



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4111 Name Charles Butler Corps P.C.

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Charles Butler
2. What is your full Address? 2. St. John's, Nfld.
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 21 Years 11 Months
5. What is your Trade or Calling? 5. None
6. Are you Married? 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. No
8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
9. Are you willing to be enlisted for General Service? 9. Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... 10. { Name
Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? II. Yes

I, Charles Butler 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.

Charles Butler SIGNATURE OF RECRUIT.
W. J. [Signature] Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Charles Butler 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 11th day of November 1917.
W. J. [Signature] Signature of Attesting Officer

†CERTIFICATE OF APPROVING OFFICER. †

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

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

† 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).....



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4111 Name Anthony Butler Corps R.C.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|-------------------------------------|
| 1. What is your name? | 1. <u>Anthony Butler</u> |
| 2. What is your full Address? | 2. <u>Brents Cove</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>27</u> Years <u>11</u> Months |
| 5. What is your Trade or Calling? | 5. <u>fisherman</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, Anthony Butler, 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.

G. 14-11-17. Anthony Butler SIGNATURE OF RECRUIT.
nambrisey Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Anthony Butler, 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 14th day of November 1917.

Signature of Attesting Officer W. J. [Signature]

†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.....1917

Place..... } Approving Officer.

† 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 Anthony Butler
 Apparent age 27 years 11 months. Height 5 feet 5 inches
 Chest Measurement { Girth when fully expanded 34 inches
 Range of expansion 38 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Mary Butler,
Brents Cove, W. Bay | Relationship Mother

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>14-11-17</u>									
Joined at <u>St John's</u> on <u>November 14-17</u>									
Discharged at John's Jan. 12/1918									
<u>Embarked at John's St. Honoré to Halifax N.S. 29-18. Embarked for B.C. 31-8-18 Arrived Vancouver 2-19-18. Joined Battalion in the field 5-9-18.</u>									
<u>Rejoined 28-9-18 Admitted 28th Infantry 26th B.N.F. 28-9-18 Transferred to England 2-10-18 Admitted 3rd B.N.F. 2-10-18. Moved to Winchester 8-12-18</u>									
<u>to Newfoundland for demobilization 12-12-18 Arrives St. John's 21-12-18</u>									
<u>Demobilization at John's 13-1-19.</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 13-1-19 [date of discharge] 1 years 61 days
 " " Pensions " " " " " " " " " " " "

Reg. No. 4111 Rank Plt Name Butler A.

Attested 14-11-17 Address B route 600 St. Pauls.

Allotment 60¢ Allottee Mr. John Butler Mother

Date of Allotment Nov 13/17 Returned from Overseas _____

Embarked for Overseas _____ Cause _____

Leave 1st 16-11-17 2nd 21-11-17
H.R. 25-11-17 to 2-15-17, Ptd. duty 3/12/17
Vac. 24/12/17, 3rd leave 31/12/17

C.R. 4111

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~~ undermentioned Company.

D. COMPANY.

4111, Pte. A. Butler.

C.R. 4111

Extract of Daily Orders Part II, Depot, St. John'd, dated
Jan. 14th 1919.

Discharge confirmed on demobilization.

The discharge of the undernoted man on demobilization has been
confirmed by the Officer I-c Records on noted date.

4111 Pte. Anthony Butler.

Discharged 13-1-19

C.R. 4111

Extract of Daily Orders Part II, dated Jan. 3rd 1919.

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

4111 Pte. Anthony Butler,

Discharged 30-12-18

C.R. 4111

Extract from Medical Board held on Thursday December 26th,
1918.

4111 Pte. A. Butler.

Recommended Discharge as Permanently Unfit Requires
Treatment.

C.R. 4111

Extract from Daily Orders part 11, Depot St. John's dated Dec. 26rd. 1918

The u/m returned from Overseas and reported at Depot 21-12-18.

4111 Pte. A. Butler.

C.R. 4111

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

#4111 Pte. A. Butler.

C.R. 4111

Extract from Daily Orders part II, Depot Winchester by
LIEUT. COL. B. J. BARTON, D.S.O. Officer Commanding 2nd,
Battalion of the Royal Newfoundland Regiment dated
10-12-18.

The u/m having reported back from the 1st., Battalion
is taken on the strength and posted to "H" Co.,

8-18

4111 Pte. A. Butler.

C.R.

4111

Extract from Nominal Roll discharged from 3rd L.C.D.
on 7-12-18 and sent to 3rd Bn., Winchester for immediate
repatriation, in accordance with arrangements made by
Major Pinewall.

4111 Pte. A. Butler.

CR

444
~~446~~

Nov. 21st, 18.

Mrs. Mary Butler,
Brent's Cove,
St. Barbe's.

Dear Madam:-

I beg to inform you that additional information has been received to-day by this department through the Visiting Committee of the Newfoundland War Contingent Association, to the effect that your son, No. 4111, Pte. Wm. Butler, is now progressing favourably.

Yours faithfully,

Lieut. Col.,
Chief Staff Officer.

C.R. 4111

Oct. 22nd, 1918

Mrs. Mary Butler
Brent's Cove
St. Barbe.

Dear Mrs. Butler:

I beg to inform you that additional information has been received concerning your son, No. 4111, Private Anthony Butler, through the Visiting Committee of the Newfoundland War Contingent Association, to the effect that he is now progressing favourably.

Yours faithfully,

Lieut. Col.,

Chief Staff Officer.

C. R. Hill

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

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

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

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

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

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

(NOT TRANSMITTED)

St. John's,

Signature of Sender _____

Address **Dept. of Militia.**

Line Number	Rcd	By	Sent	by	Check

Dated **Oct. 18, 1918.**

To **Mrs. Mary Butler,
Brents Cove,
La Spécie.**

Buy to inform your ~~that~~ nothing further received from #4111 Pte. Anthony Butler since last report, will let you know at once when we receive news.

**J.R. Bennett,
Minister of Militia.**

FOR TYPEWRITER

Form No. --

C.R. 4111

NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 23

Sent by Ms

Rec'd by

Check 9

No. 4

Place from

Brents Cove

To

Men of Militia



Any further news
 no 4111 private
 Anthony Butler
 anxious

Mary Butler

Nothing further since last
 report will let you know at
 once when we receive news.

No enquiry respecting this Message will be attended to without the production of this paper.

C.R. 4111

Oct. 16th, 1918

Mrs. Mary Butler
Brent's Cove
St. Barbe

Dear Madam:-

I beg to inform you that additional information concerning No. 4111, Private Anthony Butler, has been received, through the Visiting Committee of the Newfoundland War Contingent Association, to the effect that he is now improving.

Yours faithfully,

Lieut. Col.,

Chief Staff Officer.

CR 4 III
Counter No. III

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

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

(NOT TRANSMITTED)

Signature of Sender _____ Address Dept of Militia

Line Number	Rcd	By	Sent	by	Check

Dated oct 5th, 1918

To May Butler, Brent's Cove, St. Barbe

Regret to inform you that Record Office, London, officially reports No. 4111, Private Anthony Butler at 3rd London General Hospital Wandsworth suffering from G.S.W. forearm

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

J.R. Bennett
Minister of Militia.

FOR TYPEWRITER

C.R. 4111

Extract from Casualties from Pay & Record Office,
London,

Admitted 3rd London General Hospital, 2-10-18.

4111 Pte. A. Butler

G.S.W. L. Forearm.

MM.

C.R. 4111

Extract from Casualties List No. H.A.29727.

4111 Pte. A. Butler.

1st Nfld.R. Admitted 20 Gen. H. Dannes Camiers 29 Sept.18.

G.S.W. F'Arm.L.Mild.

M.M.

C.R. 4111

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

4111 Pte. Butler A.

C.R. 4111

Extract from Telegram despatched to Synoptical, London,
dated June 4th, 1918.

Pay to as follows:-

#4111 Pte. Butler,

£5.

CR 4111

Extract from Medical Roll Number "7" Company entered
S.S. "Floral" Jan. 29th, 1918.

4111 Pte. Butler A.

C.R! 4111

Extract from Daily Orders Part 11 Unit The Royal Rifles.
Regt., St. John's, Nov. 15th, 1917.

4111 A. Butler.

Attested for General Service in the 1st Rifles, Regt. posted
to G. Coy, and assigned number as shown, with effect from
Nov. 14th, 1917.

A Butler

C.R. 4111

~~PRO~~

Medical Report on an Invalid.

Station HAZELEY DOWN CAMP.

Date 29 NOV 1918

1. Unit ROYAL NEWFOUNDLAND REG.
2. Regimental No. 4111
3. Rank OTZ
4. Name BUTLER. A
5. Age last birthday
6. Enlisted { on
at

7. Former Trade }
or Occupation }

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

- (a) Former Unit;
- (b) Regimental No.;
- (c) Date of Discharge;
- (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

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

G. S. W. left forearm compound fracture ulna

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.

R + T wound. He made satisfactory progress at S. T. G. H. & discharged for Repatriation.

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.

- Scars, one posterior forearm, left elbow joint, latter over middle of ulna both healed, no wasting of muscle of forearm. Movement at elbow joint full also at wrist, slight wasting muscles of hand, power of grip small.*
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.
14. If the disability is an injury, was it caused—
- In action?
 - On field service?
 - On duty?
 - Off duty?
15. Was a Court of Inquiry held on the injury?
- If so—(a) When?
- Where?
 - Opinion?
16. Was an operation performed? If so, what?
17. If not, was an operation advised and declined?
18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?
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.

20. Do you recommend—
- Discharge as permanently unfit, or
 - Change to England?

Repatriation

M. J. C. / Captn.

ROYAL NEWFOUNDLAND REG.

 Officer in medical charge of case.

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

Station _____

 Officer in charge of Hospital.

Date _____

*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.

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.

Regt No. 4111 Rank Private Name Butler A. Unit Royal Hfld. Regt who was repatriated
to Newfoundland on 12 12 18 Authority Draft No. 79. Cause _____

BR. STATEMENT OF ACCOUNT

BR.	PARTICULARS	\$					CR.							
		¢	¢	¢	¢	¢	¢	¢	¢	¢	¢			
12/12/18	Balance Dr. from 7/12/18				17									
	Allotment 5 days @ 60	5	00		12									
12/12/18	Cash Payments:													
	Hospital Advance				5									
9/12/18	Other Debits													
	Total Debits				1	15								
9/12/18	Balance due by Paymaster				1	15								
	Total Credits										1	15	9	
9/12/18	Balance Cr. from													
	Pay 5 days @ \$ 1.00	5	00											
9/12/18	Field Allowance 5 days @ \$.10													
	Other Allowances days @ \$													
9/12/18	Other Credits:													
	Total Credits													
9/12/18	Balance due to Paymaster													
	Balance due to Paymaster													

*W.A.P. 55 308/9
Sent to H. 2. St. John's
7/1/19*

CHECKED
[Signature]
2-1-19

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

(Place) _____ (Date) 191
Made up/checked in accordance with information received in the Pay & Record Office London " " Company 3 1919
and is therefore subject to amendment if and as may be found necessary.
Pay & Record Office, London, Jan 2 1919
Chief Paymaster & O. i/c Records.

RECEIVED
15 JUN. 1913
COUNTY LAB.

Outfit Number 107

Result of the examination of the specimen of sputum taken from

Reg. No. 4111 Rank Pte Name Butler A.

Corps 2nd Batt Royal Newfoundland Regt.

Result Tubercle bacilli not found

TO BE LEFT BLANK.

June 15th 1913

R. A. Hyster

Specialist Sanitary Officer.

No. 92

Pay

ANGLO-AMERICAN

WESTERN UNION DIRECT UNITED STATES CABLEGRAM



Prefix		Code		SENT		FOR STAMPS	
WORDS	CHARGE	At	To	By	THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.		
10		VIA ANGLO.					

4/11/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To MRS JOHN BUTLER
TILTOOVE (Newfoundland)

CABLE FIVE POUNDS THROUGH MILITIA

BUTLER

*Express Rate if per word
Charge 4.00 Butler*

CHECKED.
[Signature]
13/11/18

10/-

CHARGED
PAY BOOK
Date *13/11/18* by *[Signature]*

Authorised.

NOT TO BE TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature

Address 58 Victoria St. S.W. 1.

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

No. 4111 Rank Pvt Name Batten A.

Pay	F.A. Wkg	Total	M.F.P. 1/33
100	10	110	
Less Allotment		60	
Net Rate		50	

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	\$	¢	£ s d		
						From	To							
Balance					Balance									
Acquittance Rolls		1	9	4	Pay @ Net Rate	3/8/98	4/2/98	98	50	49	00	10	1	4
Hospital Advances			10	6										
A.B. 64.					Balance b2.									
P.&.R.O. Payments		6	0	0	<u>£ 1-11-6</u>									
8-9-10 Cable			10	0										
Cash 10198	6/12/98	1	11	6										

Handwritten notes:
 6/12-1/4
 8-9-10 Cable

Handwritten note: 10-1-4

047507



No. 8889/800

NEWFOUNDLAND CONTINGENT

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

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

Subject: 6th June 1918

June 8th 1918

Subject: 4111 Pte. A. Butler,

Received of Commander

With reference to the following telegram (5093) from the Hon. Minister of Militia, received

Cham LIEUT. COLONEL

COMMANDING 2nd Bn ROYAL NEWFOUNDLAND REGT
1st Newfoundland Regiment

Pay to 4111 Butler £5:0:0

received the sum of Five

Draft £ 5:0:0 is enclosed for payment to this Soldier.

Pounds on account of cable remittance from Newfoundland.

Kindly obtain his receipt hereon.

a Butler

H.A. Munnell
Chief Paymaster & O. i/c Records.

No. 4111 Rank Private

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.C.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.
4111	Pte	Butler A.	£2 50	

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

Date 28-6-18

A Butler

SEE NOTICE AT BACK.

POST OFFICE TELEGRAPHS.

(Inland Telegrams.)

No. of Telegram

A.

Prefix

Code

For Postage Stamps.

To be affixed by the Sender.

Any Stamp for which there is not room here should be affixed at the back of this form.

A Receipt for the Charges on this Telegram can be obtained, price One Penny.

Office of Origin and Service Instructions.

Words.

Sent

At _____ M.

Charge.

To _____

By _____

When a reply is to be prepaid, write the words "Reply Paid" in the space below. These words are not charged for.

TO

Mrs John Butler.
Silt Cove.

92

12 words, including the words in the address.

9^{D.}

Every additional word,

1²/₂^{D.}

Cable line found through ~~printer's~~ militia
Chapote Hill

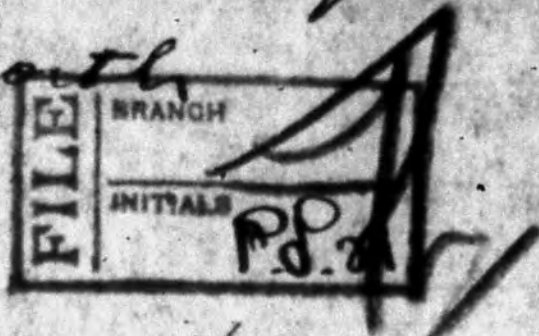
FROM

J. Butler

The Name and Address of the Sender, IF NOT TO BE TELEGRAPHED, must be written in the Space provided at the Back of the Form.



3rd London General Hospital
Wandsworth



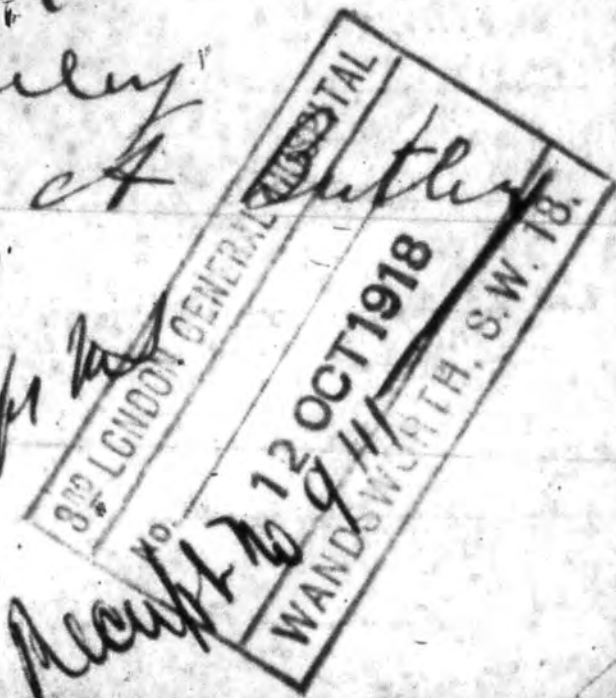
Dear Sir

Will you kindly
allow me one Pound
on my account

Yours truly
4111 Pt A

Approved
G. C. Hall
apt 2

O.K. for £1 0/0
J. H. 12.10.18



Ward 10
Wardsworth
General Hospital
2-11-18

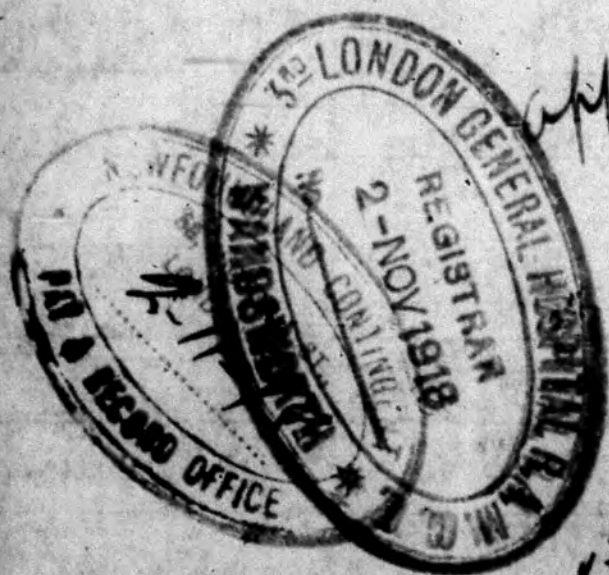
Sir

I want to draw the sum of
one pound and charge to
my credit & oblige

yours obediently

4111 Pte A Butler

Royal Newfoundland Regt



OK £1-0-0
2-11-18
Receipt no 9475
RR

18315/559

Royal Wfld. Regt.

B. E. F.

15th November 8

4111, Pte. A. Butler

9723

Pay to 4111 Butler £5¹/₃:0

No. 18315/559

From:

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

NEWFOUNDLAND CONTINGENT

To:

Officer Commanding,
Royal Nfld. Regt.

N.F.P./90.

*D. Coy
wounded 29/9/18*

13th November 1918

Subject: 4111 Pte. A. Butler

With reference to the following
telegram (9723) from the Hon. the
Minister of Militia, received

Pay to 4111 Butler £3:3:0

Kindly advise whether this
amount should be remitted to you
for payment to this Soldier, re-
tained to credit of his account,
or otherwise dealt with.

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

Stamp: CHIEF PAYMASTER B. E. F. NEWFOUNDLAND CONTINGENT 58 VICTORIA STREET LONDON S.W. 1. 1918
ANSWER

*This man was wounded on
29.9.18 and is not with
this unit at present please*

S. J. Matthews
LIEUT. COL.

COMMANDING OFFICER ROYAL NEWFOUNDLAND REGIMENT.

19.11.18

draft 79. 13/11/18

Reparations

Handwritten scribbles and signatures

OK 1-0-0
Receipt No 9807
col 16/11/18

Sir to Regimental paymaster
please allow me one pound
St de Butler & III

Royal Newfoundland Regt

SELECTION GENERAL HOSPITAL
No. _____
16 NOV 1918
WANDSWORTH, S.W. 18.

approved
W. W. W. W.
Capt. K. A. M. J.
P. J. J.

P.S.A.

3

London General
Vansdun

Records Approved to mm

Sir will you kindly allow
me to draw

by Credit

Yours

#111) R. R. B. B.

Royal A. J. A. D. Regt

P.S.A.



To Paymaster, Genl. & Pay & Band,
58 Victoria Street.

Please pay as ordered.

4000 PTE. Butcher



of two pounds
from his account

O.K. 2-0-0

3rd

Lauda

M.R. 6/12/18

6/12/18



Receipt No 10168

John M. ...

10.12

Butler, A

H111

Ray Sept.

January 13th., 1919

#4111 Pte. Anthony Butler,
Brent's Cove.,
St Barbe Dist.

Dear Sir:-

Please find enclosed "Discharge
Certificate No.453."

Yours faithfully,

Paymaster & Officer i/c Records.
^{Captain,}

Enc'l 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4111 Rank PL Name Anthony Butler
 Intended place of residence Mount Cave St Johns

2. Occupation fisherman
 Classification of soldier B Medical Category F

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

ELIGIBLE for POST DISCHARGE PAY

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.

Place St Johns
 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, subject to my arrears being paid up being advised.

Place and date St Johns
27.12.18
 Signature of soldier A. Butler
 Signature of witness C. S. Dicks Cpl

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 Dec 24th 1918
St Johns
 Signature of soldier A. Butler
 Signature of witness Raymond Sgt

STATEMENT OF SERVICE

7. Enlisted for service 14. 11. 17 No of days on Military
 Discharged from service 30. 12. 18 plus 14 days Service 426 days

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S
DEC 30 1918
 Date
 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 January 13/1919
 Officer in Charge
 The Royal Newfoundland Regiment

17
31
18
61

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4111 Rank. Pte Name Butler Anthony
 Date of Enlistment. 14.11.17 Address Parents Cove District St. Barbe
 Occupation Fisherman Classification for Discharge. B Medical Category E
 Recommendation S.M.B. Requires Treatment Disability Rating 40% 3 months
 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..... <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.....		" 6.....
B 179c.....	B 120.....	M 93.....		

Date 27.11.18

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

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Anthony Butler

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable. \$ 100.00
 (b) Clothing Supplied Joseph A. Snowling

Date 27.12.18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 434 to his home at Brentford and Release Certificate No. 636 issued.

Date 27-12-18 Demobilization Officer A. D. Dick's Capt.

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 13-1-19

Date 27-12-18 Depot Paymaster A. D. Dick's Capt.

Discharge approved for 30 12 18

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1	
B 178	W 3494	B 122	Board 1st	" 2	1
B 178a	D 400A	B 1915	do 2nd	" 3	2
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 27 12 18 Demobilization Officer A. D. Dick's Capt.

APPROVED.

Documents as above forwarded to:—
Officer in Records.
Board of Pension Commissioners.

with following additional documents.

ELIGIBLE for POST DISCHARGE PAY

Date DEC 30 1918 O. C. Discharge Depot R. H. Lait Capt.

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

Date Jan 31 1919

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

Institute
MEDICAL HISTORY

Surname Biller

Christian Name Anthony

Table I.—GENERAL TABLE.

Birthplace:—Parish Brents Cross St. Mark County Nfld.

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	14	Nov 1917		191
	at	St. Johns	at	
Declared Age	27	years		days
Trade or Occupation	Fisherman			
Height	5	feet		inches
Weight		130 lbs.		lbs.
Chest Measurement	Girth when fully expanded....		inches	
	Range of Expansion..		inches	
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	/	/		
When Vaccinated				
Vision	R.E.—V=	6/6	R.E.—V=	
	L.E.—V=	6/6	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<i>Laminé Paterson</i>			
(Rank)	Major			
Enlisted	at	St. Johns	at	
	on	14 day of Nov 1917	on	day of 191
Joined on Enlistment	Corps.		Corps.	
	Regtl. No.		Regtl. No.	
Transferred to	1st Bn ROYAL NEWFOUNDLAND REGIMENT. 4111			
Became non-effective by				
	on	day of 191	on	day of 191
[Signature]				
[Rank]				

Table II.—Only for admission to hospital or to the sick list in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the case, nature or treatment of the case likely to be of interest or of future use. In case of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
<i>Stagley Down</i>	<i>13</i>	<i>MAY</i>	<i>1918</i>	<i>23</i>	<i>5-18</i>		<i>Influenza</i>	<i>10</i>	<i>Recount discharged to duty</i>	<i>H. J. ... Capt. ...</i>
<i>8th LONDON GENERAL HOSPITAL WANDSWORTH.</i>	<i>2</i>	<i>10</i>	<i>18</i>	<i>7</i>	<i>12</i>	<i>18</i>	<i>G.S.W. Left forearm comp fracture of Ulna</i>	<i>66</i>	<i>wounded in France 28-9-18. thru the wrist & forearm with comp fracture of Ulna. Satisfactory progress</i>	<i>S. H. ... Capt. ...</i>

Civil Re-establishment Committee



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

To work at fishing

a. Butler

Signature of Man.

D. Dicks Capt

Reg. No. *4111*

Signature of the Vocational Officer or his Representative.

Place

St Johns

Date

Dec 27th 1918

Medical Report on an Invalid.

Station Hayley Down Camp.Date 8/12/18.

- | | |
|--|--|
| 1. Unit Royal
2. Regimental No. 4111
3. Rank Private
4. Name Butler Anthony.
5. Age last birthday
6. Enlisted { on
at | 7. Former Trade }
or Occupation }
7A. If with previous service in Army, state—
(a) Former Unit;
(b) Regimental No.;
(c) Date of Discharge;
(d) Cause of Discharge. |
|--|--|

8. Disability in respect of which invaliding is Proposed.

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

G.S.W. left forearm, compound fracture ulna.

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. **G & T wound made satisfactory progress at 3 L.S. Hospital and discharged for repatriation.**
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.

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.

Shows one posture forearm below elbow joint other far middle of arm both hands. No wasting of muscles of forearm movement of elbow joint full also at wrist slight wasting muscles of hand power of grip arm

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?

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

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

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.

20. Do you recommend—

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

Repatriation,

(Sgd.) J. H. Knight
Captain.
Royal Newfoundland Regt.

Officer in medical charge of case.

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

Station _____

Officer in charge of Hospital.

Date _____

*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.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the 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.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) *The rates of pension vary directly according to whether the disability is, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease 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.*

(iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

slight bend in wrist, grasp weak but has all movements

1. (a.) State whether the disability is clearly **Yes.** attributable to—

- (i.) Service during the present war;
- (ii.) Climate;
- (iii.) Ordinary military service;
- (iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or
- (v.) Whether it is constitutional or hereditary.

(b.) If due to one of the first three of these causes, to what specific conditions do the Board attribute it?

22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which?

will improve under treatment.

23. Is the disability permanent?

24. If not permanent, how soon do the Board recommend re-examination?

40 % three months

25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.

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

Yes

27. Do the Board recommend—

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

Requires treatment

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

- (a) Sanatorium;
- (b) Hospital;
- (c) Convalescent home;
- (d) Asylum; or
- (e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended?

30. Does the man require the constant attendance of another person?

H.S. FRASER

St. John's:—

Arch Tail President.

Station **December 26, 1918.**

L. Paterson, Major. Members.

Date

(Capt) G. Macpherson Major.

Approved

Station



Date

Administrative Medical Officer.

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 *Butler, Anthony*
 Regiment from which discharged *Royal Newfoundland*
 Regimental number *4111*
 Intended address *Brants Cove, St. Barbe District.*
 Height on discharge *5* Feet *5"*
 Color of hair on discharge *Black*
 Complexion *Ruddy*
 Color of eyes *Brown*
 Descriptive Marks *S. P. W. Lft. Fore arm*
 Figure on discharge *Medium*
 Christian name of Father
 Christian name of Mother *Mary Elizabeth*
 Wife's maiden name in full
 Date and place of marriage
 Christian names of children
 Place and date of soldier's birth *Brants Cove. Jan 16, 1890*
 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)

Anthony Butler

(Rank) *Pte.*

Station

St Johns

Date

Dec 24

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

Medical Officer i/c Hospital.
Unit, or Command Depot.

Station

St Johns N. J. C.

Date

Dec. 24/18

August 19, 1919

Mr. Anthony Butler,
Brents Cove,
St. Barbe.

Dear Sir:-

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

Yours truly,

Captain & Paymaster.

August 19, 1919

Mrs. Mary C. Butler,
Brents Cove,
St. arbe.

Dear Madam:-

I enclose cheque for Thirty dollars (\$30.00),
being amount of first payment due yourself on account of
War Service Gratuity.

Yours truly,

Captain & Paymaster.

10502

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, *Ans. Thos.*..... 2. Surname..... *Butler*.....

3. Rank..... *Private*..... 4. Regt. No. *4111*.....

5. Address in full to which future payments of gratuity are to be forwarded,..... *Brents St. Bank*.....

6. Date of enlistment in the Regiment..... *14th November 1917*.....

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

Mother Mary E. Butler.....

8. Relationship of such dependents..... *Mother & Sister*.....

9. Address in full of such dependents..... *Brents St. Bank*.....

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 Hfld. If so, give dates and particulars of such service..... *Served with the Regiment on active service in Belgium and was wounded in Sept. 1918*.....

12. Give total length of time which you served on active service, whether in Hfld. or Overseas..... *one year and sixty one days*.....

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

..... *not applicable*

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.

..... *I received only \$9000 that was \$2000 per month for 4 1/2 months*

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.

..... *not applicable*

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?.....

..... *not applicable*

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

*13 Aug. 1918 (b) Reason for discharge... *Went to front with service in accordance with War Service Regulations in action**

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....

..... *Served in action with the Regiment at Dupuis Belgium from Sept. 26. 1918*

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....

..... *receiving nothing*

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: *Anthony Butler*

Place of Residence: *Brent's Cove*

Declared before me at: *Luscar*

This *21st* day of *August* 19*19*

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

J. J. McQueen

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

(Separation Allowance Branch.)

Notice.

THIS STATUTORY DECLARATION is to be filled in correctly in every detail, and a complete reply, must be given to each question.

Each statement is considered as being made on Oath and the form is to be signed before a Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace, and returned to.

THE PAYMASTER
Separation Allowance Branch,
St. John's Nfld.

1b. Name in full of Soldier. Rank Reg't. or Unit. Reg't. No.

Anthony Butler 16/11 Ric

2c Age of Soldier

28 years

Married or Single.

Single

3. Name in full of Mother Age Occupation Permanent Address.

Mrs Mary C Butler ^{none} age 55 Brent's Lane

4. Give name of your husband. Age Occupation Where employed.

John Butler 5-8

5. If your husband is not supporting you state the reason.

Dead

6. If your husband is a chronic invalid and totally incapacitated state nature of malady. (A medical certificate must be enclosed with this document stating from what date husband has been totally incapacitated and for how long incapacity is likely to continue)

Dead

7. If you are a widow, state date and place of death of your husband.

and March 20 1913 at Brent's Lane

8. Have you married again since death of above mentioned husband?

no

9. Names of your other Children Address in Full. Age. Occupation Married or Single.

James age 26

Margaret age 23

Mary age 21

Elizabeth age 19

Catherine age 14

Ellen M age 11

married

Single

Single

Single

Single

(2)

10. State amount earned by (a) yourself (a) none
(b) Your husband (b)
11. State amount and source of any other income. none
12. State value of Real Property belonging to you and your husband. house land 2400 \$
13. State value of personal property belonging to you and your husband.
14. If husband is dead state value of Real and personal Property left by him. House & furniture
15. Actual amount contributed by soldier during the year prior to enlistment. 400 \$
16. Was this amount contributed weekly or monthly. During Fishing Season
17. Did this amount include payment of son's Board etc. during Fishing Season only
18. State your son's trade or occupation prior to enlistment. Fishing Summer winter Camp lumber
19. State amount of his wages per week.
20. State name and address of his last employer. A.P. company Grand Falls
21. State amount of support monthly from son since enlistment.
22. State amount of Allotment received by you from son monthly. X 9 dollars - 60 cents
23. From what date did you receive Allotment? 22. Dec check date first Oct
24. Actual amount contributed by other children } Weekly Monthly. none
25. Are any of these children in the employ of you or husband? 2nd youngest with me girls
26. If not receiving support from other children state cause. Explain fully. other son married
27. With whom are you residing at present. by my self in my own home
28. Have you made a previous claim for Separation Allowance? If not, Why? Give particulars. no
29. Are you already in receipt of Separation Allowance from any source? If so, how much? no

30. Are you in receipt of any payment from any Patriotic Fund? If so, How much, no

31. Was the Soldier at time of his enlistment an employee of the Newfoundland Government. no

32. In what capacity and in what place. none

33. Is he in receipt of a salary as much while serving in the 1st. Nfld. Regt. If so, how much? none

I herewith make this solemn declaration conscientiously believing the same to be true and knowing it to be of the same force and effect as if made under Oath and in virtue of the Evidence Act.

Signature of Applicant... Mrs. Mary E. Butler

Place of Residence Brent's Cove

Declared and subscribed before me at, Asen

this 28th day of December 1917

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

J. P. Duggan
Stip. Magist.

This application must be signed by two responsible parties one of whom must be a Clergyman, the other a representative of your local Patriotic Fund Committee, certifying that to the best of their knowledge after careful investigation, the above statements are correct, and the above Soldier, first mentioned, is the sole support of the applicant.

Signature of Clergyman X. P. J. Sean

Signature of Member of Patriotic Fund Committee. J. P. Duggan

Approved 17/1/18

W. B. 3
W. B. 3
W. B. 3



Case
No. 31, 7

1917

The Remuneration
Separation Allow. Branch
St. Miss

Sir. I am sending
you enclosed two applications for
separation allowance from Mrs. Mary
E. Butler Mother of Rev. A. Butler and Mrs.
Elizabeth Sullivan Mother of Rev. P.
Sullivan both of Brents Ch. St. Bart's
also attached is a certificate from
both District of Ill. Ch. to certify that
John Sullivan father of Rev. P.
Sullivan is a chronic drunkard

Your obedt. servant

D. P. Wraygan

D.P.

November, 30th., 1917.

Mrs Mary E. Butler,
Bretts Cove,
St. Barbe.

Dear Madam.-

Application has been made by your
son No. 4111 Pte. Anthony Butler, for a grant of
Separation Allowance to you on his account.

I enclose form of Statutory Declara-
tion which, kindly have filled up and return to me
at your earliest convenience, and oblige.

Yours faithfully,

Capt. & Paymaster.

C.R. 4111

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

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

1111
4111
Date. *Dec 12/19/19.*
Place. *Brent Cove.*
Name. *Pte A. Butler*

RECEIPT.

C.R.

4111

FOR ISSUE OF RIBAND OF VICTORY MEDAL 1914-1919.

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

4111. *E. R. a. Butler*

DATE...

3 January

PLACE...

Prentiss Cove

Receipt for Army Book 64

No. *4111* Name *Butler A.*

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

Name *A. Butler*

Date *July 17*

Place *Bent's Cove*

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

Casualty Form—Active Service.

Regiment or Corps *Royal Newfoundland* 14-12-1891

Rank *Pte* Surname *Butler* Christian Name *Anthony*

Religion *R. C.* Age on Enlistment *27* years *11* months

Enlisted (a) *14-11-17* Terms of Service (a) *Duration* Service reckons from (a) *14-11-17*

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

Extended { } Re-engaged { } Qualification (b)
or Corps Trade and Rate

Occupation *Fitterman* Signature of Officer *W. Long Capt*



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				
26.8.18	<i>max / Air. Base</i>		Embarked ... Disembarked... ARRIVED D. I. B. D. Joined Battalion	31 AUG 1918 31 AUG 1918 2 SEP 1918 5 SEP 1918	
<i>20</i>	<i>20 Feb 18</i>	<i>Ad G.S.W. from trans</i>	<i>36 Cest</i>	<i>29/9/18</i>	<i>Co 7299 /d.</i>
	<i>20 Feb 18</i>	<i>Transferred to England</i>	<i>20 Feb 18</i>	<i>29/9/18</i>	<i>Ad 29927.</i>
	<i>W. Long</i>		<i>for</i>	<i>27/10/18</i>	<i>W 3082</i>
					<i>0 1/2 No 1 Infantry Section, 3rd Echelon, G.H.Q., B.E.F.</i>
		<i>(Noted)</i>			
		<i>NEXT OF KIN:- Mrs. Mary Butler Breat's Cove W. Bay.</i>			<i>M.H.</i>

(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, Shoening-Smith, &c. W. 11814—M1188 1000m 1/17 (2722) S P & Co, Ltd. Forms B./103/4 E./354. P.T.O.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Form
B 121
28

Regiment of

1st Newfoundland

Number of Sheets

one

Signature of O. C. Company

W. B. 7/10

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>Battery 100th</i>	Age on	<i>27</i> years <i>11</i> months	<i>Soldier</i>	
Joined		Place and Date of Enlistment	<i>St. John's</i> <i>14-11-17</i>	Religion	
Joined		Period of		<i>R.C.</i>	
Joined				with Colours <i>61</i> years.	Place of Birth
Joined	Date	with Reserve <i>365</i> years.			

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
<i>Demobilized St. John's, 13. 17</i>									

To be carried over

The Royal Newfoundland Regiment *D 4111*

DEMOBILIZATION OF

Reg. No. *4111* Rank *RtE* Name *Butler Anthony*
 Date of Enlistment *14-11-17* Address *Brentz Cove* District *St. Barbe*
 Occupation *Fisherman* Classification for Discharge *1B* Medical Category *E*
 Recommendation S.M.B. *Requires treatment* Disability Rating *40% 3 mos*
 Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1
B 178	W 2494	B 122	Board 1st	" 2
B 178a	1 D 400A	B 1915	do 2nd	" 2 <i>3</i>
B 179	2 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 *27.11.18* *Worley Capt*
 C. Discharge Depot

PARTICULARS FOR DEMOBILIZATION

i. Civil Re-Establishment.

I am in a position to resume civilian occupation.

A Butler

Particulars passed to Vocational Officer for information and action.

Date

a. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable. *\$ 65.00*
- (b) ~~Clothing Supplied~~ *Joseph A. Snow*

Date *27-12-18*

CM

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 434 to his home
 at Brentford and Release Certificate No. 636 issued.

Date 27-12-18

C. S. 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 13-1-19

Date 27-12-18

Review pay etc to be adjusted - N.F.P. 9/2
 Depot Paymaster.

Discharge approved for 30 12 18

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
B 178a	D 400A	B 1915	do 2nd	" 3
B 178	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 27 12 18

C. S. Dicks Capt.
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.
 Board of Pension Commissioners.

with following additional documents.

ELIGIBLE for POST DISCHARGE PAY

DEC 30 1918

Date

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

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

Date Jan 31 1919

M. Stowley Capt.
 O/C R

Reg. No. *4711* Rank *Alie* Name *Butley. A.*
Attested Address *Brent's Lane J.H.*
Allotment Allottee
Date of Allotment Returned from Overseas *4-12-18*
Embarked for Overseas Cause *Discharge*

26-12-18

*Rec Discharge as Permanently unfit
Requies Treatment.*

27-12-18

PACED TO DEMOBILIZAT.

30-12-18

DISCHARGE APPROVED ON DEMOBILISATION.

C.R. 4111

June 22nd, 1920

W.B. Jennings, Esq.,
Minister of Public Works

Dear Sir:-

I beg to acknowledge receipt of your letter of 18th inst., forwarding copy of letter from Mr. William Rowell of Hattling Brook, relative to expenses incurred by him in conveying No. 4111 Pte. S. Butler from Filt Cove to Hattling Brook and back.

I am forwarding your letter and attachment to the Board of Pension Commissioners. This matter comes under their attention; and have asked them to communicate direct with you.

Yours faithfully,

Lieut.-Col.,

Chief Staff Officer.

1114
C.R.

June 23rd, 1920

Secretary

Board of Pension Commissioners

Sir:-

Herewith please communication from W.B. Jennings
Minister Public Works, forwarding copy of letter from
William Rowse copy of which is also attached, relative
to expenses incurred by him in conveying No. 411
Pte. S. Butler from Tilt Cove to Rattling Brook and
back again. Will you kindly reply direct to Mr.
Jennings letter.

Yours faithfully,

Lieut.-Col.,

Chief Staff Officer

DEPARTMENT OF VETERANS AFFAIRS
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION
AVIS DE DÉCÈS

TO:
À:

DATE .. Feb. 10, 1971

NAME .. BUTLER, Anthony ..
NOM ..

Service No. 4111 ROY. WFLD. REGT
Matricule N° .. WWI ..

CPC No. 260131
CCP N° ..

WVA No. 58261
AAC N° ..

Information Received from:
Information reçue de:

SPMS CPC St. John's WFLD Feb. 1, 1971

Date of Death .. Jan. 23, 1971 ..
Date du Décès ..

Place .. not stated ..
Endroit ..

Distribution: WSR-DASG
VI - ASS
~~BUICK~~
HO - BC

Pour le chef,
A. F. [Signature]
for Chief, Central Registry Division.
Dépôt central des dossiers.