



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 1270 Name James J. ... Corps ...

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1.
2. What is your full Address? } 2.
3. Are you a British Subject? 3.
4. What is your age? 4. Years Months
5. What is your Trade or Calling? 5.
6. Are you Married? 6.
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7.
8. Are you willing to be vaccinated or re-vaccinated? } 8.
9. Are you willing to be enlisted for General Service? } 9.
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.

I, 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.

..... SIGNATURE OF RECRUIT.

..... Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, 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 on this day of 191

Signature of Attesting Officer

† CERTIFICATE OF APPROVING OFFICER:

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the If enlisted by special authority, such will be attached to the original attestation.

Date 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 Harold B. Gammill
 Apparent age 22 years 1 months. Height 5 feet 11 inches
 Chest Measurement { Girth when fully expanded 37 1/2 inches
 Range of expansion 3 1/2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Benjamin Gammill
Denmark | 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 " [" "] " "



FIRST NEWFOUNDLAND REGIMENT +270

ATTESTATION OF

No. 4270 Name Harold R. Brazil Corps Infantry

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Harold R. Brazil</u> |
| 2. What is your full Address? | 2. <u>St. John's</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>23</u> Years <u>1</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Postman</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, Harold R. Brazil 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.

Harold R. Brazil SIGNATURE OF RECRUIT.

Robert Peel Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Harold R. Brazil 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 26th day of Dec 1917.

W. J. [Signature] Signature of Attesting Officer

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been compiled with. I accordingly approve, and appoint him to the:.....

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

Date Dec 26th 1917 } Approving Officer.

Place St. John's }

† 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 Harold R. Brazill

Apparent age 23 years 1 months. Height 55 feet 11 inches

Chest Measurement { Girth when fully expanded 39 1/2 inches
 Range of expansion 4 1/2 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Benjamin Brazill
Garmish | 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>26-12-17</u>									<u>Lt. Col. 17-4-19</u>
Joined at <u>Alphons</u> on <u>December 26-1917</u>									
<u>Discharged</u>					<u>July 27-1919</u>				
<u>Embarked at Alphons train to Halifax N.S. 28/18</u>									<u>Embarked for</u>
<u>13th Bn. 8-18. Joined base depot. 12-9-18. Joined 1st Bn. in the field 5-9-18</u>									
<u>Admitted 107th Bn. Decatur 17-10-18. Admitted to 1st Bn. 28-10-18</u>									<u>Transferred from 107th Bn. 22-4-19</u>
<u>Went to duty 3-11-18. Returned 5-11-18.</u>									
<u>Arrived at Halifax 13-19. 1st Bn. for demobilization 22-5-19</u>									
<u>Arrived at Newfoundland 1-6-1919</u>									
<u>Demobilization at Alphons 3-7-1919</u>									
Total Service forfeited as above _____									

Total Service towards Engagement to 3-7-1919 (date of discharge) 1 years 190 days

Pensions _____

C.R. 4270

Extract from Daily Orders Part 11 Unit The Royal WFLA. Regt.
By. Lt. Col. F.G. Mathias, D.S.O. Commanding list No. 8-11-38

The w/m is 4270 discharged to duty.

4270 Pte. A. Brazil

D Coy.

C.R. 4270

Extract from Daily Orders Part 11 Unit The Royal Wfld.
Regt. France 21-4-19.

Promotions.

4270 Pte. H. Brazil

to the L/Cpl. 17-4-19.

C.R. 4270

Extract from Daily Order part II, Init the R.Nfld.R.
dated July 5th. 1919.

The discharge of the underoted on demobilization on
has been ~~REPEATED~~ CONFIRMED by officer i/c Records on noted date.

#4270 Pte. Harold Brazil.

3-7-19.

C.R. 4270

Extract from Daily Orders Part 11 Unit The Royal WFLA.
Regt. Depot, St. John's, June 9th, 1919

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

4270 Pte. R. Brazil.

C.R. 4270

Extract from Daily Orders Part 11 Depot, St. John's,
Date June 7th, 1919

4270 Pte. W. Brazil

Reported at Headquarters 1-6-19. by "Corsican"
which sailed Liverpool May 22/1919.

C.R. 4270

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.

#4270 L/Cpl. H. Brazil.

C.R. 4270

Extract from War Office List No. H. A. 31267

DIS. TO DUTY EX 10 STY. H. ARNEKE 3 NOV. 1918.

#4270 Pte. A. BRZIL.

DIARRHOEA.

C.R. 4270

Extract from O R D E R S by Lt. Col. G. Mathias, D.S.O.
Commanding 1st Battalion Royal Newfoundland Regiment,
dated 5/9/18.

The following arrived to-day and is posted to the following
Company.

D. COMPANY.

4270, Pte. H. Brazil.

C.R. 4270

Extract from Nominal Roll Draft #51 to S.R.F. Embarked
Folkestone, 31-8-18.

4270 Pte. Brazil H.R.

C.R. 4270

Extract from Nominal Roll Embarked St. John's for Overseas,
Mar. 28, 1918.

4270 Pte. Brazil R.

C.R. 4270

Extract of Daily Orders part 11, from Unit 4/1st Newfoundland
Regiment, dated December 27, 1917.

#4270 Pte. H. Braxill.

Attested for General Service with the 1st Newfoundland
Regiment with effect from 26/12/17.

✓



C.R. 4270

WOUNDED & SICK N.C.O's ADDRESS OF THE EXPEDITIONARY FORCE - FRANCE

RECORD OFFICE - C O R K

26137 L/C. Murphy, T.
5124 Pte. Bateman, A.

7/R. Ir. Regt.
2/Leins.

Myalgia Sev....Adm. 2 Can.Sty.H.Outreau 21 Oct.18.
Tonsillitis,Sev.,Adm. 2 Can.Sty.H.Outreau 21 Oct.18.

LIST NO.H.A. 30593.

RECORD OFFICE - D U B L I N

21888 Pte. McHale, J.

22117 L/C. Moran, P.J.
43502 Pte. Kendall S.

9/Roy. Innis, Fus.
1/Roy. Ir. Rfls.
9/R. Ir. Fus. att
Lab. Co. Base Dep.

Conjunctivitis..Adm. 10 Sty H.Arneke 20 Oct.18.
L. Eye, Mild.
F. B. L. Eye, Mild., Adm. 10 Sty. H. Arneke 20 Oct.18.
...Inj. to ... Adm. 2 Can. Sty. H. Outreau 21 Oct.18.
Back Sev.

LIST NO.H.A. 30593.

NO.1 RECORD OFFICE - B K E T H R

55240 Pte. Westrup A.
54817 Pte. West, G.
32592 L/C. Martin, C.

2/Hants Regt
3/Hants Regt.
2/Hants.

NYD.H.Mild.....Adm. 10 Sty.H.Arneke 20 Oct.18.
NYD.H.Mild.....Adm. 10 Sty.H.Arneke 20 Oct.18.
GSW. Butt. R. Sev., Adm. 2 Can. Sty. H. Outreau 21 Oct.18.

LIST NO.H.A. 30593.

NO. TWO RECORD OFFICE - B K E T H R

29555 Pte. Green, W.C.

12/Scm. I. I.

Pneumonia, Sev., Adm. 2 Can. Sty. H. Outreau 21 Oct.18.

LIST NO.H.A. 30593.

NEWFOUNDLAND EXPEDITIONARY FORCE

4270 Pte. Brazil, A

1/Newfoundland
Regt.

Clin. Dysentery..Adm. 10 Sty. H. Arneke 20 Oct.18.
Mild.

LIST NO.H.A. 30593.

2122

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

MEDICAL HISTORY

Surname

Brazill

Christian Name

Harold K.

Table I.—GENERAL TABLE.

Birthplace:—Parish

Garrison

County

Nfld.

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	at	on	at
Examined	36th day of Dec	St. John's	day of	
Declared Age	20 years	1 Year	years	days
Trade or Occupation	Fisherman			
Height	5 feet	11 inches	feet	inches
Weight		160 lbs.		lbs.
Chest (Girth when fully expanded...)		34 1/2 inches		inches
Measure-ment (Range of Expansion...)		2 1/2 inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm			
When Vaccinated				
Vision	R. E.—V=	4/2	R. E.—V=	
	L. E.—V=	2/2	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)	Samuel Peterson			
(Rank)	Major			
	Medical Officer.		Medical Officer.	
Enlisted	at	St. John's	at	
	on	36th day of Dec	on	day of 191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
Transferred to	1st Nfld Regt 4370			
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				

Medical Report on an Invalid.

Station Hayley D. CampDate 1. 5. 191. Unit Royal Newfld2. Regimental No. 42703. Rank Sgt.4. Name Brazils H.5. Age last birthday 246. Enlisted { on Nov. 1st 1917
at St John7. Former Trade } Fisherman
or Occupation }

7A. If with previous service in Army, state—

(a) Former Unit;

(b) Regimental No.;

(c) Date of Discharge;

(d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

NilStatement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. nil

10. Place of origin of disability.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. nil

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

(a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).

(b) constitutional or hereditary, and not aggravated by service during the present war.

(c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c. nil

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

Accomplish no disability

14. If the disability is an injury, was it caused—

No

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

15. Was a Court of Inquiry held on the injury?

No

- If so—
- (a) When?
 - (b) Where?
 - (c) Opinion?

16. Was an operation performed? If so, what?

No

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

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

No

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

No

20. Do you recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

Repatriation

Major J. J. J.

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith,

except †

Station *H. D. Camp*

Officer in charge of Hospital.

Date *1. 2. 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.

† Delete this word if no exceptions are to be made.

H. R. Brazil.

4270

P. 1. 10

FORM K

N^o 3917



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Harold Briggell, Regl. No. 4270

hereby agree, until further notification by me, and in similar official form to make an Allotment of _____ Dollars and Twenty 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 April 1st 18

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3797	My Name & Self	<u>Harold Briggell</u>	<u>St Johns</u>	50
	<u>and</u> Sister	<u>Mrs. Charlie (Minnie) Hammond</u>	<u>Canonwood Hall St Johns</u>	
<p><i>Form cancelled by this new allotment</i></p>				
Total Allotment, \$				50

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
 Company
St Johns
March 27th 1918

(Sig.) [Signature]
 (Rank) Private

No. 11649/1162

N.F.P./79.

11648166
RM
NEWFOUNDLAND CONTINGENT

From:

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

To:

Officer Commanding,
2/Bn Royal Nfld. Regt.
Winchester.

19th July 1918

Subject: 4270, Pte. H.R. Brazil

With reference to the following telegram (6465) from the Hon. Minister of Militia, received

Pay to 4270 Brazil £8:0:0

Draft £ 8:0:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

A. R. Bennett Maj.
Chief Paymaster & O. i/c Records.

Receipt hereon for

Chambers
OFFICER COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commdg. 2nd Batt'n
Royal Newfoundland Regiment

Received the sum of Eight
Pounds on account of
cable remittance from Newfoundland.

A. R. Brazil
No. 4270 Rank Private

Witness: A. M. Wilson Cpl.

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.F.C.A. "Prisoners of War Fund" in quarterly instalments for the period of one year, commencing on 1st July 1916.

Regtl. No.	Rank.	Name	Amount	Signature.
4570	Private	Brazil. H.	\$2.50	

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

Date

June 26th 1916

H. Brazil

CHIEF PAYMASTER & OFFICER I/C. RECORDS.
NEWFOUNDLAND CONTINGENT,
58, VICTORIA STREET,
LONDON, S.W. 1.
ENGLAND.

HOCHELAGA.

To Bank of Montreal

St Johns.

Newfoundland

Please cable through Militia
Ten pounds (£10) immediately

From. 4270 Pte Brazil H.

1st Batta R. N. F. I. D.

12-4-19.

234

No 160/318

N.F.P./80.

From: NEWFOUNDLAND CONTINGENT

D
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.

22nd April 1919

191

4270 Pte Brazil H.R.

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

"Pay to- 4270 Brazil H.R.

£10. 0. 0.

Kindly advise whether this re-
mittance should be

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

A. C. Munnell Pay.
Chief Paymaster & O. i/c Records.

Deposited

Medical Report on an Invalid.

Station Hazelton Down
Date 1-5-19

1. Unit Royal Newfoundland 7. Former Trade } Fisherman
or Occupation }
2. Regimental No. 2270
3. Rank P. Cpl. 7A. If with previous service in Army, state—
(a) Former Unit;
4. Name Brazil St. (b) Regimental No. ;
5. Age last birthday 24 (c) Date of Discharge ;
6. Enlisted { on 1st Nov. 1917 (d) Cause of Discharge.
at St John's

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

niStatement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. ni
10. Place of origin of disability. ni
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. ni

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is— ni
(a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
(b) constitutional or hereditary, and not aggravated by service during the present war.
(c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

He complains of no disability

14. If the disability is an injury, was it caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

u

15. Was a Court of Inquiry held on the injury?

- If so—(a) When?
- (b) Where?
- (c) Opinion?

u

16. Was an operation performed? If so, what?

u

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

u

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

u

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

u

20. Do you recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

Repatriation

max 21

Major G. J. ...

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except †

Station *Hazley Down*

Officer in charge of Hospital.

Date *1-5-19*

*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.

† Delete this word if no exceptions are to be made.

Brazil, L

4270

May Sept.

July 5, 1919

#4270 Pte. Harold R. Brazil,

Gamish,

Fortune. Bay

Dear Sir:-

Please find enclosed Discharge

Certificate No. 2333.

Yours truly

Capt.
Paymaster & Officer i/c Records.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4270 Rank P.C. Name Brazil R.
 Intended place of residence Garnish Fortune

2. Occupation Fisherman
 Classification of soldier Medical Category A-1

3. The above named man is discharged in consequence of DEMOBILIZATION.

Eligible for War Service Gratiuity

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. H. Mearns Lieut.
 Date JUN 5 1919 for Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place and Date ST. JOHN'S. H. Brazil
 JUN 5 1919 White Bonster Lt
 Signature of soldier
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date JOHN'S. H. Brazil
 5-6-19 James & Bowdler
 Signature of soldier
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 12-2-18 No of days on Military
 Discharged from service 19-6-19 for 14 days Service 507

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 Capt
 Date JUN 19 1919 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, Nfld. M. Bowley Capt
 Date July 3/1919 Officer i/c Records
 The Royal Newfoundland Regiment

Ord B 2079/2333

The Royal Newfoundland Regiment

Class for Demobilization:—

E

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

4-6-19

Regimental No. *4270*.....

Name .. *B. Basil*

R. N.

Address .. *Lanark*

Present Medical Category.....

A-1

Recommended for:—

- (a) Immediate discharge
- (b) ~~Standing Medical Board~~

Members of Board

R.H. Lant
O.C. Discharge Depot.

H. Paterson
Senior Medical Officer

Geo. Burden
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4276 Rank Plt. Name Brazil R.A.
 Date of Enlistment Address Marine St. District Fortune
 Occupation Truckman Classification for Discharge Medical Category
 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.....	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 4.1.19

H. W. H.
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

H. Brazil

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with—

(a) Clothing Allowance payable \$6000

(b) Clothing Supplied new cap

Date 5-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 1441 to his home

at Garnish Family and Release Certificate No. 2308 issued.

Date 5-6-19 *J.A. Shaw Capt.*
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 3-7-19

Date 5-6-19 *J.A. Shaw Capt.*
Depot Paymaster.

Discharge approved for 19-6-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med	D.F. 1
F 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 5-6-19 *J.A. Shaw Capt.*
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUN 19 1919 *R.H. Sait Capt.*
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

Signature of Man.

Reg. No. *H Brazil*

J. H. Snow Capt.
Signature of the Vocational Officer or his Representative.

Place *St. Johns*
Date *5-6-19* .191



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 *R. Harold Brazil*
Regiment from which discharged *Royal Newfoundland*
Regimental number *4270*
Intended address *Garnish. Fortune B.*
Height on discharge *5* Feet *8*
Color of hair on discharge *Dark*
Complexion *Fair*
Color of eyes *Brown.*
Descriptive Marks *Tattoo mark on right forearm*
Figure on discharge *Normal*
Christian name of Father *Benjamin*
Christian name of Mother *~~Ben~~ Abekiel (stepmother)*
Wife's maiden name in full —
Date and place of marriage —
Christian names of children —
Place and date of soldier's birth
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) *Harold Brazil* (Rank) *L16*

Station *St. John's Nf.* Date *4-6-19*

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.

Station

Date

July 3, 1919

#4270 L/C. Harold Brazil,

Garnish, F.B.

Dear Sir:-

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

Yours truly

Captain,
Paymaster & Officer i/c Records.

525

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..... *Harold* 2. Surname..... *Brazil*

3. Rank..... *L. Cpl.* 4. Reg't. No. *4278*

5. Address in full to which future payments of gratuity are to be forwarded..... *Garrison, J. B.*

6. Date of enlistment in the Regiment..... *Mar 15/18*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge..... *No.*

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?..... *No.*

11. Were you on active service only in Nfld. If so, give dates and particulars of such service..... *Overseas.*

12. Give total length of time which you served on active service whether in Nfld. or Overseas..... *From Mar 15/18 to June 5/19 date of temporary discharge*

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.

Clothing allowance back pay \$7.79

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

No

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

No

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

No

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

No

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

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

*June 5/19
Temporary*

Demobilization

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

France, Belgium & Germany - From Aug. 1918 to April 1919 - Upper Pöschel Lake, Long Range

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.

FORM K

No. 3917



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Harold Brazill, Regl. No. 4270³
 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 ^{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 April 1st 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3797	My Name & Self	Bunker Montreal	St Johns	50
	and Sister	Mrs Charlie (Minnie) Hammond	Canon Wood Hall St Johns	
Total Allotment, \$				50

Form cancelled by this new allotment

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.) W. Haley

Officer Commanding
Company

(Sig.) R. H. Brazill

(Rank) Private

St Johns
March 27th 1918



THE ROYAL NEWFOUNDLAND REGIMENT
HEADQUARTERS

St. John's, Newfoundland,

March 27th. 1918. *191*

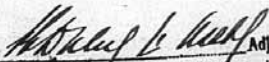
From Officer Commanding,
Depot.

To Paymaster and Officer i/c Records,
Department of Militia.

Re allotment of 4270 R. Brazil.

Will you please cancel allotment of above mentioned
man in Form K. 4552 from and including April 1st.
1918.

New Allotment on Form K. 3917 in Favour of himself
and or sister is substituted herewith,


Adjutant
Depot, First Newfoundland Regiment,
St. John's, Nfld.

ST. JOHN'S, June 9th /19

Royal Newfoundland Regiment.

Billeting Account,

To Mr. C. Hammond
Military Road

Billeting Soldiers as undermentioned

from June 1st /19 to June 6th /19

4270 - L/C. H Brazil 6 6

ACCOUNT B. M. Dew
CH. NO. 23140
IND. LEDGER
PAY LEDGER
INITIALS

Certified correct for \$

6 60

J. A. Howcroft
/s/ William Hammond
Billeting Officer.

C.R. 4270

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

I certify that I have received an issue of 2 inches
of Riband of British War Medal-1914-1919.

Date *Dec 3rd*.....
Place.....*1919*.....

Name.....*H. R. Brazil*.....

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4270 Rank Plt Name Brazil R.A.
 Date of Enlistment Address Garnish District Fortune
 Occupation Fisherman Classification for Discharge Medical Category
 Recommendation S.M.B. Disability Rating
 Passed to Demobilization Officer with following documents —

N.F. P36	B 288	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 4.6.19 H. M. H.
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

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 new cap

Date 5-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

R. 1441

The above named has been provided with Travelling Warrant No. 2308..... to his home at *Gannish. Prinity* and Release Certificate No. issued.

Date *5-6-19*.....

J.A. Shaw Capt
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 *3-7-19*.....

Date *5-6-19*.....

H. H. H. H.
Depot Paymaster.

Discharge approved for..... *19-6-19*.....

Forwarded with following documents to O.C Discharge Depot.

N.F. P136.....	B 268.....	B 121.....	N.F. Med.....	D.F. 1.....
F 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 *5-6-19*.....

J.A. Shaw Capt
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date *JUN 19 1919*.....

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

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

Date *June 11 1919*.....

Gannish Prinity
Lieut

Reg. No. *4270* Rank *Pfc* Name *Brazil R. H. Garnis*
Attested Address
Allotment Allottee
Date of Allotment Returned from Overseas *1-6-19*
Returned on S S *Cassian* Cause *Discharge*

4-6-19
19-6-19

PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILIZATION

DEPARTMENT OF VETERANS AFFAIRS
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION
AVIS DE DÉCÈS

TO:
À:

DATE 20 Oct 1972

NAME Service No. CPC No.
NOM BRAZIL Harold Roderick 4270 NFLD Regt CCP No

Matricule No

WVA No.
AAC No 215097

Information Received from:

Information reçue de: DVA93 CPC DVA DIST TO

Date of Death
Date du Décès 7 Aug 1972

Place East
Endroit York Ont.

Distribution: WSR-DASG ✓
VI - ASS
~~XXX/BOX~~
HO - BC

Pour le chef,

for Chief, Central Registry Division.
Dépôt central des dossiers.