



FIRST NEWFOUNDLAND REGIMENT

4259

ATTESTATION OF

No. 4259 Name Elias Burton Corps Methodist

Questions to be put to the Recruit before Enlistment.

- | | |
|--|-------------------------------------|
| 1. What is your name? | 1. <u>Elias Burton</u> |
| 2. What is your full Address? | 2. <u>Port au Port</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>18</u> Years <u>11</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Fireman</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, Elias Burton do solemnly declare that the above answers made by me to the above questions are true, and that I am able to fulfil the engagements made.

H Elias Burton SIGNATURE OF RECRUIT.
99/12/17 Frank Matthews Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Elias Burton 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 19 day of December 1917

George Learty Major
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 7th regiment

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

Date 19 December 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 Charles Burton
 Apparent age 18 years 11 months. Height 5 feet 7 inches
 Chest Measurement { Girth when fully expanded 36 inches
 Range of expansion 33 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Archibald Burton
 | 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>19-12-17</u>									
joined at <u>St John's</u> on <u>December 19-17</u>									
<u>Discharged July 7 1919</u>									
<u>Embarked St John's by train to Halifax N.S. 28³ 18.</u>									
<u>Embarked for B.C. 31-8-18. Joined Ban Depot 2-9-18.</u>									
<u>Joined Batta in the field 3-9-18. Transferred from power 22⁷ 19.</u>									
<u>Arrived Winchester 26-4-19. To H.Q. for demobilization 22-5-19.</u>									
<u>Arrived Newfoundland 1-6-1919</u>									
<u>Demobilization St John's 7-7-19</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 7-7-19 (date of discharge) 1 years 201 days
 " " Pensions " " " " " " " " " " " "

C.R. 4259

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.

4259, Pte. E. Burton.

C.R. 4259

Extract from Daily Orders part II, Unit the 42nd I.D.R.
dated July 9th. 1919.

The discharge of the undernoted on demobilization
has been confirmed by Officer i/c Records on noted
date.

#4259 Pte. ^PElias. Burton.

7-7-19.

6524 CR

Extract from Daily Orders Part II Unit The Royal RFLC.
Regt. Depot St. John's, June 15th, 1919.

The discharge of the Undermentioned on Concomitance has been
approved by C.O. Discharge Depot with effect from 23-6-19.

4259 Pte. E. Burton.

C.R. 4259

Extract from Rally Orders Part 11 Depot, St. John's,
Date 12-6-19.

4259 Pte. E. Burton

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

CR. 4259

Extract from Medical Report 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 26/4/19 and reached
Hazeley Iowa Camp 28/4/19.

#4259 Pte. E. Burton.

C.R. 4259

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

4259 Pte. Burton E.

C.R. 4259

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

4259 Pte. Burton E.

C.R. 4259

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, Dec.20th, 1917.

4259 Pte. E. Burton.

Attested for General Service with the 1st Nfld. Regt. with
effect from Dec.20th/17.

C.R. 4259

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, Dec.20th, 1917.

4259 Pte. E. Burton.

Attested for General Service with the 1st Nfld. Regt. with
effect from Dec.20th/17.

C. Burton

4259.

P. & P. Co

Medical Report on an Invalid.

Station Hazelby Down Camp
Date 1-5-19

- | | |
|--|---|
| <p>1. Unit <u>Royal Newfoundland</u></p> <p>2. Regimental No. <u>4259</u></p> <p>3. Rank <u>Pvt</u></p> <p>4. Name <u>Boston Elias</u></p> <p>5. Age last birthday <u>20</u></p> <p>6. Enlisted { on <u>Dec 18/17</u>
at <u>St Johns</u></p> | <p>7. Former Trade } <u>Fisherman</u>
or Occupation }</p> <p>7A. If with previous service in Army, state—
(a) Former Unit;
(b) Regimental No.;
(c) Date of Discharge;
(d) Cause of Discharge.</p> |
|--|---|

8. Disability in respect of which invaliding is Proposed.
(Other disabilities should be reported upon in answer to question No. 19).

Statement 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.
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
nil
nil
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.

na

13. What is his present condition?

No complaint of disability

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

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

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

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

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

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

na

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

na

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?

na

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.

na.

Reparation

20. Do you recommend—

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

W. C. Proctor
Sgt. M. M., Capt R.A.M.C.
 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.

FORM K

N^o 4613



1st. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Eless Burton, Regl. No. 4759
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
 Dollars and 50 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 July 1st 1918.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3695	Mother.	Mrs Arch Burton	Sunday Cove Is Port Antonio Nfld	50
Total Allotment, \$			50	

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, counter-
 signed by the Officer Commanding Company and handed to the Paymaster as authority to make the
 required payments on application.

Sig.) [Signature]
 Officer Commanding
 H Company
[Signature]
 Jan 22 1918

(Sig.) Eless X Burton
 (Rank) Pte.
[Signature]

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

Sir:-

Please charge the amounts set opposite my name to my account and pay it to the N.W.A. "Prisoners of War Fund" in quarterly instalments for the period of one year.

Commencing on 1st July 1918.

Regtl. No.	Rank.	Name	Amount	Signature.
4259	Plt	Burton E.	\$2.50	

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

Date

June 26th 1918

E. Burton

Burton, E

4259

Key Sept

July 7, 1919

#4259 Pte. Elias Burton,

~~Post~~ ~~at~~ ~~an~~ ~~son~~, N. D. B.

Dear Sir:-

Please find enclosed Discharge
Certificate No. 2708.

Yours truly

Captain,
Quartermaster & O. I. c Records.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4259 Rank Pvt Name Burton E
 Intended place of residence Port Amson
2. Occupation Fisherman
 Classification of soldier F Medical Category A 1
3. The above named man is discharged in consequence of.....
DEMOBILIZATION.

Eligible for War Service Gratuity
4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.
 Place ST. JOHN'S.
 Date JUN 9 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 and date ST. JOHN'S JUN 9 1919
 Signature of soldier Elias X Burton
 Signature of witness Am Johnston

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 JUN 9 1919
 Signature of soldier Elias X Burton
 Signature of witness James O Newman

STATEMENT OF SERVICE

7. Enlisted for service 19-12-17 No of days on Military
 Discharged from service 23-6-19 plus 14 day Service 566

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
 Date JUN 23 1919
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed
- Place St Johns, Nfld
 Date July 7/1919
 Officer i/c Records
 The Royal Newfoundland Regiment

a 7/20/19/2708

The Royal Newfoundland Regiment

Class for Demobilization

F. 6.

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

7.6.19

Regimental No.

4259.

Name

Buxton Elias

Address

Port Anson N. F. B.

Present Medical Category

A-1

Recommended for:—

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

Members of Board

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

Paterson
Senior Medical Officer

Sw. Borden
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4359 Rank Plt Name Burton E
 Date of Enlistment 19-12-17 Address Port Antonio District Tullyport
 Occupation Postman Classification for Discharge E Medical Category H
 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	/
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 7-6-19

[Signature]
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

i. Civil Re-Establishment.

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

by Eleanor Burton
Postman

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 [Signature]

Date 9-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R.1617* to his home
 at *Port Anson* and Release Certificate No. *2492* issued.

Date *9-6-19* *J.A. Snowlett*
 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 *7-7-19*

Date *9-6-19* *H.M. [unclear]*
 Depot Paymaster.

Discharge approved for *23-6-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med	D.F. 1
E 178	W 3494	B 122	Board 1st	" 2
F 178a	D 400A	B 1915	do 2nd	" 3
D 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		

2 Form B

Date *9-6-19* *J.A. Snowlett*
 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 23 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

Burton E.

Signature of Man.

Reg. No. 4259.

J. A. Snowlet

Signature of the Vocational Officer or his Representative.

Place St. Johns.

Date JUN 9 1919 191

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

MEDICAL HISTORY

Surname Boston Elias OF Christian Name _____

Table I.—GENERAL TABLE.

Birthplace:—Parish Port Antonio N.D. 6 County Rifles

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>19th</u> day of <u>Dec</u> 191 <u>7</u>	at <u>St. John's</u>	on _____ day of _____ 191	at _____
Declared Age	<u>18</u> years	<u>11</u> <u>Months</u>	years	days
Trade or Occupation	<u>Bookbinder</u>			
Height	<u>5</u> feet	<u>7</u> inches	feet	inches
Weight		<u>126</u> lbs.		lbs.
Chest Measurement	Girth when fully expanded	<u>36</u> inches		inches
	Range of Expansion	<u>3</u> inches		inches
Physical Development				
Vaccination Marks	Arms			
	Number			
When Vaccinated				
Vision	R. E.—V=	<u>6/10</u>	R. E.—V=	
	L. E.—V=	<u>12</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>Lammie Paterson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St. John's</u>	on <u>19th</u> day of <u>Dec</u> 191 <u>7</u>	at _____	on _____ day of _____ 191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
Transferred to	<u>1st Rifles</u>	<u>Regt 4259</u>		
Became non-effective by	on _____ day of _____ 191		on _____ day of _____ 191	
[Signature]				
[Rank]				



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 *Elias Burton*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4259*

Intended address *Port Huron, USA*

Height on discharge *5* Feet *7*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *— medium*

Figure on discharge *Arch.*

Christian name of Father *Charlotte*

Christian name of Mother *—*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Port Huron, 22nd January 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) *Elias X Burton*
Burton

ST. JOHN'S.

Plb
(Rank)

Station *ST. JOHN'S.* Date *5-6-19*

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

Station

Date



The Royal Mtd. Regiment

DEMOBILIZATION

No. 425 Rank

Name *Burton S*

Warned for demobilization on

JUN 8 1919

Medical Report on an Invalid.

Station Hazelton BarracksDate 15/19

1. Unit Royal Newfoundland
2. Regimental No. 4259
3. Rank plc
4. Name Burton Elias
5. Age last birthday 20
6. Enlisted { on Dec 15/17
at Pt. John
7. Former Trade or Occupation } Fisherman
- 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).*Statement 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. nil
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. nil
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). na.
- (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?

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

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

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

na.

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

na.

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?

na.

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.

na.

Repatriation

20. Do you recommend—

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

W.S. Proctor *Capt Ramo*

Officer in medical charge of case.

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

Station *Moyley brown*

Date *1/5/19*

Officer in charge of Hospital.

*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.

Casualty Form—Active Service.Regiment or Corps Royal Newfoundland19-1-1898Rank Pte Surname Burton Christian Name EliasReligion Meth. Age on Enlistment 18 years 11 monthsEnlisted (a) 19/1/17 Terms of Service (a) Duration Service reckons from (a) 19/1/17

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

Extended { } Re-engaged { } Qualification (b)
or Corps Trade and RateOccupation Fisherman H. Long Capt Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
			Embarked ...	31 AUG 1914	
			Disembarked...	31 AUG 1918	
<u>26. 8. 18</u>	<u>AE</u>		ARRIVED D.I.B.D.	2 SEP ...	
			Joined Battalion	5 SEP 1918	
			<u>Arrived in UK</u>	<u>23/4/19</u>	

NEXT OF KIN: Father Archibald Burton Port Ason Newfld

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

(b) Signaller, Shoeling-Smith, &c.

July 8, 1919

#4259 Pte. Elias Burton,

Port Anson, N.D.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 & O.i/c Records.

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 *Elias* 2. Surname *Barton*
3. Rank *Plt* 4. Regtl. No. *4259*
5. Address in full to which future payments of gratuity are to be forwarded *Port Hason, N.S.B.*
6. Date of enlistment in the Regiment *Dec. 18/17*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued immediately prior to your discharge.....
8. Relationship of such dependents.....
9. Address in full of such dependents.....
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....
11. Were you on active service only in Mfld, if so, give dates and particulars of such service *Overseas*
12. Give total length of time which you served on active service whether in Mfld. or Overseas *From Dec. 18/17 to June 9/19* 1. $\frac{2}{2}$

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.

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.? *No* If not give - (a) date of discharge *June 9/19* (b) Reason for discharge

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 Sept. 18 to April 1919

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee? *No*

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

Signature of Applicant: *Elias X Burton*
 Place of Residence: *Port Anson, N.D.B.*
 Declared before me at: *St. John's, Nfld*
 This *9th* day of *June* 19*19*

John M. Carthy
 Signature of Berrister of the
 Supreme Court, Stipendiary Magis-
 trate, 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.				Paymaster

The Department of Militia;

The sum of *five dollars* \$ *5.⁰⁰/₁₀₀* Dollars is due

Mr. *Melvin Boat* for

Reg. No. *4759* Rank *Plé* Name *Burton E Paul Anton*

from *Paul Anton* to *Paul Anton*

ACCOUNT	
CH NO	<i>9286</i>
IND LEDGER	
PAY LEDGER	
GEN LEDGER	

Endowment for \$ *5.⁰⁰/₁₀₀*

J. A. Shaw
3-9-19

W. S. A.
Captain
Demobilization Officer

3

Sept. 2, 1919

Pte. E. Burton,
Fort Anson,
N.D.B.

Dear Sir:



I enclose herewith cheque
for \$5.00, amount due you for travelling ex-
penses to your home.

Yours truly,

Major
Paymaster.

LM/
Enc. 1

Post-Arson.

June. 27. 619

Capt Snow

Dear Sir

Just Writing you a
Note. Concerning My Passage. I had to
Come by Mrs Boat. As you know the home
was Ice bound. So it Cost me 100 to get
to Post Arson I Am returning My ticket

Account for \$5.00
A Snow Capt.
26. 8. 19
From Yarn Mr. Elias Buxton
Post Arson

Receipt for Army Book 64

No. 4209 NAME..... Burton

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

Name. L. L. Burton

Date July 26

Place Port au Prince S. L. I.

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

AS

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Form
B. 121
2a

Regiment of

1st Newfoundland

Signature of O. C. Company

Number of Sheets
2
W. H. W. W.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay				
No.		Age on	18 years 11 months	Fireman					
Joined	Date	Place and Date of Enlistment		Religion					
Joined	Date			Meth					
Joined	Date	Period of	with Colours 2.01 years.	Place of Birth					
Joined	Date		with Reserve 1.365 years.						
1237	Burtin E.								
Place	Date of Offence	Rank	Class of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
St Johns	Nov 3-18	Pvt.		Absent from billet without leave	St Johns R.P.	7 Days L.P.	10-18	H. H. Learty Major.	AB
				Punitive for hump					
				Demobilized St Johns		7 3/4			

To be carried over

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 11259 Rank Plt Name Burton E
 Date of Enlistment 19-12-17 Address Port L'Anson District Tullyhett
 Occupation Fisherman Classification for Discharge E Medical Category H
 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 7-6-19 for W. H. H. O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

li
Edward E. Burton
new man

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 W. H. H.

Date 9-6-19 O. i.c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R.1617 to his home at Paterson and Release Certificate No. 2492 issued.

Date 9-6-19

J.A. Snow 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

Date 9-6-19

H.M. Smith
Depot Paymaster.

Discharge approved for

23-6-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	/	N.F. Med.	D.F. 1	/
E 178	W 3494	B 122	/	Board 1st	" 2	/
F 178a	D 400A	B 1915	/	do 2nd	" 3	2 Form B
L 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 9-6-19

J.A. Snow 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 23 1919

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

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

Date June 19/19

James Keith
for O.C. Records

Reg. No. *4259* Rank *Pfc* Name *Burton E.*

Attested Address *Port Anson*

Allotment Allottee

Date of Allotment Returned from Overseas *29-3-49*

Returned on S.S. *Corsican* Cause *Discharge*

7619 PASSED TO DEMOBILIZATION

23-6-49 DISCHARGE APPROVED