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ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? *Haefkeney*
- 1a. What are your Christian names? *Samuel Eric*
- 1b. What is your present address? *Amherst n.s.*
2. In what Town, Township or Parish, and in what Country were you born? *Amherst n.s.*
3. What is the name of your next-of-kin? *Myrtle E. Haefkeney*
4. What is the address of your next-of-kin? *Amherst n.s. 141 Pleasant St.*
- 5a. What is the relationship of your next-of-kin? *wife*
- 5b. What is the date of your birth? *Sept 27th 1897*
6. What is your Trade or Calling? *farmer*
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.
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.*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Samuel E. Haefkeney*, 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 E. Haefkeney (Signature of Recruit)

Date *AUG 14 1916* 191 *A. MacRae Capt.* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Samuel E. Haefkeney*, 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 E. Haefkeney (Signature of Recruit)

Date *AUG 14 1916* 191 *A. MacRae Capt.* (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 *Pictou n.s.* this *14th* day of *August* 191 *6.*

C. H. Reid Capt. (Signature of Justice)

Description of Samuel E. Halfkenny on Enlistment.

Apparent Age 20 years months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

Height 5 ft. 8 ins.

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

Complexion Colored

Eyes

Hair

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

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..... Aug 14 1916..... S. Murray

Place..... Pictou..... S. A. McC
 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 E. Halfkenny 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.

..... C. H. Reis Capt (Signature of Officer)

Date..... AUG 14 1916 1916 .

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers..... 32

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet..... 1

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge..... 1

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet..... 2

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate..... 1

DISCHARGE DOCUMENTS

R. O. No.

H. Q. No.

Name Halkenny, Samuel Eric

Regt. No. 93121 Rank Pte

Corps No. 2 Const. Bn. C. E. F.

Medically Unfit

01826



IPC

(1)
1-20
31-20
27-20
[Handwritten signature]

649-H-6467

✓ CARD NO.

SURNAME. Halfkenny

CHRISTIAN NAMES Samuel Eric

REGL. NO. 93 1121 RANK Pte.

UNIT No. 2 Construction

Bn.

FORMER CORPS Nil.

S.O.S. Dis. 24-11-166

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Halfkenny, Mrs. Myrtle E.

RELATIONSHIP TO SOLDIER wife

ADDRESS 141 Pleasant St., Amherst, N.S.

COUNTRY OF BIRTH Canada Amherst, N.S. DATE Sept. 27th, 1897

PLACE OF ATTESTATION Pictou, N.S. DATE Aug. 14th, 1916

2K

MARRIED

Yes.

SINGLE

WIDOWER

TRADE OR CALLING

Farmer

RELIGION

Methodist

DESCRIPTION.

APPARENT AGE

20

YEARS

—

MONTHS

HEIGHT

5

FEET

8

INCHES

CHEST MEASUREMENT

36

INCHES

EXPANSION

3

INCHES

COMPLEXION

Colored

EYES

—

HAIR

—

DISTINGUISHING MARKS

None stated.

MEDICAL EXAMINATION.

PLACE

Pictou, N. S.

DATE

Aug. 14th, 1916

Present Address;

Amherst, N. S.

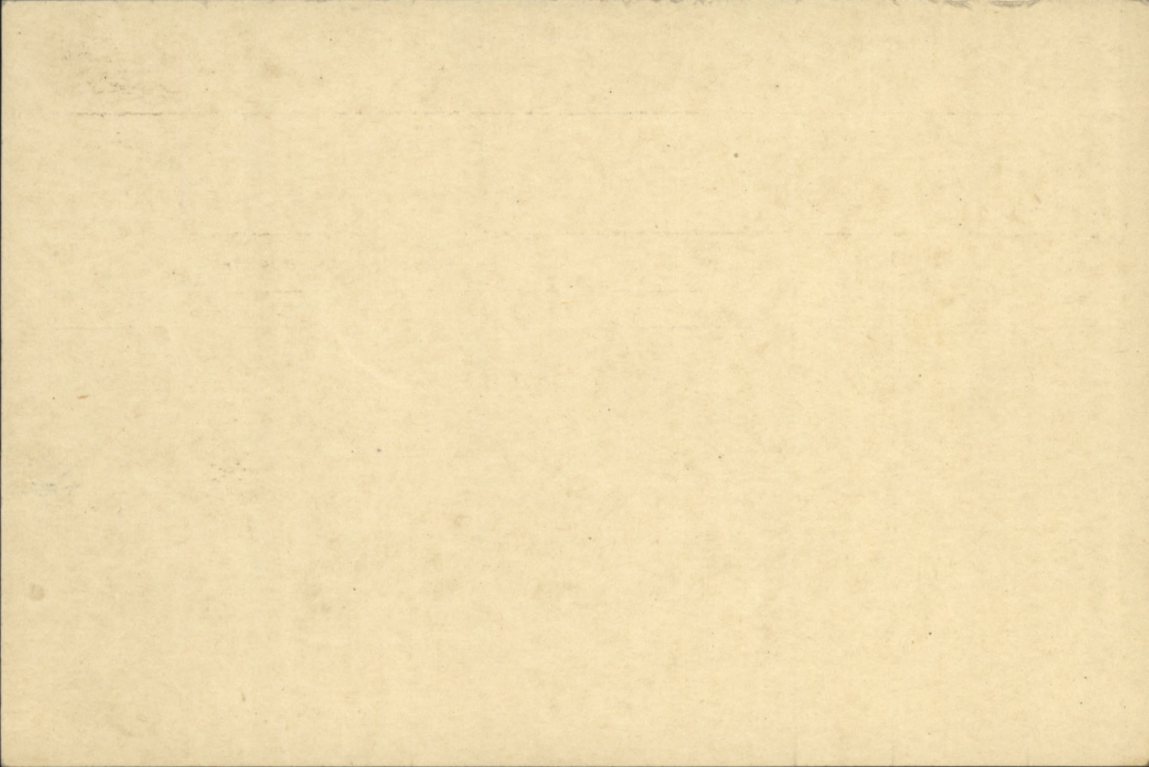
No. 931121. RANK Pte.

NAME Halfpenny, Sam Eric.

T. O. S. 8-8-16 UNIT No 2 Construction Battalion
D.O. 12.15.8.16

M. D. 6

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
1916 Aug 8	1916 Aug 31	n		
	Sept.	n		
	Oct.	n		
Nov. 1	Nov. 24	✓	Dischgd (M.Li) 24-11-16	D.O. 86 24-11-16
a/c closed by payment. C.				



CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Article 71, Financial Instructions C.E.F., 1914).

Regimental No. 931121 Rank Private Name Samuel Eric Halfkenny
 Corps # 2 Construction Battn. CEF who was Discharged
 On 24-11-1916 1915, to _____



* Insert "discharged" or "transferred."

Period 1-11-16 to 24-11-16

The following is a statement of the account of the above-named to date of transfer or discharge inclusive:—

DR.		\$	c.	CR.		\$	c.
	Bal. Dr. from previous month.....				Regimental pay ²⁴ days at \$ 1 00	24	00
	Total payments during period				Field allowance ²⁴ " \$ 10	2	40
To	<u>Advance Ck</u>	2	00		Other allowances.....		
	from <u>Advance Ck</u>	10	00	To	Other Credits (give particulars).....		
	Assigned Pay..... <u>Advance</u>	3	00		<u>Ck redeposited</u>	7	00
	CDV	2	26		<u>Ck "</u>	11	45
	Other Charges (give particulars) <u>Regtl</u>	1	25		<u>Clothing carried forward</u>	10	00
	CDV	10	00		Bal. Dr. on discharge or transfer.....		
	Bal. Cr. on discharge or transfer.....	27	34	From			
From	TOTAL.....	54	85	From	TOTAL.....	54	85

The amount shewn as Balance Cr. due on discharge or transfer has † been paid.

Monthly stoppage on account of assignment of pay is ---, and has been charged in Pay-list for month of ---

† Insert "been" or "not been" as case may be

REMARKS:—

State (1) date of enlistment..... 8-8-1916

(2) if married and if a Separation Allowance Card has been submitted..... Yes

(3) cause of discharge and authority..... Medically unfit 63-H-262 9-11-1916

Part #2 Daily Orders #86 24-11-1916

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date.....

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date..... Nov. 24-1916

Place..... Truro N.S.

Belmont

 Captain
 Paymaster.
 # 2 Construction Battn. CEF

10

EAST PAY CERTIFICATE

The form to be used for all ranks (Vols. Army & Financial Institutions, C.R.I. 1917)

Regiment No. 101st Canadian Infantry Battalion
Company No. 1st
Name of Soldier, Private
No. of Certificate
Date of Issue
Name of Paymaster
Name of Bank

Table with columns for Date, Particulars, and Amount. Includes entries for 'Pay for 1st month', 'Pay for 2nd month', etc.

The amount shown as balance of pay for the month of ... and has been charged in favour of ...

REMARKS: ...

(1) If signed and a declaration ...

(2) Cases of absence ...

(3) If the ...

M.T.W.M.

8-8-16

MILITIA AND DEFENCE

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SEPARATION ALLOWANCE

Name *Nyelle E. Halfkenny,*

Name of Soldier *Halfkenny, Samuel E.*

Address *141 Pleasant Ave.,*

Regtl. No. *931121*

Amhurst.
Card address *Halifax, N. S.*
Pleasant Street
Halifax

Rank *Pte.*

Corps *# 2 Construction Bn.*

Relation to Soldier } *Wife*
wife, child or mother }

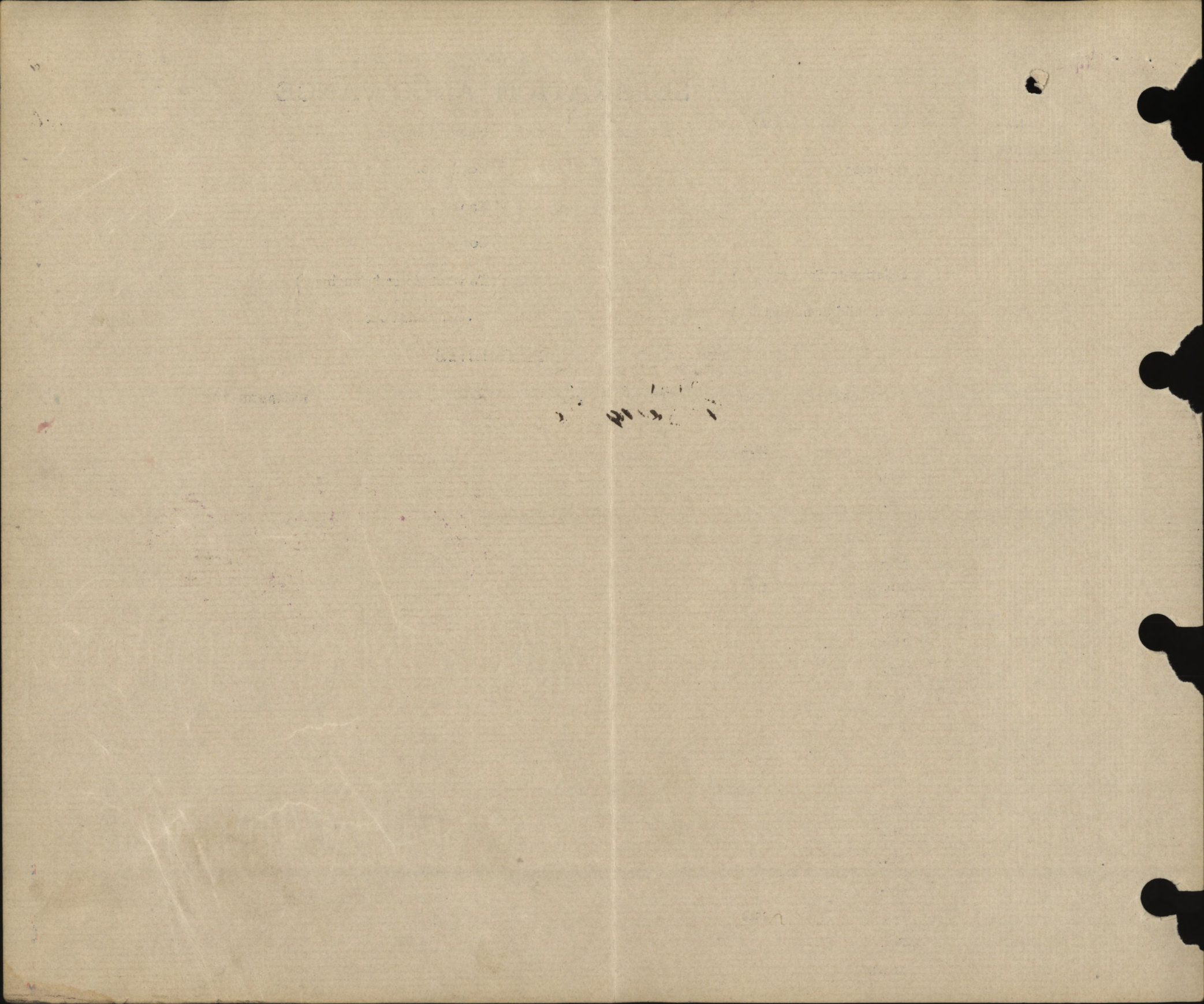
To what Corps belonging }
when called out }

make sure B.S.

PAYMENTS

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

ACCOUNT CLOSED
DATE..... PER.....
W



SEPARATION ALLOWANCE

Sheet No. 2.

M. E. Halfkenny ^{Wife}
OVERSEAS CONTINGENTS
PAYMENTS.Name of Soldier Halfkenny, Samuel E.
Pte.

L. L. Job 310.—Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.		M 18254	35	35
Oct.		P 219126	20	20
Nov.		F 222419	20	20
Dec.		F 25847	20	20
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*of A-847 balance
Dis 24/11/16 pmk 27/11/16 WTD*

ACCOUNT CLOSED
DATE..... PER W.....

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

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.				



This space to be for numbers.

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

No. *931121*

Rank *Private*

Name *Samuel Eric Halfkerry*
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) *No. 2. Comd. Bn. C. C. F.*

Date of Discharge *Nov. 24th 1916*

Place of Discharge *Luro. n.s.*

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age.....*19*.....years.....*1*.....months.
Height.....*5*.....feet.....*8*.....inches.
Complexion *Dark*
Eyes *Brown* } *Coloured*
Hair *Dark* }
Trade *Farmer*
Intended place of residence } *Amherst n.s.*
(To be given as fully as practicable.)

Descriptive Marks

2. The above-named man is discharged in consequence of

medically Unfit

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

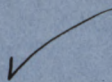
Good

N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

(OVER)
Carded
03-3-17
P.E.Y.
8

5. He is in possession of the following number of G. C. Badges:



No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

Three horizontal dashed lines for listing medals and decorations, each with a checkmark.

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (Squadron or Battery), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place)..... *Iruo - n. S.*

C. H. Reis Capt for Lieut - Col

(Date)..... *Nov. 24' 1916*

Commanding *no. 2 const Bn C. C. F. (A. O. S.)*

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place)..... *Iruo - n. S. Samuel Eric Halpenny* (Signature of Soldier.)

(Date)..... *Nov. 24' 1916. A/S M. J. Edwards* (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

..... *Samuel Eric Halpenny* (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. Confirmation of Discharge.

The discharge of the above-named man is hereby confirmed.

(Place)..... *Iruo - n. S.*

(Signature) *C. H. Reis Capt Lieut - Col*
C. C. no 2 const Bn C. C. F.

(Date)..... *Nov 24' 1916*

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

I Emanuel Eric Halpern

1918

List of Discharge Documents.

<p>Reg. Conduct Sheet, / Militia form B. 263.</p> <p>Squadron Battery Company } Conduct Sheet, / " B. 263a.</p> <p>Copies of Convictions, by C. P. <i>nil</i> in MS.</p> <p>Med. Hist. Sheet, 2 Militia Form B. 313</p> <p>Medical Report for Invalid* / " B. 227³⁰³.</p> <p>Statement of Man's Account on Transfer and Last Pay Certificate, " / D. 877.</p> <p><small>*Only if discharged "Medically unfit."</small></p>	<p>Attestation Paper, 2 Militia Form B. 235.</p> <p>Proceedings on Discharge / " B. 218.</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p>(a) Proceedings on Discharge.</p> <p>(b) Attestation.</p> <p>(c) Medical History Sheet (in the event of such having been prepared.)</p>
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N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.