



38

# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 5881 Name John Cutchell Corps C of E.

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

- |  |                               |
|--|-------------------------------|
| 1. What is your name? .....  | 1. <u>John Cutchell</u> ..... |
| 2. What is your full Address? .....  | 2. <u>Bellesham</u> .....     |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u> .....           |
| 4. What is your age? .....   | 4. <u>21</u> Years .....      |
| 5. What is your Trade or Calling? .....  | 5. <u>Sailor</u> .....        |
| 6. Are you Married? .....  | 6. <u>No</u> .....            |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? .....                             | 7. <u>No</u> .....            |
| 8. Are you willing to be vaccinated or re-vaccinated? .....  | 8. <u>Yes</u> .....           |
| 9. Are you willing to be enlisted for General Service? .....   | 9. <u>Yes</u> .....           |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? .....                                     | 10. ) Name .....              |
|  | ) Corps .....                 |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... | 11. <u>Yes</u> .....          |

I, John Cutchell 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.

John Cutchell SIGNATURE OF RECRUIT.  
P. H. Moulton Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, John Cutchell 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 31<sup>st</sup> day of July 1918

Signature of Attesting Officer Edwards Lieut

### †CERTIFICATE OF APPROVING OFFICER.

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

If enlisted by special authority, such will be attached to the original attestation.

Date Aug 1<sup>st</sup> 1918 }  
 Place St John's } Approving Officer.

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

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



C.R. 5881

Extract from Daily Orders Part II Unit The Royal Wfid. Regt.  
St. John's, Aug. 15th, 1919.

The discharge of the undernoted on demobilization has been  
CONFIRMED by Officer i/c Records from 2-8-19.

5881 Pte. J. Critchell.

C.R. 5881

Extract from Daily Orders Part 11 Unit the Royal Nfld. Regt.  
St. John's, July 14th, 1919.

The discharge of the undermoted on demobilization has been  
APPROVED by O.C. Discharge Depot with effect from 23-7-19

5881 Pte. J. Critchell.

C.R. 5-881

Extract from Daily (London) Express, 1919, 1919 Royal Nfld.  
Regt. St. John's, July 3rd, 1919.

5881 Pte. J. Critchin.

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

C.R. 5881

Extract from telegram from Syn., London to Military.  
dated June 26th 1919.

Remittances received as follows have not  
been paid - soldier repatriated - you can  
adjust

5881, Critchell, £4. 2. 0.

C.R. 5881

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

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

#5881 Pte J. Critchell.

"G" Company.

C.R. 5881

Extract from Orderseby Lt. Col., B.J.BARTON? D.S.O., Commanding 2nd.,  
Battalion of the Newfoundland Regiment dated 16th November 1918.

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THE UNDERMENTIONED WILL PROCEED TO JOIN THE NEWFOUNDLAND FORESTRY  
CORPS ON MONDAY 18th inst 1918. NOVEMBER

#3881 Pte. J. Critchell.

5



C.R. 5881

Extract from Daily Orders Part 11 Unit The Royal Bfld. Regt.  
St. John's, dated Sept. 5th, 1918.

The/ Undernoted man proceeded to R.N. Coy's Dry Deck, St. John's  
2-9-18.

5881 Pte. J. Critchell.

C.R. 5881

Extract from Nominal Roll Entrained At St. John's for  
Overseas Sept. 22, 1916. "CE

5881 Pte. Critchell Garland.

C.R. 5881

Extract from Daily Orders part 11, from Unit The Royal  
Nfld. Regt. St. John's, dated August 1, 1918.

#5881 Pte. John Critchill

Attested for General Service with the Royal Nfld.  
Regiment 31-7-18

J. Critchell

C.R. 5881

~~11/10~~

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

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

1. Unit and Corps. *Royal Newfoundland* 7. Former Trade or Occupation } *Sailor*  
 2. Regtl. No. *581* 3. Rank. *plb* 7a. If the soldier claims previous service in Army, he should state—  
 4. Name *Outshell* *John* (a) Former Regts. or Corps; (Surname) (Christian Names) with Regtl. Nos.  
 5. Age last birthday... *23*  
 6. Posted for duty on..... at..... in category (or grade).....  
 8. If the disability is an injury was it caused  
 (a) in action (b) on field service  
 (c) on duty (d) off duty? (b) Date of Discharge;  
 (c) Cause of Discharge.  
 9. If a Court of Inquiry was held on an injury state:—  
 (a) When (d) Particulars of Pension or Gratuity (if any)  
 (b) Where  
 (c) Opinion of Court

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

### Statement of Case.

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

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

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

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

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

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

*No complaints of no disability*

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

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

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

*Repatriation*

*W. E. Proctor* ~~GP~~ *Rame*  
Medical Officer in charge of case.

Station *Hoylake, born* .. .. .

Date *4/4/69* .. .. .

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







No. 21164/2400

*066 283*

N.F.P./79.

NEWFOUNDLAND CONTINGENT

From:

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

To:

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



20th December 1918

December 30<sup>th</sup> 1918

Subject: 5881, Pte. J. Critchell,

Receipt hereunder.

With reference to the following telegram (11033) from the Hon. Minister of Militia, received

*W.H.A. Spence Capt. & adjt. for*  
Officer Commanding *2/Bn Royal Nfld. Regt.*  
Royal Newfoundland Regiment.

pay to 5881 Critchell £4;2;0

Received the sum of Four Pounds

Draft £ 4:2:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Two Shillings on account of cable remittance from Newfoundland.

*H. H. Marshall Capt. an*  
Chief Paymaster & O. I/c Records.

J. Critchell  
No. 5881 Rank Pte.

Witness L. W. Stans C.S.M.

No. 4153/615

N.F.P./79.

From. NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,  
2/Bn. Royal Newfoundland Regt.  
Winchester.

14th. March 1919

March 17<sup>th</sup> 1919.

5881 Pte. Critchell J.

With reference to the follow-  
ing telegram from the Minister of  
Militia / / ( 77 )

"Pay to- 5881 Critchell,

£4:2:0

Cheque £ 4. 2. 0 is enclosed.  
for payment to this Soldier.  
Kindly obtain his receipt  
hereon.

*A. D. Munnell*  
Chief Paymaster & O. i/c Records.

Receipt hereunder.

*Robert J. Parsons*

LIEUT. COLONEL.

COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

Received the sum of £ 4. 2. 0

Four Pounds two in respect of

telegraphic remittance from the  
Minister of Militia.

John Critchell

No 5881 Rank Pte.

Witness W. Parsons *W. Parsons*

N7916/1540

b. P.D. 1000/11

N.F.P. 170.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding  
2nd Bat. H.L. Mtd. Regiment  
Winchester.

26th May 1919

5881 Pte. J. Critchell

With reference to the following telegram from the Minister of Militia / / 19 (199):

"Pay to- 5881 J. Critchell  
£4. 2. 0.

Cheque £ 4. 2. 0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Chief Paymaster & O. i/c Records.

27/5/19 1919

Receipt hereunder.

*J. Deane*  
LIEUT. COLONEL  
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.  
Officer Commdg. Batt'n.

Received the sum of four pounds  
Five Shillings in respect of telegraphic remittance from the Minister of Militia.

*J. Critchell*  
No. 5881 Rank Private  
Witness: *J. Deane*

Critchell, J

5881

Ray Sept.

2

August 6th 1919.

#5881, Ote. John Critchell,  
Belleoram, F.B.

Dear Sir:

Enclosed please find Discharge Certificate  
# 3411.

Yours truly,

Capt. O.I/c Records.

RS/.

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 5881 Rank Plt Name C. Ritchell  
 Intended place of residence Bellaram

2. Occupation Sailor  
 Classification of soldier E Medical Category A<sup>1</sup>

3. The above named man is discharged in consequence of

### DEMobilIZATION Eligible for War Service Gratuity

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

Place, ST. JOHN'S

Date JUL 9 1919

*[Signature]*  
 Commanding Discharge Depot  
 The Royal Newfoundland Regiment

### CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place, ST. JOHN'S

Date JUL 9 - 1919

*[Signature]*  
 Signature of soldier

*[Signature]*  
 Signature of witness

### CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place, ST. JOHN'S

Date JUL 9 - 1919

*[Signature]*  
 Signature of soldier

*[Signature]*  
 Signature of witness

### STATEMENT OF SERVICE

7. Enlisted for service 31-7-18 No. of days on Military  
 Discharged from service 23-7-19 Plus 14 days Service 372

### APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S

Date 1919

*[Signature]*  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment

### CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place, ST. JOHN'S

Date August 6/1919

*[Signature]*  
 Officer in Records  
 The Royal Newfoundland Regiment

*[Handwritten]* W.B. 5049/5411

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 5881 Rank Pte Name Britchell J  
 Date of Enlistment 31.7.18 Address Bellwood District Fortune  
 Occupation Painter Classification for Discharge E Medical Category A.I.  
 Recommendation S.M.B. \_\_\_\_\_ Disability Rating \_\_\_\_\_

Passed to Demobilization Officer with following documents:—

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

Date 8-7-19

O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

**1. Civil Re-Establishment.**

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

*J. Britchell*

Particulars passed to Vocational Officer for information and action.

Date.....

**2. Clothing.**

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) ~~Clothing Supplied~~

*[Signature]*

Date 9-7-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 9869.....to his home at Belloram..... and Release Certificate No. 3336... issued.

Date 9-7-19.....

*J. A. Newell*  
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 6-5-19.....

Date 9-7-19.....

*J. A. Newell*  
Depot Paymaster.

Discharge approved for 23-7-19.....

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1
F 178	W 3494	B 122	Board 1st	" 2
B 1786	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 9-7-19.....

*J. A. Newell*  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

**Eligible for War Service Gratuity**

Date JUL 23 1919.....

*A. R. Coope*  
O. C. Discharge Depot.

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

Date .....



# The Royal Newfoundland Regiment

Class for Demobilization: 76

Report of Demobilization  
Travelling Board, held on soldier for  
discharge.

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date ..... 8.7.19 .....

Regimental No. 5781.....

Name ..... Critchell John .....

Address ..... Bellefleur .....

Present Medical Category ..... A7 .....

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

Members of Board {

R. J. Last Major  
O.C. Discharge Depot.

H. A. Brown  
Senior Medical Officer

Geo. Berden  
M.O. Depot

# Civil Re-establishment Committee



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

To resume former Occupation.

*J. Mitchell*

Signature of Man.

*J. H. Knowlton*

Signature of the Vocational Officer or his Representative.

Reg. No. 5881

Place

*at Johns*

Date

*9-7-19*

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

# MEDICAL HISTORY

Surname Critchell

OF med John  
Christian Name John

Table I.—GENERAL TABLE

Birthplace:—Parish Belleoram County Nfld.

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	on <u>31<sup>st</sup></u>	day of <u>July</u>	on	day of
	at <u>St Johns</u>		at	
Declared Age	<u>21</u>	years		years
Trade or Occupation	<u>Sailor</u>			
Height	<u>5</u>	feet <u>7</u>		feet
Weight	<u>135</u>			lbs.
Chest Measurement	Girth when fully expanded		<u>37 1/2</u>	inches
	Range of Expansion		<u>4 1/2</u>	inches
Physical Development				
Vaccination Marks	Arm	Right	Left	Right
	Number			
When Vaccinated				
Vision	R. E.—V=	<u>6/24</u>	R. E.—V=	
	L. E.—V=	<u>6/18</u>	L. E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>James P. Brown</u>			
(Rank)	<u>Major</u>		Medical Officer	Medical Officer
Enlisted	at <u>St Johns</u>		at	
	on <u>31<sup>st</sup></u>	day of <u>July</u>	on	day of
		191 <u>8</u>		191
Joined on Enlistment	Corps	Regtl. No.	Corps	Regtl. No.
	<u>Royal</u>	<u>5-881</u>		
Transferred to	<u>Nfld. Regt.</u>			
Became non-effective by	on	day of	on	day of
(Signature)		191		191
(Rank)				





## Descriptive Return of a Soldier Discharged on Account of Disability

**INSTRUCTIONS**—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. i c Records together with the remainder of the man's documents.

Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

Name in full *John Critchell*

Regiment from which discharged **Royal Newfoundland**

Regimental number *5881*

Intended address *Belloram.*

Height on discharge *5* Feet *8*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *—*

Figure on discharge *Medium*

Christian name of Father *James.*

Christian name of Mother *Sarah*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Belloram., 19th January, 1897*

Nature and locality of civil employment required

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct.

(Soldier's signature in full) *J Critchell*

*Ph.*  
(Rank)

Station **ST. JOHN'S,**

Date *5-7-19.*

I certify that the above named soldier signed the foregoing declaration in my presence, and that the above description and details are, to the best of my knowledge correct.



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

Station

Date

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

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

1. Unit and Corps. *Royal Newfoundland* 7. Former Trade or Occupation } *Sailor*
2. Regtl. No. *2881* 3. Rank. *Plt* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Pritchett* *John*  
(Surname) (Christian Names)  
(a) Former Regts. or Corps ; with Regtl. Nos.
5. Age last birthday *23*
6. Posted for duty on ..... at .....  
in category (or grade) .....
8. If the disability is an injury was it caused  
(a) in action (b) on field service  
(c) on duty (d) off duty ? (b) Date of Discharge ;  
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—  
(a) When (d) Particulars of Pension or Gratuity (if any)  
(b) Where  
(c) Opinion of Court

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

### Statement of Case.

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

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

14. State whether the disabilities are
- |   | (a) attributable to | (b) aggravated by |
|---|---------------------|-------------------|
| (i.) Service during the present war .. .. .                     | .....               | .....             |
| (ii.) Previous active service.. .. .                            | .....               | .....             |
| (iii.) Climate in pre-war service .. .. .                       | .....               | .....             |
| (iv.) Ordinary military service before the war .. .. .          | .....               | .....             |
| (v.) Serious negligence or misconduct on the }<br>man's part. } | .....               | .....             |

14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

*If complainant of this disability*

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

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

16. Was an operation performed? If so, when and what was its nature?

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

18. \*In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

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

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

*Repatriation*

*W. G. Pocumie* <sup>Captn</sup>  
*Rame*

Medical Officer in charge of case.

Station *H. G. Egypt*

Date *9.1.49*

\* 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

August 15, 1919

Mr. John Critchell,  
Bellevue, F.B.

Dear Sir:-

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

Yours truly,

Captain & paymaster.



DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes, if any questions are not applicable, the words "NOT APPLICABLE" must be written out. On completion this Declaration is to be returned to THE OFFICER I/C

RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

1. Christian name. *John*.....
2. Surname. *Critchell*.....
3. Rank. *Private*.....
4. Regtl. No. *5881*.....
5. Address in full to which future payments of gratuity are to be forwarded. *Bellman's Fortune Bay*.....
6. Date of enlistment in the Regiment. *25<sup>th</sup> 1918, July 25<sup>th</sup>*.....
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. *NA.*
8. Relationship of such dependents. *NA.*
9. Address in full of such dependents. *NA.*
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *NA.*
11. Were you on active service only in Mfld. If so, give dates and particulars of such service. *England*.....
12. Give total length of time which you served on active service, whether in Mfld. or Overseas. *One year*.....
- ..... 1.2.....

13. Have you had more than one enlistment? If so, give particulars of discharge and re-enlistments, and under what regimental numbers. *No*

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid. *No*

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

16. Have you, during the present war, served in the Imperial Forces? *No*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *No*

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *No*

(b) If so, was such reversion in consequence of misconduct or inefficiency? *No*

19. Are you now serving in the Regt.? *No*. If not give: (a) Date of discharge *24 July 1919* (b) Reason for discharge

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. *No*

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee. *No*

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

Signature of Applicant: *John Butchell*  
 Place of Residence: *Belloram Fortune Bay*  
 Declared before me at: *St Johns*  
 This *10th* day of *July* 19*19*....

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

*Wm Guinness Esq*

POST DISCHARGE PAY.				Net amount
Date paid	Paid Soldier.	Paid Dependant.	War Service Gratuity.	due
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
Certified correct.			.....	.....

ST. JOHN'S, 6161 01 700

# Royal Newfoundland Regiment.

Billeting Account,

To Mr. W. Locke  
Inverness St

Billeting Soldiers as undermentioned

from July 1/19 to July 14/19

5881. Pt. J. Brichelle 14. 40

ACCOUNT	<u>B. M. J.</u>
CH. NO.	<u>3131</u>
IND. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

Certified correct for \$ 14.40

Wm. G. ...

Billeting Officer.

Mr. W. G. ...

Oct 5.

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39.

Regiment of Royal Newfoundland

Number of Sheet One  
Signature of O. C. Company Platnick Lieut

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay		
No.	<u>John Critchell</u>	Age on	21 years	<u>Sailor</u>			
5881		months		Religion			
Joined		Date	Place and Date of Enlistment	<u>CofE.</u>			
Joined		Date	31-7-18	Place of Birth			
Joined	Date	Period of	} with Colours 7 years.	<u>Belleoram</u>			
Joined	Date	} with Reserve 13 1/2 years.					

Place	Date of Offence	Rank	Cases of Discretion	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<u>Water St</u>	<u>11-9-18</u>	<u>Pte</u>		<u>Failing to Salute and officer</u>	<u>RSM Patrick Peltacott</u>	<u>3 Days C.B.</u>	<u>12-9-18</u>	<u>Lt. A.L. Summell</u>	<u>SS</u>
				<u>Demobilized St John's</u>	<u>6</u>	<u>8</u>	<u>19</u>		

To be carried over.

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 5881 Rank Pte Name Britchell J  
 Date of Enlistment 31.7.18 Address Bellevue St. District Fortune  
 Occupation Parol Classification for Discharge 6 Medical Category AI  
 Recommendation S.M.B. .... Disability Rating .....

Passed to Demobilization Officer with following documents:—

N.F. P 36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 123	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3 <u>3</u>
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 8.7.19

O. C. Discharge Depot. [Signature]

### PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date [Signature]

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) ~~Clothing Supplied~~

Date 9-7-19

O i/c. Re-clothing. [Signature]

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 9869..... to his home at Bellorum..... and Release Certificate No. 3336... issued.

Date 9-7-19.....

*J. A. [Signature]*  
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 1-5-19.....

Date 1-7-19.....

*[Signature]*  
Depot Paymaster.

Discharge approved for..... 23-7-19.....

Forwarded with following documents to O.C Discharge Depot.

N.F. P136.....	B 268.....	B 121.....	N.F. Med.....	D.F. 1.....
F 178.....	W 3494.....	B 122.....	Board 1st.....	" 2.....
B 178a.....	D 400A.....	B 1915.....	do 2nd.....	" 3.....
B 179.....	D 400B.....	Form L.....	do 3rd.....	" 4.....
B 179a.....	D 400C.....	Form K.....	do 4th.....	" 5.....
B 179b.....	B 103.....	ME 2.....		" 6.....
B 179c.....	B 120.....	M 93.....		

Date 9-7-19.....

*J. A. [Signature]*  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

**Eligible for War Service Gratuity**

Date JUL 20 1919.....

*M. R. Cooper Capt*  
O. C. Discharge Depot.

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

Date July 21/19.....

*[Signature]*

April 30th. 1942

Mr. John Critchell,  
71 City Road,  
Saint John, N. B.

Dear Sir,

Enclosed please find certificate  
of your services with the Royal Newfoundland  
Regiment as requested in your letter of 16th.  
April 1942.

Yours very truly,

D. L. Butler,  
Clerk, War Pensions.

DLB/SM