REGIMENTAL DOCUMENTS

NAME ADAMS. WILLIAM. Pte. REGT. NO. 10 045 42 UNIT 22nd Bn. H. Q. FILE NO. 1938

	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		M			DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103) 2					Category
	TRAINING HISTORY SHEET (M.F.W. 113) Nominal Roll					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122) 1					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)		H			
	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) 2					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465) 2					Category
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179) 1					Medical 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)					
2	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	Am Fd W 192					
1	Casualty Form					
	Identity Card					
1	Pay Book					

W. 2589
100M-11-18
1772-39 1307

226th. OVERSEAS BATTALION C. E. F.

ATTESTATION PAPER.

No. 1000542

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Adams
1a. What are your Christian names?	William
1b. What is your present address?	Gladstone, Man.
2. In what Town, Township or Parish, and in what Country were you born?	Shepshow, England
3. What is the name of your next-of kin?	Thomas Adams
4. What is the address of your next-of-kin?	Shepshow England
4a. What is the relationship of your next-of-kin?	Father
5. What is the date of your birth?	Oct 31st 1893
6. What is your Trade or Calling?	Farm Laborer
7. Are you married?	No
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? 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

Commanding 226th Overseas Battalion C. E. F. Lieut. Colonel

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, William 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.

Signed William Adams (Signature of Recruit)

Date February 7th 1916. Signed Jos K Morton (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William 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.

Signed William Adams (Signature of Recruit)

Date February 7th 1916. Signed Jos K Morton (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 Gladstone this Seventh day of February 1916.

Signed D A MacLean (Signature of Justice)

M. F. W. 22.
600M.—2-16.
H. Q. 1772-39-841.

Description of William Adams on Enlistment.

Apparent Age 22 years 1 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	5 ft 8 ins.	
Chest measurement. Girth when fully expanded	34½ ins.	
Chest measurement. Range of expansion	3 ins.	
Complexion	Fair	
Eyes	Grey	
Hair	Light Brown	
Religious denominations. Church of England		
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).

Burned scar across inner angle of right eyebrow

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 February 7th 1916. Signed E. H. Rose

Place Gladstone J. Dunbar Capt.
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.

William 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.

Signed R. A. Gillespie (Signature of Officer)
Lieut. Colonel
Commanding 226th. Overseas Battalion C. E. F.

Date February 7th 1916.

NO. 10
DISTRICT DEPOT
MAY 27 1919
DISCHARGE SECTION
M.D. 10. WINNIPEG

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

2 Blues

THIS IS TO CERTIFY that No. 1000542 (Rank) Corpl

Name (in full) William Adams enlisted in

the 226th Batt

CANADIAN EXPEDITIONARY FORCE at Gladstone on the Seventh

day of February 1916

HE served in France + Belgium 44th Batt 9 mth 6 days

and is now discharged from the service by reason of ~~Demobilization~~ Medically Unfit R.O. 1130 (a)
Medical Unfitness.

+ P.O. 143 - Para 3 K

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

Age 27 years

Height 5 ft 8 in

Complexion Fair

Eyes Grey

Hair Lt Brown

W Adams
Signature of Soldier

Marks or Scars G.S.W Left shoulder + upper arm.

Gillcock
Issuing Officer

Lieut for Major
Rank
Officer Commanding No. 10 District Depot

Date of Discharge

27-5-19

Date 27th. May 1919

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.

WAR SERVICE BADGE

A.168247

CLASS "A" NO. B.47521 ISSUED

Forms
I. 1237
12

Army Form I. 1237.

Ward 8 FC 13

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book	Regimental No.	Rank.	Surname.	Christian Name.
FC389	1000542	Cpl	Adams	William

Year	Unit.	Age.	Service.
1918	44th Canadians Alb°	24	2 Field service 1 year

Station and Date.	
	Disease GSW (shell) left arm Fract humerus, lower jaw fract mental bone Hit 17-2-18 Oper. that day at 1st Can. C.C.S. Wounds excised & bone fragments removed. Exam. On Thomas splint & extension. Hand in good supination. 4 in x 2 in. clean wound over ant axillary fold. Marked pulsation in wound. Outer post. surface middle of arm 2 in. x 1 in. wound clean. Xray plates show severe comminution of humerus from just below head of humerus to lower 3rd. Septic wound at point of jaw. (Teeth have ached so that he could not take solid food. Probably tip of mental bone hit). R/ Eusol dressings.
8-3-18	Upper wound bright & clean. ATS/4 500 N.S. Heavy discharge of pus from lower. Jaw better. R/ Mouth wash.
9-3-18	Camel tube in lower wound.
12-3-18	Much discharge from lower wound Arm looks well.
13-3-18	Teeth still ache. Will Dental Surgeon please see P.T.O.
14. 3. 18.	Fragments of broken teeth removed today Should remove roots & damaged teeth next week. and subsequently fit him with dentures R.A. Wells

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

Wt. W 6604/M 2870—1,500,000—8/17—H. & Sr. (10938). Forms/I. 1237/12. (E239)

[P.T.O.

Station and Date.	
15-3-18	Temp. rising. Arm looks well & wounds draining freely.
18-3-18	Much pus in upper wound. Wells from small sinus in lower end. Patient has been lying so upper wound was dependent. Rx Sit up in bed & arm lowered. Small area of hypoesthesia over dorsal surface 1st metacarpal. No voluntary movement in muscle supplied by musculo spiral.
19-3-18	Seen by Col. Sargent who advised no change in treatment.
22-3-18	Temp rising. Inflamed about lower wound. Drainage seems free. Stop Eusol. Arm abducted rt. angles.
27-3-18	Comfortable. Temp. down.
29-3-18	Much pus discharging.
3-4-18	Improving. Thumb ~~flexing~~ addducting. Rx Hold abducted
8-4-18	arm in good alignment. Considerable discharge upper wound still. Sesp from lower.
17-4-18	Clean splint put on. No evidence of union.
20-4-18	Discharge decreasing.
29-4-18	Doing well.
3-5-18	Arm wounds look very well. Still pus from chin.
4-5-18	Seen by Capt. Shields who bent splint at arm at elbow.
9-5-18	Extension removed. Mr Sevier to give massage to forearm & hands. BPC.
10.5.18.	Massage to forearm & hand JH Lowe

Station and Date.	
	Immobile
15-8-18	Bent splint removed. Arm put up in position of triangle. Massage to Elbow and wrist for movement.
7-9-18	Transfer to Kingswood.
	A E Morgan Capt

MASSEY-HARRIS CONVALESCENT HOSPITAL.
"KINGSWOOD", DULWICH,
LONDON, S.E. 10. 9. 1918

	Wound left shoulder requires dressing. Fracture left humerus - middle united some callous left elbow nearly fixed at angle 110°, more or less stiffness in all joints of arm. Passage movements:- *
23.9.18.	Range of movements at shoulder, elbow, wrist and fingers very limited, but improving under massage and passive movements.
	Wounds all healed.
3.10.18.	To be transferred to Buxton, for further Treatment. J McKinnon Capt.
	Present Condition:-
28.10.18.	Scar 3" long, healed extending from just below 4" below shoulder joint posterio-lateral, also scar of exit 5½" long healed, extending from below left clavicle, external end, down medial side of humerus. Fracture of left humerus middle, united, some displacement, some callous, left elbow fixed at 100°. Movements at shoulder, elbow, wrist & fingers very limited.
8.11.18	179 Written up. W J Kennedy capt Cause

orms
. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	10805.42	Cpl	Adams	Williams
	Unit.		Age.	Service.
Year 12-8-18	44th Canadians		24	3y 12

Station and Date.

DMH.

Disease G.S.W. left Arm left shoulder lower jaw fracture

Patient states he enlisted Feb 6 1916 at Gladstone Man.

Sailed for England February 1917 landed at Liverpool and proceed to Shorncliffe stayed there two months then proceed to France in April

Was wounded 23 August 1917 and went through the following 12th F.A. then went to Etaples stayed there a few day then went to Con Camp near Bucky went from there to Base and went back to Battalion in October 1917

Was wounded 17th February 1918 at Lens and went through the following Pt. C.C.S. at Barlin then went to 20th General hosp Camiers stayed there three weeks and then went to England Tolting Military hosp stayed there five months then went to Epping Ontario Military hospital Aug 13/1918

Operations:-

(1) Shrapnel removed and wound cleaned 18 feb 1918

(2) Shrapnel removed and dead bone May 20 1918

Examinations:-

13-8-18 Arm (left) up in a long bent extension splint. Wound in fore arm almost healed, elbow and wrist almost

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

(6365) W2944/P+38 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349)

[P.T.O.

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 228th. OVERSEAS BATTALION C. E. F.

(2) Regimental Number 1000542

(3) Full Name of Soldier William Adams

(4) Place of Birth Chepstow, England

(5) Are you married, or not ? No

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

(b) Present Postal Address ✓

(7) Are you a widower ? No

(8) Have you any children ? ✓

If so, give number of boys and girls ✓

Also their names and ages

M. F. W. 67.

200M.—3-16.
I772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes Thomas Adams

If so, state name and address Tintern near Chepstow Monmouth. Eng.

(10) Is your Mother alive? Yes

If so, state name and address Caroline Adams

(same address)

(11) If your Mother is a widow ✓

Are you her sole support, or not? ✓

(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.

✓

(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.

✓

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

✓

(15) Are you insured? 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.

R A Greespie
Lieut. Colonel
Commanding 226th. Overseas Canadian C.E.F.
Officer Commanding.

Date October 5/16

16

A 554

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

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

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

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

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

1. Christian Names ....William.... 2. Surname ....Adams.....
3. Rank ....Cpl.... 4. Original Unit ....226th Batt. 5. Reg. No. 1000542
6. Address, in full, to which future payments of gratuity are to be forwarded .....
   .....Gladstone - P.O.....
   .....Manitoba.....
7. Date of enlistment in the C.E.F. ....Feby 16th 1916.....
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge .....
9. Relationship of such dependent .....
10. Present address, in full, of such dependent .....Not applic.....
    .....
    .....
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier ? .....No.....
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
    .....
    .....Not applic.....
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States ? .....No.....
14. Were you on active service only in Canada or the United States ? If so, give particulars of units and dates of such service .....
    .....Not applic.....
    .....
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served .Enlisted..1.6-2-16...to
    England..6-3-17...to...France..31-5-17....to.
    England..6-3-18....to...3-2-19....to discharge 27-5-19 MD.10
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department .....No.....
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? ....No....

M.F.W. 2595.
1772—39—1389.
122—D.P.—250M-2-19.

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

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

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

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

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

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

(b) If so, was such reversion in consequence of misconduct or inefficiency? .....

24. Are you now serving in the C.E.F. ..... No ..... If not, give:—(a) Date of discharge (a) ..... 27-5-19 ..... (b) Reason for discharge .... Medically Unfit. R.O. 1420 .....

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit ..... No .....

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

..... as in Para 15 .....

27. (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 ...

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

Signature of Applicant: W Cedams

Place of Residence: Gladstone Manitoba

Declared before me at: Winnipeg, Man.

This day of MAY 27 1919 19....

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

Gldlood Lr.
Justice of the Peace for Manitoba.

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	.....		.....	420 00
.....	.....		.....	
.....	.....		.....	

Certified Correct.

District Paymaster.

MAN

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

M.F.B. 465
100m.—7.16.
1772-39-950

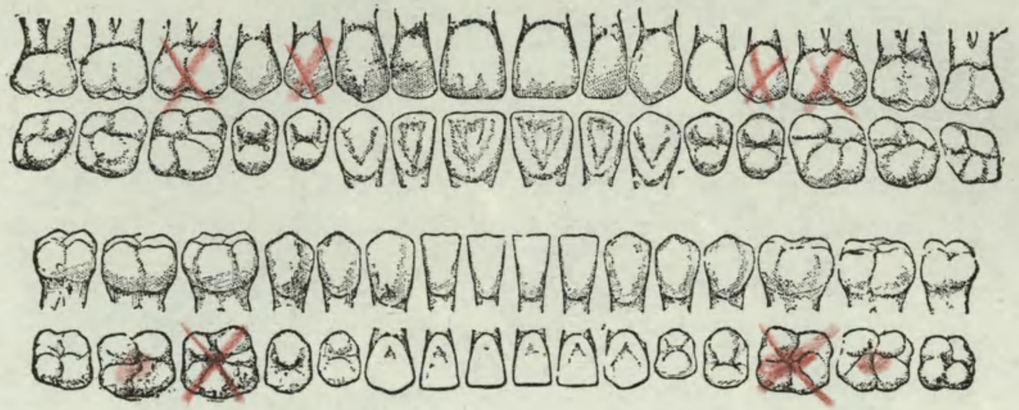
NAME OF SOLDIER Adams W.

REGIMENT 226 N. Co.

RANK Private

DIVISION M.D. 10

No. 1000542



Red — Condition of mouth at presentation.
Blue — Operations performed by C. A. D. C.
R. F. — Root filling
A. F. — Amalgam filling
C. F. — Cement filling
G. F. — Gold filling
G. B. — Gold Bridge
G. C. — Gold crown
P. C. — Porcelain crown
A. A. — Acute abcess
P. — Pyorrhea
X. — Extractions
F. L. — Full Lower
F. U. — Full Upper
P. L. — Partial Lower
P. U. — Partial Upper

DATE 1916	No.	Fillings: Amal.	Phosp.	G. Per.	Cement	Extracted	Anesthetic	Treated	Crowns	Cleaned	As 2° 3	Pulp Removed	Put Pulp	Artificial Teeth	OPERATOR	REMARKS
Oct 6	1														R. Myles	

DENTAL HISTORY SHEET

CANADIAN ARMY

TEETH

MAY 19 1919

CASE HISTORY SHEET.

24

Manitoba Military Hospital. Winnipeg Station.

No. 1000342 Rank Cpl. Name Adams, William Age 25

Unit 44 Completed years of service Where and how long } C. 12/12. E. 2/12. F.12/12.

Date of admission 3-3-19 Date of discharge MAY 19 1919

Diagnosis GSW left arm, C.F. humerus Place of origin Lens.

CONDITION ON ADMISSION AND PROGRESS OF CASE

HISTORY: Impaired function of left arm from GSW of left arm, with C.F humerus. Was wounded Feb. 17, 1918 by shrapnel penetrating and lodging in tissues in front of left shoulder, also a second wound at back of left upper and fracturing left humerus. Arm in splint for several months. Wounds all healed in 6 months. Has had about 2 months electbical reactions and massage with slight improvement.

PRESENT CONDITION: Movements of elevation and extension of shoulder backward limited to 50% of normal. Elbow joint enkylosed at angle of 135 degrees. Movements of wrist joint limited to 50% of normal. Considerable callous adn some deformity at site of fracture of humerus. Markad atrophy of muscles of whole of arm; and sensation fairly normal. All other systems normal.

MARCH 5, 1919: Xray report: There is an old fracture of the shaft of the humerus in the upper third. There is overlapping of the fragments, the upper one to the outer side. There is evidence of an old osteo-myelitis. Two M.F.s in anterior acillary fold CAPT MACKINNON

MARCH 10, 1919: Examination by Lt. Col. Galloway: Head of raduis to be excised to restore movements of supination and pronation; wrist joint to be gently forced into expansion, and elbow joint to be flexed a few degrees, and returned in plaster. CAPT GRANT

MARCH 27, 1919: Operation by Lt. Col. Galloway. Head of radius excised, in fact upper 1½ inches of it was excised. Dressed in plaster with forearm flexed at elbow at 110 degrees, forearm supinated and wrist hyperextended. CAPT MACKINNON

APRIL 8, 1919: Still in cast. Arm very confortable. CAPT SHEIR

APRIL 14, 1919: Cast to be removed this date and massage and manipulations commenced. LT. COL. GALLOWAY

APRIL 21, 1919: Add workshop and Gym. to present treatment,

APRIL 28, 1919: Add Rad. heat to treatment. A.P.M.

MAY 5, 1919: Continue treatment. Is doing wood work at occ. Therapy. CAPT MACKINNON.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

1/5/19. Further progress will not be materially influenced by treatment. Final board recommended (Lt-Col. Galloway) A Fm.

TREATMENT

(Especially any specific or special form.)

39

CONDITION ON DISCHARGE, All wounds healed. Only about 10 degs of pronation + supination pronation possible. Fibrous ankylosis elbow joint 110° almost no flexion at wrist joint & cannot make a fist. Other systems normal

(and disposal made of case.)

Date ..... A. MacKinnon

Medical Officer i/c case Capt Canc

M. F. B. 313a.
100M.—6-18.
1772—39-439.

B7.556.

Forms
I. 1237.
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year	1000542	Cpl:	Adams	William
	Unit.		Age.	Service.
	44th Canadians A Coy		24	Field Service 1/12

Station and Date.

Disease

TOOTING MILITARY HOSPITAL * W.8 * CHURCH LANE, TOOTING.

SKIAGRAPHIC REG. Nº 809 VOL 2

13-5-18

17-5-18 X ray shows comminuted fracture upper end humerus. Position & alignment good. Callous formation. Still marked pulsation in upper wound.

23. 5. 18 Under Ether - Large pocket of pus in axilla opened posteriorly and tube inserted for drainage. Dejmid Sinuses opened up and Sequestra removed from site of fracture. Tube for drainage inserted in lower wound.

Put up in Straight Thomas Splint.

26. 5. 18. Tube removed from posterior axillary wound.

27. 5. 18 Temperature jumped to 103.2 last night with Some Shivering & Sweating. No Evidence of pocketing of pus or trouble in any of wound. no throat. no Cough.

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

Wt. W 3604/5, 2870—1,500,000—8/17—H. & Sp. (10938). Forms/I. 1237/12. (E239) [P.T.O.

Station and Date.	
1-6-18	Temp did not remain up. Has done well. Wounds look very well.
3-6-18	15° flexion at elbow
9-6-18	Flexion increased few degrees.
14-6-18	Has pseudarthrosis at seat of ~~fracture~~ fracture. Wounds clean & bright.
20-6-18	Put in Jones rt angled humerus extension splint.
1.7.18	Patient now up and about in Ward. Wounds doing well and arm Comfortable at rt angles at elbow Transferred Brooklands (R)
18.7.18	~~To~~ Base Depot 68.
19.7.18	For massage & movements of fingers & wrist
26.7.18	Have a mild attack of influenza F-Depot 2.
4.8.18	Returned Tooting Mil H. Arm doing well
	Wound in front of arm not healed yet Sinus persists V.D.C.
9-8-18	Recommend transfer.

Discharged Canad. V. Orpington
14.8.18 (R) J.M. Kennedy Capt

Forms
1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T. 1782	100004	Pte.	Adams	W
Year 1917	Unit. 44 Bn.		Age. 24	Service. 3yrs

Station and Date.

No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL

Disease GSW. Lft Shoulder & Arm

D&I 218 Massage. duty Th Canada

Ralph Bell Sgt.

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

Wt. W 6604/M 2870—1,500,000—8/17—H. & Sp. (10938). Forms/I. 1237/12. (E239)

[P.T.O.

Station
and Date.

1000542

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Adams. Christian Name William 10

Examined on 6. day of Feb. 1916 at Gladstone Man.

Birthplace City or Town ____ County Monmouthshire

Apparent age 23.

Trade or occupation Farmer.

Height 5 Feet 7. Inches.

Weight 145 Lbs.

Chest measurement Minimum 32 inches. Maximum expansion 2 inches.

Physical development Good.

Small-Pox Marks ✓

Vaccination Marks Arm Right. Left. 2 Number 2

When Vaccinated last Childhood

(a) Marks indicating congenital peculiarities or previous disease ✓

(b) Slight defects but not sufficient to cause rejection

1 a B
1

✓

2

3 a B
3

Approved by _____

Rank _____ M.O.

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

Date.	Result.	Vaccinations.
28/6/16.	S.	Duxbury M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
5/7/16		Duxbury M.O.
17/7/16		" M.O.
26/7/16		" M.O.
4/6/17		S. Hanson M.O.

Enlisted on 6th day of Feb. 1916 at Gladstone Man

	Corps.	Regt'l Number.	Rank.	Date.
Joined on enlistment	22667	1000542.		11/12/15
Transferred to 14th RESERVE BATTN. C.E.F.				7/4/17.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
No. 76 CANADIAN GENERAL (ONTARIO) HOSPITAL ORPINGTON, KENT.	8 - NOV 1918	Gun.shot. L. Arm	Invalided L. Atwood Capt
M. Bn. H	14-5-19	Imp. fure Fract. Hand	Invalided [illegible]

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.
100m.—1-16.
H. Q. 1772-39-439.

CANADIAN

Surname ..... Christian Name .....

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
Tooting M.H.		6	3	18	14	8	18	GSW shell left arm Fract. humerus " lower jaw.	161.	Hit 17-2-18 Bone fragments removed that day. Large wound ant-axillary fold. Pulsating artery. Discharging wound outer side arm. Septic wound point of jaw. Paralysis musc spir nerve on straight Thomas many weeks then slowly bent to rt angle. arm improved much.	pp chase Lt Ut a m R C
16th. Can. Gen. Hosp. Orpington - Kent		14	8	18				G.S.W. fract L arm.		For massage &c. to Kingswood. Scar 2" long under chin causes no disability. Scar 3" long extending from just 4" below shoulder joint postero-lateral adherent to bone slight tenderness an irregular scar extending from outer end of clavicle down medial side forearm 2" healed. Movement of shoulder joint abduction 45° forward 45° backward 15° Anhylosis of elbow joint avge 145° wrist and fingers movement poor, Fract humerus, middle united some displacement and callous circulatory, nervous gastro intestinal & G.A. septens normal	A. E. Morgan. Capt.
16 Canadian Gen Hosp Orpington Kent		12	8	18	19 DEC 1918			G S W fract Lt Arm.			M J Kennedy Capt Cance

CONTINUATION OF ORIGINAL

Army Form B. 178.

MEDICAL HISTORY of—

Surname ADAMS *Christian Names* WILLIAM

TABLE I.—General Table.

Birthplace { Parish ....
County ....

Examined { on .... day of .... 191 ,
at ....

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

Trade or Occupation ....

Height .... feet .... inches. Weight .... lbs.

Colour of Hair .... Complexion ....

Eyes ....

Chest Measurement { Girth when fully expanded .... inches.
Range of expansion .... inches.

Physical Development ....

Vaccination Marks	RIGHT	LEFT
Arm,		
Number		

When Vaccinated ....

Vision { R.E.—V = ... L.E.—V = ... With Glasses { R. .... L. ....

Identification Marks, such as Tattoo, Moles, Scars, etc :—

....

....

Defects or Ailments :—

....

....

Examined and found—

Fit for Grade { I. II. III. IV.

(Strike out those which do not apply.)

Signature ....
Chairman of Medical Board.

Re-examined for posting at ....

On .... day of .... 191....

Enlisted { at ....
on .... day of .... 191....

	Corps	Regtl. No.
Joined on enlistment		1000542
Transferred to		

TABLE III.—Boards, Courts of Enquiry, 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
14-5-19	M. M. B
	Imp. func. L't arm
	& Hand
	For discharge.
	H G Stewart Capt

Special Remarks: state if a discharged Soldier

....

TABLE IV.—Service Table.

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

Became non-effective by ....

on .... day of .... 191....

(Signature) ....

(Rank) ....

W. P. GRIFFITH & SONS LTD., Printers, Old Bailey, E.C. 4.
[18] W463/P943 200m 4/18 45 G & S 59

TABLE II.—Only for admissions to Hospital or to the Sick List in 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				
No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL	19	DEC	1918	~~[illegible]~~			G S Wr. Off-		Condition not changed	
				~~[illegible] JAN 1919~~			Arm & Shoulder		I Volunteer	Rayn [illegible]
				-2 FEB 1919						
"ARAGUAYA."	2	2	19	13	2	19	Do		Unchanged	[illegible]

A-131

C.A.D.C. 5009 A

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

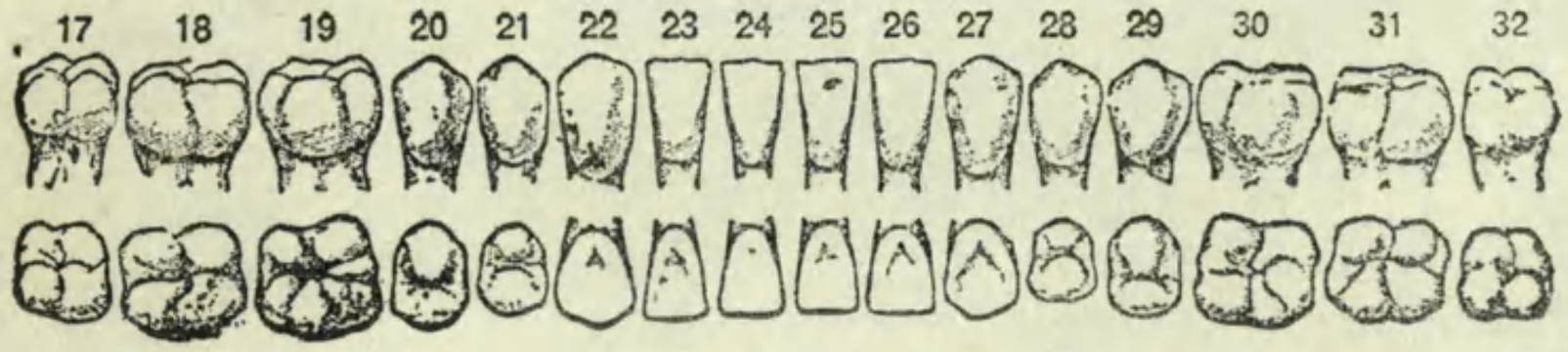
DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) ADAMS. W.

REGIMENT 44th RANK Cpl. No. ~~130~~ 1000542

Date of Examination in England 21/12/18 | Date of Examination in France



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.

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 20,
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper — 5 teeth
   - (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 no
- (b) In England no
- (c) In France yes

Signature of Dental Officer O. Rave Capt.

MANITOBA MILITARY HOSPITAL

Requisition for Special Examination

MAR 7 1919

To X Ray Dept. Robertson/Ball

Name 1000342 Pte. Rankin, Wm

Date Mar 5 1919.

Medical Officer will state the exact examination required and any special features in connection with cases which may assist in arriving at a diagnosis.	This space for Report only.
X Ray Dept Humerus to determine nature of fracture & condition of tissues 11/3/19 MB Grant Capt	1918 There is an old fracture of the shaft of the Humerus in the upper third. There is overlapping of the fragment the upper one to the outer side. There is evidence of an old osteo-militis. Two M.F's in the anterior axilliary fold.

Medical Officer — O. i/c

Edwd Bldg
Ward

STATE

t Force)

day of *19*

Band.	Drivers, Gunners or Privates.	Total: All Ranks.	HORSES			TOTAL.	GUNS, WAGONS, &c.						TOTAL	REMARKS
			Officers.	Riding	Draught.		Guns. Carriages and Limbers.	Ammunition Wagons.	Forge Wagons.	Store Wagons.				

Comdg. *Regt.*

2 Shrapnel
2 Fracture
1 Severe
8 Upper
1 Humerus
Oper - excised. Removal Bone

2 Shrapnel
3 Fracture Incomplete
1 Lepsis
2 Face
7 Lower Jaw

P.878. Extract D.O. No. MAILING LIST 71 Unit:- NBRD. Date:-

Reg. No.	Rank	Name	Struck off Strength of O.M.F. of C. on transfer to C.E.F. Canada.	Acted on Ledger Ck.
1000542	Cpl	ADAMS. W. Canada	MD10 3.2.19.	

WORK.

D..... T..... C..... Passed to..... ..... Rec'd. by.....

Ar[illegible] Form B. 103—II.
Part II.

(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps 226 Bn Regimental Number 1000542

*Substantative Rank Cpl Surname Adams Christian Names William

*Acting Rank

(* To be entered in pencil to facilitate alteration.)

(A) Report Date.	(A) Report From whom received	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
13 3 18	MRD	P# 0 72	Tons from 44 Bn	Seaford	7.3.18	
12 9 18	—"—	— 255	Sqfs to NBRD	—"—	11 8 18	
17 9 18	NBRD	— 220	Tons from MRD	B'shott	11 8 18	

[signature] LIEUT:
FOR LT: COL: I/C RECORDS, C.O.M.F.

To be folded on this line.

Nothing to be written in this margin.

W1889—PP1150 500,000 5/18 G.W.P.Co (3490)

T.O.S. No. 10 DISTRICT DEPOT
D.O. 51 PARA. 2

3.2.19

[signature] Major
Officer Commanding No. 10 District Depot

*Discharged 27-5-19, *
D.O. 143. Para 3

[signature] Major
Officer Commanding No. 10 District Depot

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I, 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer

Nothing to be written in this margin.

With 14th Res Man Dibgate

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

M. F. W. 54. (A. F. B. [illegible])

250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 226th. OVERSEAS BATTALION C. E. F.

Regimental No. 1000542 Rank Private Name William Adams

Enlisted (a) Feby. 7/16 Terms of Service (a) ~~C. E. F.~~ Duration of War + 6 mths. Service reckons from (a) Feby. 7/16

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

Extended Re-engaged Qualification (b) Farm Laborer

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
17.3.17.	14th Res Bn	On arrival from Canada. T.O.S.	Dibgate	16.3.17.	Pt II O. 72. Macdonald LIEUT: FOR LT: COL: I/C RECORDS. C.O.M.F.
31/5/17	O.C.14th Res.Batt.	S.O.S. on proceeding Overseas to 44th Batt.	Dibgate	31/5/17	Pt.2 O.147.3 Capt/Adjt., 14th Reserve Battalion.(Man.)
18-6-17	44th Bn	Taken on strength on arrival in France	Field	1-6-17	Pt.II.Order 81
5-6-17	4 CIBD.	Left for Unit	Field	5-6-17	N.R.
9-6-17	44th Bn	Joined Unit	Field	6-6-17	B.213. D.C.S.169
24.8.17	22 C.C.S.	S/W. Hand. Lt to	adm. 4 Train	23.8.17 24.8.17	a 36. 399.
25-8-17	44th Bn.	Wounded in action	Field	23-8-17	B.213.D.C.S.191
27.8.17	1 Can. Gen. 6 Con. Dep.	S/W Rt. Hand to	Com Depot. adm.	27.8.17 "	W 3034-7100. " 677.

(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.

1000542. L/Cpl. Adams. W.

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213 Army Form A. 36, or other official documents.
30.8.17	6 C.Dep.	S/W. Hand Trs.	" C.Dep.	30.8.17	W3034. 7679.
24.8.17	13 C.F.a	" " Trs.	Adm. C.C.S.	23.8.17 "	} a 36. 4506.
25.8.17	1 Can. Gen.	" "	Adm.	25.8.17	W3034. W8370.
31.8.17	11 Con. Dep.	" "	Adm.	31.8.17	" 6285.
21.9.17	4 C.B.D.	T. O. S. "a"	Field	21.9.17	NR 84.
29.9.17	"	Left for C.C.R.C.	"	29.9.17	NR 602.
1.10.17	C.C.R.C.	Arrived	"	1.10.17	NR 2.
30.10.17	"	Left for Unit	"	30.10.17	NR 22.
10.11.17	O/C 44th	arrived unit	"	1.11.17	B 213
22-12-17.	do.	Apptd. LANCE CORPORAL.	"	1-12-17.	B213. Pt. II. Ord. 144 d/31.12.17
12.1.18	"	General Course, 4th Division		6.1.18	B213.
2.2.18	"	From Course	"	27-1-18	B213.
2.2.18	"	Promoted Corporal	"	1-1-18	B213. Pt II. Ord. 10 d/11.2.18.
17.2.18	1 C.C.C.S.	Sw. Lt arm & Lt Jaw adm	"	17.2.18	D3780.
17.2.18	12 C.F.a	" " To 1 CCCS.	"	17.2.18	D3734
21.2.18	20 Genl.	Gsw. arm. Lt. Trac. & Gsw Lt Jaw adm	"	21.2.18	} D4277.
23.2.18	O/C 44th	Wounded in action	"	17.2.18	B213
21.2.18	1 C.C.C.S.	Gsw Lt arm to 14 a.T.	"	21.2.18	D4933.
6.3.18	20 Gen'l "Stad Antwerpen"	Invalided - wounded + posted to Manitoba Regt'l Depot.	Shorncliffe	6.3.18	A.F.W. 3083 no. 4862 Pt II Order No. 20 d/12/3/18

J. Anderson
Lieut
for Lt. Col. A.A.G.
Canadian Section

4 HOUR CHART

DISEASE

Name { Cpl Adams

Age Canadian

Diet

Case Book No.

Notes of Case

Date of admission

Discharged

	AM			PM			AM			PM			AM			PM			AM			PM			AM			PM			AM			PM		
Time	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10
Bowels			1						1						1		1																			
Urine																																				

(Fahrenheit Scale)

107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

Normal Temperat. of body

sleeping

sleeping

42° 41° 40° 39° 38° 37° 36° 35°

(Centigrade Scale)

Sleep.																																					
Pulse.				120			96		112 100				84		100	98					88																
Resp.																																				
Date	26						27																														

July

Published by Cory Bros. (S.I.M. Ltd.), 54, Mortimer St., W.

Form R 122
2353—100M—9-12-16.

Rank Name ADAMS William Reg'l No. 1000~~3~~5 42

Unit 226th Battalion If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Gladstone. 7th Feby. 1916 Place of Birth Chepstow, England.

Name and Address, Next-of-Kin Thomas Adams,

TINTERN NR Chepstow, England. Relationship Father

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E. R.B. No. 2794
File R.L.
Category Can Mil.

Discharge, Date and Place Reason Character

H. W. V., Ld.—9546-16.

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.
C 17-3-17	14th Res Bn	On arrival from Canada. T.O.S.	Dibgate	16-3-17	Pt II O. 72. A.F.B. 103 Checked 3.7.17
31.5.17	"	Prod Apear to 44th B.	"	31.5.17	" 147. (44th B. Pt II 81) d/ 18.6.17.
29.8.17	44th B.	22 bas: bearing Sta:	FIELD.	21.8.17	C.L. A301. S.W.L. Hand.
1.9.17	"	1 bar: Genl. Stop.	Etaples.	25.8.17	" A304. "
5.9.17.	"	No 6 bar: Depot.	"	27.8.17	" A3. "
17.9.17.	"	11 bar: Depot.	Buchy.	31.8.17	" A13. "
27.9.17.	"	# ~~bar~~: Desitd to Base Details.		19.9.17	" A22. "
31.12.17.	"	Apptd L/cpl.	Field	1.12.17	P II O 144.
11.2.18.	"	Promoted Cpl.	" L/C	1.1.18	" 10
23.2.18.	"	Wounded.	Field	17.2.18	C.L. A147.

Jmm
C

Adams. W. No 1000542.

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.
12.3.18.	44th Bn	Inv. (Nounded) posted to Man: Reg: Dep	Field	6.3.18	Pt II O. 20. (M.R. Dep. 72 d/13.3.18.)
12-9-18	MRW.	SOS to N.B. Rgtl Depot	Seaford	11-8-18	Pt II O. 255. V220-NBRD-17 9/18
~~23-9-18~~	~~MRW~~	~~Pt II O. 255 d/12-9-18 is cancelled~~	Cancelled Pt II O. 304 d/31-10-18.		~~Pt II O. 266.~~
19.2.19	NBR	Invalided to Canada Ex 5 CGH	Kirkdale	2.2.19	CL B421
22.2.19.	✓	SOS. invalided to Canada.	Witley	2.2.19.	D037.

√

SURNAME. Adams,

CHRISTIAN NAMES William

REGL. No. 1000542 RANK Pte.

UNIT 226th

FORMER CORPS Nil

10 CARD No.

SoS 27-5-19. Demob.

FOLL.

D0143 of 23-5-19. 10D

B.M.

NEXT OF KIN.

NAMES IN FULL Adams. Thomas

RELATIONSHIP TO SOLDIER Father

ADDRESS Chepstow. Eng.

CHANGE OF ADDRESS

COUNTRY OF BIRTH England, Chepstow DATE Oct. 31st. 1893

PLACE OF ATTESTATION Gladstone DATE Feb 4th 1916

Sailed from Halifax per SS Olympic 13-12-16.

RTG 13-2-19 264 Cpl 24

L. L. 90 89.—M. & D. 6312. M. F. W. 22. 100m.—1-16. H. Q. 1772-39 839.

From Halifax per. S.S. Canada 4-3-17.

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Farm Laborer RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 22 YEARS 4 MONTHS

HEIGHT 5' FEET 8 INCHES

CHEST MEASUREMENT 34 1/2 INCHES EXPANSION 3 INCHES

COMPLEXION Fair EYES Grey HAIR Lt. Brown

DISTINGUISHING MARKS Curved scar across inner angle of the right eye-brow.

MEDICAL EXAMINATION. PLACE Gladstone DATE Feb. 4th. 1916

Present Address: — Gladstone, Man.

No 1000542 RANK Pte NAME Adams. W

T. O. S. UNIT Composite Battalion

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1917	1917			
Feb. 1	Feb. 28.	c	226 th Bn	
			Att for Pay. 20-12-16	DO 46 of 22-2-17
Mar. 1	Mar 15	n	Transt to own unit 15-3-17	DO 72 of 24-3-17

No. 1006542 RANK Pte. NAME Adams, W.

T. O. S. UNIT 226th. Battalion. L. E. F.
Gladstone Detachment. M. D. 10.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916.	1916.			
Mar. 1.	Mar. 31.	✓		
	Apr.	✓		
	May	✓		
	June	✓		
	July	✓		
	Aug	✓		
	Sept	✓	forfeits 15 dys pay	Sept pay list.
	Oct	✓	forfeits 1 dys pay	Oct pay list
	Nov.	✓		
Dec. 1	Dec 19	✓	transfd to Clearing Depot M.D. 6. 19-12-16	Co 302

LEDGER NO. 119 178 SERIAL NO. B.7555.

REG. NO. 1000542 NAME Adams, W.

RANK Pte CORPS 226th Bn. AGE 23 SERVICE C. 12/12. E. 2/12. T. 12/12.

HOSPITALS	DATE OF ADMISSION
1 Nova Scotia Hos. Halifax	19. 11. 16.
2	
3	

DIAGNOSIS Diphtheria.

TRANSFERRED TO Station Hos. Halifax, 7. 12. 16. - Infectious Hos. N.S. 19. 12. 16.

DISPOSITION Duty 18. 1. 17. CATEGORY

M.F.W. 2553.
1126-D.P.-50M-12-18.
1772-39-1332.

P.T.O.

REMARKS:

Ad. Man. Mil. Winnipeg	3.2.19.	G.S.W. Lt. Arm, C.F. Funerus.
Discharged	19.5.19	
ad Man Mill Winnipeg	18-2-20	Influenza
Dis S C R	27.2.20	

207 days

D.M.S. 1317

Granville HOSPITAL.

A. & D. No. T727 Ward Chatam House

Unit 66D Sick or Wounded.

Regtl. No. 112167 Pl. of Act'n

Rank Spr Name Adams Wm

Age 42 Religion C of E

Service Compl'd. 12/12 Time with Field Force

Diagnosis Spinal Injury

Admitted Feb 12/16 Discharged 5-9-16 } 207.

Transferred

RECORD FURTHER REMARKS ON BACK.

C.C.A.C. L. Duty.

REGT'L No. 1000542

H. Q. FILE No. 649.

NAME Adams William

RANK AND CORPS Cpl. pte. Cpl. 44th Bn. (form 226 th Bn)

FOLLOWS No.

FOLLOWS

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
M5967	30-8-17	adm 22nd Cas. clear. stat.
103-9		aug 21st, 1917. (Gsw, hand)
H55 14-5	23-2-18	Adm. to No 12. Fld Amb. Feb. 17th 1918 (Gsw, L. Arm. (Frac. Jaw.

L. L. 20497—M. & D. 7908

M. F. W. 42—50M.—5-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
a 301	22 Cas Cl. Station	21-8-17	S.W. L. Hand
a 304	1 Can Gen Etaples	25-8-17.	S.W. L Hand
a 3 (4)	#6 Convt. Dep. Etaples	27-8-17.	G.S.W. L. Hand (man.)
a 13-6	" " "	31-8-17	S.W. Lt. Hand (man)
a 22 Ex 3	Discharged to base details	19-9-17.	" " "
a 147	12 Can Field Amb	17-2-18	
a 148.	No 1 Can. Cl. Cl. Stata	17-2-18.	S.W. L Arm Fr. & Lower Jaw
a 150	No 20 Gen: Camiers	21-2-18	" " " " " " "
B 159	Tooling Mil: Church Lane Tooting	7-3-18.	" " " " " " "
B 293	16 Can Gen: Orpington	15-8-18	G.S.W. L Arm frac
B 381.	5 " " " Kirkdale	20-12-18	" " " " " "
B 421	Invalided to Canada	2-2-14	G.S.W. L Arm frac

FORM R. 149.
7106—250m—7/2/17.

Name ADAMS William *Rank* Pte. *Reg. No.* 1000542

Unit 44th Battn

Next of Kin Thomas Adams The Elyn Tintern Nr Chepstow Eng.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917						
21-8	22 C.C.S. Sw	L Hand	A301.	M5967	29-8.	
					28-8.	
25-8.	1 C.G. Etaples.	do	A304.			
27-8	No 6. Con Dep.	Etaples.	do.	a 3.		
31-8.	No. 11. " "	Bucky.	do.	A 13	HA 13838/1	
19-9	Dis. To Base Dep.	Etaples.	(do).	A 22	HA 14272	

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

Form R. 149.

Name ADAMS, WILLIAM Rank cpl. Reg. No. 1000542

Unit ~~44th Bn.~~ NBRD

Next of Kin Thomas Adams, (Father) Tintern, Nr. Chepstow. Eng

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
17.2.18	12. C. F. A.	S.W. L. Arm. Frac.			A153	10938
		S.H. Lower Jaw		A1147		[illegible]
17-2	Kol. Can. C.C. Stn.		do.	A148		13967
21-2	No 20. G. H. Camiers.		do.	A150		HA 20050/2
7-3	Tooting Mil. Hsp. Church Lane Tooting.		do. Sev.	A159		13904
15-8	16. C. G. H. Orpton.	G.W. L. Arm. Frac.		B293		24095
20.12	5 C.G. Forkdale		do	B381		3588
2.2.19	Inval to Cam. Cards		do	B421		4340

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

Number 1000542 Rank Cpl.

Surname ADAMS

Christian Name William

Unit 44th Bn. C.M.R. Theatre of War France

Date of Service 1-6-17

Remarks

Latest Address Gladstone, Man.

Roll No. B

Page 9043

MAY 31 1921

*Name Adams, William Rank Cpl. Regtl. No 1000542

Original unit 226th Bn. Present unit /// M. or S. Age 25 Religion Presb. Fyle Depot Ref. H.Q.

Port, ship, and date of arrival 3-2-19 S.S. Araquay, Portland, Me.

Next of kin Mr. Thomas Adams (father) Chipstow, Eng.

Address on leave

Address on discharge

Transportation issued Yes / No Date Character on discharge

Previous occupation Farm Laborer Date and place of enlistment Gladstone, Feb. 7th/16

Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
3-2-19	T.O.S. # 10 D.Depot & posted to Hosp. Sect. D.O.	51-2
	Landing leave 17-2-19 to 3-3-19.	52-7
19-5-19.	To Cas Coy	140-

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

(over)

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192
150M—6-18.
1772-39-1243.

Date of entry and medical unit admitting must be recorded immediately on admission. Brief clinical notes to be added later and signed by M.O.

No. of C.C.S.

Date of entry

1st CANADIAN CASUALTY CLEARING STATION FEB 17 1918

Large G. & E. end. of left shoulder & arm c̄ comminuted fracture of humerus - ends. Hind loose fragments removed. Carrel's tubes - E. end. Chin - Hind cleaned.

Operation 18/7/18

No. of Hospital 20 General

Date of entry 21.2.18.

wd. moderately clean. Packing removed. Carrel

2.3.18. Wnds. suppling freely; position bad, much movement with dressing.

X-ray = much comminuted humerus with angulation: extension tightened up. Carrel left off.

H A Moffat, Major.

This F.M. Card must not be destroyed, and it must be transmitted with the patient if he is evacuated to U.K. Temperature charts or additional clinical notes may be sent with it, either in the same or in another envelope attached to the patient.

Holarden Mgr

62290.

A.T. Serum } 1st 15:00 Units 17/2/18
Dose and date } 18 cm C.C. ST

2nd 500 23.2.18
500 28.2.18

FIELD AMBULANCE NOTES. 4 9.3.18 M

Morphia } 1/4 gr. MORPH - 17-2-18
Dose and time } 3.30 P.M.

Date of wound or } 17-2-18
onset of illness }

Religion C of E.

Army Form W. 3118.

5531

FIELD MEDICAL CARD.

No. 1000542 Rank CPL

Name ADAMS W

Unit 44 CDN BN

MF

Battle Casualty ~~Accidentally Wounded. "Sick"~~
(Strike out description which does not apply)

No. of F.A. 12th CANADIAN FIELD AMBULANCE.

Date of admission 17-2-18

F.A. diagnosis S.W. ARM LT. FRACT.
S.W. LOWER JAW

Additional F.A. Notes to be written on back of card.

C.C.S. diagnosis (if altered from above)

Base Hospital diagnosis (alterations or additional)

(1012) Wt. W15045/H3401. 1750m. 5-3-17. J.R. & C.

FORM D M.S. 1300

SURNAME | CHRISTIAN NAME OR NAMES | REG. NO.

.ADAMS. W. 1000542

RANK: ~~Pte.~~ Cpl. UNIT: Man CO.: 44th. Bn. TROOP: N.B. BATTY.: Depot

HOSPITAL: 22. C.C. Stn. DATE OF ADMISSION: 21-8-17.

1. 1 Can. G.H. Etaples HOSP. 25.8.17.
2. 6 Con Depot. Etaples. 24.8.17 / 11 " " Buchy HOSP. 31-8-17
3. 12. Can. F. Amb. HOSP. 17.2.18. / No. 1 C.C.C. Pta. 17-2-18
4. 20 Gen. Hsp. Camiers HOSP. 21.2.18

DIAGNOSIS S.W. Lt. Hand. B

1. S.W. Lower Jaw. & L. Arm Frac. Rw
2.
3.

DISPOSITION

C.L. 29-8-17. A301
3.9.17. a. 304.
6.9.17 A 3 (4)
18.9.17 @ 13 (6)
28.9.17 A 22 (2)
23.2.18 A 147 (2)
25-2-18 a/148-2.
27.2.18 a 150-2
9-3-18 B 159
16.8.18 B 293 (2)
19.2.19 B 421.2.

DATE: Dis Base Details Etaples 19.9.17

REMARKS

Inv. D Can. 2.2.19

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

EPITOME OF HOSPITAL TREATMENT

	HOSPITAL	ADM.
1.	Tooting Mil. & Church Lane Tooting	4-3-18
	16 Can. Gen Orpington.	15.8.18
2.	5 " " Kirkdale	20.12.18.
3.		
4.		
5.		
6.		
7.		

FILE No. Adams VOL.

SUBJECT

1000542

CHARGED TO	PER	DATE	CHARGED TO	PER	DATE
SCR		19/10/26			
Stim		24-2-48			

THIS CHARGE-OUT AND ABSENT CARD **MUST NOT** LEAVE THE REGISTRY.

N. D. FORM O.S.S. 5
50M—7-26—(6)

FILE No. VOL.

SUBJECT

CHARGED TO	PER	DATE	CHARGED TO	PER	DATE

THIS CHARGE-OUT AND ABSENT CARD **MUST NOT** LEAVE THE REGISTRY.

FILE No. 1000542 VOL.

SUBJECT Adams - Wm

CHARGED TO	PER	DATE	CHARGED TO	PER	DATE
Ck		6/10/26			

THIS CHARGE-OUT AND ABSENT CARD **MUST NOT** LEAVE THE REGISTRY.

FILE No. VOL.

SUBJECT

CHARGED TO	PER	DATE	CHARGED TO	PER	DATE

THIS CHARGE-OUT AND ABSENT CARD **MUST NOT** LEAVE THE REGISTRY.

N. D. FORM O.S.S. 5
50M—7-26—(6)

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.)
(*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.)

As medically unfit.

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.

President.

PLACE Winnipeg, Man. MD. #10

DATE May 14/1919.

} Members

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.....

DATE.....

} Members

APPROVED BY

Assistant Director of Medical Services.

DATE MAY 15 1919

APPROVED BY

Director-General of Medical Services.

DATE.....

B.P.C. ORIGINAL
10 MANITOBA MILITARY HOSPITAL
MAY 14 1919
448-776
REGISTRAR
10 M.D.
MAY 14 1919
HEAD QUARTERS
WINNIPEG

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 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 order in which they appear in the Annual Report on the Health of the Army, published in London (1915) Messrs. Harrison & Sons. #10 MD.

STATION Winnipeg, Man DATE May 14/1919.

1. (*a*) Unit 226th, 44th, #10 DD. (*b*) Regimental No. 1000542 (*c*) Rank Cpl

(*d*) Surname ADAMS (*e*) Christian name William

(*f*) Home address Gladstone, Man.

(*g*) Next of Kin Mrs. Caroline Adams, (*h*) Relationship Mother

(*i*) Address of Next of Kin Tintern, Monmouthshire, England

2. Age last birthday 27 Date of birth Oct. 21/1891

3. Enlistment, or Appointment (if an Officer) (*a*) Place Gladstone, Man. (*b*) Date Feb. 6/1916.

4. Personal description:

(*a*) Height 5ft. 7in (*b*) Weight 140 (stripped) (*c*) Complexion Fair

(*d*) Colour of hair L. Brown (*e*) Colour of eyes Grey (*f*) Identification marks, Scars, etc. A cone shaped scar front of left shoulder 1½" X 3½".

5. Former trade or occupation Farmer

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	Periods From	Periods To
Canada			Feb. 6/1916 (MHS)	Feb. 2/1917 (Pt. state 't.
			Feb. 16/1919	May 14/1919.
England			Feb. 2/1917	May 1917 (Pt. state 't)
			March 6/1918	Feb. 16/1919 " "
France or other theatres of War			May 1917	March 6/1918 (MHS)

7. Original disease, or injury 1. SHELL WOUND LEFT ARM. 2. SHELL WOUND LEFT ARM. (F.M.C)

(*a*) Date of origin Feb. 17/1918 (*b*) Place of origin France.

(*c*) Cause Shell wound.

Asst. Director Medical Services
No. 10
MAY 15 1919
MIL'Y DIST. No. 10 WINNIPEG

M. F. B. 227.
400m—11-18.
1772-39-117.

MD.

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.)

1. WEAKNESS OF LEFT ARM

2. IMPAIRMENT OF FUNCTION OF LEFT FOREARM AND HAND.

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.)

Objective findings - Greater part of left pectoralis major muscle missing and over this area is a deep scar. There is wasting of muscles of arm due to disuse. Circumference right arm 9½ inches, circumference left arm 8¼". Abduction of left arm limited by scar over pectoralis major muscle to 90 degrees.
2. Left forearm and hand - Elbow solid fibrous ankylosis angle of 110 degrees. Can get hand to within 18 inches of mouth. Hand midway pronation and supination - there is only about 10 degrees movement of pronation and supination possible. Wrist can be extended into line with forearm only, and can be flexed only 10 degrees from this. Hand cannot make a fist, or flex thumb into palm of hand. He can however grasp a fork handle with hand. Grip of right hand 90 K, grip left hand nil. These changes due to prolonged sepsis following wound, and resulting in adhesions. Other systems normal.
Subjective Symptoms - No pain. He complains only of weakness in arm and forearm, and of limitation of movement as above described. He says that the weight of his overcoat on his shoulder makes it ache.

(*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 Nothing but as described in 9(a)

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

Feb. 17/1918 shell wound left arm. The arm became very septic, and elbow, wrist and hand joints were affected by sepsis (M.H.S.)
Feb. 18/1919 he came here and March 27/1919 had head of radius removed to improve supination and pronation. Today he was seen by Lt.Col. Galloway who recommended him for final board, as further treatment would not, in his opinion be of material benefit.

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*).)

In civil life (Patient's statement) Nothing.
In the service (MHS) shows no other illness. Patient states that he had diphtheria and recovered completely in Dec. 1916.

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

See Sec. 4.F.

11.—(*a*) Did the disabling condition have its origin before enlistment? 1.2. No.

(*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.)

1.2. Not applicable.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? 1.2. (a) No. No. (b) No.
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? 1.2. Permanent.

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

Operated in France day he was wounded, and again in England for drainage. March 27/1919 had head of radius removed to improve supination. This not successful. For the last two months has had massage, radiant heat, and gymnasium exercises.

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? (If not, briefly state why) No - Cannot do heavy work with left forearm.

17. Recommendations Discharged from army.
To take a course in vocational training.

A MacKinnon Capt Can Med
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 William Adams 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

763
W Adams Rank. Gnr
Signature of invalid examined.

AUDITOR | PAYMASTER

2937

M. OR S. A 557

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

REGT. No. 1000542 RANK Cpl NAME (IN FULL) Adams Wm (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 226 Batt — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ No. — DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Spadella P.O. Man.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE M.D.10 — DATE 27/5/19 — REASON M.U. — AUTHORITY 80.143 — IF ENTITLED TO POST DISCHARGE PAY Yes

183 Days W.S.G.

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.		$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.		$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT								419	11	419	11																								419	11	Trans. 419 11 for pay on 1/1/19
1/1/19 31/3	90	1.20	108	-	11	20		419	11	538	31	24452		26916				501	11	37	20									3/3		538	31					23 Days 4 days 1.20 80.57
1/4/19 30/4	30	1.20	36							36	-			30/4/19						36												36	-					
27/5/19 27/5	27	1.20	32	40	35	-				67	40			23 23/5/19						67	40											67	40					Gas 19.5.19 50.140
			176	40	46	20		838	22	1060	82							501	11	140	60											641	71	R	419	11		
																		W.S.G.																			
March 31			420	-				420						5971691						40	-													350	-			40 - 1st for Pass: W.S.G.
June 27														7237441						70	-													280	-			70 - 2nd " "
July 27														7994361						70	-													210	-			70 - 3rd " "
														Aug. 27		1223552				70	-													140	-			70 - 4th
														Sept. 27		1246032				70														70	-			70 - 5th
														Oct. 27		1691000				70																		70 - Final
								420		420								420														420	-					Sec Lee 10.9.19 DR 307

Audited OCT 29 1919

Closed.

P. 559.

MARRIED OR SINGLE

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Promoted L/Corporal	1. 12. 17	BO 144 31/12/17
Promoted Corpe	1/1/18.	BO. 10 - 11/2/18

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. NO. 1000542 RANK ~~L/Cpl~~ Corpe NAME Adams W.

IF IN PERMT. CORPS WHAT UNIT UNIT 14th Res Bn TRANSFERRED TO 44th Bn DATE 21.8.17 AUTHORITY A Rs

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 7th Feb 1916. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

C.I.

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 March														26 50	26 50																26 50				Balance from Canada
16-31	16	1.10	17	60											17 60			378	30/3						14 60					14 60	29 50				Taken on strength from L.P.C. Canada.
1-30/4	30	..	33												33 .														1 10	1 10	61 40				
1-31/5	31	1.10	34	10											34 10	45 194	14/4 38/4							7 30 9 74						17 04	78 46		37 50		
June 1-30	30	"	33												33	367 282	31/5 15/5							9 73 9 73						19 46	92 00		52 50		
July	31		34	10											34 10																136 10		67 50	58 60	
1-30 8	30	1.10	33												33																148 10				To 44th Bn 31/8/17 A Rs
21-31 8	11		12	10											12 10	447	4/7	954	20 6					2 67	5 35					8 02	152 18		80 -	72 18	
Sept	30		33	-											33 -	675	1/8	770 854	18/8 2/4					2 68	2 68 5 35					10 71	174 47		93 90	80 57	
			218	90										26 50	245 40									41 85	27 98				1 10	70 93	174 47				

No. 1000542. L/Cpl Corpl Pte. Adams. W. Assigned Pay "Nil"

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
	21	90												26 50	245 40									41 85	27 98				1 10	70 93	174 47				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SERVICE ALLCE. ENG.
Oct.	Bal. B/Down								174 47		
"	P. Pay	34 10		AR680 - 4th Bn - 22/9/17		4 46					
		34 10				4 46			204 11		
Nov.	P Pay	33		AR. 83 - 4/10/17 - 4th C.D.T. R.T.O.		3 57					
				AR 182 - 4 6R T.M. 96 Co 18.10.17		4 46					
Dec.	P Pay	34 10		AR 10792 - 11th Cm Depot - 11/9/17		1 9 7 8 1					
				AR 241 - 4th Bn - 5/11/17		4 46			256 94		
		67 10				14 27					
Jan.	P. Pay Pron. L/C 1.12.17. 80HV 21/12/17. Under Regn. 624 Depot PP.	34 10		AR 11447 - 4th Bn - 11/12/17.		3 57					
		3 10		AR 1337 - 4th Bn - 14/11/17		12 49					
				AR 1523 " " 15/12/17		4 46			273 62		
		37 20				20 52					
				AR 1621 " 6.1.18		8 03					
Feb.	L/C Pay Pron. Corpl 1/1/18. 70 10 11/3/18 Th. 54 days @ 5/- p.d.	32 20		AR 1766 " 3.2.18		3 57					
		2 95				11 60			297 17	176 45	
		35 15									
Mar	6/pls Pay	37 20		AR 28189 - 3/3/18		9 73			324 64	173 25	
		37 20				9 73					

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:-	EFFECTIVE DATE:-
AMOUNT:-	AMOUNT:-

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.

A/L from 12/11/18

NAME:- ADAMS. W. 12

NUMBER:- 1000542.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
B.O. 10. 11/2/18	1.1.18 ~~4-2-18~~	Corporal.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 14th - Res. Bn

DATE ACCOUNT FIRST OPENED:- 16 - 3 - 1917.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			44th Bn
72.	1-4-18.	25-4-18.	M.R.D. "F"

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
~~11/11/18~~	~~75m~~	~~Orpington~~	~~24 33~~				
~~29/11/18~~		~~Forfeit 13 days pay &c.~~	~~Dft~~				

DAILY RATES OF PAY AND ALLOWANCES

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

Lee Bnt £ 508-18

LPC - " 483-85.

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis. to Canada 1/1/19 auth. Orpington 18th mw 19/12/18

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mch 31.	Bal c/fwd.								324 6	193 25	
April	Cpl P.	36 -							360 6		
		36								208 25	
May.	bp Pay	37 20							397 86	223 25	
		37 20									
JUN	"	36							433 86	238	
		36									
JUL	"	37 20		WR 19948-18404-18/7/18 Weybridge	9 73				461 31	253	
		37 20			9 73						
Aug	"	37 20		AR 4235 21/8/18 Orpington Hp	4 87				493 64	268	
		37 20			4 87						
SEP	"	36 -		R 547-29482-27019-3/9/18 " "	48 67						
				AR 5380 25/9/18 " "	4 87				476 10	283	
		36			53 54						
Oct.	"	37 20		AR 6929. 16 Oct. 30/10	29 20						
				R. 859. " 28/10	48 67				435 43	298	
		37 20			77 87						
Nov.	"	36 .		A.W.L. from 21.00 12/11/18 – 23.00 23/11/18 (12 days) and 12 days pay R.W. Do. 283. 29/12/18 N.B.R.D.S.		14 40				308 .	
Dec.	"	37 20		AR 7524. Orpington 11. 11. 18	24 33						
	Int on Sep Pay 31/12/18	13 95							483 85		
		87 15			24 33	14 40					
				Endorsed on L.P.C.							
				AR 6043 5.6.19 3.1.19	4 87				478 98		
				Endorsed on L.P.C.							
				" 6847 ✓ 17.1.19	4 87				474 11		

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION

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

NO. 10
DISTRICT DEPOT
MAY 27 1919
DISCHARGE SECTION
M.D. 10. WINNIPEG

M

SHORT FORM.

WAR SERVICE BADGE
a.168247
CLASS "A" NO. B.47521 ISSUED

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 1000542
2. Rank Corporal
3. Name Adams, William
4. Unit 226th Bn.
5. Date of Discharge 27-5-19 Place Winnipeg
6. Reason for Discharge *Medically Unfit R.O. 1420 (c)*
7. Authority R.O. 1420 (c) ☆ D.O. 143 - Para. 3. ☆
8. Proposed Residence after Discharge Gladstone, Manitoba.

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. ?

W Adams
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Winnipeg

Date 27-5-19

Signature Gldeood Lt
(O. C. Discharging Unit.)

M.F.B. 218a—50M. -2-19 —1772-39-113.

334

PART III.

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.

PART I. 1-A-131 Form (D.M.S. 1312). A.F.B. 179 Canada (Revised). 12485. 50M. 18-2-18.

Reserved for M.H.C.

Regt. No. 1000542 Rank CPL Surname ADAMS Christian Name WILLIAM

Unit or Corps—(a) Overseas from United Kingdom 44th CEF (b) In United Kingdom 226th CEF

Born at—Town STARVAN County or Province MONMOUTHSHIRE Country ENGLAND

Date of Birth—Day 31 Month October Year 1883 Age 25 yrs. months.

Joined at Gladstone Canada Date Feb 6th 1916

Former Trade or Occupation FARMER

Permanent marks or peculiarities that will serve for future identification

SCAR OF WOUND

Height—feet 5 inches 7 Colour of eyes Blue

Signature of Soldier (for identification purposes) William Adams

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) (1) ANKYLOSIS LEFT ELBOW (2). ADHERENT SCAR LEFT ANTERIOR AXILLARY FOLD.

Disabilities Group (b) N.G.

Disabilities Group (c).

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.	1. GUN SHOT WOUNDS 2. GUN SHOT WOUNDS	LENS	17.2.18
(ii.) As to Group (b) above.			
(iii.) As to Group (c) above.			

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 ? No If yes, has Active Service aggravated it ?

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

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

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

(i.) As to Group (a) above ? Yes.

(ii.) As to Group (b) above ?

(iii.) As to Group (c) above ?

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

(i.) While on duty? yes (ii.) While off duty?

(iii.) Was a Court of Inquiry held? (iv.) Where? (v.) When?

(vi.) Opinion of the Court?

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*).

Man states he was wounded at Lens, 17.2.18. Was sent to 1st C.C.S., where wound in arm was dressed and wounds excised and loose fragments removed. Daker's tubes inserted wound in chin excised & cleansed. From here he was sent 20th General Hosp. 21.2.18 wounds dressed & X-Ray. remained here for 3 wks, then was sent to England, admitted to Tooting Military Hosp. 6.3.18 here he had large pocket of pus in axilla open & tube inserted for drainage, also original sinus opened & sequestra removed. Was transferred to #16 Canadian General Hospital 12.8.18.

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*)

Scar 2½ in. under chin, healed, causes no disability; scar 3" long extending from just 4" below shoulder joint postero-lateral, adherent to bone slight tenderness. An irregular scar, extending from outer end of clavicle down medial side left arm 2", healed. Movements at shoulder joint - abduction 45°. forward 45°. backwards 15°. ankylosis of elbow joint angle 145°. Wrist and fingers movements very poor. Marked atrophy of all the muscles of arm & forearm. Fracture of left humerus, middle, united, some displacement & callous. Circulatory, nervous, gastro-intestinal & G.U. systems normal.

8. OPERATION. (i.) Was one performed? yes

(ii.) If so, state what (1) wounds excised and loose fragments bone removed 1st C.C.S. (2) large pocket pus in left axilla opened & sequestra removed.

(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.

10. DO YOU RECOMMEND:—

(a) Fit for duty?

(b) Fit for base duty?

(c) Invalid to Canada? yes — will not be fit for duty within 6 mos.

(d) Discharge from the Service as permanently unfit?

Date of Report Nov 7 1918 Signed [signature] Capt Camel

Officer in medical charge of case.

Station No. 16 CANADIAN GENERAL (ONTARIO) HOSPITAL, ORPINGTON, KENT.

I have satisfied myself of the general accuracy of the above Report, and concur therein ~~except~~ [signature] Capt. C.A.M.S. Asst. Adjt. & Reg. No. 16 CANADIAN GENERAL (ONTARIO) HOSPITAL, ORPINGTON, KENT.

Officer i/c Hospital / S.M.O. Brigade — Strike out one of these.

Dated at No. 16 CANADIAN GENERAL (ONTARIO) HOSPITAL, ORPINGTON, KENT. Station, on 8 - NOV 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)?

If not, indicate it. yes

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

If not, indicate it. yes

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

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.*)

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

(i.) Is it permanent?

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

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

18. Remarks.

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

(b) Fit for base duty? no

(c) Invalid to Canada? yes

(d) Discharge from service as permanently unfit? no

Classification for the Military Hospitals Commission. G

Date of Board 8 - NOV 1918

Signatures of the Board. [signature] President. [signature] Capt Camel [signature] Capt Camel

Station No. 16 CANADIAN GENERAL (ONTARIO) HOSPITAL, ORPINGTON, KENT.

Approved [signature] A.D.M.S. [signature]

Dated at 13 Berners St London Station London 191

9 - NOV 1918