



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 2237 Name Leander Cook Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Leander Cook</u> |
| 2. What is your full Address? | 2. <u>Port Beeton T. B.</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>25</u> Years <u>6</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Schoolteacher</u> |
| 6. Are you Married? | 6. <u>Yes</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... | 10. 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> |

FOR THE DURATION OF THE WAR

I, Leander Cook 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.

Leander Cook SIGNATURE OF RECRUIT.

E March 7

R. D. Hallaway Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Leander Cook do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 7 day of March 1915

R. D. Hallaway Signature of Attesting Officer

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the 1st Regiment.
If enlisted by special authority, such will be attached to the original attestation.

Date 1915 }
Place } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Leander Cook
 Apparent age 25 years 6 months. Height 5 feet 8 1/2 inches
 Chest Measurement { Girth when fully expanded 37 1/2 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Leander Cook, Port Rexton
Trinity Bay | Relationship Wife

Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow.	(b) Place and date of marriage.	(c) Present address.	(d) Initials of Officer verifying entry.
<u>Rosanna Hampton</u> <u>Spinster</u>	<u>Isle au Mont</u> <u>Port au Bassin</u> <u>Dec. 8 1913</u>	<u>Port Rexton</u> <u>T. B.</u>	<u>R. P. H.</u>

Particulars as to Children

Christian Names	Date and Place of Birth
<u>Anastasia Blanche</u> <u>Cook</u>	<u>St. Johns</u> <u>Nov. 2 1914.</u>

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from _____									
Joined at _____ on _____									
		<u>Promoted Sgt</u>		<u>4.9.16</u>					
Total Service forfeited as above _____									
Total Service towards Engagement to _____ [date of discharge] _____ years _____ days									
Pension " _____ [" "] _____ " _____ "									



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 2237 Name Leander Cook Corps

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. Leander Cook
- 2. What is your full Address? 2. Port Rexton T. B.
- 3. Are you a British Subject? 3. Yes
- 4. What is your age? 4. 25 Years 6 Months
- 5. What is your Trade or Calling? 5. Schoolteacher
- 6. Are you Married? 6. Yes
- 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, Leander Cook 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.

Leander Cook SIGNATURE OF RECRUIT.

E March 7

R. P. Hallaway Signature of Witness.

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I, Leander Cook 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 Port Rexton T. B. on this 7 day of March 1915

R. P. Hallaway Signature of Attesting Officer

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the 1st

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).....

L. Cook

C.R.

2237

P.R.O.

R. N. J. L. Regt.
Missing ~~1/17/17~~
No further information
received to date

Hazelton-down Camp
Winchester
March 10/18.

Paymaster & Officer in Charge Records
58 Victoria Street
Dundas,

Sir,

I beg to
know where (Plt A. King No 2646)
is.

Is he wounded or prisoner of
war or what?

I am very anxious to know
and by so doing you will
favour me much please

I am

your obedient servant
#2237 Lt Col R. Cook

7

DEPARTMENT	Rdo ✓
Reference No.	242 * 2424
Date Rec'd.	12 MAR 1918
" Ack'd.	Jh 12/3/18
" Ans'd.	
File	

Adjutant

2/1. 1864 Regt.

Certified

correct

G. H. Henshaw of the

O.C. 7 Coy

7/12/17

NEWFOUNDLAND CONTINGENT

NFP/82.

		TO	NO.	SEPARATION ALLOWANCE
1. Regimental No. and Rank		M. OF M.	11430/74	17/7/18
Name		2ND. BN.		
Unit				
2. Full Name of Dependent.				
3. Address				
4. Have you made previous claim for Separation Allowance? If so, state particulars.				
5. Is Separation Allowance being paid on your account to anyone in Nfld or elsewhere?				
6. Date of Marriage.				
7. Name and Address of your last Employer.				
8. The amount of your salary or wages immediately prior to Enlistment.				
9. Are your wages or any portion being paid by your employer during your absence?				
10. If paid, what is the amount per month?				
11. Name of Corps prior to enlistment in the Nfld Contingent.				

2237 Lance Corporal
 Leander Cook
 2/1 Newfoundland Regt
 Rosanna Cook
 Port Rexton
 N.F. Id.

 No.
 December 1911.
 Rev. Upward
 New St. N.F. Id.
 \$ 350 per year.
 No.

 none

I CERTIFY that the above is a true statement.

Lt. Col. L. Cook

Signature of Officer forwarding this application.

St. White

Unit 2/1st Newfoundland Regt
 Date Dec 19 1917.

LT.-COL.,
 COMMANDING, 2nd/1st N.F.L.D. REGT.,

NEWFOUNDLAND CONTINGENT

N.F.P/33.

Temporary A/c.

Regtl No. 2237 Rank 4/Cook
 Name Cook L

Pay	F. Allow	Working	Total
<u>100</u>	<u>15</u>		<u>115</u>
Less Allotment			<u>.70</u>
Net Rate			<u>45</u>

Date	DEBITS	£ s d			CREDITS	£ s d		
		£	s	d		£	s	d
1917	Balance				Balance	22	12	3 10 0
	<u>P.M. ADVANCES:</u>				<u>Pay @ Net Rate:</u>			
	A.B. 64				23/12/16 to 26/5/17 = 7/55 days			
	Acquittance rolls				45 = \$69.75 ✓	14	6	8
	Hospital Advances	3	2	0	27/5/17 to 5/6/17 = 10 days			
	<u>STOPPAGES:</u>				@ 2/0 = \$	1	0	0
	hospital dys =				1/1 to 1/1 = days			
	forfeited pay dys				= \$	18	16	8
	Miscellaneous							
	Cables							
	<u>P.R.R.O. PAYMENTS:</u>							
	Sundry Bills							
	Cash							
	Cash 26/5/17	15	10	0				
	Cash 28/5/17	5	-	-				
		10	10	0				

O.K.
 [Signature]

11998/1208/P&A

(8004) Wt. W6726/M2835. 10,000,000. 9/17. C. & Co.

Army Form C. 348.

Forms
C 348
1960

MEMORANDUM.

From **58, VICTORIA STREET,
LONDON, S.W. 1
ENGLAND.**

From **Officer Commanding,
2nd Bn. Royal Newfoundland Regt.
Hazeley Down Camp.**

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

To **The Chief Paymaster,
Royal Newfoundland Regiment,
London, S.W.**

ANSWER.

Pay & Record Office,

26th July 1918

August 3rd 1918

Soldiers attached to S. C.
School of Musketry.

Cheque has been forwarded
to Cashier, Southern Command,
and amount debited.

A.F.N.1510, No. 193,
12/6d, relating to 2237 L/Cpl.
L. Cook, for period to 30/6/18
is enclosed for attention of
O. C. "F" Co.. The Amount
should be debited to the
soldier's account, and cheque
forwarded to the Cashier
Southern Command, together with
counterfoil of A.F.N.1510,
please.

[Signature]
Major **COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.**
Chief Paymaster & O.1/6 Records,

FM/S

NEWFOUNDLAND CONTINGENT.
PAY & RECORD OFFICE.

Ref. POS IN *704*

Rec'd 5 AUG 1918

[Signature]

LIEUT. COLONEL

COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

Comd

P & R

R & C

B & F

P.S.

[Signature]

No. 12755/1284 ✓

N.F.P./79.

NEWFOUNDLAND 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.
Wunchester.

048631
[Handwritten initials]



7th August 1918

Aug 9th

Subject: 2237, L/Cpl. L. Cook, 7

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

Pay to 2237 Cook £5:0:0

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

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

Receipt hereunder.

J. W. March Major for 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.

L. Cook
No. 2237 Rank L. (Cpl.)

NEWFOUNDLAND CONTINGENT

N.F.P/108.

CIVIL EMPLOYMENT FORM

To be completed and signed by the Soldier and countersigned by the Officer Commanding his Company, and forwarded in DUPLICATE to the Pay & Record Office, 58, Victoria Street, London, S.W.1.

Regtl No. 2237 Rank Corporal
Surname Cook Christian Names Leander

1. What was your regular occupation previous to enlistment? Fisherman
2. Are you able to resume the same occupation? No
3. Will your former occupation be open to you when you have received your discharge? Yes
4. If you do not think so, state fully reasons why.

5. If your former occupation is no longer available, what form of employment do you now seek? Engineering
6. If a new form of employment is rendered necessary by disability caused by Military Service, what training do you consider requisite? ?

J. J. [Signature]
Signature of O.C. "F." Company.

Leander Cook
Signature of Soldier.

Dated at Segeleydown Camp
Winchester
Dec 6th 1918

Cook. L.

2237

May 20th

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. 2237, Rank Capt. Name Cook L. Unit ROYAL NEWFOUNDLAND REGT. who was repatriated
to Newfoundland on 11/12/18. Authority _____ Cause _____

DR. STATEMENT OF ACCOUNT

PERIOD:	PARTICULARS	£			s			d	PARTICULARS	£			s			d
		£	£	£	s	s	s			s	s	s	s	s		
From 23/11/18. To 20/12/18.	Balance Dr. from							Balance Cr. from								
	Allotment 19 days @ 70¢	13	30	2	14	8	Pay 19 days @ \$ 1.10	20	90							
	Cash Payments:						Field Allow 19 days @ \$ 10/100	1	90							
	1st Pay				12	6	Other Allowes days @ \$	22	80	4	13	8				
	2nd Pay			1	7	7	Other Credits:									
	Other Debits:						Total Credits									
	Bar. Dgt.					6	Balance due to Paymaster									
	Misc Stopp				1	5										
	Total Debits															
	Balance due by Paymaster															
				4	13	8					4	13	8			

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)

J. J. [Signature]
O.C. "J" Company.
to 1/1

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,



DEPARTMENT OF MILITIA

ST. JOHN'S, NEWFOUNDLAND

January 29th., 1919.

From:- D. M. S.

To:- O. C. Depot.

2237, Cpl. Cook, L.

Please note that the marginally noted man was discharged from the Naval & Military Convalescent Hospital, and admitted to the "Danson Hospital" January 28th., 1919.

Cluny Macpherson
Major, D. M. S.

Copy to Board of Pension Commissioners.

To be Noted

Part II. G.
Card Index
Nominal Roll





DEPARTMENT OF MILITIA

ADDRESS REPLY TO
DEPARTMENT OF MILITIA
AND QUOTE NO.

ST. JOHN'S, NEWFOUNDLAND,

January 21st., 1919

From:- D. M. S.
To:- O. C., Discharge Depot.

2237, Cpl. L. Cook.

Please note that the marginally
noted man entered the Naval & Military
Convalescent Hospital January 21st., 1919.

Cluny Macpherson

Major, D. M. S.

Copy to B. of P. Commissioners.



To be Noted { Part II. Orders
Card Index
Nominal Roll

COPY

COPY

Jan. 21st, 1919

From D. M. S.

To. O. C. Discharge Depot

2237 Cpl. L. Cook

Please note that the marginally noted
man entered the Naval & Military Convalescent
Hospital Jan. 21st, 1919

(sgnd) Cluny MacPherson

Major DMS.

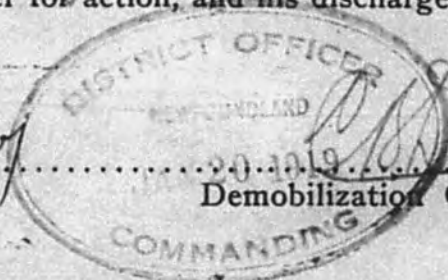
The Royal Newfoundland Regiment

CIVILIAN RE-ESTABLISHMENT ON DEMOBILIZATION

No. 2237 Rank Corporal Name Cook Leander
 Former Occupation School Teacher Address Port Rexton District St. John's
 Class B Medical Category R Disability Rating 100% Swarth
O.C. Discharge Depot.

Above noted man states he has no employment in prospect on his discharge. His personal wish is to obtain a position as Station Agent. His case has therefore been referred this day to the Vocational Officer for action, and his discharge is therefore held in abeyance.

Date 18-1-19 Conferred
 To be forwarded Orderly Room in Duplicate. 18.1.19
 Demobilization Officer Capt



Reg. No. 2239 Rank Cpl. Name Cook L.

Attested Address Post Division

Allotment..... Allottee

Date of Allotment..... Returned from Overseas 21-12-18

Embarked for Overseas Cause Discharge

G. leave from 21-12-18 to 6-1-19.

18-1-19
21-1-19. Adm - To Naval & military Convalescent
Hospital

20-1-19

DISCHARGE APPROVED ON DEMOBILIZATION.



THE ROYAL NEWFOUNDLAND REGIMENT
HEADQUARTERS

St. John's, Newfoundland,

January 20th/19 191.....

From Officer Commanding,
Discharge Depot.

To Board of Pensions Commissioners,
Militia Building

2237, G.C.L.Cook

Above noted man was before the Standing Medical Board on 13-1-19 and was recommended for Discharge as Permanently Unfit and admission to Naval & Military Convalescent Hospital.

His discharge on Demobilization has been approved by the Officer Commanding effective from 20-1-19 and I am sending him herewith for your attention and necessary action, please

Copy of his Medical Board will be forwarded you in due course.

TJW:

C.R. 2237

Leander Cook

was attested for General

Service with the NEWFOUNDLAND REGIMENT ON March 7th 1916

Regimental No. 2238 was allotted to Ptes L. Cook

AUTHORITY:

Record Ledger,

Dept. of Militia.

March 25th 1919

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. 2237. Rank Capt. Name Cook Unit ROYAL NEWFOUNDLAND REGT who was retrained to Newfoundland on 11/12/18 Authority _____ Cause _____

STATEMENT OF ACCOUNT

DR. £	s	d	£	s	d	CR. £	s	d
PARTICULARS			PARTICULARS			PARTICULARS		
Balance Dr. from			Balance Cr. from					
Allotment 19 days @ 70¢			13	90	8	120	90	
Cash Payments:			Field Allowance 19 days @ \$ $\frac{10}{100}$			11	90	
1 st Pay					12	6		
2 nd do.			1	4	4			
Other Debits:			Other Credits:			Other Allces days @ \$		
Bar. Damage					6			
mess Stopps			1	5				
Total Debits			14	13	8	Total Credits		
Balance due by Paymaster						14 13 8		
			14	13	8	Balance due to Paymaster		
						14 13 8		

PERIOD: From 23/11/18 To 30/12/18

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

(Place) HAZELEY DOWN CAMP. (Date) Dec 11 1918

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.

Chief Paymaster & Officer i/c Records.

C.R.

2237

Porter, Kenton
Sept 26th /19.

Hon C. E. Hickman
Minister Militia

Dear Sir.

Please
Send to the Above Address
my "General Service Ribbon"
and Oblige,
Yours faithfully

2237 # Lt. Col. R. Cook

Ribbon posted 29/9/19
W.S.P.

C.R. 2237

Extract from Nominal Roll of M.I.D. Regt. Draft No. 11 from
and Hq. Depot, to 1st Bn. B.S.F. Embarked Southampton, 5.10-16.

2237 L/Cpl. L. Cook.

C.R. 2937

Extract from Daily Orders part 11,
Depot St. John's dated Feb. 5th., 1919.

The discharge of the undernoted on
demobilization have been CONFIRMED
by Officer i/c Records on 3-2-19.

#2237 Spt. Leander Cook.

C.R. 2237

Extract from Daily Orders part II, Depot St. John's dated Jan. 31st. 1919.

Hospital

Admitted to Danson Hospital 28-1-19.

#2237 Cpl. L. Cook.

C.R. 2237

Extract from Daily Orders part 11, Depot
St. John's dated January 23rd., 1919..

HOSPITAL

#2237 Cpl. L. Cook

Admitted to Naval & Military Con. Dep. Hospital 21-1-19.

C.R. 2237

Extract from Daily Orders part 11, Depot St. John's
dated January 23rd., 1919.

The discharge of the undernoted on demobilization have
been approved by O. G. Discharge Depot from noted dates:

#2237 Cpl. L. Cook,

20-1-19.

C.R. 2237

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

2237 Cpl. L. Cook.

Recommended Discharge as Permanently Unfit and Admission
to N&M CONValescent HOSPITAL

C.R. 2237

Extract from Daily Orders part 11, Depot St. John's
dated December 23rd., 1918.

The u/m returned from Overseas and reported to Depot 21-12-18

#2237 Epl. L. Cook.

C.R. 2237

Extract from Nominal Roll of Repatriation draft No. 79 per S.S. CORSICAN
which embarked at Tilbury Docks 12/12/18.

from 2nd., Battalion of the Royal Newfoundland Regiment.

#2237 A/Cpl. L. Cook.

#

C.R. 2237

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P.&LR.O.
January 20th. 1917.

2237, L/Cpl. L. Cook. ✓

1 Newfoundland R. Debility Severe to Eng. ex 12 ~~Gen. Hqs~~
13th. January 1917/

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

L. M. Shiley

Address

Line
Number

Rcd.

By

Sent

by

Check

for Dept. Sec.

Dated

January 18, 1917.

To

Mrs. Leander Cook,

Port Rexton, T. B.

Regret to inform you that Record Office,

London, officially reports No. 2237, L. Corp.

Leander Cook, has been admitted to Wandsworth

suffering from influenza.

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.

C.P. 2237

Extrqct of Casualt List received from P. & R. O. Jan 17th 1917.

2237, L/C. L Cook. ✓

Admitted 3rd London General Hospital Wandsworth. 15/1/17. Influenza.

C.R. 2237

Extract of Cablegram received from Synoptical London,
dated January 17, 1917.

#2237 L/Cpl. Cook,

Influenza,

At Wandsworth.



SICK & WOUNDED N.C. & MEN OF THE EXPEDITIONARY FORCE - FRANCE.

C.R. 2237

ARMY SERVICE CORPS.

LIST NO. H.A. 5494.

84/061258	Sjt. Knibbs, G.T.	ASC.5 Supp.Co.	ICT.Groin.Mild.Dis.to Unit ex 10 Gen.H.Rouen 28th Dec.16.
T2/016688	Dvr. Downs, F.	ASC.HT.14 Res.Pk.	N.Y.D.....Adm.10 Gen.Hos. Rouen 28th Dec.16.
163626	Pte. Beck, R.	ASC.MT.26 M.A.C.	-do-
053805	Pte. Swinney, J.	ASC.337 Co.	Myalgia.Sev.
*T4/96203	S/M. Hill, G.J.	ASC.32 D.S.Col.	Bronchitis.Sev.
71442	Pte. Rose, G.	ASC.HT.att.Army Purchase Board.	N.Y.D.
7242	Far. Marwood, E.	ASC.32 Div.Train 4 Co.	Myalgia Mild.
M2/117483	Pte. Preston, H.	ASC.MT.320 Co.	Diarrhoea Mild.Trans.to Con.Dep.ex 10 Gen.H.Rouen 28th Dec.16.
T4/093095	Dvr. Jones, W.J.	ASC.46 Sub.Pk.	Piles.Sev.....Adm.10 Gen.H. Rouen 28th Dec.16.
9014	Pte. Thomas, W.	ASC.8 Lab.Co.	Influenza Sev.
122099	Pte. Morrall, J.	ASC.att.8/Lab.Bn. R.E.	Fr.Terminal....To Eng. ex 10 Gen.Hos. 28th Dec.16.
M2/103479	Pte. Fulker, J.H.W.	ASC.MT.341 Co.	Phalanges S.3rd & 4th Finger R,Hand.
M2/133369	Pte. Dicker, P.H.	ASC.MT.495 Co.	Influenza Mild.Adm.12 Gen.Hos. Rouen 29th Dec.16.
M2/103030	Pte. Sherman, A.L.	ASC.HT.3 Cor.Sie.Pk.	Chr.Periostitis Sev.
T4/092070	Dvr. Memple, T.	ASC.HT.1 Co.40 D.Tr	Disloc.Shldr.Mild.
M2/074531	Pte. Lyons, T.	ASC.MT.51 D.Sigs.	Lumbago Mild.
T2/0115682	Dvr. Simms, G.	ASC.HT.8 Aux.Co.	PUO.Sev.
T4/219127	Dvr. Gibbs, E.A.	ASC.6 LofC 2 Base	NYD.
			-do-

CANADIAN RECORD OFFICE.

LIST NO. H.A. 5494.

1/310614	Gnr. Reive, R.H.	Can.FA.46/11 Bde.	GSW.Face, arm...To Eng. ex 10 Gen.H. 28th Dec.16.
35233	Pte. Dowsley, H.	Can.Post Cps.	& Foot L. Scabies Mild...Dis.to Base Dep.ex 12 Gen.H.Rouen 29th Dec.16.

ROYAL NAVAL DIVISION.

LIST NO. H.A. 5494.

Lz.4484	A/B. Tomas, C.	RND.Nelson Bn.	GSW.Thighs &...To Eng. ex 10 Gen.H. 28th Dec.16.
			Foot R.

NEWFOUNDLAND CONTINGENT.

LIST NO. H.A. 5494.

2237	L/C. Cook, L.	1/Newfoundland R.	Influenza Sev..Adm.12 Gen.Hos. Rouen 29th Dec.16.
------	---------------	-------------------	---

C.R. 2237

Retreat of Honinal Hall embarked St. John's for Overseas,
per S.S. "Sicilian" July 10th, 1916.

2237 Pte. Cook L.

February 3rd., 1919

#2237 Corpl. Leander Cook,
Port Rexton, T.B.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 801."

Yours truly,

Captain,

Paymaster & Officer i/c Records

Enc'l 1.

ORIGINAL.

LAST PAY CERTIFICATE

N.F.P./94

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

Regtl No. 2237, Rank Cpl. Name Book 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		
	£	s	d		£	s	d
Balance Dr. from				Balance Cr. from			
Allotment 19. days @ 70¢	113	30	12 14 8	Pay 19 days @ \$ 1 ¹⁰ / ₁₀₀	120	90	
Cash Payments:				Field Allce 19 days @ \$ 1 ¹⁰ / ₁₀₀	1190		
12 th Pay			12 6	Other Allces days @ \$	122 80	14 13 8.	
2 nd "			1 4 7	Other Credits:			
Other Debits:				Total Credits		14 13 8	
Barrack Damage			6	Balance due to Paymaster			
Misc. Stopp.			1 5			14 13 8.	
Total Debits			14 13 8				
Balance due by Paymaster							
			14 13 8.				

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

CHECKED
E.P.
28/12/18

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

(Place) HAZELEY DOWN CAMP (Date) Dec 11th 1918.
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.
Chief Paymaster & Officer i/c Records.

OK
WVS

✓
DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claim 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... *Reanas* 2. Surname... *Cook*.....
3. Rank... *Corporal*..... 4. Regtl. No.... *2237*.....
5. Address in full to which future payments of gratuity are to ~~fax~~ be forwarded... *Reanas Cook*.....
Post. Reunion.....
6. Date of enlistment in the Regiment... *March 7th 1916*.....
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
Mrs. Reanas Cook.....
8. Relationship of such dependents... *wife*.....
9. Address in full of such dependent... *Post. Reunion*.....
Trinity Bay.....
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *no*
11. Were you on active service only in Nfld. If so, give dates, and particulars of such service.....
12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *2 yrs 234 days*

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

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

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

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

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..... *Feb 2nd 1919* (b) Reason for discharge..... *no longer*

Physically fit..... *Shell Shock*.....

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.....

Somme Front.....
Oct 2nd 1916 - Jan 1917.....

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..... *Yes*

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.

19. The person who has signed this declaration is the same person as the person who has signed the declaration on page 1.

19. The person who has signed this declaration is the same person as the person who has signed the declaration on page 1.

Reuben Cook

Signature of Applicant:

Place of Residence: *Port Rexton T. B.*

Declared before me at: *H. Johns, Ufld*

This *28th* day of *Feb* 19*19*.

John McCaughy

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

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	<i>500.00</i>	<i>500.00</i>
.....
.....

Certified Correct.

Paymaster.

Post Retton
Capt Howley May 16/19.

5075

Dear Ma'am
A. Nfld. Regt.
Sir

I beg
to inquire of delay
of my Gratuity money
(\$30) for May month

Please consider
this and oblige
Your Obedient
Servant.

Mrs Bender book

Mailed May 20 1899

223

DUPLICATE
MAIL COPY

NEWFOUNDLAND CONTINGENT

NFP/82.

Posted.....

SEPARATION ALLOWANCE

- | | |
|---|---|
| 1. Regimental No. and Rank | 2257 Lance Corporal |
| Name | Leander Cook |
| Unit | 2/1st Newfoundland Regiment |
| 2. Full Name of Dependent. | Rosanna Cook |
| 3. Address | Port Rexton,
Newfoundland. |
| 4. Have you made previous claim for Separation Allowance? If so, state particulars. | ----- |
| 5. Is Separation Allowance being paid on your account to anyone in Nfld or elsewhere? | No |
| 6. Date of Marriage. | December 1911 |
| 7. Name and Address of your last Employer. | Rev. Upward,
New Harbour, Nfld. |
| 8. The amount of your salary or wages immediately prior to Enlistment. | \$350.00 per year. |
| 9. Are your wages or any portion being paid by your employer during your absence? | No |
| 10. If paid, what is the amount per month? | No |
| 11. Name of Corps prior to enlistment in the Nfld Contingent. | None |

I CERTIFY that the above is a true statement.

L/Opl. L. Cook

Signature of Officer forwarding this application.

~~C. W. Whittaker, Lt. Colonel~~
Commanding 2/1st Newfoundland Regt,

Unit ~~2/1st Newfoundland Regiment~~

Date ~~December 19th 1917~~

SEPARATION ALLOWANCE

1. Regimental No. and Rank	2237 Lance Corporal
Name	Leander Cook
Unit	2/1st Newfoundland Regiment
2. Full Name of Dependent.	Rosanna Cook
3. Address	Port Rexton, Newfoundland.
4. Have you made previous claim for Separation Allowance? If so, state particulars.	-----
5. Is Separation Allowance being paid on your account to anyone in Nfld or elsewhere?	No
6. Date of Marriage.	December 1911
7. Name and Address of your last Employer.	Rev. Upward, New Harbour, Nfld.
8. The amount of your salary or wages immediately prior to Enlistment.	\$350.00 <i>per year</i>
9. Are your wages or any portion being paid by your employer during your absence?	No
10. If paid, what is the amount per month?	No
11. Name of Corps prior to enlistment in the Nfld Contingent.	None

I CERTIFY that the above is a true statement.

L/Cpl. L. Cook

Signature of Officer forwarding this application.

C. W. Whittaker, Lt. Colonel
Commanding 2/1st Newfoundland Regt,

Unit 2/1st Newfoundland Regiment

Date December 19th 1917

3203

Port Reton
Nov 13/18

Department of Militia
Dear Sir

Just a word to let you
know I did not received
my cheque containing
my separation allowance
It may be over looked
& so please send it
wvd to

Mrs Leander Cook
Port Reton
Lundy Bay

OK 778 mailed
to Port Reton 8/18

2237

Nov. 18. 18

Mrs. Leander Cook,
PORT REXTON, T.B.

Dear Madam:

2237

With reference to your letter of
Nov. 13th. regarding your Separation Allowance, I beg
to inform you that this cheque was posted to you on
Nov. 7th. and evidently has been mislaid in the mail.
If it does not turn up by the end of the month, write
again and arrangements will be made to have duplicate
issued.

Yours truly,

Lieut.
For Paymaster

May 16, 1919

Mrs. Leander Cook,
Port Hexton.

Dear Madam:

With reference to your letter
of May 9th. I enclose cheque for \$30.00 in
payment for Separation Allowance on account of
War Service Gratuity .

Yours truly,

Lieut.
For Paymaster.

JULY 19th 1919

Capt. Howley.
O?I. C. Records

Please pay to Leander Cook, #2237
the sum of thirty nine dollars and thirty three cents
in payment of allowance for nineteen days to July 19th 1919
in connection with re-education.

\$39.33

Pension	\$30.00
Allowance	7.00
Dependent	7.47

[Handwritten signature]
[Handwritten signature]
for Vocational Officer

ACCOUNT	<i>C. R. G.</i>
CH. NO.	<i>3369</i>
IND. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

S. Halford

BB/EB

November 10, 1919.

Major Howley,
O. I. C. Pay and Records.

A. C. R.

Please pay Mr. L. Cook, 2237,
the sum of Seven dollars and seventy five cents,
on account of transportation from Port Rexton to St. John's.
Charge same to the Civil Re-establishment Committee.

\$7.75

[Handwritten Signature]
Major

For V. O.

ACCOUNT		
CH. NO	19511	INITIALS <i>LC</i>
IND. LEDGER		INITIALS
PAY LEDGER		INITIALS
GEN. LEDGER		INITIALS

L. Cook

BB/EJ

December 15, 1919.

Major Howley,
O. I. C. Pay and Records.

Please pay L. Cook 2237
the sum of ten dollars
on account of advance of allowance.
Charge the same to the Civil Re-establishment Committee.

\$10.00

24161	Cook

[Handwritten Signature]
Major

for V O.

[Handwritten Signature]

ACCOUNT

16165

INITIALS

[Handwritten initials]

Oct 21st 1919

Major Howley
O. I. C. Records

Please pay to Leander Cook, 2237
the sum of ten dollars
on account of allowances to date
and charge same to Civil Re-establishment Committee

\$10.00

[Handwritten signature]
[Handwritten signature]

Major,
for Vocational Officer

Ch. Received
[Handwritten signature]

Feb 7th 1930

Major Howley
O. I. C. Records

Please pay to L. Cook, 2237
the sum of forty five dollars and five cents
in payment of arrears of allowance to date
and charge same to Civil Re-establishment Committee

\$45.05

Pension \$15.00

28243	Feb
INITIALS	
DATE	
AMOUNT	

[Handwritten initials]

W. W. Meckell

Vocational Officer

L. Cook

4737
4973

Port Retton

T. Bay
May 9th 19

Office of Records

Sir,

I regret
to say that the
\$30 a month gratuity
for my wife has
not arrived for this
month up to date.
I understand it
generally comes first
of the month.

Please consider
this and oblige

Your obedient servant
Reuben Cook.
for Mrs. Reuben Cook.

April 5th 1920

Major Howley
O. T. C. Records

Please pay to L. Cook, 2237
the sum of forty five dollars
in payment of P. & A. Bonus
and charge same to Civil Re-establishment Committee

\$45.00

Pension \$15.00

J. C. R.

ACCOUNT	33968	INITIALS	LW
PAID TO ORDER OF		INITIALS	[Signature]
PAY TO THE ORDER OF		INITIALS	[Signature]
CHECK NO.		DATE	

W. W. Mitchell

Vocational Officer

L. Cook

March 9th 1920

Major Howley
O. I. C. Records

Please pay to Mrs L. Cook, Port Rexton
the sum of sixty three dollars and seventy cents
and charge same to Civil Re-establishment Committee
being arrears of allowance to date

\$63.70

ACCOUNT	
CHEQUE NO.	31481
INITIALS	<i>[Handwritten initials]</i>
INCL. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

[Handwritten signature]
G. W. Mitchell
Vocational Officer

[Handwritten signature]
Charles M. Lyman

SEP 27 '19

Capt. Howley,
O. I. C. Records.

Please pay to **L. Cook, 2237**
the sum of **fourteen dollars and forty seven cents**
in payment of allowance for week ended this date
in connection with re-education.

\$14.47

Pension	\$30.00
Allowance	\$ 7.00
Dependent	\$ 7.47

W. M. Mackall
Vocational Officer
W. M. Mackall



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

Leander Cook

aged

25 yrs.

conducted at

C. L. B. Anonny

Date:

March 6/16

Recruiting Officer:

NO OF TEST

FINDING

1

Y.

2

Y.

3

Y.

4

Y.

5

Y.

6

Y.

7

yes.

8

yes.

9

Y.

no.

2 2 3 7

10

n

11

n

12

n

13

1 tooth to be taken out -

O.K. JWB

14

n

15

n

16

n

17

n

18

n

19

6/9th right

6/6th left

20

n

21

n

22

n

23

n

24

n

25

n

26

n

27

n

28

n

29

n

30

n

31

n

32

n

33

never.

34

5 ft. 8 1/2"

35

149 lbs.

36

37 1/2

37

\$ 60⁰⁰ a month

38

no wife. 1 child. Mrs Rosanna Cook. Post Reston. Va.

39

wife.

Signature of Medical Examiner:

JWB

D. D. & L., London, E.C. Forms/B456/38
(P8766) Wt. W8304/M2107 3,000,000 9/17 W 18

MORNING SICK REPORT

Army Form B 256

MEDICAL INSPECTION REPORT

Unit 2nd Royal Wfld Regt
Squadron, battery, or company

Station and date Hazely Down Camp 30.11.18

Regtl. No.	Rank and Name (Christian name in full; Surname first; M under name if married.)	Completed Years of		Religion.	If for duty †	Whether a defaulter	Lines or barracks.	Room.	Disease.	Disposal. Medical Officer's remarks and signature.
		Age	Service.							
2237	Wassermann to attend on May 10 th - 17 th 24 th 31 st June 3 rd Wass Test									for Wassermann please DPR Cap Bone



† State nature of duty for which warned. In the case of men for medical inspection, the reason, such as, "Soldiers for trial by Court-Martial," or "joining the station," &c., should be stated against their names.

* Strike out whichever is not applicable.

Orderly
N.C.O.

SYPHILIS CASE-SHEET.

Regtl. No. *2237* Rank and Name *L/cpl. Cook. L.* Corps *2/1. Nfld. R.*

Placed on Syphilis Register at *3rd S. G. P. Glasgow.* on *10. 10. 17* No. in Register

Disease contracted at *Ramy.* Primary sore appeared on (date) *4. 10. 17*

CONDITION WHEN PLACED ON REGISTER.

Primary sore—character and site *Large sore on lip foreskin*

Lymphatic glands *Inguinal Glands indurated*

Skin (nature and distribution of rash)

Mucous membranes

Other symptoms

Examination of exudate from sore—Spirochaeta Pallida (present or absent)

Examination of blood serum— Method employed (original or modification)

Wassermann reaction (Result (positive or negative))

—
0
+

Station *3rd S. G. P. Glasgow* Date *10. 10. 17* Signature of M.O.

Hutchinson

Struck off Syphilis Register at _____ on _____

Cause of being struck off Register { (a) Recovered
(b) Transferred to Army Reserve
(c) Discharged from Army }

Station _____ Date _____ Signature of M.O. _____

N.B.—On completion of a course of treatment a red line to be drawn across the page, and the date when the next blood test is due to be entered in red ink below the line, e.g., "Blood test due 15.5.14." The date and result of the blood test to be entered; and if negative, the date on which the next blood test is due to be also entered.

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Weight clothed, without boots—lbs.	Urine		Treatment			Signature of M.O. (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialled)
				Normal (N.) Albumen (Alb.)	Wassermann Reaction	Arsenical	Mercurial	Other Methods	
3 rd Scottish Gen H.	10.10.17	Admitted to Hospital							<p>Signature of M.O.</p> <p>(Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialled)</p> <p><i>Johnston</i></p> <p>10/10/17 10/10/17 29/10/17 30/10/17 2.11.17 6.11.17 7.11.17 13.11.17 23.11.17 " " " 30.11.17 " " " 6.12.17 14.12.17 21.12.17 26.12.17</p>
	21.10.17				0 +				
	29.10.17	Neo Kharisia	162	N		4 grms			
	30.10.17						gr. 1		
	2.11.17	Neo Kharisia		N		4 grms			
	6.11.17		162				gr. 1		
	7.11.17	Neo Kharisia		N		4 grms			
	13.11.17						gr. 1		
	23.11.17	Neo Kharisia	163	N		6 grms			
	" " "						gr. 1		
	30.11.17	Neo Kharisia		N		6 grms			
	" " "						gr. 1		
	6.12.17						gr. 1		
	14.12.17	Neo Kharisia	163	N		6 grms	gr. 1		
21.12.17	Neo Kharisia		N		6 grms	gr. 1			
26.12.17							0 -		
Hilsea	30.4.18	Next Blood Test due 26.3.18 Wass. Test. Result +++							<p><i>Johnston</i></p> <p>30/4/18 10/5/18 10/5/18 17/5/18 17/5/18 24/5/18 24/5/18 31/5/18 31/5/18</p> <p>RESULT +++</p> <p><i>Johnston</i></p>
	10.5.18	Neo Kharisia		N		.45			
	10.5.18								
	17.5.18	Neo Kharisia		N		.45			
	17.5.18								
	24.5.18	Neo Kharisia		N		.45			
	24.5.18								
31.5.18	Neo Kharisia		N		.45				
31.5.18									

233

233

Medical Report on an Invalid.

Station HAZELEY DOWN CAMP.

Date 29 NOV 1918

- | | |
|---|--|
| <p>1. Unit <u>ROYAL NEWFOUNDLAND REG.</u></p> <p>2. Regimental No. <u>2237.</u></p> <p>3. Rank <u>Corpl</u></p> <p>4. Name <u>COOK</u></p> <p>5. Age last birthday _____</p> <p>6. Enlisted { on _____
at _____</p> | <p>7. Former Trade }
or Occupation }</p> <p>7A. If with previous service in Army, state—</p> <p>(a) Former Unit;</p> <p>(b) Regimental No.;</p> <p>(c) Date of Discharge;</p> <p>(d) Cause of Discharge.</p> |
|---|--|

8. Disability in respect of which invaliding is Proposed.

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

D. A. H.

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.

10. Place of origin of disability.

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

Was sent back from France with shell shock and neurasthenia. He states, he was blown up by a shell, dazed, carried on, sent down line two days later. Was treated in Wandsworth 121 days. He states that he was made 'C' category in Jan 17.

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

(a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).

(b) constitutional or hereditary, and not aggravated by service during the present war.

(c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

V.A.S (cured)

He has been under observation for some time on account of breathlessness, under exertion; heart sounds rapid but pure, put on light employment.

13. What is his present condition?

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

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?

Repatriation (2)

M. R. C. P. (D)

ROYAL NEWFOUNDLAND REG.

Officer in medical charge of case.

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

Station _____

Officer in charge of Hospital.

Date _____

*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.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

(iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

*Very short of breath. Pulse 120
irregular. Heart action irregular
no murmur. Remittent hands*

- 21. (a.) State whether the disability is clearly attributable to—
 - (i.) Service during the present war;
 - (ii.) Climate;
 - (iii.) Ordinary military service;
 - (iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or
 - (v.) Whether it is constitutional or hereditary.

Yes

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

Explosion of shell

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

23. Is the disability permanent?

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

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

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

100% 3 months

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

27. Do the Board recommend—

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

Yes

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

- (a) Sanatorium;
- (b) Hospital;
- (c) Convalescent home;
- (d) Asylum; or
- (e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

Yes with complete rest.

29. With reference to Army Council Instruction No. 1275 of 1917, is any surgical appliance recommended?

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

Signatures:—

Station *S. Jones*

Date *Feb 13 1919*

H. A. Case President.

Richard D. ...
L. Robinson Members.

Approved

Station

Date



Cluny Macpherson Major
Administrative Medical Officer.

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

MEDICAL HISTORY

OF

Surname Cook Christian Name Leander

Table I.—GENERAL TABLE.

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY	
	Right	Left	Right	Left
Examined	on <u>6</u> day of <u>march</u> 191 <u>6</u> at <u>St. John's, hfd.</u>		on _____ day of _____ 191 <u>1</u> at _____	
Declared Age	<u>25</u> years		_____ years	
Trade or Occupation	_____		_____	
Height	<u>5</u> feet	<u>8½</u> inches	_____ feet	_____ inches
Weight	<u>149</u> lbs.		_____ lbs.	
Chest Measurement	Girth when fully expanded... <u>37½</u> inches		_____ inches	
	Range of expansion... <u>3½</u> inches		_____ inches	
Physical Development	_____		_____	
Vaccination Marks	Arm	_____	Right	Left
	Number	_____	_____	_____
When Vaccinated	_____		_____	
Vision	R.E.—V=	<u>6/9</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>Samuel Patterson</u>		_____	
(Rank)	<u>Capt</u> Medical Officer.		_____ Medical Officer.	
Enlisted	at <u>St. John's</u> on <u>6</u> day of <u>march</u> 191 <u>6</u>		at _____ on _____ day of _____ 191 <u>1</u>	
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment	<u>1st hfd. Reg.</u>	<u>2257</u>	_____	_____
Transferred to	_____		_____	
Became non-effective by	_____		_____	
(Signature)	_____		_____	
(Rank)	_____		_____	



Medical Report on an Invalid.

Station HAZELEY POW CAMPDate 29 NOV 1918

- | | |
|--|--|
| 1. Unit <u>ROYAL NEWFOUNDLAND REG.</u>
2. Regimental No. <u>2237</u>
3. Rank <u>Cpl.</u>
4. Name <u>COOK</u>
5. Age last birthday _____
6. Enlisted } on
at | 7. Former Trade }
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).

D. A. H.

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

- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
- (b) constitutional or hereditary, and not aggravated by service during the present war.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

was sent back from France with shell shock & depression. He states he was blown up by a shell, dazed, carried on & sent down the line two days later, was treated in Wandsworth 121 days.

He states he was made 'C' Caterer in Jun 1917

(VDS cured)

13. What is his present condition?

He has been under observation for some time on account of heart under exertion. Heart sounds regular but pulse fast on light employment.

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?

Repatriation (2.)
M. J. [Signature]

ROYAL NEWFOUNDLAND REG.

Officer in medical charge of case.

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

Station _____

Officer in charge of Hospital.

Date _____

*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.

Medical Report on an Invalid.Station Hansley Down Camp.Date Nov. 29th. 1918.1. Unit **ROYAL NEWFOUNDLAND**2. Regimental No. **2328**3. Rank **Coytl.**4. Name **Cook**

5. Age last birthday

6. Enlisted { on
at7. Former Trade }
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).***D. A. M.**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.

10. Place of origin of disability.

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

Was sent back from France with shell shock and heurasthenia he states he was blown up by a shell, dazed carried on, sent down line two days later, was treated in Wandsworth 121 days. He states that he was marked C category in June 1917.

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

(a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).

(b) constitutional or hereditary, and not aggravated by service during the present war.

(c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

VDS. Cured

13. What is his present condition?

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

He has been under observation for some time on account of breathlessness, under exertion Heart sounds rapid but pure, Put on light employment.

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?

Repatriation (2)

~~J. St. P. Knight Capt. N.F.L.D. Regt.~~

Officer in medical charge of case.

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

Station _____

Officer in charge of Hospital.

Date _____

*Loss of teeth on or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

Notes.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) *The rates of pension vary directly according to whether the disability is, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

(iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

**Very short of breath Pulse 120
Irregular Heart's Action irregular no
murmur. Tremulous hands.**

1. (a.) State whether the disability is clearly attributable to—

Yes.

- (i.) Service during the present war ;
- (ii.) Climate ;
- (iii.) Ordinary military service ;
- (iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or
- (v.) Whether it is constitutional or hereditary.

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

Explosion of shell

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

23. Is the disability permanent?

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

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

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

100 % 3 months.

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

27. Do the Board recommend—

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

Yes.

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

- (a) Sanatorium;
- (b) Hospital;
- (c) Convalescent home;
- (d) Asylum; or
- (e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

Yes with complete rest.

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

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

Signatures:—

N.S. Fraser. President.

Station St. John's

J. Sinclair Tait.

Date Jan 13th. 1919.

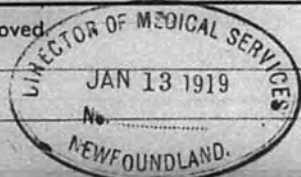
L. Paterson

} Members.

Approved

Station

Date



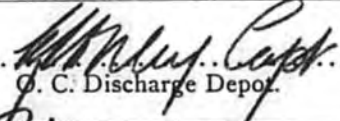
(Sgd) Cluny Macpherson Major.
Administrative Medical Officer.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 2237 Rank Pty Corp Name John Leander
 Date of Enlistment 6.3.16 Address Port Rexton District Trinity
 Occupation School Teacher Classification for Discharge B Medical Category E
 Recommendation S.M.B. Promptly unfit Disability Rating 100% 3 months
 Passed to Demobilization Officer with following documents:—

N.F. P 36	B 268	B 121	1	N.F. Med.	D.F. 1	
B 178	W 3494	B 122	2	Board 1st	" 2	12.38 1
B 178a	1 D 400A	1 B 1915		do 2nd	" 3	3
B 179	2 D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
B 179b	B 103	ME 2			" 6	
B 179c	B 120	M 93				

Date 18.1.19

 O. C. Discharge Depot

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am John Leander Cook in a position to resume civilian occupation.

In the Hospital

John Leander Cook

Particulars passed to Vocational Officer for information and action.

Date 18.1.19


2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable £10.00
- (b) Clothing Supplied Joseph H. Snow

Date 20-1-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 74 to his home
 at Port Protection and Release Certificate No. 843 issued.
 Date 20-1-19
C. B. Dricks 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 3-7-19
 Date 20-1-19
Money Capt.
 Depot Paymaster.

Discharge approved for 20-1-19
 Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1	
B 178	W 3494	B 122	Board 1st	" 2	1 1238
B 178a	D/400A	B 1915	do 2nd	" 3	2 2000 B
B 179	D 200B	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 21-1-19
C. B. Dricks Capt.
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:—
 Officer in Charge Records.
 Board of Pension Commissioners.
 with following additional documents.

ELIGIBLE for POST DISCHARGE PAY

Date JAN 20 1919
R. H. Jait 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:

For Hospital Treatment

Recommended by Mr. Bond for Hospital

Complete rest for a while.

END.

Beauver Cook.

Signature of Man.

W. Dukes, Jr.

Reg. No.

2237.

Signature of the Vocational Officer or his Representative.

Place

ST. JOHN'S.

Date

Jan 28th

191

9



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

Leander Cook

Regiment from which discharged

Royal Newfoundland

Regimental number

2237

Intended address

Port Rexton

Height on discharge

5 Feet 9

Color of hair on discharge

Brown

Complexion

Fair

Color of eyes

Grey

Descriptive Marks

Tall

Figure on discharge

Daniel

Christian name of Father

Sarah

Christian name of Mother

Rosana

Wife's maiden name in full

Porty Channel 1912

Date and place of marriage

Christian names of children

Sydney & Blanche

Place and date of soldier's birth

Port Rexton 1893

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)

Leander Cook.

Station

St. John's

Date

10. 2. 19

(Rank)

PTC

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



3



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Leander Cook, Regl. No. 2237
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
 Dollars and 70 Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons
 concerned, viz.:

Allotment begins May 1st.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
2076	wife	Mrs Leander Cook	Port Rexton	70
<i>Commencing 2/1/16.</i>				
Total Allotment, \$				

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, counter-signed by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

(Sig.) Rd. Holloway
Lieut
 Officer Commanding
 A. Company
St. John's
April 20th 1916

(Sig.) Leander Cook
 (Rank) Pl.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 2237 Rank Capt Name Cook, Leander
 Date of Enlistment 6.3.16 Address Port Rutton District St. John's
 Occupation School Teacher Classification for Discharge B Medical Category E
 Recommendation S.M.B. Presently unfit Disability Rating 100% 3 months
 Passed to Demobilization Officer with following documents:—

N.F. P 36	B 268	B 121	1	N.F. Med	D.F. 1	
B 178	W 3494	B 122	2	Board 1st	" 2	1238 1
B 178a	D 400A	B 1915		do 2nd	" 3	3
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
B 179b	B 103	ME 2			" 6	
B 179c	B 120	M 93				

Date 18.1.19

W. May Capt
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

Leander Cook

Particulars passed to Vocational Officer for information and action.

Date 18.1.19

R. Dickie

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$60.00
- (b) Clothing Supplied Joseph & Snow

Date 20-1-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *me* to his home at *Red Bank* and Release Certificate No. *843* issued.

Date *20-1-19*

CS Dricks 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 *3-2-19*

Date *20-1-19*

MS Daley Capt
Depot Paymaster.

Discharge approved for *20.1.19*

Forwarded with following documents to O.C Discharge Depot.

N.F. Pay <i>94</i>	B 268.	B 121.	N.F. Med.	D.F. 1.	
F 178.	W 3494	B 122.	Board 1st.	" 2.	<i>1 1238 1</i>
B 178a.	D 400A.	B 1915.	do 2nd.	" 3.	<i>2 2700 B</i>
B 179.	D 400B.	Form L.	do 3rd.	" 4.	
B 179a.	D 400C.	Form K.	do 4th.	" 5.	
B 179h.	B 103.	ME 2.		" 6.	
B 179c.	B 120.	M 93.			

Date *21.1.19*

CS Dricks Capt
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer in Charge Records.
Board of Pension Commissioners.

with following additional documents.

ELIGIBLE for POST DISCHARGE PAY

JAN 20 1919

Date

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

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

Date *January 23/19*

W. A. ...
...

Receipt for Army Book 64

No. 2237 Name Cook L.

To Certify that I have received the AB 64 of the above named soldier.

Date July 24/20 Name L. Cook
Place Post-Renton W

N.B. For completion and return to the Department of Militia
Insert in corner of envelope "AB 64"

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 2237 Rank Cpl. Name Cook, Leander
 Intended place of residence Port Rexton, T.B.

2. Occupation School Teacher
 Classification of soldier B Medical Category E

3. The above-named man is discharged in consequence of DEMOBILIZATION

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 ST. JOHN'S (sgnd) C. C. Duley, Capt.
 Date Jan. 20, 1919 for 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 ST. JOHN'S (sgnd) Leander Cook
 Signature of soldier
Jan. 20, 1919 " C. B. Dicks, Capt.
 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 ST. JOHN'S (sgnd) Leander Cook
 Signature of soldier
Jan. 20th, 1919 " J. Daymond, Sgt.
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 6-3-16 No of days on Military
 Discharged from service 20-1-19 plus 14 days Service 1065

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 (sgnd) R. H. Tait, Capt.
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date Jan. 20, 1919

CONFIRMATION OF DISCHARGE

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

Place
 Date
 Officer i/c Records
 The Royal Newfoundland Regiment

DATE.....NAME.....

ENLISTED.....DISCHARGED.....

SERVICE.....

Re: For ruling under Section 20-2 of the Statute Law Amendment (Newfoundland) Act and Section 11 of the Canadian Pension Act - 1. Disordered Action of Heart, 2. Chronic Bronchitis.

This man served with the Newfoundland Forces in World War I from 8.3.16 to 3.2.19, service in France.

On enlistment his stated age was 25 years.

During service he had treatment from 26.12.16 to 26.5.17 for a condition first diagnosed as influenza and later diagnosed as shell shock and neurasthenia. Report from Third London General Hospital, Wandsworth, dated 26.5.17, states, "Reported sick on 15.12.16 in France with pains, shivering, constipation, no appetite, vomiting, and headache. Was knocked out of dug-out by shell on 12.4.17.

He had treatment from 10.10.17 to 23.11.17 for syphilis. Given antiluetic treatment. Following treatment no active signs. Further treatments to be continued at clinic. Treatment completed on 21.12.17. No active signs. Wassermann negative.

Date { Application.....
of { Complaint
Marriage

OPINION:

He had treatment from 8.10.18 to 24.10.18 for bronchitis with recovery.

M.A.....

Medical Report on an Invalid.

Station Haseley Down Camp.Date Nov. 29th, 1918.1. Unit **ROYAL NEWFOUNDLAND**2. Regimental No. **2242**3. Rank **Corpl.**4. Name **Cook**

5. Age last birthday

6. Enlisted $\left\{ \begin{array}{l} \text{on} \\ \text{at} \end{array} \right.$ 7. Former Trade }
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).

D. A. H.

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.

10. Place of origin of disability.

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

Was sent back from France with shell shock and heuressthenia he states he was blown up by a shell, dased carried on, sent down line two days later, was treated in Wandsworth 21 days. He states that he was marked C category in June 1917.

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

(a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).

(b) constitutional or hereditary, and not aggravated by service during the present war.

(c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

VDS. Cured

13. What is his present condition?

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

He has been under observation for some time on account of breathlessness, under exertion Heart sounds rapid but pure, Put on light employment.

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?

Repatriation (2)

J. St. P. Knight Capt. NWLD. Regt.

Officer in medical charge of case.

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

Station _____

Officer in charge of Hospital.

Date _____

*Loss of teeth on or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to **enable him to decide upon the man's claim to pension.**

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) *The rates of pension vary directly according to whether the disability is, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentials between them.*

(iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

**Very short of breath Pulse 120
Irregular Heart's Action irregular no
murmur. Tremulous hands.**

1. (a.) State whether the disability is clearly attributable to—

(i.) Service during the present war; **Yes.**

(ii.) Climate;

(iii.) Ordinary military service;

(iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or

(v.) Whether it is constitutional or hereditary.

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

Explosion of shell

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

23. Is the disability permanent?

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

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

Degrees of disablement should be expressed in the following percentages:—

100 % 3 months.

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

27. Do the Board recommend—

(a) Discharge as permanently unfit, or

Yes.

(b) Change to England?

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

(a) Sanatorium;

(b) Hospital;

(c) Convalescent home;

Yes with complete rest.

(d) Asylum; or

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

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

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

Signatures:—

H.S. Fraser. _____ President.

Station **St. John's** _____

J. Sinclair Tait. _____ } Members.

Date **Jan 13th. 1919.** _____

L. Paterson _____

Approved.

Station _____

(Sgd) Cluny Macpherson _____ Major,
Administrative Medical Officer.

Date _____

