I.D. number No. d'identification	Surname Nom de famille	Given names Prénoms
715632	ADAMS	AUGUSTUS

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU PERSONNEL

Location
Lieu 23

S

REG[illegible]UMENTS

NAME ADAMS. Augustus REGT. NO. 415632. UNIT 106th Battn. H. Q. FILE NO. 1224

H

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
/	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
/	~~TRAINING HISTORY SHEET~~ (M.F.W. 113) Record Sheet					
/	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
/	REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
/	COMPANY CONDUCT SHEET (M.F.B. 263A or A F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
4	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Med Unfit
	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)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
/	LAST PAY CERTIFICATE (M.F.W. 44)					
/	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
/	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
	~~M.F.W. 68~~					
8	Misc Card					
	Pay Sheets					

M

Box 23

W. 2589
100M-11-19
1772-39-1377

1673

ORIGINAL

ATTESTATION PAPER.

No. 715632

Folio.

[illegible] BATTALION
[illegible] SCOTIA RIFLES

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Adams
1a. What are your Christian names?	Augustus
1b. What is your present address?	Truro, N. S.
2. In what Town, Township or Parish, and in what Country were you born?	Portsmouth, N. S.
3. What is the name of your next-of kin?	Mrs. A. Gertrude Adams
4. What is the address of your next-of-kin?	Truro, N. S. Canada
4a. What is the relationship of your next-of-kin?	Wife
5. What is the date of your birth?	July 29, 1887
6. What is your Trade or Calling?	Clerk
7. Are you married?	Yes
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? If so, state particulars of former Service.	No
11. Do you understand the nature and terms of your engagement?	Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Augustus Adams, 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.

Augustus Adams (Signature of Recruit)

Date Jan. 13 1916 H. L. Marshall (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Augustus Adams, 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.

Augustus Adams (Signature of Recruit)

Date Jan. 13 1916. H. L. Marshall (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 Truro this 13th day of January 1916.

(Signature of Justice)

Comdg. 106th Regt. Nova Scotia Rifles

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

1673

Description of Augustus Adams on Enlistment.

Apparent Age 28 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft 7 ins.

Chest measurement: Girth when fully expanded ..... 35½ ins.
Range of expansion ..... 2½ ins.

Complexion ..... Ruddy
Eyes ..... Blue
Hair ..... Red

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

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

Four vaccinations
Mark left arm

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 Jan 13th 1916. W. R. Muir ..... CAPTAIN
MEDICAL OFFICER
106th. Overseas Battn. C.E.F.
Medical Officer.

Place Truro N.S.

*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.

Augustus Adams ..... 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.

R. Lowe ..... (Signature of Officer)
Lieut. Col.
Comd'g 106th. Overseas Bn. C.E.F.
"Nova Scotia Rifles."

Date Jan. 13th 1916

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—4-16.
1772—39—812.

L. L. Job 310.—Req. 6574.

Sheet No. 2. Mrs. Alice Gertude Adams. (Wife) Name of Soldier. Adams Augustus

715632. "B" Coy. 106 Battn. Pte.

$20.00

JUL 1 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July		M14313	20. ✓	written in duty, see blk book.
Aug.		Q 10331	20	
Sept.		A15430	20	$20 00 Recovered per Cas. P.M.R. 4 7/17
Oct.		A19864	20	H2-649-A #593, Cas. H12 7/17
Nov.		A24640	20	
Dec.		A34642	20	
Jan.	1917	B36753	20	
Feb.		B42420	20	20 R
March		B48293	20	20 R
April		C 73	20 ✓	20 R
May		C 6017	20	
June		C 12272	20	20 R
July			20	
Aug.			240.	A/c Closed
Sept.				Ret'd per Troopsship 2810
Oct.				Date 19/6/17
Nov.				Clerk L Atkins A.P.
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.				

No. 715632 RANK Pte. NAME Adams Augustus

T. O. S. 6-1-16 UNIT 106th Battalion C. E. O.
D. o. 3, 31-1-16.

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Jan. 6	1916 Jan. 31	V		
	Feb.	V		
	mar.	V		
	April	V		
	May	V		
	June	V		
	July	C	Billeted June 28th. to 30th	D.D. 15-7-
			Trans. from Base Details 5-7-16	D.D. 160 of 5-7-16.

UNIT SAILED
JUL 15 1916

R. 149.

Name Adams Augustus Rank Pte. Reg. No. 715632.

Unit 106 Bn.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
4-10-16	Moore Barracks.		Bronchitis	22.		
29-11-16	Woodcote P.K.		& Pleurisy	40		
	Trans for Corps.					

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

REG. NO. 715-632 NAME (SURNAME FIRST) Adams Augustus

RANK L/Cpl CORPS 16th

AGE 30 SERVICE

NAME OF HOSPITAL Pine Hill PLACE Halifax

DATE OF ADMISSION 12-6-17

DISEASE Varicose Veins

DISCHARGE not given

OPERATION

DISCHARGED TO DUTY ?

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

100M—9-17—H.Q. 1211-8-30.

REMARKS .....

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
22.	Moore Bks, Shorncliffe from.	4-10-16	Bronchitis
40.	Can. Convt. Woodcote Pk.	9-11-16	" & Pleurisy.
126	M.H.C.C. Halifax	22-5-17	Adm. on leave at home.
143	M.H.C.C. Halifax	12-6-17	Trans. to Pine Hill C.H. Out-p

REGT'L NO 715632.

NAME Adams, R.

RANK AND CORPS Pte. 106th Bn

H. Q. FILE NO. 649-

FOLLOWS NO.

FOLLOWS

CABLE

No.	Date

NATURE OF CASUALTY

L. L. Job 90581—M. & D. 6314.

M. F. W. 42—50M—1-16.
H. Q. 1772-39-853.

7

D.M.S. 1313.

ADMITTING CARD.

Regt. No. 715632 A. & D. No.

Rank Sgt

Name Adams R

Corps 102 C.E.

Religion

Age 29

M. H. Rec'd 11/12 M. H. Requested 4/12 M. H. Ret'd

Disease Bronchitis & Pleurisy?

Admitted Moore Bks 8-11-16

Discharged 1 JAN 1917 R Bde

Place in Hospital

Transferred

Results

P.T.O.

REMARKS:

29 11 16 Pain over lt side of chest P/T

10 12 16 Comp of pain in rt side of thorax

Much improved P T Cure.

L C Harris M.D.

ADMITTING CARD.

Regt. No. 715632 A. & D. No. 20317

Rank Sgt

Name Adams Augustus

Corps 106 Batt. D.

Religion C of E Age 39

M. H. Rec'd M. H. Requested M. H. Ret'd

Disease Bronchitis

Admitted 3/10/16

Discharged

Place in Hospital 17 - 9

Transferred to Epsom NOV 26 1916

Results 9 Invalided 12

P.T.O.

REMARKS:

MEDICAL HISTORY SHEET.

Orig. recd. from 10 Gen Bn H/ 1.2/1916

Dup. recd. from ..../..../191

Orig. sent to ..../..../191

Dup. sent to ..../..../191

Received from Registrar this Orig/Dup. 24/1.1/1916

J. T. Sinclair ..... Ward 9

649-A-4599

S.O.S. 30/11/17. Dis #6

SURNAME. Adams,

CHRISTIAN NAMES Augustus

REGL. No. 715632 RANK Pte.

UNIT 106th. Bn

FORMER CORPS Nil.

NEXT OF KIN.

NAMES IN FULL Adams, Mrs. A. Gertrude

RELATIONSHIP TO SOLDIER wife

ADDRESS Truro, Colchester Co., N. S.

CHANGE OF ADDRESS

COUNTRY OF BIRTH England, Portsmouth DATE July 29th 1887

PLACE OF ATTESTATION Truro. N. S. DATE Jan. 13th 1916

From Halifax 15/7/16 per Al. Returned to Canada per Dis List 21/4

L. L. 26989 M. & D. 8191. Empress of Britain H.M.S. Olympic 22-1-17

M. F. W. 22. 100M.—8-17. H. Q. 1772-39-339.

MARRIED yes SINGLE WIDOWER

TRADE OR CALLING Cook RELIGION Church of England

DESCRIPTION.

APPARENT AGE 28 YEARS MONTHS

HEIGHT 5' FEET 7 INCHES

CHEST MEASUREMENT 35 1/2 INCHES EXPANSION 2 1/2 INCHES

COMPLEXION Ruddy EYES Blue HAIR Red

DISTINGUISHING MARKS Four vacc marks l. arm

MEDICAL EXAMINATION. PLACE Truro N.S. DATE Jan 13-16

Present address Truro N.S.

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Adam's	A	715-637

Rank	Unit	Co.	Troop	Batty
Pte	106 Batt Train Div.			

Hospital — Date of Admission

Moore Barracks, Shorncliffe 4-10-16.

Transferred to Woodcote Park Hosp. 29.11.16

Hosp.

Hosp.

Hosp.

Diagnosis Bronchitis & Pleurisy

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION — Date

to 10-10-16 — 2

C.F. 21.12.16 to H

REMARKS

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

EPITOME OF HOSPITAL TREATMENT.

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

Name ADAMS A. Rank L.Cpl. Regt. No. 715632 Unit B

Battn. Camp or O. S. O File M. H. C. C. H.Q. File 619-A-4599

Pension awarded 180.00 6Mos. - Date of first payment 1-12-17

Discharged to Class 3 Conduct on discharge Good

Next of kin Wife

Address on discharge Box 727 Truro, N.S.

Diagnosis V.V. Pencardcitis Date boarded 21-5-17 D. of D. 30%

DATE	CLASS	REMARKS	Part 2 Order
26-6-17	2	Ross (Outpatient)	#156
30-11-17	3	DISCHARGED	#308

M.H.C. F. 29. 5m-4-17. G.H.P. Ltd.

DATE	CLASS	REMARKS	Part 2 Order

ORIGINAL

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 ..... 106th. "Overseas" B'n. C.E.F. "Nova Scotia Rifles."

(2) Regimental Number ..... ~~715326~~ 632

(3) Full Name of Soldier ..... Adams, Augustus, Private.

(4) Place of Birth ..... Portsmouth, England.

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

(6) If married, state,
(a) Full name of your wife ..... Mrs Gertrude Adams, Truro, N. S.

(b) Present Postal Address ..... Truro, N. S.

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

(8) Have you any children? ..... Yes.

If so, give number of boys and girls ..... One Boy. Two girls.

Also their names and ages ..... Augustus Adams, One week.
Margaret Adams 2 Years.
Grace Adams, 5 Years.

M. F. W. 67
20 M.—2-16
1772-39-954

(SEE OTHER SIDE.)

(9) Is your Father alive ?..... Yes. Ebenezer Adams,

If so, state name and address ..... East Chiltington, Near Lewis, Sussex, Eng.

(10) Is your Mother alive ?..... Yes. Mrs Ebenezer Adams,

If so, state name and address..... East Chiltington, Near Lewis,

..... Sussex, Eng.

(11) If your Mother is a widow..... No.

Are you her sole support, or not ?..... No.

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

..... No.

.....

(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.

..... No.

.....

.....

(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 ?.....

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.

..... *Officer Commanding.*

Date..... June 17th. 1916.

Comdg 106th "O/S" Bn. C. E. F. MAJOR.
Nova Scotia Rifles.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

"B" UNIT M. H. C. COMMAND.

A68

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 715632 Rank Pte. Name Adams A.

Corps 106th. BN. who was* Discharged

On November 30th. 1917 191..., to .....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1/11/17 191..., to 30/11/17 191..., 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.			Regt'l Pay 30 days at $ 1 00	30	00
Advances by Cheques No.			Field Allow. 30 days at $ c 10	3	00
Assigned Pay No.	40	00	Other Allowances* Subs, Nov.	18	00
Other Charges*			Sep. Allce. Nov	20	00
Payment on transfer or discharge No.	44	00	Other Credits* Clothing on discharge	13	00
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	$84	00	Total	$84	00

*Give Particulars.

A monthly stoppage of $ 20.00 (†) has been paid (‡) been paid on account of Assigned Pay for the month of November 1917 191... to (Assignee) Mrs. A.G. Adams Pleasant St

(Address) Pleasant St Truro. N.S.

(HMB) (74- A -68)

(†) 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 .....

(2) if married and if a Separation Allowance Card has been submitted yes pd to 30/11/17

(3) cause of discharge and authority .....

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date .....

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

Date November 27th. 1917

Place Halifax. N.S.

Paymaster "B" Unit M. H. C. Command CAPT.

Paymaster

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

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

M. F. W. 44.

150M.—4-17.
H. Q. 1772 39-903.

MD No 6 No 13

Discharge 29-12-17 JT

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 128, 130 and 141, Financial Instructions, 1917). C.E.F.

Regimental No. ..... Rank ..... Name .....

Corps ..... who was*

On ..... 191 , to

*Insert "discharged" or "transferred."

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

*Give Particulars.

Dr.	$	c	Cr.	$	c
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances) No.			Regt'l Pay ..... days at $ ..... c.		
Cheques) No.			Field Allow. ..... days at $ ..... c.		
Assigned Pay No.			Other Allowances*		
Other Charges*			"		
Payment on transfer or discharge No.			Other Credits*		
Balance Cr. (to be paid by the new unit).			Bal. Dr. (to be deducted by new unit)		
Total			Total		

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

Date .....

Paymaster

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

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

M. P. W. 44.

H. Q. 1115-20-003
1200M.—4-17.

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date

(3) cause of discharge and authority .....

(2) cause of absence .....

A monthly stoppage of $ ..... (†) has ..... (†) been paid on account of Assigned Pay for ..... 191 .. to (Address) .....

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

On Transfer of an Officer.

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

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 by virtue of the Canada Evidence Act.

Signature of applicant: Augustus Adams

Place of Residence: Masstown Col. Co N.S.

Declared before me at: Masstown

This Twenty first day of July 19 19

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Adminstration of Oaths.

Arthur Purcell J.P.
in and for the County of Colchester

NOTICE.—If the dependent has not forwarded a Statutory Declaration **to Ottawa**, in connection with Separation Allowance, it will be necessary to forward one with this application. These are for wife, M.F.W. 148, mother, M.F.W. 147, and guardian, M.F.W. 149, and may be obtained from the Assistant Directors Pay Service, or the Patriotic Fund. Guardian forms must be completed by the **present** guardian.

Space below this line to be used only by the Assistant Directors Pay Service.

POST DISCHARGE PAY.

Dates paid.	Amounts paid soldier.	Amount paid dependent.
12. 2. 18	$ 5.30	
12. 3. 18	5.30	
12. 4. 18	5.40	
Total	$ 16.00	

No Record

REMARKS

Certified correct. H. Smith Lt

Assistant Director Pay Services, Mil. Dist. No. 6

Date 14/10/19.

R. A590 / 091 a 22. Attb - a - 5'90

Pay Office M. D. 6
OCT 14 1919
Pay Masters No.....

S. F. Co.
OCT 21 1919
F. R.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

A.1062.

P.C. 24-10-19 Q.W.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Orders-in-Council (P.C. 3165), dated 21st December, 1918, as amended by P.C. 285, dated 8th February 1919, and P.C. 1168, dated 23rd June 1919.

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 in.

On completion this Declaration is to be returned to THE ASSISTANT DIRECTOR PAY SERVICES OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Reg. No. 715632 2. Rank L/c 3. Original C.E.F. Unit 106th

4. Christian Names Augustus 5. Surname Adams

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

Masstown Colchester Co N. S.

7. Give the following particulars of service with Pay and Allowances for each enlistment which you have had in the Naval or Land Forces of Canada or the British Empire on or since the 4th August, 1914. Answer in the following order in space allotted.

	Regt. No.	Rank on Enlistment.	Unit. (State whether Active Militia, Permanent Force, C.E.F. or Naval. If R.A.F. state Wing.)
		CANADIAN SERVICE.	
1st Enl.	715632	Pte	106 C.E.F.
2nd Enl.			
3rd Enl.			
4th Enl.			
		IMPERIAL SERVICE.	
Imp. Enl.			

	Date of Enlistment.	Date of Discharge.	Rank on Discharge.	Unit from which discharged	Place of Discharge.	Reason for Discharge.
			CANADIAN SERVICE.			
1st Enl.	13/1/16	30/11/17	L/c	Dis Dept Halifax	Halifax	Physically unfit
2nd Enl.						
3rd Enl.						
4th Enl.						
			IMPERIAL SERVICE.			
Imp. Enl.						

M. F. W. 2535 (1)
494-D.P.-100M-6-19.
1772-39-1389.

ASST. DIRECTOR
JUL 23 1919
of Pay Services
M. D. No. 6

8. (a) Did you revert overseas to a rank lower than the temporary substantive rank held by you on your arrival in England? No (b) If so, give date and ranks and state if such reversion was in consequence of misconduct or inefficiency

9. 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: Nos 106th From 15/7/16 to 24/5/17

10. 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

11. Have you been issued with a War Service Badge? If so, give number and class No

12. 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

13. 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, from where paid, and on what dates Have received $150 post Discharge Pay from Halifax Feb - March April 1918

14. Are you entitled to receive, or have you received any payment in the nature of Post Discharge Gratuity from the Imperial Forces? If so, state amount received, or to which you are entitled Not Applicable

15. Were you at the time of enlistment a civil employee of the Dominion or a Provincial Government? If so, state what Government, what Department, and whether civil pay was issued on your account while you were on active service No

16. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-Establishment? No
(b) If so, are you in receipt of full pay and allowances from that Department? No

17. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Mrs A. Adams

18. Relationship of such dependent Wife

19. Present address, in full, of such dependent Masstown Colchester Co. N.S.

20. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? If so, give his regimental number, rank, unit and full name No

---

REMARKS

Forms
I. 1237
10

Bed 35

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
20317	715-632	Sgt.	Adams.	Augustus
Year 1916.	Unit. 106 Batt.		Age. 29	Service. 9/12

Station and Date.

Admitted Jan. 7/16 Tauro.
Emg. July 15

Duration.

Disease Bronchitis

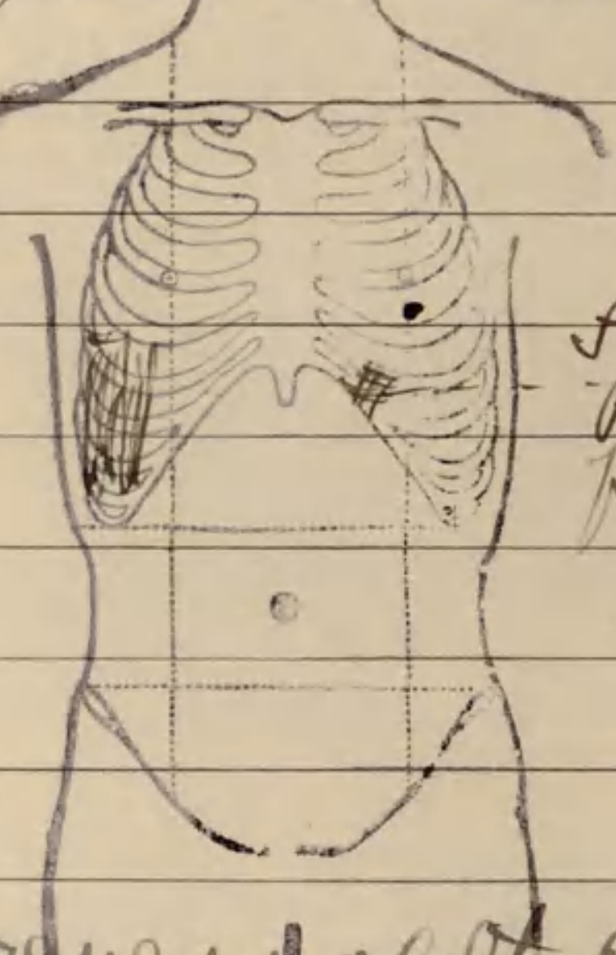
Pers. Hist. Coughs. Pain in right side of chest.
Since Oct. 2nd.

Fam. Hist.

Hist. of present illness Pleurisy 1910 3rd one work, no fluid. Rheumatic Fever 6 weeks in 1913. No Venereal. Measles & Chicken pox in childhood.

Phy. Exam. Crepitous Pleurisy - Lobes affected. Chest shrunken on right side.
On Oct. 2nd caught "Cold", pain in right side of chest accentuated on inspiration with expectoration, cough frequent, dry, short of breath, no night sweats, H.R. 80. Feb. 1916 8 - 148 lbs.
P. Weight. 134?

- Breath sounds higher Inferior. No crackles
- Crackles pleura
- Heart negative.



- Slight pleuro-pericardial friction?

26/10/16 At present feels weak, & soreness of Rt. Chest.

28/10/16. Heart: 1st 3cm. | 10.5 am. reg. No murmurs.

Urine: Normal.

Sputum: Neg. for T.B.

Lab. Report

Treatment. Cant Co. Bde & 1 mc. Iodide Easton's Syrup 3ii t.i.d.
Mist Expect. Am. & Co. Tr. iodi to Rt. side.
Syr. Hypophos. 3v. t.i.d. pc

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

Transferred to Epsom 28/11/16 P.T.O.

1673

Station and Date.	
13-11-16	Had night sweat last night. Linen shit. creosoti ℥ ii ℈ i. d.
25-11-16	Improved considerably Colonial. Hosp.
	Jervisham capt.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Military Hospital MOORE BARRACKS. CANADIAN HOSPITAL, SHORNCLIFFE.

Corps 106 Batt

No. 713-632 Rank and Name Sgt: Adams. Augustus Age 29 Service 9/12

Disease Bronchitis Date of admission Oct: 3-16. Date of discharge 28-11-16 Result Improved

Dates of Observation	3.	4	5	6	7	10	11	12	13	14	15	28	30	31	Nov
Days of Disease	Oct:														2

Days of Disease	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19

Temperature, Fahrenheit

Time	A.M.	P.M.
107°	8 6 4 2	8 6 4 2
106°	8 6 4 2	8 6 4 2
105°	8 6 4 2	8 6 4 2
104°	8 6 4 2	8 6 4 2
103°	8 6 4 2	8 6 4 2
102°	8 6 4 2	8 6 4 2
101°	8 6 4 2	8 6 4 2
100°	8 6 4 2	8 6 4 2
99°	8 6 4 2	8 6 4 2
98°	8 6 4 2	8 6 4 2
97°	8 6	

Pulse per Minute	64	76	80	80	80	86	90	80	80	80	84	84	80	80	80	86		88	104	96	92	104	88	80	84		96		96	76	92	92	96		88	88	80	80	80
Respirations per Minute	18	24	20	20	20	20	20	20	20	20	20	24		20	20	20		20	20	20	20																		
Motions per 24 Hours																																							

Signature J. Chisholm. Capt. In charge of case.

(3103.) W 7204-1542. 750,000. 8/15. H. & Sp. Forms/B. 181/3.

Report No. 849 | Class II.

Adams Augustus
P.O.Box 727 Truro, N.S.

No. of M. H. C. File	No. of Local File	No. of H. Q. File

No. 715632 Rank L/Cpl. Original Unit 106th Present Unit 116th

Age 30 Height 5 ft. 7 ins. Complexion Dark Eyes Blue Hair Dark Character Good

Date of enlistment Jan.7,1916 Where enlisted Truro Where seen service England

Ship returned by Olympic Date of arrival 21-5-17 Port of arrival Halifax

Birthplace Portsmouth, England Religion C of E.

Name and address next of kin Wife

Cause of disability Varicose veins and pencarditis

Condition which prevents the soldier from earning a full livelihood

There is well marked varicosity in the veins of both legs, which he states, causes pain on marching. The heart impulse against the chest wall is increased, and is visible over a larger area than normal. Nothing abnormal on auscultation. He complains of pain in precordium which is increased on excitement or exertion. Pulse rate 88 at rest. On sudden violent exercise he complains of dizziness and becomes flushed. His pulse rate did not rise beyond 90 after this exercise. There is cough and a moderate amount of expectortation at night. The lungs show no physical signs of disease.

Degree of incapacity (Please state in fractions) Eng. Board N.A. Canadian Board 30%

Probable duration of incapacity Permanent with improvement

Is final disability likely to prevent return to previous occupation? N.A.

Recommendation of Canadian Board Convalescent home for treatment

Destination to which transportation issued "B" Unit

Members of Board Capt. [illegible] Medical Officer

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE—IF EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1					
2					
3					
4	----				
5					

Occupation prior to enlistment Cook and farmer

Regular trade or profession do

Average earnings previous to enlistment Any other income

Name and address of last employer N.A.

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

Taxes If Homestead, when is patent due? N.A.

If carrying life or accident insurance, annual premium N A.

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

If unable to follow previous occupation, name preference

At what age soldier left school? 15 What grade, standard, &c., was he in? Sans 7

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

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

References N.A.

I declare that the above statement is correct.

Witness W.B.MacCoy

Date 21-5-17 Signature Augustus Adams

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 payment date.....

Form No. 5a.

5444

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.

STATE OF HEALTH	WHERE EMPLOYED	WAGES	AGE	NAME	DEPENDENTS
					Wife
					Children 1
					2
					3
					4
					5

INFORMATION TO BE FURNISHED BY SOLDIER

Occupation prior to enlistment

Regular trade or profession

Average earnings previous to enlistment — Any other income

Name and address of last employer

Rent per month — Is property entirely yours or subject to mortgage?

Taxes — Is Homestead, where is deed?

Is carrying life or accident insurance, amount premium

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

If married to whom married, date, where?

At what age enlisted, last school? — Were trade, standard, taught, where?

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

Were you ever Vocational Training while in Hospital in England. If so, what specialty?

References

Witness

Date

I declare that the above statement is correct.

Signature

Any other information by Interviewer as to classes likely to be of use, and general remarks:

Date	Amount forwarded to H. Q. Unit, $	Amount held at Depot H. Q., $	L. P. C. leaving Depot, $	Last Pay Cert. Cr., $	Dr., $
	Transfd to	Unit—Date	Transfd Class 1—Date	Transfd Class 3—Date	

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

Form No. 21

First payment date .....

Report on Medical Examination of Recruit
Class II
Name and address next of kin
Birthplace
Ship recruited by
Date of enlistment
Where enlisted
Date of arrival
Port of arrival
Where sent
Rating
Height ft. in. Age. Complexion Eyes Hair Character
Original Unit
Present Unit
No. of A.I.F. Unit
No. of Local Unit
No. of R. O. Unit

Form D.M.S. 1348 (Revised).
2075—30m—2/12/16.

147804

EXAMINATION
BY
STANDING MEDICAL BOARD, BRAMSHOTT.

20-3- 1917

No. 715632 Rank Pte Name Adams, Augustus.

Local Unit 26th Res Bn (106) Overseas Unit Age 30

Examination held in Bramshott area.

DISABILITY. Varicose Veins.

649.A.4599

Overseas—Local.
(scratch one out)

PRESENT CONDITION.

A slight degree in both legs, since before enlistment.
Gives history of left-sided pleurisy six years ago.
Heart sounds much diffused in area (old pericarditis?)
Has been used some since enlistment and is unable
from this to do marching or drill.
Classified for observation.

Board recommends : C II (for observation)

1. Fit for Duty.
2. Fit for duty after ..... weeks physical training.
3. Fit for Base duty ..... weeks.
4. Fit for Permanent Base Duty.
5. Discharge.

Signatures :

Members { C.E. Cooper Cole Capt. Pres.
H. Thurston Capt.

Approved.

Bramshott 20 · 3 · 191 7 for A.D.M.S. and G.O.C., Canadian Troops, Bramshott. Geo A Russell Capt: C.A.M.C.

8/2 92 Bks

1st Cav Div

EXAMINATION

BY

STANDING MEDICAL BOARD, BRAMSHOTT

No. _____ Rank _____ Name _____

Local Unit _____ Overseas Unit _____ Age _____

Examination held in Bramshott area.

PRESENT CONDITION.

DISABILITY.

Overseas—Local.
(strike one out)

Board recommends:

1. Fit for Duty.
2. Fit for duty after _____ weeks physical training.
3. Fit for base duty _____ weeks.
4. Fit for Permanent Base Duty.
5. Discharge.

Signatures:

Pres. _____

Members _____

Approved

Bramshott _____ for

for A.D.M.S. 2nd C.D.C.
Canadian Troops, Bramshott.

1673 (9)

MEDICAL HISTORY SHEET.

Surname Adams Christian Name Augustus

Examined on 13 day of Jan 1916 at Truro N.S.

Approved by W.L. Muir

Birthplace City or Town Portsmouth County England

Rank Capt-amc M.O.

Apparent age 28

Trade or occupation Cook

Height 5 Feet 7 Inches.

Weight 140 Lbs.

Chest measurement Minimum 33 inches. Maximum expansion 35½ inches.

Physical development Fair

Small-Pox Marks Nil

Vaccination Marks Arm Right. — Left. X Number 4

When Vaccinated last Childhood

(a) Marks indicating congenital peculiarities or previous disease nil

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

Date	Fit or Unfit	Examined for Re-engagement,
		DEC 23 1917 M.O
		big-A-4594 M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
30/7/16	+	W.L. Muir Capt. M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
20/3/16.	+	W.L. Muir Capt M.O.
30/3/16.	+	W.L. Muir Capt. M.O.
28/7/16	+	W.L. Muir Capt. M.O.

Enlisted on 6 day of January 1916 at Truro N.S.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	106th C/S Bn.	715632		
Transferred to..				

Disch SEC 27-12-17 GT

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Bramshott Camp, Hants. 20 MAR. 1917 APPROVED.	26-12-16.	Bronchitis	Transfer to CCAC Dn P.T. C/K Down C/R (Instructional) Capt
	20-3-17	Varicose Veins	C.R. Cooper Colonel PRESIDENT.
	Jno A Russell Capt. C.A.M.C. for Colonel, A.D.M.S. Canadian Troops, Bramshott Camp.		MEDICAL BOARD, BRAMSHOTT.

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

M. F. B. 313.

150M.—8-15.
H. Q. 1772-39-439.

1673

Christian Name Augustus

Surname Adams

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
Moore Barracks Hpl. Shorncliffe.		3	10	16	28	11	16	Bronchitis	56	Slight cough. Few signs of thickened pleura rt. lower apilla. Sputum neg. for tbc. Nutrition good. Heart. Neg. Conical. Norp.	F. Twickham Capt. A.M.C.
A&H Epsom	28	11	16	15	1	17	Do.		35	Recovered, transfer to Can. Inf. T.F.	C.H. Dowson Capt.
Pine Hill Halifax N.S.	12	6	17	30	11	17	D.A.H.			Condition unaltered. Boarded. E.	John Cameron Capt A.M.C.

421-21-12-17

NOV 27 1917

R.C.

1673

FORM TO BE USED INSTEAD OF BLANK SPACE ON ARMY FORM 179.

PROCEEDINGS OF MEDICAL BOARD AT DISCHARGE DEPOT.

Number, Rank, Name & Corps of disabled Soldier:-
715632 Pte Adams, Augustus 26th Res. Battn C.E.F.

Previous civilian occupation:- Cook

Is he able to resume previous civilian occupation:- No

Cause of disability:- (a) Varicose Veins (b) Pericarditis

Condition, in detail, which prevents the Soldier from earning a full livelihood:-

(a.) There is well marked varicosity in the veins of both legs, which he states, causes pain on marching.

(b.) The heart impulse against the chest wall is increased, and is visible over a larger area than normal. Nothing abnormal on auscultation He complains of pain in precordium which is increased on excitement or exertion. Pulse rate 88 at rest. On sudden violent exercise he complains of dizziness and becomes flushed. His pulse rate did not rise beyond 90. after this exercise.

There is cough and a moderate amount of expectoration at night. The lungs show no physical signs of disease.

OPINION OF THE BOARD

Degree of incapacity - (please state in fractions) 30 %

Disability due to Service:- 20%

Probable duration of incapacity:- Permanent, with improvement

Does it render him permanently unfit for Military Service:- Yes

Would operation, special treatment or the use of appliances etc., lessen incapacity:- No

Recommendation of Medical Board:- that he be sent to a Convalescent Home for further treatment

Station:- Halifax, N. S.

CLASS:- #II

Date 21-5-17

[signature] Capt R.C. President

D.J. Macdonald Member

F. H. Anderson Capt A.M.C. Member

==========

APPROVED

Date 22-5-17

[signature]

Asst. Director Medical Services.

Date

DUPLICATE.

MEDICAL HISTORY SHEET

Surname [redacted] Adams Christian Name Augustus

Examined on 13th day of Jan 1916 at Tidworth

Birthplace City or Town Portsmouth County England

Apparent age 26

Trade or occupation Cook

Height 5' Feet 7 Inches.

Weight 140 Lbs.

Chest measurement Minimum 33 inches. Maximum expansion 35½ inches.

Physical development Fair

Small-Pox Marks Nil

Vaccination Marks Arm Right. Left. X Number 4

When Vaccinated last Childhood

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

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

Approved by W. L. Meiss

Rank Capt. A.M.C. M.O.

Date	Fit or Unfit	Examined for Re-engagement,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
		M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
20/3/16.	+	W. L. Meiss. Capt. M.O.
30/3/16.	+	W. L. Meiss. Capt. M.O.
		M.O.

Enlisted on 6 *day of* January 1916 *at* Truro, N.S.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	106th O/S Bn.	715632		
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

Desc Sec 13-2-18 EB

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

M. F. B. 313.

150M.—8-15.
H. Q. 1772-39-439.

Surname Adams Christian Name Geo. Geo.

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.

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.
12-2-17.	H. Res Bn.	Taken on Strength from C.C.R.C.	Bramshott.	12-2-17.	Pt II O. 34.
21.3.17	"	S.O.S. on posting to. Regtl. Depot.	"	21.3.17	Pt II O 66.
21.3.17	"	Attd. 36 Res. for Rq D. on posting N.S.R.D. Cat. – B.	"	21.3.17	—— 66
26.3.17	N.S.R.D.	T.O.S. remain attd 36th for employment.	"	22.3.17	—— 17.
7-4-17	"	Ceases on Bmd. S.O.S. Can. For. Bn.	Sunningdale	7-4-17	Pt II D.O. 89. 26th R. Bn. O.II.O. 80. a/7-4-17.
20-4-17	C.F.C.	T.O.S. from 26th R. Bn	London	7-4-17	" " 93.
21.5.17	C.F.C.B.D.	S.O.S. to Canada for discharge	Sun'dale	12.5.17	" " 19.
	Dis Dep.	To Convl. Home	MD6 Truro NS	21.5.17	NR 268

1673

R—122

CHS Rank Name ADAMS Augustus Reg'l No. 715632

Unit 106th. Bn. If in perm. Corps, What Unit? Married or Single Married

Place and Date of Enlistment Truro Jan. 13th.1916 Place of Birth Portsmouth N.S.

Name and Address, Next-of-Kin Mrs, A. Gertrude Adams.

Truro N.S. Canada. Relationship Wife

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E R.B. 105
File R.L.
Category O.R.Can

Discharge, Date and Place Reason Character

H. W. & V., Ld.—7165-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Arr. in England		S.S. Empress Of Britain 25th July 1916.			
		Bronchitis			
10.10.16	C.L. 106th Bn.	adm. to Moore Bks. Hptl.	Shorncliffe	4.10.16	CL 22
6.10.16	106th	T.ffd to 40th Bn	Caesars Camp	5.10.16	do 65
6-10-16	o/c 40	Taken on strength.	do	5-10-16	— 258.
21.12.16.	CL 40	T.ffd Can Con. Hosp. Woodcote Pk.	Epsom	29.11.16	— 406 Bron + Pleu
2.1.17	C.C.a.c.	Having reptd as Sick is D.O.S.	Hastings	2.1.17	— 580.
5.1.17	"	Proc of Com held for Pte	"	4.1.17	— 9
15.1.17	26th Bn	SOS to CCAC	Ceasers Camp	7.1.17	— 10
11.2.17	CCAC	Reptd to CCAC from Com Held	Hastings	10.2.17	— 71
14.2.17	"	Found Fit & SOS on trans to 26th R.B.	"	12.2.17	— 76

Army Form B. 103.

1673

Casualty Form—Active Service.

Regiment or Corps _____ Regimental Number 715632

Rank Pte. Surname Adams Christian Name Augustus

Religion Church of England Age on Enlistment 28 years 6 months.

Enlisted (a) 13/6-1-16 Terms of Service (a) D. of War Service reckons from (a) 13/6-1-16

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

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

or Corps Trade and Rate Cook

K. L. Marshall Lt Signature of Officer i/c Records.

Report: Date	Report: From whom received	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
		Embarked ...	Halifax N.S	15-7-16	
		Disembarked	Liverpool Eng	27-7-16	
5-10-16	O.C. 106th Bn	Transferred to 40th Bn	L'Digate	5-10-16	D.C. Part II #65
			A. B. McAuley for Capt.		
6-10-16.	O.C. 40th Bn.	Taken on Strength	Caesars Camp	5-10-16	D.O. Pt II 258
4-1-17	O.C. 40th Bn.	Transferred from 40th Bn. to 26th CRB (Nova Scotia)	Digate R. Parchee Lt adady. 40th RRB.	4-1-17	D.O. Part II No 336

(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.

[P.T.O.

(B99130) W 15012—5156 J. P. & Co., Ltd. Forms/B103/3.

1673

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				
4-1-17	O C 26th Bn.	Taken on Strength.	Dibgate	4-1-17	D.O. Part II No. 1
27-2-17	" " "	Trans. to C.C.R.C.	Bramshott	27-2-17	" " " " #47
27-2-17	" " "	attached to 26th Bn.	"	27-2-17	" " " " "
21-3-17	" " "	U.S. Trans to Reg. Depot	"	21-3-17	" " " #12
7-4-17	O.C. 26th Bn.	Ceases to be attached	Bramshott	7-4-17	D. D. PART II No. 80
		on Transfer to Forestry Choir.			Dated 7-4-17
					Capt & Adjt. for Lieut. Col. Commanding 26th Canadian Reserve Bn. (Nova Scotia)
20-4-17	D. J. T. O	Taken on strength Can. Foustry Corps	London	7-4-17	Pt. II. orders # 93 W. J. Wilson Lt. & Asst. Adj. C.D.C.
11 MAY 1917		TAKEN ON STRENGTH C.D.D, BUXTON Pt. 11 ORDER No: 119			W. M. Buxton Lt Col Commanding Canadian Disch D
12 MAY 1917		EMBARKED FOR CANADA FROM LIVERPOOL			W. M. Buxton Lt. Col. for Commanding Canadian Discharge Depot

DUPLICATE

ATTESTATION PAPER.

No. 715632

Folio.

106th BATTALION NOVA SCOTIA RIFLES.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... Adams
1a. What are your Christian names?..... Augustus
1b. What is your present address?..... Truro, N. S.
2. In what Town, Township or Parish, and in what Country were you born?..... Portsmouth, England
3. What is the name of your next-of kin?..... Mrs A. Gertrude Adams
4. What is the address of your next-of-kin?..... Truro, N. S.
4a. What is the relationship of your next-of-kin?. Wife
5. What is the date of your birth?..... July 29th 1887
6. What is your Trade or Calling?..... Cook
7. Are you married?..... Yes
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, Augustus Adams, 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.

Augustus Adams (Signature of Recruit)

Date Jan 13 1916. A. S. Marshall (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Augustus Adams, 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.

Augustus Adams (Signature of Recruit)

Date Jan 13 1916. A. S. Marshall (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 Truro this 13th day of January 1916.

R. L. Jones (Signature of Justice)

Comdg 106th Regt Nova Scotia Rifles

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

Description of Augustus Adams on Enlistment.

Apparent Age 28 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	5 ft 7 ins.
Chest measurement. Girth when fully expanded	35½ ins.
Chest measurement. Range of expansion	2½ ins.
Complexion	Ruddy
Eyes	Blue
Hair	Red
Religious denominations. Church of England	Yes
Presbyterian	
Methodist	
Baptist or Congregationalist	
Roman Catholic	
Jewish	
Other denominations (Denomination to be stated.)	

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

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

Four vaccination marks left arm.

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 Jan 13th 191 6 ..... D. R. Muir CAPTAIN

Place Truro N.S. ..... MEDICAL OFFICER. 106th Overseas Battn. C.E.F.

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.

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

..... (Signature of Officer)

Comd'g. 106th Overseas Bn. C.E.F. "Nova Scotia Rifles"

Date Jan. 13th 191 6 A. O. L.

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

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

Sheet No. 2. Alice Gertrude Adams. wife.

Name of Soldier Adams Augustus. Pte.

L. L. Job 89002.—Req. 6213.

PAYMENTS.

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916	A 789	20 —	20	$20 cr A/c Closed
May		A. H530	20	20	Ret'd per Troopship 2810
June		A 1846	20	20	Date 12.5.17 F. X. 21.6.17
July		A 9894	20	20	Clerk J. Matthews
Aug.		A 10884	20	20	
Sept.		A 15017	20	20	
Oct.		A 18361	20 —	20	
Nov.		A 21618	20	20	
Dec.		A 25002	20	20	
Jan.	1917	A 28565	20	20	
Feb.		A 31510	20	20	
March		A 34714	20	20	
April		B 146	20	20	
May		B 3601	20	20	
June		C 7171	20	20	
July		~~B 11480~~	~~20~~	~~20~~	B 11480 cancelled
Aug.					Discharged 30-11-17 in DR 24/1/17
Sept.					Gth Dr. 24/1/17
Oct.					
Nov.					Not noted on Roll.
Dec.					
Jan.	1918				
Feb.					
March					
April					ACCOUNT CLOSED
May					DATE ..... PER W
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.				

1-3-16

L. L. Job 88773—M. & D. 6195.

MILITIA AND DEFENCE

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

SEPARATION ALLOWANCE

Name Alice Gertrude Adams

Address Pleasant St.
Truro.
N.S.

Relation to Soldier wife, child or mother — Wife.

Name of Soldier Adams. Augustus

Regtl. No.

Rank Pte.

Corps 106 Battn.

To what Corps belonging when called out

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		N28424	20 20	

COPIED FOR I CASUALTIES.

ACCOUNT CLOSED ..... PER ..... W.
DATE .....

L- L. Job 31[illegible] M. & D. 6574.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—4-16.
H. Q. 1772-39-819.

P. 17 4/17

(Wife)

To Whom Mrs. Alice Gertude Adams

Address Pleasant St.
Truro.
N. S.

Rate $20.00

By Whom Assigned Adams Augustus

Regtl. No. 715632

Rank Pte.

Corps 106 Battn "B" Coy

Ens

JUL 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				

COPIED FOR CASUALTIES.

File No. 091-A 22

WAR SERVICE GRATUITY.

INV 25-10-19 4448

Register No. A 1062

Reg. No. 715632 L/C

Name Adams Augusta

Address Maystown Colchester Co NS

Dec'd No. ..... W.S.G. File No. .....

Days at ... per day $ .....

S.A. ..... months at $ ... per mo. $ .....

Less P. D. P. credited .....

Less further debit balance
Net due paid as below

Pay Soldier $ 119 90

SOLDIER DEPENDENT

No.	Ck. No.	Amount	Ac. No	Ck. No	Amount
1					
2					
3					
4					
5					
6					
Total					

Davidson Inv Cons

Clerk L Record

Dependent .....

Address .....

$ .....

$ .....

$ .....

Pay Dependent $ 120 00

Days 122 Rate 100 Due 100 00

Less P.D.P. credited .....

Less further Dr. Bal. or overpayment. .....

Net 239 90

RW104
11/11/19

Date	Ck. Order	Ck. No.	Amount		Remarks.	Date	Ck. Order	Ck. No.	Amount.	
1 3/11/19	41577	537615	119	90	4/11/19 4/11/19	1 3/11/19	41578	537616	100	~
2						2				
3						3				
4						4				
5						5				
6						6				

495-D.P.-100M-6-19 (10248).

GEN'L AUDITOR
Posting checked by
.....
Date 3/11/19

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

9/1-A-3.

Name Adams, Augustus
Surname Christian Name

Regimental Number 715632 Rank Pte.

Unit 106th Bn.

Original Unit

District where paid M.D.6

Date of Discharge 30-11-17

P. D. P. Filing Number 20-65-6

Address (in full) Masstown,
Colchester Co.
N.S.

Rates:—Regimental pay $1.00 per diem: Field Allowance $ .10 per diem. Separation Allowance $20.00 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		
160 10	884	12-2-18	53 00	855	12-3-18	53 00	807	12-4-18	54 10		160 10

M. F. W. 127.
50M—6 17.
1772 39-1140.

Remarks:

E

Name Adams, Augustus. (Pte).

M. F. W. 41
1 0M—7-16
1772-39 889.

5714

Regimental No. 715632

Unit 106th Batt.

Name and address of ~~next of kin~~ P.O. Box. 727 Truro. N.S.

Date of enlistment

Place of " S. A. $20.00 fr 1/6/16 to 30/6/17 = $320.00

Married (yes or no) Yes.

Date and place discharged 21. 5. 17. Cons. Home.

Amount of pay assigned monthly $ 20.00 fr 1/7/16 to 30/6/17 = $240.00

To whom payable Mrs A.B. Adams, Pleasant St. Truro. N.S.

Character on discharge Class. II

Olympic. 21.5.17.

649.a.4599

Form 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.
	7/5/17							32 08								Emg L.P.C.
8/5/17	30/6/17	54 1.00	54 00		54	10	5 40							9 73		
														30 00		Boat D.D. Halifax June 1917
													20 00	Lon		
								Bal Cr on Trans 31 75								
								91 48					91 48			July 1/17 "B" Unit.
																Pensioned.
																Dec 1/17 Letter to Sand Re asst of Ap for June 1917 28/6/17

Emg A.P. 31/5/17

M. F. W. 41
1 0M—7-16
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					

1673

(At Station or Hospital where finally disposed of.)

Station and Hospital } ..... Arrived from } .....

Date .....

If admitted.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
Index No.	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

Date of final Medical Board or decision. }

.....
Administrative Medical Officer.

DETAILED MEDICAL HISTORY OF INVALID.

Station .....

Corps .....

Regimental No. ..... Rank .....

Name .....

Disability .....

Date .....

Hospital or Station transferred to for final disposal. }

Date of final disposal }

How finally disposed of }

The original Report is invariably to accompany the discharge documents of Invalids.

Militia Form B. 227.
20m.—10-15.
H. Q. 1772-39-117.

1673

DEPT. MILITIA & DEFENCE
OCT -2 1917
CANADA

MEDICAL HISTORY OF AN INVALID.

649-Ag 4599

1.—Station. Halifax, N. S.

2.—Regiment of Corps. 26th Res. Bn.

3.—Regimental No. and Rank. } 715652 Lce. Cpl.

4.—Name. Augustus Adams.

5.—Age last Birthday. 30.

6.—Enlisted { on Jan. 7th, 1916. / at Truro, N. S.

7.—Former Trade or Occupation. } Farmer.

8.—General remarks on his :—

(a) Conduct. Sheets not available at

(b) Habits. "B" Unit.

(c) Temperance.

(For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

Date 12-9-17.

9.—Service.	Years.	Days.
	PERIODS.	
	From	To
106th Bn., C. E. F.	Jan. 7th, 1916	Oct. 1916.
26th Res. Bn.	Oct. 1916	Date.

10.—Disease or Disability. (a) D. A. H. 0 (b) Varicose Veins

SEP 28 1917
67 a -287

11.—Date of origin, cause, present condition and whether the same is the result of service or climate. No.

Has it been aggravated by intemperance, vice or misconduct? No.

Had Rheumatic Fever 3 years ago and has been troubled with shortness of breath since then. Cannot walk more than a mile without dyspnoea. Apex beat is markedly displaced downwards and there is a pronounced precordial thrill. The 1st mitral sound is diffused and there is a suggestion of a presystolic murmur. Dullness of L. apex with increased V.R. at both apices. Occasional night sweats. Has lost weith since enlistment and now weighs 127½. Slight varicose veins on both calves present before enlistment.

M. F. B. 227.
20m.—10-15.
H. Q. 1772-39-117.

[over]

1673

12.—In gunshot wounds, or other injuries, state how caused ; whether received in action or in Field Service, and at what place, and whether on or off duty. If not received in action, was a Court of Inquiry held ?

Not applicable.

13.—In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

Not applicable.

14.—If aggravated, though not primarily caused by his service as a soldier, explain how it has been so aggravated.

(a) Aggravation 2/5

(b) None.

15.—Is the disability permanent ? If not, state its probable duration. To what extent will it prevent his earning a full livelihood ?

(a) & (b) Permanent. 1/2

16.—Full particulars of medical treatment of case up to date of invaliding.

Moore Barracks Hosp. 3 mths.

Epsom Conval. Hosp. 6 wks.

St. Leonards Conval. Hosp. 6 wks.

1673

17.—If previously proposed for discharge on medical grounds, state the date, the disability, for which recommended for discharge, and the cause of remand of Corps.

Not applicable.

18—State if for discharge on account of unfitness for service.

Yes.

John Lawson Capt. A. M. C.

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

(In which it should be stated how far the Board concurs in the above Report.)

Mailing address: Box. 727, Truro, N. S.

The Board having examined No. 715632 Lce. Cpl. Augustus Adams, 26th Bes.Bn., concur in the above report and recommend that he be placed in Category E. \ Treatment will not benefit.

Signatures :— Philip Weatherbe, Major, R.C.A. President.

Station Halifax, N. S.

Jas. A. Pratt Capt, A.M.C. } Members.

Date 13-9-17.

APPROVED

Date 14/9/17 W. Wilmot Hall Assistant Director of Medical Services.

Approved.

Date ..... Director of Medical Services.

[OVER]

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.

1673

This space to be for numbers

1-6-39

74-A-68

Proceedings on Discharge.

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

No.	715632
Rank	Lance-Corporal
Surname	Adams
Christian Name	Augustus
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	106th Battalion
Date of Discharge	November 30, 1917.
Place of Discharge	Halifax, N. S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age	20 years 4 months.
Height	5 feet 7 inches.
Complexion	Dark
Eyes	Blue
Hair	Dark
Trade	Farmer
Intended place of residence (To be given as fully as practicable.)	Masstown Col. Co N S

Descriptive Marks

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

Being no longer physically fit for war 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 hand writing of the Commanding Officer, who will himself make all critical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

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.)

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

8-17-11-34

Discharge 21 Dec 17

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

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

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date).....

Commanding .....

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

No. 715632 Moncton Bat 6. N.S

(Place) Augustus Adams (*Signature of Soldier.*)

(Date) 3rd Dec 1917. E Bottomley Moncton. Col. C.D.S. (*Signature of Witness.*)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

.....(*Signature of Soldier.*)

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. **Confirmation of Discharge.**

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

(Place) Halifax N.S.

(Date) 15-12-17

(*Signature*) W. Ellisford Capt MAJOR. O.C. "B" UNIT M.H.C.

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.)

X

I have not Received My Nov Pay & I also understand that we are to be furnished with a suit of civilian clothing when discharged

No 715632

L/Cpl Augustus Adams

(OVER)

P. 559.
MARRIED OR SINGLE Married

PLACE OF BIRTH Portsmouth Eng

NAME AND ADDRESS OF NEXT OF KIN Mrs Alice G. Adams, Pleasant Shed, Truro, Nova Scotia

RELATIONSHIP OF NEXT OF KIN Wife

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $20 00 EFFECTIVE (DATE)

PAYABLE TO Mrs Alice G. Adams, Pleasant Shed, Truro, Nova Scotia

RELATIONSHIP OF DEPENDANT Wife

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 715632 RANK Private NAME Adams, Augustus

IF IN PERMT. CORPS WHAT UNIT } UNIT 106th Bn

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Scan 13th/16

DATE OF ATTESTATION Truro NS

TRANSFERRED TO 40 Bn DATE 16-10-16 AUTHORITY

TRANSFERRED TO 26th Res Bn DATE 1-2-17 AUTHORITY 2069 22/11/17

TRANSFERRED TO 1 P Bn. DATE 8/5/17 AUTHORITY Reg. 5/1/32 24/4/17.

TRANSFERRED TO Depot K DATE 8/5/17 AUTHORITY Reg 5/1/33 24/4/17

ASSIGNED PAY MONTHLY $20 00 DATE EFFECTIVE July 1/16

PAYABLE TO Mrs A.G. Adams, Pleasant Shed, Truro, NS RELATIONSHIP Wife

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

~~STOP PAYMENT FORM~~ (ASSIGNED PAY) ~~RENDERED (DATE)~~ Stopped 7-5-17 EFFECTIVE 1-6-17. REASON Medically unfit. NOV 26 1918

DISCHARGE DATE AND PLACE to Canada 7-5-17 REASON AND AUTHORITY Medically unfit. Do. 416 (b) AG. 5-1-33 24-4-17

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount	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 DEBITS	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
													20 90																20 90				July balance from Canada
													20 90												20		20	35					
													34 10												20		24 87	43 13					
													33			178	15-6					4 87			20		22 80	32 33					Trans. 40 Bn 80 358 67
													16 50	239	3/6/16							7 30				72 17						
													104 80												- -			4993					
													17 60												20		20 00	6293		- -			
													33 -												20		2000	7703		- -			
													34 10																				
													139 00																				
													34 10												20		2000	9113					Trans to 26th Res Bn 2069 22/11/17
													13 30					4189	11/1/17	CCD												
													30 80					1926	3/1/17	CCAC			4 87		20		32 17	8996					
													2 84 10	134	28/4/17	264	31/3/17	3713	7/12/16	6 8 5			2 44		14 96								
													34 10	25	15/-	180	15/6/17	6 3 4		CCD.S.C.		973	973		14 00		73 52	50 34					
													33 -												20		20	6334					
													7 70												20		20	51 04					
													328 98									26 76	24 33	26 87	7 00		77 86						

EXTRACTS FROM ACTIVE SERVICE PAY-BOOK

Date of Payment	No. of Acq. Roll.	AMOUNT Francs	£	s	$	¢	Place of Payment.	Name of Paymaster	Remarks
20-12-16	—		1	-	4	87	Folkestone	Orderly Room	Bal
Cheque 17-1-17	2035		2	-	9	73	—	HMS Nubia	

1916 487 1069 15.20

10, from Liverpool 12/5/17

P. 559.

MARRIED OR SINGLE Married

PLACE OF BIRTH Portsmouth Eng.

NAME AND ADDRESS OF NEXT OF KIN Mrs. Alice G. Adams, Pleasant Stud, Truro, Nova Scotia.

RELATIONSHIP OF NEXT OF KIN Wife

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $20.00 EFFECTIVE (DATE)

PAYABLE TO Mrs. Alice G. Adams, Pleasant Stud, Truro, Nova Scotia.

RELATIONSHIP OF DEPENDANT Wife

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 715632 RANK Private NAME Adams, Augustus

IF IN PERMT. CORPS } WHAT UNIT UNIT 106th Bn

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Jan 13th 16

DATE OF ATTESTATION Truro N.S.

TRANSFERRED TO 40 Bn DATE 16-10-16 AUTHORITY G.O. 206/16

TRANSFERRED TO 26th Res Bde DATE 1-2-17 AUTHORITY 2069 22/1/17

TRANSFERRED TO L.P.& O. DATE 8/3/17 AUTHORITY G.O. 5/1/33 24/4/17.

TRANSFERRED TO Depot K DATE 8/3/17 AUTHORITY G.O. 5/1/33 24/4/17

ASSIGNED PAY MONTHLY $20.00 DATE EFFECTIVE July 1/16

PAYABLE TO Mrs. Alg. Adams, Pleasant Stud, Truro, N.S. RELATIONSHIP Wife

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

~~STOP PAYMENT FORM~~ (ASSIGNED PAY) ~~RENDERED (DATE)~~ Stopped 7-5-17 EFFECTIVE 1-6-17. REASON Medically unfit.

NOV 26 1918

DISCHARGE DATE AND PLACE to Canada 7-5-17 REASON AND AUTHORITY Medically unfit. Do. 416) Alg. 5-1-33 24-4-17

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE 1916	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
July														20.90	20 90									July balance from Canada				20		20	20 90				
Aug.	31	1.00	31	00	31	10	3	10							34 10													20		20	35				
Sept	30	1	30		30	1	3								33									4871				20		24 87	43 13				
Oct. 15	15	.	15	.	15	.	1	50							16 60									7 30 4				20		27 30	32 33				Trans. 40 Bn. 80 258 6/10
104 30																														7217				
Oct. 16-31	16	1.00	16	00	16	10	1	60							17 60													-	-		4993				
Nov. 1-30	30	1.00	30	00	30	10	3	00							33 -													20	-	20 00	6293	-	-		
Dec 1-31	31	"	31	-	31	10	3	10							34 10													20	-	2000	7703	-	-		
			15	30											149 10																				
1917		1.00	31	-											34 10													20	-	2000	9113				Trans to 26th Res Bde 2069 22/1/17
Jan	31	10	3	10											37 20								4489 11/1/17 CCD				487							
			34	10											3 30								1926 3/1/17 CCAC				244							
Feb	28	-	30	80											20 80								3713 7/12/16	973	973		86	20		32 17	8976			
			334	10											3 54 10	134	28/2/17	266	31/3/17				973	973	14 60		140		73 52	5034				
Mch.	31	10	34	10											34 10	25	15/3/17	195	15/3/17								20	20	6334					
April 30	30	-	33	-											33 -													20	20	5104					
May 17	7	-	7	70											7 70																				
	180		308	00										20 90	328 90									2676	2433	2661	94	200		17786					

S/L. 6696. Sailed on Troopship 7810, from Liverpool 17/5/17

S/L. 34. 17/5/17. Ex. S 32.08

7/6632 Pte. Adams, Augustus.

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																																		
Sept 30		208												20 90	328 90								26 76	24 33	26 77		200 -		27 86	51 04				Transfd to L.P.C. 5/5/17 Auth. A.G. 3/1/33. 24/4/17. 436. O.M. Charges taken from Pay books. 4 564. 20-4-17
																												4 36	4 36	46 68				
Sept																6632	7/6	Buxton					4 87						37 87	41 31 ✓		46 68 + 4 60 = 51 28		

L.P.C. A.F.W. FORM REN? — EFFEC. 1-6-17
DISCHARGED TO Canada DATE 9-5-17
PAYBOOK VERIFIED Extract from 6r. BAL 37-08 L.P.C. REN? 7-5-17
AUTHY. Do #(6) A.G. 5-1-33 24-4-17

Medically unfit
Entered Awes $ 4.87
Balce due $27.21

Checked & Valid L.P.C.

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	ALLOTMENT ENG.
Oct.	Balce FORWARD	~~41 81~~							41 81		
Oct.				Draft 2035. C/for Co. 17/41-7	9 73				32 08 ✓		
					9 73						
June				Dr Bal b/can.	27 21				4 87		
					27 21						
Oct				Dr. AcPB. 20/10/16 Expo.	4 87				0		
					4 87						

27.21 Dnde