



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3789 Name Garfield Cairnes Corps C. of C.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>Garfield Cairnes</u> |
| 2. What is your full Address? | 2. <u>Bonne Bay</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>19</u> Years <u>8</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? | II. <u>Yes</u> |

DURATION OF THE WAR

I, Garfield Cairnes 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.

FR-5-17 Garfield Cairnes SIGNATURE OF RECRUIT.
Breder Smith Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Garfield Cairnes 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 18 day of May 1917
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 7.....
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).....

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Gasfield, James
Apparent age 19 years 8 months Height 5 feet 6 inches
Chest Measurement { Girth when fully expanded 36 1/2 inches
Range of expansion 3 1/2 inches
Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Richard James
Bonne Bay Relationship Father

Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage. (c) Present address. (d) Initials of Officer verifying entry.

Table with 4 columns labeled (a), (b), (c), and (d) for marriage details.

Particulars as to Children

Table with 2 columns: Christian Names and Date and Place of Birth.

STATEMENT OF THE SERVICES

Large table for service statement with columns: 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.

Total Service forfeited as above
Total Service towards Engagement to [date of discharge] years days
Pensions []



FIRST NEWFOUNDLAND REGIMENT

89

ATTESTATION OF

No. 3789

Name Garfield Caines Corps C of C

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Garfield Caines</u> |
| 2. What is your full Address? | 2. <u>Bonne Bay</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>19</u> Years <u>8</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, Garfield Caines 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.

Garfield Caines SIGNATURE OF RECRUIT
Brendan Smith Signature of Witness

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Garfield Caines 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 18 day of May 1917
 Signature of Attesting Officer

†CERTIFICATE OF APPROVING OFFICER.

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Garfield Barnes
 Apparent age 19 years 8 months. Height 5 feet 6 inches
 Chest Measurement { Girth when fully expanded 36 1/2 inches
 Range of expansion 3 1/2 inches
 Distinctive marks _____



INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Richard Barnes
Bonne Bay | Relationship Father

Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.
 (c) Present address. (d) Initials of Officer verifying entry.

(a)	(b)	(c)	(d)

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>18-5-17</u>									
Joined at <u>St John's</u> on <u>May 18-17</u>									
<u>(Recegd St John's Sep. 14/18)</u>									
				<u>Embarked St John's St. Helier to Halifax N. 4⁸/₁₇</u>					<u>Embarked for St. J. 4-2-18</u>
				<u>Disembarked lower 6-3-18</u>					<u>Joined Balton 15²/₁₈</u>
				<u>Reentered 13-3-18</u>					<u>Admitted 87th A. M. Shoulder Arm Stores 13-3-18</u>
				<u>53 Gen. Hospital 4-5-18</u>					<u>Admitted 3 London Gen. Hospital 27-3-18</u>
				<u>Admitted 3 London Gen. Hospital 27-3-18</u>					<u>Forwarded the report of St. J. for disposal 22⁷/₁₈</u>
				<u>Disembarked for discharge 27-7-18</u>					<u>Arrived in uniform law 22-8-18</u>
				<u>Discharged medically 14-9-18</u>					
Total Service forfeited as above.....									

Total Service towards Engagement to 14-9-18 [date of discharge] 1 years 120 days
 " " Pensions " " " " " " " " " " " "

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

MEDICAL HISTORY

Surname Caines OF Christian Name Garfield

Table I.—GENERAL TABLE.

Birthplace:—Parish Bonne Bay County _____



	SPECIAL RESERVE.		REGULAR ARMY.	
Examined	on <u>18</u> day of <u>May</u> 1917	on _____ day of _____ 191	at <u>Headquarters</u>	at _____
Declared Age	<u>19</u> years <u>8</u> months	_____ years _____ days	<u>Fisherman</u>	_____
Trade or Occupation	<u>5</u> feet <u>1</u> inches	_____ feet _____ inches	<u>128</u> lbs.	_____ lbs.
Height	<u>36 1/2</u> inches	_____ inches	<u>5 1/2</u> inches	_____ inches
Weight	_____ inches	_____ inches	_____ inches	_____ inches
Chest Measurement	Girth when fully expanded	_____ inches	_____ inches	_____ inches
	Range of Expansion	_____ inches	_____ inches	_____ inches
Physical Development	_____	_____	_____	_____



	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Vaccination Marks	_____	_____	_____	_____
When Vaccinated	_____	_____	_____	_____

Vision	R.E.—V= <u>46</u>	R.E.—V= _____
	L.E.—V= <u>46</u>	L.E.—V= _____

COPIES SENT		
To	No.	DATE
M. OF M.	<u>1176</u>	<u>21 JUL 1918</u>
1ST. BN.	_____	_____
2ND. BN.	_____	_____

(a) Marks indicating congenital peculiarities or previous disease _____

(b) Slight defects but not sufficient to cause rejection _____

Approved by (Signature) Lamont Peterson Medical Officer.

(Rank) Major

Enlisted at St Johns on 18 day of May 1917

Corps. _____ Regtl. No. _____

Joined on Enlistment _____

Transferred to 41st Field Coy 3789 Royal Newfoundland

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

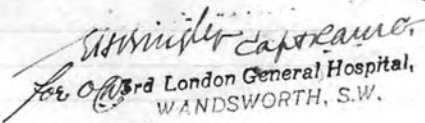
(Signature) _____ (Rank) _____

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 cause, nature or treatment of the case likely to be of interest or of future use. In cases 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				
3rd London General Hospital, WANDSWORTH, S.W.										
Admitted 27 2 18							<p>G/Lt R Shoulder N arm & R knee Inability to abduct arm</p>	<p>Board held Disability Cause Inability</p>	<p>see overleaf G/Lt R Shoulder N arm & R knee Inability to abduct arm G/Lt on active service bears a household lessened 50%</p>	




 3rd London General Hospital,
 WANDSWORTH, S.W.

C.R. 3789

Extract of Daily Orders Part 11, Unit: The Royal Newfoundland Regiment,
dated October 2nd 1918.



3789 Pte. G. Gaines

Having been found medically unfit is discharged from September 14 ' 18.

C.R. 3789



Extract from list of men of the Royal Newfoundland Regiment
discharged on various dates.

3789 Pte. G. Caines,

Discharged 14-9-18, Medically unfit

C.R. 3789



Extaret from Medically Board held Aug. 31st, 1918.

3789 Pte. Caines, G.H.

Recommended Discharge--Permanently Unfit.



H.F.P./54.

No. 313

From Pay & Record Office, London.

To Minister of Militia, St. John's, "fld.

#3789 Pte. G. Caines

**24-7-18 Pay for Hospital advances of 3/6 whilst at 3rd
Lon. Gen. Hosp. as per voucher 6071 3s.6d.**

COPY, Medical Report on an Invalid.

Station Hazelton Down Camp
 Date 17-7-16

1. Unit **2nd BATTN. ROYAL NEWFOUNDLAND REGT.**
2. Regimental No. 3789
3. Rank Pte
4. Name CAINES, GARFIELD HUBERT
5. Age last birthday 21 years
6. Enlisted on 18 May 1917
at St John's Nfld

7. Former Trade } Fisherman
 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).

S. W. R. Stedder.

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.
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. 3. 16

Import of 4 p's

He states that while on a Lewis gun team a shell burst on parapet blowing him in the air and wounding him in the stomach. Operated on in France and later sent to England where he was in 3rd London General Hospital boarded and
Classified B7D and later

Worked in active service.

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—

- (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?

He has a scar in front of head 3 inches long; one behind ear 2 inches long. There is inability to raise the right arm above the level of 30 degrees with axis; brisps flabby. Cannot close fist tightly. No power of M. arm.

na

na

Yes. Incision

na

na

na

Recommended for discharge as permanently unfit for further active service. M.K. Cap. Bone.

Officer in medical charge of case.

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

Station _____

Date _____

Officer in charge of Hospital.

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

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

(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," etc., 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.

Also see weight upper arm - no disability. Pain over right leg when walking.

21. (a.) State whether the disability is clearly 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?

23. Is the disability permanent?

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

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?

27. Do the Board recommend—

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

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. 1275 of 1917, is any surgical appliance recommended?

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

G.S.W.

no
yes

60% 3 months then 40%

yes

Signatures:—

Station _____

Date _____

Approved _____

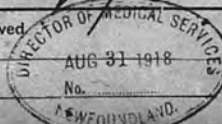
Station _____

Date _____

President.

Members.

Administrative Medical Officer.



Hazelton Down Camp,
17/7/18.

1. Royal Nfld. Regt.
2. 3789
3. Private
4. CAINES, GARFIELD HUBERT
5. 21 years
6. May 18th 1917, at St. John's Nfld.
7. Fisherman
8. GUN SHOT WOUND RIGHT SHOULDER
9. 13/3/18
10. In front of Ypres
11. He states that while on a Lewis gun team a shell burst on parapet blowing him in the air and wounding him in the shoulder. Operated on in France and later sent to England where he was in 3rd London Generaland later boarded and classified BIII.
12. (a) Wounded on active service.
13. He has a scar in front of head of humerus three inches long; one behind in fold of axilla posteriorly. There is inability to raise the right arm more than an angle of thirty degrees with side; biceps flabby; cannot close fist tightly. No power of right arm.
14. N.A.
15. N.A.
16. Yes. Excision.
17. N.A.
18. N.A.
19. N.A.
20. RECOMMENDED FOR DISCHARGE AS PERMANENTLY UNFIT FOR FUTURE ACTIVE SERVICE.



(SGD) J. St.P. K.
Capt. R.A.M.C.

21. (1) Yes. Also scar over left upper arm - no disability. Scar over right leg above knee, causes some pain when walking.

(b) G. S. W.

22. No
23. Yes
24. -----
25. 60% three months then 40%
26. -----
27. Yes.
28. -----
29. -----
30. -----

St. John's, Nfld.,
August 31st. 1918.

(Sgd) N. S. FRASER
J. SINCLAIR TAIT
L. PATERSON, Major.

Approved (SGD) CLUNY MACPHERSON, Major.

D. M. S. NEWFOUNDLAND.

CERTIFIED CORRECT COPY

CLUNY MACPHERSON, Major
Per *GW B.*



16th JULY, 1918

To be Discharged from Hospital ~~to-morrow~~.



Unit.	Squadron, battery, or company.	Regtl. No.	Rank and Name.	
Roy NFLD		3789	Pte	Gaines G



To Officer I/O Records
58 Victoria Street, S.W.

To Depot for disposal.

Classified by Medical Board and found fit for
Category B iii 15.7.18.

Has been furnished with a Warrant to rejoin.

Signature
Capt. RAMPTON

Registrar, R.A.M.C.F.
3rd London General Hospital,
WANDSWORTH, S. W.

Original

ward 6 C

Army Form B. 179

Medical Report on an Invalid.

Station 3rd London General Hospital, WANDSWORTH, S.W.

Date 11 July 1918

- 1. Unit 1st Re. Newfoundland
- 2. Regimental No. 3789
- 3. Rank Private
- 4. Name Baines, Garfield Hubert
- 5. Age last birthday 21
- 6. Enlisted on 18 May 1917
at St John's

- 7. Former Trade or Occupation } Fisherman
- 7A. If with previous service in Army, state—
 - (a) Former Unit;
 - (b) Regimental No.;
 - (c) Date of Discharge;
 - (d) Cause of Discharge.



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

G.L.W. Rtd. Shoulder, Arm & Knee
Inability to about arm
abduct.

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 of injury due to general disease.

COPIES SENT	
1	21 July 1918
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9. Date of origin of disability. 13-3-18.

10. Place of origin of disability. 7 Pres. T+T

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. cleaned B.T.P. in course.
T.A. wounds of Rt shoulder - inner border of humerus grazed. (each lacerated)

Admitted here 27-3-18. Wounds healed rapidly but inability to raise his arm more than 2/3 and fore. arm painful, despite the fact, it was done when pt. was given anaesthetic. It appears he fell down 4 years ago, & was in hospital then for 6 months, has been unable to get proper use of arm since.

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.

Aggravated by Active Service
G.L.W.

13. What is his present condition? *Wounds healed. Inability to raise his arm. ^{slight} chews damage to inner border upper part of Humero.*
part

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

14. If the disability is an injury, was it caused—
(a) In action? *yes*
(b) On field service? *yes*
(c) On duty? *yes*
(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? *yes. verte 11.*

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?

Reclassification

D.A. Davies Esq

Officer in medical charge of case.

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

Station 3rd London General Hospital
WANDSWORTH, S.W.

H. Logan Major RSMC

Officer in charge of Hospital.

Date July 13 1918

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

† 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 invalidated, 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.

1. (a.) State whether the disability is clearly 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.

Yes
-
-
No
No

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

Yes.

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

No.

23. Is the disability permanent?

Yes.

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

So.

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.

100.

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

27. Do the Board recommend—

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

reclassified
This should be reclassified as Category B. 1/11.

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?

No

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

No

Station 3rd London General Hospital, WANDSWORTH S.W.

Date 18-11-18

L. Thomas Lewis President.
R. B. Howard Members.

Approved on General Hospital, WANDSWORTH, S.W.

Date _____

Administrative Medical Officer.

3789



Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. In the field, dated April 13, 1918.

#3789 Pte. G. Caines.

Invalided to England (Wounded) March 27 1918.

C.R. 3789



**Extract from CASUALTIES RECEIVED FROM Pay & Record Office,
London, dated March 29, 1918.**

#3789 Pte. J. Caines.

**Admitted 3rd London General Hospital, Wandsworth, S.W.18,
27-5-18Gunshot wound Right Shoulder and Right Leg.**

CR 3789
Counter No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World



All Messages Sent are Subject to the Following Conditions:

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

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

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

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

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

(NOT TRANSMITTED)

Signature of Sender _____ Address Dept of Militia.

Line Number	Rcd	By	Sent	by	Check

Dated **March 22 1918.**

To **Richard Caines, Bonne Bay**

Regret to inform you that Record Office, London, officially reports **No. 3789, Private Garfield Caines at 53rd General Hospital Boulogne, March 15th**

G.S.W. shoulder, arm, right knee severe.

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

J.R. Bennett

Acting Minister of Militia.

FOR TYPEWRITER

WOUNDED & SICK N.C.O'S & MEN OF THE EXPEDITIONARY FORCE - FRANCE.

INFANTRY RECORD OFFICE - PERTH.

LIST NO. H.A. 20682.

16982 Pte. Holmes, A. 10/ A. & S. Hrs. Tonsillitis Mild., Adm. 54 (London) Gen. H. Aubengue ex 83 Gen. H. 15 Mar. 18.

ARMY SERVICE CORPS.

LIST NO. H.A. 20682.

M2/048520 Pte. Watt, A. ASC. MT. 22 SBAC. Strain Back Mild., Adm. 53 Gen. H. Boulogne 15 Mar. 18.
T2/024732 Dvr. Starke, W. ASC. 8 Div. Trn. Boil in Neck Mild. Adm. 54 (London) Gen. H. Aubengue 15 Mar. 18.

COLONIAL OFFICE.

LIST NO. H.A. 20682.

7623 Pte. Brown W. B.W.I. Otitis Media..... Dis. to Base Dtls. St. Martins Camp ex 54 (London) Gen. H. 15 Mar. 18.

Q.1/c RECORDS BRITISH WEST INDIA REGIMENT MEX CAMP ALEXANDRIA.

LIST NO. H.A. 20682.

7623 Pte. Brown, W. B.W.I. Otitis Media..... Dis. to Base Dtls. St. Martins Camp ex 54 (London) Gen. H. 15 Mar. 18.

NEWFOUNDLAND CONTINGENT.

LIST NO. H.A. 20682.

3853 Pte. Power, J.T. 1/Newfoundlands. Gassed Mild..... Adm. 54 (London) Gen. H. Aubengue 15 Mar. 18.
952 Pte Richards, H.V. 1/R. Newfoundlands. Shell Abrasion .. Adm. 54 (London) Gen. H. Aubengue 15 Mar. 18.
Face & Concussion
Sev.
3789 Pte. Caines G. 1/Newfoundland. GSW. Shldr. Arm &... Adm. 53 Gen. H. Boulogne 15 Mar. 18.
Knee R. Sev.

SOUTH AFRICAN - RECORD OFFICE.

LIST NO. H.A. 20682.

1817 Gnr. May, W.T. SA. HA. 1/3 SB. att. RGA. SW. Thigh L. Sev.... Adm. 59 Gen. H. St. Omer 15 Mar. 18.

GUERNSEY BRANCH - RECORD OFFICE.

LIST NO. H.A. 20682.

20179 Pte. Velluet, L. 4/E. Kent. R. att. T. Guernsey L.I. P. U. O. Mild..... Adm. 54 (London) Gen. H. Aubengue 15 Mar. 18.



694

X

R. 3789



Extract from Casualties received from Pay & Record Office,
dated March 25, 1918.
London, C

#3789 Pte. G. Caines

Wounded March 13, 1918.

Original

This space to be left blank for the Chelsea Number.

Army Form B. 268.



Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 3789 Army Rank Pte.

Name Baines Gosfield
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps ROYAL NEWFOUNDLAND REGIMENT.

Battalion, Battery, Company, Depot, &c.
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge _____

Place of discharge _____

1. *Description at the time of discharge.*

Age 21 years _____ months

Height _____ feet _____ inches

Chest measurement { girth when fully expanded _____ ins.
range of expansion _____ ins.

Complexion _____

Eyes _____

Hair _____

Trade _____

Intended place of residence (To be given as fully as practicable) { _____

Descriptive marks.

COPIES SENT		
To	No.	DATE
M. OF M.	<u>11760/198</u>	<u>21 JUL 1918</u>
G.C. 1st. Div.		
" 2nd Div.		

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of _____

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character :— _____

4. Character awarded in accordance with King's Regulations :—

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer. _____

Army Form B. 2088 has been issued to* _____

To be filled in on the soldier quitting the Colours.

Copy

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 Commissioners of Chelsea Hospital.

Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.1.

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

A Name in full *Caines Garfield Hubert*
Regiment from which discharged *ROYAL NEWFOUNDLAND REGIMENT.*
Regimental Number *3789*
Where born (Parish, Town and County), and when *Bonnie Bay Nfld 12 Sept 1896*
Intended address *Bonnie Bay Newfld.*
Height on discharge *5* Feet *9* Inches
Colour of Hair on discharge _____ **Colour of Eyes** *Blue*
Descriptive marks *Sheafuel Wd Scars front & back* **Complexion** *Fresh.*
Figure on discharge *Slimy.* *At shoulder also above at knee*
Christian name of Father *Richard* *abscess scars at upper arm*
Christian name of Mother *Elizabeth (dead)*
Wife's Maiden name in full } *NA*
Date and Place of Marriage }
Christian names of Children }
Nature and locality of civil employment desired *Returning to school if discharged*

has been

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) *Capt G.H. Caines*
Station *3rd London Esent Hoapl Wandsworth* **(Rank)** *Capt*
Date *July 13th 1918*

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

Station *— do —* **Date** *July 13th 1918*
Medical Officer i/c Hospital. *Capt D. Davies CS*

B Period of Service and in what Corps ...	Regiment	Years	Days	All Service Abroad with Stations		
				Years	Days	Days
				India		
				S. Africa		
Disallowed ...						
Service towards Pension ...						
Date inclusive to which pay has been issued				Sum due on account of advance of Pension }		
Sums due on account of public debts ...						

Rank on Discharge
Character (as on Certificate of discharge)
Where born, and on what date
Date and Place of first Enlistment
Trade on Enlistment
Cause of Discharge
Number of G.C. Badges
Wounds, and Actions in which received

Medals

Other distinguishing marks

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

Station _____ **Officer in Charge**
Date _____ **Records.**

No. 2989 Rank Pvt Name Caines E.

Pay	F.A.	Wkg	Total	N.P.P/33
100	10		110	
Less Allotment			20	
Net Rate			60	

DEBITS	Date	£	s	d	CREDITS	Period	Days	Rate	\$	¢	£	s	d		
						From		To						£	s
Balance					Balance	15 ² / ₈					2	0	10	✓	
Acquittance Rollie	1	12	0	✓	Pay @ Net Rate	16 ² / ₈	16 ² / ₈	151	60	90	60	18	12	4	✓
Hospital Advances	2	8	0	✓	<i>Rollie 10 days</i>			10	71			1	0	10	✓
A.B. 64.															
P.&.R.O. Payments	12	0	0	✓											
	2	2	0	✓											
				6	5										

21-17-0 ✓

W.P.A. 1.172

CR

~~2.4.7~~
3.4.7

*1992
6/16/76*

Office Copy.

LAST PAY CERTIFICATE

N.F.P./94

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

Regtl No. 3789 Rank Pte Name G. Gaines Unit Royal Nfld. Regt. who was Repatriated
 to Newfoundland on 21 / 7 / 18 Authority A. P. B. 179 Cause Class A

STATEMENT OF ACCOUNT

	DR.								CR.			
	PARTICULARS	£	£	£	s	d		£	s	d		
From 16/2/18 To 21/7/18	Balance Dr. from						Balance Cr. from					
	Allotment 156 days @ .50	78	00	16	0	6	15/2/18		2	0	10	
	Cash Payments: P. & R. O.			15	4	0	Pay 156 days @ \$ 1.00	156	00			
	E. F. M's to Nfld.				5	5	Field Allce 156 days @ \$.10	15	60			
	Purchase per N.W.C.A.			2	2	0	Other Allces days @ \$	171	60	35	5	2
	Acquittance Rolls B. E. F.			1	15	0	Other Credits:					
	Other Debits:						Ration Allowance.					
	Hospital Advances			2	8	0	18/7/18-21/7/18, 4 days @ 2/1			8	4	
	Total Debits			57	12	11	Total Credits		37	14	4	
	Balance due by Paymaster				1	5	Balance due to Paymaster					
			57	14	4			37	14	4		

CHECKED: *SRA*
26/7/18

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

(Place) _____ (Date) 1918 O.C. " " Company.

Made up/Checked in accordance with information received in the Pay & Record Office _____ to _____
 and is therefore subject to amendment if and as may be found necessary. London, S.W. 27 / 7 / 18
 Pay & Record Office London

Jul 27 1918

Chief Paymaster & Officer i/c Records.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th. 1919.

A complete reply must be given to every question in this Declaration There must be no blanks and no dashes, if any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

- Christian name. *Garfield* 2. Surname. *Caines*
3. Rank. *Pte* 4. Regtl. No. *9789*
5. Address in full to which future payments of gratuity are to be forwarded. *Bonne Bay Bucky Head*
6. Date of enlistment in the Regiment. *6 May '17*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.
Mr Richard Caines *No*
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? *No*
11. Were you on active service only in field, if so, give dates and particulars of such service.
Overseas
12. Give total length of time which you served on active service, whether in field or Overseas.
S. West *From May 6/17 to*
Sept 12/18 1. ^a

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.

misc.

Clothing allowance & back pay \$145
Board allowance 16.

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 Rest?..... If not give:- (a) date of discharge..... (b) Reason for discharge.....

Sept. 17/18

Physical unfitness

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

France - March 1918 to April 1918
Armentières, Passchendaele

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.

J. Cairnes

Signature of Applicant:

Place of Residence:

Birchy Head, Bonue Bay

Declared before me at:

R. John's field,

This

28th

day of

April 1917

John McCarty

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
			<i>James</i>	<i>280 00</i>

Certified Correct.

Paymaster.

J

Copy

Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man fit for General Service.

No. 3789 Rank Pte
Name (surname first) Caines Garfield
Regiment ROYAL NEWFOUNDLAND REGIMENT.

1. State what special qualifications you have for employment in civil life.

Fisherman 1 year

2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed?

*Richard Caines Bonne Bay
Employed one year in the fishery*

3. What is the nature and locality of the employment you desire?

*I want to go to school
study for a clerk*

4. What is the name of your Approved Society?

the orange

5. Have you been employed whilst with the Colours? It so, in what capacity?

No

Date 12-7-18

Signature Cpt Caines Garfield

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 4 (ii), item 3, of Army Council Instruction No. of 1916.

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

C.R. 3789

Extract from Nominal Roll Embarked S.S. John's for Overseas,
per S.S. "Florinel" Aug. 4, 1917.

3789 Pte. G. Caines.

C.R.

3789

Extract from Daily Orders Part 11 Unit The Royal
Nfld. Regt., St. John's, May 18th, 1918

3789 Pte. G. Caines.

Attested thisday, posted F. Company and assigned number
as shown.

C. 3789

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Reg. St. John's, dated August 5, 1918.

The following man returned from overseas and reported
at Depot August 4th.

#3789 Pte. G. Caines.

C.R. 3789

Extract of Casualties from Pay and Record Office, London, dated
16th. July 1918.

3789 PTE. J. CAINES.

ex 3rd London General Hospital 16/7/18 is sent to Discharge Depot
Winchester on same date. Marked B iii Employment.

Authority: Pay and Record Office.

C.R. 3789

Extract of Casualties from Pay and Record Office, dated 18th. July 1918.

Casualty Report 1486 of 16/7/18:

3789 PTE. J. CAINES.

reported at P.&R.O. 18/7/18 and was granted furlough to 10 a.m. 22/7/18 with orders to report at P.&R.O. ~~on~~ on latter date for disposal.

Authority: O. i/c Records.

C.R. 3789

RETRACT FROM NOMINAL ROLL DRAFT NO. 36 200 Other Ranks
from Snd., (Reserve) Batin. Royal Newfoundland Regt., and proceeded
to join the 1st., Battalion, Royal WFLd., Regt., E. S. F.,
Embarked Southampton, 4/2/18.

#3789 Pte. G. Gaines.

BC.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121
39

Regiment of 1st Newfoundland

Number of Sheet First

Signature of O. C. Company Frank Ayre Capt.

Regimental No. and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No. <u>3789</u>	<u>Caines Garfield</u>	Age on <u>19</u> years <u>8</u> months		<u>Fisherman</u>	
Joined _____	Date _____	Place and Date of Enlistment <u>St. John's</u>		Religion	
Joined _____	Date _____	Period of <u>12</u> years.		<u>C. of C.</u>	
Joined _____	Date _____			with Reserve <u>36</u> years.	

Place	Date of Offence	Rank	Cases of drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<u>Ayr</u>	<u>8th/₁₇</u>	<u>Pte</u>		<u>1st Hesitating to comply with an order of Cpl.</u> <u>2nd Insolence to a N.C.O.</u>	<u>J. Hilliard</u>	<u>7 days C.B.</u>	<u>9th/₁₇</u>	<u>Lieut. J. H. Snow.</u>	<u>J.P.C.S.</u>

Discharged Medically Ayr
St. John's, 9/4-18

COPIES SENT

TO	NO.
M. or M.	<u>11</u>
O.C. last line	<u>11</u>
" " and dit.	<u>11</u>
DATE	<u>8 JUL 1918</u>

To be carried over

Reg. No. 3789 Rank Pte Name James G. Bay

Attested..... Address.....

Allotment..... Allottee.....

Date of Allotment..... Returned from Overseas..... H-8-18

Embarked for Overseas..... Cause Discharge

31-8-18 recommended discharge permanently unfit
S. leave 4-8-18 to 18-8-18. 29-8-18

DISCHARGED - MEDICALLY UNFIT 14-9-11 to 172



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 *Baines, Garfield*

Regiment from which discharged *1st. Newfoundland*

Regimental number *3789*

Intended address *Bonne Bay*

Height on discharge *5* Feet *7"*

Color of hair on discharge *Brown*

Complexion *Fair*

Color of eye *Grey*

Descriptive Marks

Figure on discharge *Medium*

Christian name of Father *Richard*

Christian name of Mother *✓*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth. *Bonne Bay, Sept. 12th 1895*

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) *G. Baines*

Station *St Johns* Date *Aug 29/18* (Rank) *Pte*

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.

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

Station *St Johns* Date *Aug 29th 1918*

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 Commissioners of Chelsea Hospital.
Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.1.
Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

A Name in full *Baines Garfield Hubert*
Regiment from which discharged *1st Re. Newfoundland.*
Regimental Number *3789*
Where born (Parish, Town and County), and when *Bonne Bay, Nfld. 12 September 1896.*
Intended address *Bonne Bay, Nfld.*
Height on discharge *Five* Feet *nine* Inches
Colour of Hair on discharge *Brown* **Colour of Eyes** *Blue.*
Descriptive marks *Shrapnel wd. scars front & back Rt & Lldr. also above Rt knee* **Complexion** *Fresh.*
Figure on discharge *Slim.* *abscess scar at upper arm.*
Christian name of Father *Richard*
Christian name of Mother *Elizabeth (deceased)*
Wife's Maiden name in full }
Date and Place of Marriage } *N/A.*
Christian names of Children }
Nature and locality of civil employment desired *Returning to School if Discharged.*

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) *Laines G. H.* (Rank) *pte*
3rd London General Hospital, Date *13*

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.
B Saunders G. Medical Officer i/c Hospital.
 Station *3rd London General Hospital,* Date *July 13th 1918*
WANDSWORTH, S.W.

B Period of Service and in what Corps ...	Regiment	Years	Days	All Service Abroad with Stations		Years	Days
				To	No.		
Disallowed ...							
Service towards Pension ...							
Date inclusive to which pay has been issued	Sum due on account of advance of Pension }						
Sums due on account of public debts ...							

COPIES SENT		
To	No.	DATE
S. Africa OF M. O.C. 1ST. BN.	<i>11765/42</i>	<i>21 JUL 1918</i>
" 2ND. BN.	<i>[Signature]</i>	

Rank on Discharge
Character (as on Certificate of discharge)
Where born, and on what date
Date and Place of first Enlistment
Trade on Enlistment
Cause of Discharge
Number of G.C. Badges **Medals**
Wounds, and Actions in which received

Other distinguishing marks

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

Station _____ Officer in Charge
 Date _____ Records.

Extract from Registered Receipt, dated Feb. 17th., 1919.

One package No. R. #1527 Richard Canes

Bonne Bay.

To.

C.R. 3789

Feb. 15th 19.

Richard Gaines Esq.,
Bonne Bay.

Dear Mr. Gaines:

I beg to inform you that we are forwarding to you one cotton bag containing effects belonging to your son 3789 Pte. Garfield Gaines, of the Royal Newfoundland Regiment.

Herewith enclosed you will find receipt, kindly sign same and return at your earliest convenience.


Yours faithfully,



Lieut.

Casualty Officer.

No. of Paper 1423**PERSONAL EFFECTS.**Name Gaines J.C.R. No. 3789Rank PrivateRegiment ROYAL NEWFOUNDLAND REGIMENT

Article	Where stored	Notified by
<p>1 cotton bag containing: Personal effects extracted from Kil. Bag.</p>		
	Final disposal	
		<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Shipped to Newfoundland.</p>

Remarks :- Casualty Advice :- Repatriated, 21/7/18
 Next of Kin :- Father :- Richard Gaines
 Bonne Bay.

C.R. ³¹⁸⁹ Center No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

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

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

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

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

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

(NOT TRANSMITTED)

Signature of Sender

W.F.N.

Address Dept of Militia.

Line Number	Rcd	By	Sent	by	Check
-------------	-----	----	------	----	-------

Dated **March 30th, 1918.**

To **Richard Gaines, Bonne Bay**

Regret to inform you that Record Office, London,
officially reports **No. 3789, Private Garfield**
Gaines at Wandsworth.

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

J.R. Bennett

Actg Minister of Militia.

FOR TYPEWRITER

93-789

September 1st. 1918

From :-

Assistant Adjutant
Headquarters

To :-

Paymaster and Officer i/c of Records.
' Militia ' Dept.

3789, PTE. GAINES, G.H.
1667, PTE. POLLARD, P.

The marginally noted men have been recommended for discharge as permanently unfit by Medical Board, held on Saturday, August 31st. I am sending them herewith for your attention and necessary action please.

CCD/WFC

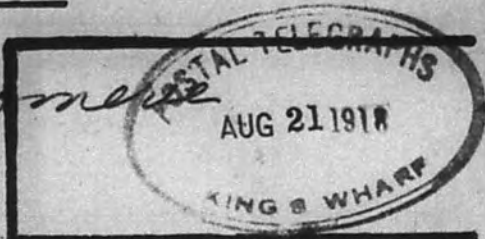


NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 31 *9/5*

Place from Major A Montgomery



To _____

private Garfield Caines missed
passage by Ethel writing
explanation

Geo W Wilton.

O. C. DEPOT,

FOR YOUR INFORMATION AND ATTENTION

Major A Montgomery

Major.

District Officer Commanding,
Newfoundland.

St John's, Newfoundland

Sept. 30th, 1918

Officer Commanding,
Royal Nfld. Regt.
Headquarters

SIR:

The unmentioned men have been discharged on
the dates given. Kindly note and post in Daily
Orders Part II.

I have etc.

(sgnd) J.M.HOWLEY,

Capt. etc.

1900 Pte.	Stuckless, Theo.	9-9-18	Med. Unfit
1565 Sgt.	Brown, Robert	14-9-18	Do.
1667 Pte.	Pollard, P.	Do.	Do.
3789 "	Gaines, Garfield	Do.	Do.
4817 "	Little, Warren	17-9-18	Do.
4305 L/C.	Gardner, Archibald	Do.	Do.
4764 Pte.	Russell, Herbert	Do.	Do.
714 "	Goudie, James	25-9-18	Do.
1751 Cpl.	Esakiel, John	25-9-18	Do.
1709 Pte.	Meansy, T.J.	Do.	Do.
47 "	Maddigan, Ml.	28-9-18	Do.
404 CSM.	LeGrow, Fredk. P.	Do.	Do.

H. Cairns

C.R. 3789

~~PRD~~

Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(1) in substitution for a man fit for General Service.

No. 3789 Rank pt Regiment 1st Royal W. LD

Name James G. Crawford
(Surname first)

1. State what special qualifications you have for employment in civil life.

fisherman 1 year

2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed.

*Richard James Bone Bay
employed one year in
the fishery*

3. What is the nature and locality of the employment you desire?

I want to go to school
study for a clerk

COPIES SENT		
To	No.	DATE
M. of M.	11760/98	21 JUL 1918
O.C. 1ST BN.		
" 2ND BN.		

4. What is the name of your Approved Society?

The Orange

5. Have you been employed whilst with the Colours? If so, in what capacity?

No

Date 12.7.18

Signature

James Garfield

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge or reclassification in a category from which men are being transferred to Class P. or P.(T.) of the Reserve probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 3 (ii), item 3, of Army Council Instruction No. 1912, of 1916.

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

NOTIFICATION by the Officer i/c Records to the O.C. Unit of a Soldier placed in Class P. or P.(T.) of the Reserve, in case of his transfer to the Reserve.

(To be completed and dispatched without delay.)

To the Officer Commanding

.....
.....

The Medical Board before whom this Soldier appeared are of opinion that his disabilities have been caused or aggravated by military service, and his documents have been sent to Chelsea for the consideration of his claim to a pension.

In the event of his transfer to the Reserve, he will be placed in Class P. or P.(T).*

* Strike out Class not applicable.

Soldier's surname..... *Camp* *Garfield* *Stuart*

Christian names.....
(in full)

Regt. No. and Rank... *3789* *Plt*

Regt. or Corps..... *1 R Fd*
(If T.F. this should be stated.)

.....
.....
Officer i/c Records.

Station.....

Date.....

N.B.—This Army Form will be left blank and sent with Army Form W. 3498(B) to the Officer i/c Records.

NOTIFICATION by President of Medical Board in the case of a soldier brought before the Board pending transfer to Class P. or P.(T.) Reserve.

(To be completed and dispatched on the day on which the Medical Board is held.)

To the Officer i/c Records,

The Soldier named below has this day appeared before an Army Medical Board at this station, and his documents are forwarded for transmission to Chelsea for the consideration of his claim to pension.

Note.—His transfer to Class P. or P.(T.) Reserve will take effect from 21 days after the approval of the General Officer Commanding-in-Chief, and will be notified to you by the Officer i/c Records concerned.

Soldier's surname... *Carr*... *Garfield*... *Hunter*...

Christian names.....
(in full)

Regt. No. and Rank... *3789*... *Plt*.....

Regt. or Corps..... *1 R. I. I.*.....
(If T.F. this should be stated.)

On transfer to the Reserve he will be placed in Class P. or P.(T.), and you will immediately furnish his address to C.A.P.I.O., 33, Baker Street, London, W.

3rd London General Hospital..... *Sancti Spiritus*.....
WANDSWORTH, S.W. President of Board.

Station.....

Date... *15-7-16*.....

WESTERN UNION

ANGLO-AMERICAN

DIRECT UNITED STATES

CABLEGRAM

SENT

FOR STAMPS

Prefix

Code

At _____
To _____ By _____

WORDS

CHARGE

VIA WESTERN UNION

THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.

11/5/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To EFM RICHARD CAINES

BONNEBAY (Newfoundland)

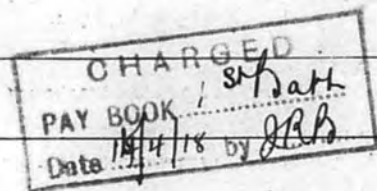
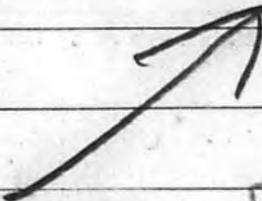
CABLE TEN POUNDS THROUGH MINISTER MILITIA

G CAINES

17 2 1/2
mt 6
30
7/6



3789



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.



to paymaster
1st Lt. Newfoundland Regt
58 Victoria St

Please Permit to pte Gains
3784 the sum of £1 (one pound)
on account of any balance
that may be due to me 6-18.

June 29th

Pte. G. Gains

W. C. S. Receipt

7937



Approved

~~W. G. C. H. Capt. W.~~

58 Victoria St, General Hospital,
WINDSOR, S.W.



RB 26/6/18

Paymaster

R. Newfoundland Regt
58 Victoria St.

Please remit to Pte Cairns
no 3789 the sum of £1
(one pound) on account of
any balance that may be
due to me

20-6-18

WM



J Cairns

approved for £1 one pound

W. W. W. W. W.
Capt Cairns



Handwritten signatures and date: 22/6/18, Regt 7842

Admitted 27 3 18

Only for use with Men returned from an Expeditionary Force
or from Garrisons Abroad.

Army Form W. 3016.
(In Books of 200.)

No. Date 16 7 18 191

- * (1) To the Officer i/c Records } 58 Victoria St
- * (2) The Officer Commanding } R. H. W. W. W. W.
- * (3) The Paymaster } 58 Victoria St. Station,

* Strike out that which is inapplicable.

Regimental No. 3789

Rank and Name Pte Loames G.

Regiment or Corps R. H. W. W. W.

has been granted } 16 7 18 to 25 7 18
a furlough from } 58 Victoria St.

His address while on leave will be

- I consider he is fit for
 - * I. DUTY.
 - * II. COMMAND DEPOT. Bat. B. 15 7 18
 - * III. EMPLOYMENT.

Officer in charge G. C. Hall Capt Hospital.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office.

In the case of men of the Royal Flying Corps, Royal Engineers and Army Ordnance Corps, two copies of Army Form W. 3016 will be sent to the Officer in Charge Records concerned and one to the Paymaster, instead of one copy to the Officer i/c Records, the Paymaster and O.C. shown in the Schedule.

Registrar, R.A.M.C.F.
3rd London General Hospital,

FILE	BRANCH
	INITIALS

To Paymaster,
R. Newfoundland Regt.,
58 Victoria St.,

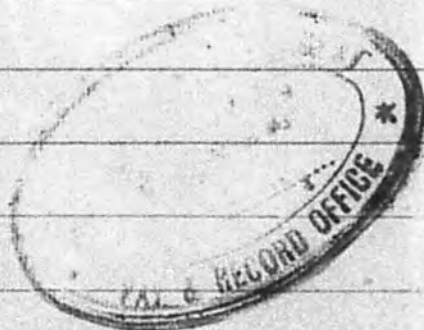
Dear Sir,

Please remit to 3789 Pte. Cairnes
the sum of £2 (two pounds) out of
any balance that may be due me,
and oblige your obedient servant

3789 Pte. Cairnes,
R. Newfoundland Regt.
G. Cairnes

approved
H. J. Talbot
✓
Esher Red X kept

OK. £. 2. 0. 0.
G. J. B. 28/5/18
Receipt no. 7428



Red Cross Hosp
Essex May 23

Please Permit to 3789
Pte G Cairns the sum
of 1 (pound) in cost
of any balance might
be due to him

G Cairns

FILE	BRANCH
	INITIALS

Approved
H. Talbot
Essex Red Hosp

OK. £1.0.0 rep.

23rd / 5 Recept No 7337





Recd Cross Ashes

Essex May 17

Please Permit to 5789
Pte G Cairnes the sum
of 1 pound) in case of
any balance might be
due to him
G. Cairnes



approved
H. Talbot
secy
Essex May 17

O.K. L.I.O.O. Inc.
1918 Recd - 7227

To Paymaster

1st Royal Newfoundland Regt

58 Victoria St

please remit to the

Garfield Baines c/o 3789

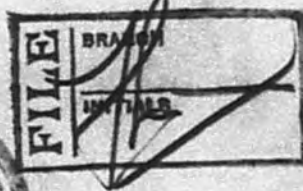
the sum of £1 (one pound on
account of My B

that My B &



3 March

OK. £1.00 disp. 4/4/18
Receipt No 6397
S C Hall
Capt

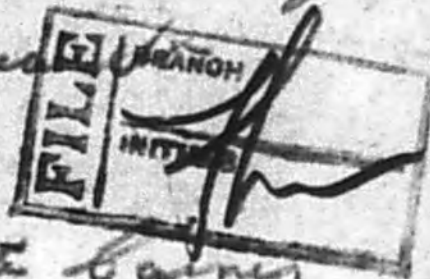


To Paymaster

1st Newfoundland Regt

Recpt. No. 6553

58 Victoria



Please remit to Pte Barnes
No 2489 the sum of £1
(one pound) on account of
any balance that may
be due to me

12th April

Approved
Capt W

O.K. £1.0.0
12th 1878 W. J. E.



Red Cross Hosp
Esher May 19

Please permit to 3789 Pte G
Caines the sum of 1 (pound)
in case of any balance might
be due to him G. Caines.

FILE
BRANCH
INITIALS



OK.
J. G. G. B. Edw Thorneycroft
1175718
Commandant.

Pres no 7081

To Paymaster,

R. Newfoundland Regt.,
58 Victoria St.,

Please remit to 3789 St. Cairnes
the sum of £1. (one pound)
out of any balance that may
be due me.

May 2/5/18.



G. Cairnes



approved
H. Galt

rec'd Esler Red X Wood

J.K. £1.00 kept
2/5/18 Receipt No 6870



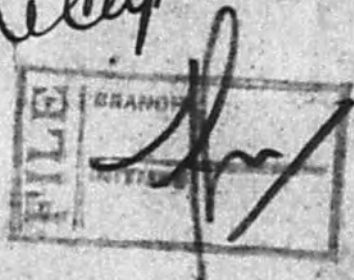
The Paymaster,
Newfoundland Contingent
58 Victoria St.

Please remit to Mr. Cairns
No 3779 the sum of £1.00
pound & out of any balance
that may be due me.

G Cairns

Approved
Hil Ballot
John Red X Wash
Apr. 27/18

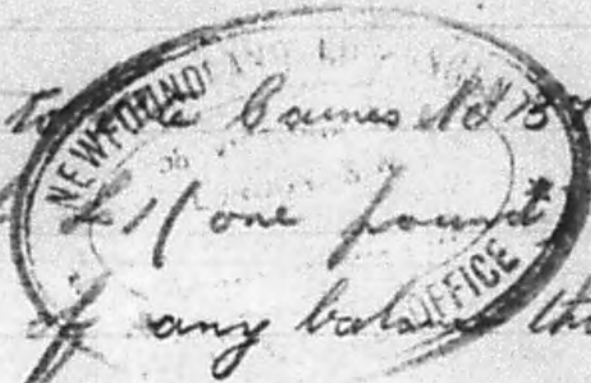
O.K.
£1.0.0
J.R.A. 27/4/18
Receipt no 6818



J.K.
22nd/18
1.0.0 *h.p.c*
Receipt No 6695

To Paymaster
1st Newfoundland Regt
68 Victoria St

Please remit to *the* *Barnes* *15489*
the sum of *£1* one pound
on account of any balance that
may be due to me.



22nd April



Approved
S.C. Hall
Apr 22

FILE	BRANCH
	INITIALS

WESTERN UNION

ANGLO-AMERICAN DIRECT UNITED STATES CABLEGRAM



Prefix l Code 2 1/2

WORDS	CHARGE
14	2 1/2

SENT

At _____

To _____ By _____

VIA WESTERN UNION

FOR STAMPS

THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.

17/5/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To **EPM RICHARD GAINES**

BONNEBAY (Newfoundland)

PLEASE CABLE TEN POUNDS THROUGH MINISTER MILITIA

IMMEDIATELY

G GAINES

CHAR
PAY BOOK
Date 23/5/18 by [Signature]

CHECKED.
[Signature]
23/5/18

Chge 1/2

78.9

14 1/2

28

7

35

2/11 ✓

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.

Caines, J.

3789

Ray Sept.

WWE/LO

May 1, 1919.

To:— Capt. Howley, O. I. C. Records.

From:— Vocational Officer.

Garfield Gaines, 3789. 6 Adelaide Street, CITY.

The man named in the margin wishes to discontinue his training course and has my permission so to do.

W. W. Nicholl.
Vocational Officer.

WWB/LO

April 30, 1919.

To:-- Capt. Howley O. I. C. Records,

From:-- Vocational Officer.

Garfield Caines, 3789. 6Adelaide Street, CITY.

The man named in the margin wishes to discontinue his training course and has my permission so to do.

W. W. Mitchell
Vocational Officer.

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE.

I hereby acknowledge that I have received all my pay and allowances (including clothing allowances) and all just demands up to the present date.

Place Bonnie Bay

Sig. of Soldier

Pvt Garfield Cairnes

Date Oct 25

Sig. of Witness

John J Cairnes

ORIGINAL.

LAST PAY CERTIFICATE

N.F.P./94

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

Regt No. 3789 Rank Pte Name G. Gaines Unit Royal Nfld. Regt. who was Repatriated
to Newfoundland on 21/7/18 Authority A. F. B. 179 Cause Class A

STATEMENT OF ACCOUNT

	PARTICULARS	\$	¢	£	s	d	PARTICULARS	\$	¢	£	s	d	CR.
From 16/2/18 To 21/7/18	Balance Dr. from						Balance Cr. from 15/2/18			2	0	10	
	Allotment 156 days @ .50	78	00	16	0	6	Pay 156 days @ \$ 1.00	156	00				
	Cash Payments: P. & R. O.			15	4	0	Field Allce 156 days @ \$.10	15	60				
	E. F. M's to Nfld.				5	5		171	60	35	5	2	
	Purchase per N.W.C.A.			2	2	0	Other Allces days @ \$						
	Acquittance Rolls B. E. F.			1	13	0	Other Credits:						
	Other Debits:						Ration Allowance.						
	Hospital Advances			2	8	0	18/7/18-21/7/18, 4 days @ 2/1				8	4	
	Total Debits			37	12	11	Total Credits			37	14	4	
	Balance due by Paymaster				1	5	Balance due to Paymaster			37	14	4	
			37	14	4				37	14	4		

CHECKED
JAG
27/7/18
PERIOD

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

(Place) _____ (Date) 191

O.C. " " Company.

Made up/Checked in accordance with information received in the Pay & Record Office London, S.W. to 27/7/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,
July 27th 1918

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

5452

Bucky Head
Bonne Bay
June 17th 49

3789

Mr Howdy

Dear Sir

I would like
to know if I could get
another Certificate for my
Discharged Badge.

~~As~~ I was working
and lost it.

Hoping to hear
from you soon I remain
yours
Truly
Garfield Caine

not seen
M.M.

3789

December 31st., 1918

Pte. G. Caines,

#6 Adelside Street,

City.

Dear Sir:-

Referring to your letter of December 3rd.,
I beg to state that I have not yet been authorized to
pay Sixty dollars (\$60.00) Clothing Allowance to men
discharged previous to November 26th., 1918.

The matter is, I understand, under con-
sideration at the present time, and if it should be
allowed, I shall forward you cheque for the balance
in due course.

Yours faithfully,

Captain,
Paymaster & Officer i/c Records

October 7th, 1918.

Pte. Garfield Gaines,
Bonne Bay,
Newfoundland.

Dear Sir,-

I beg to enclose herewith cheque for \$54.40, being the balance of pay due you to the date of discharge, also a Certificate of pay.

I also enclose Certificate of Discharge, dated September 14th, 1918, together with special form, which kindly sign and return to this Office.

Yours faithfully,

Capt. & Paymaster ⁱⁿ
Officer i/c Record

Encl. 4.

J/H.

April 5, 1919.

Capt. Howley,
O. I. C. Records.

Please pay to **Mr. Garfield Caines #3789**
the sum of **seven dollars**
in payment of allowance for week ended this date
in connection with re-education.

\$7.00

Pension	20
Allowance	30
Total	50

B. W. Mitchell
Vocational Officer

G. Caines

APR 26 1919

Capt. Howley,
O. I. C. Records.

Please pay to **Mr. G. Caines, No 3789**
the sum of **seven dollars**
in payment of allowance for week ended this date
in connection with re-education.

\$7.00

Pension \$20

W. W. Mitchell
Vocational Officer.

G. Caines

April 12th, 1919

Capt. Howley,
O. I. C. Records.

Please pay to **Mr. G. Caines, No 3789**
the sum of **seven dollars**
in payment of allowance for week ended this date
in connection with re-education.

\$7.00

Pension	\$20
Allowance	30
Total	50

W. H. Hall
Vocational Officer

G. Caines

April 19th, 1919

Capt. Howley,
O. I. C. Records.

Please pay to **Mr. G. Caines, No 3789**
the sum of **seven dollars**
in payment of allowance for week ended this date
in connection with re-education.

\$7.00

Pension	\$20
Allowance	30
Total	50

W. W. Mackell
Vocational Officer

G. Caines

1918 - 1919

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 54 ⁴⁰ / -

Sept 28 ⁶ / 19 18

Received from the First Newfoundland Regiment
the sum of Fifty four ⁴⁰ / - Dollars.
~~on account~~
balance of Pay.

Ch. No. 3296	Initials... <i>ew</i>
Pay Ledger... 70	Initials... <i>ew</i>
Gen. Ledger.....	Initials... <i>[Signature]</i>

Regtl. No. Rank

No. 3789

Rank JPL

Name Cairnes, C.

1918 - 1919

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 7⁰⁰

Sept 2nd 1918

Received from the First Newfoundland Regiment

the sum of Seven ⁰⁰ Dollars.

on account
~~balance~~ of Pay.

J. Cairnes

Ch. No. 2020	Initials EW.
Pay Ledger 7.0	Initials Wm
Gen. Ledger	Initials J

Regtl. No. Rank

No. 3789

Rank PL-

Name Caris. C.

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,



Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S, Nfld.

Fold Here



SEP 16 1921

1921.

The accompanying **Victory Medal** and/or **British War Medal**

is/are forwarded herewith to

Garfield Caines

in respect of his service as No. 3789 Rank Pte.

Name G. Caines Royal Nfld. Regt.
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received

Sep 23 1921

Signature

Garfield Caines

Date

Sep 23

Address

Bonne Bay

[P.T.O.]

Casualty Form—Active Service.

Regiment or Corps *Royal Newfoundland*
 Rank *Plt* Surname *Caines* Christian Name *Garfield*
 Religion *CofE* Age on Enlistment *19* years *8* months
 Enlisted (a) *18-5-17* Terms of Service (a) *Duration* Service reckons from (a) *18-5-17*
 Date of promotion to present rank Date of appointment to lance rank



Extended { } Re-engaged { } Qualification (b)
 Occupation *Fisherman* or Corps Trade and Rate *Plt* Signature of Officer *[Signature]*

COPIES SENT

DATE	No	Date
<i>21 JUL 1918</i>	<i>17678</i>	<i>[Signature]</i>
To	M. of M.	
	O.C. 1st. Bn.	
	" 2nd. Bn.	

Report	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
From whom received				
		Embarked ...	<i>3 FEB 1918</i>	
		Disembarked...	<i>6 FEB 1918</i>	
			<i>15 FEB 1918</i>	
<i>Wounded in Action</i>	<i>897a ad. SW House, Arras, France</i>	<i>Field</i>	<i>13-3-18</i>	<i>8213 15/3/18</i>
<i>53 Gen Stp</i>	<i>Do</i>	<i>3rd Hussars</i>	<i>-</i>	<i>CO 8941</i>
<i>Plata de Courant</i>	<i>To England</i>	<i>Boulogne</i>	<i>15-3-18</i>	<i>No. 20682</i>
			<i>27/3/18</i>	<i>W 3083</i>
		<i>Major</i>		
		<i>Infantry Section</i>		
		<i>G.H.Q., 3rd Echelon</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, Shoeing-Smith, &c.
 W. 11824-M1183 1000M 1/17 (27227) S P & Co, Ltd. Forms B.103/4 E./354. (P.T.O.)

Casualty Form—Active Service.

Regiment of Corps *ROYAL NEWFOUNDLAND REGIMENT.*

COPY.

Rank *Plc.* Surname *Baines* Christian Name *Garfield*
 Religion *C of E* Age on Enlistment *19* years *8* months
 Enlisted (a) *18.5.17* Terms of Service (a) *Duration* Service reckons from (a) *18.5.17*
 Date of promotion to present rank Date of appointment to lance rank
 Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and Rate
 Occupation *Fisherman* *Red 187 Fox Capt* Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
			Embarked ...	<i>3.2.18</i>	
			Disembarked...	<i>6.2.18</i>	
			<i>Joined</i>	<i>Batt.</i>	<i>18.7.18</i>
	<i>At Bunk</i>	<i>Wounded in action</i>	<i>field</i>	<i>13.3.18</i>	<i>B213 15.3.18</i>
	<i>87.7.a.</i>	<i>ad. S.W. Shoulder & knee trans. 3 accs.</i>		"	<i>ED 8941</i>
	<i>53 G Corp.</i>	<i>Do</i>	<i>Boulogne</i>	<i>15.3.18</i>	<i>Ad 20682</i>
				<i>27.3.18</i>	<i>(W. 3083</i>
<i>R/s "Peter de-Cornick" to Eng.</i>					
<i>(Sgd) R.T. Boyd. Lt for Major</i>					
<i>0/c I inf. sect.</i>					
<i>G.A.Q. 3 Echelon</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, Shoeing-Smith, &c.

COPY.

This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.



(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 3789 Army Rank Plt.

Name Caines Garfield
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps ROYAL NEWFOUNDLAND REGIMENT.

Battalion, Battery, Company, Depot, &c. _____
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge September 14th 1918

Place of discharge St. John's, Nfld.

1. Description at the time of discharge.

Age 20 years _____ months
 Height 5 feet 7 inches
 Chest measurement { girth when fully expanded _____ ins.
 range of expansion _____ ins.
 Complexion fair
 Eyes grey
 Hair brown
 Trade Fisherman

Descriptive marks.
Wound scars on right shoulder

Intended place of residence (To be given as fully as practicable) Boone Bay Nfld.

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of being no longer physically fit for war service on account of wound received in action

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character:—

4. Character awarded in accordance with King's Regulations:—

I certify that the above is an accurate copy of the character given by me on Army Form B. 2687* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2688 has been issued to*

* Strike out if not applicable.

DEPARTMENT OF VETERANS AFFAIRS
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION
AVIS DE DÉCÈS

TO: *Royal Rd Rest (WV1)* DATE 28.4.1972.....
À:

NAME *CAINES* Service No. CPC No.
NOM *GAINES GARFIELD H.* Matricule No. 3789. CCP No. 260081.

WVA No.
AAC No.

Information Received from:

Information reçue de: LETTER FROM WIDOW.....

Date of Death
Date du Décès MAR. 31. 1972.....

Place
Endroit NOT STATED.....

DANK - WW1

Distribution: WSR-DASG
VI - ASS
DO - BD
HO - BC

[Signature]
For the Chief,
for Chief, Central Registry Division.
Dépôt central des dossiers.