination held at Dibgate Camp, Shorncliffe.

DISABILITY. FLAT FEET.

~~Overseas~~-Local
(SCRATCH ONE OUT).

PRESENT CONDITION.

Says:-

Feet give him great pain while marching, and next day he feels so "foot sore" he can hardly move.

In other ways he is perfectly fit being well nourished and sturdy.

On examination feet are decidedly flat. Walks with characteristic gait of flat feet.

BOARD RECOMMENDS:-

B.11.

1. Fit for Duty
2. Fit for duty after weeks' physical training.
3. Fit for Temporary Base Duty weeks
4. Fit for Permanent Base Duty
5. Discharge

Signatures:-

C.

Members

(D.A. McGregor. Capt. CAMC. President.

(H.B. Thomson. Capt. CAMC.

APPROVED

18 AUG 1917

Dated 1917. S. L. Walker CAPT.
FOR A.D.M.S. CANADIANS, SHORNCLIFFE. For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Seaford Jan 2 1917

No. 929508 Rank Pt Name Bagley J B

Local Unit 144 BATT Overseas Unit _____ Age 18

Examination held at Seaford Sussex

DISABILITY.
Overseas—Local.
(scratch one out)

Flat Foot.

PRESENT CONDITION.

was 18 yrs old Oct. 19/16
Foot flat and becoming painful on
long marches weight 170 lbs Height 5'10"
Occupation—Plasterer.

P.B. D

BOARD RECOMMENDS:—

BI

1. Fit for Duty.....
2. Fit for duty after.....weeks' physical training.
3. Fit for Temporary Base Duty.....weeks.
4. Fit for Permanent Base Duty yes.....
5. Discharge.....

Signatures:—

Members

H. H. Alder Maj President.
Robert Thompson

APPROVED

Dated at Seaford Jan 2 1917

Alders Major
Badams For A.D.M.S.

THIS FORM WILL BE USED FOR ALL RANKS
MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION..... Seaford DATE 23-4-19

1. 1 (a) Unit. 18th Res. (b) Regimental No. 829508 (c) Rank. Pte.
 (d) Surname. BAGLEY (e) Christian name. Joseph
 (f) Home address. 487 Queen St., St. James, Man.
 (g) Next of Kin. Harry Bagley (h) Relationship. Father
 (i) Address of Next of Kin. Same as above

2. Age last birthday. 21 Date of birth. 19-10-1897

3. Enlistment, or Appointment (if an Officer) (a) Place. Winnipeg, Man (b) Date. 26-2-16

4. Personal description:

(a) Height. 5' 10" (b) Weight. 175 est (c) Complexion. Medium
 (d) Colour of hair. Dk. Brown (e) Colour of eyes. Blue (f) Identification marks, Scars, etc. Scar 1 1/2"
long to tip of 2nd finger R. hand palmar surface, tip of finger deformed

5. Former trade or occupation. Plasterer

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3	58

	PERIODS	
	From	To
Canada	26-2-16	18-9-16
England.....	25-9-16	23-4-19
France or other theatres of War.....		

7. Original disease, or injury. Flat feet

(a) Date of origin. Prior to enlistment (b) Place of origin. Canada
 (c) Cause. Unknown

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

Weakness of both feet, unable to march over five miles without aching pain in both feet.

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Objective:— Both feet moderately flat. plantar muscles well developed. No pain on pressure over arches. Movements of foot and toes normal. (Can raise on toes whole weight of body either foot.

Subjective:— Complains that continuous long marches causes feet to ache and pain.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System.....	No	Cardio-Vascular System.....	No	Genito-Urinary System.....	No
		(If pulse rate is abnormal, B. P. will be taken.)		(Albumen and Sugar will be excluded.)	
Special Senses.....	No	Respiratory System.....	No	Integumentary System.....	No
Disturbances of Mentality.....	No	Digestive System.....	No	Muscular System.....	No
Osseous and Joint Systems.....	No	Any other general condition.....	No		

10. (a) History (of the condition referred to in Section 9 (a).)

States that feet were flat when enlisted, never fell out of route march but feet troubled him.

Boarded Seaford 2-1-17 Flat Feet classified P.B.D.

Boarded Dibgate 16-8-17 Flat Feet classified B.ii.

Raised to B.i. 8-11-18. Boarded Seaford 20-11-18 Flat Feet classified B.i. States feet same now as when enlisted.

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

Hospital Canada 5-5-16 to 9-5-19 N.Y.D.

(c) (Here give a description of wounds, scars and deformities.)

See 4 (f)

11.—(a) Did the disabling condition have its origin before enlistment? Yes

(b) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

No

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? No

The regimental documents will be referred to.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Permanent

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

Nil

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? (If the answer is "yes" state nature of treatment required and probable duration)

N.A.

16. Can the former trade or occupation be resumed? Yes (If not, briefly state why)

17. Recommendations N.A.

(Sgd) J.D. MacDonald, Lieut.
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned, Joseph Bagley have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of

(Sgd) J. Bagley, Pte. Rank.
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

Yes

O.R.

19. Is the ~~invalid~~ fit for

- (a) General service,
(b) Service abroad, not general service,
(c) Home service (Canada only),
(d) Temporarily unfit.
(e) Unfit for service in Categories A, B and C

(Category A) (Yes ~~or~~ No.)
(" B) (Yes ~~or~~ No.)
(" C) (Yes ~~or~~ No.)
(" D) (Yes ~~or~~ No.)
(" E) (Yes ~~or~~ No.)

Yes B.1.

20. It is certified that the ~~invalid~~ O.R.

(a) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)

(b) Does not require treatment.

(c) ~~Should pass under his own control~~

(d) ~~Should not pass under his own control~~
(Strike out condition not applicable.)

21. It is recommended that the ~~invalid~~ be discharged.

(When not for discharge add special recommendation.)

Boarded for return to Canada

Auth. A.G. Tel. 9083 11-11-18

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

(Sgd) G.G. Malcolm, Capt.

President.

PLACE Seaford

(Sgd) J.C. Copp, Lieut.

Members

DATE 23-4-19

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned..... understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness.....

Signed.....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

President

PLACE.....

Members

DATE.....

APPROVED BY

APPROVED BY

L.P. Dyson Capt.
for Assistant Director of Medical Services.

Director-General of Medical Services.

DATE.....

DATE.....

J.C.



CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters)

BALLEY J.

REGIMENT

18th. RES

RANK

PTE

No.

829508

Date of Examination in England

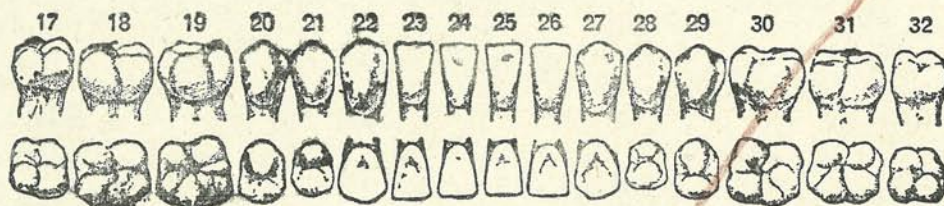
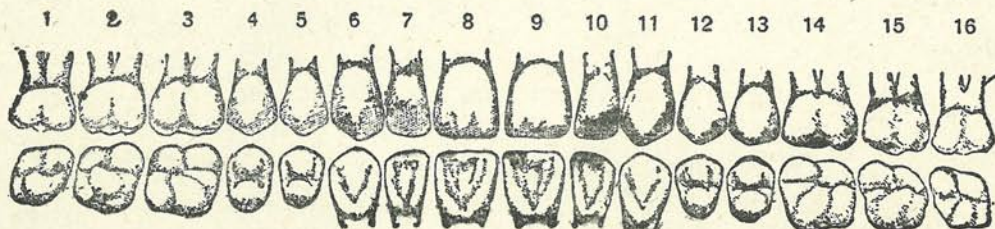
24/5/19

Date of Examination in France

1. This form will be made out for each individual at the time of Demobilization in England or France.

2. Figures as per chart will be used to designate teeth concerned.

3. In reference to Partial Dentures the numbers of teeth thereon will be stated



PRESENT DENTAL REQUIREMENTS

1. FILLINGS

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

*Just
see my list.*

HAS HE EVER REFUSED DENTAL TREATMENT? NO

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

(a) In Canada

(b) In England

(c) In France

Signature of Dental Officer

B. B. Beaton Corp

DEPARTMENT OF VETERANS AFFAIRS

WAR VETERANS ALLOWANCE DISTRICT AUTHORITY

Address Winnipeg

The Public Archives Records Centre,
Tunney's Pasture,
Ottawa 3, Ontario.

MARK YOUR REPLY:

Attention: Reference Section.

For attention of:

Re: BAGLEY Joseph
(Surname) (Christian Names)

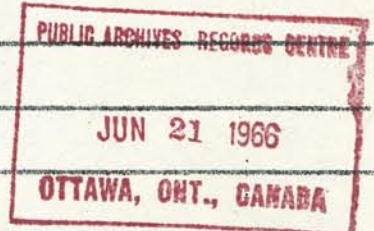
Service No. 829508

Veteran is stated to have served during S. African War() World War I (✓)

To enable this WAR VETERANS ALLOWANCE DISTRICT AUTHORITY to determine the eligibility of the above-named, will you kindly furnish the following particulars:

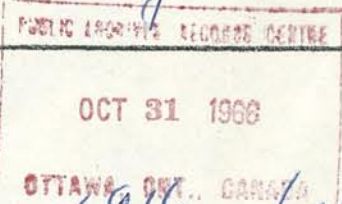
1. UNITS (including that of discharge) HIGHEST RANK IN UNIT:

- (a) 144 Bn Pte
(b) 18 Res Bn Pte
(c) _____
(d) _____
(e) _____
(f) _____
(If other than CEF please so designate following applicable unit)



2. THEATRES OF SERVICE

- (a) South African War
Date and port of embarkation _____
(b) World War I - (If Canada only, state if with territorial limitations).
Canada - Britain 18 September 1916
Date(s) embarked for U.K. _____
IF CANADA AND U.K. ONLY Date(s) disembarked in Canada from U.K. 20 June 1919
Period(s) of desertion in U.K. _____



3. Any other military service.

Nil

4. Date and place of all enlistments.

26 February 1916 - Winnipeg, Man.

5. Date of all discharges and reason.

24 June 1919 - Desmol.

6. Date and place of birth as per attestation paper.

19 October 1898 - Birmingham England

7. Marital status; If married, name in full of wife.

Single

8. Religion.

S. Army

9. Decorations, if any.

Nil

WVA 18.

Head, Reference Section.

B. 2120

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

REGT. NO. 829

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.
ADDRESS					144 PLACE OF ATTESTATION
					DATE OF ATTESTATION
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				ASSIGNED PAY \$
TO WHOM PAID	RELATIONSHIP				PAYABLE TO
ADDRESS					ADDRESS
					STOP PAYMENT FORM
					ASSIGNED PAY RENDERED, DATE
					DISCHARGED

[illegible]

IONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

REGT. No.

829508

RANK

NAME (IN FULL)

BAGLEY. U

24

ICULARS

EFFECTIVE
DATE

AUTHORITY

ORIGINAL UNIT
C.E.F.

144

IF IN P.F.
WHAT UNIT?

(BLOCK LETTERS SURNAME FIRST)

PLACE OF
ATTESTATION

TRANSFERRED TO
Dis Stn M

DATE _____

DATE
JUN 14 1919

.....
AUTHORITY

D. O. 179

DATE OF ATTESTATION

TRANSFERRED TO

DATE _____

.....
AUTHORITY

ASSIGNED PAY \$

DATE EFFECTIVE

PAYABLE TO

RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM
ASSIGNED PAY
RENDERED. DATE

EFFECTIVE

DISCHARGED

PLACE
M. D. 10

DATE _____

JUN 24 1919

REASON

.....
AUTHORITY

D, O, 179

IF ENTITLED TO
POST
DISCHARGE
PAY

QUITTING ROLLS

CASH PAYMENTS

ASSIGNED

REGI-
MENTAL
CHARGES

OTHER
CHARGES

TOTAL DEBITS

BALANCE

PARTICULARS OR REMARKS

[illegible]

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12.
 50m.-6-16.
 H. Q. 1772-39-819.

To Whom *Mrs Phoebe Bagley*
 Address *487 Queen St-
 St James*

By Whom Assigned *Bagley J.*
 Regtl. No. *829508*
 Rank *pl-*
 Corps *#144th old. "Base"*

Rate *\$20.00*

Wfg.
 SEP 1 1916



Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

MILITIA AND DEFENCE
ASSIGNED PAY

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. *Mrs Phoebe Bagley*
(Assignee) OVERSEAS CONTINGENTS
PAYMENTS.

Name of Soldier

Bagley J.
#829508-144110 B *pu* "Base"

L. L. Job 5470—Req. 6883.

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>\$20.00</i>
April	1916			
May				
June				
July				
Aug.				
Sept.		<i>U 20675</i>	<i>20</i>	
Oct.		<i>K 19964</i>	<i>20</i>	
Nov.		<i>K 24561</i>	<i>20</i>	
Dec.		<i>C 33374</i>	<i>20</i>	
Jan.	1917	<i>S 36672</i>	<i>20</i>	
Feb.		<i>R 40844</i>	<i>20</i>	<i>20 X</i>
March		<i>U 43702</i>	<i>20</i>	<i>20 L</i>
April		<i>S 433</i>	<i>20</i>	<i>20.50</i>
May		<i>S 6320</i>	<i>20</i>	<i>20</i>
June		<i>T 13340</i>	<i>20</i>	<i>20 W</i>
July		<i>T 20364</i>	<i>20</i>	<i>W</i>
Aug.		<i>U 26434</i>	<i>20</i>	<i>W</i>
Sept.		<i>T 34370</i>	<i>20</i>	<i>W #260.00 OKD.</i> ✓
Oct.		<i>E 46834</i>	<i>20</i>	
Nov.				<i>+</i>
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

B

Date of Assignment

215

1-4-18

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

20	15		
----	----	--	--

fr. 1-4-18

PARTICULARS OF SEPARATION ALLOWANCE

No. 829508
 Rank Pte, Promoted Reverted Discharge
 Soldier's Name J. Bagley
 Battalion 144th Bn. "Bani"
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Phebe Bagley
 Address 487 Queen St. W. 7th Fl. Bagley
 Change of Address St James. Wpg.
 1
 2 Mrs Phebe Bagley out file
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Sept. 30/1917			260	260	
OCT	E 46834		20	20	
Nov	B 53735		20	20	
Dec	F 56079		20	20	
1918 Jan 18	N 65282		20	20	Dr.
Feb	B 95793		20	20	
March	A 91541		20	20	
April	X 11560		15	15	A
May	C 9668		15	15	A
June	B 18034		15	15	
July	M 31051		15	15	b
Aug	Q 33627		15	15	b
SEP	Q 40502		15	15	b
OCT	A 47123		15	15	A
NOV	A 55213		15	15	
DEC.	B 65971		15	15	
Jan/19	B 74263		15	15	A
FEB	A 81005		15	15	
MAR	D 86505		15	15	
APR	C 3571		15	15	
MAY	A 8153		15	15	
JUN	A 10636		15	15	
			605	605	

AUDITED.

A/c Closed

Ret'd per...

Date...

Clerk...

M.D. 10

M.O. 129450

M. F. W. 128
 400M-6-17-1772-39-141
 L. L. 22320-M. & D. 7593.



Date of Assignment

OVERSEAS CONTINGENTS

RATE OF ASSIGNMENT

--	--	--	--

--	--	--	--

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

[illegible]

M. F. W. 128
400M.—6-17-1772-39-1141
L. L. 22320—M. & D. 7993.

ASSIGNED PAY EFFECTIVE DATE:- 1-4-18 AMOUNT:- 15 ⁰⁰	ENGLAND OR CANADA. SEPARATION ALLOWANCE. EFFECTIVE DATE:- AMOUNT:-	ENGLAND OR CANADA. NAME:- BAGLEY Joseph 10 NUMBER:- 829508	PARTICULARS OF RANK OR APPOINTMENT AUTHORITY DATE EFFECTIVE RANK OR APPOINTMENT: Private								
NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.		UNIT AND TRANSFERS ORIGINAL UNIT:- 144 th Batt DATE ACCOUNT FIRST OPENED:- 1-10-16									
Mrs Charles F. Bagley 22m. 4 th 18 487 Queen St. St James. Mother. Manitoba. Stopped 1/7/19.		AUTHORITY DATE EFFECTIVE DATE LEDGER SHEET T'S F'D UNIT TRANSFERRED TO: M.R.D.									
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK											
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT				
27.5.19	1186		12.17								
				Ledger Bal 30.64 RR 18.47							
DAILY RATES OF PAY AND ALLOWANCES											
AUTHORITY		PAY	F.A.	P.F.A.	SUBS CE ALL'CE						
		1	10								
PARTICULARS OF RENDERING NON-EFFECTIVE Des to leave 30/6/19. £100.57 Seaford 2/6/19 Seaford (MD10)											
MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
Feb.	Bal. Forward								21 68	NIL	
Apr.	P.P.	33		C.O.P.				15			
				AR 78 " 7 th 18 Res	9 73						
				" 164 29 th 18	9 73				20 22		
		33			19 46			15			
May	P Pay	34 10		B.A.P.				15			
				AR 312 13/5/18 18 Res	14 60						
				" 412 24/5/18 "	9 73				14 99		
		34 10			24 33			15			
JUN	"	33		B.A.P.				15			
				AR 656 13/6/18 "	9 73						
				" 810 27/6/18 "	7 30				15 96	act agreed	
		33			17 03			15			
JUL	"	34 10		B.A.P.				15			
				" 865 9/7/18 "	12 17						
				" 1088 29/7/18 "	7 30				15 59		
		34 10			19 47			15			
AUG	"	34 10		B.A.P.				15			
				" 1298 12/8/18 "	9 73						
				" 1386 26/8/18 "	9 73				15 23		
		34 10			19 46			15			

~~Stopped 1/7/19.~~

UNIT AND TRANSFERS

ORIGINAL UNIT:- 144th Batt

DATE ACCOUNT FIRST OPENED. -1-10-16

UNIT TRANSFERRED TO

M. R. D.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED
BY INSERTION OF DATE CHARGED IN RED INK

[illegible]

DAILY RATES OF PAY AND ALLOWANCES

SUBS CE

1	-	10
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PARTICULARS OF RENDERING NON-EFFECTIVE

Q is to lean 30/6/19, £10087 Seaford 2/6/19 Seaford (MPD10)

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
Mch.	Bal. Forward								21 68	NIL	
apr.	P.P.	33		C.O.P.				15			
				AR 78 " 7/18 18 Res	9 73						
				" 164 29 7/18	9 73				20 22		
		33			19 46			15			
May	P Pay	34 10		b.a.p.				15			
				AR 312 13/5/18 18 Res	14 60						
				" 412 24/5/18 "	9 73				14 94		
		34 10			24 33			15			
JUN	"	33		b.a.p.				15			
				AR 656 13/6/18 "	9 73						
				" 810 27/6/18 "	7 30				15 96	acct agreed	
		33			17 03			15			
JUL	"	34 10		b.a.p.				15			
				" 865 9/7/18 "	12 17						
				" 1088 29/7/18 "	7 30				15 59		
		34 10			19 47			15			
AUG	"	34 10		b.a.p.				15			
				" 1298 12/8/18 "	9 73						
				" 1386 26/8/18 "	9 73				15 23		
		34 10			14 46			15			
SEP	"	33		b.a.p.				15			
				" 1508 11/9/18 "	9 73						
				" 1590 20/9/18 "	7 30				16 20		
		33			17 03			15			
Oct	✓	34 10		AR 1830 18 Res. 14.10.18	12 17			15			
				✓ 2019 ✓ 28.10.18	7 30				15 83		
		34 10			19 47			15			

Feb. & March	✓	64 90		C.A.P.			15	100 44
			an 3026	18 Res	3. 1. 19	9 73		98 13
			3660	✓	7-2-19	26 77		
			32798	call	13. 2. 19	14 60		
				C.A.P.		51 10	15	
			4156	18 Res	12. 3. 19	9 73		
			4509	✓	21. 1. 19	7 30		2 30
		64 90				68 13	30	
April & May	✓	67 10	53	✓	3. 4. 19	9 73		
			378	✓	23. 1. 19	9 73		
			822	✓	12. 5. 19	7 30		
				C.A.P.		26 76	30	12 64
		67 10				26 76	30	
June	✓	33		C.A.P.			15	30 64
			AR 1186	27/5/19	18 Res	12 17		18 47
		33				12 17	15	

Wanda 14/6/19 Met 85 18 Res

P. 559
MARRIED OR SINGLE

PLACE OF BIRTH *Birmingham England*

NAME AND ADDRESS OF NEXT OF KIN *Harry Bagley*

487 Queen Street St. James Man.

RELATIONSHIP OF NEXT OF KIN *Father*

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS

EFFECTIVE
DATE

AUT

ADMISSIONS TO HOSPITAL, &c.

DATE
ADMITTED

DATE
DISCHARGED

V.
OR
A.

NAME OF HOSPITAL

DATE	PAY			FIELD ALLOWANCE			WORKING OR SPECIAL PAY			ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS				RATE	AMOUNT		1		2		3	
			\$	C.			\$	C.						\$	C.	NO.	DATE	NO.	DATE	NO.	DATE
											8	8									
12/10/16	31	1 ⁰⁰	31		31	10	3	10				34 10	25	30/9	86	26/10					
12/11/16	30		30		30		2	-				33			722	16/11					
Dec. 1-31	31		31		31		3	10				34 10			154	1/12					
		1.	9	20																	
1917 Jan 1/31	31	10	34	10								34 10	207	17/12							
		1.	135	20							8	123 30	163	31/1							
Feb. 1/28	28	10	30	80								30 80	2	16/1							
Mar. 1/31	31	10	34	10								34 10	275	10/2	417	19/3					
												304	24/2	352	15/3						
Apl 1-30	30	10	33	00								33 00									
May 1/31	31	10	34	10								34 10	95	26/4							
												9	13/4								
June 1/30	30	10	33									33									
													177	16/5	281	31/5					
July	31	10	34	10								34 10	356	13/6							
Aug	31		34	10								34 10	466	29/6							
Sep	30		33									33	556	11/7	738	16/8					
													634	26/7	787	27/8					
												8 00	409	50							

IONS, &c.		REG'L No. 829508	RANK Private	NAME Bagley Joseph	199	
FFECTIVE DATE	AUTHORITY	IF IN PERMT. CORPS } WHAT UNIT	UNIT 144th Bn.	TRANSFERRED TO 18th Res Bn.	DATE 1-2-17	AUTHORITY 5013
PERMANENT FORCE ALLOWANCES			TRANSFERRED TO	DATE	AUTHORITY	
PLACE OF ATTESTATION Winnipeg			TRANSFERRED TO	DATE	AUTHORITY	
DATE OF ATTESTATION Feb. 26th. 1916.			TRANSFERRED TO	DATE	AUTHORITY	
ASSIGNED PAY MONTHLY \$20 ⁰⁰ 15 ⁰⁰			DATE EFFECTIVE Apr. 1st 1918	a. 2m from 4-8-18.		
PAYABLE TO Mrs Phoebe Bagley,			487 Queen St. St. James, Man.	RELATIONSHIP	Mother	
ASSIGNED PAY MONTHLY \$			DATE EFFECTIVE			
PAYABLE TO			See date.	RELATIONSHIP		
STOP-PAYMENT FORM (Assigned Pay) RENDERED (DATE)			EFFECTIVE	REASON		
DISCHARGE DATE AND PLACE			REASON AND AUTHORITY			
ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)			Assigned pay for month of Sept. paid by Assigned Pay Branch, and recovered on Sept. Pay Sheets, Canada.			
ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)						

UITANCE ROLLS					CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
2	3	4			1	2	3	4				CREDIT	DEBIT			
DATE	No.	DATE	No.	DATE												
												8				Bal from Canada
26/10					974	487-			20		3461	749				
16/11						244-			20		2244	1805				50-13-13-1-17. 2nd to 18th Res Bn Eff 1-2-17
1/12						243-			20		2243	2972		Nil		
					730-				20		2730	3652	✓			
					730-						10678					
					487-				20		3217	3515				
12/13					973-	742-			20		4713	2212				
2/15/3					511-	487-			20							
									20		2000	3512				
					742-				20		3472	3450				
					730-											
131/5					730-	743-			20		3473	3277				
					730-				20		2730	3957				
					499-				20-		2499	4868			4868	
8/16/8					973-	730-										
727/8					486-	487-			20		4676	3492				
					9295	4163			240		37458					

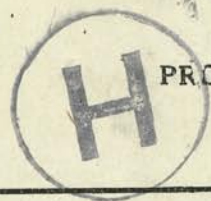
829508 - Pk. Bagley - J -

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS					
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT		1		2		3		4		1	2	3	
			\$	C.						\$	C.	NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE				
MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLG. ENG.	MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLG. ENG.
Oct 1/17	Bal. For. PP	34 92							34 92														
		34 10							20														
				AR. 860 13/17 18 Res.	7 30																		
				AR. 896 24/17 18 Res.	7 30				34 42														
		34 10		CAP.	14 60				20														
Nov	PP	33 00							20														
Dec	"	34 10		AR. 966 11/17 18 Res. Bn	9 73																		
				AR. 1042 27/10/17 18 Res. Bn	4 87																		
				AR. 1096 12/1/17 18 Res	7 30																		
				AR. 1162 18 Res. Bn 27/1/17	4 87																		
		67 10		CAP.																			
					26 77				20														
									40														
Jan 1918	O.P.	34 10		a.p.					20														
				AR. 1199 5/1/17 19 Res.	7 30																		
		34 10		AR. 1360 7/1/17 "	7 30				34 55														
					14 60				20														
Feb	PP	30 80		C.A.P.					20														
				AR. 1316 9-1-18 "	10 70																		
				" 1410 23-1-18 "	2 43																		
				" 1564 12-2-18 "	7 30				24 62														
		30 80			20 43				20														
Mar	"	34 10		C.A.P.					20														
				AR. 1699 25 3/8 18 Res	4 87																		
				" 1807 11 3/8 "	7 30																		
				" 1909 25 3/8 "	4 87				21 68														
		34 10			77 04				20														

[illegible]

W.S. Badge 22-4
SHORT FORM.

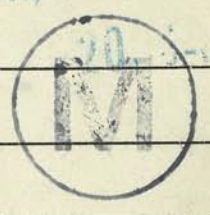
Class 6.
no 22853



PROCEEDINGS ON DISCHARGE.
(Demobilization.)

H.M. 22-4-11-11

14. 6. 19



1. No. 829508

2. Rank. Pte.

3. Name. Bagley Joseph.

4. Unit. H

18th Res. Bn.

5. Date of Discharge 24-6-19 Place Winnipeg

6. Reason for Discharge Demob.

DISPENSARY AREA. M. 10.

OCCUPATIONAL GROUP. 2.

7. Authority. 20 149

8. Proposed Residence after Discharge. 487 Queen St. E. James, Winnipeg

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.?

Signature of Soldier.
MEDICAL DOCUMENTS
FORWARDED TO
S. R. or P. B. C.
ON 24 JUN 1919

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place. Dispersal Station "A"
Date. JUN 24 1919
Military District No. 10

Signature. [Signature]
(O. C. Discharging Unit.)

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

1. Triplicate.....
2. Particulars of Recruit (M.F.W. 133).
3. Casualty Form (A.F.B. 103).
4. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
5. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129).
6. Dental Certificate (C.A.D.C. 5009a).
7. Field Conduct Sheet (A.F.B. 122).
8. Proceedings on Discharge (M.F.B. 218a).
9. Discharge Certificate (M.F.W. 39).
10. (Enclosed in special envelope (260M)).
11. Copy of Discharge Certificate (M.F.W. 39a).
12. Dispersal Certificate (C.D.B.).
13. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2).
14. Last Pay Certificate (P. 851).
15. Pay Book (A.B. 64).
16. War Service Gratuity (Form M.F.W. 2595).
17. Sundry Documents.

Group.....

Checked by No. 24.....

Date.....

10 JUN 1919

A.G.R.

Rank

Pte

Name BAGLEY, Joseph ^

Reg'l No. 829508 ^

R-122

Unit

144th Bn.

If in perm. Corps, }
What Unit? }

Married or Single Single.

Place and Date of Enlistment

Winnipeg, Man., 26th Feb., 1916.

Place of Birth

Birmingham,
England.

Name and Address, Next-of-Kin

Harry Bagley,

47 Queen St., St. James, Winnipeg, Manitoba, Canada.

Relationship

Father.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

N/E. R.B.

24595

File R

Categor.

GRE

Discharge, Date and Place

Reason

Character

H. W. & V., Ltd., 7165-16.

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.				
		ARRIVED IN ENGLAND S.S. OLYMPIC		25 9 16	
13-1-17	144th Bn.	S.O.S. To 18th Res. Bn.	Seaford	12-1-17	Pt. 2, D.O. 13
13-1-17	18 Res Bn	T.O.S FROM 144th Bn.	Seaford	12-1-17	Pt-2-D'O' I
13. 2. 17.	C.C.A.C. T.O.S. & in com. to 18th Res. Bn.	Hastings	2. 1. 17	Pt. II D.O. 74.	
19. 2. 17	18th Res Bn T.O.S. to C.C.A.C. & att'd to				
	18th Res Bn for D.P.P.D. 66.	Seaford	2. 1. 17.	do	38.
Above entries should read to show on St. C.C.A.C. & att'd to 144th Bn. Re-att'd to 18th Res. Bn. Auth. Record Office Order No. 154, 23.5.17					
21. 3. 17.	Man Dep. J. O. P. & att'd to 18th Res Bn.	Seaford	10. 3. 17	Pt. D.O. 12.	
23. 5. 17	18th Res Bn leave to be att'd. J. O. P.	"	22. 5. 17	"	129. (M. R. Dep 45)
23-5-18	On Comm to No. 14 C.S.A.	Seaford	23-5-18	Hi Ce 143	23. 5. 17

829508

Bagley . J.

1-6-18

18th Res

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.

24-978

on Cor #13 Can Gen'l Hosp. Hastings Plt ---

20-9-18

REC. 267.

28-918

11

Cases on Com. — — — Pre — —

27-918

Plao 271

36-12-78

18th Per

On Pows Can Spec. West Lenham The Leopard 27-12-78 No. 0.365

27-17-18

Q-0. 365

9-179

—

Less on Com. — — The —

31-12-18

9/10/9

14 6 19 18 Res S O S to Canada SeaforD 14 6 19 DC165

To Can 14-6-19 85 M. 251

Form Only.—Unit, Number, Rank and Name.
Casualty Form—Active Service.

M. F. W. 54.
 150M. 10-15.
 H.Q. 1772-39-920.

Unit, Regiment or Corps 144th Overseas Battalion, C.E.F. of Winnipeg.

Regimental No. 829508 Rank Pte Name Joseph Bagley.

Enlisted (a) Feb 26/16 Terms of Service (a) 1 year, War or 6 mths after Service reckons from (a) Feb 26/16.

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) Mastered JGO

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>Embarked. Canada</u>	<u>Halifax</u>	<u>18/9/16</u>	
		<u>Disembarked, England</u>	<u>Liverpool</u>	<u>25/9/16</u>	
<u>27/12/16</u>	<u>144th Bn (W.R.)</u>	<u>Transferred to 2nd Can. Labor Bn.</u>	<u>Seaford</u>	<u>27/12/16</u>	
<u>Jan 4 1917</u>	<u>R.O. Brighton</u>	<u>Transferred to 18th Reserve Battalion</u>	<u>Seaford</u>	<u>12/1/17</u>	<u>144th Battalion (Winnipeg Rifles) C.E.F. Part 11 D.O. 13 dated 13/1/17</u>
<u>12th do</u>	<u>Sec. 2nd. 18th Res. Bn</u>	<u>Taken on strength 18th Reserve Battalion</u>	<u>Seaford</u>	<u>12/1/17</u>	<u>Part 11 D.O. 13 dated 13/1/17</u>
	<u>18th Res. Bn</u>	<u>Posted to Reg. Depot</u>	<u>Dilgate</u>		<u>On Do.</u>
<u>23-5-17</u>	<u>18th Res. Bn</u>	<u>Beases to be attached and is TAKEN ON STRENGTH from M.R.D.</u>	<u>Dilgate</u>	<u>22/5/17</u>	<u>Part II D.O. 129</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, 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				

O.C.

SOS on transfer to Kimmel
Park for return to Canada Seaford

S.O.S. of O.M.F.C. on
transfer to C.E.F. in
Canada.

SEAFORD.

JUN 14 1919

Part 11 D.O. No.

165.

W.D. Smith Capt for

ADJUTANT,

THE CANADIAN RESERVE BATTALION.

14.6.19

T.O.S. Dispersal Station

149-2

M

and Dispersed

24-6-19-do-3

W.E. Patton

Lien.

for O. C. 10 District Depot.

H.M. T. ADDITIONAL
FAB T. SCOTTHOMPTON, 14. 8. 19
LISEM. J. HILK, 20. 8. 19

MINOR.

RECORD OF BIRTH.

<u>Number.</u>	<u>Rank.</u>	<u>Name.</u>	<u>Unit.</u>	<u>Date of birth.</u>	<u>Date available for Overseas Duty.</u>
829508	Pte.	Bagley Joseph	144th Batt.	19 Oct. 1898.	19th October. 1917

DUPLICATE

190th. OVERSEAS BATTALION C.E.F.
ATTESTATION PAPER.

No. 829508

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

144TH BN

1. What is your surname? Bagley
- 1a. What are your Christian names? Joseph
- 1b. What is your present address? 47 Queen St. St. James Winnipeg Man.
2. In what Town, Township or Parish, and in what Country were you born? Birmingham Eng.
3. What is the name of your next-of-kin? Harry Bagley
4. What is the address of your next-of-kin? 47 Queen St. St. James Man
- 4a. What is the relationship of your next-of-kin? Father
5. What is the date of your birth? Oct. 19th. 1898.
6. What is your Trade or Calling? Plasterer
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 } Yes
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Joseph Bagley, 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 Feb. 26th 1916. Joseph Bagley (Signature of Recruit)
Wm Massey (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Joseph Bagley, 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 Feb. 26th. 1916. Joseph Bagley (Signature of Recruit)
Wm Massey (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 Winnipeg Man this 26th day of Feb. 1916.

A. H. Morcay (Signature of Justice)

Description of Joseph Bagley on Enlistment.

Apparent Age.....17.....years.....5.....months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height.....5.....ft.....9½.....ins.

Chest measurement { Girth when fully expanded.....36.....ins.
Range of expansion.....5.....ins.

Complexion.....Dark.....

Eyes.....Blue.....

Hair.....Brown.....

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

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).

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.....Feb. 26/16.....1916 .

Place.....Winnipeg.....

Harry W. Abbott
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.

.....Joseph Bagley.....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.

W. H. Morden
Lieut.-Colonel (Signature of Officer)
Commanding 144th Overseas Batt. C. E. F.

Date.....February 26th.....1916 .

B. 2120

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1. Christian names *Joseph* 2. Surname *Bagley*
3. Rank *private* 4. Original Unit *144th O.F.Bn* 5. Reg. No. *P29508*
6. Address, in full, to which future payments of gratuity are to be forwarded.....
Dominion Bank
Winnipeg Man
7. Date of enlistment in the C.E.F. *February 26 1916* ✓
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *NOT APPLICABLE*
9. Relationship of such dependent *NOT APPLICABLE*
10. Address, in full, of such dependent *NOT APPLICABLE*
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *NOT APPLICABLE*
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
.....
.....
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? *NO*
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service.....
.....
.....
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served *Enlisted 26/2/16 Left for England 10/9/16 with 8th Reserve the demobilisation*
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *NOT APPLICABLE*
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *NOT APPLICABLE*

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units.....
 NOT APPLICABLE
19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.....
 NOT APPLICABLE
20. Have you been issued with a War Service Badge? If so what class?.....
21. Have you, during the present war, served in the Imperial Forces? NOT APPLICABLE
22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.....
 NOT APPLICABLE
23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? NOT APPLICABLE
 (b) If so, was such reversion in consequence of misconduct or inefficiency?.....
24. Are you now serving in the C.E.F.?..... If not, give:—(a) Date of discharge
June 24 1919. (b) Reason for discharge.....
25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit.....
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit.....
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?.....
 (b) If so, are you in receipt of full pay and allowances from that Department?.....

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: J. Bagby

Place of Residence: Winnipeg, Man.

Declared before me at: Superintendent

This 19 day of April 1919.

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

W. W. Dyer
 Lieut. Colonel.
 Commanding 13th. Canadian Res. Bn.

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
			<u>420.00</u>	
			<u>70.00</u>	
				<u>350.00</u>

Certified Correct.

District Paymaster.

WSB Class 6 22853

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 819509 (Rank) Pvt.

Name (in full) Joseph Bagley enlisted in
the 144th Bn.

CANADIAN EXPEDITIONARY FORCE at Winnipeg on the Twenty sixth
day of February 1914

HE served in the R. Enq.

and is now discharged from the service by reason of Demobilization Demobilization K.C. 1420
Medical Unfitness.

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

Age 20

Height 5' 9 1/2"

Complexion dark

Eyes blue

Hair brun

Marks or Scars scar 1 1/2" long

to tip of 2nd finger

right hand, palmar surface

tip of finger deformed

J Bagley

Signature of Soldier

G. Smith

Issuing Officer

Date of Discharge



Rank

Date June 24th 1919

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.

DISCHARGE CERTIFICATE CANADIAN EXPEDITIONARY FORCE

THIS IS TO CERTIFY that No. _____

Name (in full) _____ entered in _____

CANADIAN EXPEDITIONARY FORCE at _____

day of _____

HE served in _____

and is now discharged from the service by reason of _____

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

- 1.—That discharge certificate must be carried when wearing uniform.
- 2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and
- 3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

Signature of Soldier _____

Date of Discharge _____

Rank _____

Page _____

NOTE: As in duplicate of this Certificate will be issued, application for same is forwarded to forward it to the _____

RECEIVED _____

MARRIED

SINGLE

yes.

WIDOWER

TRADE OR CALLING

Plasterer.

RELIGION

Salvation army.

DESCRIPTION.

APPARENT AGE

47.

YEARS

5.

MONTHS

HEIGHT

5.

FEET

9 1/2.

INCHES

CHEST MEASUREMENT

36.

INCHES

EXPANSION

5.

INCHES

COMPLEXION

Dark.

EYES

Blue

HAIR

Brown.

DISTINGUISHING MARKS

not stated.

MEDICAL EXAMINATION.

PLACE

Winnipeg, Man.

DATE

Feb. 26th 1916.

Present address: 47 Queen St., St. James, Man.

SURNAME.

Bagley

CHRISTIAN NAMES

Joseph.

REGL. No.

829508

RANK

Pte.

UNIT

144th

FORMER CORPS

mil.

CARD NO.

19 105.2-479
 remobil.
 20-1770/286-19
 2010

Bn.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Bagley, Harry.

RELATIONSHIP TO SOLDIER

Father.

ADDRESS

47 Queen St., St. James.
 man.

COUNTRY OF BIRTH

England. Birmingham

DATE

Oct. 19th 1898.

PLACE OF ATTESTATION

Winnipeg, Man.

DATE

Feb. 26th 1916.

Sailed from Halifax 18/9/16

per. S.S. "Olympic" 323

L. L. 94504. M. & D. 6512.

R10204/19 351
 93 MFL

com.

Number 829 5-08.

Rank

Pt

B

Surname BAGLEY

Christian Name Joseph

Units 144 H. Co. Can. Inf. Theatre of War ENG.

Date of Service 25.9.16.

Remarks

Latest Address 228
487 Queen St.

St. James. Winnipeg

Roll No. A Page 4216 man.

200m.-6-21.4.

REGT. NO. RANK NAME

UNIT AGE SERIAL NO. IN A. AND D.

TOTAL SERVICE WHERE DATE AND PLACE OF OR
AND HOW LONG

DISEASE OR INJURY

OPERATIONS

RESULT OF OPERATIONS

(A) DATE OF ARRIVAL AT HOSPITAL AS AN ADMISSION

(B) AS A TRANSFER (STATE WHERE FROM)
NAME OF HOSPITAL

DATE OF DISCHARGE TO UNIT IN CA

DATE OF DISCHARGE AS AN INVALID

DATE OF DEATH

DATE OF TRANSFER (STATE WHERE TO)
NAME OF HOSPITAL

OTHER INDEPENDENT CONDITIONS DIAGNOSED



No 829508

RANK

Pte

NAME

Bagley
Joseph. (Aug. Paylist)

T. O. S.

UNIT

144th Battalion

M. D. / 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i> <i>Feb 26</i>	<i>1916</i> <i>Mar 31</i>	<i>✓</i>		
<i>Apr.</i>		<i>✓</i>		
<i>May.</i>		<i>✓</i>		
<i>June.</i>		<i>✓</i>		
<i>July.</i>		<i>✓</i>		
<i>Aug.</i>		<i>✓</i>		
<i>Sept.</i>		<i>✓</i>		
<i>Oct.</i>		<i>✓</i>		

UNIT SAILED

SEP 18 1916

Name

Bagley

Enl. 26-2-16.

Date of Embarkation for England

18-9-16.

Proceeded to France

No.

Returned to England

Date returned to Canada

14-6-19.

P.R.2855.

checked 18-6-30.