





2886



# FIRST NEWFOUNDLAND REGIMENT

C of G

## ATTESTATION OF

No. 2886

Name John Carroll

Corps .....

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

- |  |  |
|--|--|
| 1. What is your name? .....  | 1. <u>John Carroll</u> .....             |
| 2. What is your full Address? .....  | 2. <u>Lark Harbor</u> .....              |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u> .....                      |
| 4. What is your age? .....   | 4. <u>18</u> Years <u>3</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, John Carroll 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.

8 June 1916

John Carroll SIGNATURE OF RECRUIT.

Chas H Aye Signature of Witness.

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

I, John Carroll 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 19th day of June 1916.

Signature of Attesting Officer Chas H Aye Capt

### †CERTIFICATE OF APPROVING OFFICER.

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

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

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

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

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





# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name John Carroll  
 Apparent age 18 years 3 months. Height 5 feet 6 inches  
 Chest Measurement { Girth when fully expanded 34 1/2 inches  
 Range of expansion 3 1/2 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Abram Carroll, Lake Harbor, Bay of Islands | 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>17-6-16</u>									
Joined at <u>St John's</u> on <u>June 17<sup>th</sup> 16</u>									
<u>Discharged St John's Dec. 19/1918</u>									
<u>Embarked St John's S.S. Seilian for det. 28<sup>th</sup> 16</u>									
<u>Embarked for Det. 30<sup>th</sup> 16</u>									
<u>Joined unit 12-12-16 Admitted 34 Coy. Borneo Det. 20-2-17</u>									
<u>Hospital Det. 24-2-17. Invalids to England 7-3-17 Admitted 3 Coy 4th Borneo 8<sup>th</sup> 17</u>									
<u>Surround then attached to Coy Det. 20-4-17 Admitted 25 Coy 4th Borneo 15-8-17</u>									
<u>Invalids to England 6-9-17 Admitted 1 Coy 4th Borneo 11-7-17 Admitted</u>									
<u>3rd Coy 4th Borneo 9-1-18 Surround to 11-3-18 to 11th Coy 4th Borneo 12-3-18 Arrived</u>									
<u>Langfordland 20-3-18</u>									
<u>Discharged Medically 11th Coy 4th Borneo 19-12-18</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>19-12-18</u> (date of discharge)					<u>2</u> years	<u>186</u> days			
Pension .....									



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

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

Examination of *John Carroll*  
aged *18 yrs* conducted at *C.L.B.*  
Date: *June 17/16* Recruiting Officer:

NO OF TEST FINDING

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

*2506*

*yes 4 yrs ago 1 scar left.*  
*5'6"*  
*116 lbs*  
*31 = 34 1/2"*  
*\$400.00*  
*parents Mr Abram Carroll Bay of Islands*  
*none*

*Ji*

Signature of Medical Examiner:

*J.W. Burdett*  
Lieut

C.R. 2886

Extract from Casualties from Pay & Record Office, LONDON.

FOR DISCHARGE.

2886, Pte. J. Carroll.

ex 3rd London General Hospital 7/3/18 is granted furlough to 10 a.m. 11/3/18, with leave to proceed to Scotland, and orders to report at the Pay & Record Office on the latter date. To be repatriated.

Authority:

for discharge, A.Fs. W.3201.

C.R. 2886

Extract from Daily Orders part II, Unit  
First Newfoundland Regiment dated Sept. 15th.  
1917 received from the G.H.Q., 3rd. Echelon. No. 420.  
-----

Invalided to England 6/9/17      SICK.

#2886 Pte. J. Carroll.



C.R. 2886

Extract from Memorial Roll of Mfld. Regt. Draft No. 28  
from 2nd Bn. Depot, to 1st Bn. B.E.F. Embarked Folkestone  
5/8/17.

2886 Pte. J. Carroll.

C.R. 2886

Extract from Nominal Roll of Hfld. Regt. Draft No. 14  
from 2nd Bn. Depot, to 1st Bn. B.M. F. Embarked South-  
ampton, 30-11-16.

2886 Pts. J. Carroll.

C.R. 2886

Extract from Medical Board held Tuesday Nov.19th,1918.

2886 Pte. Carroll, J.

2nd Board. Recommended remain in Jensen Camp, and discharge from Army as permanently Unfit.

MM/

2886

C.R.

Extract from Daily Orders part 11, Depot St. John's  
dated December 26th, 1916.

---

Having been found medically unfit is discharged from 19-12-18.

#2886 Pte. John Carroll.

BC.



C.R. 2886

Extract from Daily Orders part 11, from Unit The Royal  
Newfoundland Regiment, St. John's, March 30, 1918.  
The following man reported to the Depot on 30/3/18  
from Overseas:-

#2886 Pte. J. Carroll.

C.R. 2886

Extract of Preliminary Report from Director of Medical  
Services to Officer Commanding Depot, dated April 5 '18.

#2886 Pte. J. Carroll.

Recommended admission to Jenson Camp.

C.R. 3617

2886 Pte. John Carroll. ✓

Ext. of Casualty list received Sept 11th., 1917.

Admitted 1st London General Hospital - Tuberculosis.

C.R. 2886

Extract of Nominal Roll Draft (All Ranks) to 1st  
Bn. B.E.F. Embarked Folkestone 2

2886 Pte. J. Carroll.

5-8-17.



C.R. 2886

Extract from Casualties received from P.&.R. Office London,

Mar. 9th, 1917.

At Wandsworth.

2886 Carroll

Bronchitis.

C.R.

2886

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

2886 Pte. J. Carroll.

30-11-16.

C.R. 2886

Extract from Nominal Roll Embarked St. John's for Overseas,  
28/6/16.

2886 Pte. J. Carroll.

C.R.

2886

John Carroll was attested for General service  
with the NEWFOUNDLAND REGIMENT on ..June 17th 1916.  
Regimental No 2886 was allotted to Pte. Hohn Carroll

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 15th, 1919.



# 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 connect on 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 \_\_\_\_\_

*John M. Squires*  
*John Carroll*

Line Number	Rcd	By	Sent	by	Check

Dated September 11, 1917.

To Mr. Abram Carroll,

Lark Hr.,  
Bay of Islands.

Regret to inform you that Record Office

London, officially reports No. 2886, Private

John Carroll has been admitted First London

General Hospital suffering from tuberculosis.

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

~~John M. Squires~~, R.A. SQUIRES  
Colonial Secretary.

# NEWFOUNDLAND POSTAL TELEGRAPHS.

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

(NOT TRANSMITTED)

Signature of Sender

Address

Line Number	Rcd	By	Sent	by	Check

Dated 10th March, 1917.

To Mr. Abram Carroll,

Lark Harbor, Bay of Islands.

Regret to inform you that Record Office,

London, officially reports No. 2886 Private John  
Carroll admitted Wandsworth Bronchitis.

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

J. R. BENNETT,

Colonial Secretary.



M.F.A.3

A 2886

## DEPARTMENT OF MILITIA

ADDRESS REPLY TO  
DEPARTMENT OF MILITIA  
AND QUOTE NO.  
2886

ST. JOHN'S, NEWFOUNDLAND.

April 18th., 1918

From:- D. M. S.  
To:- O. C. Depot.2886, Pte. J. CarrollThe marginally noted man was admitted to  
Jensen Camp April 5th., 1918.

Cluny Macpherson

Major, D. M. S.

Jellyphant  
JCS

July 25th, 1918

Dr. Arch Tait,  
Medical Officer i/c Jensen Camp

2886 Pte. John Carroll

The following <sup>telegram</sup> information is quoted for  
your information, please: Lark Harbour, 23-7-18  
"Pte. John Carroll very sick at home,  
will leave for St John's when better."

Abraham Carroll."

St John's, Nfld.

December 24th, 1918

C.C. Royal Nfld. Regt.,  
Headquarters

Sir,

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

I have etc.

(signed) J. H. SEWERY.

Capt. etc.

359	L/C.	Loveys, J.H.	Dec. 19th	Med unfit
2266	Pte.	Kennedy, G F J	" 21st	Do.
3703	"	Fomeroy, Geo.	" 20th	Do.
3150	"	Darby, C.B.	" 21st	Do.
2004	"	Holloran, H.	" 21st	Do.
3045	"	Polley, Raymond	" 21st	Do.
2826	"	Carroll, John	" 19th	Do.

To O.C. Depot.  
Royal Wfld Regt.

No 2886 Pte John Carroll  
at present a patient at  
Jensen Camp, desires home  
leave to visit his mother  
who is very ill. This is  
his first leave since  
returning from Overseas.  
He is in a sufficiently  
good state of health to  
travel & I recommend  
that he be given 2 weeks  
leave of absence.

I remain Sir

Yours truly

Archie Galt

M.O. Co. Jensen Camp

July 14<sup>th</sup> 1918

## NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 90 Sent by \_\_\_\_\_ Rec'd by \_\_\_\_\_ Check 13/ No. \_\_\_\_\_Place from Larkhr 23To Capt. R. H. Lant, H

# 1886  
 Ste John Carroll very  
 sick at home will  
 leave for St Johns when  
 better,  
 Abraham Carroll



Form No. 1

# NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No.

Sent by

Rec'd by

Check

No. \_\_\_\_\_

Place from

To

*St. John's*  
*19*

*Capt R. H. H. H. H.*



*please grant me 10 days  
extension of leave reply*

*John Carroll*



J Carroll

C.R.

2886

PRD

*Original*



### Medical Report on an Invalid.

Station 3rd London General Hospital,  
WANDSWORTH, S.W.  
Date 27 FEB 1918

- 1. Unit 1st R. Newfoundland
- 2. Regimental No. 2886
- 3. Rank Plt.
- 4. Name Carroll J.
- 5. Age last birthday 29 20
- 6. Enlisted on 16 May 1916.  
at St John's
- 7. Former Trade } Fishing  
or Occupation }
- 7A. If with previous service in Army, state—  
(a) Former Unit;  
(b) Regimental No.; 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).

Albuminuria.

COPY SENT TO  
O.C. H.Q.  
ST. JOHNS, N.F.L.D.  
N.F.P.38, No. 2886  
DATED 1 MAR 1918

#### 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. unknown unknown
- 10. Place of origin of disability. France.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Developed pains in left chest, pain over heart in June 1917. Condition became gradually more severe, sent to England in Sept 1917, attacks of pain in chest, & over heart, intermittent since.  
19-1-18. Few rales over lower Rt lobe.  
Systolic murmur just above apex, not transmitted. (Drine) trace of albumen found.

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). Active Service
- (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. —

*General condition good.  
 No Arterio sclerosis present.  
 Lungs - clear.  
 Heart - left ventricle enlarged.  
 Urine - slight trace albuminuria*

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?

*Reclassification*

*F. F. B. C. S.*

Officer in medical charge of case.

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

~~exc~~†  
 3rd London General Hospital  
 Station  
 WANDSWORTH

*H. E. Duncanson*

Officer in charge of Hospital.  
 Col. A. M. S. (F)

Date 27 FEB 1918

Comdg. 3rd. London Gen. 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.

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

- (ii.) Expressions such as "may," "might," "probably," &c., should be avoided.
- (iii.) *The rates of pension vary directly according to whether the disability is, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*
- (iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.
- (v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

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?

active service conditions

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

—

23. Is the disability permanent?

No

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

Twelve months

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

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

70%

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?

Yes

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.

as an out-patient

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

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

3rd London General Hospital  
 Station WANDSWORTH, S.W.  
 Date 28 FEB 1918

W. B. P. J. M. Capron President.  
R. B. Howard Members.

Approved.  
 3rd London General Hospital  
 Station WANDSWORTH, S.W.  
 Date 28 FEB 1918

W. B. P. J. M. Capron  
 Administrative Medical Officer.









No. \_\_\_\_\_

Regtl. No. 2886

Rank Pte

Name J. Carroll

Regiment Royal Rifles

Date from 7<sup>th</sup> March 1918

to 11<sup>th</sup> March 1918

To proceed to Ayr. Scotland

I/c NEWFOUNDLAND DIVISION  
50, VICTORIA Hospital

Station 7 MAR 1918

Date \_\_\_\_\_



Address whilst on furlough to which any orders will be sent:

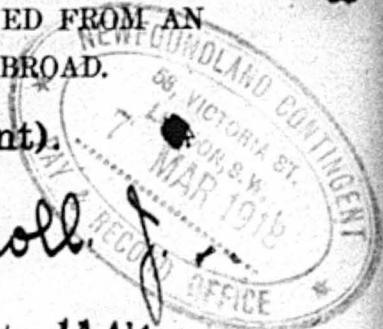
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



ONLY FOR USE IN THE CASE OF SOLDIERS RETURNED FROM AN EXPEDITIONARY FORCE, OR FROM GARRISONS ABROAD.

1st Roy. Infd (Regiment).

No. 2886, Rank Plé, Name Carroll.



is discharged from Hospital with orders to proceed to his home  
(~~name~~ 58 Victoria St.)  
S.S.

and there await further instructions as to his discharge from the Service.

Officer Commanding,

Place WANDSWORTH.

H. Jago

Capt. R.A.M.C.T.

Hospital.

Date

7<sup>th</sup> MAR 1918.

Registrar, R.A.M.C.T.

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

Admitted 19-1-18.

Army Form W. 3202.  
(In books of 100.)

**NOTIFICATION that a Soldier has been sent Home from Hospital to await Discharge under para. 392 (xvi.) King's Regulations.**

Soldier's } 2886 Rank Pte.  
Regtl. No. }

Name Barroll J.  
(Surname first)

Corps or Regiment } 1st R. Rifld  
(also Unit if known) }

To Officer i/c of Records 58 Victoria St S.W.

Regimental Paymaster 58 Victoria St S.W.

The above-named man, who appeared before a Medical Board, and whose discharge as "no longer physically fit for war service" was approved by the President of the Board on the 28-2-18. <sup>His address below</sup>, has been sent to his home ~~on~~ ~~where~~ to await instructions as to his final discharge; he has been given £1 (one pound) advance ~~and a suit of plain clothes.~~

He proceeded on (date) March 7<sup>th</sup> 1918.

to (full address) 58 Victoria St S.W.

Date 7-3-18. W. W. M. Capt. { Officer  
Registrar, R.A.M.C.T. { Comm.

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

Three copies to be made; one copy sent to each Officer above-mentioned, and one copy filed in the Office.

Admitted 19-1-18.

Army Form W. 3202.  
(In books of 100.)

**NOTIFICATION that a Soldier has been sent Home from Hospital to await Discharge under para. 392 (xvi.) King's Regulations.**

Soldier's } 2886 Rank Pl  
Regtl. No. }

Name Barroll J.  
(Surname first)

Corps or Regiment } 1st R Nfld  
(also Unit if known) }

To Officer i/c of Records 58 Victoria St S.W.

Regimental Paymaster 58 Victoria St S.W.

The above-named man, who appeared before a Medical Board, and whose discharge as "no longer physically fit for war service" was approved by the President of the Board on the 28-2-18, <sup>the address below</sup> has been sent to his home ~~on~~ ~~warrant~~ to await instructions as to his final discharge; he has been given £1 (one pound) advance ~~and a suit of plain clothes.~~

He proceeded on (date) March 7<sup>th</sup> 1918.

to (full address) 58 Victoria St S.W.

Date 7-3-18 Registrar, R.A.M.C.T. { Officer  
Comm.

Place 3rd London General Hospital, Hospital.

Three copies to be made; one copy sent to each Officer above-mentioned, and one copy filed in the Office.



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

3

11

I, John Barrow, Regl. No. 2886

hereby agree, until further notification by me, and in similar official form to make an Allotment of Sixty Dollars and 00 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup>/<sub>or</sub> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup>/<sub>or</sub> Persons concerned, viz.:

Allotment begins August 1/16

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>2733</u>	<u>Mother</u>	<u>Mrs Elizabeth Cannon</u>	<u>Leite Hill Bay of St.</u>	<u>60</u>
		<u>Commencing</u>		
		<u>1/9/16</u>		
Total Allotment, \$				

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

Sig.) Chas. H. Aye Capt.

Officer Commanding  
Company

(Sig.) [Signature]

(Rank) [Rank]

[Signature]  
1916

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 2886 Rank Pte Name J. Carroll Unit Royal Newfoundland Regt who was Repatriated  
 to Newfoundland on 12 18 Authority A. F. B. 179 Cause Class A.  
 DR. STATEMENT OF ACCOUNT CR.

PERIOD: FROM 22/12/17 To 12/3/18	PARTICULARS									
	£	s	d	£	s	d	£	s	d	
						Balance Cr. from 21/12/17				
	48	60		9	19	8	81	00		16 12 10
				17	10	0	Pay 81 days @ £.00			
							Field Allow 81 days @ £ .10	8	10	1 13 4
				2	9	0	Other Allowes days @ £			
				1	14	0	Other Credits:			
							Ration Allowance			
					1	4	7/3/18-12/3/18 6 days @ 2/-			12 0
				31	14	0	Total Credits			31 12 7
							Balance due to Paymaster			1 5
				31	14	0				31 14 0

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

CHAS D. JKS  
11/3/18

(Place) \_\_\_\_\_ (Date) 191 \_\_\_\_\_ O.C. " " Company.

Made up/Checked in accordance with information received in the Pay & Record Office London, S. W. to 11/3/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

11th March 1918

Chief Paymaster & Officer i/c Records.



No. 2886 Rank Pl Name Carrol

Pay	F.A.	Wkg	Total	N.F. PAY
1.00	10	-	1.10	✓ JRS
Less Allotment			60	
Net Rate			50	

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£ s d		
		£	s	d		From	To			£	s	d
Balance					Balance					12	14	5
Acquittance Rolls					Pay @ Net Rate	22 <sup>12</sup> / <sub>7</sub>	7 <sup>3</sup> / <sub>18</sub>	76	50	38	00	7 16 2
Hospital Advances		2	5	6	Ration Allow							10 0
A.R. 64.					5 days c/z							
P.&.R.C. Payments												
W.P.A. 247		1	14	0								
<del>Cost of Stoppages</del>				14								
4-0-10 - Cheque 7845	7 <sup>3</sup> / <sub>18</sub>	14	10	0	<del>16 19 9</del>							

~~20 14 7~~  
21 0 7 ✓

JRS  
7/31/18

9454

(8 48 71) G.D. 7579 100,000 4/16 H W V(P 1161) Forms/W. 3288/1  
W 1917-497 400,000 5/16

Army Form W. 3288.

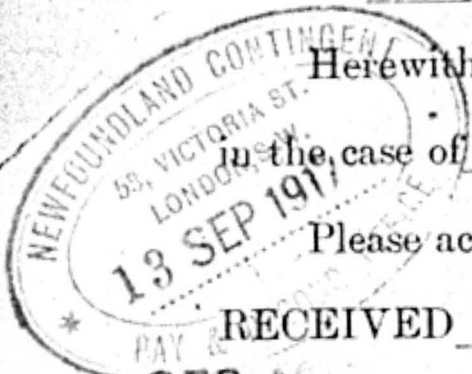
To O.C. / 1st London General Hospital \_\_\_\_\_ Hospital.  
Camberwell S.E. Station \_\_\_\_\_

Herewith Army Form B. 178 (Medical History Sheet) \_\_\_\_\_

in the case of 2886 Carroll J. Cte. 1st Newfoundland Regt

Please acknowledge receipt hereon.

NEWFOUNDLAND CONTINGENT.



RECEIVED

*Wm W. ...*

*J. J. Anderson*

14 SEP 1917

Commanding \_\_\_\_\_

Signature \_\_\_\_\_

PAYMASTER & OFFICER IN CHARGE RECORDS.

LT. - COL. R.A.M.C. (T.)

COMMANDING 1st LONDON GENERAL HOSPITAL.

# Notification by President of Medical Board of Approval of a Soldier's Discharge, under Para. 392 (xvi.) King's Regulations.

(To be completed and dispatched on-the day on which the discharge is approved.)

To the Officer i/c Records St Victoria St

The Soldier named below has appeared before an Army Medical Board at this station, and his discharge from the Service as "no longer physically fit for War Service" has this day been approved. (The discharge will be confirmed for a date 14 days after the date on this notification—see A.C.I. 1623 of 1916.)

Soldier's surname Carroll, Christian names John  
(in full)

Regt. No. and Rank 2886 Pte. Regt. or Corps 1/Rifles  
(If T.F. this should be stated)

His address on discharge will be Bay of Biscay  
La Coruña, N. Sp.

This information is for the Central Army Pension Issue Office only.

The Soldier states that\* — allowance is being issued in respect of him.

\*Insert "separation," "dependants," "family," or "no," as the case may be. The space must not be left blank.

Army Form D. 400A. and Army Form B. 179 for the above-named Soldier are forwarded herewith.

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

Date 22/2/18

[Signature]  
President of Board  
(Approving Officer)

A set of three forms will be made out for each Soldier whose discharge is approved, and will be dispatched to the officers severally indicated.

Attention is drawn to the fact that Forms A, B and C of each set are not in identical terms.



**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 for 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 in Charge of the Hospital, 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** Carroll John  
**Regiment from which discharged** 1st R. Newfoundland  
**Regimental Number** 2886  
**Where born (Parish, Town and County), and when** Burges. Nfld 28/8/98.  
**Intended address** Bay of Amies Newfoundland  
Lark Harbour  
**Height on discharge** 5 Feet 9 Inches  
**Colour of Hair on discharge** Dark **Colour of Eyes** Blue  
**Descriptive marks** scar L. leg **Complexion** Fair (Dark)  
**Figure on discharge** medium  
**Christian name of Father** Peter  
**Christian name of Mother** Elizabeth  
**Wife's Maiden name in full** \_\_\_\_\_  
**Date and Place of Marriage** \_\_\_\_\_  
**Christian names of Children** \_\_\_\_\_  
**Nature and locality of civil employment desired** uncertain at present

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) John Carroll

(Rank) O6  
 Date 26-2-18

Station Wandsworth

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 in Charge  
Hospital.

**3rd London General Hospital,**

Station WANDSWORTH, S.W. F. F. Bell Date 26-2-18

**B Period of Service and in what Corps** ...  
 Disallowed ...  
 Service towards Pension ...  
 Date inclusive to which pay has been issued  
 Sums due on account of public debts ...

Regiment	Years	Days	All Service (Above) with Stations	Years	Days
India					
S. Africa					

**COPY SENT TO**  
 O.C. H.Q.  
 ST. JOHNS, N.F.L.D.  
 N.F.P. 38. No. 3834/17  
 DATED 11 MAR 1918

Sum due on account of advance of Pension }

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 \_\_\_\_\_  
 Date \_\_\_\_\_

Officer in Charge  
Records.

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178<sup>a</sup> to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY OF

Surname

*Carroll*

Christian Name

*John*

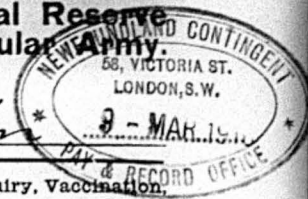


TABLE I.—General Table.

Birthplace { Parish ..... County .....

Examined { on ..... day of ..... 191... at .....

Declared Age ..... years ..... days.

Trade or Occupation .....

Height ..... feet ..... inches

Weight ..... lbs.

Chest Measurement { Girth when fully Expanded ..... inches Range of Expansion ..... inches

Physical Development .....

Vaccination Marks { Arm ..... RIGHT | LEFT Number .....

When Vaccinated .....

Vision { R.E.—V = ..... L.E.—V = .....

(a) Marks indicating congenital peculiarities or previous disease—

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

TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief Details and Signature
<i>28.2.18</i>	<i>Board held Permanently unfit Board approved 28/2/18</i>
	<i>Dist. Major Capt. James</i>
	<i>3rd London General Hospital, WANDSWORTH, S.W.</i>

COPY SENT TO  
O.C. H.Q.  
ST. JOHNS, N.F.L.D.  
NO. 2824/18  
DATED 11 MAR 18

Approved by

Rank

Medical Officer.

TABLE IV.—Service Table.

Enlisted	Corps		Regtl. No.	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation
	at	on				
Joined on enlistment	<i>1st Regt.</i>	<i>2005</i>				
Transferred to						
Became non-effective by						
on	day of	191...				
(Signature)						
(Rank)						

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178<sup>A</sup> to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY OF

Surname Carroll Christian Name John

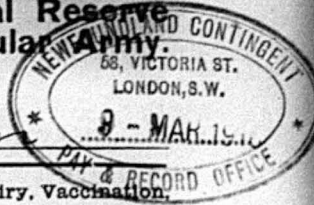


TABLE I.—General Table.

Birthplace { Parish ..... County .....

Examined { on ..... day of ..... 1911 at .....

Declared Age ..... years ..... days.

Trade or Occupation .....

Height ..... feet ..... inches

Weight ..... lbs.

Chest Measurement { Girth when fully Expanded ..... inches Range of Expansion ..... inches

Physical Development .....

Vaccination Marks { Arm ..... RIGHT LEFT Number .....

When Vaccinated .....

Vision { R.E.—V= ..... L.E.—V= .....

(a) Marks indicating congenital peculiarities or previous disease—

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

Approved by ..... Rank .....

*Medical Officer.*

TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief Details and Signature
24.2.18	Board held Permanently unfit Board approved 29/2/18
	<i>W. H. C. Carpenter</i>
	3rd London General Hospital, WANDSWORTH, S.W.

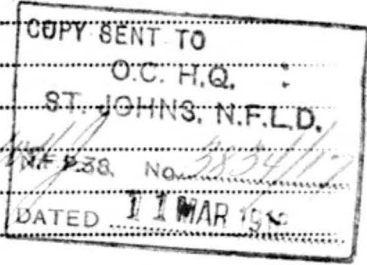


TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation		Date of departure or disembarkation	
	Year	Day	Year	Day
Enlisted at	1911			
Joined on enlistment	1.11.11			
Transferred to				
Became non-effective by				
on				
(Signature)				
(Rank)				





Carroll, J.

2886

Sept

Benoits Cove,

Nov 8<sup>th</sup> /21.

Dear Sir,

Please Inform me, If I am  
Intitled to Any prize money.

As I hear all Soldiers and  
Sailors are Intitled to the same  
Awaiting your Reply.

I am

Yours Truly,  
ex pte of Barroel.

Please Address

All Communications  
To Mr John Barroel  
Benoits Cove,

Bay of Islands.  
Newfed.

November 30th.1921

Mr. John Carroll,

Benoit's Cove, B. of I.,

Dear Sir:-

Referring to your letter of November 8th., I beg to state that Prize Money is not payable to members of the Royal Newfoundland Regiment.

It is granted only to men of the Nfld. Royal Naval Reserve, and the Imperial Navy, and represents the value of the prizes taken by the Navy during the war.

Yours truly,

Major  
Paymaster

Copy  
COPY.

To be used for recruits enlisting direct into the Regular Army only.  
Army Form B. 178<sup>A</sup> to be used for Special Reserve recruits  
and Special Reservists enlisting into the Regular Army.

### MEDICAL HISTORY of

Surname Canoll Christian Name John

TABLE I.—GENERAL TABLE.

Birthplace ... Parish \_\_\_\_\_ County \_\_\_\_\_

Examined ... { on \_\_\_\_\_ day of \_\_\_\_\_ 191  
at \_\_\_\_\_



Declared Age ... years \_\_\_\_\_ days.

Trade or Occupation \_\_\_\_\_

Height ... feet, \_\_\_\_\_ inches.

Weight ... lbs. \_\_\_\_\_

Chest Measurement { Girth when fully Expanded. \_\_\_\_\_ inches.  
Range of Expansion \_\_\_\_\_ inches.

Physical Development \_\_\_\_\_

Vaccination Marks { Arm ... Right \_\_\_\_\_ Left \_\_\_\_\_  
Number \_\_\_\_\_

When Vaccinated \_\_\_\_\_

Vision ... { R.E.—V= \_\_\_\_\_  
L.E.—V= \_\_\_\_\_

(a) Marks indicating congenital peculiarities or previous disease ... { (a) \_\_\_\_\_

(b) Slight defects but not sufficient to cause rejection ... { (b) \_\_\_\_\_

Approved by (Signature) \_\_\_\_\_  
(Rank) \_\_\_\_\_

Medical Officer.

Enlisted ... { at \_\_\_\_\_  
on \_\_\_\_\_ day of \_\_\_\_\_ 191

Corps.	Regtl. No.
<u>1st Newfoundland Regt</u>	<u>2886</u>

Became non-effective by \_\_\_\_\_

on \_\_\_\_\_ day of \_\_\_\_\_ 191

(Signature) \_\_\_\_\_  
(Rank) \_\_\_\_\_



**Table II.—Only for Admissions to Hospital or to the Sick**

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks
	Day	Month	Year	Day	Month	Year			
<i>1st London General H<sup>o</sup></i>	<i>7</i>	<i>9</i>	<i>17</i>	<i>19</i>	<i>1</i>	<i>18</i>	<i>LPT</i>	<i>134</i>	

**List in the case of Warrant Officers treated in quarters.**

Records 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, &c., will be given in the special syphilis case sheet.

Signature of Medical Officer

*H. H. Helm*

S E C O N D    B O A R D

Form Z179 N. M. D.

## Report of Medical Board.

Station      St. John's, Nfld	Date <b>November 19th., 1918</b>
No. and Rank <b>2886 - Private</b>	Age <b>20</b> Height <b>5'9"</b>
Name <b>CARROLL, JOHN</b>	Complexion <b>Fresh (Dark)</b>
Unit            Royal Newfoundland	Eyes <b>Blue</b> Hair <b>Dark</b>
Address <b>Lark Harbor, Bay of Islands</b>	
Former Trade <b>Fisherman</b>	
Enlisted at <b>St. John's</b> On <b>16/5/16</b>	(The Board will please note how the soldier's appearance corresponds with above description.)
Disease or Disability    Original <b>A L B U M E N U R I A</b>	
Subsequent <b>T U B E R C U L O S I S</b>	

Present Condition (Compare with previous Board)

**Pulse 76. No Albumenuria. Moist rales at both apices with bronchial breathing. Temp. 99**

**THE ENTIRE DISABILITY:** To what extent is his capacity lessened at present for earning a livelihood in the general labour market?

**100%**

**PENSIONABLE DISABILITY:** To what extent is his capacity at present for earning a full livelihood in the general labour market lessened by that proportion of his disability due to or incurred during service?

**100% while in Hospital**

**Recommendation of Medical Board**

**Remain in Jensen Camp**

**Discharge Permanently Unfit**

Members of Board

(Sgd) **N. S. FRASER**

**J. S. TAIT**

(SGD) **CLUNY MACPHERSON, Major**

**D. M. S. NEWFOUNDLAND.**

**L. PATERSON, Major**

Approving Medical Officer.





**CERTIFIED TRUE COPY**

**Medical Report on an Invalid.**

Station 3rd London General Hospital  
Wandsworth

Date 27/2/18



- 1. Unit 1st Royal Newfoundland.
- 2. Regimental No. 2886
- 3. Rank Pte
- 4. Name Canoll J.
- 5. Age last birthday 20
- 6. Enlisted  on 16th May 1916  
 at St John's

- 7. Former Trade } Fishing  
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).

Albuminuria.

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. Unknown.
- 10. Place of origin of disability. France.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Developed pains in left chest, pains over heart in June 1917. Condition became gradually more severe, sent to England in Sept 1917. Attacks of pains in chest & over heart, intermittent since. 19-1-18 Low ronchi over lower Rt lobe: systolic murmur just above apex, not transmitted. (Urine) trace of albumen present.

- 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.

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.

General condition good. No arterio sclerosis present. Lungs clear. Heart - Left ventricle enlarged. Urine - slight trace albumen present.

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?

Reclassification

(Sgd) F. J. Bell, CS

Officer in medical charge of case.

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

~~for~~ † Brig. Gen. A. H. L.

Station Wandsworth SW

Date 27/2/18

(Sgd) H. E. Duce Porter

Officer in charge of Hospital

Brig. Gen. A. H. L.

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

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

Opinion of the Medical Board.

NOTES.-- (i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

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

(iii.) *The rates of pension vary directly according to whether the disability is, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

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

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

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*

*Active Service Conditions*

(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?

*No*

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

*Twelve Months*

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

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

*70%*

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

—

27. Do the Board recommend—

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

*Yes*

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.

*As an out-patient*

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

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

Signature *2nd Lt. Gen. Hpl*  
 Station *Wandsworth SW*  
 Date *28/2/18*

*Col. John Lynton Capt. A.M.C. resident.*  
*Col. A. Howard C.S.*  
 Members.

Approved *2nd Lt. Gen. Hpl*  
 Station *Wandsworth SW*  
 Date *28/2/18*

*Col. John Lynton Capt. A.M.C.*  
 Administrative Medical Officer.

**Descriptive Return of a Soldier discharged on account of Disability.**

**INSTRUCTIONS**—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the 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, Chelsea 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** *Carroll John*  
**Regiment from which discharged** *1st R. Newfoundland.*  
**Regimental Number** *2886*  
**Where born (Parish, Town and County), and when** *Burges Afld. 28/8/98*  
**Intended address** *Bay of Islands, Newfoundland*  
**Height on discharge** *5* Feet *9* Inches  
**Colour of Hair on discharge** *Dark* **Colour of Eyes** *Blue*  
**Descriptive marks** *Scars L. leg.* **Complexion** *Fresh (Dark)*  
**Figure on discharge** *Medium*  
**Christian name of Father** *Peter*  
**Christian name of Mother** *Elizabeth*  
**Wife's Maiden name in full** \_\_\_\_\_  
**Date and Place of Marriage** \_\_\_\_\_  
**Christian names of Children** \_\_\_\_\_  
**Nature and locality of civil employment desired** *Uncertain at present.*

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) *(Sgd) John Carroll*  
 Station *Wandswoth* (Rank) *Pvt*  
 Date *26/2/18*

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.  
*Sd. Col. Gen. A.H.* *Sgt J. Bell* Medical Officer i/c Hospital.  
 Station *Wandswoth SW* Date *26-2-18.*

B Period of Service and in what Corps ...	Regiment	Years	Days	All Service Abroad with Stations	Years	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.



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

CERTIFIED TRUE COPY



No. 2886

Rank Private

Name (surname first) Carroll John

Regiment Royal Newfoundland Regt.

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

Fisherman (Newfoundland).

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?

Father's Boat (Newfoundland)

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

Undecided at present.

4. What is the name of your Approved Society? \_\_\_\_\_

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

Date 22/2/18

Signature John Carroll

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.

To be used for recruits enlisting direct into the Regular Army only.  
 Army Form B. 178<sup>a</sup> to be used for Special Reserve recruits  
 and Special Reservists enlisting into the Regular Army.

CERTIFICATE TRUE COPY

**MEDICAL HISTORY of**

Surname Carroll Christian Name John



TABLE I.—GENERAL TABLE.

Birthplace ... Parish \_\_\_\_\_ County \_\_\_\_\_

Examined ... { on \_\_\_\_\_ day of \_\_\_\_\_ 191 .  
 at \_\_\_\_\_

Declared Age ... years \_\_\_\_\_ days.

Trade or Occupation ... \_\_\_\_\_

Height \* ... feet, \_\_\_\_\_ inches.

Weight ... lbs. \_\_\_\_\_

Chest Measurement { Girth when fully Expanded. \_\_\_\_\_ inches.  
 Range of Expansion \_\_\_\_\_ inches.

Physical Development ... \_\_\_\_\_

Vaccination Marks { Arm ... Right \_\_\_\_\_ Left \_\_\_\_\_  
 Number \_\_\_\_\_

When Vaccinated ... \_\_\_\_\_

Vision ... { R.E.—V= \_\_\_\_\_  
 L.E.—V= \_\_\_\_\_

(a) Marks indicating congenital peculiarities or previous disease ... { (a) \_\_\_\_\_

(b) Slight defects but not sufficient to cause rejection ... { (b) \_\_\_\_\_

Approved by (Signature) \_\_\_\_\_  
 (Rank) \_\_\_\_\_ Medical Officer.

Enlisted ... { at \_\_\_\_\_  
 on \_\_\_\_\_ day of \_\_\_\_\_ 191 .

Joined on Enlistment ...	Corps. <u>1st Royal Newfld.</u>	Regtl. No. <u>2886.</u>
Transferred to ...	_____	_____

Became non-effective by \_\_\_\_\_  
 on \_\_\_\_\_ day of \_\_\_\_\_ 191 .

(Signature) \_\_\_\_\_  
 (Rank) \_\_\_\_\_

**Table II.—Only for Admissions to Hospital or to the Sick**

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks
	Day	Month	Year	Day	Month	Year			
<i>Bedford Gen. Hosp. Hansworth Sq</i>	<i>19</i>	<i>1</i>	<i>18</i>				<i>Albuminuria</i>		

List in the case of Warrant Officers treated in quarters.

records 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, &c., will be given in the special syphilis case sheet.

Signature of Medical Officer

Board held - see overleaf.  
Disability - Albuminuria  
Urine contains albumen  
Cause - Infection on Active Service  
Capacity - For earning a livelihood  
Lessened by 70%

Edw. H. Singler  
Capt. R. M. C. T.  
Jno. G. S. D. Hon. Gen. A. H.  
Wandsworth SW



**Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.**

Date	Brief details, and signature
28-2-18	<p>Board held                      Permanently unfit                      Board approved 28/2/18                      (sgd) E. J. Bingley Capt R.A.M.C.                      Genl. Dir London General Hosp.                      Waudswort SW</p>

**Table IV.—Service Table.**

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation



# RECEIPT FOR A SOLDIER'S DOCUMENTS

HEADQUARTERS NEWFOUNDLAND REGIMENT

To  
**Paymaster & Officer i/c Records**  
 Please receive documents as indicated below

No.	RANK AND NAME	Non-effective account	Medical history sheet	Med. medical history sheet	Medical report on an invalid	Proceedings on discharge	Civil life qualifications	Descriptive return	Active service casualty form	Regimental conduct sheet	Company conduct sheet	Field conduct sheet	Report of Newfoundland Medical Boards					Attestation paper	Identity certificate	Allotment papers	Kit issue on payment	Headquarters Travelling Board		
		N.F. Pl 36	B. 178	B. 178a	B. 179	B. 268	W. 3494	D. 400A	B. 103	B. 120	B. 121	3. 122	1st Board	2nd Board	3rd Board	4th Board	Board	B. 1915	Form L	Form K	Form I			
	3886 Pte. - Carroll, J.		11		1	1	1		2		1		1	1										

Received above noted documents,

Date Dec 16 1918

W Newbury Sgt

Signature of officer forwarding documents:

Date ..... 19





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. 2886 Rank pte Name J. Carroll Unit Royal Newfoundland Regt. who was Repatriated  
 to Newfoundland on 12/3/18 Authority A. F. B. 179 Cause Class A.  
 DR.

STATEMENT OF ACCOUNT

PARTICULARS	DR.					CR.				
	£	s	d	£	s	d	£	s	d	
Balance Dr. from						Balance Cr. from 21/12/17				
Allotment 81 days @ 60¢	48	60	✓	9	19	8	Pay 81 days @ \$1.00	81	00	16 12 10 ✓
Cash Payments: P. & R. O.				17	10	0	Field Allowance 81 days @ \$ .10	8	10	1 13 4 ✓
Hosp. Advances				2	9	0	Other Allowances days @ \$			
1 Pair Boots per N.S.C.A.				1	14	0	Other Credits:			
Other Debits:							Ration Allowance			
Clothing issued on repayment B. R. F.					1	4	7/3/18-12/3/18 6 days @ 2/-			12 0 ✓
Total Debits				31	14	0	Total Credits			31 12 7 ✓
Balance due by Paymaster							Balance due to Paymaster			1 5 ✓
				31	14	0				31 14 0 ✓

PERIOD: FROM 22/12/17 TO 11/3/18

RECEIVED  
 21 MAR 1918

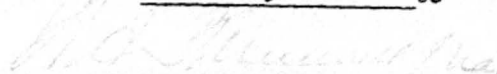
J.R.B.  
 11/3/18

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

(Place) \_\_\_\_\_ 1918 \_\_\_\_\_ O.C. " " Company.

Made up & checked in accordance with information received in the Pay & Record Office London, S. W. to 17 3 18 and is therefore subject to amendment and as may be found necessary.

Pay & Record Office, London

  
 Chief Paymaster & Officer i/c Records.

11th March 1918



# Department of Militia

St. John's, Nfld., August 22 1919

Received of

DEPARTMENT OF MILITIA, Medical Dept. (Pensions),

the sum of Two Dollars, in payment for services

rendered in connection with the boarding of 2886 Pte. J. Carroll  
re-boarding 2/LT. T. Dunphy.

at Curling, Bay of Islands on June 27 & 16 resp.

Cheque No.....	66 A
Initials .....	

(Signature)

*F. Fisher*



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..... *John* ..... 2. Surname..... *Carroll* .....
3. Rank..... *Private* ..... 4. Regt. No..... *2886* .....
5. Address in full to which future payments of gratuity are to be forwarded..... *Bennetts Cove Bay of Islands* .....
6. Date of enlistment in the Regiment..... *June 17th 1916* .....
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....  
*Aid. to Ship another* .....
8. Relationship of such dependents..... *our files* .....
9. Address in full of such dependents..... *Rosie Carroll* .....
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *No* .....
11. Were you on active service only in Hfld, if so, give dates and particulars of such service..... *Seven months in active do not remember dates* .....
12. Give total length of time which you served on active service, whether in Hfld. or Overseas..... *Seven Months in France* .....

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

*only one enlistment*

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

*Received no gratuity payment*

15. Have you been issued with a War Service Badge? *yes No. 274*

16. Have you, during the present war, served in the Imperial Forces?

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.

*Received nothing to the present*

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?

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

*no*

19. Are you now serving in the Regt.?

*no* If not give:- (a) Date of discharge *Dec. 19. 1915*

(b) Reason for discharge *Medical unfit*

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.

Signature of Applicant:  
Place of Residence: X  
Declared before me at: |  
This 12<sup>th</sup> day of

*John. Carroll*  
*Bennetts Cove.*  
*Curling.*  
*July* 1919.....

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

*Levi March Notary Public*

POST DISCHARGE PAY.		War Service Classify.	Net amount due
Date paid	Soldier. Dependent.		
.....	.....	.....	.....
.....	.....	.....	.....
Certified correct.			Registrar



Lark Harbour.  
Feb. 15<sup>th</sup> / 19.

D. P. 4065

You promised to  
send me my turn down badge  
But haven't received  
it yet.

hope to receive it as soon as  
possible.

Yours Truly  
J. Carroll

I have received my discharge.



Certificate to be signed by Soldier on Date of Discharge

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

Date 15 Feb 1919 Sig. of Soldier [Signature]

Place Carthage Sig. of Witness Thomas Bailey X  
his mark

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. 2886 Rank Pte Name J. Carroll Unit Royal Newfoundland Regt Ho was Repatriated  
to Newfoundland on 12/3 /18 Authority A. F. B. 179 Cause Class. A.

DR. STATEMENT OF ACCOUNT CR.

	PARTICULARS	£			s			d						
		£	s	d	£	s	d	£	s	d				
PERIOD: FROM 22/12/17 TO 12/3/18	Balance Dr. from							Balance Cr. from 21/12/17				12	14	6
	Allotment 81 days @ 60¢	48	60		9	19	8	Pay 81 days @ \$1.00	81	00		16	12	10
	Cash Payments: P. & R. O.				17	10	0	Field Allowance 81 days @ \$ .10	8	10		1	13	4
	Hosp. Advances				2	9	0	Other Allowances days @ \$						
	1 Pair Boots per N.W.C.A.				1	14	0							
	Other Debits:							Other Credits:						
	Clothing issued on repayment B. E. F.					1	4	Ration Allowance 7/3/18-12/3/18 6 days @ 2/-				12		0
	Total Debits				31	14	0	Total Credits				31	12	7
	Balance due by Paymaster							Balance due to Paymaster					1	5
					31	14	0					31	14	0

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

*JAS*  
*11/3/18*

\_\_\_\_\_  
(Place) 191 (Date) O.C. " " Company.

Made up/Checked in accordance with information received in the Pay & Record Office London, S. W. t5 11/3/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,  
11th March 1918 Chief Paymaster & Officer i/c Records.

# The Royal Newfoundland Regiment

## DEMOBILIZATION

### CIVILIAN CLOTHING GUARANTEE

I, No. 2886 Rank Pl Name Carroll J.

hereby undertake to supply myself with civilian clothing, consisting of one suit of clothes, one cap, one tie, one collar, one overcoat, within 14 days from date, in consideration of being issued with clothing allowance to the amount of \$ 60.00

Date 9/12/18

S. Johns

J. Carroll

Signature of Soldier

W. C. ...

Signature of Witness

July 19, 1919

#2886 Pte. John Carroll,

Benoits Cove,

Bay of Islands.

Dear Sir:-

I return, herewith, your Form of application  
to be completed by your signature, and oblige.

Yours truly,

Captain & Paymaster.



JMH/IM.

January 26, 1921.

John Carroll  
Late Mfld. Regt. No. 2886  
Benoit's Cove,  
Bay of Islands.

Dear Sir:

I enclose herewith cheque for \$70.00 representing payment on account of War Service Gratuity which you did not receive, although you presumably signed receipt for same.

Yours truly,

Major

Paymaster

Enc.



TELEPHONE 230.

ACCOUNTS COLLECTED QUARTERLY.

P. O. BOX 122.

302 WATER STREET,

St. John's, Newfoundland, *June 15* 1918

*M No 2886. Private. J. Carroll*

In account with **Charles Ellis,**

ENGLISH AND AMERICAN HIGH-CLASS TAILORING.

*To Cash*

*W.B.B.*

*648.00*

*To Payment.*

*Please pay this bill and charge to my account.*

*R. Perry*  
PAID  
JUN 19 1918  
ST. JOHN'S N.F.

*OK*

*2886 J Carroll*

*Paid to Charles Ellis per William Lusk the sum of*

*48.00*

*June 19. 1918*

October 31st, 1918.

Pte. J. Carroll,  
Jensen Camp,  
Blackmarsh Road

Dear Sir:

I enclose herewith cheque for  
\$10.00 being amount due you as pay on account.

Yours truly,

Capt.  
Paymaster

LM/

# SMYTH'S,

For everything in Fashionable Accessories to Men's Dress,  
**SMYTH BUILDING,**  
**286, WATER STREET, ST. JOHN'S, N.F.**

Terms: NET CASH.

G. F. KEARNEY, Manager.



JAEGER Clothing gives  
 Health, Comfort &  
 Distinction.

*June 12/15*  
*Private of Carroll.*  
*Royal Newfoundland*

*Pay*  
 ACCOUNT NO. 1629  
 CH. NO. [scribble]  
 IND. LEGAL [scribble]  
 PAY LEGAL [scribble]  
 CASH LEGAL [scribble]

1	Cap		2	25
1	Suit			50
2	Ties	75	1	50
3	Collars	25		75
4	Studs	5		20
1	Cuff Links			75
1	Braces		1	20
2	Shirts		3	00

*AK*  
*W.C.C.*  
*12.15*  
*less 10%*  
*1.20*  
*10.95*  
*Barrel 2886*

Phone 726.

P. O. Box 701.

CAUTION!—To Checkmate the dishonest use of the name of JAEGER, look for the label on each article, and insist that the name "JAEGER" is on the label.

No. 1

286 WATER STREET

RECEIVED OF

*June 8 1915*  
*Private of Carroll.*

DOLLARS

*ninety five*

SMYTH & COMPANY

\$

*10.95*

PER

Sept. 30th, 1918.

Pfc. J. Carroll,  
Jensen Camp,  
Blackmarsh Road.

Dear Sir,-

I enclose herewith cheque for \$10.00,  
as pay on account.

Your truly,

Capt. & Paymaster

January 8th. 1918.

Private. J. Carroll,  
Lark Harbour,  
Bay of Islands, "fld.

Dear Sir,-

I beg to enclose herewith cheque for  
\$44.44, being the balance of pay due you to the date  
of discharge.

I also enclose Certificate of Discharge,  
dated December 19th. 1918, together with special form,  
which kindly sign and return to this Office.

Yours faithfully,

Capt. & Paymaster &  
Officer i/c Records.

Encl. 3.

J/A.

January 8th.1918.

Private. J. Carroll,  
Lark Harbour,  
Bay of Islands, Nfld.

Dear Sir,-

I beg to enclose herewith cheque for \$44.44, being the balance of pay due you to the date of discharge.

I also enclose Certificate of Discharge, dated December 19th.1918, together with special form, which kindly sign and return to this Office.

Yours faithfully,

Capt. & Paymaster &  
Officer i/c Records.

Encl. 3.

J/T.



May 1st, 1918.

Pte. J. Carroll,  
Jensen Camp,  
Blackmarsh Rd.

Dear Sir,-

I enclose herewith cheque for \$10.00  
as pay on account.

Yours truly,

Capt. & Paymaster.

3, Sept. 1928.

#2886, Pte. J. Carroll,  
Jensen Camp,  
Blackmarsh Road.

Dear Sir:

I enclose cheque for Ten Dollars  
being the amount due you as pay on account.

Yours truly,

Lieut.  
For Paymaster

St. John's,

DEC 1 0 19

# Royal Newfoundland Regiment.

Billeting Account,

To M<sup>rs</sup> W. Hibbs

Loringstone Street

Billeting Soldiers as undermentioned

from Nov 26<sup>th</sup> /18 to Dec 9<sup>th</sup> /18

2886. H. J. Carroll 14 40

13 Jm.  
6563 EW

Certified correct for \$ 14. 40

W. J. Hibbs

C. J. Dickson  
Billeting Officer.

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$10.<sup>00</sup>

June 29<sup>th</sup> 1918

Received from the First Newfoundland Regiment

the sum of Ten Dollars.

on account  
balance of Pay.

C. J. B. G.

Cheque mailed 2/7/18

Ch. No. 5111	Initials. ECU
Pay Ledger 11/11	Initials. J. H.
Gen. Ledger 11/11	Initials. J. H.

Regtl. No. Rank

No. 2886

Rank Pte

Name J. Carroll

J. Camp

1917-1918.

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 10<sup>00</sup>

July 30<sup>th</sup> 1918.

Received from the First Newfoundland Regiment  
the sum of Ten 00 Dollars.  
on account of Pay. *of mailed*  
~~balance~~

Ch. No. <u>8584</u>	Initials <u>JAL</u>
Pay Ledger <u>43</u>	Initials <u>W.K.</u>
Gen. Ledger.....	Initials.....

Regtl. No. .... Rank .....



No. 2886.

Rank Plt

Name Carroll J.

Imson Camp

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$15<sup>00</sup>/<sub>100</sub>

Mar. 30<sup>th</sup> 1918

Received from the First Newfoundland Regiment  
the sum of  Fifteen  <sup>00</sup>/<sub>100</sub> Dollars.  
 on account  of Pay.  
 balance

16 enroll

Ch. No. <u>5317</u> .....	Initials.....
Pay Ledger <u>114</u> .....	Initials.....
Gen. Ledger <u>114</u> .....	Initials.....

Regtl. No. ....

Rank

*[Handwritten signature]*

No. 2886

Rank Pte.

Name J. Carroll.

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$10.<sup>00</sup>

May 31<sup>st</sup> 1918

Received from the First Newfoundland Regiment  
the sum of Ten Dollars.  
on account of Pay.  
balance

Ch. No. 1570	Initials. EW
Pay Ledger 1630	Initials. EP
Gen. Ledger	Initials. RW

Regtl. No. Rank

EW

No. 2886

Rank Pte

Name J. Carroll

J. Camp

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY-VOUCHER.

\$10<sup>00</sup>

Apr 20 1918

Received from the First Newfoundland Regiment  
the sum of 10 Dollars.  
on account of Pay.  
balance

Ch. No. <u>6139</u>	Initials <u>SW</u>
Pay Ledger <u>114</u>	Initials <u>ST</u>
Gen. Ledger <u>ky</u>	Initials <u>JH</u>

Regtl. No. \_\_\_\_\_ Rank \_\_\_\_\_

AS



No. 2886

Rank

Name

W. J. G. Mally

G

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 10<sup>00</sup>

Oct 31<sup>N</sup> 19 12

Received from the First Newfoundland Regiment  
the sum of ten <sup>00</sup>/<sub>100</sub> Dollars.  
on account  
~~balance~~ of Pay.

Ch. No. ....	4703	Initials	EW
Pay Ledger .....	43	Initials	WN
Gen. Ledger .....		Initials	

Regtl. No. .... Rank 

No. 2981.

Rank P6-

Name Carol J

Josson Camp

1918-1919

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 10<sup>00</sup>

Aug. 31<sup>st</sup> 1918

Received from the First Newfoundland Regiment  
the sum of ten <sup>00</sup> Dollars.  
on account ~~of~~ of Pay.

Ch. No.	1825	Initials	EW
Pay Ledger	43	Initials	WV
Gen. Ledger		Initials	E

Regtl. No. Rank

No. 2886.

Rank Pl.

Name Carole J.

J. Camp.

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 20<sup>00</sup>

Nov 25<sup>th</sup> 1918

Received from the First Newfoundland Regiment  
the sum of forty <sup>00</sup>/<sub>100</sub> Dollars.  
on account of Pay.  
balance

J Carroll

Ch. No. 5886	Initials. RW
Pay Ledger 43.	Initials. W
Gen. Ledger.....	Initials.....

Regtl. No. 2886 Rank Pte



No. 2881. Rank Pl.

Name Carroll J.

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 10<sup>00</sup> -

Dec 31 19 18

Received from the First Newfoundland Regiment

the sum of ten <sup>00</sup>/<sub>100</sub> Dollars.

on account of Pay.  
~~balance~~

J. Carroll

*[Signature]*

Ch. No. 6248	Initials. EW
Pay Ledger... 43	Initials... wn
Gen. Ledger.....	Initials.....

Regtl. No. 22556 Rank pte

No. 2886

Rank

Pl

Name

Carroll J

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 35<sup>00</sup>

Nov 13<sup>th</sup> 19 18

Received from the First Newfoundland Regiment  
the sum of Thirty five <sup>00</sup> Dollars.  
on account of Pay.  
~~Balance~~

J. B. Carroll

Ch. No.	5284	Initials	E.W.
Pay Ledger	43	Initials	W
Gen. Ledger		Initials	

Regtl. No. Rank

No. 2296.

Rank Pl.

Name Carroll J.

1918-1919

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 10<sup>00</sup> -

Sept. 30<sup>th</sup> 1918

Received from the First Newfoundland Regiment  
the sum of ten Dollars.  
on account of Pay.  
~~balance~~

Ch. No. 333.4	Initials... <i>ew</i>
Pay Ledger... 43	Initials... <i>ew</i>
Gen. Ledger.....	Initials.....

Regtl. No. .... Rank .....

*[Handwritten signature]*



No. 2886.

Rank PL

Name Carroll - J.

Janson Camp

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 60<sup>00</sup>/<sub>100</sub>

Dec 7<sup>th</sup> 19 18

Received from the First Newfoundland Regiment  
the sum of Sixty <sup>00</sup>/<sub>100</sub> Dollars.  
~~on account~~ of Pay. Electing Flaviole

Ch. No. 6534	Initials. <i>kw</i>
Pay Ledger 43	Initials. <i>wn</i>
Gen. Ledger.....	Initials.....

Regtl. No. 2286 Rank *Pte*

No. 2886 Rank *PL*

Name *Carroll J*

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 44 <sup>44</sup> / <sub>x</sub>

Dec 21<sup>st</sup> 19 78

Received from the First Newfoundland Regiment  
the sum of forty four <sup>44</sup> Dollars.  
on account of Pay.  
balance

Ch. No. ... 7336	Initials... Cur.
Pay Ledger... 43	Initials... awk.
Gen. Ledger.....	Initials.....

Regtl. No. .... Rank .....

70.0

No. 2886.

Rank O-6

Name Carroll J.

Reg. No. 2886 Rank Pr. Name Carroll J.

Attested \_\_\_\_\_ Address Bay of Islands, C.M. Livingston

Allotment \_\_\_\_\_ Allottee \_\_\_\_\_

Date of Allotment \_\_\_\_\_ Returned from Overseas 30-3-18.

Embarked for Overseas \_\_\_\_\_ Cause \_\_\_\_\_

4.4.18	Rec. adm. to Jensen Camp.
5.4.18	" " " " " "
9.4.18	to 24-7-18.
19-7-18	250. Rec. remain in Jensen Camp, & dis. from Army as Per. Capt



Receipt for Army Book 64

No. .... 2886. Name .. Carroll V. .....

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

Name. John Carroll

Date. July 29<sup>th</sup> / 20.

Place. Bessets. Coors. .....

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

*W*

2886

RECEIPT

FOR ISSUE OF RIBAND OF VICTORY MEDAL 1914-1919.

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

DATE. *Jan: 28<sup>th</sup> / 20*  
 PLACE. *Benoits Cove,*

NO. *2886* NAME. *John. Carroll.*

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

John Carroll

in respect of his service as No. 2886 Rank Pte.

Name J. Carroll Royal Nfld. Regt.  
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received Sept 23<sup>rd</sup> / 1921

Signature John Carroll

Date Sept 26<sup>th</sup> / 1921

Address Benoits Cove Bay of Islands

[P.T.O.]

Fold Here

---

**ON HIS MAJESTY'S SERVICE**

To the Officer in Charge of Records,

The Royal Nfld Regt..

Dept of Militia,

St. John's Nfld.

---

Fold Here

July 5th. 1921. 1919.

The accompanying King's Certificate, on his discharge,

(No. 1031.), is forwarded herewith to

John Carroll

in respect of his service as No. 2886 Rank Pvte.

Name John Carroll, Corps Royal Nfld Regt

Receipt of the same should be acknowledged hereon.

Received July 20<sup>th</sup> 1921

Signature John Carroll, Hq.

Date July 22<sup>nd</sup> 1921

Address Benoits Cove, Bay of St. Lawrence





**Casualty Form - Active Service.**

Regiment or Corps *The Royal Welch Fusiliers*

Rank *Sgt* Surname *Carroll* Christian Name *John*

Religion *Catholic* Age on Enlistment ..... years ..... months

Enlisted (a) *17.11.17* Terms of Service (a) *3 years* Service reckons from (a) *17.11.17*

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

Extended (.....) Re-engaged (.....) Qualification (b) *1st Class*  
 or Corps Trade and Rate *1st Class*

Occupation ..... Signature *J. Carroll* REC OFFICER



**CERTIFIED TRUE COPY**

Report		Record of promotions, reductions, transfers, casualties, etc., 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>Shamilton</i>	<i>15.8.17</i>	
			Disembarked <i>Rouen</i>	<i>7.8.17</i>	
		<i>Joined Battalion</i>			
<i>30.8.17</i>	<i>25. Sgt Kemp</i>	<i>Adm. Diphtheria ?</i>	<i>Rouen</i>	<i>15.8.17</i>	<i>H. 12998</i>
	<i>"Crisbrook Cully"</i>	<i>Invited to England (T.B. Lung)</i>		<i>6.9.17</i>	<i>W 3085</i>
			<i>Sgt C. Marry</i>		
			<i>Sgt No. 1st Battalion</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.

Army Form B. 103.

Regimental Number *2886*

**Casualty Form Active Service.**

Regiment or Corps *The Royal Scots*

Rank *Sgt* Surname *Arnold* Christian Name *John*

Religion *Catholic* Age on Enlistment *18* years *3* months

Enlisted (a) *St John's* Terms of Service (a) *Duration* Service reckons from (a) *12/11/16*

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

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

Occupation .....



**CERTIFIED TRUE COPY**

Date	Report From whom received	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.
			Embarked	<i>Shampton</i>	<i>30.11.16</i>
			Disembarked...	<i>Lisieux</i>	<i>1.12.16</i>
<i>29.12.16</i>	<i>29.12.16</i>	<i>Deprived of 4 days pay (deprived)</i>	<i>France</i>	<i>10.12.16</i>	<i>01810-1482</i>
<i>31.12.16</i>	<i>31.12.16</i>	<i>Joined Battalion</i>	<i>France</i>	<i>12.12.16</i>	<i>B.213</i>
		<i>By Branchit</i>			
		<i>With Battalion</i>		<i>23.1.17</i>	
<i>31.1.17</i>	<i>31.1.17</i>	<i>Ad. Branchit's</i>	<i>France</i>	<i>20.2.17</i>	<i>C.D. 391</i>
<i>19.11.17</i>	<i>19.11.17</i>	<i>Belmeuse</i>	<i>Amiens</i>	<i>24.2.17</i>	<i>AA 6791</i>
<i>19.11.17</i>	<i>19.11.17</i>	<i>Branchit's</i>	<i>Abetat</i>	<i>24.2.17</i>	<i>7072</i>
<i>Would a</i>	<i>no to England</i>				

*Sgt M. Churchill*  
*Capt. J. J. J. J.*

(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.

**Casualty Form—Active Service.**

**C.R.**

2070

Regiment or Corps 2/1 Newfoundland Regt  
 Rank Pte Surname Barrell Christian Name John  
 Religion Anglican Age on Enlistment 18 years 3 months.  
 Enlisted (a) 17/6/16 Terms of Service (a) Duration Service reckons from (a) 17/6/16  
 Date of promotion to present rank \_\_\_\_\_ Date of appointment to lance rank \_\_\_\_\_  
 Extended { \_\_\_\_\_ } Re-engaged { Jan 21 1917 } Qualification (b) \_\_\_\_\_  
 or Corps Trade and Rate \_\_\_\_\_

Signature of Officer i/c Records.

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 ...	<u>Southampton</u>	<u>30/1/16</u>	
		Disembarked ...	<u>Rouen</u>	<u>1/2/16</u>	
<u>29 PRD.</u>	<u>Depined of 4 days pay (Depid of hrs)</u>		<u>Lower</u>	<u>10/12/16</u>	<u>C1810 48B</u>
<u>Unit</u>	<u>Joined Battalion</u>		<u>France</u>	<u>12/12/16</u>	<u>-B213</u>
<u>34 L. C. S.</u>	<u>Ad., Bronchitis</u>		<u>France</u>	<u>20.2.17</u>	<u>68 391</u>
<u>N.Z. Fly Hosp.</u>	<u>Ad., Influenza</u>		<u>America</u>	<u>24.2.17</u>	<u>HA 6991</u>
<u>1 Gen Hosp.</u>	<u>Ad., Bronchitis</u>		<u>Etretat</u>	<u>24/2/17</u>	<u>ATA 7072</u>
<u>"Wardle"</u>	<u>Invalided to England</u>			<u>7.3.17</u>	<u>W 3083</u>
			<u>Anders chell</u>		<u>CAPTAIN.</u>
			for Officer i/c Records		Section

(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.

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. Forms B. 121. 29.

Number of Sheet First

Regiment of Newfoundland

Signature of O. C. Company J. C. [Signature]

Regimental Number and Name <u>7886</u> <u>Dunnell J.</u>		Enlistment Age on <u>16</u> years <u>3</u> months		Trade <u>Fisherman</u>	Good Conduct Badges, Service Pay of <u>1/6</u> Efficiency Pay of <u>1/6</u>	COPY SENT TO O.C. H.Q. ST. JOHNS, N.F.L.D. No. <u>3834/17</u> DATED <u>11 MAR 1918</u>
Joined <u>Depot</u> Date <u>5/9/16</u> Joined _____ Date _____ Joined _____ Date _____		Place and Date of Enlistment <u>St John's</u> <u>17/2/16</u>		Rank <u>Cpl. 61</u> Period of <u>2</u> years <u>186</u> with Colours <u>365</u> years <u>181</u> with Reserve		
				Place of Birth <u>St. John's</u>		

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<u>Race Course</u>	<u>20-6-17</u>	<u>Pte</u>		<u>1 drunk on High St. at 9 p.m.</u>	<u>Plt Roberts</u>	<u>48 Lu 7.P. 70 2</u>	<u>2-7-17</u>	<u>L. Col. Whitaker</u>	<u>A.T.G.</u>
"	<u>28-7-17</u>	"		<u>Absent from 6:30 am parade next found in bed at 6.45</u>	<u>Plt Enton</u> <u>Sgt Miniot</u>		<u>28-7-17</u>	<u>A. Holmes</u>	<u>for sick id pay payed</u>
				<u>Medically unfit</u>	<u>St John's</u>	<u>19 12/18</u>			

To be carried over



**CERTIFIED TRUE COPY**

This space to be left blank for the Order Number.



## Proceedings on Discharge.

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

No. <u>2886.</u>	Army Rank <u>Private</u>
Name <u>Carroll, John</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
Corps <u>Royal Newfoundland Regiment</u>	
Battalion, Battery, Company, Depot, &c: <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &amp;c., or to General Staff of the Army, it should be so stated.)</small>	
Date of discharge <u>10 December 1918</u>	
Place of discharge <u>St. John's, Nfld</u>	
1. Description at the time of discharge.	
Age <u>20</u> years <u>4</u> months Height <u>5</u> feet <u>9</u> inches Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins. Complexion <u>Fresh (dark)</u> Eyes <u>Blue</u> Hair <u>Dark</u> Trade <u>Fisherman</u> Intended place of residence { <u>Dark Harbour</u> (To be given as fully as practicable) { <u>Bay of Islands</u> <u>Newfoundland</u>	Descriptive marks. <u>Scars Left Leg</u>
<p><small>(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.)</small></p>	
2. The above-named man is discharged in consequence of <u>being no longer physically fit for war service</u>	
<p><small>(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.)</small></p>	
3. Military character:— _____ _____	
4. Character awarded in accordance with King's Regulations:— _____ _____ _____ _____ _____ _____	
<p style="font-size: small;">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.</p>	
_____ Initials of Commanding Officer.	
Army Form B. 2088 has been issued to* _____	

12  
 21  
 20  
 21  
 20  
 19  
 186

To be filled in on the soldier quitting the Colours.

\* Strike out if not applicable.

[OVER.]



*Originals*

This space to be left blank for the Chelsea Number.

[Blank box for Chelsea Number]

Army Form B. 268.



### Proceedings on Discharge

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

No. 2886 Army Rank Private

Name Carroll John  
(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 20 years \_\_\_\_\_ months

Height 5 feet 9 inches

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

Complexion Fresh (Dark)

Eyes Blue

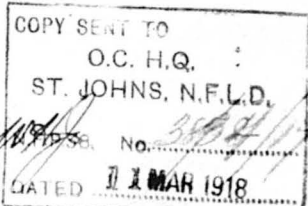
Hair Dark

Trade Fisherman

Intended place of residence { Lark Harbour  
Bay Islands  
Newfoundland

Descriptive marks.

*Scars Left Leg.*



(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:— \_\_\_\_\_

To be filled in on the soldier quitting the Colours.

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\*

\* Strike out if not applicable.



**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. 2886. Rank Private.  
Name (surname first) Carroll John.  
Regiment 1st Newfoundland Regt.

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

Fisherman. (Newfoundland).

COPY SENT TO  
O.C. H.Q.  
ST. JOHNS, N.F.L.D.  
N.F.P.33. No. 2886/119  
DATED 11 MAR 1918

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?

Fathers Boat. (Newfoundland.)

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

Undecided at present.

4. What is the name of your Approved Society? \_\_\_\_\_

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

Date 22<sup>2</sup> 18. Signature John Carroll

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.

CF 2886

Dec. 23rd, 1919

Secretary

Board of Pension Commissioners

Sir:- No. 2886, John Carroll

I have the honour to forward herewith  
Medical History of the above mentioned soldier  
received from our London Office, for your  
information and any action considered  
necessary thereon.

I have the honour to be

Sir

Your obedient servant

Lieut.Col.,

Chief Staff Officer

THE BOARD OF  
PENSION COMMISSIONERS  
FOR NEWFOUNDLAND

Hon. Sir P. T. McGrath, K.B.E.,  
(President Legislative Council),  
Chairman.

Hon. J. A. Clift, K.C., C.B.E.,  
Major W. H. Parsons, M.C.,  
R.A.M.C.



In reply refer to

No.....

C.R. 2886

St. John's,

Jan. 2, 1920

Lt. Col. Rendell,  
Chief Staff Officer,  
City.

2886 John Carroll.

Sir:-

I have the honour, by direction, to  
acknowledge receipt of your communication  
of Dec. 23rd, No. 2886, enclosing Medical  
History, of the above noted soldier, for  
which I thank you.

I have the honour to be,  
Sir,  
Your obedient servant

Asst. Secretary.

CCO/BT

DEPARTMENT OF VETERANS AFFAIRS  
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION  
AVIS DE DÉCÈS

TO:  
À:

DATE ... FEB. 27, 1975 .....

NAME  
NOM

CARROLL, JOHN

Service No.  
Matricule No

NFLD

2886 ARMY WW 1

CPC No.  
CCP No

N2606747

WVA No.  
AAC No

Information Received from:

Information reçue de: ..... FORM DSS 1962 .....

Date of Death

Date du Décès ..... JAN. 17, 1975 .....

Place

Endroit ..... N/S .....

Distribution: WSR-DASG

VI - ASS

DO - BD

HO - BC

Pour le chef,

for Chief, Central Registry Division.

Dépôt central des dossiers.