



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF



No. 2505 Name Samuel Collins Corps

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Samuel Collins
2. What is your full Address? 2. Mill Brook
Gambra
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 18 Years 2 Months
5. What is your Trade or Calling? 5. Lumberman
6. Are you Married? 6. no
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7. no
8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
9. Are you willing to be enlisted for General Service? 9. Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? 10. { Name
Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? } II. Yes

FOR THE DURATION OF THE WAR

I, Samuel Collins 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.

5. Apr 13/16 Samuel Collins SIGNATURE OF RECRUIT.
H. Dub. Lodge Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Samuel Collins 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 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 14 day of Apr 1916

Signature of Attesting Officer H. Dub. Lodge, 2nd 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 1st Bn.

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)

2505



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 2505 Name Samuel Collins Corps

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. Samuel Collins
- 2. What is your full Address? 2. Mill Brook
Jambo
- 3. Are you a British Subject? 3. Yes
- 4. What is your age? 4. 18 years 2 Months
- 5. What is your Trade or Calling? 5. Lumberman
- 6. Are you Married? 6. no
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. no
- 8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
- 9. Are you willing to be enlisted for General Service? 9. Yes
- 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... 10. { Name
Corps
- 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? 11. Yes

I, Samuel Collins 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.

5. Apr. 13/16 Samuel Collins SIGNATURE OF RECRUIT.
H. Outbridge Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Samuel Collins 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.....

on this 13 day of Apr 1916
Signature of Attesting Officer H. Outbridge 2nd 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..... } Approving Officer.
Place..... }

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

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

DESCRIPTIVE REPORT ON ENLISTMENT
Applicable to all ranks. To correspond with entries on the Medical History Sheet.

2505

Name John Collins
 Apparent age 18 years 2 months. Height 5 feet 7 1/2 inches
 Chest Measurement { Girth when fully expanded 37 inches.
 Range of expansion 2 1/2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Collins
James St. | Relationship father
 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)	(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>13-4-16</u>									
Joined at <u>St John's</u> on <u>April 13th 16</u>									
<u>Discharged Jan'y 31/19</u>									
<u>Embarked St John's St. Lucia for W.I. 9th Embarked for B.C. 11th</u>									
<u>Admitted 21st Oct. Disability 30th Admitted to Her Majesty's Service 4-12-16</u>									
<u>Went to duty 31st Regiment Bath's Service 27-7th Wounded 14-4-17 Admitted 96th H.A. 18th</u>									
<u>Ship's Warrant 14th Admitted 3rd Lt. N. Warrant 19th Surgeon then attached 11th Coy 28th 7th</u>									
<u>1st Lt. for demobilization 12th 18th Service left 21-12-18.</u>									
<u>Demobilization - St John's 31-1-19</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>31-1-19</u> [date of discharge]					<u>2</u> years	<u>294</u> days			
" " " Pension " " " " " " " " " " " "									



This Form is to be used in connection with Pamph. M. E. (1)
N. F. 1915

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of

Samuel Collins

aged 18

conducted at *C. B. B.*

Date: *April 13/16*

Recruiting Officer:

NO OF TEST

FINDING

- 1 *no*
- 2 *no*
- 3 *no*
- 4 *no*
- 5 *no*
- 6 *no*
- 7 *yes*
- 8 *yes*
- 9 *no*
- 10 *no*
- 11 *no*
- 12 *no*
- 13 *+* *Probs (demonstrated)*
- 14 *no*
- 15 *no*
- 16 *no*
- 17 *no*
- 18 *no*
- 19 *6/1* *Ref. 6/9/16*
- 20 *no*
- 21 *no*
- 22 *no*
- 23 *no*
- 24 *no*
- 25 *no*
- 26 *no*
- 27 *no*
- 28 *no*
- 29 *no*
- 30 *no*
- 31 *no*
- 32 *no*

yes

33 *no*

34 *5'7 1/2"*

35 *144*

36 *500* *30 1/2/37*

37 *300 per month*

38 *pancils - no John Collins - Lamb 13 B*

39 *pancils (pancils)*

Signature of Medical Examiner:

William F. Roberts

7/16

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

MEDICAL HISTORY

OF

Surname Collins

Christian Name Samuel

Table I.—GENERAL TABLE.

Birthplace:—Parish

County

	SPECIAL RESERVE.		REGULAR ARMY	
	Right	Left	Right	Left
Examined	on <u>13</u> day of <u>April</u> 191 <u>6</u>		on day of 191 <u>6</u>	
	at <u>St Johns</u>		at	
Declared Age	<u>18</u> years <u>2</u> mos — days		years days	
Trade or Occupation	<u>Timberman</u>			
Height	<u>5</u> feet <u>7 1/2</u> inches			
Weight	<u>144</u> lbs.			
Chest Measurement	Girth when fully expanded	<u>37</u> inches		
	Range of expansion	<u>2 1/2</u> inches		
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V= <u>6/6</u>		R.E.—V= <u> </u>	
	L.E.—V= <u>6/9</u>		L.E.—V= <u> </u>	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
	(b)		(b)	
Approved by (Signature)	<u>Samuel Paterson</u>			
	(Rank)	<u>Major</u>	Medical Officer.	Medical Officer.
Enlisted	at <u>St Johns</u>		at	
	on <u>13</u> day of <u>April</u> 191 <u>6</u>		on day of 191 <u>6</u>	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>1st Wes Reg</u>	<u>2505</u>		
Transferred to	<u>Newfoundland</u>			
Became non-effective by				
	on day of 191 <u>6</u>		on day of 191 <u>6</u>	
(Signature)				
(Rank)				



list in case of Warrant Officers treated in quarters.

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

Signature of Medical Officer

Wounded in France 14.4.17
Piece of metal removed from Penis.
Xray shows several metallic F.F.s.
Furlough

G. C. Hall
Capt. Inf.

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.: Examination for Field or Foreign Service, Extension, Re-engagement, or prolongation of Service; Issue of Surgical appliances; Particulars of Dental Treatment, &c.

Date	Brief Details, and Signature
4/7/16	1 st Inoculation <i>SP</i>
11/7/16	2 nd " " <i>SP</i>
16-8-16	Successful Vaccination <i>SP</i>
6-9-16	Dental treatment Completed <i>SP</i>
7-10-16	3 rd Inoculation. Para I. <i>SP</i>
6-10-16.	Fit. for foreign Service <i>SP</i>
2-578	TTS <i>DRK</i> of <i>C. R. Bone</i> .
15-8-16	<i>Barker</i> <i>Agley</i> <i>Dr Corp</i> <i>Dr (mc)</i> <i>Dr</i> <i>Kedia</i> <i>Dr</i>

12. 6. 17. } *T.A.B.*
 22. 6. 17. } *2*

Wenderson
 Capt. R.A.M.C.

NO. & RANK <i>2505</i> <i>SP</i>		DATE OF EXAM: <i>18. 1. 18</i>	
NAME <i>S. L. King</i>		DATE OF ISSUE: <i>22. 1. 18</i>	
CORPS <i>1st Newfoundland Coy</i>		VISION WITHOUT GLS	
R	SPH	CYL	AXIS VISION STANDARD WITH ROTATION GLS
L			OPHTH. CENTRE: <i>Wenderson</i>
			FRAME NO: <i>RR</i>
SIGNATURE OF M.O. <i>Wenderson</i>		CAPT. R.A.M.C. OPTICIAN'S INITIALS <i>RR</i>	

5 DEC 1918 HAZELEY DOWN CAMP.

Recommended
Repatriation

Wenderson
 ROYAL NEWFOUNDLAND REG.

TABLE IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
<p>It is hereby certified that this soldier has been before the Standing Medical Board and has been classified as <i>B</i> for discharge on Demobilisation. Medical category <i>B</i> <i>10. 1. 19</i> Date of S.M.B. <i>Joseph H. Snow</i> Assistant Adjutant Captain Discharge Depot Newfoundland</p>					

To Ophthalmic Department
Military Hospital
Winchester

From M.O.

Royal Newfoundland
Hazelley Down Camp.

As our men are

To Ophthalmic Department
 Military Hospital
 Winchester

NO. & RANK 2505 R Lt
 NAME Collins S.
 CORPS 1st Newfoundland Regt

DATE OF EXAM:
 18. 1. 18

DATE OF ISSUE:
 22. 1. 18

VISION W'OUT GLS	SPH	CYL	AXIS STANDARD NOTATION	VISION WITH GLS
R 4/18		+1.00	Vert	4/6
L 4/24		+1.00	Vert	4/6

OPHTH. CENTRE:
 Winchester

FRAME NO:
 (OR MEASUREMENTS)

RR

SIGNATURE
 OF M.O.

J. J. J. CAPT.
 R.A.M.C.

OPTICIAN'S
 INITIALS

RB

C.R. 2505

Extract from Daily Orders Part II Royal Newfoundland
Regiment dated October 20th 1919. Depot St. John's.

The discharge of the undernoted on demobilization has
been CONFIRMED by Officer i/s Records forwarded date
31-1-19.

2505, ~~Sgt.~~ S. Collins.

C.R. 2575

April 8, 19.

Dear Sir:-

Yours of the 5th instant to hand. I regret
to inform you that ^{Wapi}~~Wapi~~ cloth of which you wrote has
been disposed of. If you had written before, we should
have been glad to accomodate you.

Yours very faithfully,

Major.

Acting District Officer Commanding.

Newfoundland.

Ex-Pte. Samuel Collins,

Middle Brook,

Gambo.

Son.

Sept Middle Brook
Gambo.
J. K. Bennett. Minister of Militia. April 5th /19
St John's Nfld

Dear Sir:-

I saw advertised in different papers.
that there was a stock of khaki cloth for
sale at St John's.

Please inform me, if I could
obtain 30 yards. Please send and let me
know the price of it. By return mail.
You will oblige me by so doing.

I remain yours
Faithful Servant

Ex Private Samuel Collins,
Middle Brook
Gambo.

C.R. 2505

Extract from Nominal Roll of 121st. Regt. Embarked Southampton,
11-10-18 (Draft No. 18) From 2nd Bn. Depot, to 1st Bn. B.E.F.

2505 Pte. S. Collins.

C.R. 2505

Extract from Daily Orders part 11, Depot ST. J. Dated Jan. 17th.
1919.

The discharged of the undernoted on demobilization have been
approved by O. C. Discharge depot from noted date.
17-1-19.

#2505 Pte. S. Collins.

C.R. 2505-

Extract from Medical Board held on Friday Jan. 10th, 1919.

2505 Pte. S. Collins.

Recommended discharge as permanently Unfit.

C.R. 2575

Extract from Daily Orders part II depot St. John's dated Dec. 23/1919.

The undermentioned returned from overseas and reported to depot
21-12-18.

2505 Pte. S. Collins.

C.R. 2505

Extract from Memorial Roll of repatriation draft No. 79 from the 2nd.,
Battalion of the Royal Newfoundland Regiment, por S. S. COLLINS
which embarked at Filbury Docks 12/12/18.

#2505 Pte. S. Collins.

C.R. 2505

Extract of Casualties received from Pay & Record Office,
London, dated May 16, 1917.

2505 Pte. S. Collins. 1. Duty.

has been discharged from the 3rd London
General Hospital, Wandsworth, S.W.18, and has been granted
furlough from May 15, till May 24/17.

(sd) H. Pagan, Capt. Registrar,
3rd London General Hospital,
Wandsworth, S.W.18.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender Lucy M. Collins Address _____

Line Number _____	Rcd _____	by <u>Geo. Dept. Sec.</u>	Sent _____	by _____	Check _____
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Dated April 21, 1917.

To Mr. John Collins,

Gambo.

Regret to inform you that Record Office, London, officially reports No. 2505, Private Samuel Collins, has been admitted to Wandsworth suffering from gunshot wounds in the left thigh and left arm.

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

J. R. BENNETT,

Colonial Secretary.

FOR TYPEWRITER

C.R.

2505

Extract of Casualties received from Pay & Record
Office, London, dated December 11, 1916.

#2505 Pte. S. Collins.

slight

Bronchitis. / Admitted to General Hospital, Rouen,
December 4, 1916.

C.R. 2505

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

2505 Pte. Collins S.

C.R. 2505

Saml. Collins was attested for General
Service with the NEWFOUNDLAND REGIMENT ON April 13th 1916
Regimental No. 2505 was allotted to Pt. & S. Collins

AUTHORITY:

Record Ledger,

Dept. of Militia.

March 25th 1919

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.

ROYAL NEWFOUNDLAND REG.

1. Unit and Corps.....
2. Regtl. No. *2505* 3. Rank. *Pte*
4. Name *COLLINS* *S*
(Surname) (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....
 in category (or grade).....
7. Former Trade }
 or Occupation }
- 7a. If the soldier claims previous service in Army, he should state—
 (a) Former Regts. or Corps ;
 with Regtl. Nos.
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 is to be stated here.
 (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

Otitis media

11. Date of origin of disability.
12. Place of origin of disability.
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.

*wounded Mouchy groin
 & penis slight.
 He still feels pain in
 groin on route marches
 Came back to Depot in
 Boarded August 1918
 Otitis media*

*June 1917 A. Category
 marked S1. from*

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 ?

*Perforation of drum of ear
Therefore unfit France
Defective vision flighty*

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.)

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.

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
M. J. Casano*

HAZELEY DOWN CAMP.

ROYAL NEWFOUNDLAND REG

Medical Officer in charge of case.

Station

Date 30 NOV 1918

* 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

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 28/5/17

Regtl No. 2506. Rank Pte. Name Bollins. Unit ROYAL NEWFOUNDLAND REGT. who was repatriated to Newfoundland on 11/12/18 Authority _____ Cause _____

STATEMENT OF ACCOUNT

DR.	PARTICULARS	£	s	d	PARTICULARS	£	s	d	CR.
	Balance Dr. from				Balance Cr. from				
	Allotment 19 days @ 60 ^c .	111	40	12	Pay 19 days @ \$1 ⁰⁰				119
	Cash Payments:				Field Allow 19 days @ \$1 ¹⁰ / ₁₀₀				119
	1 st Pay.			12	Other Allowes days @ \$				120
	2 nd "			14					90
	Other Debits:				Other Credits:				
	B Damage			6	Copy sent to Mr. 21303/210				
	Mess. Stopp.			15	P.A. 24/12.18.				
	Total Debits			14	Total Credits				14
	Balance due by Paymaster			5	Balance due to Paymaster				5
				11					11
				14					14
				5					5
				11					11

PERIOD: From 23/11/18 To 24/12/18.

CHLCKED

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

g.c.
 HAZELEY DOWN CAMP. Dec 11th 1918.

[Signature]
 O.C. "7th" Company.

Made up/Checked g.c. accordance with information received in the Pay & Record Office _____ to _____ and is therefore subject to amendment if and as may be found necessary.
 Pay & Record Office, London,

NEWFOUNDLAND CONTINGENT

No. _____

To Paymaster & Officer i/c records,
 Newfoundland Contingent,
 58, Victoria Street,
 London, S.W.

3066

Please remit per Postal Money Order to:

196 Samuel Collins

the sum of 1 pounds 10 shillings, on
 account of any balance that may be due to me.

Regtl. No. 2505 Rank 196Name S Collins

Approved W. J. C. [Signature]
 Officer i/c

5102914 Hospital.Dated at May 27th 1917

NEWFOUNDLAND CONTINGENT

N.F.P/55.

Temporary A/c.

Regtl No 2505 rank Pte

name Collins S

Pay	F. Allow	Working	Total
1	10		110
Less Allotment			60
Net Rate			50

Date	DEBITS	£	s	d	CREDITS	£	s	d
1917	Balance				Balance			
	P.M. ADVANCES:							
	A.B. 64.							
	Acquittance rolls	6	2	7	22/12/17	6	12	5
	Hospital Advances	1	7	0	Pay & Net Rate:			
	STOPPAGES:				15/5/17 to 15/5/17 = 144 days			
	Hospital dys =				250 = \$ 72.00			
	Forfeited Pay / dys	4	2		15/5/17 to 24/5/17 = 10 days			
	Miscellaneous				2/0 = \$ R. allow			
	Cables				7/1 to 1/1 = days			
	P.&R.O. PAYMENTS:	7	10	8				
	Sundry Bills							
	Cash	9	3	4				
	<i>Cash</i>	9	3	4				

No. 12757/1286

N.F.P./79.

NEW FOUNDLAND CONTINGENT

From:

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

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

7th August 1918

Aug 16 1918

Subject: 2505, Pte. C. Collins, #

With reference to the following telegram (7081) from the Hon. Minister of Militia, received

Pay to 2505 Collins £5:0:0

Draft £ 5:0:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Receipt hereunder.
[Signature]
LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commdg. Batt'n
Royal Newfoundland Regiment

Received the sum of Five
Pounds on account of
cable remittance from Newfoundland.

[Signature: H. Marshall]
Chief Paymaster & O. i/c Records.

No. 2505 Rank Pte

Witness, *[Signature: J.R. Hopkins]*

Civil Re-establishment Committee



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

To work as Lumberman.

J Collins

Signature of Man.

Edwiks Capt.

Reg. No. 2505

Signature of the Vocational Officer or his Representative.

Place **ST. JOHN'S.**

Date

15/1/19

191



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 *Collins Samuel*

Regiment from which discharged *Royal Newfoundland*

Regimental number *2505*

Intended address *Stam Lu*

Height on discharge *5* Feet *9*

Color of hair on discharge *Black*

Complexion *Ruddy*

Color of eyes *Blue*

Descriptive Marks *Scar left wrist*

Figure on discharge *—*

Christian name of Father *John*

Christian name of Mother *Mary*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Stam Lu 4-2-1898*

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)

Station *Stam Lu*

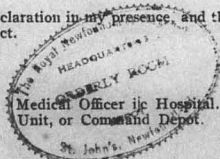
Date *6-1-19*

St
(Rank)

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



LAST PAY CERTIFICATE

N.F.P./94

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

Regtl No. 2505. Rank Pte. Name Gollins, J. Unit ROYAL NEWFOUNDLAND REGT. who was repatriated to Newfoundland on 11/12/18. Authority _____ Cause _____

STATEMENT OF ACCOUNT

DR.	PARTICULARS	£					PARTICULARS	CR.					
		£	s	d	£	s		d	£	s	d		
	Balance Dr. from						Balance Cr. from						
	Allotment <u>19 days @ 60¢</u>	11	40	2	6	11	Pay <u>19 days @ \$1⁰⁰</u>	19	00				
	Cash Payments:						Field Allow <u>19 days @ \$1⁹⁰</u>	1	90				
	<u>1st Pay.</u>				12	6	Other Allowes <u>days @ \$</u>	20	90	4	5	11	
	<u>2" "</u>				1	4	7	Other Credits:					
	Other Debits:												
	<u>B. Danages</u>					6							
	<u>Miss. Shopp.</u>				1	5							
	Total Debits			4	5	11	Total Credits			4	5	11	
	Balance due by Paymaster						Balance due to Paymaster						

PERIOD: From 23/11/18 To 20/12/18

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

J. Co.

HAZELEY DOWN CAMP.

Dec 11th 1918.

(Place)

(Date)

O.C. " " Company.

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

Pay & Record Office, London,

Cassius D.

2505

Pay Dem.

January 31st., 1919

#2505 Pte. Samuel Collins,

Gambo.

Dear Sir:-

Please find enclosed "Discharge

Certificate No.785."

Yours faithfully

Captain,
Paymaster & Officer i/c Records

Enc'l 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 2505 Rank Private Name Collins Saul
 Intended place of residence Caubos
 2. Occupation Lumberman
 Classification of soldier B Medical Category E

3. The above named man is discharged in consequence of

ELIGIBLE for POST DISCHARGE PAY

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

Place JAN 15 1919 W. H. Lark
 Date 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 and date A. Johns S. Collins
15-1-19 Signature of soldier
 W. H. Lark
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place and Date 15-1-19 S. Collins
ST. JOHN'S Signature of soldier
 W. H. Lark
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 13-4-16 No of days on Military
 Discharged from service 17-1-19 plus 14 days Service 1024 days

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S R. H. Lark
JAN 17 1919 Officer Commanding Discharge Depot
 Date The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place A. Johns W. H. Lark
January 31 1919 Signature of witness
 Date The Royal Newfoundland Regiment

27 B 2029/198

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 2505 Rank Pvt Name Collins Samuel
 Date of Enlistment 13.11.16 Address Stambo District St. John's
 Occupation Labourer Classification for Discharge B Medical Category F
 Recommendation S.M.B. Regularly Disability Rating 2.90
 Passed to Demobilization Officer with following documents:—

N.F. P/36	1	B 268	B 121	1	N.F. Med.	D.F. 1		
B 178		W 3494	B 122	1	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 15.1.19

Joseph A. Shaw
 C. Discharge Depot

PARTICULARS FOR DEMobilIZATION

i. Civil Re-Establishment.

I am W in a position to resume civilian occupation.

S. Collins

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with—

(a) Clothing Allowance payable \$16.00

(b) Clothing Supplied Joseph A. Shaw

Date 15.1.19

Officer Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 499R to his home
 at Ambo and Release Certificate No. 795 issued.

Date 15-1-19 *Ch. Dicks Capt.*
 Demobilization Officer

4. Pay and Allowances.

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

Date 15-1-19 *Joseph A. ...*
 Depot Paymaster.

Discharge approved for 17 1 19

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med	D.F. 1	
E 178	W 3494	B 122	Board 1st	" 2	<i>for the B</i>
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 15 1 19 *Ch. Dicks Capt.*
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
 Board of Pension Commissioners.

with following additional documents.

ELIGIBLE for POST DISCHARGE PAY

Date JAN 17 1919 *R. H. ... Capt.*
 O. C. Discharge Depot.

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

Date

April 5th., 1919

#2505 Pte. Samuel Collins,

Middle Brook,
Gembo.

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 & U. I. C. Records

10584

DEPARTMENT OF MILITIA

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

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

Christian name... *Samuel* 2. Surname... *Caecus*

3. Rank... *Private* 4. Regtl. No... *2500*

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

6. Date of enlistment in the Regiment... *April 12 1916*

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

8. Relationship of such dependents... *Nil*

9. Address in full of such dependent... *Nil*

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

11. Were you on active service only in Nfld. If so, give dates, and particulars of such service...
to the front

12. Give total length of time which you served on active service, whether in Nfld, or Overseas... *2 yrs & 294 days*

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?.....

No.

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

July 1st 1919

No.

Medically unfit

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 Oct. 13. 17. Jan. 1917

France 3. July 1917

France 14 Oct. 1917

21. (a) Are you receiving treatment from the Civil Re-Establishment Com?.....

(b). If (b), are you in receipt of full payment 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: *Samuel Collins*
 Place of Residence: *Middle Brook (Gambo)*
 Declared before me at: *Gambo*
 This *3rd* day of *April* 19*1919*

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

Shearford
Commissioner

POST DISCHARGE PAY.					
Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due	
.....	5.00	350.00	
.....	
.....	
Certified Correct.					Paymaster.

OVERPAID ALLOTMENT

No. 2505 Rank Pfc Name Samuel Collins Overpaid allotment

of 60 Cents per day, from 1/2/19 to 30/4/19 Days.

\$53. $\frac{40}{100}$ ~~_____~~ to be deducted from WAR SERVICE GRATUITY.

OK/wr

ORIGINAL

LAST PAY CERTIFICATE

N.F.P./94

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 28/5/17.

Regtl No 2505 Rank Rtk. Name Gollins Unit ROYAL NEWFOUNDLAND REGT. who was repatriated to Newfoundland on 11/12/18 Authority _____ Cause _____

DR.

STATEMENT OF ACCOUNT

CR.

PARTICULARS		\$	£	s	d	PARTICULARS		\$	£	s	d	
From 23/11/18. To 24/12/18. PERIOD: 18/12/18	Balance Dr. from					Balance Cr. from						
	Allotment 19 days @ 60¢.	111	40	2	6	Pay 19 days @ \$1.00	119	00				
	Cash Payments:					Field Allow 19 days @ \$ ¹⁰ / ₁₀₀	119	00				
	1st pay			12	6	120	99	1	4	5	10	
	2nd "			1	4	7	Other Allow days @ \$					
	Other Debits:					Other Credits:						
	B. Damages.				6							
	Miss Stopp.			1	0							
	Total Debits			14	5	11	Total Credits			14	5	11
	Balance due by Paymaster						Balance due to Paymaster					
			14	5	11				14	5	11	

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

9 Co. HAZELEY DOWN CAMP 191

(Place) _____ (Date) _____

Made up/Checked in accordance with information received in the Pay & Record Office London to 19/12/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

Dec. 19th. 1918.

OK

Chief Paymaster & Officer 1/c Records.



DEPARTMENT OF MILITIA

ST. JOHN'S, NEWFOUNDLAND

2505

June 2nd. 1919

Mr. Thomas Granter,
Gamboge

Dear Sir:

With reference to your letter of May 28th. I beg to advise you that the allotment of Samuel Collins, referred to, was overpaid through an oversight in this office. I may say that it has now been stopped.

With reference to the latter part of your letter regarding assistance for your father, whom you state was dependent on you, I enclose form of claim for Separation Allowance which kindly have him complete before a Magistrate and returned to this office, so that his claim may be considered.

I am also enclosing herewith Medical Certificate, to be completed and signed by his attending physician, and also returned with same to this Department.

Yours truly,

A. H. Bennett

Lieut.
For PAYMASTER

Gambro
July 17/1919

Dear Sir

My father is at present away
to Labrador on his return he will
attend to form for Depreciation
allowance

Y^{rs} Truly
Thomas Gambro

2505

June 2nd. 1919

Mr. Thomas Granter,
Gantop.

Dear Sir:

With reference to your letter of May 28th. I beg to advise you that the allotment of Samuel Collins, referred to, was overpaid through an oversight in this office. I may say that it has now been stopped.

With reference to the latter part of your letter regarding assistance for your father, whom you state was a dependent on you, I enclose form of claim for Separation Allowance which kindly have him complete before a Magistrate and returned to this office, so that his claim may be considered.

I am also enclosing herewith Medical Certificate, to be completed and signed by his attending physician, and also returned with above to this Department.

Yours truly,

Lieut.
For PAYMASTER

St. John's,

Jan 6th / 19

Royal Newfoundland Regiment.

Billeting Account,

To W. S. Collins

Billeting Soldiers as undermentioned

from Dec 23rd / 18. to Jan 5th / 19

James S. Brown

2505 - W. S. Collins 14 40

ACCOUNT 13477

CH NO 7960 INITIALS E.W.

IND LEDGER _____ INITIALS _____

PAY LEDGER _____ INITIALS _____

GRN LEDGER _____ INITIALS _____

Certified correct for \$ 14. 40

Joseph H. Snow
A.S. for Billeting Officer.

W. S. Collins

Reg. No. *2105* Rank *Alie* Name *Collins S.*
Attested Address *Gambo*
Allotment..... Allottee
Date of Allotment..... Returned from Overseas *21-12-18*
Embarked for Overseas Cause *Discharge*

4 Leave from 21-12-18 to 6-1-19.
10-1-19. Rec. Dis. Permanently unfit.
15-1-19. FACED TO DEMOBILIZATION OFFICE
17-1-19. DISCHARGE APPROVED ON DEMOBILISATION.

C.R. 2505

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

I certify that I have received an issue of 2 inches
of Riband of British War Medal-1914-1919.

Date Nov. 17th 1919
Place Middle Brook

Name Samuel Collins

Gambo.

1901



Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S, Nfld.

Signature

Date

Address

1901

SEP 17 1921

1921.



The accompanying Victory Medal and/or British War Medal

is/are forwarded herewith to

Samuel Collins

in respect of his service as No. 2505 Rank Pte.

Name S. Collins Royal Nfld. Regt.
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received Victory Medal & British War Medal

Signature Samuel Collins

Date Sept- 28th 1921

Address Middle Brook Camp.

[P.T.O.]

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

The Royal Newfoundland Regt,

Dept of Militia

St. John's Nfld,

Fold Here



~~July 5th. 1921~~ 1919.

The accompanying King's Certificate, on his discharge,
(No. 897), is forwarded herewith to
Samuel Collins.

in respect of his service as No. 2505 Rank Pvte.

Name S. Collins, Corps Royal Nfld Regt

Receipt of the same should be acknowledged hereon.

Received

July 11th 1921

Signature

Samuel Collins

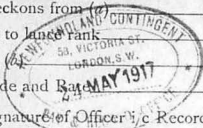
Date

July 15th 1921

Address

Middle Brook Lambton

Regiment or Corps 2/1 Newfoundland Regt. 1830
 Rank Plt Surname Collins Christian Name Samuel
 Religion C.P.E. Age on Enlistment 18 years 2 months.
 Enlisted (a) 13/4/16 Terms of Service (a) War Service reckons from (a) _____
 Date of promotion to present rank _____ Date of appointment to present rank _____
 Extended { } Re-engaged { } Qualification (b) _____ or Corps Trade and Rate _____
 Signature of Officer in Charge _____



Report	Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B. 213, Army Form A. 96, 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. 96, or other official documents
		Embarked South		
		Embarked ...		1 OCT 1916
		Disembarked		12 OCT 1916
		Disembarked ...		
		Re-joined Battalion	22 OCT 1916	
	14 Cpl. Admitted Exposure	France	2/12/16	CD 6956
	21 Cpl. Admitted Debility	France	30/1/16	CD 6599
	6 Gen. Staff Admitted Bronchitis	France	4/12/16	Sta. 4807
	29 S.D. Joined Base Dep.	France	1/1/17	Gen. Staff
	B.C. Unit Re-joined Battalion	France	27 JAN 1916	B 213
15.4.17	Go Wounded in Action	Go	14 APR 1917	B 213
20.4.17	96 (L.P.) F.A. Admitted to base 3rd High post. 8 Wrist	32 B.C.S.	14.4.17	C.D. 2918
	"St. Patrick" Invalided to England		18.4.17	W 3083

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered in the (P.T.O.)

The Royal Newfoundland Regiment

D 2105

DEMOBILIZATION OF

Reg. No. *2505* Rank *AKC* Name *Collins James*
 Date of Enlistment *13.4.16* Address *Stambo* District *Bonaville*
 Occupation *Labourer* Classification for Discharge *B* Medical Category *E*
 Recommendation S.M.B. *Penalty* Disability Rating *20%*

Passed to Demobilization Officer with following documents:—

N.F. P36	1	B 268		B 121	1	N.F. Med.		D.F. 1.	
B 178		W 3494		B 122		Board 1st.		" 2.	
B 178a	1	D 400A	1	B 1915		do 2nd.		" 3.	3
B 179		D 400B		Form L		do 3rd.		" 4.	
B 179a	1	D 400C		Form K		do 4th.		" 5.	
B 179b		B 103	1	ME 2				" 6.	
B 179c		B 120		M 93					

Date *15.1.19*

Joseph H. Snow
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

S Collins

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable *£ 5.00*
 (b) ~~Clothing Supplied~~

Joseph H. Snow

Date *15-1-19*

£ c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 499R to his home at Gambo and Release Certificate No. 795 issued.

Date 15-1-19

Dr. Dicks Capt.
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 31-1-19

Date 15-1-19

Joseph A. Brown Lieut.
Depot Paymaster

Discharge approved for 17-1-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P30	11	B 268	11	B 121	11	N.F. Med.	D.F. 1	
F 178		W 3494		B 122		Board 1st	" 2	Set on B
R 178a	1	D 400A	11	B 1915		do 2nd	" 3	2
B 179	1	D 400B		Form L		do 3rd	" 4	
B 179a	11	D 400C	11	Form K		do 4th	" 5	
B 179b		B 103	11	ME 2			" 6	
B 179c		B 120		M 93				

Date 15-1-19

Dr. Dicks Capt.
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-
Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

ELIGIBLE for POST DISCHARGE PAY

Date JAN 17 1919

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

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

Date Jan 20 1919

G. H. ...
O.C. Discharge Depot

DEPARTMENT OF VETERANS AFFAIRS

To Copy for HO fileOttawa 4, Ont.
Aug 20, 1968

Attention of

Date.....

NAME COLLINS Samuel S.

SERVICE NUMBER 2505 WW1

C.P.C. No. 260662
W.V.A. No. 216181NAVY
ARMY X
R.C.A.F.

The DEPARTMENT has received information from

FME CPC St John's Newfoundland Date July 3rd 1968

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

27

Date of Death..... April 27, 1968

Cause of Death.....

Place of Death..... James L. Memorial Hospital

Name and Address of next of kin (if known).....

Copies to: W.S.R.
V. I.
~~W.V.A.~~
~~DOC~~
H.O.

} Destroy form if advice of death already received.

E.C. Richards
for
Chief, Central Registry