



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 2702

Name Robert Burton Corps



### Questions to be put to the Recruit before Enlistment.

1. What is your name? ..... I. Robert Burton
2. What is your full Address? ..... 2. Rose Blanche
3. Are you a British Subject? ..... 3. Yes
4. What is your age? ..... 4. 19 Years 10 Months
5. What is your Trade or Calling? ..... 5. fisherman
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. Yes
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? ..... } II. Yes

FOR THE DURATION OF THE WAR

I, Robert Burton 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.

E. Gray 3rd ..... Signature of Witness.  
Robert Burton ..... SIGNATURE OF RECRUIT.  
E. Doyle ..... Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Robert 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 .....  
 on this 6th day of May 1916  
 Signature of Attesting Officer H. Dabridgeport 2nd Lieut.

### CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the .....  
 If enlisted by special authority, such will be attached to the original attestation.  
 Date ..... 191 ..... } Approving Officer.  
 Place ..... }

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.  
 ‡ Here insert the "Corps" for which the Recruit has been enlisted.

\* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows:  
 (Name) ..... re-enlisted in the (Regiment) ..... on the (Date) .....



2702



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 2702 Name Robert Burton Corps

### Questions to be put to the Recruit before Enlistment.

- 1. What is your name? ..... 1. Robert Burton
- 2. What is your full Address? ..... 2. Rue Blanche
- 3. Are you a British Subject? ..... 3. Yes
- 4. What is your age? ..... 4. 19 Years 10 Months
- 5. What is your Trade or Calling? ..... 5. Fisherman
- 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 } 11. Yes  
to be signed by you if you are accepted? ..... }

I, Robert Burton 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.

Robert Burton SIGNATURE OF RECRUIT.  
E. Gray 3rd Ch Doyle Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Robert 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 Johns on this 6th day of May 1916

Signature of Attesting Officer W. D. Bridgeport 2nd Lieut.

### CERTIFICATE OF APPROVING OFFICER.

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

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

Date ..... 191..... } Approving Officer.  
Place .....

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.  
‡ Here insert the "Corps" for which the Recruit has been enlisted.

\* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz:—(Name).....re-enlisted in the (Regiment).....on the (Date).....









This Form is to be used in connection with Pamph. M. E. (1)  
N. F. 1915

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of *Robert Burton*

aged *19* conducted at *6 L B*

Date: *May 3/16* Recruiting Officer:

NO OF TEST

FINDING

- 1 *no*
- 2 *no*
- 3 *no*
- 4 *no*
- 5 *no*
- 6 *no*
- 7 *yes*
- 8 *yes*
- 9 *no*
- 10 *n*
- 11 *n*
- 12 *n*
- 13 *n*
- 14 *n*
- 15 *n*
- 16 *n*
- 17 *n*
- 18 *n*
- 19 *no both*
- 20 *n*
- 21 *n*
- 22 *n*
- 23 *n*
- 24 *n*
- 25 *n*
- 26 *n*
- 27 *n*
- 28 *n*
- 29 *n*
- 30 *n*
- 31 *n*
- 32 *n*

*270<sup>2</sup>*

33 *yes 2 scars left arm 16 years ago*  
34 *5 1/2*  
35 *129 lbs*  
36 *32-35*

37 *\$4.00*  
38 *Mother Mrs William Burton Rose Blanch*  
39 *yes mother*

Signature of Medical Examiner: *William Roberts*

*7A*

C.R. 2702

Robert Burton was attested for General  
Service with the NEWFOUNDLAND REGIMENT ON May 3rd 1916  
Regimental No. 2702 was allotted to Pte R .Burton

AUTHORITY:

Record Ledger,

Dept. of Militia.

March 25th 1919

S. R.

2702

Extract from General Roll of 1814. Regt. Draft No. 20th  
from 2nd En. Depot, to 1st En. B. B. F. Embarked Polkstone,  
5-2-17.

2702 Pte. R. Burton.



C.R. 2702

Extract from Nominal Roll of MFLD. Regt, Draft No.11  
from 2nd B, Depot, to 1st Bn. B.E.F. Embarked Southampton  
S.10.14.

2702 Pte. R. Burton.

C.R.

2702

Extract from Daily Orders part II Depot St. John's  
dated Feb. 20th., 1919.

The discharge of the undernoted on demobilization have  
been APPROVED by C. G. Discharge Dept on noted date

19/2/19

#2542 Pte. Robert Burton.

BLANDFORD

C.R. 2702

Extract from Preliminary Report of the Medical Board held on Thursday  
February 13th 1919.

2702 PTE. R. Burton.

Recommended Discharge as Permanently Unfit.



C.R. 2702

Extract from Daily Orders part II depot Ft. John dated Dec. 23/1916.

The undermentioned returned from overseas and reported to depot  
21-12-16.

2702 Pte. R. Burton.

C.R. 2705

Extract of Casualties received from Pay & Record Office,  
London, dated January 15, 1918.

#2702 Pte. R. Burton.

was discharged from the Military Hospital, Richmond  
28/1/18 and granted furlough to 6/2/18 Classed 111 Employ-  
-ment.

C.R. 2703

Extract of Casualties received from Pay & Record office,  
London, dated January 15, 1918.

#2702 Pte. R. Burton.

was discharged from the Military Hospital, Richmond  
28/1/18 and granted furlough to 6/2/18 Classed III Employ-  
-ment.



C.R. 2702 ✓

Extract from ~~the~~ Nominal Roll of repatriation draft No. 79, per  
S. S. CORSICAN, which embarked at Tilbury Docks 12/12/18 from  
the 2nd., Battalion of the Newfoundland Regiment.

#2702 <sup>5</sup>te/ R. BURTON.

C.R. 2702

Extract from Daily Orders Part 11, UNIT: The Royal  
Essex Regiment, dated 29th. Dec. 1917.

**SEARCH.**

2702 Pte. R. Burton.

Invalided to U.K. 25.11.17. <sup>Wid.</sup> ~~Wid.~~

C.R.

2702

Extract of Casualty received from Pay & Record Office,  
London, dated December 4<sup>th</sup> 1917.

#2702 Pte R. Burton. ✓

Wounded 20/11/17.

C.R. 2702

NO. 2702 PRIVATE ROBERT BURTON.

EXTRACT OF CASUALTY LIST RECEIVED FROM THE PAW AND RECORD OFFICE  
LONDON DATED NOVEMBER 29th, 1917.

ADMITTED MILITARY HOSPITAL GROVE ROAD RICHMOND GUNSHOT WOUND  
LEFT HAND (PREVIOUSLY REPORTED ETAPLES OCT. 10th.)

✓



**WFOUNDLAND 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)**

Signature of Sender \_\_\_\_\_

Address \_\_\_\_\_

Line  
Number \_\_\_\_\_

Rcd \_\_\_\_\_

By \_\_\_\_\_

Sent \_\_\_\_\_

by \_\_\_\_\_

Check \_\_\_\_\_

Dated

November 29, 1917.

To

Mrs. William Burton,

Rose Blanche.

Record Office, London, today reports Bo. 2702, Private Robert Burton, has now been admitted to Military Hospital Grove Road, Richmond., gunshot wound left hand.

R.A. SQUIRES

Colonial Secretary

**FOR TYPEWRITER**

2702 Pte. Robert Burton. ✓

C.R. 3734

Ext. of Casualty list received Oct 20, 1917.

Neck Mild, 7th Canadian General Hospital

Etaples, Oct 10, Shell Wounds.

# 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 \_\_\_\_\_

Line Number	Recd	By	Sent	by	Check

Dated October 20, 1917.

To Mrs. William Burton,  
Rose Blanche.

Regret to inform you that Record Office London, officially reports No. 2702, Private Robert Burton, was at Seventh Canadian General Hospital, Etaples, October tenth, suffering from mild shell wounds in the neck.

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

~~JOHN G. BENNETT~~, R.A. SQUIRES  
Colonial Secretary.



**WFOUNDLAND POSTAL TELEGRAPHS.****Cable Connection with all the World****All Messages Sent are Subject to the Following Conditions:**

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**(NOT TRANSMITTED)**

Signature of Sender \_\_\_\_\_

Address \_\_\_\_\_

Line  
Number \_\_\_\_\_

Rcd \_\_\_\_\_

By \_\_\_\_\_

Sent \_\_\_\_\_

by \_\_\_\_\_

Check \_\_\_\_\_

Dated

23rd March, 1917.

To

Mrs William Burton,

Rose Blanche.

Latest report received states No. 2702 Private Robert  
Burton progressing favourably.

J. R. BENNETT,

Colonial Secretary.

# The Anglo-American Telegraph Company Ltd.

ESTABLISHED 1866

EIGHT ATLANTIC CABLES  
AUTOMATIC DUPLEX SYSTEM

TELEGRAPH CO.

MAR 22 1917

ST. JOHN'S,  
NEWFOUNDLAND.

IN DIRECT TELEGRAPHIC COMMUNICATION WITH ALL PARTS OF THE WORLD.

No. 10/  
Wds.

TO {

Rose Blanche  
J. R. Bennett.  
Col Secy -

Please wire immediately  
if <sup>(2702)</sup> pte Robert Burton  
reported any letter  
Mrs Wm Burton

PLEASE HAND YOUR REPLY DIRECT TO THIS OFFICE.

# 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 Wm. M. Burton Address \_\_\_\_\_

Line Number	Rcd	By	Sent	by	Check

Dated 3rd March, 1917.  
To Mrs William Burton,  
Rose Blanche.

Regret to inform you that Record Office,  
London, officially reports No. 2702, Private  
Robert Burton admitted Wandsworth Tonsolitis.

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

J. R. BENNETT,  
Colonial Secretary.



C.R. 2702

Extract of Casualty List received from P.&R.O.

March 3rd. 1917.

2702, Pte R. Burton.

At 3rd London General Hospital Wandsworth 1/3/17.

Tonsillitis.

C.R. 2702

Extract from Casualties received from P.&.R. Office, London,  
Mar. 3, 1917.

Wandsworth:

2702 Burton.

Tonsillitis.

C.R. 2702

Extract from Casualties of Nominal Roll of sick and wounded  
at 3rd London General Hospital, Wandsworth S.W. admitted 1/3/17.

2702 Pte. Burton, R.

Tonsillitis



C.R. 2702

Extract of Nominal Roll Draft (All Ranks) to 1st Bn.,  
B.E.F. Embarked Southampton.

2702 Pte. R. Burton.

3-10-16.

CR 2702

Extract from Nominal Roll Embarked St. John's for Overseas,  
per S.S. "Civilian" July 19, 1916.

2702 Pte. Burton E.

R. Burton

C.R. 2702

~~ASD~~



1st. NEWFOUNDLAND REGIMENT 9

ALLOTMENTS

I, Robert Buxton

Regl. No. 2702

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and 00 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 25 1916

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAMR (in full)	ADDRESS	AMOUNT (each person)
2265	mother	Mrs Alice Buxton	Road Blanche	50
		Commencing 21/7/16.		
		Cancelled 31/12/17		
			Total Allotment, \$	

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

(Sig.) *Chas. H. Aye* Capt.  
Officer Commanding  
Company

(Sig.) *Robert Buxton*  
(Rank) *Private*

*James B*  
1916



No. 2902 Rank Pte Name Burton R.

Pay	F.A.	kg	Total
100	10		110
Less: Allotment			None
Net Rate			110

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£ s d				
						From	To							
Loss of khaki cover			1	0	Balance		6/7/17				16	11	0	
Balance					Pay @ net rate	7/17	31/12/17	178	60	106	80	21	18	11
Acquittance rolls		9	3	4	Station allowances 10 days @ 2/-									
Hospital Advances		0	10	6		1/19								
A.B. 34						28	1/19	28	110	30	80	6	6	7
P. & R.O. Payments		10	0	0										
	10-14-10													
Leash 5449	28/18	10	10	0	10-11-7 ✓									
					10-10-0									
					7-7									

30-12-5

*[Handwritten signature]*  
28/1/18

13858/9/P&A

**MEMORANDUM.**

From **MASTER & OFFICER IN CHARGE RECORDS,**  
**NEWFOUNDLAND CONTINGENT,**  
53, VICTORIA STREET  
LONDON, S.W. 1.  
ENGLAND.

To **Officer i/c.,**  
**Richmond Military**  
**Hospital,**  
**Richmond.**

Date **14th Decr.** 1917

*R. Burton*

2702, PTE. R. BURTON.

With reference to the enclosed application for cancellation of allotment 3/12/17 (7572): As it appears to be for his own personal benefit there is not objection to cancellation. Kindly complete N. F's P. 12 and return to this office, please.

NEWFOUNDLAND CONTINGENT	
PAY & RECORD OFFICE	
Ref. Nos IN	7908
Recd	17 DEC 1917
To Chief Pay & R/O Records	
H. Burton 27 P/12 Re -	
Liab	
Comm	
P & A	
R & C	
B & E	
P.S.	

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

*H. Burton* R. duly signed

*W. H. ...*  
Richmond Military Hospital  
Surrey.

Richmond Military  
Hospital

Dec 7<sup>th</sup> 1917

My Dear Sir:

I wish to get my  
Allotment stopped from  
December 20<sup>th</sup> 1917. If you  
could manage to do so. As  
it's going to no use in  
particular. But for my  
own use only. Kindly let  
me know if this can  
possibly be done and  
oblige.

Yours Obedient Servant.

Dr. R. Burton  
2702. B. Cr  
Newfoundland Regt  
Richmond M. Hospital  
Grove Road  
Surbiton  
England

PAID  
BY  
POST OFFICE  
ON

WPM

17/12/17

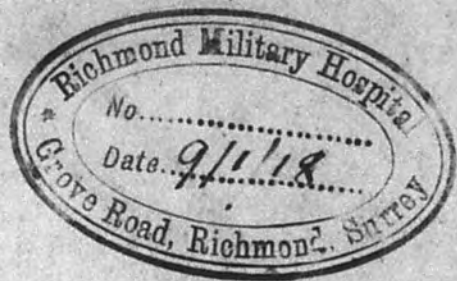
14542

8 DEC 1917

JPM

15/12/17





RICHMOND MILITARY HOSPITAL.  
Grove Road,  
RICHMOND, SURREY.

DATE ..... Jan. 9. 18.....

Regt. Paymaster.

Newfoundland Contingent

Please remit £ 7. 0. 0 (Seven pounds)  
to me at above address ..... and deduct same...  
from my credit.

Pd Burton, Robert 2702  
1 Newfoundland Regt.

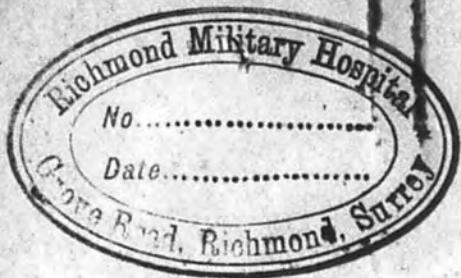
*Handwritten initials: RB, OK*

Pd Burton's  
mark  
X ppwarrin  
Capt. R. A. M. O.

Rect No 5145 for

Registrar.  
O.C. MILITARY HOSPITAL,  
Grove Road, Richmond,  
SURREY.





Ri 5199

RICHMOND MILITARY HOSPITAL.  
Grove Road,  
RICHMOND, SURREY.

OK  
Ed

DATE ... Jan. 12<sup>th</sup> 18

Regt. Paymaster.

Newfoundland Contingent  
58, Victoria Street, N.S.

Please remit £3- (Three pounds).....

to me ..... and deduct same...  
from my credit.

Burton R 2702

(Per Burton) R. A. M. O. Registrar  
Newfoundland Regt.

R. A. M. O.  
Registrar.

DUPLICATE  
ORIGINAL.

N.F.P./12.  
LONDON, E.C. 4.  
17 DEC 1917  
PAY & RECORD OFFICE

NEWFOUNDLAND CONTINGENT

CANCELLATION OF ALLOTMENT

1. I, (No) 2702 (Rank) Private (Name) Burton Robert  
hereby apply for cancellation of Allotment made by me on N.F.P./11  
No. 2372 dated July 21<sup>st</sup> 1917. in favour of  
Mrs Alice Burton, Mother.  
for \$ — cts 50 per diem.  
Such cancellation to take effect on the 31<sup>st</sup> day of  
December 1917.

2. I agree to accept all risks and consequences of this appli-  
cation failing to reach Headquarters, St. John's, in time to become  
operative at above nominated cancelling date; and that in the event  
of such non-delivery, and thereby the allotment continuing to be  
paid to the Allottee, I also agree to such further stoppage in the  
Pay Books as may be necessary, or otherwise to refund such overpaid  
amount or amounts.

Dated at

MILITARY HOSPITAL, GROVE ROAD  
RICHMOND, SURREY.

15/12/ 1917

R Burton  
Allotter.

Approved and Witnessed:

Lauan Major, R.A.M.C.  
O/C Richmond Military Hospital,  
Surrey.

NOTED  
W.M. Markin  
Date 18/12/17 P.M.C.

To be made out in TRIPPLICATE and delivered at the Pay &  
Record Office not later than date of cancellation, in  
accordance with P.&R.O. C.L./10, 9/12/16.

NEWFOUNDLAND CONTINGENT

N.F.P/33.

Temporary A/c.

Regtl No. 2702 Rank Pte.

Name Huxton Robert.

Pay	F. Allow	Working	Total
1 00	10¢		1 10
Less Allotment			50 ✓
Net Rate			1 60 ¢

Date	DEBITS	£ s d			CREDITS	£ s d		
		£	s	d		£	s	d
1917	Balance	1	1		Balance	22/12/16	7	9 10.
	<u>P.M. ADVANCES:</u>				<u>Pay @ Net Rate:</u>			
	A.B. 64							
	Acquittance Rolls	5	01		23/12/16 to 30/4/17 = 129 days			
	Hospital Advances	2	46		60. = \$ 7740	15	18	1 ✓
	<u>STOPPAGES:</u>				<u>Ration Allowance</u>			
	hospital dys =				30/4/17 to 9/5/17 = 10 days			
	forfeited pay dys ?				24 = \$	1	-	- ✓
	Miscellaneous							
	Cables				1/5/17 to 10/5/17 = 10 days	1	4	8
	<u>P. &amp; R.O. PAYMENTS:</u>				60 = \$ 6.00			
	Sundry Bills							
	Cash							
		20/4/17	17	00				
		10/5/17	8	50				
		19	-					



NEWFOUNDLAND CONTINGENT

N.F.P/109.

CIVIL EMPLOYMENT FORM

To be completed and signed by the Soldier and countersigned by the Officer Commanding his Company, and forwarded in DUPLICATE to the Pay & Record Office, 53, Victoria Street, London, S.W.1.

Regtl No. 2702. Rank Private  
Surname Burton Christian Names Robert

1. What was your regular occupation previous to enlistment? Fisherman  
2. Are you able to resume the same occupation? No.  
3. Will your former occupation be open to you when you have received your discharge? Yes  
4. If you do not think so, state fully reasons why.

5. If your former occupation is no longer available, what form of employment do you now seek? None  
6. If a new form of employment is rendered necessary by disability caused by Military Service, what training do you consider requisite? None

J. K. ...  
Signature of O.C. "F." Company.

Burton R  
Signature of Soldier.

Dated at

Hazelton Down Camp.  
Witchester

5-12-1918



LAST PAY CERTIFICATE

OFFICE COPY N.F.P./94

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 26/5/17.

Regtl No. 2702 Rank Pte. Name Burton. Unit ROYAL NEWFOUNDLAND REGT. who was repatriated to Newfoundland on 11/12/18. Authority \_\_\_\_\_ Cause \_\_\_\_\_

DR. STATEMENT OF ACCOUNT CR.

PARTICULARS		£	s	d	PARTICULARS		£	s	d	
Balance Dr. from					Balance Cr. from					
Allotment days @					Pay 19 days @ \$ 1.00	119	00			
Cash Payments:					Field Allowance 19 days @ \$ 1.10	119	00			
1st Pay.			1	10	0	120	90	1	4	
2nd "			1	14	0				5	
Other Debits:					Other Allowances days @ \$				11	
B. Damages				6	Other Credits:					
Misc Stopp.			1	5	Copy sent to oftn 21303/210					
					P.A. 24/12-18					
Total Debits			14	5	11	Total Credits			5	11
Balance due by Paymaster					Balance due to Paymaster					
			14	5	11				14	5

PERIOD: From 23-11-18 To 29-12-18

CHECKED

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of

F. Co. HAZELEY DOWN CAMP. Dec. 11th 1918.  
(Place) (Date)

Made up/Checked in accordance with information received in the Pay & Record Office and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London, 191 Chief Paymaster & Officer i/c Records.

Bunton B.

2702

Pay Dep't

ORIGINAL

N.F.P./12.

NEWFOUNDLAND CONTINGENT



CANCELLATION OF ALLOTMENT

1. I, (No) 2702 (Rank) Private (Name) Bustin Robert

hereby apply for cancellation of Allotment made by me on N.F.P./11

No. 2372 dated July 21<sup>st</sup> 1917 in favour of

Mrs Alice Bustin Mother

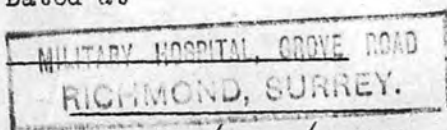
for \$ — cts 50 per diem.

Such cancellation to take effect on the 31<sup>st</sup> day of December 1917

2. I agree to accept all risks and consequences of this application failing to reach Headquarters, St. John's, in time to become operative at above nominated cancelling date; and that in the event of such non-delivery, and thereby the allotment continuing to be paid to the Allottee, I also agree to such further stoppage in the Pay Books as may be necessary, or otherwise to refund such overpaid amount or amounts.

*To take effect above date.*

Dated at



15/12/17 1917

Bustin R  
Allotter.

Approved and Witnessed:

Hallan  
Major, R.A.M.C.  
O.C. Richmond Military Hospital, Surrey.



To be made out in TRIPLICATE and delivered at the Pay & Record Office not later than date of cancellation, in accordance with P.&R.O. C.L./10, 9/12/16.



March 14, 1919

#2702 Pte Robert Burton,

Rose Blanche,

Dear Sir:-

Please find enclosed "Discharge Certificate  
No. 1351."

Yours truly,

Captain,  
Paymaster " U. I/ C Records



# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 2702 Rank PRC Name Burton Robt  
 Date of Enlistment 3 5 16 Address Rose Blanche District Bungee Chap  
 Occupation Soldier Classification for Discharge B Medical Category E  
 Recommendation S.M.B. Permanently unfit Disability Rating 40% L. 700  
 Passed to Demobilization Officer with following documents:—

N.F. P/36 <u>94 2</u>	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 <u>3</u>
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2	<u>3423A</u>	" 6
B 179c	B 120	M 93		

Date 15 2 19

W. M. M. Capt  
O.C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

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

Burton R

Particulars passed to Vocational Officer for information and action.

Date.....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable.....

(b) Clothing Supplied.....

Date 15-2-19

Joseph A. Lawrence  
O. i. c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 608 to his home at Rochblanche and Release Certificate No. 1074 issued.

Date 15-2-19

C. 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 5-3-19

Date 17-2-19

W. H. Key Capt.  
Depot Paymaster.

Discharge approved for 19 2 19

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36. <u>2</u>	B 268	B 121. <u>1</u>	N.F. Med.	D.F. 1. <u>1</u>	<u>Sum 8</u>
B 178. <u>1</u>	W 3494. <u>1</u>	B 122. <u>1</u>	Board 1st.	" 2. <u>2</u>	
B 178a. <u>1</u>	D 400A.	B 1915.	do 2nd.	" 3.	
B 179. <u>1</u>	D 400B.	Form L.	do 3rd.	" 4.	
B 179a. <u>1</u>	D 400C.	Form K.	do 4th.	" 5.	
B 179b. <u>1</u>	B 103.	ME 2. <u>3</u>	<u>3 4 3 A 1</u>	" 6.	
B 179c. <u>1</u>	B 120.	M 93.			

Date 17 2 19

C. Dicks 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 18-2-19

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

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

Date .....





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..... *Robert*..... 2. Surname..... *Burton*

3. Rank..... *Private*..... 4. Regtl. No..... *2707*.....

5. Address in full to which future payments of gratuity are to be forwarded..... *Rev. Blanchin*.....

6. Date of enlistment in the Regiment..... *Misses of Surgeons Hatfield*  
*April 1916*.....

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....

..... *Name issued or Paid*.....  
8. Relationship of such dependents..... *Wife*.....

9. Address in full of such dependents..... *Rev. Blanchin*  
*Misses of Surgeons Hatfield*.....

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.....

..... *Active Service in France*.....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *2 years & 6 months*.....

..... 1. <sup>2</sup>.....

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

*only one enlistment*

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

*None whatever.*

15. Have you been loaned with a War Service Budget?

*No*

16. Have you, during the present War, served in the Imperial Force?

*No.*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Force? 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 absence or inefficiency?

*Not applicable*

19. Are you now serving in the Regt. If not give: (a) Date of Discharge. (b) Reason for Discharge.

*No*

*Dec. 24/19*

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

*Cannot find actual origin. Can only say in Belgium France*

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: - *Robert Barton*

Place of Residence:

Declared before me at:

This 10th day of Aug. 1920  
*Geo. W. Duane*

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

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



LM-

August 30, 1920

Robert Burton,  
Rose Blanche,  
P.B.

Dear Sir:

With reference to your application for War Service Gratuity, I enclose five cheques for \$70.00 each, being amount due you on account of same.

Yours truly

Major  
Paymaster.

Enc. 5

Newfoundland Customs.

20

Port of the Plouche Bank 1918 27

M. M. Kelly Esq  
Widger's Office  
St John's Nfld

Allocated  
Cancelled  
Dec. 31/17

Dear Sir,

The last cheque for  
monthly allotment for my son Robert  
Reg No 2701 - was in January - and  
you kindly let me know why I  
had not received it since - the  
other has received two cheques since  
I received my last and I thought  
possibly mine had either been over  
looked or gone astray in the mail.

Kindly write in reply  
& oblige

Yours truly  
Alice M. Barton  
mark

M. M. Kelly  
R. Surry





used only for Special Reserve Recruits, and for Special Reservists of the Regular Army.

# MEDICAL HISTORY

OF

Surname Paton

Christian Name Robert

Table I.—GENERAL TABLE.

Birthplace:—Parish St. Andrew's County London



Examined on 3 day of May 1916 on 191  
 at St. Andrew's at 19 years 10 months days  
 Declared Age....  
 Trade or Occupation Tradesman  
 Height 5 feet 7 1/2 inches feet inches  
 Weight 129 lbs. lbs.  
 Chest Measurement { Girth when fully expanded... 35 inches inches  
 Range of expansion... 3 inches inches  
 Physical Development....



Vaccination Marks	Right		Left	
	Arm	Number	Arm	Number
				<u>2.</u>

When Vaccinated 4 years ago  
 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  
 (b) Slight defects but not sufficient to Cause Rejection



Approved by (Signature) L. M. Palmer  
 (Rank) Major Medical Officer.



Enlisted at St. Andrew's on 30 day of May 1916 on 191  
 Corps. Regtl. No. Corps. Regtl. No.

Joined on Enlistment St Andrew's 2707  
Regt


Transferred to NEWFOUNDLAND CONTINGENT

Became non-effective by on day of 191 on day of 191



(Signature)  
 (Rank)

Table II.—Only for admission to hospital or to the

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing syphilis, admission of the
	Day	Month	Year	Day	Month	Year			
3 <sup>RD</sup> LONDON GENERAL HOSPITAL WANDSWORTH.	1	2	17	30	4	17	Tonsillitis	60.	
 Richmond Military Hospital	27	11	17	28	1	18	4. lbs. left hand		

List in case of Warrant Officers treated in quarters.

on the cause, nature or treatment of the case likely to be of interest or of further use. In cases of  
and re-admissions to hospital will be shown. The subsequent progress, including particulars  
ment out of hospital, transfers, &c., will be given in the special syphilis case sheet.

Signature of Medical Officer

Reported sick in France 7.2.17 with  
Iritis & some catarrh of Larynx.  
Some anemia & Debility. Tilt in lungs  
& Heart. 9.3.17. Voice better. Debility  
Furlough.

G. C. Hall Capt Ins.

Amputation of finger. Healed, Discharged 27.12.30 (3)

P. P. Warner

Capt. R. A. M. O.

Registrar





**Notification to the O.C. Discharge Centre, that a Soldier is sent to a Discharge Centre with a view to Discharge, or Transfer to the Reserve whether in Substitution or otherwise.**

NOTE.—Army Forms W. 3961A, B and C are issued in sets of three and so arranged that they can be completed at the same time by the use of carbon paper for despatch by the O.C. unit to the Officers severally indicated.

The O.C. unit is to fill in the address of each Officer, to whom the Army Forms are sent, in the spaces provided below.

O.C. Discharge Centre, <i>Hazelbury</i>	A.F. W. 3961b has been sent to The Officer i/c Records, <i>58 Victoria</i>	A.F. W. 3961c has been sent to The Regimental Paymaster, <i>68 Victoria Road</i>
<i>Wentworth</i>	<i>London</i>	<i>London</i>

Authority has been given for the undermentioned soldier to be sent to the Discharge Centre for:— *repatriation*

- (a) Discharge as no longer physically fit for war service
- (b) Discharge as surplus to military requirements
- (c) Discharge as\* \_\_\_\_\_
- (d) Transfer to the Reserve
- (e) Claims repatriation to *St Johns* (Country) *St John* (Place)
- (i) Where enlisted *St Johns*
- (ii) Date of arrival in United Kingdom \_\_\_\_\_
- (iii) Port of arrival \_\_\_\_\_
- (iv) Ship on which arrived \_\_\_\_\_
- (v) Name of Shipping Line or Agent \_\_\_\_\_

Strike out whichever inapplicable. In certain circumstances the War Office authorises a soldier's transfer to Class W., or W. (T), of the Reserve only. In cases where the soldier is being sent to the Discharge Centre under such conditions the words "Class W., or W. (T), only" are to be inserted at (d).

(vi) Names and addresses of two references who can verify the above particulars

\_\_\_\_\_

\_\_\_\_\_

No. *2702* Rank *PLC*

Name *Burton Robert*  
(Surname) (Christian names in full)

Unit and Corps *Royal A.F.C.*

Authority *B. 179. C 13 C*

Army Forms B. 179A and B, B. 103, B. 178, D. 400 together with W. 3463A, B. 120, B. 122 and W. 3068, or temporary documents, for the above-mentioned soldier are forwarded herewith.

Station *Hazelbury*

Date *14/2/18* 191\_\_ O.C. \_\_\_\_\_

\* Insert cause other than under (a) or (b) above.

NOTE 1.—If the soldier claims to be repatriated abroad, and is prepared to embark at the first available opportunity, the O.C. unit is to complete such of the particulars as the soldier can furnish before transmitting the Army Forms.

In such a case the Officer i/c Records is instructed on Army Form W. 3961B to investigate the claim and notify the O.C. Discharge Centre by wire whether the claim has or has not been substantiated. In the event of the above notification not having been received from the Officer i/c Records the O.C. Discharge Centre is to refer to that Officer before approving the soldier's discharge.

**Notification to the Officer i/c Records, that a Soldier is sent to a Discharge Centre with a view to Discharge, or Transfer to the Reserve whether in Substitution or otherwise.**

**NOTE.**—On receipt of this notification the Officer i/c Records to ensure that he has all the documents of the soldier that should be in his possession, or prepare temporary documents in the event of loss of the originals.

Army Form W. 3961c has been sent to the Regimental Paymaster with instructions for that Officer to return it to the Officer i/c Records after having filled in the particulars of the names and dates of birth of the soldier's children, or particulars of dependants, for whom separation or dependants' allowance is being paid, on receipt of which it is to be attached to the soldier's documents. In the event of the soldier's discharge documents being forwarded to the Controller, Ministry of Pensions, Army Form W. 3961c is to accompany them whenever possible; the despatch of the documents is not, however, to be delayed for this purpose. If Army Form W. 3961c has not been received by the Officer i/c Records from the Regimental Paymaster in time for transmission with the discharge documents, it is to be forwarded to the Controller, Ministry of Pensions, as soon as received.

A.F. W. 3761A has been sent to O.C. Discharge Centre,	The Officer i/c Records,	A.F. W. 3961c has been sent to The Regimental Paymaster,
<i>Hazleydown 58 Victoria St Waltham</i>	<i>London</i>	<i>38 Victoria St London</i>

Authority has been given for the undermentioned soldier to be sent to the Discharge Centre for:— *repatriation*

- (a) Discharge as no longer physically fit for war service
- (b) Discharge as surplus to military requirements
- (c) Discharge as\* \_\_\_\_\_
- (d) Transfer to the Reserve
- (e)† Claims repatriation to \_\_\_\_\_  
(Country) \_\_\_\_\_ (Place) \_\_\_\_\_
- (i) Where enlisted \_\_\_\_\_
- (ii) Date of arrival in United Kingdom \_\_\_\_\_
- (iii) Port of arrival \_\_\_\_\_
- (iv) Ship on which arrived \_\_\_\_\_
- (v) Name of Shipping Line or Agent \_\_\_\_\_
- (vi) Names and addresses of two references who can verify the above particulars

Strike out whichever inapplicable. In certain circumstances the War Office authorises a soldier's transfer to Class W., or W. (T), of the Reserve only. In cases where the soldier is being sent to the Discharge Centre under such conditions the words "Class W., or W. (T), only" are to be inserted at (d).

No. *2702* Rank *Pte*  
 Name *Burton Robert*  
(Surname) (Christian names in full)  
 Unit and Corps *Royal A.F.C.*  
 Authority *B. 179. 413 C*  
 Station *Hazleydown*  
 Date *14/2/18* 191\_\_ O.C. \_\_\_\_\_

\* Insert cause other than under (a) or (b) above.

**NOTE.**—†If the soldier claims to be repatriated abroad and is prepared to embark at the first available opportunity, the O.C. unit has been instructed to complete such of the particulars as the soldier can furnish before despatching the Army Forms.

In such a case the soldier's claim is to be verified forthwith, and the O.C. Discharge Centre notified by wire whether it has been substantiated or not.



11 1914-9

**Notification to the Regimental Paymaster that a Soldier is sent to a Discharge Centre with a view to Discharge, or Transfer to the Reserve whether in Substitution or otherwise.**

**NOTE.**—This notification is sent in order that the Officer i/c Records, at the time the soldier's documents reach him from the Discharge Centre, may be in possession of particulars of the soldier's children or dependants in respect of whom separation or dependants' allowance is being paid.

(The particulars of the children are required by the Ministry of Pensions at the time of assessing the soldier's pension, and it is important that this Army Form should be returned to the Officer i/c Records in time for it to be despatched to the Controller, Ministry of Pensions, with the soldier's documents.)

To enable the Ministry of Pensions to make the assessment before the termination of the period covered by the temporary pension allowance and thereby avoid hardship to the soldier, it is essential that there shall be no delay in completing and forwarding this Army Form to the Officer i/c Records.

**PART I.**

A.F. W. 3961A has been sent to O.C. Discharge Centre,	A.F. W. 3961s has been sent to The Officer i/c Records,	The Regimental Paymaster,
<i>[Handwritten signature]</i>	<i>[Handwritten signature]</i>	<i>[Handwritten signature]</i>

Authority has been given for the undermentioned soldier to be sent to the Discharge Centre for:—

- (a) Discharge as no longer physically fit for war service
- (b) Discharge as surplus to military requirements
- (c) Discharge as\*
- (d) Transfer to the Reserve

Strike out whichever inapplicable. In certain circumstances the War Office authorises a soldier's transfer to Class W., or W. (T), of the Reserve only. In cases where the soldier is being sent to the Discharge Centre under such conditions the words "Class W., or W. (T), only" are to be inserted at (d).

(e)† Claims repatriation to \_\_\_\_\_ (Country) \_\_\_\_\_ (Place)

(i) Where enlisted \_\_\_\_\_

(ii) Date of arrival in United Kingdom \_\_\_\_\_

(iii) Port of arrival \_\_\_\_\_

(iv) Ship on which arrived \_\_\_\_\_

(v) Name of Shipping Line or Agent \_\_\_\_\_

(vi) Names and addresses of two references who can verify the above particulars

\_\_\_\_\_ (1)  
 \_\_\_\_\_ (2)

No. *9702* Rank \_\_\_\_\_

Name \_\_\_\_\_ (Surname) \_\_\_\_\_ (Christian names in full)

Unit and Corps \_\_\_\_\_

Authority \_\_\_\_\_  
 Army Form O. 1809E for the soldier is forwarded herewith.

Part II. of this Army Form is to be completed by you, or if necessary by the Secretary T.F. Association, and forwarded without delay to the Officer i/c Records. Station \_\_\_\_\_

Date *14/2/18* 191\_\_ O.C. \_\_\_\_\_

† Insert cause other than under (a) or (b) above.

**NOTE.**—† In cases where a soldier claims to be repatriated abroad and is prepared to embark at the first available opportunity the O.C. unit has been instructed to complete these particulars as far as possible before despatching the Army Forms.

In such a case the Officer i/c Records has been instructed to verify the claim and notify the O.C. Discharge Centre whether it has been substantiated or not.

PART II

Notification to the Regimental Paymaster that a Soldier is sent to a Discharge Centre with a view to discharge or transfer to the Reserve or whether in substitution of otherwise

The soldier named in Part I of this Army Form is:—

(a) Married or a widower

*James*

The following are the particulars, in order of date of birth, of children in respect of whom separation allowance is being paid at the date of this notification.

NOTE—If the surname of any of the children is not the same as that of the soldier the surname is to be inserted after the Christian name

Table with columns: Christian Names (in full), Sex, Dates of Birth. Includes handwritten entries for children's details.

(b) Unmarried or a widower with the following dependants (without children) whom an allowance is being paid:—

(c) Unmarried and without dependants
(d) The address of his family or dependants is

*Rose Blanche N F L L*

Station *Hazley Levern*

Regimental Paymaster or Secretary T.F. Association.

Date *14-11-18* 191

\* Strike out whichever inapplicable.

PART III

(For use when applicable)

The Secretary T.F. Association.

You are requested to complete the particulars in Part II. above and forward the Army Form immediately to the Officer i/c Records

Station

Date 191

This information and that of the children is to be extracted to A.F. W3500 in cases where the soldier has been enrolled as an A.R.M.W.

NOTICE—In cases where the soldier is forwarded to a Discharge Centre with a view to discharge or transfer to the Reserve or whether in substitution of otherwise the O.C. has been instructed to verify the claim and to forward the Army Form to the Officer i/c Records as far as possible before despatching the Army Form

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. *1st Regt. Pte.*
- 2. Regtl. No. *2707* 3. Rank. *Pte.*
- 4. Name *BURTON* *Robert*  
(Surname) (Christian Names)
- 5. Age last birthday. *21 yrs.*
- 6. Posted for duty on. *31 May 1916* at. *St. John's*  
in category (or grade).....
- 7. Former Trade or Occupation } *Ironman*
- 7a. If the soldier claims previous service in Army, he should state—  
(a) Former Regts. or Corps; with Regtl. Nos. *n/a.*
- 8. If the disability is an injury was it caused  
(a) in action (b) on field service  
(c) on duty (d) off duty? (b) Date of Discharge ;  
(c) Cause of Discharge.
- 9. If a Court of Inquiry was held on an injury state :—  
(a) When (d) Particulars of Pension or Gratuity (if any)  
(b) Where  
(c) Opinion of Court

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

### Statement of Case.

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

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

- 11. Date of origin of disability. *30 Nov 1917*
- 12. Place of origin of disability. *Corbrain. France*
- 13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *He states that he received a bullet through left hand. The small finger was amputated at Richmond Military Hospital. Two prior wounds were accidental wounds left knee through exploding mine bomb (no report). on 12 Oct 1916. Bullet through posterior cervical region 9 Oct 1917. Decided B7 June 1918.*



14. State whether the disabilities are
- |  | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war .. .. .                | yes                 | .....             |
| (ii.) Previous active service.. .. .                       | no                  | .....             |
| (iii.) Climate in pre-war service .. .. .                  | no                  | .....             |
| (iv.) Ordinary military service before the war .. .. .     | no                  | .....             |
| (v.) Serious negligence or misconduct on the man's part. } | no                  | .....             |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } na.

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &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.)

Small piece of left hand amputated; scar 2" long. Limiting the flexion of ring finger, and slightly limiting that of 2<sup>nd</sup> finger. Thus interfering with power of fork.

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

yes.

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

na.

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?

na.

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?

Sw Head (superficial)  
Sw (accidental) left knee.

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.

Reputation  
M.K.  
C.H.

ROYAL NEWFOUNDLAND R

Station . HAZELEY DOWN BARRACKS .....

Medical Officer in charge of case.

Date 30 NOV 1918 .....

\* 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

# 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:

*I resume previous occupation*  
*Fishing*

*Barton R*

Signature of Man.

Reg. No.

*2702*

*Charles Caff*

Signature of the Vocational Officer or his Representative.

Place

*St John*

Date

*15-2-19*

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NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.  
 In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

## Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps... Royal H. Fla. Rgt. 7. Former Trade or Occupation } Fisherman
2. Regtl. No. 2702 3. Rank... Pte. 7a. If the soldier claims previous service in Army, he should state— n/a
4. Name BURTON ROBERT  
 (Surname) (Christian Names)
5. Age last birthday... 21
6. Posted for duty on... May 3<sup>rd</sup> 1916 at... ST. Johns.  
 in category (or grade).....
8. If the disability is an injury was it caused  
 (a) in action (b) on field service  
 (c) on duty (d) off duty? (b) Date of Discharge ;  
 (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—  
 (a) When (d) Particulars of Pension or Gratuity (if any)  
 (b) Where  
 (c) Opinion of Court

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

### Statement of Case.

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

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

- G. S. W. Left hand
11. Date of origin of disability. 20<sup>th</sup> Nov. 1917
12. Place of origin of disability. Cambrai France
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.
- He states that he received a bullet wound through left hand, two small fingers was amputated at Richmond Military hospital.  
Two prior wounds were - accidental wound of left knee through exploding "Millo Bomb" (no report). 12<sup>th</sup> Oct. 1916  
2<sup>nd</sup> Wound S.O..F.R.d. Bullet through posterior cervical region 9<sup>th</sup> Oct. 1917. Boarded B7 June 1918.



14. State whether the disabilities are
- |  | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war .. .. .                | Yes                 |                   |
| (ii.) Previous active service .. .. .                      | No                  |                   |
| (iii.) Climate in pre-war service .. .. .                  | No                  |                   |
| (iv.) Ordinary military service before the war .. .. .     | No                  |                   |
| (v.) Serious negligence or misconduct on the man's part. } | No                  |                   |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } n.a.

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.)
- Small finger of left hand amputated; scar two inches long limiting the flexion of ring finger, & slightly limiting that of second finger. Thus interfering with power of grip.*

16. Was an operation performed? If so, when and what was its nature? *Yes*
17. If not, was an operation advised and declined? *n.a.*
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? *n.a.*
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?
- G.S.W. head (superficial)  
 G.S.W. (accidental) left knee.*

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.

*Refutation*  
*M.P.*  
*C.P.H.*  
 MD. ROYAL NEWFOUNDLAND REG

Station .. HAZELEY DOWN CAMP .. .

Medical Officer in charge of case.

Date .. 30 NOV 1918 .. .

\* 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

**OPINION OF THE MEDICAL BOARD.**

**NOTES.**—(1) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

21. Give diagnosis and particulars of:—

(a) Any disability claimed or discovered.

(b) The present condition thereof.

*G.S.W. neck & left hand  
Accidental wound left hand  
Vide Sect 15. Small scar at back of neck, base of skull  
Very hoarse, <sup>healed</sup> no cough*

22. State whether the disabilities are:—

- (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 part of the soldier .. .. .

(a) Attributable to

(b) Aggravated by

*Yes* .. .. .  
.....  
.....  
.....  
*No* .. .. .

Give details:

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it? .. .. .

*G.S.W.* .. .. .

23. Is the disability in a final stationary condition? If not

- (a) How long is the present degree of disability likely to last?
- (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages :-100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

40% set months

25. If an operation was advised and declined, was the refusal unreasonable?

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?
- OR
- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Yes

Opinion of Military Member in case of disagreement.

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

Yes

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require :-

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures:

Station ..... *Sodhu* .....

Date ..... *Feb. 13/19* .....

*H. K. ...* } President or Chairman.  
*...* } Members.  
*...* } Members.

Discharge Approved under Para. 392 (xvi) King's Regulations.

Station ..... *...* .....

Date ..... *FEB 13 1919* .....

Officer in charge, Central Hospital.

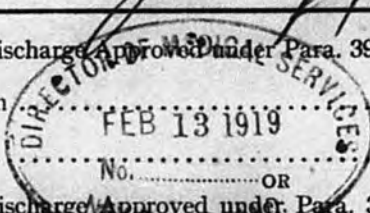
Only applicable in cases of Patients in Hospitals.

Discharge Approved under Para. 392 ( ) King's Regulations, or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station ..... O.C. Discharge Centre.

Date .....





# MEDICAL REPORT ON AN INVALID.

NOTE.—This Form is only applicable to men discharged from Hospitals; and when filled in is to be attached to A.F. 3972A and forwarded to the CONTROLLER, MINISTRY OF PENSIONS, BURTON COURT, KING'S ROAD, LONDON, S.W. 3.

Name *Burton Robert* ..... Regl. No. *2702* ..... Rank *Plt.* ..... Unit and Corps *Royal Artillery*  
(Surname)                      (Christian Names)

1. State the nature of the disability or disabilities from which this man is suffering. . . . .

2. What is the present condition of such disability or disabilities? . . . . .

3. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic treatment) is desirable in a:—

- (a) Sanatorium or other institution for tuberculosis . . . . .
- (b) Hospital, and if so, what class? . . . . .
- (c) Convalescent Home . . . . .
- (d) Asylum, or . . . . .
- (e) Other institution . . . . .
- (f) Is out-patient hospital treatment or treatment at home recommended. If so, which?

NOTE.—Treatment shall only be recommended for the disability for which the man was discharged from the Navy or Army or Air Force during the present war. Provided that if the invaliding disability has been held to be due to or aggravated by service in the present war, treatment may be recommended for an incapacity medically certified as in consequence of that disability.

4. With reference to Army Council Instructions, is any surgical appliance recommended? . . . . .

5. Is the invalid willing to accept the offer of treatment or not? If not, state the reason given for the refusal, and say whether you consider the refusal reasonable . . . . .

Signature ..... President.

Station .....  
 Date ..... } Members.

Approved. *Hansley Lewis Winchester*  
 Station .....  
 Date *14-11-18* .....  
Officer in charge, Central Hospital.

[P.T.O.]

# STATEMENT BY A SOLDIER CONCERNING HIS OWN CASE.

NOTE.—This Form is to be filled in by every soldier prior to the compilation of Army Form B 179A, whether a patient in hospital or not, and attached thereto. The questions are to be answered in the soldier's own words, and the Form is to be signed by him and the signature witnessed. In the event of the soldier being unable to write he should affix his mark, such act being witnessed.

Regimental No. *2702*Rank *Pvt*Name *Burton Robert*

(Surname)

(Christian Names)

Unit and Corps *Royal AFD*

Note.—Before answering the questions below, the soldier is to note that

- (a) The statements made by him will be checked by official records.  
 (b) In answering Question 2 any special matters which in his opinion caused any unfitness from which he may be suffering or which aggravated it should be clearly stated.

If the soldier is unable to read, the above notes are to be read to him by an officer.

1. (a) In what countries have you served during this war, and for what periods?

*France Belgium*

(b) In what capacity?

*Infantry*

2. If you are suffering from any disease, wound, or injury, state what it is, the date upon which it started, and what, in your opinion, was the cause of it.

(If more space is required a sheet of foolscap should be used, and firmly attached to this form.)

*G.S.W. wound in the left hand G.S.W. neck G.S.W. these which have rendered me unfit to do any heavy work.*



3. Give the names of any hospitals where you have been treated for the above disease, wound or injury during the present war.

3rd London 75 days  
10 Gen Canadian Staffs 21 days  
Richmond military 90 days

4. Did you suffer from the disease or injury mentioned in above answer to Question 2 or anything like it, before joining the Army? If so, give details and dates.

no

5. Give the names (and addresses if you know them) of any hospitals you were in or doctors who attended you before you joined the Army.

none

6. Give the name of your National Health Approved Society, and (if possible) your Membership Number.

7. What is the name and address of your last employer before joining the Army?

8. (a) What was your occupation before joining the Army?

Fisherman

(b) What was your trade before joining the Army?

DO

(To be checked by A.F.B.64 or A.F.B.103.)

The above statement has been read over to me; I agree to it, and have nothing further to add.

Station: Hazelton Town

Signed (Soldier) Buxton Robert X

Date: 14-11-18

Signed P J L Woods



LAST PAY CERTIFICATE

N.F.P./94

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 26/5/17.

Regt No. 2702 Rank Pte. Name Burton. R. Unit ROYAL NEWFOUNDLAND REGT. who was repatriated  
to Newfoundland on 11/12/18 Authority \_\_\_\_\_ Cause \_\_\_\_\_

DR. STATEMENT OF ACCOUNT CR.

	PARTICULARS	£	s	d	PARTICULARS	£	s	d	
PERIOD: FROM <u>23-11-18</u> TO <u>20-12-18</u>	Balance Dr. from				Balance Cr. from				
	Allotment days @				Pay 19 days @ \$1 <sup>00</sup>	19	00		
	Cash Payments:				Field Allowance 19 days @ \$ <sup>10</sup> / <sub>100</sub>	1	90		
	<u>1st Pay</u>				Other Allowances days @ \$	20	90	4 5 11	
	<u>2nd "</u>		1	10	0				
			2	14	0	Other Credits:			
	Other Debits:								
	<u>B. Damage</u>				6				
	<u>Mis Stopp.</u>			1	5				
	Total Debits			4	5 11	Total Credits			4 5 11
Balance due by Paymaster					Balance due to Paymaster				

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of

J. Co. Dec 11<sup>th</sup> 1918. J. [Signature]  
(Place) (Date) O.C. "F" Company.

Made up/Checked in accordance with information received in the Pay & Record Office \_\_\_\_\_ to \_\_\_\_\_  
and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London, 191 Chief Paymaster & Officer i/c Records.

LAST PAY CERTIFICATE ORIGINAL

N.F.P./94

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 28/5/17.

Regtl No. 2702 Rank Pte. Name Brown, Burton. Unit ROYAL NEWFOUNDLAND REGT. who was repatriated to Newfoundland on 11/12/18. Authority \_\_\_\_\_ Cause \_\_\_\_\_

DR. STATEMENT OF ACCOUNT

PARTICULARS	£			s			d			CR.
	£	s	d	£	s	d	£	s	d	
Balance Dr. from							Balance Cr. from			
Allotment days @							Pay 19 days @ \$1 <sup>00</sup>	119	00	
Cash Payments:							Field Allce 19 days @ \$ <sup>10</sup> / <sub>100</sub>	11	90	
<u>1st Pay</u>				1	10	0	Other Allces days @ \$	120	90	4 5 11
<u>2nd "</u>				2	14	0	Other Credits:			
Other Debits:							Total Credits		14	5 11
<u>B. Damages</u>						6	Balance due to Paymaster			14 5 11
<u>Mis. Stopp.</u>						1 5				
Total Debits				14	5	11				
Balance due by Paymaster										
				14	5	11				

PERIOD: From 23-11-18, To 12-12-18  
 CHECKED. EP  
 18/12/18

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of "G" Co.

HAZELEY DOWN CAMP. (Place)      Dec 11<sup>th</sup> 1918. (Date)

Made up/Checked EP in accordance with information received in the Pay & Record Office London to 19/12/18. and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,  
Dec. 19<sup>th</sup> 1918

O.C. "G" Company.

Chief Paymaster & Officer i/c Records.





# Descriptive Return of a Soldier medically boarded before Discharge or Transfer to the Reserve.

**INSTRUCTIONS.**—Parts A. and D. of this Army Form are to be completed for every soldier prior to his being medically boarded with a view to discharge or transfer to Class W., W.(T), P., or P.(T), of the Reserve, as follows:—

(a) By the O.C. unit prior to the soldier being sent to the Discharge Centre.

(b) By the Officer i/c Central Hospital, when the soldier is a patient in hospital, prior to his being brought before an Invaliding Board.

It is most important that all particulars should be correctly filled in, and that the soldier should be given a full opportunity of examining the Army Form before he signs the Certificate below, as, if awarded a pension, his subsequent identification may depend on the correctness of these entries. The "rank," "station," and "date" following the soldier's signature are to be in his own handwriting.

This Army Form is to be forwarded with the proceedings of the Medical Board to the Officer i/c Records, and Parts B. and C. completed by that officer before forwarding the Form with the remainder of the soldier's documents, to the Controller, Ministry of Pensions, Burton Court, King's Road, London, S.W.8.

**PART A.** Soldier's Name Burton Robert  
(Surname) (Christian names in full)

**A.** Unit from which discharged Royal N.F.S.B.

Regimental Number 2707 Rank on discharge P.Lt. Age on discharge 21

Married, widower with children, or single single

Occupation before enlistment Fisherman

Special qualifications (if any) for employment in civil life }  
Nature and locality of employment desired }

Full postal address to which proceeding on discharge } Rose Blanche

Name of Approved Society (if any) }

**PART B.**

Period of service, and in what Corps	Regiment	Years	Days	All service abroad, with Stations	Years	Days
...	<u>Royal N.F.S.B.</u>	<u>2</u>	<u>180</u>	<u>India</u> <u>South Africa</u>		
Disallowed				<u>Belgium France</u>		<u>7.20</u>
Service towards pension						

**PART C.** Number of G.C. badges medals

Wounds and actions in which received

**PART D.** Where born (parish, town and county), and date 24<sup>th</sup> 1897 Rose Blanche

Colour of hair on discharge Brown Colour of eyes Blue Complexion Fair

Christian name of father Wm

Christian name of mother Alice

NOTE.—Army Forms D. 400 and W. 3463A and B are issued in sets in pad form for use with carbon paper in cases where the soldier is a patient in hospital. Army Forms D. 400 and W. 3463A are similarly issued in sets for use in cases where the soldier is not a patient in hospital. The Statements on Parts A. and D. of Army Form D. 400 and on Part A. of Army Forms W. 3463A and B are to be completed by the Officer i/c hospital before a soldier is brought before an Invaliding Board. The Statements on Parts A. and D. of Army Form D. 400 and on Part A. of Army Form W. 3463A are to be completed by the O.C. unit before the despatch of a soldier to the Discharge Centre.

[P.T.O.]

Wife's maiden name in full

Date and place of marriage

Christian names of children and dates of birth

Date and place of 1st enlistment St Johns NFD 16 May 1916

Figure on discharge

Descriptive and other distinguishing marks

I certify that I am the soldier referred to and that all the particulars contained in Parts A. and D. above are, to the best of my knowledge, correct.

(Signature in full) Burton Robert X

Station Hazleydown

Rank Pvt

Date 1-4-11-18

I certify that the above-named soldier signed the foregoing declaration in my presence.

(Rank)

O.C. (unit or Officer i/c Hospital)

THE CONTROLLER,

MINISTRY OF PENSIONS,

BURTON COURT,

KING'S ROAD,

LONDON, S.W.3.

The soldier named overleaf was

Discharged under para. \_\_\_\_\_ King's Regulations

or

Transferred to Class \* \_\_\_\_\_ of the Reserve.

Strike out whichever inapplicable.

Military character

I certify that the details of service overleaf and other particulars are, to the best of my knowledge, correct.

Officer i/c Records.

Station

Date \_\_\_\_\_ 191

\* Insert P., or P.(T).



**Casualty Form—Active Service.**

Regiment or Corps Newfoundland  
 Rank Pte Surname Burton Christian Name Robert  
 Religion 6 of E Age on Enlistment 19 years 10 months.  
 Enlisted (a) St John's Terms of Service (a) 6 months of war Service reckons from (a) 3/5/16  
 Date of promotion to present rank ..... Date of appointment to lance rank .....  
 Extended { ..... } Re-engaged { ..... } Qualification (b) .....  
 or Corps Trade and Rate .....  
 Signature of Officer [Signature]



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
From whom received				
		Embarked <u>Shampton</u>	<u>5.8.17</u>	
		Disembarked... <u>Rouen</u>	<u>7.8.17</u>	
		Joined Battalion	<u>2.8 AUG 1917</u>	<u>B 213</u>
<u>25-10-17</u>	<u>Wounded in Action</u>	<u>9 OCT 1917</u>	<u>B 213</u>	<u>12 OCT 1917</u>
<u>21/10/17</u>	<u>Admitted to hospital</u>	<u>6 cables</u>	<u>10/10/17</u>	<u>80 2086</u>
<u>29</u>	<u>Joined Base Depot.</u>	<u>Rouen</u>	<u>20/10/17</u>	<u>Ed Nouv Acad</u>
	<u>Joined Battalion</u>		<u>25 OCT 1917</u>	
<u>26 NOV 1917</u>	<u>WOUNDED IN ACTION</u>	<u>20 NOV 1917</u>		<u>A.F.B. 213</u>
<u>21/11/17</u>	<u>Gsw forearm trans</u>	<u>5 CES</u>	<u>21/11/17</u>	<u>Ed 3083</u>
<u>22</u>	<u>do</u>	<u>Dunbar Barracks</u>	<u>21/11/17</u>	<u>HA 16590</u>
<u>10</u>	<u>do</u>	<u>Rouen</u>	<u>21/11/17</u>	<u>HA 16636</u>
<u>Western Australia</u>	<u>Transferred to England</u>		<u>25/11/17</u>	<u>W 3083</u>



# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. F. Birch & Sons Ltd., Printers, Old Bailey, E.C. 4.  
(254) W. 217/2124 1000m 6/18s 23 56

Forms  
B. 121.  
22.

Regiment of 1<sup>st</sup> Newfoundland

Number of Sheet One  
Signature of O. C. Company W. Rendell  
Major

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay	
No.	<u>2702</u>	Age on	<u>19</u> years <u>10</u> months	<u>Fisherman</u>		
Joined	Date	Place and Date of Enlistment	<u>St. John's</u> <u>May 2/16</u>	Religion		
Joined	Date	Period of	with Colours <u>2</u> <sup>1</sup> / <sub>30</sub> years. with Reserve <u>3</u> <sup>1</sup> / <sub>2</sub> years.	Place of Birth		
Joined	Date			<u>Rose Blanche</u>		

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<u>Days</u>	<u>27/6/16</u>	<u>plc</u>		<u>Absent from gun range</u>	<u>St. John's</u>	<u>2 days C.D.</u>	<u>27/6/16</u>	<u>J. Munro Capt</u>	<u>plc</u>
<u>Race Course</u>	<u>30-6-17</u>	<u>plc</u>		<u>1 drunk on Baywalk St. 8<sup>10</sup> p.m.</u>	<u>Mc. Roberts</u> <u>plc. Crane</u>	<u>48 hrs 7.P. 70 2</u>	<u>2-7-17</u>	<u>L. Col. Whitaker</u>	<u>Att. G.</u>
				<u>Demobilized St. John's</u>					<u>5</u> <sup>3</sup> / <sub>19</sub>

To be carried over

Army Form B. 121.

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 2702 Rank Plt. Name Robert Dunton  
 Intended place of residence Rue Blanche B.P.

2. Occupation Johnman  
 Classification of soldier B. Medical Category A

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 FEB 17 1919 W. H. C. Capt.  
 Date ..... 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 7.2.19  
 Signature of soldier Robert P.  
 Signature of witness C. Dicks 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 and Date St. John's 15th 1919 Robert P.  
 Signature of soldier  
 Signature of witness W. H. C. Capt.

### STATEMENT OF SERVICE

7. Enlisted for service 3.5.16 No of days on Military  
 Discharged from service 19.2.19 per 14 days Service 1037 1456 days

### APPROVAL OF DISCHARGE

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

Place ST. JOHN'S R. H. Lait Capt.  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment.  
 Date 19-2-19

### CONFIRMATION OF DISCHARGE

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

Place St. John's W. H. C. Capt.  
 Date March 5/1919 Officer i/c Records  
 The Royal Newfoundland Regiment

22 B 2079/1351

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# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 2702 Rank PLT Name Burton Robt  
 Date of Enlistment 3.5.16 Address Rose Blanche District Burgess & Lab  
 Occupation Fisherman Classification for Discharge B Medical Category E  
 Recommendation S.M.B. Permanently unfit Disability Rating 100% 6 mos  
 Passed to Demobilization Officer with following documents:—

N.F. P. <u>2</u>	B 268	B 121	1	N.F. Med	D.F. 1	
B 178	W 3494	B 122	1	Board 1st	" 2	3
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		<u>3463A</u>	" 6	1
B 179c	B 120	M 93				

Date 15.2.19 W. W. W. Capt  
 O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am                      in a position to resume civilian occupation.

Burton R

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 A. Lawrence

Date 15-2-19

O i/c. Re-clothing.



3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 608 to his home at Rose Blanche and Release Certificate No. 1074 issued.

Date 15-2-19

Osborne 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 5-3-19

Date 17-7-19

Morley Capt.  
Depot Paymaster.

Discharge approved for 19-2-19

Forwarded with following documents to O.C Discharge Depot.

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

Date 17-2-19

Osborne 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 19-2-19

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

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

Date 24/2/19

W. J. ...  
Depot Records

CLASS OF SERVICE	SYMBOL
Day Message	
Day Letter	Blue
Night Message	Nite
Night Letter	N L

If none of these three symbols appears after the check (number of words) this is a day message. Otherwise its character is indicated by the symbol appearing after the check.

# ANGLO-AMERICAN TELEGRAPH COMPANY, LIMITED

CONNECTING WITH  
THE WESTERN UNION TELEGRAPH COMPANY

CLASS OF SERVICE	SYMBOL
Day Message	
Day Letter	Blue
Night Message	Nite
Night Letter	N L

If none of these three symbols appears after the check (number of words) this is a day message. Otherwise its character is indicated by the symbol appearing after the check.

OK 27 ROSEBLANCHE 10PD .

ST. JOHN'S, N.F.

JAN 3 1919

CAPT BUTLER SEAMANS INSTITUTE

WILL YOU PLEASE GRANT ONE MONTH LEAVE EXTENSION YOURS ~~OBEDIENTLY~~

OBEDIENTLY

PTE ROBERT BURTON

*Report from Authority  
for discharge  
RB*

1919

Reg. No. *2702.* Rank *Private* Name *Burton, G.*  
Attested ..... Address *Cass. Blanche*  
Allotment ..... Allottee .....  
Date of Allotment ..... Returned from Overseas *21-12-18*  
Embarked for Overseas ..... Cause *Discharge*

*G. Leave from 21-12-18 to 15-2-19.*

*13-2-19. Rec. Dis - Permanently unfit*  
*15-2-19. PASSED TO DEMOBILIZATION OFFICER*

*19-2-19. DISCHARGE APPROVED ON DEMOBILISATION*



C.R. 2702

Extract of DAILY ORDERS PART II ROYAL NEWFOUNDLAND  
REGIMENT DEPOT ST. JOHN'S DATED MARCH 18th/19.

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The Discharge of the undernoted on Demobilization  
has been CONFIRMED by Officer i/c Records from  
noted date.

#2702 Pte. Robt. Burton.

5/3/19.

THE CANADIAN PENSION COMMISSION

MEMORANDUM

TO: Director of War Service Records.

OTTAWA, June 10, 1949.

FROM: The Canadian Pension Commission.

#2702 - Pte. Robert Burton.  
Roy. Nfld. Regt.

The marginally named

Died Nov. 15, 1948.

Next of Kin Mrs. Mildred E. Burton (Widow),  
Albro Lake Road, Tufts Cove,  
Dartmouth, N.S.

In the opinion of the Commission,  
death was not related to service with the forces.

VM  
Not on strength

*E. Lahey*  
for  
Secretary.

*Valid  
R+BS*

DEPARTMENT OF VETERANS AFFAIRS  
WAR VETERANS ALLOWANCE DISTRICT AUTHORITY

Address Halifax

The Public Archives Records Centre  
Tunney's Pasture  
Ottawa 3, Ontario

MARK YOUR REPLY:

Attention: Reference Section

For attention of:

Re: BURTON Robert

(Surname)

(Christian Names)

Service No. 2702

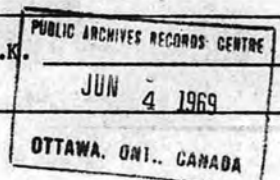
Veteran is stated to have served during S. African War ( ) World War 1 (✓)

To enable this WAR VETERANS ALLOWANCE DISTRICT AUTHORITY to determine the eligibility of the above-named, will you kindly furnish the following particulars:

1. UNITS (including that of discharge) HIGHEST RANK IN UNIT:
- (a) Royal Newfoundland Regt Pte.
- (b) \_\_\_\_\_
- (c) \_\_\_\_\_
- (d) \_\_\_\_\_
- (e) \_\_\_\_\_
- (f) \_\_\_\_\_
- (If other than CEF please so designate following applicable unit)

2. THEATRES OF SERVICE

- (a) South African War  
Date and port of embarkation \_\_\_\_\_
- (b) World War I - (If Canada only, state if with territorial limitations).  
Canada - Britain - France  
Date(s) embarked for U.K. \_\_\_\_\_
- IF CANADA AND U.K. ONLY  
Date(s) disembarked in Canada from U.K. \_\_\_\_\_  
Period(s) of desertion in U.K. \_\_\_\_\_



3. Any other military service
4. Date and place of all enlistments 3 May 1916 - St John's, Nfld.
5. Date of all discharges and reason 5 March 1919 - demob.
6. Date and place of birth as per attestation paper date not given - Rose Blanche, Nfld.
7. Marital status; If married, name in full of wife Single
8. Religion C of E.

Decorations, if any  
VVA 18.

Nil.

Head, Accessions and Reference Section