



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. *5370* Name *Lawrence Clape* Corps *RC*

Questions to be put to the Recruit before Enlistment.

1. What is your name? *Lawrence Clape*
2. What is your full Address? *St. John's*
3. Are you a British Subject? *Yes*
4. What is your age? *20* Years Months
5. What is your Trade or Calling? *Postman*
6. Are you Married? *No*
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? *No*
8. Are you willing to be vaccinated or re-vaccinated? *Yes*
9. Are you willing to be enlisted for General Service? .. *Yes*
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? } 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? } *Yes*

Lawrence Clape 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.

Lawrence Clape SIGNATURE OF RECRUIT.

J. Daymond Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

Lawrence Clape 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 answered 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 *23/5/15* day of *May* 191*5*.

C. S. Dicks Signature of Attesting Officer *Lieut.*

†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*5*

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

5370

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

Name Lawrence Chase
 Apparent age 20 years months. Height 5 feet 7 inches
 Chest Measurement { Girth when fully expanded 38 1/2 inches
 Range of expansion 3 1/2 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Mary Jeffrey Chase
Petty H. St John W. | Relationship Sister
 Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries	
					Years	Days	Years	Days		
Service towards limited engagement reckons from <u>23-5-18</u>										
Joined at <u>Mt. Aris</u> on <u>May 23-1914</u>										
Discharged June 30/19										
<u>Embarked Mt Aris St. Constantine & Halifax N.S.</u>										
<u>Embarked for N.S.W. 25th 18.</u>										
<u>Admitted 25th Mt. Aris Entree 22nd 19</u>										
<u>1st Lt for demobilization 22nd 19</u>										
<u>Arrives N.S.W. 1-6-1919</u>										
<u>Demobilization Mt Aris</u>										
<u>30-6-1919</u>										
Total Service forfeited as above.....										
Total Service towards Engagement to <u>30-6-1919</u>					(date of discharge)	<u>1</u> years	<u>39</u> days			
" " Pensions " " " " " " " "					[" "]	"	"			

C.R. 5370

Extract from Daily Orders Part 11 Unit The Royal WFLA.

Regt. St. John's, July 16th, 1919.

The discharge of the undersigned on demobilisation has been

CONFIRMED by officer i/c Records from 30-6-19

30-6-19

5370 Pte. L. Chafe.

C.R. 5370

Extract from Casualties received from the
Chief Staff Officer London dated 2nd. May 1919.

The undermentioned ex Bermondsey Military Hospital
Lewisham, S.E. 1/5/19. was granted furlough to
10/5/19. Classified: Fit for Duty.

5370 Chafe.

C.R. 5370

Extract from Daily Orders Part 11 Unit The Royal Rifles.
Regt. St. John's, June 19th, 1919.

The discharge of the undernoted on demobilisation has been
APPROVED by C.C. Discharge Depot with effect from 16-6-19.

5370 Pte. L. Chafe.

C.R. 5370

Extract from Daily Orders Part III Depot, St. John's,

Date June 18th 1919.

5370, Pte. L. Chafe.

Reported at Headquarters 1/6/19.
which sailed Liverpool May 23/1919.

ex "Corsican"

C.R. 5370

Extract from Nominal Roll of Sick and wounded from France
Admitted Bermondsey Hospital, Lewisham S.E. admitted
16/3/19.

5370 Pte. L. Chafe.

Typhoid Fever.

C.R. 5370

Extract from Telegram from Syn. to Mil. dated Mar. 19th., 1919.

Bermondsey Military Hospital Typhoid. 5370 Chafe.

C.R. 5378

Extract from Nominal Roll of draft No. 56, from the 2nd.,
Battalion of the Newfoundland Regiment to the 1st., Batt.
Newfoundland Regiment B. E. F., Embarked Southampton
23/11/18..

#5370 Pte. L. Chafe.

C.R. 5370

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. S. John's dated July 25, 1918.

The following man embarked for overseas on H.M.S.
following "Columbella" July 22, 1918.

"5370 Pte. Lawrence Chafe

C.R. 5370

Extract from Daily Orders part 11, from Unit The Royal Rifles.
Regt. St. John's, dated May 25, 1918.

#5370 Pte. Lawrence Chafe.

Attested for General Service with the Royal Rifles Regt.
from 25.5.18

C.R. 5370

Extract of War Office List No. H.A. 35116 from Pay
& Record Office, London, dated Feb. 28th/19.

Admitted to 6 General Hospital Rouen, Feb. 18th/19.

INFLUENZA SEVERE.

#5370 Pte. L. Chafe.

CR. 5370

March 20th, 1919

Mrs. Mary Chafe

Petty Hr.

Dear Madam:-

I regret to inform you that a report has to-day been received from The Par & Record Office London stating that your son, No. 5370, Private Lawrence Chafe is at Bermondsey Military Hospital, London suffering from typhoid fever.

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

Yours faithfully,

Minister of Militia.

SICK AND WOUNDED N.C.O.'s AND MEN OF THE EXPEDITIONARY FORCE - FRANCE

No. TWO RECORD OFFICE W A R L E Y

No. H. A. 35123

ADM 7 CAN GEN H ETAPLES 21 FEBRUARY 1919

47448 Pte Whitton S. 2 Essex B. Haematoma

C.R. 5370

SOUTH AFRICAN RECORD OFFICE (NATIVES)

No. H. A. 35123

ADM 2 BATIVE LABOUR GEN H PONT-DE-BRIQUES 22 FEB'19

2136 Cpl Mackier J. 372 Coy. C. A. H. T. Influenza.
2385 Dvr Hollander L. 372 do. do.

NEWFOUNDLAND EXPEDITIONARY FORCE

No. H. A. 34123

ADM 25 STY H ROUEN 22 FEBRUARY 1919

5370 Pte Chafe L. 1/R. Newfoundland R. Susp. Enteric Mild.



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X

C.R. No. 5370 Name Chafe-L

Sqn., Batty., or Company } D. A. Corps } Newfoundland

Date of enlistment } 23/5/18

G.C. Badges? }

Service or Proficiency Pay }

Character Good

Date of last entry in Company Conduct Sheet }

No. and date of last drunk }

Period not reckoning towards freedom from extra fine }

Sheet No.

Signature O.C. Company, etc. } M. H. [Signature]

Army Form B. 122.

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

C.R.

L. Chafe

C.R. 5370

P. + R. P

Barronberry Mrs: Hospital
Ladywell

Ans.

26. 4. 19.

N^o 5370.

Pl^e Chafe - C.

Rcpt 2223

~~P. Newfoundland Reg^t~~

N^o 4775 P^e Butler

R. 2224 P. Newfoundland Reg^t



Ask for return of pay books.

OK for M. Welch's
Sister
£ 2-0-0

No. 4767 P6. Milly

£ 2.0.0

Receipt. 2275

From/Officer Commanding,
Bermondsey Military Hospital,
Ladywell Road, S.E.13.

Reference reverse, I have to acknowledge
receipt of £3, which sum has been handed to Pre.Chfe please.

12/4/19.



Major.R.A.M.C.

Registrar.



No 5529/5/P&A.

NEWFOUNDLAND CONTINGENT

N.F.P/48.

Pay & Record Office,
58, Victoria Street,
London, S.W. 1,

To: Officer Commanding,
Bermondsey Military Hospital,
Ladywell Road, Lewisham S.E.13

8th April 1919

With reference to request of (No) 5370 (Rank) Private
(Name) L. Chafe Cheque No. 11771 for
£ 3. 0. 0. is enclosed for payment to this Soldier as may
~~be deemed fit.~~
Kindly complete receipt form on back of cheque before
presenting at a Bank.

A. A. [Signature]
Chief Paymaster & O. i/c Records.

5529/5/P&A.

Bermondsey Military
Ladywell Road, Lewisham S.E.13

8th April 9

L. Chafe

5370

Private

3. 0. 0.

Chaque no
Date

11771

9-11-19

5370. ¹³⁷W. Lawrence Chafe
Royal N. F. L. D. Regt.
Ward A. 3.

March 31st 19

Burmondsey Military Hospital
Ladbroke Road
Sturisham S. C. 13.

To The Paymaster

Dear Sir;

Complying with the
form N. F. T. 45, I would ask you to
send to my address the sum of three
pounds (£3) on account of any money
that may be due me as I need it.
I have been sometime now in hospital
and please grant my request.

Yours

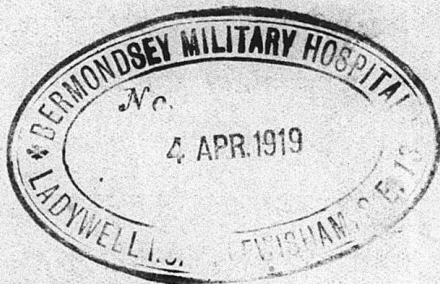
I remain

5529/5 Yours etc.

W. Lawrence Chafe

W. Lawrence Chafe

O.K. £3-0-0.
M.R. 7/4/19
R



Approved & Forwarded
N. J. Price
Capt for

FORM K

No. 4758



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Laurance Chape, Regl. No. 5370

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 July 11

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
4383	Wife	Miss Jeffrey Chape	Netley, St. John's	60
Total Allotment, \$				60

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.) Laurance Chape
 Officer Commanding
C. Company
M. G. G.
June 13th 1918

(S) Laurance Chape
 (Rank) Pl.

FORM K

No 4758



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Lawrence Chafe, Regl. No. 5370

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

Allotment begins July 1st

Table with 5 columns: Identity Certificate No., Whether Wife, Child, other Relative or Friend, NAME (in full), ADDRESS, AMOUNT (each person). Row 1: 4363, Mother, Mrs Jeffrey Chafe, Betty Harbour, 60. Total Allotment, \$ 60

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.) Watson Lt Col
Officer Commanding
Company
H. G.
June 13th 1918

(S) Lawrence Chafe
(Rank) Private

Chafe, L.

5370

Hay sept.

June 30, 1919

#5370 Pte. Laurence Chafe,

Petty Harbor,

St. John's West.

Dear Sir:-

Please find enclosed Discharge
Certificate No. 2551.

Yours truly

Paymaster & O.i/c Recprds ^{Uapt}

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5370 Rank. PT Name. Chafe L.
 Intended place of residence. Petty Hqs ST John's W.

2. Occupation Fisherman
 Classification of soldier. E Medical Category. A1

3. The above named man is discharged in consequence of

DEMobilization
Eligible for War Service Gratuity

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

Date JUN 16 1919

H. Mrs H.
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place, ST. JOHN'S

Date JUN 16 1919

L. Chafe
 Signature of soldier
Ch. Johnston
 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, ST. JOHN'S

Date JUN 16 1919

L. Chafe
 Signature of soldier
James O'Sullivan
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service. 23-5-18 No. of days on Military
 Discharged from service. 16-6-19 Plus 14 days Service. 404

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge Records, The Royal Newfoundland Regiment, twenty-eight days from date.

Place, ST. JOHN'S

Date JUN 16 1919

R. H. Sait Major
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place, ST. JOHN'S

Date June 30/1919

A. Howley Capt
 Officer in Charge Records
 The Royal Newfoundland Regiment

A 9B 2079/2551

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 resume former Occupation.

Laurence Chofo
Signature of Man.

Reg. No. *5370*

J. P. Snow
Signature of the Vocational Officer or his Representative.

Place *St John*

Date *11-6-19*

191

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 5370 Rank Plt Name Shah L
 Date of Enlistment 23-5-18 Address Cethy St District St. John's
 Occupation Fireman Classification for Discharge 1 Medical Category A1
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N. F. 136	B 268	B 121	N. F. Med	D. F. 1	1
B 178	W 3494	B 122	Board 1st	" 2	3
B 178a	D 400A	B 1915	do 2nd	" 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 14-6-19

J. O. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am L. Schafe 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 \$60.00

(b) Clothing Supplied None

Date 16-6-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. ^{R 1815} 2819 to his home at ^{petty} and Release Certificate No. ²⁸¹⁹ issued.

Date 16-6-19

J.A. Knowlton
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 30-6-19

Date 16-6-19

J.A. Knowlton
Depot Paymaster.

Discharged approved for 16-6-19

Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
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
B179c	B 120	M 98		

1/2 Form B

Date 16-6-19

J.A. Knowlton
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUN 16 1919

R.H. Sait Capt.

O. C. Discharge Depot.

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

Date

The Royal Newfoundland Regiment

Class for Demobilization: —

16

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

14.6.19

Regimental No *5370*

Name *Chafe L*

Rank

Address *Petty Ho*

Present Medical Category *A1*

Recommended for: — { (a) Immediate discharge
(b) Standard Medical Board

Members of Board {

R. H. Daint Major
O.C. Discharge Depot.

L. Gibson
Senior Medical Officer

J. W. Burden
M.-O. Depot



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 *Chafe, Lawrence*
 Regiment from which discharged *Royal Newfoundland*
 Regimental number *5370*
 Intended address *Petty H.*
 Height on discharge *5 feet 7*
 Color of hair on discharge *Dark Brown.*
 Complexion *Ruddy.*
 Color of eyes *Blue.*
 Descriptive Marks
 Figure on discharge *Medium.*
 Christian name of Father
 Christian name of Mother *Mary Ann*
 Wife's maiden name in full
 Date and place of marriage
 Christian names of children
 Place and date of soldier's birth *Petty H. 19-10 1898*
 Nature and locality of civil employment required

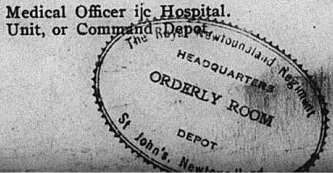
I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full) *Lawrence Chafe* *Ho*
 Date *14 6 19* (Rank)

Station _____ Date _____

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

Station _____ Date _____



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

MEDICAL HISTORY

OF

Surname Lehane

Christian Name Lawrence

Table I.—GENERAL TABLE.

Birthplace:—Parish Peter St. Saviour's County Nfld.

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	25 th	May	1918	191
	at	Seymour	at	
Declared Age	20	years		days
Trade or Occupation	fisherman			
Height	5	feet	7	inches
Weight	146	lbs.		lbs.
Chest Measurement	Girth when fully expanded	38 1/2	inches	inches
	Range of Expansion	3 1/2	inches	inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	—	—		
When Vaccinated				
Vision	R.E.—V = 6/6	L.E.—V = 6/6	R.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>Lambert Palmer</u>			
(Rank)	Major			
	Medical Officer.			Medical Officer.
Enlisted	at	Seymour	at	
	on	23 rd	day of	May
		1918		191
	Corps.	Regtl. No.	Corps	Regtl. No.
Joined on Enlistment	Royal Nfld Regiment. 5370			
Transferred to	ROYAL NEWFOUNDLAND REGIMENT			
Became non-effective by	on	day of	191	on
(Signature)				day of
(Rank)				191

Transfer Statement of Clothing and Necessaries.

INSTRUCTIONS—This Statement will be made out by the Depot and will be sent to the Commanding Officer of the unit receiving the transfer, who will retain it as a voucher to the unit's Clothing Account. The Statement will also be forwarded in the case of men in the United Kingdom passing from Hospitals to Depots or units, and in all cases of Transfer, except when men proceed overseas.

STATEMENT showing the Articles in possession of (Regimental No.,

5370 Rank and Name) *Newfd*
Chafe L Pte

proceeding from the

to the

Date of Enlistment..... Date of Transfer..... 191 .

FOR DETAIL OF ARTICLES, see overleaf.

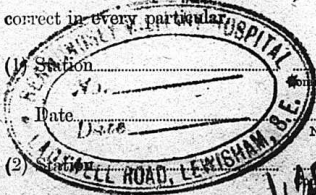
Certified that this Statement, as detailed overleaf, is correct in every particular

(1) Station..... Commanding Squadron, Battery, &c.

Date..... Name of Unit man is leaving.

(2) Station..... Commanding Squadron, Battery, or Company

Date..... Name of Unit man is joining.



H. S. M. Sims
1st Lt. 2nd Bn. 1st Div.
Commanding Squadron, Battery, or Company

Articles of Clothing and Necessaries in Possession.

Articles not in possession should be struck out of the list. Any articles not included should be inserted.

Clothing	No.	Necessaries	No.
Aprons, hilt		Badge, cap	/
Boots, ankle, pairs	/	Bag, Kit...	
Caps, Service Dress	/	Braces, pairs	/
Caps, Glengarry		Brass, Button	
Drawers, pairs	2	Brush, Brass	
Frocks, Canvas		" Blacking	
Greatcoat, D.M.	/	" Clothes	
Jackets, Service Dress	/	" Hair	
Kilts		" Polishing	
Pantaloon, cord, pairs		" Shaving	/
Putties, pairs	/	" Tooth	/
Spurs, Jack, pairs		Cap, Comforter	/
Trousers, Service Dress, prs.	/	Comb, hair	/
Trousers, Canvas or Khaki } Drill Overalls, pairs }		Disc, identity, with cord	
Waistcoat, cardigan	/	Fork	
Coat, waterproof		Garters, Highland, pairs	
Gloves, leather, pairs		Holdall	
Gloves, Motor Cyclist, pairs		Hose Tops, pairs	
Goggles, pairs		Housewife	
		Knife, Clasp	
		Knife, Table	
		Laces, leather, spare, pairs	
		Shirts, flannel	2
		Socks, worsted, pairs	2
		Spoon	
		Titles, metal, pairs	
		Towels, hand	
		Wax Polish, tin	

I certify that this statement is correct.

Date 1.5.19

Signature of the Soldier

L. Chape

Petty Harbor
John W Chap

no 356

OK [Signature]



THE ROYAL NEWFOUNDLAND REGIMENT
HEADQUARTERS

St. John's, Newfoundland,

October 26th. 1918. 191

The Paymaster,
Department of Militia.

Replying to yours of this date re John William Chafe, Petty Harbour. The only John William Chafe, of Petty Harbour, that we can find here is a man who offered for the Royal Naval Reserve on November 9th. 1916, was rejected and given Badge Number 356. H.Q. R. N. R. examination paper gives no particulars as to name of next of kin. This man has reported for Service under the terms of the Military Service Act 1918 and has been ordered to report here for examination. It should be possible to find out if this is the same man by making enquiry as to his Badge Number.

C. B. Dickson
Assistant Director of Recruiting.

October 26th.1918

From:- Paymaster,

To:- Asst. Director of Recruiting,
G.L.B. Armoury.

Please inform me if John William Chafe of Petty Hr.,
son of Mrs Geoffrey Chafe, has offered for enlistment.

In an application for Separation Allowance on account
of another son, this statement is made, and it is thought that
the date should be some time late in 1917.

Capt.
paymaster

ROYAL NEWFOUNDLAND REGIMENT
Separation Allowance Branch

NOTICE:

THIS STATUTORY DECLARATION is to be filled in correctly in every detail and a complete reply must be given to each question.

Each statement is considered as being made on Oath, and the form is to be signed before a Barrister of the Supreme, Stipendiary Magistrate Notary Public or Justice of the Peace and returned to:

THE PAYMASTER
Separation Allowance Branch,
St. John's, Nfld.

1. Name in full of soldier. Rank. Regt. or Unit. Regt. No.

Lawrence Chafe, private. ~~1st~~ 2nd Regt 5370

2. Age of soldier. Married or single.

Twenty Years Single

3. Name in full of mother. Age. Occupation. Permanent Address.

Mar Ann Chafe 61 Domestic Petty Harbour

4. Give name of your husband. Age. Occupation. Where employed

Jerry Chafe Dead

5. If your husband is not supporting you, state the reason.

Dead

6. If your husband is a chronic invalid and totally incapacitated, state nature of malady (A Medical Certificate must be enclosed with this document stating from what date husband has been totally incapacitated, and for how long incapacity is likely to continue.

Aliment came
for 60 cents per day
commencing 1st of
J.G.D.

7. If you are a widow, state date and place of death of your husband.

late 1911 at Petty Harbour

8. Have you married again since death of above mentioned husband.

No

9. Names of your other children. Address in full. Age. Occupation. Married or single.

John Wm Chafe Petty Harbour 18 Fisherman Single

rejected volunteer?

J.R.

10. State amount earned by (a) Yourself
(b) Your husband
Nothing
11. State amount and source of any other income.
Widows Pay
12. State value of real property belonging to you and your husband
none
13. State value of personal property belonging to you and your husband
about 50 dollars
14. If your husband is dead, state value of real and personal property ~~belonging~~ left by him
no property
15. Actual amount contributed by soldier during the year prior to enlistment
about 20 dollars p month
16. Was this amount contributed weekly or monthly
as above
17. Did this amount include payment of won's Board, etc.
yes
18. State your son's trade or occupation prior to enlistment
Lushman &&
19. State amount of his wages per week.
about 4.50 p week
20. State name and address of his last employer
no employer
21. State amount of monthly support from son since enlistment
22. State amount of allotment received by you from son monthly
18 60
23. State from what date did you receive allotment?
August 106
24. Actual amount contributed by other children. Weekly. Monthly.
about 10 dollars p month
25. Are any of these children in the employ of you or husband.
no

26. If not receiving support from other children, state cause. Explain fully?

27. With whom are you residing at present?

John Ann Chase

28. Have you made a previous claim for Separation allowance? If not, why? Give particulars.

no

29. Are you already in receipt of Separation Allowance from any source? If so, how much?

none

30. Are you in receipt of any payment from any Patriotic Fund, if so, how much?

none

31. Was the soldier at the time of his enlistment an employee of the Nfld. Government

no

32. In what capacity and in what place?

33. Is he in receipt of a salary assuch while serving in the Royal Nfld. Regt., if so, how much?

34. I herewith make this solemn declaration conscientiously believing the same to be true and knowing it to be of the same force and effect as if made under Oath and in virtue of the Evidence Act.

Signature of Applicant..... *Mary Ann Chase*

Place of residence..... *Petty Harbour*

Declared and subscribed before me at.....

this.....day of.....191

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

This application must be signed by two responsible parties, one of whom must be a clergyman, the other a representative of your local Patriotic Fund Committee, certifying that to the best of their knowledge after careful enquiry the above statements are correct and the soldier first above mentioned is the sole support of the applicant.

Signature of Clergyman..... *R. O'Leary*

Signature of Member of Patriotic Fund Committee..... *John R. Whitten*

Approved 12/1/19
[Handwritten signatures]

July 16, 1919

#5370 Pte. Lawrence Chafe,

Petty Harbor,
St. John's West.

Dear Sir:-

Referring to your application I enclose cheque for seventy dollars (\$70.00), being amount of first payment due you on account of the War Service Gratuity.

Yours truly,

Captain & Paymaster

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 26th. 1919.

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

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

Christian name *Larocce* 2. Surname *Chafe*

3. Rank *Sgt* 4. Regt. No. *5378*

5. Address in full to which future payments of gratuity are to be forwarded. *Petty Str. St. John's West,*

6. Date of enlistment in the Regiment. *May 29/18*

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

8. Relationship of such dependents.

9. Address in full of such dependents.

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?

11. Were you on active service only in Mfld. If so, give dates and particulars of such service. *Overseas.*

12. Give total length of time which you served on active service whether in Mfld. or Overseas.

June 16/19 *From May 29/18 to*

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

..... *No*

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

.....

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

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

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

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

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

19. Are you now serving in the Res?..... *No* If not give:- (a) Date of discharge..... *Nov 15/19* (b) Reason for discharge.....

..... *Temporary* *Recruitment*

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

France - from Nov 1918 to
Apr. 1919

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee..... *No*

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under Oath.

Signature of Applicant:

L. Chape

Place of Residence:

Petty Str. N. John's West

Declared before me at:

N. John's West

This

16th day of *June* 19*19*...

John W. Coffey

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

POST DISCHARGE PAY.

Date paid
Soldier. Dependent.

War Service
Classify.

Net amount
due

.....
.....
.....
.....

Certified correct.

Paymaster

FORM K

No. 4758



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Laurence Chafe, Regl. No. 5370

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 July 1st

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
4383	Mother	Mrs. Jeffery Chafe	Netley Harbour	60
			Total Allotment, \$	60

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.) Watson
Officer Commanding
Company
W. Green
June 13th 1918

(Sig.) Laurence Chafe
(Rank) Sgt

3508

Petty harbor

Dec^r 9 - 1918.

Mrs Bennett may I venture to solicit
the aid of your Interest purse on the
Allotment ^{certificate} you sent me three months ago
I am the mother of Laurence Chape
Mr. Henry Chape was to you about it ^{Pile 5390}
and you would him it would be all right
so I did not get it as yet the allotment
Commences July 1st 1918

Please get it for me for I
need it now

yours very respectfully.
Mrs Jeffery Chape
a Widow

December 31st. 1918.

Mrs. Jeffrey Chafe,
PETTY HARBOUR.

Dear Madam:

With reference to your letter of December 9th. I beg to state that your allotment has been sent to you regularly, and if it is this you refer to, will you kindly let me know the cheques you have not received, so that I may look up the necessary particulars.

With reference to your certificate, I may say that this is intended for your own personal reference.

Yours truly,

Licut.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 70⁰⁰/₁₀₀

July 11 1919

Received from the First Newfoundland Regiment

the sum of Seventy Dollars.

on account of Pay. W. S. G.
~~balance~~

Lauren Chafe

Ch. No. 2750	Initials. E. G.
Pay Ledger. 440	Initials. W. S. G.
Gen. Ledger.....	Initials.....

Regtl. No. R n

F. C. S.

No. 5370

Rank *A*

Name *L Chap*

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 70⁰⁰

Sept 25th 1919

Received from the First Newfoundland Regiment
the sum of Seventy Dollars.
on account of Pay. W.S.G.
balance

Lawrence Chape

Ch. No. 11543	Initials. C.W.
Pay Ledger 448/3	Initials. C.W.
Gen. Ledger	Initials.

Regtl. No. *[Signature]* Rank

Noted

No. 5370

Rank

Dr

Name

L. Chafe

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

5370

Forms
B 121.
39.

Regiment of

Royal Newfoundland Regiment

Number of Sheet

one

Signature of O. C. Company

Edwards Kent

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>5370</i>	<i>Chief Lawrence</i>		<i>Printer</i>	
Joined	Date	Age on	<i>20</i> years <i>0</i> months	Religion	
Joined	Date	Place and Date of Enlistment	<i>St. John's</i>	<i>Methodist</i>	
Joined	Date	Period of	<i>28 5 18</i>	Place of Birth	
Joined	Date		with Colours <i>139</i> years.		
Joined	Date	with Reserve <i>365</i> years.	<i>Delly Hauler</i>		

Place	Date of Offence	Rank	Charge of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<i>Demobilized</i>	<i>St John's</i>	<i>30 19</i>			
<i>[Large handwritten mark]</i>									

To be carried over.

Army Form B. 121.

The Royal Newfoundland Regiment

5370

DEMOBILIZATION OF

Reg. No. 5370 Rank Plt Name Blair J
 Date of Enlistment 23-5-18 Address Pethybridge District St. John's
 Occupation Furniture Classification for Discharge 4 Medical Category F.I.
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. 136	B 268	B 121	N.F. Med	D.F. 1	1
B 178	W 349A	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 14-6-19 M.O. C. Discharge Depot H. H. H. H.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am L. LaHape 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 \$600.00
- (b) Clothing Supplied AMC

Date 16-6-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. R. 1815 to his home at 1111 1/2 St. N. W. and Release Certificate No. 1819 issued.

Date 16-6-19

J. A. Smoloff
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 31-5-19

Date 11-1-19

J. A. Smoloff
Depot Paymaster.

Discharge approved for 16-6-19

Forwarded with following documents to O. C. Discharge Depot.

N.F. P136	B 268	B 121	N.F. Med	D.F. 1	1 2 Form B
B 178	W 3494	B 122	Board Ist.	" 2	
B 178a	D 400A	B 1915	do 2nd.	" 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	
B179c	B 120	M 93.			

Date 16-6-19

J. A. Smoloff
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Records,
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUN 16 1919

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

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

Date June 14/19

J. A. Smoloff
Depot Paymaster.

Reg. No. *1370* Rank *PL* Name *Chapman, L*

Attested Address *1111 1/2*

Allotment Allottee

Date of Allotment Returned from Overseas *16-19*

Returned on S.S. *Cossican* Cause *Discharge*

14.6.19
16.6.19

PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILIZATION