



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3722 Name Allan Dave Corps I of I.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---------------------------|
| 1. What is your name? | 1. |
| 2. What is your full Address? | 2. <u>Allan Dave</u> |
| 3. Are you a British Subject? | 3. |
| 4. What is your age? | 4. <u>yes</u> Years |
| 5. What is your Trade or Calling? | 5. <u>18</u> Months |
| 6. Are you Married? | 6. <u>3</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>Farmer</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>no</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. <u>Yes</u> |
| 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, Allan Dave do solemnly declare that the above answers made by me Allan Dave are true and that I am willing to fulfil the engagements made.

Allan Dave SIGNATURE OF RECRUIT.
Brendan Smith Signature of Witness.
I 3-5-17 OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Allan Dave 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, obey and faithfully serve His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.
 The above questions were then read to the Recruit in my presence.
 I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at.....
 on this.....day of.....1915
May Signature of Attesting Officer Chas R. Dave

† 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).....

3722



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3722 Name Allan Dawe Corps 2 of 8

Questions to be put to the Recruit before Enlistment.

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

I, Allan Dawe 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.

Allan Dawe SIGNATURE OF RECRUIT.
T3-5-17 Brendan Smith Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Allan Dawe 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 on this 3 day of May 1917

Signature of Attesting Officer Chas R. Aye

†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.....
Place..... } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Allan Dawe
 Apparent age 19 years 3 months. Height 5 feet 7 1/2 inches
 Chest Measurement { Girth when fully expanded 33 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Dawe
Upper Gullies | 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 <u>3-5-17</u>									
Joined at <u>St. John's</u> on <u>Mar 3-17</u>									
<u>Discharged July 12/1919</u>									
<u>Embarked St. John's S. Houzel to Halifax NB 19³ 27</u>									
<u>Disembarked France 29-3-18 Admitted 5th Bn. Buffs. London beyond 30-5-18</u>									
<u>Went to base depot London 9th 28. Joined combat in the field 20-4-18 Wounded 2¹⁰ 28</u>									
<u>Admitted 87th H. Coy. Buffs. 2-10-18 transferred to England 8-10-18</u>									
<u>Admitted Military Hosp. Bethnal Green London 8-10-18 Posted to No. 10. Newcastle 19¹ 19</u>									
<u>Left for Demobilization 22-5-19. Arrives Southampton 1-6-1919</u>									
<u>Demobilization St. John's 12-7-19</u>									

Total Service forfeited as above.....

Total Service towards Engagement to 12-7-19 [date of discharge] 2 years 71 days
 Pensions " " " " " " " " " " " "

No. 372 Name *A. Daine* *Sgt., Batty,* or Company } *B* Corps *1st Regt 1st Cav Regt* Date of enlistment }
 G.C. Badges }
 Service or Proficiency Pay } *Temporary Sheet*
 Date of last entry in Company Conduct Sheet } No. and date of last drunk } Period not reckoning towards freedom from extra fine } Sheet No. *1* Signature O.C. Company, etc. } *A. L. Smith Capt* Character

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>Field</i>	<i>8/1/18</i>	<i>Pte</i>		<i>Absent from tattoo roll called in at 10 PM</i>	<i>A. L. Smith</i>	<i>3 days det</i>	<i>9/1/18</i>	<i>Capt A. L. Smith</i>	<i>blt</i>
									<i>wa 29/9/18</i>
									<i>Conf 8/18</i>

Army Form B. 122

C.R. 3722

Extract from Daily Orders Part II Unit The Royal Welch Regt.
St. John's, July 4th, 1919.

The discharge of the undernoted on decubilitation has been
APPROVED by C.O. Discharge Depot with effect from 28-6-19.

3722 Pte. A. Dawe.

C.R. 3722

**Extract from Daily Orders Part 11 Unit The Royal NZA.
St. John's, July 16th, 1919.**

**The discharge of the undernoted on demobilisation has been
CONFIRMED by Officer i/c Records from 18-7-19.**

3722 Pte. Allan Dawe

C.R. 3722

Extract from Medical Board held on Tuesday June 24th, 1919.

3722 Pte. A. Dawe.

Recommended discharge from the Army.

C.R. 3722

Extract from Daily Orders Part 11 Depot. St. John's,
Date June 18th 1919.

3722, Pte. A. Dawe.

Reported at Headquarters 1/6/19. RE "Corsican"
which sailed Liverpool May 22/1919.

C.R. 3722

Extract from Daily Orders Part 11 By Lt. Col. B.J.
Barton. D.S.O. Commanding 2nd Bn., 20-1-19. Royal
N.F.L.D. Regt.

The following having reported back from 1st Bn., is
taken on the strength and posted to H.Company. 19-1-19.

3722 Pte. H. Dawe.

C.R. 3722

Extract of Casualties from P & R.O. London dated Jan. 1919.

The undermentioned was discharged from Bethnal Green Mil. Hospital
on 9/1/19. Marked III Employment and granted furlough to 18/1/19.

3722 PTE. A. Dawe.

A.Fs. W.3016 from Hospl.

C.R. 3722

New York 1918.

Mr. John Dawe,
Upper Gallies.

Dear Sir:-

I beg to inform you that additional information has to-day been received by this Department through the Visiting Committee, of the Newfoundland War Contingent Association to the effect that No. 3722 Private Allan Dawe, is now progressing favourably.

Yours faithfully,

Lieut. Col.,

Chief Staff Officer.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

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

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

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

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

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

(NOT TRANSMITTED)

Signature of Sender _____ Address St. John's Dept. of Militia

Line Number	Rcd	By	Sent	by	Check

Dated **Oct. 19th, 1918.**

To **Mr. John [redacted], Dawe.**
Upper Gullies.

Report has been received from London, to the effect that your son,
#3722 Pte. Allan Dawe, is progressing favourably.

J.R. Bennett,
Minister of Militia.

C.R. 3722

Extract from Telegram to Synoptical, London dated October 17th., 1918.

In answer your telegram October 15th., 3722

Dawe, progressing favorably.

C.R. 3722

extract from Telegram to Synoptical, London, dated October 15th., '18.

Advise condition of 3722 Dawe.

NEWFOUNDLAND POSTAL TELEGRAPHS.

Counter No. **C.R. 3722**



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 _____

~~Dept of Militia.~~

Line Number _____	Rcd _____	By _____	Sent _____	by _____	Check _____
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Dated **Oct 11th, 1918**

To **John Dawe, Upper Gullies**

Regret to inform you that Record Office, London, officially reports **No. 3722, Private Allan Dawe at 32nd Stationary Hospital, Wimereux October 2nd . suffering from G.S.W. right arm, back and legs**

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

J.R. Bennett

Charge to Dept of Militia

Minister of Militia.

FOR TYPEWRITER

C.R. 3722

Extract from Nominal Roll of sick and Wounded from the
French Expeditionary Force admitted on various dates.
Admitted Military Hospital Bethnal Green London .

#3722 Pte. A. Dawe.

8/10/19.

G.S.W. R. LEG FACE R. ARM AND SHOULDER.

C.R. 3722

Extract from Casualties No. C. 1707 dated 7/10/18.

#3722 Pte. A. Dawe.

WOUNDED
2/10/18
AUTHORITY O. C., 32/S.H.
3/10/18.

C.R. ³⁷²²/₇₆

Extract of Casualties from Pay and Record Office London dated
May 1st. 1918.

3722 Pte. A. Dawe

Royal Newfoundland Regiment.....is reported by O.C. 2nd. Con.
Depot, Rouen, discharged to Base Depot, Rouen, CL. "A". 9/4/18

Authority: Lists from War Office G.2. Cas., 1/5/18.

C.R. 3722



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

NO. 1 RECORD OFFICE PRESTON

LIST NO. H.A. 29791

4331 L/O Lythgoe J.	1 Lancs Fus.	SW L. Shldr	.Adm.32 Sty.H.	Wimereux 2	October/18.
27043 Pte Warburton	11 E.Lancs.R.	Tonsillitis Mild.	.Adm.7 Sty.H.	Boulogne 3	October/18.
57438 Pte Yorke A.	17 Lancs.Fus.	GSW Arm R.Chest Sev.	.Adm.7 Sty.H.	Boulogne 3	October/18.
203450 Pte McNally W.	11 E.Lancs.R.	Sep.Fing.Mild	.Adm.7 Sty.H.	Boulogne 3	October/18.
47186 Pte Wright J.	16 Lancs.Fus.	Neuralgia Mild	.Adm.7 Sty.H.	Boulogne 3	October/18.
32914 Pte Brown H.G.	13 E.Lancs R.	Myalgia Mild.	.Adm.7 Sty.H.	Boulogne 3	October/18.
27323 Pte Rodger F.	11 E.Lancs.	GSW Shldr L.	.Adm.32 Sty.H.	Wimereux 2	October/18.
32828 Sgt Douglas H.	13 E.Lancs.	GSW Ear	.Adm.32 Sty.H.	Wimereux 2	October/18.
32863 Pte Bissell J.	13 E.Lancs.	BW Shldr L.	.Adm.32 Sty.H.	Wimereux 2	October/18.
54099 Pte Kenny W.T.	1 Lancs.Fus.	BW L. Hand	.Adm.32 Sty.H.	Wimereux 2	October/18.
16542 Pte Glossop R.	18 Lancs.Fus.	GSW L. Hand	.Adm.32 Sty.H.	Wimereux 2	October/18.
46529 Pte Nowlan N.	11 Manchesters.	Abrasions Feet	.Adm.32 Sty.H.	Wimereux 2	October/18.
39207 Pte Proctor A.G.	1 Lancs Fus.	SW L. Bttk	.Adm.32 Sty.H.	Wimereux 2	October/18.
38851 Pte Green F.	1 Lancs Fus.	BW R. Thigh	.Adm.32 Sty.H.	Wimereux 2	October/18.
241356 Pte Jackson M.	1 Border R.	GSW R. Foot	.Adm.32 Sty.H.	Wimereux 2	October/18.
38744 Pte Bateman J.	1 Lancs Fus.	BW Arm L.	.Adm.32 Sty.H.	Wimereux 2	October/18.
202906 Pte Walker J.	1 Border R.	GSW R. Arm Fr. Hum	.Adm.32 Sty.H.	Wimereux 2	October/18.
11472 Pte Burch H.	1 Lancs Fus.	GSW R. Arm	.Adm.32 Sty.H.	Wimereux 2	October/18.

006700

NO. TWO RECORD OFFICE PRESTON

LIST NO. H. A. 29791

45164 Pte Gurr F.	15 L.N.Lancs R.	Debility Mild	.Adm.7 Sty.H.	Boulogne 3	October/18.
95645 Pte McNamee E.	4 R'L'pools.	SW Amp.L.Thigh	.DIED in 32	Sty.H.	Wimereux 2 October/18.
30969 Pte Lee J.T.	1/4 L.N.Lancs.	GSW Shldr L.	.Adm.32 Sty.H.	Wimereux 2	October/18.

NEWFOUNDLAND EXPEDITIONARY FORCE

LIST NO. H. A. 29791

3722 Pte Dawe A.	1 Newfoundland.	GSW R. Arm Back. Legs	.Adm.32 Sty.H.	Wimereux 2	October/18.
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SICK AND WOUNDED N.C.O's AND MEN OF THE EXPEDITIONARY FORCE - FRANCE.

LIST No. H.A. 21313.



637

INFANTRY RECORD OFFICE - L I C H F I E L D (PART 1)

ADM. & CON. DEP. ROUEN 30th MARCH 1918.

53842	Pte. Williamson, G.	1st N. & D.	SW. Thigh R.	(Ex 1 Aus. Gen.)
204416	" Avison, W.	16th do.	SW. Side	do.
94135	" Curd, A.	12th do.	SW. Face & Wrist	do.
306135	Sgt. Foulds, E.	12th do.	SW. Hand L. & Spr. Arm	do.
10646	CSM. Widdowson, F.	1st do.	SW. Wrist R.	do.
92420	Sgt. Raynes, T.	16th do.	GSW. Leg R.	(Ex 6 Gen. H.)
25702	Pte. Burton, R.	16th do.	ICT. Feet.	do.
51410	" Hall, T.	1st Lincs.	ICT. Hand R.	do.
94328	" Nicholas, W.	12th N. & D.	GSW. Back	do.
13130	" Slack, D.	1st do.	GSW. Face	do.
71321	Pte. Howley, J.	15th do.	GSW. Shldr. L.	do.
43036	" Conington, W.	1st Lincs.	Sprd. ankle L.	do.
72591	" Arbury, W.	15th N. & D.	GSW. Face	(Ex 9 Gen. H.)
21359	" Holderness, F.	2nd Lincs.	GSW. Wrist L.	do.
330081	" Lockett, S.	15th N. & D.	GSW. Axilla	do.
265197	Pte. Smith, H.	12th do.	GSW. Shldr. R.	(Ex 10 Gen. H.)
306671	" Smith, L.	1st do.	NYDN	(Ex 12 Gen. H.)
201390	" Scattergood, F.	16th do.	BW. Arm R.	do.
94273	" Latter, C.	12th N. & D.	GSW. Arm R.	

NEWFOUNDLAND EXPEDITIONARY FORCE.

LIST No. H.A. 21313.

ADM. & CON. DEP. ROUEN 30th MARCH 1918.

3722	Pte. Dawe, A.	1st R. Newfoundland.	Eczema.	(Ex 11 Sty. H.)
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NEWFOUNDLAND CONTINGENT

G.R. 3722

Extract of Nominal Roll of Draft no. 40, 80 Other Ranks from 2nd. Bn.,
Royal Newfoundland Regiment, Winchester, to 1st. Bn., ~~Royal Newfoundland Regiment~~
Royal Newfoundland Regiment, E. A. F.

Embarked Southampton, 27/3/18.

3722 Pte. A. Dawe.

C.R. 3722

Extract from Nominal Roll, embarked St. John's for Overseas 19-~~8~~⁵-17.

3722 PTE. A. DAWE.

C.R. 3722

Extract from Daily Orders Part 11 Unit The Royal Wilt.
Regt., St. John's, May. 3rd, 1917.

3722 Pte. Dawe.

Attested this day, posted to F. Company and assigned to
numbers as shown.

A Howe

C.R.

3722

AKO

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* } Former Trade
 2. Regtl. No. *3/12* } or Occupation }
 3. Rank... *Soldier* }
 7a. If the soldier claims previous service in Army, he should state—
 4. Name *D A N I E Albert* } (a) Former Regts. or Corps ;
 (Surname) (Christian Names) } with Regtl. Nos.
 5. Age last birthday.....
 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
 (b) Where (if any)
 (c) Opinion of Court

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

Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed 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. *Multiple G.S. Wds. Sept 29th 1918*
 12. Place of origin of disability. *Paris.*
 13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *wounded in France G.S.W. arm. back, leg and thigh. wounds now healed.*

OPINION OF THE MEDICAL BOARD.

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

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war *Yes*
 - (ii.) Previous active service *No*
 - (iii.) Climate in pre-war service *No*
 - (iv.) Ordinary military service before the war *No*
 - (v.) Serious negligence or misconduct on the man's part. } *No*
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } *N.A.*

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

15. What is his present condition? *Posterior surface upper arm*
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)
Scar 3 ins. long not painful on pressure. not attached to underlying tissues.
2nd Scar posterior surface right side back internal to scapula. Scar slightly depressed not painful on pressure.

16. Was an operation performed? If so, when and what was its nature? *atrophy of rhomboid muscles. 3rd Scar inferior surface rt. Buttock. not painful on pressure. Operation scar anterior aspect perineum. not painful on pressure, also small Scar on outer surface right thigh. not painful on pressure.*

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?

Complains stiffness about shoulder, movements out free and full.

20. Do you recommend—

- (a) Discharge as permanently unfit? *Repatriation*
- (b) Change to United Kingdom?

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

W. Lewis Capt
James

Station *Hazley Down Camp.* Medical Officer in charge of case.
 Date *Jan 23 1919*

* 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

21. Give diagnosis and particulars of:—
- (a) Any disability claimed or discovered.
 - (b) The present condition thereof.

22. 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 part of the soldier | | |
- Give details:

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

23. Is the disability in a final stationary condition? If not
- (a) How long is the present degree of disability likely to last?
 - (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

No 3889



of 1st. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, V Dave, Regl. No. 3722

hereby agree, until further notification by me, and in similar official form to make an Allotment of _____ Dollars and Sixty 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 June 1st / 17.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
2981	Father	John Dave	Newwell. Upper Fuller C.B.	60
Total Allotment, \$				60

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

(Sig.) Phas R. Ray, Capt.
 Officer Commanding
 Company
St Johns Co
May 14 1917
 191

(Sig.) a Dave
 (Rank) Private



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 Allan Dawe
aged 18 years, conducted at Hdqrs
Date: 3/5/17 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	"
11	"
12	"
13	"
14	"
15	"
16	"
17	"
18	"
19	6/9 right 6/6 left
20	"
21	"
22	"
23	"
24	"
25	"
26	"
27	"
28	"
29	"
30	"
31	"
32	"
33	no
34	5ft. 7 1/2
35	120 lbs
36	30.33.
37	\$600. per year
38	Father John, Upper Gullies
39	No

3/2/2

JM

Signature of Medical Examiner:

J.W. Burden

O.K. of 2-0-0
in R 6/12/18

St. John
Relief Hospital
The Butts
Harrow.
December 2/18

The Paymaster.

1st R. Newfoundland Regt.

NEWFOUNDLAND CONTINGENT,
RECORD OFFICE.

f. Nos. IN 10538

rec'd 6 DEC 1918

ck'd Ans'd

rel. Nos. OUT 20090/2.

Mrs

Please allot

me the sum
and charge

of £2.0.0
to my account.

R. & C.

B. & T.

P. S.

Yours Respectfully
A. Dawl.



3722. Private.
1st Royal Newfoundland Regt

ST. JOHN'S RELIEF HOSPITAL,
HARROW.

Approved please
A. Luson Registrar, Military Hospital
Bethnal Green, N.E.
Madron.
3/12/18.

20090/2/P&A.

St. John Relief
The Butts, Harrow.

6th. December, 8.

3722

Private

A. Dawe, Royal Newfoundland Regt.

2. 0. 0

Cherque no. 11169
Dato 9-12-18

19029/25

Military
Bethnal Green, N.E.

21st November 8

A. Dawe

3722

Pte

1:0:0



O.R. £ 1-0-0 M.R. 20/11/18

INDIA OFFICE,
RECORD OFFICE,
✓ 9989
20 NOV 1918

19029/26
21-11-18
Butto Harrow
London Road

Sir

Will please to send
me the sum of £ 1.00
and charge it to my
credit

Yours faithfully
Allan Dawe



3722
J. to A Dawe

Royal N G E D Regt
Butto Harrow
London Road

Approved please

A. Hudson
Registrar, Military Hospital,
Bethnal Green, N.E.,
Inatrou

19029/25

NEWFOUNDLAND

CONTINGENT

~~DUPLICATE~~ N.E.P./11.
~~MAIL COPY~~

ALLOTMENT

Posted.....

I, (No.) 3722 (Rank) Pte. (Name) Rupert Macklin

hereby agree, until further notification by me, and in required form, to make an Allotment of _____ dollars and fifty cents per diem, from my pay, to and for the benefit of the undermentioned Person and/or Persons. Such payments to be made on proof of identity of the Person and/or Persons concerned, viz.:

Whether Wife, Child, other Relative, or Friend.	NAME (In full)	ADDRESS	AMOUNT (Each Person)	
			\$	¢
Mother,	Mrs. William (Amelia) Macklin,	27 West Street, Portsmouth, England.		50
			-	50.

This Allotment to take effect from and including June 1st. 1917

NOTE:- This Form must be completed and signed by the Soldier, countersigned by the Officer Commanding his Company, and forwarded to the Chief Paymaster in accordance with P.&R.O. C.L./10, 9/12/16.

(Sig.) (Sd.) Chas. R. Ayre.
 Officer Commanding,
 " E " Company.

Dated at
 St. John's

(Sig.) (Sd.) R. Macklin.
 Allotter.

May 17th. 1917

No. 8722 Rank Pvt Name Dave N.

100 10 110
60
50

DEBITS				CREDITS			
Date	S	3	1	Date	S	3	1
Balance				Balance	12/4/8		2 8 2
Accommodance Rolls	12	10	8	Pay @ Nat Rate	12/4/8	9/1/9	272 50 136 00 27 18 11
Hospital Advances	1	0	0	R.A.	9/1/9	18/1/9	10 2/ 1 0 10
A.B. 64.							31 4 11
P.&R.O. Payments	4	0	0				
				Credit Bal.			
				£13-14-3			
Cash R. 339	13	10	0				

F 17-10-9 ✓
WPA
9/1/19 ✓

Cash R. 339

Credit Bal.
£13-14-3

RECEIVED
BY THE PAYMASTER
OF THE
ARMY

he spent his furlough with us
he left here on Monday 25th March
and promised to write when he
landed in France but we have
not received any I wrote last week
to another chum at Winchester Camp
& he has not heard either, so we are
anxious to know as I always let
his sister know how he is, One of
my sons & him were friends here.

Yours Respectfully
Mrs J. Hurdle

43 Russell St

Ayr
Scotland

43 Russell St Ayr
May 9th 1818

Officer in Command
of Records of Royal N.F.L. Dept

Dear Sir See over →

I hope I am not taking up
to much of your time but we
are anxious to know if all is
well with (3422) J^d Allan
Dawe .S. & Coy. Royal N.F.L. Dept
Capt. he left for France on 25th
March and we have heard no
further word from him since

10 10 18

Discharged to Base Depot Rouen
on 9/14/18 having recovered from
a slight sickness and it is
assumed he has since joined his
unit in the field

NEWFOUNDLAND CONTINGENT, PAY & RECORD OFFICE.		
REG. NO.	✓	4906
ISS. BY		JL
DATE		
BY		
DATE		
BY		
DATE	11/15/18	JL
BY		
DATE		
BY		

NO CONTINENT
 ORD
 94N
 Recd 25 OCT 1918
 Ack'd
 Ref. Nos. OUT 17308/9
 The Paymaster -
 1st R. Newfoundland Regt
 P.L.
 R. & C.
 B. & E.
 P.S.

Honours ward -
 Bethnal Green Mil. Hospital
 London E. 2.
 Oct 22/18
 O.K.
 £10.0
 W.R. 25/10/18

Lieut. ~~W~~ 17308/9

I am a patient
 in above hospital would you
 please allot me the sum of
 £1.00. and charge to my
 account.



Yours respectfully
 Allan Dave
 Private.

(No 3722) 1st Royal Newfoundland Regt

Lieut. Col. R.A.M.S.T.
 O. C. Military Hospital,
 Bethnal Green, E.

Lieut.-Col: R.A.M.S.T.
 O. C. Military Hospital,
 Bethnal Green, E.

17308/9

Bethnal Green
London, E. 2.

A. Dawe

1:0:0

25th October

8

3722

Pte

No. 17308/9

NEWFOUNDLAND CONTINGENT

N.F.P/48. *Hollow*

Pay & Record Office,
58, Victoria Street,
London, S.W. 1,

To: Officer Commanding,
Bethnal Green Hospital,
London, E. 2.

25th October 1918

With reference to request of (No) 3722 (Rank) Pte
(Name) A. Dawe Cheque No. 59414 for
£ 1:0:0 is enclosed for payment to this Soldier as may
be deemed fit.
Kindly complete receipt form on back of cheque before
presenting at a Bank.

J. J. Marshall
Chief Paymaster & O. i/c Records. *60*

Dawe, A.

3722

Gay Sept.

July 12, 1919

#3722 Pte. Allan Dawe,

Upper Gallies, C.B.

Dear Sir:-

Please find enclosed Discharge Certificate #2982.

Yours truly

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

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 3722 Rank Plt Name Dawe A
 Intended place of residence Upper Sullis

2. Occupation Farmer
 Classification of soldier B Medical Category E

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 JUN. 27 1919
 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 27-6-19
 Signature of soldier A. Dawe
 Signature of witness J. J. [unclear]

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 27-6-19
 Signature of soldier A. Dawe
 Signature of witness James O'Sullivan

STATEMENT OF SERVICE

7. Enlisted for service 3-5-17 No. of days on Military
 Discharged from service 28-6-19 Plus 14 days Service 801

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge, The Royal Newfoundland Regiment, twenty-eight days from date.
 Place, ST. JOHN'S
 Date JUN 28 1919
 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 July 12/1919
 Officer in Charge
 The Royal Newfoundland Regiment

A 4 B 2079/2982

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 3722 Rank Pte. Name Dawe A.
 Date of Enlistment 3-5-17 Address Upper Gillies District St. John's
 Occupation Farmer Classification for Discharge B Medical Category T₁
 Recommendation S.M.B. physically unfit Disability Rating 30% 6 Mos.
 Passed to Demobilization Officer with following documents:—

N.F. 1/36	B 268	B 121	1	N.F. Med	D.F. 1	1
B 178	W 3494	B 122		Board 1st	" 2	
B 178a	1 D 400A	1 B 1915		do 2nd	" 3	3
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	1 D 400C	Form K		do 4th	" 5	
B 179b	B 103	1 ME 2		<u>1237-2</u>	" 6	
B 179c	B 120	M 93				

Date 27-6-19 L O. C. Discharge Depot. H. M. H.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date 27-6-19

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$60.50
- (b) ~~Clothing Supplied~~

Date 27-6-19 O i.c. Re-clothing A. M. B.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. B1987 to his home at Upper Gables and Release Certificate No. 3059 issued.

Date 27-6-19

J.A. Snowball
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 12-7-19

Date 27-6-19

H. News
Depot Paymaster.

Discharged approved for 28-6-19

Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
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	<u>1237-2</u>	" 6
B179c	B 120	M 93		

2 Form B

Date 27-6-19

J.A. Snowball
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUN 28 1919

R.H. Lait MAJOR
O. C. Discharge Depot.

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

Date

Civil Re-establishment Committee



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

To resume former Occupation.

R. D. Ave

Signature of Man.

Reg. No. 3722

J. H. Snowball

Signature of the Vocational Officer or his Representative.

ST. JOHN'S.

Place

Date

JUN 27 1919

191

The Royal Newfoundland Regiment

Class for Demobilization:—

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

Regimental No. 3722

Name D. J. Allan Rank Pte

Address Upper Saddle

Present Medical Category F

Recommended for:— { (a) ~~Immediate discharge~~

(b) Standard Medical Board

Members of Board {

R. H. East Major
O.C. Discharge Depot.

H. Gibson
Senior Medical Officer

J. W. Burden
M. O. Depot

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

MEDICAL HISTORY

OF

Surname Dave

Christian Name Ellen

Table I.—GENERAL TABLE.

Birthplace:—Parish Upper Gables County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>3</u> day of <u>May</u> 191 <u>7</u>		on _____ day of _____ 191 <u>1</u>	
	at <u>Headquarters</u>		at _____	
Declared Age	<u>18</u> years <u>3 months</u> days		years _____ days _____	
Trade or Occupation	<u>Farmer</u>		_____	
Height	<u>5</u> feet <u>7 1/2</u> inches		feet _____ inches _____	
Weight	<u>120</u> lbs.		lbs. _____	
Chest Measurement	Grith when fully expanded ... <u>33</u> inches		_____ inches	
	Range of Expansion .. <u>3</u> inches		_____ inches	
Physical Development				
Vaccination Marks	Arm	_____	_____	_____
	Number	_____	_____	_____
When Vaccinated	_____		_____	
Vision	R.E.—V= <u>4/4</u>	_____	R.E.—V=_____	_____
	L.E.—V= <u>4/4</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>W.E. Provenier</u>		_____	
(Rank)	<u>Lieut.</u>		_____	
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St Johns</u>		at _____	
	on <u>3</u> day of <u>May</u> 191 <u>7</u>		on _____ day of _____ 191 <u>1</u>	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>4th G. I. B. 3722</u>		_____	
Transferred to	<u>ROYAL NEWFOUNDLAND REGIMENT</u>		_____	
Became non-effective by	on _____ day of _____ 191 <u>1</u>		on _____ day of _____ 191 <u>1</u>	
(Signature)	_____		_____	
(Rank)	_____		_____	

Table II.—Only for admission to hospital or to the sick list in case of Warrant Officers treated in quarters.

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	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, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
Bethnal Green Military Hospital, Cambridge Road, E.	8	10	18	9	1	19	Multiple S.W.	15+	<p> R. arm: R. back (Lop capes) R. from: R. Pellets & R. thigh. I.A. still in the arm: I.A. Glesures on heel neither. Wounds all healed. </p>	W. J. P. M. S. D. M. A. C.
Boazely Down	4	2	19	8	2	19	S.W. R. Groin	4	<p> Slight discharge from wound, which has now ceased. </p>	<p> C. S. W. T. W. I. C. A. C. </p>



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 *Allen Dault*

Regiment from which discharged **Royal Newfoundland**

Regimental number *3722*

Intended address *upper Gullies*

Height on discharge *5 Feet 7*

Color of hair on discharge *dark brown*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *arm. back. Leg.*

Figure on discharge *medium*

Christian name of Father *John*

Christian name of Mother *Patience*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *upper Gullies 4-2 age 19. 1899*

Nature and locality of civil employment required

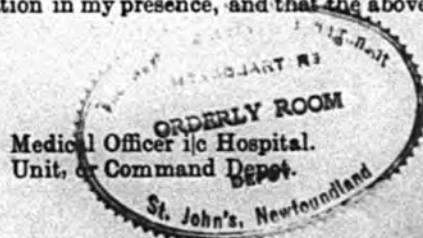
I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct.

(Soldier's signature in full)

(Rank) *PTE*

Station *St. John's Allen Dault* Date *June 24-19.*

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.



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**.....
2. Regtl. No.. **3722** 3. Rank... **Pte.**.....
4. Name ... **Dave Albert**
(Surname) (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....
in category (or grade).....
7. Former Trade }
or Occupation }
- 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps ;
with Regtl. Nos.
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty ?
- (b) Date of Discharge ;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When
(b) Where
(c) Opinion of Court
- (d) Particulars of Pension or Gratuity
(if any)

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."

Multiple G.S.W.s.

11. Date of origin of disability. **Sept. 1918.**
12. Place of origin of disability. **Belgium.**
13. Give concisely the essential facts of the history of **Wounded in France G.S.W. Arm, Back, Leg,**
the disability in so far as it is recorded in the Medical & **Thigh. Now healed.**
History Sheet bearing on the case and in other relevant official documents.

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

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? **Posterior surface upper Arm scar 3" long not painful on pressure. Not attached to underlying tissue**
(A note should be made as to weight in all cases when it is likely to afford evidence of the progress of the disability.)
2nd scar posterior surface R. side, of back interbal to scapula. Scar is slightly depressed not painful on pressure. Some Antrophy Rhomboid muscles. 3rd. scar infer for surface R. Buttock.
Not painful on pressure
Operation scar anterior aspect Perinium. Not painful on pressure. Also small scar on outer surface R. Thigh not painful on press. complains of stiffness about shoulder movements all free & full.

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.

J. B. O'RIELLY CAPT. R.A.M.C.

Medical Officer in charge of case.

Station

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

OPINION OF THE MEDICAL BOARD.

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

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

21. Give diagnosis and particulars of:—

- (a) Any disability claimed or discovered. **Multiple G.S.W.s.**
- (b) The present condition thereof.

See Sect. 15. Arm & shoulder still painful. Grip of R. Hand weakened.

22. State whether the disabilities are:—

- | | (a) Attributable to | (b) Aggravated by |
|--|---------------------|-------------------|
| (i) Service during the present war | Yes. | |
| (ii.) Previous active service.. .. . | | |
| (iii.) Climate in pre-war service | | |
| (iv.) Ordinary military service before the war | | |
| (v.) Serious negligence or misconduct on the part of the soldier | No. | |
- Give details:

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

G.S.W.

23. Is the disability in a final stationary condition? If not

- (a) How long is the present degree of disability likely to last?
- (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

30% 6 Months.

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

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

Yes.

Opinion of Military Member in case of disagreement

OR

- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

Yes.

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures:—

H.S. FRASER.....

} President or Chairman.

J.S. TAIT.....

} Members.

Station **ST. JOHN'S**.....

Date **June 24/19**.....

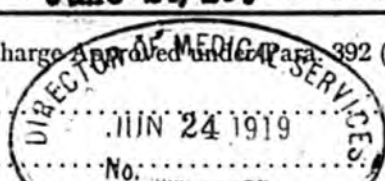
L. PATERSON, MAJOR.....

Discharge Approved under Para 392 (xvi) King's Regulations.

Station **(SGD) CLUNY MACPHERSON, MAJOR**.....

} Only applicable in cases of Patients in Hospitals.

Date **24 1919**..... Officer in charge, Central Hospital.



Discharge Approved under Para 392 () King's Regulations. or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station O.C. Discharge Centre.

Date

Army Form B. 103.

Regimental Number *2724*

Casualty Form - Active Service.

Regiment or Corps *2/1st Royal Newfoundland*

Rank *Pte* Surname *Dawe* Christian Name *A.*

Religion *C of E* Age on Enlistment *18* years *3* months

Enlisted (a) *3-5-17* Terms of Service (a) *Duration* service reckons from (a) *3-5-17*

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

Extended [] Re-engaged [] Qualification (b)
or Corps Trade and rate

Occupation *Farmer* *67th and 2nd Line* Signature of Officer



Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 26, 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. 26, or other official documents.
Date	From whom received				
		Embarked ...	<i>27 MAR 1918</i>		
		Disembarked ...	<i>29 MAR 1918</i>		
	<i>2 Coasey S. 4th</i>	<i>Ad. G.W. Base Depot James mit.</i>	<i>11 2nd Lt Lancaster</i>	<i>30/3/18</i>	<i>1-4-213/3 Rec.</i>
		Wounded in Action	<i>20-4-18</i>		
	<i>87 2nd</i>	<i>Ad. G.W. Base Depot</i>	<i>29-9-18</i>		
<i>3/10/18</i>	<i>32 2nd Lt St David</i>	<i>Ad. G.W. Base Depot transferred to England</i>	<i>2nd Lt Humber</i>	<i>2/10/18</i>	<i>837363 30/1/18 613034</i>
			<i>for</i>	<i>2/10/18</i>	<i>41/30023</i>

O.I/c No 1 Infantry Section,
Crd Echelon, G.H.Q. B.E.F.

(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, Shipping Smith, &c.
W. 4025 - 21723 20/04/17 (3561), C. P. & S. Ltd., Form B.103 E/1887. P.T.O.

June *July 3* *Just*

HARROW, GREAT BRITAIN
MEDICAL CASE SHEET.*

8/10/18

ENT
12

No. in
Admission
and
Discharge
Book.

Regimental No.

Rank.

Surname.

Christian Name.

3722

Pte

Dawe

A

Year

Unit.

Age.

Service.

1st Newfoundland

19

2 years

Station
and Date.

Disease G.I.W. Arm R. Back, Leg R, 29.9.18

Notes copied from Field Medical Card.

2 wds. thigh R. 2. 7. 13. retained
 wd 1 Back. 4. 3. removed. excised.
 the upper arm. the. followed to Humerus. with out fracture
 in situ Sup. Part. Artery. excised
 R. Shoulder. wd. excised. wd. removed
 the removed from humerus
 wd in Back. excised. Part

Date of Admission
to B.G.M.H.

2000 A.T.S. in France

9 days in Hospital France

8. 10. 18.

R. Shoulder

Clean incised. retained wound. Part of bone of deltoid

All arm muscles good

2. Open small wound in lower inner angle R. Scapula

3. Open wound R. from between scapula & thigh. Clean

4. Transverse wound 5" long across Delta Deltoid Region R

5. Small superficial wd. 1/2 way down outer part of thigh

W. J. P. for R. S. Dawe
 Kin Linn

x. by

500
 ATS
 12-100

- 9 NOV 1918

W. J. P. for R. S. Dawe
 Chief

(Mother) Mrs. Dawe Hopewell Upper Gullies N'foundland

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 1a.

Corps 1st Newfoundland

Military Hospital Bethnal Green

No. 3722

Rank and Name Pte. A. Dawc

Age 19

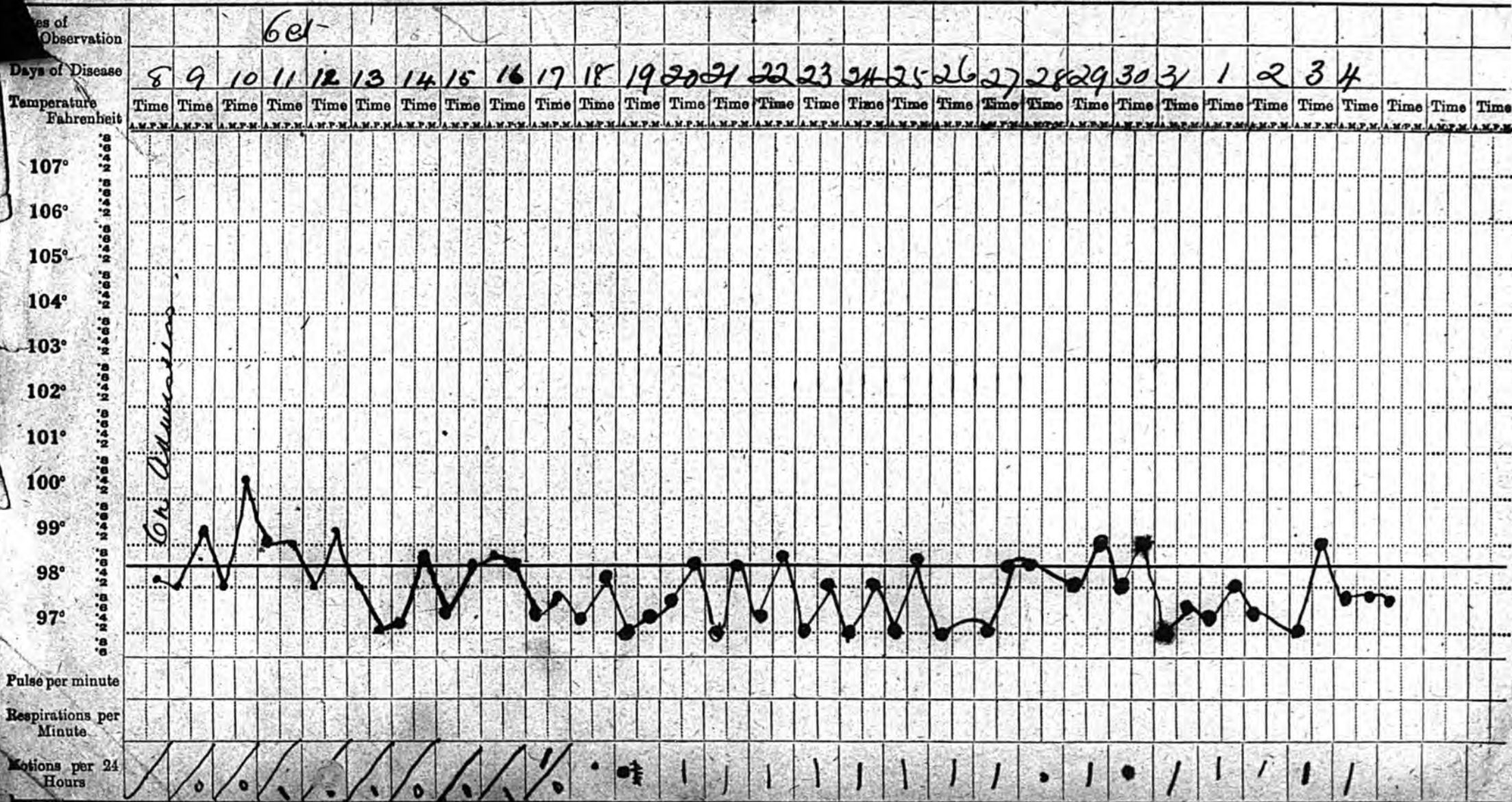
Service 2 years

Disease _____

Date of admission October 8. 1918

Date of discharge _____

Result _____



Signature _____

In charge of case.

16.10.18

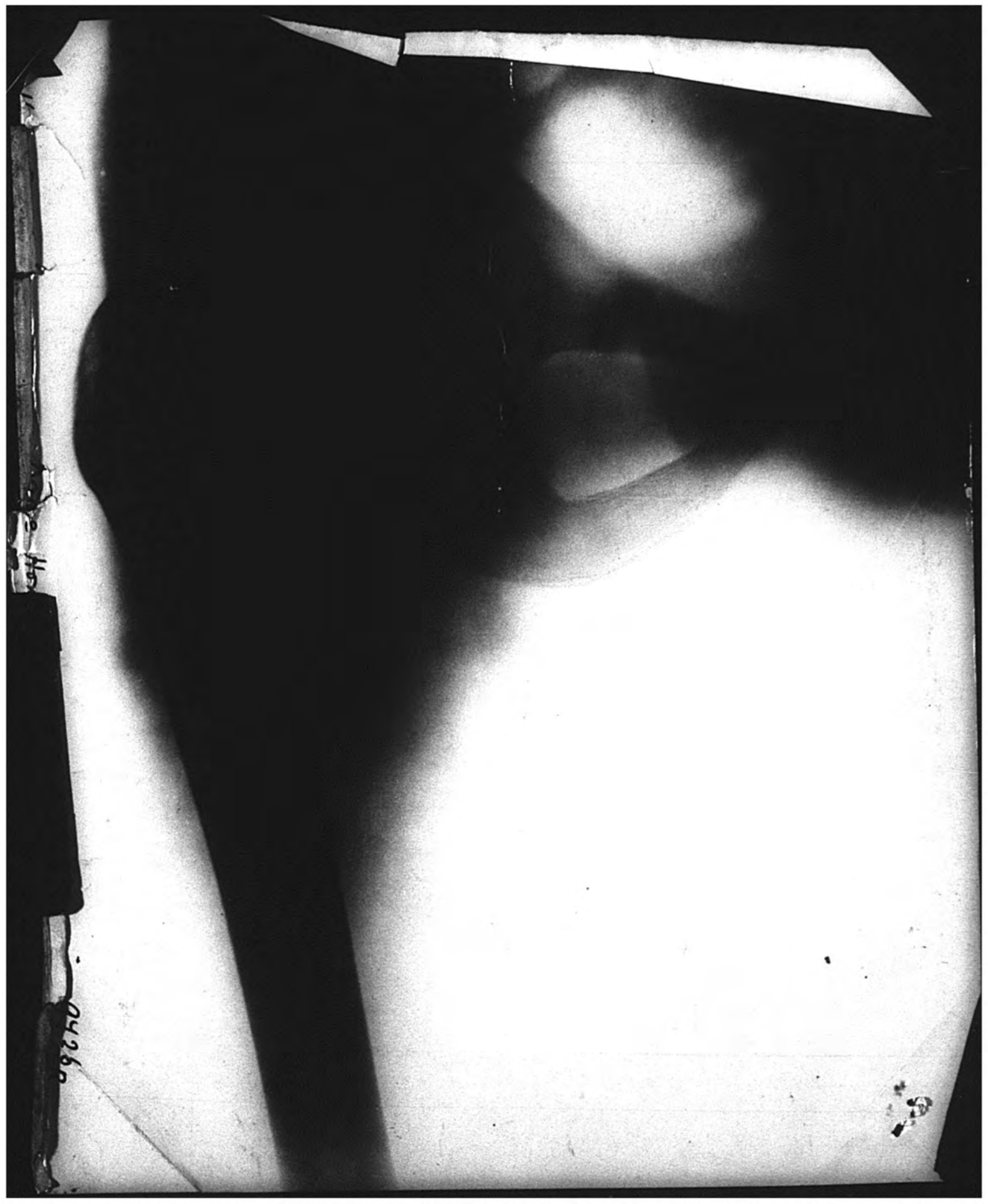
Rause Hovov

—
→

16.10.18-

Dase Hmou

9725 R



2
Hox

04260

67

HARROW
MEDICAL CASE SHEET.

NOV 1918

No. in Admission and Discharge Book.

Regimental No.

Rank.

Surname.

Christian Name.

3829

Pte

Brown

E.

Unit.

Age.

Service.

1st Newfoundland

20

1 1/2 years

Station and Date.

Disease

G.I.W. Infl R 4.10.18

Notes copied from Field Medical Card.

Wound R Infl.

Wound received 4.10.18 received

15th A.T.S

Date of Admission to B.G.M.H.

4 days in France. Infl.

5.10.18

Anterior surface of thigh. Level of Dr. Buchanan
Large Septic Wound. appeared with leading line
hemorrhage at H₂O front
Knee & Anterior humeral

10/10/18

ATT
680
15-10-18

Wm Brown

26 OCT 1918

28 OCT 1918

9 NOV 1918

Wm Brown
for R.S.D.

(Mother) Mrs. Brown Innesgrave Town Bonavista Bay Newfoundland

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 1st Newfoundland

No. 3829

Rank and Name Pte. E. Brown

Age 20

Military Hospital Belval Green

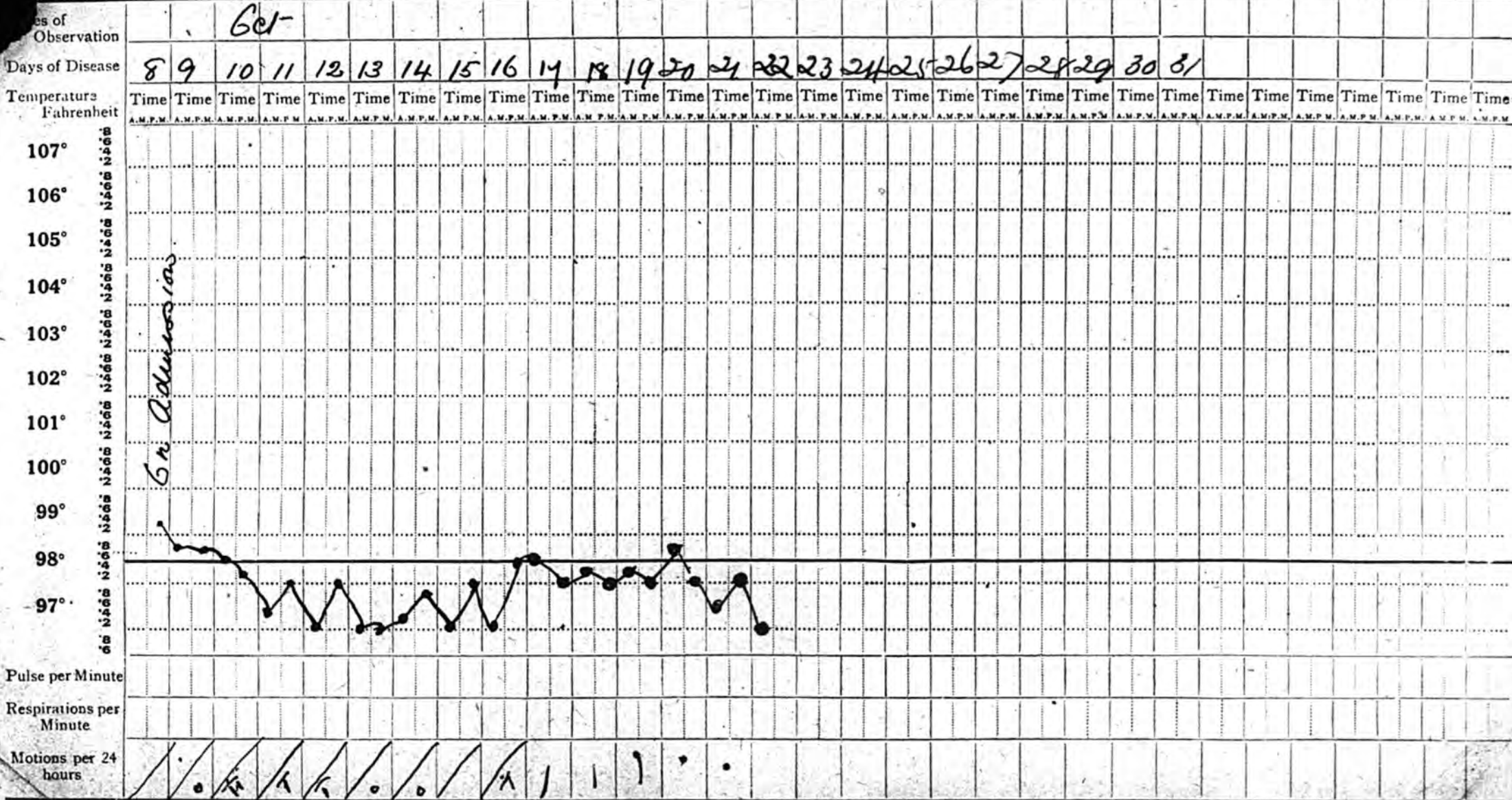
Service 1 1/2 years

Disease _____

Date of admission October 8, 1918

Date of discharge _____

Result _____



Signature _____

In charge of case.

The Royal Nfld. Regiment

DEMOBILIZATION

No. *5722* Rank

Name *Davis A*

Warned for demobilization on

JUN 27 1919

The Royal Newfoundland Regiment

COPY

PROCEEDINGS ON DISCHARGE

1. No. 3722 Rank Pte Name Dawe, A.

Intended place of residence Upper Gullies

2. Occupation Farmer

Classification of soldier B Medical Category E

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

... (sgnd) ... H. Mews, Lt.

Date JUN 27 1919

for Commanding Discharge Depot
The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place, ST. JOHN'S

... (sgnd) ... A. Dawe

Signature of soldier

Date JUN 27 1919

" J. H. Snow, Capt.

Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place, ST. JOHN'S

... (sgnd) ... A. Dawe

Signature of soldier

Date JUN 27 1919

" James Newman, Sgt.

Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 3-5-17 No. of days on Military

Discharged from service JUN 28 1919 Plus 14 days Service ... 801

APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S

.....
Officer Commanding Discharge Depot
The Royal Newfoundland Regiment

Date JUN 28 1919

CONFIRMATION OF DISCHARGE

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

Place, ST. JOHN'S

.....
Officer i/c Records
The Royal Newfoundland Regiment

Date

RECEIPT FOR A SOLDIER'S DOCUMENTS

HEADQUARTERS NEWFOUNDLAND REGIMENT

Co 1.ensions Board.

Please receive documents as indicated below

No.	RANK AND NAME	N. F. P. 388 Non-effective account.	B. 178 Medical history sheet.	B. 178a Nfld. medical history sheet	B. 179 Medical report on an invalid.	B. 268 Proceedings on discharge.	W. 3494 Civil life qualification.	D. 400A Descriptive return.	B. 103 Active service casualty form.	B. 120 Regimental conduct sheet	B. 121 Company conduct sheet	B. 122 Field conduct sheet	Report of Newfoundland Medical Boards			B. 1916 Attestation paper	Form L Identity certificat	Form K Allotment papers	A. P. W. 3463	Headquarters Travelling Board	D. F. 2 Proceedings on discharge	D. F. 1
3722	16 Dawe, P.																					

Received above noted documents,

Dated _____ 19 _____

Signature of Officer forwarding documents: _____

Date JUL 4 1919 19



July 12, 1919

#3722 Pte. Allan Daws,

Hopewell,

Upper Gullies, C.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 & O.I/c Records

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.

Christian name... *Allen* 2. Surname... *Daniel*

3. Rank... *Private* 4. Regt. No... *3722*

5. Address in full to which future payments of gratuity are to be forwarded... *Hopwell, Upper Gables*

6. Date of enlistment in the Regiment... *May 4th 1917*

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

8. Relationship of such dependents... *Not Applicable*

9. Address in full of such dependents... *Not Applicable*

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

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

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

Overseas
4 years + 10 days

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

Not Applicable

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.

Not Applicable

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

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

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

Not Applicable

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *Not Applicable*

(b) If so, was such reversion in consequence of Misconduct or inefficiency? *Not Applicable*

19. Are you now serving in the Regt.? *No*... If not give:- (a) Date of discharge... *11/7/19* (b) Reason for discharge...

Demobilization

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...

Yes France March 1918 to Oct 1918 wounded @ Ypres

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? *Not Applicable*

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:

Place of Residence:

Declared before me at

This 27th

day of June

1919.....

A D Ave

Robert Stewart, J.P. Warrenton, Oregon

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. Dependent.

War Service
Gratuity.

Net amount
due

.....

.....

.....
Certified correct. Paymaster

DEPARTMENT OF VETERANS AFFAIRS

To **Copy for HO file**

Ottawa 4, Ont
Date **Feb 4, 1969**

Attention of

NAME **DANE Allan**

SERVICE NUMBER **3722 WW 1**

C.P.C. No. **250022**
W.V.A. No.

NAVY
ARMY
R.C.A.F.

The DEPARTMENT has received information from

PME CPC ST. JOHN'S NFID JAN 27, 1969

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death **DEC 13, 1968**
Cause of Death
Place of Death **VETERANS PAVILION**

Name and Address of next of kin (if known)

Copies to: **W.S.R.**
V. I.
PAK
DK
HO.

} Destroy form if advice of death already received.

for *J. Marston*
Chief Central Registry

ST. JOHN'S, June 27th /19

Royal Newfoundland Regiment.

Billeting Account,

To 1th - A - Dawe

Billeting Soldiers as undermentioned

from June 1st /19 to June 23rd /19

3722 - 1th - A - Dawe 28 80

ACCOUNT

CH NO

IND LEDGER

PAY LEDGER

GEN LEDGER

Certified correct for

R.J

Billeting Officer.

A D awe

C.R. 3722

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

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

Name *Alan Dave...*

Date *14/11/19..*

Place *Hopwell, Upper
Gallies*

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

The Royal Nfld Regt,

Dept of Militia,

St. John's Nfld.

Fold Here



July 8th. 1921. 1917.

The accompanying King's Certificate, on his discharge,

(No. 1263), is forwarded herewith to

Allan Dawe,

in respect of his service as No. 3722 Rank Pvts,

Name Allan Dawe, Corps Royal Nfld Regt,

Receipt of the same should be acknowledged hereon.

Received July 13th 1921

Signature Allan Dawe H.C.J.

Date 13/7/21

Address Upper Gull

Receipt for Army Book 64

No. 3722 Name *Dawe. A*

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

Name... *Alan. Dawe*

Date... *19/7/19*

Place... *Hopewell... Upper Gullies. C.B.*

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

Receipt for Army Book 64

No. 3722 Name *Dawe, A*

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

Name... *Allan Dawe*

Date... *19/7/19*

Place... *Hopewell... Upper Gullies. C.B.*

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

The Royal Newfoundland Regiment

3722

DEMOBILIZATION OF

Reg. No. 3722 Rank Pte Name Dawe A
 Date of Enlistment 3-5-17 Address Upper Gullies District St. John's
 Occupation Farmer Classification for Discharge B Medical Category 1
 Recommendation S.M.B. physically unfit Disability Rating 30% 6 Mos
 Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	1	N.F. Med	D.F. 1	1
B 178	W 3494	B 122		Board 1st	" 2	
B 178a	D 400A	B 1915		do 2nd	" 3	3
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
B 179b	B 103	ME 2		<u>12.37-2</u>	" 6	
B 179c	B 120	M 93				

Date 27-6-19 L.O.C. Discharge Depot. Mrs H.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date 27-6-19

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$60.00
- (b) Clothing Supplied McDonnell

Date 27-6-19 O i.c. Re-clothing

The Royal Newfoundland Regiment

3722

DEMOBILIZATION OF

Reg. No. 3722 Rank Pte Name Dawe A
 Date of Enlistment 3-5-17 Address Upper Gullies District St. John's
 Occupation Farmer Classification for Discharge B Medical Category 1
 Recommendation S.M.B. physically unfit Disability Rating 30% 6 Mos
 Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	1	N.F. Med	D.F. 1	1
B 178	W 3494	B 122		Board 1st	" 2	
B 178a	1 D 400A	1 B 1915		do 2nd	" 3	3
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	1 D 400C	Form K		do 4th	" 5	
B 179b	B 103	1 ME 2		<u>12.37-2</u>	" 6	
B 179c	B 120	M 93				

Date 27-6-19 L.O.C. Discharge Depot. St. John's

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date 27-6-19

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$60.00
- (b) Clothing Supplied None

Date 27-6-19 O i.c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 11987 to his home at Upper Gables and Release Certificate No. 30579 issued.

Date 27-6-19 *J. A. Snowball*
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 12-7-19

Date 27-6-19 *H. M. H.*
Depot Paymaster.

Discharge approved for 28-6-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
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	<u>1237-2</u>	" 6
B179c	B 120	M 93		

2 Form B

Date 27-6-19 *J. A. Snowball*
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUN 28 1919 *R. H. H.*
O. C. Discharge Depot.

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

Date July 10/19 *[Signature]*

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of 1st Newfoundland.

Number of Sheet First
Signature of O. C. Company Chas. A. [unclear] Capt.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>3722 Dawe. Allan</u>	Age on	<u>18</u> years <u>3</u> months	<u>Farmers.</u>	
Joined		Date	Place and Date of Enlistment } <u>St. John's.</u> <u>3. 5. 17</u>	Religion	
Joined		Date		<u>C of E.</u>	
Joined		Date	Period of { with Colours <u>7 1/2</u> years. with Reserve <u>2 3/4</u> years.	Place of Birth	
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>Hazelton Down Camp.</u>	<u>15/2/18</u>	<u>Pte.</u>		<u>Absent from 6:15 P.M. parade 15/2/18. Sgt. D'Brien</u>		<u>3 days L.B.</u>	<u>16-2-18</u>	<u>Lieut. S. Emerson</u>	<u>[Signature]</u>
				<u>Demobilized St. John's, 12/7/19</u>					
				To be carried over					

Army Form B. 121.

Reg. No. *3722* Rank *PLC* Name *Sawyer, Allan*

Attested Address *Upper Gallies*

Allotment Allottee

Date of Allotment Returned from Overseas *29.5.19.*

Returned on S.S. *Corsican* Cause *Discharge*

26-6-19
27-6-19
28 6 19

Recd Discharge from Army.
PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILIZATION.