



# FIRST NEWFOUNDLAND REGIMENT

4204

## ATTESTATION OF

No. 4204 Name Kenneth J. Chaulk Corps Truck

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

- |  |   |
|--|---|
| 1. What is your name? .....  | 1. <u>Kenneth J. Chaulk</u> .....                                 |
| 2. What is your full Address? .....  | 2. <u>Saddle Cove</u> .....                                       |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u> .....   |
| 4. What is your age? .....   | 4. <u>19</u> Years <u>-</u> Months .....                          |
| 5. What is your Trade or Calling? .....  | 5. <u>Seaman</u> .....  |
| 6. Are you Married? .....  | 6. <u>No</u> .....  |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? .....                             | 7. <u>N.D.</u> .....  |
| 8. Are you willing to be vaccinated or re-vaccinated? .....  | 8. <u>Yes</u> .....   |
| 9. Are you willing to be enlisted for General Service? .....   | 9. <u>Yes</u> .....   |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?....                                       | 10. { Name .....<br>Corps .....<br><i>THE DURATION OF THE WAR</i> |
| 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, Kenneth J. Chaulk.....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.

Kenneth J. Chaulk.....SIGNATURE OF RECRUIT.  
James S. Wadsworth.....Signature of Witness.

23/1/17

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

I, Kenneth J. Chaulk.....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 Grand Falls on this 30<sup>th</sup> day of Jan.....1917

Signature of Attesting Officer H. J. Fitz Gerald. S.M.

### †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.....  
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).....



C.R.4204

Extract from Daily Orders Part II Royal Newfoundland Regiment  
Depot St. John's dated 17-7-19.

The discharge of the undernoted on demobilization has been  
CONFIRMED by officer i/c Records from noted date  
12-7-19.

4204, rte. kenneth chaulk.

C.R. 4204

Extract from Daily Orders Part 11 Unit The Royal Nfld.  
Regt. St. John's, June 20th, 1919.

The discharge of the undernoted on demobilisation has  
been APPROVED by C.O. Discharge Depot with effect from  
1-7-19.

~~4902~~ Pte. K. Chaulk.

4204

C.R. 4204

Extract from Daily Orders Part 11 Depot. St. John's,

Date June 18th 1919.

4204 Pte. K. Chaulk.

Reported at Headquarters 1/6/19.

RE "Corsican"

which sailed Liverpool May 22/1919.

C.R. 4204

Extract from Nominal Roll from 1st. Battalion  
Royal Newfoundland Regiment dated 30-4-19.

The undermentioned of the 1st. Battalion left  
Rouen Camps 22/4/19, embarked at Havre 23/4/19,  
disembarked at Southampton 23/4/19 and reached  
Hazeley Down Camp 23/4/19.

#4204 Pte. K. Chalk.

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

C.R. 4204

L O N D O N I N F A N T R Y R E C O R D O F F I C E - L O N D O N . E . C .

NO. H.A. 32590

ADM: 12 CON: DEP: AUBENGNE 30TH NOV'18

51018 Pte Hills F.J. ....	8 Londons. ....	Ing hernia rt	Slt.
512956 " Hay W.R. ....	2/14 Londons. ....	ICT. knees & fgs.	Slt.
G/38879 " Gould E.T. ....	20 Londons. ....	Influenza.	"
472120 Sgt. Fickling P.A. ....	12 " ....	"	"
39823 Pte Hazelwood E.F. ....	21 Londons. ....	"	"
557112 Pte Ryan A. ....	9 Londons. ....	Influenza.	"
881084 L/C Grover H.J. ....	34 " ....	"	"

DIS: TO DTLS: CAMP TERLINTHUN EX 12 CON: DEP: 30 NOV:18

615967 Pte Trasler F. ....	19 Londons. ....	Influenza.	"
636395 Pte Previdi E. ....	20 " ....	"	"
R/23918 Pte Parker J. ....	18 K R R	GSW. Finger L.	"
39167 Pte Bootman D.P. ....	2/23 Londons. ....	Catarrh.	"
733558 Pte Carter F. ....	24th Londons. ....	Influenza.	"
17656 Cpl. Chapman H. ....	1/19 Londons. ....	GSW. thigh	Slt.
231150 Cpl. Wynne L.H. ....	2/2 Londons. ....	Gas YX wd.	"
44130 Pte Tancock W. ....	Londons 2/23	Boils.	"
10400 Pte Packman J. ....	9 R.B. ....	GSW. arm lt.	"
O/467 " Anderson E. ....	1 R.B. ....	Influenza.	"
495770 Pte Preslin W.J. ....	1/13 Londons. ....	ICT. foot & heel.	Slt.
488035 " Stonebridge G. ....	25 K R R	Influenza.	Slt.

DIS: TO TERLINTHUN DETAIL CAMP EX 12 CON: DEP: 29 NOV. 18

4143 Pte Castro J. ....	34 Londons. ....	Wd. Gas Pois OSG.	Slt.
472141 " Hammond H.G. ....	4 Londons. ....	GSW. Back	Slt.

DIS TO TERLINTHUN RESERVE CAMP EX 7 CON DEP 30 NOV:1918

530815 L/c Dalby E.J. ....	2/15 Londons	Wd Gas Must	Slt.
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ADM: 1 CON: DEP: BOULOGNE 2ND DECEMBER 1918

87045 Pte Cattlin F. ....	2 R. Pus: ....	Syn. foot R.	Slt.
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NEWFOUNDLAND FOUNDLAND EXPEDITIONARY FORCE

NO. H.A. 32590

DIS: TO DETLS CAMP TERLINTHUN EX 12 CON: DEP: 30TH NOV:18

4204 Pte Chaulk K. ....	2 R. Nflds	ICT. Foot L.
-------------------------	------------	--------------



X

C.R. 4204

Extract from Casualties ..... List No. H.A. 32518.

4204 Pte. K. Chaulk.

Adm. 12 Con. Dep. Aubengue 28 Nov'18. Lst Nfld. R.

LCT Foot L.



C.R. 4204

Extract from list of wounded and sick H.C.O.'s and men of the  
Expeditionary Force - France, submitted from Pay and Record  
Office dated Nov. 28th 1918. List No. H.L. 32077.

4204 Pte. Chalk, K.

10T L. Foot Sgt. .... <sup>53</sup> Adm. Gen. H. Bonjean 20 Nov. 18.

C.R. 4204

Extract of Nominal Roll to B. E. F. ~~embarked~~ embarked  
Folkestone 2-7-18

#4204 Pte. K.J.Chaulk.

C.R.4204

Extract from Telegram despatched to Synoptical, London,  
dated May 16, 1918.

Py to as follows:-

~~4204~~ #4204 Pte. Chaulk.

28.

C.R. ~~4304~~  
4204

May 16th, 1918.

Mrs. B. Tulk,  
Ladle Cove,  
FOGO.

Dear Madam:-

Notification has been received by mail,  
that your brother #4204 Pte. Kenneth J. Chaulk was admitted  
Hazeley Down Military Hospital, March 21st 1918, suffering  
from Measles.

Yours faithfully,



Major,

Chief Staff Officer.

C.R. 4204

Extract from Nominal Roll Draft "H" Company Embarked

S.S. Florizel, Jan. 29th, 1918.

4204 Pte. Chaulk J.

C.R.

4204

Extract from Daily Orders Part 11 Unit The Royal Wfld.  
Regt. St. John's, Dec.4th/17.

4204 Pte. K. Chaulk.

Attested for General Service with the 1st Wfld. Regt at  
Grand Falls, with effect from Nov.30th/17 reported to Hdq's  
Dec.5rd/17.

R. H. Chalk

C.R.

4204

PRN

## Medical Report on an Invalid.

Station Hazelton Camp.Date 30 4 - 19.1. Unit Royal Newfoundland2. Regimental No. 42043. Rank Pte.4. Name Chaulk, K.5. Age last birthday 19.6. Enlisted { on 1. 12. 17  
at St John7. Former Trade } Fisherman  
or Occupation }

7A. If with previous service in Army, state—

- (a) Former Unit;
- (b) Regimental No.;
- (c) Date of Discharge;
- (d) Cause of Discharge.

### 8. Disability in respect of which invaliding is Proposed.

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

*nil*

#### Statement of Case.

*Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.*

9. Date of origin of disability. *nil*10. Place of origin of disability. *nil*11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. *nil*12. Give your opinion as to the causation of the disability, stating whether in your opinion it is— *nil*

- (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.



13. What is his present condition?

*He is employed for his disability*

*Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.*

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

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

*~*

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

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

*~*

*~*

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

*~*

17. If not, was an operation advised and declined?

*~*

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly\* attributable to active service?

*~*

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

*~*

20. Do you recommend—  
(a) Discharge as permanently unfit, or  
(b) Change to England?

*Repatriciation*  
*W.C.S.*

*Major D.D.S.*

Officer in medical charge of case.

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

Station *H O Camp*

Date *30 H 19*

Officer in charge of 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.





TO,-- The Chief Paymaster,  
Royal Newfoundland Regiment,  
58 Victoria Street,  
London, S.W.

Sir:-

Please charge the amounts set opposite my name to my account and pay it to the N.W.C.A. "Prisoners of War Fund" in quarterly instalments for the period of one year.  
Commencing on 1st July 1918.

Regtl. No.	Rank,	Name	Amount	Signature.
4204	P6-	Chauke J.R.	£2 50	

I have the honour to be, Sir,  
~~for the Committee,~~  
Your obedient servant.

Date

27-6-18

J. Chauke

038579

No. 7955/668

NEWFOUNDLAND CONTINGENT

N. F. P. /79.

From

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

To

Officer Commanding,  
**2/Bn Royal Nfld. Regt.**  
**Winchester.**

**Subject: 21st May 1918**

May 23rd 1918

**Subject: 4204, Pte. K.G. Chaulk**

With reference to the following telegram (4468) from the Hon. Minister of Militia, received

**pay to 4204 Chaulk £8:0:0**

Draft **£8:0:0** is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

*H.A. Minwell May*  
Chief Paymaster & O. i/c Records.

Receipt hereunder.

*Chaulk*  
LIEUT. COLONEL,  
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.  
Officer Comdg. 1st Newfoundland Regiment

received the sum of Eight  
Pounds on account of

cable remittance from Newfoundland.

K. Chaulk

No. 4204 Rank Private

No. 4204

Name

Chauch R. J.

Sqn., Batty.,  
or Company

Royal Newfoundland

Date of  
enlistment

30. 11. 17

G.C.  
RidgesService or  
ProficiencyDate of last entry in  
Company Conduct SheetNo. and date  
of last drinkPeriod not returning towards  
freedom from extra fine

Squad No.

Signature of  
Company, etc.

W. H. H. H.

Sgt. Good.

Army Form B. 127.

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
Field	1st/7/18	Pvt.		Out of parade	Sgt. H. H. H.	4 days C.C.	16/7/18	Capt. H. H. H.	C.P.

P. 70

Chauk: K

4204

May Sept.





# The Royal Newfoundland Regiment

Class for Demobilization:

*E.*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

*16.6.19*

Regimental No *21204*

Name

*Charles H.*

Rank

Address

*Ladle Cove. Logo*

Present Medical Category

*A1*

Recommended for:—

(a) Immediate discharge

(b) Standard Medical Board

Members of Board

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

*Robinson*  
Senior Medical Officer

*Geo Sinden*  
M. O. Depot

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 4204 Rank Plt Name Chauk K  
 Date of Enlistment 30-11-17 Address Laddebury District Dogo  
 Occupation Lumberman Classification for Discharge F1 Medical Category SH  
 Recommendation S. M. B. \_\_\_\_\_ Disability Rating \_\_\_\_\_

Passed to Demobilization Officer with following documents:—

N. F. 1/36	B 268	B 121	/	N. F. Med	D. F. 1	/
B 178	W 3404	B 122	/	Board 1st	" 2	/
B 178a	D 400A	B 1915	/	do 2nd	" 3	/
B 179	D 4003	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 16-6-19

K. Chauk  
O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am K. Chauk 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 \_\_\_\_\_

Date 17-6-19

O i/c. Re-clothing

**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrants No. R. 1860 to his home at Saddle bowe and Release Certificate No. 2893 issued.

Date 17-6-19

*J.A. Newbapt*  
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 15-7-19

Date 17-6-19

*H. M. Wright*  
Depot Paymaster.

Discharged approved for 1-7-19

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

N.F. 1736	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 93		

*20 Form B*

Date 17-6-19

*Chas. W. ...*  
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 JUL 1 1919

*R.H. ...*

O. C. Discharge Depot.

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

Date .....

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 4204 Rank..... Pvt Name..... B. Haulk R.  
 Intended place of residence..... Ladle Cove

2. Occupation..... Lumberman  
 Classification of soldier..... 2 Medical Category..... AI

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. 17. 1919

J. M. W. St.  
 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 17 1919

K. B. Haulk  
 Signature of soldier  
W. G. Newman  
 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 17 1919

K. B. Haulk  
 Signature of soldier  
James Newman  
 Signature of witness Sp.

## STATEMENT OF SERVICE

7. Enlisted for service... 30-11-17..... No. of days on Military  
 Discharged from service... 1-7-19..... Plus 14 days Service... ~~70~~ 7093

## APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S JUL 1 1919

Date .....

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 July 15/1919

M. Bowley Capt  
 Officer in Charge  
 The Royal Newfoundland Regiment

RF/B 2079/3025

May 9, 1919

The Bank of Montreal,  
C i t y.

Dear Sirs:

I beg to acknowledge receipt  
of your letter of May 1st. enclosing cheque for  
\$271.12, and as requested I have cabled 4204, Kenneth  
Chalk £8.0.0, 4010, J. Griffin £10.0.0, 6408 Ralph  
Brake £7.3.9 and 3258, Lawrence Paul £30.0.0.

Yours truly,

Lieut  
For Paymaster

July 15, 1919

#4204 Pte. Kenneth Chaulk,

Ladle Coy .

Fogo.

Dear Sir:-

Please find enclosed Discharge Certificate #025.

Yours truly

Captain  
Quaymaster & O.i/c Records

# 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.

*K. Schalk*

Signature of Man.

*J. D. Knowlton*

Signature of the Vocational Officer or his Representative.

Reg. No. 4704

Place **ST. JOHN'S.**

Date 17-6-19 191

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

# MEDICAL HISTORY

Surname Chauk OF Christian Name Remond J.

Table I.—GENERAL TABLE.

Birthplace:—Parish Loose Corn Forge Dist County Wyle

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>30th</u> day of <u>Nov</u> 191 <u>7</u>	at <u>Grand Falls</u>	on _____ day of _____ 191 <u>1</u>	at _____
Declared Age	<u>18</u> years _____ days		_____ years _____ days	
Trade or Occupation	<u>Labourer</u>			
Height	<u>5</u> feet <u>9</u> inches		_____ feet _____ inches	
Weight	<u>141</u> lbs.			
Chest Measurement	<u>38</u> inches			
	<u>4</u> inches			
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V= <u>6/6</u>		R.E.—V=	
	L.E.—V= <u>6/6</u>		L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to Cause rejection	(b)		(b)	
Approved by (Signature)	<u>L. M. Paterson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>Grand Falls</u>	at _____		
	on <u>30th</u> day of <u>Nov</u> 191 <u>7</u>	on _____ day of _____ 191 <u>1</u>		
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>1st Wyle Regt</u>	<u>4204</u>		
Transferred to				
Became non-effective by	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>		
(Signature)				
(Rank)				





at in case of Warrant Officers treated in quarters.

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

Signature of Medical Officer

*Discharged 4 July*

*H. P. Lawrence Capt. R.A.M.C.*



The Royal Wld. Regiment

DEMOBILIZATION

No. 4204 Bank

Name Chauk. L.

Warned for demobilization on

JUN 17 19



## 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 *Kenneth, John Chaulk*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4204*

Intended address *Ladle Cove, 7090*

Height on discharge *5* Feet *9*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *—*

Figure on discharge *medium*

Christian name of Father *—*

Christian name of Mother *—*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Ladle Cove, Dec 10<sup>th</sup>, 1899*

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) *K Chaulk*

*Pte*  
(Rank)

Station *S + Johns*

Date *16-6-19*

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

**Medical Report on an Invalid.**

Station Royal Navy Down  
 Date 30-4-19

- |  |                      |  |
|--|----------------------|--|
| 1. Unit  | <u>Royal Newfld.</u> | 7. Former Trade } <u>Fisherman.</u><br>or Occupation } |
| 2. Regimental No.                                      | <u>4204</u>          | 7A. If with previous service in Army, state—           |
| 3. Rank  | <u>Pte</u>           | (a) Former Unit;                                       |
| 4. Name  | <u>Chault H.</u>     | (b) Regimental No.;                                    |
| 5. Age last birthday                                   | <u>19.</u>           | (c) Date of Discharge;                                 |
| 6. Enlisted { on <u>1/12/17</u><br>at <u>St John's</u> |                      | (d) Cause of Discharge.                                |

**8. Disability in respect of which invaliding is Proposed.**

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

*nil*

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

- |   |            |
|---|------------|
| 9. Date of origin of disability.  | <i>nil</i> |
| 10. Place of origin of disability.  | <i>nil</i> |
| 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.   | <i>nil</i> |
| 12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—   | <i>nil</i> |
| (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.   |            |

13. What is his present condition? *he complains of no disability*

*Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.*

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

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

*na*

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

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

*na*

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

*na*

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?

*na*

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.

*na*

20. Do you recommend—

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

*Repatrication.*

*DADMS.*

*J. S. P. Knight Major*  
\_\_\_\_\_  
Officer in medical charge of case.

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

Station *Hayley Down.*

\_\_\_\_\_  
Officer in charge of Hospital.

Date *30 - 4 - 19.*

\*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.

**Casualty Form - Active Service.**

Regiment or Corps Royal Newfoundland  
 Rank Pte Surname Chauk Christian Name Kenneth J  
 Religion Methodist Age on Enlistment 18 years 1 months  
 Enlisted (a) 30. 11. 17 Terms of Service (a) Duration Service reckons from (a) 30. 11. 17  
 Date of promotion to present rank ..... Date of appointment to lance rank .....  
 Extended [ ] Re-engaged [ ] Qualification (b) .....  
 or Corps Trade and rate .....  
 Occupation Lumberman Signature of Officer [Signature]

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A. 36, or other official documents.
Date	From whom received				
			Embarked <u>2 JUL 1918</u>		
			Disembarked <u>5 JUL 1918</u>		
			Joined Battalion <u>Field</u>	<u>9-7-18</u>	<u>Brzd 13/7/18</u>
	<u>36 Col S</u>	<u>NO. 904 foot</u>	<u>Field</u>	<u>16/1/18</u>	<u>82 9514</u>
	<u>62</u>	<u>Do</u>	<u>Field</u>	<u>20/1/18</u>	<u>80 9850</u>
	<u>54</u>		<u>anyway</u>	<u>26/1/18</u>	<u>147 32077</u>
	<u>S. G. D.</u>	<u>Arrived</u>	<u>Haven</u>	<u>3/2/18</u>	<u>Roll</u>
	<u>10</u>	<u>Joined Batt</u>	<u>5</u>	<u>JAN 1919</u>	
		<u>Arrived in UK</u>		<u>7/4/19</u>	

*[Handwritten signature/initials]*

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

*Next of Kin: - Sister, Mrs. D. Tuck, Little Cove, Loggins Hill*



July 21, 1919

#4204 Pte. Kenneth Chaulk,  
Ladle Cove,  
Fogo Dist.

Dear Sir:-

Referring to your application ~~in~~ 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 20th. 1919.

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

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

- Christian name..... *Kenneth* ..... 2. Surname..... *Chauk* .....
3. Rank..... *Private* ..... 4. Regt. No..... *4204* .....
5. Address in full to which future payments of gratuity are to be forwarded..... *Radee Cove,* .....
- ..... *Dogs District* .....
6. Date of enlistment in the Regiment..... *Nov. 1917* .....
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
- ..... *none* .....
8. Relationship of such dependents..... *not applicable* .....
9. Address in full of such dependents..... *not applicable* .....
- .....
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier..... *not applicable*
11. Were you on active service only in Nfld. If so, give dates and particulars of such service..... *No. Twenty overseas* .....
- ..... *Jan. 1918* .....
- .....
12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *one year seven months* .....
- ..... *1  $\frac{3}{4}$*  .....

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.....

..... *no* .....

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?.....

..... *not applicable* .....

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

..... *June 17/19* .....

(b) Reason for discharge.....

..... *Demobilization* .....

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

..... *France 1918* .....

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* .....

..... *not applicable* .....

And I make this solemn declaration, conscientiously believing it to

Signature of Applicant: *W. L. Howell*  
 Place of Residence: *Leeds Cove*  
 Declared before me at: *St. Johns*  
 This *17<sup>th</sup>* day of *June* 19*19*....

Signature of Barrister of the *Chas. L. Hunt*  
 Supreme Court, Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of affidavits. *Barrister at law*

POST DISCHARGE PAY.				Net amount due
Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
Certified correct.				Paymaster

*PAID*  
*RECEIVED*

1911

Fold Here

---

**ON HIS MAJESTY'S SERVICE**

To the Officer in Charge of Records,

***Royal Nfld. Regt.***

***Dept. of Militia,***

***ST. JOHN'S, Nfld.***

---

Fold Here

SEP 14 1921

1921.

The accompanying **Victory Medal** and/or **British War Medal**  
is/are forwarded herewith to

Kenneth J. Chaulk

in respect of his service as No. 4204 Rank Pvto

Name K. J. Chaulk

Royal Nfld. Regt.

Nfld. ~~Force~~

Receipt of the same should be acknowledged hereon.

Received Victory Medal and British War Medal

Signature Kenneth J. Chaulk

Date Sep 29 19/21

Address Sadle. Core Hogs Post

[P.T.O.]

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39.

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

Number of Sheets One  
Signature of O. C. Company [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	Name	Age on	years - months	[Handwritten]	
Joined	Date	Place and Date of Enlistment } <u>Grand Falls 30-11-17</u>		Religion	
Joined	Date			Place of Birth.	
Joined	Date	Period of } with Colours <u>228</u> years. with Reserve <u>365</u> years.			
Joined	Date				

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<u>Hazley down Camp</u>	<u>7.6.18</u>	<u>Pvt.</u>		<u>1 Dirty on parade</u> <u>2 Failing to comply</u> <u>with an order.</u>	<u>Corp.</u> <u>Curran</u>	<u>3 days' C.B.</u>	<u>8.6.18</u>	<u>2/Lieut J.A. Edeue</u>	
				<u>Demobilized Pt. John's,</u>	<u>15</u>		<u>79</u>		

To be carried over

Δ 4204

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 4204 Rank Plt. Name Chaulk R.  
 Date of Enlistment 30-11-17 Address Ladle Bay District 709  
 Occupation Lumberman Classification for Discharge 1. Medical Category H.I.  
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P136	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
B 179c	B 120	M 93		

Date 16-6-19

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

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am R. Chaulk 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 £ 65.00

(b) Clothing Supplied

R. Chaulk  
R. H. H. H.

Date 17-6-19

O i/c. Re-clothing



**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrants No. R. 1800 to his home at Saddle Grove and Release Certificate No. 2893 issued.

Date .....

17-6-19

J.A. Newbatt  
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 .....

Date .....

17-6-19

J.A. Newbatt  
Depot Paymaster.

Discharge approved for .....

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

N.F. P36	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 93		

*Handwritten notes: "2 Form B" next to D.F. 3; "1-7-19" written above the table.*

Date .....

17-6-19

Alfred Winstanley  
O. C. Discharge Depot.

**APPROVED.**

Documents as above forwarded to:—

Officer in Charge Records.  
Board of Pension Commissioners.

with following additional documents

**Eligible for War Service Gratuity**

Date .....

JUL 1 1919

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

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

Date .....

June 30/19

Amelia H. [unclear]  
[unclear]

Reg. No. *4204* Rank *Pte* Name *Chault K.*

Attested ..... Address *Ladle Cove*

Allotment..... Allottee .....

Date of Allotment..... Returned from Overseas *29-5-19*

Returned on S.S. *Corsican* Cause *Discharge*

*16.6.19*

PASSED TO DEMobilIZATION OFFICE

*1.7.19*

DISCHARGE APPROVED ON DEMobilISATION