



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. S 174 Name Harry Churchill Meth

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---------------------------|
| 1. What is your name? | 1. <u>Harry Churchill</u> |
| 2. What is your full Address? | 2. <u>Wesleyville</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? ... Years | 4. <u>22</u> Years |
| 5. What is your Trade or Calling? | 5. <u>Fisherman</u> |
| 6. Are you Married? | 6. <u>no</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>no</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>yes</u> |
| 9. 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 |
| |) 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, Harry Churchill 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.

Harry Churchill SIGNATURE OF RECRUIT.
W. P. Pittman SIGNATURE OF WITNESS.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Harry Churchill 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 Johns on this 18 day of May 1916

Signature of Attesting Officer W. Dicks Rent

†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.....
 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

5174

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

Name Harry Churchill
 Apparent age 22 years 0 months. Height 5 feet 4 inches
 Chest Measurement { Girth when fully expanded 34 inches
 Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Jennie Churchill
Wesleyville Mo. | Relationship Mother

Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow.		(b) Place and date of marriage.	
(a)	(b)	(c)	(d)

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or L'epot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>18-5-18</u>									
Joined at <u>St. Albans</u> on <u>May 18-1918</u>									
<u>Discharged August 11 1919</u>									
<u>Special duty front line 9-9-18. Returned to Headquarters 19-9-18</u>									
<u>Embarked for transport to Halifax NS 22-9-18</u>									
<u>Lo superannuation for demobilization 24-6-1919</u>									
<u>Arrived Lo superannuation 1-7-1919</u>									
<u>Demobilization St. Albans 14-8-1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 14-8-1919 (date of discharge) 1 years 79 days
 " " Pensions " " " " " " " " " " " "

C.R. 5174,

Extract from Daily Orders Part II Royal Newfoundland Regt.
Depot St. John's dated Aug. 8th 1919.

~~Extract from~~

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from noted date 4-8-19.

5174, Pte. Hy. Churchill.

C.R. 5174

Extract from Daily Orders Part II Unit The Royal Welch
Regt. St. John's, July 10th, 1919.

The discharge of the undernoted on demobilisation has been
APPROVED by C.O. Discharge Depot, with effect from 10-7-19.

5174 Pte. H. Churchill.

C.R. 5174

Extract from Daily Orders Battalion Unit The Royal Wfld.
Regt. St. John's, July 3rd, 1919.

5174 Pte; J.H.Churchill.

Reported at Headquarters 1-7-19 on "Cassandra" which
sailed Glasgow June 24th, 1919.

C.R. 5174

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.,
St. John's Sept. 24/18.

The Undernoted man returned from Special Duty at Mount Pearl
19-9-18.

5174 Pte. A. Churchill.

C.R. 5774

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.
St. John's, dated Sept. 9-18.

The undernoted man proceeded on Special Duty to Mount Pearl.
9-9-18.

5174 Pte. H. Churchill.

C.R. 3174

Extract from ~~UNCLASSIFIED~~ Nominal Roll Entrained At. St. John's
for Overseas Sept. 22, 1918.

5174 Pte. 5174 Pte. Churchill Harry.

Extract from Daily Orders part 11, from Unit The Royal
Wilt. Regt. St. John's, dated May 20th, 1918.

#5174 Pte. Harry Churchill.

Attested for General Service with the Royal Wilt. Regt.
from 19.5.18.

C.R. ~~5174~~

5174

Extract of Orders by MAJOR H.S. SULLIVAN,
COMMANDING ~~THE~~ NEWFOUNDLAND FORESTRY COMPANIES.
19/11/18.

The undermentioned having arrived from the 2nd Batta.
Royal Newfoundland Regiment is attached to the strength
from this date and posted to ~~THE~~ the following Company.

5174

~~#5114~~ Pte. H. Churchill.

"A" Company.



C.R. 5174

THE ROYAL NEWFOUNDLAND REGIMENT
HEADQUARTERS

St. John's, Newfoundland,

June 24th, 1918 *191*

To D.O.C., Newfoundland
Militia Department

#5174 Pte. Churchill

Reference enclosed telegram and your communication of the 20th inst., I have placed the matter before the S.M.O. and he is unable to give any opinion until either a report can be obtained from Dr. Bowden, or the man reports in person.

R. H. Lant Capt.

Captain
Acting O.C. Depot.

Enclosure.



C.R. 5174

THE ROYAL NEWFOUNDLAND REGIMENT
HEADQUARTERS

St. John's, Newfoundland,

..... July 25th, 1918 191.....

To D.O.C. Newfoundland,
Militia Department

5174 Pte. H. Churchill

I have investigated into the matter concerning the above named soldier and he states that he was cleaving 'splits' at his home in Wesleyville and was watching a schooner sailing out of the harbour at the time, when he chopped the top off the index finger of his right hand.

I am of the opinion that it was a pure accident.

R. H. Hail

Captain
Acting O.C. Depot

Encl.

GEO. F. BOWDEN, M.D.,



Wesleyville, Newfoundland,

July 16th 1918

Major Montgomerie
District O.C.
St John's.

Dear sir,

Yours of the 6th received by
today's mail. I hasten to reply
as to particulars re #5174 Phe
Churchill.

On the morning of June 20th
Churchill reported to me that
he had chopped off the first joint
of the index finger of right hand
while making bandoliers for his mother.
I dressed the finger and continued to
do so until now he is ready for duty.

O. G. DEPOT,

FOR YOUR INFORMATION AND ATTENTION

Yours very truly,
Montgomerie Geo. F. Bowden
Major.

District Officer Commanding,
Newfoundland.

H Churchill

C.R. 5174

11/10

9

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.
In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. *Royal Artillery* 7. Former Trade or Occupation } *Fisher*
2. Regtl. No. *5174* 3. Rank. *Plt. Lt.* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Churchill* *Ranny* (a) Former Regts. or Corps ;
(Surname) *93* (Christian Name) with Regtl. Nos.
5. Age last birthday.....
6. Posted for duty on..... at.....
in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty ? (b) Date of Discharge ;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When (d) Particulars of Pension or Gratuity
(b) Where (if any)
(c) Opinion of Court.

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
11. Date of origin of disability. *nil*
12. Place of origin of disability. *nil*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | — | |
| (ii.) Previous active service.. .. . | — | |
| (iii.) Climate in pre-war service | — | |
| (iv.) Ordinary military service before the war | — | |
| (v.) Serious negligence or misconduct on the man's part. } | | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?

(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

No Complaint of no disability

16. Was an operation performed? If so, when and what was its nature?
17. If not, was an operation advised and declined?
18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

20. Do you recommend—

- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?

Note—(b) is only applicable to soldiers invaded at Foreign Stations.

Repatriation

W. J. Proctor *Capt*
Rams

Medical Officer in charge of case.

Station *Hazelton*

Date *9/14/19*

* 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

No. 2550/342.

b 067431

N.F.P./79.

27 FEB 1919

FROM: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
2nd Bn Ryl Nfld Regt.
Winchester.

14th February 1919

Feb 22nd 1919

~~5174. Pte Churchill. H,~~

With reference to the following telegram from the Minister of Militia / / (21)

Receipt hereunder.

J. J. Barton

LIEUT. COLONEL.

COMMANDING OFFICER, ROYAL NEWFOUNDLAND REGT.

"Pay to- 5174. Churchill.

£6.0.0.

Received the sum of *Six pounds*

£6-0-0 in respect of

Cheque £ 6.0.0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

telegraphic remittance from the Minister of militia.

A. A. Munroe Maj.

Chief Paymaster & O. i/c Records.

H Churchill

No. *5174* Rank *Pte*

Witness *Pte Munroe*
Serjt

Churchill, 1/2

5174

Hay Sept.

August 11th 1919.

Mr. Harry Churchill,
Wesleyville. B. B.

Dear Sir:

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

Yours truly,

Capt. &
Paymaster.

RS/.

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 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, *Harvey* 2. Surname, *Churchill*

3. Rank, *Pte* 4. Regtl. No. *5174*

5. Address in full to which future payments of gratuity are to be forwarded, *Wesleyville B.B.*

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

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge, *No*

8. Relationship of such dependents, *No*

9. Address in full of such dependents, *No*

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 Hfld. If so, give dates and particulars of such service, *Overseas*

12. Give total length of time which you served on active service whether in Hfld. or Overseas, *Fourteen months* 1. $\frac{1}{2}$

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?

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

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.

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

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

19. Are you now serving in the Regt.? *No* If not give:- (a) Date of discharge. *Apr 21/19* (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.

England

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.

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 *his Harry Churchill* (Witness) *D*

Place of Residence: *Wesleyville Bonaville Boro, St. Johns Aged*

Declared before me at:

This *7* day of *July* 19*17*...

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

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

Signature of Applicant:

Place of Residence:

Declared before me at:

This day of 19.....

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

August 4th 1919.

#5174, Pte. Harry Churchill.
Wesleyville. B.B.

Dear Sir:

Enclosed please find Discharge Certificate
3344.

Yours truly,

Capt. * Laymaster.

RS/.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5174 Rank Pfc Name Churchill Harry
 Intended place of residence Wesleyville
 2. Occupation Ironman
 Classification of soldier E Medical Category A 1

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 JUL 7 1919

[Signature]
 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 JUL 7 1919

[Signature]
 Signature of soldier
[Signature]
 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 JUL 7 1919

[Signature]
 Signature of soldier
[Signature]
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 18-5-18 No. of days on Military
 Discharged from service 21-7-19 Plus 14 days Service 444

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge of Records, The Royal Newfoundland Regiment, ¹⁴ twenty-eight days from date.

Place, ST. JOHN'S

Date JUL 21 1919

[Signature]
 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 August 4/1919

[Signature]
 Officer in Charge of Records
 The Royal Newfoundland Regiment

14
30
31
4
9

[Handwritten] 2230 791 3544

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 *4.7.19*

Regimental No. *5174*

Name *Churchill - A.*

Address *Wesleyville*

Present Medical Category..... *A1*

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

Members of Board {

Ret Lt Col Major
.....
O.C. Discharge Depot.

Watson
.....
Senior Medical Officer

Jew Berden
.....
M.O. Depot

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 5174 Rank Cpl Name Churchill Harry
 Date of Enlistment 18.5.18 Address Westbyrville District St. John's
 Occupation Tradesman Classification for Discharge 17 Medical Category A.1
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

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

Date 7.19.

O. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

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

Harry Churchill
Tradesman
Wm Newman

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

Date 7.7.19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. **B2206** to his home
 at **Wesleyville** and Release Certificate No. **3214** issued.

Date **7-7-19**

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 **4-8-19**

Date **7-7-19**

J. M. [unclear]
 Depot Paymaster.

Discharge approved for **21-7-19**

Forwarded with following documents to O.C Discharge Depot.

N.F. P136	B 268	B 121	N.F. Med.	D.F. 1
E 178	W 3494	B 122	Board 1st	" 2
R 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		

2 Form B

Date **7-7-19**

J.A. Knowlton
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

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

with following additional documents.

Eligible for War Service Gratuity

Date **JUL 21 1919**

J.R. Coode Capt
 O. C. Discharge Depot.

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

Date

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.

Churchill H+

Signature of Man.

Reg. No. 5174

J. H. Snow

Signature of the Vocational Officer or his Representative.

Place

N. Johns

Date

7-7-18.

191

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

MEDICAL HISTORY

Surname Churchill OF Christian Name Harry

Table I.—GENERAL TABLE.

Birthplace:—Parish Wesleyville A.B. County Nfld

	SPECIAL RESERVE		REGULAR ARMY	
	on	at	on	at
Examined	18	at <u>St Johns</u>	day of	191
Declared Age	24	years	years	days
Trade or Occupation	<u>Fisherman</u>			
Height	5	feet 4	feet	inches
Weight		115		lbs.
Chest Measurement	Girth when fully expanded	34		inches
	Range of Expansion	4		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm	<u>1 Scar</u>		
When Vaccinated	<u>5 yrs ago</u>			
Vision	R.E.—V=	<u>6/12</u>	R.E.—V=	
	L.E.—V=	<u>6/12</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>Lambertson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St Johns</u>	at		
	on 18	on	day of	191
	Corps	Regtl. No.	Corps	Regtl. No.
Joined on Enlistment	<u>The Royal Nfld Regt</u>			
Transferred to	<u>Nfld Regt</u>			
Became non-effective by	on	on	day of	191
(Signature)				
(Rank)				



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 *Churchill Haruf*

Regiment from which discharged *Royal Newfoundland*

Regimental number *1174*

Intended address *Mesleyville B. B.*

Height on discharge *5* Feet *5"*

Color of hair on discharge *Dark Brown*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks _____

Figure on discharge *Medium*

Christian name of Father _____

Christian name of Mother *Jennie*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *Mesleyville B. B. N.S. 1897*

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)

Churchill & Haruf
marks
Business Dept. of the Army
St. John's (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.

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

Station

Date

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.

In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. *Royal New Forest Co.* } Former Trade or Occupation } *Platoon*
2. Regtl. No. *1.7.4* 3. Rank. *Plt.* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Churchill* } (Surname) } *Murray* } (Christian Name) } (a) Former Regts. or Corps ; with Regtl. Nos.
5. Age last birthday. *33*
6. Posted for duty on at in category (or grade)
8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty ? (b) Date of Discharge ;
 (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
 (a) When (d) Particulars of Pension or Gratuity (if any)
 (b) Where
 (c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 b (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability. *nil*
12. Place of origin of disability. *nil*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | — | — |
| (ii.) Previous active service | — | — |
| (iii.) Climate in pre-war service | — | — |
| (iv.) Ordinary military service before the war | — | — |
| (v.) Serious negligence or misconduct on the man's part. } | — | — |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it ? }

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition ?
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

The Complaints of the disability

16. Was an operation performed ? If so, when and what was its nature ?
17. If not, was an operation advised and declined ?
18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable ?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions ?

20. Do you recommend—
- (a) Discharge as permanently unfit ?
- (b) Change to United Kingdom ?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Repatriation

W.E. Procmier, Capt Rame
 Medical Officer in charge of case.

Station *Hazeley Down*...

Date *2/1/19*.....

* 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

SEPARATION ALLOWANCE.

Claimant Jane Churchill mother
On account of Harry Churchill No. 5114 Rank Pte.

Decision... Approved.

W. J. Keedee
W. J. Keedee Lieut. Col.
M. D. Dowley Major

Date... Nov 5/1920

Instructions... Pay 1 mo. W.S.G. to mother
Balance of W.S.G. to wife.

Allotment of 600 # per day payable to Mrs. Eli Churchill
his mother from 1/7/18 to 4/8/19
Discontinued on account of being discharged

R. G. Hummer

#262-67

ROYAL NEWFOUNDLAND REGIMENT
(Separation Allowance Branch)

NOTICE

MOTHER

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 Court, 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 Reg't or Unit Reg't No.

Harry Churchill Private Nfld

(2) Age of soldier *24* Married or single *Married*

(3) Name in full of mother Age Occupation Permanent Address

Jane Churchill 46 *Wesleyville*

(4) Give name of your husband Age Occupation Where employed

Dead

(5) If your husband is not supporting you give 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).

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

Eight years ago

(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

Eli Wesleyville 8
Lizzie " 10
Harry 16/8/19 " 24 Fisherman Married
Bertha " 20 Servant Single
Rice 8/6/17 " 27 Fisherman Married

(10) State amount earned by (a) Yourself (b) Your husband

Practically nil

(11) State amount and source of any other income

(12) Did this amount include payment of son's board, etc?

(13) State your son's trade or occupation prior to enlistment.

Fisherman

(14) State amount of his wages per week.

Shoreman fisherman

(15) State name and address of his last employer.

Geo. Dickel

(16) State amount of support monthly from son since enlistment.

\$15 per month

(17) State amount of "Assigned Pay" received by you from son monthly

\$15. all that I received

(18) From what date have you received "Assigned Pay"?

Since enlistment except two months when payments were absent

(19) Actual amount contributed by other children

Weekly

Monthly

Can't say actual amount but Piece helped support me and children during Harry's absence

(20) If not receiving support from other children, state cause. Answer fully.

Piece is married with a family

(21) Are any of these children in your employ?

No

(22) Have you made a previous claim for Separation Allowance? If so, why. Give particulars.

Never made application because I did not understand

(23) What is the value of your personal property?

Very little

(24) With whom do you reside at present?

with Harry

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

No

(26) Are you in receipt of assistance from any Patriotic Fund. If so, how much?

No

(27) Was the soldier at the time of enlistment an employee of the Newfoundland Government?

No

(28) In what capacity and in what place.

(29) Is he in receipt of a salary as such while serving in the 1st Nfld. Regt. If so, how much?

No

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 - James Churchill

Place of Residence - Wesleyville

Declared and subscribed before me at Wesleyville this 14 day of May 1920

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

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 investigation, the above statements are correct, and the soldier first mentioned above is the sole support of the applicant

Signature of Clergyman - Charles Howie

Signature of member of Patriotic Fund Committee - James Bishop

JMH/LM.

August 21, 1920

Mrs. Jane Churchill,
Wesleyville.

Dear Madam:

With reference to your claim for Separation Allowance, will you kindly furnish me with the Marriage Certificates of your sons Harry and Pierce, or else a Certified extract from Parish Register, showing exact date of their marriages.

Yours truly,

Major
Paymaster.

Wesleyville

Aug 30th. 1920

James Howley Esq.,

Militia Dept.

St. John's.

Dear Sir. I have pleasure in enclosing two
marriages certificates as per your request
Kindly return same at your convenience since
they are original.

Your's truly,

Mrs. Jane Churchill

JMH/LM.

November 12, 1920

Mrs. Jane Churchill,
Wesleyville.

Dear Madam:

With reference to your application for Retroactive Separation Allowance I beg to state that same has been approved, and enclose herewith cheque for \$262.67 representing amount due you to date of your son's discharge also cheque for \$30.00 being amount due you on account of War Service Gratuity.

I also enclose herewith Marriage Certificate of your son Percy Churchill.

Yours truly,

Major

Paymaster.

Enc. 3

JMH/LM.

November 12, 1920

Mrs. Harry Churchill,
Wesleyville,
BB.

Dear Madam:

I enclose cheque for
\$90.00 being Separation Allowance due you in connection
with your husband's Gratuity.

Yours truly,

Major
Paymaster.

P.S. I also enclose your Marriage Certificate.

Enc's. 2

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Number of Sheet 1

Forms
B 121.
29.

Regiment of Royal Newfoundland and Signature of O. C. Company Ch. Dick Lieut

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>5174 Churchill, Harry</u>	Age on	22 years	months	
Joined		Date of Enlistment		Trade	
Joined		Date		Religion	
Joined		Date		Place of Birth	
Joined		Date		Period of	
		} with Colours		179 years.	Wesleyville N.S.
		} with Reserve		136 years.	

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>19.3.19</u>	<u>Pte</u>		<u>Absent from 3 P.m. Parade</u>	<u>b. S. M. Galgay</u>	<u>2 days C.B.</u>	<u>20.3.19</u>	<u>Lieut L. Messurier</u>	<u>J.M.B.</u>
				<u>Demobilized St John's</u>	<u>4</u>	<u>19</u>			

To be carried over

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5174 Rank Plt. Name Churchill, Harry
 Date of Enlistment 18.5.18 Address Wesleyville District Deerhouse
 Occupation Postman Classification for Discharge F Medical Category A1
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
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 4-7-19 O. C. Discharge Depot. H. M. H.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.
 I am in a position to resume civilian occupation Harry Churchill
Postman
Newman

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 7-7-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *B2206* to his home at *Hesleyville* and Release Certificate No. *3214* issued.

Date *7-7-19*

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 *4-8-19*

Date *7-7-19*

J.A. Knowlton
Depot Paymaster.

Discharge approved for *21-7-19*

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

N.F. P136	B 268	B 121	N.F. Med.	D.F. 1
F 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		

2 Form B

Date *7-7-19*

J.A. Knowlton
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date *JUL 21 1919*

D.R. Cooper Capt
for O. C. Discharge Depot.

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

Date *July 21 1919*

[Signature]

Reg. No. 5174 Rank 76 Name Churchill H.
Attested Address Wesleyville
Allotment Allottee
Date of Allotment Returned from Overseas JUL 1 1919
Returned on S S Cassandra Cause Discharge

4.7.19
21.7.19

PASSED TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED ON DEMOBILIZATION