S

REGIMENTAL DOCUMENTS

NAME ADAMS. William REGT. NO. 124115. UNIT 41st Battn H. Q. FILE NO. 1931

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1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
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	COMPANY CONDUCT SHEET (M.F.B. 263A or A F.B. 121)					
3	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)		H			DISCHARGE
.	DENTAL HISTORY SHEET (M.F.B. 465)					Category
2	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Med Unfit
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W. 2589
100M-11-19
1772-19-1377

R

ATTESTATION PAPER.

No. 127115

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?	
2. In what Town, Township or Parish, and in what Country were you born?	Hertfordshire, Eng.
3. What is the name of your next-of kin?	Alfred Adams
4. What is the address of your next-of-kin?	Sarnia Ont
4a. What is the relationship of your next-of-kin?	
5. What is the date of your birth?	Sept 15th 1881
6. What is your Trade or Calling?	Labourer
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

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.

(sgd) Wm Adams (Signature of Recruit)

Date Oct 2 1915. (") D K Duck Sgt (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.

(sgd) Wm Adams (Signature of Recruit)

Date Oct 2 1915. (") D K Duck Sgt (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 Fergus Ont this 2nd day of October 1915.

(sgd) James Beattie (Signature of Justice)
A Com. P.

M. F. W. 22
750M—8-16
H. Q. 1772-89-841

Description of William Adams on Enlistment.

Apparent Age 34 years 1 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 6 ins.

Chest measurement { Girth when fully expanded ..... 38 ins.
Range of expansion .... 3 ins.

Complexion ..... Dark

Eyes ..... Brown

Hair ..... Dark

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).

Scar on right Knee

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 Oct 2 1915. (sgn) W. D. Kyle

Place Fergus Ont. Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

Wm 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.

(sgn) D. M. Sutherland (Signature of Officer)
Commanding 71st Batt. C E F.

Date Oct 2nd 191 .

Certified a True Copy
Hans. M. Livingstone Lieut.
For O. C. No 1 Casualty Unit.

24th Batt

ATTESTATION PAPER.

original

No. 127115

N.O. 71st Batt'n C.E.F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your name? — William Adams.
2. In what Town, Township or Parish, and in what Country were you born? — Hertfordshire Eng.
3. What is the name of your next-of kin? — Alfred Adams
4. What is the address of your next-of-kin? (108 Martin St.) — Laprairie Que. HPB
5. What is the date of your birth? — Sept 15th 1885 31
6. What is your Trade or Calling? — Labourer.
7. Are you married? — No
8. Are you willing to be vaccinated or re-vaccinated? — 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

Wm Adams (Signature of Man.)

D/S Dicks Sgt (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, William Adams, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force,** and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Wm Adams (Signature of Recruit)

Date Oct 2nd 1915. D/S Dicks Sgt (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.

Wm Adams (Signature of Recruit)

Date Oct 2nd 1915. D/S Dicks Sgt (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 Fergus this 2nd day of October 1915.

Thos Beaton (Signature of Justice)

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

A Bonnar

(Approving Officer)

M. F. W. 23.
200 M.—7-15.
H. Q. 1772-59-841.

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Description of William Adams on Enlistr

Apparent Age 31 years 1 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height		5 ft 6 ins.
Chest measurement.	Girth when fully expanded	38 ins.
	Range of expansion	3 ins.
Complexion		Dark
Eyes		Brown
Hair		Dark

Religious denominations.

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

Distinctive marks, and marks indicating peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recr before, he will, unless the man acknowledges to service, attach a slip to that effect, for the info Approving Officer).

Scar right knee

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of 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; 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 Oct 2 1915

Place Ferguson Ont

Medical

*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 been attested, and will briefly state below the cause of unfitness:—

.....

.....

.....

CERTIFICATE OF OFFICER COMMANDING UNIT.

Wm Adams having been finally ap

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

(Signature

Lt. Col.
Commanding 71st Batt'n C.E.F.

Date Oct 2nd 1915

Forms
I. 1237.
12

Army Form I. 1237.

22.6.17

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T.C 205	127115	Pte.	Adams	William

Year	Unit.	Age.	Service.
1917	54th Canadian B.Coy.	36	1 7/12 9/12

Station and Date.

Disease 34 Trench fever

War Hospital, Bradford

	went to France Aug. 13th 1916. Taken ill in Trenches May 19-17 with a very severe cold & some Rheumatism & was put on light duty for 9 weeks. Well up to April 24th when he started & severe pains in head. legs. arms. back chest. Short of breath.
	On admission - Complains of pain in legs only.
	9 Mths. Lodr. Sal. Zi 2 d.s N.G Jaques Capt
June 6.	D. 100 2 Drs ass.
	Pains in L leg & forearm. W.D Thompson Major R.A.M.C.
" 7	Not free from pains.
	9 Mths Pot. Iodid Zi T.I.D.
	N.G.J.
8	Headache - Pains legs & back. W.D Thompson Major R.A.M.C.
"	No rise of temp since May 24/17
	No Headache. Pains in legs. N.G.J.
15	Ready Canad. General Hospital W.D Thompson Major R.A.M.C.
	Noted N.G.J.
June 22	Transferred to Canadian Con. Hospital. Epsom.

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

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

P.T.O.

Station and Date.	

TRIPLICATE

M.D.1

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

No. 26

August F.L. 1-15-7 — 1.D. 30-A-225

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

Regimental No. 127115 Rank Private Name Adams, William

Corps [illegible] who was* Discharged

On 16-8-18 191..., to ...

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-8-18 191..., to 16-8-18 191..., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month	10	20
Advances by Cheques No. #5347	35	00	Regt'l Pay 16 days at $ 1 00	16	00
Advances by Cheques No.			Field Allow. 16 days at $ 10	1	60
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges Kit Def	4	43	Other Allowances* Clothing	35	00
Payment on transfer or discharge No 5430	56	37	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)	33	00
Total	95	80	Total	95	80

*Give particulars. Eligible for 3 mos P.D.P.

A monthly stoppage of $ nil (†) has (‡) been paid on account of Assigned {Pay for the month of 191... / and Sep'n Allce. for month of nil 191...} (to) Assignee

(Address) ...

(†) 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 2-10-15

(2) if married and if a Separation Allowance Card has been submitted no no

(3) cause of discharge med unfit for service authority 1st Bn C.G.R. DO 106 14-8-18

(4) authority for transfer 1.D. 30-A-225 d/12-8-18

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

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

Date August 16, 1918.

Place LONDON, ONT. [signature] Capt.

Paymaster, 1st Bn Can. Garrison Regt. C.E.F. *Paymaster.*

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

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

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

M. F. W. 44.

100M.—1-18.
H. Q. 1772-39-903.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181

Corps 5th Canadian — Military Hospital War Hospital, Bradford

No. 124115 — Rank and Name Pte: Adams, William — Age 36 — Service 1/12

Disease 34 Trench fever — Date of admission May 19-17 — Date of discharge 22-6-17 — Result Cured

Dates of Observation	May 14	20	21	22	23	24	25	26	27	28	29	30	31	June 1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Days of Disease																															
Temperature Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
Pulse per Minute	92 80	72	64	68	64	72	76	92	72	72	76	72	84	60	76	72	90	72	84	72	88	72	76	72	68	72	84	72	68	72	84	72
Respirations per Minute	20 20	20	18	18	18	20	20	20	18	18	19	18	18	18	18	18	19	18	18	18	20	18	18	18	18	18	18	18	18	18	18	18
Motions per 24 hours	0 / 1	1 / 1	1 / 0	0 / 1	0 / 0	1 / 1	1 / 1	0 / 0	1 / 0	1 / 0	1 / 1	1 / 0	0 / 1	0 / 1	0 / 0	1 / 1	1 / 1	0 / 1	1 / 1	1 / 1	0 / 1	1 / 1	1 / 0	1 / 1	1 / 1	1 / 1	1 / 1	1 / 1	1 / 1	1 / 1	1 / 1	1 / 1

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

Signature N. E. Taylor Capt. In charge of case.

CLINICAL CHART.

(*To be attached to Case Sheet.*)

Army Form B. 181

Corps 54th Canadians Military Hospital War Hospital, Bradford.

No. 127115 Rank and Name Pte Adams William Age 36 Service 1 Yr.

Disease 34 Trench Fever Date of admission May 19th 17 Date of discharge 22-6-17 Result Cured

Dates of Observation	June 19	20	21	22	23	24	25	26	27	28	29	30
Days of Disease												
Temperature Fahrenheit — Time A.M. P.M.												
107°												
106°												
105°												
104°												
103°												
102°												
101°												
100°												
99°												
98°												
97°												
Pulse per Minute	10 84	42 88	72 78	12								
Respirations per Minute	20	18	16	18	12							
Motions per 24 hours	1 1	1 D	1 1	1								

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

Signature H. G. Sawyer Corp. In charge of case.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

NAME OF SOLDIER Adams, Thos. DISTRICT

REGIMENT #1 C.D.D. RANK Pte No. 127115

INSTRUCTIONS

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

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

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

	Date	Amalgam	Temporary Filling (a), G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
Condition on first Examination	1918 Oct 8	5.6 / 21.29	2											1/w 1/2						Evans Lieut R. Gm. Miller Capt		Complete 8/4/18

M.F.B. 465
2000M-1-17
1772-39 950

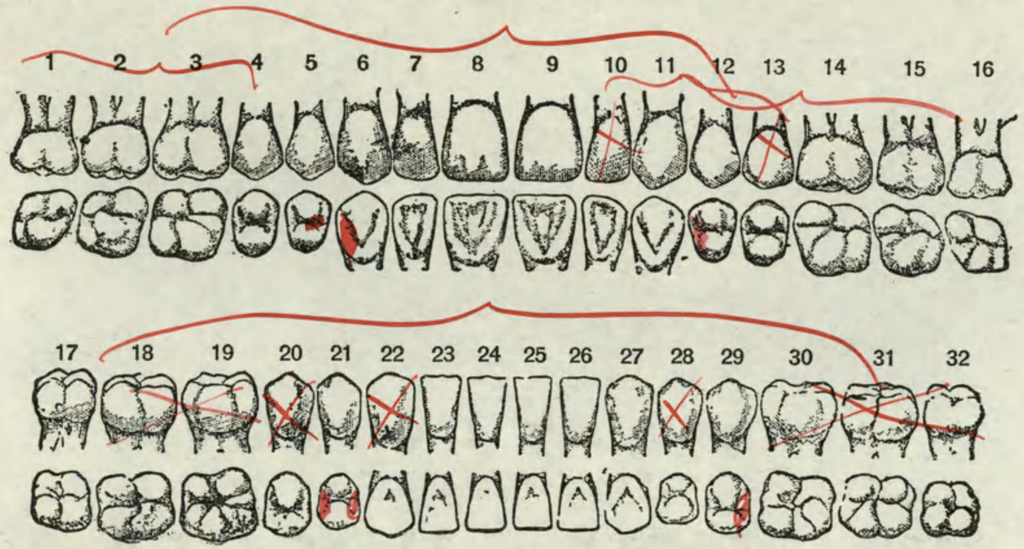
DENTAL HISTORY SHEET

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

NAME OF SOLDIER Adams, W. DISTRICT

REGIMENT #1 C.D. Depot RANK Pte No. 122115



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
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Condition on first Examination	1918 Oct 8	5	5-6-7 29-12											1/2 1 1/2						Wm Ley R Gyn-Millan		Complete 8/4/18

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 1271I5 (Rank) Private

Name (in full) ADAMS, William enlisted in

the 71st.O/s. Battalion C.E.F.

CANADIAN EXPEDITIONARY FORCE at Fergus, Ontario on the 2nd.

day of October 1915.

HE served in Canada, England, France and Belgium

and is now discharged from the service by reason of being medically unfit for further general service. Auth. Routine order #668. d/14/6/18.

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

Age 39 years 10 Months

Height 5 feet 6 inches

Complexion Dark

Eyes Brown

Hair Dark.

Marks or Scars Scar right knee.

William Adams
Signature of Soldier

Capt. A.M.S.
Issuing Officer
for O.C. 71st Bn. Can. Garr. Regt.
Rank
Appointment

Date of Discharge 16-8-18.

Signed at London, Ontario this 16th. day of August 1918.

in Military District No. I.

File Reference No. I.D.30. A.225. d/12-8-18.

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. W. 39a
200m.—2-18.
H.Q. 1772-39-882

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CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. I27II5 (Rank) Private Name ADAMS, William

Unit Ist. Battn. Cdn. Garr. Regt.

Address on Discharge I08 Martin Street, Sarnia, Ontario.

Character and Conduct Very good.

Former Occupation Laborer.

Special Qualifications of Value in Civil Life

Medals and Decorations Nil.

Remarks Nil.

Signed at London, Ontario this I6th. day of August 19I8.

Capt. & Adjt.
for O.C. 1st Bn. Can. Garr. Regt.

Name of Officer

Rank

Appointment

MEDICAL HISTORY SHEET

Surname Adams Christian Name William

Examined { on 7 day of Oct 1915
at Fergus Ont

Birthplace { City or Town Hertfordshire
County England

Apparent age 34

Trade or occupation Labourer

Height 5 feet 6 Inches

Weight 140 lbs.

Chest measurement { Minimum 35 inches
Maximum expansion 3 inches

Physical development Good

Small-pox Marks None

Vaccination Marks { Arm ~~Right~~ ~~Left~~
Number Three

When Vaccinated last 1890

(*a*) Marks indicating congential peculiarities or previous disease None

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

Approved by "C M. MacKay"

Rank Capt M.O.

Date	Fit or Unfit	Examined for Re-Engagement	
		22 May 1917	
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Date	Result	Vaccinations	
3/3/16		"C M. MacKay"	M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
18/10/15		"C M MacKay"	M.O.
31/3/16		"C M MacKay"	M.O.
11/1/18	T.A.B	C.B.B	
20/7/16	D.T.	J.H.H	M.O.
21/7/17	T.A.B	J.H.H	

Enlisted on 7 day of October 191 6 at Fergus Ont

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	71st D.S. Bn	127115		Oct 7/15
Transferred to	54th Bn C.E.F.	127115		28-5-1916
	No. 1. S. Sec.	127115		10-4-18
	1st C G.R.	127115		1-5-18

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
3rd C.C.D	21-9-17	Weakness both legs	C II W.W. Birdsall Capt Pres. S.M.B
Seaford	1-2-18	" "	B II J.J. Gelles Capt President Standing Medical Board
"	19-2-18	D.A.D.D	B II "J.M. McKeller"
London, Ontario	0-0-18	Myalgia	Category "C" II

227 Emp

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.
300M.—1-17.
H. Q. 1772-39-439.

Surname Adams Christian Name [illegible]

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
War Hospital	Bradford	19	5	17	22	6	17	Trench Fever	34	Slight pyrexia Shin pain & headache	W. P. Thompson Major R.A.M.C. Bradford War Hospital
M.C.S. Epsom		23	6	17	11	7	17	Do	18	Temp. normal feels well requires hardening Discharged to Con Depot D.I.	(Illegible) Capt. C.A.M.C. G. Division.

Certified a True Copy

[illegible] Lieut.
For O. C. No. 1 Casualty Unit.

CERTIFIED CORRECT.
5 SEP 1916
CAN. RECORDS, LONDON.

4

CR
R204

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

Casualty Form—Active Service.

M. F. W. 54. (A, F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Unit, Regiment or Corps 71st Overseas Battalion, C. E. F.

Regimental No. 127115 Rank Private Name Adams, William

Enlisted (a) 2/10/15 Terms of Service (a) Duration of War Service reckons from (a) 2/10/1915

Date of promotion to present rank. 18 30 11 59 Date of appointment to lance rank Numerical position on roll of N. C. Os.

Extended Re-engaged Qualification (b) Labourer ?

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked	Halifax	1/4/16	ex H.M.T. Olympic
		Disembarked	Liverpool	11/4/16	
Transferred to 54th		7th Battalion C.E.F. proceeded for service	(HQ letter d. overseas	23/5/16 13/8/16	FROM 28-5-1916 Rtn w28 Bt II d 29-5-16 R.I. Vaudreuil for O.C. 54th Bn
		Disembarked. France	Havre.	14.8.16	N.R.
13-1-17	54 Bn	To Corps Effense Yard	Field	7-1-17	B213 DCS 85 of 26-1-17
10.3.17.	54th.	Rejoined unit	Field.	9.3.17.	B.213, DCS 110.d/-22.3.17.
12-5-17.	do	Evac. Sick.	do	11-5-17.	B.213 D.C.S. 138.
12.5.17.	11 C.F.A.	Trench. Fever adm to	11 C.F.A. 22 C.C.S.	11-5-17 11-5-17	A36 D.C.S. 143.
18-5-17.	14 Gen. Hos.	do to	Eng.	18-5-17.	W3034 - W512.
18-5-17.	do	Invalided (sick) & Posted to B.C. Regtl Depot. Seaford H.S.	England "St Patrick"	18-5-17.	W3083-a5363. P.O. 85 of 6-6-17. J. M. Anderson Lieut For Lieut Col a.a.g.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213 Army Form A. 36, or other official documents.
Date	From whom received				
26.5.17	B C R D.	G.O.S. or Adm to Hfx. Emp.	Seaford	19.5.17	P.II D.O. 78 Pickering Lieut. for Lt-Col i/c Records, C.E.F.
29.9.17	DISCHARGED FROM 3RD C. C. D.	Seaford TO 16TH BN.			PART II D. O. NO 187 29-9-17 Thos Applin Lt For O.C. 3rd Canadian Command Depot.
17-7-17.	B.C.R.D	Command 3rd C.C.D	Seaford	11-7-17	P. II D.O. 130.
30-9-17.	B.C.R.D	Leaves to be on com 3rd C.C.D Detailed to Depot Coy.	"	29-9-17	" " " 200.
19-10-17.	B.C.R.D	Command 16th Res Bn	"	18-10-17	" " " 217.
			Kirkey Lt	Asst	Adjt B.C.R.D
OCT 27 1917	16th Res Bn	Granted permission to wear one G.C. Badge	Seaford	7/10/17	P.T.2 D.O. 291.
15/2/18	16th Res Bn	Leaves to be attached to 16th Res Bn & attached to 1st Res Bn	Seaford	15/2/18	P.T.2 D.O. 66. T. J. Whitelaw Lieut. Adjt. 16th. Canadian Reserve Battn.
15/2/18	1st Res Bn	attached to this Bn	Seaford	15/2/18	P.T.2 D.O. 39
20/2/18	1st Res Bn	Leaves to be attached on return to the B.C.R.D	Seaford	20/2/18	P.T.2 D.O. 63 T. J. Whitelaw Lieut. Asst. Adjt. 1st Canadian Reserve Battalion.

B—122

TLH. Rank Rfle. Name ADAMS, William. Reg'l No. 127115.

Unit 71st. Battn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Fergus, Oct. 2nd. 1915. Place of Birth Hertfordshire, England.

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

108. Martin St. Sarnia, Ontario, Canada. Relationship

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E. R.B. No 9089.
File R.L.
Category Can. o.R.

Discharge, Date and Place Reason Character

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
		Arrived in England S/S Olympic		11 APR 1916	
29.5.16	QC. 71st	Trans to 54th Battalion	Otley CP	28/5/16	OK PtII 126.) 4th CAO. 386. (29/5/16
30.5.16	54th Bn	T.O.S. from 71st Bn.	Bramshott.	27.5.16.	PtII DO. 150. A.F.B. 103 checked 21.8.16
12.8.16	..	Proceeded Overseas	..	13-8-16	Pt. 2. D. O. 224 After Order CHD
22-5-17	✓	No 14 Gen Hp	Wimereux	13-5-17	6L a 218 Trench Fever Adm
23-5-17	✓	Bradford War Hp.	Bradford	19-5-17	6L B 27 54 Bn PtII DO. 85.
26-5-17	B&RS.	Tod on adm to Hp Eng	Seaford	19-5-17	PtII DO 78.
29.6.17	✓	Trans. Can. Con. Hosp.	Woodcote Pk Epsom	23.6.17	6L B 305
20.7.17	✓	Disd. from " "	✓	11.7.17	" 321.
16.7.17	3rd CCD	Attached for P.T. &c.	Seaford	11.7.17	PtII DO 123. +Be Reg PtII #130 dl 17-7-17

127115 ADAMS. W.

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.
30.9.17	B.C.R.D.	Having reported to the Depot, ceases to be shown o/s to unit & is detailed to Depot Coy.	Seaford	29.9.17	Pte II 200. & 3rd C.C.D. Pte II 187 d/29.9.17.
18.10.17	16th Res	Attach for all purposes from B.C.R.D.	"	18.10.17	" 282 & B.C. Pte III 217 d/19.10.17.
27.10.17	✓	Awarded 1 Good Conduct Stripe	✓	Pte	2.10.17 Pte II 291.
15-2-18	"	Ceases to be att'd on being att'd to 1st Reston.	✓	"	15-2-18 — 46 & 1st Reston Pte III 394 d/15-2-18. +B.C.R.D. Pte III 394 d/15-2-18.
~~20-2-18~~	1st Reston	~~Ceases to be att'd~~	"	"	20-2-18 Pte III 450 Cancelled by 1st Reston Pte III 570 d/28-2-18.
24-2-18	B.C.R.D.	Ceases to be att'd 1st Res. and on Com to 5th Buxton pending return to Canada	✓	"	23-2-18 Pte III 46
23-2-18	1st Reston	Ceases to be att'd	✓	"	23-2-18 — 46.
16-3-18	B.C.R.D.	Ceases on Com. to 5th Buxton & S.O.S. on embkn to Canada Dis of H.G. Ottawa for Discb. (~~K.R. & O. para 392 Sec 11~~)	✓	"	27-2-18 Pte III 651.

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

12492/248

Name Adams, William
Surname Christian Name

Regimental Number 127115 Rank Pte.

Unit 1st C.G.R.

Original Unit

District where paid M.D. 1.

Date of Discharge

P. D. P. Filing Number 20-135-1.

Address (in full) Sarnia, Ont.

Rates:—Regimental pay $ per diem: Field Allowance $ per diem. Separation Allowance $ 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		
	100 10	2548	17-9-18	33 00	2466	17-10-18	34 10				33 00	67 10
	1st	~~9973~~	~~20-2-19~~	~~70-~~								
	766A 2nd	~~24547~~	~~4-3-19~~	~~7000~~								

M. F. W. 127.
50M—6 17.
1772 39-1140.

Remarks:

Dec'n No 249248 W. S. G. File No 099-d-64

Award ..... days at $ 7.- per day $ 350.00

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

Less P, D. P. Credited $ 100.10

$ 249.90

Less further debit balance $ .....

Net due paid as below 249.90

TO SOLDIER TO DEPENDENT

	Ag. No.	Ch. No	Amount		Ag No	Ch No	Amount	
20-2-19 1	820	9973	70	00	V			
4-3-19 2	766 a	24547	70	00	V			
9-4-19 3	940 B	421314	70	00	V			
12-5-19 4	8440	457312	39	90	V			
5								
6								
	Total		249	90	Total			

108 Martin St-
Sarnia, Ont-

GEN'L AUDITOR
Posting checked by
A Smith
Date 14/7/19

L. L. Job 95618—M. & D. 6555.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

P. 4 Sw 18 11 17

M. F. W. 12.
15m.—3-16.
H. Q. 1772-39-819.

To Whom Alfred Adams

Address 108 Martin St
Sarnia
Ont.

Rate 15.00

APR 1916

By Whom Assigned Adams W.

Regtl. No. 127115

Rank Pte.

Corps Dep 71 Bde.

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				

Consolidated Account.

15
18
120
18
270

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
15m.—3-16.
H. Q. 1772-39-819.

L. L. Job 95618—M. & D. 6555.

Sheet No. 2. Alfred. Adams.

Name of Soldier Adams. W.

127115. 26th 71st Batta.

15.00

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	T2701	15	
May		T4221	15	
June		M92414	15	
July		G80031	15	
Aug.		Q109714	15	
Sept.		B150477	15	
Oct.		B19363	15	
Nov.		B27317	15	
Dec.		B32895	15	
Jan.	1917	C37978	15	
Feb.		C43042	15	15 R
March		C49331	15	15-L.
April		D 35	15	15 E.
May		D06209	15	
June		D13586	15	15 B.
July		D19820	15	
Aug.		E26882	15	
Sept.		E33676	15	
Oct.				
Nov.				
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.				

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

April 1st/16.

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15-			

12 1 a 5 1st-

PARTICULARS OF SEPARATION ALLOWANCE

No. 127115

Rank Pte Promoted Reverted Discharge

Soldier's Name W. Adams.

Battalion "D" Coy. 71st Bn.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Alfred Adams

Address 108 Martin St. Sarnia Ont.

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Sept 30	17		240	240		
Oct	B 50561		15	15		
Nov.	52260 B		15	15	K	
Dec	57846 B		15-	15-	S	
Jan 18.	64292 B		15	15	S	
Feby	70533 B.		15	15		
Mar	97758 B		15	15		
			360	360		

ap ..... A/c Closed 31-3-18

Ret'd per Expiration

Date 21-3-18 F.X. 23-

Clerk C.A.G.

M to O 23. 2nd- 23-3-18

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22820—M. & D. 1933.

CONSOLIDATED ACCOUNT

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

	Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS

M. F. W. 128
400M.—6-17—177-39-1141
L. L. 22330—M. & D. 7993.

FORM D.M.S. 1300.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
Adams	W.	127115

Rank	Unit	Co.	Troop	Batty.
Pte	54th Bn			

Hospital — Date of Admission

14 Gen Wimereux 13-5-17

Transferred Bradford War 19-5-17 Hosp.

Woodcote Park Epsom Hosp. 23.6.17

Hosp.

Hosp.

Diagnosis TrenchnFever R

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.F.C. London.

DISPOSITION — Date

20 in 11.7.17

		REMARKS
C.L. 22-5-17	A218	
23-5-17	B377	
— 29.6.17	B305.	
20.7.17	B321	

EPITOME OF HOSPITAL TREATMENT.

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

FILE No. 12715 VOL.

SUBJECT Adams Wm

CHARGED TO	PER	DATE	CHARGED TO	PER	DATE
Stew		1/9/36			

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

FILE No. VOL.

SUBJECT

CHARGED TO	PER	DATE	CHARGED TO	PER	DATE

Sup. 5

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS

Number... 127115 ..... Rank... Pte. ....

Surname... ADAMS .....

Christian Names... William .....

Unit... 54th Bn. Can. Inf. ..... Theatre of War... France

Date of Service..... 13/8/16.

Remarks.....

Latest Address... 108 Martin St. .....

Sarnia, Ont. .....

Roll No. B Page 3078.

NAME

REGT. No.

RANK AND UNIT

NEXT OF KIN

CABLE	
No.	DATE

NATURE OF CASUALTY

APR 30 1918

S.E. 3948 Okla

M. F. W. 42—100 M.—8-18.
H.Q. 1772 39-893

No. 127115. RANK Pte. NAME Adams. A. M.

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

Trans. fr. Base Unit.
10-4-18. (Apr 1918)

M. D. 2.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918	1918			
Apr 11.	Apr. 30	"		
	May.	"	Transferred to 1st Depot Bn. C.M.R.	May 1918.
	June.	"		

No. 127115 Rank Pte Name Adams W.

T.O.S. 2-10-15 Unit 71st Battalion C. E. F.
(D.O. no 398 13-10-15)

M.D. 1

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Oct 2	1915 Oct 31	L		
	Nov.	L		
	Dec.	L		
1916	1916			
	Jan.	L	a w. L	D. O. no. 105. Jan. paylist.
	Feb.	L		
	Mar.	L		
	Apr	L		

UNIT SAILED
APR 2 1916

SURNAME. Adams.

CHRISTIAN NAMES William

REGL. No. 127115 RANK Pte.

UNIT 71st. Batt.

FORMER CORPS Nil.

CARD NO.

S.O.S Dis 16-8-18 1st I
m.u. FOLL.
20106 q 14-5-18

NEXT OF KIN.

NAMES IN FULL Adams, Alfred.

RELATIONSHIP TO SOLDIER R.N.S.

ADDRESS Sarnia, Ont. 55

CHANGE OF ADDRESS

COUNTRY OF BIRTH England. Herts. 5 DATE Sept. 15th 1881.

PLACE OF ATTESTATION Fergus. DATE Oct. 2nd 1915

Sailed from Halifax 1/4/16 per S.S. "Olympic".

P/C 14/3/18 4 4 3 7 5 2

L. L. 94504. M. & D. 6512.

M. F. W. 22. 250m.—2-16. H. Q. 1772-39-339.

m.d.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Laborer. RELIGION Anglican.

DESCRIPTION.

APPARENT AGE 34 YEARS 1 MONTHS

HEIGHT 5 FEET 6 INCHES

CHEST MEASUREMENT 38 INCHES EXPANSION 3 INCHES

COMPLEXION Dark EYES Brown HAIR Dark.

DISTINGUISHING MARKS

Scar on right knee.

MEDICAL EXAMINATION. PLACE Fergus. DATE Oct. 2nd. 1915.

Form D.M.S. 1317.

1202—15m—21/11/16.

HOSPITAL. G

A. & D. No. ..... Ward .....

Unit 54 Sick or Wounded.

Regtl. No. 127115 Pl. of Act'n .....

Rank Pte Name Adams W

Age 36 Religion C of E

Service Compl'd 1 7/12 Time with Field Force 9/12

Diagnosis 34

22 JUN 1917 Admitted Bradford Discharged D/ 11/7/17

Transferred 3 C.C.S. Senford

RECORD FURTHER REMARKS ON BACK.

23-6-17

Temp. normal pains in legs
at times L.D

4-7-17 Temp normal feels well slight
pain in legs at times but not severe

D/

A. M. Blakeley
Capt

REGT'L. No. 127115

NAME Adams W.

H. Q. FILE No. 649

RANK AND CORPS Pte. 54th Bn

FOLLOWS No.

FOLLOWS

CABLE

NO.	DATE

NATURE OF CASUALTY

L. L. 18950—M. & D. 7789

M. F. W. 42—30M.—4-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 218	#14 Gen Wimereux	13-5-17	Trenchfever slo.
B27	Bradford War. Bradford.	19-5-17	" " "
B 306	Can. Conv. W'cote, Pk Room.	23-6-17	" " "
B 321	Leisch.	11-7-17	" "

FORM R. 149.
7106—250m—7/2/17.

Name ADAMS. William *Rank* Private *Reg. No.* 127115

Unit 54 th Battalion

Next of Kin CANADA.

Date 1917.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
13-5	No.14.Gen.H.Wimereux.		Slt. Trench Fever	A218		
19-5	Bradford War Hosp	Bradford	do	B277		
23-6	Cobh Woodcote Pk		Do	B305		
11-7.	Discharged.		Do.	B321.		

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

MARRIED OR SINGLE S.

PLACE OF BIRTH Bedfordshire Eng.

NAME AND ADDRESS OF NEXT OF KIN Alfred Adams
Sarnia Ont Can

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

1. L.P.C. issued, date. 30/7/18
2. Authority. O.W.B. 179 B.B.R.D. 30/7/18 (Dvl Dvl)
3. Discharged to. Canada 27/3/18
4. Pay Book verified. 7/3/18
5. Balance shown on L.P.C. £ ~~19 31~~ 55 80
6. Balance shown in Ledger Sheet £
7. Full particulars of entries making difference between 5 and 6 if any.

No.	Date.	Unit & particulars of entries.	Amount Debit	Amount Credit
4158		Ledger		
1789			23 30	
1209				
670	30/7/18			

Net Difference £ 55 80 | 55 80

8. Assigned Pay cancelled A.3.H. Forms rendered. 1/3/18
or
9. Separation Allowance and Assigned Pay continued, to dependent in England, and transferred to Accounts Branch for payment.

Certified correct.

Officer i/c Group. F

CASUALTIES. PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Granted permission to wear one good conduct stripe	2/10/17	B.O. 291 - 27/10/17

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 127115 RANK Pte NAME Adams William

IF IN PERMT. CORPS } WHAT UNIT UNIT 7/1 Bn

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Fergus

DATE OF ATTESTATION Oct 2nd/15

TRANSFERRED TO 54 Bn DATE 11/6/16 AUTHORITY B.O. 128

TRANSFERRED TO B.C. Regt Depot DATE 23.5.17 AUTHORITY C.L.O. 277 23.5.17

TRANSFERRED TO DATE AUTHORITY

TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 15 DATE EFFECTIVE 1/4/16

PAYABLE TO Alfred Adams 108 Martin St. Sarnia Ont. Can. RELATIONSHIP 24 SEP 1916

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1-3-18 REASON Discharged to Canada

DISCHARGE DATE AND PLACE Canada 27/3/18 REASON AND AUTHORITY O.W.B. 179 B.B.R.D. 30/7/18 Dvl

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

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 30	21 30																21 30				Bal. 31/12/16 Canada
	33	18	15/4							9 7 3				15			24 73	29 57			
	34 10	116	15/5							9 7 30											
		78	3/5	162	28/5					17 03	2 43			15			41 76	21 91			
	11													15			15	17 91			
	22			593	15/6						12 16						12 16	27 75			
	34 10	645	31/7	69	15/7/16					9 7 3	7 30			15			32 03	29 82			
	34 10	743	31/7							9 7 3				15			24 73	39 19			
	33	791	21/8							26 2				15			17 62	54 57			
	34 10	895	16/9							261											
		947	1/10							26 2				15			20 73	68 44			
		1078	13/11/16							261											
	33	1001	1/10							26 2				15			20 23	41 21			
	34 10	1126	13/11	1165	9/12					262	11 33			15			28 95	86 36			
		1257	1/1							261											
	34 10	1223	13/12							261				15			20 23	Lowest		100 24	
21 30	357 90									74 44	33 22			150			25 76 6				

MARRIED OR SINGLE S.

PLACE OF BIRTH Bedfordshire Eng

NAME AND ADDRESS OF NEXT OF KIN Alfred Adams
Sarnia Ont Can

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
Granted permission to wear one good conduct stripe.	2/10/17	B.O. 291 - 27/10/17

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 127115 RANK Pte NAME Adams William

IF IN PERMT. CORPS WHAT UNIT UNIT 71st Bn

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Fergus

DATE OF ATTESTATION Oct 2nd/15

TRANSFERRED TO 54 Bn DATE 11/6/16 AUTHORITY B.O. 128

TRANSFERRED TO B.C. Regt. Depot DATE 23.5.17 AUTHORITY C.L.O. 277 23.5.17

TRANSFERRED TO DATE AUTHORITY

TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 15 DATE EFFECTIVE 1/4/16

PAYABLE TO Alfred Adams 108 Marion St. Sarnia Ont. RELATIONSHIP Can. 24 SEP 1918

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1-3-18 REASON Discharged to Canada

DISCHARGE DATE AND PLACE Canada 28/2/18 REASON AND AUTHORITY O.M.F.R. Ring A.O.R.D. 28/2/18

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Deferred

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
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1-31/5/16	31	1	31		31	10	3 10								34 10	78 3/5		162 21/5						1703	243			15		41 76	21 91				
Emmerton 1-10/6/16	10	1	10		10	10	1								11													15		15	17 91				
June 1/30	20		20		20		2								22					593 15/6					12 16					12 16	27 75				
July	31		31		31		3 10								34 10	645 31/7				69 15/7/16				973	730			15		32 03	29 82				
1/31.8.16	31		31		31		3 10								34 10	743 31/7								973				15		24 73	39 19				
Sept	30		30		30		3								33	791 21/8								262				15		17 62	54 57				
Oct	31		31		31		3 10									895 16/9								261											
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Nov.	30		30		30		3 -									1079 15/11/16								261											
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Dec	31		31		31		3 10								34 10	1126 15/11		1165 5/12						262	1133			15		28 95	86 36				
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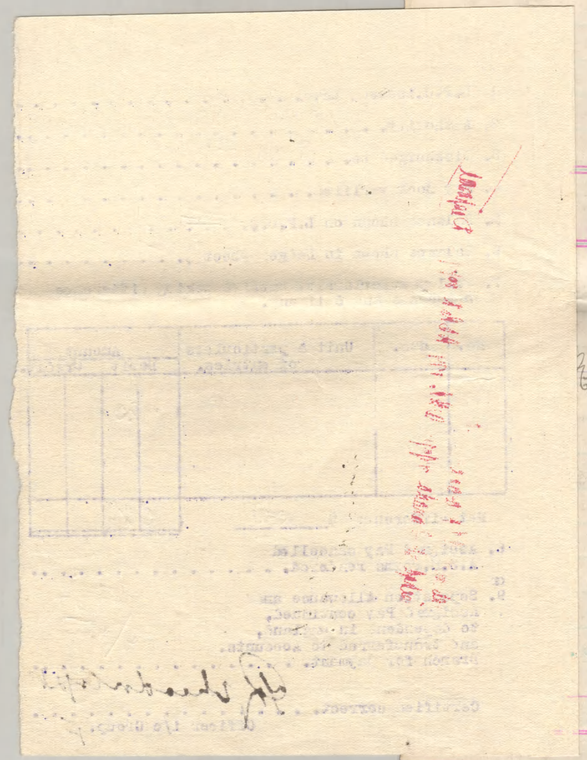

127115. Pte. Adams. William.

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
			336	60										21 30	357 90									74 44	33 22			150 -		257 66	100 24				
Feb.	28	1st 10	30	80										21 30	30 80										2 61 -			15		17 61	113 43			113 43	
			367	40											388 70										2 62 -			165		275 27					
Mar	31		34	10											34 10										2 62 -			15		25 47	122 06				
Apl.	30		33												33 00	10	4/4							262			15 -		17 62	137 44				
May	31		34	10											34 10	146 186	20/4							261 - 268 -			15		20 29	151 25				
June	10		11												11													15		15 00	147 25				
June 11-30	20	1st 10	47 22	60										21 30	400 90 22 -									82 35	35 84	10 46		225		383 65	16925				
July 1-31	31	1st	34	10											34 10													15		15	188 35				
Aug	31		34	10											34 10													15		15	207 45				
Sept	30		33												33 00													15 -		15 -	225 45				
			604	80										21 30	677 10									87 35	35 84	10 46		270		398 65					

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP ALLCE
Oct	Bal Fwd	~~295 45~~							225 45		
	9 Pay	34 10						15	244 55		
		34 10						15			
Nov	P. pay	33 -						15			
				ack 2574 Canford	15/10/17	19 47					
				✓ 499 ✓	30/10	7 30					
				✓ 750 ✓	15/11	9 73					
				✓ . CCH Sharon	26/6	9 73					
				✓ 1851 ✓	1/7	48 67					
				✓ 711 16 Res	31/10	73 -					
				✓ 794 ✓	28/11	7 30					
				✓ 1180 3rd ECO	21/9	9 73					
				✓ 1252 ✓	27/9	24 87					
				✓ 1065 ✓	26/7	9 73					
Dec	P pay	34 10 47 10				19 ~~95~~ 53			82 12		
				Qpr.				15 30 15			
Jan				Qpr 878 16 Res 7-17-17		9 73					
1918	P. Pay	34 10		Qpr 887 16 Res 20-17-17		9 73					
				2nd Qpr 840 3 Res 30-7-17		9 73					
		33 10		3rd Qpr 960 3 Res 15-8-17		24 33 53 37		15	0 Cr		

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4
Feb	P. Pay	73 10						16 55 80
				Qpr 1068 16 Res 1-1-18	9 73			
				" 1409 " 17-1-18	9 73			15 36 34
		73 10		Qpr 670 1 Res 20-1-18	9 73			
				2nd Qpr 1743 16 " 29-1-18	9 30 19 03			19 31
				Discharging 27/1/18	19 31 19 31			0

Mch
June

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.

This space to be for numbers.

M

B4

2-A-38.

Military District No. 1
AUG 28 1918
D 30-A-225

Proceedings on Discharge.

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

No. 127115

Rank Private

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

Corps (Squadron, Battery or Company) 1st Bn. Cdn. Garr. Regt.

Date of Discharge 16-8-18

Place of Discharge

Recorded 18 Aug. 1938. 649-A-7489

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 39 years 10 months. Descriptive Marks

Height 5 feet 6 inches. Scar right knee

Complexion Dark

Eyes Brown

Hair Dark

Trade Labourer

Intended place of residence (To be given as fully as practicable.) 108 Martin Street. Sarnia. Ontario.

2. The above-named man is discharged in consequence of as medically unfit for further general service Auth Routine Order No 668. d/14-6-18. 1.D. 30. A 225. d/12-8-18

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

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

Very Good

N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

Labourer

M. F. B. 218.
50m.—3-16.
H. Q. 1772-39-113.

K.C.D. 14.11.19 N.M.S. M.S.

(OVER)

W. S. G. Comp 6/2/19. M. S. K.

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

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

6. Medals and Decorations..... Nil

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) London Ont

(Date) 16-8-18.

Capt. & Adjt
For O.C. 1st Bn. Can. Garr. Regt.
Commanding ..... Lieut.

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

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

(Place) London. Ont. W adams (*Signature of Soldier.*)

(Date) 16-8-18. E E Ouellett (*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.

William adams (*Signature of Soldier.*)

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed)..2.. years..319.. days.

Total.....2.. years..319.. days.

11. **Confirmation of Discharge.**

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

(Place) London. Ont

(Date) 16-8-18

(*Signature*) Capt. & Adjt
For O.C. 1st Bn. Can. Garr. Regt.
Lieut.

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.)

I have received all just demands due me. William adams

(OVER)

OPINION OF THE MEDICAL BOARD—(*Continued*).

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

CATEGORY "C" II

Before signing the President of the Medical Board will read the certificate signed by the soldier, to the soldier, and if no change is indicated will initial the certificate.

President.

PLACE London, Ontario.

DATE 8-8-18

Members.

APPROVED BY

W. T. Gaunt Capt.
for *Assistant Director of Medical Services.*

DATE 9-8-18

APPROVED BY

Director-General of Medical Services.

DATE

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

President.

PLACE .....

DATE .....

Members.

BPC 436202

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 soldier 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 soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
4. Special care is required in answering question 13. Please read the questions carefully. All questions must be answered.
5. If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 8, 9 and 10 be communicated to the soldier, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison & Sons.

STATION London, Ontario DATE 8-8-18

1. 1 (a) Unit C. G. R. (b) Regimental No. 127115 (c) Rank Pte.

(d) Surname ADAMS (e) Christian name William

2. Age last birthday 39 Date of birth September 15th, 1878

3. Enlisted at Fergus, Ont. on 2-10-15

4. Personal description:—

(a) Height 5' 6" (b) Weight 121 lbs. (stripped) (c) Complexion Dark.

(d) Colour of hair Dark. (e) Colour of eyes Brown (f) Identification marks

1/2" scar right knee-mole back of neck.

5. Address after discharge (for the use of the Board of Pension Commissioners)

108 Martin St., Sarnia, Ontario.

6. Former trade or occupation Labourer.

7. (a) Service	Years	Days

	Periods	
	From	To
81st B'n. C. G.R.	2-10-15	8-8-18

(b) Has he been overseas? YES 8. Original disease or disability MYALGIA

(a) Date of origin May 1917. (b) Place of origin France

(c) Cause* Trench Fever

(d) Present disease or disability Weakness and pain in both legs.

9. Present condition (a) (Important to be a full description of the present disabling condition or conditions only.) "History" must be recorded in Section 10.

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

SEE SECTION (9) PAGE 2.

19

M. F. B. 227.
300M.—2-18.
1772—39—117.

9. Present condition.—(*Continued.*)

SUBJECTIVE-Complains of sharp pains in both legs and thighs worse in left- On left side of body, arm and neck and frequent frontal headache: Pains are more severe in changeable weather. Pains vary from dull ache to sharp shooting character. Says he can walk 2 miles at his own gait without much pain. Trouble him during forepart of night causing sleeplessness.

OBJECTIVE- Movement in all joints normal. Considerable tenderness in muscles of left thigh and hip. Walks with a very stiff gait Looks older than stated age, 39-at least 45. Tendon reflexes much exaggerated-arteries palpable.

(b) Are the following systems normal? If not, briefly state abnormality

Nervous YES Digestive YES Respiratory YES Cardiac YES

Genito-Urinary YES Skin, Middle Ear, Eye or any other part... YES? EXCEPT AS STATED.

10. History: (*a*) of Condition referred to in "a" section 9.

Was in France 9 months, then sent to England with Trench Fever and kept in hospital for 52 days.

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

N I L

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

Not applicable.

12. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? 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? One year.

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

Hospitals in France and England.

OPINION OF THE MEDICAL BOARD

14. (*Continued*).

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? Yes, light labor six months then increasing to full.
(If not, briefly state why.)

17. Recommendations Category "C" II

J. Y. Byars. Capt
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

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

I, the undersigned W. 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

J. J. 4

W adams
Signature of soldier examined.

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 criticized.

AGREE

19. Is the soldier fit for

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

20. It is certified that the soldier
(a) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration).

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

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

Date of Board

Station

President.

Signatures of the Board

Approved

Dated at

PART I. Form (D.M.S. 1312). A.F.B. 179 Canada (Revised). 3737. 50M.

Reserved for M.H.C.

Regt. No. 127115 Rank Pte. Surname Adams Christian Name William.

Unit or Corps—(a) Overseas from United Kingdom 54th Battn. (b) In United Kingdom 1st Res.

Born at—Town Bottonend County or Province Herts Country England.

Date of Birth—Day 15 Month Sept. Year 1878 Age 39 yrs. 5 months.

Joined at Fergus, Ontario Date 2nd October, 1915.

Former Trade or Occupation Laborer.

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

Small Mole right side bavk of neck - Scar side left patella - Small Scar right buttock.

Height—feet 5 inches 6 Colour of eyes Brown.

Signature of Soldier (*for identification purposes*)

Medical Report.

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

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

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

Disabilities Group (*a*) Weakness and pain Both legs.

Disabilities Group (*b*)

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.	Myalgia Trench Fever.	France	May. 1917.
(*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 ? NO.

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

Dated at Seaford.

Military District No. 1 JUN 1 1918

PART I. *(continued).*

5. If a case of disability was an injury received on Active Service, was it received— Not applicable.

(*i.*) While on duty? (*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).*

Invalided back from France May, 1917 - Trench Fever - In Hospital 52 days. 9 months in France - Some pyrexia - Pain in legs and arms. Also headache - tires easily.

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

General appearance of debility - Not well nourished - slight loss of weight - Pressure on tibia gives pain - Stiffness hips and knees - cannot walk far - cannot sleep with pains in legs, increased in cold weather. Other systems normal.

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

(*ii.*) If so, state what.

(*iii.*) Was one advised and declined?

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? YES.

(*ii.*) If so, describe. 2 lower right molars.
2 lower left molars

10. DO YOU RECOMMEND:—

(*a*) Fit for duty? NO.

(*b*) Fit for base duty? Yes. B-11 Not likely to be raised in 6 months.

(*c*) Invalid to Canada? No.

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

Date of Report Feb. 18th 191 8 Signed G.W. Manning Smith. Capt.
Officer in medical charge of case.

Station Seaford, Sussex.

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

T.F. Graham. Capt. ~~Officer i/c Hospital~~ (S.M.O. Brigade) Strike out one of these.

Dated at Seaford. Station, on Feb. 18th 191 8.

* Delete if inapplicable.

PART II.

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

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

11. Is the disability fully indicated in Part I. (1)?
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? No; Aggravated? No (*b*) Misconduct of the Soldier: Caused? No; Aggravated? No

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour? (*Estimate at none*, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.)
Not applic

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*, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, *or all.*)
Not applic.

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*)? Not applic.

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? Not applic.

18. Remarks.

19. Recommendation:—(*a*) Fit for duty? No
(*b*) Fit for base duty Yes. B 11 Not likely to improve
(*c*) Invalid to Canada? No
(*d*) Discharge from service as permanently unfit? No

Classification for the Military Hospitals Commission

Date of Board 19-2-18

Station Seaford.

Approved

Dated at Seaford.

Signatures of the Board. N.C.Wallace. Capt. CAMC
J.McKee. Capt. CAMC
J.Z.Gillies. Capt. CAMC

President.

A.D.M.S.

Station

191

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

Date	Brief details, and signature
3/3/16	Vaccination [illegible] Capt RAMC
18/10/15	Inoculation [illegible] Capt RAMC
21/3/16	do Capt RAMC
24/3/16	do [illegible]

Table IV.—Service Table.

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

ARMY FORM B. 178.

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

MEDICAL HISTORY of

Surname Adams *Christian Name* William

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Hertfordshire County Eng.

Examined ... ... on 2 day of October 191 5
at Troyes, Aube

Declared Age ... ... 34 years — days.

Trade or occupation ... Labourer

Height ... ... 5 feet 6 inches.

Weight ... ... 140 lbs.

Chest Measurement — Girth when fully Expanded 38 inches.

Chest Measurement — Range of Expansion 3 inches.

Physical Development ... Good

Vaccination Marks	Right	Left
Arm ...		
Number ...		3

When Vaccinated ... 3/3/16

Vision ... ... R.E.—V=
L.E.—V=

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

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

Approved by (*Signature*) Lyd. Commanding.

(*Rank*) Capt RAMC
Medical Officer.

Enlisted ... ... at Troyes Aube
on 2 day of Oct 191 5.

Joined on Enlistment ... / Transferred to ...	Corps.	Regtl. No.
	7th Batt.	12715
	5th Batt	12715

Became non-effective by

on day of 191 .

(*Signature*)

(*Rank*)

(5506.) W. 14071/M. 89. 750M. 1/16 C. P., Ltd. Forms B. 178 39

P.T.O.

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				