



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5916 Name Richard Allen Corps Inf

Questions to be put to the Recruit before Enlistment

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Richard Allen</u> |
| 2. What is your full Address? | 2. <u>Woodville Rd P12</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>24</u> Years <u>0</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Fireman</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? | 10. Name |
| | Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes</u> |

I, Richard Allen 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.

Richard Allen SIGNATURE OF RECRUIT.
W. J. ... Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Richard Allen 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 me at St. John's on this 5 day of Aug 1915.

W. J. ... 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.

Date 6-8-15 1915 W. J. ... } Approving Officer.
 Place

† 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, viz:—(Name).....re-enlisted in the (Regiment).....on the (Date).....

DESCRIPTIVE REPORT ON ENLISTMENT

5916

Applicable to all ranks. To correspond with entries on the Medical History Sheet.

Name Richard Allen
 Apparent age 24 years 0 months. Height 5 feet 4 inches
 Chest Measurement { Girth when fully expanded 35 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Richard Allen
Woody Isely B | Relationship Father
 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.

(a)	(b)	(c)	(d)

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>5-8-18</u>									
Joined at <u>St Louis</u> on <u>August 5-1918</u>									
<u>Discharged August 7-1919</u>									
<u>Embarked St Louis train to Halifax N.S. 22-9-18</u>									
<u>Admitted military hospital Camp Biffych 11-10-18</u>									
<u>Transferred from military hospital to military camp Halifax Nova Scotia 11-11-18</u>									
<u>Discharged from military camp Halifax Nova Scotia 30-1-1919</u>									
<u>To be employed for demobilization 24-6-19</u>									
<u>Demobilization St Louis 7-8-1919</u>									
Total Service towards Engagement to <u>7-8-1919</u> (date of discharge) <u>1</u> years <u>3</u> days									
Pensions " " " " " " " " " " " "									

C.R. 5916

Extract from Nominal Roll of Sick and Wounded admitted to Military
Hospital, Devonport, 11/10/18. (Re-inforcements from Newfoundland.)

5916 Pte R. Allan

R. Wfld. Regt.....Influenza severe.

C.R. 5916

Extract from Nominal Roll Entitled for Overseas At. Sp.
John's Sept. 28, 1910. "A" Co.

5916 Pte. Richard Allan.

C.R. 5916

Extract from Daily Orders Part 11 from Unit The Royal
Nfld. Regt. St. John's, dated August 9, 1918.

5916, Pte. Rd. Allan.

Attested for General Service With The Royal Nfld. Regt.
from 5/8/1918.

C.R. 5916

NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. _____

Sent by _____

Woodley Island

Check _____

No. _____

Place from _____

R Bennett

To _____

Major



*Amidous hear if other
 report came to hand
 from 5916 pte Richard
 allen reply
 Richard allen*

C.R. 5916

Nov. 8th 19

Mr. Richard Allen
Woody Island.

Dear Sir:-

With reference to your wire of Nov. 7th in reference to No. 5916, Private Richard Allen, I am instructed to inform you that a cable has been forwarded to the Record Office, London enquiring as to his condition, and a reply is expected within a day or two when we will again communicate with you

Yours faithfully,

Lieut.

Casualty Officer.

for Minister of Militia.

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NEWFOUNDLAND CONTINGENT.

CASUALTIES.

C.R. 5916

Discharged from Military Convalescent Hospital, Crown Hill,
Devon, co Hazeley Down Camp, 30/1/19:-

5916. Pte. Allen, R., "E" Co. R.Nfld.Regt.

Authority:- A.F. W3119 from O.C.Hospital, dated 31/1/19.

NEWFOUNDLAND POSTAL TELEGRAPHS.
Cable Connection with all the World
R. 5916
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.

The control of the N. P. T. over the Message shall be deemed to have entirely 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 Sender _____ Address **Dept of Militia.**

Line Number	Recd	By	Sent	by	Check

Dated **Oct. 17th, 1918**

To **Richard Allen Woody Island, B.B.**

Regret to inform you that Record Office, London, officially reports **No. 5916, Private Richard Allen at Military Hospital Devonport, England suffering from influenza 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.

FOR TYPEWRITER

C.R. 5916

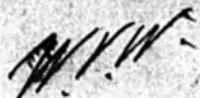
Nov. 16th 18.

Mr. Richard Allen,
Woody Island, B.B.

Dear Sir:-

In answer to your enquiry, I beg to inform you that information has been received by this Department from Pay & Record Office, London, to the effect that your son No. 5916, Pte. Richard Allen, is now convalescent.

Yours faithfully,



Lieut.

Casualty Officer,
For Minister of Militia.

Reg. No. 5916 Rank 9th Name Allen Richard
Attested 5-8-18 Address Woody Island
Allotment 60 Allottee Richard Allen (Father)
Date of Allotment 1-9-18 Returned from Overseas
Embarked for Overseas SEP 22 1918 Cause

Vacc 8-18 1st of 3-18 2nd Nov 14-9-18
A leave 1-9-18 to 9-9-18. Ret 10-9-18

C.R. 5916

Extract from Daily Orders Part VI Unit The Royal Field. Regt.
St. John's, July 3rd 1919.

5916 Pte. R. Allan.

Reported at Headquarters 1-7-19 ex "Cassandra" which sailed
Glasgow 24th June, 1919.

C.R. 5916

Extract from Medical Board held on July 5th.
1919. The following were the findings.

5916 Pte. R. Allan.

RECOMMENDED DISCHARGE FROM THE ARMY.

Admission to Menson Camp.

C.R. 5-916

Extract from Telegram to Synoptical London, from Military,
St. John's, dated Nov. 7th. 1918.

Inform condition:

5916 Allen.

C.R. 5916

Extract from Daily Orders Part II Royal Newfoundland Regt.

Depot St. John's dated August 18th 1919.

The discharge of the undernoted on remobilisation has been

CONFIRMED by Officer i/c Records from noted date

7-8-19.

5916, Pte. R. Allan.

C.R. 5916

Extract from Daily Orders Part 11 Unit The Royal Welch Regt.
St. John's, July 19th, 1919

The discharge of the undernoted on demobilization has been
APPROVED by G.O. Discharge Depot with effect from 21-7-19.

5916 Pte. R.Allan.

C.R. 5916

Extract of Casualties from Pay & Record Office London, dated Jan.
14/1/19.

5916 PTE. R. Allen.

Was transferred from Military Hospital, to Mil. Convalescent Hospital
Crown Hill, Devon, on 7/1/19.

A.F. W.3119 from Hospital, Crown Hill. Devon.

C.R. 5916

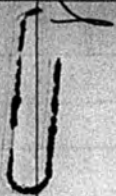
Extract of Telegram from Synoptical, London, dated, November 15th 1918

In answer your telegram November 8th 5916 Allen convalescent.

MP

R. Allen

C.R. 5916



~~1480~~

ENCLOSURE

4422/651/P&A

Forms
C. 348
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CHIEF PAYMASTER & OFFICER I/C.
MEMORANDUM.
NEWFOUNDLAND CONTINGENT
From
28, VICTORIA STREET,
LONDON, S.W. 1.
ENGLAND.

From

To

To

O/C. 2/R. Newfoundland Regt.,
Hazeley Down Camp,
WINCHESTER.

WF/FK.

ANSWER.

Pay & Record Office.

19th March 1919.

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5916 PTE. R. ALLEN.

R. Allen

The attached A.F.N. 1510 relating to payments made to the above named soldier, whilst attached to Military Convalescent Hospital, Crownhill, Plymouth, is forwarded to you for attention as customary, please.

Noted
[Signature]

J. H. Marshall Capt.
Asst. Chief Paymaster.
For Chief Paymaster & O.i/c. Recds.

to [Signature]

POST OFFICE



TELEGRAPHS.

Office Stamp.

Handed in at : Office of Origin and Service Instructions

2-15 DEVONPORT F OHMS 16

NEWFOUNDLAND CONFIDENTIAL
PAY & RECORD OFFICE
Ref. Nos. FN 9795



THIS FORM MUST ACCOMPANY ANY ENQUIRY RESPECTING THIS TELEGRAM.

Received here at

TO
= T Y N O P T I C A L L D N =

Ack'd Ans'd
Ref. Nos. 001

4257 M.

A BY
Comri
P &
R. & C.
B. & E.

YOUR 381 DATED 12/11/18 59.16 S. ALLEN IS

NOW CONVALESCENT = 0 C MILTY HOSPL DEVONPORT :

Cabled M of M 15th 11/18 1918

Ring up top. re
similar cases

24th January,

9.

1454/1/R.&.O.

Officer Commanding,

Military Conv. Hospital,

Crownhill. Devon.

5916 PTE. R. ALLEN.

804

Reference attached: 5916 Pte. R. Allen should be returned to the 2nd Bn. R. Newfoundland Regt., Hazeley Down Camp, Winchester (Station - Shawford). That is the dispersal station for Newfoundlanders, please, and all his documents are there.

Major,

Chief Paymaster & O. i/c Records.

HA/NV

No. 7992/1547

From: NEWFOUNDLAND

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

27th May 1919

5916 Pte. R. Allen

With reference to the following telegram from the Minister of Militia / / 19 (206):

"Pay to- 5916 R. Allen
£4. 2. 0.

Cheque £ 4. 2..0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

A. A. Minnell
Chief Paymaster & O. i/c Records.

PD 100023
N.F.P. 179.

To: Officer Commanding,
2nd Batt. Ryl. Nfld. Regiment
Winchester.

May 29th 1919.

Receipt hereunder.

I pay for LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

Received the sum of £ 4. 2. 0

Four Pounds Two Shillings in respect of telegraphic remittance from the Minister of Militia.

R. Allen
No. 5916 Rank Pte.

Witness: H. White

Allen, J

5916

May 20 Sept.

August 7th 1919.

#5916, Pte.H.Allen,
Woody Isld.P.B.

Dear Sir:

Enclosed please find Discharge Certificate
3552.

Yours truly,

Capt.&
Officer i/o Records

RS/.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5916 Rank Private Name Allen R
 Date of Enlistment 5.8.18 Address Woody Isles District Planters
 Occupation Fisherman Classification for Discharge B Medical Category E
 Recommendation S.M.B. Permanently unfit Disability Rating 100% white ins. Rsp
 Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1	1	3258	1
B 178	W 3494	B 122	Board 1st	" 2	3	17-1	1
B 178a	D 400A	B 1915	do 2nd	" 3		3068	1
B 179	D 400B	Form L	do 3rd	" 4		1809	1
B 179a	D 400C	Form K	do 4th	" 5			
B 179b	B 103	ME 2		" 6			
B 179c	B 120	M 93	1237				

Date 10 7 19

K.O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am.....in a position to resume civilian occupation.

Richard Allen
 this *Richard Allen*
 with wife *with wife*

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$60.00
 (b) Clothing Supplied have left

Date 10-7-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R23959884 to his home

Woody 922d and Release Certificate No. 3434 issued.

Date 10-7-19 J.A. Lawless
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 7-8-19

Date 10-7-19 H. H. [unclear]
Depot Paymaster.

Discharge approved for 24-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	1	N.F. Med.	D.F. 1	1	3288-1
E 178	W 3494	B 122		Board 1st	" 2	6	172-1
B 178a	D 400A	B 1915	1	do 2nd	" 3	2	3068-1
B 179	D 400B	Form L		do 3rd	" 4		1089-1
B 179a	D 400C	Form K	1	do 4th	" 5		Form B
B 179b	B 103	ME 2			" 6		
B 179c	B 120	M 93					
				1237-1			

Date 10-7-19 J.A. Lawless
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUL 24 1919 N.R. Cooper Cabot
O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.

Date

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 resume former Occupation.

Allen R.

Signature of Man.

Reg. No. 5916

J. J. Howell

Signature of the Vocational Officer or his Representative.

Place *St. Johns*

Date *10-7-19.*

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

MEDICAL HISTORY

Surname

Allen

Christian Name

Richard

Table I.—GENERAL TABLE

Birthplace:—Parish

County

Newfoundland

SPECIAL RESERVE

REGULAR ARMY

Examined	on <i>5</i> day of <i>Aug</i> 191 <i>8</i>	on	day of	191
	at <i>St John's</i>	at		
Declared Age	<i>20</i> years	days	years	days
Trade or Occupation	<i>Yokerman</i>			
Height	<i>5</i> feet	<i>4</i> inches	feet	inches
Weight	<i>133</i> lbs.			lbs.
Chest Measurement	Girth when fully expanded	<i>35</i> inches		inches
	Range of Expansion	<i>3</i> inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm			
	Number			
When Vaccinated				
Vision	R. E.—V=	<i>6/6</i>	R. E.—V=	
	L. E.—V=	<i>6/6</i>	L. E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<i>Lamm Parsons</i>			
(Rank)		Medical Officer		Medical Officer
Enlisted	at <i>St John's</i>	at		
	on <i>5</i> day of <i>Aug</i> 191 <i>8</i>	on	day of	191
Joined on Enlistment	Corps	<i>Regt. No. 5916</i>	Corps	Regtl. No.
Transferred to	<i>Regt. ROYAL NEWFOUNDLAND REGIMENT</i>			
Became non-effective by	on	day of	191	on
(Signature)		day of		191
(Rank)				

Table II.—Only for admission to hospital or to the

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing Syphilis, admission of tr
	Day	Month	Year	Day	Month	Year			
<i>Deronport military</i>	<i>11</i>	<i>10</i>	<i>18</i>						
<i>Crown Hill</i>			<i>30</i>				<i>Influenza</i>	<i>24</i>	
<i>C.B.H.</i>	<i>7</i>	<i>1</i>	<i>19</i>	<i>25</i>	<i>1</i>	<i>19</i>	<i>Pneumonia</i>	<i>19</i>	



Table III - Board of Inquiry, Vaccination, and
Foreign Service, Extension, Re-employment or Promotion of Officers
list in case of Warrant Officers treated in quarters

the cause, nature or treatment of the case likely to be of interest or of future use. In case of
and re-admissions to hospitals will be shown. The subsequent progress, including particulars
sent out of hospital, transfers, etc., will be given in the special syphilis case sheet.

Signature of Medical Officer

No. Duty

J. I. Montgomery

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), 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**.....
2. Regtl. No. **5916**. 3. Rank... **Pte**.....
4. Name **Richard Allen**.....
(Surname) (Christian Names)
5. Age last birthday..... **30**
6. Posted for duty on..... at.....
 in category (or grade).....
7. Former Trade or Occupation }
 7a. If the soldier claims previous service in Army, he should state—
 (a) Former Regts. or Corps ; with Regtl. Nos.
 (b) Date of Discharge ;
 (c) Cause of Discharge.
 (d) Particulars of Pension or Gratuity (if any)
8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty?
9. If a Court of Inquiry was held on an injury state :—
 (a) When
 (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 venereal 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."

Disability recovered from. (Influenza).

11. Date of origin of disability. **About the beginning of Oct. 1918.**

12. Place of origin of disability.

13. Give concisely the essential facts of the history 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.
- On the boat from Newfoundland to Plymouth, he got Influenza while coming across & this was followed by Pneumonia on arrival he was sent to Devonport Mil. Hp. The Influenza recurred several times so that he had to go back to Hp. Three times.**

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 war | | |
| (v.) Serious negligence or misconduct on the man's part | | |

14 (a). If not due to any of these causes, to what specific condition do you attribute it?

In all cases such as facial 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.

15. What is his present condition? **He has apparently recovered & he states that he now feels quite well. Nothing abnormal found in Lungs or Heart.**
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

16. Was an operation performed? If so, when and what was its nature?

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—

(a) Discharge as permanently unfit? **Marked to duty by Professional M.O.**

(b) Change to United Kingdom?

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

(SGD) RICHARD GRANDY CAPT.

Medical Officer in charge of case.

Station

Date

* 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 rules 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 differentiate between them.

21. Give diagnosis and particulars of:—

(a) Any disability claimed or discovered.

(b) The present condition thereof.

Weight 142. F. 80. T. 99. Accompaniments both Apices (JST) Branchial breathis with increased V.R. R. Apex.

22. State whether the disabilities are:—

(i) Service during the present war

(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

Give details:

(a) Attributable to

(b) Aggravated by

Yes.

No.

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

Infection.

23. Is the disability in a final stationary condition? If not

(a) How long is the present degree of disability likely to last?

(b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the 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 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).

100% while in Hp.

(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. If an operation was advised and declined, was the refusal unreasonable?

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

Yes.

Opinion of Military Member in case of disagreement

OR

(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)?

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

Yes.

28. Is treatment being recommended on Army Form B. 179c?

SANATORIUM FOR OBSERVATION

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures:—

(SGD) N. S. FRASER.

{ President or Chairman.

Station **ST. JOHN(S).**

J. S. TAIT.

} Members.

Date **JULY 5/19.**

L. PATTERSON. MAJOR.

Discharge approved under Para. 392 (xvi) King's Regulations.

Station **JUL 5 1919**

(SGD) CLIFFY MACPHERSON. MAJOR.

} Only applicable in cases of Patients in Hospitals.

Date No.OR

Officer in charge, Central Hospital.

Discharge approved under Para. 392 () King's Regulations. or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station

O.C. Discharge Centre.

Date



The Royal Newfoundland Regiment

Class for Demobilization:—

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

Regimental No. ... 5916

Name ... Allen Richard

Address ... Woody Island

Present Medical Category ... E

Recommended for:— { (a) ~~Immediate discharge~~

(b) Standing Medical Board

Members of Board {

R H Last Major
O.C. Discharge Depot.

J Person
Senior Medical Officer

J W Berden
M. O. Depot



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 occurring in the description subsequent to the date of admission to pension should be noted in red ink.

Name in full *Richard Allen*

Regiment from which discharged *Royal Newfoundland*

Regimental number *5916 J.*

Intended address *Woody Isld*

Height on discharge *5 Feet 3*

Color of hair on discharge *Black*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *Short*

Figure on discharge *Richard*

Christian name of Father *Mary*

Christian name of Mother *—*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Woody Isld 1892 Oct 24th*

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.

(Soldier's signature in full) *Richard Allen* *Witness* *Wormchale* (Rank) *RtE*

Station *St John's* Date *JUL 4 1919*

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.

Date

TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	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, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
MILITARY HOSPITAL, DEVONPORT	11	10	18	18	11	18	Influenza Pneumonia	39	Pneumonia followed Influenza patient made a good recovery and, as he was still debilitated, he was sent to Crownhill Con Mpl. Huseferry Capt Rame	
Devonport Military	18	11	18	13	12	18	Scabies Influenza	26	release Post-Influenzal.	J. H. Duncan Capt
4 South General Supt. Supt. Plymouth	13	12	18	20	12	18	Scabies	8	Cure returned to mil. Mpl Devonport	J. H. Duncan
Devonport Military	20	12	18				Influenza.		Patient had severe attack of Influenza with purulent bronchitis - pneumonia left base. case followed by acute Otitis media left ear, with severe neuritis. Pt still debilitated. Hearing left ear. Improving, lungs clear. Heart not	Dr. Rame Capt RAME

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book	Regimental No.	Rank	Surname	Christian Name
	8916	Pte	Allan	Richard
Year	Unit	Age	Service	
	Newfoundland	Rifle	24	$\frac{4}{12}$
Station and Date.	Disease (1) Influenza. 21 severe. (2) Pneumonia			
Desport Military Hospital 11. 10. 18.	Admitted from Liverpool Hospital. Very ill with Influenza & pneumonia. Left base.			
17. 10. 18.	Pte still remains ill. dyspnoea. cyanosis. Tubercle. healthy. left base. lower lobe.			
10. 11. 18.	Acute. Otitis media left. TM. viscous. + middle ear. dram of			
1. 12. 18.	Middle ear. again. Acute & inflamed. Anesthetized & TM. viscous. Middle ear. drums. severe headache occasional vomiting. no definite nasal discharge. Pte very weak			
10. 12. 18.	Headaches. in evening. Ear. Condition improving.			
19. 12. 18.	Scabies. Transferred to Southern General Hospital.			
20. 12. 18.	Re-admitted. General condition much improved. Recommended transfer to Epsom			
26. 12. 18.	Improving.			

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

(331.) Wt. 2445 P.1086. 600,000. 11/6/18. Wh. P. E. 3318. Forms/W.3288/3.

Army Form W. 3288.

To O.C. 2/ Newfoundland Regt
Hazley Down Camp
Winchester

_____ Hospital.
MILITARY CONV. HOSPITAL, CROWN HILL, DEVON.
Station _____

Herewith Army Form B. 178 (Medical History Sheet)

01809Z
172-8179^a 8179^b W3068
T1237

in the case of 5916 Pte Allen H. Newfoundland Regt

Please acknowledge receipt hereon.

L. Bye 21/1
LT. COL. I.M.D.
MIL. CON. HOSP.
CROWN HILL, DEVON

RECEIVED _____

Signature _____

Commanding _____

Date _____

29 JAN 1919

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

Army Book 172.

Extract from Admission and Discharge Book of.....Hospital at.....

 MILITARY CONVALESCENT HQ
 Date **21 JAN 1919**
 CROWN HILL DEVON

No. of Case.	Regiment or Corps.	Troop or Company.	Regt. No.	RANK AND NAME Surname first. If Married, write "M" under name.	Completed Years of			DATES.		Religion.	DISEASE (a) Primary. (b) Secondary. (c) Operations.	Destination of Transfer, and to what Hospital or Ship Transferred.
					Age last birthday.	Service.	Service in the command.	Admitted into Hospital.	Transferred.			
704	Royal Newfoundland Regt	E	5916	Pte Allen, Richard	24	7/12	-	7/19	30/11/19	Wes	265 Otitis Media	2/ Newfoundland Land Regt (Newfoundland West Station) Hazelton Barracks Camp Wuchester

State whether the Patient

- (a) Was transferred from an Expeditionary Force.....
- (b) Has already been granted 10 days' furlough.....
- (c) Was admitted whilst on short leave from Overseas.....
- (d) Was admitted from a Home Service Unit..... *Yes*

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

Probs

 LT COL. F. S.
 CINDG MILY. CON. HOSP
 CROWN HILL DEVON
 Medical Officer in Charge.

Army Form W. 3068.

Transfer Statement of Clothing and Necessaries.

INSTRUCTIONS.—This Statement will be made out by the Depot and will be sent to the Commanding Officer of the unit receiving the transfer, who will retain it as a voucher to the unit's Clothing Account. The Statement will also be forwarded in the case of men in the United Kingdom passing from Hospitals to Depots or units, and in all cases of Transfer, except when men proceed overseas.

STATEMENT showing the Articles in possession of (Regimental No. 5916 *Newfoundland Regt.*)

Rank and Name) Pte Allen P

proceeding from the MILITARY CONV. HOSPITAL, CROWN HILL, DEVON

to the _____

Date of Enlistment _____ Date of Transfer _____ 1919

FOR DETAIL OF ARTICLES, see overleaf.

Certified that this Statement, as detailed overleaf, is correct in every particular *J. Sturgeson*

(1) Station Crown Hill

for Capt.
Commanding Squadron, Battery, &c.

Date _____

15 Dec.
Name of Unit man is leaving

(2) Station _____

Commanding Squadron, Battery,
or Company.

Date _____

Name of Unit man is joining.

Man's own statement.
Articles of Clothing and Necessaries in Possession.

Articles not in possession should be struck out of the list. Any articles not included should be inserted.

CLOTHING	No.	NECESSARIES	No.
Aprons, kilt		Badge, cap	
Boots, ankle, pairs	1	Bag, Kit	1
Caps, Service Dress	1	Braces, pairs	1
Caps, Glogarry		Brace, Button	
Drawers, pairs	2	Brush, Brass	
Frocks, Canvas		" Blacking	
Greatcoat, D.M.	1	" Clothes	1
Jackets, Service Dress	1	" Hair	1
Kilts		" Polishing	
Pantaloons, cord, pairs		" Shaving	1
Putties, pairs	1	" Tooth	1
Spurs, Jack, pairs		Can Comforter	
Trousers, Service Dress, pairs	1	Comb, hair	1
Trousers, Canvas or Khaki		Disc, identity, with cord	
Drill Trowsers, pairs		Fork	
Waistcoat, cardigan	1	Garters, Highland, pairs	
Coat, Waterproof		Holdall	
Gloves, leather, pairs		Hose Taps, pairs	
Gloves, Motor Cyclist, pairs...		Housewife	
Goggles, pairs		Knife, Gloop... ..	
		Knife, Table	
		Laces, leather, spurs, pairs	
		Shirts, flannel	4
		Socks, worsted, pairs	3
		Spoon	
		Titles, metal, pairs	
		Towels, hand	1
		Wax Polish, tin	
		<i>Rajo.</i>	2.

I certify that this statement is correct.

Date 28.1.19

Signature of the Soldier

T. Hisobants. bdd 97.
Walter B. Bally. bdd 97.

STATEMENT BY A SOLDIER CONCERNING HIS OWN CASE.

NOTE.—This Form is to be filled in by every soldier prior to the compilation of Army Form B 179A, whether a patient in hospital or not, and attached thereto. The questions are to be answered in the soldier's own words, and the Form is to be signed by him and the signature witnessed. In the event of the soldier being unable to write he should affix his mark, such act being witnessed.

Regimental No. 5916Rank Plt.Name Allen Richard
(Surname) (Christian Names)Unit and Corps } Newfoundland
Regt.

Note.—Before answering the questions below, the soldier is to note that

(a) The statements made by him will be checked by official records.

(b) In answering Question 2 any special matters which in his opinion caused any unfitness from which he may be suffering or which aggravated it should be clearly stated.

If the soldier is unable to read, the above notes are to be read to him by an officer.

1. (a) In what countries have you served during this war, and for what periods?

Newfoundland Aug 5th 1918 to Oct. 20 1918
England Oct 20th to date.

(b) In what capacity?

Private in training

2. If you are suffering from any disease, wound, or injury, state what it is, the date upon which it started, and what, in your opinion, was the cause of it.

Influenza
was taken bad during voyage to
England.

(If more space is required a sheet of foolscap should be used, and firmly attached to this form.)

3. Give the names of any hospitals where you have been treated for the above disease, wound or injury during the present war.

Military Hospital Devonport.
Milton Hospital Crownhill
Huts Plymouth.

4. Did you suffer from the disease or injury mentioned in above answer to Question 2, or anything like it, before joining the Army? If so, give details and dates.

No.

5. Give the names (and addresses if you know them) of any hospitals you were in or doctors who attended you before you joined the Army.

None.

6. Give the name of your National Health Approved Society, and (if possible) your Membership Number.

7. What is the name and address of your last employer before joining the Army?

R. Allen.
Woodey. Isle.
Newfoundland.

8. (a) What was your occupation before joining the Army?

Fisherman.

(b) What was your trade before joining the Army?

(To be checked by A.F.B.64 or A.F.B.103.)

The above statement has been read over to me; I agree to it, and have nothing further to add.

Station *Mil. Con: Hospital Crownhill Huts Plymouth.*

Signed (Soldier) *[Signature]* *(R. ALLEN)*

Date *Jan. 25th 1919.*

Signed *[Signature]*
Witness.

NOTIFICATION of Particulars of Accounts of a Soldier about to proceed for Dispersal on Demobilization.

In the United Kingdom to be handed to the Officer or Non-Commissioned Officer in charge of the Draft. In an Overseas Command to be rendered to the local Command Paymaster as soon as the final cash payment has been made previous to embarkation.

Soldier's } 5916 Rank Sgt Name Allen R.
 Regtl. No. } Newfoundland Coy. (Surname first)
 Unit Newfoundland Coy.

Cash payments and Bills, in present Company, during current account period (Jan) - : 8 : 6
month

Cash payments and Bills, in present Company, during preceding account period (-) - : - : -
month

How situated during current and preceding account periods :-

(i) Period in hospital. Date of admission to be stated, also whether the soldier is subject to hospital stoppages

7-1-19 — 29-1-19

(ii.) If not on strength of company, etc., from beginning of account period, from what unit or company transferred, date of transfer and what charges appeared on A.F. O. 1809A.

(iii.) Other special circumstances, if any, as to situation, specifying any claims accompanying this form or to be rendered later.

(iv.) Casualties other than above affecting pay during current period. Detail and period to be given.

(v.) Stoppages during current period other than specified above.

I CERTIFY that the above particulars are correct.

Station Crownhill, Shymonh. W. Bass - 2 Lt.
 Date 29/1/19. Commanding D. Dool, Sqd
Mail Coon Rep.

August 15, 1919

Mr. Richard Allen,
Woody Island, P.B.

Dear Sir:-

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

Yours truly,

Captain & Paymaster.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity 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 dashes, if any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

- Christian name..... *Pickens* 2. Surname..... *Allen*
3. Rank..... *Pte* 4. Regtl. No..... *55th*
5. Address in full to which future payments of gratuity are to be forwarded..... *Woods* *St. John's* *P.B.*
6. Date of enlistment in the Regiment..... *Aug 4/18*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
.....
.....
8. Relationship of such dependents.....
.....
9. Address in full of such dependents.....
.....
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....
11. Were you on active service only in Hfld. If so, give dates and particulars of such service..... *Overseas*
12. Give total length of time which you served on active service, whether in Hfld. or Overseas..... *Eleven months*
- 1.3

13. Have you had more than one enlistment? If so, give particulars of discharge and re-enlistments, and under what regimental numbers.

no

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.

no

15. Have you been issued with a War Service Badge?

no

16. Have you, during the present war, served in the Imperial Forces?

no

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?

no

(b) If so, was such reversion in consequence of Misconduct or inefficiency?

no

19. Are you now serving in the Regt.? If not give:- (a) Date of discharge.

no

July 24/19

*(b) Reason for discharge
Hernandez at war*

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service.

Exp. 1918

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee.

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under Oath.

Signature of Applicant: *Richard X Allen*
 Place of Residence: *Woods Island P.B.*
 Declared before me at: *St Johns*
 This *10* day of *July* 19*55*.....

Signature of Barrister of the *John McCarthy*
 Supreme Court, Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of Affidavits.

POST DISCHARGE PAY.					Net amount due
Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.		
.....
.....
Certified correct.					Raymaster

ORIGINAL

No. 9603

NEWFOUNDLAND CONTINGENT

N.F.P./54.

No. 426

To: The Minister of Militia,
St John's,

" " Company.

NEWFOUNDLAND

MEMORANDUM OF STOPPAGES/~~CREDITS~~ on account of

Hospital Advances

NOTE:- Charge under

Column.

Credit Pay & Record Office London

Regtl No.	Rank & Name		Particulars & Authority	AMOUNT				
				£	s	d		
5916	Pte	Allan R	Casual Payment Whilst in Hospital during Month January as per P.M.A.167 10.2.19				8	6
TOTAL							8	6

CHECKED.
W.E.
10.7.19

OK
WR

Pay & Record Office,
58, Victoria Street,
London, S.W. 1.

P.A. Muisel

July 10th

1919

Chief Staff Officer (London).

CERTIFIED that the above Stoppages/~~Credits~~ have been made
in the Pay Book " " Co'y for Period / / to / /

Dated at _____

1919.

C.C., " " Company,
Battalion.

Complete and return ORIGINAL, retain DUPLICATE.

DUPLICATE.

No. _____

NEWFOUNDLAND CONTINGENT

N.F.P./54.

No. **426**

To:

**The Minister of Militia,
St John's,**

" " Company.

MEMORANDUM OF ~~STOPPAGES~~ ^{NEWFOUNDLAND} CREDITS on account of ~~xxxxxxx~~**Hospital Advances**NOTE:- Charge under

Column.

Credit

Regtl No.	Rank & Name		Pay & Record Office London Particulars & Authority	AMOUNT				
				\$	£	£	s	d
5916	Pte	Allan R	Casual Payment Whilst in Hospital during Month January as per P.M.A.167 10.2.19				8	6
TOTAL							8	6

CHECKED.

WE.

10.7.19

Pay & Record Office,
58, Victoria Street,
London, S.W. 1.

1919

A. A. Minnie
Chief Staff Officer (London).July 10thCERTIFIED that the above Stoppages/~~Credits~~ have been made
in the Pay Book " " Co'y for Period / / to / /

Dated at _____

_____ 1919.

C.C., " " Company,

_____ Battalion.

Complete and return ORIGINAL, retain DUPLICATE.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of Royal Newfoundland

Number of Sheet one
Signature of O. C. Company C. B. Dickson

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>Richard Allen</u>	Age on	<u>24</u> years <u>0</u> months	<u>Fisherman</u>	
Joined	Date	Place and Date of Enlistment	<u>St. John's</u> <u>5-18-18</u>	Religion <u>Meth</u>	
Joined	Date	Period of	with Colours <u>1³/₅</u> years. with Reserve _____ years.	Place of Birth <u>Woody Island P.B.</u>	

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<u>Demobilized</u>	<u>St. John's</u>	<u>7</u>	<u>8</u>		<u>19</u>

To be carried over.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5916 Rank RtE Name Allen R
 Date of Enlistment 5.8.18 Address Woody Isld District Placentia
 Occupation Fisherman Classification for Discharge B Medical Category E
 Recommendation S.M.B. Permanently unfit Disability Rating 100% white ins Hosp
 Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	1	N.F. Med.	D.F. 1	1	3289	1
B 178	1	W 3494	B 122	Board 1st	" 2	3	3068	1
B 178a	1	D 400A	1	B 1915	do 2nd	" 3	1809	1
B 179	D 400B	Form L	do 3rd	" 4				
B 179a	1	D 400C	Form K	do 4th	" 5			
B 179b	1	B 103	ME 2		" 6			
B 179c	B 120	M 93	1237	1				

Date 10.7.19

[Signature]
R O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am.....in a position to resume civilian occupation.

Richard Allen
Mark with wife

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied *[Signature]*

Date 10-7-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R2395984 to his home at Woodly Field and Release Certificate No. 3434 issued.

Date 10-7-19 *J.A. Lawless*
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 7-8-19

Date 10-7-19 *J.A. Lawless*
Depot Paymaster.

Discharge approved for 24-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	1	N.F. Med.	D.F. 1	1	3288-1
B 178	W 3494	B 122		Board 1st	" 2	1	172-1
B 178a	D 400A	B 1915	1	do 2nd	" 3	2	3068-1
B 179	D 400B	Form L		do 3rd	" 4		1089-1
B 179a	D 400C	Form K	1	do 4th	" 5		Form B
B 179b	B 103	ME 2			" 6		
B 179c	B 120	M 93		1237-1			

Date 10-7-19 *J.A. Lawless*
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUL 24 1919 *N.R. Coogan Capt.*
O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.

Date July 31/19 *[Signature]*

Reg. No. 5916 Rank Plt. Name Able R

Attested Address. Waddy Island.

Allotment Allottee ..

Date of Allotment Returned from Overseas JUL 1 1919

Returned on S S. Cassandra. Cause Discharge

8.7.19

Rec. Discharge from the Army.
Admission to General Camp

10.9.19

24.7.19

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5916 Rank Plt. Name Allen R.
 Intended place of residence Woody Isles
 2. Occupation Fisherman
 Classification of soldier B Medical Category E

3. The above named man is discharged in consequence of

DEMobilIZATION Eligible for War Service Gratuity

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.

Place, ST. JOHN'S

Date JUL 10 1919

[Signature]
 Commanding 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 all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place, ST. JOHN'S

Date JUL 10 1919

[Signature]
 Signature of soldier

[Signature]
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place, ST. JOHN'S

Date 10-7-19

[Signature]
 Signature of soldier

[Signature]
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 5-8-18 No. of days on Military
 Discharged from service 24-7-19 Plus 14 days Service 368

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge, The Royal Newfoundland Regiment, twenty-eight days from date.

Place, ST. JOHN'S

Date JUL 24 1919

[Signature]
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place, ST. JOHN'S

Date August 7/1919

[Signature]
 Officer in Charge
 The Royal Newfoundland Regiment

[Handwritten]
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