

# FIRST NEWFOUNDLAND REGIMENT

.....on the (Date)

|       | 5 611                                   |
|-------|---|
| No.   | N887                                    |
| o Co. | *************************************** |

z:-(Name) . .

ATTESTATION OF

| Questions to be put to the  | Recruit before Enlistment.   |
|---|--|
| 1. What is your name?   | , Reducek about  |
| 2. Wrat is your full Address?   | 2 6/16   |
| 3. Are you a British Subject?   | 3. 4.  |
| 4. What is your age?  | 4  |
| 5. What is your Trade or Calling?   | 5. of the housement.   |
| 6. Are you Married?   | 6  |
| <ol> <li>Have you ever served in any Branch of His Ma<br/>jesty's Forces, naval or military, if so,* which?</li> </ol>  | 7 XXX)   |
| 8. Are you willing to be vaccinated or re-vac-  | 8 14 . 9   |
| 9. Are you willing to be enlisted for General Ser-  | 9. THE W   |
| 10. Did you receive a Notice, and do you under-<br>stand its meaning, and who gave it to you?   | Corps THE  |
| 11. Are you willing to serve upon the conditions as en to be signed by you if you are accepted?   | abodied in the roll of service   |
| made by me to the above questions are true, and that I  | do solemnly declare that the above answers am willing to fulfil the engagements made.  SiGNATURE OF RECRUIT.  Signature of Witness.  |
| bear true allegiance to His Majesty King George the Fifth   | ECRUIT ON ATTESTATION.  do make oath, that I will be faithful and His Heirs and Successors, and that I will, as in duty eirs and Successors, in Person, Crown and Dignity against  |
| CERTIFICATE OF MAGISTRA   | TE OR ATTESTING OFFICER.   |
| The Recruit above named was cautioned by me that<br>he would be liable to be punished as provided in the Army   | if he made any false answer to any of the above questions  |
| The above questions were then read to the Recruit   | 0 /  |
| 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 on this   | 6 thank luge of  |
| †CERTIFICATE OF A   | PPROVING OFFICER.  |
| I certify that this Attestation of the above-named Re   | cruit is correct, and properly filled up, and that the re-   |
| A PROPERTY OF A | dingly approve, and appoint him to the :   |
| If enlisted by special authority, such will be attached   | The second secon |
| Date191   | Approving Officer.   |
| Place   | Approving Omcer.   |
| † The signature of the Approving Officer is to<br>‡ Here insert the "Corps" for which the Recru   |  |

\* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, .....re-enlisted in the (Regiment).....

## DESCRIPTIVE REPORT ON ENLISTMENET Applicable to all ranks. To correspond with entries on the Medical History Sheet. Name. Height vears months. Apparent age..... Girth when fully expanded... Chest Measurement Range of expansion Distinctive marks..... INFORMATION SUPPLIED BY RECRUIT Name and Address of next of kin .... | Relationship... Particulars as to Marriage (a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage. (c) Present address. (d) Initials of Officer verifying entry. (4) Particulars as to Children Christian Names Date and Place of Birth STATEMENT OF THE SERVICES Service in Re-serve not allow-ed to reckon to-wards G. C. Pay Signature of Officers certi-Corps in Rgt. or which served Depot Promotion, Reductions, Casualties, &c. Army Rank Dates fying correctness of entries Years Days Years Days Service towards limited engagement reckons from Joined at Total Service forfeited as above.....

132885 Recruiting Form B, 1915



### FIRST NEWFOUNDLAND REGIMEN

|     |      | 1 |
|-----|------|---|
| ac. | 288  | - |
| No  | 7 00 | ~ |

viz: - (Name) . .

Ouestions to be put to the Recruit before Eulistment, I. What is your name? ..... 2. Wrat is your full Address? ..... 3. Are you a British Subject? ..... 4. What is your age? ..... 5. What is your Trade or Calling? ..... 6. Are you Married? ..... Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,\* which? 8. Are you willing to be vaccinated or re-vac-) cinated? ..... 9. Are you willing to be enlisted for General Ser-) 10. Did you receive a Notice, and do you under-stand its meaning, and who gave it to you?....} 10. Corps .. 11. Are you willing to serve upon the conditions as embodied in the roll of service } 11. Are you willing to serve upon the conditions as embodied in the roll of service } 11. ....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 made. Signature of Witness. OATH TO BE TAKEN BY MECRUIT ON ATTESTATION. 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, according to the conditions of my service. CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER. 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 Signature of Attesting Officer †CERTIFICATE OF APPROVING OFFICER. I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the ...... If enlisted by special authority, such will be attached to the original attestation. Approving Officer. † The signature of the Approving Officer is to be affixed in the presence of the Recruit. ‡ Here insert the "Corps" for which the Recruit has been enlisted.

• If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows,

..... (Regiment).....

# DESCRIPTIVE REPORT ON ENLISTMENET Applicable to all ranks. To correspond with entries on the Medical History Sheet.

| Apparent :   | age  | years  | mon  | ths.   | Height  | t  | feet 1   | inc |
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| Distinctive  | marks.   |  |  |  |   |  |  |     |
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|  |  | INFOR  | RMATION S  | SUPPLIED   | ) BY RE   | FCRUIT   |  |     |
| Name and   | Address  |  | kin  |  | 6.4   |  |  |     |
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|  |  |  | Particula  | ars as to Ch   | ildren  |  |  |     |
|  | Christian  | Names  |  |  |   | Date and   | Place of Birth   |     |
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|  | gt. or Pro   |  | ions, A  | OF THE   | Service not al-   | Service in Re  | Signature of Office fying correcting entries   |     |
| which served I   | Depot  | omotion, Reducti<br>Casualties, &c.  | ions, A  | Dates  | Service not al-<br>lowed to reckon<br>for fixing the<br>rate of pension   | Service in Reserve not allowed to reckon t   | Signature of Office fying correcting entries   |     |
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| which served I   | s limited eng  | omotion, Reducti<br>Casualties, &c.  | Army Rank  | Dates  | Service not al-<br>lowed to reckon<br>for fixing the<br>rate of pension   | Service in Reserve not allowed to reckon the wards G. C. Pr  | Signature of Office fying correcting entries   |     |
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| Service towards  | Signified english the standard of the standard | casualties, &c.  casual | s from 15.  Sterry Rank  s from 15.  Longil  James for B  Lanes for B  | Dates  15 16  15 16  15 17  12-17  12-17  12-17  12-17  12-17  12-17 | Service not allowed to reckon for fixing the rate of pension  Years Days  19/19  Land 14.  Service not allowed to reckon for fixing the rate of pension  Years Days | Service in Reservice in Reservi | Signature of Offic fying correction entries  Au for 13/6.  Au for 13/6.  Au for 13/6.  Au for 14/10. |     |
| Service towards  | Signified english the standard of the standard | casualties, &c.  casual | s from 15.  Seni  St. 19  St.  | Dates  15 16  15 16  15 17  12-17  12-17  12-17  12-17  12-17  12-17 | Service not allowed to reckon for fixing the rate of pension  Years Days  19/19  Land 14.  Service not allowed to reckon for fixing the rate of pension  Years Days | Service in Reservice in Reservi | Signature of Offic fying correction entries  New for 136.  Land John March Mar |     |
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Form N. E. (2)

This Form is to be used in connection with Pamph. M. E. (1)

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

| Examin | ation of Frede   | rich abbott         |  |
|--------|--|---------------------|--|
| aged   | 189rs  | conducted at C.S.S. |  |
| Date:  | Name 16/1.   | Recruiting Officer: |  |
| NO OF  | June 16/16   | FINDING             |  |
| TE6T   | 1  | FINDING             |  |
| 1      | no   |                     |  |
| 2      | Cho  |                     | , ,  |
| 3      | (h)  |                     |  |
| 4      | no   |                     |  |
| 5      | She  |                     | *  |
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| 39     | none   | - 0. n              |  |
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Abbott, Thed

2880

Lay Dept.

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July 10,1919

#2885 Pte.Frederick Abbott.

Bonavista, .B.

Dear Sir :-

Referring to your application I enclose cheque for Seventy dollars (\$70.00), being amount of first payment due you on account of the par Serv ce Gratuity.

Yours truly.

Paymester & Officer i/c Records.

July 8,1919

#2883 Pte . Frederick abbott,

Bonavista.

Wer Sir:+

Please find enclosed Discharge Certificate

Yours truly

Captain Paymaster & U.i/c Records. A Abboth

C.R. 2860

PIRO

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvia.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve. In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3. Medical Report on a Soldier Boarded Prior to Discharge or W. (T), P., or P. (T), of the Reserve. 7. Former Trade or Occupation 2. Regtl. No. 7a. If the soldier claims previous service in Army, he should state-4. Name (a) Former Regts. or Corps; with Regtl. Nos. (Christian Names) 5. Age last birthday. 6. Posted for duty on in category (or grade) 8. If the disability is an injury was it caused (a) in action (b) on field service (c) on duty (d) off duty? (b) Date of Discharge: (c) Cause of Discharge. 9. If a Court of Inquiry was held on an injury state:-(a) When (d) Particulars of Pension or Gratuity (b) Where (if any) (c) Opinion of Court Note.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case. Statement of Case. Note.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil." 11. Date of origin of disability. 12. Place of origin of disability. 13. Give concisely the essential facts of the kistory of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

| 14. State whether the disabilities are  | (a) attributable to | (b) aggravated by | <u>0</u>   | PINION OF THE M   | IEDICAL BOARD.                 |  |
|---|---------------------|-------------------|--|---|--------------------------------|--|
| (i.) Service during the present war   | Jus                 |                   | NOTES.—(i) Clear and definit   | e answers are to be   | filled in by the Board, as,    | in the event of a man                  |
|   | No                  |                   | being invalided, it is essential that t<br>information to enable him to decide   |   |                                | ion of the most reliable               |
|   | Ka                  |                   | Expressions such as " may,"  | Contract of the second second   |                                |  |
| (iv.) Ordinary military service before the war  | na                  |                   | (ii.) The rates of pension vary  |   |                                |  |
| (v.) Serious negligence or misconduct on the man's part.  |                     |                   | the present war. (b) Due to causes not<br>diseases in pre-war service. (3) Ordin<br>the cause of a disability to differentiate   | connected with the pary military service  | resent war, viz., (1) Previous | active service. (2) Climatic           |
| 14 (a). If not due to any of these causes, to what specific condition do you attribute it?  | } Za                | TF.               | 21. Give diagnosis and particulars of  |   |                                |  |
| radiographs where possible; and in cases of amputation the  | order rist,         | inch wide         | (a) Any disability claimed or (b) The present condition there  |   |                                |  |
| exact position about be stated. Rist, bein generally  |                     |                   |  |   |                                |  |
| <ul> <li>16. Was an operation performed? If so, when and what was its nature?</li> <li>17. If not, was an operation advised and declined?</li> <li>18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?</li> <li>19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military</li> </ul>  | no no               | arm re fractu     | 22. State whether the disabilities are  (i) Service during the present  (ii.) Previous active service  (iii.) Climate in pre-war service  (iv.) Ordinary military service be  (v.) Serious negligence or mart of the soldier  Give details:  | war   | (a) Attributable to            | (b) Aggravated by                      |
| 20. Do you recommend—  (a) Discharge as permanently unfit?  (b) Change to United Kingdom?   | Refatr              | iation            | 22 (a). If not due to any of the specific condition do the specific condition do the specific condition do the specific condition of the specific condition do the specific co | he Board attribute  | *                              | ······································ |
| Note—(b) is only applicable to soldiers invalided at Foreign Stations.  Station (b) — (c) | Medical Officer in  |                   | (a) How long is the pre- ability likely to last (b) If the present degree likely to last 12 mo assessment at a red with reasonable com- period of 12 months reduced percentage which it will be ap indicated in the answ   | of disability is not<br>nths can a further<br>uced rate be made<br>fidence to cover a<br>in all? If so, the<br>and the period to<br>uplicable should be |                                |  |

|   | 24. | (a)      | What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures). |
|---|-----|----------|--|
|   |     | (b)      | In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?  |
|   | 25. |          | an operation was advised and declined, was the fusal unreasonable?   |
| disagreement<br>with the Civil-<br>ian Members, he<br>is to state his<br>opinion in the |     |          | Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?  OR  OR  Opinion of Military Member in ease of disagreement.  |
| space provided.   |     |          | In what other grade do the Board place him?  Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?  |
| Only to be<br>answered when<br>the soldier is<br>placed in other<br>than Grade IV.      | 27. | Do       | the Board find that the soldier has suffered any impairment in health since his entry into the Service?  |
|   | 28. |          | treatment being recommended on Army Form 179c?   |
|   | (a) | Ar<br>Tr | es the soldier require:— a attendant for his journey home? ansport from railway station to his home? e constant attendance of another person in his own  |
|   |     | 110      | me ? Signatures :—   |
|   | _   | tion     | Hazeley D. Camp President or Chairman.  Non- 1-19 M. Frocumer. Caps-Rame Members.  |
|   | _   |          | scharge Approved under Dane 200 (mil) Vinda Danilation   |
|   | Sta | tion     | scharge Approved under Para. 392 (xvi) King's Regulations.  Only applicable in cases of  |
|   |     |          | Officer in charge, Central Hospital.  Patients in Hospitals.   |
|   |     | Tra      | ocharge Approved under Para. 392 ( ) King's Regulations.  nsfer Approved to Class of the Reserve.  ub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).  |
|   |     |          | te O.C. Discharge Centre.  |

Nº 3806





# NEWFOUNDLAND REGIMENT

| hereby ag                      | ree, until further                                  | notification by me, and in simil   | ar official form to make an A |                       |
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| of identi<br>concerned         | ty of, and prod                                     | ne undermentioned Person and Person of Person of the relative Identity   |                               |                       |
| Identity<br>Certificate<br>No. | Whether Wife, Child,<br>other Relative or<br>Friend | Name (in full)   | ADDRESS                       | AMOUNT<br>(each perso |
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required payments on application.

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D.N. £ 2-0-0 m. 12. 21/11/18 Recept Wo. 9982. South African Hospita Richmond Park. lo the Regimental aymaster Please remit Au and ashab the same first yet MAJOR, 8.A.M.C. ADJUTANT, SOUTH AFRICAN HOSPITAL, RICHMOND PARK

O.K. £ 2-0-0 M.R. 8/11/8 Receipt 00 9585 8 NOV. 1918 8 nov. 1918. remet \$ 2 ADJUTANT, SOUTH AFRICAN HOSPITAL, RICHMOND PARK. and had a redis earns from 2885. Pte. Alboth N.F.L.D

| Martin British and Control of the Control Adv |  | <b>新</b>  |
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| •   | N'EWFOUNDLAND CONTINGENT   |           |
| `   | To: Chief Paymaster & Officer i/c Records, Newfoundland Contingent, 58, Victoria Street, London, S.W. 1. |           |
|   | Please remit to  |           |
|   | the sum of Two pounds s.4  | <u> </u>  |
|   | on account of any balance that may be due to me.   |           |
| O.K.f   | 2-0-0 Regt1. No. 2886 Rank 1. Name What T  | ite :     |
| Recon   | Approved Byuchnest   | er` [/C., |
| Dated at                                      | shin litary  |           |
|   | 11st. 31 1918 Sur  | ey,       |
|   | 976. TEL   | k 2.9°    |

7/1/26, WL W 4028-P 618, 160 M Pads, 1/17, B. & S. Ltd. (E 2486.)

Army Form C348 (Pads.)

#### MEMORANDUM.

RICHMOND MILITARY HOSPITAL,

GROVE ROAD, RICHMOND.

Date Dec-13 1916

re Regt Paymarta

Re 2885- Pt. F. ALLSTT.

Attached receipt returned to your olly acknowledged by allower Soldier please





Seekeb (

.. MAJOR, 8.A.M.C.

FOR O. I/C RICHMOND MILITARY HOSPITAL.
GROVE ROAD, RICHMOND.

CONDON GEN TO TO Chook 2888 24/1/18 \* Heurfoundlond Plest 30 ord Lon Gen How Wandworth \*1 9 Wandworth R. 5367 W dir approved from crecking and oblige

Simulation of my crecking and oblige

Captranger of many of the dream

Captranger of the contract of the cheen 1.6 7 about

No. 19227/3

N.F.P./80.

From:

ONTINGENT

Chief Paymaster & U.i/c Records, Newfoundland Contingent, 58, Victoria Street, London, S.W. 1.

To: Officer Commanding. South African Hospital. Ruchmond, Surrey.

25th November 1918

Subject: 2885. Pte. F. Abbott

With reference to the following telegram (10080) from the Hon.

Pay to 2885 Abbott £5:0:0

Kindly advise whether this amount should be remitted to you for payment to this Soldier, retained to credit of his account, or otherwise dealt with.

an Mund May. Chief Paymaster & O. i/c Records

mentioned £5. sent to une at this hospital.

I should like to

have the and

3 10 18. 191

ANSWER. & DEC 1918

FOR O. I/C RICHMOND MILITARY HOSPITAL,

2885 R. Xewfourdland

Quase. ours Obedunley

Minister of Militia. received

MAJOR S.A.M.C. GROVE ROAD, RICHMOND.

20084 .EFF .ASTER & OFFICER NC. RECORDS.

: WF MDLAND CONTRIGENT,

F', VICTORIA STREET,

LONDON, S.W. 1.

ENGLAND.

Officer Commanding, Richmond Mil. Hospital, Grove Road, Rishmond.

Pay & Record Office, 7th December 1918.

Reference reverse: Postal Draft for £3:0:0 is enclosed for payment to this soldier. Please acknowledge receipt, hereon. Balance £2:0:0 was paid to Pte. Abbott by Postal Draft at this Office to-day.

Mill Millian May

Chief Paymaster & O. i/c Records.

FM/S

AICHMOND PART.

065-817

Queses Abboth

PAY & RELATIONS TO MAN STATE OF THE BY OF THE DRB. 4/1/12 Leaft no. 3345 Sear Chi Lould you please advara me the sum of F2. out of my oredies When chall we down fruly.

Sed London General, 11 25 5 - To Fallow.

Sed NDSWORTH, S. W. WANDSWORTH, S. W.

South African Hospital Richmond Park Surrey.

| Surrey.  |
|--|
| To the Regimental Paymaster,  22, Warwick Square,  1-endon, S.W.1 5-8 Victoria Street  fordor & V. |
| / 1 /  |
| Please remit 3. # Pounds ( Three pound   |
| to Pate Fe Abboth Royal Newfoundland Regt.   |
|  |
| and deduct the same from my credit.  |
| 110. 2885 Rank Orts  |
| Name 4 Abboth  |
| Rogiment R. Newfourdland Regit.  |
| Chroth huma  |
| Major S.A.M.C.   |

Adjutant, South African Hospital, Richmond

KOR1.0.0 Receipt no. Clease atvance 574 my acourt Reid of 2-11 from Brt. F. Abbot Royal N. F. L. D.

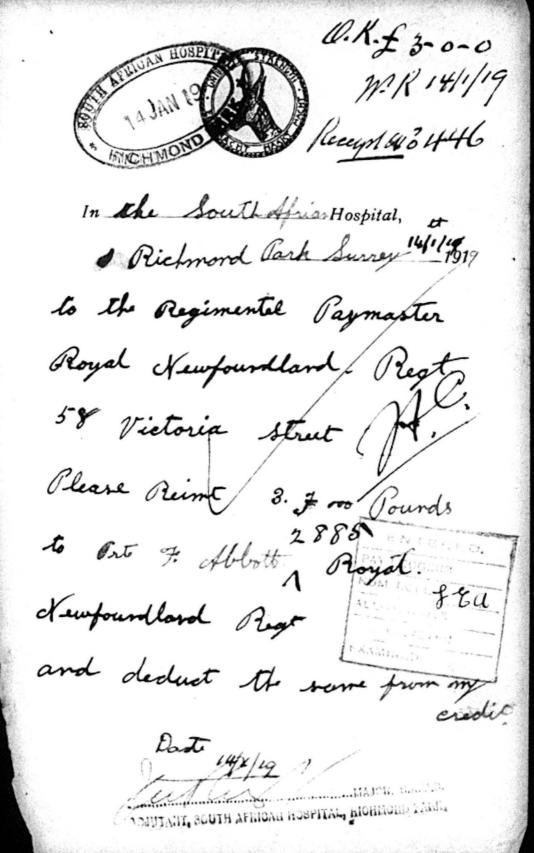


In South African Hospital,
Richmond Jury 30-12 1918 Please remit 2885 Orte Abbott Royal Newfoundland Regt the sun of 1.20.0, two Courds from his credit to Pay Recod Hace 5-8 Victoria Strut.

Sul La Victoria Strut.

Sondon S. W. ABJUTANT SOUTHENFORCH OUPSPITHER BIRNINGS PARK

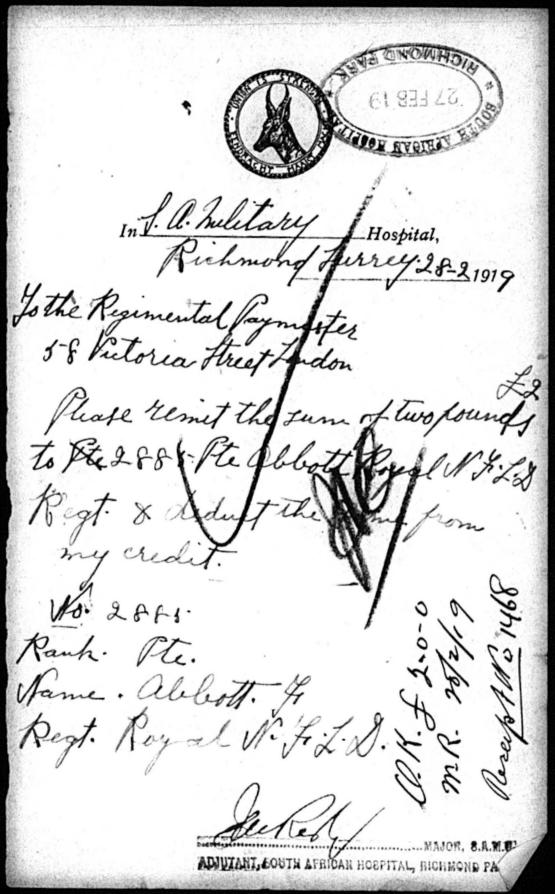
15/200 18 St. 30/1V/R Receipt # 136.



South Ofrican In Notfital Richmons furrey \$ 11 MAR 19 To the fay master Royal Newfld Regt. 58 Pictoria Heret Fondon Place Kemit The sum of three pound \$ 35 to 2885 Pte abbott 7. Kyal Kewfld. Regt. & deduct the spame from my credit. Rank. Pte. Kank. Aller Kegt. Royal Newfld. Rank. La Reby RICHMOND PARK

O.K. = 3-0-0 MR 6/2/19 6-FEB 19 In Richmond Hospital, to the organiented Caynaster 58 Victoria St Jordon Please went \$ 3. The Counds to Cit Je Solot 2rrs 1. Jourdand O'Legt. Intent come from Herfilly ADJUTANT, SOUTH AFRICAN HOSPITAL, RICHMOND PARK.

| D.R. £3. 0.0. M.R. 19/2/19 Receipt 13. 1351                |
|--|
| South African Non Dital                                    |
| To the Regimental Paymestery 19 FEB 19                     |
| Sondon, S.W. F Jordon                                      |
| Please remit 3-0-0 Heree Pouros                            |
| Royal Nawbourdland Regt                                    |
| and deduct the same from my credit. "                      |
| # Abbott   |
| JEERS To of Grott  |
| Rousent of ever ourdland APPROVED                          |
| Charle him a   |
| Major S.A.M.C. Adjutant, South African Hospital, Richmond. |





South African Military Hospital, Richmond Fark.

8 4/19/

To the Regimental Paymaster, 8. Victoria Ste fordon. Please remit the sum of £3:0:0 No 288 3. Major, S.A.H.C African Hospital, Richmond Fare. Receipt to 1959 Jul 9

No.5649/6

10 APR 1919

N.F.P./80.

191

From:

CONTINGENT

Chief Paymaster & O.i/c Records, Newfoundland Contingent, 58, Victoria Street, London, S.W. 1.

To: Officer Commanding, South African Hospital

Richmond Surrey

9th April

1919

Subject: 2885 Pte F. Abbott

With reference to the following telegram (126 ) from the Hon. Minister of Militia, received

> 2885 Pte. F. Abbott £10. 0. 0.

Kindly advise whether this amount should be remitted to you for payment to this Soldier, retained to credit of his account. or otherwise dealt with.

Chief Paymaster & U. 1/c Records.

ANSWER.

The witter mentioned is being discharged from : foday, will refor



C.R. 2885

#### SICK AND WOUNDED N.C.O'S AND MEN OF THE EXPEDITIONARY FORCE - PRANCE.

LIST No. H.A. 24227.

Dis: Rejoin 7 Mil: Prison ex 35 Gen: H. Calais. 30. May B.

Cpl.Parkin, J.A. M.P.S.C. 7 Mil. Prison

CONTRACTORS. GOVERNMENT

Steward. Gilbert, A.

Admty.Transport. "Gaythorne"

LIST No. H.A. 24227.

N.Y.D. Sick. Mild. Adm: 35 Gen: H. Calais. 30th. May'13.

NEWFOUNDLAND EXPEDITIONARY FORCE. Scabies. Mild. 1-Newfoundland. 2885 Pte.Abbott,Z

LIST No. H.A. 24227.

Adm: 20 Gen: H. Dannes Camiers. 30th. May' 18.

Artractvirem Casualties C. 1722 23/10/18, Royal Newfoundland Hogt. dated 26th. Oct. 1918.

2885 Pte. F. Abbott

Wounded 5/10/18...... Authority; 0.0. 36/00S -5/10/18.

Extract from List of Wounded and Sigk N.C.Os. and Men of the Expeditionary Force - France, dated 14th October 1918.

List No: H.A. 30027.

2885 Pte. F. Abbott

lst Rfld. Regt..... G.S.W. R.Arm Frac. Sev....Adm. 14 Sen. Hos. Wimereux 7 Oct. 1918.

### NEWFOUNDLAND POSTAL TELEGRAPH



#### Cable Connection with all the World

#### All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or

resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have ntirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

| MAT  | TRANSMITTED! |  |
|------|--------------|--|
| CNOT | TRANSMITTED) |  |

| Signature of SenderAddress Dept of M11 |                        |          |      |    |       |  |
|--|------------------------|----------|------|----|-------|--|
| Line<br>Number                         | Red                    | Ву       | Sent | by | Check |  |
| Dated                                  | 0ct 12                 | th, 1918 | als: |    |       |  |
| To                                     | John Abbott, Bonavista |          |      |    |       |  |

Regret to inform you that Record Office, London, No. 2885. Private Fredrick Abbott officially reports at South African General Hospital Richmond Park suffering from G.S.W. right arm severe

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

J.R. Bennett

Minister of Militia.

Charge to Sept of

Antroit from Fominal Sall of Siek and Wounded from the Evenuh Ampeditionary Force edulated to South African Samplial, Michael Tark, London 9/10/18.

#2885 Pte. F. Abbott.

Extract of Casualty received from Pay & Record Office. London, dated 13th June 1918.

Dis. to Duty Base Dep. ex 20 Gen. H. Dannes Camiers #th June 1918.

2885 Pte.F.Abbot

C.P. 2885

Extract from Nominal Roll of Draft to B.E.F. embarked Southempton 10-5-1%

#2885 Pte . F. Abbott .

Extract from Casualtics received from pay and pacord O fice London, dated 35th., February, 1915.

O. C. 3rd., London General Hospital, S.W. 18, REPORTS 23-2-18.

DISCHARGED HOSPITAL. 23-2-17. furlo' to 4/3/18.

#2885 Pte. F. Abbott.

Fit for 1. Duty.

detent from Pail Orders Part 11, Will The Royal Portamilant Regiment.

550 70 60

2885 Pte. F. Abbott

InvalMed to U. N. 13/12/17.

### NEWFOUNDLAND POSTAL TELEGRAPHS.



#### Cable Connection with all the World

#### All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message

remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have ntirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide-

#### (NOT TRANSMITTED)

| Signature of   | of Sender          | Address |       |  |  |  |
|----------------|--------------------|---------|-------|--|--|--|
| Line<br>Number | RcdBy              | Sent by | Check |  |  |  |
| Dated          | December 18, 1917. | e.      |       |  |  |  |
| To             | Mr. John Abbott,   | ,       |       |  |  |  |

#### Bonavista.

Regret to inform you that Record Office, London, officially reports No. 2885, Private Frederick Abbott, has been admitted to Wandsworth suffering from gunshot wound in the right leg.

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

R. A. SQUIRES,
Colonial Secretary.

FOR TYPEWRITER

2 883

Extract of Casualty list received December 18,1917.

# 2885 Pte. Frederick Abbott.

Gunshot wound right leg.

At Wandsworth.

Extract of Casualties received from Pay & Record
Office, L ndon, dated December 17,1917.

#2885 Pte. F. Abbott. Gunshot wound right leg sever.

Admitted 1 (Presbyterian US.) General Hospital, Etretat December 8,1917.

extract of Casualtics received from Pay & Record Office, London, dated December 17,1917.

#2885 Pte. F. Abbott.

Gunshot wound right leg.

Admitted 3rd London Gon ral Hospital, Vandsworth, 14/12/17.

Extract of Casualties received from Pay & Record Office, London, dated Decembe 16,1917.

#2885 Pte. F. Abbots. //



Wounded 4/12/17.

Extract from Casualties ..... List No.H.A. 17260

2885 Pte. F. Abbett.

lNfld.R. Adm.l. (Presbyterian USA) Gen H? Etretat 8 Dec.17. GSW Leg R. Sev.

Extract from Hominal Acil of Braft Ho.25; Subarked Southempton 11/6/17 from E/Lat Newfoundland Augiment Newton-on-Ayr, to 1/1st Newfoundland Augiment B.S.F.

2885 Pte. Abbott, F.

Extract of Nominal Roll of Officers and men enbarked St. John's S1-1-18 Sailed Halifax S. S. AUSTONIA 16-4-17.

#2885 PTE. F. ABBOTT .

Fredk. Abbott was attested for General Service with the NEWFOUNDAND EMETHENS on ..... June 15th 1916 Regulmental, No. 2885 was alleaded to Pto Fredk. Abbott

AUTHORITY:

Record Officer

Dopt, of Militia, March 80th, 1919.

Extract from Daily Orders Part 11 Unit The Royal Hfld. Regt. St. John's, July 11, 1919

The discharge of the undernoted on demobilisation has been CONFIRMED by Officer i/c Records from 8-7-19

2885 Pte. Drred. Abbott.

Extract from Breliminary Report of a Medical Board held on Thursday Evening June 5th 1919.

The following was the finding:-

\$885, Pte. F. Abbott.

2865

Recommended Discharge from the Army.

Extract from Daily Orders Part 11 Unit the Royal Hild. Regt. St. John's June 14th, 1919

The bdischarge of the undernoted on demobilisation has been APPROVED by O.C. Discharge Depot with effect from 24-6-19.

2885 Pte. Fred. Abbptt

Extract from Pailty Orders Part 11 Depot, St. John's, Date 13/6/19.

2885, Pte. Fred Abbott.

Reported at Headquarters 1/6/19. which sailed Liverpool May 22/1919.

BE "Corsican"

Extract of Casualties from Pay & R ecord Office, London dated April 11th 19191

2885, Pte. F. Abbott.

was discharged from the Sth African Hospital, Richmond, Surrey and granted furlough from 11/4/19 to 20/4/19. Marked fit for I, Duty.

Authority:

A.F. W.3016 from Sth African Hospital.

To be used only for Special Reserve Recruits, and for Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY

| . /. /     | 1 ~1  |
|------------|-------|
| Surnama CD | 10017 |
| surnama CV | way.  |

Christian Name

| 1   | Table I.—GENERA | AL TABLE.                 | 53, VICTOR                             | S.W.,          |
|---|-----------------|---------------------------|--|----------------|
| Birthplace:—Parish  |                 | County                    | LIGINI.                                | T.             |
|   | SPECIAL RESE    | RVE.                      | REGUICAR                               | DARDEY.        |
| on  | Lay of L        | 1916 on                   | day of                                 | 191            |
| Examined at   | It feels        | nt                        |  |                |
| Declared Age A  | 6 18 years 2 .  | days                      | years                                  | days           |
|   | alouse          |                           |  |                |
|   | S feet 4        | inches                    | feet                                   | inches         |
| Height  | 13              | lbs.                      |  | lbs            |
| Weight  | 5               | S inches                  | 13.5                                   | inches         |
| Measure Range of Expansion  | 0               | . 4                       | THY A US                               | inches         |
| $II \rightarrow II$   |                 | 2 inches                  | ************************************** | inches         |
| Physical Development  | Right           | Left -                    | Right                                  | Left           |
| Vaccination Marks Arm   | Right           |                           |  |                |
| (Number   |                 |                           |  |                |
| When Vaccinated   | 60              |                           | - 10 m 10 m                            |                |
| Vision R.   | EV 6/6          |                           | EV=<br>EV=                             |                |
| XIV   | 76              |                           | 1.00 miles                             |                |
| (4  | )               | (a                        |  | 1-9-1-12       |
| (a) Marks cylical preconger to peculi-<br>arities of previous disease |                 |                           | A STATE OF THE                         | /              |
| THE !   |                 | 3                         |  |                |
| V a   | ,               | (b)                       |  |                |
| (b) Slight defects but not sufficient to Cause rejection              |                 |                           |  |                |
| ( · / . )   | elign on marini |                           | Andrew Commence                        |                |
|   | 1. 16           |                           |  |                |
| Approved by (Signature)   | Lamineta        | Hesten.                   |  |                |
| (Rank)  | may             | m                         |  |                |
|   | 00              | Medical Officer.          |  | Medical Office |
| Enlisted at   | It young.       | uped at                   |  |                |
| on  |                 | 1916 on                   | day of                                 | 191            |
| oined on Enlistment   | hor cufer       | Regtl. No.                | Corps,                                 | Regtl. No.     |
|   | /               |                           |  |                |
| ROYAL   | NEWFOUNDLAND    | REGIMENT.                 |  |                |
| ransferred to   |                 |                           |  |                |
| Became non-effective by   |                 | Alban Anticolon Anticolon |  |                |
| on  | day of          | 191 on                    | day of                                 | 191            |
| (Signature)   |                 |                           |  |                |
| (Rank)  | The state of    |                           | *                                      |                |

|  |       |                   | 7 1    |       |                    |      | · · · · · · · · · · · · · · · · · · · |                   |   |                              |
|--|-------|-------------------|--------|-------|--------------------|------|---------------------------------------|-------------------|---|------------------------------|
|  | Ad    | mitted<br>Iospita | to     | Disch | arged f<br>Hospita | rom  | Disease                               | Number<br>Days in | Remarks 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, etc., will be given in the special sphilis case sheet. | Signature of Medical Officer |
| Name of Hospital.                        | Day 1 | Month             | Year   | Day 1 | onth               | Year | Diedie                                | Hospital          | of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.  | Signature of Medical Officer |
| Military Mos.<br>Windson NS              | 15    | 3                 | יץ     | 31    | 3                  | יץ   | Rumps                                 | 17                | " Our changed Fis for duty  | Gateron nego emo             |
| Control Control                          |       | -                 |        |       |                    |      | 20152 1 6 4 11                        |                   |   |                              |
| N. WC                                    | 14    | 12                | 17.    | 23    | 2                  | 18.  | a.S.W. Right Ly ( sunfly lind)        | 5-2               | . ,   | Strongler adreamen           |
| South African Wirery<br>Richmond Pack.   | 9     | 10                | 18.    |       | ov 1               | Ú1r  | 1. 4. 1218 B<br>4. 8. W. At forcam    | #6                | Contusion will it freare & comp. fract of lover and of selva.   |                              |
|  |       |                   |        |       |                    |      |                                       |                   | Wound ver septer - but has now cleaned of considerably surse admiration than the red + Hospi of Peleranefe med 5, A. Mil. 14  | Wellowth look                |
| BED+ HP<br>BICHMOND                      | 1     | 1                 |        | 13    | 1                  |      | <u> </u>                              | 20.               | Gelvaneferred S. A. Mil. 17   | ag                           |
| Zantin                                   | 13    | 12                | 18     | 7     | 3                  | 19   |                                       | 84                | Transferred Red + Hop. Wound healed but X Ray Shows presence of Swell sequentrum  | W0/18                        |
| Bed+ H                                   | 7     | 3                 | 19.    | 13    | 3                  | 19   |                                       | 6                 | Getranifered S. A. M.L. H   | while cut                    |
| South African Military<br>Richmond Park. | 13    | 3                 | 19     | 11    | 4                  | 19   | _ "                                   | 29                | Wound quite healed. No disability.  | Willie Capti                 |
|  |       |                   |        |       |                    | Í    |                                       |                   |   |                              |
|  |       |                   |        |       |                    |      |                                       |                   |   |                              |
|  |       |                   |        |       |                    |      |                                       |                   |   | ,                            |
|  |       |                   |        |       |                    |      | vi.                                   |                   |   |                              |
|  |       |                   |        |       |                    |      |                                       |                   |   | <b>&gt;</b>                  |
|  | denne | -                 | hamara | L     | -                  |      |                                       | -                 |   | [P.T.O.                      |

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

| gical                                 | Appliances; Particulars of Der | ntal Treatment, &c.  | •••                   |
|---------------------------------------|--------------------------------|--|-----------------------|
| Date                                  |                                | Brief Details, and Signature   |                       |
| 2/2/16                                | Vaccenale                      | on 150   |                       |
| 21-11-16                              | TAB                            | $\mathcal{L}$  |                       |
| 29-11-16                              | 3                              | di .   | •                     |
| 1/37 8                                | TII OUR                        | of Coroller.   |                       |
|                                       |                                |  |                       |
|                                       |                                | Transity,  |                       |
|                                       |                                |  |                       |
|                                       |                                | It is hereby certified that the  | ss.1Cir               |
|                                       |                                | has been by mothe Elimble &  |                       |
|                                       |                                | Bound and his been of us   |                       |
|                                       | 34                             | 1 famil du gon Den   | iobilisa-             |
|                                       |                                | tion. Medical calegory   |                       |
|                                       |                                | 14.5.19<br>Date of Shirt   | w H.                  |
|                                       | The second second              | Ja Discharge I   | The second section of |
| 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |                                | U .  | Carl E                |
|                                       |                                | n i gennes (Taggitta, an an aire i ann aire i ait fhaigh 300 an bhaileann (Thàgain (a mar an àire in an air ai |                       |
|                                       |                                |  |                       |
|                                       |                                |  |                       |

#### TABLE IV.—SERVICE TABLE.

| Station or Troopship                         | Date of<br>Arrival or<br>Embarkation | Date of<br>Departure or<br>Disembarkation | Station or Troopship | Date of<br>Arrival or<br>Embarkation | Date of<br>Departure or<br>Disembarkation |
|--|--------------------------------------|---|----------------------|--------------------------------------|---|
| SS. Florigal "MinosovilVS. 1<br>5-5. ausonia | Jany 312                             | File 314                                  | <i>i</i> ~ ,         |                                      |   |
| Windsor WS.                                  | Acu 34                               | 17 16.4.17                                |                      |                                      |   |
| D. D. ausonia                                | 16.4.17                              |   |                      |                                      |   |
|  | 1                                    | 77  |                      |                                      |   |
|  |                                      | 2   |                      |                                      |   |
|  |                                      |   |                      |                                      |   |
| Market                                       |                                      |   |                      |                                      |   |
|  |                                      |   | Same Agency          |                                      |   |
|  |                                      |   |                      |                                      |   |
|  |                                      | 1   |                      |                                      |   |
|  |                                      | 160                                       |                      |                                      |   |
|  |                                      |   |                      |                                      |   |
|  |                                      | 14 - 14 M                                 |                      | III - NAS FASSI                      | The second second                         |

## The Royal Newfoundland Regiment

| DEMOBILIZATION OF  |
|--|
| Reg. No 2885 Rank Mr. Name Mobott Fred   |
| Date of Enlistment 16 - 0 - 16 Address Donawater District Bangue   |
| Occupation   |
| Recommendation S.M.B. Dennis and S.M. Disability Rating . + 0. %. 6. Mills   |
| Passed to Demobilization Officer with following documents:-  |
|  |
| N.F. P 36 B 268 B 121 N.F. Med D.F. 1  |
| B 178  |
|  |
| B 179 D 400B Form L do 3rd " 4   |
| B 179a   |
| B 179b B 103 ME 2 " 6 " 6 ME 2 " 6 |
| B 120  |
| Date   |
|  |
| I. Civil Re-Establishment.   |
| I amin a position to resume civilian occupation.   |
|  |
|  |
| Particulars passed to Vocational Officer for information and action.   |
| Date   |
| 2. Clothing.   |
| Certified that Clothing Regulations have been, complied with:-   |
| (a) Clothing Allowance payable 5 00 1 A  |
| 1 1 1 1 1 1 1 1 1 1  |
| (b) Clothing Supplied  |
| Date 10-6-19   |

| 3. Transportation and Release Certificate.   |
|--|
| The above named has been provided with Travelling Warrant No to his home                       |
| at Bonawola and Release Certificate No. 2545   |
| Date 10-6-19 JA Snewlass   |
| Date Demobilization Officer  |
| 4. Pay and Allowances.   |
| The herein named soldier's accounts have been correctly balanced and all matters in connection |
| therewith settled. He has received pay and allowances to                                       |
| Date 10 - 1 - 14 Depot Paymaster.  |
|  |
| Discharge approved for 24-6-19   |
| Forwarded with following documents to O.C Discharge Depot.                                     |
| N.F. P 36   B 268   B 121   N.F. Med   D.F. 1  |
| Б 178 W 3494 В 122   |
| B 178a D 400A B 1915 do 2nd " 3  |
| B 179 D 400B Form L do 3rd " 4   |
| B 179a1 D 400C Form K do 4th " 5   |
| B 179b B 103 ME 2 " 6 " 6  |
| B 179c B 120 M 93  |
| 11. 6. 19 Water to   |
| Date   |
| Demobilization Officer.  |
| APPROVED.  |
| Documents as above forwarded to:—  |
| Officer i c Records. Board of Pension Commissioners.   |
| with following additional documents  |
| Higible for War Service Gratuity   |
| $\sim$ $\sim$ $\sim$ $\sim$ $\sim$ $\sim$  |
| 1. It. Jail Capl.  |
| Date JUN 24 1919  O. C. Discharge Depot.   |
| O. O. Discharge Deport   |
| Received the above noted documents from O. C. Discharge Depot.                                 |
| and seath of   |
| 1 1010 11 100 N  |
| Date fune 18/19 . fort for scores  |

| Reg. No. 28     | Br. Rank // N. Address.  | ame attack            | <b>3</b> , |
|-----------------|--|-----------------------|------------|
| Attested        | Address  |                       |            |
| Allotment       | Allottee   |                       |            |
| Date of Allotme | nt R   | eturned from Overseas | 29.1.19.   |
| Returned on S.S | Cornian  | Cause Disc            | Large      |
|                 |  |                       |            |
| 1.1.19. 4       | ie. sis. fram i  | the asmel             |            |
| , ,             | , , , , , , , , , , , , , , , , , , ,  |                       |            |
| 9.6.14.         | PASSED TO DEM  | OBILIZATION O         | 7          |
| 216 19.         | DIECHARGE APPROVED   | ON DEMOBILISATION     |            |
| 1               |  |                       |            |
|                 |  |                       |            |
|                 |  |                       |            |
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|                 | S. not continue and the most of the continue state of the |                       |            |



| ADDRESS            |
|--------------------|
| (each person       |
| Jr. Imadista, 5    |
| (Bear Copiels      |
| Man July 5 3 State |
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|                    |
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| - 1                |
| Total Allotment, 5 |
|                    |

Note.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvia.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.

In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

### Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

- 1. Unit and Corps. Royal Newfoundland. ..... 7. Former Trade ? or Occupation 7a. If the soldier claims previous service in Army, he should state-...: Abbott. Fred..... (a) Former Regts. or Corps; with Regtl. Nos. (Christian Names) (Surname) 5. Age last birthday .. 18 ...... 6. Posted for duty on .. 12/6/16. at .... St. .. John ! s. in category (or grade)..... 8. If the disability is an injury was it caused (b) on field service (a) in action (c) on duty (d) off duty? (b) Date of Discharge ; (c) Cause of Discharge. 9. If a Court of Inquiry was held on an injury state :-(a) When
  - (d) Particulars of Pension or Gratuity (if any)
  - (b) Where
    (c) Opinion of Court

Note.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

#### Statement of Case.

Note.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venercal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

G.S.W. R. LEG. 5/12/17. Cambrai.

11. Date of origin of disability.

Ypres. G.S.W. R. HOREARM ULNA.

12. Place of origin of disability.

13. Give concisely the essential facts of the history of Treated at 3rd. L.G.H. 52 days, for the disability in so far as it is recorded in the Medical st. wd. Wd. healed then joined unit, History Sheet bearing on the case and in other in France 12/5/18. Then on 4/10/18. Had R. Arm broken by shrapnel fire. Compound fracture treated at S. AFRICA Mil. Hp. 46 days Trans. to different Hospitals, & in all for last Wd spent 184 days in Hp.

|   |         | -      |                     |                   |
|---|---------|--------|---------------------|-------------------|
| 14. State whether the disabilities are  |         |        | (a) attributable to | (b) aggravated by |
| (i.) Service during the present war   |         |        | Yes                 |                   |
| (ii.) Previous active service   |         |        |                     |                   |
| (iii.) Climate in pre-war service   |         |        |                     |                   |
| (iv.) Ordinary military service before the  | e war   |        | ~~~~~~~~~           |                   |
| <ul><li>(v.) Serious negligence or misconduct<br/>man's part.</li></ul>   | on th   | ne}    |                     |                   |
| 14 (a). If not due to any of these causes<br>specific condition do you attribut   | s, to v | vhat ] |                     |                   |
| such 15. What is his present condition ?  |         |        |                     |                   |
| such 15. What is his present condition? Large ear.  (A note should be made as to Weight when it is likely to afford evidence gress of the disability.)  Scar pitted deeply. Limited | of the  | pro-   | 2" wide scar or     | outer wrist       |
| with Scar pitted deeply. Limited  | mo      | eme    | Dt of Wrist. A      | m generally we    |

In all cases such as 'acial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

- 16. Was an operation performed? If so, when and what was its nature? Yes. 1 on leg cleaning. 2 on arm Re fracture.
- 17. If not, was an operation advised and declined?
- 18. \*In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
- 19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?
- 20. Do you recommend— Repatriation.
  - (a) Discharge as permanently unfit?
  - (b) Change to United Kingdom?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

W.E. PROCUNIER. CAPT. R.A. L.C.

Medical Officer in charge of case.

Station .. H.D. CAMP.

Date .... 14/5/19 ...

<sup>\*</sup> Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause

#### OPINION OF THE MEDICAL BOARD.

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as " may." " might." "probably." etc., are to be avoided.

- (ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiale between them.
- 21. Give diagnosis and particulars of :-
  - (a) Any disability claimed or discovered. G.S.W.R. WRIST & R. LEG.
  - (b) The present condition thereof.

at wrist joint large deep scar adherent MMI below with loss of tissue n close the fingers but has feeble grasp. rge scar over R. Calf no disability.

| 22. State  | whether the disabilities are :-   | (a) Attributable to | (b) Aggravated by |
|------------|---|---------------------|-------------------|
| (i)        | Service during the present war  | Yes                 |                   |
| (ii.)      | Previous active service   |                     |                   |
| (iii.)     | Climate in pre-war service  |                     |                   |
| (iv.)      | Ordinary military service before the war  |                     |                   |
| (v.)       | Serious negligence or misconduct on the part of the soldier   | No.                 |                   |
|            |   | ,                   |                   |
| 22 (a). If | not due to any of these causes, to what<br>specific condition do the Board attribute  |                     |                   |
|            | it?   | G.S.W.              |                   |
| 23. Is the | disability in a final stationary condition? If not  | *                   |                   |
|            | (a) How long is the present degree of dis-<br>ability likely to last?   |                     |                   |
|            | (b) If the present degree of disability is not<br>likely to last 12 months can a further<br>assessment at a reduced rate be made<br>with reasonable confidence to cover a<br>period of 12 months in all? If so, the<br>reduced percentage and the period to | -                   |                   |

which it will be applicable should be indicated in the answer to Question 24a.

|   | 24. | (a) What is the degree of disablement at which, in the opinion, he should be assessed at present, indep hospital or other treatment. (Degrees of disabould be expressed in the following percentag 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (V Warrant of 17/4/18 issued as A.O. 162 of 1918 structions to Pension Boards) (assessment to be words as well as figures). | endent of<br>sablement<br>res:—100, 40% (<br>ide Royal<br>l, and In- | 5 Months.   |
|---|-----|--|--|---|
|   |     | (b) In case of aggravation or where there is any evid<br>there was a disability on entry, what in your op<br>the degree of disablement which existed at the<br>joining the Army?   | inion was  |   |
|   | 25. | If an operation was advised and declined, was the refusal unreasonable?  | e  | -0  |
| Member is in<br>disagreement<br>with the Civil-<br>ian Members, he<br>is to state his<br>opinion in the | 26. | (a) Do the Board recommend discharge as physicall unfit for further War Service, i.e., do they place him in Grade IV. only?  |  | Opinion of Mills<br>tary Member in<br>case of dis-<br>agreement |
| space provided.   |     | (b) In what other grade do the Board place him: (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?   | 1  |   |
| Only to be<br>answered when<br>the soldier is<br>p'aced in other<br>than Grade IV.                      | 27. | Do the Board find that the soldier has suffered any<br>impairment in health since his entry into the<br>Service?   |  |   |
|   | 28. | Is treatment being recommended on Army Form B. 179c?   | n  | 1,  |
|   | (a) | Does the soldier require:—  ) An attendant for his journey home?  ) Transport from railway station to his home?  ) The constant attendance of another person in his own home?  | n  |   |
|   |     | Signat   | tures:—  |   |
|   |     | N.S  | .FRASER  | President or Chairman.  |
|   |     | ationST. JOHN'S.   | J.S.TAIT.  | Members   |
|   | Da  | te14/5/19*   | J.B.O'RIE  | LLY   |
|   | Sto | Discharge Approved under Para. 392 (xvi) King's R  |  | Only applicable in cases of                                     |
|   | Da  | Discharge Approved under Para. 392 ( ) Ki  | Officer in charge,   | MAJOR. Central Hospital. Patients in Hospitals.                 |
|   |     | Transfer Approved to Class of the Rese<br>sert sub-para King's Regulations under which discharge is  | erve.  | . or W.(T), P. or P.(T)).                                       |
|   |     | Station  |  | O.C. Disables Control   |
|   |     | Date   |  | O.C. Discharge Centre.  |



# Descriptive Return of a Soldier Discharged on Account of Disability

INSTRUCTIONS—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. i |c Records together with the remainder of the man's documents.

Changes occuring in the description subsequent to the date of admission to pension should be noted in red ink. Name in full Frederick abbott Regiment from which discharged Royal Dewfoundland Regimental number 2885 Intended address Parnaves ta 5 Feet 4 Height on discharge Color of hair on discharge Sark Brown Complexion Fair Color of eyes Rown Descriptive Marks -Figure on discharge Christian name of Father Christian name of Mother Jazil Wife's maiden name in full -Date and place of marriage Christian names of children Place and date of soldier's birth Bonavieta, non 2 1901 Nature and locality of civil employment required I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct Frederick, Allot. (Soldier's signature in full) Stoolins Date 4-6-19

I certify that the above named soldier signed the foregoing declaration in my presence, and that the above description and details are, to the best of my knowledge correct.

Medical Officer i|c Hospital. Unit, or Command Depot.

P.T.O.

<sup>(</sup>ii) In the case of a man who have engaged for, or enlisted into Section D. Army beserve, particulars of such re-organism-net or enlistment will be entered

b tignaller, Shoeing Similar

|               |               |                     | Casualty Form  | -Active S                          | Service.                  |                     |   |
|---------------|---------------|---------------------|--|------------------------------------|---------------------------|---------------------|---|
|               | P.            | Regir               | nent or Corps/ 2 10  | whoun                              | dland                     | 2.                  |   |
|               | Rank Religion | Melhodist           | nent or Corps / h  | Chris                              | stian Name                | maire               | 2   |
|               | Enlisted (a)  | 5-6-16 To           | erms of Service Agral  | ian of W                           | Service recko             | years<br>ns from (a | 15-6-16   |
|               |               |                     | nk   |                                    | ointment to land          |                     |   |
|               | Extended      |                     | engaged  | Qualificati                        | on (b)<br>Trade and Rate. |                     |   |
|               | Occupation    | Labaurer            | ·······  | J. 76                              | T. For Cap                | tain Sig            | nature of Officer   |
| EWFOUND<br>58 | VICTORIA ST.  | Peron whom received | Record of promotions, reductions, to Ac., during active service, as reporte B.213. Army Form A.36, or in other The authority to be quoted in each cr | d on Army Form official documents. | Place of Casualty         | Date of<br>Casualty | Remarks Taken from Army Form B.213, Army Form A.36, or other official documents |
| PAY           | RECORD OFFICE |                     | dir  | Embarked                           | ampton                    | 11.6.17             | 2 10  |
|               |               |                     |  | Disembarked                        | Pouen                     | 12.6.17             | - vide  |
|               | all           |                     |  | ned Battalion                      | 2                         | JUL 1917            | 6213  |
| . 1           | 2/9/7         | 00                  | WOUNDED IN ACTIV   | ON _                               | Mauce                     | 4/0/2               | 19213   |
| 1/10          | -1717         | 1 C. Shess State    | m It's 9. KWKI Le  | Males                              | 55 CES.                   | 3/12/0              | 684618  |
| May /         | Marke         | en Castle           | Transferred to England   | · 11                               |                           | 3/0/0               | W3083   |
| 10            |               | 0                   |  | 2Ne                                | any                       | /                   |   |
|               |               |                     |  | 0.                                 | i/c No. 1 Infant          | MAJOR<br>v Section  |   |
|               |               |                     |  |                                    | 6.H.Q3r                   | d Echelon           |   |
|               |               |                     |  |                                    |                           |                     |   |
|               |               |                     |  |                                    |                           |                     |   |

<sup>(</sup>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.

<sup>(</sup>b) Signaller, Shoeing-Smith, &c.

Nº 3806



# 1 1st. NEWFOUNDLAND REGIMENT

| from my Pay<br>nade on proc | Cents, per diem,<br>sons, such payment to be n | Dollars and Person and in similar per undermentioned Person or Person of the perso | and for the benefit of t                      |
|-----------------------------|--|--|---|
| or Person                   | Certificates by the Person                     | uction of the relative Identity  | erned, viz.:  Allotment begins                |
| AMOUNT (each person         | Address  | Name (in full)   | whether Wife, Child, ficate other Relative or |
| 50                          | Bonavista                                      | John abbot Ir.   | f tacker                                      |
|                             | Bear Cripper.                                  |  |   |
|                             | march)   | 400  |   |
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|                             |  |  |   |
|                             |  |  |   |
|                             |  |  |   |
| - 0                         | Total Allotment, \$                            |  |   |

| (Sig.) Chase . age Gpt |                           |
|------------------------|---------------------------|
| Officer Commanding     | (Sig.) J. Fredrick Abbott |
| 8 Johns. Company       | (Rank)                    |
| Noo 24018              |                           |

| Place                         | Date<br>of offence | Rank                   | Cases of<br>Drunken-<br>ness | Offence                     | Names of Witnesses  | Punishment awarded | Date of award or<br>of order dispensing<br>with trial | By whom awarded | Remarks     |
|-------------------------------|--------------------|------------------------|------------------------------|-----------------------------|---|--------------------|---|-----------------|-------------|
| Fred J.                       | 1 10 11            | £15                    |                              | about for wellt often 9.301 | to Sounday  | Hdayslis .         | 24/5/11   | Letter Worker   | t into      |
|                               |                    |                        |                              | and of 180 370              | · ```   |                    |   |                 | 11-85/      |
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|                               |                    |                        |                              |                             |   |                    |   |                 | F .         |
|                               |                    |                        |                              |                             |   |                    |   |                 |             |
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| and the state of the state of | 1                  | AND THE REAL PROPERTY. | Allinensis                   |                             | A Section of the second section of the section of the second section of the section of the second section of the section of |                    |   |                 | p.r.a.      |

### Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121

Number of Sheet Je Signature of O. C. Company Pica Regiment of / Phew foundland. B 121. Enlistment Regimental Number and Name Good Conduct Badges, Service pay or proficiency pay Age on 18 years V months Place and Date of Enlistment | St. Tokus 14 Joined Date Joined Date Place of Birth ( with Colours years. Joined Date Period of Joined Date Date of award or of order Cases of Drunk-Names of REMARKS Date of By whom awarded OFFENCE Punishment awarded Place Rank Witnesses Offence Mazely Roun Gamp 19/1/18 94. Late on 2 PM. parade. Sergt Gardines. 2 days 6. 13. 30/1/15 Caft. Nuns 9110 To be carried over

# DEPARTMENT OF MILITIA. WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and man of the Royal Newfoundland Regiment, who claims War Service Gracuity under Order-in-Council dated January 28th.1919.

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

On ecapletic this Declaration is to be returned to THE OFFICER I/C

RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

Chaletian name of the control of the control of the officer name of the control of gratalty are to be
forwarded.

6. Date of enlistment in the Regiment. Rune.

7. Name of dependent, if any, to when Separation Allowance is being
issued, or was being issued, immediately prior to your discharge.....

12. Give total length of time which you served on active service, whether in Nifld. or Oversees. The Lune 13/16 for Lune 13/16 for Lune 16/19.

3

nade under Oath.

And I take this solenn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if

Signature of Applicant: Place of Residence: -Declared before me Signature of Berrister of the Supreme Court, Stipendiary Magistrate; lotary Fullic, Mastice of the Peace, or Commissioner of affidevits. POST DISCHARGE PAY. Paid Paid War Service Soldier. Dependent Gratuity. Not amount Date paid Paid duo Cortified correct. Paymaster

### The Royal Newfoundland Regiment

Class for Demobilization:— Report of Demobilization Travelling Board, held on soldier for discharge.

| Discharge Depot:   | Headquarters The Royal Newfou | ndland Regiment         |
|--------------------|-------------------------------|-------------------------|
|                    |                               | Date                    |
| Regimental No 2    | 986<br>A Freda                |                         |
| Address            | mor isti                      |                         |
| Present Medical Ca | itegory.                      |                         |
| *                  | Recommended for:              | (a) Immediate discharge |
|                    |                               | O.C. Discharge Depot.   |
| 1                  | Members of Board              | Senior Medical Officer  |
|                    |                               | N.O. Depot              |

## The Royal Newfoundland Regiment

#### PROCEEDINGS ON DISCHARGE

| I. No. 2. 9.8. 5 Rank OC Name Offatt T   |
|--|
| Intended place of residence. San and a land  |
| 2. Occupation Labourer   |
| Classification of soldier 8  |
| 3. The above named man is discharged in consequence of   |
|  |
| Eligible for War Service Gratulty  |
| 4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, i accordance with Regulations.                                |
| Place ST JOHN'S.  Date JUN 10.1919  Comanding Discharge Depot The Royal Newfoundland Regiment  |
| CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE   |
| 5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and a  |
| just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment of all financial responsibility in my connection.               |
| Place and date JUN 1 0 1919  |
| Place and date JUN 10 HN 18: Signature of soldier  |
| Signature of witness   |
| CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER  |
| i. I hereby certify that I am in a position to resume civilian occupation immediately on obscharge.  |
| Place and Date   |
| JUN 1 0 1919 Anes Oncuma   |
| STATEMENT OF SERVICE   |
| . Enlisted for service   |
| Discharged from service. JUN 2 4 1919 Lues 14 day Service 11/8   |
| APPROVAL OF DISCHARGE  |
| The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i c Records The Royal Newfoundland Regiment, twenty-eight days from date. |
| Place  |
| Date JUN 2 4 1919 The Royal Newfoundland Regiment.   |
| CONFIRMATION OF DISCHARGE  |
| The discharge of above mentioned soldier is hereby confirmed   |
| Place & Jours Med  |
| Date   |
| 09-B. 1510.  |
| a. f. 132079 /5804   |

### Civil Re-establishment Committee



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

To perume Jormer occupation

Signature of Man

Reg. No. F. Al

Signature of the Vocational Office or his Representative

Place ST. JOTTAT'S.

Date 20-6-19 191

## The Royal Newfoundland Regiment

| DEMOBILIZATION OF  |
|--|
| Reg. No. 285 Rank Mr. Name Wood Tree   |
| Date of Enlistment 16 - 6 - 10 Address Donardta District Dionagres   |
| Occupation   |
| Recommendation S.M. Stay S. Co. Bylluft. Disability Rating + 0. 70. 6 Million  |
| Passed to Demobilization Officer with following documents:-  |
| N.F. P 36 B 268 B 121 N.F. Med D.F. 1 B 178 W 3494 B 122 Board 1st 2 B 178a D 400A B 1915 do 2nd 3                           |
| B 179 D 400B Form L do 3rd " 4   |
| B 179a D 400C Form K do 4th " 5  |
| B 179b B 103 ME 2 " 6 " 6  |
| B 179c   |
| Date. 9-6-19 O. C. Discharge Depot.  |
| PARTICULARS FOR DEMOBILIZATION   |
| - Chill D. Bat Williams  |
| I amin a position to resume civilian occupation.   |
| - // // // £A  |
| I amin a position to resume civilian occupation.   |
| Particulars passed to Vocational Officer for information and action.   |
| I amin a position to resume civilian occupation.  Particulars passed to Vocational Officer for information and action.  Date |
| Particulars passed to Vocational Officer for information and action.  Date   |
| Particulars passed to Vocational Officer for information and action.  Date   |

| 3. Transportation and Release Certificate.           | R 16455  |
|--|--|
| The above named has been provided with T             | ravelling Warrant No to his home   |
| at Bonavista and Release                             | Certificate No   |
| 10-6-19  | Id Snawl stol  |
| Date   | 1  |
|  | Demobilization Officer   |
| 4. Pay and Allowances.                               |  |
|  | een correctly balanced and all matters in connection   |
| therewith settled. He has received pay and al        | lowances to 8 - 7 - 19   |
| 10 - 1 - 10  | H Man front  |
| Date   | Depot Paymaster.   |
| 97.  | Depot Paymaster.   |
| Discharge approved for                               | 0 - 77 0   |
| Forwarded with following documents to O.C            | Discharge Denot  |
| Totwarded with following documents to o.e            | Discharge Depot.   |
| N.F. P 36 B 268 B 121                                | N.F. Med D.F. 1  |
| F. 178 W 3494 J. B 122                               | Board 1st " 2 2 Form Co  |
| P 178a D 400A B 1915                                 | do 2nd " 3   |
| B 179 D 400B Form L                                  | do 3rd " 4   |
| B 179a D 400C Form K                                 | do 4th " 5   |
| B 179b B 103 ME 2                                    |  |
| B 179c B 120 M 93                                    |  |
| 14 - 6 - 19  | In think age!  |
| Date   |  |
| <u> </u>   | Demobilization Officer.  |
| APPROVED.  |  |
| Documents as above forwarded to:-                    |  |
| Officer i c Records.                                 |  |
| Board of Pension Commissioners.                      | and the state of t |
| with following additional documents. Bigible         | for War Service Grataily   |
| Data-O-1   |  |
| SEAR -   | $\sim$ $\sim$ $\sim$ $\sim$ $\sim$   |
| JUN 2 4 1919 .                                       | R. H. Jail Caple   |
| Date   | O. C. Discharge Depot.   |
|  | O. O. Discharge Depot  |
| Received the above noted documents from O. C. Discha | rge Depot.   |
|  | Standing Standing  |
|  | 4 4 4 4 4  |
| Date   |  |

| DEATH NOTIFICATION — AVIS DE DÉCÈS              | K. FILE NO - DOSSIER Nº 0000 5 2 / |
|---|------------------------------------|
| ME - NOM  | SERVICE NO - MATRICULE             |
| ABBOTT Frederick                                | 2885                               |
| THE OF DEATH - DATE DU DÉCÉS CPC NO - CCP N°    | WVA — AAC. N°                      |
| 9-8.79 260144                                   |                                    |
| ACE OF DEATH — ENDROIT DU DÉCES                 |                                    |
| //  | av.                                |
| NK  |                                    |
| FORMATION RECEIVED FROM — INFORMATION RECUE DE  |                                    |
| IFORMATION RECEIVED FROM — INFORMATION RECUE DE |                                    |
|   |                                    |
| FORMATION RECEIVED FROM — INFORMATION RECUE DE  |                                    |
| IFORMATION RECEIVED FROM — INFORMATION RECUE DE |                                    |