



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6323 Name William Burke Corps ML

Questions to be put to the Recruit before Enlistment.

- | | |
|--|-------------------------------|
| 1. What is your name? | 1. <u>William Burke</u> |
| 2. What is your full Address? | 2. <u>Boon River</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>20</u> Years |
| 5. What is your Trade or Calling? | 5. <u>Lumberman</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. <u>Yes</u> Name |
| 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> Corps |

I, William Burke 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.

William Burke SIGNATURE OF RECRUIT.
Robertson Signature of Witness.

15/10/18

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, William Burke 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 Boon River on this 15th day of Oct 1918.

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 Oct. 16, 1918 1918
 Place St. John's

Robertson } Approving Officer.
 The Royal Newfoundland Regiment.

† 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)

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name William Burke
 Apparent age 20 years 11 1/2 months Height 5 feet 6 3/4 inches

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

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Matthew Burke
Boon River, Mo. 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, Redepotions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for 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 <u>Boon River, Mo.</u>									
Total Service forfeited as above									
Total Service towards Engagement to _____ (date of discharge)									
Pension									



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6323 Name William Burke Corps RC

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. William Burke
2. What is your full Address? 2. 6000 River Fortune St.
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 24 Years Months
5. What is your Trade or Calling? 5. Labourer
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, William Burke 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.

15/10/18

William Burke SIGNATURE OF RECRUIT.
E. Healey Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, William Burke 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 15th day of Oct 1918
Signature of Attesting Officer Ch. Dickson

†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 OCT 16 1918 1918
Place ST. JOHN'S
Robertson Capt } Approving Officer.
for Commanding Officer
The Royal Newfoundland Regiment.

† 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:
vis:—(Name) re-enlisted in the (Regiment) on the (Date)

6323

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name William Burke
 Apparent age 20 years 35 months. Height 5 feet 6 3/4 inches
 Chest Measurement { Girth when fully expanded 35 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Matthew Burke
born River 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>Discharged Jan'y 21st 1919</u>
Joined at _____ on _____									
Total Service forfeited as above.....									

Total Service towards Engagement to _____ [date of discharge] _____ years _____ days
 " " Pensions " " " " " " " " " " " "

C.R. 1823
Counter No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

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

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

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

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

St. John's Dept. of Militia.

Signature of Sender _____

Address _____

Line Number	Rcd	By	Sent	by	Check

Dated

Nov. 11. 1918

To

Mr. Matthew Burke,
Conn River, F.B.

beg to inform you that your son, #323 Pte. W. Burke, is now improved.

J.R. Bennett,
Minister of Militia.

FOR TYPEWRITER

C.R. 6323

Extract of Daily Orders Part II, dated Dec. 27th 1918.

DEMOBILISATION.

The undernoted man's discharge on Demobilisation has been approved by O.C. Discharge Depot from noted dates. He is removed from Depot strength and transferred to Discharge Depot pending confirmation by Officer i/c records.

6323 Pte. Wm. Burke

Discharged 24-12-18

C.R. 6323

Extract from Daily Index part II, Depot St. John's dated Dec. 28th. 18.

#6323 Pte. W. Burke. 19-12-18

G.R. 6323

Extract from Daily orders part 11, dated Nov. 1894.,
page St. John's.

#6323 pte. W. Burke.

TRANSFERRED FROM MID. HOSPITAL TO ASCABONI 27-11-18.

BC.

C.R. 6323

Extract from Daily Orders Part 11 Unit The Royal Nfld.Regt.,
St. John's Oct.22,1918.

6323 Pte. W. Burke.

Admitted to Barracks Hospital 21-10-18.

C.R!

6223

EXTRACT FROM DAILY ORDERS PART 11. DEPOT
ST. JOHN'S DATED OCTOBER 24th., 1918.

#6323 Pte. W. Burke.

ADMITTED TO BARRACKS HOSPITAL. 23/10/18.

BC.

C.R. 6323

Extract from Daily Orders, Part 11, UNIF: The Royal Newfoundland
Regiment, dated Dec. 7th. 1918.

HOSPITAL.

6323 Pte. W. Burke.

Transferred from Escaseni to Barracks Hospital 5/12/18.

C.R. 6323

Extract from Daily Orders part 14, Depot of John's
dated Sat. 22nd, 1918.

ADMITTED BARRACKS HOSPITAL 21-10-18.

#6323 Pte. W. Burke.

BC.

C.R. 6323

Extract from Daily Orders part II, Depot St. John's dated
January 22nd., 1919.

The discharge of the undemated on desabilitation have
been confirmed by Officer i/c Records on 23-1-19.

6323 Pte. Wm. Burke.

NEWFOUNDLAND POSTAL TELEGRAPHS.



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

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

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(NOT TRANSMITTED)

Signature of Sender

Address Dept. of Militia.

Line Number	Rcd	By	Sent	by	Check

Dated

Nov. 25th, 1918.

To

Mr. Matthew Burke,

Conn River, F.B.

Req to inform you that your son No. 6323 Pte. W. Burke, is
now convalescent.

J.R. Bennett,

Minister of Militia.

FOR TYPEWRITER

CR 6323
Counter No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



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I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender _____ Address _____
St. John's Dept. of Militia

Line Number	Red	By	Sent	by	Check

Dated Oct 25, 1918.

To Mr. Mathew Burke,
Conn River, F. Bay.

Regret to inform you that your son #6323 Pte. W. Burke, is now seriously ill at Military Hospital St. John's.

J.R. Bennett,
Minister of Militia.

FOR TYPEWRITER

C.R. 6323
Counter No.

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I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

St. John's Dept. of Militia

Signature of Sender

Address

Line Number	Recd	By	Sent by	Check
-------------	------	----	---------	-------

Dated Nov. 4, 1918.

To Mr. Matthew Burke,
Comm River, F.B.

Regret to inform you that your son #6323 Pte. W. Burke, is still seriously ill.

J.R. Bennett,
Minister of Militia.

NEWFOUNDLAND POSTAL TELEGRAPHS.



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I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

St. John's Dept. of Militia.

Signature of Sender _____

Address _____

Line Number	Rcd	By	Sent	by	Check

Dated Nov. 13th, 1918.

To Mr. Nathan Matthew Burke,

Conn River, F.B.

beg to inform you that your son #6323 Pte. W. Burke, is now

Convalescent.

J.R. Bennett,

Minister of Militia.

C.R. 6323
Counter No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



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I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender _____ Address **Dept. of Militia.**

Line Number	Rcd	By	Sent	by	Check

Dated **Nov. 18th, 1918.**

To **Mr. Matthew Burke,**
Conn River, F.B.

beg to inform you that your son # 6323 Pte. W. Burke, is now
Convalescent.

J.R. Bennett,
Minister of Militia.

FOR TYPEWRITER

C.R. 6323

Extract from Daily Orders, Part 11, Unit: The Royal Newfoundland
Regiment, dated October 17th 1918.

Strength Increases.

6323 Pte. Wm. Burke.

Attested for General Service with the Royal Nfld. Regt. from 15/10/18.

Bucke, W.

6323

Ray sept.

7-28

January 21st., 1919

#6323 Pte. William Burke,

Conn River,

Fortune Dist.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 612."

Yours faithfully,

Captain,
Paymaster & O. I/C Records

Enc'l 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 6323 Rank Pte Name Wm Burke
 Intended place of residence Conn River Station
2. Occupation Lumberman
 Classification of soldier C Medical Category A11
3. The above named man is discharged in consequence of..... **DEMOBILIZATION**.....
4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.
- Place DEC 20 1918
 Date
- W. H. C. Capt.*
 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 Johns
Dec. 21. 18
- William Burke*
 Signature of soldier
R. B. Duke Cpl
 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
Dec. 20th 1918
- William Burke*
 Signature of soldier
Raymond St
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 15. 10. 18 No of days on Military
 Discharged from service 24. 12. 18 plus 28 days Service 99

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge of Records, The Royal Newfoundland Regiment, twenty-eight days from date.
- Place ST. JOHN'S
 Date DEC 24 1918
- R. H. Lait Capt.*
 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
 Date January 21/1919
- M. Howley Capt*
 Officer in Charge of Records
 The Royal Newfoundland Regiment

2018-2079/612

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6323 Rank Plt Name Burke W
 Date of Enlistment 15.10.18 Address Lower River District St. John's
 Occupation Labourer Classification for Discharge P Medical Category A
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

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

Date 20.12.18.....

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

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

William Burke

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 Joseph H. Shaw.....

Date 20.12.18.....

(c) Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R 379* to his home
 at *Greenboro* and Release Certificate No. *531* issued.

Date *20-12-18* *RBDicks 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 *21-1-19*

Date *20-12-18* *W. H. C. Capt.*
 Depot Paymaster.

Discharge approved for *24. 12. 18*

Forwarded with following documents to O.C Discharge Depot.

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

Date *24. 12. 18* *RBDicks Capt*
 Demobilization Officer.

APPROVED.

Documents as above forwarded to—

Officer i/c Records.
 Board of Pension Commissioners.

with following additional documents.

Date *DEC 24 1918* *R.H. Capt*
 O. C. Discharge Depot.

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

Date *Dec. 27/1918*

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

MEDICAL HISTORY

OF

Surname Barke

Christian Name William

Table I.—GENERAL TABLE

Birthplace :—Parish Conatives County Newfoundland

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	on <u>15th</u>	day of <u>Oct</u>	on	day of
	at <u>St John's</u>		at	
Declared Age	<u>29</u>	years		days
Trade or Occupation	<u>Lumberman</u>			
Height	<u>5</u>	feet <u>6³/₄</u>		inches
Weight	<u>128</u>	lbs.		lbs.
Chest Measurement	Girth when fully expanded	<u>35</u>		inches
	Range of Expansion	<u>3</u>		inches
Physical Development				
Vaccination Marks	Arm	Right	Left	Right
	Number			
When Vaccinated				
Vision	R. E.—V=	<u>6</u>	R. E.—V=	
	L. E.—V=	<u>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>Lamont Peterson</u>			
(Rank)		Medical Officer		Medical Officer
Enlisted	at <u>St John's</u>		at	
	on <u>15th</u>	day of <u>Oct</u>	on	day of
		191 <u>8</u>		191
Joined on Enlistment	Corps	<u>1st Regt</u>	Corps	
	Regtl. No.	<u>6323</u>	Regtl. No.	
Transferred to				
Became non-effective by				
(Signature)	on	day of	on	day of
(Rank)		191		191

ist in case of Warrant Officers treated in quarters

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

Signature of Medical Officer

Waterson mjr

Waterson mjr

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 work as a lumberman

William Burke

Signature of Man.

A. B. Dicks Capt

Signature of the Vocational Officer or his Representative.

Reg. No. *6323*

Place

St Johns

Date

Dec 20th 1918

(in Barrack Street) Discharged from Hoop. Toelme

Demobilization Form 1

4500^a

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 *5 Dec 1918*

Regimental No. *6323*

Name *Burke William*

Address *Corn River*

Present Medical Category *A II*

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

Members of Board { *R.H. Dart Capt.*
O.C. Discharge Depot.
J. Paterson
Senior Medical Officer
Geo. Gordon
M. O. Depot



Descriptive Return of a Soldier Discharged on Account of Disability

INSTRUCTIONS—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station," and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. i/c Records together with the remainder of the man's documents.

Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

Name in full *Burke, William*

Regiment from which discharged *1st. Newfoundland.*

Regimental number *6323*

Intended address *Conn River, Bay despoit*

Height on discharge Feet

Color of hair on discharge *Dark brown*

Complexion *Fair*

Color of eyes *Dark brown*

Descriptive Marks _____

Figure on discharge *Normal.*

Christian name of Father *Matthew*

Christian name of Mother *Katherine*

Wife's maiden name in full _____

Date and place of marriage } *not married*

Christian names of children } _____

Place and date of soldier's birth. *Conn River, Bay despoit Oct 31st 1898*

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)

William Burke

(Rank) *Pte.*

Station

Prince's Quik

Date

19/12/18

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.

J. R. Steele *Lieut*
Medical Officer i/c Hospital.
Unit, or Command Depot.

Station

Date

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at St. John's on Oct 15 1918

1. Name William Burke Age (a) Declared 20
(b) Apparent

2. Do you know of anything wrong with you? no

What severe illnesses have you had? None

*no
comp
marks*

Brown
Park
bullet mark on left eye

6323

3. Height 5-6 3/4 Weight 128

4. Eyesight (a) Left 6/6 (b) Right 6/6

5. Physical Defects (Examine after strenuous exercise) ~

6. Examination of Lungs ~

Measurement (a) Expiration 32 (b) Inspiration 35

7. Examination of Heart ~

8. Examination of Urine ~

9. Examination of Mouth—(Defective Speech)

Teeth fractured

Throat

Nose

Ears—(Otorrhea) 1/2

(Deafness)

10. Have you been successfully vaccinated, and when? no

11. Name and address of next of kin Father Matthew Conn River

12. Category 7B

REMARKS—

A

*W. Paterson
S. W. Burden*
Medical Examiners.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of Royal Newfoundland

Number of Sheet one
Signature of O. C. Company C. D. Dickson

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	
No.	<u>6323</u>	Age on	<u>20</u> years <u>0</u> months	<u>Lumberman</u>		
Joined	Date	Place and Date of Enlistment	<u>St John's</u>	Religion		
Joined	Date	Period of	with Colours <u>99</u> years	Place of Birth		
Joined	Date				with Reserve <u>3 1/2</u> years	<u>St John's</u>

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<u>Demobilized St John's 21/19</u>					

To be carried over.

Army Form B. 121.

Depot 6323

Demobilisation Form 2

The Royal Newfoundland Regiment

4

DEMOBILIZATION OF

Reg. No. 1323 Rank Plt Name Burke Wm
 Date of Enlistment 15.10.18 Address Lower River District Fortune
 Occupation Lumberman Classification for Discharge C Medical Category AE
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

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

Date 20.12.18 Wm Burke
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

William Burke

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 Joseph H. Snowling

Date 20-12-18 O/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R 379* to his home at *Donn Know B. K. K. K.* and Release Certificate No. *531* issued.

Date

20-12-18

C. B. Dicks 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 *21-1-19*

Date

21-1-19

W. Howley Capt.
Depot Paymaster.

Discharge approved for

24-12-18

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

24-12-18

C. B. Dicks Capt
Demobilization Officer.

APPROVED. *SK*

Documents as above forwarded to:-

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Date

DEC 24 1918

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

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

Date

Dec 27/1918

W. Howley Capt
Depot Paymaster.

Reg. No. *6323* Rank *Pte* Name *Burke Wm*
Attested *15-10-18* Address *Leam Street*
Allotment *604* Allottee *Matthew Burke (God Father)*
Date of Allotment *1-11-18* Returned from Overseas.....
Embarked for Overseas Cause.....

Vacc 16^{10/18}
21-10-18 adm. to Barracks Hosp.
23-10-18 Transferred to H. S. S.
27-11-18 " from " Seasonal
5-12-18 " " " to Barracks Hosp.
19-12-18 Discharged from Barracks Hosp.

DEC 20 1918

PASSED TO DEMOBILIZATION OFFICER

DEC 22 1918

DISCHARGE APPROVED ON DEMOBILISATION.