

NAME

ADIE SYDNEY

REGT. NO.

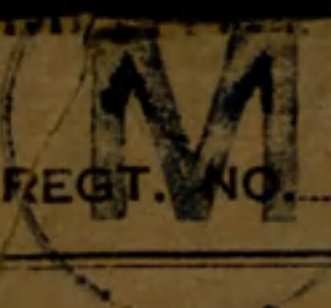
50922

UNIT

1st Com

H. Q. FILE NO.

1330



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DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505 REFERENCE

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11/26/59

Comp. to B.P.C.

7/11/19

B.P.C. - Spec 88

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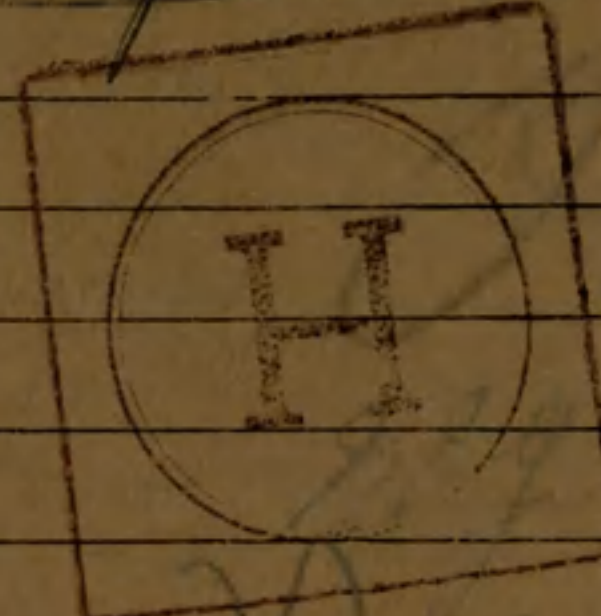
PARTICULARS OF CHARACTER (A.F.W. 3226)

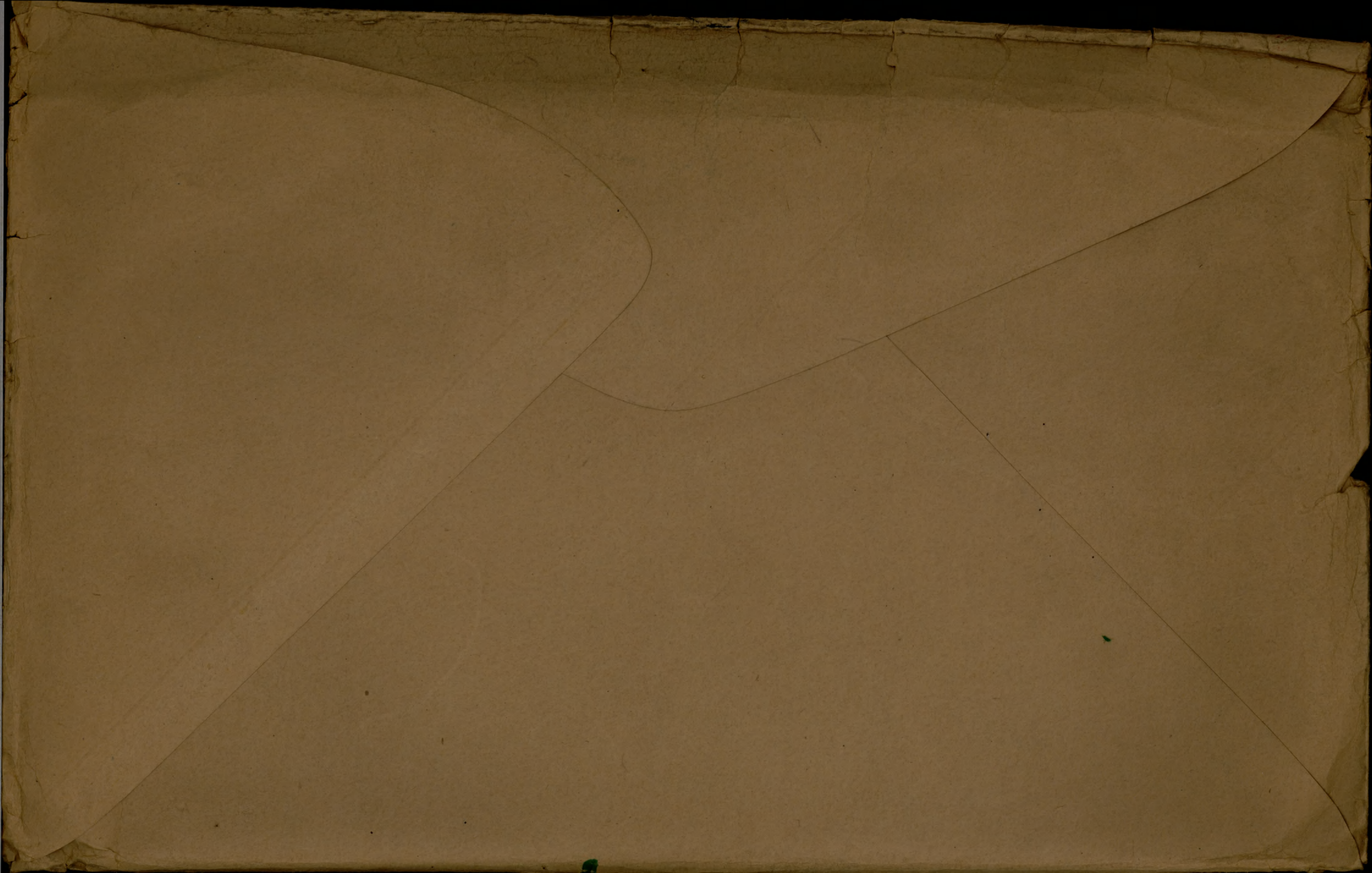
1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

6906 5009A
6013 pay sheets

1 card

29-7-59





Triplicate
Orig

ATTESTATION PAPER.

No. ~~01164~~

Folio. 50922

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... Sidney Adie
2. In what Town, Township or Parish, and in what Country were you born?..... Channel Islands
3. What is the name of your next-of-kin?..... Nil
4. What is the address of your next-of-kin?..... Nil
5. What is the date of your birth?..... March 4th 1881
6. What is your Trade or Calling?..... Draughtsman & Chemist
7. Are you married?..... No
8. Are you willing to be vaccinated or re-vaccinated?..... Yes
9. Do you now belong to the Active Militia?..... 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

Sidney Adie (Signature of Man).
Cyril Appleby (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Sidney Adie, 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.

Sidney Adie (Signature of Recruit)
 Date April 6th 1915 Cyril Appleby (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Sidney Adie, 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.

Sidney Adie (Signature of Recruit)
 Date April 6th 1915 Cyril Appleby (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 Halifax, N.S. this 6th day of April 1915

[Signature] (Signature of Justice)
A Justice of the Peace for County of Halifax

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

.....(Approving Officer)

Description of Sidney A. A. A. on Enlistment.

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

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).

Height 5 ft. 9 ins.

Weight 141

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

Complexion Dark
 Eyes Grey
 Hair Black

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

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 April 6th 191 5

O. Lacort Major
R. B. M.

Place Halifax, N.S.

Medical Officer.

*Insert here "fit" or "unfit."

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

.....

CERTIFICATE OF OFFICER COMMANDING UNIT.

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

..... (Signature of Officer)

Date 191 .

CANADIAN EXPEDITIONARY FORCE

War Service Badge

Discharge Certificate

Class "A" No. *W. S. B. Class "A"*

This is to Certify that No. 50922 (Rank) Private

Name (in full) Adie, Sidney. enlisted in
the C.A.M.C.

CANADIAN EXPEDITIONARY FORCE at Vancouver, B.C. on the 6th
day of April 19 15.

HE served in 2nd Can Gen Hq France.

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

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

Age 39.

Marks or Scars Nil.

Height 5'9"

Complexion Dark.

Eyes Grey

Hair Black.

S. Adie

Signature of Soldier

A. M. Mason

Issuing Officer

Capt

FOR

Rank

Date of Discharge Apr. 25, 1919.

D. C. No. 2 District Depot.

Appointment

Signed at HAMILTON ONT. this 25 day of Apr 19 19

in Military District No. NO. 2

File Reference No. APR 25 1919

DISTRICT DEPOT

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.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of after 19

Uniform is not to be worn after expiration of one month from date of discharge, except by special permission of G. O. C. District.

Name of Officer

Rank

Appointment

Old demobilization for CD. Particulars called for this Corp. will not be printed. The certificate entered hereon will not be printed.

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 50922 Rank Pte Surname ADIE
(Given name in full)

Sidney
 Unit or Corps 702 Coan Gen Hosp Birthplace Channel Islands, British Isles

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

1. GENERAL DESCRIPTION:

Physique good ^{Est} Weight 155 lbs. Height 5 ft 9 in. ^{Est} Colour of Eyes Grey
 Nutrition good
 Pulse 68 regular
 Condition of arteries soft
 Vision Rt. 6/4+ Left 6/4+
 Hearing (conversational voice) Rt. 20 ft.
 Left 20 ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin.)
None

Opinion as to general health and physical condition good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System no Genito Urinary System yes Cardio-Vascular System no
 Special Senses no Integumentary System no Respiratory System no
 Disturbance of mentality no Muscular System no Digestive System no
 Osseous and Joint System no Any other general condition no

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

2-10-15 U.O.G. recovered.
11-1-19 Daurillitis recovered.

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at *S. Koroisiffe* (Overseas)

Date *19-3-19.*

Signed *E. M. Oles* M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature *Sidney Alice*

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at (Canada)

Date

Signed M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

RA
[OVER]

174
50922
ORIGINAL.

MEDICAL HISTORY SHEET.

Surname Adie Christian Name Sidney

Examined { on 4th day of March 1913
at Halifax, N.S.
Birthplace { City or Town Channel Islands
County Eng.

Approved by [Signature] Major
Rank [Signature] M.O.

Apparent age Thirty five years
Trade or occupation Draughtsman Chemist
Height 5 Feet 9 Inches
Weight 141 Lbs.
Chest measurement { Minimum 33 inches
Maximum expansion 38 inches

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Physical development Fair
Small-Pox Marks None
Vaccination Marks { Arm Right Left
Number 3

Date	Result	VACCINATIONS.
		M.O.
		M.O.
		M.O.

When Vaccinated last About 1901
(a) Marks indicating congenital peculiarities or previous disease None

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>7⁴/₁₅</u>		<u>p. Russell Col.</u> M.O.
		M.O.
		M.O.

(b) Slight defects but not sufficient to cause rejection None

Enlisted on 12th day of February 1913 at Vancouver, B.C.

	CORPS.	REG'L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>[Signature]</u>	<u>01164</u>		<u>12-2-15</u>
Transferred to.. ..		<u>50922</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

The Medical History Sheets of g.M. form + including overseas, must be returned by the Officer commanding the unit to the Receiver of Medical Stores, London. They may be returned to the Receiver of Medical Stores, London.

W. R. WARD, Colonel in Charge of Records, Canadian Contingents, London.

This Medical History Sheet has been compared with the 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. Entries in Red Ink made from Attestation Sheets.

M. F. B. 313.
100M.-1-15.
H. Q. 1772-39-439.
W. R. WARD,
Colonel in Charge of Records,
Canadian Contingents.

AUG 20 1915 for D. D. M. S.

To be rendered in **DUPLICATE**

CANADIAN CONTINGENT, EXPEDITIONARY FORCE.

ASSIGNMENT OF PAY (all ranks).

From Paymaster,
of (state unit) No. 2. Canadian General Hospital,
Le Treport, France.

To Paymaster, Assigned Pay Branch,
Westminster House, London, S.W.

108-86
noted 26/8/15 AM



I beg to notify the following { new assignment } to take effect
{ change in Assigned Pay }
from * 1st September 1915 *(See foot-note.)

No. 50922 Rank Private Name in full Sidney Adie.

Unit in which serving No. 2. Canadian General Hospital.

If change of assignment, state amount assigned at present \$ 25.00

Name of Assignee at present Mrs. A.E. Carscafen,

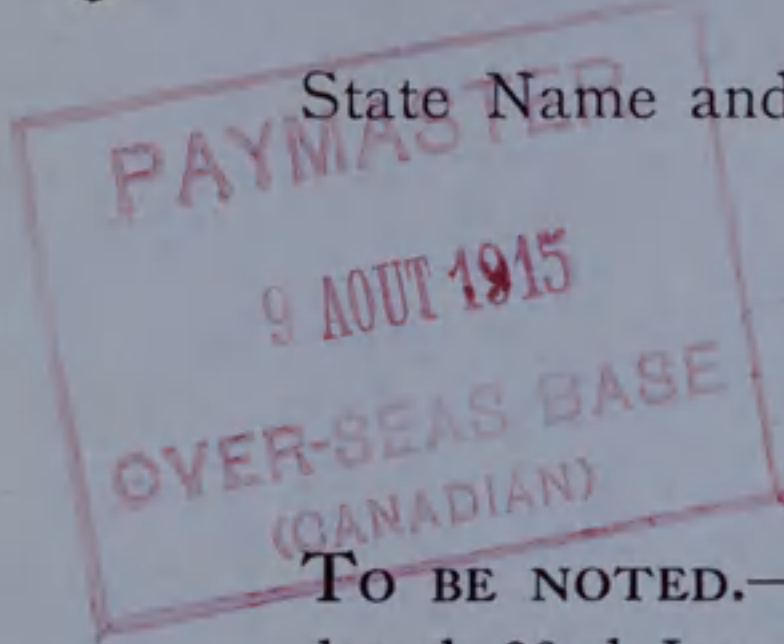
Address 1673 5th. Ave. W. Vancouver. B.C.

State amount to be Assigned from above date \$ 25.00

State Name and Address of person to whom amount to be paid:

Name Bank of Commerce,

Address Hashings Cambie Branch, Vancouver, B.C. Canada



TO BE NOTED.—By Order in Council of the Dominion Government of Canada, dated 23rd January, 1915, on and after 1st April, 1915, all N.C.O's and men whose dependents are in receipt of Separation Allowance are compelled to assign an amount not less than 50% of the pay earned by them, unless on receiving the objection of any such N.C.O. or man, the Canadian Government decides, in view of the special fact or circumstance of the case, to waive this condition.

Sidney Adie.
Signature of Assignor.

Noted by
[Signature]
Pay Sergeant.

[Signature]
Signature of Paymaster.

INSTRUCTIONS.

All new Assignments, changes of Amounts Assigned, Names of Assignees, Addresses, etc., are to be notified on this Form. Changes in the Amounts Assigned and new Assignments can only be carried out once a month, and must be forwarded not later than the **FIRST DAY OF EACH MONTH**, If received after that day the form will be held over by the Chief Paymaster until the following month.

1912

...

...

...

...

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...

...

...

...

To be rendered in **DUPLICATE**

CANADIAN CONTINGENT, EXPEDITIONARY FORCE.

ASSIGNMENT OF PAY (all ranks).



From Paymaster,
of (state unit) No 2 General Hospital.

To Paymaster, Assigned Pay Branch,
Westminster House, London, S.W.

I beg to notify the following { new assignment / change in Assigned Pay } to take effect
from* May 1st 1915. *(See foot-note.)

No. 50922 Rank Pte. Name in full S. Adie.

Unit in which serving No 2 General Hospital.

If change of assignment, state amount assigned at present \$ Nil.

Name of Assignee at present _____

Address _____

State amount to be Assigned from above date \$ 25⁰⁰

State Name and Address of person to whom amount to be paid:

Name Mrs. A. E. Cascallen.

Address 1673 5th Avenue West Fairview Vancouver B.C.

TO BE NOTED.—By Order in Council of the Dominion Government of Canada, dated 23rd January, 1915, on and after 1st April 1915, all N.C.O's and men whose dependents are in receipt of Separation Allowance are compelled to assign an amount not less than 50% of the pay earned by them, unless on receiving the objection of any such N.C.O. or man, the Canadian Government decides, in view of the special fact or circumstance of the case, to waive this condition.

*Original signed
held in London.*

Noted by _____
Pay Sergeant. _____

Signature of Assignor.

Signature of Paymaster.

INSTRUCTIONS.

All new Assignments, changes of Amounts Assigned, Names of Assignees, Addresses, etc., are to be notified on this Form. Changes in the Amounts Assigned and new Assignments can only be carried out once a month, and must be forwarded not later than the **FIRST DAY OF EACH MONTH**, If received after that day the form will be held over by the Chief Paymaster until the following month

To be rendered in DUPLICATE

CANADIAN CONTINGENT, EXPEDITIONARY FORCE.



ASSIGNMENT OF PAY (ALL RANKS).

From Paymaster,

of (state unit)

2 General Hospital. CMC

To Paymaster, Assigned Pay Branch,
Westminster House, London, S.W.

I beg to notify the following { new assignment / change in Assigned Pay } to take effect

from* *May 1st 1916* 191*6* * (See foot-note.)

No. *50922* Rank *9/c* Name in full *Adie, S.*

Unit in which serving *2 General Hospital.*

Original Unit *CMC Rempts*

If there is an assignment now in force, state amount \$ *25.00*

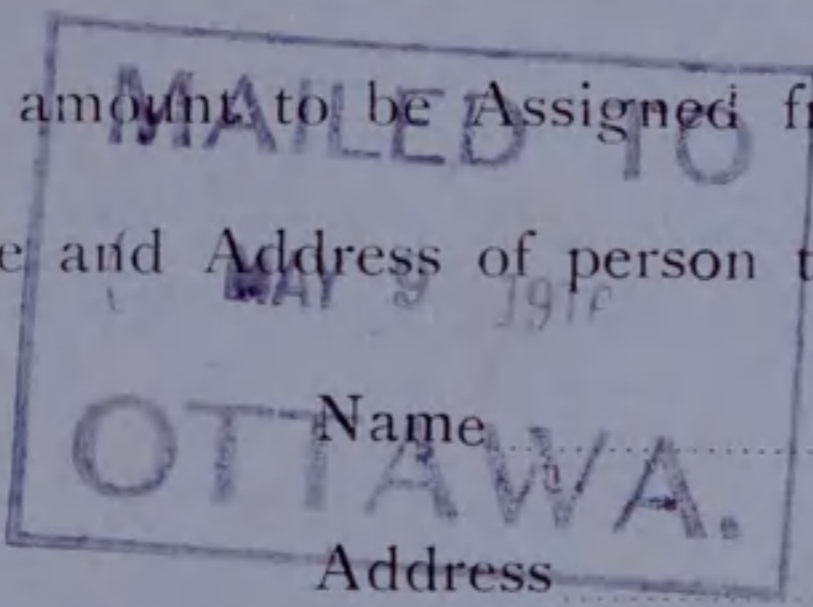
Name of Assignee at present *Self Cdn Bank of Commerce*

Address *Hastings Cambie Branch Vancouver B.C. Canada*

The filling in of the following particulars will cancel all previous assignments unless instructions are given to the contrary.

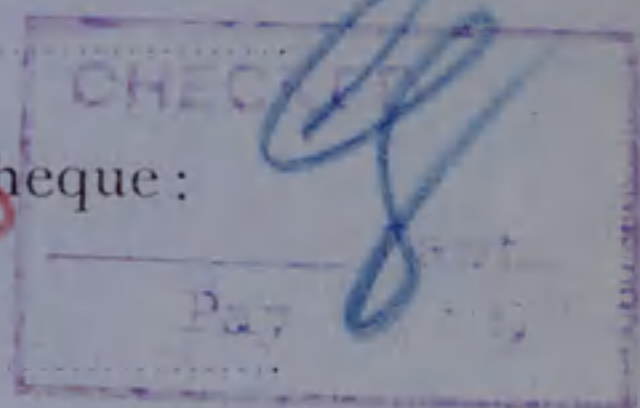
New amount to be Assigned from above date \$ *20.00*

Name and Address of person to whom new amount is to be paid by cheque:



Name *as above*

Address *as above*



NOTE.—Assignments in UNITED KINGDOM can only be made in favour of dependant relatives.

TO BE NOTED.—By Order in Council of the Dominion Government of Canada, dated 23rd January, 1915, on and after 1st April, 1915, all N.C.O.'s and men whose dependants are in receipt of Separation Allowance are compelled to assign an amount not less than 50% of the pay earned by them, unless on receiving the objection of any such N.C.O. or man, the Canadian Government decides, in view of the special fact or circumstance of the case, to waive this condition.

I certify that the above person to whom I wish assignment made is a dependant relative.

Noted by
Heilans
Pay Sergeant.

Signature of Assignor.

I have satisfied myself that New Assignee is a dependant relative of Assignor.

[Signature]
Signature of Paymaster.

INSTRUCTIONS.

All new Assignments, changes of Amounts Assigned, Names of Assignees, Addresses, etc., are to be notified on this Form. Changes in the Amounts Assigned and new Assignments can only be carried out once a month, and must be forwarded not later than the **FIRST DAY OF EACH MONTH.** If received after that day the form will be held over by the Chief Paymaster until the following month, but no New Assignments or Changes of Assignment can be made until former Assignment has been in force three months.

2. General Hospital
" " " " " "

3. General Hospital
" " " " " "

4. General Hospital
" " " " " "

5. General Hospital

6. General Hospital

7. General Hospital

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

CERTIFIED PARTICULARS AGREE WITH DOCUMENTS

2

2

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

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, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1. Christian names Sidney 2. Surname Adie

3. Rank Private 4. Original Unit 6th Bn. C. 5. Reg. No. 50922

6. Address, in full, to which future payments of gratuity are to be forwarded Canadian Bank of Commerce, Cambie Street, Vancouver, B.C.

7/5/22

7. Date of enlistment in the C.E.F. 6th April, 1915

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Not applicable

9. Relationship of such dependent Not applicable

10. Address, in full, of such dependent Not applicable

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? Not applicable

7/5/22

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:—

7/5/22

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?

7/5/22

14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service

7/5/22
Total
3 yrs.

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 47 Months 13 days
C.M.C. 2 Bn. Gen. Hosp.

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

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? *not applicable*
24. Are you now serving in the C.E.F.? *no* If not, give:—(a) Date of discharge *25-4-19* (b) Reason for discharge *Dumb.*
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 in which you served at the front, and dates of such service with that unit. *No. 26 G. Coy. Mas. 26-8-15 - 1-3-19.*
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: *William*

Place of Residence: *General Delivery, Vancouver B. C.*

Declared before me at: *Shorncliffe, Ont.*

This *19th* day of *March* 19*19*.

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

H. J. Williamson
Mayor, Camrose.

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

Bank of Commerce
 To Whom *Mrs. H. E. Cassallen* By Whom Assigned *Adie S.*
 Address *Hastings Cambie* ~~*673-5 West St.*~~ *Freemans, Vancouver* *B.C.*
 Regtl. No. *50922.*
 Rank *Pte.*
 Corps *#2 Gen Hosp.*
 Rate *20⁰⁰ per m pay 1st.*

2M PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			CANCELLED
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June		<i>610112</i>	<i>50</i>	
July		<i>94569</i>	<i>25</i>	
Aug.		<i>H11567</i>	<i>25</i>	
Sept.		<i>G12975</i>	<i>25</i>	
Oct.		<i>F112294</i>	<i>25</i>	
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



1911

Bank of Commerce
MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

1914
Rate

To Whom *Bank of Commerce*
Address *Hastings Cambi Branch*
Vancouver,
B.C.

By Whom Assigned *Adie*
Regtl. No. *50922*
Rank *pte*
Corps *#2 Gen Hosp.*

Rate ~~*25.00*~~ *From May 1915*

\$20.00 per mo May 1/16 of 2 M. from Sept 1. Former Assignee Mrs A.E. Carscadden
\$25.00 May 1/15
PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June		<i>010112</i>	<i>50 - ✓</i>	<i>Consolidated Account</i> <i>To adjust May 1/16</i>
July		<i>24569</i>	<i>25 -</i>	
Aug.		<i>H11567</i>	<i>25 -</i>	
Sept.		<i>G12975</i>	<i>25 -</i>	
Oct.		<i>F12294</i>	<i>25 -</i>	
Nov.		<i>D 15046</i>	<i>25 -</i>	
Dec.		<i>C 15353</i>	<i>25 -</i>	
Jan.	1916	<i>B 16134</i>	<i>25 -</i>	
Feb.		<i>A 18337</i>	<i>25 -</i>	
March		<i>J 14221</i>	<i>25 - ✓</i>	

1881

1881

ASSIGNED PAY

Bank of Commerce OVERSEAS CONTINGENTS

Sheet No. 2.

Credit of S. Adie

PAYMENTS.

Name of Soldier

Adie, S

P 23 1/2
Rah

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

Pte. 50922

#2 Gen. Hosp.

Month.	Year.	Cheque No.	Amt.
April	1916	A 45	25 -
May		B 1275	25 -
June		N 9331	15 -
July		C 8068	20 -
Aug.		A 11055	20 -
Sept.		B 15141	20 -
Oct.		B 19461	20 -
Nov. #		B 24412	20 -
Dec.		B 32987	20 -
Jan.	1917	C 38096	20 -
Feb.		C 43160	20 -
March		C 49449	20 -
April		D 150	20 A
May		106330	20
June		H 12700	20
July			
Aug.			
Sept.			
Oct.			
Nov.			
Dec.			
Jan.	1918		
Feb.			
March			
April			
May			
June			
July			

#20⁰⁰
#25⁰⁰ May 1st 1916. Remarks.

For London audit - see Orig sheet
Reduced to #20⁰⁰ May 1/16 5⁰⁰ overpaid
To adjust \$5⁰⁰ overpaid 1/5/16.

Jan.

20 B (Posted in error)

See following sheet.

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.				

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 60m.-12-15.
 1772-39-819.

Sheet No. 2.

L. L. Job 89002.-Req. 6213.

Bank of Commerce -
 Credit a/c S. Adie -

Name of Soldier

C
 Adie. S.

PAYMENTS.

Pte -

Month.	Year.	Cheque No.	Amt.	Remarks.
			\$25	50q22 - May 1916
April	1916	A 45	25	
May		B 1275	25	Reduced to 20.00 from May 1/16
June		N 9331	15	50 ⁰⁰ overpaid
July		S 8068	20	20.00 from May 1/16 20 adj 5 ⁰⁰ overpaid 1/16
Aug.		A 11055	20	20.00 May 1/16
Sept.		B 1141	20	
Oct.		B 19461	20	
Nov.		B 24412	20	
Dec.		B 32987	20	
Jan.	1917	C 38096	20	
Feb.		C 43160	20	20 R
March		C 49449	20	20 L
April		D 150	20	20 C
May		H 6330	20	20 B
June		H 12700	20	
July		D 19967	20	S
Aug.		E 27013	20	L
Sept.		E 33805	20	640.00 P.G.C. ✓
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Jul

W

m

50.00

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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.				

NAME ADIE, Sidney,

Regimental No. 01164 50922.

Name and address of next-of-kin

Unit C.A.M.C. Reinf. 152 Genl Hosp.

Nil

Date of enlistment Apr. 6th, 1915.

Place of birth Channel Is.

Married (yes or no) No

Date and place discharged

Amount of pay assigned monthly \$ 25⁰⁰ 20¹⁵⁻¹⁶

Reason for discharge

To whom payable Woolf & Co. 1673 5th Ave. W. Vancouver.

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					
Apr	May 31	61	1 ⁰⁰	61	61	10	610		6710			9	25		311	
June	30	30	1	30	30	10	300	3310	6610			8	25		33	
July	31	31	1	31	31	10	310	3310	6720			5	25		30	
								3720				22				
								adjust of Arch	58							
Aug	31	31	1	31	31	10	310	3778	7188			2	25		2792	
Sept	30	30	1	30	30	10	300	4396	7696			11	25		3673	
Oct	31	31	1	31	31	10	310	4023	7433				25		25	
Nov	30	30	1	30	30	10	300	4933	8233			1	25	2050	4728	8220 ⁵⁰ 41 days need 803420
Dec	31	31	1	31	31	10	310	3505	6915			1	25		2676	
1916	Jan 31	31	1	31	31	10	310	4239	7649			2	25		2761	
Feb	29	29	1	29	29	10	290	4888	8078			11	25		3631	
Mar	31	31	1	31	31	10	310	4444	7854			6	25		3198	
								4656								
		366.		366			3660	58	40318			6	12 275	2050	35662	61 Bal. 4656

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

A

690

May 1-1916

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

20-			
-----	--	--	--

Bank Account.
Bank Account

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. *50922*

Name *Bank of Commerce for Credit*

Rank *Pte* Promoted Reverted Discharge

Address *Hastings Gambie Branch Vancouver*

Soldier's Name *S. Adie*

Change of Address

Battalion # *2 Gen Hosp.*

Beneficiary

Relationship

Address

- 1
- 2
- 3
- 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Sept 1914			640	640	
Oct	50091 C		20	20	#25 ⁰⁰ per month from 1-5-15 - 30-4-16 = \$300 ⁰⁰ 96789.
Nov	51899 C		20	20	
Dec	59638 C		20	20	
Jan	60897 F		20	20	
Feb	90659 B		20	20	
Mar	97854 S		20	20	
APR	76598 S		20	20	
May	10584 H		20	20	
June	13511 B		20	20	
July	26468 Y		20	20	
AUG	28946 H		20	20	
SEP	35560 H		20	20	
OCT	42188 H		20	20	
NOV	50290 H		20	20	
DEC	62591 B		20	20	
JAN	69730 B		20	20	
FEB	76871 A		20	20	
MAR	82657 D		20	20	
APR	449 B		20	20	
MAY			1020	1020	

108-5-6.

A/c Closed *3.14.19*
 Ret'd per *Belgic*
 Date *23.4.19* M.F.W. 187
W.D. 11 J. Hall

M. F. W. 128
 400M.-6-17-1772-39-1141
 L. L. 22320-M. & D. 7563.

AUDITED.



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

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

M. F. W. 128
400M-6-17-1772-88-1141
L. L. 22220-M, & D. 7993.

Surname

Christian Name or Names

Reg. No.

Adie

S.

50922.

Rank

Unit

Co.

Troop

Batty.

Pte. C.A.M.B. 2.C.G.H.

Hospital

Date of Admission

Transferred 2. Bangen H. Le Troport Hosp. 2.10.15.

" to no. 9 Staty Hosp, Havre Hosp. 3.10.15.

2 Can Gen H. Le Troport Hosp. 11-1-19

2 " " " 50 Hosp.

Diagnosis

V.D.G.

Tonsillitis a.f.

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses: if more than one state present

DISPOSITION

Date

Dis to no 11 Camp 11.11.15
by to duty ex Can Base.

REMARKS

19.11.15

C.R. 11.10.15.

19.11.15 93

13.12.15. 112⁽¹⁾

18.1-19 a 422

22. 1. 19 a 425.

Dis 16. 1. 19.

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

C.E.F. 50922

ADIE, Sidney

50922

Pte.

Medals prev desp: ??

Cross to widow: N/E - Soldier single on disch

Cross to mother: ??



NAME *Adie Sidney*

H. Q. FILE No. 649-

REGT'L. No. *50922*

RANK AND CORPS *Pte*

C. Q. Co. (2 Can Gen)

CABLE

No.

DATE

NATURE OF CASUALTY

NO. *145*
XX FOLL. X

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
4.	#2 Can. Gen. Le Triport	2-10-15	W. W. G.
64	#9 Stab. Havre. Trans from #2 Can. Gen. Le Triport	3-10-15	W. W. G.
93.	klesch to #11 Camp.	11-11-15	W. W. G.
112 (1)	#2 C. F. A. Le		
112 (1)	# Can. Gen. Le Triport ex. Can. Base Depot	29-11-15	Returned to duty
A 422	2 Can. Gen. Le Triport	11-1-19	Tonsillitis
A 425	Disc	16-1-19	"

Sidney

Name ADIE

Rank Pte

Reg. No 50922

Unit Camc - 2nd Gen Hp.

Next of Kin Nil none shown on Record Sheet or A.P.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W O. List
11-1-19	2 Lt. G. H. Le In report	In hospital		422	103	6822-8
16-1-19	Disch			425		6882-2

MARRIED

SINGLE *yes.*

WIDOWER

TRADE OR CALLING

Draughtsman & chemist.

RELIGION

Protestant

DESCRIPTION.

APPARENT AGE

34.

YEARS

MONTHS

HEIGHT

5.

FEET

9.

INCHES

CHEST MEASUREMENT

38.

INCHES

EXPANSION

3.

INCHES

COMPLEXION

Dark.

EYES

Grey.

HAIR

Black.

DISTINGUISHING MARKS

not stated.

MEDICAL EXAMINATION.

PLACE

Halifax, N.S.

DATE

Apr. 6th 1915.

Present address, not stated.

SURNAME.

adie

CHRISTIAN NAMES

Sidney

REGL. NO.

50922.

RANK

Pte.

UNIT

a.m.c. (Reinf.)

FORMER CORPS

nil.

111 CARD NO. *MGR* ✓
LoS 25-4-19. Dermal
 FOLL.
do/20 of 30-4-1925D

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

none

RELATIONSHIP TO SOLDIER

none

ADDRESS

none.

COUNTRY OF BIRTH

Channel Islands.

DATE

mar. 4th 1881.

PLACE OF ATTESTATION

Halifax, N.S.

DATE

apr. 6th 1915.

of S 10-4-15-53

M 6 23-4-19 31 1/2 ple

L. L. 6945. M. & D. 6994.

M. F. W. 22. 100m. -8-16. H. Q. 1772-39-339.

Name **ADIE, S.**

Rank **Pte.**

Reg. No. **50922**

Unit **CAMC. 2 Can. Gen. Hospital.**

Next of Kin

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
Oct. 2	No. 2 Can. Gen. Hospital		V.D.G.	64		
" 3	No. 9 Stat. Hosp.	Havre.	do	64		
Nov 11.	Disch. to No. 11 Camp		Ditto	93		
" 29	Rtd to duty Ex Can. Base Depot		Ditto	112		

2

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

M. F. W. 54. (B. 103.)

350M.—5

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps.....

Regimental No. 50922 Rank Pvt Name Adie Sydney
C. E. F.

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

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

Extended..... Re-engaged..... Qualification (b).....

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
APR 16 1919 O.S.		T. O. S. No. 2 DISTRICT DEPOT, TORONTO			PART II D. O. 120
APR 25 1919 S.O.S.		S.O.S. No. 2 District Depot		Part II, D.O. No. 120	<i>W. C. Millman</i> Lieut. For O. C. No. 2 District Dep.

(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.

CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

DIRECTIONS TO DENTAL OFFICERS

Can Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) ADIE, S.

REGIMENT Canule RANK Pvt No. 50922

Date Examination in England 3. 3. 19 Date of Examination in France _____

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
2. EXTRACTIONS
3. CROWNS
4. DENTURES
 - (a) Full Upper
 - (b) Part Upper
 - (c) Full Lower
 - (d) Part Lower

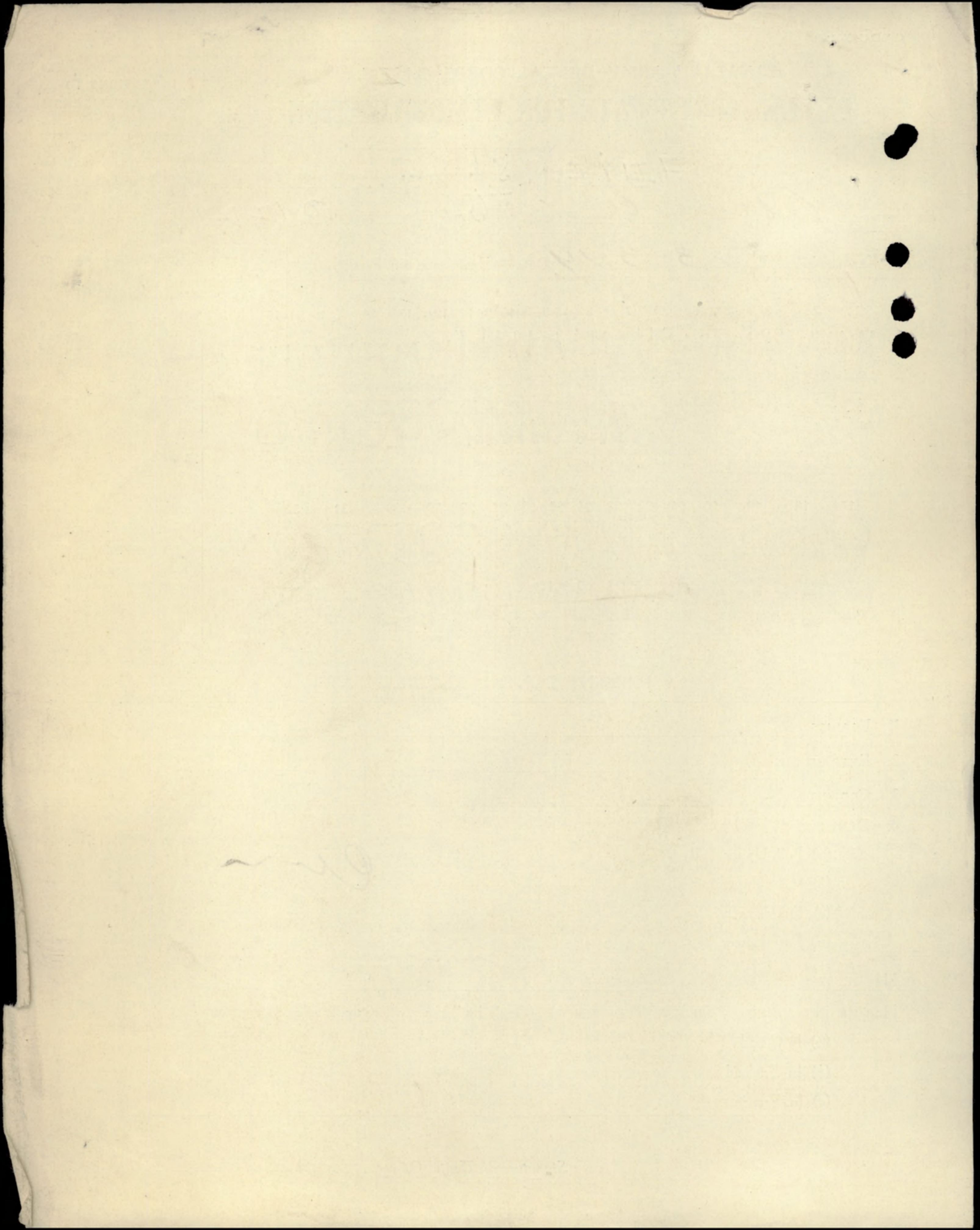
[Handwritten signature]

HAS HE EVER REFUSED DENTAL TREATMENT? No

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

- (a) In Canada
- (b) In England
- (c) In France

Signature of Dental Officer *[Handwritten Signature]*



Casualty Form—Active Service.

Regiment or Corps C. A. M. C.

Regimental No. 50922 Rank Pte Name Adie S. Adie Sydney

Enlisted (a) _____ Terms of Service (a) War Service reckons from (a) _____

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

Extended _____ Re-engaged _____ Qualification (b) _____

W. S. AG FILE
NO 2353
PRESS

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				
5/5/15	OC Unit	Joined N. 2 Genl. Hosp.	Le Treport	26/4/15	MFD 873 8/5/15
2/10/15	S	V.D.G. Admitted Special Duty		27/10/15	W 3034
11.11.15	Ob of Duty	V.D.G. transferred to 11 Camp		11.11.15	W 3034
26.11.15	Ob Base	Leaving Base to report Unit		27.11.15	Ob Base 26/11 De Sheet No 219 2/5/15
4.11.15	Ob Unit	Rejoined from Base 30 furl 50 eps ann whilst in hosp from 2.10.15 to 11.11.15 and O.P.B. paymaster 4.21 2/5/15.	Le Treport	29.11.15	B 213 De Sheet No 222 9/15 Pt II on 34 2/20/15
22/10/16		Granted 9 days leave		17/10/16	B 213 Pt II 68 d/28/10/16
5/11/16		Rejoined from leave		4/11/16	B 213 Pt II 74 d/12/11/16
3/3/17	209 H	Granted Good Conduct Badge		25/2/17	" " 16 d/10/3/17
15/12/17		Granted 14 days leave		15/12/17	Pt II 73 2/1/17
5/1/18		Rejoined Unit		3/1/17	B 213

(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, Shoehing Smith, etc., etc., also special qualifications in technical Corps duties.


Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 35, 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				
3.8.18.	A. J. Gdno.	Classified B. 1.		3.8.18.	A. F. W. 3339/640 Pt. 4 of df- 1918.
4.12.18	2 C. G. H.	Granted permission to marry in accordance with Order in Council Canada. P.C. 1892 of 6/7/17			file tm. 18/22317 H. 85 of 19/18.
28.12.18.	2 C. G. H.	14 days leave - U.K.		23.12.18	B217 PE NO 3 of 1919
11.1.19.	"	Tomilitus ad.	2 C. G. H.	11.1.19	W3034 -
11.1.19	"	Rejoined from leave.		9.1.19.	B213
16.1.19	"	Tomilitus to duty.		16.1.19.	W3034 A B 312

Transfd to England

10 - MAR 1919

A. Christie

Capt. for Lt.-Col., A. A. G.
Canadian Section, G. H. O. 3rd Echelon, B. E. F.

16-4-19 2 C. G. H. *1st Lt. J. C. on returning to Canada*
Embarked Liverpool SS BELGIC
April 16th 1919 
Disembarked Halifax Apl 23/19 *
W. A. Moore **Capt & Adj.** *

16-4-19 *H. W. ...*
Major
for C. C. CANADIAN GENERAL

Rank and Name

ADIE, Sidney

9948. 9

Regimental No.

~~01164~~ 50922

Name and Address of Next-of-kin

Nil

Unit

C.A.M.C. Rein.

Date of enlistment

April 6th. 1915.

Place of birth

Channel Islands.

Married (Yes or No)

No

Date and place of discharge

DQ. T.

If in Permanent Force

Reason for discharge

Character on discharge

Promotions or appointments

N/E. R.B. No 6423
 File R.L.
 Category OR CAN

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
25-4-15	D.A.A. & 2. m. G.	Embarked for France. 2. Gen HP.	Southampton	25-4-15	H. 1-8-11. Shorncliffe
2. 5. 15	2. Gen HP	Taken on Strength 2 Gen HP	Le Yport	28.4.15	Pt II S.O. 2.5/15
22. 8. 15	do.	Using insubordinate language to his superior officer (admonished)	do.	17-8-15	P. II. O. 22 8/15
31. 7. 15		On Nom Roll 2 Can Gen HP.		31-7-15	
11. 10. 15		Adm no 2 can Gen HP. (V.D.G)	do.	2. 10. 15	C.R. 64 R2C. Camc.
11. 10. 15		Discharged to duty.	do.	3. 10. 15	64
9. 10. 15		Trans to 9 slot. HP.	Havre.	3. 10. 15	P. II. O. 9 10/15
13. 10. 15		Trans to 9 Brit. Gen. HP.	France.	3. 10. 15	Corps Orders 120.
19. 11. 15		Discharged to no. 11. Camp. France.	France.	11. 11. 15	P. II. O. C.R. 93 R.2C. Cam
15. 11. 15		Taken on 80th Can. Base Depot.	do.	15. 11. 15	Nom. Roll.
20. 11. 15	2. Can. Gen.	Forfeits 50 [¢] per diem whilst in HP.	do.	2. 10. 15	P. II. O. 34. Auth. :- O.S.B
				11. 11. 15	Paymaster no 4-21 d/5-10-15

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
26-11-15	O. e. Can Base Depot	Proceeding to 2. Can. Gen. Hq.	Le report.	27-11-15	nom Roll.
13-12-15		Rejoined unit (2 Can Gen Hq)	do.	29-11-15	C.R. 112. R2c. CAME
10-3-17	2 Gen Hq 2nd Can	Granted Good Conduct Badge	do	25-2-17	PA II 0-76
19-12-18	Gen Hq.	Permission to marry	Le report		PA II 85
16-4-19	—	SOS on proceeding to barada Sailing list 44. Disposal Can	S' Bliffe T	16-4-19	— 55
24-3-19	2 CG Hq.	Trans to Eng & posted comcc.	S' Bliffe.	16-4-19	— 32

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate..... Militia Form W. 23
 or Particulars of Recruit..... Militia Form W. 133
 Field Conduct Sheet..... Militia Form W. 178 or A.F.B. 122
 Casualty Form..... Militia Form W. 54 or A.F.B. 103
 Last Pay Certificate..... Militia Form W. 44
 Certificate that missing documents are unobtainable.....
 Medical History Sheet..... Militia Form B. 313 or A.F.B. 178
 Proceedings of Medical Board..... M.F.B. 227, A.F.B. 179 or A.F.A. 45
 Dental History Sheet..... Militia Form B. 465
 Medical Report..... M. F. W. 129 or D. M. S. 1375
 Regimental Conduct Sheet..... Militia Form B. 263
 Company Conduct Sheet..... Militia Form B. 263a

1. Triplicate Attestation Paper (M.F.W. 23) or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129).
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122).
7. Proceedings on Discharge (M.F.B. 218a).
8. Discharge Certificate (M.F.W. 39) (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 5).
11. Equipment Statement Q.M.G. Form (D.O.S. 2) and Clothing.
12. Last Pay Certificate (P. 851).
13. Pay Book (A.D. 64).
14. War Service Grant (Form M.F.W. 2595).
15. Sanitary Documents.

Group 10
 Checked by No. 17
 Date 14-2-19

14457095

Embarked Liverpool SS BELGIC
 April 16th 1919
 Disembarked Halifax Apr 23/19
 Capt & Adj.



W. S. 16. Class "A"
 D. A. T.
 O. B. 3.
 20-11-33

SHORT FORM.
 PROCEEDINGS ON DISCHARGE.

(Demobilization) War Service Badge
 Class "A" No. 154016

1. No.	50922.	
2. Rank	Private	
3. Name	Adie, Sidney.	
4. Unit	No. 2 Canadian General Hospital.	
5. Date of Discharge	APR 25 1919	Place <u>Hamilton Ont</u>
6. Reason for Discharge	<u>Demobilization</u>	
7. Authority	No. 2, D.D., Part II, D.O. No. <u>120</u>	
8. Proposed Residence after Discharge	<u>Van. Isl.</u> <u>Vancouver, B.C.</u>	
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. ?		
		<u>Sidney Adie</u> Signature of Soldier.
10. CONFIRMATION.		
The discharge of the above named man is hereby confirmed.		
Place	<u>HAMILTON, ONT.</u>	
Date	<u>APR 25 1919</u>	
Signature	<u>[Signature]</u> (O. C. Discharging Unit.)	

For
 O. C. No. 2 District Depot.

K.C.
 3.2.20
 Com.

* Strike out whichever inapplicable.

ASSIGNED PAY	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.
EFFECTIVE DATE:-	1.5.16	EFFECTIVE DATE:-	
AMOUNT:-	20 ⁰⁰	AMOUNT:-	

NAME:- *ADIE, Sydney*
 NUMBER:- *50922*

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.

*Self. comd
 Canadian Bk of Commerce
 Hastings Cambie Bch.
 Vancouver BC*

*L.P.C. compiled 23 19
 R.P. stopped 14 19*

Commission to Manly 2085: 2 G.H. 19.12.18

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		<i>Private</i>

UNIT AND TRANSFERS

ORIGINAL UNIT:- *2nd. Gen. Hosp.*
 DATE ACCOUNT FIRST OPENED:- *3*

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F'D	UNIT TRANSFERRED TO

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
<i>2031</i>	<i>44623</i>	<i>AMMA 3000</i>	<i>4460</i>			<i>L.P.C.</i>	<i>4240</i>
						<i>R.S.P.B.</i>	<i>1460</i>
						<i>L.P.C.</i>	<i>2780</i>

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
<i>W</i>	<i>1</i>	<i>10</i>		

PARTICULARS OF RENDERING NON-EFFECTIVE: *J.P. Can 31319 NOR 55004 Schiffe 22319 Schiff M.D. 11*

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
<i>1918</i>									<i>1509</i>	<i>nil</i>	
<i>March</i>									<i>4809</i>		
<i>Apr. P.P.</i>		<i>33</i>		<i>AR2: 15/4/18. 2 G.H. 2</i>	<i>446</i>				<i>4363</i>		
								<i>20</i>	<i>2363</i>		
				<i>AR32: 30/4/18 2 G.H. 17</i>	<i>446</i>				<i>1917</i>		
<i>May P.P.</i>		<i>33</i>			<i>892</i>			<i>20</i>	<i>5327</i>		
		<i>3410</i>							<i>3327</i>		
				<i>AR67: 15/5/18 2 G.H. 6</i>	<i>446</i>				<i>3881</i>		
				<i>" 95 31/5/18 " 19</i>	<i>446</i>			<i>20</i>	<i>2435</i>		
		<i>3410</i>			<i>892</i>				<i>5735</i>		
<i>June P.P.</i>		<i>33</i>							<i>3735</i>		
				<i>AR125: 15/6/18 2 G.H. 5</i>	<i>625</i>			<i>20</i>	<i>3110</i>		
				<i>156 30/6/18 " 11</i>	<i>446</i>			<i>20</i>	<i>2664</i>		
		<i>33</i>			<i>1071</i>				<i>5484</i>		
<i>July P.P.</i>		<i>3410</i>							<i>5038</i>		
		<i>3410</i>						<i>20</i>	<i>4592</i>		
<i>Aug P.P.</i>		<i>3410</i>						<i>20</i>	<i>5892</i>		
				<i>AR304: 15/8 2 G.H. 5</i>	<i>446</i>				<i>5446</i>		
				<i>385 31/8 " 12</i>	<i>446</i>			<i>20</i>	<i>5892</i>		
		<i>3410</i>			<i>892</i>				<i>5446</i>		
<i>Sep. P.P.</i>		<i>33</i>						<i>20</i>	<i>5892</i>		
				<i>AR626: 30/9 2 G.H. 12</i>	<i>446</i>			<i>20</i>	<i>5446</i>		
		<i>33</i>			<i>446</i>						

NUMBER 50922 RANK St

NAME ADIE Sydney

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Sep	Bal								5446	nil	Agmd
Oct	P.P.	3410						20	6856		231118
				MR 845 30/10 25H 245	466				6390		
		3410			466			20			
Nov	P.P.	33						20	7690		
	Dec	3410						20	91		
	Jan 19	3410		MR 58 22/121 "	8760				340		
		10120			8760			20	1750		
Feb	P.P.	3080						60	2830		
	Mar	3410						20	4240		
		6490		4623 20/3 CONTD	1501400				2780		
					1460			40			

Sailed MAR 11 16419 SL 44