

2264

ROYAL NEWFOUNDLAND REGT.

Deceased 25-10-53

1914-1918



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 2264 Name Jacob. Chafe. Corps

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

- |  |   |
|--|---|
| 1. What is your name? .....  | 1. <u>Jacob Chafe</u>   |
| 2. What is your full Address? .....  | 2. <u>5 Cabot Street</u><br><u>St. John's.</u>                      |
| 3. Are you a British Subject? .....  | 3. <u>Yes.</u>  |
| 4. What is your age? .....   | 4. <u>35</u> Years <u>-</u> Months                                  |
| 5. What is your Trade or Calling? .....  | 5. <u>Teamster.</u>   |
| 6. Are you Married? .....  | 6. <u>Yes.</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. <u>FOR THE DURATION OF THE WAR</u><br>Name .....<br>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, Jacob Chafe 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.

Jacob Chafe SIGNATURE OF RECRUIT.

E. March 15 N. P. Hallaway Signature of Witness.

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

I, Jacob Chafe 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 15 day of March 1916.

N. P. Hallaway 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 Lieut.

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

Date ..... 1916

Place ..... } Approving Officer.

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

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

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Jacob Chape  
 Apparent age 35 years     months. Height 5 feet 6 inches  
 Chest Measurement { Girth when fully expanded 38 inches  
 Range of expansion 3 1/2 inches  
 Distinctive marks    

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Jacob Chape  
5 Cabot Street | Relationship Wife

### 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.

<u>Sarah Williams</u> <u>Spinster</u>	<u>St. Mary's St. John's</u> <u>1898</u>	<u>5 Cabot Street</u> <u>St. John's.</u>	<u>R.P.H.</u>
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### Particulars as to Children

Christian Names	Age	Date and Place of Birth
<u>Euchetia Chape</u>	<u>15</u> years old	} <u>Born in St. John's.</u>
<u>Esther Chape</u>	<u>14</u> "	
<u>Victoria Chape</u>	<u>12</u> "	

## 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>15-3-16</u>									
Joined at <u>St. John's</u> on <u>March 15<sup>th</sup> 16</u>									
<u>Embarked St. John's St. Lucia for W.I. 19<sup>th</sup> 76</u>									<u>Embarked for B.C. 3<sup>rd</sup> 76</u> <u>Joined Battalion 14<sup>th</sup> 76</u> <u>Admitted 21 Oct. 76</u> <u>Wounded 9<sup>th</sup> 77</u> <u>Admitted 27<sup>th</sup> 77</u> <u>Admitted King George Hosp. 19-10-17</u> <u>to Dept. 11-6-18</u>  <u>Discharged Medically Dept 26-7-18</u>  <u>Recalled for Special duty Dept 27-7-18</u>  <u>Demobilization 15-2-1919</u>
<u>Embarked for B.C. 3<sup>rd</sup> 76</u>									
<u>Admitted 21 Oct. 76</u>									
<u>Wounded 9<sup>th</sup> 77</u>									
<u>Admitted 27<sup>th</sup> 77</u>									
<u>Admitted King George Hosp. 19-10-17</u>									
<u>to Dept. 11-6-18</u>									
<u>Discharged Medically Dept 26-7-18</u>									
<u>Recalled for Special duty Dept 27-7-18</u>									
<u>Demobilization 15-2-1919</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>26-7-18</u> (date of discharge)					<u>2</u> years	<u>134</u> days			<u>2 328</u>
Pension " <u>5-2-19</u>					<u>1</u> "	<u>194</u> "			



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 2264 Name Jacob Chape Corps .....

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

- 1. What is your name? ..... 1. Jacob Chape
- 2. What is your full Address? ..... 2. 5 Cabot Street  
St. John's
- 3. Are you a British Subject? ..... 3. Yes
- 4. What is your age? ..... 4. 35 Years - Months
- 5. What is your Trade or Calling? ..... 5. Teamster
- 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? } II. Yes

I, Jacob 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.

Jacob Chape SIGNATURE OF RECRUIT.

R. P. Hallaway Signature of Witness.

E. March 15

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

I, Jacob 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 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 15 day of March 1916.

R. P. Hallaway Signature of Attesting Officer

### †CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the .....  
If enlisted by special authority, such will be attached to the original attestation.

Date.....191..... } 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 Jacob Chafe  
 Apparent age 35 years          months. Height 5 feet 6 inches  
 Chest Measurement { Girth when fully expanded 38 inches  
 Range of expansion 3 1/2 inches  
 Distinctive marks         

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Jacob Chafe  
5 Cabot Street | Relationship Wife

### 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) Sarah Williams Spinster	(b) St Mary's St Johns 1898	(c) 5 Cabot Street St Johns.	(d) R. P. H.
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### Particulars as to Children

Christian Names	Date and Place of Birth
Elizabeth Chafe Ethel Chafe Victoria Chafe	15 7/20 1898 14 " " 12 " " } Born in St Johns.

## 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 St Johns July 26/1918</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to _____ [date of discharge] _____ years _____ days									
" " " Pension " [ " " ] " " "									

ST JOHN'S, NFID.,

August 2nd, 1918

O.C.  
Royal Nfld. Regt.  
Headqtrs.

SIR:

The undermentioned men have been discharged  
on the dates given.

Kindly note and post in Daily Orders Part II

I have the honour to be,

Sir,

Your obedient servant

(sgnd) J.M.HOWLEY

Capt. & Paymaster etc.

529	Pte. Moore, J.W.	July 9	Med. unfit
568	" Barron, T.F.	"	"
1420	" Sheppard, L.	"	"
2199	" Ball, H.	"	"
3222	" Upward, W.	July 23	"
3897	" Brushett, J.	"	"
2943	" Filiar, C.	"	"
350	Sgt. Luff, J.	"	"
1083	" Power, J.	"	"
2053	" Locke, S.	"	"
2264	" Chafe, J.	July 26	"
2489	" Mahon, J.	"	"
2742	" Vaughan, H.	"	"
2500	" Moss, E.	"	"
1754	" Taylor, A.H.	"	"
1987	" Brown, A.	"	"
3467	" Juke, P.	Aug. 1	"
1248			

July 13th, 1918

From Officer Commanding,  
Depot

To Paymaster and Officer i/o Records,  
Militia Department

2742 Pte. H. A. Vaughan

2489 Pte. J. Mahon

2264 Pte. J. Chafe

The marginally noted men have been recommended for discharge as permanently unfit, by Medical Board held on Friday, July 12th.

I am sending them herewith for your attention and necessary action, please.

I, 2264 Pte Jacot Bhafe a discharged soldier of the Royal Newfoundland Regiment, hereby agree to serve in the Royal Newfoundland Regiment for Home Service in the Dominion of Newfoundland as long as my services shall be required, under the same terms and conditions under which I was serving before discharge.

Jacot x Bhafe  
<sup>hi</sup>  
<sub>W.R.</sub>  
Witness: W.R.

I, 2264 Pte Jacot Bhafe 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 do 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.

Jacot x Bhafe  
<sup>hi</sup>  
<sub>W.R.</sub>  
Witness: W.R.

WITNESS: W.R.

Place



Effective from 27-7-18.



August 1st, 1918

From Officer Commanding,  
Depot

To Paymaster and Officer i/c Records,  
Militia Department

2264 Pte. J. Chafe

Above noted soldier was recommended for discharge some time ago. While awaiting his discharge he has been employed at Depot doing special duty in the "Caribou Hut". He informs me that his discharge has now been carried out, but to date Depot has no knowledge of it. As we want to re-attest him I should be glad to have this information and would also thank you to advise Depot without delay when any discharges are carried out, so that unnecessary confusion may be avoided.

Thursday Aug 1<sup>st</sup> / 18.

To Lt. Duley:-

Sir yesterday I was speaking to you concerning getting paid, and being advised by you to see Sgt. Major Cake of the Militia Department I did so and I was told by him that they had nothing further to do with paying me. I have now been just 2 weeks today in charge of the recreation hut and have received no money. I would be greatly obliged if you could help me by letting me know the right course to follow in order to get 2 ann.

I remain

2264 Pte. J. C. Hafe.

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

**INSTRUCTIONS.**—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Commissioners of Chelsea Hospital.  
Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and the soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.  
The Form will then be attached to the Proceedings of the man's Medical Board, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.1.

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



**A Name in full** *Chafe Jacob*  
**Regiment from which discharged** *ROYAL NEWFOUNDLAND REGIMENT.*  
**Regimental Number** *2264*  
**Where born (Parish, Town and County), and when** *Goulet Afield 22.6.1875*  
**Intended address** *St John's Afield*  
**Height on discharge** *Nine* Feet *Six* Inches  
**Colour of Hair on discharge** *Dark Brown* **Colour of Eyes** *Brown*  
**Descriptive marks** *Small, round, R. Hip, 2 1/2" wound Chest. Rt Arm* **Complexion** *Fresh*  
**Figure on discharge** *Medium*  
**Christian name of Father** *Emanuel*  
**Christian name of Mother** *Emily*  
**Wife's Maiden name in full** *Sarah Williams*  
**Date and Place of Marriage** *24 Dec 1895. St John's Afield*  
**Christian names of Children** *(1) Lucette (2) Ethel May (3) Victoria*  
**Nature and locality of civil employment desired**

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) *Chafe Jacob*

**Station** *Wanaworth* **(Rank)** *Act.* **Date** *June 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.

*London General Hospital* *H. D. Davies Col.* **Medical Officer i/c Hospital.**

**Station** *Wanaworth S.W.* **Date** *June 2/1918.*

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.**

2264  
C.R. ~~2265~~

Jacob Chafe was attested for General  
Service with the NEWFOUNDLAND REGIMENT ON March 15th 1916  
Regimental No. 2265 was allotted to Ptes J.Chafe

AUTHORITY:

Recrd Ledger;

Dept. of Militia.

March 25th 1919

C.R. 2264

Extract from Nominal R roll of R.S.M. Regt. Draft No. 11 from  
2nd Bn. Depot, to 1st Bn. B.E.F. Embarked Southampton,  
3-10-16.

2264 Pte. J. Chafe.

C.R. 2264

Extract of DAILY ORDERS, PART 11, depot St. John's, dated  
14/2/19.

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

5/2/19.

#2264 Pte Jacob Chafe.

C.R.

2264

Extract from Medical Board held Jan. 13th, 1919.

2264 Pte. J. Chafe

*2nd Board*

Recommended Discharge as Permanently unfit.

C.R. 2564

Extract from Daily Orders part II,  
Depot St. John's dated Jan. 25th, 1919.

The discharge of the undernoted on  
demobilization have been APPROVED and  
by O. C. Discharge depot on 22-1-19.

#2264 Pte. J. Chafe.



C.R. 2264

Extract form Daily Orders Part 11 from Unit The Royal  
Nfld. Regt. St. John's, dated August 9, 1918.

# 2264, Pte. J. Chafe.

Re-Attested for Special Duty At Depot with Effect from  
27/7/1918.

C.R. 2264

Extract from Daily Orders part 11, from Unit The Royal  
Nfld. Regt. St. John's, dated August 2, 1918.

#2264 Pte. J. Chafe.

Having been found Medically Unfit is discharged  
from July 26, 1918.

C.R.

2264

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

2264 Pte. J. Chafé.

Discharged 26 - 7 - 18, Medically unfit

C.R. 2264

Extract from Daily Orders part 11, from Unit The Royal  
Nfld. Regt. St. John's, dated July 9, 1918

The following man returned from overseas and reported at  
depot July 6, 1918.

#2264 Pte. J. Chafe.

C.R. 2264

Extract from Telegram received from London, dated  
June 25, 1918.

The following man embarked June 22, per Government  
transport to Halifax being repatriated:

#2264 Pte. Jacob Chafe.

C.R. 2264

Extract of Orders by Part 11 by Lt. Col., R.A. Berners, D.S.O., Commanding  
3rd. Bn. Royal Newfoundland Regiment, dated 11/6/18.

The following having reported back from the 1st. Bn. is posted to "A" Company  
to await repatriation:-

2264 Pte. J. Chafe.

C.R. 2264

Extract of Casualties from Pay and Record office London dated 10th.  
June 1918.

FOR REPATRIATION.

2264 Pte. J. Chafe.

The above mentioned was sent to Depot on 10/6/18 to await repatriation  
to Newfoundland.

Authority: Officer i/c Records, Newfoundland Contingent.

C.R. 2264

Extract of Casualties from Pay and Record Office London dated 8th. June 1918.

2264 Pte. J. Chafe

The above-mentioned ex 3rd. London General Hospital 6/6/18, is granted furlough to 10 a.m. 14/6/18, with orders to report at the P.& R.O. on latter date for disposal. To be repatriated.

Authority: A.Fs. B. 179.



C.R. 2264

Extract of Casualties received from Pay & Record Office,  
London, dated February 12, 1918.

#2264 Pte. J. Chafe. ✓

Transferred from King George Hospital to the 3rd London  
General Hospital, 10/1/18. Auth:- Memos from 3rd L.G.H.

2264 PTE. JACOB CHAFE ✓

C.R. 3834

EXT. OF CASUALTY LIST RECEIVED OCT. 23rd 1917.

G.S.W. RIGHT ARM. SEVERE. AT KING GEORGE HOSPITAL  
LONDON.

C.R. 2264

Extract from Nominal Roll Embarked St. John's for Overseas,  
per S.S. "Sicilian" July 19, 1916.

2264 Pte. Chafe J.

October 23, 1917.

*Dear* Madam,

I regret to have to inform you that a report has this day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 2264, Private Jacob Chafe, has been admitted to the King George Hospital, London, suffering from severe gunshot wound in the right arm.

I trust that later reports will bring news of his convalescence.

Any further information received at this Office as to his condition will be at once notified to you.

Yours faithfully,

Colonial Secretary.

Mrs. Jacob Chafe,  
5 Cabot St.



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

*James Chafe*

aged

*35*

conducted at

*C. L. B.*

Date:

*Mar 14/16*

Recruiting Officer:

NO OF TEST

FINDING

- 1 *no*
- 2 *no*
- 3 *no*
- 4 *no*
- 5 *no*
- 6 *yes*
- 7 *yes*
- 8 *no* - *no*
- 9 *n*
- 10 *n*
- 11 *n*
- 12 *n*
- 13 *n*
- 14 *n*
- 15 *n*
- 16 *n*
- 17 *n*
- 18 *n*
- 19 *6/6 Both eyes*
- 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*

*2264*

33 *yes. 2 Scars left arm 14 years*

34 *139*

35 *3 1/2 - 38*

36 *9.00 per week*

37 *wife*

38 *5 Cabot St.*

J. Chafe.

C.R.

2264

P.R.O.

This space to be left blank for the Chelsea Number.

Army Form B. 268.

# Proceedings on Discharge.

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

No. 2264 Army Rank Plt.

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

Corps ROYAL NEWFOUNDLAND REGIMENT.

Battalion, Battery, Company, Depôt, &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 _____ years _____ months	Descriptive marks. <u>Shrapnel Wounds</u> <u>Right Thigh &amp; Left Leg, 2<sup>nd</sup> Chest.</u> <u>Right Arm</u>
Height _____ feet _____ inches	
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.	
Complexion <u>Light</u>	
Eyes <u>Grey</u>	
Hair <u>Dark Brown</u>	COPY SENT TO O.C. H.Q. ST. JOHNS, N.F.L.D. N.F.P.38. No. <u>992360</u> DATED <u>22 JUN 1918</u>
Trade <u>Driver</u>	
Intended place of residence (To be given as fully as practicable) { <u>St Johns Newfoundland</u>	

(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.

[OVER.]

**ON HIS MAJESTY'S SERVICE**

To the Officer in Charge of Records,

JOHNS, N.F.  
11-AM  
1891

Royal Nfld. Regt.,

Dept. of Militia,

St. John's, Nfld.

Hold Here

RECEIVED  
JUN 21 1891



July 2nd., 1921.

The accompanying King's Certificate, on his discharge,  
(No. 819), is forwarded herewith to

Private Jacob Chafe

in respect of his service as No. 2264 Rank Pvte.

Name Jacob Chafe Corps Royal Nfld. Regt

Receipt of the same should be acknowledged hereon.

Received Friday

Signature Jacob Chafe

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

Address 58 Carters Hill.

FOR USE IN THE CASE OF ALL SOLDIERS SENT TO THEIR HOMES UNDER  
A.C.I. 1011 OF 1916, PARA. 2(ix.)



Inburgh 10am 14/6/18

R. Newbould (Regiment)

No. 2264, Rank Do, Name Chap.

is discharged from\* 3rd London Genl Hsp. Wandswoth  
with orders to proceed to his home: the address below.

(Address) 58 Victoria Street. S.W.

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

E. M. Sneyler Officer Commanding.

Place Wandswoth

Capt. Rame  
Registrar, R.A.M.C.F.

Date 6/6/18

3rd London General Hospital

WANDSWORTH

\*Here enter name of Hospital or Unit from which the Soldier is discharged.

Original

Medical Report on an Invalid, 3rd London General Hospital, WANDSWORTH, S.W.



JUN 1918

- 1. Unit *1st Re Newfoundland*
  - 2. Regimental No. *2264*
  - 3. Rank *Private*
  - 4. Name *Chafe Jacob*
  - 5. Age last birthday *42*
  - 6. Enlisted *on 15 February 1916 at St. Johns, Nfld.*
- Station *Driver*
- with previous service in Army, state—
- (a) Former Unit;
  - (b) Regimental No.;
  - (c) Date of Discharge;
  - (d) Cause of Discharge.
- } *N/A*

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

*Multiple G.S.W.s. Rt. arm: Rt. thigh, left leg, left chest.*  
*left foot.*

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 those recorded in his military and medical documents. He will also carefully distinguish cases entirely due to disease.

COPY SENT TO \_\_\_\_\_

ST. JOHNS, N.F.L.D.

N.F.P.38. No. *9923/18*

DATED **22 JUN 1918**

- 9. Date of origin of disability. *9 Oct. 1917.*
- 10. Place of origin of disability. *Ypres.*

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

*Received G.S.W.s as above. Taken with C.S.P. Rt. ulnar artery being tied around blood vessel. Wound also secured, F.B. not found - wd. of leg oched. Received same treatment. Apparent presence of ulnar nerve. No bone injury.*

*Admitted with leg George's 28 Oct. 1917, with wounds healing, there a mass bridge of tissue was slit up under gas.*

*Admitted here 10 Feb. 1918 with vesper's burn of his little finger, when was the G.S.W. were all healed. On Mar 1918, ulnar nerve exposed & separated from scar tissue - the whole of antecubital fossa was involved with scar tissue. Wound healed satisfactorily.*

*On 19-11-18 he had a little local tabanus in rt. thigh. Treated with daily injections of 1500 units of R.T.S. for 2 days. Recovery.*

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.

*G.S.W.*  
*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.

Wound all healed: no improvement of ulnar palsy, trophic condition of little finger. Palmar all clear - cramp quite disappeared

14. If the disability is an injury, was it caused—

- (a) In action? *yes*
- (b) On field service? *yes*
- (c) On duty? *yes*
- (d) Off duty? *-*

15. Was a Court of Inquiry held on the injury?

- If so—(a) When? *-*
- (b) Where? *-*
- (c) Opinion? *-*

16. Was an operation performed? If so, what?

*yes - excision of wound  
Artery of H. sup.  
Exploration of ulnar nerve*

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?

*Permanently unfit.*

*P. Davies Es.*

Officer in medical charge of case.

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

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

*N. E. Doncelet Es.*  
Officer in charge of Hospital.

Date *June 2<sup>nd</sup> 1918.*

Col. A. M. S.

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.

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

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

23. Is the disability permanent?

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

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

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

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

27. Do the Board recommend—

(a) Discharge as permanently unfit, or

(b) Change to England?

28. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic training) is desirable in a—

(a) Sanatorium;

(b) Hospital;

(c) Convalescent home;

(d) Asylum; or

(e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

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

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

Yes  
-  
No  
No

Yes

-

Yes

-

100.

with 16.

Yes

as an out-patient if necessary.

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

Date 4.11.18

J. M. L. Davis } President.  
J. A. Davies } Members.

Approved London General Hospital,  
Station WANDSWORTH, S.W.

Date 4.11.18

J. M. L. Davis  
Administrative Medical Officer.

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

# MEDICAL HISTORY

Surname Chape

Christian Name \_\_\_\_\_



Table I.—GENERAL TABLE.

Birthplace:—Parish \_\_\_\_\_ County \_\_\_\_\_

	SPECIAL RESERVE.		REGULAR ARMY	
	Right	Left	Right	Left
Examined	on 14 <sup>th</sup> day of March 1916	at St. Johns. Nfld.	on _____ day of _____	191_____
Declared Age	35 years	_____ days	_____ years	_____ days
Trade or Occupation	_____	_____	_____	_____
Height	5 feet 6 inches	_____	_____ feet	_____ inches
Weight	139 lbs.	_____	_____ lbs.	_____
Chest Measurement	Girth when fully expanded... 38 inches	_____ inches	_____ inches	_____ inches
	Range of expansion... 3 1/2 inches	_____ inches	_____ inches	_____ inches
Physical Development	_____	_____	_____	_____
Vaccination Marks	Arm _____	_____	Right _____	Left _____
	Number _____	_____	_____	_____
When Vaccinated	_____	_____	_____	_____
Vision	R.E.—V= 6/6	_____	R.E.—V= _____	_____
	L.E.—V= 6/6	_____	L.E.—V= _____	_____
(a) Marks indicating congenital peculiarities or previous disease	_____	_____	_____	_____
(b) Slight defects but not sufficient to Cause Rejection	_____	_____	_____	_____
Approved by (Signature)	<i>Lamont Paterson</i>		_____	
(Rank)	Capt Medical Officer.		_____ Medical Officer.	
Enlisted	at St. Johns	at _____	at _____	_____
	on 14 day of March 1916	on _____ day of _____ 191_____	on _____ day of _____	191_____
Joined on Enlistment	Corps. _____	Regtl. No. _____	Corps. _____	Regtl. No. _____
Transferred to	Corps. _____	Regtl. No. _____	Corps. _____	Regtl. No. _____
Became non-effective by	on _____ day of _____ 191_____	_____	on _____ day of _____	191_____
(Signature)	_____		_____	
(Rank)	_____		_____	

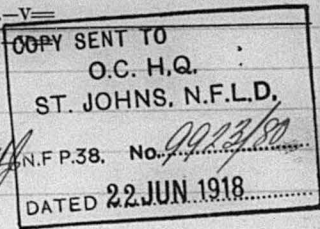

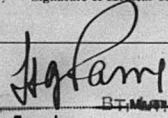


Table II.—Only for admission to hospital or to the sick list in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of further 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
	Day	Month	Year	Day	Month	Year				
	10	10	17	10	2	18	S.S.W. arm x 1 ulnar artery (shell)	113	47 C.C.S. 11/10/17 ulnar artery right ligatured wound excised. Pt. leg wound excised. Wound left leg + chest excised. 12-10-17 X-ray shows small F.B. in thigh, small F.B. in arm R. On admission—Deep wound upper third of forearm. 13-11-17, wound completely healed. Trans to 3rd London 10-2-18.	 J. H. Hall B.T.M. COL. R.A.M.C.
3rd London General Hospital, WANDSWORTH, S.W.	3	4	18				Multiple G.M. R arm R high Left leg left chest		Board see overleaf Disability Multiple G.M. R arm R high left leg left chest. No improvement of ulnar artery Cause G.M. on active service Total inability to earn a livelihood covered by 100%.	J. C. Hall Capt. Med 3rd London General Hospital, WANDSWORTH, S.W.





**Casualty Form—Active Service.**

Regiment or Corps *1st Newfoundland*  
 Rank *Pte.* Surname *Chafe* Christian Name *Jacob*  
 Religion *C.P.E.* Age on Enlistment *35* years \_\_\_\_\_ months.  
 Enlisted (a) *Mar. 15<sup>th</sup>/16* Terms of Service (a) *Duration of war* Service reckons from (a) \_\_\_\_\_  
 Date of promotion to present rank \_\_\_\_\_ Date of appointment to lance rank \_\_\_\_\_  
 Extended { \_\_\_\_\_ } Re-engaged { \_\_\_\_\_ } Qualification (b) \_\_\_\_\_  
 or Corps Trade and Rate \_\_\_\_\_

Signature of Officer i/c Records.

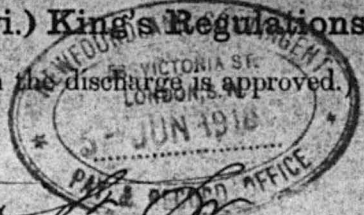
**COPY SENT TO**  
 O.C. H.Q. *Date*  
 ST. JOHNS. N.F.L.D.  
 P.38. No. *9923/81*  
 DATED **22 JUN 1918**

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>Saint John's N.F.</i>		<i>3.10.16</i>	
	Disembarked ...	<i>Haven</i>	<i>4.10.16</i>	
	Joined Battalion	<i>14 Oct. 1916</i>		
<i>14 C.S.</i>	<i>Admitted Fract. Rib (Accid) 12/12/16</i>	<i>Fr. C.C.S.</i>	<i>12/12/16</i>	<i>ED 7754</i>
<i>21 C.C.S.</i>	<i>Admitted Fract. Rib (Accid)</i>	<i>France</i>	<i>12/12/16</i>	<i>ED 7261</i>
<i>21 C.C.S.</i>	<i>Do Do Do transferred to Duty</i>	<i>So. Duty</i>	<i>19/12/16</i>	<i>ED 7588</i>
<i>Dy. Ad</i>	<i>ad G. SW chest blow by trans 17/10/17</i>	<i>CCS</i>	<i>10/10/17</i>	<i>ED 2053</i>
<i>1st Lt</i>	<i>Do Do</i>	<i>Haven</i>	<i>12/10/17</i>	<i>HA 1514</i>
<i>3rd Lt</i>	<i>Transferred to England</i>		<i>12/10/17</i>	<i>W 3083</i>
				<i>MAJOR</i>
				<i>Infantry Section</i>
				<i>G.H.Q. 3rd Echelon</i>

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) Signaller, Shoing-Smith, &c.

**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

58 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

Chapman

Christian names

James

(in full)

Regt. No. and Rank

2264 Pte

Regt. or Corps

(If T.F. this should be stated)

1st Royal

His address on discharge will be

100 St. John's Rd  
Wandsworth

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.

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

James H. ...

President of Board

(Approving Officer).

Date

4/6/18

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.

2264 Chapel.

This case is given  
100% disability,  
and recommended  
for out-patient treatment.

Although her  
disability is marked  
permanently - I think  
he should be hooded  
again - at end of  
out-patient treatment  
or in convalescence.

W.P.P.

5.6.42.

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(I) in substitution for a man for General Service.

No. 2264 Rank Private Regiment 1st

Name Chafe. Jacob.  
(Surname first)

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

COPY SENT TO	
O.C. H.Q.	
ST. JOHNS. N.F.L.D.	
N.F.P.38. No. <u>9923/28</u>	
DATED <u>22 JUN 1918</u>	

*Coachman*

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.

*Mr Miller*

*74 Merchant R.C.*

*St. John's*

*Employed for*

*5 years as*

*Coachman*

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

*Uncertain 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?

*Never*

Date 1-6-18.

Signature *Pte J. Chaper.*

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

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

**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 Surgeon-General's 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 *Chafe, Jacob*  
 Regiment from which discharged *12th Re. Newfoundland*  
 Regimental Number *2264*  
 Where born (Parish, Town and County), and when *Goulds, Nfld. 26/1/1875*  
 Intended address *St. John's, Newfoundland.*

Height on discharge *Five* Feet *Six* Inches  
 Colour of Hair on discharge *Dark Brown* Colour of Eyes *Brown*  
 Descriptive marks *Several wounds* Complexion *Fresh*  
 Figure on discharge *Medium*  
 Christian name of Father *Emanuel*  
 Christian name of Mother *Emily*  
 Wife's Maiden name in full *Sarah Williams*  
 Date and Place of Marriage *24 Dec 1895 St. John's, Nfld.*  
 Christian names of Children *(1) Lucretia (2) Ethel May (3) Victoria*  
 Nature and locality of civil employment desired *Not decided until he finds out what he is capable of doing, in view of his wounds.*

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) *Chafe, Jacob.* (Rank) *Plc.*  
 Station *Wandsworth* Date *June 2nd 1918*

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

Station *3rd London General Hospital, WANDSWORTH, S.W.* Date *June 2nd 1918*  
*S. A. Davies* Medical Officer i/c Hospital.

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

COPY SENT TO  
 India O.C. H.Q.  
 S. A. Davies ST. JOHN'S, N.F.L.D.  
 F.P.38. No. *9913/1*  
 DATED *22 JUN 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 \_\_\_\_\_ Officer in Charge  
 Date \_\_\_\_\_ Records.

No 2539



3 1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS 2.

I, Jacob R. Chafe, Regl. No. 2264

hereby agree, until further notification by me, and in similar official form to make an Allotment of 40 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 July 1st 1916

Identity Certificate No.	Whether Wife, Child or other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
5825	wife	Mrs Sarah Chafe Sibbot Strat.		80
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.) Charles Aye Capt.  
 Officer Commanding  
A Company  
Joshua  
June 26 1916.

Sig.) Jacob Chafe  
 (Rank) plc

*Prof*

LAST PAY CERTIFICATE

20 JUN 1918  
N.F.S./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.

Regt No. 2764 Rank Pvt Name Shafe J Unit 1st Royal Nfld who was  
to \_\_\_\_\_ on 1/1 Authority \_\_\_\_\_ Cause \_\_\_\_\_

STATEMENT OF ACCOUNT

		DR.				CR.				
		PARTICULARS				PARTICULARS				
		£	s	d	£	s	d	£	s	d
TO	Balance Dr. from				Balance Cr. from					
	Allotment days @				Pay days @ £					
	Cash Payments:				Field Allowance days @ £					
	<u>14/6/18</u>			10 0	Other Allowances days @ £					
	Other Debits:				Other Credits:					
PERIOD: FROM	Total Debits				Total Credits					
	Balance due by Paymaster				Balance due to Paymaster			10 0		
				10 0				10 0		

*No statement of  
of receipts of 1918*

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of  
A. G. O'Neil  
Wancher June 19<sup>th</sup> 1918  
(Place) (Date)  
W. J. August 2/dt.  
O.C. "A" Company.

Made up/Checked in accordance with information received in the Pay & Record Office \_\_\_\_\_ to 1/1  
and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,



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. 2264 Rank pte Name J. Chafe Unit Royal Wfld. Regt. who was Repatriated  
 to Newfoundland on 22 / 6 / 18 Authority A. F. B. 179 Cause Class A.

STATEMENT OF ACCOUNT

DR.

		PARTICULARS				PARTICULARS				CR.	
		£	¢	s	d	£	¢	s	d		
PERIOD: From <u>22/12/17</u> To <u>22/6/18</u>	Balance Dr. from "H" Co. <u>5/7/18</u>			10	0	Balance Cr. from <u>21/12/17</u>			8	16	5
	Allotment <u>185</u> days @ <u>80</u>	146	60	30	1 8	Pay <u>185</u> days @ <u>£1.00</u>	185	00			
	Cash Payments: <u>P. &amp; R. O.</u>			17	4 5	Field Allowance <u>185</u> days @ <u>£.10</u>	18	50			
	Hospital Advances			5	1 8	Other Allowances days @ <u>£</u>	201	50	41	7	5
	<u>21-6-18 Cash</u>			10	0	Other Credits:					
	Other Debits:					<b>Ration Allowance.</b>					
						<u>6/6/18-22/6/18, 17 days @ 2/1</u>			1	15	5
	Total Debits			51	7 7	Total Credits			51	19	1
	Balance due by Paymaster			51	19 1	Balance due to Paymaster			51	19	1
				51	19 1				51	19	1

CHECKED.  
 21/6/18

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

(Place) \_\_\_\_\_ (Date) 191

Made up in accordance with information received in the Pay & Record Office London. to 21 / 6 / 18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,  
21/6/18 191

O.C. " " Company.  
 Chief Paymaster & Officer i/c Records.

# Kingston, Surbiton and District Red Cross Hospital.

Nearest Station: MALDEN (L. & S.W.R.), Under 1 Mile.

Tramways pass the door from Tooting, Wimbledon, and Raynes Park; and from Kingston, Surbiton and Hampton Court.

Friends' Visiting Days:  
THURSDAYS and SUNDAYS, 2 to 4 p.m.

KINGSTON ROAD,

NEW MALDEN, SURREY.

191.....

Sir

Please will you send me by  
return of Post one of your Pay Forms  
to Mr G. Chafe  
No. 2264 Newfoundland  
B. Coy.

NEWFOUNDLAND DISTRICT PAY & RECORD OFFICE	
No.	974
Date	21 JAN 1918
Ack.	
Ref. No.	1091/1
Off.	945
Gen.	for
Pl.	
H. & C.	22/1/18
F.	
P.	

P.S. you will find my  
Present address above  
& Please will you kindly  
let me know if you will  
forward the money on to me

1091/1

P 44/45

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

N.F.P./45.

NEWFOUNDLAND CONTINGENT

To: Chief Paymaster & Officer i/c Records,  
Newfoundland Contingent,  
58, Victoria Street,  
London, S.W. (1).

*ok £ 2 = 0 = 0  
AW. 12/12/11  
Recept no 4692*

Please remit to 2264 Pte J. Clape  
Newfoundland Regt

the sum of Two pounds          shillings, on  
account of any balance that may be due to me.

(£2-0-0.

Regtl No. 2264 Rank Pte

Name J. Clape

Approved W. Arthur Gray

Officer i/c.,

KINGSTON, SURBITON & DISTRICT

RED CROSS HOSPITAL.

Hospital.

Dated at

King. G. Hook  
Dec. 7 1917

*Z. H. H. M.D.  
K.G. H.*

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

N.F.P./45.

NEWFOUNDLAND CONTINGENT

To: Chief Paymaster & Officer i/c Records,  
Newfoundland Contingent,  
58, Victoria Street,  
London, S.W. 1.

Please ~~remitt~~ to I Will call personally Friday 25<sup>th</sup> 1918

at your office

the sum of Two pounds \_\_\_\_\_ s. ( £ )

on account of any balance that may be due to me.

Regtl. No. 2264 Rank Private

Name J. Chafe

Approved W. Achew Gray  
Officer I/C. Wander

KINGSTON, SURBITON & DISTRICT  
RED CROSS HOSPITAL Hospital.

Dated at Jan 24<sup>th</sup> 1918

1918

*OK*  
*f2 = 0 = 0*  
*25/1/18*  
*Receipt 5373*

Feb 19/18

Regimental Pay Master  
N. F. & D. Regiment.  
Victoria St. &

Sir

Kindly let me have the  
sum of \_\_\_\_\_ and  
charge \_\_\_\_\_ account  
and oblige



Yours truly,  
no. 2244. J. Chafe

Approved  
J. M. Hughes  
Clerk

OK  
P 1.0.0  
RRB. 14/5/18  
Receipt No 5690

3rd LONDON GENERAL HOSPITAL
No. _____
14 FEB 1918
WANDSWORTH, S.W. 18.

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

To Officer in Pay & Records  
Newfoundland Contingent  
58 Victoria



London  
Off. Ac.

£ 1-0-0  
8/4/18.

Sir,

Kindly pay I. Chafe the sum  
of one pound (£1.) on account of any  
balance that may be due

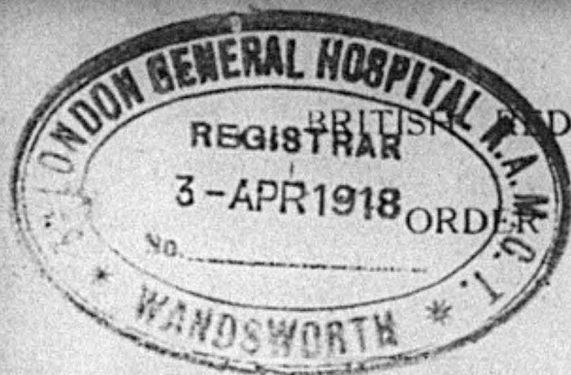


No. 2264.

Approved  
A.H. Letcher  
Capt. R.S.O.

8/4/18.

Pres. No. 6481



BRITISH RED CROSS SOCIETY  
AND  
ORDER OF ST JOHN

April 3/18

To Paymaster  
R. Wfld Rgt

Dear Sir

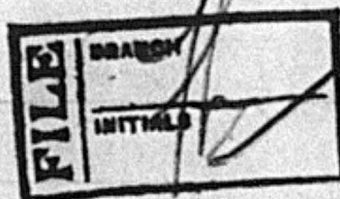
Please pay bearer <sup>from the sum</sup>  
of £1 (One pound) <sup>of the sum</sup>

Pte Chafe J. <sup>W. H. Chafe</sup>  
Lt Royal Wfld Rgt



Annette Jones  
(Matron)

OR £ 1-0-0  
AW. 3-4-18  
Receipt no 6350.



REMINDEE.



No. 11602

From Company Officer,  
The King George Hospital,  
Stamford Street, LONDON, S.E. 1.

From

To Regimental Paymaster,

To

*58 Victoria St.*

The counterfoil of A.F.O.1823a

re 2264 The Cape. J

Newfoundland

for £ : 2 : outstanding, sent to you  
for Dec 17 not having been received  
you are requested to expedite the same  
and to state hereon when it may be  
expected.

*G. Hoffmann*

Lieut. R.A.M.C.  
Company Officer.

*#*



302 LONDON GENERAL HOSPITAL  
No. 30 APR 1918  
WANDSWORTH, S.W. 18.

20 Paymaster M. K. £1.0.0 hrs

25 R Newfoundland Regt 18

58 Victoria St

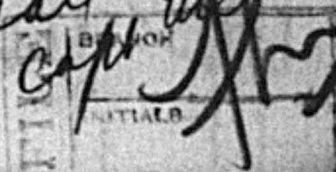
Recd 20 6840

Please remit to Pte shape No 2264  
the sum of £1 (one pound) on account  
of any balance that may be due  
to me

30.4.18



Approved  
I shall  
Capt [Signature]



3<sup>RD</sup> LONDON GENERAL HOSPITAL  
No. \_\_\_\_\_  
15 MAY 1918  
WANDSWORTH, S.W. 18.



To Paymaster  
Newfoundland Contingent  
58 Victoria St.  
Please remit to P. H. Shape No 2264  
the sum of £1 (one pound) on account  
of any balance that may be  
due to me

14-5-18

# 2264  
O.K. £1.0.0 h.p.  
15/5/18 Receipt No 7157

Approved  
Chap. 12  
S. H. S. /  
C. H. S. /  
C. H. S. /



admitted 18/2/18.

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

Soldier's Regtl. No. } 2264. Rank Private

Name Chapman  
(Surname first)

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

To Officer i/c of Records 58 Victoria St

Regimental Paymaster do

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 4/6/18, has been sent to his ~~home~~ the address below 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) 6/6/18

to (full address) 58 Victoria St

Date 6/6/18 G C Hall { Officer

Place Barnstaple Capt { Comm.  
Hospital.

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

admitted 18/2/18

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

Soldier's Regtl. No. } 2264 Rank Pi

Name Chapman  
(Surname first)

Corps or Regiment } Royal Fusiliers  
(also Unit if known)

To Officer i/c of Records 58 Victoria St

Regimental Paymaster do

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

4/6/18, has been sent to ~~his home~~ <sup>the address below</sup>

~~where~~ to await instructions as to his final discharge; he has been given £1 (one pound) advance ~~and of his private expenses.~~

He proceeded on (date) 6/6/18

to (full address) 58 Victoria St

Date 6/6/18 G C Hall } Officer  
Capt } Comm.

Place London Hospital.

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

**MEMORANDUM.**

From Office No. 1, Inf Sec Nov 10 1917  
2nd Echelon B Co F.  
 To Office of New Zealand Records  
London

2264 Pte Chase

This man was reported missing  
by D. C. Batta, 9/10/17.

This was not reported to you, pending  
an answer. My letter dated 2/11/17.

This man ~~very~~ appears in ~~the~~ the  
as invaluable by wounded.  
d/10/17

*noted  
HAB*

Meary  
 2nd Lt  
 Office No. 1 Inf Section

No. 2264 Rank Pl Name J. C. Chase

Pay	F.A.	Wkg	Total	N.F.P./33
100	10		110	
Less Allotment			80	Net
Net Rate			30	

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£ s d				
						From	To							
Balance					Balance		21 <sup>12</sup> / <sub>17</sub>			8	16	5	✓	
Acquittance Rolls					Pay @ Net Rate	22 <sup>12</sup> / <sub>17</sub>	6 <sup>6</sup> / <sub>18</sub>	167	30	50	10	10	✓	
Hospital Advances		3	1	6										
A.B. 64.												18	9	✓
P.&R.C. Payments		7	0	0	R.A. 9 days	7 <sup>6</sup> / <sub>18</sub>	10 <sup>6</sup> / <sub>18</sub>	4	30	1	20	4	11	20-1-0 ✓
					cr/1									20-5-11
					Cheque no 8123		6 <sup>6</sup> / <sub>18</sub>	9						
					Receipt no 9655		10 <sup>6</sup> / <sub>18</sub>	14						
					<del>9-19-6</del>									
					-14-5									

~~10-1-6~~  
19-11-6  
6/18

Chafe, Jacob.

2264

Ray sept

February 10th., 1919

#2264 Pte. Jacob Chafe,  
#5 Cabot Street,  
City.

Dear Sir:-

Please find enclosed "Dis charge  
Certificate No.901."

Yours truly,

Paymaster & Officer i/c Records  
Captain.

Enc' 1 1.



# The Royal Newfoundland Regiment

*Re-attested*

## DEMobilIZATION OF

Reg. No. *2264* Rank *Pte* Name *Chapin Jacob*  
 Date of Enlistment *14.3.16* Address *St. Johns* District *St. Johns*  
 Occupation *Driver* Classification for Discharge *B* Medical Category *PE*  
 Recommendation S.M.B. *permanently unfit* Disability Rating *40% 3 mths*  
 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		" 6	
B 179c	B 120	M 93			

Date *18.1.19*

*Money Capt*  
C. C. Discharge Depot.

### PARTICULARS FOR DEMobilIZATION

#### 1. Civil Re-Establishment.

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

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*  
 (b) Clothing Supplied *for 1st 1/2 years*

Date *22.1.19*

O i/c, Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *ml* to his home at *St John* and Release Certificate No. *925* issued.

Date *22-1-19*

*[Signature]*  
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to *5-2-19*

Date *22-1-19*

*[Signature]*  
Depot Paymaster.

Discharge approved for *22-1-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1	1	
F 178	W 3494	B 122	Board 1st	" 2	1	<i>Done B</i>
R 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 *22-1-19*

*[Signature]*  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

**ELIGIBLE for POST DISCHARGE PAY**

Date *JAN 22 1919*

*[Signature]*  
O. C. Discharge Depot.

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

Date .....

# Report of Medical Board.

Station	St. John's, Nfld	Date	13th. Jan. 1919.		
No. and Rank	2264	Age	Height 5-6 1/2.		
Name	Chafe Jacob	Complexion	Fresh.		
Unit	Royal Newfoundland	Eyes	Brown	Hair	Dark Brown.
Address	St. John's.				
Former Trade	Driver.				
Enlisted at	St. John's	On	15-2-16.	(The Board will please note how the soldier's appearance corresponds with above description.)	
Disease or Disability	Original	<i>RSW - R arm</i>			

Subsequent

Present Condition (Compare with previous Board)

**Scars Healthy Paralysis of Ulna Nerve Persists with Tenderness, along fore-arm. Other wounds satisfactory. Grasp of hand weak unable to lift weight**

**THE ENTIRE DISABILITY:** To what extent is his capacity lessened at present for earning a livelihood in the general labour market? **40%**

**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?

**40% 3 months,**

Recommendation of Medical Board

**Discharge Permanently Unfit.** Members of Board

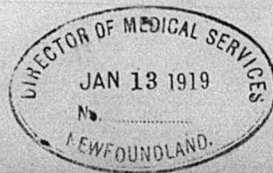
N.S. Fraser,

(Sgd.) Cluny Macpherson, Major.

J. Sinclair Tait.

L. Paterson. Major

Approving Medical Officer.





# RECEIPT FOR A SOLDIER'S DOCUMENTS

## HEADQUARTERS NEWFOUNDLAND REGIMENT

To V. C. Depot

Please receive documents as indicated below

No.	RANK AND NAME	N. F. P. 156	Non-effective account	Medical history sheet	Nfld. 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			
		B. 178	B. 178a	B. 179	B. 268	W. 3494	D. 400A	B. 103	B. 120	B. 121	B. 122	1st Board	2nd Board	3rd Board	4th Board	Board	B. 1915	Form L	Form K	Form I					
2264	Pte Chafe Jacob		/	/								/													

Received above noted documents,

Date \_\_\_\_\_ 19\_\_

Signature of officer forwarding documents:

*H. H. Munnick*

Date Jan 10<sup>th</sup> 1919 Pro Paymaster

COPY.

This space to be left blank for the Chelsea Number.

Army Form B. 268.

[Blank box for Chelsea Number]

### Proceedings on Discharge.



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

No. <u>2264</u>	Army Rank <u>Private</u>
Name <u>Chapman Jacob</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, Depôt, &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>July 26th 1918</u>	
Place of discharge <u>St. John's Nfld</u>	
1. <u>42 3/4</u> years <u>1</u> months Description at the time of discharge.	
Age	Descriptive marks.
Height <u>5</u> feet <u>6</u> inches	<u>Shrapnel Wounds.</u> <u>Right Thigh &amp; Left Leg, 2" Wd. Chest.</u> <u>Left Arm.</u>
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.	
Complexion <u>Flesh</u>	
Eyes <u>Brown</u>	
Hair <u>Dark Brown</u>	
Trade <u>Driver</u>	
Intended place of residence (To be given as fully as practicable) <u>St. John's Newfoundland</u>	
<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>	
2. The above-named man is discharged in consequence of <u>being no longer physically fit for war service on account of wounds received in action</u>	
<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>	
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.

[OVER.]

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class \_\_\_\_\_

6. Campaigns, Medals and Decorations

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

Certificate of education .....

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

(Place) \_\_\_\_\_

(Date) \_\_\_\_\_ Commanding \_\_\_\_\_ Battn. \_\_\_\_\_ Regiment.

8. *Certificate to be signed by the soldier on 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, subject to the reservations of the claims noted on the 3rd page.

(Place) St. John's \_\_\_\_\_ J. X. L. G. Hafe (Signature of Soldier.)

(Date) July 27th, 1918 \_\_\_\_\_ Holland (Signature of Witness.)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. *Additional certificate in the case of a soldier who takes his discharge at his own request.*

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

\_\_\_\_\_  
(Signature of Soldier.)

10. *Statement of service.*

Service towards engagement to \_\_\_\_\_ (the date to which the record of service is completed) \_\_\_\_\_ years \_\_\_\_\_ days.

Further service " " \_\_\_\_\_ (the date of confirmation of discharge) ... .. " " "

Total ... .. " " "

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for \_\_\_\_\_ (date)

(Place) \_\_\_\_\_

(Date) \_\_\_\_\_

Signature \_\_\_\_\_

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

---

No Reservations

<sup>his</sup>  
J. L. Chafe  
mark

Witness: Holland



COPY

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

No. 2264

Rank A

Name (surname first) Chafe Jacob

Regiment ROYAL NEWFOUNDLAND REGIMENT



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

Coachman

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?

Mr. Miller. 74 Le Marchant Road. St John's  
Employed for 5 years as Coachman

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

Uncertain 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?

Driver

Date 1.6.18

Signature J. Chafe

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.

2060



**THE ROYAL NEWFOUNDLAND REGIMENT**  
**HEADQUARTERS**

*St. John's, Newfoundland,*

August 1st, 1918 *191*

From Officer Commanding,  
Depot

To Paymaster and Officer i/c Records,  
Militia Department

2264 Pte. J. Chafe

Above noted soldier was recommended for discharge some time ago. While awaiting his discharge he has been employed at Depot doing special duty in the "Caribou Hut". He informs me that his discharge has now been carried out, but to date Depot has no knowledge of it. As we want to re-attest him I should be glad to have this information and would also thank you to advise Depot without delay when any discharges are carried out, so that unnecessary confusion may be avoided.

*M. W. H. G.*  
Ass't Adjutant  
Depot The Royal Newfoundland Regiment  
St. John's, Nfld.

**ORIGINAL**  
LAST PAY CERTIFICATE

N.F.P./94

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

Regtl No. 2264 Rank Pte Name J. Chafe Unit Royal Nfld. Regt. who was Repatriated  
to Newfoundland on 22/6/18 Authority A. F. B. 179 Cause Class A.

STATEMENT OF ACCOUNT

DR.

PARTICULARS		£	s	d	CR.	
Balance Dr. from H Co. 5/7/18					Balance Cr. from 21/12/17	
Allotment 183 days @ 80	146	30	1	8	Pay 183 days @ £ 1.00	183 00
Cash Payments: P. A. R. O.		17	4	5	Field Allowance 183 days @ £ .10	18 30
Hospital Advances		3	1	6	Other Allowances days @ £	201 30
<i>Cash 21-6-18</i>			10	0	Other Credits:	
Other Debits:					Ration Allowance.	
					6/6/18-22/6/18, 17 days @ 2/1	1 18 5
Total Debits (£ 51-7-7)		51	7	7	Total Credits	51 18 1
Balance due by Paymaster (11/6)		51	19	1	Balance due to Paymaster	51 19 1

PERIOD: From 22/12/17 To 22/6/18

CHECKED.  
*[Signature]*  
21/6/18

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

(Place) \_\_\_\_\_ (Date) 191

Made up/Checked in accordance with information received in the Pay & Record Office London, \_\_\_\_\_ to 21/6/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,  
21/6/18 191

O.C. " " Company.  
*[Signature]*  
Chief Paymaster & Officer i/c Records.



DEPARTMENT OF MILITIA,

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes, If any 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. *Jacob*..... 2. Surname *Chafe*.....

3. Rank. *Plt*..... 4. Regtl. No. *2264*.....

5. Address in full to which future payments of gratuity are to ~~fax~~ be forwarded. *3 Cabot St St John's*.....

6. Date of enlistment in the Regiment. *March 14<sup>th</sup> 1916*.....

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. *Sarah Chafe*.....

8. Relationship of such dependents. *Wife*.....

9. Address in full of such dependent. *3 Cabot Street St John's*.....

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 Nfld. If so, give dates, and particulars of such service. *no*.....

12. Give total length of time which you served on active service, whether in Nfld, or Overseas. *14<sup>th</sup> March 1916 to 5<sup>th</sup> February 1919. Two years 329 days*.....

13. Have you had more than one enlistment? If so, give particulars of discharge and re-enlistments, and under what regimental numbers. *6*.....

*Discharged 26/7/18, re-enlisted 1<sup>st</sup> or 2<sup>nd</sup> Aug. 1918, under same number 2264.*.....

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. *no*.....

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

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

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

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

(b). If so, was such reversion in consequence of misconduct or inefficiency? *not applicable*.....

19. Are you now serving in the Regt.? *no*.... If not give:- (a) Date of discharge. *5/7/19*..... (b) Reason for discharge. *demobilization and medically unfit for general service*.....

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. *In France October 1916 to October 1917, wounded 9<sup>th</sup> October 1917*.....

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. *no*.....

(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: *Jacob <sup>his</sup> ~~with~~ Chape* Witness: *Wm. O. Carey*

Place of Residence: *3 Cabot Street, St. John's*

Declared before me at: *St. John's*

This *28<sup>th</sup>* day of *February* 19*19*

*Christie Will Carey*

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>.31.1.19</i>	<i>73:70</i>		<i>5.00</i>	<i>500.00</i>
			<i>W. P. D. P.</i>	<i>73:70</i>
				<i>426.30</i>
Certified Correct.				Paymaster.







Feb 28th 1920

Major Howley  
O. I. C. Records

Please pay to J. Chafe, 2264  
the sum of seven dollars and fifty cents  
in payment of five days allowance to date  
and charge same to Civil Re-establishment Committee

*J. Chafe*

\$7.50

Pension            \$15.00

30855  
*J. Chafe*  
FEB 28 1920

Vocational Officer

May 26th 1920

Major Howley  
O. I. C. Records

Please pay to J. Chafe, 2264  
the sum of forty five dollars  
in payment of P. & A. Bonus  
and charge same to Civil Re-establishment Committee

\$45.00

Pension \$15.00

*J. C. Mackall*

Vocational Officer

AMOUNT	38120	INITIALS	<i>LC</i>
GEN' LEDGER		INITIALS	<i>[Signature]</i>
PRY LEDGER		INITIALS	
GEN' LEDGER		INITIALS	

*J. Chafe*

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 26  $\frac{30}{100}$

July 3 1919

Received from the First Newfoundland Regiment  
the sum of Twenty Six  $\frac{30}{100}$  Dollars.  
~~on account~~ of Pay. USG  
balance

J. X. Chafe  
mark

Wit. E. Walsh  
Rank

Ch. No. 209 $\frac{3}{100}$	Initials. E.W.
Pay Ledger 411	Initials. W.W.
Gen. Ledger	Initials.

R. C. S.

No. 2264

Rank

Pt

Name

J. Chase

1918 - 1919.

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 57.<sup>46</sup>

July 26<sup>th</sup> 1918.

Received from the First Newfoundland Regiment  
the sum of Fifty Seven <sup>46</sup> — Dollars.  
~~on account~~  
balance of Pay.

His  
J. B. Chafe  
mark

Regtl. No. Rank

Ch. No.	457	Initials	JAC
Pay Ledger	23	Initials	JAC
Gen. Ledger		Initial	JAC

C. J. A. G.

No. 22.64 Rank *Pl*

Name *Chap J.*

1918 - 1919

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$15.00

July 8<sup>th</sup> 1918

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

<sup>lieut</sup>  
J. X. Chape  
major

Regtl. No. Rank

Ch. No.	90	Initials	JX
Pay Ledger	23	Initials	CC
Gen. Ledger	RP	Initials	by

30  
C. J. S.



No. 2264 Rank Pte

Name Jacob Chase

Reg. No. 2264 Rank Pte Name Chafe J.  
Attested 27-7-18 Address 3 Calvert St  
Allotment 504 Allottee Mr Jacob (Sarah) Chafe wife  
Date of Allotment 27-7-18 Returned from Overseas 6-7-18  
Embarked for Overseas Cause Discharge

12-7-18 Rec. Discharge Per unfit  
26-7-18 Discharged  
9-9-18 Application for Operation sent to Paymaster.

18-1-19. PASSED TO DEMOBILIZATION OFFICER

22-1-19. DISCHARGE APPROVED ON DEMOBILISATION.

**Casualty Form - Active Service.**

Regiment or Corps *The Royal Newfoundland*

Rank *Sgt* Surname *Chafe* Christian Name *Jacob*

Religion *W.C.* Age on Enlistment *25* years *0* months

Enlisted (a) *Mar 15/16* Terms of Service (a) *Duration of War* Service reckons from (a) *Victoria St. London, S.W.*

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

Extended { ..... } Re-engaged { ..... } Qualification (b) \* *21 JUN 1918* or Corps Trade and rate *RECORD OFFICE*

Occupation ..... Signature of Officer .....

Report		Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked <i>Hampton</i>		<i>3/10/16</i>	
		Disembarked <i>Queen</i>		<i>4/10/16</i>	
		<i>James Battalion</i>		<i>14/10/16</i>	
<i>14 C.C.S.</i>	<i>Admitted French Feet</i>	<i>Track Feb (100) 12.12.16</i>	<i>Manuf C.C.S.</i>	<i>12.12.16</i>	<i>Ed. 7757</i>
<i>21 C.C.S.</i>	" "	" "	<i>France</i>	<i>12.12.16</i>	<i>Ed. 7261</i>
"	<i>do do do</i>	<i>Manuf 20. Duty</i>		<i>19.12.16</i>	<i>7588</i>
	<i>With Battalion</i>			<i>23.1.17</i>	
<i>87 R.A.</i>	<i>Ad. G.W. Chest. Arm Leg</i>	<i>Manuf 47 C.C.S.</i>		<i>10.10.17</i>	<i>Ed 2053</i>
<i>"W. St. George."</i>	<i>Transferred to England</i>		<i>Queen</i>	<i>12.10.17</i>	<i>R.A. 1544</i>
				<i>18.10.17</i>	<i>W 3083</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 shall be entered on Army Form B.213, Army Form A.36, or in other official documents. (b) Signaller, Shoeing-Smith, &c. W. 8635-M2733 2000m 9/17 (3361) G.P. & S., Ltd., Army Form B.103 E.1807. P.T.O.

*Sgt J. Neary*  
*Ed. 7757*  
*Ed. 7261*  
*Ed 2053*  
*R.A. 1544*  
*W 3083*  
*Ed. 7757*  
*Ed. 7261*  
*Ed 2053*  
*R.A. 1544*  
*W 3083*

COPY

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.  
 (6-4) W5017/2124 1000m 6/15as 93 56

Forms  
B. 121.  
39.

Regiment of 1<sup>st</sup> Newfoundland

Number of Sheet 1 of One

Signature of O. C. Company W. Rendell  
Major

Regimental Number and Name		Enlistment	Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	Name	Age on	Teamster	
Joined	Date	Place and Date of Enlistment	Religion	
Joined	Date	Period of	Place of Birth	
Joined	Date	(with Colours <sup>32 1/2</sup> years. with Reserve <sup>32 1/2</sup> years.)	St. John's	

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
Newton-on-Sea	8/8/16	Pte		1 <u>Drunk</u> on picket duty	Sgt. Woods Cpl. Murphy	Admonished	6/8/16	Lt. Col. Whitaker	to R.
				Medically Unfit	26 7/8				
				Reattested	27 7/8				
				Demobilized	5 2/9				

COPY SENT TO  
O.C. H.Q.  
ST. JOHNS, N.F.L.D.  
N.F.P.38. No. 9913/20  
DATED 22 JUN 1918

To be carried over

Army Form B. 121.



D-2264

# The Royal Newfoundland Regiment

*Re-adjusted*

## DEMobilIZATION OF

Reg. No. 2264 Rank Pte Name Chafe Jacob  
 Date of Enlistment 14.3.16 Address St John's District St John's  
 Occupation Driver Classification for Discharge B Medical Category 1  
 Recommendation S.M.B. permanently unfit Disability Rating 40% 3 months  
 Passed to Demobilization Officer with following documents:—

N.F. P 36	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	<u>7.199</u>	" 6	1
B 179c	B 120	M 93			

Date 18.1.19 Money Capt  
 O. C. Discharge Depot.

### PARTICULARS FOR DEMobilIZATION

#### 1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.  
*Jacob X Chafe*  
*mark [signature]*

Date .....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$60.00
- (b) Clothing Supplied [signature]

Date 22-1-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *ml* to his home at *St Johns* and Release Certificate No. *925* issued.

Date *22-1-19*

*Edwards 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 *5-2-19*

Date *22-1-19*

*W. W. W. Capt*  
Depot Paymaster.

Discharge approved for *22.1.19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P136	B 268	B 121	N.F. Med.	D.F. 1	<i>1</i>	
F 178	W 3494	B 122	Board 1st	" 2	<i>1</i>	<i>Form B</i>
B 178a	D 400A	B 1915	do 2nd	" 3	<i>2</i>	
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 *22.1.19*

*Edwards Capt*  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

- Officer in Records.
- Board of Pension Commissioners.

with following additional documents.

**ELIGIBLE for POST DISCHARGE PAY**

Date *JAN 22 1919*

*R. H. Jait Capt.*  
O. C. Discharge Depot.

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

Date *Jan 25/19*

*Asst. Secy. Genl.*  
Genl. Records

