



FIRST NEWFOUNDLAND REGIMENT 4367

ATTESTATION OF

No. H367 Name Michael W Bennett ~~Corps~~ R.C.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>Michael W. Bennett</u> |
| 2. What is your full Address? | 2. <u>St Georges</u>
<u>Bd. St. Georges</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>19</u> Years <u>.....</u> Months |
| 5. What is your Trade or Calling? | 5. <u>fishermans</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, Michael W 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.

Michael W Bennett SIGNATURE OF RECRUIT.
John Pittman Signature of Witness.

H 25/3/18

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Michael W 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 entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St Johns on this 25th day of March 1918

Signature of Attesting Officer W. H. ...

† 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.....191..... } 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

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

Name Michael W Bennett
 Apparent age 19 years — months. Height 5 feet 6 inches
 Chest Measurement { Girth when fully expanded 37 inches
 Range of expansion 5 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Peter W Bennett St George Bay St George | 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>25-3-1918</u>									
Joined at <u>St John's</u> on <u>March 25/18</u>									
<u>Discharged July 16, 1919</u>									
<u>Embarked St John's train to Halifax N.S. 11/18</u>									
<u>Embarked for Black 26-10-1918</u>									
<u>Joined 10th. Innes 3-11-1918</u>									
<u>Referred to hospital for demobilization 22-5-1919</u>									
<u>Arrived home 1-6-1919</u>									
<u>Demobilization St John's 16/1919</u>									
Total Service forfeited as above									

Total Service towards Engagement to 16-7-1919 (date of discharge) 1 years 114 days
 Pensions

No. 4867 Name *Bennett M.* Sqn., Batty., or Company } *A* Corps **ROYAL NEWFOUNDLAND REG.** Date of enlistment } *5/20/18* G.O. Badges } Service or Proficiency Pay }
 Date of last entry in Company Conduct Sheet } No. and date of last drunk } Period not reckoning towards freedom from extra fine } Sheet No. *One* Signature O.C. Company, etc. } *J. M. Bennett* Character }

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
<i>Field</i>	<i>11/14/18</i>	<i>Pvt</i>		<i>Deficient of iron gations and ground sheet</i>	<i>Capt. Mores</i>	<i>Admonished pay for same</i>	<i>16/11/18</i>	<i>Lt Col. Motters</i>	<i>B7</i>
<i>"</i>	<i>12/10/18</i>	<i>"</i>		<i>Leaving bed while on sentry</i>	<i>Capt. Rose</i>	<i>14 days I.P. No 1.</i>	<i>11/10/19</i>	<i>Major Leonard</i>	
<i>"</i>	<i>2/27/19</i>	<i>"</i>		<i>Walked on parade</i>	<i>Capt. Power</i>	<i>8 days C.C.</i>	<i>25/11/19</i>	<i>Lt Col. Motters</i>	<i>B7</i>
<i>Quon</i>	<i>12/24/19</i>	<i>"</i>		<i>Deficient of kit.</i>	<i>Lt M. Woodles</i>	<i>Pay for same.</i>	<i>15/12/19</i>	<i>Major Leonard</i>	<i>Kit value 9^d</i>

Army Form B. 122

C.R. 4365

Extract from Daily Orders Part 11 Unit The Royal Wfld.
Regt. By Lt. Col. T.O. Mathias, D.S.O. Commanding 1st
Bn. 3-11-18.

The following joined the Bn. 3-11-18.

4367 Pte. M. Bennett.

A Coy.

Bennett, M.

C.R. 4367

P.R.C.

FORM K



N^o 4291 a



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Michael Bennett, Regl. No. 4367

hereby agree, until further notification by me, and in similar official form to make an Allotment of
 Dollars and Fifty Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{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 1st June 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
4058	Father	Peter H Bennett	St Georges Bay St George	
			Total Allotment, \$	509

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
[Signature]
 may 29th 1918

(Sig.) Michael Bennett
 (Rank) Pte

FORM K

No 4291



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Michael Bennett, Regt. No. 4367

hereby agree, until further notification by me and in similar official form to make an Allotment of _____ Dollars and Fifty Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{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 1st June 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
4058	Father	Peter H Bennett	St Georges Bay St Georges	
			Total Allotment, \$	<u>50</u>

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.) [Signature]

Officer Commanding
B Company

[Signature]
 May 29th 1918

(S Michael Bennett

(Rank) Pte

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* 7. Former Trade or Occupation } *Fisherman*
2. Regtl. No. *4967* 3. Rank... *Plt* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Burnett M.* (Surname) (Christian Names) (a) Former Regts. or Corps; with Regtl. Nos.
5. Age last birthday... *20*
6. Posted for duty on *25.3.17.* at *St. John's* 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. 179B (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? } *na*

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.)

The complainant of no disability

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 invaded at Foreign Stations.

Repatiation
W. E. P. ...
 Medical Officer in charge of case.

Station *Hazelrigg Camp.*

Date *29. 11. 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

TO, - The Chief Paymaster,
Royal Newfoundland Regiment,
58 Victoria Street,
London, S.W.

Sir:-

Please charge the amounts set opposite my name to my account and pay it to the N.W.C.A. "Prisoners of War Fund" in quarterly instalments for the period of one year, commencing on 1st July 1918.

Regtl. No.	Rank.	Name	Amount	Signature.
1367	Pte.	Bennett M.	£250	M. Bennett +

I have the honour to be, Sir,
~~for the Committee,~~
Your obedient servant.

Date

July 1/18

M. Bennett

Bennett, L

4367

Ray Sept.

July 17, 1919

#4367 Pte. Michael Bennett,

St. George's.

Dear Sir:-

Please find enclosed Discharge Certificate #3059.

Yours truly

Captain & Paymaster

The Royal Newfoundland Regiment

Class for Demobilization: 7
6

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 30.6.19

Regimental No. 4367

Name Bennett, Michael Rank PLS

Address St. Georges

Present Medical Category A1

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

Members of Board {

RH Last Major
O.C. Discharge Depot.

Watson
Senior Medical Officer

Seabrook
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 1367 Rank Plt Name Bennett M
 Date of Enlistment 25-3-18 Address St. Georges District St. John's
 Occupation Fisherman Classification for Discharge E Medical Category 4
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. 1136	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 30-6-19 P.O. C. Discharge Depot. St. John's

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Mike Bennett

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$160.00

(b) Clothing Supplied None

Date 30-6-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. ¹²⁰⁰⁷ to his home at St. Georges and Release Certificate No. 3081 issued.

Date

30-6-19

J.A. Snowball
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 16-7-19

Date

30-6-19

H. M. H.
Depot Paymaster.

Discharged approved for

2-7-19

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

N.F. 136	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

30-6-19

J.A. Snowball
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 Gratuity**JUL 2 1919**

Date

R.H. Sait MAJOR
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.

Pte Milse Bennett

Signature of Man.

J. A. Snowcroft

Signature of the Vocational Officer or his Representative.

Reg. No. 4367.

Place

ST. JOHN'S

Date

JUN 28 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 Bennett OF Christian Name Michael W.

Table I.—GENERAL TABLE.

Birthplace:—Parish S. Georges County Newfoundland

	<u>SPECIAL RESERVE.</u>		<u>REGULAR ARMY.</u>	
	on	at	on	at
Examined	25	St Johns	day of	191
Declared Age	19	years	years	days
Trade or Occupation	Fisherman			
Height	5	6	feet	inches
Weight	124			lbs.
Chest Measurement {	37	inches		inches
	5	inches		inches
Physical Development				
Vaccination Marks {	Right	Left	Right	Left
	/	/		
When Vaccinated				
Vision	R.E.—V=	6/6	R.E.—V=	
	L.E.—V=	6/6	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)	<u>Lammie Paterson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.			Medical Officer.
Enlisted	at	St Johns	at	
	on	25 th	on	day of
		March		191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>Royal Field</u>	<u>4267</u>		
	<u>Regt.</u>			
Transferred to				
Because non-effective by	on	day of	on	day of
(Signature)		191		191
(Rank)				

tal or to the sick list in case of Warrant Officers treated in quarters.

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

Signature of Medical Officer

Discharged to duty.

G. S. P. Wicaw

CAPT., R. A. M. C.

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 New Brunswick* 7. Former Trade or Occupation } *Fisherman*
2. Regtl. No. *267* 3. Rank. *Pte* 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regtl. Nos.
4. Name *Bennett M.*
(Surname) (Christian Names)
5. Age last birthday... *20*...
6. Posted for duty on *25-3-17* at *St. John's*...
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 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."
11. Date of origin of disability. *me*
12. Place of origin of disability. *me*
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. *me*

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 ? }

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.)

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.

He explains you disabled

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

no

17. If not, was an operation advised and declined ?

no

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 ?

no

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 ?

no

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.

Preparation

eye to the service

Capt Name

Medical Officer in charge of case.

Station *Stazely Down*

Date *29/11/19*

* 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

July 21, 1919

4367 Pte. Michael Bennett,
St. George's.

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... *Michael*..... 2. Surname... *Bennett*.....
3. Rank... *Private*..... 4. Regtl. No. *4367*.....
5. Address in full to which future payments of gratuity are to be forwarded... *St. George's*.....
6. Date of enlistment in the Regiment. *25th March 1918*.....
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. *None*.....
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? *None*.....
11. Were you on active service only in Nfld. If so, give dates and particulars of such service... *France Belgium Germany*.....
12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *15 months & 8 days*.....
..... 1. $\frac{3}{4}$

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?
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?..... If not give:- (a) Date of discharge *30th June 1919* (b) Reason for discharge *Demob*

.....

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*

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.

Signature of Applicant: *Pvt Mike Bennett*
 Place of Residence: *St George*
 Declared before me at: *St Johns*
 This *2nd* day of *June* 19...*19*.

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

Wm James JP

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



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Michael Bennett, Regl. No. 4367

hereby agree, until further notification by me, and in similar official form to make an Allotment of Fifty Dollars and Fifty Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person 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 1st June 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
4058	Father	Peter H. Bennett	St Georges Bay St George	
Total Allotment, \$				50 ⁰⁰

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.) [Signature]
Officer Commanding
B Company
[Signature]
May 29th 1918

(Sig.) Michael Bennett
(Rank) Pte



NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. Sent by W Rec'd by Stephenville Check 13 No. 65

Place from Major Carby

To St Johns

OCT 13 1919

Is private Michael
 Bennett free to marry
 No 4367.

P. F. Adams.

16
 4367

ST. JOHN'S, *June 30th 1919*

Royal Newfoundland Regiment.

Billeting Account,

To *H. M. Bennett*

Billeting Soldiers as undermentioned

from *June 1st 1919* to *June 28th 1919*

4367. H. M. Bennett 28 80

BVM

ACCOUNT	<i>25738</i>
CH. NO.	<i>25738</i>
IND. LEDGER	
PAY LEDGER	
GR. LEDGER	<i>80</i>

Certified correct for \$

Mike Bennett

R-J

Billeting Officer.

Mike Bennett

St. John's, APR 18 1848
(Date)

1st Newfoundland Regiment
BILLETING ACCOUNT

To Mrs P. Brennan
Waldegrave St

Billeting soldiers as undermentioned

from Apr 1st / 48 to Apr 11th / 48

Mrs. P. Brennan

4367 Pte. M. Bennett 9 60

R. M. Messing
1 week. 4 days
2831

R. M. Bennett
Certified correct for \$ 9.60

Stamp: APR 18 1848

R. J. James Street
Billeting Officer

Casualty Form - Active Service.

Regiment or Corps 21st ROYAL NEWFOUNDLAND REGT.Rank PLC Surname Bennett Christian Name Michael W.Religion R.C. Age on Enlistment 19 years — monthsEnlisted (a) 25/3/18 Terms of Service (a) — Service reckons from (a) 25/3/18Date of promotion to present rank — Date of appointment to lance rank —Extended S Re-engaged — Qualification (b) —
or Corps Trade and rate —Occupation Fisherman Signature of Officer J. M. Evers

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.218, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked ...			
		Joined Battalion		3 Nov 1918	
		Arrived in UK		26/4/19	

(c) In the case of a man who has re-engaged for, or appointed into, Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

Next of Kin Mr. J. Bennett
 Father St. Georges Bay, St. George Newfoundland.

NEWFOUNDLAND POSTAL TELEGRAPHS.**CABLE CONNECTION WITH ALL THE WORLD.****ALL MESSAGES SENT ARE SUBJECT TO THE FOLLOWING CONDITIONS:**

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

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

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

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 _____ **Paymaster** _____ Address _____

Line Number	Rcd	By	Sent	By	Check

Dated _____ Dated _____

To _____ **P. F. Adams,** _____**Stephenville.** _____

**Our records show no impediment to marriage of No 4367
Bennett**

**Major
Paymaster**



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 *Michael Bennett*
Regiment from which discharged **Royal Newfoundland**
Regimental number *4367*
Intended address *St. Georges*
Height on discharge *5* Feet *7*
Color of hair on discharge *Dark*
Complexion *Dark*
Color of eyes *Gray*
Descriptive Marks _____
Figure on discharge *Medium*
Christian name of Father *Peter*
Christian name of Mother *Mary (Deed)*
Wife's maiden name in full _____
Date and place of marriage _____
Christian names of children _____
Place and date of soldier's birth *St. Georges. N-4 - age. 20 - 1899.*
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) *Pte Mitchell Bennett* (Rank) *Pte*

Station *St. Johns* Date *June 27-6-19*

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

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

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4367 Rank PL Name Bennett PA
 Intended place of residence St Georges
2. Occupation Husband
 Classification of soldier F Medical Category A^L
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 JUN 30 1919
- J. Bennett*
 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 30-6-19
- Pt. Mike Bennett*
 Signature of soldier
M. Blouin
 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 30-6-19
- Mike Bennett*
 Signature of soldier
James O'Newman
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 25-3-18 No. of days on Military
 Discharged from service 2-9-19 Plus 14 days Service 479

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 2 1919
- R. H. Sant Major*
 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 July 16/1919
- M. Bowley, Capt*
 Officer in Charge
 The Royal Newfoundland Regiment

A.F. B2079/4367

C.R. 4367

Extra et from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, July 19th, 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records with effect from 16-7-19

4367 Pte. Ml. Bennett.

C.R. 4367

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, July 5th, 1919.

The discharge ~~from~~ of the undernoted on demobilization has
been APPROVED by O.C. Discharge Depot with effect from 2-7-19.

4367 Pte. M.^Dennett.

C.R. 4367

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.

#4367 Pte. M. Bennett.

C.R. 4367

Extract from Memorial Roll ~~subscribed~~ re-inforcement Draft No.55 from
2nd Batta, Royal Newfoundland Regiment, Hazelley Down Camp, Winchester,
to 1st Batta, Royal Newfoundland Regiment, D.S.F. Embarked Folkestone
26/10/19.

4367 Pte. Bennett, M.W.

C.R. 4367

Extract from Daily Orders Part 11. from Unit The Royal Wfla.
Regiment, St. John's, dated June 14th 1918.

4367 Pte M. Bennett

Embarked for Overseas with draft 11-6-18.

C.R. 4367

Extract of Daily Orders part 11, from Unit The Royal
Nfld. Regt. dated March 26, 1918.

#4367 Pte. M. Bennett.

Attested for General Service with effect from 25/3/18.

Reg. No. *4367* Rank *Pte.* Name *Bennett, Michael*
Address *A Georges*
Allotment Allottee
Date of allotment Returned from Overseas *27.5.19*
Returned on S.S. *Corsican* Cause *Discharge*

30.6.19
27.9

PASSED TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED ON DEMOBILISATION

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4367 Rank Act Name Bennett, M
 Date of Enlistment 25-3-18 Address Algergas District Alger
 Occupation Fisherman Classification for Discharge 15 Medical Category A1
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. 1/36	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 30-6-19 O. C. Discharge Depot. M. Bennett

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

M. Bennett

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable £10.00

(b) Clothing Supplied know cap

Date 30-6-19

O i.c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 12007 to his home at George and Release Certificate No. 3081 issued.

Date 30-6-19

J.A. Snowball
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 16-7-19

Date 30-6-19

H. H. H.
Depot Paymaster.

Discharge approved for 2-7-19

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

N.F. P36	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 30-6-19

J.A. Snowball
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 Grant

Date JUL 2 1919

O. C. Discharge Depot.

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

Date July 15, 1919

J. McLeath
for Records