



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. S551 Name Andrew Brown Corp. Cpl.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--------------------------------------|
| 1. What is your name? | 1. <u>Andrew Brown</u> |
| 2. What is your full Address? | 2. <u>King's Cove</u>
<u>B.B.</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>17</u> Years <u>0</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Schoolteacher</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, Andrew Brown 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.

Andrew Brown SIGNATURE OF RECRUIT.
Just P. Pitman Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Andrew Brown 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 31 day of May 1915.

Signature of Attesting Officer A. B. Dicks Serjeant

†CERTIFICATE OF APPROVING OFFICER.

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

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

Date.....1915 } 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 Andrew Brown

Apparent age 19 years months. Height 5 feet 10 1/4 inches

Chest Measurement { Girth when fully expanded 35 inches
 Range of expansion 3 inches

Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin James Brown Kings Cove
B.B. | Relationship Father

Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow.		(b) Place and date of marriage.	
(c) Present address.		(d) Initials of Officer verifying entry.	
(a)	(b)	(c)	(d)

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or 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>31-5-18</u>										
Joined at <u>St John's</u> on <u>Monday 31-12-18</u>										
<u>Returned to England Aug 11 1919</u>										
<u>Embarked St John's train to Halifax N.S. 22-9-18</u>										
<u>Left for demobilization 24-6-19</u>										
<u>Arrives to wife and child 1-7-1919</u>										
<u>Demobilization St John's 1-8-1919</u>										
Total Service forfeited as above.....										
Total Service towards Engagement to <u>4-8-1919</u> [date of discharge]										
" " Pensions " " " " " "										

C.R. 1555

Extract from daily orders part II Royal Newfoundland Regt.
Depot St. John's dated Aug. 8th 1919.

The discharge of the undernoted on demobilisation has
been CONFIRMED by officer i/c Records from noted date 4-8-19.

5551, Pte. A. Brown.

C.R. 5551

Extract from Daily Orders Part II Unit The Royal Wfld.
Regt. St. John's, July 10th, 1919.

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

5551 Pte. A. Browne.

C.R. 5551

Extract from Daily Orders Hospital Unit The Royal Nfld.
Regt. St. John's July 3rd, 1919.

5551 Pte. A. Brown.

Reported at Headquarters 1-7-19 on "Cassandra" which
sailed Glasgow June 21st, 1919.

C.R. 5551

Extract of Orders By MAJOR W.S. SULLIVAN.
COMMANDING NEWFOUNDLAND FORESTRY COMPANIES,
19/11/18.

The undermentioned having arrived from the 2nd Battalion
Royal Newfoundland Regiment is attached to the strength from
this date and posted to to the following Company.

5551 Pte. A. Brown.

"C" Company.

C.R. 5551

Extract from Nominal Roll Embarked St. John's for Overseas
Sept. 23, 1918. "B".

5551 Brown Andrew.

C.R. 5551

Extract from Daily Orders Part 11 Unit The Royal Hfld. Regt.
St. John's, dated Sept. 5th, 1918.

The/ Undernoted man proceeded to R.N. Coy's Dry Dock, St. John's
2-9-18.

5551 Pte. A. Brown.

C.R. 5551

Extract of Daily Orders Part 11 Depot St. John's Aug. 31/1918.

#5551 Pte. A. BROWN.

Discharged from Barracks Hospital 31-8-118.

C.R. 5531

Extract from Daily Orders Part 11 Unit The Royal Wfld.
Regt. St. John's, dated August 24th, 1918.

551 Pte. A. Brown.

Admitted to Barracks Hospital 24-8-18.

C.R. 5551

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. ST. JOHN'S, dated August 19th 1918.

5551 Pte. A. Brown.

Discharged from Billats, (Mrs. Ash) 19/8/18.

C.R. 5551

Extract from Daily Orders part 11, Recon Unit The
Royal W.I.A. Regt. St. John's, dated August 12, 1918.

#5551 Pte. A. Brown.

Discharged from M.I.D. Hospital to Billets 12-8-18

C.R.

5551

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. St. John's, dated August 1, 1918.

#5551 Pte. A. Brown.

M.I.D.

Admitted to ~~Dorchester~~ ~~St. John's~~ Hospital 30-7-18

C.R. 5551

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. St. John's, dated June 1, 1918

#5551 Pte. A. Brown

Attested for General Service with the Royal Nfld.
Regt. from 31.5.18

A Brown

C.R. 5551

~~1110~~

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 Coy* } Former Trade or Occupation } *School Teacher*
 2. Regtl. No. *5351* 3. Rank. *PTE* 7a. If the soldier claims previous service in Army, he should state—
 4. Name *Brown* } *Edward* } (a) Former Regts. or Corps ;
 (Surname) } (Christian Names) } with Regtl. Nos.
 5. Age last birthday *30*
 6. Posted for duty on at
 in category (or grade)
 8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty ? (b) Date of Discharge ;
 (c) Cause of Discharge.
 9. If a Court of Inquiry was held on an injury state :—
 (a) When (d) Particulars of Pension or Gratuity
 (b) Where (if any)
 (c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
 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? }

All Complaints of disability

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

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

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?

Repatriation

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.

W.E. Procuier *Rame*
 Medical Officer in charge of case.

Station *St. Elizabeth's Hosp. ...*
 Date *9.1.19*

* 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

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 Corp. *Royal N. F. L.R.*
5681
2. Regtl. No. *5711* 3. Rank *plc*
4. Name *Cusker* *Charles*
(Surname) (Christian Names)
5. Age last birthday *21*
6. Posted for duty on..... at.....
 in category (or grade).....
7. Former Trade or Occupation } *Miner*
- 7a. If the soldier claims previous service in Army, he should state—
 (a) Former Regts. or Corps ;
 with Regtl. Nos.
8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty?
9. If a Court of Inquiry was held on an injury state :—
 (a) When (b) Date of Discharge ;
 (b) Where (c) Cause of Discharge.
 (c) Opinion of Court (d) Particulars of Pension or Gratuity
 (if any)

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 n (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability. *nil*
12. Place of origin of disability. *nil*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | ✓ | |
| (ii.) Previous active service.. .. . | ✓ | |
| (iii.) Climate in pre-war service | ✓ | |
| (iv.) Ordinary military service before the war | ✓ | |
| (v.) Serious negligence or misconduct on the man's part. } | ✓ | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it ? }

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

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

No. Disability claimed

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 ?

Reparation

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.

W. P. Proemier *Capt. R. A. G. 1*

Medical Officer in charge of case.

Station *Haystack, Devon*

Date *28-3-19*

* Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause

No. 4935/719

N.F.L./79.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
2/Bn. Royal Newfoundland Regt.,
Hazeley Down Camp,
Winchester.

28th March 1919

March 31st 1919

5551 Pte. Brown A.

With reference to the following telegram from the Minister of Militia / / (102)

"Pay to- 5551 Brown

£4. 2. 0.

Cheque £ 4. 2. 0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

A. A. Minshall
Chief Paymaster & O. i/c Records.

Receipt hereunder.

Edmund J. [Signature]
LIEUT. COLONEL.
Officer Commanding 2 Batta.

Received the sum of £4. 2. 0.

Four pound two in respect of telegraphic remittance from the Minister of militia.

A. Brown
No. 5551 Rank Rt. S.

Witness Geo. Perry /c

No. 21170/2405

066988
NEWFOUNDLAND CONTINGENT N.F.P./79.



From: NEWFOUNDLAND

To: Officer Commanding,
2/Bn Royal Newfoundland Regt.
Winchester.

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

20th December 1918

December 30th 1918

Subject: 5551, Pte. A. Brown,

Receipt hereunder.

With reference to the following telegram (11033) from the Hon. Minister of Militia, received

W. H. Brown
Officer Comdg. ~~2/Bn~~ 2/Bn Royal Newfoundland Regiment.

Pay to 5551 Brown £5:15:0

Received the sum of Five Pounds

Draft £5:15:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Fifteen Shillings on account of cable remittance from Newfoundland.

J. H. Marshall
Chief Paymaster & O. i/c Records.

W. H. Brown

No. 5551 Rank Private

Witness Two Stars C.S.M.

Brown, A

5551

May 20th.

BB/EB

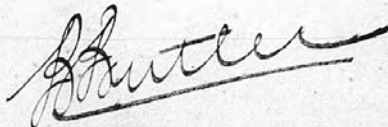
October 17, 1919.

To:- Major Parsons,
Medical Officer.

From:- Vocational Officer.

Andrew Brown 5551.

please
Will you be good enough to have the medical papers
of the above named man at hand for this evening's
meeting.



Major
For V. O.

August 4th 1919.

#5551, Pte. A. Brown,
King's Cove,
Bonavista.

Dear sir:

Enclosed please find Discharge Certificate # 3346.

Yours truly,

Capt. & Quymaster.

RS/.

August 11th 1919

Mr. A. BROWN,

King's Cove. B.B.

Dear Sir:

Referring to your application, I enclose
cheque for seventy dollars (\$70.00) being amount
of first payment due you on account of war Ser-
vice Gratuity.

Yours truly,

Capt. &
Paymaster.

RS/.

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..... *W* 2. Service No. *Brown*
3. Rank..... *Pte* 4. Regtl. No. *5551*
5. Address in full to which future payments of gratuity are to be forwarded..... *Comp Co - B-B*
6. Date of enlistment in the Regiment..... *May 21, 1918*
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..... *Fourteen months*
- 1.3

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?
no

19. Are you now serving in the Regt.? *no* If not give:- (a) Date of discharge. *July 21/19* (b) Reason for discharge. *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.

England

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee.

And I make this solemn declaration, conscientiously believing it to be true and knowing that it is of the same force and effect as if made under Oath.

Signature of Applicant: *Andrew Brown*
 Place of Residence: *King's Co., B.B.*
 Declared before me at: *Dr John W. W. W.*
 This *8* day of *July* 191*9*.....

Y. P. Mallon

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

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

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5551 Rank Pte Name Brown A
 Intended place of residence Kuqa Cove
 2. Occupation School Teacher
 Classification of soldier E Medical Category AI

3. The above named man is discharged in consequence of
DEMOBILIZATION
Eligible for War Service Gratuity

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.
 Place, ST. JOHN'S
 Date JUL 7 1919
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.
 Place, ST. JOHN'S
 Date JUL 7 1919
 Signature of soldier Andrew Brown
 Signature of witness J. A. Snow Capt

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 7-7-19
 Signature of soldier Andrew Brown
 Signature of witness W. J. Leahy Dms

STATEMENT OF SERVICE

7. Enlisted for service 31-5-18 No. of days on Military
 Discharged from service 21-7-19 Plus 14 days Service 431

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge, The Royal Newfoundland Regiment, twenty eight days from date.
 Place, ST. JOHN'S
 Date JUL 21 1919
 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 August 4/1919
 Officer in Charge
 The Royal Newfoundland Regiment

AWB 507913346

1
30
31
4
66

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 11.7.19

Regimental No 5561

Name Brown Andrew Rank

Address Kings Cove N. Bay

Present Medical Category A1

Recommended for:— (a) Immediate discharge

(b) ~~Standard Medical Board~~

Members of Board

RH East Major
O.C. Discharge Depot.

W. Brown
Senior Medical Officer

Dev Borden
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5551 Rank PLC Name Arnold Brown
 Date of Enlistment 31.5.18 Address King's Lynn District Cambridge
 Occupation Shell Clerk Classification for Discharge 6 Medical Category A.1
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P/36.....	B 268.....	B 121.....	N.F. Med.....	D.F. 1.....
B 178.....	W 3494.....	B 122.....	Board 1st.....	" 2.....
B 178a.....	D 400A.....	B 1915.....	do 2nd.....	" 3.....
B 179.....	D 400B.....	Form L.....	do 3rd.....	" 4.....
B 179a.....	D 400C.....	Form K.....	do 4th.....	" 5.....
B 179b.....	B 103.....	ME 2.....		" 6.....
B 179c.....	B 120.....	M 93.....		

Date 14.7.19.....

O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

Arnold Brown

Particulars passed to Vocational Officer for information and action.

Date 17-7-19.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable..... #60.00
 (b) ~~Clothing Supplied~~.....

Date 7-7-19.....

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R2225* to his home
 at *Kings bore* and Release Certificate No. *3275* issued.

Date *7-7-19*

J.A. Knowlton
 Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection
 therewith settled. He has received pay and allowances to *11-8-19*

Date *7-7-19*

J.A. Knowlton
 Depot Paymaster.

Discharge approved for *21-7-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P136.....	B 268.....	B 121.....	N.F. Med.....	D.F. 1.....
E 178.....	W 3494.....	B 122.....	Board 1st.....	" 2.....
B 178a.....	D 400A.....	B 1915.....	do 2nd.....	" 3.....
B 179.....	D 400B.....	Form L.....	do 3rd.....	" 4.....
B 179a.....	D 400C.....	Form K.....	do 4th.....	" 5.....
B 179b.....	B 103.....	ME 2.....		" 6.....
B 179c.....	B 120.....	M 93.....		

Date *7-7-19*

J.A. Knowlton
 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 *JUL 21 1919*

M.R. Cooper 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.

Brown A

Signature of Man.

J. A. Swindell

Signature of the Vocational Officer or his Representative.

Reg. No. 5551

Place

St. Johns

Date

7-7-19.

191

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 take commercial course

Andrew Brown
Signature of Man.

Reg. No. *5551*

H. Kutter
Signature of the Vocational Officer or his Representative.

Place *St Johns*

Date *July 7th* 191*9*.

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

MEDICAL HISTORY

Surname Brown OF Christian Name Andrew

Table I.—GENERAL TABLE.

Birthplace:—Parish Anglo Love B.P. County Nfld.

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	21 st	May		191
	at	St John's.	at	
Declared Age	19	years		days
Trade or Occupation	School teacher.			
Height	5	feet 10 ¹ / ₄	feet	inches
Weight		130	lbs.	lbs.
Chest Measurement	Girth when fully expanded	35	inches	inches
	Range of Expansion	3	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>Lamin Patterson</u>			
(Rank)	Major		Medical Officer.	
Enlisted	at	St John's.	at	
	on	21 st day of May	on	day of 191
Joined on Enlistment	Corps.	Royal Nfld	Corps	
	Regtl. No.	1351	Regtl. No.	
Transferred to	Regiment.			
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				

Table II.—Only for admission to hospital or to the sick list in case

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nat syphilis, admissions and re-admiss of treatment out of ho
	Day	Month	Year	Day	Month	Year			
9M 9.12 Hospital	30	7	18	10	8	18	Mumps.	11	Discharged to

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 hospitals 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 Billets To finish Quarantine

Albert

[P.T.O.]

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 Land* 7. Former Trade or Occupation } *School Teacher*
2. Regtl. No. *557* 3. Rank. *Pte* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Brown George Andrew* (a) Former Regts. or Corps ;
(Surname) (Christian Names) with Regtl. Nos.
5. Age last birthday. *20*
6. Posted for duty on at
in category (or grade)
8. If the disability is an injury was it caused
(a) in action (b) on field service (b) Date of Discharge ;
(c) on duty (d) off duty ? (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When (d) Particulars of Pension or Gratuity
(b) Where (if any)
(c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability. *sub*
12. Place of origin of disability. *at*
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. *at*

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|---|---------------------|-------------------|
| (i) Service during the present war | ✓ | |
| (ii) Previous active service.. .. . | ✓ | |
| (iii) Climate in pre-war service | ✓ | |
| (iv) Ordinary military service before the war | ✓ | |
| (v) Serious negligence or misconduct on the man's part. } | ✓ | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it ? }

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, etc., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

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

He complains of no disability

16. Was an operation performed ? If so, when and what was its nature ?
17. If not, was an operation advised and declined ?
18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable ?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions ?

20. Do you recommend—
 (a) Discharge as permanently unfit ?
 (b) Change to United Kingdom ?

Repatriation

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

W.S. Proctor *Captain*
 Name

Station *Hazely Down*
 Date *9/14/19*

Medical Officer in charge of case.

* Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause



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 *Brown, Andrew*

Regiment from which discharged *Royal Newfoundland*

Regimental number *5551.*

Intended address *King's Cove B. B.*

Height on discharge *5 Feet 10*

Color of hair on discharge *Light Brown*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks

Figure on discharge *Tall*

Christian name of Father *Thomas*

Christian name of Mother *Clara*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *King's Cove 16-10-1899*

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) *Andrew Brown* *AC*
(Rank)

Station



Date

JUL 4 1919

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

7182

Kings Cove

Capt Maddick.

24/10/19

Morletta Building
St Johns

Dear Sir

I here-by make
application for my discharge
Badge which I am entitled to as
a member of the Regiment.

Yours sincerely

5551 ^{Mr} A. Brown
Camp Cove
B.K.

Andrew Brown
C/O 8 Leaches

Kings Cove

ms
/

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,



Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S, Nfld.

Fold Here



OCT 15 1921.

The accompanying ~~Victory Medal and/or~~ British War Medal
is/are forwarded herewith to

Andrew Brown

in respect of his service as No. 5551 Rank Pte.

Name A. Brown Royal Nfld. Regt.
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received ~~24/10/21~~ B. W. Medal

Signature Andrew Brown

Date 24/10/21

Address Kings Cove. Bonai Bay.

[P.T.O.]

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5551 Rank Plt Name Brown, A
 Date of Enlistment 31.5.18 Address Kings Cove District Bonaville
 Occupation School Teacher Classification for Discharge 16 Medical Category A I
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 14.7.19 O. C. Discharge Depot ins Hr

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

Andrew Brown

Particulars passed to Vocational Officer for information and action.

Date 17-7-19 *J. Snowless*

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable £6.00

(b) ~~Clothing~~ Supplied OK

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

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R2225* to his home at *Kings. bore* and Release Certificate No. *3275* issued.

Date *7-7-19*

J.A. Knowlton
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to *1-7-19*

Date *1-7-19*

Depot Paymaster.

Discharge approved for *21-7-19*

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

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1
F 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1015	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 *1-7-19*

J.A. Knowlton
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

JUL 21 1919

Date

J.R. Cooper Capt.
O. C. Discharge Depot.

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

Date *July 21/19*

[Signature]

Reg. No. 5551 Rank Pvt Name Brown, A. 1 Co
 Attested 31-5-18 Address King Cove B. B.
 Allotment Supters 5 Allottee John Brown (Father)
 Date of Allotment 1-7-1918 Returned from Overseas.....
 Embarked for Overseas SEP 22 1918 Cause.....

Vacc 1/20	
13/9/18	1st Troop 2nd Moc 14-9-18
5/10	16/9/18 to 23/9/18
29/9	Advised by Doctor Leonard suffering from Influenza
30-9-18	adm - to m. I. L. (mumps)
12-9-18	Discharged from m. I. L. to billets 7 7 days off duty
19-9-18	" " 7 7 days off duty
24-9-18	Admitted to Barracks Hoop
31-9-18	Discharged from Barracks Hoop to 7 days off duty

Reg. No. *5357* Rank *Y6* Name *Brown A.*

Attested Address *King's Cross*

Allotment Allottee ..

Date of Allotment Returned from Overseas *JUL 1 1919*

Returned on S *Cassandra* Cause *Discharge*

4.7.19

PASSED TO DEMOBILIZATION OFFICER

21.4.19

DISCHARGE APPROVED ON DEMOBILISATION.