REGIMENTAL DOCUMENTS

Pte NAME ADOFF FRANK REGT. NO. 1105241 UNIT 258th Bn H. Q. FILE NO. 2396

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	M 26 3/9				DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
2	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
1	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					Demob
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
2	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	CAHC 5009A.					
1	H. M.S. 1375					
1	M FW 192					
1	M FW 2571					
1	R 149					
1	M FW 67					
	[illegible]					
1	R 127					
1	[illegible]					
	Paysheets					

W 2589
100M-11-18
1772-39-1377

258TH BN. CAN. INF.

ATTESTATION PAPER.

No. 1105241

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Adoff
1a. What are your Christian names?	Frank
1b. What is your present address?	Cornwall, Ont., Can (Last address 5 E.N. St.)
2. In what Town, Township or Parish, and in what Country were you born?	Russia
3. What is the name of your next-of kin?	Mr. K. Adoff
4. What is the address of your next-of-kin?	Cornwall, Ont., Can.
4a. What is the relationship of your next-of-kin?	Father
5. What is the date of your birth?	1896..29th..June
6. What is your Trade or Calling?	Junk Business, Tailor
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 or naval N.B.
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
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit?	No
14. If so, what was the nature of the disability?	.....
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?	No
16. If so, what was the reason?	.....

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Frank Adoff, 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.

F. Adoff (Signature of Recruit)

Date 29-8-17 191 . J. A. Beaudet (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Frank Adoff, 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.

F. Adoff (Signature of Recruit)

Date 29-8-17 191 . J. A. Beaudet (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 Montreal Can this 29th day of August 1917.

(Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

Secured by Capt. Watters' office

Description of Frank Adoff on Enlistment.

Apparent Age 20 years 10 months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	5 ft 3½ ins.
Chest measurement. Girth when fully expanded	34. ins.
Chest measurement. Range of expansion	3 ins.
Complexion	brown
Eyes	brown
Hair	brown
Religious denominations. Church of England	
Presbyterian	
Methodist	
Baptist or Congregationalist	
Roman Catholic	
Jewish	XX
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).

Eyesight R. D.= 20
" L. D.= 20

Hearing R. Ear 015
" L. " 015

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.

MOBILIZATION CENTRE M. D. No 4 FIT AUG 29 1917 MONTREAL, P.Q.

Declared FIT by MEDICAL BOARD MOBILIZATION CENTRE, M. D. #4

Date 29-8-17 191 .

Place Montreal

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.

Frank Adoff 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)

Com'd'g 38th B'n & Bde. C.E.F.

Date 29-8-17 191 .

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 1105241 (Rank) Private

Name (in full) ADOFF, Frank. enlisted in

the 258th. Battalion.

CANADIAN EXPEDITIONARY FORCE at MONTREAL, Quebec on the 29th.

day of August 1917.

HE served in 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 22 years

Height 5 feet 3½ inches.

Complexion Brown

Eyes Brown

Hair Brown.

Marks or Scars

NONE.

A Adoff
Signature of Soldier

Lieutenant,
Officer i/c Discharge Section, District Depot No. 4,
Issuing Officer

Rank

Appointment

Date of Discharge March 1st., 1919.

Signed at MONTREAL, Quebec this 1st. day of March 19 19

in Military District No. 4.

File Reference No. DD4 19-A-200.

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.

JC.

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

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 19

.....

Name of Officer

.....

Rank

.....

Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.

M. F. W. 54. (A. F. B. 103:
500M.—9-16
H. Q. 1772-39-920.

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

Casualty Form—Active Service.

Unit, Regiment or Corps 25th Battn

Regimental No. 1105241 Rank Pte Name Adoff, Frank.

Enlisted (a) 29.8.17 Terms of Service (a) C. E. F. D. of W. Service reckons from (a) 29-8-17.

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

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
4.3.19	S.O.S	Dischgd. Demob Cat "A"		1.3.19	D.O. Pt 2 # ~~64~~ 62

Lieutenant,
Officer i/c Discharge Section, District Depot No. 4.

(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				

13/1/19 Attached C.C.C. Kinmel Park for return to Canada
Part II Order No.
29/1/19 Ceases to be attached C.C.C. Kinmel Park on
Embarking for Canada Part II Order No

R H Gooves ..... Lieut.
Officer i/c
No. 4 M.D. Concentration Wing

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
28.9.18	C R T D	Reports for Duty from Wandsworth	Purfleet	27.9.18	pt II 269
28.9.18	C R T D	Earned 2 days remission of sentence awarded 2.9.18 of 28 days Detention	Purfleet	27.9.18	pt II 269
9-10-18	C.R.T. Depot.	S.O.S. on proceeding overseas to the 9th Battn. C.R.T.	Purfleet.	9-10-18	Part 8 D.O. 2[illegible]
					[signature] Lieut. for O.C. Canadian Railway Troops Depot. Dny
10-10-18	C.G.B.D.	TOS 9th BN CRT on arrival in France		10-10-18	N.R. (R & R A788) Pt 11 DO No 133 d/25-10-18
do	do	Leaving to join Unit	Field	12-10-18	N.R. (D1424)
19-10-18	OC 9 CRT	Joined Unit in the Field	"	✓	AFB 213
2/12/18	8 C.F.A.	Gastrites - admitted.		1-12-18	a 3777
	6 I B D	Trans to England & posted to C R T D Witley		25-12-18	NR 21.

29,1.19 Sailed from Liverpool

W P Sally ..... CAPT.
ADJUTANT H.M.T. Baltic

Chas B Maxwell
Lieut. for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon. B

28 DEC1918 C R T D Taken On Strength Witley 28 DEC1918 Pt.2 D.O- 359

12-1-19 C.R.T.D. On Command, Kinmel Park Camp, Rhyl Witley 12-1-19 Pt. II D.O. 11

[signature] ..... Lieut.
for O.C. C.R.T. Depot

CERTIFIED ... 18 OCT 1918 CAN. RECORDS, LONDON.

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

M. F. W. 54. (A. F. B. 103.
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 258th Battalion to 2 GRD

Regimental No. 1105241 Rank Pte Name Frank Adoff

Enlisted (a) 29.8.17 C. E. F. Terms of Service (a) D. of M. Service reckons from (a) 29.8.17

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) Tailor

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 Canada		4-10-17			
Disembarked England		17-10-17			
1.11.17	2/c 10th Res. Bn.	T.O.S from 258th Bn	Witley	17.10.17	D.O.P.2.271
12.11.17	1/c 10th Res Bn	S.O.S on transfer to 23rd Can Res Bn Auth. D.O.4.a:G.10.3.1.d/10.11.17	Witley	12.11.17	D.O.P.2.280
13-11-17	23rd CAN. REG. BN.	TAKEN ON STRENGTH	Bramshott	13-11-17	D.P. II. O. No. 314
26-8-18	do	S.O.S on transfer to Can Railway Troops Purfleet	do	26-8-18	D.P.II.O.238
27.8.18	C.R.D. Depot	Taken on Strength.	Purfleet	26.8.18	D.P.II.O.237
6.9.18	C.R.D.	Proceeded to Detention Barracks Wandsworth to serve 28 days awarded 2.9.18	Purfleet	6.9.18	D.P.II.O.247

(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.

Form R 122.
2353—100M—9-12-16

LTR

Rank

Name ADOFF, Frank

Reg'l No. 1105241

Unit 258th Bn to 2nd Quebec, R D

If in perm. Corps, What Unit?

Married or Single Single.

Place and Date of Enlistment Montreal. 29th August 1917.

Place of Birth Russia.

Name and Address, Next-of-Kin Mr K. Adoff

Cornwall. Ontario, Canada,

Relationship Father.

Assigned Pay Monthly $

Payable to

Relationship

Separation Allowance $

Payable to

Relationship

N/E. R.B. No 5981
File R.L.
Category Can OR

Discharge, Date and Place

Reason

Character

H. W. & V., Ld.—9546-16.

Rly

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
C		Arrived in England		17-10-17	S/S Metagama
1-11-17	10th Res Bn	Taken on Strength	Witley	17-10-17	Pt II D.O. 271.
12.11.17	— —	S O S to 23 Res Bn	Pt — —	12.11.17	Pt II Do 280 & 23 Res Pt II O 314 of 13.11.17
10-12-17	1 QR.	Adm Connaught Hosp	Pte Aldershott	5.12.17	CLC 84 VDG
26. 8. 18	23 Res	S.O.S. to Can Ry Troops.	Bshott	26. 8. 18	Do # 238 CRTD pt II 23 27/8/18
6. 9. 18.	CRTD.	Proceeds to Det. Bks Wandsworth to serve 28 days Det. awarded 2/9/18	Sp. Purfleet.	6.9.18	pt. II 247
28-9.18		Ceases to be shewn in Wandsworth Detention Barracks	" Purfleet.	27.9.18	pt II 269.
28-9.18		Sentence of 28 days det. awarded 2/9/18 is remitted to extent of 2 days. 27/9/18	"	27-9.18	pt. II 269

Quebec

a 2 pp 03 do 16/10/18 Dilly

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.
9.10.18	C.R.T.D.	S.O.S. proceeded Oscar to 9th C.R.T.	Spr. Penfleet.	9.10.18	pt II 280. 9th C.R.T. pt II 133. 23/10/18
29.12.18	"	S.O.S. posted from 9th C.R.T.	" Witley	28.12.18	pt II 359. 9th C.R.T. No. 157 d/ 31.12.18.
12-1-19	"	On command to Kimmel Park, Rhyl. M.D. 4	" Witley	12.1.19	M.D. 4 pt II 13. 15/1/19 — "
9.2.19	"	Ceases on com. Rhyl. S.O.S. on transfer from & M.F.C. to the C.E.F. in Canada	" Knotty Ash	29.1.19	pt II 35. R.L. 23-6. Vol 21. (8) R.L.F. 3. 7219 & M.D. 4 & 5 Pt. 29 d/ 3.2.19

No.

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. 110324 Rank P6 Surname Elinko (Given name in full) Frank

Unit or Corps D.D.H. Birthplace Russia Molotum Out. Can.

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

1. **GENERAL DESCRIPTION:**

Physique Good Weight 140 lbs. Height 5 ft. 4 in. Colour of Eyes Brown

Nutrition Good

Pulse 80

Condition of arteries Good

Vision Rt. OK Left OK

Hearing (conversational voice) Rt. OK ft.

Left OK ft.

Identification marks, scars, or deformities. (Give cause and date of origin.)

Nil

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 No 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.

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at ..... (Overseas)

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 SECTION FOR USE IN CANADA—

Examined at Montreal (Canada)

Date 27-2-19 Signed G Edwards 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 F Adolph

(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.)

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

DUPLICATE

258th BN. CAN. INF.

MEDICAL HISTORY SHEET

Surname Adoff Christian Name Frank

MOBILIZATION CENTRE M. D. No. 4 AUG 29 1917 MONTREAL, P.Q.

DUPLICATE

Examined on 29th day of August 1917 at Montreal

Approved by

Declared FIT by MEDICAL BOARD MOBILIZATION CENTRE, M. D. #4

Rank Pte President S. M. B. M.O.

Birthplace City or Town

County Russia

Apparent age 20 2 10

Trade or occupation Tailor, Junk dealer

Height 5 feet 3½ Inches

Weight 121 lbs.

Chest measurement Minimum 31 inches

Maximum expansion 34 inches

Physical Development Good

Smallpox marks Nil

Vaccination Arm Right Left

Number 2

Vaccinated last Child

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Date	Fit or Unfit	Examined for Re-Engagement
	2	"A" Fit for General Service M.O.
		M.O.
		M.O.
		M.O
		M.O.
		M.O.

Date	Result	Vaccinations
25-9-17		Morin Capt. M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
19-9-17	Good	Morin Capt. M.O.
26-9-17	"	Morin Capt. M.O.
		M.O.

Enlisted on 29th *day of* August *1917 at* Montreal

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	258th Bn. C.E.F.	II0524I		29-8-I7
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
			INSPECTING MEDICAL BOARD M. D. No. 4 FIT SEP 29 1917 MONTREAL, P.Q.

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 Adolf Christian Name Frank

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			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
		Day	Month	Year	Day	Month	Year				

VENEREAL DISEASE RECORD.

.....19

Regtl.No.....Rank.....Name.....

Unit. 23rd, Res Bn... Area.....

Diagnosis..... Area of Exposure..... Date.....

Details of Early Treatment: Type.....

Interval after Exposure (Hours).....

Place.....

Description of alleged infected prostitue:

1. Name.....
2. Address.....
3. Height..... 4. Figure.....
5. Complexion..... 6. Hair.....
7. Eyes..... 8. Dress.....
9. Habitat.....
10. Companion.....

hereby certify that I can identify above described suspected prostitue.

Signature of soldier.....

If on leave, reasons for same.....

Date of Pass.....

Date of Vise Stamp.....

Remarks:

In Connaught Hosp 29-11-17 to 6-3-18 V D C

In 2nd I S D H Brandhorst 8-3-18 to 18-3-18 V D C

Report from Laboratory No 12 General states no gonococci present in specimen of discharge

.....

Medical Officer, 23rd, Res,

VENEREAL DISEASE RECORD

Mar 7th 1918

Regtl. No. 1105-241 Rank Pte Name Adsett F

Unit 23rd Res Br Area Bramshott

Diagnosis V.D.C Area of Exposure London Date Dec 1917

Details of Early Treatment:- Type

Interval after Exposure (Hours)

Place

Description of alleged infected prostitute:

1. Name
2. Address
3. Height 4. Figure
5. Complexion 6. Hair
7. Eyes 8. Dress
9. Habits
10. Companion

hereby certify that I can identify above described suspected prostitute.

Signature of soldier

If on leave, reasons for same

Date of Pass

Date of Vise Stamp

Remarks:-

He states that he was dry for two days before discharge from hospital
Connaught MH 29-11-17 to 6-3-18 VDC

J M Baldwin Capt

Signature of Medical Officer

VENEREAL DISEASE RECORD

Nov 28th 1917

Regtl.No.....Rank.....Name.....

Unit.....Area.....

Diagnosis.....Area of Exposure.....Date.....

Details of Early Treatment:- Type.....

Interval after Exposure (Hours).....

Place.....

Description of alleged infected prostitute:

1. Name.....
2. Address.....
3. Height.....4. Figure.....
5. Complexion.....6. Hair.....
7. Eyes.....8. Dress.....
9. Habitat.....
10. Companion.....

I hereby certify that I can identify above described suspected prostitute.

Signature of Soldier.....

If on leave, reasons for same.....

Date of Pass.....

Date of Vise Stamp.....

Remarks:-

Signature of Medical Officer.

MONTREAL PRESBYTERIAN HOSPITAL

REQUEST FOR EXAMINATION

Montreal 27/2/19.

No. 1105241 Clinical Diagnosis.....

Rank. Spr. .....

Name. Adolph F. V.D.G.???

Unit. D.D.4. .....

Kindly carry out ..... examination on marginally noted with special reference to -

.....

.....

.....

Reasons for examination .....

.....

Final Board proceedings.

Short Medical History .....

.....

Attached.

.....

.....

Signature M.O. (Requesting) Mesley Bourne, Capt.

Report. No. mention of discharge or any other symptoms of V.D.G. Patient's inguinal glands and cords normal. Apparently not infectious.

.....

.....

.....

Signature of Medical Officer (Reporting) [illegible]

Barrack Hosp.

This man is not to be admitted to hospital for this report to be made out, but is to be returned to his unit on completion of examination.

This form, on completion is to be forwarded direct to M.O. requesting same.

C.A.D.C. 5009 A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

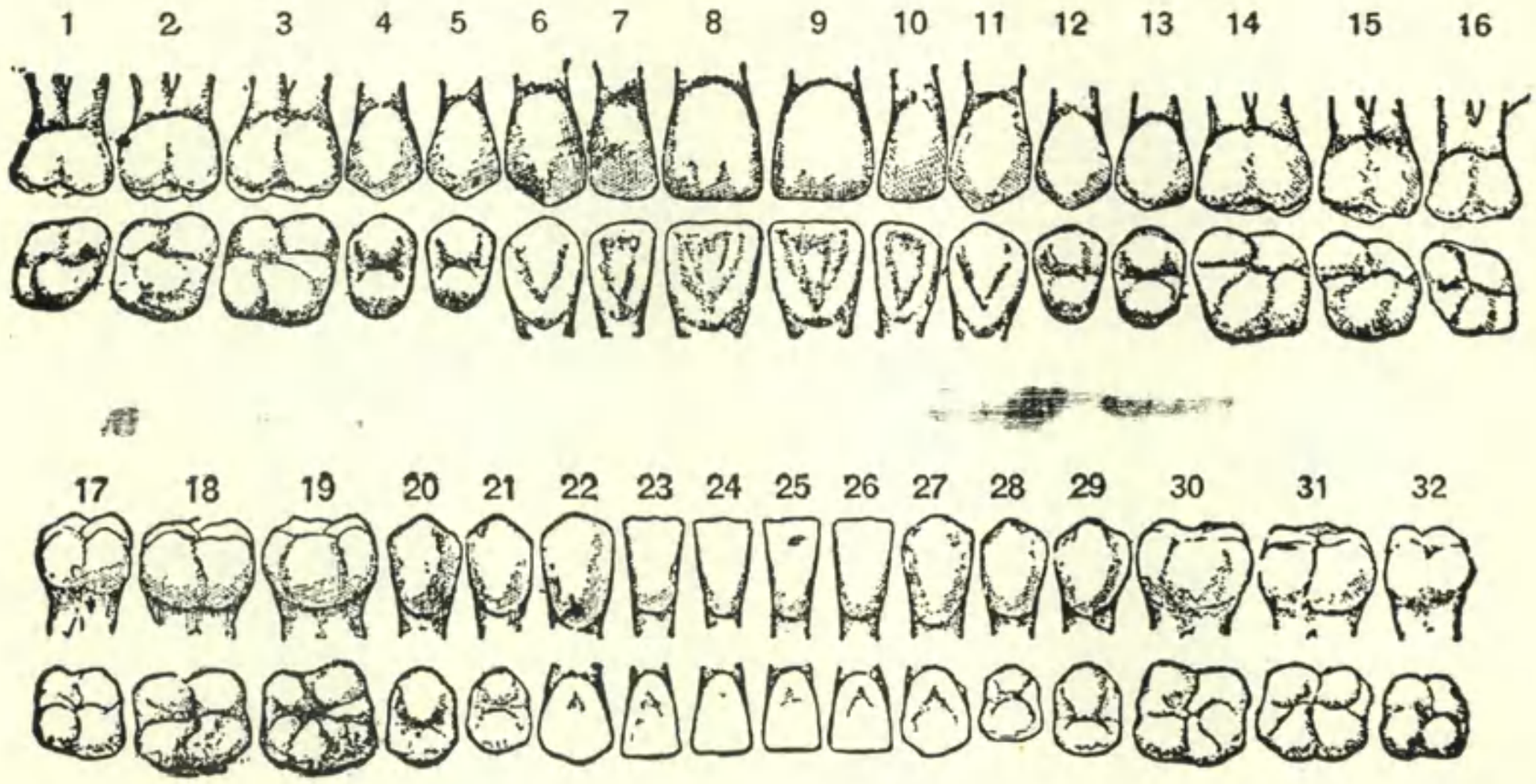
M.D. 4.

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) ADOFF F.

REGIMENT 9th C.R.T. RANK Sapper No. 1105241

Date of Examination in England 13/1/19. | Date of Examination in France



DIRECTIONS TO DENTAL OFFICERS

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

PRESENT DENTAL REQUIREMENTS

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

HAS HE EVER REFUSED DENTAL TREATMENT ?

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

No

...NMEL PARK,
NORTH WALES.

Signature of Dental Officer R. A. Rogue Capt

NUMBER 1105241 RANK Pte. NAME Adoff F

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31.8.18	Bal. Fwd								69 77	53 -	
Sep.	PP.	33 -		5%o.7.P.2 31.8.18 DO 241 CRTD 31.8.18		5 50			97 27		
				28%o.7.P. Retention 2.9.18 DO 243 " 2-9-18		-27 50			69 77		
	3%o Remission eff 27/9/18. DO. 268 - CRTD 28/9	3 30							73 07	53	a/c agreed
		36 30				33					
Oct	PP	34 10							107 17		
				Q4005 [illegible] S.2 4-9-18 CRTD	10 -				107 07		
				AR 1379 36 28-10 9 CRT	5 60 ✓				101 47	68	
				Q4005 539 30-9-18 44 CRTD.	03 -				101 44		
				Q4005 P.5 20-9-18 44 ✓	53 -				100 91		
		34 10			6 26						
Nov		33 -			—				133 91	83	
				AR 1291 17 16-11 9th CRT	4 66 - ✓				129 25		
				✓ 1574 26. 24-11 ✓	13 06 - ✓				116 19		a/c agreed
Dec		34 10			17 97				150 29	98	
				AJW. 3069 for L532 (49) CRTD	1 30				148 99		
				AR 1733. 60 18.1 ✓ 9 CRT	8 39 ✓				140 60		
Jany		34 10			27 40				174 70		
	In on Def pay	101 20 3 12							177 82	102	
		104 32		OK on Summ	27 41						
				✓ 99182 2 6.1. CPM.	4 87 -				172 95		
				✓ 97296 " 3.1 ✓	14 60 -				158 35		
				✓ 4366. 22. 11.1.19 CRTD	4 87 -				153 48		
				✓ 4234. " 30.12.18 ✓	34 07 -				119 41		
				Q4005 Pg. 57 8.1.19 ✓	32 -				119 09		
				4157 51. 25.1. End of Leap	9 73 -				109 36		
					68 46						

E. 2.9.18
E 29.9.18

SOS, 29.1.19 S.L.B.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS DISTRICT.....

NAME OF SOLDIER Frank Adoff No. 1105241

REGIMENT 258th Battalion RANK Pte

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			Gold Clasp	Gold Filling	Crowns		Bridge Work	OPERATOR	Military Dist.	REMARKS
													U	L	P			Gold	Porcelain				
Condition on first Examination																							

M.F.B. 465
200M-1-17
1772-39 950

12
4
3

POST DISCHARGE PAY OFFICE 3 7 1919 Military District No. 4 MONTREAL

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

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

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

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

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

1. Christian names Frank 2. Surname Adoff
3. Rank Pte 4. Original Unit 9th C.R.F. 5. Reg. No. 1105241
6. Address, in full, to which future payments of gratuity are to be forwarded Thorburg Ont. Post Office
7. Date of enlistment in the C.E.F. 29-8-17
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge No one
9. Relationship of such dependent No one
10. Address, in full, of such dependent No one
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? No
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
9th C.R.F. ~~No~~ Oct 26-1918.
Jan 29-1918.
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? No
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service No
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 1 year 7 months
2 mths 1/2 25th Batt. 8 mths 14 Batt 8 mth 1/2 9th C R F
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No

M.F.W. 2595.
1772—39—1389.
1160—D.P.—250M-12_18.

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units ..... None .....

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 ..... 40 / To S.D.D. & P.M. .....

20. Have you been issued with a War Service Badge? If so, what class ? ... A .....

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 ..... None .....

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? ..... No .....

24. Are you now serving in the C.E.F.? ..... No ..... If not, give:—(a) Date of discharge March 1-19 ..... (b) Reason for discharge ..... General Demobalization .....

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 ..... None .....

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit ..... 9 K.C.R.I.R. 26-10-18 .....

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: F Clock

Place of Residence: Rosburg Ont.

Declared before me at: Montreal P.Q.

This third 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.

A S Parker

Commissioner of the Superior Court for the District of Montreal.

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

(9) Is your Father alive ?.....Yes.....

If so, state name and address .....Mrd K.Adoff,Cornwall , Ont. Can.....

(10) Is your Mother alive ?...Yes.....

If so, state name and address.....Mrs. K.Adoff , same as above.....

.....

(11) If your Mother is a widow.....

Are you her sole support, or not ?.....

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

.....

.....

.....

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

.....

.....

.....

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

.....

15) Are you insured ?.....no.....

If so, in what Company ?.....

Have you made arrangements for payment of your Insurance premium.....

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

H Daly Jnr Major
Lieut. Colonel
Officer Commanding.

Date.....13-9-17.....

Comd'g., 258th O's Batt. C.E.F.

DUPLICATE

To be made out in duplicate. H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins 258th Battalion

(2) Regimental Number 1105241

(3) Full Name of Soldier Frank Adoff

(4) Place of Birth Russia

(5) Are you married, or not? No.

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

(b) Present Postal Address.....

(7) Are you a widower? .....

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

If so, give number of boys and girls.....

Also their names and ages.....

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

Morrisburg Ont

MD 3

FORM OF WILL.

I, Frank Adoff (Name in full)

Regimental Number II0524I serving in 258th Bn

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

home

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Mr. K. Adoff.
Cornwall, Ont, Can.

Name and Address of person or persons to receive personal estate* *(See note).*

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this 19 day of Sepetember A. D. 1917

F Adolff Signature of Soldier.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness J Ellerbeck.

Address of Witness 30 Laval ave., Montreal,

Occupation of Witness Lieutenant

Signature of Second Witness Charles Massé

Address of Witness 13 Bye St

Occupation of Witness shop

M. F. W. 82
300M-5-16.
1772-39-983.

FORM D.M.S 1300

SURNAME | CHRISTIAN NAME OR NAMES | REG. NO.

ADOFF. F. 1105241.

RANK ~~Pte.~~ Spr. UNIT 9 C.R.T. CO. 1st. TROOP QUE. BATTY. 23R.

HOSPITAL Conn. Aldershot. DATE OF ADMISSION 5-12-17.

1. Can Spec Witley HOSP. 10.11.18

2. 8 C.F. Amb. HOSP 1.12.18.

3. HOSP.

4. HOSP.

DIAGNOSIS V.D.G. 40

1 ~~Gleet~~ VDG 40

2. Gastritis R.

3

DISPOSITION C.L. 11-12-17. C84.

7-3-18 C/156-1.

15.4.18. C87-2 note: Re C186. Diag VDG.

13.4.18 C186

15.4.18 C187. 2. Hsp note. change diagnosis on C.186 to read V.D.G.

" 26-8-18 C300

9.12.18 A392.

Dis:- 6-3-18

Dis, 23-8-18 DATE

REMARKS ~~Dis~~ 2.12.18

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT

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

Date.	Remarks.	Pt. 2 Order No.
5-3-19	SOS Discharged RO 1420 Para 6 Demob.	~~64~~ 62
	Eff. 1-3-19 Cat A	

M.F.W. 192
150M—6-18.
1772-39-1243.

*Name ADOFF, Frank Rank Spr Regtl. No 1105741

Fyle Depot 19-A-200

Original unit 258th Bn Present unit D.D.No.4 M. or S. Age 22 Religion Jewish Ref. H.Q.

Port, ship, and date of arrival Halifax, N.S. "BALTIC" 6-2-19.

Next of kin (F) Mrs. K. Adoff, Cornwall, Ont.

Address on leave As above.

Address on discharge

Transportation issued Yes / No Date Character on discharge

Previous occupation Junk Business or Tailor Date and place of enlistment 29-8-17 Montreal, Que.

Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
13-2-19	T.O.S. from O/S 29-1-19. Posted to Cas. Coy 8-2-19.	
	Fur. W/S to 22-2-19.	44.

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

(over)

FROM HALIFAX PER

S.S METAGAMA 6/10/17

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Junk Business RELIGION Jewish

Tailor DESCRIPTION.

APPARENT AGE 20 YEARS 10 MONTHS

HEIGHT 5 FEET 3½ INCHES

CHEST MEASUREMENT 34 INCHES EXPANSION 3 INCHES

COMPLEXION Brown EYES Brown HAIR Brown.

DISTINGUISHING MARKS Not stated.

MEDICAL EXAMINATION. PLACE Montreal P.Q. DATE Aug. 29th. 1917

Present Address: Cornwall Ont.

SURNAME. Adoff 649-A-7255.

CARD NO. 4 MG

St S Dis Demob. 1-3-19

FOLL. Do 62. 3.3.19. 4

CHRISTIAN NAMES Frank.

REGL. NO. 1105241 RANK pte.

UNIT 258th. Bn.

FORMER CORPS Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Adoff K.

RELATIONSHIP TO SOLDIER Father.

ADDRESS ~~Cornwall~~ Ont.

Avonmore

with letter. 21-2-18.

COUNTRY OF BIRTH Russia, DATE 1896.

PLACE OF ATTESTATION Montreal P.Q. DATE Aug. 29th. 1917.

U/O 6-10-17

R/C 5-2-19 262/58 Pte

L. L. 10437. M. & D. 7253.

M. F. W. 22. 100M.—11-16. H. Q. 1772-39-339.

No. 1105-241 Rank Pte Name Adolff. J

T. O. S. 29-8-17 Unit 258th Battalion C. E. F.
CO 1324 4-9-17

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917	1917			
Aug 29	Sept 30	J		

NAME

REGT. No.

RANK AND UNIT

NEXT OF KIN

CABLE		NATURE OF CASUALTY
No.	DATE	

MAY 25 1920

G. Q. 97 98 Cmp

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

Com

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
1105241			B

Number ..... Rank Spr

Surname ADOFF

Christian Name Frank

Unit 9th Can Rly Tpo ..... Theatre of War France

Date of Service 10-10-18

Remarks

Latest Address Morrisburg Ont.

Roll No. B Page 3080

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
684	Connaught Aldershot	5-12-17.	G.S.W.D.G. (1st Quebec Regt)
C156	" Disc."	6-3-18.	" " "
C186.	Can. spec: Witley	10-4-18.	~~Gsw~~ V.D.G. as per C187
C300.	Disc	23-8-18	" "
A392.	& to T.A.	1-12-18.	Gastritis
A392	Disc.	2-12-18	"

NAME Adoff F.

REGT'L No. 1105241

H. Q. FILE No. 649.

RANK AND CORPS Pte 23rd Regt

CABLE	
NO.	DATE

NATURE OF CASUALTY

FOLLOWS

NO.

FOLLOWS

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

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

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

Form R. 149.
7106—250m—7/2/17.

Frank

Name ADOFF Rank Pte Reg. No. 1105241

Unit ~~23rd Res Bn~~ ~~C.R.T.D~~ 9 C.R.T. W.W.D.

Next of Kin Mr. K. ADOFF CORNWALL ONT. Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917.						
5-12	Connaught Hsp Aldershot		V.D.G.	C 84		
1918.	R225-7884					
6-3	Discharged		do	C 156		3535.
10-4	Con Spec Hsp Witley		Gleet	C 186		16079
10-4	Diag changed to		V.D.G.	C 187		66331
23-8.	Discharged		do	C 306		7566.
1-12-18	S Can-F-Amb		Gastritis	A 392		40060
2-12	To duty		-do-	A 392		

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form	B. 263	
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a	
or Field Conduct Sheet	"	W. 178	
Copies of Convictions, by C. P.		in MS.	
Med. Hist. Sheet,	Militia form	B. 313	
Casualty Form	"	W. 54	
Medical Report for Invalid§	"	B. 227	
Dental History Sheet	"	B. 465	
Last Pay Certificate	"	W. 44	
Duplicate Discharge Certificate	"	W. 39A	
‡Form of Will	"	W. 82	

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper or Particulars of Recruit	Militia Form	W. 23 / W. 133
Proceedings on Discharge	"	B. 218

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.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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.

WAR SERVICE BADGE
Class "A" No. 95471 ISSUED

Proceedings on Discharge.

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

No. 1105241

Rank Pte.

Surname ADOFF,

Christian name Frank.

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

Corps (Squadron, Battery or Company) 258th. Bn.

Date of discharge March 1st.,1919.

Place of discharge MONTREAL, Quebec.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age	22 years ..... months.
Height	5 feet 3½ inches.
Complexion	Brown
Eyes	Brown
Hair	Brown
Trade	Junk Business
Intended place of residence (To be given as fully as practicable.)	Tailor. Morrisburg Ont

Descriptive marks

NONE

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

R.O.# 1420.Para (c).Cat. "A". DEMOB.

Authority for discharge.....

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.

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

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

M. F. B. 218.
200M.—5-18.
H. Q. 1772-39-113.

(OVER)

Feb-5-3-54

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

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

6. Medals and Decorations.....

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

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

(Place).....

(Date).....

.....

Commanding.....

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

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

(Place) MONTREAL, Quebec. .....*(Signature of Soldier.)*

(Date) March 1st.,1919. .....*(Signature of Witness.)*

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

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

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

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

10. **Statement of Service.**

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

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

11. **Confirmation of Discharge.**

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

(Place) MONTREAL, Quebec.

(Signature)..... Lieutenant,
Officer i/c Discharge Section, District Depot No. 4.

(Date) March 1st.,1919.

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.)

NO RESERVATIONS

AUDITOR | PAYMASTER AW

M. OR S.

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

REGT. No. 1105241 RANK Pte NAME (IN FULL) ADOFF Frank

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No. | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
T.O.S.	29.1.19	D.O. 41/1

ORIGINAL UNIT C.E.F. 258th Bn. | IF IN P.F. WHAT UNIT? | (BLOCK LETTERS, SURNAME FIRST)

PLACE OF ATTESTATION Montreal | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 29-8-17 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY, $ Nil | DATE EFFECTIVE

PAYABLE TO ~~Post Office~~ | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS ~~Mosburg, Ont.~~ | 591 Frontenac St. Montreal Que.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE Montreal | DATE 1-3-19 | REASON DD 4-19 | AUTHORITY A-200 | IF ENTITLED TO POST DISCHARGE PAY

1919 MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $ C.	OTHER CREDITS $ C.	L.P.C. $ C.	TOTAL CREDITS $ C.	ACQUITTANCE ROLLS COL. NO. 1 NO. DATE	COL. NO. 2 NO. DATE	COL. NO. 3 NO. DATE	CASH PAYMENTS COL. NO. 1 $ C.	COL. NO. 2 $ C.	COL. NO. 3 $ C.	ASSIGNED PAY $ C.	REGIMENTAL CHARGES $ C.	OTHER CHARGES $ C.	$ C.	TOTAL DEBITS $ C.	BALANCE DEBIT $ C.	CREDIT $ C.	PARTICULARS OR REMARKS
Balance from previous account																				D.O. 62.13A
1-2-19 Feby	28	1.10	30 80	12.00	49 49	92 29													92 29	Lpd 8.2.19 a 22/2 D.O. 41/1
1-3-19	1	1.10	1 10	35 00		~~118 39~~ 36 10				198 39							198 39	60 00 ~~70 00~~		~~W.S.~~
			OTHER CREDITS	W.S.C.	S.A.	128 39								OTHER DEBITS	W.S.C.	S.A.		SOLDIER	DEP'T	
1-3-19				280.00		280.00									70.00		70.00	210.00		
1-4-19															70 00		70 00	140 00		
1-5-19															70		70	70		
1-6-19															70		70			
																	280			

WAR SERVICE GRATUITY

Final

60m.-11-18. L. L. 51777. M. & D. 9585.

MONTH	PAY AND F. A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3										DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	

P. 550

MARRIED OR SINGLE: Single

PLACE OF BIRTH: Russia

NAME AND ADDRESS OF NEXT OF KIN: ~~Mr.~~ K. Adoff
Cornwall. Ontario Can.

RELATIONSHIP OF NEXT OF KIN: Father

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

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 1105241 RANK Ste. NAME Adoff, Frank

IF IN PERMT. CORPS WHAT UNIT Nil UNIT 258th Draft

PERMANENT FORCE ALLOWANCES Nil

PLACE OF ATTESTATION Montreal

DATE OF ATTESTATION 29-8-17

TRANSFERRED TO 10 Res. DATE 1-10-17 AUTHORITY

TRANSFERRED TO 1 QRD. DATE 1-1-18 AUTHORITY 903 13-11-1

TRANSFERRED TO DATE AUTHORITY

TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ Nil DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE 1917	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
																								Balance from Canada							10 00				
Sept																																			
Nov.	Ppay 1-10-17 to 30-11-17		67	10																															
Dec	Ppay		34	10																															
1918 Jan	RP		34	10																															
Feby	RP		30	80																															

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFER. SEP. PAY. ENG.
Sept				AR 770 10 Res 31-10-17		4 87			Canada 10 00	
Nov.	Ppay 1-10-17 to 30-11-17	67 10								
Dec	Ppay	34 10							106 33	
		101 20		C 1587		4 87			11 60	
1918 Jan	RP	34 10		AH 005 185 AH 22 Corp Hosp Cedarhurst	29-11-17	3 12				
				H&R 13285 231 Res	4-1-18	4 87				
				H&R 11362 " "	19-12-17	4 87				
				" 12221 " "	28-12-17	4 87				
				" 1425 " "	14-1-18	4 87			117 83	60 00
		34 10				22 60			22 75	
Feby	RP	30 80		H&R 18157 " "	4-2-18	4 87				
				H&R 20353 " "	13-2-18	4 87			4 74	
				Dn. 1316 23 Res.	20-11-17	34 07				
				" 1302 " "	14-11-17	4 87				
				H&R 23072 Can Hosp Aldershot	28-2-18	4 87			53 55	
		30 80				53 55			95 08	

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFER. SEP. PAY. ENG.
									10 00	
Mch	Cert Rtd.									
	RP	34 10		Stopped (General) 29-11-17					95 08	
				6-3-18 AR 4 @ 609 98 Res					129 18	
				AO 66 7-3-18 23 Res.		58 80			25 50	
		34 10		AR 2020 23 Res 25-3-18	14 03					
					14 03	58 80			53 35	

1105 2nd Lt. Adolf Frank.

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.				1 NO.	1 DATE	2 NO.	2 DATE	3 NO.	3 DATE	4 NO.	4 DATE	1	2	3	4				CREDIT	DEBIT			

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

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

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

NAME:- ADOFF Frank.

NUMBER:- 1105241.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

UNIT AND TRANSFERS

ORIGINAL UNIT:- 258th Draft.

DATE ACCOUNT FIRST OPENED:- 1-10-17.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			10 R.D.
M.R.	1-10-18.	22-10-18	C.R.T.

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
30/1/18	#234	CRTD	£7 34 07				
3/1/19		Lyn	£3 14 60				
4/1/19		✓	£1 4 87				
11/1/19	#366	Wilkey	£1 4 87				
8/1/19		Q4005 A7	1/4 3 32				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 –	10	~~1/0~~	

PARTICULARS OF RENDERING NON-EFFECTIVE Transf to Can 31/1/19 K to Wilkey 11/1/19 Ed. 9-2-21 L.R.C. Bal 11 9 02 Leo Bal C 17 7 82

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									53 35 25 50		
Apl.	Bal Fwd										
✓	Pay	33 00		W.O. 95-23 Res 5.4.18. Allt 2½% + 7½% 7. P2. 4 5 4 18		9 90			43 45		
				A 121 Lon Rly pay 23rd Res 25/3/18	8 23				76 45		
				Rest Pay Wand'th 31/1/18 W.O. 109 23rd Res'n							
		33		ad 169 C.S.H. Wkilley 22/3/18	2 43				65 79	40 –	
					10 66	9 90					
May	P.P.	34 10		ad Medl Chgs Can Hosp Aldershott 14-2-18	40						
				AR 550 C.S.H. Wit. 13.5.18	2 43				97 06		R.P. #4
				W.O. 146 23 Res. 26.5.18 Forfeits 1 9s pay 18.5.18		1 10			95 96	55	
		34 10			2 83	1 10					
	P.P.	33		Q 4005/189 23 Res. 5-6-18	1 34						
				P 1956 - Hosp. Dom. Aldershott 24.3.18	3 58				124 04		
		33			4 92						
Jul.				AR. 1403 - C.S.H. Wit. 18-7-18	2 43						
				A/Rly Warr. 60/974072 - 1-4-18	94				120 67		
				Sent 21 dys Detn. 12/6/18. In arr. 7/6/18							
				W.O. 199 - 18/7/18 - 23 Res.		28 60			92 07		
				28 dys F.P. No 2. 3/7/18. Forf 2 dys F.W.							
	P.P.	34 10		an 2 9 30 Pm 5/6/18 to 5 30 Pm 7/6/18. W.O. 199 - 18/7/18 - 23 Res.		33 –			93 17	58	R.P. #4
		34 10		R.P. 1 mo 8.6.18. W.O. 210 - 23 Res.	3 37	6 16 0					
Aug	P.P.	34 10		AR 1807 C.S.H. Wit. 19.8.18	2 68				124 59		
				4 Dys Detention 10.8.18 W.O. 229 - 23 Res 17.8.18		4 40					
				Q 4005/279 C.S.H. Wit. 23.8.18	3 68				116 51		#
				AR 2085 " 21.8.18	51				116 –		
				S Lopp (Ven) 9.4.18 to 23.8.18 – 137 Dys @ 60 (4 days concurrent) W.O. 236 - 23 Res 24.8.18		43 80 ~~4 6 20~~ D			~~69 80~~ 72 20	53	
				AR 1599 C.R.T.D. 28.8.18	2 43				69 77		
		34 10			9 30	48 20					