

REGIMENTAL DOCUMENTS

NAME **ADAIR.** *Willbert*

REGT. NO. *406241*

UNIT *36<sup>th</sup> Battr*

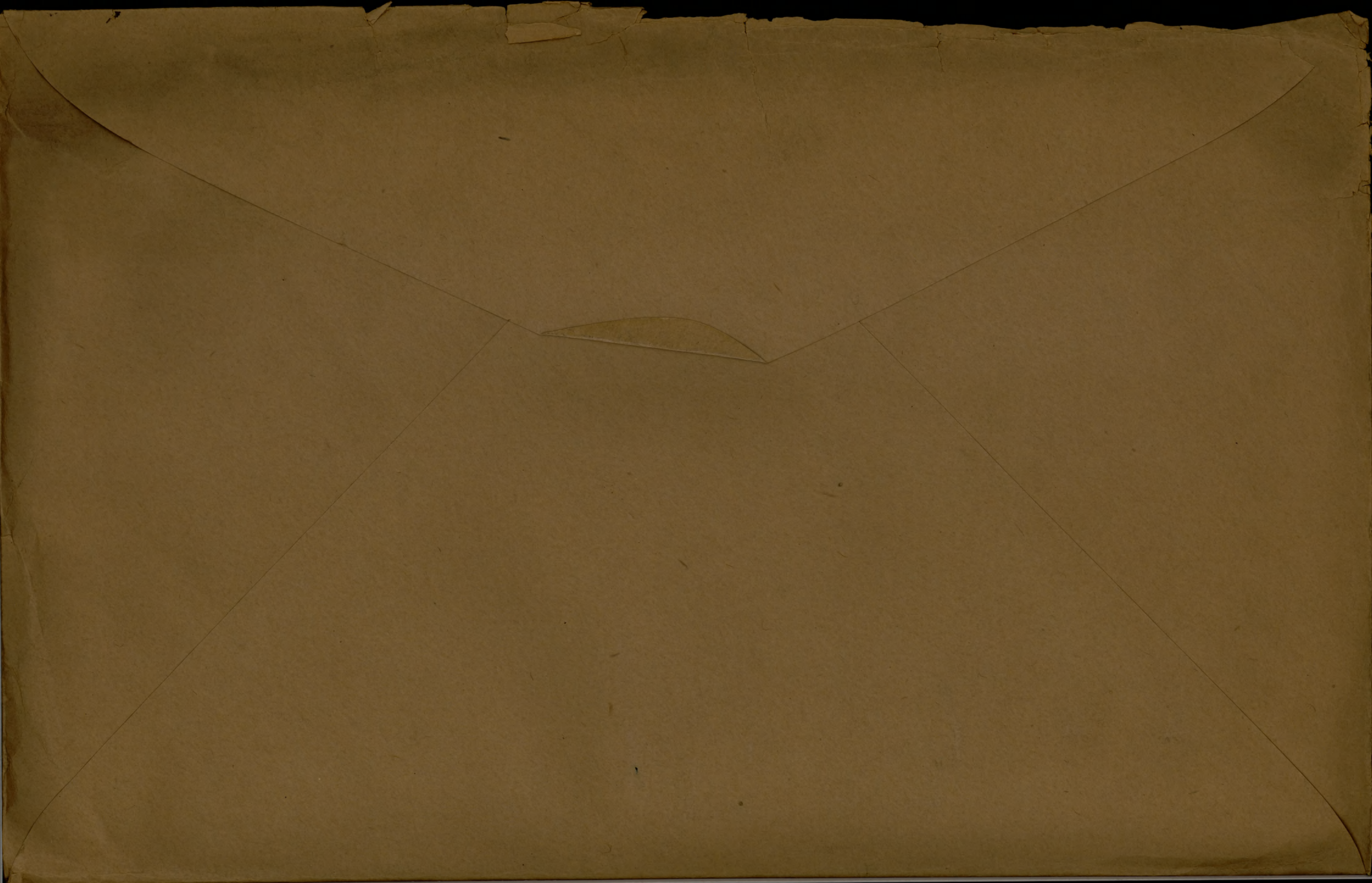
H. Q. FILE NO. *1002*

**S**

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CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY	
<i>3</i> ATTESTATION PAPER (M.F.W. 23, 133, or 51)		<div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> <div style="border: 1px solid black; border-radius: 50%; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center; margin: 0 auto;"> <b>M</b> </div> <div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center; margin: 0 auto;"> <div style="border: 1px solid black; border-radius: 50%; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center; margin: 0 auto;"> <b>H</b> </div> </div> </div>			<b>DEATH</b>	
<i>/</i> CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category	
<i>/</i> TRAINING HISTORY SHEET (M.F.W. 113) <i>Record sheet</i>						
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)						
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)						
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)						
<i>2</i> MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)						<b>DISCHARGE</b>
DENTAL HISTORY SHEET (M.F.B. 465)						Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)						<i>Killed in Action</i>
MEDICAL EXAMINATION (M.F.W. 129)						<i>8-10-16.</i>
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)					<b>DESERTION</b>	
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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)						
<i>5</i> <i>Misc Card</i>						
<i>Pay sheets</i>						







# ATTESTATION PAPER

No. ~~408241~~ 408241

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name?..... *Adair, Wilbert*
2. In what Town, Township, or Parish, and in what Country were you born?..... *Grey County Ont*
3. What is the name of your next-of-kin?..... *Father R. J. Adair*
4. What is the address of your next-of-kin?..... *Glencarrin Ont*
5. What is the date of your birth?..... *8th March 1887*
6. What is your trade or calling?..... *Loco. Fireman*
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?..... *36th Peel Rgt*
10. Have you ever served in any Military Force?..... *2 yrs 36 " " "*  
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*

*Wilbert Adair* (Signature of Man.)

*Wm. McKeenley* (Signature of Witness.)

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *W. Adair*, 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.

*Wilbert Adair* (Signature of Recruit.)

Date *Apr. 16* 1915. *Wm. McKeenley* (Signature of Witness.)

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *W. Adair*, 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.

*Wilbert Adair* (Signature of Recruit.)

Date *Apr 16* 1915. *Wm. McKeenley* (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 *Hampton* this *16* day of *April* 1915.

*Wm. G. B. [Signature]* (Signature of Justice.)

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

*Alfred [Signature]* (Approving Officer.)



DESCRIPTION OF Adair Wilbert ON ENLISTMENT.

Apparent Age 28 years 1 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. 8 1/2 ins.

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

Vaccination scars on left arm

Complexion Dark

Eyes Blue

Hair Dark

Religious Denominations { Church of England  
 Presbyterian X  
 Methodist  
 Baptist or Congregationalist  
 Other Protestants  
(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 14<sup>th</sup> 1915

Place Hamilton

A. P. Hunt  
 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

Adair Wilbert 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.

Date Apr 24 1915

[Signature] (Signature of Officer.)



Capt Lapsley

no 260 TB co  
406241

# MEDICAL HISTORY SHEET.

Surname Adair Christian Name Wilbert

Examined { on 14<sup>th</sup> day of April 1915  
at Hamilton  
Birthplace { City or Town Gray Co.  
County Ontario

Approved by W. W. Fayler  
Rank 1st Lieut M.O.

Apparent age 28 years 1 month  
Trade or occupation Leather trimmer  
Height 5 Feet 8 1/2 Inches.  
Weight 140 Lbs.  
Chest measurement { Minimum 38 inches.  
Maximum expansion 38 inches.  
Physical development good  
Small-Pox Marks none  
Vaccination Marks { Arm Right Left 1  
Number one  
When Vaccinated last 1915

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

(a) Marks indicating congenital peculiarities or previous disease

Date	Result	VACCINATIONS.
		M.O.
<u>1915 good</u>		<u>Spain</u> M.O.
		M.O.

(b) Slight defects but not sufficient to cause rejection

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
		M.O.
<u>1915</u>		
<u>April 26</u>	<u>O.K.</u>	<u>W. W. Fayler</u> M.O.
<u>May 7</u>	<u>O.K.</u>	<u>W. W. Fayler</u> M.O.
<u>May 12</u>	<u>O.K.</u>	M.O.

Enlisted on 14 day of April 1915 at Hamilton

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>36<sup>th</sup> Batt<sup>n</sup></u>	<u>46241</u> <u>406241.</u>		
Transferred to.. ..				

## 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.



Christian Name

Surname

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
Wagon on the Lake		27	5	1915	17	6	1915	Gonorrhoea	21		J. H. M. [Signature]
Leito Hospital St. Maurice Plaines		6	Aug	1915	20	8	15	Gonorrhoea	14	Apparently cured	



RCR

20966

Rank *Pts* Name ADAIR. Wilbert. Reg'l No. 406241.

Unit *36th Bn.* If in perm. Corps, Married or Single *Single.*  
What Unit?

Place and Date of Enlistment *Hamilton. 16th April. 1915.* Place of Birth *Grey Co Ont. Can*

Name and Address, Next-of-Kin *R.T. Adair. Glencairn. Ont. Can.*  
Relationship *Father*

Assigned Pay Monthly \$ Payable to Relationship *N.E.R.B. 7*

Separation Allowance \$ Payable to Relationship *RL 25-A-772.*

Discharge, Date and Place Reason Character

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				
<i>28-6-15</i>	<i>RCR</i>	<i>Arr'd in England</i>	<i>Emb</i>	<i>19.6.15</i>	
<i>9-10-15</i>	<i>O.C. 30th</i>	<i>Trans. to R.C.R.</i>	<i>W. Sandling</i>	<i>28-6-15</i>	
		<i>Embarked for France.</i>	<i>(Boulogne)</i>	<i>8-10-15</i>	<i>Pt II O. 160.</i>
<i>24 OCT 1916</i>	<i>RCR</i>	<i>Missing after action</i>	<i>Field</i>	<i>1 Nov 15</i>	<i>8-10-16 C.L.A. 226. ✓</i>
<i>30-11-16</i>	<i>"</i>	<i>Previously reported missing</i>	<i>"</i>	<i>8-10-16</i>	<i>Pt II 90 73.</i>
<i>23.5.17</i>	<i>"</i>	<i>now reported killed in action</i>	<i>"</i>	<i>8-10-16</i>	<i>C.L.A. 391.</i>
<i>19-5-17</i>	<i>"</i>	<i>Pt II 30 11/16 Cancelled &amp; following substituted " Killed in Action</i>	<i>"</i>	<i>8-10-16</i>	<i>Pt II 55.</i>







Casualty Form—Active Service.

Regiment or Corps 36<sup>th</sup> Battalion C.E.F.

Regimental No. 401/6241 Rank Private Name Adair Wilburt

Enlisted (a) Apr 16 1915 Terms of Service (a) Duration 7 yrs Service reckons from (a) April 16 1915

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				
1-11-15	berch	DISEMBARKED BOULOGNE 2 11 15			New Roll.
11/10/16	oc. R.C.R.	Reported. "Missing after Action"	Field	8/10/16	137/1740. Part II orders 73 d/25/11/16
19-5-17.	R.C.R.	Pt 073 of 3046 cancelled and the following substituted: "Killed in Action."	Field	8-10-16	Pt 055 <sup>3046</sup> Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

J. J. Moody LIEUT.  
FOR LT: COL: I/C RECORDS, C.O.M.F.

(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				



Rank *Pt* Name

**ADAIR, Wilbert.**  
If in perm. Corps,  
What Unit?

Reg'l No. **46241.**

Unit *R.C.R.*

Married or Single

Place and Date of Enlistment

**Hamilton. 16th April. 1915.**

Place of Birth

**Single.**

Name and Address, Next-of-Kin,

**R.T. Adair. Glencairn. Ont. Can.**

**Grey Co Ont. Can**

Relationship

**Father**

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Discharge, Date and Place *8-10-16*

Reason

Relationship

Character

*Entered on N.E. Card Index*

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days			Rate	Amount						
<i>July</i>	<i>1 31</i>	<i>31</i>	<i>1</i>	<i>31 00</i>	<i>31</i>	<i>10</i>	<i>3 10</i>			<i>34 10</i>			<i>32 50</i>	<i>1 60</i>	
														<i>2 41</i>	
<i>Aug</i>	<i>1 31</i>	<i>31</i>	<i>1</i>	<i>31 00</i>	<i>31</i>	<i>10</i>	<i>3 10</i>			<i>34 10</i>			<i>34 07</i>	<i>2 50</i>	
<i>Sept</i>	<i>1 30</i>	<i>30</i>	<i>1</i>	<i>30 00</i>	<i>30</i>	<i>10</i>	<i>3 00</i>	<i>2 50</i>		<i>35 50</i>			<i>21 90</i>	<i>13 60</i>	<i>Trans to R.C.R. effect of loss of strength of the Bn</i>
<i>1 Oct.</i>	<i>31 Oct.</i>	<i>31</i>	<i>100</i>	<i>31 00</i>	<i>31</i>	<i>10</i>	<i>3 10</i>			<i>34 10</i>			<i>69 799</i>	<i>39 71</i>	<i>Trans to R.C.R. effect of loss of strength of the Bn</i>
<i>1 Nov.</i>	<i>30 Nov.</i>	<i>30</i>		<i>30 00</i>	<i>30</i>		<i>3 00</i>			<i>33</i>			<i>4 46</i>	<i>68 25</i>	
<i>1 Dec.</i>	<i>31 Dec.</i>	<i>31</i>		<i>31 00</i>	<i>31</i>		<i>3 10</i>			<i>34 10</i>			<i>16 63</i>	<i>85 72</i>	
<i>1 Jan.</i>	<i>31 Jan.</i>	<i>31</i>		<i>31 00</i>	<i>31</i>		<i>3 10</i>			<i>34 10</i>			<i>5 24</i>	<i>114 58</i>	
<i>1 Feb.</i>	<i>29 Feb.</i>	<i>29</i>		<i>29 00</i>	<i>29</i>		<i>2 90</i>			<i>31 90</i>			<i>5 24</i>	<i>141 24</i>	
<i>1 Mar.</i>	<i>31 Mar.</i>	<i>31</i>		<i>31 00</i>	<i>31</i>		<i>3 10</i>			<i>34 10</i>			<i>5 23</i>	<i>140 11</i>	

*3 34 30587*  
*2 50 250*

*2/500*

*27 50 84 30334*

*13254*

*69 13326 14011*

BALANCE TRANSFERRED TO NEW LEDGER.

Statement of  
JUN 25 1917  
Approved

NEW BRITAIN, N.E. PROVINCES  
JAN 16 1917

*Settled*

*J. R. R.*







MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

108  
 M. F. W. 12a.  
 50m.-6-16.  
 1772-39-819.

Sheet No. 2.

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

*Mrs. M. C. Phillips* **PAYMENTS.**

*Pte.*  
 Name of Soldier *Adair, W.*  
*# 406241. B. Coy. 36 Reserve Batta.*

Month.	Year.	Cheque No.	Amt.
April	1916		
May			
June			
July			
Aug.			
Sept.			
Oct.		023812	15
Nov.		F 28763	15
Dec.		<del>C 37224</del>	<del>15</del>
Jan.	1917		
Feb.			
March			
April			
May			
June			
July			
Aug.			
Sept.			
Oct.			
Nov.			
Dec.			
Jan.	1918		
Feb.			
March			
April			
May			
June			
July			

15.00 Oct 1<sup>st</sup> Remarks. 16

*\$45.00 CFX 31-12-16 W.A. Yawrett*  
*Account close 31-12-16 W.A. Yawrett 12-6-17*  
*Stop Dec 31/16 C.A.R.*

F. X. Rend. Date	<i>Total</i>	By	<i>45-00</i>
E.F.X. " Date	<i>14/9/17</i>	By	<i>GR</i>



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

107

M. F. W. 12  
 50m.—7-16  
 H. Q. 1772-39-819

To Whom *Mrs. M. C. Phillips*  
 Address *489 Quebec Ave.*  
*Toronto, Ont.*

By Whom Assigned *Adair. W.*  
 Regtl. No. *406241.*  
 Rank *Pte*  
 Corps *B. Coy. 36. Reserve Battr.*

Rate *15.00 Oct 1<sup>st</sup> 16*  
*2m. 14<sup>9</sup>/<sub>16</sub> W.B. 23<sup>10</sup>/<sub>16</sub>*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			<i>Missing Oct 8/16 (31) 25/10/16 2009</i>
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

Pensions Notified Date *12-6-17*  
 Killed in Action }  
 Died of Wounds } Date *8-10-16*  
 Missing }  
 O. L. *4724-5-17* Clerk *W.A. Lawrence*  
 Date Noted..... *12-6-17* 191







Surname

Christian Name or Names

Reg. No.

Rank

Unit

Co.

Troop

Batty.

Hospital

Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)  
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

Prev. rept. miss. now  
Killed in action 8.10.16.  
R

DISPOSITION

Date

of 23 5.17 H391

REMARKS



# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.



Name **Adair, Wilbert** Rank **Pte.**Reg. No. **406241.**Unit **R.C.R.**R.P. 25-A772.Next of Kin **Canada.**

Date

Movement

Place

Casualty

List  
No.Notified  
N/K O.

W.O. List

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
8-10-16.	Reported from Base.	MISSING.	A226	$\frac{1}{2}$	0	3485.
8-10-16	Now <u>reft</u> <u>Killed</u> in <u>action</u>		A	391	M	5097 23-5







ADAIR, W. PTE. NO. 406241

649-A-2291.

~~R.I.C.A.~~  
A.A.C.

*Elig for 14/15 star.*

MEDALS.

The father, Robert Adair, Esq.,  
Tura Nova, Ont.

PLAQUES (*Ser. # 798425.*)

The father, as above.

C OF S.

The mother, Mrs. E. Adair,  
Tura Nova, Ont.

Scroll Date APR 1 3 1922 Reqn. No 234972

Serial Date JUL 11 1922 Reqn. No P42028 9B



C. 226.



No. *6241*

RANK *Pte*

NAME *Adair Wilbert*

T. O. S.

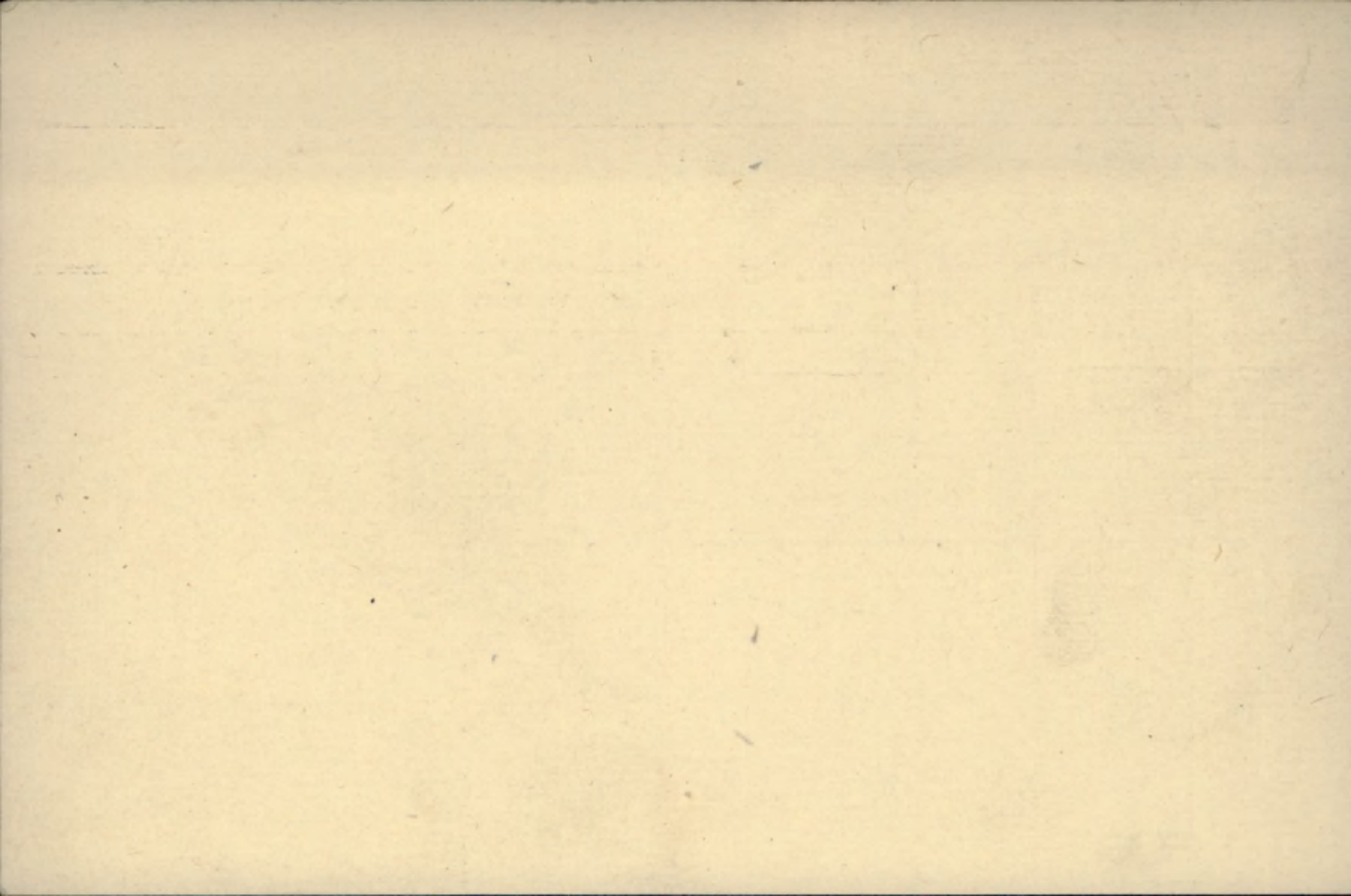
UNIT *36<sup>th</sup> Battalion*

M. D. *2*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915 Apr. 1</i>	<i>1915 Apr. 30</i>	<i>✓</i>		
<i>May</i>		<i>✓</i>		
<i>June</i>		<i>✓</i>		
<i>June</i>		<i>✓</i>		

UNIT SAILED  
JUN 1 9 1915







SURNAME.

*Adair. (649-A-2291)*

CARD NO.

*266*

**D**

CHRISTIAN NAMES

*Wilbert*

FOLL.

REGL. No.

*406241*

RANK

*Pte*

UNIT

*36<sup>th</sup>*

*Bn.*

FORMER CORPS

*36<sup>th</sup> Regt. 2 yrs.*

NEXT OF KIN.

NAMES IN FULL

*Adair, R. F.*

RELATIONSHIP TO SOLDIER

*Father*

ADDRESS

*Terra Nova  
Glencarr, Ont.*

CHANGE OF ADDRESS

*Also notify: Mrs.  
James Philips (aunt)  
489 Quebec ave. Toronto*

*Also notify: - Mrs. Alf. Haulknee (sister) 218 Gilmour ave, Ont  
Auth. Letter 5-6-17 West Toronto, Ont.*

*Auth Letter Oct 30-16.*

COUNTRY OF BIRTH

*Canada, Grey Co, Ont.*

DATE

*Mar. 8<sup>th</sup> 1887*

PLACE OF ATTESTATION

*Hamilton, Ont.*

DATE

*Apr. 16<sup>th</sup> 1915*



From Montreal per S. S. Coricari 19/6/15

MARRIED

SINGLE *yes*

WIDOWER

TRADE OR CALLING

*Loco. Fireman*

RELIGION

*Presbyterian*

DESCRIPTION.

APPARENT AGE

*28* YEARS

*1* MONTHS

HEIGHT

*5'* FEET

*8 1/2* INCHES

CHEST MEASUREMENT

*38* INCHES

EXPANSION

*3* INCHES

COMPLEXION

*Dark*

EYES

*Blue*

HAIR

*Dark*

DISTINGUISHING MARKS

*Vacc. scar on left arm*

MEDICAL EXAMINATION.

PLACE

*Hamilton, Ont.*

DATE

*Apr. 14<sup>th</sup> 1915*

*Present address: - not stated*



REGT'L NO 406 241

H. Q. FILE NO. 649-

NAME Adair, Wilbert

RANK AND CORPS Pte R. C. P. Form

FOLLOWS No. 36th Bn

CABLE

NATURE OF CASUALTY

FOLLOWS

No. DATE

03485	24-10-16	Missing since Oct. 8th 1916 ✓
M 5097	22-5-17	Pres. rep'd. missing now reported killed in action Oct 8th 1916 ✓
B2090a	19-5-17	Killed in action 8-10-16.
	Rouen	(Rec'd 24-7-17)



LIST No

HOSPITAL

DATE OF  
ADMISSION

REMARKS

A226

Reported from Base

8-10-16

missing after action

A 391.

Prev. rep. missing  
now rep. killed in  
action

8-10-16



DUPLICATE

ARMY FORM B. 178.

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

Table with 2 columns: Date, Brief details, and signature. Entries include 1915 VACCINATION - Result Good - A.Pain, April 26th Anti-Typhoid Inoc. Result O.K W.H.Taylor, May 7th, and May 12th.

Table IV.—Service Table.

Table with 6 columns: Station or Troopship, Date of arrival or embarkation, Date of departure or disembarkation, Station or Troopship, Date of arrival or embarkation, Date of departure or disembarkation.

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

MEDICAL HISTORY of

Surname A D A I R Christian Name Wilbert

TABLE I.—GENERAL TABLE.

General information fields: Birthplace Gray Co Ontario, Examined on 14th day of April 1915 at Hamilton, Declared Age 28 years 1 month days, Trade or Occupation Loco Fireman, Height 5 feet 8 1/2 inches, Weight 140 lbs, Chest Measurement 38 inches, Physical Development Good, Vaccination Marks One, When Vaccinated 1915, Vision R.E.-V=, L.E.-V=.

Approved by (Signature) W.H.Taylor (Rank) Lt. A.M.C. Medical Officer.

Enlisted at Hamilton on 14th day of April 1915

Table with 2 columns: Corps, Regtl. No. Entry: 36th Battn, 406241

Became non-effective by ...

This Medical History Sheet has been compared with the corresponding Attestation Paper, and entries made on red have been taken from the Attestation Paper. (Signature) W.H.Taylor

Vertical stamp: I certify the foregoing to be a true copy of an original entry in the Medical History Sheet of this man. G.A.M.C. for the Officer in Charge of Records, Canadian Contingent.











