



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4673 Name R. Baddiscombe Corps R.F.C.

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Richard Baddiscombe
2. What is your full Address? 2. 57 Bark Road
St. John's
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. Tractor man
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, Richard Baddiscombe do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

Richard Baddiscombe SIGNATURE OF RECRUIT.
James Pittman Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Richard Baddiscombe do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 23 day of April 1918

Signature of Attesting Officer James Pittman

†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
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)

No. 4673-15-5-18

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Richard Baddiscomb

Apparent age _____ years _____ months. Height 5 feet 7 1/2 inches

Chest Measurement { Girth when fully expanded 38 inches
 Range of expansion 5 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Baddiscomb
Sarby Road, [unclear] 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 _____									
Joined at _____ on _____									
Total Service forfeited as above.....									
Total Service towards Engagement to _____ [date of discharge] _____ years _____ days									
" " Pensions " _____ [" "] _____ " _____ "									



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4623 Name R. Paddiscomb Corps C.R.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>Richard Paddiscomb</u> |
| 2. What is your full Address? | 2. <u>101 Bay Road</u>
<u>St. Johns</u> |
| 3. Are you a British Subject? | 3. <u>No</u> |
| 4. What is your age? | 4. <u>21</u> Years <u>0</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Truckman</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> |

Richard Paddiscomb do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

Richard Paddiscomb SIGNATURE OF RECRUIT.

James P. Mann Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

Richard Paddiscomb do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 13 day of April 1918.

Signature of Attesting Officer James P. Mann

†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

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).....

To be sent 15-5-18

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Richard Baddison
 Apparent age years months. Height 5 feet 7 1/2 inches
 Chest Measurement { Girth when fully expanded 38 inches
 Range of expansion inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Baddison
20 Bay Road 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>23-4-1918</u>									
Joined at <u>St. John's</u> on <u>April 23-1918</u>									
<u>& Discharged June 29/19</u>									
<u>Report for duty 15-5-18</u>									
<u>Embarked St. John's train to Halifax N.S. 11-6-18</u>									
<u>Embarked for N.S. 26-10-18</u>									
<u>Disembarked France 26-10-18</u>									
<u>Joined Battalion in the field 3-11-18</u>									
<u>Transferred from Queen 2-7-1919</u>									
<u>Arrived United States 23-4-1919</u>									
<u>To the establishment for demobilization 22-5-1919</u>									
<u>Arrived to establishment 18-6-1919</u>									
Total Service forfeited as above..... <u>Demobilization St. John's 29-6-1919</u>									
Total Service towards Engagement to <u>29-6-1919</u> (date of discharge) <u>1</u> years <u>46</u> days									
Pensions									

C.R. 4623

Extract from Daily Orders Part 11 Unit The Royal Hfld.
Regt. St. John's, June 29-6-19.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from 29-6-19.

4623 Pte. Rd. Biddiscombe.

C.R.

4623

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

The discharge of the undernoted on demobilization has been
APPROVED by O.C. Dis charge Depot with effect from 15-6-19.

4623 Pte. R. Biddiscombe.

C.R. 4623

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

Date June 18th 1919.

4623, Pte. R. Biddiscombe.

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

RE "Corsican"

C.R. 4623

Extract from Nominal Roll from 1st. Battalion
Royal Newfoundland Regiment dated 30-4-19.

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

#4623 Pte. R. Biddiscombe.

C.R. 4623

Extract from Nominal Roll re-inforcement Draft No.55 Embarked Folkeston
26/10/18 from 2nd Battn. Royal Newfoundland Regiment Hazeley Down Camp,
Winchester, to 1st Battn. Royal Newfoundland Regiment B.E.F.

4623 Pte.Biddiscombe, R

MP.

C.R. 4623

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

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

4623 Pte. R. Biddiscomb.

B Coy.

CR 4623

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

4623 Pte R. Biddiscombe

Embarked for Overseas with draft 11-6-18.

C.R. 4623

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. St. John's, dated May 15, 1918

#4623 Pte. R. Biddiscombe

Attested for report later. Reported to Headquarters for
duty from this date.

C.R. 4623

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

#4623 Pte. Richard Biddiscombe

Attested for General Service with the Royal Wfld. Regt.
from 25/4/18. To report 15/5/18.

R. Biddiscombe

C.R. 4623

SRD

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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 } *Farmer*
2. Regtl. No. *4623* 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 *Widcombe R.*
(Surname) (Christian Names)
5. Age last birthday. *22*
6. Posted for duty on. *20-4-18* at. *S. S. 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. *18*
12. Place of origin of disability. *Ul*
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. *dit*

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? } *Ma*

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.)

he complains of no disability

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

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
Major OADM S

Station *Hazley Down*
 Date *30/10/19*

Sgt J. H. [unclear] Capt. [unclear]
J. H. [unclear] 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

FORM K



Nº 4334 a



1ST. NEWFOUNDLAND REGIMENT


I, Richard Biddiscombe ALLOTMENTS, Regl. No. 4623

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 1st June 1918.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>4107</u>	<u>Father</u>	<u>John Biddiscombe</u>	<u>Tor Bay Road</u> <u>St John's</u>	
Total Allotment, \$				<u>60⁰⁰</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
St John's  Company
May 29th 1918

(Sig.) Richard Biddiscombe
(Rank) Pte

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
1623	Pte	Beddiscombe R	£ 50	R Beddiscombe

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

Date July 1/18

R Beddiscombe

No. 6158/316

NEWFOUNDLAND CONTINGENT

From:

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

To: Officer Commanding,
1st Batt. Ryl. Nfld. Regiment
B.E.F.

B 22nd April 1919

4623 Pte R. Beddiscombe

With reference to the following telegram from the Minister of Militia, / / (146)

"Pay to- 4623 R. Beddiscombe
£2. 2. 0.

Kindly advise whether this remittance should be

- (1) forwarded to you for payment to this Soldier;
- (2) retained to credit of his account; or
- (3) otherwise dealt with.

R.A. Minors
Chief Paymaster & O. i/c Records.

29-4 1919

4623, Pte. R. Beddiscombe

The aforesaid man wish
the remittance placed to his
credit on the R.O. please.

Deposited

Biddiscombe, R

4623

14 Sept.

Holyrood.
Jan 15th 1922.

The Militia Dept
Hearings

~~2559~~

I am writing to see
if I can obtain any benefit
by you my husband
Richard Bliddiscombe No 4623
predeceased me on Feb 17th 1921
I am a widow left with
two little children one
nineteen months old and
baby 9 months old since then
I am living with my people
in Holyrood with no support
I will be very thankful for
any little you can contribute
if I could get a pension
I would be more than thankful
I should like to hear from

you as soon as possible
my husband belong to Iowa

Ohlidge

yours fraternally

~~From~~ Mary Biddiscombe

Address

Miss Richard Biddiscombe
South Holywood
N. F. L. D.

~~D 519~~
Jany. 31/22.

Mrs. Richard Biddiscombe,
South Holyrood, C. B.

Dear Madam:-

We are in receipt of your communication of the 18th inst. relative to pension on account of your deceased husband Ex-Pte. R. Biddiscombe.

In reply I would state that as your husband was discharged from the Regiment as an A1 man, that is, with no disability due to War service, it is regretted that no pension can be paid on his account, as his death could not be said to have been due to or caused by, Military service.

Yours faithfully,

Secretary.

EBD.

June 29, 1919

#4623 Pte. Richard Biddiscombe,

Tor Bay Road,

St. John's East.

Dear Sir:-

Please find enclosed Discharge
Certificate No. 2559.

Yours truly

Raymaster & Officer i/c Records.
Capt.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4623 Rank PLT Name Biddiscombe R.
 Intended place of residence Torbay Rd. St. Johns
 2. Occupation Truckman
 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. J. M. Newitt
 Date JUN 14 1919 Jr 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. R. Biddiscombe
JUN 14 1919 Signature of soldier
 J. A. Snowloft
 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. R. Biddiscombe
JUN 14 1919 Signature of soldier
 James O. Newman
 Signature of witness SM

STATEMENT OF SERVICE

7. Enlisted for service 23-4-18 No of days on Military
 Discharged from service 15-6-19 plus 14 days Service 433

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S. R. H. Lait Major
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date JUN 15 1919

CONFIRMATION OF DISCHARGE

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

Place St. Johns, Nfld M. Bowley Capt
 Date June 29/1919 Officer i/c Records
 The Royal Newfoundland Regiment

a/b 2029/2259

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4623 Rank Plt Name R. Buddiscombe
 Date of Enlistment 23-4-18 Address Port of Spain District John
 Occupation Truckman Classification for Discharge 4 Medical Category 141
 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 14-6-19 O. C. Discharge Depot. John

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am R. Buddiscombe 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 John

Date 14-6-19 O i.c. Re-clothing

3. Transportation and Release Certificate.

The above noted has been provided with Travelling Warrants No. 3726 to his home at The Bay of St. Peter and Release Certificate No. 2762 issued.

Date 14-6-19

J. F. Lawcraft
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 29 June 1919

Date 14-6-19

J. F. Lawcraft
Depot Paymaster.

Discharge approved for 15-6-19

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

N.F. P/36	B 288	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 14-3-19

J. F. Lawcraft
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

Date JUN 15 1919

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

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

Date

The Royal Newfoundland Regiment

Class for Demobilization: —

6

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

13. 6. 19

Regimental No *4623*

Name *Biddiscombe*

R

Rank

SG

Address

Sorby R^d

Present Medical Category

A-1

Recommended for: —

(a) Immediate discharge

(b) ~~Standard Medical Board~~

Members of Board

R.H. East Capt

O.C. Discharge Depot.

J.P. Parsons
Senior Medical Officer

W. Burden
M.O. Depot

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

R. Biddiscomb

Signature of Man.

Reg. No. *623*

J. R. Snow Capt.

Signature of the Vocational Officer or his Representative.

Place

ST. JOHN'S.

Date

14-6-19

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

MEDICAL HISTORY

Surname Addiscombe OF Christian Name Richard

Table I.—GENERAL TABLE.

Birthplace:—Parish S. Johns County Nfld

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>23</u> day of <u>Apr</u> 191 <u>8</u> at <u>S. Johns</u>		on _____ day of _____ 191	
Declared Age	<u>21</u> years _____ days		years _____ days	
Trade or Occupation	<u>Traveller</u>			
Height	<u>5</u> feet <u>7 1/2</u> inches		feet _____ inches	
Weight	<u>165</u> lbs.		lbs. _____	
Chest Measurement	Girth when fully expanded... <u>38</u> inches		inches _____	
	Range of Expansion... <u>5</u> inches		inches _____	
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V= <u>6/6</u>		R.E.—V=	
	L.E.—V= <u>6/6</u>		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>L. Bennett Paterson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>S. Johns</u> on <u>23</u> day of <u>Apr</u> 191 <u>8</u>		at _____ on _____ day of _____ 191	
Joined on Enlistment	Corps.	<u>The Royal Nfld Regt</u>	Corps.	
	Regtl. No.	<u>4623</u>	Regtl. No.	
Transferred to				
Became non-effective by	on _____ day of _____ 191		on _____ day of _____ 191	
(Signature)				
(Rank)				

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

Date	Brief Details, and Signature
15-5-18	Race P
5-6-18	TAB. 40
16.6.18	do. aby
10-7-18	TAB 9 MK

It is hereby certified that this soldier has been before a Travelling Medical Board and has been classified as 6 for Discharge on Demobilisation. Medical category

13.6.19
Date of T.M.B.

[Signature]
Discharge Certificate

Table IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation



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 *Biddiscomb, Richard*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4623.*

Intended address *101 Bay Road St Johns Cent*

Height on discharge *5 Feet 8*

Color of hair on discharge *Light Brown*

Complexion *Fair*

Color of eyes *Grey*

Descriptive Marks *The dim.*

Figure on discharge *John*

Christian name of Father *Elizabeth*

Christian name of Mother _____

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *St Johns 8-12-1896*

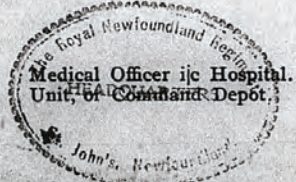
Nature and locality of civil employment required _____

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full) *Richard Biddiscomb* *Ho* (Rank)

Station *ST. JOHN'S.* Date *13-6-19*

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 _____

Casualty Form - Active Service.

Regiment or Corps 71st ROYAL NEWFOUNDLAND REGT.

Rank 4th Surname Biddiscombe Christian Name Richard

Religion CE Age on Enlistment 21 years months

Enlisted (a) 23/4/18 Terms of Service (a) DURATION Service reckons from (a) 15/5/19

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

Extended 5 Re-engaged 1 Qualification (b)
or Corps Trade and rate

Occupation Truckman W. M. Evers Signature of Officer

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 <u>26 OCT 1918</u> Disembarked <u>3 NOV 1918</u> Joined Battalion		
		<u>Arrived in UK</u>		<u>23/4/19</u>	

(a) In the case of a man who has re-engaged for or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered in Signalers, Shoeing-Smith, &c. W. 1648-1274a 2000a 9.12 (45th) C. P. S. L. Form B. 103 11897. P.T.O.

Next of Kin Father Richard Biddiscombe, Torbay Road, St Johns, Newfoundland.

The Royal Nfld. Regiment

DEMOBILIZATION

No. 4673 Rank

Name

Biddiscombe

Warned for demobilization on

JUN 14 19 47

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121.

Regiment of *Royal New Forest*

Number of Sheet *one*

Signature of O. C. Company *C. J. Jamieson*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badge, Service pay or proficiency pay
No.	<i>Biddiscombe R</i>	Age on	<i>21</i> years <i>0</i> months	<i>Wickham</i>	
Joined		Date	Place and Date of Enlistment	Religion	
Joined		Date	<i>St Johns</i> <i>23.4.18</i>	<i>CP</i>	
Joined		Date		Period of } with Colours years.		Place of Birth
Joined	Date	} with Reserve years.	<i>St Johns</i>		

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

To be carried over

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 F., 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 *Loyal Newfoundland* 7. Former Trade or Occupation } *Farmer*
2. Regtl. No. *4623* 3. Rank *R.P.T.* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Riddiawale R.* (a) Former Regts. or Corps; (Surname) (Christian Names) with Regt. Nos.
5. Age last birthday *22*
6. Posted for duty on *20.11.18* at *St. John* 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 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 general 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. *he*
12. Place of origin of disability. *he*
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. *he*

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.)

He complains of gas 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?

na.
na.
na.
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
1001
1001
1001

Station *Wagley, A. Camp*
 Date *1917*

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

No. 4653

Name

Siddiscombe K.

Sqn., Batty.,
or Company

B

Corps

ROYAL NEWFOUNDLAND REG.

Date of
enlistment

8/4/18

G.C.
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.

12

Signature O.C.
Company, etc.

J. M. Curran Cap.

Character

Place	Date of offence	Rank	Cases of Drunken- ness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks

Army Form B. 122

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 26th. 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.

- Richard* Christian name..... *Bedescombe*
3. Rank..... *4623* 4. Regt. No.....
5. Address in full to which future payments of gratuity are to be forwarded..... *St. John's East*
6. Date of enlistment in the Regiment..... *Apr. 27/18*
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 field, if so, give dates and particulars of such service..... *Overseas*
12. Give total length of time which you served on active service whether in field or Overseas..... *From Apr. 27/18 to June 14/19*

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

..... *No*

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

..... *No*

15. Have you been issued with a War Service Badge?..... *No*

16. Have you, during the present war, served in the Imperial Forces?..... *No*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *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?..... *No*

19. Are you now serving in the Regt.?..... *No* If not give:- (a) date of discharge..... *Sept 1919* (b) Reason for discharge..... *Reinstated*

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 Feb 1918 to Sept 1919

21. (c) 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.

-3- R Biddiscomb

Signature of Applicant:

Place of Residence:

Declared before me at:

This

14th day of July 1919.
Torbay Road, St. Johns Nfld.
St. Johns, Nfld.
John M. Carthy

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

POST DISCHARGE PAY.				Net amount
Date paid	to	Paid	War Service	aug 7
	Soldier	Dependent	Classify.	
			H. nos	2807
Certified correct.				Paymaster

No 4334



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Richard Biddiscombe, Regl. No. 4623

hereby agree, until further notification by me, and in similar official form to make an Allotment of Sixty Dollars and Sixty Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person & 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)
4107	Father	<u>John Biddiscombe</u>	<u>For Bay Road St John's</u>	
				Total Allotment, \$ <u>60</u>

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
St John's
May 29th 1918

(Sig.) Richard Biddiscombe
 (Rank) Pte

insert in corner of envelope "AB 64"

Receipt for Army Book 64

No. *4673* ... Name... *Biddiscombe*

To Certify that I have received the AB 64 of the above
named soldier.

Name... *Richard Biddiscombe*

Date... *July 27th 1920*

Place... *Loch Bay Rd.* *city*

N.B. For completion and return to the Department of Militia
Insert in corner of envelope "AB 64"

7

A4623

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 41625 Rank Pte Name Biddiscombe P
 Date of Enlistment 23-4-18 Address Perth District Perth
 Occupation Truckman Classification for Discharge 17 Medical Category A.1
 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
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 12-6-19 J. H. M. H.
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.
 I am R. Biddiscombe 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 \$65.00
 (b) Clothing Supplied Am. Johnston

Date 14-6-19 O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 2726 to his home at In. Bay, Madras and Release Certificate No. 2762 issued.

Date 14-6-19 *J. J. 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 27-6-19

Date 14-6-19 *J. J. Snowball*
Depot Paymaster.

Discharge approved for 15-6-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36	B 288	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 177a	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 14-3-19 *J. J. 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

Date JUN 15 1919 *R.H. Sait Capt.*
O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot
Date June 24/19 *W. G. ...*

Reg. No. *4623* Rank *Plt* Name *Biddiecomb, B.*
Attested Address *Tonday Road*
Allotment Allottee
Date of Allotment Returned from Overseas *29.1.19.*
Returned on S.S. *Coriann* Cause *Discharge*

14.6.19
15.1.19

PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILISATION.