

4512



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4512 Name P Bamister Corps Co E

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. Philip Bamister
- 2. What is your full Address? 2. Port Berton
- 3. Are you a British Subject? 3. Yes
- 4. What is your age? 4. 21 Years 0 Months
- 5. What is your Trade or Calling? 5. Waterman
- 6. Are you Married? 6. no
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7. no
- 8. Are you willing to be vaccinated or re-vaccinated? 8. yes
- 9. Are you willing to be enlisted for General Service? 9. yes
- 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. yes

I, Philip Bamister 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.

a-10-4-18

Philip Bamister SIGNATURE OF RECRUIT.
James Altman Signature of Witness.

Philip Bamister 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 on this 10th day of April 1918

Signature of Attesting Officer Geo. L. Bank Major

† 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 rank of private

If enlisted by special authority, such will be attached to the original attestation.

Date 1918 }
Place } 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, viz:—(Name) re-enlisted in the (Regiment) on the (Date)

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Philip Bannister
 Apparent age.....years.....months..... Height 5 feet 8½ inches
 Chest Measurement { Girth when fully expanded 36 inches
 Range of expansion..... 3 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Charles Bannister
Port Newton B.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 L'epot	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>20-4-18</u>									
Joined at <u>St. Paul's</u> on <u>April 20th 1918</u>									
<u>Discharged July 5, 1919</u>									
<u>Embarked St. Paul's St. Columbella to Halifax N.S. 22-7-18</u>									
<u>Embarked for B.C. 23-11-1918</u>									
<u>Disembarked France 28-11-19</u>									
<u>Joined Battalion 5-1-1919</u>									
<u>Transferred from Lower 22-12-19</u>									
<u>Arrives Winchester 23-4-1919</u>									
<u>To the foundation for demobilization 22-5-1919</u>									
<u>Arrives Newfoundland 1-6-1919</u>									
<u>Demobilization St. Paul's 5-7-1919</u>									
<u>to Active Service!</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 5-7-1919 (date of discharge) 1 years 77 days
 Pensions [" "] [" "] [" "]

C.R. 4512

Extract from Daily Orders part II, Unit the Royal Nfld.
Regiment, dated July 9th .1919

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records, on noted date.

5-7-19.

#4512 Pte. Phillip Bannister.

C.R. 4512

Extract from Daily Orders Part 21 Unit The Royal WFLD,
Regt. Depot, St. John's, June 11th, 1919

The discharge of the undernoted on demobilization has been
APPROVED by C.O. Discharge Depot with effect from 21-6-19.

4512 Pte. P. Bannister

C.R. 4512

Extract from Daily Orders Part 11 Depot, St. John's,

Date 10-6-19.

4512 Pte. P. Bannister

Reported at Headquarters

1-6-19.

RE "Corsican"

which sailed Liverpool MAY 22/1919.

C.R. 4572

Extract from Nominal Roll from 1st. Battalion

Royal Newfoundland Regiment dated 30-4-19.

The undermentioned of the 1st. Battalion left
Rouen Camps 22/4/19, embarked at Havre 22/4/19,
disembarked at Southampton 23/4/19 and reached
Hazeley Down Camp 23/4/19.

#4512 Pte. P. Bannister.

C.R. 4512

Extract from Nominal Roll of Draft No. 56 from the 4th., Battalion
Winchester to the 1st., Battalion of the Newfoundland Regiment
E. S. F. Embarked Southampton 25/11/18.

#4512 Pte. P. Bannister.

C.R. 4572

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. St. John's dated July 25, 1918.

The following man embarked for overseas on H.M.S.
"Columbella" July 25 1918.

#4512 Pte. Philip Bannister.

C.R. 4512

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. St. John's, dated April 20, 1918.

#4512 Pte. P. Bannister.

Attested for General Service with the Royal Nfld.
Regiment, from 19/4/18.

Bannister, P.

CR 4512

P. Y. P. Q.

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvii or xviii), 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. *1st Regt. Newfoundland* 7. Former Trade or Occupation } *Fisherman*
2. Regtl. No. *4512* 3. Rank. *Private* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Bammatis* *Philip* (a) Former Regts. or Corps; with Regtl. Nos.
- (Surname) (Christian Names)
5. Age last birthday. *27*
6. Posted for duty on *Apr 20/18* at *St. Johns* 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 (if any)
- (b) Where
- (c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 a (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."
11. Date of origin of disability. *nil*
12. Place of origin of disability. *nil*
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. *nil*

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (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 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?

(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

No complaint from disabled

16. Was an operation performed? If so, when and what was its nature? *na*
17. If not, was an operation advised and declined? *na*
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? *na*
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? *na*

20. Do you recommend—

- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?

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

Repatriation
none
Major D.A.D.
Capt R.A.M.C.

Station *Hayley D. Camp*
 Date *30-4-19*

Medical Officer in charge of case.

* 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

Barrister, A

4512

Ray Sept

July 5, 1919

#4512 Pte. Philip Bannister .

Port Hexton, T.B.

Dear Sir:-

Please find enclosed Discharge
Certificate No. 2620.

Yours truly

Captain,
Paymaster & O.I.C. Records.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4512 Rank PC Name Bannister P

Intended place of residence Port Rexton Trinity

2. Occupation Ferrierman

Classification of soldier E Medical Category A¹

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 *for Mrs. Hunt*

Date JUN 7 1919 *for* 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 and date ST. JOHN'S *P. Bannister*

JUN 7 1919 *Ambleton*
Signature of soldier
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 and Date ST. JOHN'S *P. Bannister*

7-6-19 *James Newman*
Signature of soldier
Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 29-4-18 No of days on Military
Discharged from service 21-6-19 *14 days* Service 437

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S *R.H. Last Call*

Date JUN 21 1919 *R.H. Last Call*
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 *M. Bowley Capt*

Date July 5/1919 *M. Bowley Capt*
Officer in Charge of Records
The Royal Newfoundland Regiment

a 2207/2620

The Royal Newfoundland Regiment

Class for Demobilization: *Ej*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *6.6.19*

Regimental No. ... *4512* ...

Name *Bannister Philip Pte*

Address *Port Rexton*

Present Medical Category *A-1*

Recommended for:— { (a) Immediate discharge
(b) ~~Standing Medical Board~~

Members of Board {

R.H. East Capt
.....
O.C. Discharge Depot.

P. Petersen
.....
Senior Medical Officer

G.W. Burden
.....
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4012 Rank Plr Name Baronnet J
 Date of Enlistment 25-11-18 Address Port Regatta District Trinity
 Occupation Postman Classification for Discharge 1/1 Medical Category H.1
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. P/36.....	B 268.....	B 121.....	N.F. Med.....	D.F. 1.....	1
B 178.....	W 3494.....	B 122.....	Board 1st.....	" 2.....	
B 178a.....	D 400A.....	B 1915.....	do 2nd.....	" 3.....	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.....	
B 179c.....	B 120.....	M 93.....			

Date 6-6-19 for 1/1 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

i. Civil Re-Establishment.
 I am.....in a position to resume civilian occupation. J. Baronnet

Particulars passed to Vocational Officer for information and action.

Date.....

a. Clothing.
 Certified that Clothing Regulations have been complied with—
 (a) Clothing Allowance payable. None
 (b) Clothing Supplied None J. Baronnet

Date 7-6-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. to his home at Port Rexton and Release Certificate No. 24443 issued.

Date 7-6-19 J.A. Brown
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 5-7-19

Date 7-6-19 H. H. ...
Depot Paymaster.

Discharge approved for 21-6-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	/	N.F. Med.	D.F. 1	/
E 178	W 3494	B 122	/	Board 1st	" 2	/
B 178a	D 400A	B 1915	/	do 2nd	" 3	1/2 Form B
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	
B 179c	B 120	M 93				

Date 7-6-19 J.A. Brown
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
R.H. Jait Capt.

Date JUN 21 1919 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

P. Bannister

Signature of Man.

J. A. Snow Craft

Signature of the Vocational Officer or his Representative.

Reg. No. *4512*

Place

N. Johns

Date *JUN 7* 1919

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

MEDICAL HISTORY

Surname Barnard OF Christian Name Philip

Table I.—GENERAL TABLE.

Birthplace:—Parish Port Antonio County Nfld

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	25 th	Apr		191
	at	St Johns	at	
Declared Age	21	years		days
Trade or Occupation	Fishermen			
Height	5	feet 8 $\frac{1}{2}$ inches		
Weight		125 lbs.		
Chest Measurement	Girth when fully expanded...		36	inches
	Range of Expansion..		3	inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	/		/	
When Vaccinated	6/10			
Vision	R. E.—V=	6/12	R. E.—V=	
	L. E.—V=		L. E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Lambert</u>			
(Rank)	Medical Officer.		Medical Officer.	
Enlisted	at	St Johns	at	
	on	25 th day of Apr	on	
Joined on Enlistment	Corps.	Regal. No.	Corps.	Regal. No.
	<u>Medical</u>	<u>4512</u>		
Transferred to	<u>Nfld Regt</u>			
Became non-effective by	on	day of	on	day of
		191		191
(Signature)				
(Rank)				



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 *Philip Bannister*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4514*

Intended address *Port Rexton*

Height on discharge *5 Feet 7"*

Color of hair on discharge *Black*

Complexion *Fair*

Color of eyes *Gray*

Descriptive Marks _____

Figure on discharge *medium*

Christian name of Father *Charles*

Christian name of Mother *Clara*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *Port Rexton 1897 Oct 10th*

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)

Philip Bannister

(Rank)

Private

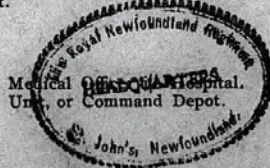
Station

ST. JOHN'S.

Date

6.6.19

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.



Station

Date

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. *1st Regt. Newfoundland*
2. Regt. No. *4512* 3. Rank. *plts*
4. Name *Bannister Philip*
(Surname) (Christian Names)
5. Age last birthday. *22*
6. Posted for duty on *April 20/18* at *St. Johns*
in category (or grade).....
7. Former Trade or Occupation } *Tradesman*
- 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regt. Nos.
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) Date of Discharge;
(b) Where (c) Cause of Discharge.
(c) Opinion of Court (d) Particulars of Pension or Gratuity (if any)

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 a (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."

11. Date of origin of disability. *nil*
12. Place of origin of disability. *nil*
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. *nil*

14. State whether the disabilities are
- | | | |
|--|---------------------|-------------------|
| | (a) attributable to | (b) aggravated by |
| (i.) Service during the present war | | |
| (ii.) Previous active service.. .. . | | |
| (iii.) Climate in pre-war service | <i>no</i> | |
| (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 ?
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

he complains of no possibility

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 ?
- (b) Change to United Kingdom ?
- Note—(b) is only applicable to soldiers invaded at Foreign Stations.*

Repatriation
[Signature]

Station *Hazely D. Camp*
 Date *30-4-19*

Medical Officer in charge *Capt R. H. M. C.*
[Signature]

* 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

Casualty Form - Active Service.

Regiment or Corps R. Newfoundland

Rank Pte. Surname Pannister Christian Name P

Religion 6. of E Age on Enlistment 21 years 0 months

Enlisted (a) 20/4/18 Terms of Service (a) Duration Service reckons from (a) 20/4/18

Date of promotion to present rank Date of appointment to lance rank

Extended { } Re-engaged { } Qualification (b)
or Corps Trade and Rate

Occupation Fisherman Signature of Officer. [Signature]

Report		* Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...		28 NOV 1918	
		Joined Batt.		5 JAN 1910	
		Arrived in UK		23/4/19	

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) Signaller, Shoeing-Smith, &c (17591.) Wt. W 1887-P 1124. 1,000,000. 6/18. D & S. Form B/103. (E. 1256.)

Next of Kin: Father: Pannister Charles: Port Preston: S. P. Bag: N. F. L. D.

July 16, 1919

#4512 Pte. Philip Bannister

Port Moxton, T.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 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.... *Philip* 2. Surname... *Bannister*.

3. Rank... *Pte* 4. Regtl. No... *4512*

5. Address in full to which future payments of gratuity are to be forwarded... *Port Buxton Trinity Bay*

6. Date of enlistment in the Regiment. ** 20-4-18*

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 Nfld, if so, give dates and particulars of such service. *Overseas*

12. Give total length of time which you served on active service, whether in Nfld. or Overseas. *From Apr. 20/18*

to June 7/19 1. ²

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.....

.....

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..... *No*

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?.....

19. Are you now serving in the Regt.?..... *No* If not give:- (a) Date of discharge..... *June 7/19* (b) Reason for discharge:.....

..... *Temporary* *Demobilization*

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....

France, Belgium & Germany - From Nov. 1918 to Apr. 1919

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..... *No*

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.

P Bannister

Signature of Applicant:

Place of Residence:

Declared before me at:

This

7th

day of

*Port Rexton N.B.
St. John's, Nfld*

19*19*....

John W. Carthy
J.P.

Signature of Barrister of the
Supreme Court, Stipendiary Magis-
trate, Notary Public, Justice of the
Peace, or Commissioner of affidavits.

POST DISCHARGE PAY.

Date paid

Paid
Soldier.

Paid
Dependent.

War Service
Gratuity.

Net amount
due

.....
.....
.....
.....
.....

Certified correct.

Paymaster

FORM K

No 6118



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Philip Bannister, Regl. No. 4572
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
 Dollars and Sixty Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons
 concerned, viz.:

Allotment begins 1-7-18.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
4446.	Mother	Mrs Clara Bannister	Port Rexton T. Bay.	60
Total Allotment, \$			60	

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, counter-signed by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

(Sig.) [Signature]
 Officer Commanding
B Company
Newfound Regt
June 26th 1918

(Sig.) Philip Bannister
 (Rank) Pte

7184

Post Reston
Dec 27th 119

Major Howley

Ray Charles

Dear Sir,

I would like you
to inform me why I was
short \$2.73 on my last
payment of gratuity.
Last payment was \$67.27.

Please Sir, reply as soon
as possible, if not I will
be obliged to try other channels.

Yours faithfully,
P. Philip Bannister (4512)

July 14	to pay	7000
Aug 5		7000
Sept 5		7000
Oct 5		6727
25/4/9	paym from 1/3	273
		<hr/>
		<u>28000</u>
		<hr/>

7148

November 17, 1919

Phillip Bannister,
PORT REWTON.

4512

Dear Sir:

With reference to your letter of recent date, I beg to inform you that War Service Gratuity has been paid in full, and is computed as follows:

25/4/'19, Acquittance Rolls	2.73
(France) 11s.3d.	70.00
July 14	70.00
Aug. 5	70.00
Sep. 5	70.00
Oct. 5	67.27
	<u>\$280.00</u>

Yours truly,

Lieut.
For Paymaster

Cheque mailed

JUL 4 - 1918

THE ROYAL NEWFOUNDLAND REGIMENT

To 4512 Pte. P. Bamister

June 15

To Paid for 1 Meal, while on leave -

70¢

St. J. H. Boland
40¢



OK
W. H. [unclear]

ACCOUNT NO.	8035
DATE	1918
BY	[Signature]
FOR	[Signature]
INITIALS	[Signature]

Ass't Adjutant
Depot The Royal Newfoundland Regiment
16/6/18 St. John's, Nfld.

This is to Certify that

Mr ⁴⁵¹² Bonester received
Breakfast

70^{cts}

Paid

Edmond Jones

June 13th - Centre Hotel

Chambersville

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.Regiment of Royal NewfoundlandNumber of Sheet oneSignature of O. C. Company Chas Watson (Lieut)

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay				
No.	<u>Bannister Philip</u>	Age on	<u>21</u> years <u>0</u> months	<u>fisherman</u>					
Joined	Date	Place and Date of Enlistment	<u>St Johns</u>	Religion					
Joined	Date	Period of	<u>20-4-18</u>	<u>C of S</u>					
Joined	Date	} with Colours <u>77</u> years. } with Reserve <u>365</u> years.	<u>St Johns</u>	Place of Birth					
Joined	Date		<u>St Johns</u>	<u>St Johns</u>					
Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<u>Demobilized St. Johns 5-7-19</u>					

To be carried over

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 15012 Rank Plt. Name Bannister P.
 Date of Enlistment 25-11-18 Address Port Regatta District Trinity
 Occupation Postman Classification for Discharge 17 Medical Category 1
 Recommendation S.M.B. Disability Rating

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
B 179c	B 120	M 93		

Date 6-6-19 in O. C. Discharge Depot. M. H.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable. 76.00
- (b) Clothing Supplied Amelbinst

Date 7-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R. 1551 to his home at Port Rexton and Release Certificate No. 24443 issued.

Date 7-6-19

J.A. Lawrence
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 5-7-19

Date 7-1-19

H. H. ...
Depot Paymaster.

Discharge approved for 21-6-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1
E 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
B 179c	B 120	M 93		

Handwritten notes: 1 Form B

Date 7-6-19

J.A. Lawrence
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 JUN 21 1919

R.H. Sait Capt.
O. C. Discharge Depot.

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

Date June 14/1919

R.H. Sait
O.C. Discharge Depot.

Reg. No. *4512* Rank *Plt* Name *Baumish, R.*
Attested Address *Post Reservoir*
Allotment Allottee
Date of Allotment Returned from Overseas *29.1.19.*
Returned on S.S. *Korsican* Cause *Discharge*

6619
21619

PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILISATION

Reg. No. 21512. Rank Pr. Name Barnister P.
Attested 19.4.18 Address Putney
Allotment 60 Allottee Mrs Clara Barnister (mother)
Date of Allotment July 1st 1918 Returned from Overseas D.
Embarked for Overseas Jan 22 1918 Cause _____

5 1/2 Vacc

H.K. 6-6-18 to 17-6-18

Returned from leave reported 16-6-18

2nd 6/18 1st Inoc 2nd Inoc 27/6/18. 3rd Inoc 11/7/18