

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? *Shaver Eadie*
2. In what Town, Township or Parish, and in what Country were you born? *Brant County Ontario*
3. What is the name of your next-of-kin? *Lewis Eadie*
4. What is the address of your next-of-kin? *Oakland P.O. Manitoba*
5. What is the date of your birth? *27 March 1869*
6. What is your Trade or Calling? *Orchardist*
7. Are you married? *Widower*
8. Are you willing to be vaccinated or re-vaccinated? *yes*
9. Do you now belong to the Active Militia? *yes*
10. Have you ever served in any Military Force? *4 years 1901 to 1906*
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? *yes*
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? *yes*

Shaver Eadie (Signature of Man).

Edith H. Furman (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Shaver Eadie*, 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.

Shaver Eadie (Signature of Recruit)

Date *22 Sept* 1914. *Edith H. Furman* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Shaver Eadie*, 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.

Shaver Eadie (Signature of Recruit)

Date *22 Sept* 1914. (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 *Larnshe South* this *9th* day of *January* 1914.

Lipset M W (Signature of Justice)

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

Lipset M W (Approving Officer)

90th
8th

Capt

Description of Eddie Shaver on Enlistment.

Apparent Age 45 years 6 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height 5 ft 10 ins.

large scar at right groin

Chest measurement { Girth when fully expanded 34 1/2 ins.
Range of expansion 2 1/2 ins.

1 scar left arm

Complexion medium

Eyes blue

Hair gray scanty

Religious denominations. { Church of England
Presbyterian
Wesleyan
Baptist or Congregationalist Baptist
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 Sept 19 1914.

H. J. Birkin

Place Halifax

Capt Runc

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.

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

[Signature]

(Signature of Officer)

Date 9-1- 1914.

ans. 10-12-18

OFFICERS.
DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Proceedings of Court of Inquiry or on men
reported Missing on Active Service.....

5 Attestation Papers..... 3

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for
Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet..... 2

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

Name **EADIE, S.**

Regt. No. Rank **Lieut.**

Corps **8th Bn.**

Died-of-Wounds, 2-3-16

M

H

00079

H

Box #
2797

3
1-15
1-15

1 case said
292 91237
1849

Cpt (X*)
I.D. number
No. d'identification

EADIE
Surname
Nom de famille

S
Given names
Prénoms

Died of wounds 2-3-16

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU
PERSONNEL

Location
Lieu

2797



CERTIFIED CORRECT

21 NOV 1918

CANADIAN RECORD OFFICE

Army Form B. 103. 207

Duplicate.
Casualty Form—Active Service.Regiment or Corps 8th. BattalionRegimental No. 22,914Rank Lieut.Name S. EadieEnlisted (a) 9/15

Terms of Service (a) _____

Service reckons from (a) 9/15Date of promotion to
present rankDate of appointment
to lance rankNumerical position on
roll of N.C.O.s.

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				
15 th /15	Rouen	Notification of embarkation to 8 Bn.			Telegram
27/11/15	8 Bn	Taken on strength 8 Bn as reinforcement with rank of Captain	Field	17/1/16	Part II order 20.39 27/1/15. File KD 1386.
20/1/16	8 Bn	Joined unit	Field	19/1/16	B213.
29/1/16	8 Bn	To Div. school of instruction		22/1/16	B213. Des. 247
12/2/16	8 Bn	Returned from school		5/2/16	B213. Des 253.
19-2-16	8 Bn	On leave		16-2-16	B213. Pt. II. Orders No 10, 19/6
26-2-16	8th Bn.	Returned from leave	Field	26-2-16	B213.—
2-3-16	OC. C.C.C. STN.	Seed of wounds received in action 11.45 a.m.	Can. Cas. Hq. STN.	2-3-16	Wire C.N. 2114. D.C.S. No 260 (12 noon 2-3-16).—Part II. Orders No 11, 17-3-16



C. J. Church

Captain
for Lieut-Col., A.A.G.
Canadian Section.(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.

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				



Hollerith
27-1-22

1.
SURNAME.

Eadie

CARD NO.

CHRISTIAN NAMES

Shaver

FOLL.

D

REGL. NO.

RANK

Lieut Capt

UNIT

~~8th~~ *32nd*

Batt

FORMER CORPS

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Eadie Lewis,

RELATIONSHIP TO SOLDIER

brother

ADDRESS

Oakland

Manitoba

COUNTRY OF BIRTH

DATE

PLACE OF ATTESTATION

DATE

MARRIED

SINGLE *yes*

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

H.A.F.

EADIE, Shaver, Capt. 8th Bn.

MEDALS &
DECORATIONS

Reginald Wesbrooke Eadie (Son)
R.R. No. 1, Penticton, B.C.

PLAQUE &
SCROLL

Son, as above.

MEMORIAL
CROSS

No one entitled.

249508
Pt 2779
Regn. No. 1 1921
Regn. No. 1 1922
JUL 7 - 1922
48284
Scroll Desp. JUL 7 1921
Plaque Desp.

E lig. for star Capt. 8th Bn.
" v.m.
" B.W.M.
m-j.



NAME

Eddie Shaver.

REGT'L No.

RANK

CABLE

Lieut.

8th Batt.

NO.

DATE

NATURE OF CASUALTY

NO.

2*

FOLL.

R. 181

7-3-16

Died of wounds Mar.

M 4189

3-3-16.

2nd. Natl Chs. Cl. Station,

B. 2090A

Rosen 28-3-16

" " " " " "

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

304(1)

1st. C. Cas Cl. Stat.

2.3-16

Rec'd of Hound.

Name Eadie, S.

Rank Lieut.

Reg. No.

Unit 8th Batt.

a & B. 104-93.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/KO.	W.O. List
2-3-16	1st Can.Cas.Clrg.Stn	DIED OF WOUNDS	304M4189	4/3		

[illegible]

No

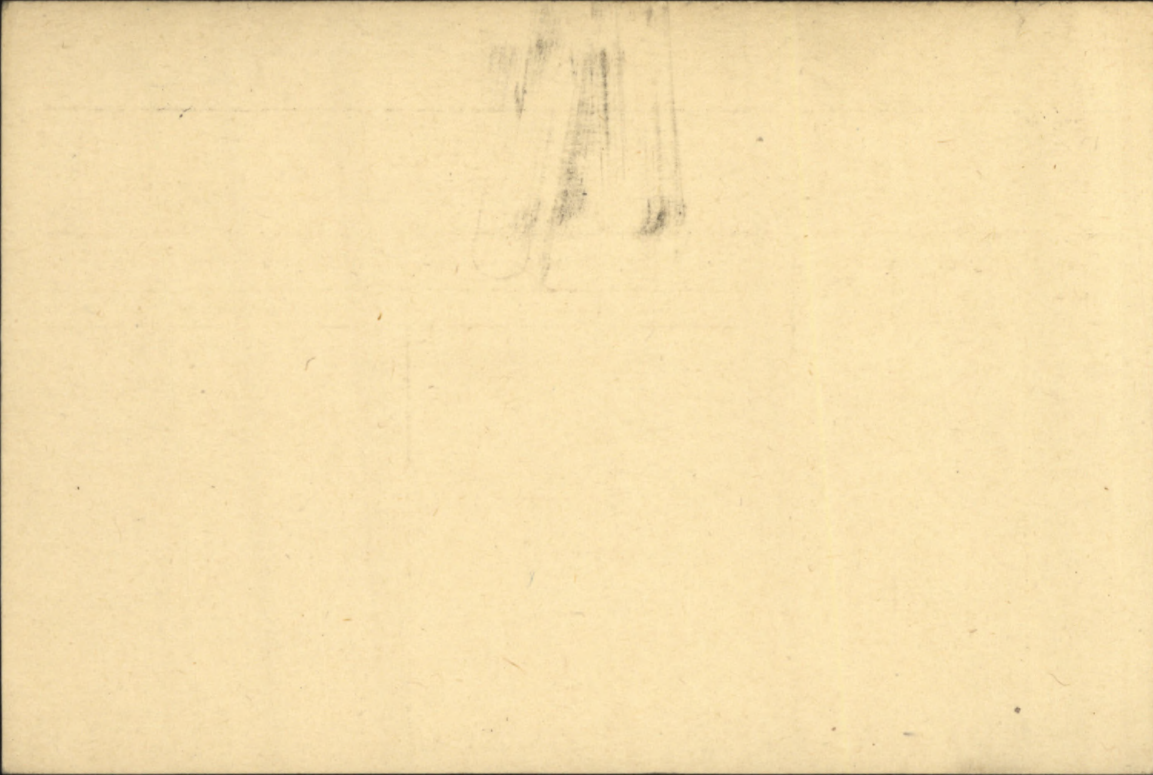
RANK *Capt.*NAME *Eadie S.*

T. O. S.

UNIT *90 Regt. (Winnipeg Rifles)*M. D. *10*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1914</i>	<i>1914</i>			
<i>Aug. 12th</i>	<i>Aug. 20th</i>	✓	<i>Paylist states rank as private only.</i>	
<i>Aug. 22nd</i>	<i>Aug. 27th</i>	✓	<i>" " " "</i>	
<i>Aug. 28</i>	<i>Sept. 21</i>	✓	<i>On <u>8th</u> in paylist.</i>	
<i>Sept. 22</i>	<i>Oct. 31</i>	✓		

UNIT SAILED
OCT 3 1914



Surname

Christian Name

Reg. No.

Rank

Unit

MEDICAL BOARD held at¹

Date

Serial No.

(1)

Other Medical Boards at

Date

Serial No.

(2)

(3)

(4)

(5)

Condition found by Board

Disposition Recommended

(1)

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at

Date.....

Disposition

Remarks

Eadie.

S.

Lieut. 8th. Battn.

No.1. Cas. Clg. Sta.

DIED OF WOUNDS:- 2-3-16.

C.L. 4-3-16. 304.

B.

A.M.D. 2 DEPT.

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

NAME EADIE. S.

Regimental No.

Lieut

Name and address of next-of-kin

Unit

8th Battalion

Lewis Eadie,

Date of enlistment

9th Jan. 1915.

Oakland, Man.

Place of

Brant Co., Ont.

Married (yes or no)

Widower

Date and place discharged

Amount of pay assigned monthly \$

Reason for discharge

To whom payable

Character on discharge

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount	No.	Date					
1914														
Sep 22	Oct 31	40	2.20	88.00	40	6.00	240.00			100.00			100.00	
Nov 1	30	30	1.60	48.00	30	1.80	54.00			82.00			82.00	✓
Nov 1	31	31	1.60	49.60	31	1.80	55.80	2		82.60			82.60	✓
Nov 1	31	31	1.60	49.60	31	1.80	55.80			80.60			80.60	✓
Nov 1	31	31	1.60	49.60	31	1.80	55.80			72.80			72.80	✓
Nov 1	31	31	1.60	49.60	31	1.80	55.80			111.60			111.60	✓ Mess.

[illegible]

MEDICAL CASE SHEET.*

[illegible]

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

Station
and Date.

MEDICAL CASE SHEET.

Number

Rank

Lieut

Surname

EADIE.

Christian Name

Shaver.

Units

Theatre of War

France

Date of Service

22.9.14.

17.11.15

23/16

Remarks

M.R.

Latest Address

*(Son) Reginald Westbrooke Eadie,
R.R.#1*

Roll No.

P. Page 14618. Penticton, B.C.

200m.-2-21.M.

DESP. AUG 10 1927

REGN. NO.

SN 73

169
REG. NO. NAME badier S.
(SURNAME FIRST)

RANK Capt. CORPS

AGE 45 SERVICE

NAME OF HOSPITAL General PLACE Montreal, Que.

DATE OF ADMISSION 2-9-14

DISEASE Hernia Inguinal Rt.

DISCHARGE 16-9-14

OPERATION

DISCHARGED TO DUTY yes

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

REMARKS

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

Army Form B. 181.

(To be attached to Case Sheet.)

Canadian Military Hospital Moore Barracks.

No.

Rank and Name

Captain Shaver Eadie

Age 49

Service

Disease

Date of admission

Date of discharge

June 14 ⁵ -

1915

Result

Cured

Dates of
Observation

Days of Disease

Temperature
Fahrenheit

107°

106°

105°

104°

103°

102°

101°

100°

99°

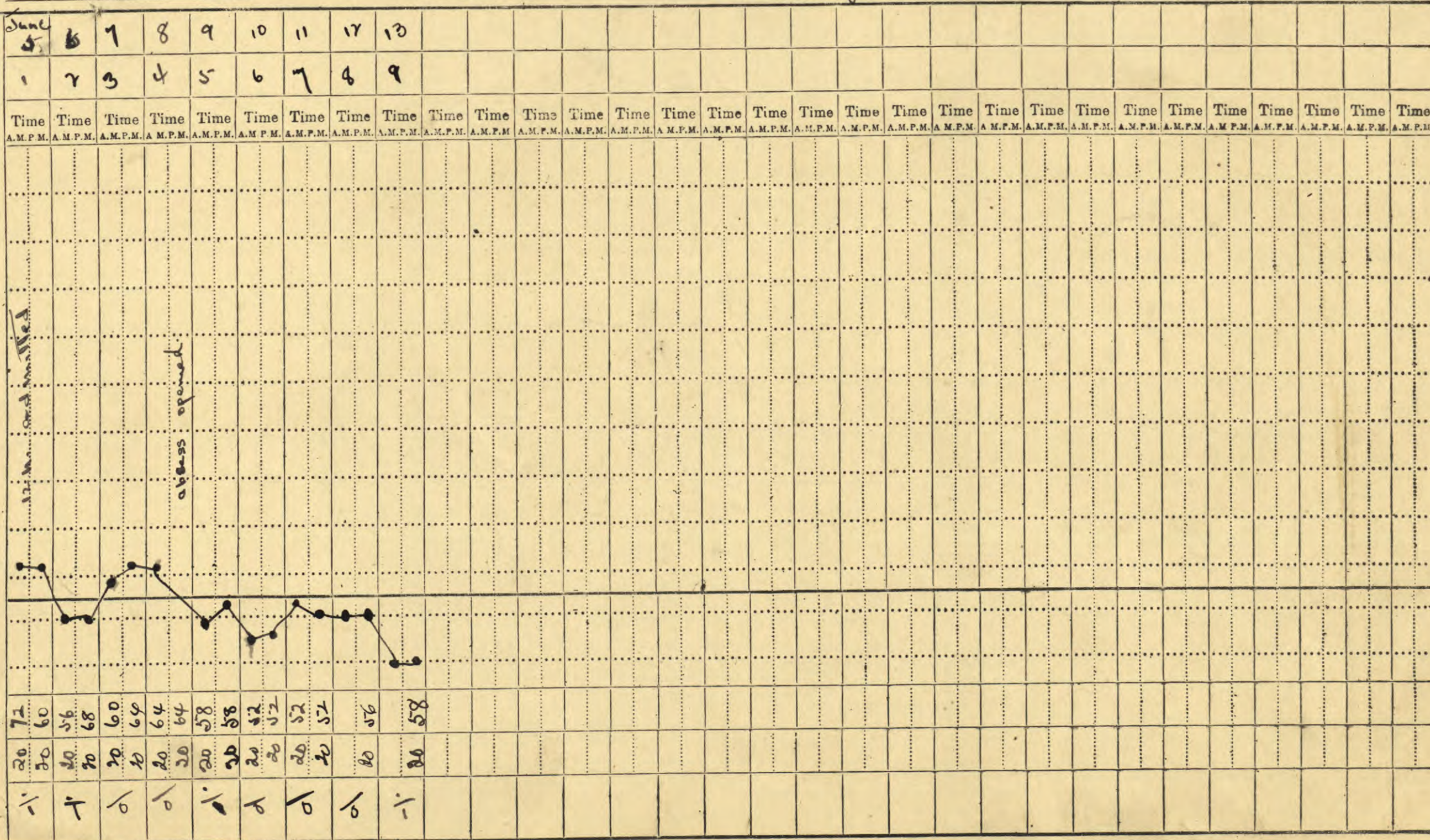
98°

97°

Pulse per Minute

Respirations per
Minute

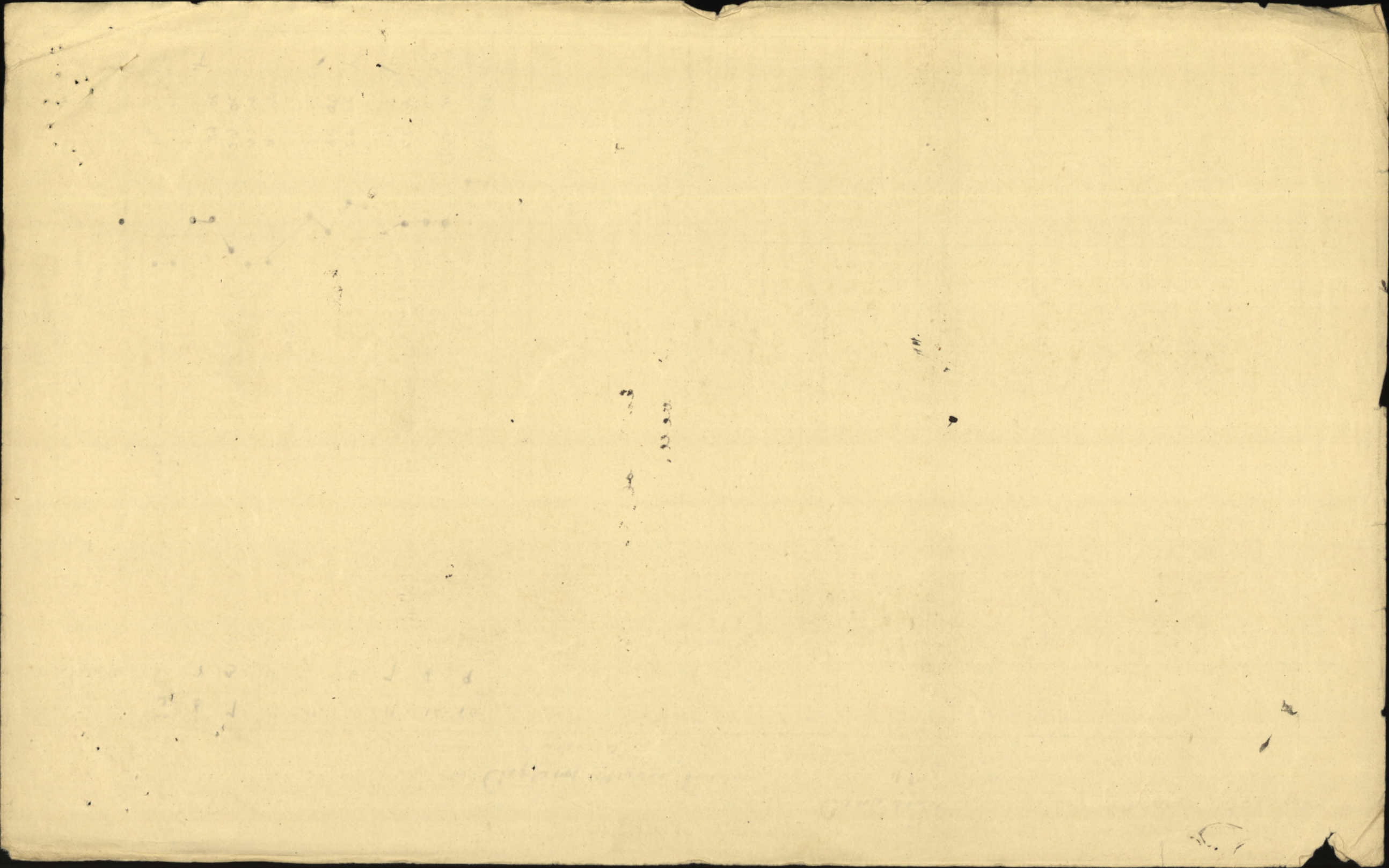
Motions per 24
hours



Signature

Fairbanks Capt.

In charge of case.



P-15.

ASSIGNED PAY.	UNIT.	RANK.	NAME.
Beneficiary	NAME OF	DATE	AUTHORITY
Address	DATE	AUTHORITY	
Amount. \$			
Separation Allowance issued. Yes or No.			

8 Battr.
Lieut.
Name *Eadie*
Initials *S*
Bank *Bank of Montreal*
Died of wounds. CR 30A, 236

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case	INITIALS
1916								
Apr 1	Brought forward		111 60			6 ^N 111 60		
July 27	Tfr to N.E. Branch			111 60		6 ^N		
Sep 1	Money found on body.		7 99			6 ^N 7 99		
Feb.	Tfr to N.E. Branch. 1727 N.E. Br.			7 99		6 ^N		

NAME

DATE OF APPOINTMENT

MARRIED (YES OR NO)

NEXT OF KIN:— NAME

ADDRESS

DATE NON-EFFECTIVE

AND CAUSE

Edie. S. (Lieut)
No. 22 Sept. 1914.
Lewis Edie. (Brother)
Oakland. Mass.
2.3.16.
Died of Wounds. C.F. #304.

UNIT

ASSIGNED PAY:—

MONTHLY AMOUNT

TO WHOM PAYABLE

BANK IN WHICH PAY & ALLOWANCES DEPOSITED

8th Battalion
N^o 8th (17/11) (R.O. 3662 L.I.D. 1915)

1915-16

Bank of Montreal

PERIOD	No. OF DAYS	REGTL. RATE	PAY				RATE OF FIELD ALLOWANCE	ALLOWANCES				TOTAL PAY AND ALLOWANCES	ASSIGNED PAY	SUNDY. DEDUCTIONS	NET P. A.	PAID IN CASH	DEPOSITED IN BANK	CARRIED FORWARD	REMARKS
			AMOUNT OF REGIMENTAL	COMMAND	ADJUTANT	CR. FROM PREV. ACCOUNT		AMOUNT OF FIELD ALLOWANCE	P. F. ALLOWANCE	MESSING	SUBSISTENCE								
1/4 30/4	30	r	60				60	18		34		112			112				Incl Self.
1/5 31/5	31		62				62	18 60		31		111 60			111 60				
1/6 30/6	30		60				60	18		30		108			108				
1/7 31/7	31		62				62	18 60		31		111 60			111 60				
1/8 31/8	31		62				62	18 60		31		111 60			111 60				
1/9 30/9	30		60				60	18		30		108			108				
1/10 31/10	31		62				62	18 60		31		111 60			111 60				
1/11 30/11	30		60				60	18		30		108			108				
1/12 31/12	31		62				62	18 60		31		111 60			111 60				
1/1 31/1	31		62				62	18 60		31		111 60			111 60				
1/2 31/2	31		62				62	18 60		31		111 60			111 60				
1/3 31/3	31		62				62	18 60		31		111 60			111 60				
366 @ 360 =																			

SUNDY PAYMENTS

DATE	CHEQUE No.	PARTICULARS	AMOUNT					REMARKS
			\$	C.	£	S.	D.	
1915.								
Apr 14	138.	Subsistence Mch 1915 in Portsmouth	32	69	6	14	4	
May 10		Outfit all.	100		20	10	11	
May 14	1715.	Subsistence.	29	36	6	1	8	

0915-2525

UNIT

5th Battalion

NAME _____

DATE OF APPOINT

MARRIED (YES OR NO)

NEXT OF KIN:—

ASSIGNED PAY:—

MONTHLY AMOUNT

Lieut. S. Cadie

TO WHOM PAYABLE

DATE NON-EFFECT

AND CAL

BANK IN WHICH PAY & ALLOWANCES DEPOSITED

Died of wounds 2. 3. 16 61. 304

PERIOD		No. OF DAYS	REGTL. RATE	AMOUNT OF REGIMENTAL	PAY		CR. FROM PREV. ACCOUNT	TOTAL PAY	RATE OF FIELD ALLOWANCE	Charges	Debit Balance P.F. ALLOWANCE	ALLOWANCES			TOTAL	TO ALL
FROM	TO				F.A. COMMAND	Assessing ADJUTANT						Balance	MESSING	Bank		
22 ⁹ / ₁₄	21 ¹⁰ / ₁₄	40		80	24			104				4	100			
1 ¹⁰ / ₁₄	30 ¹¹ / ₁₄	30		60	18		4	82				2	80			
1 ¹² / ₁₄	31 ¹² / ₁₄	21		62	18 60		2	82 60					82 60			
1 ¹⁵ / ₁₅	21 ¹⁵ / ₁₅	31		62	18 60			80 60					80 60			
1 ²⁵ / ₁₅	28 ²⁵ / ₁₅	28		56	16 80			72 80					72 80			
1 ²⁵ / ₁₅	21 ²⁵ / ₁₅	21		62	18 60	21		111 60					111 60			
1 ²⁵ / ₁₅	30 ²⁵ / ₁₅	30		60	18	24		112					112		Incl. Feby	
1 ⁵ / ₁₅	21 ⁵ / ₁₅	31		62	18 60	31		111 60					111 60			
1 ⁶ / ₁₅	30 ⁶ / ₁₅	30		60	18	30		108					108			
1 ⁷ / ₁₅	31 ⁷ / ₁₅	31		62	18 60	31		111 60					111 60			
1 ⁸ / ₁₅	31 ⁸ / ₁₅	31		62	18 60	31		111 60					111 60			
1 ⁹ / ₁₅	30 ⁹ / ₁₅	30		60	18	30		108					108			
1 ⁹ / ₁₅	31 ⁹ / ₁₅	31		62	18 60	31		111 60					111 60			

see continued next page

see continued next page

Statement of
SEP 1 1918
Account rendered

SUNDRY PAYMENTS

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

DATE

AUTHORITY

DATE

AUTHORITY

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.

Name

Initials

Bank

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialed by P.M. in every case

INITIALS

UNIT

8th Battalion

NAME _____

ASSIGNED PAY:—

MONTHLY AMOUNT

Lieut. S. Cadie

TO WHOM PAYABLE

DATE OF APPOINTMENT: 11/11/1964

MARRIED (YES OR

NEXT OF KIN:—

DATE NON-EFFECT

ND CAU

BANK IN WHICH PAY & ALLOWANCES DEPOSITED

PERIOD		No. OF DAYS	REGTL. RATE	AMOUNT OF REGIMENTAL	PAY		CR. FROM PREV. ACCOUNT	TOTAL PAY	Ras Pay RATE OF FIELD ALLOWANCE	Charge AMOUNT OF FIELD ALLOWANCE	ALLOWANCES			TOTAL	TO ALLO
FROM	TO				F.A. COMMAND	Messing ADJUTANT					P.F. ALLOWANCE	Messing ALLOWANCE	Subsistence ALLOWANCE		
1 ¹¹ / ₁₅	30 ¹¹ / ₁₅	30	2	60	18	30		108						1302	
1 ¹² / ₁₅	31 ¹² / ₁₅	31		62	1860	31		11160						108	
1 ¹⁶ / ₁₆	31 ¹⁶ / ₁₆	31		62	1860	31		11160						11160	
1 ² / ₁₆	29 ² / ₁₆	29		58	1740	29		10440		894				9546	10 Boops. Ord Issue V.4365
1 ³ / ₁₆	31 ³ / ₁₆	31		62	1860	31		11160						172866	
				Credit Balance									11160		
W.E. Sept 1/16							7.99						11959		799 Cash in Eff. Feb. 197.
" " /16										119.59			0		119.59 Trans to Gen. for Sett.

Statement of
SEP 1 1916
Account rendered

SUNDRY PAYMENTS

DATE _____

CHEQUE NO.

PARTICULARS

DATE AUTHORITY

Name _____

Initials

Bank

Separation Allowance issued. Yes or No.....

INITIALS

Rank and Name

EADIE Shaver
Lieut.

Regimental No.

Name and Address of Next-of-kin

Lewis Eadie.
Oakland, Can.

Unit

8th. Battalion.

Date of enlistment

9th. Jan. 1915.

Place of birth

Ontario.

Married (Yes or No)

Widower.

If in Permanent Force

Promotions or appointments

Report

Date and place of discharge

Reason for discharge

Character on discharge

A.F.B. 103

A.F.B. 103

Date

From whom
receivedRecord of promotions, reductions,
transfers, casualties, etc., during active
service. The authority to be quoted
in each case.

Place

Date

REMARKS
Taken from Official Documents

8-5-15 Comd Canan Transferred from 11th to 32nd Sharncliffe
25-5-15 GC. 32 Batt On Strength 32nd Batt
" " Discharged from Hospital
On Strength 32 Batt.
11 Batt. Transf. to 11 (Res) Batt.
15th 11th Range Notification of embarkation to 8th Bn
27-11-15 8 Bn. having arrived from Eng to T.O.S. as Reinforced
4-3-16 Tel. Died of Wounds 1st Can Casldy An (tel)

Routine orders 541
7-5-15 A 7 B 158
14-6-15 Part II orders 166-261
8-7-15 Muster Roll.
4-9-15 Part II orders.
17-11-15 Telegram 8 Batt Pt II and 39
2-3-16 C.L 304 Pt II 8 Bn.

21 NOV. 1918

Rank and Name

Regimental No.

REMARKS
Taken from Official Documents
Date of enlistment

Place of birth

Married (Yes or No)

In Permanent Force

Promotions or appointments

Report

Date
From whom
received

Place Date

Place Date

Record of promotions, reductions,
transfers, casualties, etc., during active
service. The authority to be quoted
in each case.

Place

Date

Character on discharge

Reason for discharge

Date and place of discharge

Record of promotions, reductions,
transfers, casualties, etc., during active
service. The authority to be quoted
in each case.From whom
received

Report

Date

ORIGINAL.

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only.
Army Form B. 178^A to be used for Special Reserve recruits
and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Eadie Christian Name Shaver

TABLE I.—GENERAL TABLE.

Birthplace .. Parish Brant County County Ontario
Examined { on 23 day of September 1914.
at Valcartier

Declared Age 46 years 30 days.

Trade or Occupation .. Merchant

Height 5 feet, 10 1/2 inches.

Weight 145 lbs.

Chest { Girth when fully Expanded 33 1/2 37 37 inches.
Measurement { Range of Expansion 33 to 37 inches.

Physical Development .. Good

Vaccination Marks { Arm .. 2 Right 2 Left 2
Number 2

When Vaccinated 5 Oct 1915

Vision { R.E.—V=
L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease { (a) Scar on right shoulder blade from a scald.
Scar from operation for right inguinal hernia.

(b) Slight defects but not sufficient to cause rejection {

Approved by .. (Signature)
(Rank)

Capt. Moore. C. S. M.C.
Medical Officer.

Enlisted { at Winnipeg
on 10 day of August 1915.

Joined on Enlistment ..	Corps.	Regtl. No.
	<u>90th Winnipeg Rifles</u>	<u>Capt.</u>
Transferred to ..	<u>Transferred to 32nd Reserve Battalion C.E.F.</u>	

Became non-effective by ..
on .. day of .. 191 ..
(Signature)
(Rank)

Table II.—Only for Admissions to Hospital or to the Sick

[illegible]

List in the case of Warrant Officers treated in quarters.

ks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.

Signature of Medical Officer

Cured

Jas Roberts Capt

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

[illegible]

Table IV.—Service Table.

[illegible]