S

REGIMENTAL DOCUMENTS

NAME ADAIR Wm John. REGT. NO. Y30091 UNIT 111th ofs. Bath H. Q. FILE NO. 1316

H

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4/01894

X

W. 2539
100M-11-19
1772-39-1377

"A"

ORIGINAL

ATTESTATION PAPER.

No. 730091

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your surname? ..... Adair
1a. What are your Christian names? ..... William John
1b. What is your present address? ..... 75 Aurelie St South Galt
2. In what Town, Township or Parish, and in what Country were you born? ..... Stayner Ont
3. What is the name of your next-of-kin? ..... Mrs Florence Adair
4. What is the address of your next-of-kin? ..... 75 Aurelie St South Galt Ont
4a. What is the relationship of your next-of-kin? ..... Mother
5. What is the date of your birth? ..... 15th Nov 1893
6. What is your Trade or Calling? ..... Lath Hand
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? ..... No
If so, state particulars of former service.
11. Do you understand the nature and terms of your engagement? ..... Yes
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force? ..... Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, William John Adair, 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.

W. J. Adair (Signature of Recruit)

Date Nov 24th 1915 A. P. Clair (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William John Adair, 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.

W. J. Adair (Signature of Recruit)

Date Nov 24th 1915. A. P. Clair (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 Galt Ont this 24 day of Nov 1915

Jas. Clarke (Signature of Justice)

Lt. 111th Os. Batt.

M. F. W. 23
200 M—9-15
H. Q. 1772-39-841

Description of Adair William John on Enlistment.

Apparent Age..22..years.....months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height		5 ft. 5 ins.
Chest measurement.	Girth when fully expanded	36 ins.
	Range of expansion	3 ins.
Complexion		dark
Eyes		blue
Hair		brown
Religious denominations	Church of England	
	Presbyterian	X
	Methodist	
	Baptist or Congregationalist	
	Roman Catholic	
	Jewish	
	Other Denominations (Denomination to be stated)	

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

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

nil

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 declares that he is not subject to fits of any description.

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

Date Nov 24th 1915 — H. Mackendrick M.D. Lt RAMC

Place Galt Ont

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.

(2) John William (1) Adair 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.

Jas Delaute Lieut. (Signature of Officer)
O.C. 111th (South Waterloo) O.S. Battalion, C.E.F.

Date Nov 24th 1915

(Facsimile of Discharge Certificate

CANADIAN OVERSEAS EXPEDITIONARY FORCES

DISCHARGE CERTIFICATE

This is to Certify that No. ~~XXXXXXX~~ 730091 (Rank) Pte.
(Name in Full) ADAIR, Wm. John enlisted in
111th Bn,
Canadian Overseas Expeditionary Force, on the 24th of November
191 5, and accompanied said unit to England; served in France with
4th Battalion was returned to Canada and
discharged from the service at Guelph, Ont. on the 22nd
of March 191 8, in consequence of being medically unfit-
Category "E" -- due to service.

DESCRIPTION OF DISCHARGE

Age 23
Height 5' 5"
Complexion Sallow
Eyes Brown
Hair Dk. Brown
Trade Brass Finisher
Signature of Man W. J. Adair

Marks or Scars
Birth mark size of 25¢ piece front
of middle of right thigh. Scar ½"
long 2" post. to right ear.

W. Knowles Major
for Officer in charge of Discharge Depot

Place and Date Guelph, Ontario, March 22nd, 1918

SHOULD THIS DISCHARGE CERTIFICATE BE LOST, NO DUPLICATE OF IT CAN BE OBTAINED.

N. B.—Any person finding this Certificate is requested to forward it in an unstamped enveloped to The Secretary, Militia Council, Ottawa, Canada.

I hereby certify that this is a true copy of the Discharge Certificate issued to the soldier concerned.

W. Knowles Major
O.C.

Canadian Overseas Expeditionary Forces
Discharge Certificate

No. 730091

Rank Pte.

Name ADAIR. Wm. John

Unit 111th Bn.

Address on Discharge

75 Ainslee St.,

Galt, Ontario

His conduct and character while in the Service have been: Very Good

Place Guelph, Ont.

Date March 22nd, 1918 Commanding "F" Unit, M.H.C.C.

Campaigns European War. (France)

Medals and Decorations Entitled to wear one stripe of gold braid.

N. B.—To be forwarded in duplicate to District Headquarters with all proceedings on discharge (M. F. B. 218).

A16

DEPARTMENT OF MILITIA AND DEFENCE. 5380/108

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

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

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

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 this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian names ... William John ... 2. Surname ... Adair ...

3. Rank ... Private ... 4. Original Unit ... 111th Batt. ... 5. Reg. No. ... 730091 ...

6. Address, in full, to which future payments of gratuity are to be forwarded ...
... 44 Grantham Ave. Galt Ont. ...
...

7. Date of enlistment in the C.E.F. ... November 24/1915 ...

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge ... Mrs. Florence Adair ...

9. Relationship of such dependent ... Mother ...

10. Address, in full, of such dependent ... 75 Ainslie St. S. ...
... Galt Ont. ...

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? ... Yes ... (Brother after my discharge)

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:—
... Not applicable ...
...

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? ... not applicable ...

14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service ... not applicable ...
...
...

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 ... 111th Batt. C.E.F. from November 24/1915 to Sept. 28/1916 - 25th Batt. Reserve England Sept 28/1916 to Nov. 10/1916 - 4th Batt France Nov. 10/1916 to April 13/1917 (wounded Vimy Ridge April 9/1917 Convalescing from Apr 13/1917 until March 22/1918
...

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department ... not applicable ...

17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? ... Not Applicable

M.F.W. 2595.
1772—39—1389.
1160—D.P.—250M-12-18.

28

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units ... not applicable

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 ... yes
Post discharge pay 3 months $58.00 a month
$174.00 Paymaster M.D. No 1 London Ont.

20. Have you been issued with a War Service Badge? If so, what class? ... A. & B.

21. Have you, during the present war, served in the Imperial Forces? ... not applicable

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 ...
not applicable

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? ... not applicable
(b) If so, was such reversion in consequence of misconduct or inefficiency? ... not applicable

24. Are you now serving in the C.E.F.? not applicable If not, give:—(a) Date of discharge March 22nd /1918 (b) Reason for discharge ... Medically unfit due to Service

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 ... not applicable

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit ... yes
4th Batt B.E.F. France Nov. 10/1916 to April 13/1917

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? not applicable
(b) If so, are you in receipt of full pay and allowances from that Department? ... not applicable

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: W. J. Adair

Place of Residence: 44 Grantham ave. St Cath

Declared before me at:

This 13th day of January 1919.

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths. J. M. Jamieson A Commr &c.

War Service Gratuity
153 days @ 4

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
March 20th 1918	$58.00		$500.00	$324.90
Apl 20th	58.00			
May 20th	51.84			
Debit Balance recovered	7.26			

Certified Correct.

No Overpayment

W. D. Ross

District Paymaster

Major C. A. P. C.
District Paymaster M. D. No. 1.

Report No. AK 10586 F

Class Duty- C11

Adair William J,
75 Ainslie St, S.
Galt, Ont

No. of M. H. C. File	No. of Local File	No. of H. Q. File
	MAY -7 1920	

No. 730091 Rank Pte. Original Unit 111 Present Unit 4th

Age 23 Height 5 ft. 6 ins. Complexion dark Eyes Blue Hair brown Character NR

Date of enlistment 24-11-15 Where enlisted ~~Galt~~ Galt, Ont Where seen service France 14288

Ship returned by HMT?F. 8261 Date of arrival 25-9-17 Port of arrival Halifax

Birthplace Canada Religion Pres.

Name and address next of kin Mother, Ms. F. Adair, same address

Cause of disability Def. hearing right ear due to GSW notify, do 64-1-1-3848

Condition which prevents the soldier from earning a full livelihood

In France 5½ mos., being wounded behind right ear Apr. 9th.1917. Complains of headache and dizziness Gen. cond. good. Heart and lungs normal. Nervous system neg. Specialist's report appended. Hearing for watch right ear 20/36 Hearing left ear 36/36. No tinnitus now in right ear. Headache and dizziness occurr, only in hot weather. Soldier can walk three miles and do regular work. Fit for C11, for two mos. possibly higher then.

Degree of incapacity (Please state in fractions) Eng. Board None Canadian Board 8% decreasing

Probable duration of incapacity imposs. to state

Is final disability likely to prevent return to previous occupation? Does it render him permanently permantnly unfit for Mil. Service? No.

Recommendation of Canadian Board Duty

Destination to which transportation issued London

Members of Board K.C.Cairns Capt. W.R?Grant Capt. R.M.Bruns Capt. W.M.Carrick, M.JR

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE—IF EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1	Mother (widow)	48			Good
2	Sole support				
3					
4					
5					

Occupation prior to enlistment Brass finisher do

Regular trade or profession

Average earnings previous to enlistment $11.50 wk. Any other income

Name and address of last employer Galt Canadian Brass Co, Galt, Ont.

Rent per month $13 If purchasing property amount due and annual payment, $ $

Taxes If Homestead, when is patent due?

If carrying life or accident insurance, annual premium

If in receipt of sick benefits or other insurance—name of society Amt. per mo. $

If ~~unable~~ to follow previous occupation, ~~name preference~~ NA

At what age soldier left school? What grade, standard, &c., was he in?

Has he taken any Technical or Continuation classes, if so what?

Whether given Vocational Training while in Hospital in England. If so, what subjects?

References Last emp.

Witness J?McDonnell

Date Quebec, 15-10-17

I declare that the above statement is correct.

Signature W.J. Adair

Recommendation by Interviewer as to classes likely to be of use, and general remarks:

Last Pay Cert. Cr., $ Dr., $ Amount paid at Depot H. Q., $ L. P. C. leaving Depot, $

Amount forwarded to H. Q. Unit, $ Credit Clothing allowances, $

Transf'd to Unit—Date Transf'd Class 1—Date Transf'd Class 3—Date

PENSION—Class..... Amount per year, $..... Period granted for..... Dating from.....

First p[redacted] date.....

Form No. 5c.

CLASS 1.—Men for immediate discharge without a pension
(a) Unfit for overseas service but capable to take up their previous civilian occupation.
(b) Disability not the result of service or involving claim as the result of or aggravation by service.

CLASS 2.—Men whose condition may be benefitted by further medical treatment or rest in a Convalescent Home, Hospital or Sanatorium. If deemed advisable, in some cases the medical officer in charge of the Convalescent Home, Hospital or Sanatorium may grant these men leave to return to their own homes and families for a definite period.

CLASS 3.—Men having a permanent disability which would not be benefitted by further medical treatment (such disability due to or aggravated by service) and who-e cases will immediately be considered by the Pensions Board with a view to pension.

[redacted]

[redacted]

Form D.M.S. 13
1664.—100M.—5/2/17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ONTARIO MILITARY HOSPITAL, ORPINGTON, KENT. 27 JUN 1917 1917

No 430091 Rank Pte Name ADAIR Wm JOHN.

Local Unit 35th Overseas Unit 4th Bn Age 22

Examination held at ONTARIO MILITARY HOSPITAL, ORPINGTON, KENT.

DISABILITY.
Overseas—Local
(scratch one out).

HEADACHE TINNITUS
DIZZINESS

PRESENT CONDITION.

Retraction both Mem Tympani
Headache on exertion
Wound healed - specialist reports
slight cochlear disturbance which
will improve.

BOARD RECOMMENDS :—

1. Fit for Duty .....

2. Fit for duty after .....weeks' physical training.

3. Fit for Temporary Base Duty C III .....weeks.

4. Fit for Permanent Base Duty likely to be raised in course

5. Discharge .....

Signatures :—

Members { Hadley Williams Lt Col CAMC ..... President.
Westcott St Mayo Capt CAMC .....
Jas. W Ross Capt .....

APPROVED

ONTARIO MILITARY HOSPITAL,
Dated ORPINGTON, KENT. 27 JUN 1917 1917.

Hadley Williams Lt Col CAMC
For A.D.M.S.
Canadians London Area

"A"

ORIGINAL

MEDICAL HISTORY SHEET.

ADAIR

Surname Adair Christian Name William John

Examined on 24 day of Nov 1913
at Galt

Birthplace City or Town Stayner
County Ontario

Apparent age 22

Trade or occupation mechanic

Height 5 Feet 5 Inches.

Weight 116 Lbs.

Chest measurement Minimum 36 inches.
Maximum expansion 39 inches.

Physical development Good

Small-Pox Marks none

Vaccination Marks Arm Right. Left. X
Number 2

When Vaccinated last 8 years ago

(a) Marks indicating congenital peculiarities or previous disease nil

(b) Slight defects but not sufficient to cause rejection nil

Approved by H. Mackendrick M.D.
Rank Lt. A.M.C. M.O

Date	Result	Examined for Re-engagement,
18.12.17	Cat 1 Dis	25 APR. 1917 Lt. Canon capt A.M.C. M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
4/4/16		M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
3.3.16		M.O.
16.3.16		M.O.
		M.O.
		M.O.

Enlisted on 24th day of November 1915 at Gaet Ont

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	111th Batt C.E.F.	730091		24th Nov 1915
Transferred to	35 ~~17~~ 4th Can Res. Bn	730091		13 8.10.16
	4th Bn.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Guelph, Ont.	5-3-18	None	Discharge
West Sandling ONTARIO MILITARY HOSPITAL, ORPINGTON, KENT.	15 Oct /16	none Dyspnoea	Fit for Garrison duty Cat C. Hadley Williams Lt Canada President Medical Board.
ONTARIO MILITARY HOSPITAL, ORPINGTON, KENT.	27 JUN 1917	Approved:- for A.D. by S. Canadian	Hadley Williams Lt Canada

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.

Sandown Sick 18.12.17 Examined by Medical Board Wt Pains Capt Canada

A.M.F. Form 313

150M.—8-15.
H. Q. 177-39-439.

Surname Adair Christian Name William John

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
NORFOLK & NORWICH HOSPITAL, NORWICH		12	4	17	30	4	17	G.S.W. scalp.	18	Healed.	P.C. Collingwood Fenwick.
Canadian Military Hospital Epsom		30	4	17	18	6	17	-do-	50	Pains in Head following GSW Head no operation performed no improvement. Pains in abdomen. poor appetite. Transfer to Orpington	F.A. Carpenter Capt.
ONTARIO MILITARY HOSPITAL, ORPINGTON, KENT.		18	6	17	3	7	17	G.S.W. Scalp	15	Tinnitus Rt Ear since being wounded. Headache Rt side over wounded area. Left Right Weber Rinne + + Schwabach 30/36 30/36 Watch Membrane Tympani both slightly retracted Reclassified & Duty	Major King Wilson Report for Recommendation W.H.
E.U.C.H.	Guelph	2	1	18	22	3	18	F.B. ?	75	Discharged as medically unfit	W. Laurie Capt Camp
											G.H. Uric Capt Camp

CONVALESCENT HOSPITAL, WOODCOTE PARK, EPSOM

DIVISION. H. HUT 6

Cases for Report and examination by (Opthalmic Surgeon at Horton
(Oral. Yes

Answers by (Opthalmmis Surg.
(Oral

Reg, No. 730091

Rank Pte

Name & Initial Adair

Corps. 2nd Bn. R.F.

Complains of;- Headache, Lumbago, Deafness R ear. (S.S. Walcheren Rear)

R Goulden Capt.

QUESTIONS	ANSWERS.
(1) Does he need Hospital Treatment	(1) No
(2) Will he be fit for Overseas (a) With Glasses (b) With Treatment (c) Is any prescription for glasses given.	(2) Yes. (a) (b) Yes (c)
(3) ~~Is the condition an old one~~ caused by service.	(3) Yes
(4) If an old condition, is it aggravated by service.	(4)
(5) Prognosis	(5) Good

REMARKS.

Signature of M.O. examining case. Merlin Jones

Duty

C.M.M.

Proceedings of Medical Board at Discharge Depot,
QUEBEC, Que.

No. 730091 Rank Private Name and Corps of disabled Soldier:— Adair William John 111th Bn 4th Bn 35th Reserve 17th Reserve

Previous civilian occupation:— Brass Polisher

Cause of Disability:— Defective Hearing Right Ear due to G.S.W

Condition, in detail, which prevents the soldier earning a full livelihood:—

In France 5½ Months, being wounded behind right ear Apr. 9th 1917. Complains of headache and dizziness. General condition good Heart and Lungs normal. Nervous System negative. Specialists report appended.

Hearing for watch right ear 20/36. Hearing Left ear 36/36. No tinnitus now in right ear. Headache and Dizziness ~~not~~ occur only in hot weather. Soldier can walk three miles and do regular work. Fit for C.M.M. for two months. possibly Lighter then.

OPINION OF THE BOARD.

Degree of incapacity. (Please state in fractions) 8/10 decreasing

Probable duration of incapacity:— Impossible to state.

Does it render him permanently unfit for Military Service? No

Would operation, Special treatment, or use of appliances, etc., lessen incapacity? No.

Signature:— K.C. Cairns Capt. President.

Station:— Quebec

Date Oct. 15th 1917

W.L. Ernest Capt. / R. Martin Burns Capt. Members

APPROVED.

Date 15/10/17 W.M. Carmen Major Asst. Director Medical Services.

Date ..... Director General Medical Service.

Forms
I. 1237
12

Army Form I. 1237.

Woodcote

MEDICAL CASE SHEET.*

6

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	430091	Pte	Adair	W.

Year	Unit.	Age.	Service.
	4th Can	22	18 months

Station and Date.

Disease

Deafness & Noises R Ear.
1 month.
G.S.W Behind & above R Ear.

Rt Lung
Phlegm small amt
Tonsils Left & L
Lungs, Lungs
W.R. 6/56
Lungs

Small Scalp wound above & behind R Ear.

Dark R Bronchitis?

Coll alk tonic daily 3ss
ac Skydrs bromid in xx tinct 3vi

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

(44502) Wt. W 11203—M 1150. 1,450,000. 6/12 16. C.F.& S. Forms/I. 1237/12. (E239)

P.T.O.

Station and Date.	

H

Forms
I. 1237
12

Army Form I. 1237.

ONTARIO MILITARY HOSPITAL,
ORPINGTON, KENT.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
2CT2135	730091	Private	Cidair.	W J.
Year	**Unit.**		**Age.**	**Service.**
1917.	4th Battn.	CANADIAN	22.	17/12 FRANCE 6/12.

Station and Date.

18 JUN 1917

Disease G.S.W. Head. 9/4/17 Wounded at Vimy

Inoculated at F.A. at Ville-de-Bois. thence to 13d C.C.S. Hersin. thence to (10/4/17.) 36d Australian Hos. Boulogne where wounds were dressed 11/4/17 Shipped to Dover, thence London Norfolk. Norwich Hos. & recd general treatment for 3 wks. 30/4/17 Removed to Epsom C.C.H. 18/6/17 Removed to Ont. Mil. Hos Orpington Kent.

COMPLAINT. Wounded Rt. side head April 9th. Headache Rt side over wounded area.

	LEFT.	
RINNE.	+	+
SCHWABACH		
WATCH.	20/37	30/36
MEMB. TYMP.	Both slightly retracted	
EUSTACIANT.		

NOSE & THROAT DEPARTMENT.

Wing Wilson Major, Cadet

20/6/17 for reclassification A + Daily

W. Laurie

Station and Date.	

a-1

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

NAME OF SOLDIER Adair W. J.

REGIMENT GMCH 4th

RANK Pte.

DISTRICT 1.

No. 730091

INSTRUCTIONS

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

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

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

	Date 1918		Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
Condition on first Examination	Feb	26	15 / 3.5.10. 12.14. 15.19. 21.30. 31.								4 / 8.9. 10.	2 / 20.29.					1 / 7.	1 / 13.			Exam. By J.M. Drans Capt.	1.	Cavities - 3.5.11.14.8.18. 21.27.
	Feb	28	18.21.27 3.5.14								2 / 8.11										J M Drans	1	Completed Feb 28/18

M.F.B. 465
200M 1-17
1772-39 950

CLINICAL CHART.

(To be attached to Case Sheet.)

MILITARY HOSPITAL, ORPINGTON, KENT.

Army Form B. 181.

Corps 4th Battn. CANADIAN Military Hospital

No. 730994 Rank and Name Private Adair. W J Age 22. Service 1/12 FRANCE 6/12.

Disease Gun Shot Head. Date of admission 18 JUN 1917 Date of discharge 3. 7. 17 Result Cured.

Dates of Observation																																			
Days of Disease																																				
Temperature Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
107°	8 6 4 2																																		
106°	8 6 4 2																																		
105°	8 6 4 2																																		
104°	8 6 4 2																																		
103°	8 6 4 2																																		
102°	8 6 4 2																																		
101°	8 6 4 2																																		
100°	8 6 4 2																																		
99°	8 6 4 2																																		
98°	8 6 4 2																																		
97°	8 6 4 2																																		
Pulse per Minute																																			
Respirations per Minute																																			
Motions per 24 hours																																			

(6201) Wt. W. 11421/M1165 2,000,000 12/16 McA & W Ltd. A.F.B. 181 (E. 735)

Signature _____ In charge of case.

TRIPLICATE

CANADIAN CONTINGENT EXPEDITIONARY FORCE

(BW) "F" UNIT M. D. 1

M. H. C. COMMAND

LAST PAY CERTIFICATE

30-A-166

B

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916). No. 5

Regimental No. 730091 Rank Pte. Name ADAIR, Wm. Jno.

Corps 111th Bn. who was* Discharged

On March 22nd 8 191...., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Mar.1 8 191...., to Mar.22 8 191...., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances by Cheques No. 17550	8	.00	Regt'l Pay 22 days at $ 1. c.	22	.00
Assigned Pay and Sep'n Allce. No. 17933	11	.00	Field Allow. 22 days at $ .10 c.	2	.20
Other charges No. 17934	50	.00	Separation Allowances* (Monthly) Feb. Mar.	50	.00
Payment on transfer or discharge No. 17935	18	.20	Other Allowances* Clothing	13	.00
Balance Cr. (to be paid by the new unit)			Other Credits*		
			Bal. Dr. (to be deducted by new unit)		
Total	87	.20	Total	87	.20

*Give particulars.

A monthly stoppage of $ 15.00 (†) has (‡) been paid on account of Assigned Pay for the month of ~~xxxxxxxxx~~ to date of discharge 191.... and Sep'n Allce. for month of March 8 191.... (to) Assignee Mrs. Florence Adair,

(Address) 75 Ainslee St., Galt, Ont.

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

On Transfer of an Officer

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

REMARKS:—

State (1) date of enlistment 24-11-15

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

(3) cause of discharge Med. Unfit. authority D.O.71, 12-3-18.

(4) authority for transfer .....

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

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

Date March 20th, 1918.

Place LONDON, ONT.

Capt.
Paymaster "F" Unit, M.H.C. Command
Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

10M.—1-18.
H. Q. 1772-3-903.

0,1

0,01

0,25

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

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

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

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

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

---

(1) Name of Overseas Unit which Soldier joins 111th (South Waterloo) Overseas Battalion, C. E. F.

(2) Regimental Number 730091

(3) Full Name of Soldier Adair, William John,

(4) Place of Birth Stayner, Ont.

(5) Are you married, or not? no

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

(b) Present Postal Address Nil.

(7) Are you a widower? ~~Yes~~ NO.

(8) Have you any children? ~~Yes~~ NO.

If so, give number of boys and girls Nil.

Also their names and ages Nil.

M. F. W. 67.

200M.—3-16.
1772 39-954.

(SEE OTHER SIDE.)

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

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

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

If so, state name and address..Florence Adair, 75 Ainslie St. S.....

.....Galt, Ontario.....

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

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.

.....$ 18.00 Per month. only son in position to support.....

.....

(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..

.....Yes,.....

(15) Are you insured ?.....No.....

If so, in what Company ?.....NIL.....

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

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

.....Lieut.-Colonel,
Officer Commanding.
O.C. 11th (South Waterloo) O.S. Battalion, C.E.F.

Date.....July 7, 1916.....

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

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps

Regimental No. 730091 Rank Private Name Adair William, John.

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: 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.
20 AUG 1917		TAKEN ON STRENGTH C.D.D, BUXTON Pt. II ORDER No. 196.			R. O. Earl capt for Lt. Col. Commanding Canadian Discharge Depôt.
13 SEP 1917		EMBARKED FOR CANADA FROM LIVERPOOL			R. O. Earl capt for Lt. Col. Commanding Canadian Discharge Depôt.
Transferred to "F" Unit. M. H. C. C. 28-12-17					for Gerald Lieut G. C. No. 1 Special Service Co.
28-12-17	Tfr from Special Service	T. O. S. "F" Unit	Guelph	Part II	Do 363
22-3-18	Struck off strength		"	"	" 71

F. A. Herman Lieut
F. UNIT, M. H. C. COMMAND.

(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. B. 103.
350M.—
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 111th O. S. Battn.

Regimental No. 730091 Rank Private Name ADAIR. William John
C. E. F.

Enlisted (*a*) 24.11.15 Terms of Service (*a*) D.o.W. Service reckons from (*a*) 24.11.15

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*) Lathe Hand
Corps trade Drummer

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
		Embarked Disembarked	Halifax, Can. Liverpool, Eng.	26.9.16 6.10.16	S.S. Tuscania
		8.10.16 O.C. 111th Battn. Transferred to 17th Reserve Battn.	E. Sandling	8.10.16	Part II O. #252 Capt. Adjutant, 111th S.W. Overs. Bn. C.E.F.
8.10.16	O.C. 17BN	Taken on Strength 17 RBn	E. Sandling	8.10.16	Part II O. #273
18.10.16	O.C. 17Bn	Re-transferred to 111th Battn.	E. Sandling	13.10.16	Part II O. #282 Lieut. A/Adjut. 17th Reserve Battn C.E.F.
13.10.16	O.C. 111Bn	Taken on Strength 111Bn	E. Sandling W. Sandling	13.10.16 13.10.16	Part II O. #255 Part II O. #255
13.10.16	O.C. 111Bn	Transferred to 35th Reserve Battn.			Capt. Adjutant, 111th S.W. Overs. Battn. C.E.F.
13.10.16	O.C. 35 Bn	Taken on Strength 35 RBn	W. Sandling	13.10.16	Part II O. #246
12-11-16	O.C. 35th	Transferred to 4th. Bn.	France	12.11.16.	Pt. 2. Ord. 271 Capt. A/Adjt 35th. Battalion, CEF

CERTIFIED CORRECT. 16 NOV. 1916 CAN. REC. OFFICE, LONDON.

(*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. ... 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				
14-11-16	C. B. D.	ARRIVED C. B. D.	FRANCE	14-11-16	N. R. D. PART II ORDERS No. 69 D. 25-11-16.
do	C. B. D.	LEFT C. B. D. FOR	Unit	30-11-16	N. R. D.
10-12-16	O. C. 4th BN	ARRIVED 4th BN.	FIELD	3-12-16	B. 213 D. C.S. 398.
10-4-17.	No 32 Stn.	S.W. Scalp Adm	No 32 Stn	10-4-17	W3034.
14-4-17	4th Bn	Wounded	Field	9-4-17	B.213 D.C.S. 440
13-4-17	No 13 Stn	Shell Scalp Trans	England	13-4-17	W3034
12-4-17	Princess Elizabeth	G.S.W. Scalp. posted to 1st Central Ontario Regtl Depot	Shorncliffe	12-4-17	W.3083 No. 5224 Pt 2 O. No. 47 d/28-4-17
					Chas B. Maxwell Lieutenant For Major A.A.G. Canadian Section.
28-4-17	1 CORD	Taken on Strength	W Sandling	12-4-17	-60 Hty
					T. A. Prestwin Lieut for Colonel i/c Records, Capt Com't.
18-8-17	1st CORD	Att to Hole DD Buxton	W Sandling	18-8-17	Pt II DO. 162
					F. H. Hatton Lieut. & Assist. Adj for O. C. 1st C. O. R. D.

Earn Eye, Nose and Throat Dept.
Ontario Mil. Hosp.
Orpington, Kent.
June 20.1917

Specialist's report.

730091
Adair ,Pte,W.J.
4th. Bn, Can

Marginally named man complains tinnitus right ear xxx since being H.W. wounded on right side of head on Apr. 9,1917. Hearing for watch Rt. 20/36 Rt. 30/36 Bone conduction normal. He has some cochlear disturbance which will improve with time. He feels better while employed and I advice his temporary reclassification to Category C

N. King Wilson, Major
i/c Ear, Nose & Throat Dept.

Ear, Eye, Nose and Throat Dept.
Ontario Mil. Hosp.
Orpington, Kent.
June 20.1917

Specialist's report.

730091
Adair ,Pte,W.J.
4th. Bn, Can

Marginally names man complains tinnitus right ear since being wounded on right side of head on N.W. Apr. 9,1917. Hearing for watch Rt. 20/36 Rt. 30/36 Bone condution normal. He has some cochlear disturbance which will improve with time. He feels better while employed and I advice his temporary reclassification to Category C

N. King Wilson, Major
i/c Ear, Nose & Throat Dept.

BC JUN 11 1920

AB JUN 10 1920

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

5380/108

GAR 89-W-2.

Name Adair, William John
Surname Christian Name

Regimental Number 730091 Rank Pte.

Unit 111th Bn.

Original Unit

District where paid M.D. 1.

Date of Discharge 22-3-18.

P. D. P. Filing Number 15-84-1.

Address (in full) 75 Ainslee St.,
Galt, Ont.
Mrs Florence Adair

Rates:—Regimental pay $ 1.00 per diem: Field Allowance $ .10 per diem. Separation Allowance $ 25.00 per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
175 10	1585	20-3-18	58 00	1540	20-4-18	58 00	1258	20-5-18	51 84	7 26	167 84
1st	S7258	20/3/19	20 00								
1st	S7259	20/3/19	30 00								
831a 2nd	L24724	14-2-19	70 00								
831a 2nd	L24725	14-2-19	30 00								

M. F. W. 127.
50M—6 17.
1772 39-1140.

Remarks: Overpaid Separation Allowance.

Dec'n No. 5380/108 W. S. G. File No. 89-W.8.

Award..... days at $ 70. per day $

S. A. 5 months at $ 30 per mo. $ 150 } $ 500.00

Less P, D. P. Credited $ 175.10

$ 324.90

Less further debit balance $.....

Net due paid as below 324.90

	TO SOLDIER				TO DEPENDENT			
0	Ag. No	Ch. No	Amount		Ag. No	Ch. No	Amount	
1	591	7258	70	00	591	7259	30	00
2	831a	24724	70	00	831a	24525	30	00
3	369	411627	34	90	369	411628	30	00
4					1832c	478112	30	00
5						485573	30	00
6								
	T				Total			

20-2-19
14-2-19
7/4/19

12-6-19

Mrs Florence Adair.

44 Grantham Ave
Galt Ont

GEN'L AUDITOR
Posting checked by
W Black
Date 15-7-19

✓

HLL

Name Adair W. J.

M. F. W. 41
1 0M—7-16
1772-39 889.

L. P. C. No. A 767

Regimental No. 730.091.

Unit 111 Bn

Date of enlistment 24/11/15.

Place of "Galt. ont.

Married (yes or no) No.

Amount of pay assigned monthly $20.00 1/10/16 - 31/10/17

To whom payable Mrs Florence Adair
Justitia 25/9/17 71 Ainslie St. South.
Galt. ont.

Home
Name and address of next-of-kin 75 Ainslie St. S.
Galt. ont.

M.B. 15/10/17. Duty.

20.00 1/3/16 - ~~31/10/17~~ 30.11.17 ~~400.00~~ 420.00

S.A. contd by S.A.A.P.

Date and place discharged

260.00

Reason for discharge

Character on discharge

C II H.D. 649. a 3848

Form No. 5351—M. & D. 6880.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
	24/8/17							26 36								E L P C
25/8/17	31/10/17	68	1.00	68 00	68	.10	6 80		101 16					4 87		A R 8229.
														9 73		" 10191.
														9 73		" 1.
														60 00		C D Que.
																Sep Oct
																L. P. C rend 12/11/17
																show a/c adj to 31/10/17 & hfd to M.D. 1.
																S.A.A.P. recov of 40.00 & to reopn SA
																12/11/17

Dr Bal 23 17

124 33 124 33

CRK

E A P chgd 1/10/16 - 31/8/17 220.00

M. F. W. 41
1 0M — -16
1772-39 889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

L. L. Job 88773—M. & D. 6195.

1.3.16

MILITIA AND DEFENCE

M. F. W. 11.
20m.—11-15.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Florence Adair.

Address 75 Amalie St S
Galt, Ont.

Relation to Soldier wife, child or mother } Widowed ~~wife~~ Mother

Name of Soldier Adair W. J.

Regtl. No. 730091

Rank Pte

Corps 111th Bn C E F

To what Corps belonging when called out }

V

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March		L 27778	20	20

CONSOLIDATED 1 ACCOUNT

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

M. F. W. 11a.
60m.—12-15.
1772—39—818.

Sheet No. 2. Florence Adair ~~wife~~ PAYMENTS Name of Soldier Adair W. J.

Widowed Mother 730091 Pte

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916	F73	20	20	
May		A. 4515	20	20	
June		A 1824	20	20	
July		F 9874	20	20	
Aug.		A 10863	20	20	
Sept.		A 14990	20	20	
Oct.		A 18344	20	20	
Nov.		A 21599	20	20	
Dec.		A 24984	20	~~20~~	
Jan.	1917	A 28545	20	20	
Feb.		A. 31488	20	20	
March		A 34692	20	20	
April		B 123	20	20	
May		B 3580	20	20	
June		C 7150	20	20	
July		B 11460	20	20	
Aug.		A. 13801	20	20	
Sept.		C 17249	20	B	380.00 ✓
Oct.			20	T	
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier .....

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

309
2660
669

L. L. Job 4503.—M. & D. 6334.

17 4/7

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—6-16.
H. Q. 1772-39-819.

To Whom Mrs Florence Adair

Address 75 Ainslie St South
Galt
Ont

Rate $20.00

By Whom Assigned Adair W. J.

Regtl. No. 730891

Rank Pte.

Corps 111th Batt'n C.E.F.

OCT 1 - 1916

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				

Constituted Account

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—6-16.
1772—39—819.

P. 17 4/17

Sheet No. 2. Mrs F. Adair

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

Name of Soldier Adair W. J.

PAYMENTS. 730091 Pte 111th Battn

$20.00

OCT 1 - 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		321181	20	✓
Nov.		E 28765	20	
Dec.		C 37226	20	
Jan.	1917	B36707	20	
Feb.		~~B 42372~~	~~20~~	20 R B42372 Cancelled RTS 1/2/17
March		C 43210 / B 48226	20 / 20	20 L
April		C 25	20	20 L
May		C 5973	20	
June		C 12229	20	20 L
July		C. 19320	20	Cu
Aug.		H 2688	20	B ..... A/c Closed
Sept.		D 33913	20	B 240.00 ✓ Ret'd per .....
Oct.				Date ..... F. X. .....
Nov.				..... Clerk .....
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

R—122

A.G.R. Rank Name ADAIR, William John ✓ Reg'l No. 730091 ✓

Unit 111th Bn. If in perm. Corps, What Unit? Married or Single Single. ✓

Place and Date of Enlistment Galt, Ont., 24th Novr., 1915. Place of Birth Stayner, Ont. ✓

Name and Address, Next-of-Kin Mrs. Florence Adair, ✓

75 Ainslie St., South, Galt, Ont. Relationship Mother. ✓

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. & V., Ld.—7165-16.

N/C R.B N: 8306
File R.L.
Category Can OR

6 seas bas

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 S'S' TUSCANIA 6.10.16					
13.10.16	O/C. 111th Bn.	S.O.S. on trans. to 35th Bn.	W. Sandling.	13.10.16	Pt. II D/O. 255
14-10-16	OC 35th	Taken on strength of 35th	"	13-10-16	Pt II 246
13-11-16	"	S.O.S. to 4th Bn. 6/seas.	"	12-11-16	" " 271
25.11.16	4th.	Taken on Strength	Field,	14.11.16	Pt, 2-C, 69
17-4-17	✓	32 Stat Hospital	Wimereux	10 4 17	Ch a/625 SW Scalp
26 4-17	4 Bn	Norfolk & Norwich Hospt	Norwich	12 4-17	Ch B/334
28.4-17	4 Bn	Inv. posted to 1 Cen Ont Reg	Field	12 4 17	Pt II 047 Pt 1 60 1 CORD d. 28-4-17
5-6-17	✓	Can Con Hospt	Woodcote	1.5-17	Ch B 355
27-6-17	✓	Ontario Mil Hospt	Orpington	19.6.17	Ch B 372

A.F.B. 103 CHECKED 15 NOV. 1916

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.
7.7.17	4 Br.	Disch Ont Mil Hospt	Orpington	3.7.17	CL B 378
~~18.7.17.~~	~~W.C.O.R.D.~~	~~T.O. Son Rep. from Furlough W. Sandling~~ Cancelled by 16 R.D. Pt. 2 9.96 - R. 8-4-18		~~3.7.17~~	~~Pt. II DO. 131.~~
18-8-17	C.O.R.D.	On Comm. C.D.D. Buxton	do.	18-8-17	Pt. II o 162.
19-9-17	C.O.R.D.	S.O.S. To Canada Para 392 Sec. 25 K.R.&O. 1912	"	13-9-17	Pt. II o 194
	Dis Depot	Found fit for duty	M.D. No. 1 London	25-9-17	NR 358

Date of Enlistment

March 1. 1916.

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Oct. 1. 1916

RATE OF SEPARATION ALLOWANCE

20	$ 25.00 1-12-17 P.C. 3257		

RATE OF ASSIGNMENT

~~20~~			

1/1/18 ✓

PARTICULARS OF SEPARATION ALLOWANCE

No. 730091 W. J. Adair

Rank Pte Promoted " Reverted Discharge

Soldier's Name "Flint" W. J. Adair (Per 2nd Weekly Returns dated 3/1/18)

Battalion 11th Battn. C.E.F.

Beneficiary Mrs. Florence Adair.

Relationship Widowed mother.

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Florence Adair

Address 75 Ainslie St South.

Change of Address Galt. Ont.

1

2

3

4

Date	Cheque No.		Amount S/A	Amount A/P	Total	
Sept 30th	17		380	240	620	
Oct B	50299		20	20	40	
~~Nov~~			~~20~~	~~20~~	~~40~~	
Nov	56135	D	20	xxx	20	D
Dec. A	52663		20	xx	20	Bo
1918 Jan	70496	B	30	xx	30	BB
Feb			~~25~~	xx	25	
			470	xx		

REMARKS

$260 ..... A/c Closed 31/10/17.

Cancelled. Ret'd per Overdrafts 8261

S A/c 480 60 X7 Date 13/4/17 F. X. 1/11/17.

..... Clerk T.G.

A.B. $40 overpayment for Sept + Oct: recovered by C.P. per l on file S.H.S. 21-11-17

Reopen S.A. only and continue payments until further advised as pr C.P.L. #2649-a-3848 on file 89-W-8 S Hsmith 21-11-17

Paymaster Paying
From 1-2-18
To.....

pr. B. #1
Special Service Co

CONSOLIDATED ACCOUNT

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

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
			12.	12.	

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

FORM D.M.S. 1209.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
Adair	W J	730091

Rank	Unit	Co.	Troop	Batty.
Pte	4th Batt			

Hospital: 32 Sta Wimereux — Date of Admission: 10-4-17

Transferred

Norfolk & Norwich Norwich Hosp. 12-4-17

Woodcote Park Conval Hosp. 1.5.17

Ontario Mil Orpington Hosp. 19-6-17

Diagnosis: S.W. Scalp

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

C.L. 17-4-17 A 625

26-4-17 B 334

5.6.17 B 355

27-6-17 B 372

Ch. 7.7.17 B 378

Dis. 3.7.17 Date

REMARKS

A.M.D. 2 DEPT.
Bch. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT.

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

No 730091 RANK Pte. NAME Adair. W. J.

T. O. S. 24-11-16
D. O. 1226-11-16 UNIT 111th Battalion

M. D. 1

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Nov. 24	Nov. 30	✓		
Dec. 1	Dec. 31	✓		
1916	1916			
Jan. 1	Jan. 31	✓		
Feb. 1	Feb. 29	✓		
Mar. 1	Mar. 31	✓		
Apr.		✓		
May		✓		
June		〃		
July		〃		
Aug.		〃		
Sept.		〃		

UNIT SAILED
SEP 25 1916

No 730091 RANK Pte NAME Adair. Wm. Jno.

T. O. S. UNIT No 1. Special Service Co

Trans fr. D D Q M. 20-10-17.
DO 8-24-10-17).

M. D. 1

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1917	1917.			
Oct.	no. c/c	"		
Nov.	no. c/c	"		
Dec		"		
1918	1918.			
Jan.		"	Trans to "T" Unit. M H 66. 28/12/17	DO 3. 3-1-18.

649-Q-3848

S.O.S. Dio 22-3-15.

42/1 I

SURNAME. Adair

CHRISTIAN NAMES William John

REGL. No. 730091 RANK Pte.

UNIT 111th Batt.

FORMER CORPS Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Adair, Mrs. Florence

RELATIONSHIP TO SOLDIER Mother.

ADDRESS 75 Ainslie St., Galt. Ont., Canada.

COUNTRY OF BIRTH Canada, Stayner Ont DATE

PLACE OF ATTESTATION Galt, Ont., Canada DATE Nov 24, 1915

O/S 25-9-16 553/2

L. L. 90589.—M. & D. 6312. R/C 25-9-19 M. F. W. 22. 100m.—1-16. H. Q. 1772-39-839.

Sailed from Halifax per S.S. "Tusconia" 25-9-16

MARRIED SINGLE yes. WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

REGT'L NO 730091

NAME Adair William John

H. Q. FILE NO. 649-

RANK AND CORPS Pte. 4th. Bn. (Form. 111th Bn)

FOLLOWS NO.

FOLLOWS

CABLE No.	CABLE DATE	NATURE OF CASUALTY
M. 1977	17-4-17	C. Adm. to 32 Stat. Hos. Wimereux Apr. 10th. 1917 (G.S.W. scalp.).

L. L. 12767—M. & D. 7390.

M. F. W. 42—50M.—12-16.
H. Q. 1772-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
a625	#32 Stat. Winnereux	10-4-17	S.W. Scalp.
B334.	Norfolk & Norwich, Norwich.	12-4-17	" " "
B355	Can. Convt. Woodcote Pk. Epsom.	1-5-17	S.W. scalp. 28-5-17.
B372.	Ont. Mil. Orpington	19-6-17	S.W. scalp. 19-7-17
B378	Disch.	3-7-17	S.W. scalp.
363	R.H.C.C. London	28-12-17	Adm. Guelph. M.C.H.

Form D.M.S. 1317.
1859—30m—27/11/16.

HOSPITAL.

A. & D. No. Ward N.

Unit H Sick or Wounded.

Regtl. No. 730091 Pl. of Act'n

Rank Pte Name Adair W. J

Age 22 Religion Pres

Service Compl'd 15/12 Time with Field Force 6/12

Diagnosis G S W Head

30 APR 1917

Admitted Norfolk War Discharged

Transferred Torrington 18.6.17

RECORD FURTHER REMARKS ON BACK.

1.5.17 Scar above & behind Rt. ear. Constant headache
2 imitors, deafness, dizziness at night.

9.5.17 Far Rept. Does not need Hosp. treatment. Will
be fit for overseas. caused by service. Prognosis good.

21.5.17 Pain in Rt. knee from injury when he feel.

4.6.17 Hearing improved. pains in abdomen.

8.6.17 Pains in head following GSW. No operation
performed. No improvement. Pains in abdomen.
Poor appetite. Trans. to Uspington.

J. A. Carpenter Capt

Form R. 149.
7106—250m—7/2/17.

Name ADAIR William, John. *Rank* Pte. *Reg. No.* 730091

Unit 4th Battalion.

Next of Kin Canada.

Date 1917.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
10-4	32 Stat. Hosp	Wimereux.	Shr. Scalp	A624	M1997 17/4	
12-4	Norfolk & Nor Hosp		do	B334		
1-5	Can Conv. Hosp	Woodcote Park Epsom	do	B355		
19-6-17	Ontario M. Hosp,	Orpington.	do	B372.		
3-7-17	Discharged		d.	B378.		

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

Cont from page 1.

Copy of report by W.A? Craig.

No history of any serious illness. Frequent colds.

Weight 127½ lbs. Temp. 98 1/3- pulse 76.

Physical exanination of this man's chest shows harshness of breathing over roght upper lobes with intensified whisper in the right supia spinous fossa. The breath sounds are distant at the right base be ind and in lower right axilla. There are occasional distant rales at the left base on cough. This man has evidence of a tubercular infiltration which does not show activity at present.

(sgd) W.A.Craig

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned,.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the soldier to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation ; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
4. Special care is required in answering question 14. Please read the questions carefully. All questions must be answered.
5. The nomenclature of diseases to be followed is that described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison and Sons.

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S AND MEN

B. P. C.

MEDICAL HISTORY OF AN INVALID

STATION Guelph, Ont. DATE 5-3-18

1. (a) Unit F.Unit. M.H.C.C (b) Regimental No. 730091 (c) Rank Pte.
(d) Surname ADAIR (e) Christian name William John
2. Age last birthday 23 years Date of birth Nov 15th 1894
3. Enlisted at Galt, Ont. on 24-11-15
4. Personal description :—
(a) Height 5' 5" (b) Weight 115 (stripped) (c) Complexion Sallow
(d) Colour of hair D.Brown (e) Colour of eyes Brown (f) Identification marks
5. Address after discharge (for the use of the Board of Pension Commissioners)
75 Ainslie St., Galt, Ont.
6. Former trade or occupation Brass Finisher
7. (a) Service — Years 2 — Days 3 mos

	Periods	
	From	To
111th Bn	24-11-15	12-11-16
4th Bn	12-11-16	28-12-17
F. Unit, M.H.C.C.	28-12-17	

(b) Has he been overseas ? Yes.
8. Present disease or disability (use authorized nomenclature if possible) None
(a) Date of origin Not applicable. (b) Place of origin Not applicable.
(c) Cause* Not applicable.
*(Here include original disease or injury)

If further space is needed for this or other answer, use page 4

9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

Agree with specialist's report at ached and add:-
History of "colds" since childhood. Tubercular lesion origin probably previous to enlistment as it has not broken down in over two years service States that he feels as well as on enlistment. Can find no evidence of shell shock of last board. No tremor of hands, is not nervous or excitable. and reflexes normal. Has had no chest symptoms or serious illness except G.S.W. of head during service.
Heart Lungs Heart and other organs normal.
Cont on page 4.

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

M. F. B. 227.
75M.-12-17.
1772-39-117.

10. History :

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination.

G.S.W. with scar ½" long mesh 2" post. to right ear.
Occurred on service. No disability at present.

11. What is the extent (state in percentages) of the disability in earning a livelihood in the untrained labour market? If there is more than one disabling condition, estimate the disability, due to each, and that due to all combined.

None.

12. Did the disability arise on or off duty? Not applicable.

13. Was a Court of Inquiry held? Not applicable

14. If the disabling condition had its origin before enlistment, has it been aggravated on service?

If the answer is in the affirmative, state in percentages, *to what extent the soldier is incapacitated by that aggravation.*

Not applicable.

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? No

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Not applicable.

17. Treatment (Case reports, general or special, should be secured and attached where possible).

Hospitals in France England.
Unit, M.H.C.C.

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

No.

19. Can the former trade or occupation be resumed? Yes.

20. Recommendations

Discharge as ~~this~~ service conditions are likely to aggravate chest condition.

9 Kly Rs Sunbeam.
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned ..... have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

W. J. Adair
Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

21. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

Agree

22. Is the soldier fit for

(a) General service,	(Category A)	(Yes or No).	No.
(b) Service abroad, not general service,	(" B)	(Yes or No).	No.
(c) Home service, (Canada only),	(" C)	(Yes or No).	No.
(d) Temporarily unfit,	(" D)	(Yes or No).	No.
(e) Unfit for service in Categories A, B and C,	(" E)	(Yes or No).	Yes.

23. It is certified that the soldier

(a) ~~Does require treatment~~. (Give the nature of the condition and of the treatment required and its probable duration).

(b) Does not require treatment.
(c) Should pass under his own control.
(d) ~~Should not pass under his own control~~.
(Strike out condition not applicable).

24. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

For discharge

Jno. Hunter Capt A.M.S. *President*
Jno. Hunter Capt A.M.S.
Evan O. Wilson Capt } *Members.*

STATION Guelph, Ont.

DATE Mar. 5th 1918

CMR*

APPROVED BY

DATE 8.3.18

W. Gardenaph.
for Assistant Director of Medical Services.

APPROVED BY

DATE .....

Director-General of Medical Services.

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.	Proceedings on Discharge	" B. 218.
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."

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.

1/6/39

B

This space to be for numbers

Proceedings on Discharge.

M

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

No. 730091.

Rank Private.

Surname Adair,

Christian Name William John.

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

Corps (Squadron, Battery or Company) 111th Battalion. "F" UNIT, M. H. C. C.

Date of Discharge March 22nd, 1918

Place of Discharge Guelph, Ontario

APR 3 1918

D30-A-166

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 23 years months.

Height 5 feet 5 inches.

Complexion Medium

Eyes Blue

Hair Brown

Trade Brass Finisher.

Intended place of residence (To be given as fully as practicable.) 75 Ainslie St., Galt, Ont.

Descriptive Marks

Birthmark side of 25¢ piece frontof middle of right thigh. Scar ½" long 2" post. to right ear.

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

Being medically unfit- Category "E"- Due to service.

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.

Very Good

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.)

Brass Finisher

M. F. B. 218.

(OVER)

100M.—1-17.
H. Q. 1772-39-113.

W.S.G. comp 281-19 [illegible]

E. R. J.

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

None

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

6. Medals and Decorations..... Entitled to wear one stripe of gold braid,

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).....Guelph, Ont. W Knowles Major

(Date).....March 22nd, 1918 for Commanding ....."F" Unit, M.H.C.C.

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).....Guelph, Ont. W. J. Adair (*Signature of Soldier.*)

(Date).....March 22nd, 1918 J. J. Gutherey 8/18 (*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) 2 years 118 days.

Total 2 years 118 days.

11. **Confirmation of Discharge.**

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

(Place).....Guelph, Ont.

(Date).....March 22nd, 1918 (*Signature*) W Knowles Major for.

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.)

All just demands have been received.

W. J. Adair

(OVER)

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned,.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the soldier to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
5. The nomenclature of diseases to be followed is that described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison and Sons.

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S, AND MEN

MEDICAL HISTORY OF AN INVALID

STATION London, Ontario. DATE December 13, 1917

1. (a) Unit Special Service #1 (b) Regimental No. 730091 (c) Rank Pte.
   (d) Surname A D A I R (e) Christian name William John
2. Age last birthday 23 Years Date of birth 15th November, 1894.
3. Enlisted at Galt, Ontario. on 24th November, 1915.
4. Personal description :—
   (a) Height 5 Ft. 5 In. (b) Weight 116 (stripped) (c) Complexion Medium
   (d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks Birthmark size of 25¢ piece front of middle of right thigh.
5. Address after discharge (for the use of the Board of Pension Commissioners.) 75 Ainslie St., Galt, Ontario.
6. Former trade or occupation Brass Finisher
7. (a) Service

	Years	Days	Periods From	Periods To
111th B'n, C.E.F.			24-11-15	8-10-16
17th B'n Reserve			8-10-16	13-10-16
35th B'n Reserve			13-10-16	11-16
4th B'n, C.E.F.			11-16	11-17
Special Service #1			11-17	13-12-17

   (b) Has he been Overseas? Yes.
8. Present disease or disability (use authorized nomenclature if possible). Shell Shock
   (a) Date of origin 9th April, 1917. (b) Place of origin France
   (c) Cause* Shrapnel
   *(Here include original disease or injury)
9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

This soldier was wounded by shrapnel behind upper part of right ear in April, 1917. Was in hospital six weeks. Since then he has had headache extending over region supplied by supra orbital nerves. This is of a dull aching character and troubles him on an average of three days a week. He also has dizziness in head on bending forward, with a feeling of falling forward. This will last for about ten minutes. There is a fine tremor in fingers of right hand. Knee jerks are exaggerated, particularly the left. Otherwise fit. Heart, lungs and other organs normal.

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

M. F. B. 227.
150M.-6-17.
1772-39-117.

649-a-3848
DEPT. OF MILITIA & DEFENCE
JAN -5 1918
MILITARY SECRETARY
O.M.D. No. 1 MILITARY DIST.
DEC 29 1917
MILITARY CANADIAN
JAN 5 1918
421-5-1-18
5-1-18

10. History;

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination

None.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

20% (Twenty Percent)

12. Did the disability arise on or off duty? On Duty

13. Was a Court of Inquiry held? Not Applicable

14. If the disabling condition had its origin before enlistment, has it been aggravated on service?

Yes..... No. t Applicable

(If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? Not Applicable

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Three Months.

17. Treatment (Case reports, general or special, should be secured and attached where possible).

Hospitals in France and England.

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

Yes.

19. Can the former trade or occupation be resumed? Partially

20. Recommendations

That he be transferred to "F" Unit for convalescence and treatment

W. T. Gallow Capt Canc

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned William John Adair have heard the description of my disability read, and am satisfied (~~or not satisfied~~) with it. (~~If dissatisfied, statement should follow.) I complain in addition of~~

William John Adair

Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

21. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

Agree but would add in (9) wound behind right ear well healed leaving scar ½" long and no apparent loss of substance of skull.

22. Is the soldier fit for

(a) General service,	(Category A)	(Yes or No).	No.
(b) Service abroad, not general service,	(" B)	(Yes or No).	No.
(c) Home service, (Canada only),	(" C)	(Yes or No).	No.
(d) Temporarily unfit,	(" D)	(Yes or No).	Yes.
(e) Unfit for service in Categories A, B and C,	(" E)	(Yes or No).	Yes.

23. It is certified that the soldier

(a) Does require treatment.
(b) ~~Does not require treatment.~~
(c) ~~Should pass under his own control.~~
(d) Should not pass under his own control.

(Strike out condition not applicable).

24. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

Transfer to "F" Unit for treatment and that his chest be examined by specialist as he has had recurring colds and now shows some rough breathing and some rales over both lungs.

APPROVED JAN 7 1918 A. Cox Capt for D.G.M.S.

W. T. Gallow Capt Canc *President.*

A. E. McLarty Capt. Canc *Members.*

E. Chapman Capt Canc

STATION London, Ontario.

DATE 18-12-17.

APPROVED BY

DATE

APPROVED DEC 28 1917 D. J. McKay Capt A.D.M.S.M.D. No. 1.

Assistant Director of Medical Services.

APPROVED BY

DATE

Director-General of Medical Services.

P. 559.

MARRIED OR SINGLE: Single.

PLACE OF BIRTH: Stayner. Ont. Canada.

NAME AND ADDRESS OF NEXT OF KIN: Mrs. Florence Adair.
75 Arnolie St Galt, Ont. Canada

RELATIONSHIP OF NEXT OF KIN: mother.

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ 20.00 EFFECTIVE (DATE) 24-11-15

PAYABLE TO: Mrs Florence Adair.
75 Arnolie St Galt Ont Canada

RELATIONSHIP OF DEPENDANT: mother

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 730091 RANK Pte. NAME Adair Wm John

IF IN PERMT. CORPS } WHAT UNIT — UNIT 111th

TRANSFERRED TO 35th Res. Bn. DATE 28.10.16 AUTHORITY B.O. 285

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO 4th Bn. DATE 16 Nov 16 AUTHORITY B.O. 271-13/11/16

PLACE OF ATTESTATION Galt Ont Canada

TRANSFERRED TO Pay II G. DATE 29.4.17 AUTHORITY G.R.B. 334 26.4.17

DATE OF ATTESTATION 24-11-15

TRANSFERRED TO British Hospital DATE 31-5-17 AUTHORITY A.R.

" " Epsom patients DATE 21-6-17 AUTHORITY A.R.

" " Pay a/c DATE 22-8-17 A.R. 1918

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE 1.1.16. Nil. 25-8-17

PAYABLE TO Mrs Florence Adair 75 Arnolie St Galt Ont Can RELATIONSHIP mother

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1.9.17 REASON Discharge to Canada

DISCHARGE DATE AND PLACE Canada 24/8/17. REASON AND AUTHORITY A.I. 71-1-14 10/8/17

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Checked by H Tillotson

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	L.d	REMARKS
1916 Oct'.														19 70	19 70									Balance from Canada			19 70									
1-7	7	10/-	7	00	7	1/-		70							7 70												20 00		7 40						
8-31	24		24		24			240							26 40	17th B. 17/12 B/10								9 73 ✓					9 73	24 07						
Nov 1/15	15		15		15			1 50						16 50															29 74	27 33						
16-30	15		15		15			1 50						33 00	925 30/10	989 8/11								4 87 ✓	4 87		20.		27 57	4 70		nil.			Left to 4th Bn B.O. 271-13/11/16
Dec 1/15	15		15		15			1 50						16 50													20.		20.	23 83 ✓					Struck off Strength. Refused By 4 Bn
16-31	16		16		16			1 60						17 60									C.R.B. 8604 20/1		13 08 ✓				13 08	28 35					Left to Hd Bn B.O. 271-13/11/16
			9 20					9 20																											
Jan	31	1/10	34	10										34 10	1398 8/1	1450 9/1	17th B. 17/12 B/10							26 ✓	26 ✓	15 ✓	3 ✓	30		30 67	3 98		3 98		
Feb	28	100/10	30	80										30 80	1535 29/1									27 61 ✓				30		27 61	40 17		40 17		
Mar	31		34	10										34 10	1640 21/2	1788 14/3								2 61 ✓	2 62 ✓										
															1565 8/4	1730 5/3								2 61 ✓	2 61 ✓			30		30 45	43 82				
Apr 1/18	28		30	80										30 80		31 7/4								26 2 ✓				20		22 62	52.				To Pay II G. 24/4/17
														250 70																198 70					Auth. G.R.B. 334 26/4/17.
✓ 29/30	2	✓	2	20										2 20																58 20					
May	30	✓	33	00										33 00														20		20	67 20				From British Hospital 31/5
			266	20										19 70.	285 90.									15 32	15 34	28 04		160.		218 70					

Sailing list 45 13/7/17 C/E Bal 11 76

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.	Acquittance Rolls 1: Date	Acquittance Rolls 2: No.	Acquittance Rolls 2: Date	Acquittance Rolls 3: No.	Acquittance Rolls 3: Date	Acquittance Rolls 4: No.	Acquittance Rolls 4: Date	Cash Payments 1	Cash Payments 2	Cash Payments 3	Cash Payments 4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
			266	20.										19 70.	285 90.									15 32	15 34.	28 04		160.		218 70.	67. 20.				
May 31/31	1	1 10/10	1.	10											1. 10													—		—	68. 30. ✓				
June 2/20	20		22	.											22 .													20		20	90 30				Trans. Epsom Patients 21/6/17
"	10		11												11			1134 1/4.							4 87. ✓					4 87.	76 43.				
July	31		31	10											31 10													20		20	90 53				
Aug	21		23	10											23 10													20		20	93 63 ✓				To pay 2L 22.8.17.
" 22/24	3		3	30											373 30															283 57	96 93				
Sept.																8229	23/8	Bux		631	1/5/17			4 87		9 73				14 60	82 33 ✓				Stopped 4/9/17

ASM. FORM REN'D ..... EFFEC. 4/9/17
DISCHARGED TO Can DATE 24/8/17
PAYBOOK VERIFIED Ex 24/8/17
Ex BAL. 26.36 L.P.C. REN'D
AUTHY. A. 71-1-4 10/8/17

Checked J. C. Hay Lt Co

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SER. ALLCE. ENG.
Oct	Balce FORWARD	~~82 33~~							82 33		
Oct				Ch. 10191. C.O.D. Bux. 8/9/17.	9 73						
				Drah 634. O.M. Hosp 27.7.17	48 67				23 93 ✓		
1918 Jany				Drah 116 1st Cold. 30.6.17.	7 30.						
				" 147 do. 15/8/17	4 86. 12 16				11 77		

Balance transferred to N. F. Branch Nil