

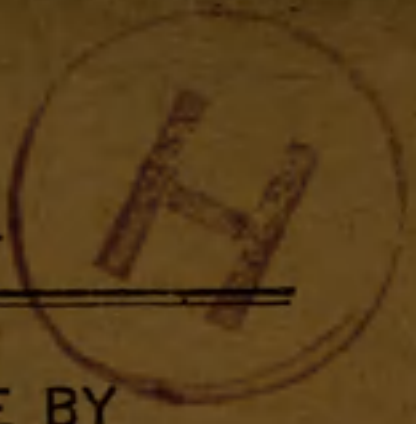
REGIMENTAL DOCUMENTS

NAME ADAMS, NORMAN

REGT. NO. 115-5-11

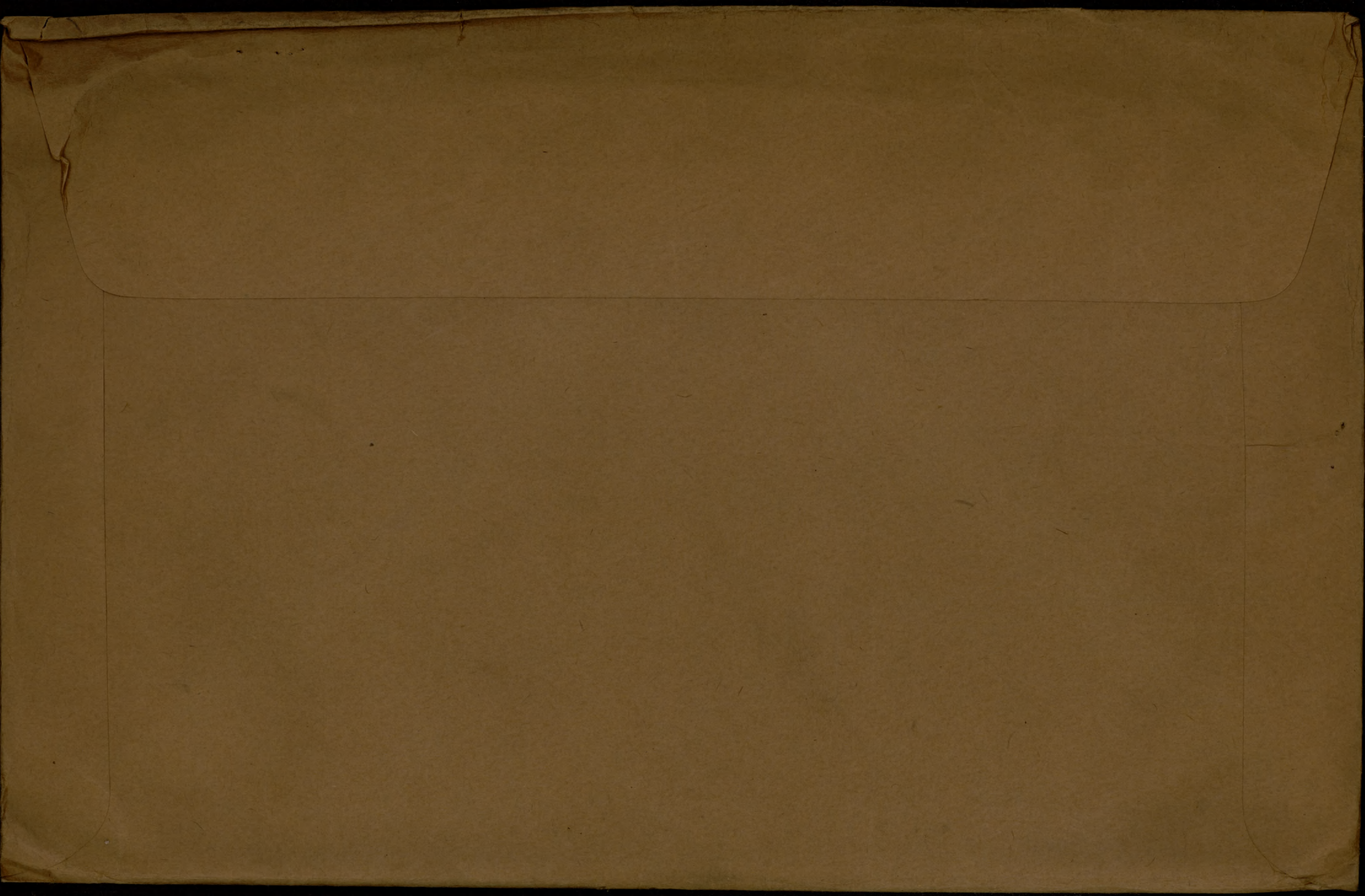
UNIT 100th GE

H. Q. FILE NO. 1759



38
2

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY	
S ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH	
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category	
TRAINING HISTORY SHEET (M.F.W. 113)						
1 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)					<i>2 Remot</i>	
1 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)						
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 <i>BAW 25009A</i>						
3 <i>Bd 73</i>						
1 <i>R122</i>						
<i>Paysheets</i>						



Original

115.511

ATTESTATION PAPER

No. 118254

Norman Adams

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS)

1. What is your name? Norman Adams
2. In what Town, Township, or Parish, and in what Country were you born? Co. Simcoe, Ont
3. What is the name of your next-of-kin? Wm. Adams, brother
4. What is the address of your next-of-kin? Rosetown, Sask. Canada.
5. What is the date of your birth? Oct. 30th 1890
6. What is your trade or calling? Teamster
7. Are you married? No
8. Are you willing to be vaccinated or re-vaccinated? Yes
9. Do you now belong to the Active Militia? No
10. Have you ever served in any Military Force?
If so, state particulars of former Service. No
11. Do you understand the nature and terms of your engagement? Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes

N Adams (Signature of Man.)
A. Shannon (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

N Adams (Signature of Recruit.)
A Shannon (Signature of Witness.)
 Date May 28th 1915
Regina, Sask.

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Norman Adams, do make Oath, that I will be faithful and bear true Allegiance to His Majesty **King George the Fifth**, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

N Adams (Signature of Recruit.)
A Shannon (Signature of Witness.)
 Date May 28th 1915

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 Regina, Sask. this 28th day of May 1915
H. Washington (Signature of Justice.)

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

Lieut. Colonel
O.C. 10th B.C.F.
R. C. S. F.
 (Approving Officer.)

DESCRIPTION OF Norman Adams ON ENLISTMENT.

Apparent Age 24 years 0 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 6 ft. 2 ins.

Chest measurement { Girth when fully expanded 37 ins.
 Range of expansion 2 ins.

Complexion Dark

Eyes Blue

Hair D. Brown

Religious Denominations { Church of England Yes
 Presbyterian
 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 May 28th 1915

Place Regina Sask

W. James
Capt
 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

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

Date May 28th 1915 B. S. Sanner (Signature of Officer.)

Lieut. Colonel
56. 10th Bulb R. C. S. F.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

WAR SERVICE BADGE

CLASS "A" No. _____

THIS IS TO CERTIFY that No. 115511 (Rank) Driver

Name (in full) Norman Adams enlisted in
the 10th C.M.R.R.

CANADIAN EXPEDITIONARY FORCE at Reims on the 28th
day of May 1915

HE served in England & France, 10th Batta, C.E.

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

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

Age 27 years

Height 6 feet 2 inches

Complexion Dark

Eyes Blue

Hair Dark brown

N. Adams

Signature of Soldier

Marks or Scars _____

Nil

Date of Discharge

No. 2 District Depot
Toronto, Ont.

JUN 18 1919

Issuing Officer

[Signature]
S.C. No. 2 District Depot.

Rank

JUN 18 1919

Date _____ 19 _____

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.

ORIGINAL

115511

MEDICAL HISTORY SHEET.

Surname Adams Christian Name Norman

Examined { on 28th day of May 1915
at Regina Sask.
Birthplace { City or Town Simcoe
County Ontario.

Approved by AW James
Rank Capt. M.O.

Apparent age 24
Trade or occupation Stenographer.
Height 6 Feet 2 Inches.
Weight 145 Lbs.
Chest measurement { Minimum 35 inches.
Maximum expansion 37 inches.
Physical development Good
Small-Pox Marks None

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

Vaccination Marks { Arm Right Left.
Number 2
When Vaccinated last Childhood
(a) Marks indicating congenital peculiarities or previous disease None

Date	Result	VACCINATIONS.
<u>Oct 16/15</u>	<u>P.</u>	<u>J J Gray Capt.</u> M.O.
		M.O.
		M.O.

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

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>July 28/15</u>	<u>P.</u>	<u>1. AW James Capt.</u> M.O.
<u>Oct 16/15</u>	<u>P.</u>	<u>2. J J Gray Capt.</u> M.O.
<u>Oct 23/15</u>	<u>P.</u>	<u>3. J J Gray Capt.</u> M.O.

Enlisted on 28th day of May 1915 at Regina Sask.

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>10th CWRB</u>	<u>115511.</u>	<u>Good</u>	<u>May 28/1915.</u>
Transferred to..	<u>4th Div. Cav.</u>	<u>✓</u>	<u>✓</u>	<u>april 24th 1916.</u>
	<u>4th Div. Engineers</u>	<u>✓</u>	<u>✓</u>	<u>June 12/1916,</u>
	<u>10th Fid. Co</u>			

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.

Surname

Adams

Christian Name

Norman

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				
	Regina Inst May 28/15										
	Camp Hughes June 7/15										
	Postage Station Nov 13/15	16	Jan	16	28	Jan	16	Otorrhea	13	Discharge from ear. Complete recovery	

D B Meely Capt

R Phillips

Group 24

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. 115511 Rank Drw Surname A. D. AMES
(Given name in full)
N. O. R. M. A. N.
Unit or Corps 10th Bn. C. E. Birthplace Chawale Ant.

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

1. GENERAL DESCRIPTION:

Physique good Weight 140 lbs. Height 6 ft. 2 in. Colour of Eyes Blue
Nutrition good
Pulse 72 reg.
Condition of arteries soft
Vision Rt. 4/2 Left 4/2
Hearing (conversational voice) Rt. 21 ft.
Left 21 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.

Otitis media 16.1.16 OAP

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Witley (Overseas)

Date 19-5-19

Signed C. Bond 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 X. H. Adams

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

THIS SECTION FOR USE IN CANADA—

Examined at (Canada)

Date

Signed M.O.

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

Signature

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

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

[OVER]

WAR SERVICE GRATUITY

2
Certified this document
checked with
Regimental documents

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

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

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

1. Christian names *Norman* 2. Surname *Adams*
3. Rank *Drw.* 4. Original Unit *10th CML Regt* 5. Reg. No. *115511*
6. Address, in full, to which future payments of gratuity are to be forwarded
*Canadian Bank of Commerce
Regina, Sask*
7. Date of enlistment in the C.E.F. *May 28, 1915.*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. *Not applicable*
9. Relationship of such dependent *Not applicable*
10. Address, in full, of such dependent *Not applicable*
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *Not applicable*
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:—
gpc.
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?
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service.
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. *3 Years and 352 Days*
*Canada 338 Days with 10th CMLs = England 30 Days with 10th CMLs,
70 Days with 10th Field Coy = France 1 Year & 290 Days with 10th Field Coy and
354 Days with 10th Can. Engr. Btn.*
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *No*
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *No*

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. *no.*

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid. *no.*

g.p.c. 20. Have you been issued with a War Service Badge? If so what class? *no.*

21. Have you, during the present war, served in the Imperial Forces? *no.*

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *no.*

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *no.*

(b) If so, was such reversion in consequence of misconduct or inefficiency? *no.*

24. Are you now serving in the C.E.F.? *18/6/19* If not, give:—(a) Date of discharge

(b) Reason for discharge *DEMOBILIZATION*

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.

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

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?

(b) If so, are you in receipt of full pay and allowances from that Department?

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: *H. Adams*

Place of Residence: *1428 Lorne St., Regina, Sask.*

Declared before me at: *Witley Camp.*

This *15th* day of *May* 19*19*.

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

J. Stalman Major C.E.

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

Overseas Military Forces of Canada.

Original

ASSIGNMENT OF PAY (N.C.O.'s and Men).

From Paymaster *Hth Cdn Divl Engrs* Uni
R.E.F. France

To the CHIEF PAYMASTER,
Westminster House, 7, Millbank, London, S.W.

Date *February 3rd* 1918.



R 354
10/4/18
Beaulieu
D of E 28/15

I beg to notify the following

- New Assignment,
- Change of Assignee,
- Change in Amount,
- Change of Address,
- Renewal of Assignment,

Strike out where Inapplicable.

Effective from *April 1st 1918*

Original Unit.

No. *112411*

354

Particulars of Soldier.

Rank *Driver*

Present Unit.

Name *Adams R.*

Hth Cdn Divl Engrs.

Name of Assignee.....

Amount of Assignment.

Particulars of Assignment already in force (if any).

Address.....

Relation of Assignee.....

nil

Card 10.4/18
W.D. Smith

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

A. 3 M. Forms are not to be rendered.

Name of Assignee..... *Mrs Fanny Brown*

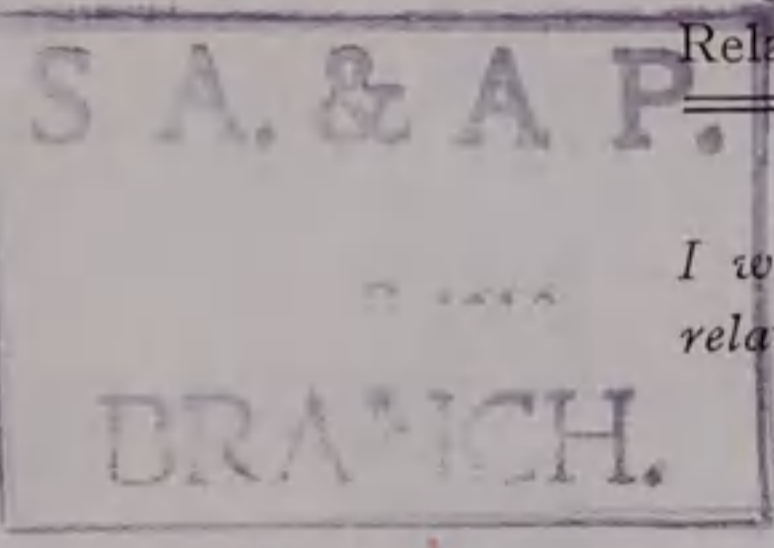
Amount of Assignment.

Particulars of New or Change of Assignment.

Address..... *63 Norfolk St, Guelph, Ont. Canada*

\$ 15.00

Relation of Assignee..... *sister*



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

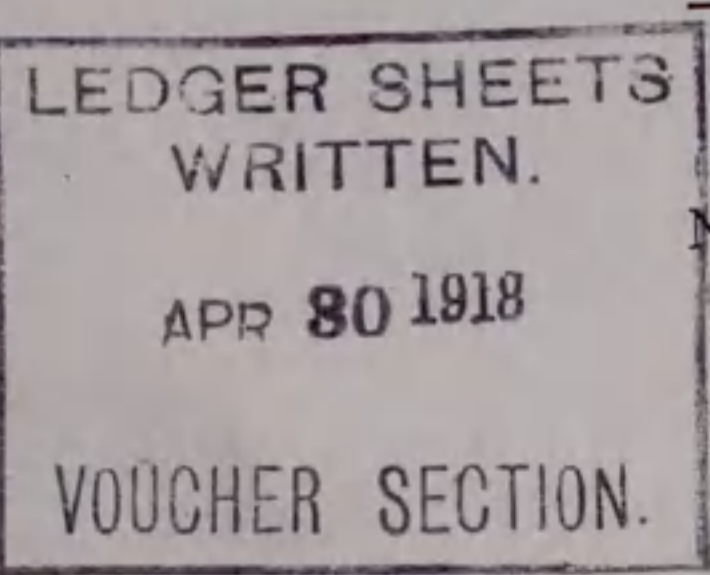
I have satisfied myself that new Assignee is a dependent relative and have noted same in Active Service Pay Book.

R. Adams
Signature of Assignor.

R. Proop Capt
Signature of Paymaster.

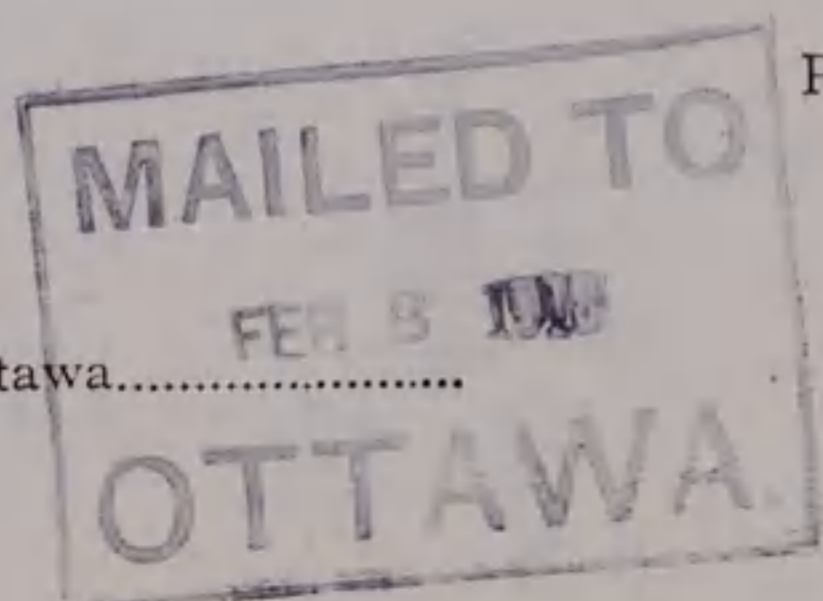
INSTRUCTIONS.

All new Assignments, Changes in Amounts Assigned, Names of Assignees, Change of Addresses, are to be notified on this Form. Changes in the amounts assigned are only permitted to be made twice a year, i.e., on 1st April and 1st October. Such notification of changes to be in the hands of the A.P.M. not later than April 15th and October 15th. Assignments from N.C.O.'s and Men, payable in the United Kingdom, are only to be allowed in favour of dependent relatives. Assignments to Banks in England are not permitted, but money may be assigned to Banks in Canada, if desired.



FOR USE OF CHIEF PAYMASTER ONLY.

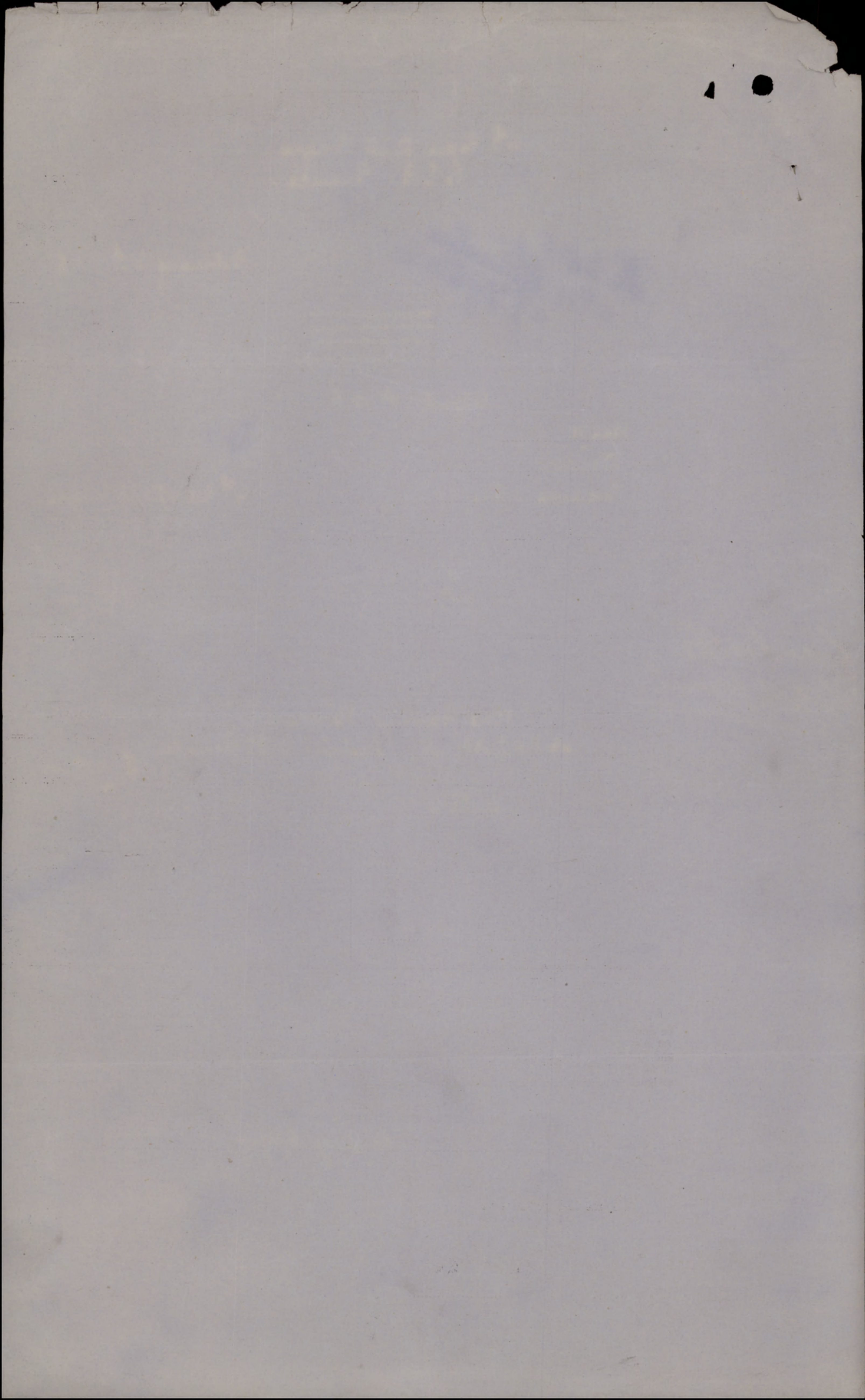
Noted on Ledger Sheet..... *Feb 6/1918*



Pay Sergt. (unit)..... *Hth Cdn Divl Engrs*

Date mailed to Ottawa.....

Checked.....
For Paymaster II.



GROUP 24

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

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) ADAMS N

REGIMENT 10 Canadian Engineer RANK Driver No. 115511

Date of Examination in England 19/5/49 Date of Examination in France _____

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



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 7. 15. 19. 32.

2. EXTRACTIONS 30.

3. CROWNS 6. 9. 10.

4. DENTURES
- (a) Full Upper
 - (b) Part Upper
 - (c) Full Lower
 - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? No.

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

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

Signature of Dental Officer [Signature] Capt

RECEIVED
OFFICE OF THE
DIRECTOR OF THE
BUREAU OF LAND MANAGEMENT

NOV 21 1964

63-3-1000

RECEIVED
NOV 21 1964

RECEIVED
NOV 21 1964

NOV 21 1964

NOV 21 1964

4/27-15

MEDICAL EXTRACT OF INFORMATION FORM

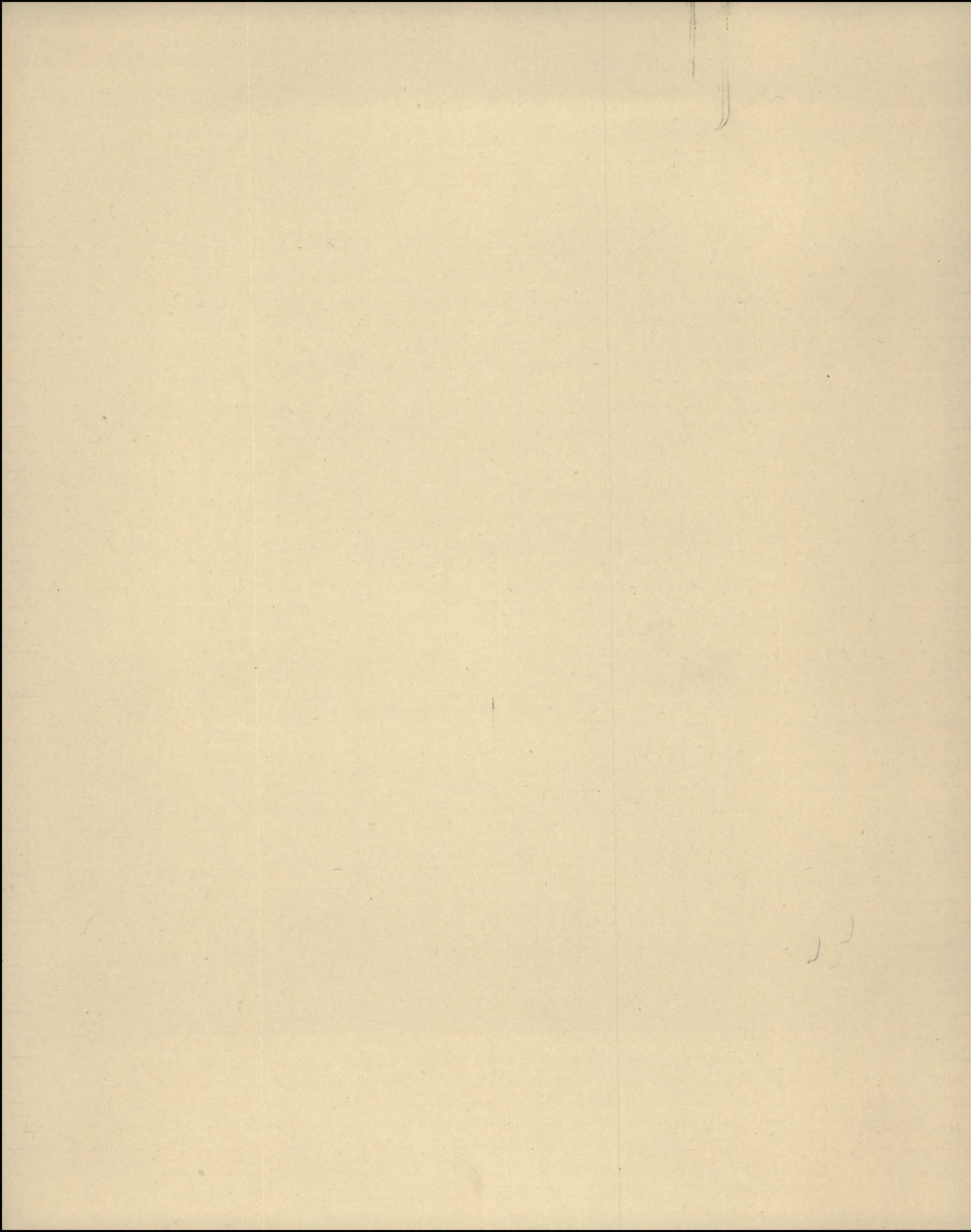
Regt'l No. 1155-11

NAME Surname *Adams*

Christian Names *Hotman*

	CODE No.	1	2	3	4	5	6
No. of Admissions	1	1					
Invalided to Canada		0 0					
Married or Single	2	2					
Unit	3	270					
Enlisted at	4	961					
Birth Place	5	05					
Age		25					
Occupation	6	72					
Rank	7	3					
Date of Admission to Hospital		1613					
Days off Duty		012					
W. or D.	8	0					
Wound (or Disease)	9	00245					
(Wound or) Disease	10						
Operation	11						
Operation							
Place of Treatment	12	7					
Check							
Results	13	0					
No. of times a Casualty	14	1					

28-1-16



W.W.J. Rank *W.W.* Name **ADAMS Norman.**
 Unit **Dft. 4/Div. Cav. To U.C.D.** What Unit? }
 Place and Date of Enlistment **Regina, Sask.**
28th. May 1915.
 Name and Address, Next-of-Kin **Wm. Adams.**
Rosetown, Saskatchewan, Canada.

Reg'l No. **115511.**

Married or Single **Single.**

Place of Birth **Co. Simcoe, Ontario.**

Relationship **Brother.**

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

Discharge, Date and Place Reason

Character

15032
 N/E. R.B. No.
 File R.L.
 Category **PANLOR**

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>Arrived in England</i>		7 MAY 1916	<i>S.S. olympic</i>
<i>13.6.16</i>	<i>of 4th Div. Cav.</i>	<i>S.O.S. on transfer to 4th Div. Engrs</i>	<i>Bramshott</i>	<i>12-6-16</i>	<i>Pt 2 D.O. 31</i>
<i>13-6-16</i>	<i>of 4th Div. Eng</i>	<i>S.O.S on transfer from 4 Div Cav</i>	<i>Bramshott</i>	<i>12-6-16</i>	<i>Pt 2 D.O. 33.</i>
12 AUG 1915	"	<i>Embarked for France.</i>	<i>Spr "</i>	10 AUG, 1916	<i>" 93</i>
<i>2.7.18</i>	<i>10 Bn Ck.</i>	<i>T.O.S. from 107 Co. Ck.</i>	<i>" Field</i>	<i>29.5.18-191</i>	<i>9 107 Co 28 927</i>
<i>15.5.19</i>	<i>F. Wing Ck.</i>	<i>T.O. S from 10 Bn. C.E</i>	<i>- Wilby</i>	<i>14.5.19</i>	<i>19</i>
			83-I	6-6-19.	
E-E-RE	P. WECCC	SOS TO CANADA	<i>Witley</i>	<i>6.6.19</i>	<i>34.</i>

A.F.B. 103 CHECKED

15 AUG. 1916

CERTIFIED CORRECT.

17 AUG 1916

CAN. RECORDS, LONDON.

U.S.B. Class "A"

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

M. F. W. 54.

150M. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps

~~10th O'Sea's B.M.R.R.~~ 4th Div Cavalry

Regimental No.

115511

Rank

Private

Name

Norman Adams

Enlisted (a)

May 28/15

Terms of Service (a)

2nd War

Service reckons from (a)

May 28/15

Date of promotion to present rank.

} 5

Date of appointment to lance rank

}

Numerical position on roll of N. C. Os.

}

Extended

Re-engaged

Qualification (b)

Transfer

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				
		Embarked - Canada		Apr 23 rd /16	
		Arrived - England		May 7/16	
June 12/16		Transferred to 4 th Div Cavalry	Bransford	June 12/16	Reg 31 - Part II June 13/16
		Proceeded for service overseas			
12-8-16	landing Return	Disembarked	Naunc	12-8-16	
9/11/16	oe	5 days F.P. No. 2. Conduct to the prejudice of good order military discipline" as that he did ill treat a horse consigned to his care - 4/11/16.	Field	5/11/16	B. 2069 P. 110. 121 of 19/11/16

(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.

115511-Dr. Adams N.

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				
22-9-17	O.C.	On Leave		18-9-17	B. 213. P/59
6/10/17	O.C.	Rejoined from leave		30-9-17	B. 213. P/61
22-11-17	O.C. 10/11/17	Punished to 7 days I.P. No. 1-19-11-17 for "Absence from leave line request without permission from 6 P.M. to 8.30 P.M. 18/11/17"			B. 2089. P/r. 74
29-11-17	O.C.	Spent to 7 days I.P. for "Making an improper reply to his Superior Officer."	Field	19-11-17	B. 2089. P/r. 75
		S.O.S. to 10th BATTN C, E		28 29 5 '18	D O 28
		TO S 10TH BATTN C E		29 30 5 18	D O No 1
2/11/18	O.C.	Granted 14 Days L.O.A. to H.K.		28/10/18	D.O. 43 a/
14/12/18	do	Rejoined		15/11/18	B 213
		Proceeded to England		1/5/19	

Canadian Section, G. H. Q. 3rd Echelon, for Lt.-Col., A. A. C.

OFFICER I/O RECORDS,
"P" WING C.C.C. WITLEY.

H M T OLYMPIC
Sailed Southampton 6 8 19
Arrived Halifax 6 12 9

S.O.S. O.M.F.C. TO C.E.F.
FT. H ORDER No. 44 DATED 9/1/19

2

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

M. F. W. 54. (A. F. 93.

350M.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps
Regimental No. 115511 Rank Plt Name Adams Norman
C. E. F.

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

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

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
JUN 6 1919	O. S.	T. O. S. No. 2 DISTRICT DEPOT, TORONTO	1919	PART II D.	172
JUN 18 1919	S. O. S.	(DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT,		PART II D.	172.

Adams Norman
Lieut.
For O. C. No. 2 District Depot.

(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.]

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

A

517

Apr 10 1918

28.5.15

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

15.00			
-------	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.				
Rank	Promoted	Reverted	Discharge	
Soldier's Name				
Battalion	6. M. R. S.			
Beneficiary				
Relationship				
Address				

Name			
Address			
Change of Address			
1	MRS. FANNY BROWN,		
2	63 NORFOLK ST.,		
3	GUELPH, ONT.,	15	15.00
4	% 115511 DVR. N. ADAMS		
	FIFTEEN DOLLARS		

Date	Cheque No.	Amount S/A	Amount A/P	Total
1918	X 11460		15	15
April	H 247		15	15
May	H 10414		15	15
June	B 13354		15	15
July	Y 26308		15	15
AUG	H 28782		15	15
SEP	H 35390		15	15
OCT	H 52015		15	15
NOV	H 50117		15	15
DEC	B 62482		15	15
JAN	B 69568		15	15
FEB	H 76723		15	15
MAR	D 82513		15	15
APR	G 338		15	15
MAY	A 5014		15	15
JUN	A 9012		15	15
			225	225

July 098-11-2

REMARKS

H247 mailed 27 4/8 + 11460 banc. 9/18
MRO 16 26/4/18

AUTHORITY FOR NEW ACCT.

M. F. W. 128
400M-617-1772-39-1141
L. L. 22320-M. & D. 2683.

A/c Closed 30/6/19
Ret'd per... Olympic
Date 12/6/19 M.F.W 187 20/6/19
Clerk M.S. 2 J. Collins... MRO 128049.

AUDITED.

AUTHORITY FOR NEW ACCT. 2. M. 3 3/8
M. R. Thorne

No. 10153
 115511 Sept. Pay list.

RANK *Plt*

NAME *Adams N*

T.O.S. 29-5-15

UNIT *10th Cav. Mounted Rifles.*

D.O. 30/5/15

M. D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 May 30	1915 May 31	✓		
	June	✓		
	July	✓		
	Aug.	✓		
	Sept.	✓		
	Oct.	✓		
	Nov.	✓		
	Dec.	✓		
1916 Jan. 1	1916 Jan. 31	✓		
	Feb.	✓		
	Mar.	✓		



MARRIED

SINGLE

yes,

WIDOWER

TRADE OR CALLING

Teamster

RELIGION

Church of England.

DESCRIPTION.

APPARENT AGE

24

YEARS

MONTHS

HEIGHT

6

FEET

2.

INCHES

CHEST MEASUREMENT

37

INCHES

EXPANSION

2.

INCHES

COMPLEXION

Dark

EYES

Blue

HAIR

W. Brown.

DISTINGUISHING MARKS

nil.

MEDICAL EXAMINATION.

PLACE

Regina, Sask.

DATE

May, 28th 1915.

Present Address: - not stated.

82 CARD NO.
Soldier's Name 18-6-19
FOLL
Do. 172 of 21-6-19
200

SURNAME. *Adams.*

CHRISTIAN NAMES *Norman.*

REGL. No. *115 511* RANK *Dr.*

UNIT *4th' Can. Div. Cavalry.*

FORMER CORPS *nil.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Adams, Wm.*

RELATIONSHIP TO SOLDIER *Brother*

ADDRESS *Rosetown, Sask.*

COUNTRY OF BIRTH *Canada, Simcoe, Co. Ont.* DATE *Oct, 30th, 1890*

PLACE OF ATTESTATION *Regina, Sask.* DATE *May, 28th, 1915*

*o/p 28-4-16 410
2*

*146136-19347
112*

"OLYMPIC" 12-6-19

DISPERSAL "I" 2052

AUDITOR PAYMASTER

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

REGT. No. 115011

RANK Dvr

NAME (IN FULL)

ADAMS, W.

18

M. OR S.

NEXT OF KIN RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? DATE EFFECTIVE

TO WHOM PAID RELATIONSHIP

ADDRESS

ORIGINAL UNIT C.E.F. 10th C.M.R.

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 28/5/15 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY \$ 15 DATE EFFECTIVE 30/6/19 closed by Ottawa

PAYABLE TO Mrs Fanny Brown

ADDRESS 62 Norfolk St. Guelph Ont.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE DATE REASON AUTHORITY IF ENTITLED TO POST DISCHARGE PAY

Toronto 18-6-19 Demob Do 172 Yes

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL 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
21/5/19				379.05													379.05	by Bal Eng L.P.C.
21/6/19	21	110	2310					24.33										116/19 do a 16/19 P.A. Clothing allowances 1st payment W.S.G. June.
								4.87										Boat & Stamp
				128.10				45.95										W.S.G. Paid as above
																		3 days P.A. over 100 hrs
18 Aug				420														1st W.S.G. Paid by #2 O.D.
																		W.S.G. Paid in full

MARRIED OR SINGLE *Single*
 PLACE OF BIRTH *Simcoe Co. Ontario*
 NAME AND ADDRESS OF NEXT OF KIN *William Adams
 Reservoir Sask. Canada.*
 RELATIONSHIP OF NEXT OF KIN *Brother*

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. *115511* RANK *Private Driver* NAME *Adams, Norman*
 IF IN PERM. CORPS | WHAT UNIT UNIT # *Div Cavalry* TRANSFERRED TO *4 Div Engineers* DATE *13/6/16* AUTHORITY *Bo. 31*
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY
 PLACE OF ATTESTATION *Regina Sask.* TRANSFERRED TO DATE AUTHORITY
 DATE OF ATTESTATION *May 28th 1915* TRANSFERRED TO DATE AUTHORITY
 ASSIGNED PAY MONTHLY \$ *15.00* DATE EFFECTIVE *1-11-1918* *P.M.* A.M. *3-2-18*
 PAYABLE TO *Mrs Fanny Brown 63 Norfolk St. Quelp. Canada* RELATIONSHIP *Sister*
 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) *1640 francs C.D.*

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		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4				CREDIT	DEBIT					
			\$	c.			\$	c.			\$	c.																				No.	DATE
<i>1916</i>																																	
<i>Apr 30</i>																																<i>Balance Canadian Pay sheet.</i>	
<i>May-31</i>	<i>31</i>	<i>1.00</i>	<i>31 00</i>	<i>31</i>	<i>12</i>	<i>3 10</i>						<i>34 10</i>	<i>2</i>	<i>9</i>			<i>17 03</i>	<i>9 73</i>					<i>26 76</i>	<i>15 34</i>									
<i>June 1-12</i>	<i>12</i>	<i>1.00</i>	<i>12 00</i>	<i>12</i>	<i>12</i>	<i>1 20</i>						<i>13 20</i>												<i>28 54</i>								<i>Transferred to Div Eng. 13/6/16</i>	
<i>June 13-30</i>	<i>18</i>	<i>1.00</i>	<i>18 00</i>	<i>18</i>	<i>10</i>	<i>1 80</i>						<i>19 80</i>		<i>63</i>	<i>15 6 16 81 206 16</i>			<i>9 73</i>	<i>7 30</i>				<i>17 03</i>	<i>31 31</i>							<i>forfeit 4 days call on 13.6.16</i>		
<i>July 1-31</i>	<i>31</i>	<i>1.00</i>	<i>31 00</i>	<i>31</i>	<i>10</i>	<i>3 10</i>						<i>34 10</i>		<i>130</i>	<i>15 6 16</i>			<i>7 30</i>		<i>4 40</i>	<i>11 70</i>	<i>53 71</i>									<i>7</i>		
<i>Aug. 1-31</i>	<i>31</i>	<i>1.00</i>	<i>31 00</i>	<i>31</i>	<i>10</i>	<i>3 10</i>						<i>34 10</i>	<i>170</i>	<i>31/1/16</i>			<i>4 87</i>				<i>4 87</i>	<i>82 94</i>											
<i>Sept. 30</i>	<i>30</i>		<i>30 -</i>	<i>30</i>		<i>3 -</i>						<i>33 -</i>	<i>216</i>	<i>4-8-16 186 26-8-16</i>			<i>2 62</i>	<i>2 62</i>				<i>5 24</i>	<i>110 70</i>										
<i>Oct. 1-31</i>	<i>31</i>		<i>31 -</i>	<i>31</i>		<i>3 10</i>						<i>34 10</i>		<i>247 19.9.16 287 1.10.16 319 15.10.16 315 1.11.16</i>			<i>2 61</i>	<i>2 61</i>				<i>5 22</i>	<i>139 58</i>										
<i>Nov 1-31</i>	<i>30</i>		<i>30 -</i>	<i>30</i>		<i>3 -</i>						<i>33 -</i>					<i>2 62</i>				<i>2 62</i>	<i>161 84</i>		<i>105 -</i>	<i>56 84</i>						<i>5 dys. F.P. No. 2, cruelty to horse 4.11.16. P. II, 121</i>		
<i>Dec. 31</i>	<i>31</i>		<i>31 -</i>	<i>31</i>		<i>3 10</i>						<i>34 10</i>	<i>386</i>	<i>15.11.16 427 1.12.16</i>			<i>2 62</i>	<i>11 33</i>				<i>13 95</i>	<i>181 99</i>		<i>120 -</i>	<i>61 99</i>							
<i>Total Field Allowance 1917</i>	<i>Jan. 1-31</i>	<i>31</i>	<i>1.00</i>	<i>34 10</i>								<i>34 10</i>	<i>458</i>	<i>15.12.16 488 1.1.17</i>			<i>2 62</i>	<i>2 62</i>				<i>5 24</i>	<i>210 85</i>		<i>135 -</i>	<i>75 85</i>							
	<i>Feb. 28</i>			<i>30 80</i>								<i>30 80</i>	<i>586</i>	<i>23/1/17</i>			<i>2 62</i>					<i>2 62</i>	<i>237 03</i>		<i>150 -</i>	<i>84 03</i>							
	<i>Mar. 31</i>			<i>34 10</i>								<i>34 10</i>	<i>646</i>	<i>23/1/17 804 8/3/17 4/5/6 15/7/17 888 25/7/17</i>			<i>2 62</i>	<i>2 62</i>				<i>10 48</i>	<i>262 65</i>		<i>165 -</i>	<i>94 65</i>							
<i>Carried over</i>	<i>335</i>			<i>368 50</i>								<i>8 . 346 50</i>					<i>48 08</i>	<i>48 54</i>	<i>4 30</i>		<i>9 90</i>	<i>113 85</i>	<i>262 65</i>		<i>165 .</i>	<i>94 65</i>				<i>Carried over</i>			

Unit 4 to D.E.

A. P. nil

115111 Lt Adams M.

15⁰⁰/₁₀₀
1-1-1918

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		NO. OF DAYS	RATE				AMOUNT		1		2		3					4					CREDIT	DEBIT										
			\$	C.						No.	DATE	No.	DATE	No.	DATE	No.	DATE				No.	DATE						No.	DATE								
1914																																					
Apr 30	335		368	50				8		346	50							48	08	48	54	4	30			9	90	113	86	262	65	165	94	65	Brought over		
May 31	30	1 ⁰⁰ / ₁₀₀	33					33		33																											
June 30	31		34	10				34	10	46	50	117							2	62							5	23	324	52	195	129	52				
July 31	31		33					33		33									2	61							4	5	35	352	17	210	142	17			
Aug 31	31		34	10				34	10																												
Sept 30	33		33					33																													
			567	50				8		577	80																										

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE
Oct.			434						434
	P. Pay	34	10	AR 535 1-9-17	267				
		34	10	AR 546 " 15-9-17	101	06			
				AR 518 " " "	268				386
Nov	P. Pay	33	-	AR 630 " 1-10-17	446				32
				AR 675 " 15-10-17	357				270
				7 Days F.P. #2		770			
				AR 711 " 1-11-17	446				
				7 Days F.P. #2		770			
				AR 747 " 15-11-17	1249				395
1918		34	10	AR 800 " 1-12-17	446				53
Jan		67	10	AR 875 " 15-12-17	357				300
		34	10	AR 935 " 1-1-18	446				
Feb		34	10	AR 977 " 15-1-18	357				409
		30	80	AR 1016 " 1-2-18	446				11
					1249				315
Mar									427

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE
Mch									427
	P.P.			C. Pay					42
		34	10	AR 111 20-2-18	357				330
				AR 1736 9-3-18	803				

NUMBER

115511

RANK

Doc.

NAME

ADAMS, N.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
				Bal. Fwd.					377 22		
NOV	P. Pay.	33		cap.				15			
				2969 Details Paris 7/1/18	37 81						
				1084 10 th CCB. 3/1/18	13 06						
Dec.		34 10		cap.				15			
				1291 10 th CCB. 3/1/18	3 73						
JAN		34 10		cap.				15	379 32		
		101 20			54 10			45 -			
FEB		30 80						15			
				1391 10 th CCB. 1-15/1/19	3 73						
				1494 10 - Jan 16/13/17	3 73						
				1649 - 1-15/2/19	3 73						
				1744 10 th - 1-28/2/19	3 73						
MAR		34 10		cap.				15			
				1922 10 th CCB. 1-15/1/19	3 65						
				2017 - 1-6/3/19	3 65				372 -		
		64 90			23 22			30			
Apr.		33		cap.				15			
	May P & A.	34 10	70	10 th CCB. 4/4/19	17 44						
	Int on Defa Pay	36 26		- 1/15/4/19	3 49						
		103 36	99	- 15/2/19	3 49						
			206	- 2/1/19	3 49						
				cap. May				15		35	
				2377 "P" Salary 1/15/19	9 78				427 72		
		103 36			37 64			30			
June				2471 "P" B'cht. 6/1/19	48 67						
				4664 - 2/15/19	24 33				354 72		
					73 00						

392
103 36
495 36
57 91
437 45

* Strike out whichever inapplicable.

ASSIGNED PAY	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.	NAME:- <i>ADAMS Norman</i>
EFFECTIVE DATE:- <i>1-4-1918</i>		EFFECTIVE DATE:-		NUMBER:- <i>115511</i>
AMOUNT:- <i>\$15.00</i>		AMOUNT:-		PARTICULARS OF RANK OR APPOINTMENT

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.	AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
<i>Mrs Fanny Brown 63 Norfolk Street Quebec, Canada Stop - 1-6-19</i>				<i>DRIVER.</i>

- S.O.S. - Canada 6/6/19
S.L. 83 C.E.

UNIT AND TRANSFERS			
ORIGINAL UNIT:-	<i>4th Div. Cavalry.</i>		
DATE ACCOUNT FIRST OPENED:-	<i>1-5-1916.</i>		
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
<i>B.O. 31.</i>	<i>13-6-16</i>		<i>4th Div. Engrs</i>

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS				UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK			
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<i>6-5-19</i>	<i>2470</i>	<i>F.C.C.</i>	<i>45 67</i>			<i>2 Reg Bul</i>	<i>437 45</i>
<i>19-5-19</i>	<i>33444</i>	<i>P. Wing.</i>	<i>9 73</i>			<i>2 P.L. "</i>	<i>379 05</i>
			<i>58 40</i>				

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	<i>1 -</i>	<i>10</i>		

PARTICULARS OF RENDERING NON-EFFECTIVE: *Trans. to Canada 16/19 NR. 9496 20 5/19 CCC Bramhall MD 2*

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>March</i>	<i>Balance Forward</i>								<i>449 97</i>	<i>334 50</i>	
<i>April</i>	<i>Apr - Pay</i>	<i>33</i>		<i>C.A.P.</i>				<i>15</i>			
				<i>AR 1-10 4th D.C.</i>	<i>4 46</i>						
				<i>" 12 15-20 4th D.C.</i>	<i>3 57</i>						
									<i>459 89</i>	<i>334 50</i>	
<i>May</i>	<i>Apr - Pay</i>	<i>33</i>	<i>34 10</i>	<i>C.A.P.</i>				<i>15</i>			
				<i>AR 13 1-10 4th D.C.</i>	<i>4 46</i>						
				<i>" 12 15-20 4th D.C.</i>	<i>3 57</i>						
									<i>470 96</i>		
<i>June</i>		<i>33</i>	<i>34 10</i>	<i>C.A.P.</i>				<i>15</i>			
				<i>AR 12 1-10 4th D.C.</i>	<i>4 46</i>						
				<i>" 25 15-20 4th D.C.</i>	<i>3 57</i>						
									<i>480 93</i>		
<i>July</i>		<i>33</i>	<i>34 10</i>	<i>C.A.P.</i>				<i>15</i>			
				<i>AR 15 1-15 4th D.C.</i>	<i>4 46</i>						
				<i>" 12 15-20 4th D.C.</i>	<i>3 57</i>						
									<i>492</i>		
<i>Aug</i>		<i>33</i>	<i>34 10</i>	<i>C.A.P.</i>				<i>15</i>			
				<i>AR 15 1-15 4th D.C.</i>	<i>4 46</i>						
				<i>" 12 15-20 4th D.C.</i>	<i>3 57</i>						
									<i>503 96</i>		
<i>Sept</i>		<i>33</i>	<i>34 10</i>	<i>C.A.P.</i>				<i>15</i>			
				<i>" 613 10th C.E.B.N. 1-10/9/18</i>	<i>3 57</i>						
				<i>" 693 " 15-20/9/18</i>	<i>3 57</i>						
					<i>7 14</i>				<i>514 82</i>		
<i>Oct</i>		<i>33</i>	<i>34 10</i>	<i>C.A.P.</i>				<i>15</i>			
				<i>764 10th C.E.B.N. 1-15/10/18</i>	<i>3 73</i>						
				<i>865 " 15-20/10/18</i>	<i>3 73</i>						
				<i>948 " 26/10/18</i>	<i>111 93</i>						
				<i>2106 Details Paris 1/11/18</i>	<i>37 31</i>						
					<i>156 70</i>			<i>15</i>	<i>377 22</i>		

COMPILED BY *J. B. ...*
CHECKED BY *May*

LIST OF DISCHARGE DOCUMENTS.

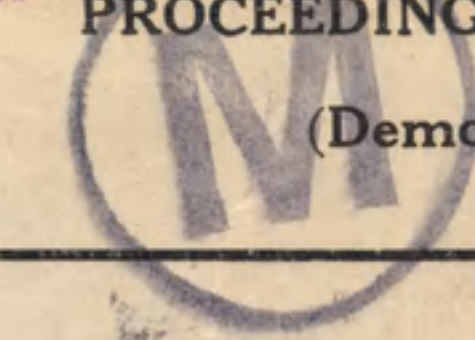
Attestation Paper, Triplicate.....	Militia Form W. 23
or Particulars of Recruit.....	Militia Form W. 133
Field Conduct Sheet.....	Militia Form W. 178 or A.F.B. 122
Casualty Form.....	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate.....	Militia Form W. 44
Certificate that missing documents are unobtainable.....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

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Medical Board (M.F.B. 227 or A.F.W. 129)
5. Dental Certificate (M.F.B. 465).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39) (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 2).
11. Equipment Statement Q.M.G. Form (D.O.S. 2), and Clothing.
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group 19
 Checked by No. 189219
 Date 4/6/19

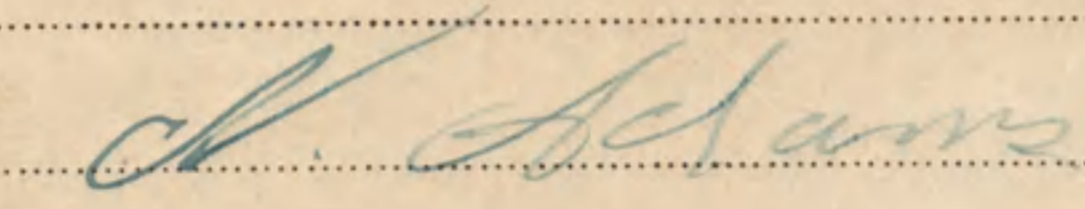
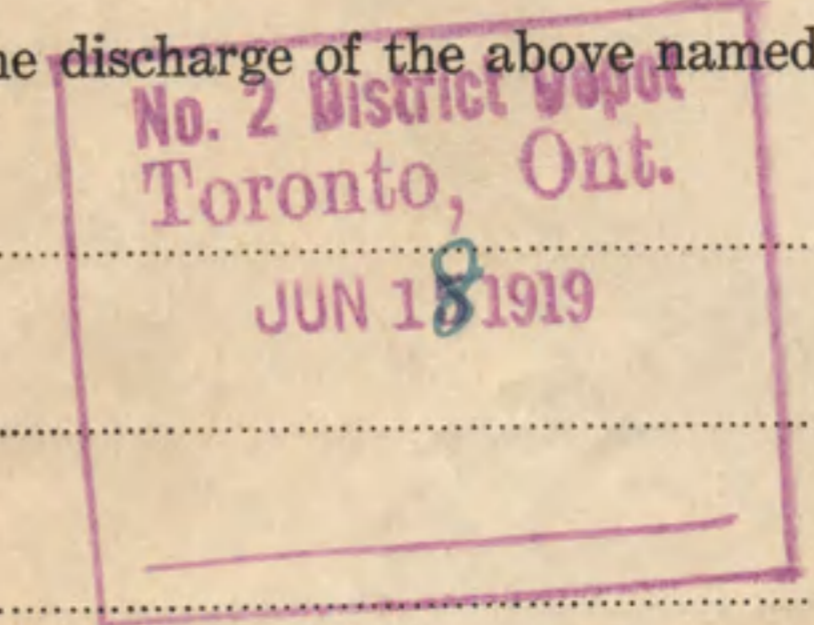
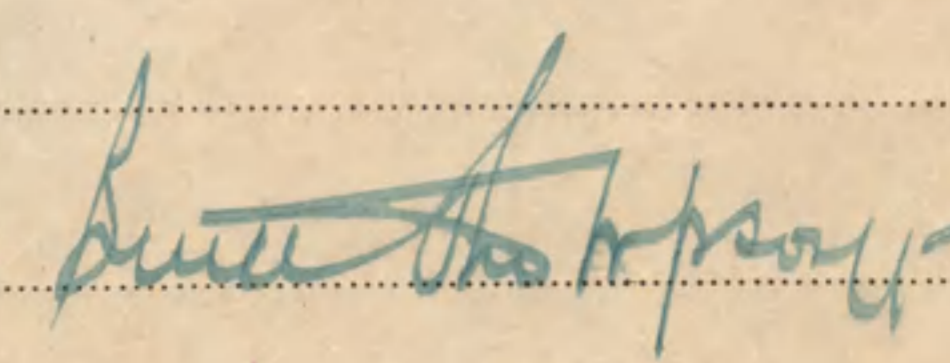
Group 24

WAR SERVICE BADGE
 CLASS "A" No. 133714



SHORT FORM.
 PROCEEDINGS ON DISCHARGE.
 (Demobilization.)

D.A. 1
 O.G. 1

1. No.	112511	H M F OLYMPIC	same Shympton 6 6 19
2. Rank.	Driver.	ARC	Halifax 6 12 9
3. Name.	* ADAMS, NORMAN.		
4. Unit.	10th BATT. C.E.		
5. Date of Discharge	JUN 18 1919	Place	TORONTO, ONT.
6. Reason for Discharge	DEMobilization.		
7. Authority.	No. 2 District Depot, Part II, D.O. No. 172.		
8. Proposed Residence after Discharge	1428. Lane St. Regina, Sask.		
9. CERTIFICATE TO BE SIGNED BY SOLDIER.			
I hereby acknowledge that at the undernoted place and date I received my discharge Certificate			
M. F. W. ?			
 Signature of Soldier.			
10. CONFIRMATION.			
The discharge of the above named man is hereby confirmed.			
Place			
Date			
Signature <u>For</u> O.C. No. 2 District Depot. (O. C. Discharging Unit.)			