



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 2765 Name Archibald Crane Corps .....

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

- |                                                                                                                                    |                                                            |
|------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| 1. What is your name? .....                                                                                                        | 1. <u>Archibald Crane</u> .....                            |
| 2. What is your full Address? .....                                                                                                | 2. <u>Upper Island Cove</u><br><u>Conception Bay</u> ..... |
| 3. Are you a British Subject? .....                                                                                                | 3. <u>Yes</u> .....                                        |
| 4. What is your age? .....                                                                                                         | 4. <u>25</u> Year <u>3</u> Months .....                    |
| 5. What is your Trade or Calling? .....                                                                                            | 5. <u>Yipherman</u> .....                                  |
| 6. Are you Married? .....                                                                                                          | 6. <u>No</u> .....                                         |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? .....                             | 7. <u>Yes - Navy</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> .....                                       |

DURATION OF THE WAR

I, Archibald Crane 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.

6. May 17th 1916 Archibald Crane SIGNATURE OF RECRUIT.  
Chas. H. Ayr Signature of Witness.

Archibald Crane 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 17th day of May 1916.

Signature of Attesting Officer Chas. H. Ayr Capt.

### †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.

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

**INFORMATION SUPPLIED BY RECRUIT**

Name and Address of next of kin William Crane Upper Island Cove  
Conception Bay. | 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)

**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 _____					
				Joined at _____ on _____					
Total Service forfeited as above.....									
Total Service towards Engagement to _____ [date of discharge] _____ years _____ days									
" " " Pension " " " " [ " " " ] _____ " _____ "									

2765



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 2765 Name Archibald Crane Corps Corps

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

- |                                                                                                                                    |                                                      |
|------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|
| 1. What is your name? .....                                                                                                        | 1. <u>Archibald Crane</u>                            |
| 2. What is your full Address? .....                                                                                                | 2. <u>Upper Island Cove</u><br><u>Conception Bay</u> |
| 3. Are you a British Subject? .....                                                                                                | 3. <u>Yes</u>                                        |
| 4. What is your age? .....                                                                                                         | 4. <u>25</u> Years <u>3</u> Months                   |
| 5. What is your Trade or Calling? .....                                                                                            | 5. <u>Yachtsman</u>                                  |
| 6. Are you Married? .....                                                                                                          | 6. <u>No</u>                                         |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? }                                 | 7. <u>Yes - Navy</u>                                 |
| 8. Are you willing to be vaccinated or re-vaccinated? .....                                                                        | 8. <u>Yes</u>                                        |
| 9. Are you willing to be enlisted for General Service? .....                                                                       | 9. <u>Yes</u>                                        |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... }                                     | 10. { Name .....                                     |
|                                                                                                                                    | Corps .....                                          |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... | 11. <u>Yes</u>                                       |

I, Archibald Crane 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.

8. May 17th/16. Archibald Crane SIGNATURE OF RECRUIT.  
Chas. Aipe Signature of Witness.

Archibald Crane 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 17th day of May 1916.  
Signature of Attesting Officer Chas. Aipe Capt.

### †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 Corps.  
If enlisted by special authority, such will be attached to the original attestation.  
Date.....1916 } 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.

Name Arthurald Crane  
 Apparent age 25 years 3 months. Height 5 feet 6 inches  
 Chest Measurement { Girth when fully expanded 37 1/2 inches  
 Range of expansion 3 1/2 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin William Crane Upper Island Cove  
Conception Bay | 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.

### 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>17-5-16</u>									
Joined at <u>St. John's</u> on <u>May 17<sup>th</sup> 16.</u>									
<u>Discharged. St. John's. Sep. 5/1918</u>									
<u>Embarked St. John's S.S. Sention for UK 28<sup>th</sup></u>									
<u>Joined 15<sup>th</sup> Battrn 12-12-16 Wounded 23-2-17</u>									
<u>Admitted 87<sup>th</sup> FA trans to 8 Oct 4<sup>th</sup> Sta head 23-7-17</u>									
<u>Joined 29<sup>th</sup> Coy, 1<sup>st</sup> Bn Depot, Queen's 12-5-17</u>									
<u>Admitted 62<sup>nd</sup> FA B Coy 1<sup>st</sup> Hvyd 29-1-17</u>									
<u>Admitted 19<sup>th</sup> H. N.Y.S. 27-4-18</u>									
<u>Admitted 14<sup>th</sup> Hvyd. 27-4-18</u>									
<u>to 5<sup>th</sup> Coy Camp. H. Battrn of 7<sup>th</sup> Arrived 5<sup>th</sup> Coy, 1<sup>st</sup> Bn Depot, Queen's 1-5-18</u>									
<u>Admitted 21-7-18</u>									
<u>Admitted 4-8-18</u>									
<u>Admitted 5-9-18</u>									
<u>Discharged medically unfit 5-9-18</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 5-9-18 (date of discharge) 2 years 112 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

Archibald Crane

aged 26

conducted at

C. L. B.

Date:

May 16 / 1916

Recruiting Officer:

NO OF TEST

FINDING

- 1 no
- 2 no
- 3 no
- 4 no
- 5 no
- 6 no
- 7 yes
- 8 yes
- 9 no - ho
- 10 n
- 11 n
- 12 n
- 13 n
- 14 n
- 15 n
- 16 n
- 17 n
- 18 n
- 19  $\frac{1}{2}$  Both  $\frac{6}{12}$
- 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

2765

Yes. once. 1 year ago 1 scar left

5.6

135

34.37  $\frac{1}{2}$

\$4.00 per year

Parents M<sup>r</sup> William Crane

Parents

7/11

Signature of Medical Examiner:

Geo Burdley  
Lieut.

THE BOARD OF PENSION COMMISSIONERS  
FOR NEWFOUNDLAND.

Pension No. 753

Regt. No. 2765 Rank Pte. Name Archibald Crane

Corps served with ROYAL NEWFOUNDLAND REGIMENT

Date of Medical Board Aug. 22<sup>nd</sup> 1918

Pensionable disability Less than 20% for        months

Pension granted:

\$        per month for        months

or Gratuity granted:

\$ 50.<sup>00</sup> payable in        equal monthly instalments

Granted to:

Name Archibald Crane

Address       

Date case disposed of SEP 6 - 1918

Approved by:

Members of Board

*[Signature]*

*[Signature]* acty. Chairman  
        
        
      

Remarks:

A Crane

2765

P. + R. P.

Originals

This space to be left blank for the Chelsea Number.

Army Form B. 268.

### Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 2765 Army Rank Private

Name Crane Archibald  
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps ROYAL NEWFOUNDLAND REGIMENT.

Battalion, Battery, Company, Depot, &c.  
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge \_\_\_\_\_

Place of discharge \_\_\_\_\_

1. Description at the time of discharge.

Age 23 years \_\_\_\_\_ months

Height \_\_\_\_\_ feet \_\_\_\_\_ inches

Chest measurement { girth when fully expanded \_\_\_\_\_ ins.  
range of expansion \_\_\_\_\_ ins.

Complexion \_\_\_\_\_

Eyes \_\_\_\_\_

Hair \_\_\_\_\_

Trade \_\_\_\_\_

Intended place of residence (To be given as fully as practicable) \_\_\_\_\_

Descriptive marks.

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To	No.	DATE
M. of M.	<u>2009/08</u>	<u>26 JUL 1918</u>
O.C. 1ST. BN.		
" 2ND. BN.		

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of \_\_\_\_\_

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character :— \_\_\_\_\_

4. Character awarded in accordance with King's Regulations :— \_\_\_\_\_

To be filled in on the soldier quitting the Colours.

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067\* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to\*

\* Strike out if not applicable.



Medical Report on an Invalid.

Station Agapeley Down Camp  
 Date 8-7-18

1. Unit 2<sup>nd</sup> Batt. Royal Newfoundland  
 2. Regimental No. 2765  
 3. Rank Private  
 4. Name CRANE ARCHIBALD.  
 5. Age last birthday 23 years  
 6. Enlisted { on May 1916  
 at St. John's Newfoundland  
 7. Former Trade { Fisherman  
 or Occupation {

8. Disability.

Gasped + Mental Deficiency.

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 discuss cases entirely due to venereal disease.

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M. of M.	<u>12504/108</u>	<u>26 JUL 1918</u>
O.C. 1st. BN.		
" 2ND. BN.		

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.

He states that he went to France in Oct. 1916; whilst there he reported sick with various ailments about five times a week. He was gassed at Arras and later at Arras, and then taken down the line; being boarded at Rouen and disembarked P.B. He had Conjunctivitis.

12. (a) Give your opinion as to the causation of the disability.

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3).

Show of active service conditions

n.v.

On rejoining the depot he had a conjunctivitis which was treated: he cured as well as very well. He has complained of pain in stomach probably due to gas poisoning. He is mentally slow; and will not make an efficient soldier; and to service as required at depot.

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?

na.

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

If so—(a) When?

- (b) Where?
- (c) Opinion?

na.

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

na.

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

na.

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

na.

19. Do you recommend

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

Discharge as permanently unfit for Active Service

*M. R. C.*

Capt. R. A. C.

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.

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

# MEDICAL HISTORY

OF

Surname Crane

Christian Name Pedersen

Table I.—GENERAL TABLE.

Birthplace:—Parish \_\_\_\_\_

County \_\_\_\_\_

	SPECIAL RESERVE.		REGULAR ARMY	
	Right	Left	Right	Left
Examined	on 16 day of May 1911 at St. Johns Rpt. Fisherman		on _____ day of _____ 1911 at _____	
Declared Age	21 years 3 months		_____ years _____ days	
Trade or Occupation	Fisherman		_____	
Height	5 feet 6 inches		_____ feet _____ inches	
Weight	135 lbs.		_____ lbs.	
Chest Measurement	Girth when fully expanded... 37 1/2 inches		_____ inches	
	Range of expansion... 3 1/2 inches		_____ inches	
Physical Development	_____		_____	
Vaccination Marks	Arm	Left	Right	Left
	Number... 1		_____	
When Vaccinated	1 year ago		_____	
Vision	R.E.—V= 5/12		R.E.—V= _____	
	L.E.—V= 5/12		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)	L. M. Pedersen		_____	
(Rank)	Major		_____	
Enlisted	at St. Johns		at _____	
	on 16 day of May 1911		on _____ day of _____ 1911	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	1st Royal Regt 2768		_____	
Transferred to	_____		_____	
Became non-effective by	_____		_____	
(Signature)	_____		_____	
(Rank)	_____		_____	

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To	No.	DATE
M. O. M.	12004/08	26 JUL 1911
G. C. 1st Lt.		
2ND. DN.		



WILL. <sup>sub</sup>

Name

Crawe, A.

Regtl. No.

2765

Rai

P/S

Regiment

Date of:—

2/5/9

Receipt ...

Transfer ...

Final disposal and  
to whom sent ...

No. 2765 Name *Brone. Archibald* Sign. Name, or Company } *CB Corps 2/1 nfeld Rest.* Date of enlistment } *17-5-16* } c.c. Badges } Service or Proficiency Pay }  
 Date of last entry in Company Conduct Sheet } *6/7/16* } No. and date of last drunk } Period not reckoning towards freedom from extra fine } Sheet No. } Signature O.C. } *Sheddenham* } Character } *good Capt*

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
				<i>Re-joined Battalion 7.6.17</i>					
<i>Field</i>		<i>Pte.</i>							

*W. J. ...*  
 Army Form B. 159



1st. NEWFOUNDLAND REGIMENT

ALLOTMENTS

3 / Anchibaed Crane , Regl. No. 2765 <sup>10</sup>

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and 60 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup> <sub>or</sub> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> <sub>or</sub> Persons concerned, viz :

Allotment begins July 21 1916

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
21 25	Father	Mr W <sup>m</sup> Crane	Upper Island Cove C.B.	60
Commencing September 11/16				
Total Allotment, \$				

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

(Sig.) Chas. H. Cope Capt  
Officer Commanding  
Company 2nd  
John  
June 17 1916

(Sig.) Anchibaed Crane  
Private  
(Rank) Private

No. 2765 Rank Pfc Name Crane A

Pay	F.A.	Wkg	Total	N.F.P. 173 OK
1.00	.10		1.10	
Less Allotment			.60	
Net Rate			.50	

DEBITS	Date	£	s	d	CREDITS	Period		Days	Rate	£	s	d
						From	To					
Balance					Balance							
Acquittance Rolls		<del>10</del>	<del>1</del>	<del>8</del>	Pay @ Net Rate	<del>9/6/17</del>	<del>6/2/18</del>	21/12/17				<del>22</del> 7 11
Hospital Advances						<del>22/12/17</del>	<del>6/2/18</del>					
A.B. 64.	130	<del>10</del>	<del>15</del>	<del>4</del>		22/12/17	6/2/18	47	.50	23	50	4 16 7
P.&.R.O. Payments		4	15	4	Ration Allowance							1 4 6
		20	0	0	14 days 1/9	12/18	20/18	14	50	7	00	1 8 9
		70										
		20										
		10										
		5										
		25										
		<u>130</u>										

Cheque no  
V<sup>o</sup> 520118

Cash 5772 18/1/18

25-16-0

~~28-9-0~~  
~~4-15-4~~  
~~23-13-8~~

4-1-9

~~28-9-0~~  
29-17-9

OK  
PWA  
5/2/17



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. 719, 26/5/17.

Regt. No. 2268 Rank Otc Name Crane E Unit 2nd Bn R Newfoundland who was Repatriated  
Newfoundland on 20/7/18 Authority DO<sup>s</sup> Cause \_\_\_\_\_

STATEMENT OF ACCOUNT

9.6.18.20.7.18

PARTICULARS				PARTICULARS			
\$	s	d		\$	s	d	CR.
Balance Dr. from pay book			2 0 5	Balance Cr. from One Day Book			15 4
Allegation 42 days @ 60 <sup>s</sup>	25	20	5 3 7	Pay 42 days @ \$ 1.00	42	00	
Cash Payments:			10 0	Field Allow 42 days @ \$-10 <sup>s</sup>	4	20	
6/7/18			10 0	Other Allow days @ \$	46	20	9 9 10
13/7/18				Other Credits:			
Other Debits:							
Barrack Damages			6				
Min Stop.			2 5				
<b>Total Debits</b>			<b>11 18 3</b>	<b>Total Credits</b>			
Balance due by Paymaster	10	5	3	Balance due to Paymaster	6	10	5 2

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

Hayley Barracks Camp, Winchester 1918  
 (Place) 25/7/18 (Date)

COPY SENT TO  
 O.C. HQ  
 ST. JOHN'S  
 N.F.P.38. No. 12756  
 DATED 30 JUL 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.

Pay & Record



2765 P6. A. CRANE enlisted  
on 17.5.16 and claims that he  
only enlisted for 1 year - and he  
was allowed his discharge.

Please verify & inform me urgently.

This is very unsatisfactory these cases  
constantly occurring and I would  
request that a list be made  
for birth of all men still in the  
strength of the Regt who have only  
enlisted for 1 year & that I may  
be furnished with a copy of  
such list so as to be able to  
check at once when any of the  
men are sent out here.

2.9.17

A. L. Hadow.

To Pay & Record Office Rds.

Ref. attached correspondence, 27bs

Pte. A. Crane has waived any claim of his own re the duration of his service and wishes to serve for the duration of the war.

A. L. Hodson

LIEUT. COL.  
COMDR. 1st NEWFOUNDLAND REGT.

92-10-17

7

NEWFOUNDLAND REGIMENT
PAY & RECORD OFFICE
25 OCT 1917
<i>[Signature]</i>
File No.

"O" Form.

MESSAGES AND SIGNALS



Prefix *SM* Code *115* Words *17*

Received *FAZ* Sent, or put out, by *18* Stamp.

Charges to Collect

By *18*

Service Instructions  
*O.B.G.S. LONDON S.H.*

By *4/9/17*

Handed in at \_\_\_\_\_ Office \_\_\_\_\_ m. Received *1.29 p* m.

TO *COMDE. NFDJ. REPT.*  
*FRANCE*

* Sender's Number	Day of Month	In reply to Number	<i>AAA</i>
-------------------	--------------	--------------------	------------

<i>Reference yours 2nd inst.</i>			
<i>AAA</i>	<i>2765</i>	<i>brass enlisted</i>	
<i>for</i>	<i>duration</i>	<i>of</i>	<i>war</i>
<i>Name states that he is unaware of having signed on for duration.</i>			
<i>Agrees to serve for duration.</i>			
<i>[Signature]</i>		<i>19-10-17</i>	<i>R.H.J.</i>

FROM  
PLACE & TIME

*SYNOPTICAL.*

\* This line should be erased if not required.

In The field  
September 1917

Lieut. C. S. Strong  
Sir.



I wish to make application for my discharge, or transfer to the Newfoundland Royal Naval Reserve.

My reasons being as follows.

I am medically unfit for the work in the Army as my feet are bad, and I cannot stand the marching.

I may also state that the period of service for which I enlisted in the Newfoundland Regt. expired on May 16th 1917, having only enlisted for the period of 1 year commencing May 17th 1916.

I am, Sir

Your Obedient Servant.

2765 Archibald <sup>his</sup> Crane.  
mark.

Witness 1<sup>st</sup> W. E. James 2<sup>d</sup> Lt.

C. Butcher Sgt.

In the Field  
25 OCT 1917  
Sept 1 1917

To Adjutant.  
Newfoundland Regt.  
Sir:

Herewith please find application  
of 2765 Pte A. Craue for discharge  
or transfer to Newfoundland Royal  
Naval Reserve. This man applied  
to me for this before going onto the  
advance of Aug 16<sup>th</sup> and he stated that  
he wished to go into same but  
would like to have his wish  
granted afterwards. I brought  
the matter before Major Bernard M.C.  
who said he would look into <sup>it</sup> after  
the advance. I should like  
to have this attended to as the  
applicant is a very good soldier  
and done good work both during and  
after the advance.

I remain Sir

Your obedient servant,  
ES Stimpf 10626

No. 9276/144

**MEMORANDUM.**

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

To Officer Commanding,  
1/1 Newfoundland Regiment,  
B. E. F.

From

To

HT/NW

ANSWER.

Pay & Record Office,

7th September, 1917

No. 2765, PTE. A. CRANE  
& TERMS of ENLISTMENT.

Telegram No. 219, 6/9/17,

confirmed, please:

"Commanding Newfoundland Regt.,  
France.  
"Reference yours second inst.  
"aaa 2765 Crane enlisted for  
"duration of war.  
Synoptical."

With regard to list asked for  
by you in your memorandum 2/9/17,  
this is having due attention:  
meanwhile it would appear ~~that~~ from  
attestations in the possession of  
this office that all recruits from  
No. 2700 (6/5/16) onwards have  
enlisted for the duration of the  
war.

*H. A. Dineen* Major,  
Chief Paymaster & O. i/c Records.

191

10.1

**A S  
M**

**POST OFFICE TELEGRAPHS.  
FOREIGN AND COLONIAL TELEGRAMS ONLY.**  
(Telegrams for North America, Central America or West Indies excepted.)

Counter  
Number .....

Prefix.	Words.	Code.	Charge.			Sent	Date Stamp.
			£	s.	d.		
Office of Origin and Service Instructions.						At.....M.	<b>For Postage Stamps.</b> <i>To be affixed by the Sender. Any Stamp for which there is not room here should be affixed at the back of this form.</i> <i>(A Receipt for the Charges on this Telegram can be obtained, price One Penny.)</i>
						To.....	
						By.....	

**Notice.**—The following Telegram is accepted by the Postmaster-General for transmission subject to the Regulations as to Foreign Telegrams made pursuant to the Telegraph Acts, 1863 to 1911, provided that the *Request* at the foot of the Telegram is previously signed by the Sender.

The **Sender's Name** and **Address**, or either of them, *if to be telegraphed*, must be written at the end of the text of the Telegram.

**TO**

COMMANDING NEWFOUNDLAND REGIMENT  
  
FRANCE

219  
8/9/17

~~REFERENCE YOURS SECOND INST AAA 2765 CRANE ENLISTED FOR  
DURATION OF WAR~~

*Synoptical.*

I request that the above Telegram may be forwarded [via\*.....] subject to the Conditions which are printed on the back hereof, and by which I agree to be bound.

Signature and Address of Sender (*not to be telegraphed*)..... **58 Victoria St. S.W. I**

\* This space is to be filled up only if there are alternative routes. For routes, see the Table of Charges for Foreign Telegrams in the Post Office Guide.



Pay & Record Office

2765 Pfc. A. CRANE, enlisted  
on 17.5.16 and claims that he  
only enlisted for 1 year - and he  
now claims his discharge.

Please verify & inform me urgently.

It is very unsatisfactory these cases  
constantly occurring, and I would  
request that a list be made  
forthwith of all men still on the  
strength of the Regt who have only  
enlisted for 1 year & that I may  
be furnished with a copy of  
such list, so as to be able to  
check at once when any of the  
men are sent out here.

2.9.17

A. L. Hadow.

1ST NEWFOUNDLAND REG'T COI.
COMD <sup>g</sup> 1st BRAY NEWFOUNDLAND REG'T
Ref. No. 4908
Rec'd. SEP - 6 1917
Ack'd. ✓
Ans'd. ✓
File No.

9276/144

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

Officer Commanding,  
1/1 Newfoundland Regiment,  
B. E. F.

HT/NW

Pay & Record Office,

7th September, 7

No. 2765, PTE. A. CRANE  
& TERMS OF ENLISTMENT.

Telegram No. 219, 6/9/17,

confirmed, please:

"Commanding Newfoundland Regt.,  
France.

"Reference yours second inst.

"aaa 2765 Crane enlisted for

"duration of war.

Synoptical."

With regard to list asked for  
by you in your memorandum 2/9/17,  
this is having due attention:  
meanwhile it would appear ~~that~~ from  
attestations in the possession of  
this office that all recruits from  
No. 2700 (6/5/16) onwards have  
enlisted for the duration of the  
war.

Major,  
Chief Paymaster & O. i/c Records.

No. 2765 Rank Pte Name Gravel A.

Pay	F.A.	Wkg	Total	N.F.P/53
100	10		110	
Less Allotment			60	
Net Rate			50	

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£ s d					
		From	To	£		s	d			£	s	d	£	s	d
Balance					Balance	21 <sup>12</sup> / <sub>7</sub>						22	7	11	✓
Aequittance Rolls	10	14			Pay @ Net Rate	22 <sup>12</sup> / <sub>7</sub>	8 <sup>6</sup> / <sub>18</sub>	169	50	84	50	17	7	3	✓
Hospital Advances															
A-B. 64.															
P.&-R.O. Payments		21	0	0	R.E.Z. National Allie							1	4	6	✓
keeper payment				10											
37-4-5	8 <sup>6</sup> / <sub>18</sub>	8	10	0	8-15-3 ✓										
37-4-5															

39-18-2 ✓  
40-19-8 ✓

*[Handwritten signature]*  
8/1/18

C.R. 2765

Extract from Nominal Roll of Mfld. Regt. Embarked  
Southampton, 30-11-18 from 2nd Bn. Depot, to 1st Bn.  
B.E.F. ~~Embarked Southampton~~ Draft No.14.

2765 Pte. A. Crane.

C.R. 2765

RECEIVED FROM DEPARTMENT OF MILITIA

ONE PACKAGE CONTAINING EFFECTS OF NO. 2765  
PER. ARCH CRANE

SIGNED.....*William Crane*

DATE.....*Nov 29th 1918*

No. 314

Received from

Received a Registered Postal Packet addressed as on the Receipt Form bearing the above No.

Office }  
Stamp }

**A REGISTERED POSTAL PACKET**

Addressed—

*W. Crane R-208*  
*W. Crane*

Received a Registered Postal Packet addressed as above... }

C.R. 2765

Nov. 16th. 18.

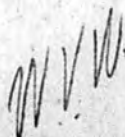
Mr. William Crane,  
Upper Island Cove.

Dear Sir:-

I am forwarding you by registered post  
one package which belongs to your son #2765 Private  
Arch. Crane of the Royal Newfoundland Regiment, which  
arrived this week by S.S. Rasbergen "*Risabergen*"

I am enclosing herewith receipt. Will  
you kindly sign same and return at your earliest con-  
venience.


Yours faithfully,



Lieut.

Casualty Officer.

No. of Paper 685-**PERSONAL EFFECTS.**Name Brane A **C.R.** No. 2765-  
Rank Pte. Regiment THE ROYAL NEWFOUNDLAND REGT.

Article	Where stored.	Notified by
1 Pocket Book		
Final disposal		
Sent to Mr. John Brane Upper Island Cove.		

Remarks :—

*Repatriated*



C.R. 2765

Extract from Daily Orders West 11 Unit The Royal Rifles.  
St. John's, Sept. 21st/18

2765 Pte. A Crane

Having been found medically unfit is discharged from 5-9-18.

C.R. 2765

Extract from list of men of the Royal Newfoundland Regiment  
discharged on various dates.

2765 Pte. A. Crane,

Discharged 5 - 9 - 18, <sub>m</sub>edically unfit

C.R. 2765

Extract from Daily Orders Part II Unit The Royal Nfld.  
Regt. St. John's, Dated August 19, 1918.

2765 Pte. A. Crane.

Returned from leave and reported at Headquarters for  
Duty 18-8-18.

C.R. 2765

Extract from Daily Orders part 11, from Unit The Royal,  
Mfld. Reg. St. John's, dated August 5, 1918.

The following man returned from overseas and reported  
at Depot August 4th, 1918.

#2765 Pte. A. Crane.

C.R. 2765

Extract from Daily Orders part 11, from Unit The Royal Nfld.  
Regt. In the field, dated 8-6-18

#2765 Pte. A. Crane.

Transferred to England Classified "B" 31-5-18

C.R. 2765

Extract of Orders Part II by Lt. Col., R.A. Bowers, D.S.O. ~~for~~ Commanding  
Bn., Royal Newfoundland Regiment, dated 2/6/18.

The following having reported back from the 1st. Battalion is posted to "H"  
Company from 2/6/18 :

2765 Pte. Cron.



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

C.R. 2765

WINCHESTER RECORD OFFICE:

No. H.A. 23199.

Dis. to 5 Rest Camp, St. Martins, Boulogne ex 10 Con Dep. 7 May. 18.

735149 Pte Maton H.J.....	47 MGC.x 8 Londs.
205624 Pte Johnson G.....	13.K.R.R.
423901 Pte Stokes.G.H.....	15.R.B.
2780 Pte West E.....	17.KRR.
9313 Pte Atkins.J.....	18 "
17297 Pte King.R.E.....	19 MGC.x 4 R.Bde.
6400 CSM Elsbury H.....	19 " x do.

Dis to Base Dep. Henriville ex 10 Con Dep. 7 May. 18.

209179 Pte Sorrell. H.R.....	133.L ab.Co.x 20 KRR.
98276 Pte Wilosen J.H.....	164 Lab Co.x 6 Londs.

Dis to 5 Rest Camp, St. Martins, Boulogne ex 10 Con Dep. 7 May. 18.

5739 Pte Parker.W.....13.R.B.

1091

C O R K: RECORD OFFICE:

No. H.A. 23199.

Dis. to 5 Rest Camp, St. Martins, Boulogne ex 10 Con Dep. 7 May. 18.

6362 Pte McInerney M.....5 R.Muns. Fuars

N E W . F O U N D L A N D . E X P E D I T I O N A R Y . F O R C E :

No. H.A. 23199.

Dis. to 5 Rest Camp, St. Martins, Boulogne ex 10 Con Dep. 7 May. 18.

X 2765 Pte Crane.A.....1 Newfoundland.

C.R. 2765

SICK AND WOUNDED H:C:Q'S AND MEN OF THE EXPEDITIONARY FORCE - FRANCE

INFANTRY RECORD OFFICE - HAMILTON.

NO. H. A. 23034.

Dis. to No. 5 Rest Camp St. Martins ex 10 Con. Dep. 4 May '18.

51087.	Pte. Ralston W.	15	R. Scots.
31594.	" Thornhill J.	6	KOSB.
54241.	Pte. Steadman R.	9	R. Scots.
28688.	" Owens J. 'M'	1	" Fus.
51665.	" Lamont	12	"
31514.	" Swift E.	6	KOSB.
47774.	" White T.		R Scots Fus.
35428.	" Campbell A. (T)	18	H.L.I.
47782.	" Barrie G.	11	R. Scots
41158.	" Waite T. (D)	3	Res. R. Scots.
43077.	" Turner G.	7/8	KOSB.
40782.	Pte. Barbour W.	10	Scot. Rfls.
27652.	L/C. Scott W.	10	R. Scots.
201851.	Pte. Nicholson J.	2	"
51363.	" Walker W.	16	"
375887.	" Wilson S.	13	"
30577.	Dvr. Ward F.	6	KOSB att ABC 58/FA.
3350.	Pte. Topham T.	1/9	R. Scots.
59698.	" Jackson J.	16	"
49949.	Pte. Hutchinson W.	10	"

1058



NEWFOUNDLAND EXPEDITIONARY FORCE

NO. H. A. 23034.

Adm. 10 Con. Dep. Escault 4 May '18.

2765. Pte. Crane A. "B".... 1 Newfld..... Myalgia. Mild.

Dis. to No. 5 Rest Camp St Martins ex 10 Con. Dep. 4 May '18.

3811.	Pte. Manuel S. (D)	1	Newfld.
3610.	" Soley A. (R)	1	R.
3485.	L/C. Plowman A.	1	"



C.R. 2765 ✓

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

ROYAL GARRISON ARTILLERY.

LIST No. H.A. 17305.

174749	Gnr. Clay, B.	RA.108	Sge.Bty.	P.U.O. Mild.	Adm.12	Gen.H. Rouen 10th Dec'17.
171238	" Waters, B.	do.278	do.	Crushed Foot Rt. acc. Mild.	Adm.12	Gen.H. Rouen 10th Dec'17.
174145	" Morris, F.	do.108	do.	ICT.L.Hand Mild.	Adm.12	Gen.H. Rouen 10th Dec'17.
73918	" Cooke, A.E.	do.126	do.	Abscess Arm Rt. Mild.	Adm.12	Gen.H. Rouen 10th Dec'17.
73918	" Cooke, A.E.	do.126	do.	Abscess Rt.Arm do.	Dis:to	Con.Dep.ex.12 Gen.H.Rouen 10th Dec'17.
36306	" McGuire, J.	do. 46	do.	ICT.Neck Mild.	Adm.9	(Lakeside U.S.A.) Gen.H.Rouen 10th Dec'17.
277920	" Powe, J.	do.109	Hvy.Bty.	Nyalgia Mild.	Adm.9	(Lakeside U.S.A.) Gen.H.Rouen 10th Dec'17.
161897	" Johnson, W.	do.144	Sge.Bty.	Influenza Sev.	Adm.9	(Lakeside U.S.A.) Gen.H.Rouen 10th Dec'17.
73263	" Notton, W.	do.160	do.	Int.Der.Jt.Knee R.Mld.	Adm.9	(Lakeside U.S.A.) Gen.H.Rouen 10th Dec'17.

ROYAL ENGINEERS.

LIST No. H.A. 17305.

168174	Dvr. Slack, T.H.	RE.476	Fd.Coy.	Tonsillitis Mild.	Adm.12	Gen.H. Rouen 10th Dec'17.
295533	Cpl. Neale, A.	RE.710	Labour Coy.	Piles, bleeding Mild.	Adm.12	Gen.H. Rouen 10th Dec'17.
494921	Dvr. Pillinger, H.	RE.479	Fld.Coy.	ICT.Neck Mild.	Adm.12	Gen.H. Rouen 10th Dec'17.
156466	Spr. Atkinson, G.	RE.181	Tun.Coy.	Impetigo Mild.	Adm.12	Gen.H. Rouen 10th Dec'17.
184387	" Whiteley, H.A.	RE.69th	Fd.Coy.	ICT.Heels Mild.	Adm.12	Gen.H. Rouen 10th Dec'17.
324475	Pte. Nurton, W.	1/9 London R. att.		Rheumatism Mild.	Adm.12	Gen.H. Rouen 10th Dec'17.
		RE.513	Fd.Coy.			
402908	Spr. Wright, J.	RE.478	Fd.Coy.	Defective vision Mld.	Dis:to	Con.Dep.ex.12 Gen.H.Rouen 10th Dec'17.
56206	" Bowen, C.	RE.24	Div.Sigs.	Acc.Eff.Heat (Burns Face & Hands Sev.)	Adm.9	(Lakeside U.S.A.) Gen.H.Rouen 10th Dec'17.
402721	" Begg, W.	RE.126	Fld.Co.	P.O.U.O. Mild.	Adm.9	(Lakeside U.S.A.) Gen.H.Rouen 10th Dec'17.
141895	" Carters, G.	RE.281	Army Troop Coy.	ICT.Finger R. Mild.	Adm.9	(Lakeside U.S.A.) Gen.H.Rouen 10th Dec'17.
16772	Pte. Stanton, W.	3-Rifle Bde.att.		ICT.Leg L. Mild.	Adm.9	(Lakeside U.S.A.) Gen.H.Rouen 10th Dec'17.
		RE.180	T.C.			
293393	" Cross, J.	RE.706	Labour Co.	Conjunctivitis Mild.	Adm.7	Gen.H. St.Omer 10th Dec'17.
43240	" Wheatley, H.	2/4 KOYLIG att RE		Pyrexia Mild.	Adm.12	Gen H.Rouen 10th Dec'17.
		461	Fd Co.			

NEWFOUNDLAND EXPEDITIONARY FORCE.

LIST No. H.A. 17305.

2765	Pte. Crane, A.	1-Newfoundland B.	ICT.L.Heel Mild.	Adm.12	Gen.H. Rouen 10th Dec'17.
------	----------------	-------------------	------------------	--------	---------------------------



2766

C.R. 2765

Extract from Casualties received from pay & Record Office,  
London, dated May 10, 1918.

#2765 Pte. A. Crane

Wounded...Admitted 1st Convalescent Depot, Boulogne 2nd May 1918.

CR 2765

Extract of Casualty received from Pay & Record Office, London,  
dated 7th May 1918.

2765 Pte. A. Crane

Admitted 14 Gen. Hosp. Wimereux 28th April 1918.

P. U. O. Mild.

C.R. 2765

Extract of Casualties received from Pay & Record Office  
London, dated February 2, 1918.

#2765 Pte. J. Crans.

Dis. to Base Dep. Rouen, Class "A" ex 11 Con. Dep.  
January 24, 1918.

C.R.

2765

Extract of Casualties received from Pay & Record  
Office, London, dated December 18, 1917.

#2765 Pte. A. Crane. ✓

ICT. Heel L.

Admitted 2 Con.Dep. Rouen, ex 12th General  
Hospital, December 12, 1917.

C.R. 2765

Extract from List of Sick and Wounded N.C.Os. and Men of  
the Expeditionary Force - France, dated 18th. Dec. 1917.

List No: H.A. 17375.

2765 Pte. A. Crane

1 Newfoundland..... ICT. Heel L. ....Adm. 2 Gen. Dep.  
Reven ex 12 Gen. Hes. 12 Dec. 1917.

C.R. 2765

Barbara from Central Hall Embarked St. John's for Overseas,  
30/8/16.

2765 Pte. A. Crane.

C.R. 2765

**Archibald Crane** was attested for General service  
with the NEWFOUNDLAND REGIMENT on **May 17th. 1916**  
Regimental No **2765** was allotted to Pte. **A. Crane**

AUTHORITY:

Record Ledger,

Depts of Militia,

March 25th. 1919.





C.R. 2765

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

A U S T R A L I A N I M P E R I A L F O R C E . LIST NO. H.A. 18308.

3037/A Pte. Darymple, E.	2/AIF.	Scabies.....	Adm.11	Con.Dep. Buchy	ex 2	Con. Dep. 2 Jan. 18.
24575 BSM. Gilbert, W.	Aust. FA. 3/DAC.	Myalgia.....	Adm.11	Con. Dep. Buchy	ex 2	Con. Dep. 2 Jan. 18.
5641 Dvr. Solomon, J.	Aust. Eng. 4/Dvn.	ICT. Heel L.....	Adm.11	Con. Dep. Buchy	ex 2	Con. Dep. 2 Jan. 18.
	Sigs.					
8949 Pte. Hayner, E.	Aust. Med. C.12	Tinia.....	Adm.11	Con. Dep. Buchy	ex 2	Con. Dep. 2 Jan. 18.
	Fld. Amb.					

C A N A D I A N E X P E D I T I O N A R Y F O R C E . LIST NO. H.A. 18308.

472536 Spr. Atkinson, W.	5/Can. Rly. Tps.	DAH.....	Adm.11	Con. Dep. Buchy	ex 2	Con. Dep. 2 Jan. 18.
727348 Pte. Fingle, A.	4/Can. MR.	Dis. to Base		Dep. Etaples Cl. A.	ex 11	Con. Dep. 14 Dec. 17.

N E W F O U N D L A N D E X P E D I T I O N A R Y F O R C E . LIST NO. H.A. 18308.

2765 Pte. Crane, A.	1/Newf.	ICT. Heel L.....	Adm.11	Con. Dep. Buchy	ex 2	Con. Dep. 2 Jan. 18.
---------------------	---------	------------------	--------	-----------------	------	----------------------

M A C H I N E G U N C O R P S . LIST NO. H.A. 18308.

23840 Pte. Huggan, F.	MGC. 166/Co.	Dis. to Base		Dep. Etaples Cl. A.	ex 11	Con. Dep. 4 Jan. 18.
29042 Pte. Lambert, J.	LGC. 121/Co.	Dis. to Base		Dep. Etaples Cl. A.	ex 11	Con. Dep. 4 Jan. 18.
39009 Cpl. Etchells, G.	MGC. 32/Co.	Dis. to Base		Dep. Etaples Cl. A.	ex 11	Con. Dep. 4 Jan. 18.
87824 Pte. Youngs, F.	MGC. 93/Co.	Dis. to Base		Dep. Etaples Cl. A.	ex 11	Con. Dep. 4 Jan. 18.
67916 Pte. Heath, A.	200/Co. MGC.	ICT. Thighs.....	Adm.11	Con. Dep. Buchy	ex 2	Con. Dep. 2 Jan. 18.
200419 L/C. Yelland, F.	Tank Corps. B.	Dis. to Base		Dep. Erin Cl. A.	ex 11	Con. Dep. 4 Jan. 18.
	Btn.					
202045 L/C. Dalton, H.	Tank Corp. H.	Dis. to Base		Dep. Erin Cl. A.	ex 11	Con. Dep. 4 Jan. 18.
	Btn.					
68414 Pte. Dobson, H.	MGC. 107/Co.	Impetigo.....	Adm.11	Con. Dep. Buchy	ex 2	Con. Dep. 2 Jan. 18.

99

2765

name, a.

Pay Dept

*Copy*

This space to be left blank for the Chelsea Number.

[Blank box for Chelsea Number]

**COPY**



### Proceedings on Discharge

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. <u>2765</u>	Army Rank <u>Private</u>
Name <u>Crane Archibald</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
Corps <u>ROYAL NEWFOUNDLAND REGIMENT.</u>	
Battalion, Battery, Company, Depôt, &c. <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &amp;c., or to General Staff of the Army, it should be so stated.)</small>	
Date of discharge <u>September 5<sup>th</sup> 1918</u>	
Place of discharge <u>St. John's, Nfld.</u>	
1. <u>22</u> Description at the time of discharge.	
Age <u>22</u> years <u>8</u> months Height <u>5</u> feet <u>7</u> inches Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins. Complexion <u>fair</u> Eyes <u>blue</u> Hair <u>light</u> Trade <u>Fisherman</u> Intended place of residence <u>Upper Sid Cove</u> (To be given as fully as practicable) <u>White Island Nfld.</u>	Descriptive marks.
2. The above-named man is discharged in consequence of <u>being no longer physically fit for war service.</u>	
<small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small>	
3. Military character:— <hr/>	
4. Character awarded in accordance with King's Regulations:— <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	
<small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small>	
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.	
_____ Initials of Commanding Officer.	
Army Form B. 2088 has been issued to* _____	

To be filled in on the soldier quitting the Colours.

\* Strike out if not applicable.

[OVER.]

LAST PAY CERTIFICATE

**ORIGINAL.**

To be rendered for all ranks on discharge, transfer to other Units, or on return to Newfoundland in accordance with C.L. 119, 26/5/17.

Regt. No. 2965 Rank Pte. Name Cram E Unit 2/6 R. Nfld. who was Repratriated  
Nfld. on 20/7/18. Authority D.O. Cause \_\_\_\_\_

STATEMENT OF ACCOUNT

PARTICULARS	P A R T I C U L A R S					P A R T I C U L A R S	£	S	D	P	C R.
	£	S	D	P	£						
Balance Dr. from <u>Pay Book</u>			12	0	5	Balance Cr. from <u>Pay Book</u>	142	00		15	4
Allotment 42 days @ 60	25	20	15	3	7	Pay 42 days @ \$100.	4	20			
Cash Payments: <u>6/7/18</u> <u>13/7/18</u>				10	0	Field Allow <u>42</u> days @ \$10	44	20		9	9
Other Debits: <u>Barrack Damages</u> <u>Miss. Stoh</u>				10	0	Other Allow <u>    </u> days @ \$					
					6	Other Credits:					
				2	5	Total Credits				10	5
Total Debits			11	18	3	Balance due to Paymaster				1	10
Balance due by Paymaster			11	18	3						

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

N. Down Camp, Wiscateer 191  
 (Place) 25/7/18 (Date)

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,  
27 JUL 1918 191

*Oh/201*

\_\_\_\_\_  
 O.C. \_\_\_\_\_  
 Chief Paymaster & Officer i/c Records.

ROYAL NEWFOUNDLAND REG  
 to 30/08/1918



## 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 *Ernest Archibald*  
 Regiment from which discharged *1st. Newfoundland*  
 Regimental number *2765*  
 Intended address *upper Island Cove. G. B.*  
 Height on discharge *5* Feet *7*  
 Color of hair on discharge *Light*  
 Complexion *Fair*  
 Color of eyes *Blue*  
 Descriptive Marks —  
 Figure on discharge *medium*  
 Christian name of Father *William*  
 Christian name of Mother *Mary*  
 Wife's maiden name in full *Libra*  
 Date and place of marriage *St John's*  
 Christian names of children *John*  
 Place and date of soldier's birth. *upper Island Cove. Dec. 20<sup>th</sup> 1895.*  
 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) *Ernest Archibald*  
*mark*

(Rank) *Pte.*

Station *St John's*

Date *Aug. 19<sup>th</sup> 1918.*

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.

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

Station *St John's*

Date *Aug 20<sup>th</sup> 1918*

copy.

Army Form B. 103.

Regimental Number 2765

**Casualty Form—Active Service.**

Regiment or Corps ROYAL NEWFOUNDLAND REGIMENT

Rank Pte Surname Crane Christian Name Archibald

Religion C of E Age on Enlistment 25 years 3 months

Enlisted (a) St Johns Terms of Service (a) Amputation Service reckons from (a) 17/5/16

Date of promotion to present rank ..... Date of appointment to lance rank .....

Extended { ..... } Re-engaged { ..... } Qualification (b) .....  
or Corps Trade and Rate .....

Occupation ..... Signature of Officer .....



COPY

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked	<u>Shampton</u>	<u>30/11/16</u>	
		Disembarked	<u>Rouen</u>	<u>1/2/16</u>	
		<u>Joined Battalion</u>	<u>France</u>	<u>12/2/16</u>	<u>B213</u>
		<u>Wth</u>	<u>"</u>	<u>23/1/17</u>	
<u>25/4/14</u>	<u>OC Unit</u>	<u>Wounded in Action</u>	<u>France</u>	<u>23/4/17</u>	<u>B213</u>
<u>28/4/17</u>	<u>87 FA</u>	<u>Advtions GSW Head</u>	<u>8 CCS</u>	<u>23/4/17</u>	<u>ED 3703</u>
<u>4/5/17</u>	<u>18 G Corp</u>	<u>Ad GSW Head</u>	<u>Dannes Camiers</u>	<u>24/4/17</u>	<u>HA 8935</u>
<u>13/5/17</u>	<u>290 B D</u>	<u>Joined Base Depot</u>	<u>Rouen</u>	<u>12/5/17</u>	<u>Home Roll</u>
<u>9/6/17</u>	<u>OC Unit</u>	<u>Joined Battalion</u>	<u>In the field</u>	<u>7/6/17</u>	<u>B213</u>
<u>2/12/17</u>	<u>62 FA</u>	<u>Ad I.C.T. Kneel</u>	<u>France</u>	<u>29/11/17</u>	<u>ED 4316</u>
	<u>56 CCS</u>	<u>" I.C.T. Kneel</u>	<u>"</u>	<u>9/12/17</u>	<u>ED 4666</u>
	<u>12 Gen Hq</u>	<u>" do</u>	<u>Rouen</u>	<u>10/12/17</u>	<u>HA 17305</u>

(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.

(b) Signaller, Shoeing-Smith, &c.

# 2765 Pte Crane A.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
	2 Con Dep	Adm. Lt T Seel L	Rouen	12/12/17	HA 17375
	"D" IBD	Joint Base Depot	Rouen	24/1/18	Roll
	"D"	Leave to UK from 5-2-18 to	20-2-18		Roll 5/2/18
28/4/18	19 FA	Adm. (Typh pyrexia)	—	27/4/18	ED 808
27/4/18	13 CES	Adm. (Typh pyrexia)	—	27/4/18	A'36
	14 GA	Adm. PUO mild	Wimereux	28/4/18	HA 22715
4/5/18	1 CD	Adm. (wounded)	—	2/5/18	W3091 HA 22873
"	10 CD	— Myalgia mild	Ecault	4/5/18	HA 23034
12/5/18	D IBD	Quined	Rouen	11/5/18	Roll
21/5/18	—	To M B B A	—	20/5/18	—
31/5/18	2 M B A	To England (Classified "B")	Rouen	31/5/18	Memo No 41942/1-6-18

(Sgd) H L Filgate  
 Major Gen  
 O/C No 1 Infy Section  
 GHA 3rd Echelon.

## ROYAL NEWFOUNDLAND REGIMENT

(Separation Allowance Branch)

NOTICE:

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

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

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

1. Name in full of soldier. Rank. Regt. or Unit. Regt. No.  
*Archibald Crane. Private Newfoundland Regt. 2765*
2. Age of soldier. Married or single.  
*28 Years Married*
3. Name in full of mother. Age Occupation. Permanent Address  
*Mary Jane Crane 61 Housewife Grand Cove Road  
St. John's, Nfld.*
4. Give name of your husband. Age. Occupation. Where employed  
*William Crane 63 <sup>none</sup> <sub>Cultivates some and works about his land</sub> At Home*
5. If your husband is not supporting you, state the reason *Unable to work, and nearly blind.*
6. If your husband is a chronic invalid and totally incapacitated, state nature of malady (A Medical certificate must be enclosed with this document, stating from date husband has been totally incapacitated and for how long incapacity is likely to continue) *No.*
7. If you are a widow, state date and place of death of your husband *No; husband living*
8. Have you married again since death of above mentioned husband *Not a widow.*
9. Names of your other children. Address in full. Age. Occupation. Married or single.  
*Mary Horst  
James Crane  
H. Crane. P.M.  
Eveline, Riverhead, N. S. <sup>30</sup> Years - Married  
Have not heard from her 35  
for 17 years.*



10. State amount earned by (a) Yourself *nothing; called*  
(b) Your husband.
- 
11. State amount and source of any other *nothing*  
income.
- 
12. State value of real property belonging to you and your husband. *Home and lot one  
year, no value*
- 
13. State value of personal property belonging to you and your husband *nothing*
- 
14. If husband is dead, state value of real and personal property left by him - *husband's child.*
- 
15. Actual amount contributed by soldier during the year previous to enlistment *\$200 - worked on Belle Isle*
- 
16. Was this amount contributed weekly or monthly. *Monthly.*
- 
17. Did this amount include payment of son's board etc. *No.*
- 
18. State your son's trade or occupation prior to enlistment *Miner on Belle Isle*
- 
19. State amount of his wages per <sup>month</sup> week. - *\$30 & \$40 a month*
- 
20. State name and address of his last employer *De. G. & J. Co. Belle Isle*
- 
21. State amount of monthly support from son since enlistment. } *\$18 a month was contributed of him for support of home, including his wife's support.*
- 
22. State amount of allotment received by you from son monthly. *\$18.*
- 
23. State from what date did you receive allotment *Two years last spring.*
- 
24. Actual amount contributed by other children. Weekly. Monthly.  
*Nothing*
- 
25. Are any of these children in the employ of you or husband. *No.*

26. If not receiving support from other children state cause. Explain fully. *In laughter has a family. She on a conscription board -*
- 
27. With whom are you residing at present *husband, 17 years*  
*Husband, 17 years*
- 
28. Have you made a previous claim for Separation Allowance? If not, why? Give particulars. *No.*
- 
29. Are you already in receipt of Separation Allowance from any source? If so, how much? *No.*
- 
30. Are you in receipt of any payment from any Patriotic Fund? If so, how much? *No.*
- 
31. Was the soldier at the time of his enlistment an employee of the Nfld. Government *No.*
- 
32. In what capacity and in what place? *None*
- 
33. Is he in receipt of a ~~xxx~~ salary as such while serving in the Royal Newfoundland Regiment If so, how much? *No.*

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

Signature of applicant..... *William Grace*

Place of residence..... *St. John's, Nfld.*

Declared and subscribed before me at..... *St. John's, Nfld.*

this..... *17*..... day of *September*..... 191*8*.

Signature of Barrister of the Supreme Court, stipendiary magistrate, Notary Public or Justice of the Peace. }..... *William A. O'Keefe*

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

Signature of Clergyman... *(Rev.) E. E. Reated. Upper Island Cove*

Signature of Member of Patriotic Fund Committee. ).....

April 15, 1919

#2765 Pte. Archibald Crane,

Upper Island Cove, U.B.

Dear Sir:

I enclose cheque for Seventy dollars (\$70.00),  
being amount of second payment due you on account of the  
"War Service Gratuity."

Yours truly

Captain  
Paymaster & C.i/c Records

13526

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 *Archibald* 2. Surname *Crane*

3. Rank *Pte.* 4. Regtl. No. *2765*

5. Address in full to which future payments of gratuity are to be forwarded *Upper Island Cove, C. B.*

6. Date of enlistment in the Regiment *May 17/16*

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

*No*

8. Relationship of such dependents

9. Address in full of such dependent

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

*Overseas*

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

*from May 17/16 to*

*Sept 5/18*

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

*Yes, Royal Naval Reserve, Feb. 2/15*

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.....

*Clothing allowance \$60 -  
P.N.R. 86.40*

15. Have you been issued with a War Service Badge?.....

*Yes*

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

*No*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.....

*No*

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

*No*

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

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

*Sept 5/18*

*Physical Unfitness*

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.....

*North Sea, The S. Lancer - Patrol,  
France & Belgium - at Nonchey, Cambrai,  
Ginchy, at Mentores, Sourenil, No*

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

(b). If (a), are you in receipt of full pay and allowances from that Committee.....

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

his  
X Copue

Signature of Applicant:

Archibald ~~Smith~~

Place of Residence:

Upper Island Cove, C.B.

Declared before me at:

H. John's, Ufed.

This

13th

day of

March 1919

John H. [Signature]

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
.....	.....	.....	5 mos.	350.00
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
Certified Correct.			Paymaster.	



**DEPARTMENT OF MILITIA**

**ST. JOHN'S, NEWFOUNDLAND**

**March 22, 1919**


**Mrs Deborah Davis,  
St. Mary's.**

**Dear Madam:-**

**Referring to your application  
I enclose cheque for Two hundred and seventy  
nine dollars and Thirty-three cents (\$279.33),  
in payment of retroactive Separation Allowance.  
together with Marriage Certificate**

**Yours truly,**

**Captain,  
Paymaster & O.i/c Records**

  
Royal Newfoundland Regiment  
 (Separation Allowance Branch.)  
 (Information for Board of Review.)

NOTICE:

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

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

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

1. Name in full of soldier. Rank. Regt. or Unit. Regt. No.  
*Archibald Crane Pte Royal Newfoundland Regiment 2765*

---

2. Age of soldier. Married or Single.  
*22 years 8 months Married*

---

3. Name in full of wife. *Reborah Davis*

---

4. Address in full. *St Marys. ~~Street~~ or  
 Pleasant and St Marys.*

---

5. Date of Marriage. *July 2: 1916*

---

6. Place of Marriage. *St Johns Nfld.  
 Albert Street Accewith*

---

7. Did marriage take place since soldier's enlistment *yes.*

---

8. Was Commanding Officer's permission obtained? If not, why? *yes.  
 Consent was given verbally over telephone of Capt. J. O. Brady*

---

9. If not married, how long have you been dependent on the soldier for your maintenance, and supported regularly by him on a bona fide permanent domestic basis? \_\_\_\_\_

---

10. Were you living with your husband immediately prior to his enlistment? If not, how long have you been separated. \_\_\_\_\_



11. Is Separation a legal one? \_\_\_\_\_
- 
12. If legal are you in receipt of Alimony? If so, state amount? \_\_\_\_\_
- 
13. If not legal, how long since your husband contributed to your support? Explain fully \_\_\_\_\_
- 
14. State amount of allotment received by you from soldier monthly? *\$ 18<sup>00</sup> per month*
- 
15. From what date have you received Allotment. *September 1916*
- 
- | 16. Names of children. | Age last Birthday. | Names of children | Age last Birthday. |
|------------------------|--------------------|-------------------|--------------------|
| <i>John Crane</i>      | <i>2 years</i>     |                   |                    |
- 
17. Are you already in receipt of Separation Allowance from any source? If so, state amount *no*
- 
18. Are you in receipt of payment from any Patriotic Fund? If so, how much? *no*
- 
19. Have you made a previous claim for Separation Allowance? If not, why? Give particulars. *yes*
- 
20. Was your husband at the time of his enlistment an employee of the Nfld. Government? *no*
- 
21. In what capacity and in what place. \_\_\_\_\_
- 
22. Is he in receipt of a salary as such while serving in the Nfld. Regiment, If so, how much? \_\_\_\_\_

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

Signature of Applicant ..... *Arthur J. Crane*

Place of Residence ..... *Waterside Upper Island Ave.*

Declared and subscribed before me at ..... *Waterside Upper Island Ave.*

this ..... *18th* day of ..... *March* 1919

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace. .... *William A. O'Keefe*

This application must be signed by two responsible parties one of whom must be a clergyman, the other a representative of your Local Patriotic Fund Committee, certifying that to the best of their knowledge, after careful enquiry, the above statements are correct.

Signature of Clergyman ..... *E. E. Rusted* ..... *Upper Island Ave.*

Signature of Member of Patriotic Fund Committee ..... *Ernest Jones*

N.B.

Marriage certificate must accompany this application, and will be returned after perusal. If marriage is after enlistment, Commanding Officer's permission in writing must be forwarded.

The Rectory  
Upper Island Cove  
Sept. 19. 1918.

Dear Sir

Some time ago I wrote you asking that the separation allowance be granted the wife & child of 2765 Pte Archibald Crane of the Newfoundland Regiment. He was married at St Johns the third day of July 1916. with permission of Major Montgomerie. The child was born April 1<sup>st</sup> 1917.

I did not reply before as we were trying to get permission from the Son for the money to be paid to his wife - as up to the time of writing the money allotted by Crane was in favour of his parents. Crane has since returned home <sup>been</sup> given this discharge, being wounded twice & gassed, & unfit for further active service.

The money due his wife & child can be sent to Pte Archibald Crane, 2765. Upper Island Cove.

I am returning the form you sent filled in.

Yours faithfully

E. E. Bessley

The reason Crane's wife did not apply for the allowance was she knew nothing of it.



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

3/ I, Archibald Crane, Regl. No. 2765

10

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and 60 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person and or Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person and or Persons concerned, viz.:

Allotment begins July 21 1916

Table with columns: Identity Certificate No., Whether Wife, Child, other Relative or Friend, NAME (in full), ADDRESS, AMOUNT (each person). Row 1: 2435, Father, Mr Wm Crane, Upper Island, 60.

Total Allotment, \$

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

Sig. Chas H. Ayle Capt. Officer Commanding Company June 17 1916

Sig. Archibald Crane (Rank) Private

SEPARATION ALLOWANCE.  
NEWFOUNDLAND ROYAL NAVAL RESERVE.

Applicant Mary Jane Crane  
Address Island Cove Road, St. John's  
On account of Archibald Crane Official No. 1632X Navy.  
2768 Army  
Relationship Mother

ALLOTMENT.

Navy From 3/2/18 to 29/3/16 payable to \_\_\_\_\_  
Army 17/5/16 5/9/18 \_\_\_\_\_  
\_\_\_\_\_

Remarks Allotment of 60<sup>th</sup> Pay day Payable to Father W<sup>m</sup> Crane from July 1<sup>st</sup> 1916 to August 31<sup>st</sup> 1918

Date of marriage 3/7/16

DECISION.

CLAIM APPROVED ~~REFUSED~~

Reason \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

W. A. Russell Serjeant Col  
J. H. Dowley Major

Date June 16/1921

This is to certify that W<sup>m</sup>  
Brane father of Archibald  
Brane is totally blind.  
Right eye from accident  
twenty years ago. Left  
eye cataract.

Olson MD

H. Grace

30/5/21

---



DEPARTMENT OF MILITIA

ST. JOHN'S, NEWFOUNDLAND

May 18, 1921.


Atch. Crane,  
Upper Island Cove.

Dear Sir:

With reference to your letter of April 7th. I am enclosing two forms of application for Separation, one for Navy and one for Army, which kindly have your mother complete and return to me.

As soon as these forms are received, it will be decided if Separation Allowance is payable to her or not.

Yours truly,

  
Major  
Paymaster.

NEWFOUNDLAND ROYAL NAVAL RESERVE  
(Increase in Separation Allowance)

M O T H E R

Notice.

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

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

1. Name of Reservist  
(if more than one give all names) *Archibald Bruce*
2. Name of applicant, and age. *Mary Jane Bruce, 64.*
3. State whether you are the natural-mother, step-mother or foster-mother. *Natural Mother*
4. Name of applicant's husband and his age. *William Bruce, 66*
5. If he is not supporting you, state the reason. *Cannot work through partial blindness - both eyes affected.*
6. If you are a widow, state date of your husband's death. *Husband living*
7. Have you married again since death of the above mentioned husband? *No.*
8. State names of your other children, whether married, or single, or widowers.

<u>Name</u>	<u>Age</u>	<u>Occupation</u>	<u>Married or single.</u>
<i>Mary Ford</i>	<i>38</i>	<i>Housewife</i>	<i>Married - 9 children</i>
<i>James Bruce</i>	<i>36</i>	<i>Have not heard of or from him for nineteen years; last news had he was in N. W. Canada</i>	

9. Have any of the children mentioned in "8" volunteered for service during the Great War 1914-1918? If so, state names, and where possible give official numbers and the units in which they enlisted, with dates of enlistment. *I don't know if anyone from us was in a war or not. Don't know if he living.*



Name

Enlisted in

Official Number

Date

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

I earn nothing, am clipped.  
Earned \$2.50 on work last summer

- (11) State amount and source  
of any other income.

Our support is from stockholders.  
He shares with us

- (12) State actual amount con-  
tributed by Reservist during  
the year prior to his enrollment  
(If more than one state amount  
for each separately).

\$40 a month were  
received from stockholders  
to pay Merwin & Wain

- (13) Did this amount include the cost  
of his board, etc?

No; stockholder worked  
and had a shell board

- (14) State his occupation before  
enrollment, and his wages per  
month and the name of his  
last employer.

Miner on Bell Island;  
\$55 a month  
L. S. S. & C. Co., Bell Island

- (15) State amount received as Allowance  
and Separation Allowance, on his  
account since his enrollment.

\$9 a month

- (16) From what date have you received  
this amount?

March, 1916

- (17) State amount contributed by  
your other children per week.

Nothing.

- (18) If not receiving support from  
other children, state cause

Daughter married; Am  
unemployed.

- (19) Have you received Separation

Allowance on account of  
~~XXXX~~ any son who may have  
enlisted in the land forces

No.

(20/ If repeat his name and the unit in which he served, giving his official number.

*Does not apply.*

I make this solemn declaration conscientiously believing it to be true and knowing it to be of the same force and effect as if made under oath.

Signature *Raymond Bruce*.....

Address.. *Beant Row Road,*.....  
*Huronville*

Declared before me at... *Huronville*..... this... *30th*.....  
day of... *May*..... 1931.

Signature of ~~Barrister of the Supreme~~ }  
Court, Notary Public, Stipendiary }  
Magistrate, Justice of the Peace, }  
Commissioner of Affidavits. }

*William A. Mc*.....

We, the undersigned, have reviewed the replies given in the foregoing declaration, and to the best of our knowledge they are correct, and the applicant is mainly or totally dependent on the Reservist first mentioned.

Signature of Clergyman... *Rev. E. E. Rusted, Pastor, Upper Island*.....  
*come*

Signature of the Patriotic ) *E. Jones, General Dealer* )  
Committee. ).....

\_\_\_\_\_

ROY. L. NEWFOUNDLAND REGIMENT

(Separation Allowance Branch)

NOTICE

MOTHER

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

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

The Paymaster  
Separation Allowance Branch  
St. John's, Nfld.

- (1) Name in full of soldier *Archibald Bruce* Rank *Private* Reg't or Unit *2765* Reg't No. *R. Newfoundland*
- 
- (2) Age of soldier *30* *Married* Married or single *2 children*
- 
- (3) Name in full of mother *Mary Jane Bruce* Age. *64* Occupation *Homemaker* Permanent Address *Beardmore Road St. John's*
- 
- (4) Give name of your husband *William Bruce* Age. *66* Occupation *No.* Where employed *Home*
- 
- (5) If your husband is not supporting you give the reason. *Not able to work owing to blindness*
- 
- (6) If your husband is a chronic invalid and totally incapacitated, state nature of malady. (A Medical Certificate must be enclosed with this document stating from what date husband has been totally incapacitated, and for how long incapacity is likely to continue). *Blindness.*
- 
- (7) If you are a widow, state date and place of death of your husband *Does not apply*
- 
- (8) Have you married again since death of above mentioned husband? *Does not apply.*
- 
- (9) Names of your other children. Address in full Age. Occupation, Married or single
- |                    |  |           |                                                        |                |
|--------------------|--|-----------|--------------------------------------------------------|----------------|
| <i>Mary Lou</i>    |  | <i>38</i> | <i>Homemaker</i>                                       | <i>Married</i> |
| <i>James Bruce</i> |  | <i>36</i> | <i>Has not heard of or from him for several years.</i> |                |
- 
- (10) State amount earned by (a) Yourself *Nothing*  
(b) Your husband *\$2.50 a week last year*
- 
- (11) State amount and source of any other income  
*Archibald shares his food, etc. with us.*

12. State value of real property belonging to you and your husband *Small home and about 2 acres of land - about \$200.*
13. State value of personal property belonging to you and your husband *Household effects - about \$100*
14. If husband is dead state value of real and personal property left by him. *Does not apply*
15. Actual amount contributed by soldier during the year prior to enlistment *\$40 a month*
16. Was this amount contributed weekly or monthly *Monthly.*
17. Did this amount include payment of son's board, etc. *No.*
18. State your son's trade or occupation prior to enlistment *Miner - Bell Island*
19. State amount of his wages per week - *about \$16 a week*
20. State name and address of his last employer *A. S. S. & Coal Co. Bell Island*
21. State amount of monthly support from son since enlistment *\$18.00 a month.*
22. State amount of allotment received by you from son since enlistment *\$18.00 a month.*
23. State from what date did you receive allotment? *March, 1916*
24. Actual amount contributed by other children *Nothing written.*
25. Are any of these children in the employ of you or your husband? *No.*
26. If not receiving support from other children, state cause. Explain fully *Daughter married another 7 children  
In military for 4 years*
27. With whom are you residing at present? *My husband*

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

No.

(29) Are you already in receipt of any payment from any Patriotic Fund? If so, how much?

No.

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

No.

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

No.

(32) In what capacity and in what place?

None

(33) Is he in receipt of a salary as such while serving in the Royal Newfoundland Regiment? If so, how much?

No.

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

Signature of Applicant Harry James Keane

Place of Residence Island of St. John's, St. John's

Declared and subscribed before me at St. John's, Nfld. this 30<sup>th</sup> day of May 1921

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

William A. Ke

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

Signature of member of the Patriotic Fund Committee

Rev. E. E. Rusted, Rector of Upper Island Cove  
E. Jones General District

June 23, 1921.

Mrs. Archibald Crane,  
Island Cove Rd.,  
HR. GRACE, C.B.

Dear Madam:

I enclose cheque for \$30.00 representing  
balance of Separation Allowance due in connection with  
your husband's Gratuity.

Yours truly,

Major

Paymaster.

JMH/IM:

June 21, 1921.

Mrs. William Crane,  
Island Cove Rd.,  
Mr. Grace.

Dear Madam:

With reference to your application for the Increase in Separation Allowance granted to Dependents of Royal Naval Reservists (Nfld.), I have been directed to advise you that same has been authorized, and I enclose cheque for \$184.42 representing the amount due on this account.

Yours truly,

Major

Paymaster.

Upper Island October the  
Cove 2/9/21

Dear sir

Mr William Crane  
Wont to No Wat a Bot  
the Septarise allownce  
Money from he son  
archilald Crane  
in the armye the he  
have be exmmmed Boy  
Dr Crane three times  
he is Blind from all  
laber I left him 18  
Dollars a month and  
60 cents

I had <sup>2</sup> the shets fell  
three times and send  
thim over and got no  
ancer Back and the  
Money Was to be Paid  
I Made it Bad  
Plese ancer Brake and  
let me No Prot it  
and No the Resine I ~~got~~  
~~got~~ Never got the Money  
I cant Worke I am  
Broke up all I am



3

trussing to a few Dollars  
I get from the Pension  
Board to feed me

I Need it very Bad  
and dont No the Pension  
it do Not Give us then alot  
of Peple getting the Money  
dont I Need it I dont  
get any allowance for my  
children I dont No why  
I dont get Money for my  
children I dont get  
Nothing for the queeringment

4

my No 27,65 in the  
army Please answer

my letters and  
let me Now  
The Pension I did Not  
the Money it Was for  
me and I hat it had  
Now your truly  
Mr William Crane  
Upper island Cover  
Meger Carrey

October 15th. 1921

Mr. William Crane,

Upper Island Cove, C.B.,

Dear Sir:-

re 2765 Archibald Crane.

Major Carty has handed me your letter of Oct. 2nd., in which you enquire for separation allowance on account of your son Archibald, for the period of his service with the Regiment.

I beg to state that shortly after his enlistment he married, and separation allowance was paid to his wife from the date of marriage. Only one allowance can be paid on account of any soldier, and therefore payment cannot be made to you.

Yours truly,

Major  
Paymaster

378  
cheque  
60<sup>00</sup> per day  
evidently

The Rectory  
Upper Island Cove

Oct 2, 1916

The Paymaster.

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

Dear Sir

Archibald

I have received your

letter of the 26<sup>th</sup> ult, re. John

& William Crane's allotments.

I saw Mr William Crane  
on Saturday Sept 30<sup>th</sup> and he

told me that he had not

received the cheque that

you sent him on Sept 8<sup>th</sup>.

So it has evidently gone astray.

The letter has not reached the office  
here, neither is it lying at the  
Riverhead Post Office. Will you  
please renew the cheque as  
the poor man is in need of the  
money, and ~~cause~~ enquire to be  
<sup>made</sup> ~~re~~ the missing cheque & letter?

I have informed Mr John Crane  
that the allotment of his son  
Henry Charles will be continued  
to him until the matter of  
the Pension is settled.

Thanking you on behalf of  
Merris Crane,

Yours very faithfully

E. E. Rusted



DISTRICT COURT,  
HARBOUR GRACE,  
NEWFOUNDLAND

Oct. 11, 1916.

Dear Mr. Howley, -

Mr. William Crane, of Blaud Cove Road, father of Archibald Crane of C. Co. (last draft) says he has not received the money for August - \$18.00. He has received (Oct. 7) September's money, and also July's, but August month is missing.

Kindly let me know of the omission.

Sincerely,  
Dr. A. C. R. O.

Mr. J. M. Howley,  
St. John's

Cheques posted as far as  
I can find.



DISTRICT COURT,  
HARBOUR GRACE,  
NEWFOUNDLAND

Oct. 21, 1916.

Dear Mr. Rowley:-

William Crane, of Island Cove Road, father of Anselm Archibald Crane of C. C., has asked me to ascertain if his son's allotment for August month has been retained and why? He has not received. I mentioned to him that his son was in St. John's that month, and may have taken all his pay that month.

Truveny  
W. A. M.

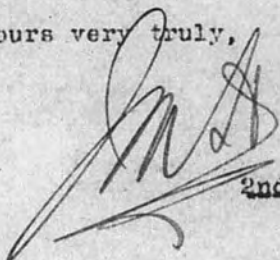
October 28th 6

Judge Oke,  
Harbor Grace.

Dear Sir,-

Referring to the enclosed letter, the matter referred to is that of William Crane, Father of Archibald Crane.

Yours very truly,



2nd. Lieut. & D/Paymaster

October 23rd

6

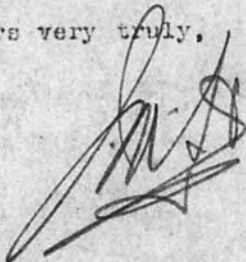
Judge Oke, Esq.,

Bay Roberts.

Dear Sir:-

Referring to your letter of October 17th, I have already written Mr. Crane enclosing him a Cheque for the continuance of his son's Allotment, and explaining to him the circumstances under which these payments have been made.

Yours very truly,



2nd. Lieut. E D/ Paymaster



me to write and ask whether  
there is anything due him  
as he has received nothing  
since August 7<sup>th</sup>,

If no "pay" is due him, can  
he not obtain something from  
the Patriotic Association, as he  
is an old man and was  
entirely dependent on his son?

Hoping to receive an early  
reply & hoping I am not  
troubling you too much,  
I remain

Dear Sir  
Yours faithfully  
E. E. Rusted.

The Rectory  
Upper Island Cove  
Sept. 25, 1916

The Paymaster  
Newfoundland Regiment.  
Dear Sir

Mr William Crane  
whose son Pte Archibald Crane  
crossed over to England on the S.S.  
Sicilian a few weeks ago, has  
called on me stating that he  
had received no allotment  
for September, The last amount  
he received was August 7<sup>th</sup>  
and he cannot understand  
why the money has not been  
sent.

Mr John Crane, whose son  
Henry Charles, died of wounds  
on July 2<sup>nd</sup> from injuries received  
in France, has also requested

October 23rd,

6

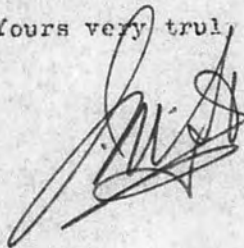
Rev. H.H. Rustead,

Upper Island Cove.

Dear Sir:-

Referring to your letter of October 2nd, I find that the Cheque which was sent to William Crane on September 8th has been paid by the Bank of Montreal and bears the endorsement:- William Crane his mark, Witness Jos. or Jno. Gosse. I am endeavouring to ascertain who cashed this cheque, and shall advise you further as soon as some definite information is received, regarding it.

Yours very truly,



2nd. Lieut. & D/Paymaster

2765  
November 4th., 1918

Mrs. Mary J. Crane,  
Island Cove Road,  
Harbor Grace.

Dear Madam:-

Referring to your application for Separation Allowance, I have been directed to state that same cannot be granted to you, as you have no evidence to show that your Husband is totally incapacitated, and further more your son Archibald on whose account you are making the application, is married, and if Separation Allowance is to be granted on his account, the first claimant would be his wife.

Yours faithfully,

Captain & Paymaster.

1632\* + 2965. Leane and B

Discharged from RNR March 29 - 1916

Enlisted Regt. 17-5-16.

Married 3-7-16

Separation Paid to wife from date of marriage to  
date of discharge.

Johnson

11886.

Upper island  
Cove

April 17

1921

Dear sir

I want to know what about the money that was promised to my Mother you said. I get the money for 1917 July and what is the Reason you dont send it over Doctor cron said to send one and I get the money Doctor cron examine my eyes and I am blind and that all he can do

2

I am sick all the winter and I cant feed my self are family dont feed my father and Mother I lost a lot of blood and I am so weak I cant bring my Boots a long its time to do some thing if you cant pay it from the army you can pay from the Navy.

3  
Doctor Crow said  
the Money was this  
for them its time to  
do some thing Now  
thi is a Blind Man  
cant find he or any  
long we should  
do some thing Now  
its time.  
I want to know  
The Presin you dont  
send it to them  
I was all the  
had to send out  
of you said the  
were not send  
on and if they was  
send on me who  
when the pending  
on only one son  
to look after us

4  
18 Dollar to feed  
them and the Pit  
a Money I had in  
England I had to  
do a thout it and  
send it to them  
and do a dovt i  
my self my No 2765  
in the army  
1632+ in the  
Perry its better  
if I had to stay  
at home I wood be  
better to day and left  
my Blind father and  
my Mother and if I was  
not there so Port who has  
it so you truly

Arch Bruce  
upper island cove  
No 2765

1918 - 1919

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 15<sup>00</sup>

Aug. 28<sup>th</sup> 1918

Received from the First Newfoundland Regiment

the sum of 15 Dollars.

on account of Pay.

*his*  
M. J. O'Grane  
mark. witness *E.W.*

Ch. No. 1467	Initials E.W.
Pay Ledger 205	Initials W.N.
Gen. Ledger	Initials J.

Regtl. No. Rank

No. 2765

Rank P6-

Name Crane, A.



1918-1919

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 245<sup>94</sup>

Sept 11<sup>th</sup> 1918

Received from the First Newfoundland Regiment  
the sum of Fourty Five 94 Dollars.  
on account  
balance of Pay.

Ch. No. 2793	Initials. EW
Pay Ledger 205	Initials. JH
Gen. Ledger.....	Initials.....

Regtl. No..... Rank.....

No. 2765

Rank PL-

Name Crane, A.

Sept. 23rd, 1918.

Pte. A. Crane,  
Upper Island Cove, C.B.

Dear Sir,-

I enclose cheque for \$ 45.94, being  
balance of pay due you at date of Discharge, also  
certificate of Pay.

I also enclose Certificate of Discharge  
dated Sept. 5th, 1918, together with special form, which  
kindly sign and return to this office.

Yours faithfully,

Capt.  
Paymaster & O.i/c Records.

Enclosures 4.

CIRCULAR LETTER

St. John's,

March 13th 1919.

Riband of 1914-15 Star.

Please complete the following claim and return it to this Department. If possible, call at Room No. 3 for your issue.

Lieut. Colonel.

Chief Staff Officer.

CLAIM FOR ISSUE OF RIBAND  
of 1914-15 STAR.

Department of Militia,

St. John's.

I hereby make claim for issue of Riband of 1914-15 Star.

I certify that I am entitled to this issue,  
having served on\* *H.M.A. "Lancer" in North Sea*  
from *15th May 1915* to *6th Feb 1916*.  
(Date) *21/7/19* (NO) *2765* (Rank) *2765* (Name) *A. A. Brane*  
(Place) *St. John's*.....  
*mark*

\*Fill in theatre of War where you served in Gallipoli, Mudros, Lemnos, or Western Egyptian Frontier.

C.R. 2765-

RECEIPT FOR ISSUE OF  
RIBAND OF 1914-15 STAR.

---

I certify that I have received an issue  
of 3 inches of Riband of 1914-15 Star.

WIDE. 2765 pte. Arch. his  
mark

DATE... 21<sup>st</sup> July 1919.

PLACE... Dept. of Militia

Enlisted N.R.N.R. 3/2/15. Served in North Sea  
May 1915 - Feb. 16.

Fold Here

---

**ON HIS MAJESTY'S SERVICE**

To the Officer in Charge of Records,

Royal Nfld. Regt.,

---

Dept. of Militia,

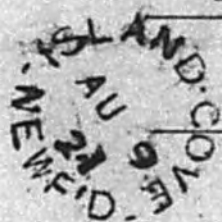
---

St. John's, Nfld.

---

Fold Here

---



July 5th., 1921. 1919,

The accompanying King's Certificate, on his discharge,

(No. 987), is forwarded herewith to

Private Archibald Crane

in respect of his service as No. 2765 Rank Pvte.

Name Arch. Crane Corps Royal Nfld. Regt

Receipt of the same should be acknowledged hereon.

*above certificate*  
Received Archibald J. Crane

*W. S. S. Rusted*  
*W. S. S. Rusted* *H. J.*

Date Aug. 8/21

Address Upper Island Cove

Receipt for Army Book 64

No. .... 2765 Name ... Crane

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

Date.

July 26, 1920.

Place.

Upper Island Lake

Name.

Arch Crane

Maori

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



**Casualty Form—Active Service.**

Regimental Number 2765  
**C.R.**

Regiment or Corps 2/1 Newfoundland Regt.  
 Rank Pte Surname Crane Christian Name Archibald  
 Religion C. of E. Age on Enlistment 25 years 2075 months.  
 Enlisted (a) St John's Terms of Service (a) Duration Service reckons from (a) 7/5/16  
 Date of promotion to present rank \_\_\_\_\_ Date of appointment to lance rank \_\_\_\_\_

Extended { \_\_\_\_\_ } Re-engaged { \_\_\_\_\_ } Qualification (b) \_\_\_\_\_  
 or Corps Trade and Rate \_\_\_\_\_

Signature of Officer i/c Records.

COPIES SENT

DATE 26 JUL 1918

No \_\_\_\_\_

To \_\_\_\_\_

M of W \_\_\_\_\_

O.C. I.S. I.A. \_\_\_\_\_

Exp. Gen. \_\_\_\_\_

Report		Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked ...	<u>Southampton</u>	<u>30/11/16</u>	
		Disembarked ...	<u>Rouen</u>	<u>1/12/16</u>	
	<u>Unit</u>	<b>Joined Battalion</b>	<u>France</u>	<u>12/12/16</u>	<u>B 213</u>
			<u>With B.A.P. 25</u>		
<u>25.4.17</u>	<u>O.C. Unit</u>	<u>Wounded in Action</u>	<u>France</u>	<u>23 APR 1917</u>	<u>B 213</u>
<u>28.4.17</u>	<u>87 F.A.</u>	<u>Ad. I trans. S.W. Head</u>	<u>8 B.B.S.</u>	<u>23.4.17</u>	<u>C.A. 3703</u>
<u>4.5.17</u>	<u>18 S. Hoop.</u>	<u>Ad. S.W. Head</u>	<u>Dannesbarnier</u>	<u>24.4.17</u>	<u>H.A. 8935</u>
<u>13.5.17</u>	<u>29 I.B.S.</u>	<u>Joined Base Depot</u>	<u>Rouen</u>	<u>12.5.17</u>	<u>Non Roll</u>
<u>9.6.17</u>	<u>O.C. Unit</u>	<b>Joined Battalion</b>	<u>In the Field</u>	<u>7 JUN 1917</u>	<u>B 213</u>
<u>2/12/17</u>	<u>62 I.A.</u>	<u>Ad. I.C.S. Head</u>	<u>France</u>	<u>24/11/17</u>	<u>60.1.316</u>
	<u>56 C.S.</u>	<u>Ad. I.C.S. Head</u>		<u>2/12/17</u>	<u>60.1.316</u>
	<u>12 S.W. Hoop.</u>	<u>Ad. I.C.S. Head</u>		<u>10/12/17</u>	<u>60.1.316</u>

(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.  
 (b) Signaller, Shoeing Smith, &c.

[P.T.O.]





# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.  
 [6-6] W5017/2124 1000m 6/15as 93 56

Forms  
B. 121  
22.

Regiment of Newfoundland.

Number of Sheet Just  
 Signature of O. G. Company Frank Aye Capt.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	Name	Age on	years	months	
Joined	Date	Place and Date of Enlistment		Religion	
Joined	Date	Period of		Place of Birth	

No. 2765 Name Lezane, A.  
 Age on 25 years 3 months  
 Place and Date of Enlistment St. John's 17/5/16  
 Religion Church of England  
 Period of with Colours 2 1/2 years. with Reserve 3 1/2 years.  
 Place of Birth Upper Old Cove

Place	Date of Offence	Rank	Cases of Drunkenness.	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
St. John's	6/7/16	Pte.		Insolence to and attempting to strike an N.C.O.	Clap. Dick	5 days C.B.	7/7/16	Major A. Montgomerie.	<i>ena</i>
				Medically unfit St. John's		5 9/18			

COPIES SENT

DATE 26 JUL 1918

No. 1111

To

M. of M. [initials]

O.C. 1st. Bn. [initials]

" 2nd Bn. [initials]

To be carried over

Army Form B. 121.

CRI 2765

August 25th, 1920

Secretary,  
Board of Pension Commissioners

Dear Sir:-

Herewith letter from No. 2765  
Ex-Pte. Arch Crane of Upper Island Cove relative to  
pension matters. Will you kindly reply direct to  
him in the premises, and return, as he asks, the pre-  
scription accompanying his letter

Yours faithfully,

Lieut.-Col.,  
Chief Staff Officer

Telegram

2765

C.R.

C O P Y

OF TELEGRAM TO W.A. O'KEEFE HR. GRACE - DATED MARCH 3RD, 1921

DR CRON REPORTED CRANES CASE TO PENSION BOARD WHO HAVE  
ALLOWED TWO MONTHS EXTENTION PENSION

C.R. 2765

# NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD



Line No. 705 Sent by St. John's Rec'd by \_\_\_\_\_ Check 19/ No. \_\_\_\_\_  
 Place from St. John's  
 To Lt. Col. Rendell  
Militia



Dr. Cron reports Archibald Crane disabled soldier very ill pneumonia poor circumstances pending instructions have ordered milk other nourishment advise.

~~B.P.C.~~ W. A. Oke.  
~~Passed for reply please~~  
~~W. A. Oke~~  
 3/3/21

Copy

COPY

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178 to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Crane Christian Name Richard



TABLE I.—GENERAL TABLE.

Birthplace ... Parish \_\_\_\_\_ County \_\_\_\_\_

Examined ... { on 16 day of May at St Johns St.

Declared Age ... 25 years 3mos days

Trade or Occupation ... Fisherman

Height ... 5 feet, 6 inches.

Weight ... 135 lbs.

Chest Measurement { Girth when fully Expanded. 37 1/2 inches. Range of Expansion 3 1/2 inches.

Physical Development ...

Vaccination Marks { Arm ... Right Left Number 1

When Vaccinated ... 1 year ago.

Vision ... { R.E.—V—9/12 L.E.—V—9/12

(a) Marks indicating congenital peculiarities or previous disease ...

(b) Slight defects but not sufficient to cause rejection ...

Approved by (Signature) (Sgd) Lamont Paterson (Rank) Major Medical Officer.

Enlisted ... { at St Johns on 16 day of May 1916

Table with 2 columns: Corps, Regtl. No. Row 1: ROYAL NEWFOUNDLAND REGIMENT., 2765

Became non-effective by

on \_\_\_\_\_ day of \_\_\_\_\_ 1916

(Signature) \_\_\_\_\_

(Rank) \_\_\_\_\_



**Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.**

Date	Brief details, and signature
27-7-16	1st Inoculation <i>LP</i>
3-8-16	2nd " <i>LP</i>
9-8-16	3rd " <i>LP</i>
25-8-16	Vacc <i>LP</i>
28-6-18	<p>Boarded at Hazelton Down Camp—Marked E<sub>1</sub> Category  <i>(Sgd) W. H. Parsons</i>  <i>Major NAME</i>  <i>(Sgd) J. S. P. K.</i>  <i>Capt NAME</i></p>

**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

Medical Report on an Invalid.Station Hazeley Down Camp,Date 8/7/18

1. Unit **Royal Wfld. Regt.**  
 2. Regimental No. **2765**  
 3. Rank **Private**  
 4. Name **Grane - Archibald**

5. Age last birthday **23**  
 6. Enlisted { on **May 1916**  
                   { at **St. John's, Wfld.**  
 7. Former Trade { **Fisherman**  
                   or Occupation {

## 8. Disability.

**GASSED AND MENTAL DEFICIENCY**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.

**He states that he went to France in Oct. 1916. Whilst there he reported sick with various ailments about five times a week. He was gassed at Ypres and later at Armentieres and was then sent down the line being boarded at Rouen and marked P.B. He had conjunctivitis**

12. (a) Give your opinion as to the causation of the disability.

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3).

**Strain of active service conditions**

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.*

On rejoining the Depot he had a conjunctivitis which was treated. He could not see very well. He has complained of pains in stomach, probably due to gas poisoning. He is mentally slow and will not make an efficient soldier and his services are not required at Depot.

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. Do you recommend

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

**Discharge as Permanently Unfit**

**(Sgt) J. StP. K., CAPT. R.A.M.C.**

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 Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them 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 attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1913).

(iv) In answering question 20 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.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

**No**

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

21. Has the disability been aggravated by

(a) Intemperance?

(b) Misconduct?

(c) Any of the conditions mentioned in Question 20, and if so which?

**No**

22. Is the disability permanent?

**Yes**

23. If not permanent, what is its probable minimum duration?

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

In defining the extent of his inability to earn a livelihood, estimate it at  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , or total incapacity.

**Less than 20%**

24A. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?

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

26. Do the Board recommend

(a) Discharge as permanently unfit, or

**Yes**

(b) Change to England?

Signatures :—

(Sgd) JOHN B. DUNCAN

President.

Station ST. JOHN'S NFLD.

J. SINCLAIR TAIT

Date AUG. 22nd., 1918

ARCH C. TAIT

Members.

Station

AUG 22 1918

(SGD) CLUNY MACPHERSON, Major

Administrative Medical Officer.

Date

No. ....

D. M. S. NEWFOUNDLAND.

CERTIFIED CORRECT COPY

CLUNY MACPHERSON, Major

Per A. W. B.

*Supplement*

**COPY.**



Medical Report on an Invalid.

Station Hayley Down Camp

Date 8-7-18

- 1. Unit 2<sup>nd</sup> Batt. Royal Newfoundland
- 2. Regimental No. 2765
- 3. Rank Private
- 4. Name CRANE - ARCHIBALD
- 5. Age last birthday 23 years
- 6. Enlisted { on May 1916  
at St. John's, Newfoundland
- 7. Former Trade { Fisherman  
or Occupation

**8. Disability.**

*Gassed and Mental Deficiency*

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.

*He states that he went to France in October 1916 whilst there he reported sick with various ailments about 5 times a week. He was gassed at Ypres and later at Amiens and was then sent down the line being boarded at Rouen and marked P.B. He had conjunctivitis.*

12. (a) Give your opinion as to the causation of the disability.

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3).

*Strain of active service conditions*

*na*

On returning the Depot he had a  
Conjunctivitis which was treated:

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 could not see very well.  
He has complained of pains  
in stomach probably due to gas  
poisoning. He is mentally slow  
and will not make an efficient  
soldier and his services are not  
required at Depot.

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

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

na

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

If so—(a) When?

(b) Where?

(c) Opinion?

na

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

na

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

na

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

na

19. Do you recommend

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

Discharge as permanently unfit  
for Active service.

*DR*

*Capt. R. A. G. W.*

Officer in medical charge of case.

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

Station \_\_\_\_\_

Date \_\_\_\_\_

Officer in charge of Hospital.

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

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

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 Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them 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 attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Articles 1162 and 1165. Pay Warrant, 1913).

(iv.) In answering question 20 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.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service. *no*

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

21. Has the disability been aggravated by

(a) Intemperance?

(b) Misconduct?

(c) Any of the conditions mentioned in Question 20, and if so which? *no*

22. Is the disability permanent? *yes*

23. If not permanent, what is its probable minimum duration?

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

In defining the extent of his inability to earn a livelihood, estimate it at  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , or total incapacity. *less than 20%*

24A. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?

25. If an operation was advised and declined, was the refusal unreasonable? *✓*

26. Do the Board recommend

(a) Discharge as permanently unfit, *yes*

or  
(b) ~~Change to England?~~

Signatures:—

Station *J. Johnis Wfld*

Date \_\_\_\_\_

*John Edmcan* President.

*J. Sinclair Dait* } Members.

*Archibald* }

Approved  
Station \_\_\_\_\_

Date \_\_\_\_\_



*Clay Macpherson*  
Administrative Medical Officer. Major  
D. M. S. NEWFOUNDLAND.

D 2765

St. John's, Newfoundland.

Sept. 19th, 1918.

Officer Commanding,  
Royal Newfoundland Regiment.  
Headquarters.

Sir :-

The undermentioned men have been discharged on the  
dates given. Kindly note and post in Desl Orders Part 11.

I have the honour to be,  
Sir ;  
Your obedient servant.

(SGD) J.M. HOWLEY. CAPT.  
PAYMASTER & C.I/c RECORDS.

R/W.

			Sept. 5th, 1918.	Med. Unfit.
3247.	Pte.	Scott, Harold.	do	do
3840.	"	Dingwell, Aaron. C.	do	do
2792.	L/C.	Garland, Henry.	do	do
2755.	Pte.	Crane, Archibald.	do	do
4966.	"	Kelly, Richard.	do	do
958.	"	Saunders, Wm. R.	7th	do
728.	"	Brown, Chas. W.	do	do
2482.	"	Stone, Robert. H.	do	dp
2741.	"	Blacout, Cadis.	do	do
3435.	"	Greene, Augustine.	do	do
2298.	CPL.	Dunn, James.	do	do
1555.	Pte.	Fitzgerald, Sylvester.	do	do
2673.	"	Bauld, James.	9th.	do
2793.	"	Evans, Joseph.	10th.	do
3038.	"	Hodder, Norman.	do	do
3391.	"	King, Harold.	do	do
3170	"	Hillier, Leo.	do	do
2553.	CPL.	Turner, E. C.	14th.	do
1165.	Pte.	Pifield, Mark.	do	do
2699.	"	Stone, Clarence.	do	do
2611.	"	Martin, William.	do	do
1957.	"	Wagg, Austin, J.	do	do
1487.	"	Goulding, Sylvester.	do	do
2483.	"	Farsons, Frank. Y.	17th.	do



August 23rd, 1916

From Officer Commanding,  
Depot

To Paymaster and Officer i/c Records,  
Militia Department

2762 L/Opl. Garland, H.  
2765 Pte. Crane, A.  
3823 " James, W. J.  
3840 " Dingwell, A. C.  
4966 " Kelly, R.

The marginally noted were recommended for discharge as permanently unfit by Medical Board held on Thursday, August 22nd.

I am sending them herewith for your attention and necessary action, please.

Reg. No. 2465 Rank ..... Name Brane, A.  
Attested ..... Address Upper Island Cove  
Allotment ..... Allottee .....  
Date of Allotment ..... Returned from Overseas 4-8-18  
Embarked for Overseas ..... Cause Discharge

H. L. 4-8-18 to 18-8-18 Letd 18-8-18  
27-8-18 Recommended Discharge Permanently unfit

**DISCHARGED—MEDICAL** ..... 5-9-18 No 167