REGIMENTAL DOCUMENTS

NAME ADAM WILLIAM REGT. NO. 89256 UNIT 7th Bde H. Q. FILE NO. 17130/19

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
2	ATTESTATION PAPER (M.F.W. 23, 133, or 51) 3	10 5 19	(Comp.) ~~to B.P.C.~~	~~22-5-19~~	~~B.P.C. Spec. 28C~~	DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103) 2					Category
	TRAINING HISTORY SHEET (M.F.W. 113) Record Sheet					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122) 1					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120) 1					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121) 1					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
3	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
1	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					Deceased
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	1603					
1	99 W 3212					
4	Misc					
2	Postcard					
	F.E. 3137					
	Pay Book & Band					

640

128826

W 2589
100M-11-18
(72-39-1377)

ORIGINAL.

ATTESTATION PAPER.

No. ~~89256~~ 89256

Folio. Dor

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? William Adam.
2. In what Town, Township or Parish, and in what Country were you born? Glasgow, Scotland.
3. What is the name of your next-of-kin? (father) Wm. Adam,
4. What is the address of your next-of-kin? Ashfield Cottage, Manse Rd, Bishaw, Scot.
5. What is the date of your birth? October 31 - 1887
6. What is your Trade or Calling? Carpenter
7. Are you married? no
8. Are you willing to be vaccinated or re-vaccinated? yes
9. Do you now belong to the Active Militia? G.G.F.G. Ottawa
10. Have you ever served in any Military Force? 6 yrs Army Service Corps. Scotland
    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

William Adam (Signature of Man).

E. Hulbell (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, William Adam, do solemnly declare that the above answers made by me to the above questions 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.

William Adam (Signature of Recruit)

Date March 22nd 1915 E. Hulbell (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Adam, 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.

William Adam (Signature of Recruit)

Date March 22nd 1915 E. Hulbell (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 Ottawa this tenth day of May 1915

Robt Pelton (Signature of Justice)
County of Carleton

I certify that the above is a true copy of the Attestation of the above-named Recruit.

W. R. Riordan Maj. (Approving Officer)

M. F. W. 23.
150 M.—12-14.
H.Q. 1772-39-841.

Description of William Adam on Enlistment.

Apparent Age 27 years 5 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 8½ ins.

Chest measurement: Girth when fully expanded 37 ins.
Range of expansion 3 ins.

Complexion Fair
Eyes Blue
Hair Light Brown

Religious denominations:
- Church of England
- Presbyterian X
- Wesleyan
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated.)
- Roman Catholic
- Jewish

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).

Tattoo left forearm – scotch thistle

Tattoo right forearm – sailor boy head.

scar left scrotum

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 22nd 1915 H. E. Bruneau

Place Ottawa Ont. Lieut. A. M. C.

Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

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

W. R. Riordan (Signature of Officer)

Date.....191 .

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge
Class "A" No. 13021

THIS IS TO CERTIFY that No. 89256 (Rank) Gunner

Name (in full) ADAM William enlisted in

the Ammution Colm 7th Brigade

CANADIAN EXPEDITIONARY FORCE at Ottawa on the 22nd

day of March 1915

HE served in France & Belgium

and is now discharged from the service by reason of ~~Demobilization.~~ Medical Unfitness.

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

Age 31 years

Height 5 ft 8 1/2

Complexion Fair

Eyes Blue

Hair Fair

Marks or Scars Scotish thistle on left forearm & Sailor right forarm

Wm Adam
Signature of Soldier

Date of Discharge

CLEARING DEPOT
MAR 26 1919
ST. JOHN, N. B.

H H Stuart
Issuing Officer MAJOR
O. C. Clearing Depot, St. John, N. B.
Rank

CLEARING DEPOT
MAR 24 1919
ST. JOHN, N. B.

Date 19

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M.F.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

Original not available

DUPLICATE. W. S. B. Class A

92431/[illegible]6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1

Army Form B. 103.

Casualty Form—Active Service.

APPROVED CORRECT. Canadian Record Office, Westminster Ho 7, Millbank, S.W.

Regiment or Corps 6 Howitzer. Brigade C.F.A.

Regimental No. 89256 Rank _____ Name Adam. William.

Enlisted (a) 22-8-15 Terms of Service (a) _____ Service reckons from (a) _____

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

Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked for France.		18-1-16.	Nom roll. d/16-3-16 E.M. Needy Lieut for Lt Col. i/c. Can. Records.
				Authority 12099 C.2 15989 reg 2.	
28/5/16.	5th C.F.A. Nom.Roll.	Struck off strength 6th How.Brig. Taken on " 5th C.F.A. On reorganization of estab.		21/5/16 22/5/16	Pt 2 ords d/ 7/6/16. " " " 7/5/16.
26/1/17.	Unit	Granted leave of Absence	Field	30/1/17	B213 Pt 2 O. No 28. 5/2/17.
10/2/17	Unit	Rejoined from leave	Field	7/2/17	B213 Pt 2. O. No 30. 19/2/17.
1-6-17	Unit	Attached to 2nd Div Train as loader	Field	6-6-17	B213 Pt 2. O No. 115 18/6/17
29-9-17	2nd Div Train	Ceases to be attached on rejoining Unit	Field	25-9-17	B213 Pt 2 O No [illegible]
29-9-17.	Unit	Proceeded on leave	Fld.	25-9-17	[illegible]
27-10-17	"	Rejoined from leave	Field.	19-10-17	" [illegible] 213
30-10-17	"	Attached 2nd Div Train	"	30-10-17	"
13-12-17	12th Ammu	Ascertained	A.T.S.	42 days. 13-12-17	C 1233 A36

(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.

Rep[illegible] Date	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.
16-12-17	Kolsen.	Asthma Adm	96 General.	16-12-17	C 2390 W3034
17-12-17	42 bbb.	✓ A.T.	31 A.T.	13-12-17 / 16-12-17	2738 C 2420 A36
23-12-17	96 Gen	SOS and posted to Can Arty Reg't Depot Witley. Bronchitis	HMAT Princess Elizabeth.	23-12-17	W3083 Pt 2 O No. 259.
					C.B. Johnston LIEUT. OFFICER i/c RECORDS CANADIAN SECTION G.H.Q. 3RD ECHELON
6-1-18	C.A.R.D.	208 from 5th Bde C.F.A.	Witley	23/12/17	Pt 6
					F. Hain Lieut for Lt Col i/c Records Ottawa
11-7-18	~~2nd C.C.D.~~	Attached to 2nd C.C.D.	Bramshott	8-7-18	Pt. II No. 162
29-8-18	OC. 2ndCCD	Ceases to be attached to 2nd C.C.D. on return to CARD ~~Res. Bn.~~	Bramshott	29-8-18	Pt. 2 D.O. No. 205 J.B. Cain Lieut for OC. 2nd CCD.

EYE, EAR, NOSE AND THROAT CLINIC.
Witley Camp, Surrey.

.....1919.

FEB 10 1919

R-D-G-

UNIT.....

Reg. No. 89256 Rank. Gnr. Name Adam W.

Diagnosis:-

Remarks:- O.M.C.C. (Double)
M.T.'s retracted
Concussion deafness.

HEARING:-	Rt.	Lt.		Rt.	Lt.
VOICE	10'	15'	RINNE		
WHISPER			WEBER		
WATCH			SCHWABACK		
			FORK: 256		
			FORK. 2048		
			BONE COND'N		

CATEGORY RECOMMENDED:- BT

He states

CONDITION WAS not PRESENT BEFORE ENLISTMENT AND HAS BEEN CAUSED BY SERVICE.

HAS ——— BEEN AGGRAVATED BY SERVICE.

Captain, C.A.M.C.,
Eye and Ear Specialist,
Witley Camp, Surrey.

8

Forms
I. 1237
12

Army Form I. 1237.

II

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	89256	Gnr	Adam	W

Year	Unit.	Age.	Service.
1918	R.F.A.		

Station and Date.	Disease Bronchial Asthma.
16 FEB 1918	Complains of shortness of breath at times pain in chest. States he has a choking sensation when he lays down at night; Coughs and Wheezes all night at times. Tachycardia go. Wheezing rales over both Bronchi. Breath sound harsh particularly ~~on~~ Rt. No Duty. No parades
19 FEB 1918	H.S. C.O.
26 FEB 1918	H.S. Board's Opinion
19 MAR 1918	Board recommends further convalescence.
25 MAR 1918	H.S. about the same. D 2 5
3 APR 1918	H.S. about same.
11 APR 1918	H.S. Improving
16 APR 1918	H.S. Pt 2 D 9
24 APR 1918	H.S. Improved. Pt 2 D 11. Sight Tachy. Asthma troublesome. Feeling better today.
30 APR 1918	H.S. Impr. Pt. F. Slight Tachycardia. Asthma ~~improved~~ still troublesome. Had board 7 weeks ago and was recommended for further convalescence. Employment Bl.
3-5-18	By S.M.B. — Bill likely to be placed in Category within six months (to have ears examined)
8 MAY 1918	Off Fit " no Fits.

Convalescent Hospital, Woodcote Park, Epsom.

*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.	

Canadian Division,
Convalescent Hospital,
Woodcote Park, Epsom, Surrey.

1918.

9 MAY 1918

For Ear Report Please.

Division...II... Hut...79....

CASES FOR EXAMINATION AND REPORT BY:-

(OPTHALMIC SURGEON.
(
(AURAL SURGEON.

AT COUNTY OF LONDON WAR HOSPITAL, HORTON, EPSOM.

Reg. No...89256..... Rank & Name...Gnr. Adam Wm.....

Complains of...~~Partial~~.....

.....O'Leary. ~~Captain~~, C. A. M. C.

QUESTIONS.	ANSWERS BY (~~OPTHALMIC SURGEON~~. (AURAL SURGEON.
(I) Does he need Hospital Treatment ?	(I) No.
(2) Will he be fit for Overseas ?	(2) Yes in suitable Category.
(a) With Glasses.	(a)
(b) With Treatment.	coll alk 1 ds.
(c) Is any prescription given for glasses ?	

REMARKS. Dry catarrh Rt. Noises. Deaf 60%

.....O'Leary Capt.
Signature of M.O., examining Case.

Cerumen Rt.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

District 3.

Name of Soldier Adam W.

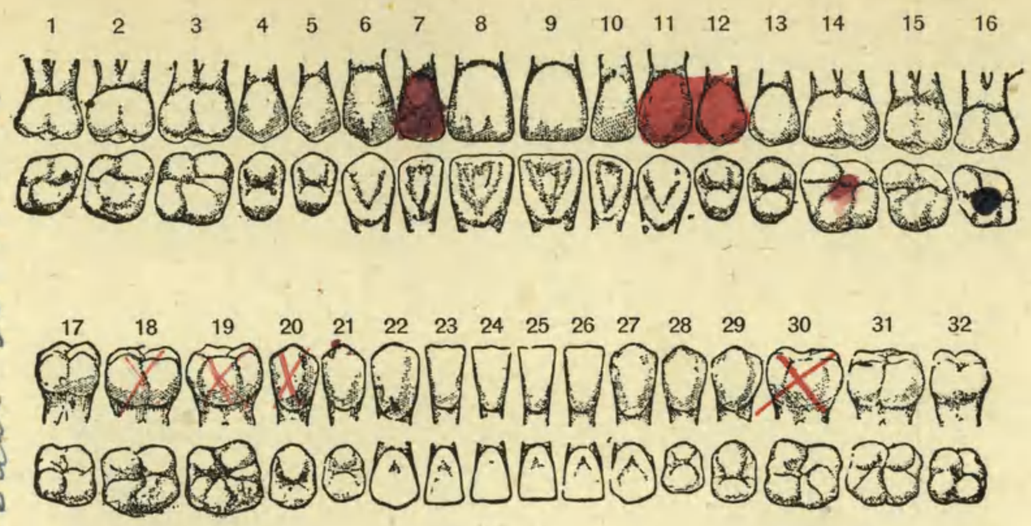
Regiment 23rd Bty.

Rank Gnr.

No. 892256

Northrop P.O. Ottawa

3 Sept. 20 - A 10-2



INSTRUCTIONS

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

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

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

	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	Operator	Military District	Remarks
Condition on first Examination	1919																					Lower (P. ~~Upper~~ Required)
	Sept 6th	1/14									4/19 20. 30						1/11		11-12	Capt H. S. Allen	3.	Cut to G.
	"																			A. Chamberlain	2	Bryp.
	" 19	1/16																		Capt W. F. Baird	3	
	" 19.												1/18.19 20. 30							A. Chamberlain	3	Complete.

I hereby acknowledge having received the above treatment.

Wm Adam
(Signature of Applicant)

M.F.B. 465.
200M.—6-18.
1772-39-950.

5438

321150

Medical Case Sheet

A&D No.	Reg. No	Surname	Christian Name	Age
1915	89256	Adam	W.	27
Date & Station	Rank	Unit	Service	
		31 Btry.	8/12	

Date & Station	Disease
Monte Banaglia Hosp.	Sprained Shoulder. 8/10/15
Oct 8th 15.	Complaint Pain in shoulder.
Shorncliffe	Prev. History

Never had any serious illness. Operation varicocele 1 year ago.

Pres History

While walking from Ollerpool to Westringhanger. automobile trying to pass motor cycle swerved & ran into patient one of mud guards struck him on left knocking him down striking ground with his shoulder.

Phys Exam

Nothing abnormal found except tenderness on movement

Heart & lungs neg

G. Ernest Carter Capt RAMC

Moore Barracks Hospital

Shornaliffe Oct. 11th. 1915

From Officer i/c

Moore Barracks Hospital

To Officer Commanding

C.F.A. (3rd Batty).

Medical History Sheet

Herewith please find attached Medical History Sheet of 89256 Wkr. Adams W.

who was discharged from this Hospital to-day.

Kindly acknowledge receipt hereon.

Wallace A. Scott

Lieut-Col C.A.M.C.
Officer i/c Hospital

Received above mentioned paper. Wm Adams

CLINICAL CHART.

(To be attached to Case Sheet).

Army Form B 181

Corps 31st Bty. Military Hospital

No. 89256 Rank and Name Adam W. Age Service

Disease Sprained shoulder. Date of admission Oct. 8th — 15 Date of discharge Result

Dates of Observation	8	9	10	11	12	13	14	15
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.
107°								
106°								
105°								
104°								
103°								
102°								
101°								
100°								
99°								
98°								
97°								
Pulse per Minute	80							
Respirations per Minute	18							
Motions per 24 hours								

Wt. W. 5449-626. 200m. 9/14. J.J.K. & Co., Ltd. Forms B 181/3.

Signature J. E. McCarthy Capt In Charge of Case.

EYE, EAR, NOSE & THROAT CLINIC.

Witley Camp, Surrey.

SEP 16 1918

.....1918

UNIT.....

Reg No. 89256 Rank ..... Name Adams W.

DIAGNOSIS :- Concussion deafness (Both ears

REMARKS :- M.T.S. retracted
No active disease

HEARING:)

	Rt.	Lt.		Rt	Lt.
VOICE	6'	15"	RINNE.	+	+
WHISPER.			WEBER. to Rt		
WATCH.			SCHWABACK	—	—
			FORK 256.		
			FORK 2048		
			BONE COND'tn.		

CATEGORY RECOMMENDED :- B II

TREATMENT RECOMMENDED :-

RETURN FOR FURTHER TREATMENT AND EXAMINATION OF.....

AND BRING THIS PAPER.

.....Capt, C.A.M.C.
Eye & Ear Specialist, Witley Camp,
Surrey.

D.M.S. 1375.

Medical Examination upon leaving the Service of an Officer fit for general service or a Soldier fit for duty.

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

Rank Gunner Name William Surname Adam

Unit or Corps C.A.R.D. (If a soldier) Regtl. No. 89256

Born at Glasgow, Scotland on, date Oct 31. 1887

Signature (for identification) William Adam

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

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

None

Weight 145 lbs.
Height 5 ft. 8 ins.

2. NUTRITION AND DIATHESIS?

Good

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

3. NERVOUS SYSTEM?

Nil

4. RESPIRATORY SYSTEM.

Nil

5. HEART?

Abnormal Sounds? Nil

Abnormal Size?

Pulse Rate? 92 Intermittence or irregularity?

6. ARTERIES.—Any hardening?

7. DIGESTIVE SYSTEM?

8. GENITO-URINARY SYSTEM?

Urinalysis—S.G.? 1020 Reaction? acid Albumen? nil Sugar? nil

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

V-R.E 6/12
V-L.E 6/6

~~Hons [illegible]~~
Eye condition same as on enlistment
~~[illegible]~~

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

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

Examined at ..... Signed ..... M.O.

Date ..... Signed ..... M.O.

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

285

Can Res. Bgd.

~~Squadron~~, ~~Troop~~, ~~Battery~~ and ~~Company~~ Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.
[533] W13871/604 400m 3/15R-1 93 56

Forms B. 121. 39.

Number of Sheet One

Regiment of 3rd Battery

Signature of O. C. ~~Company~~ Battery N. R. Hurdow Major

Regimental Number and Name		Enlistment	Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No. 89256	W. Adam	Age on 28 years months	Carpenter	
Joined 7th Bgd	Date 22-3-15	Place and Date of Enlistment: Ottawa 22-3-15	Religion Pres	
Joined 3rd Bty	Date 12-7-15			
Joined	Date	Period of with Colours years. with Reserve years.	Place of Birth Glasgow Scotland	
Joined	Date			

Place	Date of Offence	Rank	Cases of Drunkenness.	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
		Joined 7th Bdge. 22/3/15 — transferred to Can. Res. Bdge. 12/7/15 without papers.							

To be carried over

Army Form B. 121.

Brought forward

A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

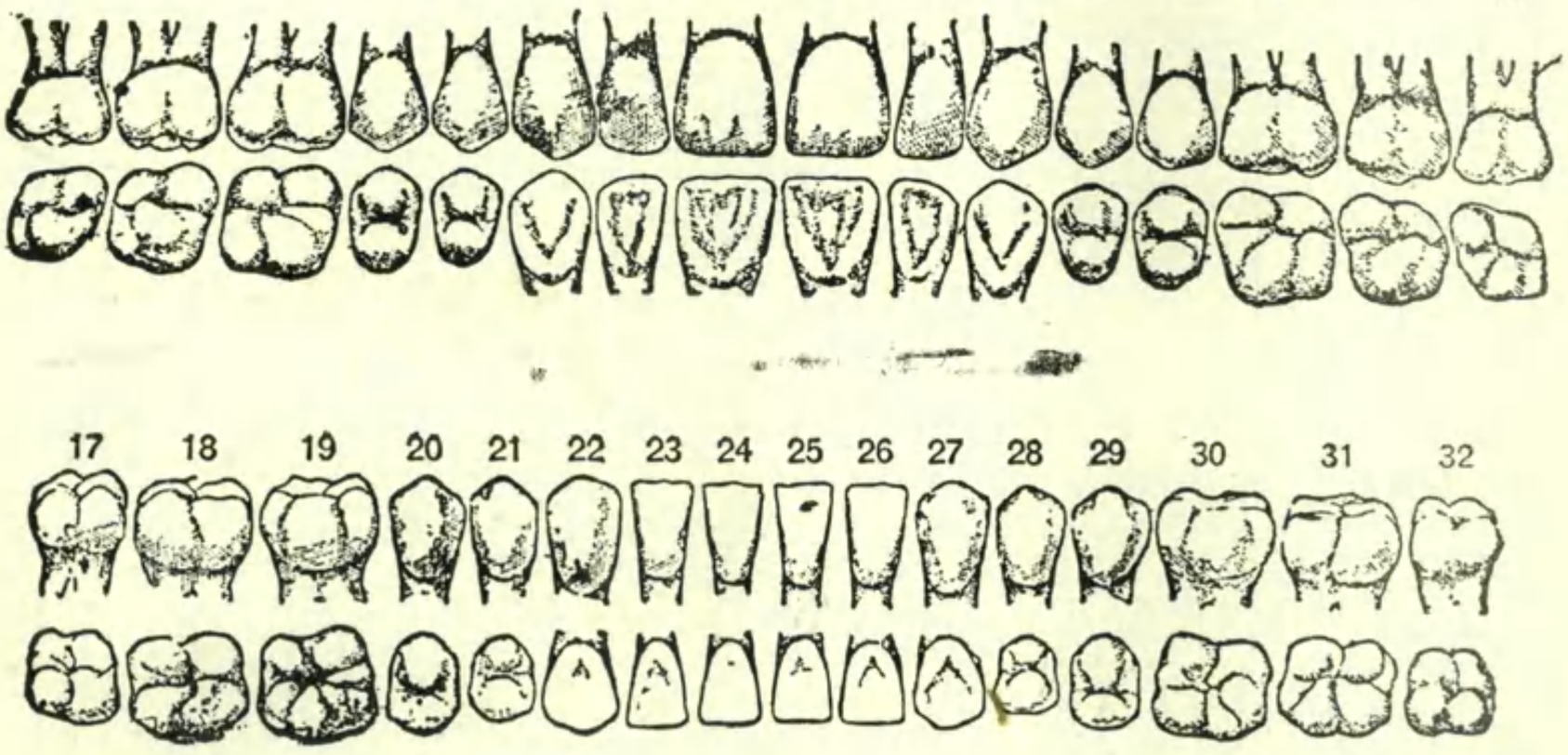
DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

NAME OF SOLDIER (Block Letters) ADAM. W.

REGIMENT C ARD RANK Gnr. No. 89256

Date of Examination in England 5-2-19 | Date of Examination in France



PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS
3. CROWNS
4. DENTURES nil
   - (*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
- (*c*) In France Yes

Signature of Dental Officer E.N. Simmons Capt

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
24.2.19	CARD	S.O.-C. to Buxton for ~~B.T.~~ for Canada.	Witley	Coquerel Lt for O.C. CARD	P.T. II O.O. No. 57
25.2.19		Attached C.D.D. Buxton for return to Canada, Part 11 Order No. 47			
15 MAR 1919		Ceases to be attached C.D.D. Buxton on embarkation for Canada.			
	Embarked	Mar 15th	J. W. Lock Commanding Canadian Discharge Depot.		Lt. for Lt. Col.
	S. S. METAGAMA				
	Debarked	Mar 24th			
26.3.19	Kingston	S.O.S. Demobilized on DEMOBILIZATION	St John Kingston	26.3.19	R.O. 1420

MAJOR
District Record Officer, M. D. 3

Army Form B. 103. Sheet 2 Regimental Number 89236

Casualty Form—Active Service.

Regiment or Corps CARD

Rank Gnr Surname Allan Christian Name William

Religion — Age on Enlistment ..... years ..... months

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

Date of promotion to present rank ..... Date of appointment to lance rank .....

Extended { ..... / ..... } Re-engaged { ..... / ..... } Qualification (b) .....

or Corps Trade and rate .....

Occupation ..... Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked ...			
30-1-18	C.A.R.D.	Granted Permission to marry	Witley	28-1-18	G.O.R. 30
11-7-18	do	Con. Cmt. 2 C.A.D. B'ehott	do	8-7-18	G.O.R. 192
31-8-18	do	Attached to Depot Company	do	30-8-18	G.O.R. 243
3-9-18	do	Cmt. Can. School of Mg.	do	2-9-18	G.O.R. 246
			J. M. Jackson LIEUT. OFFICER I/C RECORDS		
4-9-18.	C.S. of G.	Attached from C.A.R.D.	Witley.	2-9-18.	G.O.R. II #247.
4-1-19.	C.S. of G.	Ceases to be attached from C.A.R.D.	Bordon	4-1-19	G.O.R. II #4
			Gerald H. Watts C.S. of G.		

(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) Signaller, Shoeing-Smith, &c.

W. 3527—M2808 1000m 7/17 (35686) [illegible] Forms B./103 E/1656. [P.T.O.]

2PM.

Regtl. No. Rank and Name 89236 Gr. Adamth Corps C.A.C.

Disease Bronchiae, Asthma Hospital M.C.H. Epsom

To Officer i/c Laboratory. ~~Ward~~ Div II - 79 - Death

Please carry out an examination of the accompanying specimen of Sputum

with special regard to — 179 Case —

Date 4-5-18. O.C. Maj Cane

O. i/c Ward.

LABORATORY REPORT.

No T B found

Date of Examination May 8. 1918

W.3212. 50M-4-4-18.

W.E. Sinclair Capt

O. i/c Laboratory.

Report No. _____ Army Form W. 3212.
(In books of 100.)

Regtl. No. } 89256. Gnr. ADAM. W. Age 31 Corps C.A.R.D.
Rank and Name }

Disease Asthma Hospital _____

To Officer i/c Laboratory. Ward _____

Please carry out an examination of the accompanying specimen of SPUTUM

with special regard to ASTHMA

Nos. of previous Reports (if any) _____

In Pathological Reports a résumé of clinical history, treatment or progress since last report should be given.

Date Feby 10th/19 Capt. C.A.M.C.
O. i/c Ward.
REGIMENTAL DEPOT GROUP

LABORATORY REPORT.

No TB found
No Curshman's spirals or
Charcot-Leyden Crystals found.
Sputum contains mucous
and pus.

Canadian General Laboratory
10.2.19

Date of Examination _____

O. i/c Laboratory.

(S.O. 1452) W. 5750/P821. 6,000 Bks. 3/18.—McC. & Co., Ltd., Ldn.—

10-3-10

Envelope 25252

R—122.

Rank | Name ADAM William | Reg'l No. 89256

Unit 3rd Res.Batty | If in perm. Corps, What Unit? | Married or Single Single

Place and Date of Enlistment Ottawa. 22nd Mar.1915 | Place of Birth Glasgow. Scot.

Name and Address, Next-of-Kin ~~Wm.~~ Mrs E. Adam A.S.P. 14052. d/-5/7/16

Ashfield Cottage. Manse Rd. Wishaw. Scotland. | Relationship ~~Father.~~ WIFE

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

N/E. R.B. No. 28027
File R.
Category

Discharge, Date and Place | Reason | Character

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
July 12th.	O.C. Res Bde.	Taken on from 7th Bde	Shornecliffe	10.7.15	Part II O
27.9.15	"	Trans. to 8th Howitzer Bde	"	1.10.15	" 164
1.10.15	O.C. 8 Howr	Taken on Sh. 31st Battly	Otterpool	1.10.15	" 1.
28-10-15	Gen Med.	Will be known in future as 6th Howr Bde and numbered 23rd Battery.			RO 3208
11-11-15	O.C. 6 Howr.	A.W.L. { 4 days Pay & W. 8 " " O.C. Bde. all Pay Withheld except 1/- a day.	Otterpool	11-11-15	Pt II O. 37
16.3.16	"	Embarked for France.		18-1-16	Nom Roll 16.3.16
7.6.16	6th Bde.	S.O.S. posted to 5th Bde C.T.A.	Field	21.5.16	P II. O. 31
7-6-16	5th Bde C.T.A.	S.O.S. from 6th Bde C.T.A.	" "	22/5/16	" " 39
18.6.17	"	Attchd to 2 Div Train as loader	"	6.6.17	" 115 + 2 D T Pte Lee 18/6/17
6.10.17	2nd D T	Ceases to be attd " "	"	25.9.17	" 67 + 5th Bde Pt 195 5/10/17

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					
18.12.17	5th Bde	Adm to 4 Can Fld Amb	Gnr	Fld	13-12-17	C&A 120 (Asthma)
28.12.17	"	Jfd 26 Gen Hosp		Etaples	16.12.17	" 127
"	"	S. S. S. & C.A.R.D		Field	23.12.17	PC 259 & PII 6 of 6-1-18 CARD
31.12.17	"	Adm 1st W Gen Hosp		Liverpool	23.12.17	CRB 129
30-1-18	CARD	Granted permission to marry	GNR	Witley	14-1-18	PII 30
11-7-18	do	On Command 2nd CCD.	"	"	8-7-18	PII 192 & PII 162 of 11/7/18 2nd CCD
31.8.18	"	Ceases O/C to 2nd CCD	Gnr	"	30-8-18	— 243
26-2-19	"	Proceeded to Buxton for M.W. 3.	"	"	24-2-19	.. 57.
		To Canada D 7-6-2			15 3/19	
26.7.	"	PC 057 amended to Read O/C to C.D.D. Buxton not S.O.S.	"	"	26.2.	" 205
		S.O.S To CANADA			15-3-19	
		O/C P.S.D.O.			25-7-19	

9AM

Regtl. No. Rank and Name 89236 Gnr. Adam W. Corps C.F.A.

Disease Bronchial Asthma Hospital M.C.H. Epsom.

To Officer i/c Laboratory. ~~Ward~~ Div. II — 79 — Dal.

Please carry out an examination of the accompanying specimen of Urine.

with special regard to 179 Case.

Date 4-5-18. O. i/c Maj. Cane Ward.

LABORATORY REPORT.

Color = Amber
React = Acid
sp. gr. = 1028
alb. = neg
sugar = neg

Date of Examination May 6

Thos Lea Capt
O. i/c Laboratory.

W.3212. 50M-4-4-18.

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URINALYSIS REPORT
(for Board)

Reg. No. 79256 Rank Gnr.

Name Adam W. Unit CFA B17

Sp. Gravity 1.020

Reaction acid

Albumen nil

Sugar nil

Microscopic

Canadian General Laboratory
6 - FEB. 1919
WITLEY

Capt. C.A.M.C.
for Major C.A.M.C.
O.C., Cdn. General Laboratory.

A—305. 6.

Ref. No. 11340.

MILITIA AND DEFENCE

ASSIGNED PAY.

9047

To whom Mrs. W. Adam.

Address ~~C/o Post Office~~.,

~~Wishaw~~,

~~Scotland~~.

Rate ~~$25.00~~ per month. 20.00 from May 1. a.l.p. 8/5/16.

Date to Commence 1st April 1916.

By whom assigned Adam., William.

Regtl. No. 89256.

Rank Gunner.

Corps &c. 6th Howitzer Brigade. C.F.A.

(Original Unit----Res. Brigade. C.F.A)

A.P. 1 & 2 cheques and form forward forthwith

PAYMENTS.

	Month.	Year.	Cheque No.	Amt.	Pay Sheet Deduction.	File 14082 REMARKS.
	Jan.	1916				
	Feb.					
	March					
	Apl.		34	25—		Refund 2/7/16
	May		26037	25		Refund 3/7/16
	June		53540	115		New address 4/7/16 LEB
Cancelled	July		~~85548~~ 96508	~~15~~ 20		Ashfield Cottage
Cancelled	Aug.		~~118050~~ 129537	~~20~~ 20		Mause Road
	Sept.		151556	20		Wishaw
	Oct.		187556	20		Scotland
	Nov.	165.00	224555	20	$165.00	
	Dec.		265061	20		
	Jan.	1917	306566	20		
	Feb.		347067	20		
	March		390070	20		
	April					
	May					
	June					
	July					
	Aug.					

P—56

Rank Gr Name ADAM William Reg'l No. 89256

Unit 3rd Res.Batty If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Ottawa. 22nd Mar.1915 Place of Birth Glasgow. Scot.

Name and Address, Next-of-Kin Wm. Adam

Ashfield Cottage. Manse Rd. Wishaw. Scotland. Relationship Father.

Assigned Pay Monthly $25.00 from 1 Apr. 16 Payable to Mrs W. Adam. c/o Post Office, Wishaw, Scotland

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

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	Balance	Remarks, Casualties, etc.
1915 29 June	31 Aug.	64	1.	64.	64	.10	6 40		70 40			46 22			46 22	24 18	
1 Sept.	30	30	.	30	30	.	3.		33.			31 63			31 63	25 55	
1 Oct	31	31		31	31	"	3 10		34 10			31 63			31 63	28 02	
				125			12 50		137 50			109 48		4 40	109 48		4 days Rlw.
1 Nov.	30	30	"	30	30	"	3		33			24 33		8 80	37 53	23 49	8 " Dekahon $37
1 Dec.	31	31	"	31	31	"	3 10		34 10	57	59	19 46			19 46	38 13	
1916 1 Jan	31	31	"	31	31	"	3 10		34 10	72	23	6 61			6 61	65 62	
1 Feby	29	29	"	29	29	"	2 90		31 90	97	52	5 22			5 22	92 30	
1 March	31	31	"	31	31	"	3 10		34 10			2 62			2 62	123 78	
				277			27 70		304 70			167 72		13 20	180 92		

Checked R.H.L.

BALANCE TRANSFERRED TO NEW LEDGER.

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

FORM D M S 1300

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
ADAMS	W.	89256.

RANK	UNIT	CO.	TROOP	BATTY.
Gnr.		CA.5B.		

HOSPITAL	DATE OF ADMISSION
4 C.F.AMB	13-12-17.
1. 26 Gen Hosp Eliphus 1st welgan. Zazbdanlarg. L'pool	HOSP. 16-12-17 23. 12. 17
2. Mil Hosp Epsom	HOSP. 16. 2. 18.
3.	HOSP.
4.	HOSP.

DIAGNOSIS

1. Asthma.

2.

3.

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

plio. 8. 7. 18.

DATE

DISPOSITION

CL. 19-12-17 A12U.
29-12-17 A127-4
7. 1. 18. B179 O.
19. 2. 18 B171-8.
15. 7. 18 B. 293/2.

REMARKS

EPITOME OF HOSPITAL TREATMENT

HOSPITAL	ADM.
1.	
2.	
3.	
4.	
5.	
6.	
7.	

ADAM, William 89256
Gnr.
C.F.A. 649-A-12806

medals desp.

cross widow:- Mrs Elizabeth Adam
30 Ivanhoe Crescent
Wishaw, Scotland

(mother dead)

June 34

REGT'L No. 89256

H. Q. FILE No. 649.

NAME Adam, W.

RANK AND COPPS Gnr. Can. Art.

CABLE		NATURE OF CASUALTY
NO.	DATE	

FOLLOWS

NO.

FOLLOWS

L. L. 26438. M. & D. 8207.

M. F. W. 42—50M.—8-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A120.	# of Can. Fd. Amb.	13-12-17	Asthma
B129.	1st W. Gen. Jazakerley	23-12-17	Asthma
B171.	2nd Mil. Com. Liverpool W. Coll. Repon	16-2-18.	"
B293	Discharged	8-7-18	" "

Form R. 149.
7106—250m—7/2/17.

WILLIAM

Name ADAM Rank Gnr Reg. No. 89256

Unit 145 Bde A.F.C.

Next of Kin MRS. E ADAM
ASHFIELD COTTAGE, MANSE RD., WISHAW, SCOTLAND

Date 1914	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
13-12	4 Con Hd Quarts		Asthmatic	A120		10102
16-12	26 G Hpe Staples		do	A127	HD	17544
23-12	1st West. G.H. Liverpool		do	B129		9048
16-2	66 Hpe Warwick		do	B141		12655
8-7	Discharged		do	B293		6500

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

Y(C) 303. CARD NO.

SURNAME. Adam

CHRISTIAN NAMES William

REGL. No. 89254 RANK Gr.

UNIT Amm Col. 7th Bdge. R.

FORMER CORPS G. G. F. G.

FOLL.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Adam, William

RELATIONSHIP TO SOLDIER Father

ADDRESS Ashfield Cottage,
Manse Road, Thisha~~m~~w, Scotland

(Also Mrs Elizabeth Adam of same address as N/K.) (Auth. H.Q. 54-21-38-1 July 1916)

COUNTRY OF BIRTH Scotland, Glasgow DATE

D/S 29-6-15 146

PLACE OF ATTESTATION Ottawa Ont. Can DATE May 10, 1915

Sailed SS. 9/8/15. SS. Metagama.

R/C 24. 3-19 288/4 Gnr. Y(C)

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

No. | Rank Pte. | Name Adam. Wm.

T. O. S. | Unit 52nd Regt. (Prince Albert vol.)

M. D. # 10

Paid From	Paid To	Sig. or Rec't	Promotions, Transfers, Discharges, Etc. — Particulars	Authority
1915	1915			
Jan. 15	Jan. 31	✓	1 day sick.	Jan. paylist.
	Feb.	✓	on 46th Bn. paylist	
Mar. 1	Mar. 15	✓		

No record

UNIT SAILED
OCT 23 1915

MOORE BARRACKS, CANADIAN HOSPITAL, SHORNCLIFFE.

ADMITTING CARD.

Regt. No 89256 A. & D. No. 6438

Rank Cpler

Name Adam W.

Corps Stoney Bdge - 31st Batty. 8/12

Religion Presby Age 27

M. H. Rec'd 8-10-15 M. H. Requested M. H. Ret'd

Disease Sprained Lt Shoulder

Admitted 8-10-15

Discharged 11-10-15

Place in Hospital 3.

Transferred

Results

P.T.O

REMARKS:

No. RANK Gunner. NAME Adam. Wm

T. O. S. UNIT 25th Battery 7th Bdg. C. F. A. C. E. F.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915-	1915-			
Mar 23	Mar. 31	✓		
	apr	✓		
June	May June 24	✓		

Remedial Treatment Gymnasium,
38 Canadi[illegible] Hospitals and
Com[illegible] Depots.

LEAVE THIS BLANK.

Place: 2nd CCD

Regt. No. 8756 Rank Gnr Name Adam W

Unit CFA Age 31 (Adm. 21.1.18

Division Hut Date of (Disch.

DISABILITY. Asthma, Otitis media
Date. BM as left.

CLASS. Lung.

MACHINES.

Hours of Attendance, a.m.

p.m.

REMARKS. Shortness breath. Dam

R.T.G.1. 20M-30-4-18. P.T.O.

LEAVE THIS BLANK.

PROGRESS, Notes.

12-8-18- Bath, Dance.

19.8.18- for detail

DISPOSITION.

Capt.

Officer i/c Gymnasium.

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. Triplicate 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. 129)
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 Statement Q.M.G. Form (D.O.S. 2). and Clothing
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B.64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group 6
Checked by No. 4
O.S.H.
Date 13.3.19.

29 6/15 - 146
9-8-15

G.

Military District 3

SHORT FORM.

PROCEEDINGS ON DISCHARGE. Next of Kin Wife.

(Demobilization.)

1. No. 89256 — War Service Badge Class "A" No. 130211
2. Rank. Gunner.
3. Name. Adam William
4. Unit. C.A.R.D. 4th Bgde Am. Co.
5. Date of Discharge 26 MAR 1919 Place ST. JOHN, N.B.
6. Reason for Discharge med. unfit on DEMOBILIZATION Cat. B.ii
   Trade. Carpenter — Occupational Group. 2
   Service in France. 2 years
7. Authority. RO. 1430 — Embarked Mar 15th S.S. METAGAMA — Debarked Mar 2[illegible]
8. Proposed Residence after Discharge c/o Mrs D. Elder, Station Rd, Wishaw, Scot. Auth L 15-4-20 [illegible]

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.? 39

Discharge Jan 3-34 6x9 Q 12806

Wm Adam
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Medical Documents Forwarded to ~~S.C.R.C.~~ B.P.C. on Date MAY 2 1919

Place

Date

CLEARING DEPOT MAR 24 1919 ST. JOHN, N.B.

H H Smith MAJOR
O. C. Clearing Depot, St. John, N. B.
Signature
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

XC. Comp. 22/10/19 [illegible]

AUDITOR JEM | PAYMASTER

M. OR S.

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

REGT. NO. 89256 RANK Gnr. NAME (IN FULL) ADAM William (BLOCK LETTERS SURNAME FIRST)

ORIGINAL UNIT C.E.F. 7th. Bde. Cam. Coy. IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 22-3-15 | TRANSFERRED TO | DATE | AUTHORITY

NEXT OF KIN Mrs. E.W. Adams, RELATIONSHIP Wife

ADDRESS c/o Bank of Commerce, Bank St., Br. Ottawa, Ont.

IS SEPARATION ALLOWANCE PAID? Yes Paid in England Stopped 1-4-19. DATE EFFECTIVE

TO WHOM PAID Mrs. E.W. Adams, RELATIONSHIP Wife

ADDRESS c/o Bank of Commerce, Bank St. Br. Ottawa, Ont.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Gnr. William Adam, Canadian Bank of Commerce, Bank St. Branch, Ottawa, Ont.		

ASSIGNED PAY $ 15.00 per m. DATE EFFECTIVE Employee's account stopped 1-4-19.

PAYABLE TO Mrs. E.W. Adams, RELATIONSHIP Wife

ADDRESS c/o Bank of Commerce, Bank St., Br. Ottawa, Ont.

ANY CHANGE IN ASSIGNEE OR ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED. DATE | EFFECTIVE

A-602

DISCHARGED PLACE Ottawa DATE 27-3-19. REASON Demob. AUTHORITY | IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT							43.	78	43.	78																									43.	78	Returned "Not Found" Bal. per Eng. L. & C.,
March	30	1 10/11	33.	00	35. 70.	50 50			138.	50							4.	87	9 5	73 50	162.	18					3.	30			161. 3.	78 30	3.	30			Clothing Alice. and 1st Payment W. S. G. Pay to Estimate date of discharge. Advances in England. Boat Money, Train Money. Overpaid 3 days on discharge.
			W. & Y.	S. A.							War Service Gratuity						W. & Y.	S. A.																			
183 days at minimum			430.00	180.00													70.00	30.00									3.00				170		280		150		1st Pay't. W. & Y. S. A. (2-23 06 dg. 2nd " W. & Y. 22.33
																	70.00										3.00				300		210		90		3rd " S. A. 28/5/19 # 337006 # 337.87 Balance as above.
																	66	70	57								3.30				400		140		60		27/6/19 938263-264.
																	70		30												500		70		30		25/7/19 # 953607-08
																	70		30												600		—		—		24/8/19 1300129 30

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY	* ENGLAND OR ~~CANADA~~	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.	NAME:- ADAM Wm
EFFECTIVE DATE:- ~~1/5/18~~ 1/7/18		EFFECTIVE DATE:- 30/5/18		NUMBER:- 89256
AMOUNT:- ~~20.00~~ 15.00		AMOUNT:- ~~25.00~~ 30		

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

~~Mrs D. Adam. (Wife)~~
~~Ashfield Cottage, Manse Road~~
~~Wishaw. Scotland.~~
~~Effective 1/7/18~~
Mrs Elizabeth H. Adam (Wife)
Station Road.
Wishaw. Scotland.

Same.

S.A. & A.P. Trans to Canada 1/4/19 P857

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY X	DATE EFFECTIVE	RANK OR APPOINTMENT
		Gunner

UNIT AND TRANSFERS

ORIGINAL UNIT:- 3 Res Bty

DATE ACCOUNT FIRST OPENED

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			C.A.R.D
	Cpl		Can Sec

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
7/1/19	3894	CRA	19 47				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- Disch to Canada 28/1/19 AR 2889 Witley 1/2/19 to Witley WD3 C.Bal. 43.78

MONTH	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	Bal for								96 65	45	
Apr	GB	33		A 40203 GB 22			20		106 65		
		33					20				
May	Gnr. P.	34 10		B3899 £4-2-2.			20				
				~~Awar~~ AR 2767 v3/4/18 Epsom	4 87						
				AR 2096 v7/5/18 "	4 87						
				" 1834 v7/5/18 "	48 67				62 34		
		34 10			58 41		20 -				
June	Gnr P	33 -		B27004 AR. £4-2-2.			20 -		75 34		
				B27008 SA £5-9-6 30/5/18 to 20/6/18							26 62
				AR 5214 27/6/18 Epsom	4 87				70 47	45	
		33 00		B9146 v £84/5.	4 87		20 00				26 62
July	Gnr	34 10					15		89 57		25
	S.F. 8/1/18 - 20/1/18 12 days 2 R.D. 1 v 3 CCD 11.7.18	8 16		AR 509. Epsom. 8/1/18	48 67 -				46 99		
				2865 2 CCD v 6/1/18	2 67				46 99		
		42 86			51 34		15				25
Aug	Gnr	34 10		C29101 £84/5			15		66		25
				AR 3338 ~~CCD~~ 2 CCD 14/1/18	9 97						
				3654. 2 CCD v 1/8	9 73				46 39		
		34 10			19 70		15				
Sept	Gnr	33		C8900 v £84/5			15		64 39		25
				AR 4832. CRA 25/9	9 73				54 66		
		33			9 73		15				25
Oct	GB	34 10		D40010 £84 5			15		75 76		25
				5280 CRA 9/10/18	4 99						
				6108 " 30/10/18	9 73				59 04		
		34 10			14 72		15				25
					Forward						

NUMBER 89856 RANK Lpr NAME ADAM Wm

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918									59 04	45	
Nov	CPS	33		530769 f 11-6/-			15				40
Dec	CPS	34 10		852 CRA 13/11/18	487				115 24		
1919 January	"	34 10		538608 Lg. H. 11			15				30
				1471 CRA 15/11/18	4380						
				687608 Lg. H. 11			15		66 57		30
		101 20		akpsa	4867		45				100
Feb.		30 80		Feb. 790008 Lg. H. 11			15		82 37		30
	Intan Def. Pay 8/2/19	5 61		1958 9/1 Burdon	973						
				Mch. 790009 Lg. H. 11			15		57 64		30
									63 25		
				3894. 6/r CRA	1947						
				3335 Burdon 27/r	973				34 05		
		36 41			3893		30				60

19.47
38.17 Cr.
56.7
43.78

SOS Can 17/3/19. D 6.

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature
Mar.1915.	Innoculated good Ottawa and Barriefield.
Jan.1/1915.	Vaccinated X Barriefield.

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

I certify the foregoing to be a true copy of an original entry in Medical History Sheet of this man.

.....
for the Officer in Charge of Records
C.A.M.C.
Canadian Contingents.

PC. 8 9 2 5 6

DUPLICATE.

ARMY FORM B. 178.

To be used (*a*) for recruits enlisting direct into the Regular Army and (*b*) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname A D A m *Christian Name* W

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Glasgow County Scotland

Examined ... ... on 22nd day of March 1915. at Ottawa

Declared Age ... ... 28 years days.

Trade or occupation ... Carpenter

Height ... ... 5 feet 8 inches.

Weight ... ... 145 lbs.

Chest Measurement: Girth when fully Expanded 39 inches. Range of Expansion 3½ inches.

Physical Development ...

Vaccination Marks: Arm ... Right Left; Number ... 2

When Vaccinated ... As a child

Vision ... ... R.E.—V= L.E.—V=

(*a*) Marks indicating congenital peculiarities or previous disease ... (*a*)

(*b*) Slight defects but not sufficient to cause rejection ... ... (*b*)

Approved by (*Signature*) H.W.Wookey,

(*Rank*) Capt. M.O. C.F.A.

Medical Officer.

Enlisted ... ... at Ottawa on 22nd day of March 1915.

	Corps.	Regtl. No.
Joined on Enlistment ...	Can Res.Battalion.	8 9 2 5 6
Transferred to		

Became non-effective by

on day of 191 .

(*Signature*)

(*Rank*)

This Medical History Sheet has been compared with the corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.

for Officer in Charge of Records
Canadian Contingents.

(5506.) W. 14971/M. 89. 750m. 1/16. C.P., Ltd

Forms B 178 39

P.T.O.

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
Moore Barracks Hosp.	8	10	15	11	10	15	Sprained shoulder.	4	Cured	G.E.McCartney, Capt.

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature
Mar. 1915	Innoculated good Ottawa & Barnefield
June 1 1915	Vaccinated + Barnefield
16-7-17.	TAB/2 abbt.
19-4-18	TAB/1 E.G.
Epsom 18-6-18.	Asthma. inflamation Middle Ear Right and left B^III unlikely to be raised in category within six months Temporarily in Category D
30/10/-10	B^II/II CMH
24-10-18	B^II/II CMH
11.2.19	Witley O.M.P.C. + Asthma B^III W.C. Givens Cpl Camb

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

ORIGINAL.

(Copy)

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Adam *Christian Name* W.

3 JAN 1918

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Glasgow County Scotland

Examined ... ... on 22 day of March 191 at Ottawa

Declared Age ... ... 28 years days.

Trade or Occupation ... Carpenter

Height ... ... 5 feet, 8 inches.

Weight ... ... 165 lbs.

Chest Measurement: Girth when fully Expanded. 35½ inches. Range of Expansion 3½ inches.

Physical Development ...

Vaccination Marks: Arm ... Right / Left; Number 2

When Vaccinated ... as a child

Vision ... ... R.E.—V= L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease ... (a)

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

Approved by (*Signature*) H. W. Loosley

(*Rank*) Capt. RMO. C.F.A.

Medical Officer.

Enlisted ... ... at Ottawa on 22 day of Mch 191

	Corps.	Regtl. No.
Joined on Enlistment ...		
Transferred to	Can Res Bde 12-7-15	89256

Became non-effective by

on day of 191

(*Signature*)

(*Rank*)

The Morgan Reeve Co., Ltd., Printers, 20/22, Goldsmith St., Kingsway, W.C. (25289) Wt.W13871/604. 300m. 4/15. Forms B. 178.

P.T.O.

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
Moore's Barracks Hospital	8	10	15	11	10	15	Sprained shoulder	4	Cured	J. E. McCartney Capt
Belmont Road Aux Hospital	23	12	17				Emphysema.		Hot pert Sline. rubber Lei Caempt Co Ears syringed hot boracic. twice weekly. Poliz bag applied.	GM Arkl
Affiliated to the Western General Hospital										
N C A Epsom	15	2	18	8 JUL 1918			Bronchial Asthma (Cerval) Inflammation middle ear right and left.	144	Subjective Symptoms:— Ringing in ears, deafness, especially in right ear. noises in head like escaping of steam, shortness of breath, cough with expectoration, more pronounced at night. Wheezing, especially on lying down. Unable to breathe if he sleeps on his back. Keeps his weight. Appetite good. Objective Symptoms:— Anaemic, asthematic expression. Chest exam.:— expansion poor, expiration prolonged, wheezing rhonci heard over anterior surface of chest. Few crepitant rales present also right & left. Breath sounds harsh & dry. Heart exam.:— Negative. Specialists report for ears does not require hospital treatment. Has dry catarrhal inflammation right + left ears. Deafness 40 %. Other systems normal. Urine analysis negative. No T. B. found in sputum.	J. B. Blackadder CAPT: C.A.M. "B" DIVISION.

OPINION OF THE MEDICAL BOARD

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

Yes

19. Is the invalid fit for

(*a*) General service,	(Category A)	(Yes or No.)
(*b*) Service abroad, not general service,	(" B)	(Yes or No.) B.11.
(*c*) Home service (Canada only),	(" C)	(Yes or No.)
(*d*) Temporarily unfit.	(" D)	(Yes or No.)
(*e*) Unfit for service in Categories A, B and C	(" E)	(Yes or No.)

20. It is certified that the invalid

(*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.)

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

Auth. Telegram A.G.1. 9083 11-11-18.

Boarded for return to Canada

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

M.D.Barton. Major. CAMC. *President.*

PLACE Witley W.C.Givens. Capt.CAMC. } Members

DATE 11-2-19

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

President

PLACE } Members

DATE

APPROVED BY *Assistant Director of Medical Services.* DATE

APPROVED BY *Director-General of Medical Services.* DATE

For A.D.M.S. CANADIAN TROOPS, WITLEY. CAPTAIN.

HEADQUARTERS A.D.M.S. 13 FEB 1919 CANADIAN TROOPS, WITLEY.

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid'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 invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as 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 & Sons.

STATION Witley DATE 8-2-19

1. 1 (*a*) Unit CARD (*b*) Regimental No. 89256 (*c*) Rank Gnr

(*d*) Surname A D A M (*e*) Christian name William

(*f*) Home address Ottawa. Ontario. Gen.Delivery

(*g*) Next of Kin wife (*h*) Relationship

(*i*) Address of Next of Kin Station Road Wishaw Scotland

2. Age last birthday thirtyone 31 Date of birth 31-10-1887

3. Enlistment, or Appointment (if an Officer) (*a*) Place Ottawa (*b*) Date 22-3-1915

4. Personal description:

(*a*) Height 5ft.8½ins. (*b*) Weight 145 lbs (stripped) est. (*c*) Complexion fair

(*d*) Colour of hair fair (*e*) Colour of eyes blue (*f*) Identification marks, Scars, etc. Sailor girl rt. Scotland.1ft. Tattoo on R.& L. forearms

5. Former trade or occupation carpenter

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	three	elven months

	Periods From	Periods To
Canada	Mar.22nd.1915	May. 1915
England	June 1915	Jany.1916
France or other theatres of War	Jany 1916	Jany 1918
England	Jany 1918	To date

7. Original disease, or injury (a) O.M.C.C. (Double)
(b) Asthma.

(a) & (b)
(*a*) Date of origin Since enlistment (*b*) Place of origin (a) & (b) France

(*c*) Cause (a) Concussion. (b) Unknown.

M. F. B. 227.

400M.—11-18.
1772-39-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (*a*) Weakness—slight, moderate, marked, etc; (*b*) Loss, complete or partial, of an organ or member, or of its functions; (*c*) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (*d*) Any other restrictions in choice of occupation.)

(a) O.M.C.C.(double) Partial loss of function of ears.

(b) Asthma. Partial loss of function of respiratory tract.

9. Present condition—(*a*) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

(a) Objective signs-Specialist report- O.M.C.C.(double)-M.T's retracted concussion deafness-rt.10' -L.15'. Sgd.W.W.Heine.10-2-19. He states condition was not present before enlistment,and has been subjective Signs. Unable to hear well particularly with right ear-buzzing sounds in ears like escaping steam. subjective.(b). Signs shortness of breath slight cough wheezing on lying down,wakened up at night by spasms. in which hardly able to get breath, these sometimes occur during the day or wet weather, Objective signs. Expansion poor. expiration prolonged breath sounds harsh and wheezing,few crepitant rales in bronchial areas Heart sounds normal no X.B.found in sputum.

(*b*) Has the invalid now any affection of the following systems, not described in Section 9 (*a*) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System no Cardio-Vascular System no (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System no (Albumen and Sugar will be excluded.)

Special Senses no Respiratory System no Integumentary System no

Disturbances of Mentality no Digestive System no Muscular System no

Osseous and Joint Systems no Any other general condition no

Urine examination 6-8-19 S.PGR.1020, acid, no albumen and no sugar. sputum examination 8-5-18, no T.B.found.
sputum " 10-2-19 " " " Curshmans spirals or charcot leyden crystals found. Sputum contains mucus and pus.

10. (*a*) History (of the condition referred to in Section 9 (*a*).)

(a) States that it was in France owing to concussion that first noticed was getting deaf,and buzzing in ears-This was about February 1916. Condition has not improved much since.

(b) Previous board proceedings state that he has history of Asthma all his life but man states was never boarded with asthmatic cathartis until about April 1917 in France since when attacks have become more frequent Condition has not improved.

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

Moore Barracks 8-10-15 to 11-10-15 sprained shoulder.

Belmont Road. 23-12-17 Emphysema, ears syringed boracic.

(*c*) (Here give a description of wounds, scars and deformities.

nil.

11.—(*a*) Did the disabling condition have its origin before enlistment? (a) no. (b)

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? no (a) (b)
The regimental documents will be referred to.
(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.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? (a) (b) permanent

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

13-12-17- 12 CFA Asthma
23-12-17 Belmont Road Emphysema.
15-2-18 to 8-7-18 Epsom. Asthma. inflamed ears.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?
(If the answer is "yes" state nature of treatment required and probable duration)

no

16. Can the former trade or occupation be resumed? Not at present on account of Asthmatic condition
(If not, briefly state why)

17. Recommendations

D.M.Low. Lieut. CAMC.
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned 89256 W.Adam have heard the description of my disability and present condition read, and am satisfied ~~(or not satisfied)~~ with it. (If dissatisfied, statement should follow.)

I complain in addition of

89256 William Adam. Gunner Rank.
Signature of invalid examined.

WCG

Married or Single: Single

Place of Birth: Scotland.

Name and Address of Next of Kin: Mrs Elizabeth ~~William~~ Adam
Ashfield Cottage Mause Road Weshaw Scot.

Relationship of Next of Kin: ~~Father~~

Name and Address of Next of Kin:

Relationship of Next of:

Separation Allowance Monthly $ Effective (Date)

Payable to

Relationship of Dependant

Pass checked
Journ. correct
Ashmeath

Casualties, Promotions, &c.

Particulars	Effective Date	Authority

Admissions to Hospital, &c.

Date Admitted	Date Discharged	V. or A.	Name of Hospital

Reg'l No. 89256 Rank Name Adam, William

If in Perm. Corps What Unit ✓ Unit 3rd Res Batty

Permanent Force Allowances ✓

Place of Attestation Ottawa.

Date of Attestation 22nd March 1915

Transferred to	Date	Authority
6th Bde. How		DOA 31
1st Bde C.F.A.	1-7-6	7-6-16
6 C A D L	23/12/17	6 6/1/18

Assigned Pay Monthly $25.00 Date Effective 1st April 1916

Payable to ~~Mrs W. Adam, c/o Post Office Weshaw Scotland~~ Relationship

Assigned Pay Monthly $20.00 Reduced from $25 Date Effective May 1916

Payable to Mrs W. Adam, ~~c/o Post Office~~, Ashfield Cottage Mause Road Weshaw Scotland Relationship Wife

Stop-Payment Form (Assigned Pay) Rendered (Date) Effective Reason

Discharge Date and Place Reason and Authority

Account Transferred to Non-Effective Branch (Date)

Account Transferred to Officers' Pay Branch (Date)

Checked: R.H. Hegger

Date	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
1916 31 Mch			277				27 70								304 70	1916											16 77 2		1320	180 92	123 78				
April	30	1.00	30		30	10	3								33	3095-4	23/12	3-3						87 / 262				25		28 49	128 29				
																3641-5																			
May	31	"	31		31	"	3	10							34 10	3610-5								255 / 255				20		25 10	137 29				
June	30	"	30		30	"	3								33													20		20	160 29				
July	31		31		31		3	10							34 10	421		457		428				511	262	523		20		32 96	151 43				
Aug	31		31		31		3	10							34 10	456		537		5th B.F.A.				261	261			20		25 22	160 31				
Sept	30		30		30		3								33	580		623		360	25576			261	262	256		20		27 79	165 52				
Oct	31		31		31		3	10							34 10	659								262				20		27 62	177 00				
Nov	30		30		30		3								33													20		20	190			190	
Dec	31		31	20	31		3	10							34 10	785 / 749		839						785 / 262	1133			20		41 80	182 30		✓	182 30	
1917 Jan.	31	1.00	34	10											34 10	861	27/12			2556	Kin 14.1.17.			262				20 00		22 62	193 78		✓	193 78	
Feb	28		30	80											30 80	93	17/1			2444 / 1971	22/1			262		1460 / 262		20 00		122 57	102 01		Pub.	102 01	
																1040	22/1	155	24/3	2556	K.W. 19.1.17.			261	262	8273									
Mar	31	1.00	34	10											34 10	999	14/2	1081	14/3					262	262			20 00		30 47	105 64		✓	105 64	
Forward			706	20											706 20									42 48	74 42	107 74	167 72	245	13 20	600 56					

89256. Gr. Adam. Wm.

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
1917			706	20											706	20								42	48	24	42	107	74	167	72	245	13	20	600	56	105	64				
Apl.	30	100/10	33	00											33	00							454501									20			20		118	64				
May	31		34	10											34	10							493001									20			20		132	74				
June	30		33												33		145 90	14/5					a37501	2 68 5 35								20			25	03	137	71				
July	31		34	10											34	10							a68691									20			20		151	81				
Aug	31		34	10											34	10							A159801									20			20		165	91				
Sept	30		33												33		286	15/7			28 Days Pro rata 457	28/7	A17720	5 35				2 68				20			28	03	170	88				
			907	50											907	50								55 86	24	42	110	42	167	72	365	13	20	736	62	170	88				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER-RED PAY	SER. ALLCE. ENG.
Oct. 1st	Bal. Fwd.	170 88							170 88	45	
Oct.	G. Pay	34 10		A245001			20				
				21832 AR 321. 5/4/17 1 Lewis Gain	2 67						
				AR 608 8/9/17 5 Bas	2 68						
				" 565 27/9 " "	8 92						
				" 514 11/8 " "	2 68				168 03	45	
		34 10			16 95		20				
Nov.	" " "	33		B 44801 L4/2			20				
				26 71062 27/9 5 Bas	9 33						
				AR 669 1/9 " "	2 68						
				" 662 20/10 " "	8 03						
Dec.	G. Pay	34 10		B76708 L4/2			20		87 09	45	
		67 10			108 04		40				
Jan.	" "	34 10		C26981 L4/2			20				
				aR 1080 23/10 2 Bas C	13 38						
				" 954 9/11 2 Gain	4 46				83 35	45	
		34 10			17 84		20				
Feby	Gn Pay	30 80		C9705 L4 2 2			20		94 15	45	
		30 80					20				
				~~B3383 L4 2 2~~			20				

MONTH	PARTICULARS	CR. 1	CR. 2	Particulars	D 1	D 2	D 3	D 4	BALANCE	DEFER-RED PAY	SER. ALLCE. ENG.
	Fwd.										
Mar	G.P.	34 10		D 33483 L4 2 2					94 15	45	
									34 10		
									128 25		
								20	84 60		
				AR 3781. 19/7/18. Epsom.	9 73						
				" 17802 Epsom. 25/3	4 87				93 65	45	
					14 60						
		34 10			14 60			20			

PART III. 19-818 Bill Confirmed claim.

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board:—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend:—

Dated at this day of 191

Signatures of the Board

President.

Signatures of the Board

PART I.

A.F.B. 179 Canada (Revised).

Reserved for M.H.C.

Regt. No. 51256 Rank Gnr. Surname ADAM Christian Name WILLIAM

Unit or Corps—(a) Overseas from United Kingdom C.F.A. (b) In United Kingdom C.F.A. Res

Born at—Town GLASGOW County or Province Country SCOTLAND

Date of Birth—Day 31st Month October Year 1887 Age 30 yrs. 6 months.

Joined at OTTAWA ONTARIO CANADA Date 22nd March 1915

Former Trade or Occupation CARPENTER

Permanent marks or peculiarities that will serve for future identification:—
1. Tatto mark, "girls head" on neck right fore arm.
2. Tatto mark ("shuttle") left fore arm.
3. Vaccination marks left arm.

Height—feet 5 inches 8½ Colour of eyes Blue

Signature of Soldier (*for identification purposes*)

Medical Report.

☞ *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted*). (*Follow the official nomenclature as far as possible.*)

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*).	IMPAIRED FUNCTION OF RESPIRATORY TRACT.
Disabilities Group (*b*).	IMPAIRED HEARING BOTH EARS RINGING IN EARS.
Disabilities Group (*c*).	NA

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	ASTHMA	SCOTLAND.	PREVIOUS TO ENLISTMENT
(*ii.*) As to Group (*b*) above.	INFLAMATION, MIDDLE EAR RIGHT AND LEFT.	CANADA	PREVIOUS TO ENLISTMENT.
(*iii.*) As to Group (*c*) above.	NA.	NA	NA

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (since August 4th, 1914).

3. Is the disability due to disease contracted or injuries received prior to Active Service?
   - (*i.*) As to Group (*a*) above? yes — If yes, has Active Service aggravated it? yes
   - (*ii.*) As to Group (*b*) above? yes — If yes, has Active Service aggravated it? yes
   - (*iii.*) As to Group (*c*) above? NA — If yes, has Active Service aggravated it? NA.

4. Is the disability due to disease contracted or injuries received while on Active Service—
   - (*i.*) As to Group (*a*) above? no
   - (*ii.*) As to Group (*b*) above? no
   - (*iii.*) As to Group (*c*) above? NA

5. If a cause of disability was an injury received on Active Service, was it received—

(*i.*) While on duty? No (*ii.*) While off duty? No

(*iii.*) Was a Court of Inquiry held? no (*iv.*) Where? no (*v.*) When? no

(*vi.*) Opinion of the Court? no

6. HISTORY OF THE CASE. (*State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records.*) History of asthma all his life. ~~Catt~~ catarrhal inflammation of both ears previous to enlistment but has very little difficulty in hearing until went to France, when # condition became aggravated. In France two years, field medical cases: 42 c.c.s. shortness of breath, cough, chest shows fair chance few crepitations, heart action slow. He General Hp. Heart and lungs normal. subject to Bronchitis, evacuated to Belmont Road aux. Hp. 23/12/17 – 15/2/18. Empty sinus, Ears syringed ~~but~~ with hot boracic. M.H.S. Epsom 15/2/18 – to date, dyspnoea, packs in chest choking sensation on lying down at night, cough and wheezes all night at times. Tachycardia. 90. wheezing rales over both bronchi harsh breath sounds. States the sounds of the guns ~~of~~ produced a marked difference in his hearing which has not improved since. no evidence on M.H.S. of deafness. Has made very little improvement at Epsom for some time was smoking stramonium sticks. his asthma was better.

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*)
Subjective Symptoms: ringing in ears, ~~non~~ deafness especially in right ear, noises in head like escaping steam, shortness of breath, cough with expectoration more pronounced at night. wheezing especially on lying down. Unable to breath if he sleeps on his back. keeps his weight. appetite good.
Objective Symptoms: anaemic, asthenetic expression. chest emphysematous, expansion poor, expiration prolonged. wheezing chronic heard over anterior surface of ~~right~~ chest fine expiratory rales present also ~~no~~ right and left. breath sounds harsh and dry. heart exam. neg. specialist's report forwd. does not require hospital treatment. has dry catarrhal inflammation right and left ears, deafness 40%. Other systems normal urine analysis neg. no T.B. found in sputum.

8. OPERATION. (*i.*) Was one performed? No

(*ii.*) If so, state what. no

(*iii.*) Was one advised and declined? no

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (*i.*) Is there loss or decay of teeth attributable to Active Service? no

(*ii.*) If so, describe. fit.

10. DO YOU RECOMMEND:—

(*a*) Fit for duty? No

(*b*) Fit for base duty? yes B III likely to be raised in Calgary within six months.

(*c*) Invalid to Canada? no

(*d*) Discharge from the Service as permanently unfit? no

Date of Report 15 JUN 1918 191 Signed H. Blackadar Capt
Officer in medical charge of case.

Station M.C.H. Epsom

I have satisfied myself of the general accuracy of the above Report, and concur therein *except

W. Smith Capt C.A.M.C. for { Officer i/c Hospital / S.M.O. Brigade } Strike out one of these.

Dated at Military Convalescent Hospital Epsom Station, on 15 JUN 1918 191

* Delete if inapplicable.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

☞ *Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.*

11. Is the disability fully indicated in Part I. (1)? yes
If not, indicate it.

12. Is the cause of the disability, fully indicated in Part I. (2)? yes
If not, indicate it.

13. Was the disability caused or aggravated by— (*a*) Negligence of the Soldier { Caused? no / Aggravated? no } (*b*) Misconduct of the Soldier { Caused? no / Aggravated? no }

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(*Estimate at none,* 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.)
na

15. THE PENSIONABLE DISABILITY—(*see Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate*).
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (*Estimate at none,* ⅓, ⅔, ¾, ⅘, *or all.*)
na

16. Permanency of the Pensionable Disability estimated next above in (15). na
(*i.*) Is it permanent?

(*ii.*) If not permanent, what is its probable minimum duration (*in months*)? na

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? na.

18. Remarks. He hears quiet voice at 10 feet. Chest clear on Dis Examination. He gives history of "Colds in chest" from child hood. His disability is not severe enough to prevent him from carrying on at light duties but he is not likely to become fit for higher Category

19. Recommendation:—(*a*) Fit for duty? no
(*b*) Fit for base duty? B III unlikely to be raised in Category within six months. Temporarily in Category B II
(*c*) Invalid to Canada? no
(*d*) Discharge from service as permanently unfit? no

Classification for the Military Hospitals Commission.

Date of Board 15-6-18

Signatures of the Board { A. Kemp, Smith Major President. / H. Wallace Capt

Station Epsom

Approved A. D. M. S.

A.D.M.S. CANADIANS, LONDON AREA, LONDON.

Dated at ..... Station 191

Major, C.A.M.C. for A.D.M.S. Canadians, London Area.

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board:—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend:—

Classification for the Military Hospitals Commission.

Dated at this day of 191

President.

Signatures of the Board

Reserved for M.H.C.

No. 89256 Rank GNR Surname ADAM Christian Name WILLIAM

Unit or Corps—(a) Overseas from United Kingdom C.F.A. (b) In United Kingdon C.F.A. Res.

Born at—Town GLASGOW County or Province Country SCOTLAND

Date of Birth—Day 31ST Month OCTOBER Year 1887 Age 30 yrs 6 mont

Joined at OTTAWA, ONTARIO, CANADA. Date 22ND, MARCH, 1915.

Former Trade or Occupation CARPENTER.

Permanent marks or peculiarities that will serve for future identification:—

1. Tatto mark, "Girls Head" and neck right forearm.
2. Tatto mark, "Thistle" left forearm.
3. One vaccination mark left arm.

Height—feet 5 inches 8½ Colour of eyes BLUE

Signature of Soldier (*for identification purposes*) [illegible]

Medical Report.

☞ *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully disc between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents beari case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted*). (*Follow the official nomenclature as far as possible.*)

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*). IMPAIRED FUNCTION OF RESPIRATORY TRACT.

Disabilities Group (*b*). IMPAIRED HEARING BOTH EARS
RINGING IN EARS.

Disabilities Group (*c*). N.A.

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date
(*i.*) As to Group (*a*) above.	ASTHMA	SCOTLAND	pre t Enl
(*ii.*) As to Group (*b*) above.	INFLAMATION, MIDDLE EAR RIGHT AND LEFT.	CANADA	Pr t Enl
(*iii.*) As to Group (*c*) above.	N.A.	N.A.	N

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the presen August 4th, 1914).

3. Is the disability due to disease contracted or injuries received prior to Active Service?

(*i.*) As to Group (*a*) above? Yes If yes, has Active Service aggravated it? Yes

(*ii.*) As to Group (*b*) above? Yes If yes, has Active Service aggravated it? Yes

(*iii.*) As to Group (*c*) above? N.A. If yes, has Active Service aggravated it? N.A.

4. Is the disability due to disease contracted or injuries received while on Active Service—

(*i.*) As to Group (*a*) above? No

(*ii.*) As to Group (*b*) above? No

(*iii.*) As to Group (*c*) above? N.A.

PART I. (*continued*).

5. If a cause of disability was an injury received on Active Service, was it received—

(*i.*) While on duty? No (*ii.*) While off duty? No

(*iii.*) Was a Court of Inquiry held? No (*iv.*) Where? No (*v.*) When? No

(*vi.*) Opinion of the Court? No

HISTORY OF THE CASE. (*State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records.*) History of asthma all his life. Catarrhal inflamation of both ears previous to enlistment but had very little difficulty in hearing until went to France, when condition became aggravated. In France two years. Field Medical notes 42nd C.C.S. shortness of breath, cough. Chest shows few rhonci. Few crepitations. Heart action slow. 26th General Hosp. heart and lungs normal. Subject to bronchitis. Evacuated to Belmont Road Aux. Hosp. 23-12-17 to 15-2-18 [illegible], ear syringed, [illegible] hot poracic. M.C.H. Epsom 15-2-18 to date, dyspnoea, pains in chest, [illegible] on lying down at night. Coughs and wheezes all night, at times tachyardia 90. Wheezing rales over both bronchi. Harsh breath sounds. [illegible] States the sounds of the guns produced a marked difference in his hearing which has not improved since. No evidence on M.H.S. of deafness. Has made very little at Epsom. For sometime was smoking stroninum, states his asthma was bett

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*) Subjective symptoms- Ringing in ears, deafness, especially in right ear, noises in head like escaping of steam, shortness of breath, cough with expectoration more pronounced at night. Wheezing especially on lying down. [illegible] to breathe if he sleeps on his back. Keeps his weight, appetite good. [illegible] Objective symptoms- Anaemic, asthenic expression. Chest [illegible] expansion poor, expiration prolonged, wheezing rhonci heard over anterior surface of chest. Few crepitant rales present also right and left. Breath sounds [illegible] harsh and dry. Heart [illegible]. Objective. Specialists' report for ears, does not require hospital treatment. Has dry catarrhal inflamation right and left ears. Deafness 40%. Other systems normal. Urine analysis neg. No T.B. found in sputum.

OPERATION. (*i.*) Was one performed? No

(*ii.*) If so, state what. No

(*iii.*) Was one advised and declined? No

NOTE.—*Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.*

Is there loss or decay of teeth attributable to Active Service? No

If so, describe. Nil

YOU RECOMMEND:—

(*a*) Fit for duty? No

(*b*) Fit for base duty? Yes B III, likely to be raised in category within six months.

(*c*) Invalid to Canada? No

(*d*) Discharge from the Service as permanently unfit? No

15 JUN 1918

Dated at ..... 191 Signed K.K. Blackader, Capt. CAMC.

Officer in medical charge of case.

C.H. Epsom

I satisfied myself of the general accuracy of the above opinion therein *except

S.R. JOHNSTON Capt. CAMC. {Officer i/c Hospital / S.M.O. Brigade} Strike out one of these.

MILITARY CONVALESCENT HOSPITAL EPSOM. Station, on 16 JUN 1918 191

* Delete if inapplicable.

PART II.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.

11. Is the disability fully indicated in Part I. (1)? Yes.

If not, indicate it.

12. Is the cause of the disability, fully indicated in Part I. (2)? Yes.

If not, indicate it.

13. Was the disability caused or aggravated by— (*a*) Negligence of the Soldier { Caused? No. Aggravated? No. } (*b*) Misconduct of the Soldier { Caused? No. Aggravated? No. }

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour? (*Estimate at none*, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.)

N.A.

15. THE PENSIONABLE DISABILITY—(*see Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate*).

What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (*Estimate at none*, ⅕, ⅖, ⅗, ⅘, *or all.*)

N.A.

16. Permanency of the Pensionable Disability estimated next above in (15).

(*i.*) Is it permanent? N.A.

(*ii.*) If not permanent, what is its probable minimum duration (*in months*)? N.A.

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? N.A.

18. Remarks.

~~He hears quiet voice at 10~~
He hears quiet voice at 10 feet. Chest clear on this examination. He gives history of "Colds in chest" from childhood. His disability is not severe enough to prevent him from carrying on at Light Duty, but he is not likely to become fit for a higher Category.

19. Recommendation:—(*a*) Fit for duty? No.

(*b*) Fit for base duty? B. III. Unlikely to be raised in Category within six months. Temporarily in Category D.I.

(*c*) Invalid to Canada? No.

(*d*) Discharge from service as permanently unfit? No.

Classification for the Military Hospitals Commission.

Date of Board 18-6-18

Signatures of the Board { A.H. Cameron-Smith Major. President. / H.C. Wallace, Capt. }

Station Epsom.

Approved [signature] Major, C.A.M.C. for A.D.M.S., Canadian Area. A.D.M.S.

A.D.M.S. CANADIANS LONDON AREA. LONDON.

Dated at ..... Station 27 JUN 1918 191