











# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 4588 Name Wm S Case  ~~Corp~~  Meth

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

- 1. What is your name? ..... 1. Wm S Case
- 2. What is your full Address? ..... 2. Salmon Cove  
Bay
- 3. Are you a British Subject? ..... 3. Yes
- 4. What is your age? ..... 4. 18 Years 0 Months
- 5. What is your Trade or Calling? ..... 5. Ass Surveyor
- 6. Are you Married? ..... 6. No
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,\* which? ..... 7. No
- 8. Are you willing to be vaccinated or re-vaccinated? ..... 8. Yes
- 9. Are you willing to be enlisted for General Service? ..... 9. Yes
- 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? ..... 10. Name .....  
Corps .....
- 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... 11. Yes

I, Wm S Case 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.

Wm S Case ..... SIGNATURE OF RECRUIT.  
James Pittman ..... Signature of Witness.

I, Wm S Case 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 stated as replied to, and the said recruit has made and signed the declaration and taken the oath before me on this 18 day of Apr 1915

Geo Liberty Major  
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 1st Bn

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

Date ..... 1915 }  
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

4588

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

Name Wm S Case  
 Apparent age        years        months. Height 5 feet 3 1/4 inches  
 Chest Measurement { Girth when fully expanded 36 inches  
 Range of expansion 4 inches  
 Distinctive marks       

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Case Salmon  
One Oak | 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 L'epot	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>22-4-18</u>									
Joined at <u>St. John's</u> on <u>April 22-1918</u>									
<u>Discharged. St. John's. Jan. 14/1919</u>									
<u>Admitted General Hospital for operation 5-9-18</u>									
<u>Discharged from General Hospital 20-9-18</u>									
<u>Demobilization St. John's 14-1919</u>									

Total Service forfeited as above.....

Total Service towards Engagement to 14-1-1919 (date of discharge)        years 268 days  
 " " Pensions " [ " " ] " " "

C.R. 45-88

Extract of Daily Orders Part II, Depot St. John's dated  
Jan. 15th 1919.

Discharge confirmed on demobilization

The discharge of the undernoted man on demobilization has been  
confirmed by the Officer i/c records on noted date.

4588 Pte. Wm. Case.

Discharged 14-1-19



C.R.

4588

Extract from Daily Orders part 11, Depot  
St. John's dated December 16th., 1918.

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4588 Pte. Wm. Case.

The above mentioned discharge on demobilization  
have been approved by O. C. Depot from noted date  
He is removed from Depot Strength and transferred to  
discharge depot pending confirmation by Officer i/c  
records.

17-12-18.

C.R. 4588

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.  
St. John's, Sept. 21. 18.

4588 Pte. S. Case.

Discahrged from 21 Field St. 20-9-18.



GR No. 4588

# 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 St. John's, Dept. of Militia

Line Number	Recd	By	Sent	by	Check

Dated **Sept. 12th, 1918.**

To **Mr. John Case,**  
**Wabana Mines.**  
**Bell Island.**

**Req to inform you that your son #4588 Pte. William Case, is**  
**Convalescent.**

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

**FOR TYPEWRITER**



Counters 4588  
G.R.

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**(NOT TRANSMITTED)**

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

Address St. John's, Dept. of Militia.

Line Number	Rcd	By	Sent	by	Check

Dated

Sept. 10th, 1918.

To

Mr. John Case,  
Wabana Mines,  
Bell Island.

Beg to inform you that your son # 4588 Pte. W.S. Case is doing well.

J.R. Bennett,  
Minister of Militia.

FOR TYPEWRITER

CR 4580  
Cable No.

# 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 St. John's, Newfoundland.

Line Number	Rcd	By	Sent	by	Check

Dated Sept. 9th, 1918.

To Mr. John Case,  
Webana Mines,  
Bell Island.

**beg to inform you that your son, #4588 Pte. Wm. Case, was admitted to Hospital Sept. 6th, and Operated upon Sept. 7th, doing well.**

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



Newfoundland Postal Telegraphs.



SERVICE MESSAGE

From \_\_\_\_\_ by \_\_\_\_\_ Time sent \_\_\_\_\_ by \_\_\_\_\_  
To \_\_\_\_\_

Postal Mr J. R. Bennett

Clarksbeach advises  
message of 7th to Mr  
John Case Salmoncove  
C.B. undelivered. no such  
name in Salmoncove

CR 4588  
Counter No.

# NEWFOUNDLAND POSTAL TELEGRAPHS.



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**(NOT TRANSMITTED)**

Signature of Sender \_\_\_\_\_ Address **St. John's Dept. of Militia.**

Line Number	Rcd	By	Sent	by	Check

*Dated* **Sept. 7th, 1918.**

*To*  
**Mr. John Case,  
Salmon Cove,  
C. Bay.**

**Reg to inform you that your son #4588 Pte. Case, Wm. S. was admitted to General Hospital Sept. 5th, and operated upon Sept. 6th, doing well.**

**J. R. Bennett,**

**Minister of Militia.**

**FOR TYPEWRITER**



C.R.

4588

Extract from Daily Orders part 11, from Unit The Royal Wfld.  
Regiment, St. John's, dated April 23, 1918.

#4588 Pte. William S. Case.

Attested for General Service with the Royal Wfld. Regt. ~~from~~  
w th effect from 22/4/18

Case, W<sup>d</sup>

4588

Ray Sept.



January 14 th., 1919.

#4588 Pte. William Case,  
Salmon Cove, B.D.V.

Dear Sir:-

Please find enclosed "Discharge  
Certificate No.460."

Yours faithfully,

Captain,  
Paymaster & Officer i/c Records.

Enc'l 1.



# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 4518 Rank Pvt. Name Wm Case  
 Intended place of residence Salmon Cove  
 2. Occupation Asst Surgeon  
 Classification of soldier C Medical Category DT

3. The above named man is discharged in consequence of..... **DEMOBILIZATION**.....

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.  
 Place ..... **DEC 16 1918** .....  
 Date ..... W. S. [Signature] .....  
 Comanding Discharge Depot  
 The Royal Newfoundland Regiment

### CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.  
 Place and date St John's ..... William S. Case .....  
Dec 16-12-18 ..... Signature of soldier  
 Signature of witness W. S. [Signature]

### CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.  
 Place and Date Dec 16<sup>th</sup> 1918 ..... William S. Case .....  
St John's ..... Signature of soldier  
 Signature of witness [Signature]

### STATEMENT OF SERVICE

7. Enlisted for service 22 4 18 ..... No of days on Military  
 Discharged from service 17 12 18 plus 28 days ..... Service 268 days

### APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.  
 Place ST. JOHN'S ..... R. H. [Signature] .....  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment.  
 Date **DEC 17 1918**

### CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed  
 Place St John's, Nfld ..... M. Bowley Capt .....  
 Date January 14/1919 ..... Officer i/c Records  
 The Royal Newfoundland Regiment  
ASN-2079/460

7  
28  
30  
31  
30  
31  
31  
14  
68



# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 4598 Rank Pte Name Case W<sup>nd</sup>  
 Date of Enlistment 22.4.18 Address Balmain Ave District B. 5. U  
 Occupation Asst Surveyor Classification for Discharge R Medical Category A II  
 Recommendation S.M.B. .... Disability Rating .....

Passed to Demobilization Officer with following documents:—

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

Date 13.12.18

W. Stanley Capt  
O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

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

William J Case

Particulars passed to Vocational Officer for information and action.

Date .....

W. Stanley Capt

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable # 60.00

(b) ~~Clothing~~ Supplied Joseph H. Lawrence

Date 16-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 1283 to his home  
 at Salmon Cove B.C. and Release Certificate No. 363 issued.

Date 16-12-18 R. B. Dicks  
 Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection  
 therewith settled. He has received pay and allowances to 14-1-19

Date 16-12-18 W. H. C. Carr  
 Depot Paymaster.

Discharge approved for 17. 12. 18

Forwarded with following documents to O.C Discharge Depot.

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

Date 16. 12. 18 R. B. Dicks  
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.  
 Board of Pension Commissioners.

with following additional documents.

Date DEC 17 1918 R. H. Carr  
 O. C. Discharge Depot.

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

Date Dec 18/1918



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

# MEDICAL HISTORY

OF

Surname Case

Christian Name William S.

Table I.—GENERAL TABLE.

Birthplace:—Parish Salmon Cove C.B. County Nfld

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>22</u> day of <u>Apr</u> 191 <u>8</u>	at <u>S. Johns</u>	on _____ day of _____ 191	at _____
Declared Age	<u>18</u> years _____ days		years _____ days	
Trade or Occupation	<u>Asst. Surveyor</u>			
Height	<u>5</u> feet <u>3 1/4</u> inches		feet _____ inches	
Weight	<u>129</u> lbs.		lbs. _____	
Chest Measurement	Girth when fully expanded....	<u>36</u> inches		inches _____
	Range of Expansion..	<u>4</u> inches		inches _____
Physical Development....				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R. E.—V= <u>6/6</u>		R. E.—V=	
	L. E.—V= <u>6/10</u>		L. E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Lamont Atkinson</u>			
(Rank)	<u>Major</u>			
Enlisted	at <u>S. Johns</u>		at _____	
	on <u>22</u> day of <u>Apr</u> 191 <u>8</u>		on _____ day of _____ 191	
Joined on Enlistment....	Corps. <u>The Royal Nfld Regt</u>	Regtl. No. <u>4588</u>	Corps. _____	Regtl. No. _____
Transferred to ..				
Became non-effective by	on _____ day of _____ 191		on _____ day of _____ 191	
[Signature]				
[Rank]				



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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on syphilis, admission of treatment
	Day	Month	Year	Day	Month	Year			
<i>Willis</i>	15	8	18	20	9	18	<i>Mumps</i>	<del>34</del>	
St. John's General.	5	9	18	20	9	18.	Lacerated Wound Finger left hand. Tendons sut.	15.	



ist in case of Warrant Officers treated in quarters.

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

Signature of Medical Officer

Wound healed. Fair motion in fingers.

*L. Kegan*









## 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 *Case William S.*

Regiment from which discharged *1st. Newfoundland*

Regimental number *4588*

Intended address *Salmon Cove Bay De Verde.*

Height on discharge                      Feet

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *vaccination four scars left arm*

Figure on discharge *normal*

Christian name of Father *John*

Christian name of Mother *Emma*

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth. *Sept. 17th 1899, Salmon Cove, P.O.V.*

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)

*William S Case*

(Rank) *Pte.*

Station

Date

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

Date



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



## Civil Re-establishment Committee.



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

*To work as Surgeon.*

*William J. Case*

Signature of Man.

*W. B. Dicks, Capt.*

Reg. No. *4588*

Signature of the Vocational Officer or his Representative.

Place *St. Louis*

Date *10/12/18*

191



Bay De Ver

Demobilization Form 1

400A  
68

# The Royal Newfoundland Regiment

Class for Demobilization:—  
C

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date ..... NOV 29 1918

Regimental No. 4188

Name Case W.M.S.

Address Salmon Cove

..... B.C.V.

Present Medical Category ..... A.ii

Recommended for:— (a) Immediate discharge .....  
(b) ~~Standing Medical Board~~ .....

Members of Board { R.H. Hart Capt.  
O.C. Discharge Depot.

J.P. Paterson  
Senior Medical Officer

G.W. Burden  
M. O. Depot









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

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

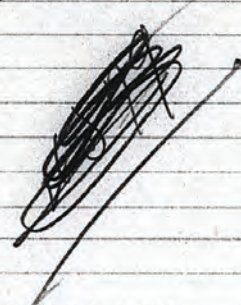
Examination of William J. Case  
aged 18 yrs conducted at Head Quarters  
Date: April 22/18 Recruiting Office:

NO OF TEST

FINDING

- 1 no
- 2 no
- 3 no
- 4 no
- 5 no
- 6 no
- 7 yes
- 8 yes
- 9 no
- 10 n
- 11 n
- 12 n
- 13 n
- 14 n
- 15 n
- 16 n
- 17 n
- 18 n
- 19 to the right of 6/10 level
- 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
- 33 no
- 34 5 ft 3 1/4
- 35 129 lbs
- 36 32-36

no 5/6



1/4

38 John Case (father) Salmon Cove Conception Bay  
39 no  
Signature of Medical Examiner: W. Berdeu











# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
30

Regiment of

*Royal Newfoundland*

Number of Sheet *1*

Signature of O. C. Company

*W. James*

Regimental Number and Name <i>5588 Case. Wm S.</i>		Enlistment Age on <i>15</i> years months Place and Date of Enlistment <i>St Johns 22.4.18</i>		Trade Religion Place of Birth <i>Salmonville N.B.</i>		Good Conduct Badges, Service pay or proficiency pay	
Joined	Date	Period of } with Colours <i>268</i> days with Reserve <i>2</i> years	}				
Joined	Date						
Joined	Date						
Joined	Date						

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
<i>Headquarters</i>	<i>27.4.18</i>	<i>Pte</i>		<i>Absent from 230 pm April 25th until 230 pm April 27th</i>	<i>Sgt Hemmings</i>	<i>forfeits 3 days pay under R.G.</i>	<i>28-4-18</i>	<i>Major P. J. Hartley</i>	
<i>Headquarters</i>	<i>10.11.18</i>	<i>Pvt</i>		<i>Breaking Barracks while on duty</i>	<i>W. J. ...</i>	<i>42 hours detention</i>	<i>11.11.18</i>	<i>R. H. ...</i>	<i>...</i>
				<i>Demobilized</i>	<i>John's</i>	<i>14/19</i>			

To be carried over



## The Royal Newfoundland Regiment

### DEMOBILIZATION OF

Reg. No. 4588 Rank Plt Name Case Wm  
 Date of Enlistment 22 4 18 Address Salmon Cove District B. 5. 7  
 Occupation Asst Surrgeon Classification for Discharge K Medical Category AZ  
 Recommendation S.M.B. \_\_\_\_\_ Disability Rating \_\_\_\_\_  
 Passed to Demobilization Officer with following documents:—

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

Date 13.12.18 M. Stanley Capt  
C. Discharge Depot

### PARTICULARS FOR DEMOBILIZATION

**i. Civil Re-Establishment.**  
 I am \_\_\_\_\_ in a position to resume civilian occupation.  
William J Case

Particulars passed to Vocational Officer for information and action.

Date \_\_\_\_\_ M. Stanley Capt

**a. Clothing.**  
 Certified that Clothing Regulations have been complied with:—  
 (a) Clothing Allowance payable \$ 60.00  
 (b) ~~Clothing~~ Supplied Joseph H. Smeeth  
 Date 16-12-18 O i/c. Re-clothing.



3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 1283 to his home at Salem - Love 8. AV and Release Certificate No. 363 issued.

Date 16-12-18

R B Dick  
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 11-1-19

Date 16-12-18

W. H. C. C. S.  
Depot Paymaster.

Discharge approved for 17.12.18

Forwarded with following documents to O.C Discharge Depot.

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

Date 16. 12. 18.

R B Dick  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

DEC 17 1918

Date .....

R. H. Lant  
O. C. Discharge Depot.

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

Date Dec. 18/1918

M. Bowley Capt.  
O.C.D.



Reg. No. 4524; Rank *Stc* Name *Lace W. S.*  
Attested *22-4-18* Address *Salmon Cove B.S.V.*  
Allotment *60 9* Allottee *John W Lace (Father)*  
Date of Allotment *1-8-18* Returned from Overseas  
Embarked for Overseas Cause

*Vacc 23/4/18 1st 17/5/18. 2nd 25/5/18. 3rd 13/6/18.*

*14. Leave 22-5-18. to 30-5-18 Reto 5/6/18.*

*Absent without leave for 3 day pay*

*Admitted to 21 Field pt 15/8-18.*

*20-9-18 Discharged from 21 Field St*

*10-11-18 Awarded 72 hours ~~detention~~ detention*

**PASSED TO DEMOBILIZATION OFFICER**

**DISCHARGE APPROVED ON DEMOBILISATION.**

*13-12-18*

*17-12-18.*