

8207 - CHAFE, Henry Robert

Date of embarkation for O/S not
recorded in WSK. Allotment sheet
date stamped 30-9-17 at London
England.

Embarked for return to Nfld. 30-1-19.



Newfoundland Forestry Companies

ATTESTATION OF

No. F 207 Name Henry R. Chape Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---|
| 1. What is your name? | 1. <u>Henry R. Chape</u> |
| 2. What is your full Address? | 2. <u>petty J. str.</u> <u>St. John's Nfld</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>24</u> Years <u>5</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Lumberman</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. What is your Religion? | 9. <u>W.P.</u> |
| 10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies? | 10. <u>yes</u> { Name |
| | Corps |

I, Henry R. Chape, 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.

Henry R. Chape SIGNATURE OF RECRUIT.

G. H. Ellis Signature of Witness.

5/17/17

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Henry R. Chape, 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 serve His Majesty, His Heirs and Successors, in the United Kingdom, 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 21st day of May 1917

Signature of Attesting Officer J. McEwen

†CERTIFICATE OF APPROVING OFFICER.

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

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

Date 1917 } 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 Henry R Chap
 Apparent age 24 years 5 months. Height 5 feet 10 inches
 Chest Measurement { Girth when fully expanded _____ inches weight 140
 { Range of expansion _____ inches
 Distinctive marks Light Hair Blue eyes

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mr Hannah M. Chap (James S. Haskins)
Peety Illr | Relationship Mother

Particulars as to Marriage

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

| (a) | (b) | (c) | (d) |
|-----|-----|-----|-----|
| | | | |

Particulars as to Children

| Christian Names | Date and Place of Birth |
|-----------------|-------------------------|
| | |

STATEMENT OF THE SERVICES

| Corps in which served | Rgt. or Depot | Promotion, Reductions, Casualties, &c. | Army Rank | Dates | Service not allowed to reckon for fixing the rate of pension | | Service in Reserve not allowed to reckon towards G. C. Pay | | Signature of Officers certifying correctness of entries |
|---|---------------|--|-----------|-------|--|------|--|------|---|
| | | | | | Years | Days | Years | Days | |
| Service towards limited engagement reckons from _____ | | | | | | | | | |
| Joined at _____ on _____ | | | | | | | | | |
| <u>Discharged March 10 1899</u> | | | | | | | | | |
| Total Service forfeited as above..... | | | | | | | | | |

Total Service towards Engagement to _____ [date of discharge] _____ years _____ days
 " " Pensions " _____ [" "] _____ " _____ "

NS 545



Newfoundland Forestry Companies.

ALLOTMENTS

I, Henry R. Chafe, Regl. No. 8207

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

Allotment begins May 25th 1917

| Identity Certificate No. | Whether Wife, Child, other Relative or Friend | NAME (in full) | ADDRESS | AMOUNT (each person) |
|--------------------------|---|----------------|----------------------------|----------------------|
| 510 | Mother | Hannah M Chafe | Lefty St St John's West | 60c |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 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.) M. J. Sullivan
 Officer Commanding
a Company
St John's
May 25th 1917

(Sig.) Henry R. Chafe
 (Rank) Private

ST. JOHN'S, FEB 28 1919

Newfoundland Forestry Companies

Billeting Account,

To Pte. A. R. Chafe
sent to Petty A/c.

Billeting Soldiers as undermentioned

from Feb 19/19 to Feb 24/19

| | |
|-------------------------------------|----------------|
| <u>8267 . Pte . A . R . Chafe .</u> | <u>17 . 70</u> |
| | |
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| | |

Certified correct for \$ 17.70

C. M. Dickson

Billeting Officer.

2011.

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

MEDICAL HISTORY

Surname Chafe OF Christian Name Henry R.

Table I.—GENERAL TABLE.

Birthplace:—Parish Petty Har. St. John's West

| | SPECIAL RESERVE. | | REGULAR ARMY. | |
|---|--|------------|---------------|------------------|
| | Right | Left | Right | Left |
| Examined | on <u>25th</u> day of <u>May</u> 191 <u>7</u> | on | day of | 191 |
| | at <u>St. John's</u> | at | | |
| Declared Age | <u>24</u> years <u>5 mos</u> days | | years | days |
| Trade or Occupation | <u>Lumberman</u> | | | |
| Height | <u>5</u> feet <u>10</u> inches | | feet | inches |
| Weight | <u>140</u> lbs. | | | lbs. |
| Chest Measurement | Girth when fully expanded | inches | | inches |
| | Range of Expansion | inches | | inches |
| Physical Development | | | | |
| Vaccination Marks | Arm | | | |
| | Number | <u>2</u> | | |
| When Vaccinated | | | | |
| Vision | R. E.—V= | | R. E.—V= | |
| | L. E.—V= | | 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>Lamon Peterson</u> | | | |
| (Rank) | <u>major</u> | | | |
| | Medical Officer. | | | Medical Officer. |
| Enlisted | at <u>St. John's</u> | at | | |
| | on <u>28th</u> day of <u>May</u> 191 <u>7</u> | on | day of | 191 |
| | Corps. | Regtl. No. | Corps. | Regtl. No. |
| Joined on Enlistment | <u>Nfld Forestry</u> | | | |
| | <u>Company 8207.</u> | | | |
| Transferred to | | | | |
| Became non-effective by | | | | |
| | on | day of | 191 | on |
| | | | day of | 191 |
| [Signature] | | | | |
| [Rank] | | | | |

A. R. Skape

C.R. 8207

A+RO

ENTERED
 PAY LEDGERS
 NUM. ROLL
 ALLOT. INDEX
 REGISTER
 EXAMINED

NEWFOUNDLAND CONTINENT
 VICTORIA ST.
 LONDON, S.W.
 30 SEP 1917
 PAY & RECORD OFFICE

N^o 545



Newfoundland Forestry Companies.

Henry R. Chafe ALLOTMENTS

8207
 7.207

I, *Henry R. Chafe*, Regl. No.

hereby agree, until further notification by me, and in similar official form to make an Allotment of
 Dollars and *50* Cents, per diem, from my Pay,

to, and for the benefit of the undermentioned Person and/or Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person and/or Persons
 concerned, viz :

May 25 1917

Allotment begins.

| Identity Certificate | Whether Wife, Child, other Relative or Friend | NAME (in full) | ADDRESS | AMOUNT (each person) |
|----------------------|---|------------------------|---|----------------------|
| 510 | Mother | <i>Hannah M. Chafe</i> | <i>Letty St</i> <i>St. John's West</i> | <i>6 cents</i> |
| | | | | |
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| | | | | |
| | | | | |
| Total Allotment, 5 | | | | |

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

(Sig.) *M. P. Sullivan*

Officer Commanding
 a Company

St. John's
May 25 1917

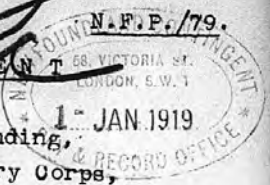
(Sig.) *Henry R. Chafe*

(Rank) *Private*

No. 21052/646/P&A.

066317

NEW FOUNDLAND CONTINGENT



From:

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

To:

Officer Commanding,
Nfld. Forestry Corps,
Kenmore, Loch Tay,
N.B.

23rd, December 1918

28-12-18 191

Subject: 8207, Pte. H.R. Chafe,

With reference to the following telegram (10988) from the Hon. Minister of Militia, received

Receipt hereunder.

H.A. for Capt. Adji...
Officer Commanding
Royal Newfoundland Regiment.

"Pay to 8207 Pte. H.R. Chafe, £2.0.0.

Draft £2.0.0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Received the sum of Two
pounds on account of

cable remittance from Newfoundland.

H.R. Chafe

Chief Paymaster & O. 1/c Records.

No. 8207 Rank 421

Witness _____

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

 Forms
B. 121
39

 Number of Sheet *First*

 Regiment of *97th Forestry Companies*

 Signature of O. C. Company *H. H. Ross Capt.*

| | | | | | |
|-----------------------------------|-----------------------|---|--|-----------------------------|--|
| Regimental No. and Name | | Enlistment | | Trade | |
| <small>No.</small> <i>8207</i> | <i>Henry R. Bluff</i> | Age on <i>24</i> years <i>5</i> months | | <i>Gunman</i> | |
| Joined _____ | Date _____ | Place and Date of Enlistment <i>St. Johns</i> <i>25/5/17</i> | | Religion <i>Prof. E.</i> | |
| Joined _____ | Date _____ | Period of with Colours <i>2 1/2</i> years. | | Place of Birth _____ | |
| Joined _____ | Date _____ | with Reserve <i>3 1/2</i> years. | | | |

Good Conduct Badges, Service pay or proficiency pay

| Place | Date of Offence | Rank | Cases of drunk-ness | OFFENCE | Names of Witnesses | Punishment awarded | Date of award or of order dispensing with trial | By whom awarded | REMARKS |
|-------|-----------------|------|---------------------|---------|--------------------|--------------------|---|-----------------|---------|
|-------|-----------------|------|---------------------|---------|--------------------|--------------------|---|-----------------|---------|

Demobilized St. Johns 10 ³/₁₄

To be carried over

Army Form B. 121

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. ~~827~~ 8297 Rank. *1st Lt* Name *Chafe Henry*
 Date of Enlistment *May 25* # *1917* Address *Petty Hs* District *St John's West*
 Occupation *Lumberman* Classification for Discharge *E* Medical Category *BI*
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

| | | | | | |
|---------------|-------------|-------------|--------------------|-------------|---|
| N.F. P36..... | B 268..... | B 121..... | N.F. Med..... | D.F. 1..... | 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..... | <i>2.6.6</i> | " 6..... | |
| B 179c..... | B 120..... | M 93..... | | | |

Date *2-2-19*

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

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

H. R. Chafe

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable. *\$ 6.00*
- (b) Clothing Supplied *Joseph A. Shaw*

Date *24-2-19*

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *628* to his home at *Betty St* and Release Certificate No. *1193* issued.

Date *24 2 19*

R. H. Sait Capt.
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to *24-3-19*

Date *24-2-19*

W. H. Capl.
Depot Paymaster.

Discharge approved for *24 2 19*

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 |
| B 178a | D 400A | B 1915 | | do 2nd | " 3 | 2 |
| B 179 | D 400B | Form L | | do 3rd | " 4 | |
| B 179a | D 400C | Form K | | do 4th | " 5 | |
| B 179b | B 103 | ME 2 | | | " 6 | |
| B 179c | B 120 | M 93 | | | | |

Date *24 2 19*

R. H. Sait Capt.
Demobilization Officer

APPROVED.

Documents as above forwarded to:—

- Officer in Records.
- Board of Pension Commissioners.

with following additional documents.

FEB 24 1919

Date

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

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

Date

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 8207 Rank Pte Name Chafe Henry
 Date of Enlistment May 25th 1917 Address Petty H^s District St John's West
 Occupation Lumberman Classification for Discharge E Medical Category BI
 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 | 1 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 | | <u>206</u> 1 | " 6 | |
| B 179c | B 120 | M 93 | | | | |

Date 21-2-19

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

PARTICULARS FOR DEMobilIZATION

i. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

H. R. Chafe

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied *Joseph J. Shaw*

Date 24-2-19

O i/c. Re-clothing.

3: Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 628 to his home at 119.3 and Release Certificate No. 119.3 issued.

Date 24-2-19 Asst Dirks Capt
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 24-3-19

Date 24-2-19 Asst Dirks Capt
Depot Paymaster.

Discharge approved for 24.2.19

Forwarded with following documents to O.C Discharge Depot.

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

Date 24.2.19 Asst Dirks Capt
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

- Officer i/c Records.
- Board of Pension Commissioners.

with following additional documents.

FEB 24 1919

Date 24.2.19 R.H. Sait Capt
O. C. Discharge Depot.

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

Date 24.2.19 Asst Dirks Capt

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 8207 Rank Private Name Chafe Henry
 Intended place of residence St. John's
 2. Occupation Lumberman
 Classification of soldier P Medical Category B.I.

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 St. John's Commanding Discharge Depot
 Date 2-19 W. R. Chafe
 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 W. R. Chafe
24-2-19 Signature of soldier
W. R. Chafe
 Signature of witness

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 ST. JOHN'S H. R. Chafe
24-2-19 Signature of soldier
W. R. Chafe
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 25-5-17 No of days on Military
 Discharged from service 24-2-19 plus 28 days Service 669

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge, The Royal Newfoundland Regiment, twenty-eight days from date.
 Place St. John's R. H. Lait Capt
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date FEB 24 1919

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place St. John's, Nfld. W. Bowley Capt
 Date March 10/1919 Officer in Charge
 The Royal Newfoundland Regiment

2012079/1212

7
30
31
31
30
31
31
28
10
190

Civil Re-establishment Committee



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

To work at Fishing

A. R. Chape

Signature of Man.

Orville A. All

Signature of the Vocational Officer or his Representative.

Reg. No. *8207*

Place

St. John's

Date

24/2/19

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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 *Henry Chiofalo*

Regiment from which discharged *Royal Newfoundland*

Regimental number *8207.*

Intended address *Setty St.*

Height on discharge *5* Feet *9*

Color of hair on discharge *Light*

Complexion *Ruddy*

Color of eyes *Blue*

Descriptive Marks *—*

Figure on discharge *Medium*

Christian name of Father *—*

Christian name of Mother *Maua*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Setty St. 19-1-1893*

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) *Henry Chiofalo*

(Rank)

Station **ST. JOHN'S.**

Date **FEB 17 1919**

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



Station

Date

The Royal Newfoundland Regiment

Class for Demobilization—
6.

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 18.2.19

Regimental No. 8207

Name .. C. Craft Henry X. 36

Address

Present Medical Category B.1

Recommended for:— { (a) Immediate discharge

(b) ~~Standing~~ Medical Board

Members of Board {

R. J. [Signature] O.C. Discharge Depot.

[Signature] Senior Medical Officer

[Signature] M. O. Depot

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any question 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 *Henry R.* 2. Surname *Chafe*
3. Rank *Private* 4. Regt. No. *2207*
5. Address in full to which future payments of gratuity are to ~~be~~ forwarded *Petty Harbor St. Johns Nfld Newfoundland*
6. Date of enlistment in the Regiment *May 25th 1917*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *Not applicable*
8. Relationship of such dependents *Not applicable*
9. Address in full of such dependent *Not applicable*
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *Not applicable*
11. Were you on active service only in Nfld. If so, give dates, and particulars of such service *Not applicable*
12. Give total length of time which you served on active service, whether in Nfld. or Overseas *From May 25th 1917 till March 10th 1919*

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

Not applicable

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

Not applicable

15. Have you been issued with a War Service Badge?.....

No

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

No

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.....

Not applicable

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

Not applicable

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

Not applicable

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

No

March 10/19th

Demobilization

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.....

Not applicable

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.....

Not applicable

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: *Henry R Chafe*
 Place of Residence: *Beatty, Ar. St. John's West*
 Declared before me at: *St. John's, Nfld*
 This *27th* day of *March* 19*49*
John W. McCarthy

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

| POST DISCHARGE PAY. | | | | |
|---------------------|--------------|----------------|----------------------|----------------|
| Date paid | Paid Soldier | Paid Dependent | War Service Gratuity | Net amount due |
| | | | <i>4 mo.</i> | <i>280.00</i> |
| | | | | |
| | | | | |

Certified Correct.

Paymaster.

March 10, 1919

#8307 Pte. Henry R. Chafe,

Petty Harbor,

St. John's West.

Dear Sir:-

Please find enclosed "Discharge Certificate
No. 1212."

Yours truly,

Captain,
Paymaster & Officer in Charge Records

Enc'l 1.

War Veterans Allowance

Name: *Henry Robert CHAFE*

No: *8207*

1. THEATRES OF SERVICE

(1) South African War

Date and port of disembarkation:

(2) World War I

Newfoundland & U.K.

IF CANADA

AND

U.K. ONLY

Date(s) disembarked in U.K.

Date(s) S.O.S. in U.K. for Canada

Period(s) of desertion in U.K.

30 Jan 1919

(3) World War II

Date of embarkation:

(4) Korean War

Date of embarkation:

2. Date and place of all enlistments:

25 May 1917, St John's, Nfld

3. Date of all discharges and reason:

10 March 1919, Demobilization

4. Date and place of birth as per attestation paper:

19 January 1893, Petty Harbour, Nfld.

5. Marital status: If married, name in full of wife:

Single

6. Any other military service:

- Nil

7. Decorations, if any.

- Nil

St John's Nfld.
22/8/58 Clerk's Initials: