



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5716 Name Ralph Butt Corps Meth

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. Ralph Butt
- 2. What is your full Address? 2. Heatherton St Georges
- 3. Are you a British Subject? 3. Yes
- 4. What is your age? 4. 20 Years 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 Be
- 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? 11. Yes

I, Ralph Butt 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.

Ralph Butt SIGNATURE OF RECRUIT.

J. P. Power Signature of Witness.

Ralph Butt 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 25 day of June 1918

W. Dicks 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 rank of if entitled by special authority, such will be attached to the original attestation.

Date 25/6/18 Approving Officer.

Place St. John's W. Dicks

† The signature of the Approving Officer is to be signed 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

5716.

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

Name Ralph Butt
 Apparent age 20 years 0 months. Height 5 feet 6 inches
 Chest Measurement { Girth when fully expanded 35 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin George Butt
Heatherton | Relationship Father
St George's 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>25-6-18</u>									
Joined at <u>St. Helier</u> on <u>June 25-1918</u>									
<u>Discharged August 5-1919</u>									
<u>Embarked St. Helier St. Columbkille Co. Sligo U.S. 22-7-18</u>									
<u>at St. Helier for Demobilization 14-6-19</u>									
<u>Arrived Newfoundland 1-7-1919</u>									
<u>Demobilization St. Helier 5-8-1919</u>									
Total Service forfeited as above _____									
Total Service towards Engagement to <u>5-8-1919</u> [date of discharge] <u>1</u> years <u>42</u> days									
Pensions " " " " " " " " " " " "									

Reg. No. 5706 Rank 1st Lieut Name Butt Ralph
Attested 24-6-18 Address Heatherton Bof. S.
Allotment 600 Allottee M^{rs} Geo. Butt Marker
Date of Allotment 15-7-18 Returned from Overseas
Embarked for Overseas JUL 22 1918 Cause

26 4/8 Vacc.

15th Nov 20-7-18

H. L. 2-7-18 - 9-7-18 S. L. 5-7-18

C.R. 5716

Extract from Daily Orders Part II Royal Newfoundland Regt.
Depot St. John's dated Aug. 14th 1919.

The discharge of the undernoted on demobilization has
been CONFIRMED by officer i/c Records from 5-8-19.

5716, Pte. H. Butt.

C.R. 5716

Extract from Daily Orders Part II Unit The Royal Rifles.
Regt. St. John's, July 12th, 1919.

The discharge of the undermentioned on demobilization has been
Approved
~~CONFIRMED~~ by C.O. Discharge Depot with effect from 22-7-19.

5716 Pte. R. Butt.

C.R. 5716

Extract from Daily Orders Part VI Unit The Royal Field. Regt.
St. John's, July 3rd 1919.

5716 Pte. R. Butt.

Reported at Headquarters 1-7-19 ex "Cassandra" which sailed
Glasgow 24th June, 1919.

C.R. 5716

Extract from Daily Orders part 11, from Unit The Royal Nfld.
Reg. St. John's, dated July 25, 1918.

The following man embarked for overseas on H.M.S.
"Columbella" July 22, 1918.

#5716 Pte. Ralph Butt.

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. St. John's, dated June 27, 1918.

#5716 Pte. Ralph Butt.

Attested for General Service with the Royal Nfld.
Regt. from 25-6-18

R. Dutt.

C.R. 5716

~~1490~~

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 Artillery* 7. Former Trade or Occupation } *Fisherman*
2. Regtl. No. *5716* 3. Rank. *Pvt* 7a. If the soldier claims previous service in Army, he should state—
4. Name (a) Former Regts. or Corps ;
 (Surname) *Bull* (Christian Names) *Ralph* with Regtl. Nos.
5. Age last birthday. *20*
6. Posted for duty on..... at.....
 in category (or grade).....
8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty ? (b) Date of Discharge ;
 (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
 (a) When (d) Particulars of Pension or Gratuity
 (b) Where (if any)
 (c) Opinion of Court

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

Statement of Case.

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

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

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

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

No complaints of no disability

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

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

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

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

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

Refutation

W.E. Pournier
 Medical Officer in charge of case.

Station *Haysbury*

Date *9-4-19*

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

3293/502/P&A

CHIEF PAYMASTER & OFFICER I/C. RECORDS.
NEWFOUNDLAND CONTINGENT,
53, VICTORIA STREET,
LONDON, S.W. 1.
ENGLAND.

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

WF/BC

Pay and Record Office.

26th February 9.

5716 PTE. R. BUTT

With reference to
the following telegram from the
above named Soldier received
25-2-19(1878):
"Money wired Dec.27.not received
"please enquire ."

No remittance has
been received for this soldier
since 7-11-18, when amount of
£4:2:0d was forwarded to you
for payment to Butt, receipt of
which was acknowledged by him
13-11-18, please.

Captain,
Asst. Paymaster,
Chief Paymaster & O.I/c.Rds.

W.P.U.

2 216
POST OFFICE



TELEGRAPHS.

Office Stamp.



Handed in at

Office of Origin and Service Instructions

Words

Charges to pay

B 378 5417 HAZELEY CP 27

THIS FORM MUST ACCOMPANY ANY ENQUIRY RESPECTING THIS TELEGRAM.

Received here at

TO

NEWFOUNDLAND PAY AND RECORD OFFICE 58

4678
25 FEB 1915
VICTORIA ST. LONDON

3292/502, 20/2/15

MONEY WIRED DEC 27 NOT RECEIVED PLEASE ENQUIRE

5716 RALPH BUTT B CO NEWFOUNDLAND REGT

HAZELEY DOWN CAMP :

Forms
C. 348
63

3293/502/P&A

MEMORANDUM.

From: CHIEF PAYMASTER & OFFICER I.C. RECORDS,
NEWFOUNDLAND CONTINGENT,
88, VICTORIA STREET,
LONDON, S.W. 1,
ENGLAND.

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

From: Officer Commanding,
2/Royal Nfld Regt.,
Winchester.

To: The Chief Paymaster,
Royal Nfld Regt.,
London.

ANSWER. *X*

WE/BC

Pay and Record Office.

26th February 1919.

5716 PTE. R. BUTT

With reference to the following telegram from the above named Soldier received 25-2-19(1678):

"Money wired Dec. 27. not received please enquire."

No remittance has been received for this soldier since 7-11-18, when amount of £4:2:0d was forwarded to you for payment to Butt, receipt of which was acknowledged by him 13-11-18, please.

Hazeley Down Camp,

March 4th 1919
- 6 MAY 1919

5716 PTE. R. BUTT. 13/19

The a/m claims that money had been wired by his father Geo. Butt, St Georges, to the amount of \$ 40.00. The following is an extract from letter written on 27-12-18, - "I cabled you \$40.00 yesterday"

Evidently this did not come through the Dept. of Militia he has been instructed to write to his father for particulars.

W. H. ...
Captain,
Asst. Paymaster,
Chief Paymaster & O.I/c. R.N.F.C.

J. J. ...
LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

No. 18110/1977

From:

NEWFOUNDLAND CONTINGENT

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

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



7th November 1918

Subject: 5716, Pte. R. Butt

With reference to the following telegram (9591) from the Hon. Minister of Militia, received

Pay to 5716 Butt £4:2:0

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

A. C. Minnall Maj.
Chief Paymaster & O. i/c Records.

November 13 1918

Receipt hereunder.

Received major for LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commdg. Batt'n,
Royal Newfoundland Regiment.

Received the sum of Four
pounds 2/- on account of
cable remittance from Newfoundland.

R Butt
No. 5416 Rank Pte

Witness 2930 Pte. G. Stein

No. 4934/718

N.F.F./79.

From. ~~NEWFOUNDLAND~~ CONTINGENT

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

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

28th March 1919

March 31st 1919

5716 Pte. Butt R.

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

Receipt hereunder.
Charles J.
LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commanding

"Pay to- 5716 Butt

£8. 4. 0.

Cheque £8. 4. 0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Received the sum of *Eight pounds four Shillings* in respect of telegraphic remittance from the Minister of Militia.

R Butt

Chief Paymaster & O. i/c Records.

No. *5716* Rank *Pte.*

Witness *McRoberts*

OB

Butt, R

5746

Ray & Sept.

August 5th 1919.

#5716, Pte. R. Butt,
Heatherton, St Geo.

Dear Sir:

Enclosed please find Discharge Certificate
3378.

Yours truly,

Capt. &

Officer i/c Records.

RS/.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5716 Rank Pvt. Name Butt
 Intended place of residence Heatherton
 2. Occupation Fisherman
 Classification of soldier E Medical Category A1

3. The above named man is discharged in consequence of

DEMobilIZATION Eligible for War Service Gratuity

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

Place, ST. JOHN'S
 Date JUL 8 1919
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place, ST. JOHN'S
 Date JUL 8 - 1919
 Signature of soldier R Butt
 Signature of witness A. Robinson

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place, ST. JOHN'S
 Date JUL 8 - 1919
 Signature of soldier R Butt
 Signature of witness W J. Roberson

STATEMENT OF SERVICE

7. Enlisted for service 25.6.18. No. of days on Military
 Discharged from service JUL 22 1919 Plus 14 days Service 407

APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S
 Date JUL 22 1919
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place, ST. JOHN'S
 Date August 5/1919
 Officer in Charge
 The Royal Newfoundland Regiment

Handwritten notes: 2079/3378

The Royal Newfoundland Regiment

Class for Demobilization:

E.

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *7.7.19*

Regimental No. *5716*

Name *Butt R.*

Address *Heatherton St Georges*

Present Medical Category *A.*

Recommended for:— { (a) Immediate discharge

(b) ~~Standing Medical Board~~

Members of Board {

R.H. Lat Major
O.C. Discharge Depot.

Habron
Senior Medical Officer

D.W. Burden
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6716 Rank Private Name B. Batt
 Date of Enlistment 25.6.18 Address Seathurst District St. John's
 Occupation Labourer Classification for Discharge 16 Medical Category A3
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

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

Date 7.7.19

O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment

I am / in a position to resume civilian occupation.

B. Batt

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

Am Johnston

Date 8.7.19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R2257 to his home at Heatherton and Release Certificate No. 3295 issued.

Date 8-7-19

J.A. Snowcroft
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 5-8-19

Date 8-7-19

J.A. Snowcroft
Depot Paymaster

Discharge approved for 22-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. Pj36	B 268	B 121	N.F. Med	D.F. 1
F 178	W 3494	B 122	Board 1st	" 2
F 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 8-7-19

J.A. Snowcroft
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 6/12/23

N.R. Coofa Capt
for O. C. Discharge Depot

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

Date

Civil Re-establishment Committee



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

R Butt

Signature of Man.

Reg. No. *3716*

J. Snowcroft

Signature of the Vocational Officer or his Representative.

Place

St John

Date

8-7-15

191

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

MEDICAL HISTORY

OR

Surname Dull

Christian Name Ralph

Table I.—GENERAL TABLE

Birthplace :—Parish St. John's County Newfoundland

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	25	June		191
	at <u>St. John's</u>		at	
Declared Age	20	years		days
Trade or Occupation	<u>Fisherman</u>			
Height	5	feet 6		inches
Weight		130		lbs.
Chest Measurement	Girth when fully expanded	35		inches
	Range of Expansion	3		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Number			
When Vaccinated				
Vision	R. E.—V=	<u>6/6</u>	R. E.—V=	
	L. E.—V=	<u>6/6</u>	L. E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Laminé Paterson</u>			
(Rank)		Medical Officer		Medical Officer
Enlisted	at	<u>St. John's</u>	at	
	on	25 day of <u>June</u>	on	day of 191
Joined on Enlistment	Corps		Corps	
	Regtl. No.	<u>Royal Nfld 5716</u>	Regtl. No.	
Transferred to	<u>Regiment</u>			
Became non-effective by				
(Signature)	on	day of	on	day of
(Rank)		191		191

hospital or to the sick list in case of Warrant Officers treated in quarters

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

Signature of Medical Officer

Discharged to duty.

CS Arisian

CAPT., R. A. M. C.

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 New Foundland* }
S 716 }
 2. Regtl. No. *4472* }
 3. Rank. }
 7. Former Trade or Occupation } *Fireman*
4. Name *Butt Ralph* }
 (Surname) } (Christian Names)
 7a. If the soldier claims previous service in Army, he should state—
 (a) Former Regts. or Corps ; with Regtl. Nos.
5. Age last birthday. *20*.....
6. Posted for duty on..... at.....
 in category (or grade).....
8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty? (b) Date of Discharge ;
 (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
 (a) When (d) Particulars of Pension or Gratuity
 (b) Where (if any)
 (c) Opinion of Court

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

Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
11. Date of origin of disability.
12. Place of origin of disability.
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

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

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

15. What is his present condition ?

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

See Complaints of No disability

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

20. Do you recommend—

(a) Discharge as permanently unfit ?

(b) Change to United Kingdom ?

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

Repatriation

Station *Hazeley Down*

Date *1-4-19*

W.E. Procuier Capt R.A.M.C.
Medical Officer in charge of case.

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



Descriptive Return of a Soldier Discharged on Account of Disability

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

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

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

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

Name in full *Burt, Ralph*

Regiment from which discharged *Royal Newfoundland*

Regimental number *5716*

Intended address *Stearleton, St George*

Height on discharge *5 Feet 6*

Color of hair on discharge *Black*

Complexion *Ruddy*

Color of eyes *Brown*

Descriptive Marks *—*

Figure on discharge *Medium*

Christian name of Father *George*

Christian name of Mother *Mary*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Stearleton 26-5-1898*

Nature and locality of civil employment required *—*

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full) *Ralph Burt* *He*
(Rank)

Station _____ Date **JUL 4 1919**

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



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

Station _____ Date _____

August 11th 1919.

Mr. R. Butt,
Heatherston. St. Geo.

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,

Capt. &
Paymaster.

RS/.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 20th, 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 *Ralph* 2. Surname *Burt*
3. Rank *Pvt* 4. Regt. No. *5716*
5. Address in full to which future payments of gratuity are to be forwarded. *Heatherton, St. George's*
6. Date of enlistment in the Regiment. *May 25/18*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.
8. Relationship of such dependents.
9. Address in full of such dependents.
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?
11. Were you on active service only in Mfld, if so, give dates and particulars of such service. *Overseas*
12. Give total length of time which you served on active service, whether in Mfld. or Overseas. *From May 25/18 to July 8/19*

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

No.

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

15. Have you been issued with a War Service Badge? *No.*

16. Have you, during the present war, served in the Imperial Forces? *No.*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *No.*

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *No.*

(b) If so, was such reversion in consequence of Misconduct or inefficiency?

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

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.

No.

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.

Ralph Butt

Signature of Applicant:

Place of Residence:

Declared before me at:

This

St. George's
St. John's, Nfld.

8th day of July 1919

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

POST DISCHARGE PAY.

Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	Net amount due
.....
.....
.....

Certified correct.

Registrar

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of

Royal Newfoundland

Number of Sheet

One

Signature of O. C. Company

C. D. Richards Lieut

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay				
No.		Age on	years	months	Religion				
5276	Ralph Butt		20		Fisherman				
Joined	Date	Place and Date of Enlistment			Religion				
Joined	Date	25-6-18			Meth				
Joined	Date	Period of	with Colours	years.	Place of Birth				
Joined	Date		with Reserve	years.	Heatherton				
Place	Date of Offence	Rank	Cases of Discretion	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
Hayley Camp	25/7/18	Pte	-	inattention on parade	Sgt. Pacey	1 day a B.	25/7/18	W. G. P. capt.	W.G.P.
				Demobilized	St John's	5	8/19		

To be carried over.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5716 Rank PLC Name B. Butte
 Date of Enlistment 25.6.18 Address Weatherford District St. John's
 Occupation Fisherman Classification for Discharge 6 Medical Category A3
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

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

Date 7.7.19 O. C. Discharge Depot St. John's

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

[Signature]

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

Date 8-7-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. P2257 to his home at Heatherton and Release Certificate No. 3295 issued.

Date 8-7-19 J. A. Sawle
Demobilization Officer

4. Pay and Allowances.

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

Date 8-7-19 J. A. Sawle
Depot Paymaster.

Discharge approved for 22-17-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	/	N.F. Med.	D.F. 1	/
E 178	W 3494	B 122	/	Board 1st	" 2	/
B 178a	D 400A	B 1915	/	do 2nd	" 3	2 Form B
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 8-7-19 J. A. Sawle
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 22-1919 J. R. Cooper Capt
O. C. Discharge Depot.

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

Date July 21/19 [Signature]