ORIGINAL

ATTESTATION PAPER.

No. 844741

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1.	What is your surname?	Lampman
1a.	What are your Christian names?	William Augustus
1b.	What is your present address?	Wyoming. Ontario. Canada
2.	In what Town, Township or Parish, and in what Country were you born?	Wyoming Lambton Co. Canada
3.	What is the name of your next-of kin?	Mr. F. W. Lampman
4.	What is the address of your next-of-kin?	Wyoming. Ontario. Canada
4a.	What is the relationship of your next-of-kin?	Father.
5.	What is the date of your birth?	December 27th. 1894.
6.	What is your Trade or Calling?	Farmer
7.	Are you married?	No
8.	Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9.	Do you now belong to the Active Militia?	No
10.	Have you ever served in any Military Force? If so, state particulars of former Service.	No
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 William Augustus Lampman 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.

Wm A Lampman (Signature of Recruit)

Date January 25th 1916 Lieut W. Williams (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I William Augustus Lampman 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.

Wm. A. Lampman (Signature of Recruit)

Date January 25 1916. Lieut W. Williams (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 Forest this 25th day of January 1916.

F W Campbell (Signature of Justice)
Notary Public

M. F. W. 23.
400M.—1-15.
H. Q. 1772-39-841.

Description of William Augustus Lampman on Enlistment.

Apparent Age 21 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 10 ins.

Chest measurement.
- Girth when fully expanded ..... 39 1/2 ins.
- Range of expansion ..... 3 1/2 ins.

Complexion Ruddy

Eyes Blue

Hair Brown

Religious denominations.
- Church of England ..... yes
- Presbyterian .....
- 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).

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 25 1916 .....

Place Forest, Ontario .....

J. P. Hebbard .....
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.

William Augustus Lampman ..... having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

W. W. Maccraken ..... (Signature of Officer)

Date January 25th 1916. For Major O.C. 149th C.E.F.

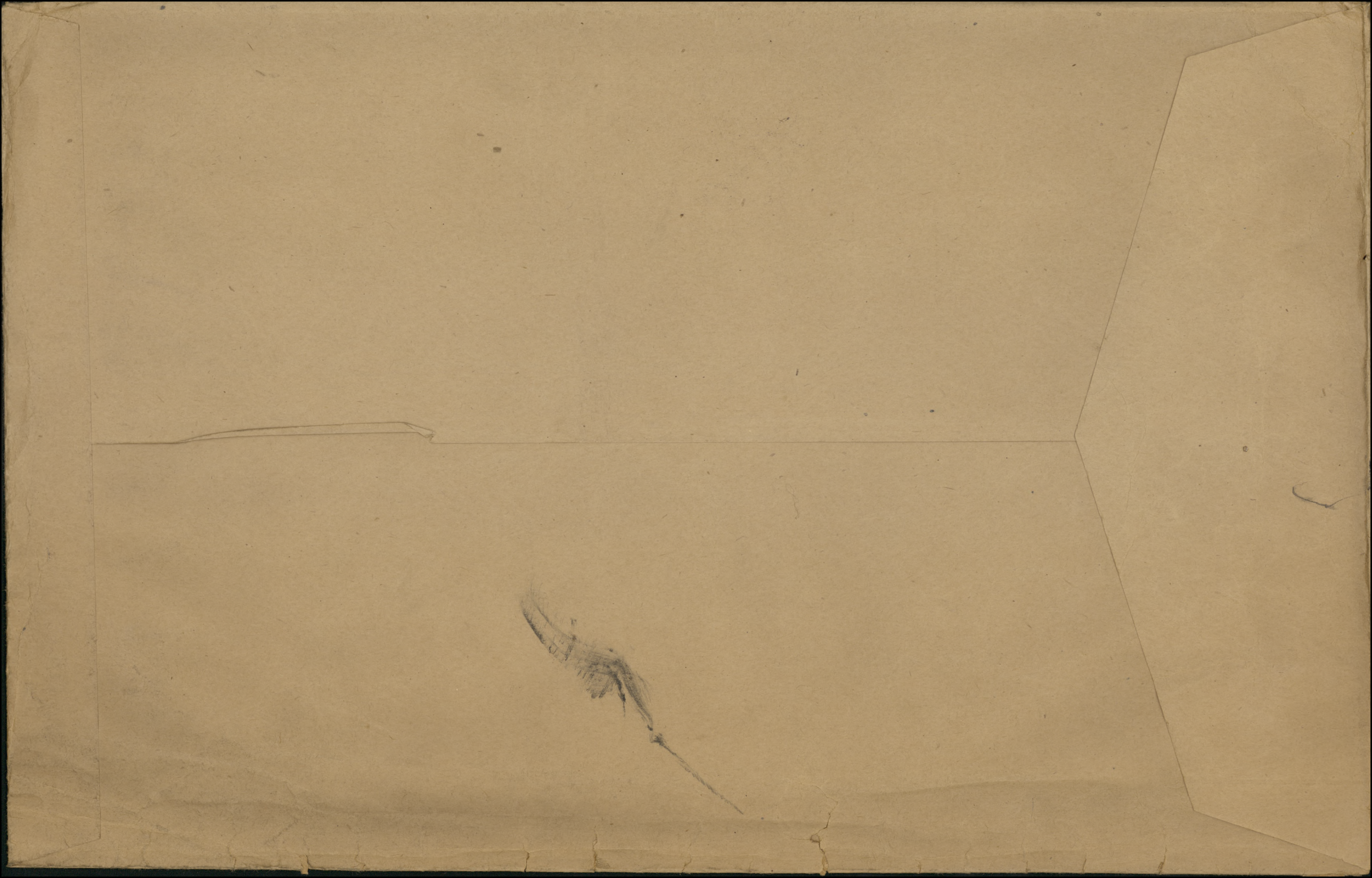
REGIMENTAL DOCUMENTS

NAME LAMPMAN, William Augustus REGT. NO. 844741 UNIT 14th Bn H. Q. FILE NO. a-11 16-4-1

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	M				DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	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)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob.
1	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)				05835	
	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
1	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	M. F. W. 192					
1	Casualty Card					
1	A.F.B. 122.					
1	Medical Card					
1	H & C.					
1	Identity Card					

(2)
1-10
25-11
27-11
2

W 2589
100M-11-18
1772-39-1377



Number. 844741 Rank. Pte.

Surname. LAMPMAN

Christian Name. William Augustus

Unit. 18th Bn Can Inf Theatre of War. France

Date of Service. 28-8-18

Remarks.

Latest Address ~~Wyoming~~ Ont.

857 Dall ave
Windsor
Ont

Roll No. B Page 5331

SEP 27 1921

SURNAME. Lampman. MM 22-31173 7-11-2-19.

CHRISTIAN NAMES William Agustus

REGL. No. 844741 RANK Pte

UNIT ~~149th~~ #12D. Batt

FORMER CORPS Nil

CARD No. 1

SO 8 Dec 19-3-19 Demob 18-3-19 with 1 Oak. 2 077 9

NEXT OF KIN.

NAMES IN FULL Lampman. H. W.

RELATIONSHIP TO SOLDIER Father

ADDRESS Wyoming Ont

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada Lampton Co. Ont. DATE Dec 27. 1894

PLACE OF ATTESTATION Forest. Ont. DATE Jan 25. 1916

R/C 1-3-19 272/8 Pte.

L. L. 90589.—M. & D. 6312. O/S 28-3-19.

M. F. W. 22. 100m.—1-16. H. Q. 1772-39-839.

From Halifax Per. S.S. "Southland" 28-3-17.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Farmer RELIGION Church of England.

DESCRIPTION.

APPARENT AGE 21 YEARS MONTHS

HEIGHT 5 FEET 10 INCHES

CHEST MEASUREMENT 39 1/2 INCHES EXPANSION 3 1/2 INCHES

COMPLEXION Brunette EYES Brown HAIR Brown

DISTINGUISHING MARKS Nil

MEDICAL EXAMINATION. PLACE Forest. Ont. DATE Jan 25. 1916

NAME Lampman Wm. Augustus REGT'L No. 844741

RANK AND CORPS Pte. 25th Can. Res. Bn. H. Q. FILE No. 649.

FOLLOWS No. 749 Bn

FOLLOWS No.

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
Nof K		Lampman F. W. (father) Wyoming Ont
409 29/1	19-10-18	Adm 53 Gen Gen H Boulogne Oct 12th
AK 93444	18-10-18	19.18 GSW R arm.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
58.	Mil Isol. Aldershot	24-6-17	N.Y.D. Q
69.	Discharged	28-7-17	~~N.Y.D. Q~~
A350	Con. Dpo. Boulogne	20-10-18	Diphtheria as per list 7.
A353½	" " Ecault.	22-10-18	" " "
A379½	2 Dis. Rein. Etaples	20-11-18	" " " L

No. 844741 RANK Pte. NAME Lampman Wm. Aupeetess

T.O.S. 25-1-16 UNIT 149th Battalion
D.O. 33, 2-2-16.

M.D. 1

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Jan. 25	1916 Jan. 31	W.		
Feb.		"		
Mar.		"		
Apr.		"		
May		"		
June		"		
July.		"		
Aug.		"		
Sept		"		
Oct		"		
Nov.		"		
Dec.		"		
1917	1917			
Jan.		—		
Feb.		"		
Mar.		"		

UNIT SAILED
MAR 28 1917

Form R. 149.

Name LAMPMAN William Augustus Rank PTE Reg. No. 844741

Unit 18 BN

Next of Kin CANADA

Date 1918		Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
17	10	S3 F.H. Boulogne	GSW R Arm		#344	#409	4857-6
20	10	1 C.D. Boulogne		"	#350.		5021-12
22	10	10 C.D. Calais		"	#353.		5095-3
20-11		Nize Reinf Etaples		"	a 379		5884-6

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

FORM R. 149.
7106—250m—7/2/17.

Lampman. William, Augustus, Pte. 844741.

Name *Rank* *Reg. No.*

Unit 25th, Res, Battalion. Canada.

Next of Kin

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
24-6-17.	Isol Aldershot.		N.Y.D.	58		
28-7-17	Discharged.		N.Y.D.Q.	69		
	Diagnosis for above Diphtheria			71		

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

*Name LAMPMAN, William Augustus Rank Pte. Regtl. No. # 844741

Fyle Depot IDD 10-L-328

Original unit 149th Bn. Present unit 18th Bn. X M. or S. Age 25 Religion E. Ref. H.Q. ID 30-L-857

Port, ship, and date of arrival St. John. Scotian. 1-3-19.

Next of kin Father. Mr. F. W. Lampman. Wyoming, Ontario

Address on leave

Address on discharge Wyoming, Ont.

Transportation issued Yes / No Date Character on discharge

Previous occupation Farmer Date and place of enlistment Forest, Ont. Jan. 25th, 1916.

Diagnosis NA. Date of Medical Boards London, Ont. 17-3-19.

Date. T.O.S.	Remarks	Pt. 2 Order No.
19-2-19	No. 1. D.D.	
3-3-19	Posted to Cas. Co. and granted furlough with subs. to	
	18-3-19	70
19-3-19	Discharged from H.M.S. On Demobilization (P.D.P.)	77

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

(over)

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192
150M—6-18.
1772-39-1243.

FORM D.M.S. 1300.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
Lampman	W A.	844741.

Rank	Unit	Co.	Troop	Batty.
Pte.	25th R. Bn.	W.O. 18.		

Hospital — Date of Admission

Transferred Isol. Aldershot — Hosp. 24. 6. 17
53. G.H. Blogne. — Hosp. 12. 10. 18
1 Conv. " — Hosp. 20. 10. 18
10 Conv. D. Ecault. — Hosp. 22. 10. 18

Diagnosis ~~N.Y.D. "Q"~~ Diphtheria. SB.

(1) Later Diagnosis (if changed) G.S.W. R. Arm. Lt.

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Disc. 28-7-17 Date
" 20. 11. 18

REMARKS

C/ 28. 6. 17 #38.
" 2-8-17 #49
Isolem
C.L. 8-8-17 #71

18. 10. 18 a 344-2.
25-10-18 a 350
29.10.18 a 353½
28. 11. 18 a 379

A.M.D. 2 Dept.
Boh. of D.G.M.S. O.M.F.C. London

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

B. B.

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. 844741 Rank Pte. Surname Lampman
(Given name in full) Willia, Augustus

Unit or Corps 1 D.D. Birthplace Wyoming, Ont.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 185 lbs. Height 6 ft. 1 in. Colour of Eyes Brown.

Nutrition Good

Pulse 70

Condition of arteries Good

Vision Rt 20x20 Left 20x20

Hearing (conversational voice) Rt. 21x ft.

Left. 21x ft.

Identification marks, scars, or deformities. (Give cause and date of origin.)
Small scars each border upper 1/3 right forearm. see sec. 3.

Opinion as to general health and physical condition Good

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 Yes. 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.

G.S.W. right forearm 10-10-18. through and through flesh wound only. No disability.
Diphtheria hospital Aldershot, England, 5 weeks. Good recovery. No disability due to service.

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

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 Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at London, Ont (Canada)

Date 12-3-19 Signed M.C. Morrison Lieut 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 W. Lampman

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

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

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

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(1) Name of Overseas Unit which Soldier joins ..... 149 O.S.Bn. C.E.F.

(2) Regimental Number 844741

(3) Full Name of Soldier ..... William Lampman.

(4) Place of Birth ..... Wyoming, Ont.

(5) Are you married, or not ? ..... No

(6) If married, state,
(a) Full name of your wife ..... Nil

(b) Present Postal Address ..... Nil

(7) Are you a widower ? ..... No

(8) Have you any children ? ..... No

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

Also their names and ages ..... Nil.

M. F. W. 67.

200M.—3-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ? Yes

If so, state name and address Mr. F.W. Lampman. Wyoming. Ont. CaN

(10) Is your Mother alive ? Yes

If so, state name and address Mrs. Lizzie Lampman. Wyoming. Ont. Can.

(11) If your Mother is a widow No

Are you her sole support, or not ? No

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

Nil

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

Nil

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance ? If not, this must be done.

Nil

(15) Are you insured ? No

If so, in what Company ? None

Have you made arrangements for payment of your Insurance premium Nil

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

W. Bradley

Officer Commanding.

Date May 22nd. 1916.

149th Battalion,
CANADIAN EXPEDITIONARY FORCE

25th RESERVE BATTALION C.E.F.

ORIGINAL

MEDICAL HISTORY SHEET. 844741

Surname Lamphran Christian Name William Augustus

Examined { on 28 day of January 1916
at Forest

Approved by J. P. Hulbert
Rank Surgeon M.C.

Birthplace { City or Town Wyoming
County Lambton

Apparent age 21

Trade or occupation Farmer

Height 5 Feet 10 Inches.

Weight 168 Lbs.

Chest measurement { Minimum 36 inches.
Maximum expansion 38 inches.

Physical development Excellent

Small-Pox Marks 0

Vaccination Marks { Arm Right. 0 Left. 2
Number 2

When Vaccinated last When child

(a) Marks indicating congenital peculiarities or previous disease 0

(b) Slight defects but not sufficient to cause rejection Right varicocele
Both eyes D 20/20

Date.	Fit or Unfit.	Examined for Re-engagement.
		M.C.
		M.C.
		M.C.
		M.C.
		M.C.
		M.C.
		M.C.

Date.	Result.	Vaccinations.
10.5.16	+	J.P.S. Mitchell M.C.
		M.C.
		M.C.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
~~T.A.B.~~ 2	15.9.16	J.P.S. M.C.
14.9.16		J.P.S. Mitchell M.C.
21.9.16		J.P.S. Mitchell M.C.
29.9.16		J.P.S. Mitchell M.C.
29.9.16	T.A.B. 3	W.H.C.

Enlisted on 28 day of January 1916 at Forest

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	149th	844741		28-1-16
Transferred to	25th RESERVE BATTALION C.E.F. 18th Bn			- 7. APR. 1917

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
London, Ont.	FEB 12 1917 191	On Attestation	considered fit
Maj. A. M. C. Pres.	Lt. A. Douglas	Capt. A. M. C.	J. K. McCare Capt. A. M. C.
W. Lindsay	4-2-19	vil	J. G. Graves Capt

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.

200M—11-15.
H. Q. 1772 39-4-9.

Surname Jamieson Christian Name William Augustus 84741

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.
Isolation Hpl. Aldershot		23	6	17	28	7	17	Diphtheria	36	Recovery	J. Brown Capt RAMC

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 1

NAME OF SOLDIER L.A.M.P.M.A.N. McWilliam Augustus

RANK Pte

REGIMENT 14 Q. Tra

No. 844741

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) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	1919 Mar. 17.	1		1/19						3	3 20.									R.J. McMillan Capt		Cur. 1.13.3 Ex. 15. slight pyo

M.F.B. 465.
150M.—6-18.
772-89-9-50.

CENTRAL HISTORY LIBRARY

Lampman, William Augustus

Fill[illegible] Only.—Unit, Number, Rank and [illegible]e.

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

Casualty Form—Active Service.

Unit, Regiment or Corps 149th C. E. F.

Regimental No. 844741 Rank Pte Name [redacted]

Enlisted (a) 25th Jan/16. C. E. F. Terms of Service (a) Duration of War & 1 year Service reckons from (a) 25-1-16.

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

Extended Re-engaged Qualification (b) Farmer.

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.
		Embarked Canada	Halifax	25.3.17	"Lapland"
		Debarked England	Liverpool	7.4.17	
		T.O.S. Segregating Camp	Bramshott	7.4.17	
		J. G. Henderson Lt for Capt. & Adj. For C.O. Segregation Camp, Bram.			
26-4-17	25th.Res	Taken on Strength.	Bramshott.	7-4-17	Part II D.O.111
[illegible]	25th Res	struck off strength on transfer to 4th Can Reserve Battalion.	Bramshott.	[illegible]	Part II D.O. No. 36. A. Maude Lieutenant. A/Adjutant. 25th Reserve Battalion.
15-2-18	C.C.4th. Can.Res. Res.Bn.	Taken on strength 4th.	Bramshott	15-2-18	Pt.2.Order No.39.

OVER

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

Report 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.
29-3-18	O.C. 4th Res. Bn.	Having proceeded overseas to 18th Battn. is S.C.S. 4th Res.Battn. ✓	Bramshott	28-3-18	Part 2 Order No. 75. J.A.B. J.A. Wylie ..... Lieut. A/Adjt. 4th Canadian Res.Battalion.
29-3-18	2 Can I.B. Depot	Arr from 4 Can Res Bn Eng & T.O.S. of 18 Can Bn	2 Can IBD ETAPLES	29.3.18	Nom Roll Pt II Ord 27 d-5.4.18
3-4-18	C.C.R.C.	Arr at Can.Corps Reinf. Camp		3.4.18	Nom Roll
20-4-18	18 Bn	Joined 18th Can Bn	In the Fld	13.4.18	AF.B.213
15-10-18	18 Bn	WOUNDED	In the Fld	10.10.18 ✓	Letter
12-10-18	53 Gen.	GSW. arm R. (M) Adm.	53 Gen.	12-10-18	W.3031 (No. W.8092)
20.10.18	do	do Trans.	No1 Con Depot	20-10-18	do (Ext L 7070)
20.10.18	1 Con Depot	do Admitted	No1 Con Depot	20-10-18	do (Ext L 9706)
22.10.18	do	do Trans.	No 10. Con Depot	22.10.18	do (Ext L 94234)
do	10 Conv. Dep.	GSW. arm L. Adm.	12 Convl. Dep.	22-10-18	do (Ext. L. 929
21.11.18	C.I.B.D.	Class A. Adm.	C.I.B.D.	21.11.18.	Nom Roll.
27.11.18	do	Left for CCRC.	Fries	27.11.18	" D 14179
do	C.C.R.C.	Trans. to Eng Arrived	C.C.R.C.	do	do (A 1868.)
9.1.19	C.I.B.D.	1/0 wout Reg. Depot.	Witley	11/19	Nom Roll.

CERTIFIED CORRECT. 24 APR. 1918 CAN. RECORDS LONDON.

Thos. B. Stephenson Lieut. for Lt.-Col., Canadian Section, G.H.Q.

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) *Substantative rank *Acting rank *[To be entered in pencil to facilitate alteration.]	(2) Regiment or Corps	(3) Regtl. No.
(4) Surname		
(5) Christian Names		
(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*)		

(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

(18) Demobilizer (*f*) (Place) (Signature of Posting Officer

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

(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.

844741 Pte Lampman W.A. Sheet 2.

(A) Report: Date.	(A) Report: From whom received	(B) Authority of Part II. of Orders	(C) 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.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
29-1-19	W.O.R.D.	D.O.24	T.O.S. and attached to ~~Dy.C.24~~ 4th Res Battn	Witley	8-1-19	
29-1-19	do	D.O.24	S.O.S. to 4th Res. Battn	do	28-1-19	Jno McClung Lieut. i/c Records. West Ont. Regtl. Depot.
1-2-19	O/C 4th Res	27	S.O.S. from Workd.	do	28-1-19	
~~10~~ 2-19	do	94	S.O.S. on transfer to M.D. Wing #1 Kinmel Park	do	9-2-19	F Stewart Marshall LIEUT. & ASST. ADJT. FOR O. C. 4TH CANADIAN RESERVE BATTALION.
9/2/19	4th Res		S.O.S. C.O.C. Kinmel Park for return to Canada. Part II Orders No. 43 C.O.C. Kinmel Park on embarking for Canada, Part II Order No. 43 A. E. Query Lt Commanding M.D. 1 Wing, Kinmel Park Camp.		19-2-19	
	for OC		Embarked S.S. Lapod Scotian		19.2.19	
			Disembarked St John		1 - MAR 1919	Geo Stuart Lt O.C. 1 DISTRICT DEPOT
FEB 19 1919	Troopships		Taken on strength No. 1 District Depot London	D.O. 69		
			Discharged			

Nothing to be written in this margin.

Lieut. Col. Commanding District Depot No. 1

LONDON, ONT.

March APR 19 1919

ON DEMOBILIZATION O.C. Discharge Section No. 1 D.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 844741 (Rank) PRIVATE

Name (in full) LAMPMAN, William Augustus enlisted in

the 149th BATTALION (C.O.M.F.)

CANADIAN EXPEDITIONARY FORCE at FOREST, ONT. on the TWENTY-FIFTH

day of JANUARY 19.

HE served in FRANCE (with 18th Battalion)

and is now discharged from the service by reason of

ON DEMOBILIZATION

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

Age	24	Marks or Scars	
Height	5' 10"	G.S.W. RIGHT ARM	
Complexion	BRUNETTE		
Eyes	BROWN		
Hair	BROWN		

Signature of Soldier

DISCHARGE SECTION
MAR 19 1919
No. 1 District Depot

Date of Discharge

Issuing Officer

CAPTAIN
Rank

Commanding District Depot No. 1 M.D.
Appointment

Signed at LONDON, ONT. this NINETEENTH day of MARCH 19

in Military District No. ONE

File Reference No. 1D-30-I-857
1DD-10-I-328

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. W. 39a.
250m.—6-18.
H. Q. 1772-39-882.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

.....

Name of Officer

.....

Rank

.....

Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.

Form R 122.
2353—100M—9-1-16

JM

Rank

Name LAMPMAN, William Augustus.

Reg'l No. 844741

Unit Dft. 149th Bn.

If in perm. Corps, What Unit?

Married or Single Single.

Place and Date of Enlistment Forest. 25th Jan 1916.

Place of Birth Wyoming, Canada.

Name and Address, Next-of-Kin Mr F.W.Lampman.
Wyoming, Ontario, Canada.

Relationship Father.

Assigned Pay Monthly $

Payable to

Relationship

Separation Allowance $

Payable to

Relationship

N/E. R.B. No. 6357
File R.L.
Category CAN.OR

Discharge, Date and Place

Reason

Character

H. W. & V., Ld.—9546-16.

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.
		ARRIVED IN ENGLAND 7 4 17 S.S.LAPLAND.			
20 4.17	25th, Bn	T O S from CANADA	b'shott	7_4 17,	PT2 O.C.III
25.6.17	"	Adm. Bshott. Mil. Hosp	"	23.6.17	Diphtheria Pte 177. C.L. 58
28.17	"	Dis. Mil. Isol. Hosp.	Ald'shot	28.7.17	CL69
15/2.18	25Res	S.O.S, To 4.ResBN.	Bshott	15.2.18	DO,3S&4ResDO39
29.8.18	4th, Res	Posted TO 18th. BN. C/S	BSHOTT	28.8.18,	PTII 75&18thBN 27d/5/4/18
		MM.			
18.10.18	WOR	WOUNDED	field Hs	12.10.18	CLA 344.
22-1-19	18th Bn.	S.O.S. to W.O. R.D.	" "	11-1-19	PCII 68 & WORD 240/29.1.19
30.1.19	WORD	SOS to 4 Res Bn	Witley	28.1.19	-25, 4th Res 27d/1-2-19

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.
10.2.19	4th Res Bn	S.O.S. to M.D.1. K.R.Rif	Pt Killeg	9.2.19	Pt 2 0.34. & M.D.1 K.R.R. 43 of 19/2/19
19.2.19	M.D.1. K.R.Rif	S.O.S. to C.E.F. Canada S.L. No 18	" Rhyl	19.2.19	" 43.

L-L.Job 5470—M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-819

Mrs

To Whom Elizabeth Lampman

Address Wyoming, Ont-

By Whom Assigned Lampman W A

Regtl. No. 844741

Rank Pte

Corps 149th Bn

Rate 15. APR 1 1917

PAYMENTS

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

CONSOLIDATED ACCOUNT 4

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Mrs Elizabeth Lampman
(Assignee)

L. L. Job 5470—Req. 6888.

Name of Soldier Lampman W A
844741. Pte. 149th Batt'n

15,

Remarks APR 1 1917

Month.	Year.	Cheque No.	Amt.	
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		L 6121	15	
May		~~X 9938~~	~~15~~	15 Cu X 9938 Can.
June		L 16845	15	B
July		923418	15	Cu
Aug.		T 31607	15	B
Sept.		L 37407	15	
Oct.		T 43358	15	
Nov.		W 48725	15	
Dec.		W 56372	15	135.
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

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.				

P. 559.

MARRIED OR SINGLE: Single

PLACE OF BIRTH: Wyoming. Ont.

NAME AND ADDRESS OF NEXT OF KIN: Mrs J. W. Lampman

Wyoming Ontario

RELATIONSHIP OF NEXT OF KIN: Father

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L. NO. 644741 RANK private NAME Lampman William Augustus

IF IN PERMT. CORPS WHAT UNIT — UNIT 14th Bn TRANSFERRED TO 25th Res DATE 8/4/14. AUTHORITY —

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO — DATE — AUTHORITY

PLACE OF ATTESTATION Forest. — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 25-1-16 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE 1-4-17

PAYABLE TO Mrs Elizabeth Lampman Wyoming Ontario. RELATIONSHIP Mother

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY ©	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	©	REMARKS
1917.														34 80	34 80															34 80		Nil				Bal from Canada
5/4 to 30/x.	28	1.10	25 30												25 30												15		15	40 10		✓			
May	31	-	34 10												34 10	86	30/4						24 33.				15	15.	39 48.	39 92.		✓			9/4666 20839. 25/4
June	30		33												33	189	15/5						9 43				15		36 90	35 82		✓			
																227	31/5						12 17												
July	31	-	34 10												34 10												15		15	54 92		✓			
Aug	31	-	34 10												34 10	303	15/6						9 73				15		24 73	64 29					
																576	3/8						9 73												
Sept	30		33												33	628	15/7						4 20				15		49 06	48 23					
																463	3/9						17 03												
			193 60											34 80	228 40								90 02				90	15	180 17						

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER-RED PAY	SER. ALLCE ENG.
Sept	Balance Forward	~~48 23~~							48 23	Nil	
Oct	31 PP	34 10		Can AR				15			
				AR 668 25 Res 13/9/17.	9 73						
				AR 420 " " 30/9/17	14 60						
		34 10			24 33			15	43 00		

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	Dr. 1	Dr. 2	Dr. 3	Dr. 4	BALANCE	DEFER-RED PAY	SER. ALLCE ENG.
Nov	30 PP	33 -		AR 823 31-10-17 25 Res	9 73				43		
				" 841 15-11-17 " "	9 73						
				" 735 15 12 17 "	9 73						
					29 19						

8HH741. Pte Lampman. W. A.

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
MONTH	PARTICULARS		CR. 1	CR. 2	PARTICULARS									DR. 1	DR. 2	DR. 3		DR. 4		BALANCE	DEFERRED PAY	OTHER ALLOWANCE												
														29 19						43														
Nov					Can AP											15																		
Dec	31	P.P.			3H 10				Can AP							15																		
1918					67 10				Q4005 25140 16/3/1				25 Red	4 16						30	46	75												
														33 35																				
Jan	31	P.P.			3H 10				Can AP							15																		
									Q4005 Q1456 24/7/17				✓ ✓	1 17																					
									AR 891 30-11-17				✓ ✓	9 73																					
									3W 941 21-12-17				✓ ✓	19 47							35	48												
					3H 10									30 37		15																		
Feb	28	RP			30 80				Can AP							15																		
									AR 1045 15-1-18				✓ ✓	12 17																					
									✓ 1109 31-1-18				✓	7 30																					
					30 80				✓ 1193 14-2-18				✓	7 30		15					24	51												
														26 77							34	10												
Mar	31	RP			3H 10				Can AP							15					58	61												
																					41	77												
									AR 1680 (H) 26-2-18				✓	7 30							16	84												
					3H 10				~ 2008 (30) 20-3-18				✓	19 47		15					16	84												
														26 77																				

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:- 1/4/17.		EFFECTIVE DATE:-	
AMOUNT:- 15-00		AMOUNT:-	

NAME:- LAMPMAN Wm Augustus

NUMBER:- 844741

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 Lampman (mother	
Wyoming Ont	
Stopped eff 1/3/19	

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- 149 Bn

DATE ACCOUNT FIRST OPENED:- 8.4.17.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			WORD.
	1-4-18	25-4-18	18 Bn
		15-4-19	Canada Sect

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
24/7/18		Gen chge	10				
5/11/19	8302	20 frs.	3 73				
11/11/19	1731	25 -	4 66				
20/11/19	4186	Wtley £2	9 93				
21/11/19		Can £24	116 80				
			135 01				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 -	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:- Transf. to Canada 7/3/19 NRB 2497 (Wtley) 1/2/19 Wtley MDI L.A.C.F. 16 2/7

1918 MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Mar 31	Bal B.F.								16 81		
April	Pte. Pay	33 -		C.A.P.				15			
				A.R. 93 9/4/18 2nd C.C.R.C.	4 46						
				A.R. 74 17/4/18 18th Bn.	3 57				26 81		
		33 -			8 03			15 00			
May	Pte. Pay	34 10		Can. A.P.				15 -			
				A.R. 140. 16/5/18 "	4 46				41 45		
June	Pte. Pay	34 10			4 46			15			
		33 -		Can. A.P.				15			
				A.R. 200 4/6/18 "	8 03						
				A.R. 253. 22/6/18 ✓	3 57				47 85		
July	Pte. Pay	33			11 60			15			
		34 10		Can. A.P.				15			
				A.R. 386. 9-7-18 ✓	4 46						
				✓ 502. 24-7-18 ✓	3 57				58 92		
Aug.	Pte. Pay	34 10			8 03			15			
		34 10		Can. A.P.				15			
				✓ 615 19-8-18 ✓	3 57				74 45		
Sept	P.P.	34 10			3 57			15			
		33		C.A.P.							
				A.R. 737 6-9-18 ✓	3 57				88 88		
				✓ 858 26-9-18 ✓	3 57				85 31		
		33			7 14			15			
Oct	✓	34 10		car				15	104 41		
		34 10						15			
Nov	✓	33		car				15	205 61		
				3386 15.11.18 Det Boulogne ✓	13 99				70 18		
Dec		34 10		3178 28.11.18 2 cases	3 73	✓					
				car				15			
				3770 10/12/18 ✓	3 73	✓					
Jan	-	34 10		4353 17.12.18 ✓	3 73	✓					
					25 18			15	135 43		
		101 20			25 18			45	135 43	a/c agreed £11.19	
									Balesfield		

NUMBER 844741 RANK NAME LAMPMAN Wm Augustus

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1919 Feby.				Balics. Issued.					135 43		
	P + A.	30 8.		C.A.P.				15			
				5302 5/1/19 1st CCRR.	3 73						
				1731 10.1.19. C.G.B.D.	4 66						
				CR. 12189 21/1/19.	116 80						
				4186 20/1/19 4th Res Mtd	9 73				163 1		
		30 80			134 92			15 -			
April				D.H.O.O.S 22/3/19. G.R.	10				162 1		
					10						
				S.S. Canada 18/3/19.							
				S/L 18. 4 Res.							

C R Carey
Cheques
1/2/19

150 93
135 0 0

This space to be for numbers

War Service Badge
Class A No. 82935 Issued

Proceedings on ~~Discharge~~.

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

No.	844741
Rank	PRIVATE
Surname	LAMPMAN,
Christian Name	William Augustus

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company)	149th Battalion (C.O.M.F.)
Date of Discharge	~~APR 1 9 1919~~ March 20 77 18/3/19
Place of Discharge	LONDON, ONT.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age	24 years ..... months.
Height	5 feet 10 inches.
Complexion	Brunette
Eyes	Brown
Hair	Brown
Trade	Farmer
Intended place of residence (To be given as fully as practicable.)	Wyoming, Ont.

Descriptive Marks

G.S.W. Right Arm

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

ON DEMOBILIZATION

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.

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

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

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

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.....

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).....

(Date).....

Commanding .....

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) LONDON, ONT. W. Lampman *(Signature of Soldier.)*

(Date) March APR 1 9 1919 *(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.

.....*(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) LONDON, ONT.

(Date) March APR 1 9 1919

(Signature) .....

Commanding District Depot No. 1

O.C. Discharge Section, No. 1 D.D. Lieut. Col.

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.)

H Lampman

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form	B. 263.
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a.
Copies of Convictions, by C. P.		in MS.
Med. Hist. Sheet,	Militia Form	B. 313
Medical Report for Invalid*	"	B. 227.
Statement of Man's Account on Transfer and Last Pay Certificate,	"	D. 877.

*Only if discharged "Medically unfit."

Attestation Paper,	Militia Form	B. 235.
Proceedings on Discharge	"	B. 218.

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(*a*) Proceedings on Discharge.

(*b*) Attestation.

(*c*) Medical History Sheet (in the event of such having been prepared.)

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.

10-LA-113 43

ACCTS. | PAYMASTER

M. OR S. 4203

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

REGT. No. 844741 RANK Pte NAME (IN FULL) LAMPMAN Wm. Augustus (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

Jul

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 149th Bn — IF IN P. F. WHAT UNIT? Same address Wyoming, Ont

PLACE OF ATTESTATION — TRANSFERRED TO #1 D.D. — DATE 19-2-19 — AUTHORITY D.070

DATE OF ATTESTATION 25-1-16 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY, $ 15.00 Pdto — DATE EFFECTIVE 31-3-19

PAYABLE TO Mrs. Elizabeth Lampman — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Wyoming Ont.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED London — PLACE — 19-3-19 — DATE — Demob — REASON — 2077 — AUTHORITY — IF ENTITLED TO POST DISCHARGE PAY yes

MONTH	1.00 PAY AND F. A. .10 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.	PARTICULARS OR REMARKS
Balance from previous account 28-2-19					16 21								15		4.87 5 30		5487	3866		Boat Train Cheque
4-3-19 to 19-2-19	191	1.10	2090	3500 1280		6870	aR347 19/3/19						3500			3866	7366	496		D.070 Subs 3-3-19 to 18-3-19 35.00 Clothing allce
183 Days	19/3/19		420		420	70									70			350		W R Mortimore Major #12-250
	19/4/19		350			65 04									496			345 04		19/4/19. 71219
						70												280		19/5/19. 68174
						70												210		19/6/19 69374
						70												140		11/7/19. 10617
						70												70		17/8/19 119028
			420			415 04									4 96 70	420		350		Capt.

—WAR SERVICE GRATUITY—

60m.-11-18 L. L. 52777. M. & D. 9585.

MONTH	PAY AND F. A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3										DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

L

~~1699~~

Date of Assignment

~~1917~~ Apr. 1/1917

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 844741

Rank Pte. Promoted Reverted Discharge

Soldier's Name W. A. Lampman

Battalion #49 Battn.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Elizabeth Lampman

Address Wyoming Ont.

Change of Address

1

2

3

4

Date 1917.	Cheque No.	Amount S/A	Amount A/P	Total
Dec. 31.			135	135
Jany	M 70418		15	15
Febr	A 69796		15	15
Mar	K 95260		15	15
Apr	K 13245		15	15
May	L 13437		15	15
June	A 19137		15	15
July	P 40333		15	15
Aug	J 34886		15	15
Sept	K 45091		15	15
Oct	K 56150		15	15
Nov	E 60748		15	15
Dec	O 64391		15	15
Jan	K 76203		15	15
Feb	K 78796		15	15
				345
				~~360~~
Mch	G 90667			~~28~~ 31-3-19

REMARKS

Fyle 105-69-W-17

Dvsdray L. H. 69318 Sent 4/3/19. H.D.

A/c Closed

Ret'd per Sedan

Date 3/3/19 F.X. 4/3/19

Clerk H Davidson

Transf to M. D. #1

M. F. W. 128
400M.—6-17—172-39-1141
L. L. 22320—M. & D. 7393.

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

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. 128
400M.—6-17—177-39-1141
L. L. 22320—M. & D. 7193.