

REGIMENTAL DOCUMENTS

NAME ALLEN, SAMUEL ELDON ^{Bdr.} REGT. NO. 32 8 9 3 5 UNIT 60th Btry H. Q. FILE NO. 202

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DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
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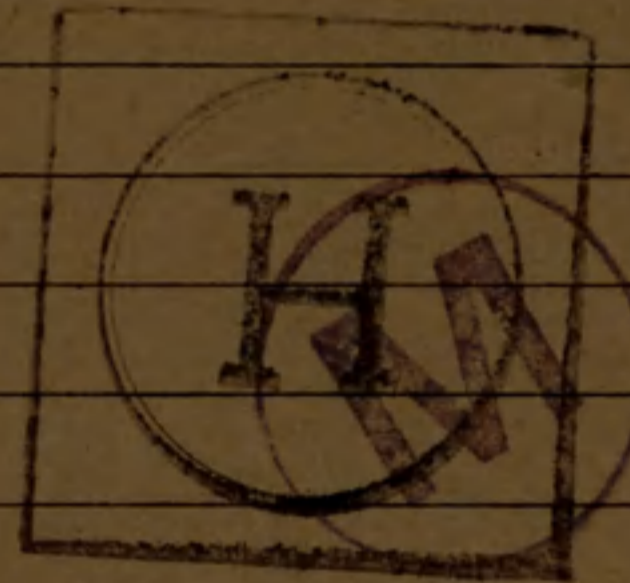
¹ 6920650091

⁴ 603 pay sheets

³ [unclear]

¹ [unclear]

¹ [unclear]



DEATH

Category

H

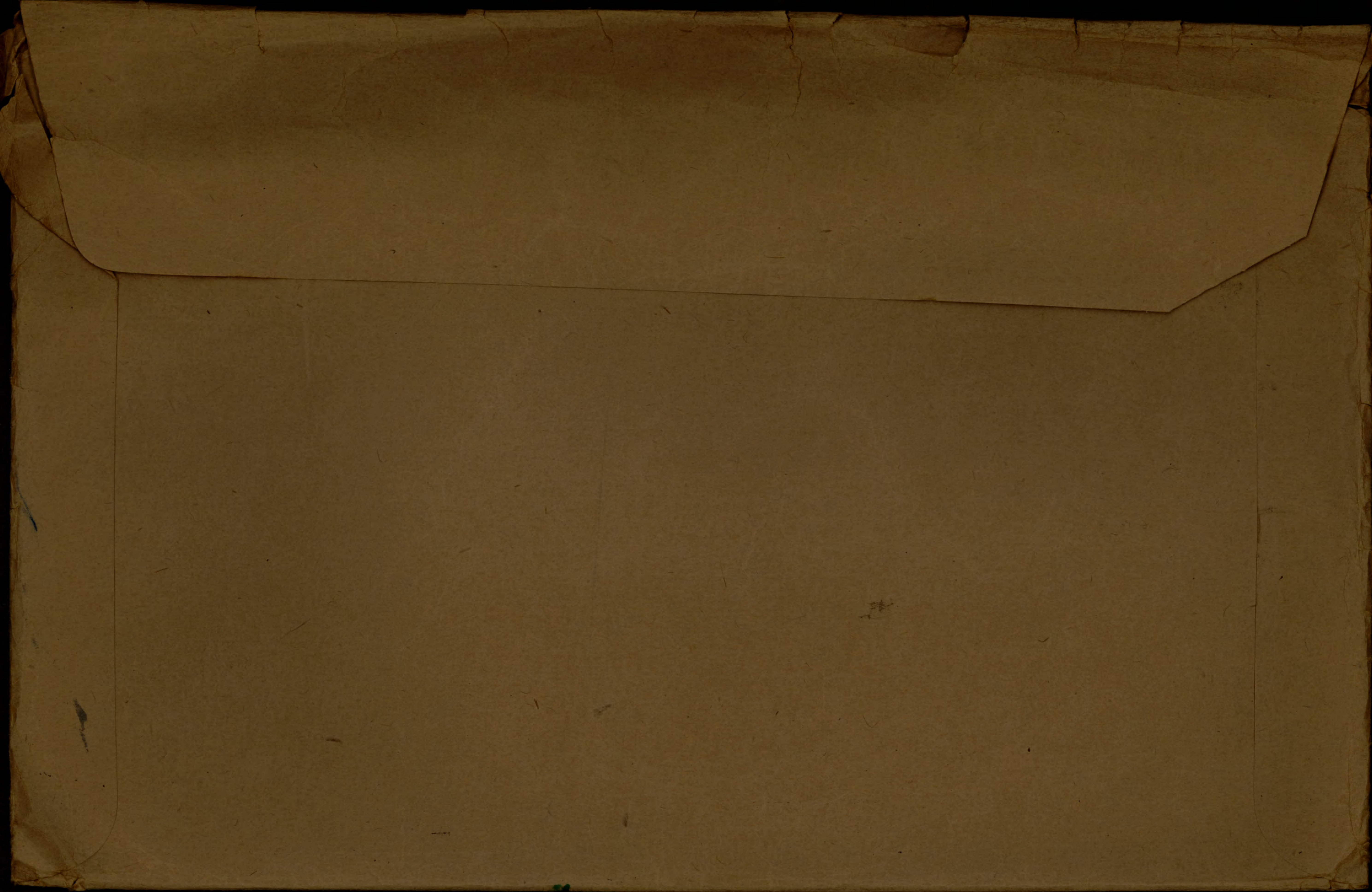
DISCHARGE

Category

Demob.

DESERTION

13-25
20-25
28-25



ATTESTATION PAPER.

No. 328935

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.
(ANSWERS.)

- 1. What is your surname? *Allen*
- 1a. What are your Christian names? *Samuel Eldon*
- 1b. What is your present address? *10262 - 107th Street - Edmonton Alta*
- 2. In what Town, Township or Parish, and in what Country were you born? *Stapton Out*
- 3. What is the name of your next-of-kin? *Mary A Allen*
- 4. What is the address of your next-of-kin? *Stapton Out*
- 4a. What is the relationship of your next-of-kin? *mother*
- 5. What is the date of your birth? *May 9th 1889*
- 6. What is your Trade or Calling? *accountant*
- 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? *1 1/2 yrs 13th Royal Regiment - Hamilton - Out*
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement? *yes*
- 12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

Samuel Eldon Allen, 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.

Date *March 28* 191*6* *S Allen* (Signature of Recruit)
J B Stapleton (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

Samuel Eldon Allen, 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.

Date *March 29* 191*6* *S Allen* (Signature of Recruit)
J B Stapleton (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 *Regina* this *29* day of *March* 191*6*.
J B Stapleton (Signature of Justice)

20/20
 Description of Allen Samuel Eldon on Enlistment.

Apparent Age 27 years months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

Height 5 ft. 10 1/2 ins.

Chest measurement { Girth when fully expanded 36 ins.
 Range of expansion 4 1/2 ins.

Complexion Fair
 Eyes Blue
 Hair Brown

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

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* fit for the **Canadian Over-Seas Expeditionary Force.**

Date March 28th 1916.

Place Regina, Sask

[Signature]
 Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

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

[Signature] (Signature of Officer)
 Capt.
 C.O. 80th Overseas Battery C.F.A.

Date March 29th 1916.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge

Class "A" No

279967

THIS IS TO CERTIFY that No. 328935 (Rank) Bdr.

Name (in full) Samuel Eldon Allen enlisted in

the 60th Battery C.F.A.

CANADIAN EXPEDITIONARY FORCE at Regina on the 29th

day of March 1916

HE served in France 14th Bde. C.F.A.

Demobilization.

and is now discharged from the service by reason of

Medical Unfitness.

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

Age 30

Marks or Scars Nil

Height 5-10 1/2

Complexion Fair

Eyes Blue

Hair Brown

S. E. Allen
Signature of Soldier.

A. W. Roberts
Issuing Officer.

Date of Discharge

2 District Depot
Toronto, Ont.
JUL 11 1919

Lieut. C. E.

for G. C. No. 2 D. D.

Rank

Date JUL 11 1919 19

NB.- 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.

TLH. Rank *Private* Name ALLEN, Samuel Eldon, ✓ Reg'l No. 328935. ✓
 Unit 50th. Btty. 15th. Bgde. If in perm. Corps, } Married or Single Single. ✓
 What Unit? }
 Place and Date of Enlistment C.F.A. Regina, March 28th. 1916. ✓ Place of Birth Stayner, Ont. ✓
 Name and Address, Next-of-Kin Mary A. Allen, ✓
 Stayner, Ont. ✓ *also notify Nursing Sister M.A. Allen. C.A.M.C.* Relationship Mother. ✓
 Assigned Pay Monthly \$ Payable to *C/o Matron in Chief McDonald 133 Oxford St London. (R.L. 29.N. 30-3-18)* Relationship
also notify M.A. Allen. N.S. C.A.M.C. #4 Can. Gen. Hosp. Basingstoke auth R.L. 29.N. 24.8.18 Relationship
 Separation Allowance \$ Payable to Relationship
 Discharge, Date and Place Reason Character

Eng.
 N/E. R.S. No. *[Signature]*
 File No. *[Signature]*
 Category

H. W. & V., Ltd.—7165-16.

Report.		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.				
ARRIVED IN ENGLAND S S CAMERONIA 22-9-16					
NOW New 14th. Bde, Witley 22-1 17, Auth. 4th CDA 90 I 61 24 I 17					
21.5.17	14 th Bde	App'd. as Bomb ^{er} with pay	Witley	18.5.17	141 <i>103 28/8/17</i>
20.8.17	"	Proceeded overseas	"	21.8.17	232
25.4.17	"	Ceased to draw pay of Bde	"	"	"
		Continues to hold rank of Bde	Field	22.8.17	247
<i>29-1-19.</i>	"	<i>Promoted Bdr.</i>	"	<i>14.9.18</i>	<i>12.</i>
20.5.19	Art Pool	T.O.P. from 14 Bde	Bdr Le Havre	12.5.19	-56 & 51. 14 Bde. <i>14/5/19</i>
3.6.19	C.A.R.D	T.O.S from 14 th Bde	Witley	14.5.19	-154

Report.		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.				

5-7-19	Artly. Boof	Invald. (sick) & postd. Caen Bdr.	Havre	12-5-19 - 65	
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		To Canada 97. 1. 113.		2.7.19	
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S.O.S To CANADA - 2.7.19
 Of/c R P.S.D.O. 1. d 25.7.19.

2nd copy

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.

(1) Name of Overseas Unit which Soldier joins..... 60th Overseas Battery C.F.A.
15th O/S Brigade C. F. A.

(2) Regimental Number 328935

(3) Full Name of Soldier..... Allen, Samuel Eldon

(4) Place of Birth..... Stayner, County Simcoe, Ontario, Canada

(5) Are you married, or not? ... Not

(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

(9) Is your Father alive?..... No.....

If so, state name and address.....

(10) Is your Mother alive?..... Yes.....

If so, state name and address Mary Ann Allen, Stayner, County Simcoe,
Ontario, Canada

(11) If your Mother is a widow..... Yes.....

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?..... Yes.....

If so, in what Company?..... Sovereign Life Assurance Co.,
Imperial

Have you made arrangements for payment of your Insurance premium..... Yes.....

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

L. C. Walker

Officer Commanding.

Capt.

O.C. 60th Overseas Battery C.F.A.

Date May 1st 1916

(14)

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY

Certified this document checked with Regimental documents.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1. Christian names Samuel Eldon 2. Surname ALLEN

3. Rank B.D.R. 4. Original Unit 60th Battery 5. Reg. No. 328935

6. Address, in full, to which future payments of gratuity are to be forwarded

Canadian Bank of Commerce
Calgary Alta.

7. Date of enlistment in the C.E.F. 29th March 1916

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. Not applicable

9. Relationship of such dependent. Not applicable

10. Address, in full, of such dependent. Not applicable

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? Not applicable

12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—

13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States?

14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service.

15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served.

3 years 89 days Canada with 60th Battery
29-6-19 to 22-9-16 England 60th Battery
22-9-16 - 21-8-17 France 60th Battery 21-8-17
to-12-5-19

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department. No

17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regiments, numbers and units. *No*

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid. *No*

20. Have you been issued with a War Service Badge? If so what class? *No*

21. Have you, during the present war, served in the Imperial Forces? *No*

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *No*

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *No*

(b) If so, was such reversion in consequence of misconduct or inefficiency? *Not Applicable*

24. Are you now serving in the C.E.F.? *JUL 11 1918* If not, give:—(a) Date of discharge (b) Reason for discharge. **DEMOBILIZATION**

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit. *J.P.B.*

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit.

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?

(b) If so, are you in receipt of full pay and allowances from that Department?

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: *Sellten*

Place of Residence: *810-19th ave west Calgary, alts*

Declared before me at: *Witley, Surrey*

This *26th* day of *June* 19*19*

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

J.C. Harris
LIEUT.-COL. COMMANDING
"P" WING C.C.C. WITLEY.

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....
.....

Certified Correct.

District Paymaster.

(P) RWing

(P)

I Area

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. 328935 Rank Bdr Surname ALLEN
(Given name in full)

Samuel Eldon

Unit or Corps Co Batty Co 7 A Birthplace Stagers Ont

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

1. GENERAL DESCRIPTION:

Physique Good Weight 158 lbs. Height 5 ft. 11 in. Colour of Eyes Blue

Nutrition Good

Pulse 84 Regular

Condition of arteries Soft

Vision Rt. 6/5 Left 6/12

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

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

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 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.

Soldiers Statement only M.H.S.
497.B.103 not available
Injured 2001 May 7th 1919
no disability from it.

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Witley.....(Overseas)

Date 15-6-19.....

Signed E. H. Macdonald Capt. M.O.

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

Signature [Signature].....

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

THIS SECTION FOR USE IN CANADA—

Examined at(Canada)

Date

Signed M.O.

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

Signature

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

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

[Signature]

[OVER]

ORIGINAL
MEDICAL HISTORY SHEET.

Surname Allen Christian Name Samuel Eldon

Examined { on 28 day of March 1916
at Regina Sask
Birthplace { City or Town Stayner
County Simcoe Ont

Approved by [Signature]

Rank [Signature] M.O.

Apparent age 27
Trade or occupation accountant
Height 5 Feet 10 1/2 Inches.
Weight 150 Lbs.
Chest measurement { Minimum 31 1/2 inches.
Maximum expansion 36 inches.
Physical development Good
Small-Pox Marks None

Date.	Fit or Unit.	EXAMINED FOR RE-ENGAGEMENT.	M.O.
<u>30.5.19</u>	<u>a</u>	<u>re-examine</u>	

Vaccination Marks { Arm Right Left
Number
When Vaccinated last Never

Date.	Result.	VACCINATIONS.	M.O.
<u>22.8.16</u>		<u>[Signature]</u>	

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection None

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.	M.O.
<u>12/7/16</u>		<u>[Signature]</u>	
<u>25/7/16</u>		<u>[Signature]</u>	
<u>1.8.16</u>		<u>[Signature]</u>	
<u>22.7.17</u>		<u>[Signature]</u>	

Enlisted on 29 day of March 1916 at Regina Sask

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>60th Battery</u>	<u>328935</u>	<u>Excellent</u>	<u>March 29. 1916</u>
Transferred to	<u>14th Brigade C. F. A.</u>			

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 Service, on the man becoming non-effective; the date and cause being stated on next page.

J. Mc

P. W. M. J.



I Area

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters)

ALLEN

Samuel G.

REGIMENT

60 Bty. C.F.C.

RANK

Br.

No.

328935

Date of Examination in England

6.6.49

Date of Examination in France

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



PRESENT DENTAL REQUIREMENTS

1. FILLINGS *4.*

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? *No*

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 *Yes*

(c) In France *Yes*

Signature of Dental Officer

P. Crosby Capt



[Faint, illegible handwriting and bleed-through from the reverse side of the page.]

copy replacing Original

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.

Forms/B. 103/8
HWV(R1460) 3/19 100,000 P2151 W10416 (6 28 19)

(1)*Substantive rank *Acting rank *(To be entered in pencil to facilitate alteration.) (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)	(2) Regiment or Corps	(3) Postl. No. 328935
	(10) Enlistment (b)	

(11) Engagement (c)	(13) Special conditions (if any) of enlistment (d)	Initials and Rank of an Officer.
(12) Service reckons from (date)	(14) Any subsequent variations (if any) } of conditions of service	

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

(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.

Allen S. E. 328935

(A) Report		(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
Date	From whom received					
			Arrived in England	S.S. Cameronia	22-9-16	
	Man. Man	14 th Bde		Witley	22-1-17	Auth C.D.O. 90161-24-17
21-5-17	14 th Bde	141	Appt'd of Bomb. with pay	LEO	18-5-17	
20-8-17	LEO	232	Proceeds of Seas	LEO	21-8-17	
25-4-17	LEO	247	Seas to draw pay of Bomb.			
			cont. to hold rk of of Bomb.	Hilled	22-8-17	
29-1-19	LEO	12	Promoted Bombier	"	14-9-18	
26-5-19	Art fowl	56	T.O.S from 14 Bde	Le Havre	12-5-19	

Certified true copy.

M. C. Cook's Lt Col

FOR LT COL I/O RECORDS. C.O.M.F.

S.O.S. O.M.F. TO C.E.F.

PT. II ORDER No. 61 DATED 1/7/19

J. F. Donnelly

OFFICER I/O RECORDS,
"P" WING C.C.C. WITLEY

EMBKD SOUTH. MPION
ARR. HALIFAX. JULY. 8. 19

Nothing to be written in this margin.

W S B CLASS A
15th U.S. Brigade C.F.A.

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

M. F. W. 54. (A. F. B. 103.)

Casualty Form—Active Service.

250M.—1-16.
H. Q. 1772-39-920.

60th BATTERY C.F.A.

Unit, Regiment, or Corps _____

Regimental No. 328935 Rank Private Name Allen, Samuel Eldon ✓
C. E. F.

Enlisted (a) Mar 24/16 Terms of Service (a) Navy + 6 months Service reckons from (a) 8-1-16

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) Accountant

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				

		Embarked Canada	Halifax	9-11-16	
		Disembarked England	Liverpool	9-22-16	

CERTIFIED CORRECT:
 30 AUG 1917
 GAW. RECORDS. TOWNSEN.

22.1.17	14th Bde, CFA	Absorbed by 60th Battery, Milford		22.1.17	Pt. 2, 23a, 23.1.17.
		14th Brigade, C.F.A.			

		appd of Bldr with pay	"	18.5.17	Part 2 # 141 - 21.5.17
--	--	-----------------------	---	---------	------------------------

	14th Bde, CFA	Proceeded Overseas on service.	Witley Camp.	21.5.17	Part 2 order No. 232 J. H. Gillespie Capt. For Adjt. 14th Bde, CFA
--	---------------	--------------------------------	--------------	---------	--

28.8.17	LR	LANDED IN FRANCE	Havre	22.8.17	8851-5
---------	----	------------------	-------	---------	--------

16.10.17	14 Bde CFA	Ceases to draw pay of Bldr Retains appnt of of Bldr.	Field	22.8.17	Non Roll - K.T. 16/21663. Part II 247 25.10.17
----------	------------	---	-------	---------	---

11.10.18	"	Granted 14 days leave	M K	6.10.18	B213: Part II 87 d/19.10.18
----------	---	-----------------------	-----	---------	-----------------------------

25.10.18	-	Rejoined Unit	Field	23.10.18	"
----------	---	---------------	-------	----------	---

20.12.18	-	Promoted Bldr. to complete Estab		14.9.18	" " 12 d/29.1.19
----------	---	----------------------------------	--	---------	------------------

8.5.19	-	To Hosp. SK	NS	8.5.19	-
--------	---	-------------	----	--------	---

(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.]

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

M. F. W. 54. (A. F. B. 103.)

350m.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps

Regimental No. 328935 Rank Bdr. Name Allen A. E.
C. E. F.

Enlisted (a)..... Terms of Service (a)..... Service reckons from (a).....

Date of promotion to } Date of appointment } Numerical position on }
present rank } to lance rank } 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				
JUL 2 1919	O. S.	T. O. S. No. 2 DISTRICT DEPOT, TORONTO	1919	PART II D	196
JUL 11 1919	S. O. S.	(DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT,		PART II D	196

W. C. Roberts

Lieut.
For O. C. No. 2 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.

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

*P. 51⁴/₁₇
 48W*

M. F. W. 12.
 50m.—6-16.
 H. Q. 1772-30-819.

To Whom ~~Mr.~~ *Robert John Allen*
 Address ~~Stayner~~
STAYNER *Ont*

By Whom Assigned *Allen Samuel E.*
 Regtl. No. *328935*
 Rank *Gnr*
 Corps *60th ops. Battery*

Rate \$ *1500*

SEP 1 - 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Consolidated acct.</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

21 1000
1000
1000
1000

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.-6-16.
 1772-39-819.

P. 45W
21 1/2

Sheet No. 2.

R. J. Allen

Name of Soldier

Allen, S. E.

PAYMENTS.

L. L. Job 4503. - Req. 6832.

Inv 60th Batty 328935

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.		<i>M 20544</i>	<i>15</i>	<i>✓</i>
Oct.		<i>19529</i>	<i>15</i>	
Nov.		<i>20 24633</i>	<i>15</i>	
Dec.		<i>N 31919</i>	<i>15</i>	
Jan.	1917	<i>435787</i>	<i>15</i>	
Feb.		<i>442358</i>	<i>15</i>	<i>15 R</i>
March		<i>448502</i>	<i>15</i>	<i>15-h</i>
April		<i>H 161</i>	<i>15</i>	<i>15 E</i>
May		<i>H 6333</i>	<i>15</i>	
June		<i>H 12894</i>	<i>15</i>	<i>15 Cu</i>
July		<i>19932</i>	<i>15</i>	<i>15 Cu</i>
Aug.		<i>27123</i>	<i>15</i>	<i>15 Cu</i>
Sept.		<i>133853</i>	<i>15</i>	<i>15 Cu</i>
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

15.00

SEP 11-1916

15 V

15 Cu

15 Cu

15 Cu

15 Cu

AD

AD

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.				

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

A

1799

Sept 1-1916

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>15-</i>			
------------	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. *328935*
 Rank *Private* Promoted Reverted Discharge
 Soldier's Name *Samuel E Allen*
 Battalion *60th O/S Battery*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Robert John Allen*
 Address *Stayner*
 Change of Address *Ont.*
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total
<i>Sept. 30, 17</i>			<i>195</i>	<i>\$195</i>
<i>Oct</i>	<i>D 50604</i>		<i>15</i>	<i>15</i>
<i>Nov</i>	<i>D 51756</i>		<i>15</i>	<i>15</i>
<i>Dec</i>	<i>C 60126</i>		<i>15</i>	<i>15</i>
<i>Jan 18</i>	<i>C 65160</i>		<i>15</i>	<i>15</i>
<i>Feb</i>	<i>B 91704</i>		<i>15</i>	<i>15</i>
<i>March</i>	<i>G 98929</i>		<i>15</i>	<i>15</i>
<i>April</i>	<i>G 8698</i>		<i>15</i>	<i>15</i>
<i>May</i>	<i>A 11656</i>		<i>15</i>	<i>15</i>
<i>June</i>	<i>B 14542</i>		<i>15</i>	<i>15</i>
<i>July</i>	<i>A 24272</i>		<i>15</i>	<i>15</i>
<i>Aug</i>	<i>a 30016</i>		<i>15</i>	<i>15</i>
<i>Sept</i>	<i>a 36672</i>		<i>15</i>	<i>15</i>
<i>Oct</i>	<i>a 43313</i>		<i>15</i>	<i>15</i>
<i>NOV</i>	<i>G 51400</i>		<i>15</i>	<i>15</i>
<i>DEC</i>	<i>B 63345</i>		<i>15</i>	<i>15</i>
<i>JAN 1919</i>	<i>B 70770</i>		<i>15</i>	<i>15</i>
<i>FEB</i>	<i>G 77822</i>		<i>15</i>	<i>15</i>
<i>March</i>	<i>D 83548</i>		<i>15</i>	<i>15</i>
<i>APR</i>	<i>G 1168</i>		<i>15</i>	<i>15</i>
<i>MAY</i>	<i>A 6185</i>		<i>15</i>	<i>15</i>
<i>JUN</i>	<i>A 9417</i>		<i>15</i>	<i>15</i>
	<i>A 11561</i>		<i>15</i>	<i>15</i>

REMARKS

8-47
0238-R-44

A/c Closed

Ret'd per

Date

Clerk

31/7/19
plympic
7/19 M.F.W. 187
18/19
Mr 2 J. Collins

MR 100970

AUDITED.



M. F. W. 128
 400M.-6-17-1772-38-1141
 L. L. 2320-M. & D. 7593.

Obs. 2076

525
525

4 Canadian Gen. Hospital
Basingstoke.

A. & D.
CARD

19

AT

A. & D. No. *MS 59063* PL. OF ACTION *France*

RANK *Bdr* REG. NO. *328935* UNIT *C. F. A. 60/14* SICK OR WOUNDED

NAME *Allen S. E.* AGE *29* RELIGION *Pres.*

PLACE IN HOSPITAL *F. 11 F. 2*

DIAGNOSIS *Contusion Rt. eye & nose*

ADMITTED *13/5/19* FROM *H. S. Gookha*

DISCHARGED *2/6/19* TO *CARD Witley*

TRANSFERRED

SERVICE AT HOME *14 mos* IN FIELD *24 mos*

RESULTS *A*

(See Document Card for M.H. Sheet and other Documents.)

NAME

Allen, S. E.

REGT. No.

328935

RANK AND UNIT

Pte

14th B. Can. Coy.

NEXT OF KIN

CABLE

No.

DATE

NATURE OF CASUALTY

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

A 55-1-

2 Gen. House

8-5-19

Frac. Nasal Bones.

B 55-8.

4 B. Gen. Basinspoke

14-5-19

" " " cont. rh. eye

Q 566

Dibich

2-6-19

" " " " "

No. 328935

RANK *Pte.*

NAME *Allen, Samuel, Eldon,*

T. O. S. 29-3-16

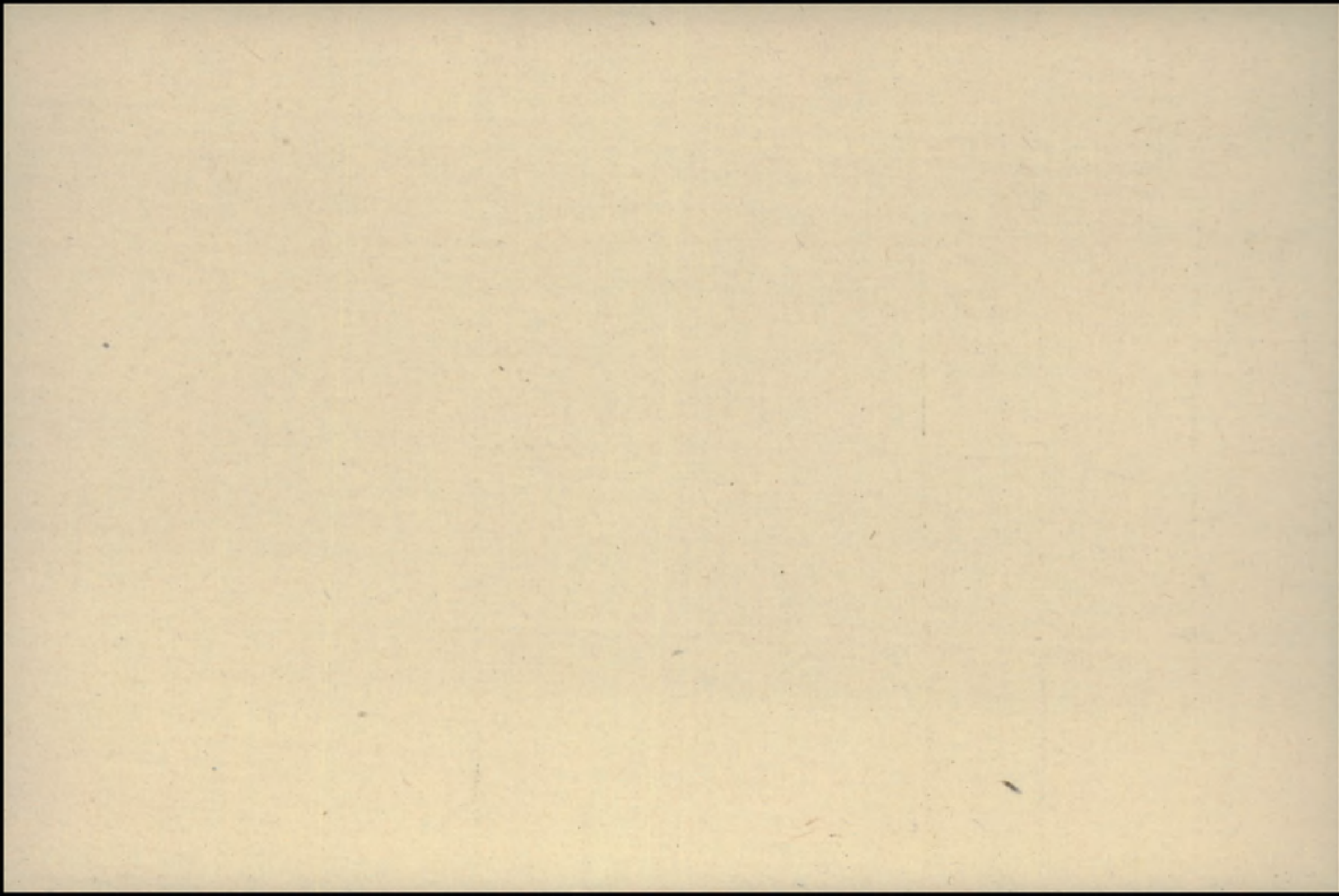
D.O. 12 of 29-3-16

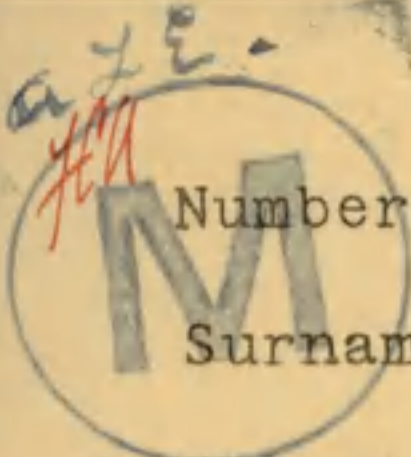
UNIT

60th Bn. Battery, C.F.A. (15th Bdg.)

M. D. 10-3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i>	<i>1916</i>			
<i>Mar. 29</i>	<i>Mar. 31</i>	<input checked="" type="checkbox"/>		
<i>Apr.</i>		<input checked="" type="checkbox"/>		
<i>May.</i>		<input checked="" type="checkbox"/>		
<i>June.</i>		<input checked="" type="checkbox"/>		
<i>July.</i>		<input checked="" type="checkbox"/>		
<i>Aug.</i>		<input checked="" type="checkbox"/>		
<i>Sept.</i>		<input checked="" type="checkbox"/>		
			<i>2-w.l. 18-19-8-16 forfeit 1 days pay.</i>	<i>10-0-66 of 14-8-16.</i>





Number

328935-

Rank

Bdr

Surname

ALLEN

Christian Name

Samuel Eldon

Units

C.F.A.

Theatre of War

France

Date of Service

21-8-17

Remarks

Latest Address

810-19th Ave West

Calgary Alta

Roll No

Page 22764

200m.-6-21....

DESP NOV 9 1922
REGN. NO. GY 19632

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

Surname Christian Name or Names Reg. No.

ALLEN S B 328935

Rank 1. Bar Unit 1. CA 14B

2. 2.

3. 3.

4. 4.

Cas. List.

Hospital and Diagnosis.

Date

19-5-19.A.551. 2. Gen Havre. 8-5-19

Frac: Nasal Bones

26.5.19 B558 H. G. Baringstone 14.5.19

& cont. Lt eye w. D.C.

5.6.19 B566 2.6.19

Cas. List.

Hospital and Diagnosis.

Date

MEDICAL CASE SHEET.*

F. G.
4 Canadian Coy. (Hospital)
Barracks

JUN 1919

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Ms 29063	328935	Bdr.	Allen	Sc.
Year.	Unit.	Age.	Service.	
	C.F.A. 60/4	29	38mos	D

Station and Date. 13/5/19
Disease Contusion R. eye & nose

15/5/19 Report from Ear nose & Throat Clinic.
nose - fractured to left
Nose - buried - kept clear
Ears - clear - hearing no complaint -

May 15/19 - Resound fractured nasal
J. P. Cameron

23.5.19 Nasal plugs have been removed by
Major Lowry. Pt doing well.

26.5.19 Progress satisfactory
one week. Men duty
J. P. Cameron Capt.

Station
and Date.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate..... Militia Form W. 23
 or Particulars of Recruit..... Militia Form W. 133
 Field Conduct Sheet..... Militia Form W. 178 or A.F.B. 122
 Casualty Form..... Militia Form W. 54 or A.F.B. 103
 Last Pay Certificate..... Militia Form W. 44
 Certificate that missing documents are unobtainable.....
 Medical History Sheet..... Militia Form B. 313 or A.F.B. 178
 Proceedings of Medical Board..... M.F.B. 227, A.F.B. 179 or A.F.A. 45
 Dental History Sheet..... Militia Form B. 465
 Medical Report..... M. F. W. 129 or D. M. S. 1375
 Regimental Conduct Sheet..... Militia Form B. 263
 Company Conduct Sheet..... Militia Form B. 263a

1. Duplicate Attestation Paper (M.F.W. 23) or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 133).
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122).
7. Proceedings on Discharge (M.F.B. 218a).
8. Discharge Certificate (M.F.W. 39)
(Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D.3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851). *+ Dup.*
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group..... *B*
 Checked by No..... *18 8513*
 Date..... *30 JUN 1919*

War Service Badge
 Class "A" No. *778969*
 SHORT FORM.
 PROCEEDINGS ON DISCHARGE.
 (Demobilization.)

D.A. 1
J.G. 2

1. No.	<i>328935</i>		
2. Rank	<i>Bdr</i>		
3. Name	<i>ALLEN, Samuel Eldon</i>		
4. Unit	<i>60th Battery C.F.A</i>		
5. Date of Discharge	<i>JUL 1 1919</i>	Place	<i>TORONTO, ONT.</i>
6. Reason for Discharge	<i>DEMobilization</i>		
7. Authority	<i>No. 2, D.D., Part II, D.O. No. 196</i>		
8. Proposed Residence after Discharge	<i>810-19th Ave West Calgary Alta</i>		
9.	CERTIFICATE TO BE SIGNED BY SOLDIER.		
	I hereby acknowledge that at the undernoted place and date I received my discharge Certificate		
	M. F. W. ?.....		
	<i>S. Allen</i>		
	Signature of Soldier.		
10.	CONFIRMATION.		
	The discharge of the above named man is hereby confirmed.		
Place	<i>No. 2 District Depot Toronto, Ont.</i>		
Date	<i>JUL 11 1919</i>		
	<i>W. Roberts</i>		
	Signature..... <i>W. Roberts</i> Lieut. C. E.		
	(O. C. Discharging Unit.)		

* Strike out whichever inapplicable.

ASSIGNED PAY. ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME:- ALLEN, Samuel Eldon
EFFECTIVE DATE:- 1/9/16.	EFFECTIVE DATE:-		NUMBER:- 328935
AMOUNT:- 15.00	AMOUNT:-		PARTICULARS OF RANK OR APPOINTMENT

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.	AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
Robert John Allen, Brother				Gnr.
Stayner, Ont. Can.		5012 29/11 14C7A.	14.9.18	Bdr
Stopped 1.7.19.				

UNIT AND TRANSFERS			
ORIGINAL UNIT:-	15 Bde 6 FA		
DATE ACCOUNT FIRST OPENED:-	1/9/16.		
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
			14 Bde 6 FA.

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
		Ledger Bal	79.03				7.20
		T.P.C.	15.88			China	4.87
							4.87
							4.87
							19.6

PARTICULARS OF RENDERING NON-EFFECTIVE: **20.6.19 Dis to Canada, 1084 3 P. Wing W. 11/19/19**

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Mar 31	Bal Forw.								96.77		
Apr	g.p.	33		Cal. 1021 7				15			
				at 18. 7.4.18 14 Bde	4.46						
				" 97. 22.4.18 "	3.57				106.74		
		33			8.03			15			
May	g.p.	34/10		e.a.p.				15			
				at 172 6.5.18 "	4.46						
				" 250. 15.5.18 "	3.57				114.81		
		34/10			8.03			15			
June	g.p.	33		e.a.p.				15			
				at 348. 6.6.18 "	4.46						
				" 470. 18.6.18 "	3.57				127.78		
		33			8.03			15			
July	g.p.	34/10		g.p.				15			
				at 517. 6.7.18 "	4.46						
				" 591. 15.7.18 "	3.57				138.85		
		34/10			8.03			15			
Aug	g.p.	34/10		e.a.p.				15	157.95		
				at 671. 6/8/18 "	4.46				153.49		
		34/10			4.46			15			
Sept	"	33		e.a.p.				15	171.49		
				at 813 10/9/18 "	3.57						
				" 873 10/9/18 "	3.57						
				" 911 26.9.18 "	3.57				160.48		
		33			10.71			15			
Oct	g.p.	34/10		g.p.				15	179.88		
				at 4350H 7/10/18	6.327						
				at 1283 14/10/18	9.733				192.8		
		34/10			16.06			15			

COMPILED BY
CHECKED BY

Handwritten signature/initials

Handwritten signature/initials

NUMBER 328935 RANK

NAME ALLEN Samuel Eldon

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
1918									1928		
Nov	ly	33		AG				15			
Dec	in	3410		AG				15			
Jan	u	3410		AG				15	7548		
		10120						45			
Feb	Bdr Pay	3220		1401 30/12 14C3A	1947						
	Bdr 14/9/18. u/cv. 140d. @ 05	700		2027 25/1 2CC.	746						
	15 31/1/19. Bdr 12 24/1 14C3A			1153 14C3A 18/11	746						
				2855 Bussals 29/1	1866						
				6AP				15-			
				1 14C3A 6/2	373						
Mar	Bdr Pay	3565		6AP				15-			
		7485		259 . 24/2	273				5982		
				368 . 15/3	730				5252		
		7485			6781			30			
Apr		3450		Apr & May				20			
May		3565		104 13C3A 15/4	1747						
				1051 Bussals 17/4	872						
				242 50ac 16/4	698				5953		
		7015			3314			30			
June	Bdr	3450		6AP				15	7903		
	S. 2-6-19 to 12-6-19			2990 22.5 Bas.	487						
	also 1st. 7-6-19 to 10day	730		3188 26 Bas.	4867						
				6404 17.6 P.	5254				1588		
		4180			4867			15			
					10221						

tot. 2/1/19 22.97

