REGIMENTAL DOCUMENTS

NAME ADRIAN DONALD SAMUEL REGT. NO. 637088 UNIT H. Q. FILE NO. 2413 (H)

(S)

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
4	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
	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
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
2	Pay [illegible]					

(C) 6 (H)

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

Recruit

55th OVERSEAS BATTALION C.E.F.

ATTESTATION PAPER.

No. 637088

Folio.

Military District No. 8 MAY 1 19 Kingston, Ont.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

TRANS. FROM 155th BATN. TO 155th BATN. ADTH. N. ROLL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... Adrian
1a. What are your Christian names? ..... Donald Samuel
1b. What is your present address? ..... Glen Miller
2. In what Town, Township or Parish, and in what Country were you born? ..... London England
3. What is the name of your next-of kin? ..... Caroline Adrian
4. What is the address of your next-of-kin? ..... Father & Mother
4a. What is the relationship of your next-of-kin? ..... Father & Mother
5. What is the date of your birth? ..... Feb 6th 1894
6. What is your Trade or Calling? ..... Salesman
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? ..... 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

Riffel Hous Riffel Road Cricklewood Northwest
Joseph Adrian Northwest London Eng. Riffel Hous Riffel Road Cricklewood Northwest

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, D. S. Adrian, 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.

Donald Adrian (Signature of Recruit)

Date apr 18 1916 R D Weller Lieut (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, D. S. Adrian, 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.

Donald Adrian (Signature of Recruit)

Date apr 18th 1916 R D Weller Lieut (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 Toronto this 20 day of April 1916.

3

W. L. Jaques J.P. (Signature of Justice)

M. F. W. 38.
600M.—2-16.
H. Q. 1772 89 341.

Description of D. S. Adrian on Enlistment.

Apparent Age 22 years ..... months.

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

Height ..... 5 ft. 6½ ins.

Chest measurement. Girth when fully expanded ..... 33 ins.

Range of expansion ..... 3 ins.

Complexion Fair

Eyes Gray

Hair Dark

Religious denominations.

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

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

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

Scar behind Left Ear

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 Apr 20 1916 ..... Lieut

Place Trenton Ont ..... Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

D. S. Adrian 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.

M. R. Adams Lieut. Col. (Signature of Officer)
Commanding 155th Overseas Battalion.

Date APR 25 1916 191 .

DEPARTMENT OF VETERANS AFFAIRS
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION
AVIS DE DÉCÈS

TO:
À:

DATE Aug. 31, 1978

NAME
NOM Adrian, Donald

Service No.
Matricule No 637088 Army WW1

CPC No.
CCP No 0094425

WVA No.
AAC No

Information Received from:
Information reçue de: CPC No

Date of Death
Date du Décès 2-8-78

Place
Endroit N/S

Distribution: WSR-DASG
VI - ASS
DO - BD
HO - BC

Pour le chef,
L. Lavergne
for Chief, Central Registry Division.
Dépôt central des dossiers.

DVA 24 (Rev. 2/70) BIL.

Re[illegible]it

155th OVERSEAS BATTALION, C.E.F.

637088

Bpb 9442

MEDICAL HISTORY SHEET.

Surname Adrian **Christian Name** Donald Samuel

Examined on 20 day of Apr. 1916 at Trenton Ont

Approved by W. B. Crowe

Birthplace City or Town London County England

Rank Lieut M.O.

Apparent age 22

Trade or occupation Salesman

Height 5' Feet 6½ Inches.

Weight 118 Lbs.

Chest measurement Minimum 32 inches. Maximum expansion 33 inches.

Physical development fair

Small-Pox Marks nil

Vaccination Marks Arm Right. Left. Number ✓ 4

When Vaccinated last nil

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

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

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

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

Date.	Result.	Anti-Typhoid Inoculations, Etc.
		M.O.
		M.O.
		M.O.

Enlisted *on* 18 *day of* April 1916 *at* Trenton

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	155th B.C.E.F	637088		18-4-16
Transferred to	4th C.S. Pioneer Bn. C.E.F.			4-6-16

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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.

200M—11-15.
H. Q. 1772 39-4-9.

Surname Adrian Christian Name Arnold Samuel

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				

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

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

250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 155th OVERSEAS BATTALION, C.E.F.

Regimental No. 637088 Rank Pte Name Donald Samuel Adrian

C. E. F.

Enlisted (a) 18.4.16 Terms of Service (a) duration of War + 6 months Service reckons from (a) April 18. 1916

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				

(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				

HOSPITALS	DATE	DIAGNOSIS

M. F. W. 2553.
75M.—9-19.
1772-39-1332.

Reg. No. 637008 Name Adrian, D.

Rank Pte Corps 4 Pion Age — Service —

Ledger No. Serial No.

HOSPITALS	DATE	DIAGNOSIS
Laurentide Inn Ste Agathe	3.8.16.	G. B.
St. Grey Nuns C.H. Montreal	3.2.17	

6

P. T. O.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
35	M.H.C.C., Montreal	3-2-17	Disch: Cl. "3"

NAME Adrian S.

REGT'L No. 637088

H. Q. FILE No. 649.

RANK AND CORPS Pte. 155th. Bn.

FOLLOWS

No.

FOLLOWS

CABLE	
NO.	DATE

NATURE OF CASUALTY

No. 637088 RANK Pte. NAME Adrian D. S.

T. O. S. Trans. from 155th Bn. 4-6-16 D.O. 49 of 13-6-16. UNIT 4th Pioneer Battalion C. E. F.

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1916 June 4	1916 June 30	✓		
	July	✓		
	Aug.	✓		

No. 7088 Rank Pte Name Adrian D. S.

T. O. S. 18-4-16 Unit 155th Battalion.

D.O. 150 of 22-4-16

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916.	1916.			
apr 18	apr 30	L.		
may		L		
June 1	June 3	'n	Trans to 4th Pioneer Battalion 3-6-16.	D.O. 108 of 5-6-16.

I-153

A.A.G.

M.D. No. 4.

I CONCUR.

Major

A.D.M.S., M.D. No. 4.

Secretary, Militia Council,

Ottawa, Ont.

FORWARDED

Colonel

O.A., M.D. No. 4.

Montreal, P.Q.

22nd August, 1916.

* N.B.—This Form being applicable to any Board of Officers or Committee or Court of Inquiry, this blank to be filled in accordingly.

The signature of each Officer composing the Board, &c., should be attached to the end of the proceedings.

PROCEEDINGS of a * Medical Board

assembled at St. Andrews, N.B.

on the 17th day of July 1916.

by order of The Officer Commanding 4th O/S Pnr. Batt.

for the purpose of examining and reporting on the present physical condition of No. 637088, Pnr. Donald Adrian.

DEPT. MILITIA & DEFENCE AUG 23 1916 H.Q. 649-A-1610 CANADA

PRESIDENT.

Capt. H. Dunlop.

MEMBERS.

Dr. H.P. O'Neil.

The Board having assembled pursuant to order, proceed to examine and repor t on the present physical condition of the above named pioneer and find that he is suffering from pulmonary tuberculosis and recommend that he be sent to a tubercular sanatorium and kept there for a period of three months for observation and treatment.

(Sgd) H. Dunlop, Capt, A.M.C.

(Sgd) H.P. O'Neil, M.D.,

M F B. 303.

100m.—4-16.
H. Q 1772—39—133.

Noted 29-1-17 MB

644-A-1610

A.A.G.,

M.D. No. 6.

Recommended.

(Sgd) J.H. Blake, Capt.
for Lieut-colonel.
A.D.M.S., M.D. No. 6.
a.o.d.

Hfx, N.S.
31.7.16.

APPROVED
Jul.31.1916
(Sgd) R. Benson,
Commanding Mil. Dist., No. 6.

A105.17Feb.17

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron / Battery / Company Conduct Sheet,	" B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

This space to be for numbers.

No Class

19-5

RECEIVED FEB 14 1917 HOSPITAL COMMISSION OTTAWA

Proceedings on Discharge.

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

No. 637088

Rank Private Donald

Name Adrian, Samuel

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

Corps (Squadron, Battery or Company) 155th Battalion, C.E.F.

Date of Discharge February 3rd 1917.

Place of Discharge Montreal, P.Q.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 22 years 8 months.
Height 5 feet 6½ inches.
Complexion Fair
Eyes Grey
Hair Dark
Trade Salesman
Intended place of residence (To be given as fully as practicable.) 1951 Esplanade Ave., Montreal, P.Q.

Descriptive Marks

2. The above-named man is discharged in consequence of Medical Unfitness due to/ Tuberculosis. H.Q. Authority Dated January 16th 1917. 4D 22-AA-96. "Under Prov:- H.Q. 60-4-8 of Sept 1915."

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.

Good.

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

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

Steward.

M. F. B. 218.

100m.—6-16.
H. Q. 1772-39-113

2.5.52
~~2.4.52~~
AS

(OVER)

Noted 14-2-17 MB

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.

(Place) Montreal, P.Q. D. Adrian (*Signature of Soldier.*)

(Date) February 3rd 1917. S.K. Wilding (*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.240days.

11. **Confirmation of Discharge.**

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

(Place) Montreal, P.Q.

(Date) FEB 3 1917

MILITARY HOSPITALS HEADQUARTERS "A" UNIT COMMISSION COMMAND

(*Signature*) G. C. Hall

Captain.
O. C. "A" Unit,
Military Hospitals Commissions Command.

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.

D. Adrian

(OVER)