



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 363

Name in full Nathaniel Crane Age 18

Address 142 Water St. East

~~Married~~
Single

Color Fair Height _____ Weight _____
Hair Light Brown Eyes Blue

Other distinguishing marks None

Nearest relative Father Mother Nathaniel & Mary Esther

Address Upper Island Cove

Dependents None

Occupation Watchmaker Present Wage 6.50 per week

Previous service _____

Decorations _____

General Remarks _____

Date of Enlistment _____

I, Nathaniel Crane, do sincerely promise and swear that I will be faithful and bear true allegiance to His Majesty and that I will faithfully serve His Majesty in any place where I may be needed or in the Colony of Newfoundland as the case may be, against all his enemies and opposers whatsoever according to the conditions of my service.

Nathaniel Crane

Declared before me this 1 day
of October 1914

Arthur Kelly

Re-engaged for 1st Newfoundland Regt. 1915
W. Crane
R. J. [unclear]
Aug 15 1915
Adlerholt

Sgt 54

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Reg.No. 363

Name Nathaniel Crane

Apparent age 18 years _____ months. Height _____ feet _____ inches.

Chest measurement { Girth when fully expanded _____ inches.
 Range of expansion _____ inches.

Distinctive marks Color: Dark, Hair: Light Brown, Eyes: Blue

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Nathaniel & Mary Esther Crane, Upper Island Cove, Newfoundland | Relationship Father & Mother

Particulars as to Marriage.

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.
 (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	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed for fixing the rate of pension		Service in Re-serve not allowed to reckon towards G. O. Pay		Signature of Officers certifying correctness of entries
					years	days	years	days	
Service towards limited engagement reckons from <u>5/9/14</u>									
Joined at <u>St. John's</u> on <u>5th September '14</u>									
Total Service forfeited as above									
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days									
" " " Pension " _____ (") _____ " "									

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Reg. No. 363

Name **Nathaniel Crane**

Apparent age **18** years _____ months. Height _____ feet _____ inches.

Chest measurement { Girth when fully expanded _____ inches.
 { Range of expansion _____ inches.

Distinctive marks **Color: Dark, Hair: Light Brown, Eyes: Blue.**

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin **Nathaniel & Mary Crane, Upper Island Cove,**
Nfld. | Relationship **Father & Mother.**

Particulars as to Marriage.

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.
 (c) Present address. (d) Signature of Officer verifying entry from certificate.

(a)	(b)	(c)	(d) Verified from certificate.

Particulars as to Children.

Christian Names	Date and Place of Birth	(d) Verified from certificate

STATEMENT OF THE SERVICES.

Corps in which served	Regt. or Depot	Promotions, 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 5/9/14									
Joined at St. John's on 5th September '14									
<i>Missing April 14th 1917</i>									
<i>Embarked S.S. Humber for U.K. 3rd 1914</i>									
<i>Embarked 20th 1914</i>									
<i>Embarked Alex. and Central for Cairo 31st 1914</i>									
<i>Embarked for Gallipoli 13th 1915</i>									
<i>Landed Suez Bay night of 19-20 1915</i>									
<i>Embarked 15th 1915</i>									
<i>Embarked 16th 1915</i>									
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<i>Embarked 13th 1920</i>									



This Form is to be used in connection with Pamph. M. E. (1)
N. F. 1914

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 *Crane Bath.* (141)
aged *19 years* conducted at *C I B Ammeny*
Date: *28/8/14* Recruiting Officer:

NO. OF TEST

FINDING

- 1 *No*
- 2 *No*
- 3 *No*
- 4 *No*
- 5 *No*
- 6 *No*
- 7 *Yes*
- 8 *Yes*
- 9 *No*
- 10 *n*
- 11 *n.*
- 12 *n.*
- 13 *No.*
- 14 *n*
- 15 *n*
- 16 *n*
- 17 *n*
- 18 *n*
- 19 *n*
- 20 *n*
- 21 *n*
- 22 *n*
- 23 *n*
- 24 *n.*
- 25 *n.*
- 26 *n.*
- 27 *n.*
- 28 *n*
- 29 *n.*
- 30 *n.*
- 31 *n.*
- 32 *n.*
- 33 *No*
- 34 *5 ft. 6 1/2"*
- 35 *130 lbs.*
- 36 *30 - 33 1/2*
- 37 *65° ju milk*
- 38 *Bath*
- 39 *No.*

Chest?

OK.

FN 363 Signature of Medical Examiner: *Clay Macpherson*

Walter Westman Crane Upper Island Cove

7. Crane

363

P. H. G.

Admitted ⁵/₉ 16.

Army Form W. 3016.

No. _____

Date Sept- 5th 1916.

(1) To the Officer i/c Records,

58 Victoria St
A W. (Station.)

(2) The Officer Commanding,

Medl Contingent
Camp (Station.)

(3) The Paymaster,

58 Victoria St
A W. (Station.)

Regimental No. 363.

Rank and Name. Pte Lorange M.

Regiment or Corps 1st Newfoundland Contingent

has been granted a furlough from Sept 5th to Sept 14th

His address while on leave will be:—

58 Victoria St SW

This man has been furnished with a Warrant to Victoria and given an advance of £1 (one pound).

I consider he is fit for ^{and likely to be fit for service} ~~Light~~ ^{overseas within 3 months.} duty.

Horace Fagan Capt. R.A.M.C.(F)

Registrar, R.A.M.C.T.
Hospital,
London General Hospital,
WANDSWORTH, S. W.

(Station.)

* Strike out that which is inapplicable.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office.

Office Copy

Army Form O. 1625.

PAY LIST.

to

191 Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

No. 363

Rank Lance Corporal

Name Crane Jr.

Died (Intestate) at

France

on the 14 of

April

1917.

Deserted at

on the of

191

I Certify to the correctness of above in every particular.

Commanding Squadron, Troop, Battery or Company.

STATEMENT OF ACCOUNT.

Form 1.

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month <u>14/7</u>	3	17	2
	Cash issues (Date of each issue to be stated)				Pay days at from to			
	191	£	s.	d.	Proficiency, Service or good conduct pay days at from to			
	"				Messing allowance days at from to			
	"				Kit allowance			
					Amount produced by the sale of Effects from Form 2			
	Consolidated stoppage				Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
					Deferred Pay or Gratuity			
	Balance due by the Paymaster	3	17	2	Balance due to the Paymaster			
		£	3	17		£	3	17
								2

CHECKED.

16/5/16

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ 3 17 2 is correctly chargeable against the Public.

Dated at

this

day of

191

Paymaster.

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B. 2090 or Army Form O. 1815.

(b) Words in Italics to be struck out when there is no debtor balance.

Temp. a/c

CO.

BNO. 363

RANK

M

NAME

McGone

ALLOTMENT

50

Date	Description	Amount	PAY	Area
	Dr. Balance		Credit Balance <u>17/3</u> 191	2319.7 $\frac{1}{2}$ ✓
	Hospital	1 00 ✓	Exchange " 191	
			PAY ? NI ? RATE	
	A.B. 64	2 3 ✓	From <u>18/3</u> To <u>5/9</u> 172 days	
	<u>ETM</u>	3 9 ✓	60	103.20 ✓
	<u>argross</u>	12 8 1	From _____ To _____ days	21 4 1 ✓
		14 4 1	-----	45 3 8 $\frac{1}{2}$
			-----	14 14 1
	P. & R. Uniform.		From _____ To _____ day	30 9 7 $\frac{1}{2}$
			PRO	10 0 0
			From _____ To _____ days	20 9 7 $\frac{1}{2}$

Royal Victoria Military

S. 39. B.

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

MEDICAL HISTORY

OF

Surname Crane Christian Name Nathaniel



Table 1.—GENERAL TABLE.

Birthplace:—Parish..... County.....

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	on	day of	on	day of
	at		at	
Declared Age.....	18 years — days		years	days
Trade or Occupation.....	Hatemaker			
Height	feet	inches	feet	inches
Weight		lbs.		lbs.
Chest Measurement {	Girth when fully expanded...		inches	
	Range of expansion.....		inches	
Physical Development.....				
Vaccination Marks {	Right	Left	Right	Left
	Arm			
	Number			
When Vaccinated				
Vision	R. E.—V=		R. E.—V=	
	L. E.—V=		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)				
(Rank)				
		Medical Officer.		Medical Officer.
Enlisted	at	St Johns. N.F.L.D.	at	
	on	day of	on	day of
		191		191
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment				
Transferred to.. ..	Newfoundland	363		
Became non-effective by				
	on	day of	on	day of
		191		191
(Signature)				
(Rank)				

(T.)

Mr. Kelly
125

Royal Victoria Station

S. 39. B.

380 *15133*
To be used only for Special Reserve Recruits, and for Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY

OF

Surname *Brane* Christian Name *Nathaniel*



Table 1.—GENERAL TABLE.

Birthplace:—Parish..... County.....

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	at		at	
Declared Age	<i>18</i> years — days		years	days
Trade or Occupation	<i>Watchmaker</i>			
Height	feet	inches	feet	inches
Weight		lbs.		lbs.
Chest Measurement {	Girth when fully expanded...		inches	
	Range of expansion...		inches	
Physical Development				
Vaccination Marks {	Right	Left	Right	Left
	Arm			
Number				
When Vaccinated				
Vision	R. E.—V—		R. E.—V—	
	L. E.—V—		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)				
(Rank)				
Enlisted	at	<i>St Johns. N.F.L.D.</i>	at	
	on	day of 191	on	day of 191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<i>Newfoundland</i>	<i>303</i>		
Transferred to				
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				

M. H. H. 125

Table II.—Only for admissions to hospital or to the sick list in the case of Warrant

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of syphilis, admissions and re-admissions to hospital, of treatment out of hospital, transfers, &c.
	Day	Month	Year	Day	Month	Year			
Nesley 4TH SCOTTISH GENERAL HOSPITAL, GLASGOW	7	7	16	5	9	16	G. S. W. Left thigh Orniple flesh wound	61	While in Fra in left thigh of upper 1/2 femur seen behind thigh On admission through skin 20-7-16 D.D. 30-7-16 In 30-8-16 All well J. Kestonstan
8th LONDON GENERAL HOSPITAL, WANDSWORTH.	5	9	16	5	9	16		1	To furlough
4TH SCOTTISH GENERAL HOSPITAL, GLASGOW	1	17		6	2	17	Southern (20)	26	

hospital or to the sick list in the case of Warrant Officers treated in quarters

Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
61	<p>While in France on 1-7-16 was hit by bullet in left thigh - entering in front of thigh junction of upper & middle thirds & passed outside femur leaving at a corresponding point behind thigh.</p> <p>On admission he had gas & a tube passed through sinus.</p> <p>20-7-16 Drainage good</p> <p>30-7-16 Tube removed</p> <p>30-8-16 All wounds healed & patient well.</p> <p>To <i>Kristoforians Angol</i> 109</p> <p>MAJOR, R.A.M.C. OFFICER IN CHARGE, SURGICAL DIVISION R.V.H.</p>	<p><i>W. M. ...</i> R.A.M.C.</p>
1	<p>To furlough Class B.</p>	<p><i>L. G. ...</i> Capt.</p>
26		<p><i>M. ...</i></p>

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

Date	Brief Details, and Signature
<p>Co. 1914</p>	<p>$\frac{TV}{2}$</p>
<p>28. 4. 15</p>	<p><i>Vac</i></p>
<p>14. 8. 15</p>	<p><i>Fit for Foreign Service</i></p>
<p>21. 8. 15</p>	<p><i>Ch. V.</i></p>
<p>30. 5. 15</p>	<p>$\frac{2}{2}$</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

H. Crane

363

Pay Dept

ORIGINAL

Army Form O. 1625.

PAY LIST.

to

1917 Voucher No.

NON-EFFECTIVE ACCOUNT.Regiment or corps **Royal Newfoundland Regt.**No. **363**Rank **L/Corporal**Name **A. Crane**Died (a) **Intestate at France**
MISSING 17-4-17.on the **14** of **April****1917.**Deserted at **PRESUMED DEAD 17-11-17**

on the

of

1917.

I Certify to the correctness of above in every particular.

*(Commanding Squadron, Troop,
Battery or Company.***STATEMENT OF ACCOUNT.**

[Form 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month 14/4/17	3	17	2
	Cash issues (Date of each issue to be stated)				Pay days at from to			
	£ s. d.				Proficiency, Service or good conduct pay days at from to			
	191				Messing allowance days at from to			
	"				Kit allowance			
	"				Amount produced by the sale of Effects from Form 2			
	"							
	Consolidated stoppage							
	Balance due by the Paymaster	3	17	2	Balance due to the Paymaster			
		£	3	17		£	3	17
				2				2

This account is in accordance with information received at the Pay & Record Office to **16/5/18** and is therefore subject to amendment if, and as may be found necessary.

CHECKED.

*16/5/18*I hereby Certify that the above account is correct in every particular, and that the debtor balances of £ **3 17 2** are correctly chargeable against the **NEWFOUNDLAND CONTINGENT.**

Dated at

this

day of

58, VICTORIA ST.
LONDON, S.W. 1**20 MAY 1918**

191

A. J. ...
CHIEF PAYMASTER & OFFICER I/C RECORDS.

- (a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B. 2090 or Army Form O. 1815.
- (b) Words in Italics to be struck out when there is no debtor balance.

ORIGINAL

Army Form O. 1625.

PAY LIST:

to

1917 Voucher No.

NON-EFFECTIVE ACCOUNT.Regiment or corps **Royal Newfoundland Regt.**No. **363**Rank **L/Corporal**Name **W. Crane**Died (a) **Intestate at France**
MISSING 14/4-17.on the **14** of **April****1917.**Deserted at **PRESUMED DEAD 17-11-17**

on the

of

191

I Certify to the correctness of above in every particular.

(Commanding Squadron, Troop,
Battery or Company.)**STATEMENT OF ACCOUNT.**

[Form 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month 14/4/17	3	17	2
	Cash issues (Date of each issue to be stated)				Pay days at from to			
	£ s. d.				Proficiency, Service or good conduct pay days at from to			
	191				Messing allowance days at from to			
	"				Kit allowance			
	"				Amount produced by the sale of Effects from			
	"				Balance, including			
	Consolidated stoppage				to be so stated)			
					needed			
	Balance due by the Paymaster	3	17	2	Balance due to the Paymaster			
	£	3	17	2	£	3	17	2

CHECKED.

16/5/18

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ **3 17 2** is ~~correctly chargeable against the Public~~ **NEWFOUNDLAND CONTINGENT.**

Dated at

this

day of



191

CHIEF PAYMASTER & OFFICER I/C RECORDS

- (a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B. 2090 or Army Form O. 1815.
- (b) Words in Italics to be struck out when there is no debtor balance.

ORIGINAL

Army Form O. 1625.

PAY LIST:

to

191 Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps **Royal Newfoundland Regt.**No. **563**Rank **L/Corporal**Name **G. Crane**Died (c) **Intestate at France**on the **14** of **April****1917.**

Deserted at

on the

of

191**MISSING 14-17.**
PRESUMED DEAD 17-11-17

I Certify to the correctness of above in every particular.

*(Commanding Squadron, Troop,
Battery or Company.*

STATEMENT OF ACCOUNT.

Form 1.

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month 14/4/17	3	17	2
	Cash issues (Date of each issue to be stated)				Pay days at _____ from _____ to _____			
		£	s.	d.	Proficiency, Service or good conduct pay days at _____ from _____ to _____			
	191				Messing allowance days at _____			
	"				from _____ to _____			
	"				Kit allowance			
	"				Amount produced by the sale of Effects from Form 2			
	Consolidated stoppage							
	Balance due by the Paymaster	3	17	2	Balance due to the Paymaster			
		£	3	17		£	3	17
								2

This account is in accordance with information received at the Pay & Record Office to **16/5/18** and is therefore subject to amendment if, and as may be found necessary.

CHECKED,

16/5/18

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ _____ is chargeable against the Public Account of the NEWFOUNDLAND CONTINGENT.

Dated at

this

day of

58, VICTORIA ST.
LONDON, S.W. 1

20 MAY 1918

191

CHIEF PAYMASTER & OFFICER I/C RECORDS.

- (a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B. 2090 or Army Form O. 1816.
- (b) Words in Italics to be struck out when there is no debtor balance.



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, N. Crane, Regl. No. 363

hereby agree, until further notification by me and in similar official form, to make an Allotment of
Dollars and 50 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:

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
	Mother	<u>M^{rs} M. E. Crane</u>	<u>Island Cove</u> <u>Upper Bay</u> <u>St Johns</u> <u>Con. Bay</u>	<u>= 50</u>
Total Allotment, \$				<u>= 50</u>

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.) A. L. Leonard

Officer Commanding
"B" Company

(Sig.) N. Crane

(Rank) Plt

DUPLICATE MAIL COPY

Army Form O. 1625.

PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps **Royal Newfoundland Regt.**

No. **363** Rank **L/Corporal** Name **A. Crane**

Died^(a) **Intestate at France** on the **14** of **April** 191**7**.

Deserted at **MISSING 11/4-17.** on the of 191 .

PRESUMED DEAD 17-11-17.
I Certify to the correctness of above in every particular.

(Commanding Squadron, Troop,
Battery or Company.)

STATEMENT OF ACCOUNT.

[Form 1.]

Date	Dr.	£	s.	d.		Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month 14/4/17	3	17		2
	Cash issues (Date of each issue to be stated)				Pay days at from to				
	£ s. d.				Proficiency, Service or good conduct pay days at from to				
	191				Messing allowance days at from to				
	"				Kit allowance				
	"				Amount produced by the sale of Effects from Form 2				
	"				Savings Bank balance, including (if no balance, to be so stated)				
	Consolidated statement				or Gratuity				
	[REDACTED]				Balance due to the Paymaster				
	Balance due by the Paymaster	3	17	2					
	£	3	17	2		£	3	17	2

CHECKED.
Al
16/5/18

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ **3 17 2** is correctly chargeable against the Public^(b).

Dated at this day of **20 MAY 1918** 191 **Paymaster.**

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B. 2090 or Army Form O. 1815.
(b) Words in Italics to be struck out when there is no debtor balance.

DUPLICATE MAIL COPY

Army Form O. 1625.

PAY LIST.

to

191 . Voucher No.

~~Reported~~ **NON-EFFECTIVE ACCOUNT.**

Regiment or corps **Royal Newfoundland Regt.**

No. **385**

Rank **L/Corporal**

Name **P. Crane**

Died^(a) **Intestate at France**

on the **14** of **April**

191**7**.

Deserted at **MISSING 11/4-17.**

on the _____ of _____

191 .

PRESUMED DEAD 17-11-17

I Certify to the correctness of above in every particular.

(Commanding Squadron, Troop,
Battery or Company.

STATEMENT OF ACCOUNT.

[Form 1.

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month 14/4/17	3	17	2
	Cash issues (Date of each issue to be stated)				Pay days at _____ from _____ to _____			
	£ s. d.				Proficiency, Service or good conduct pay days at _____ from _____ to _____			
	191				Messing allowance days at _____ from _____ to _____			
	"				Kit allowance			
	"				Amount produced by the sale of Effects from Form 2			
	Consolidated stoppage							
	Balance due by the Paymaster	3	17	2	Balance due to the Paymaster			
		£				3	17	2

This account is in accordance with information received at the Pay & Record Office to **1615/118** and is therefore subject to amendment if, and as may be found necessary.

CHECKED.

16/5/18

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ _____ is correctly chargeable against the Public.

Dated at _____

this _____ day of _____



NEWFOUNDLAND CONTINGENT

P. H. ...

191

Paymaster.

- (a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B. 2090 or Army Form O. 1815.
- (b) Words in Italics to be struck out when there is no debtor balance.

9793

Upper Island Cove

Feb 19th 1920

J. M. Howley Esq.
Dept of Militia
St Johns

Dear Sir

as I have not received any money belong to my late son Lance Corp Nathaniel Crane Reg no 363 of Royal Newfoundland Regiment who have been missing since April 14th 1917. The only money I received from him was the allotment of 50 cents per day and I have not received any allotment since December 1919 and the sum of \$29.17 cents of estate. I think there should be money due me belong to him or I should get a Pension.

Trusting you will do your best and that I will get a favourable reply

I remain

Yours sincerely

Mary E. Crane

allotment? Discontinued 30/11/19. by Pen 19
RJB



Leamington

Mar. 25th 1919

Dear Sir,

Mr. Nathaniel Crane, of Upper Island Cove, this District, has requested me to write and enquire of you if there is any balance of pay and any arrears of his late Lance Corporal Nathaniel Crane, No. 363, R. I. R.

The deceased soldier was killed in action at Mondree, on 14th of April 1917.

Please send an answer to Mr. Nathaniel Crane, Post Office, Upper Island Cove, Harbour Free District

Yours truly,
Mr. G. O'Ke

Capt. Rowley,
Military Department,
St. John's

29/12

bal of estate paid to
Nathaniel Crane of Upper Island Cove Dec 5/18

11 3 70

Upper Island Cove
Sept 7th 1920.

Major Howley,
Dept of Militia
St John's

Dear Sir,

As I hear there is gratuity money due me belong to my late son Lance Corp'l Nathaniel Crane number 363 Royal Newfoundland Regiment. If there is I would be pleased if you would forward it to me. I never received any money belong to him only his allotment of 50 cents per day and that was cut off from me November 1919. There must be money due belong to him and I think that I should get it.

Trusting to get a favourable reply
I remain

Yours truly
Mrs Mary E. Crane
Upper Island Cove.

has estate been paid? Estate paid Nathaniel Crane
Upper Island Cove 2/12/19. \$29.17.
did he die whilst serving? Missing 14/4/19.

[Signature]

No gratuity payable on men who die whilst on service

October, 8, 1920

Mrs. Mary E. Crane,
Upper Island Cove,
C. B.

Dear Madam:

With reference to your
letter of September 7, I beg to advise you that no
Gratuity is payable on account of men who die whilst on
service, only to discharged men themselves.

Yours truly,

Major
Paymaster.

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

The Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

NO STAMP REQUIRED



Dept. of Militia,

St. John's.

July 30th 1921

I beg to acknowledge receipt of
Memorial Plaque issued in respect of services of
the late No. 363 Rank Sg/Cpl

Name Nathaniel Craun
Royal Newfoundland Regt.

Nathaniel Craun (Sgd.)

Father Relationship.

Address Upper Island Cove.

RECEIVED
MILITIA
ST. JOHN'S
JUL 31 1921

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

ST. JOHN'S
21
SEP 27 1914
REGT.

ST. JOHN'S
21
SEP 27 1914
REGT.

ST. JOHN'S
21
SEP 27 1914
REGT.

SEP 20 1921

1921.

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

Mr. Nathaniel Crane (Father)

in respect of his service as No. 363 Rank Pte.

Name Nathaniel Crane Royal Nfld. Regt.
Nfld. Forestry Corps

Receipt of the same should be acknowledged hereon.

Received 21st of September 1921

Signature Nathaniel Crane

Date Sept 24th 1921

Address Upper Island Cove.

[P.T.O.]

C.R. 363

RECEIPT.

I hereby certify that I have received the 1914-1915

STAR. *of my son*

No 363 *Lance Corp.*
Name Nathaniel Craze

Witness. Nathaniel Craze

Date Dec 11th 1919.

Place Upper Island Cove.

July 2, 1918

Mr. Nathaniel Crane,
Upper Island Cove,
Dis't H rbow Grace.

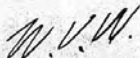
Dear Mr. Crane:-

I am writing to inform you that it is my regrettable duty to forward to you by "Express" one Kit Bag, which belonged to your son #363 L/Cpl. N. Crane of The Royal Newfoundland Regt.

Assuring you of my deepest sympathy in your bereavement, and in the renewed sorrow which the receipt of these effects must entail.

If an enclosing herewith, receipt, will you kindly sign same and return at your earliest convenience.

Yours faithfully,



Lieut.

or Lieut. Col. G.S.O.

No. of Paper 1077**PERSONAL EFFECTS.**Name Crane M. No. 363
Rank A/Cpl Regiment THE ROYAL NEWFOUNDLAND REGT.

Article	Where stored	Notified by
<u>Kit. Bag</u>		
	Final disposal	
		Shipped from Depot.

Remarks: - Presumed Dead
Next of Kin: - Mat. Crane
Upper Island Cove



PERSONAL EFFECTS

Received from Militia Department

One Kit Bag of the late #363 B/Cpl. N. Crane.

Signed Nathaniel Crane

Date 6th July

Extract of Communication received from Pay & Record
Office, London dated October 15th, 1917.

#363 Lance Corporal N. Crane,

Posted as "Missing" 14/4/17 and presumed Dead for
official purposes 17/11/17.

C.R. 363

Extract of Cablegram received from Pay & Record
Office, London dated May 11, 1917.

363 Lance Corporal Crane.

"Missing" April 14th.

COPY OF TELEGRAM.

Dated

May 11, 1917.

To **Mr. Nathaniel Crane,**

Upper Island Cove.

Regret to inform you that the Record Office,

London, officially reports No. 363, L. Corp.

Nathaniel Crane, missing April fourteenth.

Upon receipt of further information I shall immediately wire you.

J. R. BENNETT,

Colonial Secretary.

COPY OF TELEGRAM.

Dated

May 11, 1917.

To **Mr. Nathaniel Crane,**

Upper Island Cove.

Regret to inform you that the Record Office,
London, officially reports No. 363, L. Corp.
Nathaniel Crane, missing April fourteenth.

Upon receipt of further information I shall immediately wire you.

J. R. BENNETT,

Colonial Secretary.

C.R. 363

Extract from Nominal Roll of MFLA, Regt. Draft No.21
from 2nd Bn. Depot, to 1st Bn. B.E.F. Embarked South-
ampton, 4-3-17.

363 L/Cpl. N. Crane.

JUNDLAND POSTAL TELEGRAPHS.**Cable Connection with all the World****All Messages Sent are Subject to the Following Conditions:**

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

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

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

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

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

(NOT TRANSMITTED)

Signature of Sender

Address

Line Number	Rcd	By	Sent	by	Check

Dated

7th August, 1916.

To

Mr. Nathaniel Crane,

Upper Island Cove.

Replying to my enquiry of July eighteenth Record Office London today reports that No. 363 Private Nathaniel Crane will be getting up soon and is convalescent.

J.R. BENNETT,

Colonial Secretary.

C.R. 363

Extract of Casualties received from Pay & Record Office,
London, dated July 31, 1916.

(Extract from Army Form B 213, from O.C. 1st. Mfld. Regt.
dated 22 11/7/16.)

#365 Pte. N. Crane. ✓

363

Wounded in Action 1/7/16.

Copy of Message sent by the Colonial Secretary to
the Record Office of the First Newfoundland
Regiment, London, July 18th.

Report by telegraph present condition of 114 Mahon, 363
Crane, 1180 Butler, 1686 Lawrence, 1595 Rideout, 1422 Collins,
1445 Gillingham, 1161 Pike, 943 Moores, 1762 Brake, 1583
Johnson, 35 Sheehan, 1472 Coombs, Report by telegraph nature
of wounds of 903 Bellows, 1404 Tilley, What is address of
2069 Murphy, Relatives anxious for news of 990 Taylor, 1882
Lee, 1685 Murrin, 1498 Learning.



NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 11 Sent by H. J. Bennett Rec'd by 907 Charge 11

Place from St. John's

To H. J. Bennett

Please ascertain
 Condition of the
 Nathaniel Crane
 no 363.

Mrs Mary Crane

276

COPY OF TELEGRAM.

Dated

July 8, 1916.

To

Mr. Nathaniel Crane,

Upper Island Cove.

Regret to inform you that the Record Office,

London, officially reports No. 363, Private Nathaniel Crane,
is at Royal Victoria Hospital, Netley, suffering from
gunshot wound left thigh severe.

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

J. R. BENNETT,

Colonial Secretary.

C.R. 363

Extract of Casualties received from Pay & Record
Office, London, dated July 8, 1916.

#363 Pte. N. Crane. ✓

Gunshot wound left thigh severe.

Admitted Royal Victoria Hospital, Netley, 7/7/16.

C.R. 363

Extract from ~~casualties~~ Casualties received from Pay & Record
Office, London, July 8, 1916.

Royal Victoria Hospital, Netley, 7-7-16.

363 Pte. Crane N.

G.S.W.1R Thigh severe.

C.R. 363

Extract from Nominal Roll of 60. 1st Bn. Nfld. Regt.
Embarked at Devonport for Active Service 20-8-15.

363 Pte. N. Crane.

Disembarked Alexandria, 31-8-15. Proceeded to Abbassia,
Cairo, same date. Embarked Alexandria for Gallipoli
13-9-15.

C.R. 363

Extract from Memorial Roll Embarked St. John's per U.S.

"Florissel" Oct 4, 1916.

363 Crane Nathaniel.

C.R. 363

Nathaniel Crane was attested for General service
with the NEWFOUNDLAND REGIMENT on ..Sept.5th,1914..
Regimental No 363 was allotted to Pte. Nathaniel Crane

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th. 1919.

Casualty Form—Active Service.

Regiment or Corps Newfoundland

✓ 152

Regimental No. 363 Rank Pte. Name Crane, D.

Enlisted (a) 1/10/14 Terms of Service (a) one year Service reckons from (a) enlistment

Date of promotion to } present rank } Date of appointment } Numerical position on }
 to lance } roll of N.C.Os. }

Extended _____ Re-engaged Aug 19/15 Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., 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	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked St. John's, "NFLD."		3.10.14	
		Disembarked Alexandria		1.9.15	
		Embarked for Gallipoli		13.9.15	
		Embark'd Port Suez	14 3.16		
		Disembk'd MARSEILLES	22 3.16		
18.4.16	H.C.C.S.	Admitted Sp. H. H. H.	H.C.C.S.	4/4/16	B52 }
		On 19 duty	do	8/4/16	B52 }
	87th	As 2nd High Trans	C.C.S.	3.7.16	80-1968
	Spl. Det.	Inv to Eng. Co.	2 Gen. Insp	5.7.16	W3083
			Major		

J.M.

W. Clerk CAPTAIN.
 FOR U.S. INFANTRY RECORDS
 G. H. Q.; 3rd ECHELON.

(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) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

Casualty Form—Active Service.

Regiment or Corps Newfoundland

✓ 152

Regimental No. 363 Rank Pte. Name Crane, D.

Enlisted (a) 1/10/14 Terms of Service (a) one year Service reckons from (a) enlistment

Date of promotion to } present rank } Date of appointment } Numerical position on }
 to lance } roll of N.C.Os. }

Extended _____ Re-engaged Aug 19/15 Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., 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	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked St. John's, "NFLD."		3.10.14	
		Disembarked Alexandria		1.9.15	
		Embarked for Gallipoli		13.9.15	
		Embark'd Port Suez	14 3.16		
		Disembk'd MARSEILLES	22 3.16		
18.4.16	H.C.C.S.	Admitted Sp. H. H. H.	H.C.C.S.	4/4/16	B52 }
		On 19 duty	do	4/4/16	B52 }
	87th	As 2nd High Trans	C.C.S.	3.7.16	80-1968
	Spl. Det.	Inv to Eng. Co.	2nd Gen. Hq.	5.7.16	W3083
			Major		

J.M.

W. Clerk CAPTAIN.
 FOR THE INFANTRY RECORDS
 G. H. Q. 3rd ECHELON.

(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) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

Casualty Form—Active Service.

C.R.Regiment or Corps NewfoundlandRank L/C Surname Crane Christian Name NathanReligion S of E. Age on Enlistment 18 years 1 months.Enlisted (a) 17-1-17 Terms of Service (a) 5 1/2 of W Service reckons from (a) 17-1-17Date of promotion to present rank 17-1-17 Date of appointment to lance rank 17-1-17Extended { } Re-engaged { } Qualification (b) 1st Lt or Corps Trade and Rate.

Signature of Officer.

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>Hampton 4.3.17</u>		
			Disembarked <u>Rover 5.3.17</u>		
			Joined Battalion <u>31 MAR 1917</u>		<u>B 213</u>
<u>1 APR 1917</u>	<u>OC. En.</u>	<u>MISSING</u>	<u>France</u>	<u>1 APR 1917</u>	<u>B 213</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.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Number of Sheet 1

Regiment of Newfoundland

Signature of O. C. Company James A. ...

Printed and Sold by Gale & Polden, Ltd., Wellington Works, Aldershot. 2/6 per 100.20,712-s.

Regimental Number and Name		Enlistment <u>W. Johns</u>	Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<u>363</u>	Age on <u>18</u> years <u>18</u> months	Trade <u>Watchmaker</u>	Promoted <u>2/6/17</u> 17-1-17
Joined <u>1916</u> Date <u>19-8-15</u>		Date of Enlistment <u>11/11/14</u>		Religion
Joined <u>1917</u> Date <u>15-9-16</u>		Period of { with Colours <u>2 2/2</u> years. with Reserve <u>1 3/4</u> years. <u>White Island</u> <u>C. J. E.</u>		
Joined	Date			
Joined	Date			

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<u>St George</u>	<u>19 15</u> <u>Feb 7</u>	<u>Plt</u>		<u>absent from latrine until</u> <u>mor. Feb 8. 15.</u>	<u>Sgt Steppard</u>	<u>3 days C.B.</u>	<u>9.2.15</u>	<u>Capt Bernal</u>	<u>forfeit 1 day</u> <u>pay under R.W.</u>
<u>Edinburgh</u>	<u>Mar 23</u>	<u>"</u>	<u>1</u>	<u>Drunk in long street at 10.15</u>	<u>Sgt Hannah</u>	<u>8 days C.B.</u>	<u>24.3.15</u>	<u>Lt Col Burton</u>	
<u>Stob Camp</u>	<u>May 22</u>			<u>In Hawick without a pass</u>	<u>Lt Col Moore</u>	<u>3 days C.C.</u>	<u>24.5.15</u>	<u>Capt Alexander</u>	
<u>Stob</u>	<u>18-7-15</u>	<u>"</u>		<u>Absent from latrine at</u> <u>midnight 19-7-15</u>	<u>Capt. Rogers</u>	<u>3 days C.C.</u> <u>forfeit 2 days Pay R.W.</u>	<u>20-7-15</u>	<u>Lt. J. ...</u>	<u>Lt.</u>
				<u>Killed in action</u>	<u>14/4/17</u>				
To be carried over									