Original 931097

# ATTESTATION PAPER.

No. 2 CONSTRUCTION, R.E. C.E.F.

No.

Folio.

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CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

| | |
|---|---|
| 1. What is your surname? | Samson |
| 1a. What are your Christian names? | Daniel |
| 1b. What is your present address? | Beechville N.S. |
| 2. In what Town, Township or Parish, and in what Country were you born? | Windsor Nova Scotia |
| 3. What is the name of your next-of kin? | Mrs. Elizabeth Dias Lambert |
| 4. What is the address of your next-of-kin? | Beechville N.S. |
| 4a. What is the relationship of your next-of-kin? | Mother |
| 5. What is the date of your birth? | January 9th 1896 |
| 6. What is your Trade or Calling? | Labourer |
| 7. Are you married? | Single |
| 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, Daniel Samson × his mark, 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.

Daniel × his mark Samson (Signature of Recruit)

Date August 7th 1916. Robt A. Boehk Sergt (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Daniel Samson × his Mark, 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.

Daniel × his Mark Samson (Signature of Recruit)

Date August 7th 1916. Robt A. Boehk Sergt (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 Halifax N.S. this 7 day of Sept 1916

(Signature of Justice)

A Justice of the peace in and for the City & County of Halifax, N.S.

M. F. W. 23.
600M.—2-16.
H. Q. 1772-39-841.

# Description of Daniel Samson on Enlistment.

Apparent Age 21 years 7 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5' ft 3½ ins.

Chest measurement.
- Girth when fully expanded 34 ins.
- Range of expansion 3 ins.

Complexion Dark

Eyes Brown

Hair Black

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

COPIED Autres COPIE

Weight 118 Lbs.

## 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 August 7th 1916 B Johnson

Place Halifax Capt a m c
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.

Daniel Samson 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.

AUG 10 1916

D. A. Sutherland (Signature of Officer)
LT. COL.
O. Comd'g No. 2 Construction Battalion, C. E. F.

Date Aug 9 1916.

SAMPSON Daniel P6.931097

702 Conl Bn. H

Reads.

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1 UNIT INDEX CARD (M. F. W. 71 OR 192)

1 C.7.W.3997
1 R.M.S. 1375
1 Pay card

O. H. M. S.

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02614

B07
#8624

M. F. B. 270.
850M-5-13
H. Q. 1772-39-67

| 931097 | SAMPSON | Daniel |
|---|---|---|
| **I.D. number**<br>**No. d'identification** | **Surname**<br>**Nom de famille** | **Given names**<br>**Prénoms** |

# PERSONNEL RECORDS CENTRE
# CENTRE DES DOCUMENTS DU PERSONNEL

## PERSONNEL RECORDS ENVELOPE
## ENVELOPPE DES DOSSIERS DU PERSONNEL

**Location**
**Lieu** 8624

02614

**"CONTENTS CONFIDENTIAL"**
**"CONTENU CONFIDENTIEL"**

ARC-1048 (r. 87/05)

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Number [redacted] 931097 Rank Pte.

Surname SAMPSON

Christian Name Daniel

Units 2nd. Can. Iconst. Bn. Theatre of War France

Date of Service 17. 5. 17.

Remarks Sent to

Latest Address 82 Water St., Halifax, N.S.

Roll No. B Page 22886.

5m-7-23. (M95).

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COPIE

DESP DEC 13 1923
REGN. NO. 219

No. 931097 RANK Pte NAME Sampson Daniel

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T. [redacted] 7-8-16
D.O.S. 7-8-16

UNIT No 2 Construction Battalion

M. D. 6

| PAID FROM | PAID TO | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|---|---|---|---|---|
| | | | PARTICULARS | AUTHORITY |
| 1916 | 1916 | | | |
| Aug. 7 | Aug 31 | m- | | |
| | Sept. | m | | |
| | Oct. | m | | |
| | Nov. | ✓ | Forf. 5 days pay a.w.l. | D.O. 86 24-11-16. |
| | Dec | ✓ | a.w.l. 168 hrs det. Forf. 16 days pay | D.O. 97 9-12-16 |
| 1917 | Jan 1917 | ✓ | | |
| | Feb. | m | | |
| | Mar. | m | | |

*Name [redacted] Sampson, R. COPIED Rank Pte. Regtl. No. 931097

Fyle Depot 74 S-782

Original unit ASSC Present unit 622 M. or S. Age 1895 Religion [illegible] Ref. H.Q.

Port, ship and date of arrival Halifax NS Empress of Britain 22-1-19

Next of kin Mrs. Elizabeth Sampson (mother)

Address on leave Beech Hill, Hfx. Co. NS

Address on discharge

Transportation issued Yes / No Date Character on discharge

Previous occupation Labourer Date and place of enlistment Halifax Aug 7/16

Diagnosis Date of Medical Boards Hfx NS Aug 7/16

| Date. | Remarks. | Pt. 2 Order No. |
|---|---|---|
| 29-1-19 | S.W.S. from 12-1-19. Posted to Cas. Co. | 29 |
| 4-3-19 | DISCHARGED at Halifax, N. S | 66 |

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

(over)

| Date | Remarks | Pur. 2 Order No. |
| --- | --- | --- |
| | | |
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| | | |

M. F. W. 192
150m.—5-18
1772-39-1243

# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

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**This is to Certify** that No. 931097 (Rank) Private

Name (in full) Daniel Samson enlisted in

the No. 2 Construction Bn

CANADIAN EXPEDITIONARY FORCE at Halifax NS on the 7th

day of August 1916

HE served in France

and is now discharged from the service by reason of Demobilization

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

Age 24 years 1 month

Height 5 feet 6 inches

Complexion Dark

Eyes Brown

Hair Black

Marks or Scars Nil

D Samson
Signature of Soldier

C W Macaulay CAPTAIN.
Issuing Officer
O. C. DISCHARGE SECTION No. 6 DISTRICT DEPOT.
Rank

Appointment

Date of Discharge March 4, 1919

Signed at Halifax NS this 12th day of February 1919

in Military District No. 6

File Reference No.

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
200m.—2-18.
H.Q. 1772-39-882

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# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

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

Unit .....

Address on Discharge Waverley N.S

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.

Uniform not to be worn after Date of Discharge, unless authority has first been obtained from G.O.C. District.

D.M.S. 1375.

# Medical Examination upon leaving the Service

## of an Officer fit for general service or a Soldier fit for duty.

☛ *Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.*

Rank Pte Name Sampson Surname Daniel

Unit or Corps 17th Reserve. (If a soldier) Regtl. No. 931097.

Born at Windsor, Nova Scotia on, date Jany Ninth 1895.

Signature (for identification) D Sampson

The examination is to be made jointly by two Medical Officers.

**1. PHYSIQUE**—Any deformity, maiming or lameness? If so, describe.

Weight 140 lbs.

Height 5 ft. 7 ins.

no

**2. NUTRITION AND DIATHESIS?**

Fair

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

**3. NERVOUS SYSTEM?**

no

**4. RESPIRATORY SYSTEM.**

no

**5. HEART?**

Abnormal Sounds? no

Abnormal Size? no

Pulse Rate? 70 Intermittence or irregularity? no

**6. ARTERIES.**—Any hardening?

no

**7. DIGESTIVE SYSTEM?**

no

**8. GENITO-URINARY SYSTEM?**

Urinalysis—s.g.? 1012 Reaction? acid Albumen? nil Sugar? nil

**9. SKIN, MIDDLE EAR, EYE** or any other part?

no

**10.** Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

no

**11.** Opinion as to the health and physical condition of the one examined?

Fair

Examined at Kinmel Park

Date 2-1-19

Signed [illegible] M.O.

Signed [illegible] M.O.

☛ *If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.*

# 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. 931.a.9.7. Rank Pte. Surname Sampson.
(Given name in full)
Daniel Sampson.
Unit or Corps D. D. 6. Birthplace Windsor Nova Scotia N.S.

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

1. GENERAL DESCRIPTION:

Physique Good. Weight 140. lbs. Height 5. ft. 6. in. Colour of Eyes Brown.

Nutrition Good.

Pulse 85.

Condition of arteries Good.

Vision Rt. Good. Left Good.

Hearing (conversational voice) Rt. 15. ft.

Left 15. ft.

Identification marks, scars, or deformities. (Give cause and date of origin).

Nil.

Opinion as to general health and physical condition.....

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.

Waverly.
N.S.

(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 ...Halifax.....(Canada)

Date ...10-2-19..... Signed ...D A McAuley.....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 ...D Samson.....

(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.)

[OVER]

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

C.A.D.C. 5009 A

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) SAMSON D

REGIMENT No 2 Constr Bttn RANK Pte No. 931097

Date of Examination in England 31/12/18 Date of Examination in France

## PRESENT DENTAL REQUIREMENTS

1. FILLINGS 3, 4, 12, 15,
2. EXTRACTIONS
3. CROWNS 7.
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 ~~No.~~
- (*c*) In France ~~—~~ yes

KINMEL PARK, NORTH WALES.

*Signature of Dental Officer* J. S. Somerville Capt

ORIGINAL 931097

# MEDICAL HISTORY SHEET

Surname Samson Christian Name Daniel

Examined { on 7th day of August 1916
at Halifax N.S.

Birthplace { City or Town Windsor
County Nova Scotia

Apparent age 21 years

Trade or occupation Labourer

Height 5' feet 5' 1/2 Inches

Weight 118 lbs.

Chest measurement { Minimum 31 inches
Maximum expansion 34 inches

Physical development Good

Small-pox Marks Nil

Vaccination Marks { Arm ~~Right~~ Left
Number

When Vaccinated last

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by B D Johnson
Capt.
Rank M.O.

| Date | Fit or Unfit | Examined for Re-Engagement | |
|---|---|---|---|
| | | | M.O. |
| | | | M.O. |
| | | | M.O. |
| | | | M.O. |
| | | | M.O. |
| | | | M.O. |
| | | | M.O. |

| Date | Result | Vaccinations | |
|---|---|---|---|
| 8/3/17 | | Dan Murray | M.O. |
| | | | M.O. |
| | | | M.O. |

| Date | Result | Anti-Typhoid Inoculations, Etc. | |
|---|---|---|---|
| 25/10/16 | L & F.R. | H.V. Kent Major AMS | M.O. |
| 31/10/16 | L. & F.R. | H.V. Kent Major AMS | M.O. |
| 7/11/16 | L & F.R. | H.V. Kent Major AMS | M.O. |

Enlisted on 7 day of August 1916 at Halifax N.S.

| | Corps | Regt'l Number | Habits | Date |
|---|---|---|---|---|
| Joined on enlistment | | | | |
| No. 2 CONSTRUCTION, R.E. C.E.F. | | 931097 | | 8/7/16 |
| Transferred to | | | | |

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD

| Station | Date | Disease | Result |
|---|---|---|---|
| | | | |

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

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname Samson Christian Name Daniel

| STATION | Date of Arrival at the Station | Dates of Admission into Hospital | | | Dates of Discharge from Hospital | | | 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 |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Day | Month | Year | Day | Month | Year | | | | |

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M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-9

Fill in only.—Unit, Number, Rank and Name.

# Casualty Form—Active Service.

Unit, Regiment or Corps .....

Regimental No. ~~931077~~ 931077 Rank Pte C. E. F. Name Sampson D.

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 | | | | |
| 12.1.19 | Overseas T/O/S. No. 6 D.D. Hlfx. Cosy. Co. | 22.1.19 D029 | | | A.M. Ferguson Lieut ASST. ADJT. No. 6 DISTRICT DEPOT |
| 4-3-19 | DISCHARGED at Halifax, N. S | D060 | | | C.W. MacAlmon CAPTAIN. O. C. DISCHARGE SECTION No. 6 DISTRICT DEPOT. |

(*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 | | 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 | | | | |
| | | | | | |

Fill in Only.—Unit, Number, Rank and Name.

M. F. W. 54. (A. F. [illegible])
250M.—1-16.
H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, ~~Regiment or Corps~~ No 2 Construction Batt. C.E.F.

Regimental No. 931097 Rank Pte Name Daniel Samson

Enlisted (a) 7-8-16 Terms of Service (a) Period of War & 6 months Service reckons from (a) 7-8-16

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)

| 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. |
|---|---|---|---|---|---|
| | O.C. No 2 Constn Batt | Embarked Canada | Halifax N.S. | 25/3/17 | |
| | | Disembarked, England | Liverpool | 7/4/17 | |
| | | Proceeded Overseas | Seaford | | Rt I.D.O. # |
| | | | | | A. B. Macdeane Captain. Adjutant, No. 2 Construction Battn, C.E.F. |
| | | Landed in France 17-5-17 N.R | | | |
| 21.5.17. | O.C. | Forfeits 5 days pay for Making avvy with Iron Rations | Fld. | 21.5.17. | Brobq Pt 2. 120. 26/7/17. |
| 6.7.17. | O.C. | Sentenced 10 days F.P. #2 Refusing to obey an order | Fld | 5/7/17 | Brobq. Pt II O 122 7/8/17 |

CERTIFIED COPY
6 JUN. 1917
CAN. RECORDS, LONDON.

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

[P.T.O.

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| 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 | | | | |
| 2·8·17 | O.C. | 3 Days F.P. No 2. for Absent from Parade | Field | 1-8-17 | B2069 P131 13/10/17 |
| 18/10/17 | OC | 15 days F.P. No 2. for (1) When on a/s. Neglecting to obey an order (2) work. when ordered to do so by an officer) (2) Breaking arrest | | 11/10/17 | B 2069. P 2/3 136. d/- 25 10/17 |
| 5/1/18 | OC. | att to No 1 Dist & T Corps. | | 30/12/17 | B 71 3. |
| 12-9-18 | OC 38 Coy CMC. | 10 days FP No 2. 5-9-18 for Illtreating horses, the property of the public. | | 4-9-18 | Proceedings Dated 5 Sept 1918 |
| 19-9-18 | OC 38 Coy CMC. | 10 days FP No 2. 17-9-18 for illtreating horses, the property of the public. | | 17-9-18 | Proceedings dated 5 Sept 1918 |
| 11 12/18 | Mail | Trans to Emp Pioneers to N.S. Reg-Depot | Bramshott | 14 12/18 | K R 3464. |
| 17.12.18. | N.S.R.D. | T.O.S and attd 2nd B.B.D. for Quarters & Rations | Bishott | 14.12.18 | D.O. 305 |
| N S R D | ON COMMAND TO | D.O. Kinmel Park Rhyl | BRAMSHOTT | N.S.R.D. 31/12/18 PART II D.O. | 24 12/18 |

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

L.A. Hewett LIEUT.
OFFICER i/c RECORDS,
NOVA SCOTIA REGTL. DEPOT.

Form R 122.
2353—100M—9-1-16

LTR

Rank

Name SAMSON, Daniel

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Reg'l No. 931097

Unit No.2.Const. Bn.

If in perm. Corps, What Unit?

Married or Single Single

Place and Date of Enlistment Halifax,N.S. August 7th, 1916.

Place of Birth Windsor.N.S.

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

Beechville, N.S.

Relationship Mother.

Assigned Pay Monthly $

Payable to

Relationship

N/E. R.B. No. 6734
File R.L.
Category
OR CAN

Separation Allowance $

Payable to

Relationship

Discharge, Date and Place

Reason

Character

H. W. & V., Ld.—9546-16.

A.F.B. 103 CHECKED 30 MAR 17

| 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 SS "Scotland" | | 7-4-17. | A.F.B. 103 CHECKED 30 MAR 17 Arrived |
| 14.6.17 | C.R.O. 2nd Const. Bn. | Arrived in France | Field | 17.5.17 | Pte II ≈ 116 |
| 16.12.18 | N.S.R.D. | TOS from 2nd CCC. | Ste B'Shott | 14.12.18 | 10305-471 D/ 19.12.18 2nd CCC. |
| 27-12-18 | N.S.R.D. | O/C to 6-D-D Rhyl | — | 27.12.18 | -313 |
| 25.1.19 | N.S.R.D. | Leave O/C 6 Rhyl to Report TOS & 6.D.D. Canada. | | 12.1.19 | -18. |

| Re[illegible] | | Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case. | Place. | Date. | REMARKS Taken from Official Documents. | |
|---|---|---|---|---|---|---|
| Date. | From whom received. | | | | | |
| | | | | | | |

COPIED Archives COPIE

M.F.W. 44.
1188 (D.P.) 250M.-12-18.
1772-39-903.

## CANADIAN EXPEDITIONARY FORCE.

# LAST PAY CERTIFICATE

Regimental No. 931097 Rank Pte. Name Sampson, D.
(Surname first)

Unit N.S.R.D. who was* Discharged

On 3-3-19 191..., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-3-19 to 3-3-19 191... the inclusive date of transfer or discharge.

| | Dr. | Cr. |
|---|---|---|
| Bal. Dr. or Cr. from prev. month | | 60 70 |
| Regimental Pay 3 days at $ 1 c | | 3 00 |
| Field Allowance 3 days at $ c 10 | | 30 |
| Separation Allowance Nil. | | |
| Clothing Allowance $ 35.00 | | 35 00 |
| Post Discharge Pay W.S.C. $ 70.00 | 70 00 | |
| *Other Credits | | |
| | | |
| Advances $ 99.00 | 99 00 | |
| Separation Allowance and Assigned Pay Cheque No. | | |
| *Other Charges | | |
| | | |
| Balance on transfer or on discharge, cheque No. Debit. | | 70 00 |
| Total | 169 00 | 169 00 |

*Give particulars.

A monthly stoppage of $ 20.00 (†) has (‡) been paid on account of Assigned Pay for the month of Feb. 191.9. and Separation Allce. for month of 191... (to) Assignee Mrs. E. Sampson.

(Address) Beach Hill, Hfx. Co., N.S.

(†) Insert amount to be assigned, whether it has been paid or not. (‡) Insert "not" if amount has not been paid for period of account.

Checked: A.A.C.

ON TRANSFER OF AN OFFICER.

Outfit Allowance of $ has been paid by Paymaster, Military District No.

REMARKS:—

State (1) date of enlistment married or single Single.

(2) Separation Allowance, entitled or not No. (3) Reason for discharge Demob.

(4) Authority for discharge or transfer D.O. 60

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date 3-3-19

Place Halifax, N.S.

CAPTAIN,
PAYMASTER, NO. 6 DISTRICT DEPOT.
*Paymaster.*

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.
(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.
(C) For purpose of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificates will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

## CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

| Date | Place | Cheque No. A.R. No. or Other Particulars. | AMOUNT | | | | Signature of Officer Making Payment. |
|---|---|---|---|---|---|---|---|
| | | | Dr. | | Cr. | | |
| ..... | ..... | ..... | ..... | .... | ..... | .... | ..... |
| ..... | ..... | ..... | ..... | .... | ..... | .... | ..... |
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To be made out in duplicate.

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.

---

(1) Name of Overseas Unit which Soldier joins No 2 Construction Batt.

(2) Regimental Number 931097

(3) Full Name of Soldier Daniel Samson

(4) Place of Birth Beechville N. S.

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

(6) If married, state,
(a) Full name of your wife No.

(b) Present Postal Address ~~Beechville N. S.~~

(7) Are you a widower ? no

(8) Have you any children ? no

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

200M.—3-16.
1772 39-954.

(SEE OTHER SIDE.)

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(9) Is your Father alive? ~~W. Joseph Samson~~

If so, state name and address ~~Window Plains~~

(10) Is your Mother alive? yes. ~~Lambert~~

If so, state name and address Elizebeth ~~Samson~~ Beechville N.S.

Father and mother were not married W.D.

(11) If your Mother is a widow No

Are you her sole support, or not? Yes

(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.

X

(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.

~~Mother~~

Mrs Elizebeth Dixon

(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.

(15) Are you insured? yes.

If so, in what Company? London Life Co.

Have you made arrangements for payment of your Insurance premium No

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

C. H. Reis Capt
*for Officer Commanding.*

Date OCT 23 1916

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 Sampson

Address Beach Hill . N S

By Whom Assigned Sampson Daniel

Regtl. No. 931097

Rank Pte

Corps 2.. Can Battn

Rate 20. APR 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 3 ACCOUNT

P. 550

MARRIED OR SINGLE: S.

PLACE OF BIRTH: Windsor N.S.

NAME AND ADDRESS OF NEXT OF KIN: Mrs. Elizabeth Lambert Beechville N.S.

RELATIONSHIP OF NEXT OF KIN: Mother.

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. 93097 RANK — NAME Sampson Daniel

IF IN PERMT. CORPS, WHAT UNIT — UNIT 2nd Con. Bn. — TRANSFERRED TO — DATE — AUTHORITY

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO — DATE — AUTHORITY

PLACE OF ATTESTATION Halifax N.S. — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION Aug 7th 1916 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE 1.4.17.

PAYABLE TO Mrs. Elizabeth Sampson. Beach Hill N.S. 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 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Apr. | 1/30 | 30 | 1/10 | 32 | 00 | | | | | | | | | | 33 00 | | | | | | | | | | | | | | | | | | | | Bal. from Canada. |
| MAY | 1/31 | 31 | 1/10 | 34 | 10 | | | | | | | | | | 34 10 | 36 | 1/5 | | | | | | | | | | | | | | | | | | |
| June | 1/30 | 30 | - | 33 | 00 | | | | | | | | | | 33 00 | 9 | 19/4 | | | | | | | | | | | | | | | | | | |
| July | 1/31 | 31 | - | 34 | 10 | | | | | | | | | | 34 10 | 64 | 4/5. | | | | | | | | | | | | | | | | | | |
| Aug | - | - | - | 34 | 10 | | | | | | | | | | 34 10 | | | | | | | | | | | | | | | | | | | | |
| Sept | 1/30 | 30 | - | 33 | - | | | | | | | | | | 33 - | | | | | | | | | | | | | | | | | | | | |
| | | | | 201 | 30 | | | | | | | | | | 201 30 | | | | | | | | | | | | | | | | | | | | |

| MONTH | PARTICULARS | CR. 1 | CR. 2 | PARTICULARS | DR. 1 | DR. 2 | DR. 3 | DR. 4 | BALANCE | DEFERRED PAY | SL. ALLCE. ENG. |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | 67 | 30/5 |
| | | | | | | | | | | 134 | 11/6 |
| | | | | | | | | | | 202 | 25/6 |
| | | | | | | | | | | 305 | 26/7 |
| Sep | Bal | ~~35 73~~ 36 | | | | | | | 35 73 | | |
| Oct | P.P. | 34 10 | | Sta 3 do FP 2. 11/8/17. DO 181. 13/10/17 | | 3 30 | - 20 | | | | |
| | | | | AR 579. 27/8/17. 2 Constbl 2 att C 7 E. | 3 57 | | | | | | |
| | | | | " 628. 11/9/17 - - - - | 3 57 | | | | | | |
| | | | | " 468 13/8/17 " " " " | 3 57 | | | | | | |
| | | | | Sta 15 do FP 2. 11/10/17 DO 136 25/10/17 | | 16 50 | | | 19 32 | | |
| | | 34 10 | | | 10 71 | 19 80 | | 20 | | | |

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| 4 87 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4 86 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4 86 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|

TE 931 097. Sampson. D

20.00

| 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 | | | | | | | | | | | | | | | | | |
| | old Bal. | | | | | | | | | | | | | | | | | 19 | 32 | | | | | | | | | | | | | | | | |
| Nov | P.P. | | | | 33 | - | | | | | | | | | | | 20 | | | | | | | | | | | | | | | | | | |
| | | | | | | | AR. 528. 25 9/17. C.F.C. | | | | | | | 3 | 57 | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | - 980. 25 10/17 - | | | | | | | 3 | 57 | | | | | | | | | | | | | | | | | | | | | |
| DEC | - - | | | | 34 | 10 | - 1093. 10 11/17 - | | | | | | | 3 | 57 | | | | | | | | | 20 | | | | | | | | | | | | |
| | | | | | 67 | 10 | | | | | | | | 10 | 71 | | | | | | | | | 40 | | | | | | | | | | | |
| JAN | 1918 P.P. | | | | 34 | 10 | | | | | | | | | | | | | | | | | | 20 | | | | | | | | | | | |
| | | | | | | | - 1261. 23 11/17. 2nd Coupon Bd - | | | | | | | 12 | 49 | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | - 15997. 5 1/18 - - | | | | | | | 2 | - | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | - 4435 - 21 12/17 - - - | | | | | | | 7 | 14 | | | | | | | | | | | | | | | | | | | | | |
| | | | | | 34 | 10 | | | | | | | | 21 | 63 | | | | | | | | | 20 | | | | | | | | 28 | 18 | | |
| FEB | .. | | | | 30 | 80 | Assigned Pay | | | | | | | | | | | | | | | | | 20 | | | | | | | | | | | |
| | | | | | | | - 2035. 5 1/18 2 Coupons att C.F.C. | | | | | | | 3 | 57 | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | - 2196. 2 1/18 - - - | | | | | | | 3 | 57 | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | - 2388. 5/7/18. #1 " | | | | | | | 3 | 57 | | | | | | | | | | | | | | | | | | | 28 | 27 | | |
| | | | | | | | | | | | | | | 10 | 71 | | | | | | | | | | | | | | | | | | | | |
| MAR 1918 | | | | | 34 | 10 | Ass Pay | | | | | | | | | | | | | | | | | 20 | | | | | | | | | | | |
| | | | | | | | AR 2626. 20/2. #1 C.F.C. | | | | | | | 3 | 57 | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | " 2884 7 3/18 - | | | | | | | 3 | 57 | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | " 3080. 19 3/18 - | | | | | | | 3 | 57 | | | | | | | | | | | | | | | | | | | | | |
| | | | | | 34 | 10 | | | | | | | | 10 | 71 | | | | | | | | | 20 | | | | | | | | 31 | 66 | | |

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable

| ASSIGNED PAY * ~~ENGLAND or~~ CANADA. | SEPARATION ALLOWANCE. * ENGLAND or CANADA. |
|---|---|
| EFFECTIVE DATE:- 1 APR 1917 | EFFECTIVE DATE:- |
| AMOUNT:- 20oo | AMOUNT:- |

NAME:- SAMRSON Daniel E

NUMBER:- 931097.

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 Sampson mother
Beach Hill Wp.

Stopped 1/1/9

Nil 17/1/19
2 6 6 60

PARTICULARS OF RANK OR APPOINTMENT

| AUTHORITY | DATE EFFECTIVE | RANK OR APPOINTMENT |
|---|---|---|
| | | Pte |
| | | |
| | | |
| | | |

UNIT AND TRANSFERS

ORIGINAL UNIT:- 2 Construction Bn

DATE ACCOUNT FIRST OPENED:- 1 APR 1917

| AUTHORITY | DATE EFFECTIVE | DATE LEDGER SHEET T'SF'D | UNIT TRANSFERRED TO |
|---|---|---|---|
| 21. 6. | | 28/2/19 | Canada Section |
| | | | |
| | | | |
| | | | |

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 |
|---|---|---|---|---|---|---|---|
| ~~9/12 675~~ | | ~~2 C~~ | ~~4 66~~ | | | | |
| ~~18/12 790~~ | | ~~6 Rec~~ | ~~9 73~~ | | | | |
| | | | 14 39 | | | | |

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE Date to Jan 31/19 NR 161 7/19 2 6 6 60. Fed. Bal 68.64 LPC. 54.25

| MONTH 1918 | PARTICULARS | CR 1 | CR 2 | PARTICULARS | DR. 1 | DR 2 | DR. 3 | QR. 4. | BALANCE | DEFERRED | SEPARATION |
|---|---|---|---|---|---|---|---|---|---|---|---|
| MAR | Bal Ford | | | | | | | | 31 66 | | |
| Apl | P. Pay | 33 - | | C. A. P. | | | | 20 - | | | |
| | | | | AR 130 6/4 C 7 C 21 | 357 | | | | | | |
| | | | | AR 312 20/4 -"- | 357 | | | | 37 52 | | |
| | | 33. | | | 714 | | | 20. | | | |
| May | P. P. | 34 10 | | C. A. P. | | | | 20 = | | | |
| | | | | AR 507 7/5 C 7 C 1 | 268 | | | | | | |
| | | | | " 735 22/5 -"- | 446 | | | | | | |
| | | 34 10 | | | 714 | | | 20 - | 44 48 | | |
| June | P. P. | 33 - | | C. A. P. | | | | 20 - | | | |
| | | | | AR 922. 7/6 C 4 6 1 | 357 | | | | | | |
| | | | | AR 1118 22/6 ✓ | 357 | | | | 50 34 | | |
| | | 33 | | | 714 | | | 20 | | | |
| July | P P | 34 10 | | C. A. P. | | | | 20 | | | |
| | | | | AR 1308. 6/7 C F C 1 ✓ | 357 | | | | | | |
| | | | | AR 1517. 22/7 C A C 1 ✓ | 357 | | | | 57 30 | | |
| | | 34 10 | | | 714 | | | 20 | | | |
| Aug | P P | 34 10 | | C. A. P. | | | | 20 | | | |
| | | | | AR 1712. 6/8 C F C 1 | 357 | | | | | | |
| | | | | AR 1959 22/8. ✓ | 357 | | | | 64 26 | | |
| | | 34 10 | | | 714 | | | 20 | | | |
| Sep | P P. | 33 | | C. A. P. | | | | 20 | | | |
| | | | | AR 2453 23/9 C F C 1 | 357 | | | | | | |
| | | | | 10 days F P. 2. 5/9/18. B 052 Horses Wrecking Horses. public property. 21/9/18 | | 11 00 | | | | | |
| | | | | 10 days F P. 2. 17/9/18. B 053 Horses Wrecking Horses public property 27/9/18. | | 11 00 | | | 51 69 | a/a | |
| | | 33 | | | 357 | 22 | | 20 | | | |

COMPILED BY ..... A/Sgt
CHECKED BY .....

NUMBER 931097 RANK Private NAME SAMPSON Daniel

| Month | PARTICULARS | Cr. 1. | Cr. 2. | PARTICULARS | Dr. 1 | Dr. 2 | Dr. 3. | Dr. 4. | BALANCE | DEFERRED | SEPARATION |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Oct | Balance Forward | | | | | | | | 51 69 | | |
| | P.P | 34 10 | | C.C.P. | | | | 20 | | | |
| | | | | 2693 6765 7.10 | 3 73 | | | | | | |
| | | | | 2945 ✓ 23.10 | 3 73 | | | | 58 33 | | |
| | | 34 10 | | | 7 46 | | | 20 | | | |
| Nov. | P.P. | 33 - | | C.C.P. | | | | 20 - | 71 33 | | |
| | | | | 3112 8.11. C.F.C.1. | 3 73 | | | | 67 60 | | |
| | | | | 3319. 25.11. ✓ | 13 06 | | | | 54 54 | | |
| Dec. | - | 34 10 | | C.C.P. | | | | 20 | 68 64 | | |
| | | | | 6752. 10.12. CB10 | 4 66 | | | | | | |
| | | | | 3590. 18.12 BBOG. | 9 73 | | | | 54 25 | | |
| | | 67 10 | | | 31 19 | | | 40 - | | | |
| | | | | 148. 10.1. Endon L.P.C. Rhyl: | 9 73 | | | | 44 52 | | |
| | | | | | 9 73 | | | | | | |

S.O.S to Canada 12.1.19. D.O.18. N.S.R.D. 25.1.19.

58.33
67.10
125.43
71.18
54.25

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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. 931097

Rank Private

Surname Sampson

Christian Name Daniel

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

Corps (Squadron, Battery or Company) No 2 Construction Bn

Date of Discharge March 4, 1919

Place of Discharge Halifax N.S

**1.** DESCRIPTION AT THE TIME OF DISCHARGE.

| | |
|---|---|
| Age 24 years 1 months. | Descriptive Marks |
| Height 5 feet 6 inches. | |
| Complexion Dark | Nil |
| Eyes Brown | |
| Hair Black | |
| Trade Laborer | |
| Intended place of residence (To be given as fully as practicable.) | Waverley Nova Scotia |

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

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.

Decorated March 4 35 1.1649 649

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.)

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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) Halifax N.S. D Simpson *(Signature of Soldier.)*

(Date) February 12 - 1919. J. Stubbs *(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) Halifax N.S

(Date) March 4, 1919.

J.S. Davis
major

*(Signature)* .....

.....LIEUT. COL.

No. 6 DISTRICT DEPOT.

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## 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.)

Nil. D Cameron

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# 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.***

Date of Enlistment

MILITIA AND DEFENCE

# Separation and Assigned Pay Branch 00332

OVERSEAS CONTINGENTS

Date of Assignment

Apr 1914.

RATE OF SEPARATION ALLOWANCE

| | | | |
|---|---|---|---|
| | | | |

S

RATE OF ASSIGNMENT

| | | | |
|---|---|---|---|
| 20. | | | |

J-L-1-51 B.

## PARTICULARS OF SEPARATION ALLOWANCE

No. 931094.

Rank Pte Promoted Reverted Discharge

Soldier's Name Daniel Sampson.

Battalion 2nd Con Battn.

Beneficiary

Relationship

Address

## PARTICULARS OF ASSIGNMENT

Name Mrs Elizabeth Sampson

Address Beech Hill N.S.

Change of Address

1

2

3

4

| Date 1917 | Cheque No. | Amount S/A | Amount A/P | Total |
|---|---|---|---|---|
| Dec 31 | ~ | | 180 | 180 |
| Jan 18 | W 70176 | | 20 | 20 |
| Feby | W 73739 | | 20 | 20 |
| Mch | S. 91210 | | 20 | 20 |
| Apr | S. 9937 | | 20 | 20 |
| May | V 17819 | | 20 | 20 |
| June | U 23767 | | 20 | 20 |
| July | E 23165 | | 20 | 20 |
| Aug | U 35702 | | 20 | 20 |
| Sept | X 45524 | | 20 | 20 |
| Oct | L 50006 | | 20 | 20 |
| Nov | X 57813 | | 20 | 20 |
| Dec | 1 69383 | | 20 | 20 |
| Jany | 9 70411 | | 20 | 20 |
| | | | 440 00 | 440 00 |

15923-10-2.

REMARKS

M.R.O. Hfx. 5147 7/destroy) rend. 28/1/19. Eff. 1/3/19. E.S. O.K.-Audit WH 28/4/19

A/c Closed 31-1-19.

Ret'd per Empress of Britain

Date 22-1-19. M.F.W. 187 28/1/19.

M.O. #6. E. Lauerdsagen.

M. F. W. 128.
400M. 6-17—1772-33-1141
L. L. 22330—M. & D. 1933.

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.
4OM. 6-17—1772-39-1141
L. L. 22330—M. & D. 1993.

MILITIA AND DEFENCE

# ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Mrs Elizabeth Sampson
(Assignee)

Name of Soldier Sampson Daniel

931097, 86. 2 cm Battn

I. L. Job 5470—Req. 6888.

| Month. | Year. | Cheque No. | Amt. | Remarks. |
|---|---|---|---|---|
| | | | 20. | |
| | | | | APR 1917 |
| April | 1916 | | | |
| May | | | | |
| June | | | | |
| July | | | | |
| Aug. | | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1917 | | | |
| Feb. | | | | |
| March | | | | |
| April | | L 50771 | 20 | |
| May | | S 11164 | 20 | |
| June | | R 17107 | 20 | 20 R R17807 Remailed 4-7-17 S.G. |
| July | | B 25255 | 20 | 6 |
| Aug. | | J 32518 | 20 | 1 |
| Sept. | | P 38992 | 20 | 03 |
| Oct. | | M 44932 | 20 | |
| Nov. | | 5-25-27 | 20 | |
| Dec. | | Q 59711 | 20 | |
| Jan. | 1918 | | | |
| Feb. | | | | |
| March | | | 140 | |
| 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. | | | | |

29

Taken on Strength JAN. 12. 1919 S. O.

AUDITOR | PAYMASTER

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

M. OR S. E. of Britain 21-1-19 REGT. No. 931097 RANK Pte NAME (IN FULL) Sampson D.

NEXT OF KIN RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? DATE EFFECTIVE

No.

TO WHOM PAID RELATIONSHIP

ADDRESS

| PARTICULARS | EFFECTIVE DATE | AUTHORITY |
|---|---|---|
| 1 | | |
| 10 | | L.P.C. |

ORIGINAL UNIT C.E.F. N.S.R.D. - 2 C.D. IF IN P.F. WHAT UNIT? No (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY $ 52 / 20 DATE EFFECTIVE FEB 1 1919

PAYABLE TO Mrs E. Sampson RELATIONSHIP mother ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Beach Hill Waverley N.S.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE DATE 3-3-19 REASON Demob. AUTHORITY D060 IF ENTITLED TO POST DISCHARGE PAY

| 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. | PARTICULARS OR REMARKS |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| BALANCE FROM PREVIOUS ACCOUNT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | E. Sales D.D. 29 |
| Jan. | 1 | 1 | 11 | 20 | | | | | | 11 | 20 | | | | | | | | | | | | | | | | 05 | | | | | 05 | | | 11 | 65 | | |
| 1/19 to 2/19 | 59 | 1 10 | 64 | 90 | | | | 11 | 15 | 76 | 05 | | | | | | | | | | | | | | | | | | 15 | 35 | | | 15 | 35 | | | 60 | 70 | D.L.P.C. |
| 1/19 3/3/19 | 3 | 1 10 | 3 | 30 | 35 | - | | 60 | 70 | 99 | - | | | | | | | | | 1/2 09 99 | - | | | | | | | | | | | 99 | - | | | | | |
| | | | | | | | | | | | | | | | | | | | | 1/2 10 70 | - | | | | | | | | | | | 70 | - | 70 | - | | | doc. M.S. |
| | | | | | | | | | | | | | | | | | | War Gratuity | | | | | | | | | | | | | | | | | | | |
| | 153 | | 350 | - | | | | | | 350 | | | | | | | | Mar. 25/19 111893 | | 70 | | | | | | | | 70 | - | | | | | | 210 | - | |
| | | | | | | | | | | | | | | | | | | May 1/19 G158797 | | 70 | | | | | | | | | | | | | | | 140 | | |
| | | | | | | | | | | | | | | | | | | | | 70 | | | | | | | | | | | | | | | 70 | | Jan 2nd 19 55902 71 |
| | | | | | | | | | | | | | | | | | | | | 70 | | | | | | | | | | | | | | | nil | | 878444 2-7-19 |
| | | | 350 | | | | | | | 350 | | | | | | | | | | 280 | | | | | | | | 70 | | | | | 350 | | | | | |

Cancelled

all payments made.

A.H. Allum Lt

30M-11-18.—L.L. 50877-M. & D. 9553.

| 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. | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |