ORIGINAL

ATTESTATION PAPER.

No. 745009

116TH OVERSEAS BATTALION C.E.F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS.)
1. What is your surname?	Stabback
1a. What are your Christian names?	Adam Elliott
1b. What is your present address?	Woodville - Victoria Co. Ont
2. In what Town, Township or Parish, and in what Country were you born?	Woodville - Victoria County Ont
3. What is the name of your next-of kin?	Adam Elliott ~~Mr. A. E.~~ Stabback
4. What is the address of your next-of-kin?	P.O. Woodville Ont
4a. What is the relationship of your next-of-kin?	Father
5. What is the date of your birth?	1897. 1st Sept.
6. What is your Trade or Calling?	Student
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.	34th Regt. 1 yr.
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.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Adam E. (Elliott) Stabback, 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.

A.E. Stabback (Signature of Recruit)

Date Nov. 1st. 1915 W. Keast. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Adam E. (Elliott) Stabback, 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.

A.E. Stabback (Signature of Recruit)

Date Nov. 1st. 1915 W. Keast (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 Uxbridge this 18th day of March 1916.

(Uxbridge) Wm. Hamilton J.P. (Signature of Justice)

M. F. W. 23.
200 M.—11-15.
H. Q. 1772-39-841.

Description of Adam E. Stabbach on Enlistment.

Apparent Age 19 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 7 ins.

Chest measurement:
- Girth when fully expanded ..... 34 ins.
- Range of expansion ..... 3 ins.

Complexion dark.

Eyes Brown.

Hair dark.

Religious denominations:
- Church of England .....
- Presbyterian X
- 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).

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 Feb 16th 1916. James Moore

Place Uxbridge 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.

Adam Elliot Stabbach 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.

Sam Sharpe (Signature of Officer)

Date Feb 16th 1916.

Dec

REGIMENTAL DOCUMENTS

NAME Stabback Adam Elliott. REGT. NO. 745009 UNIT 116th Bn H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3	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)					
2	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
4	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
3	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
1	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)		37113			
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
	Misc.					
1	Form 1 aw					
	Rnv					15-9
1	Payroll					15-9
1	RF 1-4-9					6 9
						4

W 2589
100M-11-18

No. 745009. RANK Corpl. NAME Stabback, a. E.

T. O. S. UNIT 109th Battalion.

Struck off from 116th Battalion 7.8.16 (S.O 125 of 14.4.16).

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
april 7.	april 30	✓		
May.		✓		
June.		✓		
July.		✓		

UNIT SAILED
JUL 23 1916

H. Q. FILE No. 649-

NAME Stabback A. E.

REGT'L. No. 745009.

RANK AND CORPS Cpl. 109th Bn. C.A.M.C. Ch. Epsom

CABLE	
NO.	DATE

NATURE OF CASUALTY

L. L. Job 86907- -M. & D. 16065.

M. F. W. 42—50m.-10-15.
H. Q. 1772—39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
2.	Connaught Aldershot.	6-7-16.	N.Y.D. Q.
25.	"Discharged"	21-9-16	Bronchitis. Disch
A467	No 6 Can Fd Amb.	1-3-17	P.U.O. (20th Bn)
A471	do " Can. Rest Stat. "	4-3-17	" " " " "
A474	To 4 Can. Fld. Amb	4-3-17.	P.U.O.
A474	To 6 " " "	8-3-17	" " "
A477	Ret from Base: Rej. unit	17-3-17	" " " (20th Bn)
A486	No 2 Australian Gen. Wimereux	6-4-17	" " " slt.
B319	The cottage, Southport	12-4-17	" " " (" ")
B.383	Mil Cons. Epsom	4-7-17	" " "
B411.	" Disch. "	10-8-17	" " " (" ")
C462	(2) Mil. Conval. Woodcote Rk Epsom	13-2-19 2-3-19	Varicocele
C530	Invalided to Can "		Oper. Lt.
	S.L. 5-01 M.D.2	23-5-19	Varicocele L oper.

LEDGER No. 462. SERIAL No. B.40933. 26

REG. No. 745009. NAME Stabback. A. E.

RANK L. cpl. CORPS C.A.M.C. AGE 20 SERVICE C 5/12 C 2 4/12 7 7/12

	HOSPITALS	DATE OF ADMISSION
1	5/5 Spadina Mil Toronto	4.6.19.
2		
3		

DIAGNOSIS (09) Varicocele Lt side

TRANSFERRED TO Parent Military 23.6.19.

DISPOSITION Cas Co SD.2. 7.10.19 CATEGORY

M.F.W. 2553.
1126-D.P.-50M-12-18.
1772-39-1832.

P.T.O.

REMARKS:

FORM R. 149.
7106—250m—7/2/17.

Adam Elliott

Name STABBACK *Rank* Pte. *Reg. No.* 745009

Unit 20th Battalion.

Next of Kin Canada.

Date 1917.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1-3	No. 6 C. F. A.		P.U.O.	A467		
4-3	Can. Rest Stat.		do.	A471		
4-3	No. 4 C. F. A.		do.	A474		
8-3	No. 6 C. F. A.		do.	A474		
17-3	Rep.from Base. Rej. Unit.		do.	A477		
6-4	No.2 Aust.G.H.Wimereux.		P.U.O.Slt.	A486		
12-4	Cottage Hsp.,Southport.		do.	B319		
4-7	M.C.H. Epsom		Do	B383		
10-8	Discharged.		do	B411		

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

a.a.B.

Number 745009 Rank Cpl. B

Surname STABBACK.

Christian Name Adam Elliott. V

Units 20th Bn. Can. Inf. Theatre of War France.

Date of Service 6-10-16.

Remarks

Latest Address C/o P.O. Woodville, Ontario.

Roll No. B Page 12337

200m-2-21.M.

DESP APR 20 1922
REGN. NO. 10249

R. 149.

Name Stabback A. Rank Cpl. Reg. No. 745009

Unit 109th Battn

Next of Kin

Date	Movement	Place	Casualty	List No.	Notified N/K. O.	W.O. List
6.4.16	Connaught	Aldershot.	N.Y.D	2.		
21-9-16	"		Bronchitis	20		

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

Form R. 149. ADAM. ELLIOT.

Name STABBACK Rank ~~Pte~~ a/cpl Reg. No. 745009

Unit 3 CCH. Epsom CAMC

Next of Kin CANADA

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
2.3.	19	Mil. Con. Epsom.		Varicocele L. Oper.	C.	462		7971
23	5	Inv. to Canada 501-2		"	C 530	2		9094

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

No. 745009 RANK Pte NAME Stabback A. E.

T. O. S. 4-10-15 (G.O.16 of 20-1-16) UNIT 34th Regiment (Ontario)

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
Oct 4	Oct 31	✓		
Nov 1	Nov 30	✓	now shown on 116th Bn Paylist	Nos. Paylist.
1916	Dec 1916	✓		
	Jan	✓	Pro. Lce. Corpl. 7-1-16	D.O. 46 of 25-1-16
	Feb	✓		
	Mar	O.K.		
Apr. 1	Apr. 6	O.K.	Trans. to 109th Bn, 6-4-16	O121-H.

UNIT SAILED
JUL 23 1916

(851-8-19-158)

SURNAME. Stabback,	M D. 2 CARD NO.
CHRISTIAN NAMES Adam Elliott	S.O.S Dis. 10-10-19. (M.4) FOLL.
REGL. No. 745009. RANK Cpl.	DO 281 g 8-10-19 220

UNIT 109th Bn.

FORMER CORPS 34th Regt. (Vyr.)

NEXT OF KIN.	CHANGE OF ADDRESS
NAMES IN FULL Stabback, Adam Elliott	
RELATIONSHIP TO SOLDIER Father	
ADDRESS Woodville, Ont.	

COUNTRY OF BIRTH Canada, Woodville, Ont. DATE Sept. 1st 1897.

PLACE OF ATTESTATION Uxbridge, Ont. DATE Mar. 8th 1916.

Sailed from Halifax per. S.S. Olympic 23/7/16 - 488/33

L. L. 94504. M. & D. 6512. M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

R/C. 2-6-19. 340/15 (CBI)

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Student RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 19 YEARS MONTHS

HEIGHT 5 FEET 7 INCHES

CHEST MEASUREMENT 34 INCHES EXPANSION 3 INCHES

COMPLEXION Dark EYES Brown HAIR Dark

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Uxbridge, Ont. DATE Feb. 16th 1916.

Present address, Woodville, Ont.

Stabback

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
~~Staback~~	A.E.	745009

Rank	Unit	Co.	Troop	Batty.
Cpl.	109th Bn. (20th Batt)	CAMC		

H. Epsom.

Hospital	Date of Admission
Connaught Aldershott	6.7.16
Transferred #6 Can. Fld. Amb.	Hosp. 1.3.17
Can Rest Station	Hosp. 4.3.17
4 to 6 Can. Fld. Amb.	Hosp. 4/8-3-17
No 2 A.G.H. Wimereux	Hosp. 6.4.17

Diagnosis N.Y.D. "Q"

(1) Later Diagnosis (if changed) Bronchitis.

(2) P.U.O.

(3)

Additional Diagnosis: if more than one state present P.U.O.

Varicocele Oper. Lt. S

Invalided to Canada 23.5.17 -S

DISPOSITION — Date

Disch. 21.9.16.

" to Base Details 17.3.17

REMARKS

Dis:- 10-8-17

C.L. 10.8.16 2

Ch 23.8.16 #7

" 27.10.16 25

" 23.3.17 A 467.

28.3.17 A 471

A 474

C.L. 31-3-17

" 4.4.17 A 477

" 17.4.17 A 486

" 17.4.17 B 319 T.T.E.

11.7.17 B 383

" 16.8.17 B 411

8.3.19 C.463/2

30.5.19. C 530

A.M.D. 2 Dept.

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

Dh / Rw

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	The Cottage Hosp. Southport	12.4.17
	Mil. Conv. Epsom.	4.7.17
2.	M.E.H. Woodcote Pk.	2.3.19
3.		
4.		
5.		
6.		
7.		

L.

*Name STABBACK, William Elliot Rank Cpl. Regtl. No. 745009

Fyle Depot

Original unit Present unit C.A.M.C. M. or S. Age 22 Religion Pres. Ref. H.Q.

Port, ship, and date of arrival Quebec Megantic 2-6-19

Next of kin Adam E. Stabback Father Woodville, Ont.,

Address on leave c/o P.O. Woodville Ont. (W.S.G. address)

Address on discharge Gleichan Alta. Canada (Going to work)

Transportation issued Yes No Date 10-10-19 Character on discharge

Previous occupation Student Date and place of enlistment 1-11-16 Uxbridge Ont.,

Diagnosis Varicocele (2) rt inguinal hernia post operative loss testicular tissue flat feet Date of Medical Boards 6-6-19

Date T.O.S.	Remarks.	Pt. 2 Order No.
23-5-19.	Posted to Hosp. Sec. 2-6-19. Granted leave with	
	Subs. from 4-6-19 to 18-6-19.	158
	Clear.Depot to S.M.H. 4-6-19	161
	S.M.H. to Brant House 23-6-19. H.S.	176.

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

[OVER]

Date	Remarks.	Pt. 2 Order No.
	A.W.L. from 10 p.m. 7-7-19 to 12.45 a.m. 8-7-19. Reprimanded. H.S.	192
7-10-19	B.M.H. to Cas. Co. H.S.	279
10-10-19	S.O.S.Dis.Med.Unfit(183 days W.S.G)	281

M.F.W. 192.
233-D.P.-200M-3-19.
1772-39-1243.

Forms I. 1237 / 10

1ST W.G.H. LIVERPOOL.

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
F.C.T. 336	745009	Pte	Stabback	A. E.

Year	Unit.	Age.	Service.
1917	20 Canadian	21.	1 year 5/12

Disease P. U. O.

Station and Date.	
Cottage Hospital	
April 12/17	Admitted as strecher case. Some pains in joints feeling weak. Half diet.
14	On April 3rd had a rigor then pains thro lower limbs & back which lasted 4 days. Temp. 102°–103° Had heavy sweat after this. On April 4th vomited, dirty tongue & diarrhoea.
17	Seems to improve, tongue cleaner, general condition more normal debility marked.
May 8	Varicocele to see D. Bentall.
" 10	In view of the size of this I urge the advisability of radical removal. He also has an enlarged ext. ring on the right side & complains of a swelling there: I would suggest the closure of this at the same time. W. Bentall F.R.C.S.E.
May 16.	Varicocele of left side. Incised at external ring & the mass of vein pulled up 2 removed & lower end tied to upper. Hernia on right side. Enlarged external ring no actual protrusion but impulse on coughing. 3 stiches through pillars of ring.
May 24th	Superficial sutures removed incision quite healed.
" 29	Deep sutures removed. Pat may get out on couch. Doing well.
June 2nd	Both incisions well healed. Pat may walk about now must wear suspender.
June 18	Discharged fit for Com. Dep. II.

F. J. Wheeler. CMP. Vic. Hospital

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

17

P.T.O.

Station and Date.	

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	74509	Pte.	Stallard	A. E.

Year	Unit.	Age.	Service.
1914	20th Canadians, Head Quarters	21	S. 2yrs. F.S. 7/12

Station and Date.	
	Disease Rt. inguinal hernia & left varicocele
Sherlock St	Med. history sheet - states "varicocele (left) operated on.
Aux Hosp.	Hernial protrusion (Rt) Ring made smaller by 3 stitches
A.	thro' pillars opening. Originally case of P.U.O.
19. 6. 1914	Transfd from Southport - for Comm^d dep. (Class ii),
	here only temporarily. -
26. 6.	recommended for Convalescent Hospl
	[signature] MO.
1. 7.	awaiting transfer tomorrow for Epsom. [initials]

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S. P.T.O.

Station and Date.	

3/7/17 | ORIGINAL | B 745009 | ORIGINAL

MEDICAL HISTORY SHEET.

Surname Stabback | Christian Name Adam E.

Examined { on 1 day of November 1916 / at Uxbridge }

Birthplace { City or Town Woodville / County Victoria Ontario }

Apparent age 19 years

Trade or occupation Student

Height 5 Feet 7 Inches.

Weight 142. Lbs.

Chest measurement { Minimum 34 inches. / Maximum expansion 37 inches. }

Physical development Good

Small-Pox Marks None.

Vaccination Marks { Arm Right. None Left. [illegible] / Number One }

When Vaccinated last May 10th 1916

(a) Marks indicating congenital peculiarities or previous disease

None.

(b) Slight defects but not sufficient to cause rejection

Approved by J McCulloch Capt. Medical Officer
Rank 109th Overseas Battalion, C.E.F. M.O.

Date.	Fit or Unfit.	Examined for Re-engagement. 18 APR. 1917
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
10.5.16	Good	J McCulloch M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, etc.
15.4.16	Good	J McCulloch M.O.
25.4.16	Good	J McCulloch M.O.
2.5.16	Good	J McCulloch M.O.
TAB 25.9.16		H Boyd do

Enlisted on 1 day of November 1916 at Lindsay

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	116th Bn C.E.F.	745009.		1.11.15.
Transferred to	109th Bn C.E.F.	745009.		7.4.16.
	21st Bn			

CANADIAN

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Epsom	25.7.17	Varicocele	C iii N L Tracey Maj
Epsom	26-2-19	Varicocele	Jtd [illegible] Macdermot Lt Col; J [illegible] Capt Above

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.
400M.—1-16.
H. Q. 1772-39-439.

Christian Name Adam E.

Surname Stalback

THE COTTAGE HOSPITAL, FLEETWOOD ROAD, SOUTHPORT.

Station.	Date of Arrival at the Station.	Admission into Hospital Day	Month	Year	Discharge from Hospital Day	Month	Year	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.
No 4 C.F.A.		4	3	17	8	3	17	PU.O.			A474
No 6 C.F.A.		8	3	17	17	3	17	"		Rect fr. Base, rejoined Unit	A474-A477 VH
		12	4	17	18	6	17	P.U.O.	67	While in hospital here. Varicocele on left side operated on. Hernial protrusion on right side. Ring made smaller by 3 stitches through pillars of ring.	J. J. Wheeler
Shurlock St. Aux at 1st W. G. H. Fazakerly		18	6	17	3	7	17	Rt. inguinal hernia + L varicocele		} transfd to Epsom no temp. while in this hosp.	Wheeler Wright M.O. i/c
MCHE Epsom		3	7	17	10 AUG 1917			Do.	39	Large Varicocele left with thickening of the cord & pain on walking. Radical cure of rt Ing. Hernia Category C iii discharge for Employment.	H. F. Carpenter Capt
MCH Epsom (Adm from Staff)		13	2	19	5	5	19	Varicocele L. Side		Chronic pains in left groin - for observation & board	D. MacDermott Lt Col
SS Megantic		23	5	19				do			C. G. Preston Maj Cam
		4-6-19			23-6-19			Varicocele left side	19.	Transfer to Burlington for operation	C. W. Walker Capt

SPADINA, M. H.

Regtl. No. Rank and Name 745009 Cpl Stubback Corps CAMC

Disease Varicella Hospital Mcd Epsom

To Officer i/c Laboratory. Ward Staff

Please carry out an examination of the accompanying specimen of urine

with special regard to (M.F.B. 227)

Date 19-2-19

J

O. i/c Ward.

LABORATORY REPORT.

COLOR	Yellow
REACT.	acid
SP. GR.	1018
ALB.	0
SUGAR	0

Calc oxal

BACTERIOLOGICAL LABORATORY MILITARY CONV. HOSP. 1 FEB 1919 WOODCOTE PARK EPSOM, SURREY

Date of Examination

W.3212. 50M-4-4-18.

J D Wheeler ? M

for O. i/c Laboratory.

Regtl. No. Rank and Name 745004 Cpl Stubback Corps CAMC

Disease Varicella Hospital Mem Epsom

To Officer i/c Laboratory. Ward Staff

Please carry out an examination of the accompanying specimen of urine

with special regard to (M.F.B. 227)

Date 19-2-19

O. i/c Ward.

LABORATORY REPORT.

COLOR Yellow

REACT. Acid

SP. GR. 1018

ALB. 0

SUGAR 0

Calculated

BACTERIOLOGICAL LABORATORY
MILITARY CONV. HOSP.
1 FEB 1919
WOODCOTE PARK
EPSOM, SURREY

Date of Examination

W.3212. 50M-4-4-18.

for O. i/c Laboratory.

CANADIAN EXPEDITIONARY FORCE
Discharge Certificate

This is to Certify that No. 746009 (Rank) Corporal

Name (in full) Stabback, Adam Elliott enlisted in

the 116th Overseas Battalion (Trans. 20th Battalion)

CANADIAN EXPEDITIONARY FORCE at Uxbridge, Ont. on the 1st

day of November 19 15

HE served in Canada, England and France

and is now discharged from the service by reason of Medical Unfitness
xxxxxxxxx

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

Age 21 Years

Height 5 feet 8½ Inches

Complexion Dark

Eyes Brown

Hair Black

Marks or Scars

Vaccination scar left arm; tattoo mark left forearm.

Signature of Soldier

Issuing Officer

Rank

Lieutenant

Appointment

for Director of Records

Date of Discharge October 10th, 1919

Signed at Toronto, Ontario this October 5th day of 19 20

In Military District No. [illegible] 36058

File Reference No.

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.

M. F. W. 39a.
250m —6-18.
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

C.A.D.C. 5009 A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

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.

NAME OF SOLDIER (Block Letters) STABBACK A.E.

REGIMENT Came RANK Cpl No. 745009

Date of Examination in England 17/2/19 | Date of Examination in France

PRESENT DENTAL REQUIREMENTS

1. FILLINGS F/T
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 No
- (c) In France

Signature of Dental Officer [illegible] Capt

Epsom

C.A.D.C. 5009 A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

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.

NAME OF SOLDIER (Block Letters) STABBACK A E

REGIMENT C.A.M.C. RANK Cpl. No. 745009

Date of Examination in England 17/2/19 | Date of Examination in France

PRESENT DENTAL REQUIREMENTS

1. Fillings
2. Extractions F.I.T.
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 No.
(c) In France

Signature of Dental Officer J G Garvin Capt.
Epsom.

#745000, Cpl. STABBACK, A.

Brant Military Hospital,
Burlington, Ontario.

Date: OCT 6-1919

This is to certify that this man has this day been examined and found to be free from Infectious, Venereal and Parasitic Disease.

Medical Officer.

MEDICAL CERTIFICATE BOOK

Mil. Bk. 85
500–6-18.
1772–61–73.

MEDICAL TRANSFER CERTIFICATE.

(To accompany a Man Transferred from one Hospital to another.)

Extract from Admission and Discharge Book of Spadina Military Hospital, Toronto. *Hospital at* Toronto. *Date*

No. of Case	Regiment or Corps	Troop or Company	Regt. No.	RANK AND NAME Surname first. If Married, write "M" under name	Completed Years of: Age last birthday	Completed Years of: Canada	Completed Years of: Over-seas	DATES: Admitted into Hospital	DATES: Trans-ferred	Religion	DISEASE (a) Primary (b) Secondary (c) Operations	NAME HOSPITAL TRANSFERRED TO
A 535	2 D.D. C.A.M.C.	—	745009	Stabback Adam E. single	20.	8/12	2 yrs 9/12	4/6/19	23/6/19	Pres	Varicocele Left	Brant M.H. Burlington

State here briefly reasons for Transfer, and note any particulars of Case for information of Medical Officer.

for Operation

J. M. Brooke
Capt. C.A.M.C. & Registrar,
for O.C. Spadina M[illegible]
Medical Officer in Charge

Regtl. . Rank and Name 745009 Cpl Stubbuck Corps CAMC

Disease Varicella Hospital MCH Epsom

To Officer i/c Laboratory. Ward Staff

Please carry out an examination of the accompanying specimen of urine

with special regard to (M.F.B. 227)

Date 14-2-19

O. i/c Ward.

LABORATORY REPORT.

COLOR	Yellow
REACT.	acid
SP. GR.	1018
ALB.	0
SUGAR	0

Calc. ox.

BACTERIOLOGICAL LABORATORY MILITARY CONV. HOSP. WOODCOTE PARK EPSOM SURREY 18 FEB 1919

Date of Examination

[illegible signature]

for O. i/c Laboratory.

W.3212. 50M-4-4-18.

D.M.S. 1394-50M.
5958-18-2-18.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Epsom 1918.

No. 745009 Rank Pte Name Stabback A.E.

Local Unit Canada Overseas Unit 20th Bn Age

Examination held at M.C.H. Epsom

DISABILITY.
Overseas-Local
(SCRATCH ONE OUT.)

PRESENT CONDITION.

B iii permanently

A.K. Cameron Smith

Re-examined at Epsom Surrey Major
Category ~~B iii~~
Date 21/1/19
A. Macdermot
Lt. Col.

BOARD RECOMMENDS:-

1. Fit for Duty
2. Fit for duty after .... weeks' physical training.
3. Fit for Temporary Base Duty .... weeks.
4. Fit for Permanent Base Duty
5. Discharge

Signatures:-

(........ President.
Members (........
(........

APPROVED

Dated .... 1918. .... For A.D.M.S.

A456

146.

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 109th OVERSEAS BATTALION, C. E. F.

Regimental No. 745009 Rank Private Name Stabback Adam Elliott

Enlisted (a) 1.11.15 Terms of Service (a) C.E.F. D of W. Service reckons from (a) 1.11.15

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) Student

W S.B. Class "A"

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	Halifax	24.7.16	
		Disembarked England	Liverpool	31.7.16	
5.8.16		Appointed Pro. L/Cpl.	Bramshott	5.8.16	Part II Order 218
		Transferred for Overseas Service with 20th Batt'n		OCT 5 1916	D.O. Pt. 11 No. 279
					Capt. ADJUTANT 109th Overseas Battalion, C. E. F.
6/10/16	C B Dep	Arrd & taken on strength	20th Bn	6/10/16	NR Pt 2 O'rs 55d11/10/16
do	do	Left for	do	20/10/16	NR
27/10/16	20th Bn	Arrived	do	23/10/16	B213
3/3/17	6. C.F.A.	P.U.O. adm 1/3/17 adm	6 C.F.A.	1/3/17	A.F.W. 3034 D.s 278 19/3/17
10/3/17	—	— Trfd	C.R.S.	4/3/17	279 23/3/17
10/3/17	—	— adm 4/3/17 Trfd	6 C.F.A.	8/3/17	280 29/3/17
17/3/17	6 —	— adm — Trfd	13 F.A.	15/3/17	281 4-4-17
24/3/17	20 Bn	Rejd from Hosp. disch.	20 Bn	19/3/17	B213
9-4-17	2A.ustGen	P.U.O. slt. trsfd	To England	9-4-17	W3o34.
6-4-17	2 Aust Gen.	P.U.O adm	2 Aust Gen	6-4-17.	W. 3034.
9-4-17	do	Inv.(Sick)& posted to 1st Cenl Ont. Regl Dep.Shorncliffe per HS STPatrick		9-4-17	W3083(2765)Pt 2 31D/23-4-17

CERTIFIED CORRECT. 8 OCT. 1916 CANADIAN RECORDS LONDON

CAPTAIN, ADJUTANT, 109th BATTALION CAN. INFANTRY.

J.W. Logan
Capt.
for Major D.A.A.G.

(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 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.
19.4.17	1C.O.R.D	T.O.S.	W. Sandling	12.4.17	Pt 2 O. 41 (Hk R D)
8.9.17	"	S.O.S on transfer to C.A.M.C. Can Conv Hosp Epsom	W Sandling	7.9.17	Pt II D.O. 183 J.C. Pratusin Lieut for Colonel i/c Records Capt Comd J. H. Walton Lt Assist. Adjt. for O. C. 1st C. O. R. D.
3.9.17	Epsom	Taken on Strength	W Sandling	7.9.17	Pt 2 D. 1.256
11.11.18	"	apptd a/cpl. with pay	Epsom	31.10.18	" 315
28.2.19	"	S.O.S to Can Cas Coy on being boarded and approved I.W.C.	Epsom	28.2.19	" 59 d 28.2.19 Capt [signature] O.C. Staff Division. CONVALESCENT HOSPITAL, EPSOM.
23-5-19		T.O.S. No. 2 District Depot, Part II, D.O. No. 158			[signature] Capt. For O. C. No. 2 District Depot

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

M. F. W. 54. (A. F. B. 103.)
350M.-5-16
H. Q. [illegible]-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps ....

Regimental No. #745009 .... Rank Cpl .... C. E. F. Name .... Stabback A. ....

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

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

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

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				
		S.O.S. DIS. #2 D.D. 10th Oct. 1919 Pt. 11 D.O. #281			

[illegible signature]
............................Capt.
FOR O. C. No. 2 D. D.

(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				

M.F.W. 44.
1133 (D.P. 250M-12-18.
1772-39-903.

CANADIAN EXPEDITIONARY FORCE.

LAST PAY CERTIFICATE

Regimental No. 745009 Rank Gpl Name Stabback, A. E.
(Surname first)

Unit No. 2 DISTRICT DEPOT who was* DISCHARGED

On 10-10-1919, to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1 to 10-10-1919 the inclusive date of transfer or discharge.

	Dr.		Cr.	
Bal. Dr. or Cr. from prev. month				
Regimental Pay 10 days at $ 1.20			12	-
Field Allowance days at $ c.				
Separation Allowance				
Clothing Allowance			3.5	
Post Discharge Pay			70	
*Other Credits				
Advances				
Separation Allowance and Assigned Pay Cheque No.				
*Other Charges				
Balance on transfer or on discharge, cheque No. 152833	117	-		
Total	117	-	117	-

*Give particulars.

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Date	Place	Cheque No. A.R. No. or Other Particulars.	AMOUNT Dr.		AMOUNT Cr.		Signature of Officer Making Payment.

War Service Badge.
Class A
No. 287423 issued

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

EG

This is to Certify that No. 745009 (Rank) CPL.

Name (in full) STABBACK, Adams, Elliott enlisted in

the 115th Battalion

CANADIAN EXPEDITIONARY FORCE at Uxbridge, Ontario on the 1st.

day of November 19 16

HE served in ENGLAND & FRANCE::::::::

and is now discharged from the service by reason of .."MEDICALLY UNFIT"

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

Age 21 Yrs.

Height 5' 8½"

Complexion Dark

Eyes Brown

Hair Black

Marks or Scars Vacc. scars left arm.
TATTOOED: "Butter Fly" left arm.
Scar from varicocele left pubis.

A. E. Stabback
Signature of Soldier

Issuing Officer

for O.C. No. 2 District Depot.
Rank

Appointment

Date of Discharge 10th October 1919

Signed at Toronto, Ontario this 10th. day of October. 19 19

in Military District No. #2. OCT 10 1919

File Reference No.

No. 2 DISTRICT DEPOT
TORONTO.

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.

M. F. W. 39a.
250m.—6-18.
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

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

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

B -

To be made out in duplicate.

H.Q. 54-21-23-53

DUPLICATE

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 109th OVERSEAS BATTALION, C. E. F.

(2) Regimental Number 745009

(3) Full Name of Soldier Adam Elliot Staback

(4) Place of Birth Wood ville Ontario Canada

(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 ? No

(8) Have you any children ?

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

200M.—3-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ? Yes

If so, state name and address Adam Elliot Staback (Wood villle Ont.

(10) Is your Mother alive ? No

If so, state name and address

(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.

Lt. Col.
Officer Commanding.
O. C. 109th Overseas Battalion, C. E. F.

Date July 6th 1916

MILITIA AND DEFENCE

M. F. W. 12a.
50m.—4-16.
1772—39—819.

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

Sheet No. 2 Mrs. A. E. Stabback (Father)

Name of Soldier A. E. Stabback 745009 (Cpl) 109 Bn

L. L. Job 310.—Req. 657

20 00 AUG 1 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.		X 15478	20	
Sept.		P 20364	20	
Oct.		P 25242	20	
Nov.		D 28803	20	
Dec.		U 32661	20	Cheque A15396 $20.00 issued in lieu of X 52715 issued in March 1917 purported to have been lost. Mailed 18-7-17 - Hector
Jan.	1917	J 42506	20	
Feb.		I 47556	20	
March		X 52715	20	—
April		~~S 4989~~	~~20~~	20.E. $ 4989 Can HG
May		S 16547 / S 11685	20 / 20	20 B.
June		R 18346	20	20
July		V 25403	20	
Aug.		L 37728	20	
Sept.		T 39958	20	
Oct.		O 45665	20	
Nov.		K 53553	20	
Dec.		M 63637	20	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

340

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.				

J. L. Job 310—M. & D. 6574.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—4-16.
H. Q. 1772-39-819.

(Father)

To Whom Mr. A. E. Stabback
Address Rosdville Ont.

Rate $20.00

AUG 1 1916

By Whom Assigned A. E. Stabback
Regtl. No. 745009
Rank Cpl.
Corps 109 Bty

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

CONSOLIDATED 7 ACCOUNT

P. 559.

Married or Single: Single

Place of Birth: Woodville Ont

Name and Address of Next of Kin: Adam Elliott Staback, Woodville Ont 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
Reverts to Rank	6/10/16	B.O 55

Admissions to Hospital, &c.

Date Admitted	Date Discharged	V. or A.	Name of Hospital

Reg'l. No. 745009 Rank Pte ~~Cpl~~ Name Staback Adam Elliott

If in Permt. Corps What Unit — Unit 109th Bn Transferred to 20th Bn Date 5/10/16 Authority DO 279

Permanent Force Allowances — Transferred to 1st C.O.R.D. Date 21.6.17 Authority C.C.B. 319 17/4/17

Place of Attestation: Uxbridge Ont — Transferred to C.C.H. Epsom Date 1.11.17 Authority Nominal

Date of Attestation: Nov 1st 1915 — Transferred to Date Authority

Assigned Pay Monthly $20 00/100 Date Effective Aug 1st 1916

Payable to Adam E Staback Woodville Ont Relationship Father

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	Pay No. of Days	Pay Rate	Pay Amount $ c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $ c.	Working or Special Pay No. of Days	Working or Special Pay Rate	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	Cash Payments 2	Cash Payments 3	Cash Payments 4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	C. I. Remarks
1916 July 31										Balance from Canada	20 70	20 70																20 70				
Aug 1-31	31	1.10	34 10	31	.10	3 10						37 20													20		20	37 90				
Sep	30		33			3						36			96	15/9/16						9 73			20		29 73	44 17				
Oct 1-5	5		5 50			50						6													20		20	30 17				DO 279 Trans to 20th Bn 5/10/16
6/31	26	1.	26	26	.10	2 60						28 60					116	31/9					9 74				9 74	49 03				
Nov	30	1.	30	30	.10	3						33	1340	31/10/16			7684	30/10/16			2 62		5 83		20		27 85	54 13				
Dec	31	1.	31	31	.10	3 10						34 10	1434 1372	30/11/16 22/11/16							11 34 2 62				20		33 96	54 32				
			15 30			15 30																										
Jan	31	1.10	34 10									34 10	1513	16/12	1587	6/1					5 23	2 61			20		27 84	60 58				
Feb	28	1.10	30 80									30 80	1658	29/1/17	1717	7/2/17					2 62	2 62			20		25 24	66 14				
			239 80								20 70	260 50			1888	1/3/17					24 43	14 96	14 97		140		194 36					
Mch	31	1.10	34 10									34 10	1778	[illegible]	1883	3					2 62	2 62 2 62			20		27 86	72 38				
Apl	30		33									33							Rem	20/4				4 87	20		24 87	80 51				
May	31		34 10									34 10							Rem	8/5				4 87	20		24 87	89 74				
			341								20 70	361 70									27 05	20 20	14 97	9 74	200		271 96					

Checked. [illegible signature]

745009 Pte. Staback A.E

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	Other Credits	Total Credits	Acquittance Rolls	Cash Payments 1	Cash Payments 2	Cash Payments 3	Cash Payments 4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Remarks
Fwd			341	.	20 70	361 70	Q57 Hopdo. 26/5 Rem 28/6; Q24 17/4 Hopdo. 8/6	27 05	20 20	14 97	9 74	200 -		271 96	89 74	
June 20	20	1 10	22	.		22 .				12 / 12	48 67 / 4 87	20 .		73 78	37 96	Trans. to 1st CORD 21/6/17
21.30	10		11			11									48 96	
July			34	10		34 10						20		20	63 06	
Aug	31		34	10		34 10						20		20	77 16	
Sept	30		33	.		33 .						20 .	5 50	25 50	84 66	3 Days F.P. 2 forfeit. 2 Day Pay R.W. Aw. L. 22.8. to apprehended C.M.P. Lon 23/8 Pt. 169 1 CORD 25/8

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	BALANCE
1917 Sept 30		~~84 66~~					84 66
Oct	31 Days @ 1.10	34 10 / 34 10				20	98 76 / 67 10
				AR 226 CCH Epsom 28/9/17	9 73		65 86
Nov & Dec	P.P.	67 10		AR 267 " " 16/10/17	4 87		127.62 / 38 24
						20	
						20	
				AR 398 CCH Epsom 20/10/17	4 87		
				DnaAR 1743 " " 4/7/17	9 74		
				" " 2444 " " 3/9/17	4 87		
				" 330 " " 16/11/17	4 87		
				DnaAR 7545 " " 1/8/17	48 67		38 24
		67 10		AR 275 CCH Epsom 29/9/17	4 87 / 87 62	40	34 10 / 72 34 / 44 34
Jan	P.P.	34 10		Can. Ad.		20	
				AR 424 CCH Epsom 9/1/1	4 87		
				AR 465 " 9/2/17	9 73		
				DR 202 " 14/9/17	4 87 / 24 34		
		34 10				20	28.00
Feby				Q 4005. 16/1/18. 12/49. (2)	4 16		23 84
	P.P.	30 80		A Pay		20	
				AR 77. 11/1/18 CCH Ep. (5)	4 87		
				" S 355 29/1/18 " (13)	4 87 / 13 90 / 13 90		24 90
		30 80				20	Forward

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	
1918 March	Balance forward								24 90	
	P.P.	34 10		A Pay				20		
				AR S 381 13/2/18 CCH Ep. (4)	4 87					
				DR 209 31/8/17 1 CORD (8)	2 44					
				AR S 565 26/2/18 CCH Ep. (11)	4 87					
				S 718 13/3/18 . (38)	4 87					
				S 871 26/3/18 " (34)	4 87				17 08	Transferred New Ledger
		34 10			21 92 / 21 92			20		

P 820
12474—375M—13-2-18.

ASSIGNED PAY.	~~ENGLAND OR~~ * CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE :- 1.8.16		EFFECTIVE DATE :-	
AMOUNT :- 20.00		AMOUNT :-	

* Strike out whichever inapplicable.

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.

Adam E. Staback. Father
Woodville. ont.

Stopped Effec 1/4/19

NAME :- STABACK. Adam Elliott.

NUMBER :- 745009.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte
Pt II 315 11/11/18.	31.10.18	L/cpl.

UNIT AND TRANSFERS

ORIGINAL UNIT :- 109th BN

DATE ACCOUNT FIRST OPENED :- 1.8.16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
	1-8-19	24/7/19	C.C.H. Epsom Canada

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
27/2/19	2177	Epsom	~~4 87~~			Ledger Bal	41 95
~~SF~~		~~3-19 to 7-4-19 (... days)~~				Extract	4 87
		Epsom					
						LPC Bal	37 08

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		

PARTICULARS OF RENDERING NON-EFFECTIVE :- Discharge to Canada 1/4/19. NR.G. Ep. A151 Epsom 5/3/19 Epsom MD

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mch 31	Balance forward								17 08	00	
April	P. Pay	33		a. Pay				20	30 08		
				AR S94. 16/4/18 CC.H. Epsom (1)	4 87				25 21		
				" S193 26/4/18 " (10)	4 87				20 34		
		33			9 74			20			
May	P. Pay	34 10							54 44		
				a. Pay				20	34 44		
				AR S353. 15/5/18 " (8)	4 87				29 57		
				" S573 29/5/18 " (17)	4 87				24 70		
		34 10			9 74			20			
June	P. Pay	33 00							57 70		
				a. Pay				20	37 70		
				AR S693 14/6/18 " (3)	9 73				27 97		
				" S913 28/6/18 " (11)	7 30				20 67		
	S/F. 10/8/17 – 22/8/17. 12 @ 73. DO 175 26/6/18 1 CORD.	8 76							29 43		
		41 76			17 03			20			
July	P. Pay	34 10							63 53		
				a. Pay				20	43 53		
				AR S1166 12/7/18 " (1)	9 73				33 80		
				" S1497 26/7/18 " (10)	9 73				24 07		
		34 10			19 46			20			
Aug	P. Pay	34 10							58 17		
				a. Pay				20	38 17		
				AR S93. 8/8/18 " (2)	29 20				8 97		
				AR S334 29/8/18 " (10)	2 43				6 54		
		34 10			31 63			20			
Sep	P. Pay	33							39 54		
				a. Pay				20	19 54		
				AR S471 13/9/18 " (1)	2 43				17 11		
				" S601 27/9/18 " (2)	2 43				14 68		
		33			4 86			20	Forward		

NUMBER 745009 RANK Pte NAME STABACK. ADAM ELLIOTT

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918	Balance forward,								14 68	agreed	
Oct	P Pay	34 10		a Pay				20	28 78		
				AR S 788 15/10/18 C.N. Epsom (21)	4 87				23 91		
				" S 941 29/10/18 " (39)	4 87				19 04		
Nov	"	34 10 33		a Pay	9 74			20 20	32 04		
				AR S 1113 13/11/18 " 7	9 73				22 31		
	" Dec	34 10		a Pay				20	36 41		
				" S 1281 28/11/18 " 36	9 73				26 68		
				" S 1439 16/12/18 " 65	14 60				12 08		
1919	" Jan	34 10		a Pay				20	26 18		
Feb	"	101 20 30 80		do	34 06			60 20	36 98		
				" S 1663 10/1/19 " 65	9 73				27 25		
				" S 1814 27/1/19 " 52	4 87				22 38		
				" S 2024 13/2/19 " 83	9 73				12 65		
	Diff in Pte Cpl pay 31/10/18 28/2/19.	12 10							24 75		
	Cpl Pay Mch	37 20		a Pay				20	41 95		
				AR S 2177 27/2/19 " 116	4 87				37 08		
				" 3319 12.3.19 " 138 End	29 20 9 73				27 35		
				" 5404 27.3.19 " 159 " "	48 67				21 32		
		80 10			87 60			40 -			
Apl	SF 28.3.19 - 7.4.19 10 days										
	Canc cc. DO 80. 4.4.19	7 30							14 02		
				AR 759 15.4.19 " End 22 " "	9 73				23 75		
				a.R. 4013 14/5/19 Epsom End 75	24 33				48 08		
				a.R. 3113 8/5/19 Epsom End 91	24 33				72 41		
		7 30			58 39						
				2657 3/5/19 Epsom End 26	4 87				77 28		
				1841 19/5/19 Epsom End 62	24 33				101 61		
					29 20						

S.O.S. to Canada. 23.5.19. S.L. 501 C.G.M.C.

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

Brant Military Hospital Group. OCT 6 1919 Registrar's Office.

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION BRANT MILITARY HOSPITAL. M.D.#2. Burlington, Ontario. DATE OCT 6 1919

1. 1 (a) Unit #2 D.D. (b) Regimental No. 745009 (c) Rank Cpl.

(d) Surname STABBACK, (e) Christian name Adam.

(f) Home address Woodville, Ontario.

(g) Next of Kin Adam Stabback. (h) Relationship Father.

(i) Address of Next of Kin Woodville, Ontario.

2. Age last birthday 21 Date of birth Sept. 1, 1898.

3. Enlistment, or Appointment (if an Officer) (a) Place Uxbridge. (b) Date Nov. 1, 1915.

4. Personal description:

(a) Height 5' 8½" (b) Weight 145 (stripped) (c) Complexion Dark

(d) Colour of hair Black (e) Colour of eyes Brown (f) Identification marks, Scars, etc. Butterfly tattooed left arm. Scar from varicocele left pubis.

5. Former trade or occupation Student.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3	342

	Periods From	Periods To
Canada	1-11-15	30-6-16
England	30-6-16	4-10-16
France or other theatres of War	4-10-16	12-5-17
England & Canada.	12-5-17	to date.

7. Original disease, or injury (1) VARICOCELE. (2) Right inguinal hernia, post operative. (3) Loss testicular tissue. (4) Flat feet.

(a) Date of origin Oct. 1916. 1 2 3 & 4 (b) Place of origin France. 1 2 3 & 4

(c) Cause Active service conditions. 1 2 3 & 4

M. F. B. 227.

300M.—8-18.
1772-39-117.

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

Bronchitis, Aldershott in July 1916. 3 months in hospital.

Trench Fever in Feby. 1917. Recurrence in April 1917. 5 months in hosp.

Cured, no disability

(*c*) (Here give a description of wounds, scars and deformities.

Left testicle missing. Small protrusion of oedematous tissue left side of pubis. Scar from left herniotomy.

11.—(*a*) Did the disabling condition have its origin before enlistment? NO. 1.2.3.&4.

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

1.2.3.&4. N/A.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? 1.2.3.&4. NO. (a)&(b)

The regimental documents will be referred to.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 1.2.3.& 4. Permanent.

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

Hospital England & France 1 year.

Brant Military 23-6-19 to date.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

(If the answer is "yes" state nature of treatment required and probable duration)

NO.

16. Can the former trade or occupation be resumed? NO trade, was student.

(If not, briefly state why)

17. Recommendations

DISCHARGE ~~FROM~~ as HOSPITAL MEDICALLY UNFIT FOR SERVICE.

A. S. Porter Capt. CAMC

Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned A.E.STABBACK. have heard the description of my disability and present condition read, and am satisfied ~~(or not satisfied)~~ with it. (If dissatisfied, statement should follow.)

I complain in addition of

A.E. Stabback Cpl Rank.

Signature of invalid examined.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (*a*) Weakness—slight, moderate, marked, etc; (*b*) Loss, complete or partial, of an organ or member, or of its functions; (*c*) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (*d*) Any other restrictions in choice of occupation.)

(1) PARTIAL LOSS OF FUNCTION OF VENOUS SYSTEM.

(2) PARTIAL LOSS OF FUNCTION MUSCULAR SYSTEM (ABDOMINAL WALL)

(3) PARTIAL LOSS OF FUNCTION GENITO-URINARY ORGANS(REMOVAL OF LEFT TESTICLE)

(4) PARTIAL LOSS OF FUNCTION LOCOMOTORY SYSTEM (FLAT FEET)

9. Present condition—(*a*) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

OBJECTIVE: Fairly well nourished, tongue clean. Heart, lungs and digestive systems normal.

(1) & (3) Left testicle removed. Has small protruding oedematous mass left pubis. Tender to touch. Scar ~~xx~~ tissue hard. Also hard knotted veins in scrotum. (2) Scar right side from herniotomy.

(4) Arches both feet fallen. Wearing arch supports.

(1) (3) SUBJECTIVE: SYMPTOMS: States that when he stretches abdominal muscles, strains or crosses legs or when walking fast has pain at seat of protrusion left side of pubis. This gets quite sore at times.

(2) When strainig has an ache in lower part of abdomen over scar.

(4) Feet pain him along instep if walking much or standing long on feet. Has to war arch supports.

(*b*) Has the invalid now any affection of the following systems, not described in Section 9 (*a*) above? (Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System NO Cardio-Vascular System NO (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System NO (Albumen and Sugar will be excluded.)

Special Senses NO Respiratory System NO Integumentary System NO

Disturbances of Mentality NO Digestive System NO Muscular System NO

Osseous and Joint Systems NO Any other general condition NO

No albumen, or sugar

10. (*a*) History (of the condition referred to in Section 9 (*a*).) 1.2.& 3. Began in Oct. 1916 at LeHavre. Veins became enlarged rather suddenly. Had not trained in England. Sent on up line though advised to have operation. Was in line from Oct. to Feb. Evacuated with Trench Fever April 4th. Operated on for varicocele while in Hosp. and left inguinal hernia May 17th. Wound from varicocele did not heal and abscess developed which was opened and drained in hosp. May to July. Epsom convalescent until latter part of Aug. Boarded C.3. Transferred to C.A.M.C. and went on duty at Epsom. Pain continued left side of scrotum and was finally invalided to Canada May 23rd, 1919. Admitted to Brant Hosp. 23-6-19. Operation 10-8-19 left testicle removed. ~~Operation~~ 11-9-19 wound closed. Swelling decreasing, some tenderness. Given 2 weeks leave

(4) Arches fell Feb. 1918. Had not been troublesome previously.

4

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

WE CONCUR.

19. Is the invalid fit for

(a) General service,	(Category A)	~~(Yes or No)~~
(b) Service abroad, not general service,	(" B)	~~(Yes or No)~~
(c) Home service (Canada only),	(" C)	~~(Yes or No)~~
(d) Temporarily unfit.	(" D)	~~(Yes or No)~~
(e) Unfit for service in Categories A, B and C	(" E)	~~(Yes or No)~~

20. It is certified that the invalid

(a) XXXXXXXXXXXXXXXXXXXX (Give the nature of the condition and of the treatment required and its probable duration.)

(b) Does not require treatment.
(c) Should pass under his own control.
(d) XXXXXXXXXXXXXXXXXXXXXXXXXX
(Strike out condition not applicable.)

21. It is recommended that the invalid be discharged. (When not for discharge add special recommendation.)

AS MEDICALLY UNFIT. for service

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

A. Collins Major CAMC President.

Place BRANT MILITARY HOSPITAL

H. H. Burns Capt. Members

Date OCT 6 1919

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned.................................understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness.................................. Signed..................................

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

..................................President.

Place..................................

Members

Date..................................

APPROVED BY

APPROVED
Assistant Director of Medical Services.
Date OCT 8 1919
J. A. Christian Capt.
for A.D.M.S. M.D. 2

APPROVED BY

....
Director-General of Medical Services.

Date..................................

CASE HISTORY SHEET.

D3.

BRANT MILITARY HOSPITAL Hospital. Burlington Station.

No. 745009 Rank Cpl Name Stablack, Adam Age 20

Unit 2 DD Completed years of service Where and how long } C 8/12 C 2 4/12 F 7/12

Date of admission 23-6-19 Date of discharge OCT 6 1919

Diagnosis Varicocele, Left Place of origin France

CONDITION ON ADMISSION AND PROGRESS OF CASE was operated on in England in 1917 in May for varicocele. This did not heal up and an abscess resulted. this was opened again. Rt inguinal hernia also done.

Exam: Large left varicocele and chronic epididymitis. Veins very tender and feeling of dragging constant pain.

2-7-19 - Veins still tender and no improvement.

15-7-19 - Has seen Dr Parry and advised another operation.

26-7-19 - Given two weeks leave.

10-8-19 - Operated on and left testicle removed. Tube inserted. Patient comfortable and free from pain. Ran a temp of 100 on 14th.

15-8-19 - Patients temp normal and free from pain.

20-8-19 - Tube removed and in very good condition.

FAMILY HISTORY 28-8-19 - wound not yet closed. Still discharging.

(Tuberculosis, mental or nervous diseases.)

11-9-19 - wound all closed. Testicle decreasing in size. Some tenderness. Recommend 2 weeks leave.

TREATMENT

(Especially any specific or special form.)

CONDITION ON DISCHARGE, 7.10.19 Wound healed - Still [illegible] and tenderness on walking or straining.

(and disposal made of case.)

Date: A.S. Porter Capt. [illegible]

Medical Officer i/c case.

B 40933.

M. F. B. 313a.
100M.—6-18.
1772—39-439.

BRANT MILITARY HOSPITAL

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 2 DD

No. 745007

NAME OF SOLDIER Stalback, Adam

RANK Cpl.

REGIMENT

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 U	L	P	Gold Clasp	Gold Filling	CROWNS Gold	Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination																						
June 23/19																				Granger		Good

Discharge examination at Mont Military Hosp. Oct-6/19

J W Granger Capt

M.F.B. 150M.—6-18. 1772-39-950.

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.

649-9 36058

CANADIAN EXPEDITIONARY FORCE

A 287423

Discharge Certificate

EG

This is to Certify that No. #745009 (Rank) CPL.

Name (in full) STABBACK, Adams, Elliott enlisted in

the 116th Battalion

CANADIAN EXPEDITIONARY FORCE at Uxbridge, Ontario on the 1st.

day of November 1916

HE served in ENGLAND & FRANCE::::::

and is now discharged from the service by reason of "MEDICALLY UNFIT"

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

Age 21 Yrs.

Height 5' 8½"

Complexion Dark

Eyes Brown

Hair Black

Marks or Scars Vacc. scars left arm

TATTOOED: "Butter Fly" left arm.

Scar from varicocele left pubis.

A. E. Stabback
Signature of Soldier

H. Sargeant Capt.
Issuing Officer

For O.C. No. 2 District Depot.
Rank

Appointment

Date of Discharge 10th October 1919

Signed at Toronto, Ontario this 10th. day of October. 1919

in Military District No. #2

File Reference No.

No. 2 DISTRICT DEPOT OCT 10 1919 TORONTO.

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.

M. F. W. 39
200m.—2-18.
H.Q. 1772-39-832

Class...No.......issued B.P. 74870 22/12/19

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.

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

Form R. & O. 6045
1298-130M-29/11/16.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Epsom July 25th 1919

No. 745009. Rank Pte. Name STABBACK. A.E.

Local Unit........ Overseas Unit 20th Bn. Age 21

Examination held at M.C.H. Epsom.

DISABILITY.
Overseas—~~Local.~~
(scratch one out)
Rt. Ing. Hernia & Lt. Varicocele.

PRESENT CONDITION.

Large varicocele left with thickening of the cord & pain on walking. Radical cure of Rt Inguinal Hernia.

Re Examined
Category CIII
Date Oct 16/19 [illegible]

BOARD RECOMMENDS:—

1. Fit for Duty Re Examined
2. Fit for duty after Category weeks' physical training.
3. Fit for Temporary Base Duty Date weeks.
4. Fit for Permanent Base Duty C iii
5. Discharge Bii [illegible] 16/1/18

A H Cameron-Smith Maj

Signatures:—

H L Garvey Maj President.

Members
C. K. Dowson Capt
Bii A S Cameron-Smith
[illegible] Major

APPROVED

Dated at Epsom 25.7 1919. H L Garvey Maj

For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at 19

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

Local Unit ..... Overseas Unit ..... Age .....

Examination held at .....

DISABILITY
Overseas - Local
(strike out one)

PRESENT CONDITION

BOARD RECOMMENDS—

1. Fit for Duty .....
2. Fit for duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks.
4. Fit for Permanent Base Duty .....
5. Discharge .....

Signatures:

Members ..... President.

APPROVED

Dated at 19

For A.D.M.S.

CASE HISTORY SHEET.

"Spadina Military Hospital" Toronto Hospital. .... Station.

No. 745099 Rank A/Cpl. Name STABBACK, Adam E. Age 20

Unit #2 D.D. Completed years of service Where and how long ....

Date of admission 4-6-19 Date of discharge ....

Diagnosis Varicocele left Place of origin ....

CONDITION ON ADMISSION AND PROGRESS OF CASE Adm. from Clearing Depot

19/6/19. Large left varicocele & Epidydimitis Chronic. Transfer to Burlington for opn. C.W. Walker

Pain & dragging feeling constant. [when walking]

Registrar Transfer to Burlington C.W. Walker

19/6/19 Transfer to Brant M. H. [illegible]

Capt. C.A.M.C. & Registrar, for C.O. Spadina Military Hospital

FAMILY HISTORY ....

(Tuberculosis, mental or nervous diseases.) ....

TREATMENT ....

(Especially any specific or special form) ....

CONDITION ON DISCHARGE, ...

(and disposal made of case.) ....

Date ....

.... Medical Officer i/c case.

M. F. B. 313a.
100M.—6 18.
1772—39-439.

0-DC 3MB. D 'Ioc'

FOR INV. TO CAN. 26/2

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION M.C.H. EPSOM DATE February 22nd 1919

1. 1 (a) Unit C.A.M.C. (b) Regimental No. 745009 (c) Rank A/CPL

(d) Surname STABBACK (e) Christian name ADAM ELLIOTT

(f) Home address WOODVILLE ONTARIO CAN

(g) Next of Kin A.E. STABBACK (h) Relationship FATHER

(i) Address of Next of Kin WOODVILLE ONTARIO CAN

2. Age last birthday 20 YEARS Date of birth 1-11-1898

3. Enlistment, or Appointment (if an Officer) (a) Place UXBRIDGE (b) Date 1-11-1916

4. Personal description:

(a) Height 5' 7" (b) Weight (stripped) ESTIMATED 142 (c) Complexion DARK

(d) Colour of hair BLACK (e) Colour of eyes BROWN (f) Identification marks, Scars, etc. OPERATION SCAR FOR VARICOCELE AND OPER. SCAR FOR HERNIA

5. Former trade or occupation STUDENT

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3	74

SOLDIER'S STATEMENT.	Periods From	Periods To
Canada 116th BATT AND TRAN 109th BATT	1-11-15	1-8-1916
England 109 BATT	1-8-1916 12.4.17	3-10-1916 to date
France or other theatres of War 20th BATT	4-10-1916	12-4-1917

7. Original disease, or injury Varicocele - left side

(a) Date of origin Oct. 1916 (b) Place of origin France

(c) Cause Unknown

M. F. B. 227.

300M.—8-18.
1772-39-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

Varicocele and epididymitis - chronic - left - Continual dragging pain in left testicle and cord

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Objective

General nutrition and physique good
Left testicle appears larger than right, with considerable enlargement of veins of cord; no hardening or tenderness, except on firm pressure.

Subjective

Complains of considerable pain in testicle & left groin when he walks any distance

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System: No
Cardio-Vascular System: No (If pulse rate is abnormal, B. P. will be taken.)
Genito-Urinary System: No (Albumen and Sugar will be excluded.)

Special Senses: No
Respiratory System: No
Integumentary System: No

Disturbances of Mentality: No
Digestive System: No
Muscular System: No

Osseous and Joint Systems: ~~No~~ Yes
Any other general condition: No

Moderate degree of pes planus non rigid - moderately painful - bilateral

10. (a) History (of the condition referred to in Section 9 (a).)

12.4.17 at Southport Cottage Hosp. was operated on on left side for varicocele (documentary).
He says it was considerably swollen after that and has not been free from pain on exertion since.
The chronic varicocele has persisted since.

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

In March '17 had P.U.O. with which he came to England, and while in hosp. had repair operation for right sided hernia. Other illnesses - says he had pneumonia in 1916.

(c) (Here give a description of wounds, scars and deformities.

Healed non adherent scar in Rt groin of operation for inguinal hernia

11.—(a) Did the disabling condition have its origin before enlistment? No

(b) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

NA

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? (a) No (b)

The regimental documents will be referred to.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Six months

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

Operation as above - suspensory bandage

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

(If the answer is "yes" state nature of treatment required and probable duration)

Yes - recommended by Col. Hutchison for treatment under observation in hospital in Canada

16. Can the former trade or occupation be resumed? Yes

(If not, briefly state why)

17. Recommendations

Invalid to Canada.

H E MacDermot Lt Col.

Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned A.E. Stabback have heard the description of my disability and present condition read, and am satisfied (~~or not satisfied~~) with it. (If dissatisfied, statement should follow.)

I complain in addition of

F.E.P.

A.E. Stabback A/Cpl. Rank.

Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

We concur.

Dental Report attached

19. Is the invalid fit for

- (a) General service, (Category A) (~~Yes or No.~~)
- (b) Service abroad, not general service, (" B) (~~Yes or No.~~)
- (c) Home service (Canada only), (" C) (~~Yes or No.~~)
- (d) Temporarily unfit. (" D) (Yes or ~~No.~~) T to C.
- (e) Unfit for service in Categories A, B and C (" E) (~~Yes or No~~)

20. It is certified that the invalid

(a) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration.) Yes Hospital:- observation + surgical interference if necessary.

(b) ~~Does not require treatment.~~

(c) ~~Should pass under his own control.~~

(d) ~~Should not pass under his own control.~~

(Strike out condition not applicable.)

21. It is recommended that ~~the invalid be discharged~~. (When not for discharge add special recommendation.)

that he be invalided to Canada.

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

PLACE Epsom Surrey Eng

DATE Feby 26th 1919

F. E. Pettman Major President.

J. Moody Capt. Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned .... understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness .... Signed ....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

.... President.

PLACE ....

DATE .... Members

APPROVED BY A. Collins Major, C.A.M.C.

Assistant Director of Medical Services.

DATE for A.D.M.S., Canadians, London Area.

APPROVED BY

ASSISTANT DIRECTOR OF MEDICAL SERVICES, CANADIANS. LONDON AREA. FEB 27 1919 13. BERNERS ST. LONDON, W.1

Director General of Medical Services.

DATE

R—122

LTR

Rank | Name STABBACK, Adam Elliott | Reg'l No. 745009

Unit 109th, Bn. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment Uxbridge, 1st, November, 1915, | Place of Birth Woodville, Victoria, Co Ontario.

Name and Address, Next-of-Kin Adam Elliott. Stabback. P.O. Woodville, Ontario, Canada. | Relationship Father.

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character

N/E. R.B. p. 9090
File R.L.
Category

R139

H. W. & V., Ld.—7165-16.

Report. Date.	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.
		Arrived in England per H.M.T. 2810 31-7-16			
4.8.16	O.C. 109th	Admitted to Hospl	Connaught	4.8.16	C.L.*2 Pt. II D.O. 219
5.8.16	✓	Apptd Prov. Cpl.	Oxney		Pt. II D.O. 216
22.9.16	✓	Dis from Connaught Hos	Bramshott	21.9.16	Pt II D.O. 266 C.L. 25.
5-10-16	✓	S.O.S. to 20th Battn	do	5-10-16	Pt II D.O. 279
11-10-16	20th B'n	T.O.S. from 109th B'n	Field	6-10-16	" II 55.
11-10-16	do.	Reverts to Private on arr. in France	"	6-10-16	" II 55.
23.3.17	do	Adm. 6 Can. Fld. Ambal.	"	1.3.17	C.L. A467
28.3.17	do.	To Can. Rest Station (ex do)	"	4.3.17	" A471
31.3.17	"	" 4 Can F. Amb.	"	4.3.17	" A474

A.F.B. 103 CHECKED 16 OCT. 1916

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.				
31.3.17.	20th Bn	To 6 C.F.A. (ex D.O.4)	Field	8.3.17	C.L.A. 474 P.U.O.
4.4.17	"	Rejoined Unit	"	17.3.17	" A477
17.4.17	"	Adm'd No.7 Austral. Gen. Hos.	Wimereux	6.4.17	" A486 " S.L.
17.4.17	"	Adm'd The Cottage Hosp.	Southport	12.4.17	" B319 "
19.4.17	1st C.O.R.D.	T.O.S. of 1st C.O.R.D.	W. Sandling	12.4.17	Pt. 2 O. 41
23.4.17	20th B.	Inv'd (Sick) & posted to 1st C.O.R.D.	Field	9.4.17	" 31.
11-7-17	"	Tfd to Mil. C. Hf.	Epsom.	4-7-17	C.L. B.383. P.U.O.
16-8-17	"	Dis to do	"	10.8.17	" " 411 "
18.8.17.	1 C.O.R.D.	S.O.S. on trans. to C.A.M.C. Epsom	Pte W. Sandling	15-8-17	Pt. 2 O. 162 1st C.O.R.D. Pt. II p. 183 d/ 8/17.
17.8.17	canmed	T.O.S. from 1st C.O.R.D.	Pte W.hqr	15.8.17	— 229
17.8.17	do	S.O.S. to C.C.H. Epsom	Pte do	15.8.17	— 229
13-9-17	M.C.H.	T.O.S. ex C.A.M.C.D.	Pte. Epsom	15-8-17	Pt. II p. 256.
11-11-18.	M.C.H.	appt'd a/Cpl with P & A	Pte. Epsom.	31-10-18.	— 11 — 315.
28.2.19	M.C.Hp	S.O.S. to camccon for Inv to Can.	a/Cpl Epsom	28-2-19	— 59 & 97 camccon d/26-4-19
30-8-19	camc	Invalided to Canada SL 501 M.D. 2	a/Cpl Epsom	23-5-19	C.L.C. 530
17.7.19	Camc C.D.	Disc from Hosp an S.O.S. OMFC on Transfer to CEF in Canada	a/Cpl Witley	23-5-19	— 167

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) STABBACK. A.E.

REGIMENT O.A.M.C. RANK Cpl No. 745009

Date of Examination in England 17/2/19 | 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 FIT
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 No
- (*b*) In England
- (*c*) In France

Signature of Dental Officer [illegible] Capt

[illegible]

M

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

EG

War Service Badge, Class A No. 287423 issued

1. No. #745009

2. Rank CPL.

3. Name STABBACK, Adam, Elliott

4. Unit 116th Battalion (#2 D.D.)

5. Date of Discharge OCT 10 1919 Place TORONTO, ONT.

6. Reason for Discharge "MEDICALLY UNFIT"

7. Authority (#2 D.D. Part 11 Daily Order #281)

8. Proposed Residence after Discharge

~~C/O P.O. Woodville, Ontario.~~ (WAR SERVICE GRATUITY ADDRESS)

HB (going to work address) ~~GLEICHAN, Alta. CANADA~~

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. ?

A E Stabback

Signature of Soldier.

10. CONFIRMATION.

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

No. 2 DISTRICT DEPOT
OCT 10 1919
TORONTO.

Place TORONTO, ONT.

Date OCT 10 1919

Signature H Sargent Capt

(O.C. Discharging Unit.)

For O.C. No. 2 District Depot.

K.C.D

M.F.B. 218a—150M-3-19—1772-39-113.

17-11-19 A.D.

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

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS S 9782

Date of Assignment Aug 1/16

9c19 S13 B.

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

20			

PARTICULARS OF SEPARATION ALLOWANCE

No. 745009

Rank Cpl. Promoted Reverted Discharge

Soldier's Name A. E. Stabback

Battalion 109 Btn B. Co.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT (Father)

Name A. E. Stabback

Address Woodville Ont.

Change of Address

1

2

3

4

Date	Cheque No.		Amount S/A	Amount A/P	Total	
1917 Dec 31		—		340 ✓	340	
Jan/18	X	70140		20	20	
Feb	F	69035		20	20	D
Mar	T	94572		20	20	✓
Apr	U	8946		20	20	✓
May	Y	16740		20	20	✓
June	X	26764		20	20	✓
July	C	26310		20	20	✓
Aug	W	38097		20	20	✓
Sept	7	36260		20	20	✓
Oct.	D	43245		20	20	✓
Nov.	7	51401		20	20	✓
Dec.	Q	67238		20	20	✓
Jan./19	J	72983		20	20	✓
FEB	O	76774		20	20	
MAR	B	82678		20	20	
Apr.	W	162		20	20	✓
May	Q	6420		20	20	
June	J	11661		20	20	
				700	700	

REMARKS 17701-A-8

MRO L.P. 109695 dated 11/6/19

A/c Closed 20-6-19

Ret'd per Megantic

Date 2/6/19 M.F.W. 11/6/19

Clerk

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

M.F.W. 128. 4'0M. 6-7-17 72-39-1141 L.L. 22320—M. & D. 1893.

MP 2

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
	20					

M. F. W. 128.
4'Om. 6-7—172-33-1141
L. L. 22320—M. & D. 7993.

"MEGANTIC" 3-6-19

S5452

No. 2 DISTRICT DEPOT

AUDITOR	PAYMASTER
[illegible]	[illegible]

10

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

M. OR S.

REGT. No. 745009 RANK Cpl. NAME (IN FULL) STABBACK, A.E. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. Carm C. — IF IN P.F. WHAT UNIT? P.O. Woodville, Ont

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 1/11/15 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 20.00 — DATE EFFECTIVE 1.7.19

PAYABLE TO A E Stabback — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Woodville — Cancelled from Oct 1/10/19 on discharge

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Toronto — DATE 10/10/19 — REASON M U — AUTHORITY D.O 281 — IF ENTITLED TO POST DISCHARGE PAY 183 days

MONTH	PAY AND F.A. No. of Days	Rate	Amount	Other Credits		Total Credits	Acquittance Rolls Col. No. 1	Col. No. 2	Col. No. 3	Cash Payments Col. No. 1	Col. No. 2	Col. No. 3	Assigned Pay	Regimental Charges	Other Charges		Total Debits	Balance Debit	Balance Credit	Particulars or Remarks
																				T.O.S. 23/5/19 D.O. 158
																				SUBS. 4/6/19 18/6/19 158
BALANCE FROM PREVIOUS ACCOUNT 31/3/19		1.20			37.08															
						37.08														
								31 89		9.73										
								54 04		48.67										
								17 5.9		9.73										
								26 5.7		4.87										
								31 1.3		24.33										
								46 13		24.33										
								18 44		24.33										
								Advance		20.00			60.00				235.86	198.78		April May June FP
								Boat Train.		4.87 / 5.00										
1/4/19	30	1.20	36.–	12.00											198.78					
May	31		37.20																	
June	30		36.–			121.20											198.78	77.58		
July	31		37.20			37.20			26/7-97 147001			5.–			77.58		82.58	45.38		W.S.G. PAID IN FULL [illegible]
Aug	31	1.20	37.20			37.20	12/8-110 147971		25/8-121 149523	5.–		5.–			45.38		55.38	18.18		CAPTAIN PAYMASTER WAR SERVICE GRATUITY; no AP Aug sent
Sep	30	1.20	36.–			36.–	12/9-136 151037		26/9-148 152116	5.–		12.82			18.18		36.–			no AP Sept
Oct	10	1.20	12.–	35.–					159-9/10											
				70.–		117.–			152 833			117.–					117.–			1st Payment, War Service Gratuity
				W.S.G.											W.S.G.			AMOUNT DUE SOLDIER DEPENDENT		
183 Dys				420.00		420.00				Oct 10					70.00		70.00	350.00		
									AP 181	Nov 5	1456355				70.–		140.–	280.–		80
				7.30		427.30			209	Dec 8	1731175				70.–		210.–	217.30		80; 8th 28.3.19 to 7.4.19 = 10 days came. CC D.O. 80 4.4.19
									233	Jan 7	1737887				70		280	147.30		80
									258	Feb 5	1743744				147.30		427.30	0		
						427.30									427.30		427.30			

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1390.