ATTESTATION PAPER No. A. Folio. 404848

2.3	CANADIAN UVER-SEAS	LAI LUITIUNAN	I TORCE
	QUESTIONS TO BE PUT	BEFORE ATT	ESTATION.
1.	What is your name?	Leon	Hadden
2.	In what Town, Township, or Parish, and in what Country were you born?	Tyrone	Ireland
3.	What is the name of your next-of-kin?	shother &	Olen Hadden
4.	What is the address of your next-of-kin?	Farrater	Calrath Dunganown
5.	What is the date of your birth?	Dec 28	1886.
6.	What is your trade or calling?	Se	weging
7.	Are you married?		nh C
8.	Are you willing to be vaccinated or revaccinated?	9	ces
9.	Do you now belong to the Active Militia?	- 0	fes Sile
10.	Have you ever served in any Military Force? If so, state particulars of former Service.	Gluens	ann Refles
11.	Do you understand the nature and terms of your engagement?		fes
12.	Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary		Les .
	Force?	Der Had	du (Signature of Man.)
		Enter	(Signature of Witness.)
	DECLARATION TO BE MADE	RV MAN ON	ATTESTATION.
mad to b bety the	the by me to the above questions are true, and the te, and I hereby engage and agree to serve in the attached to any arm of the service therein, for the veen Great Britain and Germany should that we termination of that war provided His Majesty harged.	the term of one year last longer than o	r, or during the war now existing ne year, and for six months after
~ 1	e Tue 1915 2		(Signature of Witness.)
Dat	e) \(\sigma = \) 1915 \(\sigma \)	J. C. S. Cooping	(Signature of Witness.)
	OATH TO BE TAKEN BY	MAN ON AT	TESTATION.
in d	I, true Allegiance to His Majesty King George that bound honestly and faithfully defend His Dignity, against all enemies, and will observe cessors, and of all the Generals and Officers set	he Fifth, His Heirs Majesty, His Heirs and obey all order over me. So help n	Oath, that I will be faithful and and Successors, and that I will as and Successors, in Person, Crown s of His Majesty, His Heirs and he God.
	1192	o vicaac	(Signature of Recruit.)
Dat	e T 1915 &	m Com	(Signature of Recruit.) (Signature of Witness.)
	CERTIFICATE C	OF MAGISTRA	TE.
hoo	The Recruit above-named was cautioned by ve questions he would be liable to be punished. The above questions were then read to the I have taken care that he understands each duly entered as replied to, and the said Recruit he before me, at	as provided in the A Recruit in my present a question, and that it has made and sign this	rmy Act. ce. his answer to each question has ned the declaration and taken the day of
		////	Mella- (Signature of Justice.)
-	I certify that the above is a true copy of the	e Attestation of the	above-named Recruit.

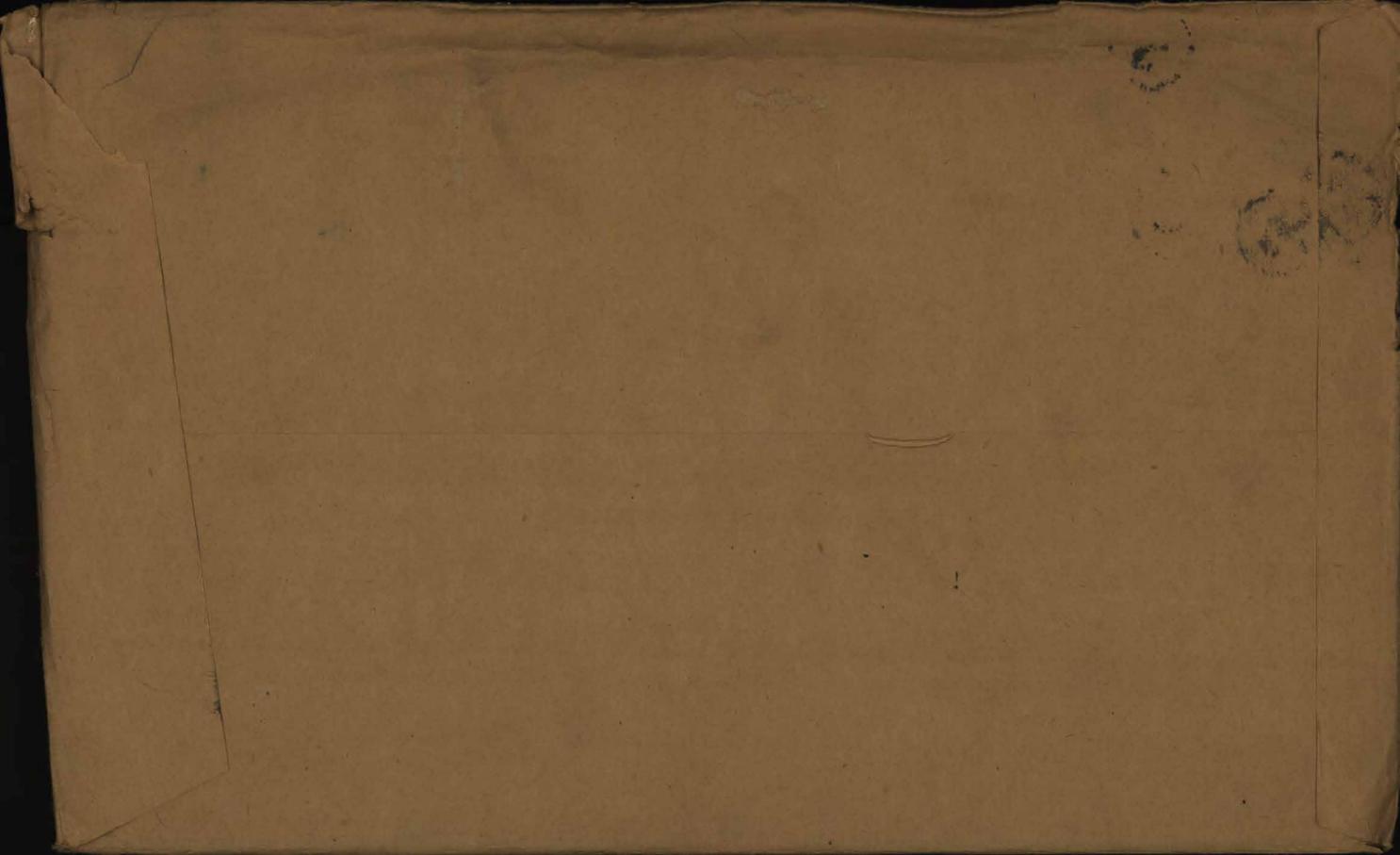
DESCRIPTION OF Conge	Hadden ON ENLISTMENT.
Apparent Age 2 % years months. (To be determined according to the instructions given in the Regulations for Army Medical Services.)	Distinctive marks, and marks indicating congenital peculiarities or previous disease.
Height $\int_{0}^{1} ft \cdot \int_{0}^{1} ft = \int_{0}^{1} ft \cdot \int_{0}^{1} ft$	(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.)
Girth when fully expanded ins.	
Range of expansion 4 3 ins.	
Complexion Trade	
Eyes	
Hair Dark Brown	
Church of England	
Presbyterian ×	
Methodist	
Baptist or Congregationalist	
Methodist Baptist or Congregationalist Other Protestants (Denomination to be stated.)	
Roman Catholic	
Jewish	
of rejection specified in the Regulations for Army M He can see at the required distance with eit free use of his joints and limbs, and he declares that I consider him* for the Cana Date 1915	her eye; his heart and lungs are healthy; he has the
Place mayora on the Lake	Mullettonk.
*Insert bere "fit" or "unfit,"	Medical Officer
Nora.—Should the Medical Officer consider the Recruit unfit, he will and will briefly state below the cause of unfitness:—	fill in the foregoing Certificate only in the case of those who have been attested
***************************************	A
CERTIFICATE OF OFFICE	EER COMMANDING UNIT
-	
inspected by me this day, and his Name, Age, Date of been recorded, I certify that I am satisfied with the	having been finally approved and of Attestation, and every prescribed particular having a correctness of this Attestation.
	Concern Mignesture of Officer.
Date 1915	

19 8 18 000 Proceedings of Court of Inquiry or on men reported Missing on Active Service...... estation Papers... claration of change of name..... Authority for special enlistments..... Doruments of re-enlisted men. Regimental Conduct Sheet.... Compulsory Stoppages..... Casualty Forms Proceedings on discharge..... Corps History Sheet Date and No. of Deposit Receipt for Purchase Money and Amount..... Parchment Certificate..... Medical Report for Invalids Medical History Sheet..... Proceedings of Regt. Court Martial Copies of Convictions by Civil Power...... Company Conduct Sheet ... / Clothing Transfer Certificate..... Inventory of Kit..... Last Pay Certificate.....

DISCHARGE DOCUMENTS

	R. O. 170	*** ***********************************
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Batty.

Reg. No. 404848

Date of Admission

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Christian Name or Names

3rd Mach Gun Coy.

G.

Unit

Surname

Rank

Hadden

Pte.

Transferred

EPITOME OF HOSPITAL TREATMENT.

1.	Hospital	Adm.
2.		
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4.		
5.		
6.	wik , -	
7.		

mber 404848 Rank Vto Surname HADDEN Christian Name George Units Can M G. Bde Theatre of War France Date of Service 1-4-16 Remarks Latest Address Mrs Ellen Hadden Farrater Donaghmore Page 1600 Roll No. 200 .-2-21.

DEGA JUL 14 1922 REGN. NO. 9026943

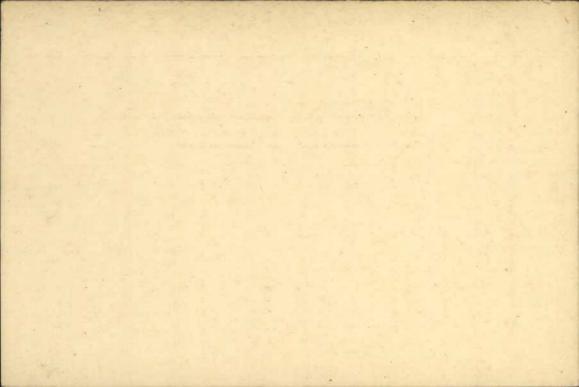
NAME /	Hadd	en, George Le 3rd Div. ulac Gus	H.Q. FILE N	
RANK AND O	ORPS 10	Le. 3rd Div. Wac. Gun	1. Cos.	Follows No.
No.	DATE	NATURE OF CASUALTY		Follows
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DATE OF LIST No HOSPITAL REMARKS ADMISSION Reflem base Died & Wounds 30-6-16.

Reflem base Died & 35, dated 12-7-16 refering to item 40 48 48 Pt & Hudden, 4. Died of warnes 30-6-16

I hould read 27-6-16

RANK Pte. NAME Wadden & No (D.O. 5. 31/5/15 UNIT 35th. Battalion M. D. 2 PAID SIG. PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PAID OR FROM TO REC'T PARTICULARS AUTHORITY May 31 June 30 UNIT SAILED OCT 1 6 1915



R. 149. 3rd.Can.Div.M.G.C. (7thCo) Reg. No. 404848 Name Unit Mrs.E. Hadden Lanater Calragh. Dunfanan Tyrone Ireland. Next of Kin Notified List Date Movement Place Casualty W.O. List No. N/K O. July M. July. 30-6-16. Died of wounds. A35.11.9595.12. Date should 27-6-16. A47 .

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HADDEN, G. (Pte) #404848, 35th Bn. 31d.C. m. 4. C649-H-5453. not sleg. for 14.15 Star. MEDALS & DECORATIONS. (Mother) Mrs. Ellen Hadden. Plague Desp. No. Farrater Donaghmore. Co. Tyrone. Ireland. PLAQUES & SCROLLS. (Mother) Mrs. Ellen Hadden. Address as a bove. Serial mo. 755657.) (Mother) Mrs. Ellen Hadden. MEMORIAL CROSS. Address as above. Desp. OCT 1 - 1920 (m) 025-201.

19 386

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SURNAME. Hadden (649-74-545)	CARD NO.
CHRISTIAN NAMES SEORGE	FOLL.
REGL. NO. 404848 RANK Pte	uk.
UNIT 35th	Bu
FORMER CORPS 2 nd Regt.	
NEXT OF KIN.	CHANGE OF ADDRESS
NAMES IN FULL Hadden, Mrs Collew	
RELATIONSHIP TO SOLDIER Mother	
ADDRESS Lavater Calragh, Jungannon	
Dyrone Sre.	
	^ 1
COUNTRY OF BIRTH PURANT STYRONE, DATE,	
PLACE OF ATTESTATION Siagara on the Lake ON BATE	June 12th 1915
0/\$ 16-10-15- 22-8 L. L. 94504. M. & D. 6512 M. P. W. 22 9502	114
L. L. 94504. M. & D. 6512. M. F. W. 22. 250h	4.—2-16. H. Q. 1772-39-339.

From Montreal	per S. S. Milagama 16/0/15
MARRIED / SING	LE USS WER
TRADE OR CALLING Survey	ring Religion trisbyterian
1	DESCRIPTION.
APPARENT AGE 28	YEARS 6 MONTHS
HEIGHT 6	FEET //2 INCHES
CHEST MEASUREMENT 4/	INCHES EXPANSION 4/2 INCHES
COMPLEXION Medium	EYES Grey HAIR Dark brown
DISTINGUISHING MARKS	Est stated
MEDICAL EXAMINATION. PLACE	iagara on the Lake June 9th 1915
trisint address. A.	ot stated

THIS IS THE LAST WILL AND TESTAMENT of me

Regt. No. 404848, Pte. Geo. Hadden of the 7th Brigade

Machine Gun Company in the Canadian Expeditionary Force made

this thirty-first day of March, in the year of our Lord one

thousand nine hundred and sixteen.

I REVOKE all former Wills or other Testamentary Dispositions by me at any time heretofore made and declare this only to be and contain my last Will and Testament.

I DIRECT all my just debts, funeral and Testamentary expenses to be paid and satisfied by Executors hereinafter named as soon as conveniently may be after my decease.

I GIVE DEVISE AND BEQUEATH all my Real and Personal Estate of which I may die possessed in the manner following that is to say: Of the one hundred pounds (£100) for which I am insured with the Norwich Union Life Insurance Coy, Belfast Ireland, I leave and bequeath the sum of Fifty pounds (£ 50) to my mother Mrs. Ellen Hadden, Farrater, Cabragh, Dungannon, Co. Tyrone, Ireland, Fifty pounds (\$ 50) to my sister Maggie Hadden, Farrater, Cabragh, Dungannon, Co. Tyrone, Ireland. Of the One Thousand Dollars (\$1000.) for which the City Council of the City of Toronto, Canada has me insured I leave and bequeath the sum of Two Hundred and fifty dollars (\$250.00) to my sister Mary A. Hadden, Farrater, Cabragh, Dungannon, Co. Tyrone, Ire., Two hundred and fifty dollars to my brother Alexander Hadden P. C. 56 of the Toronto Police Force, Canada Two Hundred and fifty dollars (\$250,00) to my brother Robert S. Hadden, 7 Matheook St. Belfast, Ire. one hundred and twenty-five (\$125.00) to my niece Ellie Hadden to be paid to my brother above named Robert S. Hadden and to be used by him as he sees fit to and for the education of my said Riece. One Hundred and twenty-five dollars, for the purpose of erecting a suitable headstone and railing to the memory of my dear Father and sister who are buried at Upper Clonanuse. To my brother William J. Hadden, General Prisons Office, Dublin Castle, Dublin, Ire. and Joseph Hadden of Farrater, Cabragh, Dungannon,

Part. No. Ansala, Etc. Coo. Mandey or the West Erlands

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co. Tyrone, Ire. I leave and bequeath share and share alike in my real estate lot No. 281 Kingsdale Division, Toronto, Canada to be sold at their direction, also share and share alike in all monies which is or may be to my account in Bank of Toronto Head Office, Toronto City, Ontario, Canada, or due me as represented by my official Army Pay Sheet after the following sums have been deducted, viz. Twenty-five dollars (\$25.00) which I leave and bequeath to the Red Cross Society, City of Toronto, Ont. Canada, Ten Dollars (\$10.00) to each of my executors below mentioned as a small remuneration for their trouble.

ALL the residue of my estate not hereinbefore disposed of I give, devise and bequeath unto my above named sister Maggie Hadden a diamond ring and to my above named brother Robert S. Hadden my signet ring, both mailed and registered this date to my brother A. Hadden at 217 Beatrice Street, Toronto, Ont. Canada and for which I attach a postal and registration receipt.

AND I nominate and appoint Mr. High McNeill,

N. T. Clonanuse National School, Castle Caufield, Co. Tyrone,

Mr. James A. Kerr, 343

Ireland and Margueretta St. Toronto, Ont. Canada to be

executors of this my last Will and Testament.

IN WITNESS WHEREOF I have hereunto set my hand the day and year first above written.

SIGNED published and declared by
the said Pte. George Hadden the
Testator as and for his last Will
and Testament in the presence of
us both present together at the same)
time in his presence at his request)
and in the presence of each other
have hereunto subscribed our names
as witnesses.

#404848,
Pte. George Hadden,
7th Brigade M.G.Coy
B.E.F.
Canadians

D. Power, 57 Royal Military Avenue, Cheriton, Folkestone

W. Paine 77 Morehall Avenue, Folkestone, Kent. the create to the control of the con

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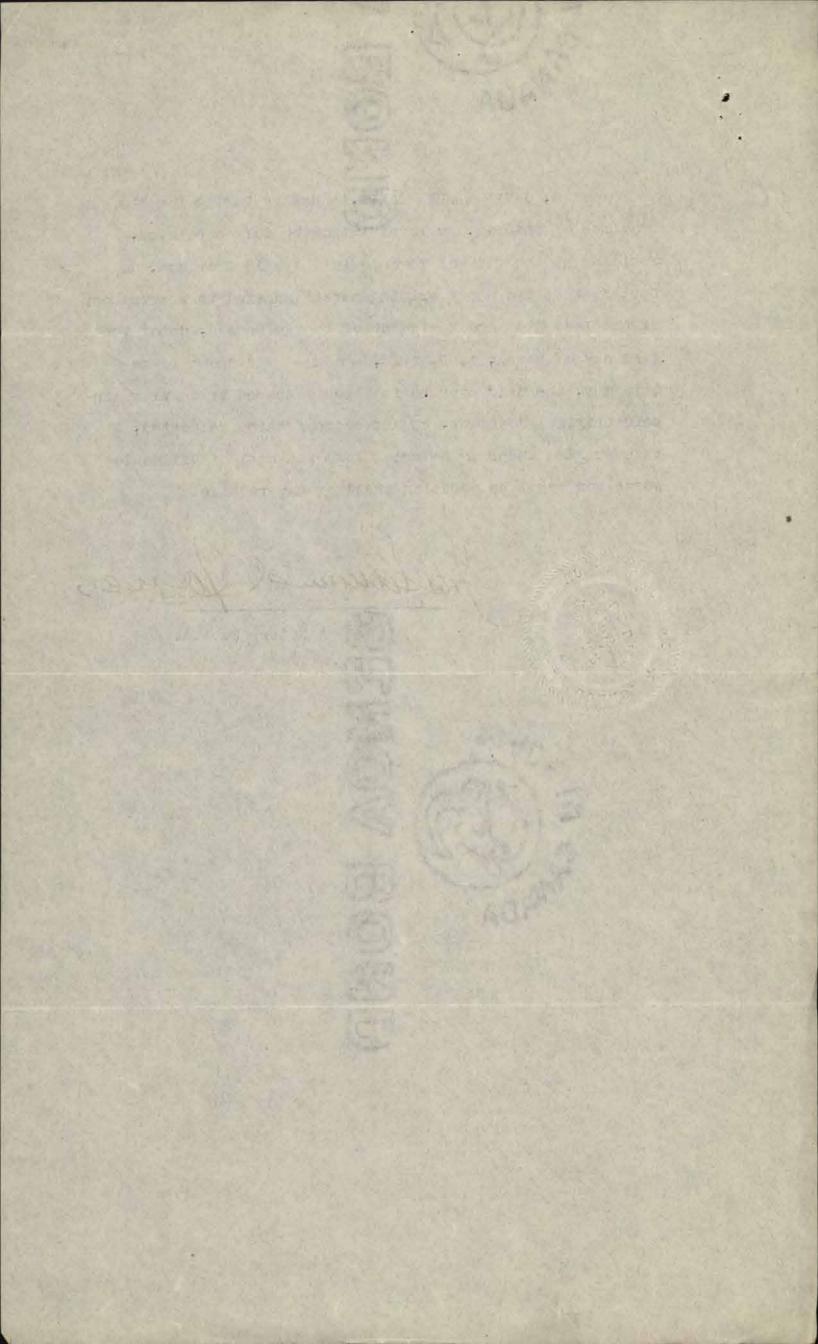
AN HOTEL MILESTEN AVERDED.

. then yes (Camerol or)

Province of Ontario, by Royal Authority duly appointed, residing at the City of Toronto in the said Province, do Certify that the paper writing hereto annexed is a true copy of the last Will and Testament of George Hadden, dated the 31st day of March, A. D. 1916, produced and shown to me this day, the said copy having been compared by me with the said original document, an Act whereof being requested, I have granted under my Notarial form and seal of Office to serve and avail as occasion shall or may require.

Jas Samuel

A Notary Public.



WILL

of

Regt. No. 404848 Pte. Geo. Hadden 7th Brigade M.G.Company B.E.F., Canadians

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⁽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.

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Rank

Bow Chill boy Name HADDEN George

If in perm. Corps, What Unit?

Unit 35th Bn

Married or Single Single

Place and Date of Enlistment

Niagara, 10th June 1915

Place of Birth Tyrone Ireland

Name and Address, Next-of-Kin

Ellen Hadden

Lanater, Calragh, Dunfanan, Tyrone, Ireland

Relationship

Mother

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason 75 34. 1700

Character

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21. 7.16		correction of date		27.6.16	Ri O.H.	
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2nd Contingent

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12. 20m.—9-15. H. Q. 1772-39-819.

W

To Whom alex Hadden
Address 217 Beatrice St

OCT 1_ 1915

By Whom Assigned Nadden G.

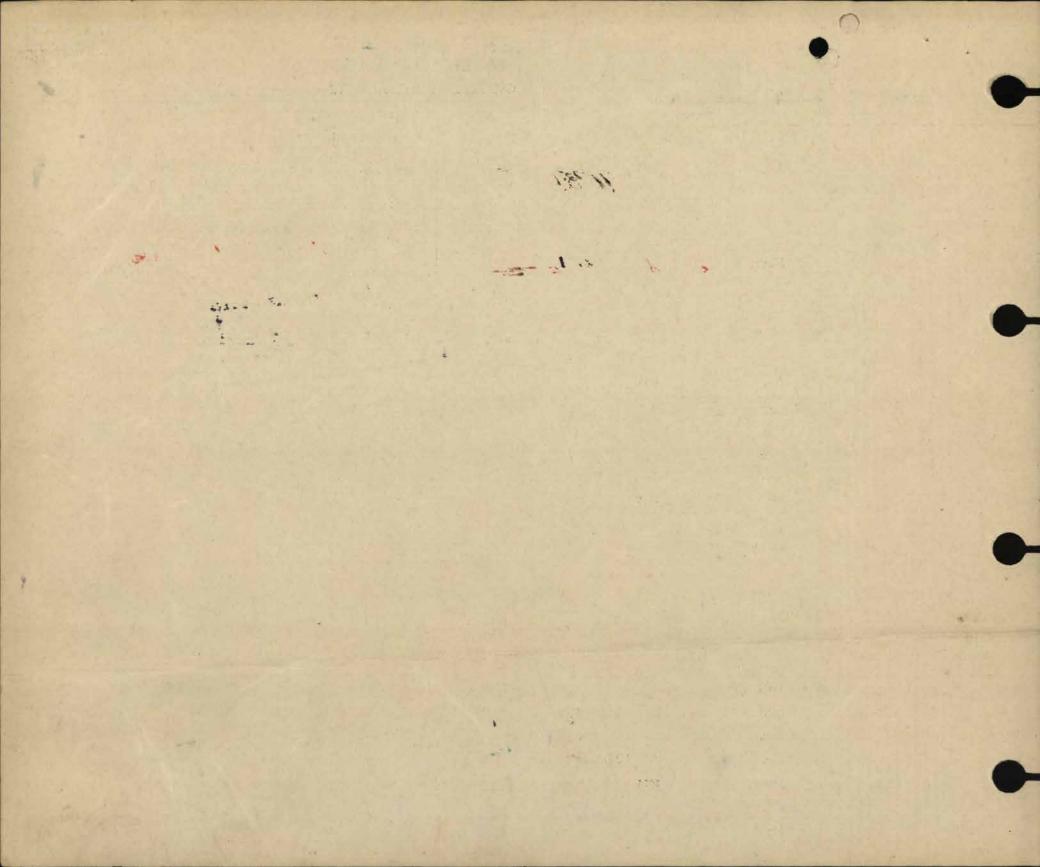
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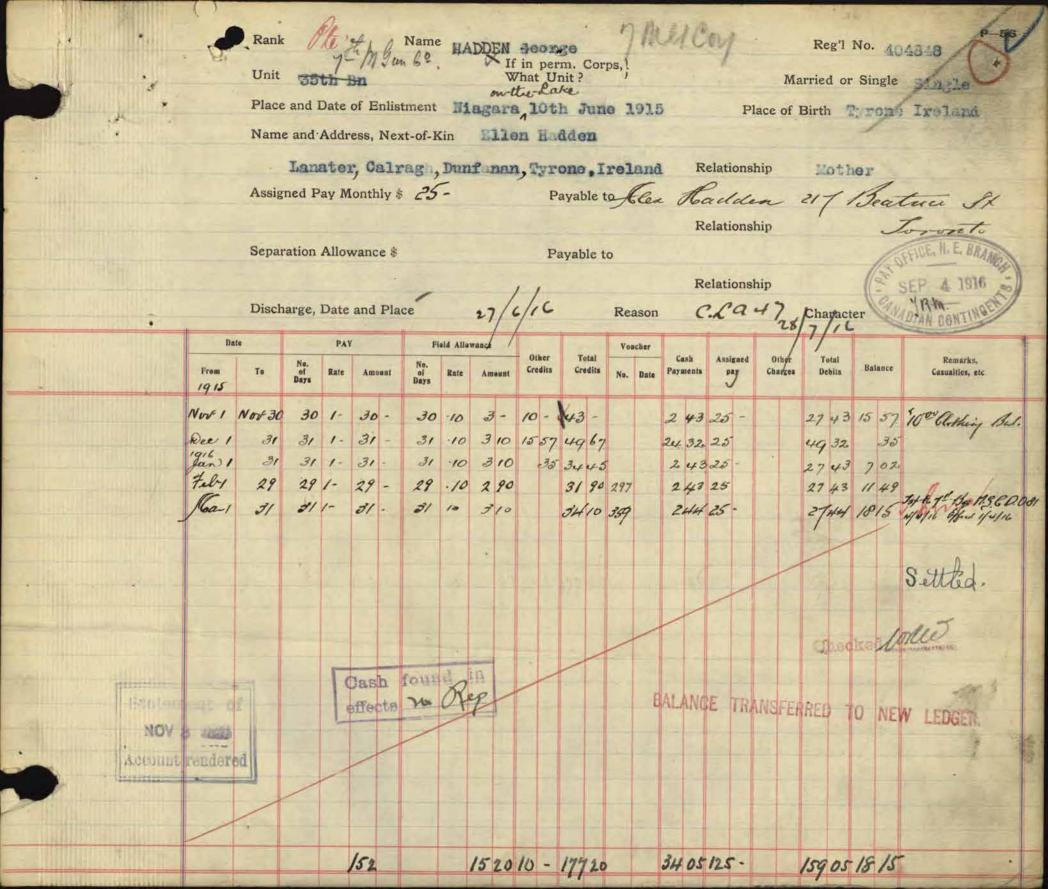
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Corps 35th Battalion a Coy

Rate \$25000 May | \$0 973- 13 7/6 M2 PAYMENTS

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ASSIGNED PAY

M. F. W. 12a. 00m.-12-15. 1772-39-819.

OVERSEAS CONTINGENTS

Sheet No. 2. alex Hadden.

PAYMENTS.

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ASSIGNED PAY

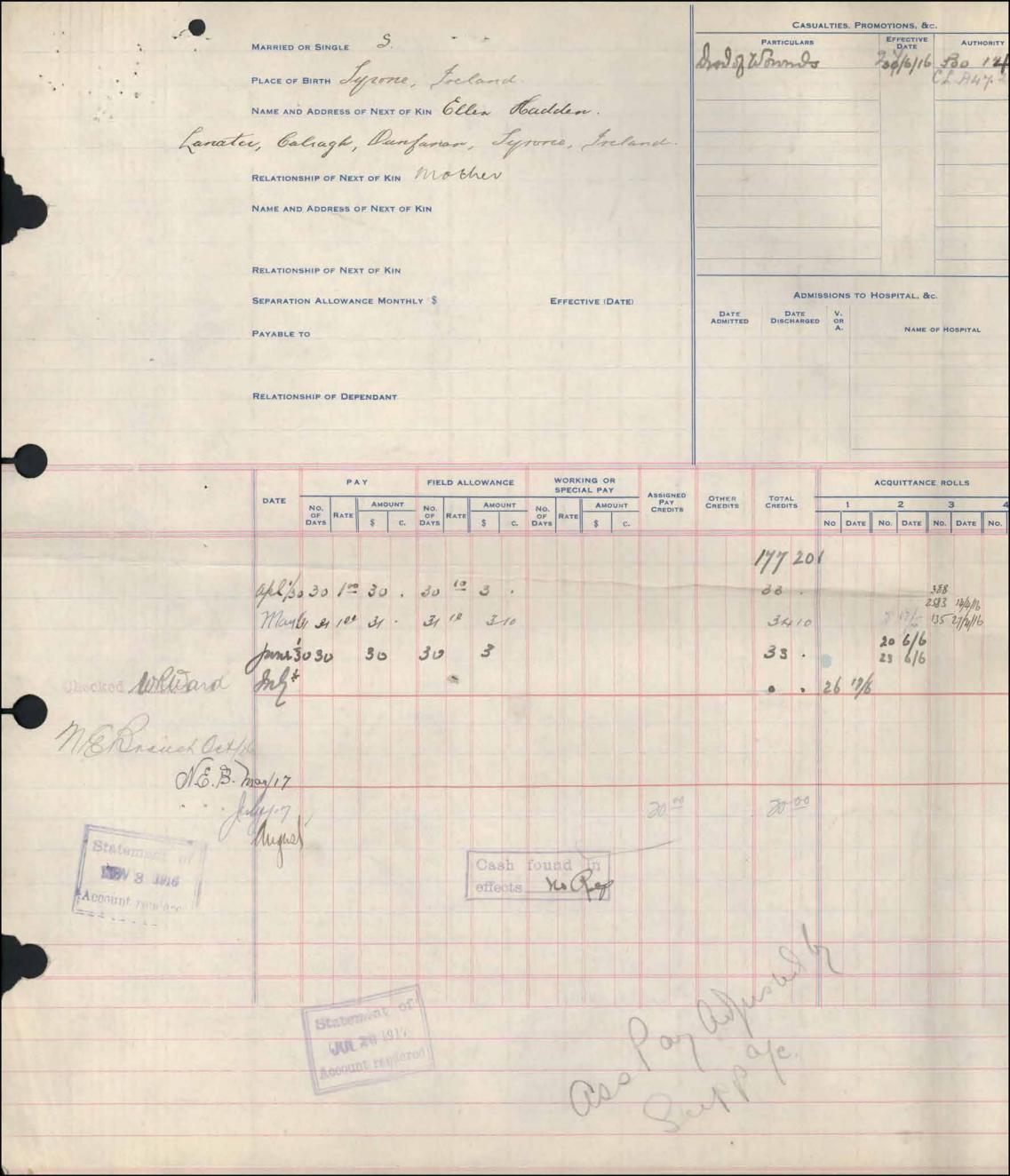
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PAYMENTS.

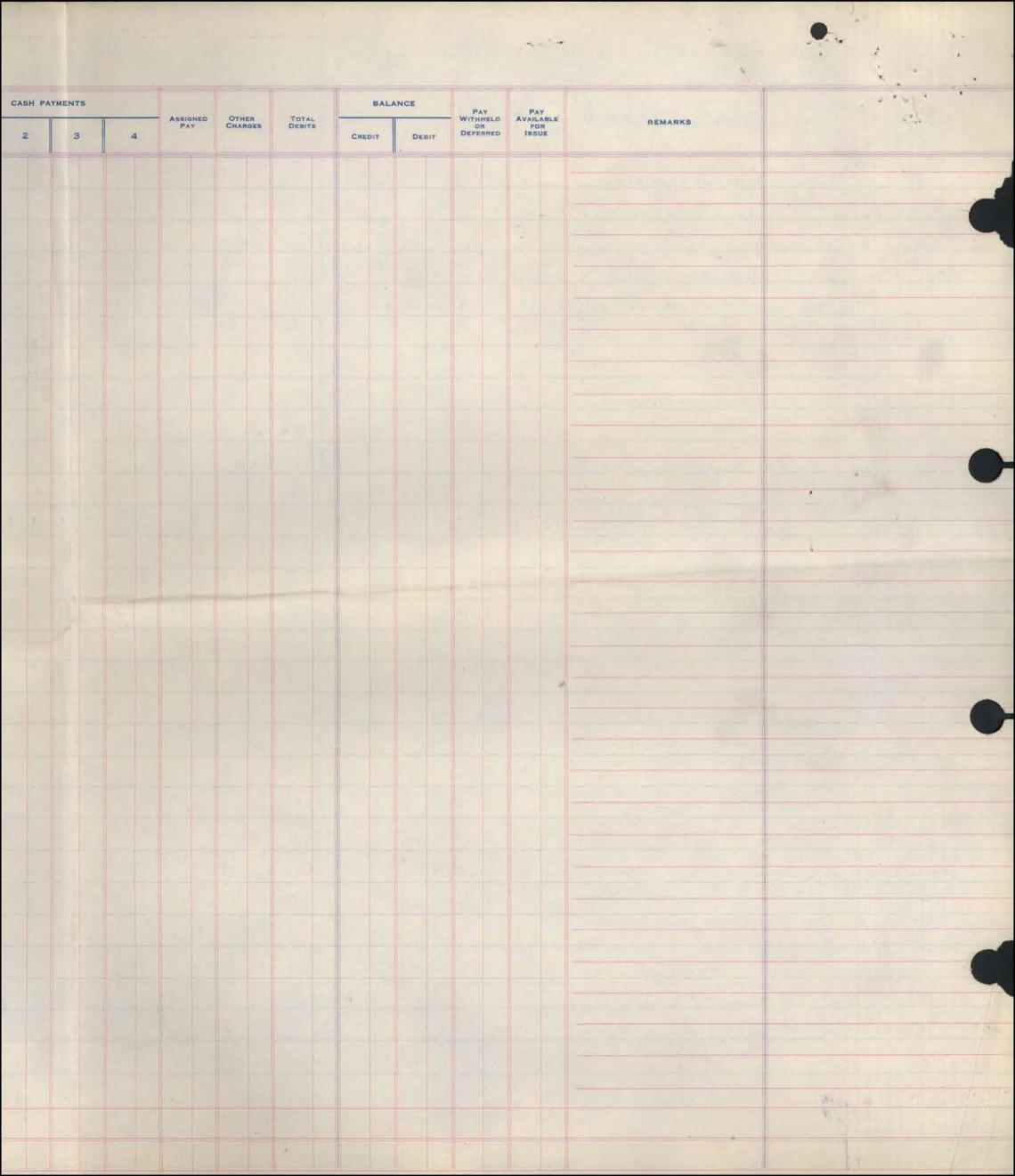
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HOSPITAL. &c.	ASSIGNED PAY MONTHLY \$ 25 DATE EFFECTIVE PAYABLE TO Alle Badew. Afy Beatrice St. Joronto Relationship ASSIGNED PAY MONTHLY \$ 20 DE DATE EFFECTIVE May 15t 1916 & Relationship PAYABLE TO Alex Hadden 21 y Beatrice St. Joronto. Relationship Stop-Payment Form (Assigned Pay) Rendered (Date) 14 Deffective 14 August Reason And Johnson 30/6/16 BD. 14 Discharge Date and Place Account Transferred to Non-Effective Branch (Date) Account Transferred to Officers' Pay Branch (Date)
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DUPLICATE.

4 0 4 1 4 8 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^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

rname H A -D D E	Ŋ	Christian Nan	neG	eorge	
	TABLE I.	-GENERAL T	ABLE.		
Birthplace Parish Du	ncannon		County_	Tyrone,	Ireland
	(on 7th	day of	June		191 5
Examined	2	iagara Camp			
•	**				
Declared Age	_ 28	yea	rs		days.
Trade or Occupation	Surve	ying			
Height	_ 6	fee	t1½		inches.
Weight	160				lbs.
Chest Girth when fully Expanded					
Measurement Range of Expansion					
Physical Development					
		Right			Left
vaccination marks					2
When Vaccinated					
Vision	(L.E.—V=				
(a) Marks indicating con-	((a)				
genital peculiarities or					
previous disease	(
(b) Slight defects but not	((b)				
sufficient to cause rejec-					
-tion		The state of			
Approved by (Signature)	S.G.Mi	.11s			
(Rank)		Capt.			
				4	Medical Officer.
	fat_Toron	ito, Can			. 1
Enlisted	on 31st	day of	May		1915
		Corps.		-	Regtl. No.
Joined on Enlistment	35th	Bn.		404	\$48
m					8
Transferred to					
Became non-effective by					
This Medical Mistory Sheet has been com- positing Attestation Paper, and entries a	pare I will file the	day of		P. 22).	191
taken from the Attestati (Signature)	hade an med lines	n benen	THE		
Hau (Rank)	944				
(4887.) W. 9597/1588. 500w. 9/15. C.	P. Land	Forms B, 17s	/		P.T.O.

Table II.—Only for Admissions to Hospital or to the Sid

	Admit	ted to H	ospital	Discl	arged Iospital	from		Number	Re
Name of Hospital		Month			Month		Disease	of days in Hospital	
			10.7				2-90		
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3	Mannana e								
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			No.						
							tone 2000	Lannia -	

k List in the case of Warrant Officers treated in quarters.

marks bearing on the cause, nature, or treatment of the case, likely to be of use. In cases of syphilis, admissions and readmissions to hospital values subsequent progress, including particulars of treatment out of hospital be given in the special syphilis case sheet.	interest or of future vill be shown. The transfers, &c., will	Signature of Medical Officer
	is thosely a	lua III de
		1983
	1-36 Mary	
		Lance Town
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Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date			Brief details, and signature		
21/6/15	Vacc.	s.G.Mills	Capt		to prove of
11/6/15	Anti-t	yphoid Inco			
14/6/15		0			
17/6/15		u	u		
					-0
		*			
****	3				
60	Ta	able IV.—S	ervice Table.		
Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	ervice Table. Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation
Station or Troopship	Date of arrival or	Date of		arrival or	Date of departure or disembarkation
Station or Troopship	Date of arrival or	Date of	Station or Troopship	arrival or	Date of departure or disembarkation
Station of the Statio	Date of arrival or	Date of		arrival or	Date of departure or disembarkati
Bedical History Stationary Statio	Date of arrival or	Date of	Station or Troopship	arrival or	Date of departure of disembarkati
Station or Troopship Station of the struct	Date of arrival or	Date of	Station or Troopship	arrival or	Date of departure or disembarkati
Bedical History Station of the strue copy of	Date of arrival or	Date of	Station or Troopship	arrival or	Date of departure or disembarkation
Station of the strue copy of an or	Date of arrival or	Date of departure or disembarkation	Station or Troopship	arrival or	Date of departure or disembarkation
dertify the Troopship to be a true copy of an original History Station of the man.	Date of arrival or	Date of departure or disembarkation	Station or Troopship	arrival or	Date of departure or disembarkation
Station or Troopship Station of English Control of the Station of	Date of arrival or	Date of departure or disembarkation	Station or Troopship	arrival or	Date of departure or disembarkati