

ATTESTATION PAPER.

No. 1077

Folio. 264

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your name?..... Munden Dwyer.
- 2. In what Town, Township or Parish, and in what Country were you born?..... Ignace. Ontario Canada.
- 3. What is the name of your next-of-kin?..... John Dwyer Father.
- 4. What is the address of your next-of-kin?..... Ignace Ontario Canada
- 5. What is the date of your birth?..... November 24th 1887.
- 6. What is your Trade or Calling?..... Drainman.
- 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 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 No
- 12. Are you willing to be attested to serve in the) CANADIAN OVER-SEAS EXPEDITIONARY FORCE?}..... M. Dwyer (Signature of Man).
Serjt. C. Rea (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Munden Dwyer., 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.

Date 8th Jan'y 1915 M. Dwyer (Signature of Recruit)
Serjt. C. Rea. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Munden Dwyer, 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 8th Jan'y 1915 M. Dwyer (Signature of Recruit)
Serjt. C. Rea (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 Larkhill South this 8th day of Jan'y 1915.

H. H. Matthews (Signature of Justice)
Major

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

H. H. Matthews (Approving Officer)
Major

7
Description of Pt Munden Dwyer on 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' 10" ft. ins.

2 Vaccination Marks on left arm.

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

Complexion Medium

Eyes Grey

Hair Dark

Religious denominations { Church of England
Presbyterian
Wesleyan
Baptist or Congregationalist
Other Protestants
(Denomination to be stated.)
Roman Catholic X
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 January 7 1914.

H. H. Matthews
M. D. 8th Bn
Medical Officer.

Place Larkhill

*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.

Munden Dwyer 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.

H. H. Matthews (Signature of Officer)

Date Jan 9 1914.

for OC 8th Bn
Arms Co. 8th Bn
Can. Inf.

DWYER, MUNDEN

1077

C.E.F.

8 BN

42861

KILLED IN ACTION

25- 4-15





No. 1077

RANK

Pte.

NAME

Dwyer Munden

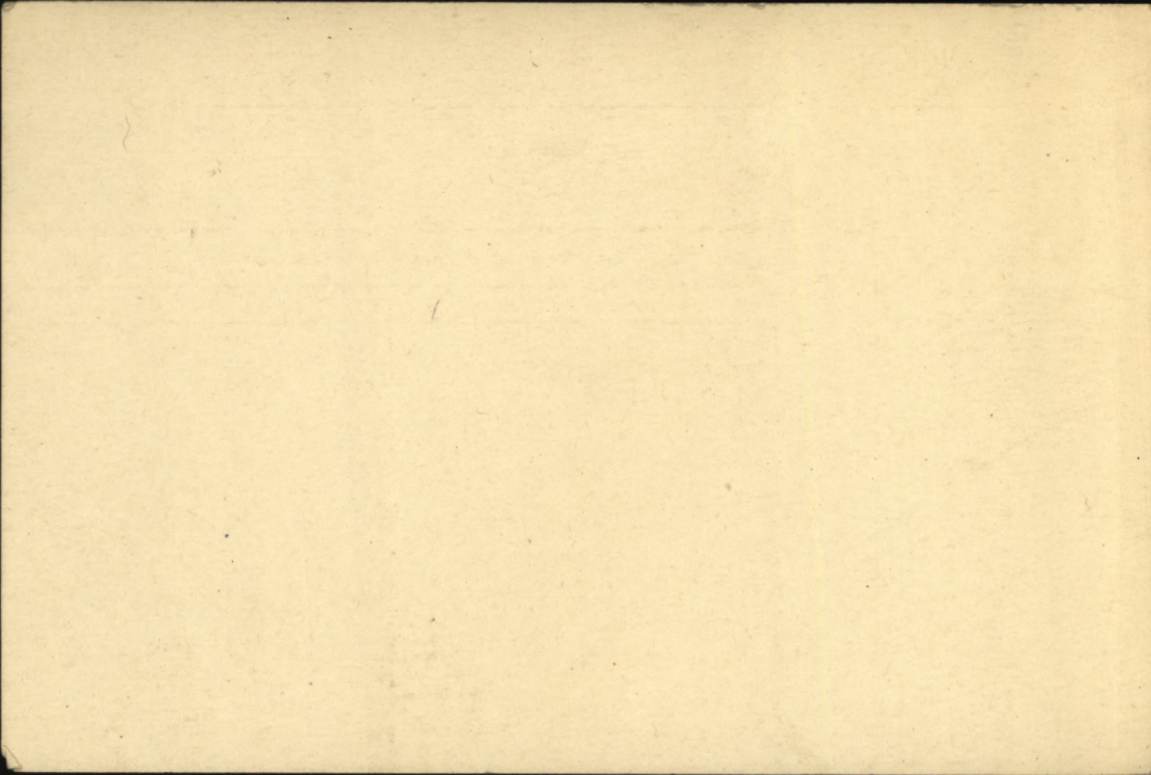
T. O. S.

UNIT 8th Battalion

M. D. 10

| | | | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|-----------------|-----------------|---------------------|---|-----------|
| PAID FROM | PAID TO | SIG. OR REC'T | PARTICULARS | AUTHORITY |
| 1914 Sept 22 | 1914 Oct. 31 | ✓ | | |

UNIT SAILED
OCT 3 1914



NAME *Owyer Munday*
RANK AND CORPS *Pte.*

H. Q. FILE No. 649-

REG'T'L. No. *1077*
8th Batt.

CABLE

NO. DATE

NATURE OF CASUALTY

NO. *1657*

FOLL.

| | | |
|-----------------|-----------------------|---|
| <i>6.829</i> | <i>8/5/15.</i> | <i>Killed in action.</i> |
| <i>R.L. 120</i> | <i>15/5/15</i> | <i>Killed in Action.</i> |
| <i>B. 2090A</i> | <i>Rouen 31-7-15-</i> | <i>" " " April 25th 1915. Ypres.</i> |

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

✓ 52

198(2)

Rep from Base by Telegram 8-5-15

Killed in action.
Killed in action 25-4-15

Name Dwyer M. Rank Pte. Reg. No. 1077.

Unit 8th Batt.

(File 25-D-130)

Next of Kin Canada.

| Date | Movement | Place | Casualty | List No. | Notified N/KO. | W.O. List |
|---------|------------------------------------|-------|----------|----------|----------------|-----------|
| 25-4-15 | Reptd. from Base, KILLED IN ACTION | | | 52 | | |

| Date | Movement | Place | Casualty | List No. | Notified N/K O. | W.O. List |
|------|----------|-------|----------|----------|-----------------|-----------|
| | | | | | | |

SURNAME.

Dwyer.

CARD NO

D

CHRISTIAN NAMES

Munday.

FOLL.

REGL. NO

8th 1074.

RANK

Ot.

UNIT

Bw.

FORMER CORPS

nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Dwyer, John.

RELATIONSHIP TO SOLDIER

Father.

ADDRESS

Ignace, Ont.

COUNTRY OF BIRTH

Canada Ignace, Ont.

DATE

PLACE OF ATTESTATION

Park Hill South.

DATE

Jan. 8th 1915.

o/s 7-10-14, '16.

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION.

PLACE

DATE

6 m B.R.

Number.....1077.....Rank.....Pte.....

~~A~~
Y

Surname **D.WYER**.....

Christian Names *Munden*.....

Unit *8th Bn. Con. Inf.*.....Theatre of War *France*.....

Dates of Service..... *1915*

Remarks.....

Latest Address..... *John Hoyer Esq. (7)*.....

..... *Ignace, Con.*.....

Roll No. *B Page 888*

G. 3880-Dep

MAR 5 - 1921

Ga 27759 ~~277~~

AUG 3 1921

649-D-184

1840

DWYER, Pte. M. #1077 - 8th Bn

Med & D (Father) John Dwyer Esq.
Ignace,
Ontario.

MA

Scroll Desp. MAR 19 1921 Reg. No. 2.30152

P & S (Father) See above

(Serial no. 793257)

Plaque Desp. DEC 23 1921 Reg. No. PA904

Mem Cross (NIL)

Elig. 19/15 Star Pte. 8th Bn
V.M.

30826

(d) .. B w m.

B.



Surname

Christian Name or Names

Reg. No.

Dwyer

M.

1077.

Rank

Unit

Co.

Troop

Batty.

T.E.

8th Batta.

Hospital

Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses, if more than one state present

DISPOSITION

Killed in action.

Date

REMARKS

C.L. 8 5. 15.

52.

Rep'd from base by

L'gram. 8. 5. 15.

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

NAME DWYER Munden,

Regimental No. 1077

Name and address of next-of-kin

Unit 8th., Battalion 3.C.

John Dwyer, (Father)

Date of enlistment 8th., January 1915.

Ignace Ont.,

Place of birth Ignace, Ontario, Canada.

Canada.

Married (yes or no)

Date and place discharged 25. 4. 15 ✓

Amount of pay assigned monthly \$

Reason for discharge Killed in Action

To whom payable

Character on discharge

| Date | | PAY | | Field Allowance | | Other Credits | Total Credits | Voucher | | Cash Payments | Assigned pay | Other Charges | Total Debits | Remarks, Casualties, etc. | |
|-----------------------|------|-------------|------|-----------------|-------------|---------------|---------------|---------|--------|---------------|--------------|---------------|--------------|---------------------------|-----|
| From | To | No. of Days | Rate | Amount | No. of Days | | | Rate | Amount | | | | | | No. |
| 1914 | | | | | | | | | | | | | | | |
| Sept/Oct | 31 | 40 | 1.00 | 40 | 40 | 1.0 | 40 | | | 40 | | | 40 | | |
| Nov/Nov | 30 | 30 | 1.00 | 30 | 30 | 1.0 | 30 | | | 10 | | | 10 | | |
| Dec | 1-31 | 31 | 1.00 | 31 | 31 | 1.0 | 31 | | | 60 | 25 | | 60 | 25 | |
| 1915 | | | | | | | | | | | | | | | |
| Jan | 1-31 | 31 | 1.00 | 31 | 31 | 1.0 | 31 | | | 25 | | | 25 | | |
| Feb | 1-28 | 28 | 1.00 | 28 | 28 | 1.0 | 28 | | | | | | | | |
| Mar | 1-31 | 31 | 1.00 | 31 | 31 | 1.0 | 31 | | | 9 | | | 9 | | |
| Apr | 1-25 | 25 | 1.00 | 25 | 25 | 1.0 | 25 | | | 3 | | | 3 | | |
| | | 216 | | 216 | | | 216 | | | 147 | 25 | | 147 | 25 | |
| Remuneration of Arch: | | | | | | | 393 | 94 | 28 | | 94 | 28 | | 94 | 28 |

Non Effective a/c
Rendered 6/25/4/15

216 days @ 1.10 237.60 = ~~48~~ 48.16.5

Cash paid 147.25 @ .5 = £1. = 29.9. -

Balance of 94.28 check sent to Ottawa
for settlement 12/4/16.

19-7-5

Cash found in effects me

Statement of
APR 8 1916
Account rendered

CHECKED BY
DATE...
OFFICE, N. E. BRANCH
SEP 2 1915
CANADIAN CONTINGENTS

No Record.

Casualty Form—Active Service.

Regiment or Corps 8TH CANADIAN INFANTRY BATTN

Regimental No. 1077 Rank Private Name W. Dwyer M

Enlisted (a) 22/9/14 Terms of Service (a) One year Service reckons from (a) 22/9/14

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

Extended — Re-engaged — Qualification (b) —

| Report | | Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B, 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place | Date | Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents. |
|---------------|-----------------------------|--|--------------|----------------|---|
| Date | From whom received | | | | |
| <u>1-5-15</u> | <u>OC 8th Bn</u> | <u>Killed in action</u> | <u>Ypres</u> | <u>11-9-15</u> | <u>B-213</u> <u>Symbol P/1010</u> <u>at 8-5-15</u> <u>W. Dwyer</u> CAPT. OFFICER in CHARGE RECORDS CANADIAN SECTION G. H. Q. |

(*) 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.

| Report | | Record of promotions reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place | Date | Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents. |
|--------|--------------------|---|-------|------|---|
| Date | From whom received | | | | |
| | | | | | |

Rank and Name DWYER Munden.
 Regimental No. 1077
 Unit 8th. Battalion.
 Date of enlistment 8th. Jan. 1915.

Name and Address of Next-of-kin
 John Dwyer.
 Ignace, Ontario.

2932

Place of birth Ontario.
 Married (Yes or No) No.
 If in Permanent Force

Date and place of discharge
 Reason for discharge
 Character on discharge

25.4.15
 Killed in Action

| | |
|----------------|-------|
| N/E. R. B. No. | A |
| File R. L. | |
| Category | Pin A |

Promotions or appointments



m x 4/1/20

| 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 | | | | |
| 8.5.15 | W.O. Reported | Killed in Action | Base | 8.5.15 25.4.15 | Cas Rpt. 52. O.N. Part II. O 10 |
| do. | O.C. 8 B. | | | | |

NA. BR

15 ✓

DIVISION

Rank and Name

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

Date and place of discharge

Reason for discharge

Character on discharge

Place of birth

Married (Yes or No)

If in Permanent Force

Promotions or appointments

Report

Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.

From whom received

Date

REMARKS

Taken from Official Documents