B.C.R.M. C.A.S.C. Mil D=1st Qu. T.O.S. August 18

ATTESTATION PAPER.

No. 2688409

OTTAWA c/s ~~DEPOT C.A.S.C.~~

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ... GRAHAM
1a. What are your Christian names? ... Samuel.
1b. What is your present address? ... 1518 Page St., North Side, Pittsburg, USA.
2. In what Town, Township or Parish, and in what Country were you born? ... Rendlestown, Co. Antrim, IRELAND.
3. What is the name of your next-of kin? ... Mrs. Elizabeth Graham.
4. What is the address of your next-of-kin? ... 1518 Page St., North Side, Pittsburg, USA
4a. What is the relationship of your next-of-kin? ... Wife.
5. What is the date of your birth? ... March 15th 1891
6. What is your Trade or Calling? ... Truck Driver.
7. Are you married? ... yes
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. Naval or
11. Do you understand the nature and terms of your engagement? ... Yes.
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? ... Yes.
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? ... No.
14. If so, what was the nature of the disability? ... --
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? ... No.
16. If so, what was the reason? ... --

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Samuel GRAHAM, 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.

Samuel Graham (Signature of Recruit)

Date June 22nd 1918. 191 . W. Moore (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Samuel GRAHAM, 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.

Samuel Graham (Signature of Recruit)

Date June 22nd 1918. 191 . W. Moore (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 PETEWAWA CAMP? ONT. this 22nd day of JUNE 1918.

O.C., OTTAWA c/s DEPOT C.A.S.C. (Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

Description of SAMUEL GRAHAM. on Enlistment.

Apparent Age 28 years 3 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 7½ ins.

Chest measurement.
- Girth when fully expanded ..... 36 ins.
- Range of expansion ..... 3 ins.

Complexion Medium

Eyes Hazel.

Hair Brown.

Religious denominations.
- Church of England .....
- Presbyterian ..... Y E S.
- Methodist .....
- Baptist or Congregationalist .....
- Roman Catholic .....
- Jewish .....
- Other denominations ..... (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).

2. vacc. rt. arm.

Scar Left Wrist.
Moderate Flat Feet.

Vision - both eyes - 6/6.
Hearing - Normal.

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* F I T. for the Canadian Over-Seas Expeditionary Force.

Date June 27th 1918. 191 . C. Laidlaw Capt

Place Ottawa, ONT. J. Nelson 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.

Samuel GRAHAM 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.

(Signature of Officer)
O.C., OTTAWA D's DEPOT C.A.S.C.

JUN 29 1918

Date 191 .

A.C. 9.10.19

REGIMENTAL DOCUMENTS

NAME Graham Samuel (Pte) REGT. NO. 9688409 UNIT C.A.S.C. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)				22026	
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465) 1 card.					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demobd.
1	MEDICAL EXAMINATION (M.F.W. 129)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	C.D.D.					
32	Disp. cert.					
1	Card					
						7-1-27
						22 29
						26 30

W. 2589
100M-11-18
1776-JB-1377

R W [illegible]

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 2688409 Rank Pte Surname GRAHAM.

(Given name in full) Samuel

Unit or Corps C A S C Birthplace Co Antrim Ireland

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

1. GENERAL DESCRIPTION:

Physique fair Weight 160 lbs. Height 5 ft. 8 in. Colour of Eyes blue

Nutrition fair

Pulse 70 regular

Condition of arteries fair

Vision Rt. 6/12 Left 6/12

Hearing (conversational voice) Rt. 21 ft.

Left 21 ft.

Identification marks, scars, or deformities. (Give cause and date of origin).
Two vaccination scars right arm

Opinion as to general health and physical condition fair

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)

Nervous System No Genito Urinary System No Cardio-Vascular System No

Special Senses No Integumentary System No Respiratory System No

Disturbance of Mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition No

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

none

M 105
1/3

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Witley Camp (Overseas)

Date 26/8/19 Signed R Haytaur Capt M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature Donald Graham

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at .....(Canada)

Date ..... Signed ..... M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature .....

(If not satisfied, M.F.B. 227 will be completed by a Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

Cert D.A.S.
14.1.48
13/6/19

MILITARY SERVICE ACT, 1917.

ORIGINAL

Original

MEDICAL HISTORY SHEET.

9 OCT 1918

1. Surname GRAHAM Christian name Samuel.

2. Number of report for service or claim for exemption according to Postmaster's Receipt or schedule — Not applicable. Recruit from Pittsburg. U.S.A.

3. Consecutive number on schedule of men reporting for service (if he appears on it) — BCRM

4. Address (including street and number if any) 1518 Page St., North Side, PITTSBURG, PA., U.S.A.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 26th day of June 1918, by the undersigned medical board sitting at OTTAWA, ONT.

5. Age as stated 27 Years 3 Months. 6. Apparent age 27 Years 3 Month

7. Height 5 Feet 7½ Inches. 8. Weight 145 Pounds.

9. Chest measurement (Minimum 33 Ins. / Maximum 36 Ins.) 10. Complexion Med (Eyes Hazel. / Hair Brown.)

11. Physical development Good. (Good / Fair / Poor) 12. Smallpox marks None.

13. Number of vaccination marks (Right arm 2. / Left arm) 14. When vaccinated last Childhood.

15. Distinctive marks and marks indicating congenital peculiarities or previous disease

Scar Lt. Wrist.

16. Slight defects but not sufficient to cause rejection Moderate Flat Feet.

The man denies having had (Rheumatism, Tuberculosis, Nervous or Mental disorder. Epilepsy Syphilis, Asthma.) We find no evidence of past (Rheumatism, Tuberculosis, Nervous or Mental disorder. Epilepsy Syphilis Asthma)

(Strike out disease admitted or suspected)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category All.

17. (a) Vision R. 6/6 L. 6/6

(b) Hearing. R. Normal.

Signature of Man Samuel Graham.

E. Laidlaw Capt President.

J. Nelson Capt. Member.

..... Member.

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
JUL 3	1918	E. J. Coulson Lt M. O.	JUL 3	1918	E. J. Coulson Lt M. O.
		M. O.	JUL 6	1918	E. J. Coulson Lt M. O.
		M. O.	JUL 10	1918	E. J. Coulson Lt M. O.

Joined 22nd day of JUNE 1918 at Pittsburg, PA., USA.

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	OTTAWA c/s DEPOT C.A.S.C.	2688409		22nd June 18.
Transferred to	Class "F"			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result

CANADIAN

If raised in category, record category in a square. The M. O. will initial and date.

N.B.—This sheet is 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.

M. F. B. 313.
300M —4-18.
1772-39-439.

Surname GRAHAM Christian Name Samuel.

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
CANADIAN SPECIAL HOSPITAL. WITLEY, SURREY.		28	1	19	24	2	19	Gonorrhoea	28	APPARENTLY CURED. IRRIGATIONS, LOCAL TREATMENT AND MEDICINES. STOPPAGES AS PER DATES.	H.S. Spence CAPT. REGISTRAR.

FORM OF WILL

SEE INSTRUCTIONS ON BACK

If you do not specifically mention your life insurance it will be assumed to pass by this will.

Name, &c. I, Samuel Graham

Regimental number 268809 Rank Private serving in the

Ottawa c/s Depot C.A.S.C. Canadian Expeditionary Force,

declare this to be my last will, revoking all previous wills, if any.

Executor I appoint Mrs. Elizabeth Graham

whose address is 1518 Page St., North Side, Pittsburg Pa., USA

to be the executor of this my last will.

General Delivery, Pittsburg USA

General gift I give to Mrs. Elizabeth Graham

whose address is 1518 Page St., North Side, Pittsburg Pa., USA

all my property not disposed of above.

Date Dated at PETAWAWA CAMP, ONT. this JUN 29 1918 191....

Signature Samuel Graham

Signature of Soldier.

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

1ST WITNESS	2ND WITNESS
Witnesses Signature Frank Daly	Signature C E Whitmore
Ottawa c/s Depot C.A.S.C.	Ottawa c/s Depot C.A.S.C.
Address	Address
Occupation Soldier	Occupation Soldier

M. F. W. 82
120m-4-18
1772-39-983

INSTRUCTIONS

NAME

Give your first names and surname in full. Fill in correctly your rank, regimental number and the name of the unit to which you belong.

EXECUTOR

Appoint as executor some responsible person, preferably a civilian, and if possible someone who is permanently resident in the Province where the property is situate. It is advisable that the person to whom you leave your property should be the executor. For instance, if you leave your property to your wife, you should ordinarily appoint her. One, two or more executors may be appointed, but the appointment of more than two is inconvenient.

LIFE INSURANCE

If you do not wish to pass life insurance by the will this should be stated.

SHARES

If you wish to give part of your property to one person and part to another, write in the blank space a gift of the property of which you want to dispose specially, and then complete the rest of the form. Thus, if you wanted to give your farm and implements to your sister, whose name was Mary Smith, and to leave the rest of your property to your mother, whose name was Elizabeth Smith, you would write into the form what appears in italics below.

For example:—

I give to my sister, Mary Smith, whose address is 154 William Street, Winnipeg, my homestead and farm implements.

I give to.....*my mother, Mrs. Eliz. Smith,*.....

whose address is.....*250 Yonge Street, Toronto,*.....

all my property not above disposed of.

DATE

Do not forget to insert the date on which the will is signed.

WITNESSES

Two witnesses are absolutely necessary. They and the soldier must all be present together when the three signatures are made. It is advisable that the witnesses should be persons permanently resident in Canada, and they must not receive any benefit from the will.

C.A.D.C. 5009A

I

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

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.

NAME OF SOLDIER (Block Letters) GRAHAM SAMUEL

REGIMENT C.A.S.C. RANK Pte. No. 267409

Date of Examination in England 23/8/19 | Date of Examination in France

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 2 — 18 — 29 —
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

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 C C Graham Capt

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 3

NAME OF SOLDIER Graham S. No. 2688409

REGIMENT C A S C RANK O S Pte

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show :

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date	Amalgam	Temporary Filling (a) C. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoea	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
Condition on first Examination	1918 July 9										2 / 4-30									Capt Mc Intyre	3	4 Can 3.14.19. 29.

M.F.B. 465
2/4M-1-17
1772-89 960

DENTAL HISTORY SHEET

DENTAL DEPARTMENT, CANADIAN ARMY

BEAUFAST LEDGER

MADE IN CANADA

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge
Class "A" No. 101073

THIS IS TO CERTIFY that No. 2686409 (Rank) Private
Name (in full) Samuel Graham enlisted in
the Canadian Army Service Corps
CANADIAN EXPEDITIONARY FORCE at Petawawa on the 22nd
day of June 1918
HE served in France with C A S C Pool

and is now discharged from the service by reason of Demobilization.
~~Medical Unfitness.~~

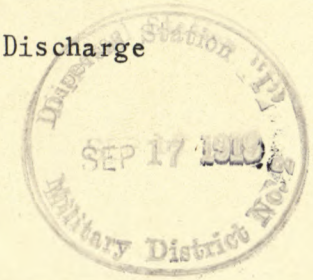
THE DESCRIPTION OF THIS SOLDIER on the Date below is as follows:

Age 28 years
Height 5 ft 10 ins
Complexion Medium
Eyes Hazel
Hair Brown

Marks or Scars Scar Terminal phalanx back left index finger

Samuel Graham
Signature of Soldier.

Date of Discharge



Issuing Officer.

J W Jago Capt.
For O. C. No. 2 District Depot
Rank

Date ..... 19....

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.

M.F.B. 39A.

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				

TOS 21.8.19 WITLEY.
SOS, - OMFC. TO CEF CANADA 5.9.19

OFFICER i/c RECORDS,
R. WING C.C.G.,
WITLEY.

Embarked Tilbury 6.9.19.
Disembarked at Halifax
Hudson Depot

SEP 6 19[illegible] O. S. T. O. S. No. 2 DISTRICT DEPOT, TORONTO 1919 PART II D. O. 263
SE[illegible] 17 1919 S.O.S. (DISCHARGED FROM H. M. S.) No. 2. DIS. DEPOT, PART II D. O 263

Captain,
For O. C. No. 2 District Depot.

92431.—W6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps_____

Regimental No._____ Rank_____ Name_____

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

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

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				

(*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., e.c., also special qualifications in technical Corps duties.

[P.T.O

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103—I. Part I.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—PP1150 1M 5/18 G.W.P.Co.(3490)

(1) *Substantive rank *Acting rank *[To be entered in pencil to facilitate alteration.]	(2) Regiment or Corps	(3) Regtl. No.
(4) Surname Graham (5) Christian Names Samuel (6) Army Form, number of, Attestation Form or Record of Service paper (7) Whether of British or of Alien origin [*vide* A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (*a*)	6a S.L. 93rd Lpl	268404

(10) Enlistment (*b*) (11) Engagement (*c*)

(12) Service reckons from (*date*) (13) Special conditions (if any) of enlistment (*d*)

(14) Any subsequent variations (if any) of conditions of service

Initials and Rank of an Officer.

(Authority) (*date*)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer

(16) (Record of Occupation in Civil life (*vide* Army Order 93 of 1917)

Industrial Group No.

Trade or Calling

Married or Single

Particulars of Trade Test

Occupation Cards despatched on (*date*)

Second Occupation Card despatched on (*date*)

(17) Next of Kin Mrs Elizabeth Graham 1518 Page St Kotl Side Pittsburg Pa

(18) Demobilizer (*f*) (Place)

(19) Pivotal-man (*f*) (Date)

(Signature of Posting Officer

(20) Qualifications (*g*) *or* (21) Corps trade and rate

(22) Extended

(23) Re-engaged

(24) Miscellaneous entries:—

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [*vide* A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoeing-smith, &c.

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received.	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
			Arrived in England		8-8-18	
9/8/18	Cas Sc	S.P.T.O. 184	S.O.S	Southampton	8-8-18	
1-10-18	Cas Sc	Cas Sc Book 168 S.P.T.O. 229	S.O.S on proceeding Overseas	Southampton		
15-11-18	Cas Sc	A/18-10-18 S.P.T.O. 200	Attached W.E. to 20th Bty 6th Bde	Witley	25-10-18	
21-1-19	—	12	Deemed to be attached 20 Bty 6th Bde	"	16-1-19	
10-2-19	Cas Sc	35	S.O.S from Cas Sc	Witley	29-1-19	
5-3-19	Cas Sc	54	S.O.S from Cas Sc	"	4-3-19	

(Certified true copy)
for Lt. Col. i/c Records,

10-7-19	Cas Sc	P.T.II 159	S.O.S. To Corps Depot	Witley	10-7-19	

L. A. Kenny Lieut.
For O.C. C.A. & L. of D.

S.O.S. O.M.F.C. TO C.E.F.
PT. II ORDER No. 82 DATED 17/8/19

H. Parker Capt.
OFFICER i/c RECORDS,
"P" WING C.C.C. WITLEY.

Nothing to be written in this margin.

Fill[illegible]y.—Unit, Number, Rank and Name.

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps ~~OTTAWA S/ DEPOT~~ C.A.S.C. 93rd Bn

Regimental No. 2688409 Rank Pte Name Graham, Samuel

Enlisted (a) 22-6-18 Terms of Service (a) ~~Ltd~~ Dft W Service reckons from (a) 22-6-18

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

Extended ..... Reverted ..... Qualification (b) Chauffeur + private

W.S.B. class "A"

Report Date	Report From whom received	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
		~~Proceeded Overseas~~ JUL 19 1918			
		Disembarked	Gravesend	8-8-18. ✓	
AUG 9 1918		Taken on strength of C.A.S.C.	Chorncliffe. AUG 8 1918		Part II. 184
1-10-18	do	SOS. on proceeding Overseas	do.	1-10-18	PART II. ORDER NO. 229 W. Geagan Lieut. for O.C., C.A.S.C.
2-10-18	C.C.R.D.	Having arrived as Reinforcement is taken on the strength of Ca S C Bool.	Field	2-10-18	NR.
2-10-18	do	To C C R C.		5-10-18	NR 1412.
19-10-18	C C R C	~~Left for~~ 1101 Dist C.F.C.		19-10-18	KR 891 NR 1828
2-11-18	20 Coy.	attached as in W.E. to 20th Coy C.F.C.		25-10-18	KR 891 P.T.II 0200 7/1918

(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.

CERTIFIED CORRECT. 11 OCT 1918 CAN. RECORDS, LONDON.

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				
28-11-18	No1 Dist C.Group. C.F.C.	Sentenced to 4 days F.P. No 2 for A. W. O. L. absent without leave from 11.45 Pm 24-11-18 to 1 Pm 25-11-18 (23¼ hrs) forfeits 1 days pay under R.W.	F.P. No 2	26-11-18	AFB 2069 R.O. 311 of 1918
	Can F Cas Corps	Forfeits Fld allowance & is placed under stoppage of pay at the rate of 50 cts per diem from 29/11/18 to 12/1/19 (45 days) while in hosp.			AFO 1643/9637 PE 20 ord 12-21/1/19.
16.1.19	beyBD	Leave to be added as in WB to No Coy CFC on arrival at beyBD	at beyBD	16.1.19	AR 1960 PE 20 ord 12-24/1/19
22.1.19	do	To 51 Gen Hosp "A"		22.1.19	B64169
27-1-19	51 Genl.	Forfeits Fld allowance and is placed under stoppages of at pay at the rate of 50 cents per diem whilst in Hospital from 17-1-19 to 27-1-19 (11 days)			AFO 1643. R.O. 27 d/1919.
13.3.19	"	To England		27.1.19	KH 17-15.
20/3/19	O/C Reinds	S.O.S. of 6 Base Pool on being mobilized to Eng. and posted to 6 Base Depot Witley		29/1/19	RL 20-6 RL 6 20319 OFB 3383. KH 17-18 PA 050 d 1919

J. Johnston
Lieut. for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

Form R 122.
2353—100M—9-12-16.

G.H.

Rank Name GRAHAM, Samuel. Reg'l No 2688409.

Unit 93rd Dft. C. A. S. C. If in perm. Corps, What Unit? } Married or Single Married.

Place and Date of Enlistment Petawawa Camp. June 22nd 1918 Place of Birth Rendlestown. Ire

Name and Address, Next-of-Kin Mrs. Elizabeth Graham.

1518. Page St. North Side. Pittsburg. U.S.A. Relationship Wife.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. & V., Ld.—9546-16.

N/E R.B. No 12177
File R.L.
Category Con OR

Report. Date.	Report. From whom received.	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.
		C.A.S.C. A.B.103 CHGD	Arrived in England	8-8-18	S/S CORSICAN
9/8/18.	CASC.	T. O. S.	S. Cliffe	8-8-18.	Pt. II 18 d. CASC Pool Perth
1-10-18	CASC	S.O.S. on pipe o/seas.	Pte S Cliffe	1-10-18	P.O 2298 d/6/10/18 TOS.
15-11-18	CASC Pool.	Attain Wt. to 20 boy. & F. C.	" Field.	25-10-18	— " — 200.
21. 1. 19	— " —	Cease to be att 20 C & C F C.	" "	16. 1. 19	— " — 12.
10. 2. 19	CASC cd.	TOS from CASC Pool.	" Witley	29-1-19	— " — 35.
5. 3. 19	CASC cd	TOS from CASC cd.	— " —	4.3.19	— " — 54 CASC cd 50-55 d/ 5-3-19
29. 3. 19	CASC Pool	TOS to CASC cd	— Field	29.1.19	R 050
5. 4. 19	"	Sentenced to 14 Days F.P. No 2 for WOAS disobedience of standing orders in that he was absent from Venereal compound from 13.30 hrs. to 16.30 hrs. 12-1-19 without Permission		13.1.19	R 053

2688409 Graham S

Report. Date.	Report. From whom received.	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
23 6/19	C/ASCDD	Conduct to the prejudice of good order and military discipline. In that he creates a disturbance in Block F 10 I.E. he was fighting with Pte Baker N.J awarded 5 days CB.	Witley	11 6/19	DO 146
10.7.19.	CASCDD	SOS to CASCCO Records Sec		10.7.19	DO 159 + DO 165 d/11/7/19 Cascco.
15-7-19	P. Wing	T.O.S. pend. R.T.C.	"	12-7-19	DO 66.
14-7-19.	Cascco	SOS to P. Wing	"	12-7-19	DO 167.
16-8-19	R. Wing	T.O.S.		15.8.19	- 110
12.9.19	do	P.O.S to Canada		6.9.19	- 133
		103-D-85		6.9.19	

V.D.G. DIVISION.

T282.

VENEREAL DISEASE CASE-CARD.

Army Form W. 3497.

CANADIAN SPECIAL HOSPITAL, WITLEY. Hospital. √ Ward.

Age	Service	Religion	Disease
27	8/12.	Pres.	V.D.G. II B

Regiment	Coy.	Reg. No.	Rank	Name
CASCattCFC.		2688409	Pte	Graham, S

Date of Admission	Disposal	Date of Discharge
28 - 1 - 1919	DISCHARGED TO DUTY.	24 FEB 1919

SUMMARY

This space not to be written upon by M. O. i/c case.

In cases of Syphilis the particulars below must be sufficient to enable the Syphilis Case Sheet, Army Form I. 1140, to be made up from this Card.

Plus — Yes — Minus — No

1st, 2nd, 3rd attack or relapse: 1st

Dates and Places of Three last Exposures: Cairo 31 Greek

Main points in history: P.T. before and after? Incubation in days:

Prostitute? Other social data:

If relapse, particulars:

Condition on admission: Mental discharge: + Character: S.W.O.

Scabies: Pediculosis: Structural Abnormalities:

Complications: (a) Local:

(b) Metastatic:

Nature of any co-existing venereal disease:

Woman's name and address:

TREATMENT } Note or suggestions from Officer i/c Treatment.
DATE 24 }

[P.T.O.

(9 19 24) W210—P1 200,000 10 17 HWV(P1148) Forms W. 3497/4
1810—P1224 200,000 5/18

Graham 5

Date 1919	Treatment: Local	Treatment: General	Progress	Complications and their Treatment
28/1			S. C. D.	U/A mistake
30/1/19	"	24 + 3	Fluid clear now?	Smear: Spony pus cells & G. & present ++ U: coarse 2 tr clear
1/2/	"	24 + 3	Morning temp	U/A pus clear pus
4/2/19	"	24 + 3	S.P.D.	U: specks 3½ tr clear S
6/2/19	"	24 + 3	V.S.M.D.	U: specks pus 3½ tr clear
F.A.	—	24 + 3.	D/g.	W. 3½ | 1. Hyg. 2. clear pus
11/2/19	"	24 + 3	Temperature W. H.	Few pus cells — No G. B. found. U: few specks 5 tr clear S
13/2	"	24 + 3	V.S.M.D. Pm.	3½ | specks clear Pm.

Graham S. S. 5

Date 1919	Treatment: Local	Treatment: General	Progress	Complications and their Treatment
13/2	amb	2+3	Complete am.	W. clean " amb 1½
18/2	"	2+3	" V.S.W.D (Smear)	A.N. / Sputum hazy / 19/2/19 few pus + epith cells, no G.C. found / 5 14/16
20/2	"	2+3	V.S.W.D	A.N. / clear
		For Discharge H.J.R.		

DISCHARGED SERVICE No. 2

VENEREAL DISEASE CASE-CARD.

Army Form W. 3497.

_____ Hospital. _____ Ward.

Age	Service	Religion	Disease

Regiment	Coy.	Reg. No.	Rank	Name

Date of Admission	Disposal	Date of Discharge

SUMMARY { This space not to be written upon by M. O. i/c case.

In cases of Syphilis the particulars below must be sufficient to enable the Syphilis Case Sheet (Army Form I. 1238) to be made up from this Card.

1st, 2nd, 3rd attack or relapse _____

Dates and Places of Three last Exposures { _____ _____

Main points in history _____

Condition on admission _____

[P.T.O.

(9 19 24) W210—P1 200,000 10/17 HWV(P1148) Forms W. 3497/4
1810—P1224 200,000 5/18

Surname	Christian Name or Names	Reg. No.
GRAHAM.	S.	2688419.
Rank	Unit	
Pte.	C.A.S.C. Pool.	

Cas. List.		
31-1-19.A434/2.	51. G.H. Etaples. V.D.G.	17-1-19.
1.2.19.B426	Can. Sp. Hosp.	29-1-19
1-3-19 B445	Dusch	24-2-19

A.M.D. 2 Dept.

D.M.S.1300. 50M-30-8-18. Bch. of D.G.M.S. O.M.F.O. London

Cas. List.

Surname Graham.
Christian names Samuel
Regtl. No. 2688409 Rank Pte.
Unit C.A.S.C.

H. Q.
M. D. No. 3.92
T. O. S. June 22 1918
D. O. Pt. II 182 of 1-7-18
S. O. S. 17-9-1919
Reason demob.
Auth. D.O. 26320-9-1920D

Next of kin Graham, Mrs. Elizabeth Relationship Wife.
Address 1518 Sage Ste.,
North Side, Pittsburgh
Pa., U.S.A.

Also notify:

BORN—Place Irelands, Rendlestown Date Mar. 15th, 1891,
ATTESTED—Place Petawawa Camp Ont. Date June 22nd 1918.
O/S 20-7-18 32½
R/C 14-9-19 40/32 Pte.

W. 22—75M-5-18. 1772-39 839.

Form R. 149.

Name Samuel GRAHAM. Rank Pte. Reg. No. 2688419

Unit C.A.S.C.(Pool)

Next of Kin U.S.A.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
17-1-19	No.51 GH.Etaples		20	A 42		6913
29.1.19	Can Spec A Wiltey	do		B426		6058.
21.2.19	Discharged.					2040
24.2.19	Calle Deh. Witley			B445	wtG.423.	

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

EK.
RS

Number 2688409 Rank Pte.

Surname GRAHAM

Christian Name Samuel.

Units 6 a S 6 Theatre of War France

Date of Service 1-10-18.

Remarks

Latest Address 304 Taylor Ave., Pittsburg Penn
N S
U. S. A.

Roll No. Page 15020

200m.-2-21.M.

Next of kin

Address on leave

Address on discharge

Transportation issued Yes / No Date

Character on discharge

Previous occupation

Date and place of enlistment

Diagnosis

Date of Medical Boards

Date	Remarks

*—Name will be given in full; surname first.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A434. (2)	51 Gen. Etaples.	17-1-19.	20.
B426	Can Spec. Wetley	29-1-19	20
B446	Dosich.	24-2-19.	"

NAME Graham. S. REGT. No. 2688419.

RANK AND UNIT Pte. (Pool.) C.A.S.C.

NEXT OF KIN

CABLE		NATURE OF CASUALTY
No.	DATE	

M. F. W. 42—100M.—8-18.
H.Q. 1772 39-893.

P 820
12474—378M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND OR~~ CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:-	1-8-18	EFFECTIVE DATE:-	
AMOUNT:-	$20 00	AMOUNT:-	

NAME:- GRAHAM SAMUEL 9

NUMBER:- 2688409

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.

Mrs Elizabeth Graham (wife)
1518 Page St.
Pittsburg, Penn.
(APR from Canada) U. S. a.
~~Stopped~~ 1-8-19

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
L.P.O. from Canada	31-7-18	Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- C.A.S.C. Draft No. 93

DATE ACCOUNT FIRST OPENED:- 1-8-18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
D.O. 184	8/8/18		Case. S'Cliffe

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
26/6/19	819	Witley	~~9 73~~				
11/7/19	984	"	9 73				
13/7/19	9631	P. Wing	9 73				
			~~29 19~~				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	Working pay.	SUBS'CE ALL'CE
	1 - -	10		
D.O. 122 30/8/19. R. Wing Can Camps.			1 -	

~~Dis~~ Can 31/7/19 auth AR 11749. Witley 4/7/19 Witley ALD 2. Ledger Balance 31/7/18 £2340 Debit Balance 579

PARTICULARS OF RENDERING NON-EFFECTIVE

MONTH	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31/7/18	Bal from Can								11 35	✓	
aug	P. P	34 10									
				bal				20	25 45		
				4/2288 Sch 88 - 13-8	4 87						
				9/4516 ✓ 16-8	2 43				18 15		
		34 10			730			20			
Sept	✓	33									
				bal				20	31 15		
				1/2607 ✓ 7-9	4 87						
				11/2860 ✓ 25-9	4 87				21 41	✓	
		33			974			20			
Oct	✓	34 10									
				bal				20	35 51		
				15/2368 ✓ 7-10	3 73				31 78		
				54/3206 ✓ 25 10	3 73				28 05		
		34 10			746			20			
Nov	✓	33									
				bal				20	41 05		
Dec	✓	34 10		✓				20	55 15		
				D/N 3060 ✓ 8 11	3 73				51 42		
				4 Pp. 2. auth 24/11/25/11/18 — AD 211 - 31/12/18 Pool		5 50			45 92		
Jan	✓	34 10		CAP				20	60 02		
				57/D/N 3201 1676. 25 11	13 66				46 94		
		101 20			16 79	5 50		60			
Feb.	✓	3080		Cap.				20	57 76		
				411. 2/11/18 1/19 DO 11 Cascp 1/19		27			30 76		
				65/3973 Witley 3/2/19	2 43				28 33		

COMPILED BY J. Fletcher
CHECKED BY ... auth Bal

NUMBER 2688409 RANK Pte NAME GRAHAM S.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Feb		30 80			2 43	27		20	28 33		
				HS/V 17-1-19 to 27-1-19 11 days Don. 27. 12-2-19		6 60			21 73		
				116/5263 Cash 25 2/14	2 43				19 30		
March	PP	34 10		Cap.				20	33 40		
				150/300 Witty 10 3/14	4 87				28 53		
				160/511 ✓ 24 3/14	4 87				23 66		
				170/6735 ✓ 19 2/14	2 43				21 23		
				170/T223 ✓ 24 2/14	12				21 11		
		64 40			17 15	33 60		40			
April		33		Cap				20	34 11		
				14 days FP2 13 1/14 Do 5-3. 5 4/14.		15 40			18 71		
				2/160 Witty 14 4/14	4 87				13 84		
May		34 10		Cap				20	27 94		
				5/240 24 4/14	4 87				23 07		
				7/24005 22 1/14	7 30				15 77		
				7/282 12 3/14	4 87				10 90		
		67 10			21 91	15 40		40			
June		33		Cap				20	23 90		
				1/450 ✓ 28 5/14	9 73				14 17		
				2/664 ✓ 12 6/14	4 87				9 30		
July		34 10		Cap	14 60			20	23 40		
				4/819 26 6/14	9 73				13 67		
		67 10			24 33			40			
				9631 13/7 CCC	9 73						
				981 11/7	9 73				5 79		
					19 46						
Aug.				10620. Irving. 28/7. ✓	9 73						
				4/292. ✓ 9/8.	9 73						
				10/12902. R. ✓ 23/8.	24 33				49 58		
					43 79						
Sept	Working pay 1/1/19. to 31/7/19. 210. 122 30/8/19. R. Wing 666. = 212 days @ 1/-	212 -		AR. 14266. 3/9/19. R. Wing	14 60	Con 186			162 42		
				Hosp charges 27 days from 1/1/19 to 27/1/19 to be deducted from W.O. Credit of £212.00		27 -			120 82		
		212 -			14 60	27 -					
				S.L. 103. S.O.S. 6.9.19.							

S.S. "MINNEKAHDA" 14-9-19.

DISPERSAL "I"

AUDITOR | PAYMASTER

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

M. OR S. | REGT. NO. ~~268409~~ | RANK Pte. | NAME (IN FULL) GRAHAM, S. | G3849

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes. Closed in Ottawa | DATE EFFECTIVE 30-9-19

TO WHOM PAID same | RELATIONSHIP

ADDRESS same

PARTICULARS	EFFECTIVE DATE	AUTHORITY
see agreement		

ORIGINAL UNIT C.E.F. Cast | IF IN P.F. WHAT UNIT? | (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION | TRANSFERRED TO Farmers National Bank | DATE | AUTHORITY

DATE OF ATTESTATION 22-6-18 | TRANSFERRED TO Pittsburg, Pa. U.S.A. | DATE | AUTHORITY

ASSIGNED PAY $ 20.00 | DATE EFFECTIVE 30-9-19 Closed in Ottawa

PAYABLE TO Mrs. E. Graham | RELATIONSHIP wife | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 1518 Page St. Pittsburg USA.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Toronto. | DATE 17-9-19 | REASON Demob. | AUTHORITY D.O.263. | IF ENTITLED TO POST DISCHARGE PAY Yes.

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.
BALANCE FROM PREVIOUS ACCOUNT																												5 79			5 79	5 79		
31/7/19			5 76	10	35	00			161 10		10630	14266					9 73		14 60		5 00													
20/9/19	51	1.10			70	00					292 p.002				162868		24 73 33		14 84		310 05		410 00								418 31		
1/9/19-30/9/19	30	1.00			243	00			243 00																								
		2.10			2.00				2.00																								
									424 10 X																						424 10 X			
			W.S.G.																								W.S.G.						
																											17-9-19 70 00				AMOUNT DUE SOLDIER DEPENDENT		
																											6 30						
122 days			280	120	400																							13 00		89 30	203 70	107		
											a/c 162	Oct 14		1394229			63 70		1394230		47 -		200 -		140 -		60 -						
											AR 187	Oct 12		1716112			70		1716113		30		300		70		30						
											11 216	Dec 16		1708443			70		1708444		30		400										
			280 -	120 -	400												203 70				76 30		120		400								

T.O.S. 6479 D.O. 263

SUBS. 10 D.O.

PARTICULARS OR REMARKS

Dr. 2.00 b.

Cloth allce. 1st Class M.T. Driver 1.00 per diem

1/9/19 to 31/8/19 243 days. R.W.M.C.C.C.

1 WINE AR R.W.M.C.C.

Aug. Sept. AR

20 days A.F. @ 1.00 per diem

W.S.G. as above

Pro over cr. 3 days

Pro over cr. 13 days

W.S.G. Paid by #2 D.D.

W.S.G. PAID IN FULL

CAPTAIN
FOR PAYMASTER WAR SERVICE GRATUITY

200M-3-19.—L. L. 58798-H. & D. 9985.
M. F. W. 2596.
1772-39-1390.

Groups P. W. Reg

War Service Badge
Class "A" No. 101073

D.A.G. B 4

O.G. 7.
22.28.
D.A.I.

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 2688409
2. Rank Pte
3. Name GRAHAM, Samuel
4. Unit Base
5. Date of Discharge SEP 17 1919 | Place Toronto
6. Reason for Discharge Demobilization
7. Authority ~~No. 2, D.D., Part II,~~ D.O.No. 263
8. Proposed Residence after Discharge Gen Del. Pittsburg Penn. USA

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.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date SEP 17 1919

Signature

(O.C. Discharging Unit.)

M.F.B. 218a—150M-3-19—1772-89-113.

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

Triplicate Attestation Paper (M F.W. 23), or
Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5003a).
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
   (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group..... B

Checked by No..... 11

.....

Date..... 15 AUG 1919

Date of Enlistment 22-6-18

1-8-18

MILITIA AND DEFENCE

Separation and Assigned Pay Branch G 9270

OVERSEAS CONTINGENTS

Date of Assignment 1-8-18

RATE OF SEPARATION ALLOWANCE

25 00	30		

1.9.18
PC. 2755
mo 7114.

RATE OF ASSIGNMENT

20 00			

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion 6 a. S. 6. Draft 43

Beneficiary

Relationship 2nd Wife - Mrs. Elizabeth Graham

Address 1518 Page St. Pittsburg P.a. U.S.A.

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1 MRS. ELIZABETH GRAHAM,
1518 PAGE ST.,
2 PITTSBURG, PA. U.S.A. 20 25 45.00
% 2688409 PTE SAMUEL GRAHAM
3 FORTY FIVE DOLLARS
4

7288 S-14

Date 1918		Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
#3367. Aug.	Z	42079.	33		33		Mailed 16.8.18. to 31.7.18.
Aug.	Z	33970	25	20	45	B.	S/a. from 22.6.18. Cwith D.S.M.L #3 D.26-5-28-4.
Sept.	Z	47422	25	20	45	B.	Dated 25.7.18.
Oct.	Z	62092	25	20	45	B.	
Nov.	Z	76642	25	20	45	B.	
Dec.	Z	89166	45	20	65	B.	
1919 Jan.	Z	107414.	30	20	50	B.	
Feb.	Z	120965	30	20	50	B.	
Mar.	Z	133257	30	20	50	B.	
Apr.	Z	3120	30	20	50	B.	
May	Z	11591	30	20	50	B.	
June	Z	18031	30	20	50	B.	
July	Z	22185	30	20	50	B.	
Aug	Z	24626	30	20	50	B.	
Sept	Z	25633	30	20	50	B.	
			444	280	728		

A/c Closed 30.9.19
Ret'd per SS Minnekahda
Date 14/9/19 M.F.W. 10
Closed 23991
M.D.V. 1446.
Dis. Inko. LP. 124447
N.S.C.
23/9/19

M. L. 3-B-4

AUTHORITY FOR NEW ACC'T. a.s.s. 2-8-18. R.T.N.

ENTERED IN AUDIT LEDGER AUG 8 1918 BY Meg VOUCHER SECTION

M. F. W. 128.
4'Om. 6-17—1779-39-1141
L. L. 22820—M. & D. 1933.

AUDITED.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

M. F. W. 129.
4 Dm. 6-7—1772-39-1141
L. L. 22330—M. & D. 1933.