



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5224 Name Arthur Bennett Corps 6 of C

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>Arthur Bennett</u> |
| 2. What is your full Address? | 2. <u>Innis Harbour</u> <u>Trinity Bay.</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>25</u> Years Months |
| 5. What is your Trade or Calling? | 5. <u>Laborer</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, Arthur Bennett 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.

M
20-5-14

Arthur Bennett SIGNATURE OF RECRUIT.
W. C. Campbell Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Arthur Bennett 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 answered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at Innis Harbour on this 20th day of May 1914.

Signature of Attesting Officer W. C. Campbell

†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 May 20th 1914 } Approving Officer.
Place Innis Harbour }

† 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.

5227

Name Arthur Bennett
 Apparent age 25 years — months. Height 5 feet 2 3/4 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 Hannah Bennett
Green Harbor S.B. | Relationship Mother

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. Pny | | Signature of Officers certifying correctness of entries |
|---|----------------|--|-----------|-------|--|------|--|------|---|
| | | | | | Years | Days | Years | Days | |
| Service towards <u>Army</u> engagement reckons from <u>20-5-18</u> | | | | | | | | | |
| Joined at <u>St. John's</u> on <u>20-19-18</u> | | | | | | | | | |
| <u>Discharged Aug 11 1919</u> | | | | | | | | | |
| <u>Embarked St. John's S.S. Columella to Halifax N.S. 22-7-18</u> | | | | | | | | | |
| <u>To Newfoundland for demobilization 24-6-19</u> | | | | | | | | | |
| <u>Arrived Newfoundland 1-7-19</u> | | | | | | | | | |
| <u>Demobilization St. John's 4-8-19</u> | | | | | | | | | |
| Total Service forfeited as above..... | | | | | | | | | |
| Total Service towards Engagement to <u>4-8-1919</u> (date of discharge) <u>1</u> years <u>77</u> days | | | | | | | | | |
| Pensions " " " " " " " " " " " " | | | | | | | | | |

Bennett, A

5227

Ray Sept.

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

MEDICAL HISTORY

Surname Bennett OF Arthur Christian Name Arthur

Table I.—GENERAL TABLE.

Birthplace:—Parish Greens B.P. County Nfld

| | SPECIAL RESERVE | | REGULAR ARMY | |
|----------------------|-----------------|------------------------------------|--------------|--------|
| | on | day of | on | day of |
| Examined | 20 | May | 1918 | |
| Declared Age | 25 | years | | |
| Trade or Occupation | Labourer | | | |
| Height | 5 | feet 2 ³ / ₄ | | |
| Weight | | 132 | | |
| Chest Measurement | 35 | | | |
| | 3 | | | |
| Physical Development | | | | |

| Vaccination Marks | Right | Left | Right | Left |
|-------------------|--------|------|-------|------|
| | Number | | | |

| | | | | |
|-----------------|--------------|--------------|---------|---------|
| When Vaccinated | | | | |
| Vision | R.E.—V= 6/10 | L.E.—V= 6/10 | R.E.—V= | L.E.—V= |

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by (Signature) Lamine Patterson
 (Rank) Major Medical Officer.

Enlisted at S. Johns on 20 day of May 1918

Joined on Enlistment... Regiment 5227
Nfld Regt

Transferred to...

Became non-effective by on day of 191 on day of 191

(Signature)

(Rank)

FORM K

No 6218



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Arthur Bennett, Regl. No. 5227

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 July 1st

| Identity Certificate No. | Whether Wife, Child, other Relative or Friend | NAME (in full) | ADDRESS | AMOUNT (each person) |
|--------------------------|---|--------------------|---------------------------|----------------------|
| 5227 4626 | Wife | Mr Steffen Bennett | Green Harbour Hunt Bay | 60 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total Allotment, \$ | | | | 60 |

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

(Sig.) H Laws Lt
 Officer Commanding
D. Company
June 27 1918

(Sig.) Arthur Bennett
 (Rank) Plt

C.R. 5227

extract from daily orders Part II Royal Newfoundland Regt
Depot St. John's dated Aug. 11th 1919.

The discharge of the undernoted on demobilization has been
COMPLETED by officer i/c records from noted date
4-8-19.

5227, Pte. A. Bennett.

C.R. 5227

Extract from Daily Orders Part II Royal
Newfoundland Regiment dated July 11th 1919.
Depot St. John's.

The discharge of the undernoted on demob-
ilization has been APPROVED by O.C. Discharge
Depot with effect from 21/7/19.

5227, Pte. A. Bennett.

C.R. 5227

Extract from Daily Orders part 11, from Unit The Royal Hfld.
Regt. St. John's, dated May 21, 1918

#5227 Pte. A Bennett

Attested for General Service with the Royal Hfld. Regt.
from 20.5.18 to report 24.5.18

August 4th 1919.

#5227, Pte. A. Bennett,
Green's Harbor, Trinity.

Dear Sir:

Enclosed please find Discharge Certificate
3308.

Yours truly,

Capt. & Paymaster.

RS/.

August 11th 1919.

Mr. A. Bennett,
Green's Mr. 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 war Ser-
vice Gratuity.

Yours truly,

Capt. &
Paymaster.

HS/.

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... *Arthur* 2. Surname... *Bennett*
3. Rank... *Pvt* 4. Regtl. No. *4227*
5. Address in full to which future payments of gratuity are to be forwarded... *Green Harbor, S.B.*
6. Date of enlistment in the Regiment... *Nov. 20, 1918*
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... *no*
9. Address in full of such dependents... *no*
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *no*
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... *Fourteen months*
- 1.

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

.....
.....

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?

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?

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

19. Are you now serving in the Res? *no* If not give - (a) date of discharge *July 18/19* (b) Reason for discharge *Remobilization*

.....

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. *England*

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.

(Witness) Boyer

Signature of Applicant: ^{His} Arthur X Bennett
_{mark}

Place of Residence: Greensboro, N.C.

Declared before me at: St. Johns

This 7 day of June 1919.....

Signature of Barrister of the
Supreme Court, Stipendiary Magistrate,
Notary Public, Justice of the Peace,
or Commissioner of affidavits. John M. Corby

POST DISCHARGE PAY.

| Date paid | Paid Soldier. | Paid Dependent. | War Service Gratuity. | Net amount due |
|--------------------|---------------|-----------------|-----------------------|----------------|
| | | | | |
| | | | | |
| | | | | |
| Certified correct. | | | Paymaster | |

RECEIVED

C.R. 5227

Extract from Daily Orders part 11, 8th Unit The Royal
Nfld. Reg. St. John's, dated July 25, 1918.

The following man embarked by steamer on H.M.S.
"Columbellia" July 25, 1918.

#5227 Pte. Arthur Bennett.

C.R. 5227

Extract from Daily Orders Part VI Unit The Royal Field Artillery
St. John's, July 31st 1919.

5227 Pte. A. Bennett

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

A. Bennett

C.R. 5227

11/10



Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S, Nfld.

Fold Here

OCT 15 1921.

The accompanying ~~Victory Medal and/or~~ British War Medal

is/are forwarded herewith to

Arthur Bennett

in respect of his service as No. 5227 Rank Pte.

Name A. Bennett

Royal Nfld. Regt.
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received October 21

Signature _____

Date 19-21

Address Grand Harbour Yarmouth Bay

[P.T.O.]

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Number of Sheet 7

Regiment of Royal Newfoundland

Signature of O. C. Company R. O. Dicks Lieut

| | | | | | |
|----------------------------|-----------------------------|------------------------------|---|-----------------------|---|
| Regimental Number and Name | | Enlistment | | Trade | Good Conduct Badges, Service pay or proficiency pay |
| No. | <u>5227 Bennett, Arthur</u> | Age on | <u>25</u> years <u> </u> months | <u>Labourer</u> | |
| Joined | Date | Place and Date of Enlistment | <u>St Johns</u> <u>20.5.18</u> | Religion | |
| Joined | Date | | | <u>C. P. C.</u> | |
| Joined | Date | Period of | } with Colours <u>17</u> years. } with Reserve <u>3 1/2</u> years. | Place of Birth | |
| Joined | Date | | | <u>Green Mt. T.P.</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 |
|-------|-----------------|------|-----------------------|---------|--------------------|--------------------|---|-----------------|---------|
|-------|-----------------|------|-----------------------|---------|--------------------|--------------------|---|-----------------|---------|

Demobilized St Johns 4 ⁵/₁₉

To be carried over

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.

Signature of Man.

Reg. No. 5227

J. H. Knowlton
Signature of the Vocational Officer or his Representative.

Place

St Johns a Bennett

Date

7-7-19.

191

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 2227 Rank Plt Name Bennett A
 Date of Enlistment 20-5-18 Address Greens St District Trinity
 Occupation Laboured Classification for Discharge F Medical Category A1
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

| | | | | | | |
|-----------|--------|--------|---|-----------|---------|---|
| N. F. 136 | 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 4-7-19

L O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in 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 £60

(b) Clothing Supplied _____

Date 7-7-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 112207 to his home at Greens Hill and Release Certificate No. 3211 issued.

Date 7-7-19

J.A. Knowlton
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 4-5-19

Date 7-7-19

J.M. [unclear]
Depot Paymaster.

Discharged approved for 21-7-19

Forwarded with following documents to O.C. Discharge Depot.

| | | | | | |
|-----------|--------|--------|---|------------|--------|
| N.F. P/36 | B 268 | B 121 | 1 | N.F. Med | D.F. 1 |
| B 178 | W 3494 | B 122 | | Board 1st. | " 2 |
| B 178a | D 400A | B 1915 | 1 | 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 |
| B179c | B 120 | M 93 | | | |

2 Form B

Date 7-7-19

J.A. Knowlton
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service GratuityDate JUL 21 1919

J.R. [unclear] Capt
for O. C. Discharge Depot.

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

Date

The Royal Newfoundland Regiment

Class for Demobilization: 76

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 11.7.19

Regimental No. 5227

Name Bennett Arthur Rank Plt

Address Cross St J Bay

Present Medical Category A7

Recommended for: (a) Immediate discharge
(b) ~~Standard Medical Board~~

Members of Board

R.H. Last Major
O.C. Discharge Depot.

Hastings
Senior Medical Officer

Leo Burden
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 *Arthur Bennett.*

Regiment from which discharged *Royal Newfoundland*

Regimental number *5227.*

Intended address *Greens St. T. B.*

Height on discharge *5* feet *6*.

Color of hair on discharge *Black*

Complexion *Fair*

Color of eyes *Brown.*

Descriptive Marks *—*

Figure on discharge *medium*

Christian name of Father *Thomas.*

Christian name of Mother *Annal.*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Gloucester Bay, 22nd June, 1892*

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) *Arthur Bennett*

46-
(Rank)

Station *St John's*

Date *4-7-19*

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.

Station

Date

1227
Demobilization Form 3

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5227 Rank Private Name Benjamin A. [unclear]
 Date of Enlistment 20-5-18 Address Greens St. District Trinity
 Occupation Labourer Classification for Discharge F Medical Category H.I.
 Recommendation S.M.B. _____ Disability Rating _____
 Passed to Demobilization Officer with following documents:—

| | | | | |
|----------|--------|--------|------------|--------|
| N.F. P36 | B 268 | B 121 | N.F. Med | D.F. 1 |
| B 178 | W 3494 | B 122 | Board Ist. | " 2 |
| B 178a | D 400A | B 1915 | do 2nd | " 3 |
| B 179 | D 400B | Form L | do 3rd | " 4 |
| B 179a | D 100C | Form K | do 4th | " 5 |
| B 179b | B 103 | ME 2 | " 6 | " 6 |
| B 178c | B 120 | M 93 | | |

Date 4-7-19 O. C. Discharge Depot. [Signature]

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in 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 £60.00
- (b) Clothing Supplied [Signature]

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

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. B2209 to his home at Greens Hill and Release Certificate No. 5211 issued.

Date 7-7-19 *J.A. Knowlton*
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 7-7-19

Date 7-7-19 *J.A. Knowlton*
Depot Paymaster

Discharge approved for 21-7-19
Forwarded with following documents to O.C. Discharge Depot.

| | | | | |
|-----------|--------|--------|-----------|--------|
| 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 |
| B179c | B 120 | M 93 | | |

2 Form B

Date 7-7-19 *J.A. Knowlton*
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date 1111 2-1-1919 *H.R. Cooper Capt.*
for O. C. Discharge Depot.

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

Date July 28, 1919 *B.L.A.*

Reg. No. *1227* Rank *Plt* Name *Penwell A.*

Attested Address *Green St.*

Allotment Allottee

Date of Allotment Returned from Overseas *JUL 1 1919*

Returned on S.S. *Campania* Cause *Discharge*

47 19
21 7 19

PASSED TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED ON DEMOBILISATION.

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 N. F. L. S.* 7. Former Trade } *Sabrier*
or Occupation }
2. Regtl. No. *1227* 3. Rank. *P. 15* 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps ;
(b) with Regtl. Nos.
4. Name *Bennett* *Arthur*
(Surname) (Christian Names)
5. Age last birthday. *26*
6. Posted for duty on at
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.

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."
nil
11. Date of origin of disability.
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, etc., 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 complaints of no 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?
- (b) Change to United Kingdom?

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

Refutation

W.E. Greenier, Capt. RMC
 Medical Officer in charge of case.

Station *Haysbury, Essex.*
 Date *1.7.44*

* 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

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 N.F. Co.* 7. Former Trade or Occupation } *Labourer*
2. Regtl. No. *5227* 3. Rank. *Plt.* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Bennett Arthur* (a) Former Regts. or Corps; with Regtl. Nos.
- (Surname) (Christian Names)
5. Age last birthday. *26*
6. Posted for duty on..... at..... 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;
9. If a Court of Inquiry was held on an injury state:— (c) Cause of Discharge.
- (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? } *h*

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.)

the complaint of no 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?

Re-patriation

(b) Change to United Kingdom?

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

W. E. Proctor Capt R.A.M.C.
Medical Officer in charge of case.

Station *Harley Road*

Date *28-3-19*

* 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

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5227 Rank. Plc Name Bennett R
 Intended place of residence. Greens Hill Turin

2. Occupation Labourer
 Classification of soldier. E Medical Category A 1

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 7 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 7-1919

A. Bennett
 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 JUL 7-1919

A. Bennett
 Signature of soldier

[Signature]
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service. 20-5-18 No. of days on Military
 Discharged from service. 21-7-19 Plus 14 days Service. 442

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 21 1919

[Signature]
 Officer in Charge
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

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

Place, ST. JOHN'S

Date August 4/1919

[Signature]
 Officer in Charge
 The Royal Newfoundland Regiment

2021 29/3208

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DEPARTMENT OF VETERANS AFFAIRS
BOARD
WAR VETERANS' ALLOWANCE ~~DISTRICT OFFICE~~

November 26, 1952.
Address Transportation Building

Ottawa, Ontario



Dept. of Veterans Affairs
War Service Records
Referred To.....
NOV 28 1952 MARK YOUR REPLY:
File No..... For attention of: O. D. Law
Changed To.....

Re: BENNETT Arthur Regt. No. 5227
(Surname) (Christian Names)

Veteran is stated to have served in the following units in:

W.W. I ROY, Nfld. REGT.

W.W. II

S.A. WAR

Dear Sir:

Board

To enable this War Veterans' Allowance ~~District Office~~ to determine the eligibility of the above named, will you kindly furnish the following particulars concerning his service. **2 December, 1952.**

DVA. 95-9-4 (WSR 5)

- Theatre of Service in W.W. I Newfoundland and United Kingdom
(Embarked for U.K.: 22 July, 1918)
W.W. II
S.A. WAR
- If service in S.A. WAR: (a) Port of disembarkation.....
(b) Date of disembarkation.....
Day Month Year
- Date and place of all enlistments. 20 May, 1918 - St. John's, Nfld.
- Date of all discharges and reason. 4 August, 1919 - Demobilization
- Rank on discharge. Private
- Date and place of birth as per attestation paper. 22 June, 1892 - Placentia Bay, Nfld.
- Marital status: If married, name in full of wife. Single
- Any prior military service. No
- Decorations, if any. Nil

for use
H.M. Jackson,
Director of War Service Records.

5227. Arthur Bennett ✓

1- Nfld. U.K. Remb. for U.K. 22 July 1918.

2- NA

3- 20 May 1918. St. John's. Nfld ✓

4- 4 August 1919. Remob. ✓

5- Str. ✓

6- 22 June 1892. Placentia Bay. Nfld. ✓

7- Single ✓

8- 700 ✓

9- 700 ✓

✓
804