



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3499 Name Martin Day Corps R. G.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>Martin Day</u> |
| 2. What is your full Address? | 2. <u>Port Antonio St.</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>23</u> Years <u>5</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Lumberman</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, Martin Day.....do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

6-1-3-17 Martin Day SIGNATURE OF RECRUIT.
Harold Mitchell Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Martin Day.....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 to be taken the oath before me at
 on this 1st day of March 1917
Charles Campbell
 Signature of Attesting Officer

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the.....
 If enlisted by special authority, such will be attached to the original attestation.
 Date.....1917
 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 Martin Day

Apparent age 23 years 6 months. Height 5 feet 7 inches

Chest Measurement { Girth when fully expanded 41 1/2 inches
 Range of expansion 4 1/2 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Martin (Mary) Day
Grand Falls | Relationship Wife

Particulars as to Marriage

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

(a) <u>Mrs. Dina Prendegast Spinster</u>	(b) <u>Grand Falls Feb 11 1917</u>	(c) <u>Grand Falls</u>	(d) <u>Ch. Capt</u>
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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 Re-serve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from _____									
Joined at _____ on _____									
Total Service forfeited as above.....									
Total Service towards Engagement to _____ [date of discharge] _____ years _____ days									
" " " Pensions " _____ [" "] _____ " _____									



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3499 Name Martin Day Corps R. G.

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. Martin Day
- 2. What is your full Address? 2. Fortune St
N. D. Bay
- 3. Are you a British Subject? 3. Yes
- 4. What is your age? 4. 23 Years 5 Months
- 5. What is your Trade or Calling? 5. Lumberman
- 6. Are you Married? 6. Yes
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. No
- 8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
- 9. Are you willing to be enlisted for General Service? 9. Yes
- 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?..... 10. { Name
Corps
- 11. Are you willing to serve upon the conditions as embodied in the roll of service } to be signed by you if you are accepted? 11. Yes

I, Martin Day 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.

61-3-17 Martin Day SIGNATURE OF RECRUIT.
Harold Mitchell Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Martin Day 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 17 day of March 1915

Signature of Attesting Officer Chas R. Cope

†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 1915 } Approving Officer.
Place

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Martin Day
 Apparent age 23 years 6 months. Height 5 feet 7 inches
 Chest Measurement { Girth when fully expanded 41 1/2 inches
 { Range of expansion 4 1/2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Martin (Mary) Day
Grand Falls | Relationship wife
 Particulars as to Marriage _____

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

(a) <u>Mrs. P. Deegan</u> <u>Spinster</u>	(b) <u>Grand Falls</u> <u>Feb 14 1917</u>	(c) <u>Grand Falls</u>	(d) <u>C.A. Capt.</u>
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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>1-3-17</u>									<u>16-11-17</u> <u>18-12-17</u>
Joined at <u>Mt. St. Helens</u> on <u>March 11 17</u>									
Discharged <u>March 10 1919</u>									
Embarked <u>Mt. St. Helens</u> train to <u>Halifax N.S.</u> <u>19-5-17</u>									<u>Embarked</u> <u>Halifax 59</u> <u>12-6-18</u> <u>Dis</u> <u>transferred</u> <u>30-1919</u>
for <u>106 S. H. 18</u> joined <u>Batter</u> in the field									
to <u>106 S. H. 10-6-18</u> admitted <u>24</u> <u>New Regt.</u> <u>October</u> <u>18</u>									
to <u>3rd Regt. Bn</u> depot <u>23-6-1918</u> <u>transferred</u> in the field <u>25-6-18</u>									
from <u>106 S. H.</u> to <u>demobilized</u> <u>19-1-1919</u> to <u>demobilized</u> <u>30-1-1919</u>									
Arrived <u>Halifax</u> <u>7-2-1919</u>									
Demobilized <u>Mt. St. Helens</u> <u>10-3-1919</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>10-3-1919</u> (date of discharge)					2		10		days
Pensions " " " " " " " " " " " "									



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 *Martin Day*
aged *23 years 6 months* conducted at *Hotel quarters*
Date: *March 1st 1917* Recruiting Officer:

NO OF TEST	FINDING
1	<i>No</i>
2	<i>No</i>
3	<i>No</i>
4	<i>No</i>
5	<i>No</i>
6	<i>No</i>
7	<i>yes</i>
8	<i>yes</i>
9	<i>No</i> <i>no</i>
10	<i>n</i>
11	<i>n</i>
12	<i>n</i>
13	<i>n</i>
14	<i>n</i>
15	<i>n</i>
16	<i>n</i>
17	<i>n</i>
18	<i>n</i>
19	<i>6/6 Ball) G Hicks</i>
20	<i>n</i>
21	<i>n</i>
22	<i>n</i>
23	<i>n</i>
24	<i>n</i>
25	<i>n</i>
26	<i>n</i>
27	<i>n</i>
28	<i>n</i>
29	<i>n</i>
30	<i>n</i>
31	<i>n</i>
32	<i>n</i>
33	<i>No</i>
34	<i>8.7</i>
35	<i>1.41 1/2</i>
36	<i>37-41 1/2</i>
37	<i>\$27 per month</i>
38	<i>Father James Day Fortuna Barbours Notre Dame Bay</i>
39	<i>Chas. Wife</i>

34 99

SM

Signature of Medical Examiner:

Geo. B. ...

C.R. 8499

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

The discharge of the undernoted on Demobilisation
has been APPROVED by Officer i/c records on noted
date.

3499 Pte. Martin Day.

9-3-19.

C.R. 3499

Extract from Daily Orders part II, Depot^{St.}John's dated
Feb. 26th., 1919.

THE DISCHARGE OF THE UNDERNOTED ON DEMOBILIZATION HAVE
BEEN APPROVED BY Q. C. DISCHARGE DEPOT ON 24-2-19.

3499 Pte. ^M Martin Day.

C.R. 3499

Extract from Nominal Roll of the Royal WFLA. Regt.
Embarked St. John's, Jan. 30th, 1919.

3499 Day.

C.R. 3499

Extract from Nominal Roll of the Royal Nfld. Regt.,
24-1-19.

The undermentioned who was transferred from B.E.F.
to 2nd Bn., Winchester 19-1-19, awaiting repatriation.

3499 Pte. M..Day.

C.R. 3499

Extract from Casualties received from Pay & Record Office,
London, dated July 3, 1918.

Dis. to 3rd Emp. Base Dep. ex 6th Gen. Dep. Staples
23 June 1918.

#3599 Pte. M. Day.

C.R. 3499

Extract from Casualties received from Pay and Record Office

27th June 1918.

#3499 Pte. M. DAY.

ADMITTED TO 6 CANADIAN DEP. ETAPLES 9th JUN^E 1918.

INFLUENZA.

CR. 3499

Extract from Casualties received from the P. & R. O. 19 Junw
1918.

#3499 Pte. M. DAY.

Admitted to 24th General Hospital Etaples 12th June 1918.

Influenza Mild.

CR 3499

Extract of Nominal Roll B.E.F. Embarked "Southampton"

4-4-18.

3499 Pte. Day, M.

C.R. 3499

Extract from Nominal Roll, embarjed St. John's for Oversees 19-5-17

#3499 PTH. M. DAY

3499

C.R.

Extract from Daily Orders Part II Unit The Royal
Hfld.Reg't., St. John's, Mar.1st, 1917.

3499 Pte. Martin Day.

Attached to the Strength from March 1st, 1917.

EXTRACT FROM STATEMENT OF A/C TO 30-1-19 FROM PAY &
RECORD OFFICE. LONDON

3499 Pte. Day, M. Debit Balance £7:12:10 plus 1 days pay (31-1-19)

This transferred to Pay Office 7-3-19

16 Day

C.R. 34 99

~~1110~~

7414/216

Royal Newfoundland Regt.

B. E. F.

10th May 8

3499, Pte. M. Day,

4221

Pay to 3499 Day £6:0:0

*Not receipt
18/5
5/9/18*

Day, Martin

3499

Day Dept

March 10, 1919

#3499 Pte. Martin Day,

#60 Charlton Street,

City

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 1141."

Yours truly,

Captain,
Paymaster & C. i-c Records

Enc'l 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 3499 Rank Private Name Day M.
 Intended place of residence 60 Charlotte St St John's

2. Occupation Lumberman
 Classification of soldier E Medical Category AI

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 FEB 24 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. SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT.
 Place and date St John's 24.2.19
 Signature of soldier M Day
 Signature of witness C. P. Dicks Cpl.

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I ^{was} in a position to resume civilian occupation immediately on discharge.
 Place and Date St John's 24.2.19
 Signature of soldier M Day
 Signature of witness W. J. Eaton R. Q. M. S.

STATEMENT OF SERVICE

7. Enlisted for service 1.3.17 No of days on Military
 Discharged from service 24.2.19 Plus 14 days Service 140

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 FEB 24 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 March 10 1919
 Officer in Charge
 The Royal Newfoundland Regiment

2079/1141

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

MEDICAL HISTORY

OF

Surname Day

Christian Name Martin

Table I.—GENERAL TABLE.



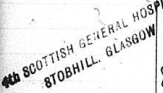
Birthplace:—Parish _____

County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>1st</u> day of <u>March</u> 191 <u>7</u>		on _____ day of _____ 191	
	at <u>St John's</u>		at _____	
Declared Age	<u>23</u> years <u>6</u> months		_____ years _____ days	
Trade or Occupation	<u>Lumberman</u>		_____	
Height	<u>5</u> feet <u>7</u> inches		_____ feet _____ inches	
Weight	<u>141½</u> lbs.		_____ lbs.	
Chest Measure-ment	Grith when fully expanded ... <u>41½</u> inches		_____ inches	
	Range of Expansion .. <u>4½</u> inches		_____ inches	
Physical Development	_____		_____	
Vaccination Marks	Arm	_____	Right	Left
	Number	_____	_____	_____
When Vaccinated	_____		_____	
Vision	R.E.—V= <u>4/6</u>		R.E.—V=_____	
	L.E.—V= <u>4/6</u>		L.E.—V=_____	
(a) Marks indicating congenital peculiarities or previous disease	(a) _____		(a) _____	
	(b) _____		(b) _____	
Approved by (Signature)	<u>W.E. Procuier</u>		_____	
(Rank)	<u>Drum</u>		_____	
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St John's</u>		at _____	
	on <u>1st</u> day of <u>March</u> 191 <u>7</u>		on _____ day of _____ 191	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>41st Nfld</u>	<u>3499</u>	_____	_____
Transferred to	<u>Regt</u>		_____	
Became non-effective by	_____		_____	
	on _____ day of _____ 191		on _____ day of _____ 191	
(Signature)	<u>W.E. Procuier</u>		_____	
(Rank)	_____		_____	

W.E. Procuier
Drum

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				
 DUNDEE WAR HOSPITAL Dundee DUNDEE	28	9	17	30	10	17	Diphtheria	32	Discharged free from infection	W. Ferguson M.D.
 MILITARY HOSPITAL A & R	27	12	17	7	1	18	Post-diphtheritic paralysis of lower limbs	11	Transferred to Stobhill hospital for electrical treatment. He has made some progress here with bromof & strychnin internally	W. Munster Captain
 SCOTTISH GENERAL HOSPITAL STOBHILL, GLASGOW	8	1	18	13	2	18	multiple n. virus 86. 6. (post diphth.) Anæsthesia local - lower limbs - 150 - 5.	37.	Little beyond vapour Anæsthesia - both over limbs - no motor effect now - musc. & S. & G. & W. & J. & D.	Archibald, M.D.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 3499 Rank Pte Name Doug M
 Date of Enlistment 3.1.17 Address St Johns District St Johns
 Occupation Labourer 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
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 2.1.19

W. J. P. Capt
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

M D J

Particulars passed to Vocational Officer for information and action.

Date 2.4.19

W. J. P. Capt

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable 46
 (b) Clothing Supplied

Date 2.4.19

W. J. P. Capt
O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. _____ to his home
at _____ and Release Certificate No. 1185 issued.

Date 24-2-19
SUBJECT TO ADJUSTMENT OF OVERSEAS PAYMENT.

C. B. Dicks Capt.
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection
therewith settled. He has received pay and allowances to 10-3-19

Date 24-2-19

W. H. Capt.
Depot Paymaster

Discharge approved for 24. 2. 19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1.	1	Lamb
F 178	W 3494	B 122	Board 1st	" 2.	1	
B 178a	D 400A	B 1915	do 2nd	" 3.	2	
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 24 2 19

C. B. Dicks Capt.
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 FEB 24 1919

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

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

Date _____

The Royal Newfoundland Regiment

Class for Demobilization:

8

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

18.2.19

Regimental No. 3499...

Name Lang Markin.....

Address

Present Medical Category.....

A1

Recommended for:— { (a) Immediate discharge

(b) ~~Standing Medical Board~~.....

Members of Board {

R. H. Lat Capt.

O.C. Discharge Depot.

B. Peterson

Senior Medical Officer

J. W. Burden

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:

*I desire to secure employment
as a Labourer.*

Martin Day

Signature of Man.

Reg. No. *3499*

W. C. Matthews

Signature of the Vocational Officer or his Representative.

Place

Militia Building

Date

February 24 1919

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any question are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

- Christian name..... *Martin*..... 2. Surname..... *Day*.....
3. Rank..... *Private*..... 4. Regt. No..... *3.4.9.9*.....
5. Address in full to which future payments of gratuity are to be forwarded..... *60. Leighton Street St. Johns*.....
..... *4. 1 January 1917*.....
6. Date of enlistment in the Regiment..... *4. 1 January 1917*.....
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
..... *Miana Day*.....
8. Relationship of such dependents..... *Wife*.....
9. Address in full of such dependent.....
..... *60. Leighton Street St. Johns*.....
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 Mfld. If so, give dates, and particulars of such service..... *No*.....
12. Give total length of time which you served on active service, whether in Mfld. or Overseas.....
..... *Two years & 1 month*.....

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.....

Not applicable

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?..... *Yes from 2 Capt. P.C.*

(b). If so, was such reversion in consequence of misconduct or inefficiency?..... *Not on staying. Fall*

19. Are you now serving in the Regt.?..... *no.* If not give:- (a) Date of discharge... *Feb. 24 1919.* (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.*

Armentiers: April 1918. Ypres Oct. 1918

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. *no.*

(b). If (a), 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: *Charles J. J. John*
 Place of Residence: *60 Charlton St. N. York*
 Declared before me at: *N. York, N.Y.*
 This *3rd* day of *March* 19*19*.

John W. Carthy
J. W.

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

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	<i>5.00</i>	<i>500.00</i>
.....
.....

Certified Correct.

Bymaster.

NEWFOUNDLAND CONTINGENT NFP/82.

SEPARATION ALLOWANCE



1. Regimental No. and Rank	3499. Lance Corporal
Name	Day, Martin M.
Unit	H. Newfoundland
2. Full Name of Dependent.	Mrs. Mary Day
3. Address	148 Gilbert Street. St. Johns. Newfoundland.
4. Have you made previous claim for Separation Allowance? If so, state particulars.	No
5. Is Separation Allowance being paid on your account to anyone in Nfld or elsewhere?	No
6. Date of Marriage.	Jan 5/1917
7. Name and Address of your last Employer.	Anglo Newfoundland Development Co.
8. The amount of your salary or wages immediately prior to Enlistment.	60 Dollars per month.
9. Are your wages or any portion being paid by your employer during your absence?	No
10. If paid, what is the amount per month?	
11. Name of Corps prior to enlistment in the Nfld Contingent.	

Note: Attached to this day paymaster's copy
 1917
 1920
 1921

I CERTIFY that the above is a true statement.

Martin Day

Signature of Officer forwarding this application.

W. P. A. Whitaker

LIEUT. COLONEL
 COMMANDING 2nd BN. NEWFOUNDLAND REGT.

Unit _____
 Date 1/12/17

Attached to copy 1917 1920 1921



4/1st. NEWFOUNDLAND REGIMENT /

ALLOTMENTS

I, Martin Day, Regl. No. 3499
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
 Dollars and Seventy 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 April 1st/17.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
2913	Wife	Mrs Martin (Diana) Day	Petres Crossing Bay of Islands	70¢
<p><i>Cancelled Allotment Form K 3376 L 3044</i></p>				
Total Allotment, \$				70¢

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.) Mark Ayrault

Officer Commanding
St. John's Company

St. John's
April 11/17 1917

Martin Day

(Sig.)

(Rank) Private

No. 3437



H/ **1ST. NEWFOUNDLAND REGIMENT /**

ALLOTMENTS

I, Martin Day, Regl. No. 3499
 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 April 1st.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3044H	Father	James Day	Fortune Hr N.D.B.	60
Cancelling allotment made on form H 3376 " " L 3512				
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.) Chas. R. Aye Capt.
 Officer Commanding
St. John's B. Company
27-3-17 191

(Sig.) Martin Day
 (Rank) pte

Fortune Harbor
Notre Dame Bay

2426 Aug. 24th 1918

3499

To the Minister of Militia
St. John's

Dear Sir

I beg to notify you
that I have two sons
Martin and Cyril Day
serving their King and
Country, the former over
a year, and I have
not received any
separation allowance
One son is married and

I receive for the other boy
\$15.50 Monthly. I understand
I should have received a
separation allowance. I am
not able to earn anything
myself as I had my leg
amputated last fall, and
as you may know it
is not very easy for my
self and my wife
to live on \$15.50 a month.
I hope you will see
to this and if a
separation allowance is
due me, I hope to
receive it immediately.
Our Parish Priest - Rev. J.J.
Nolan advised me to

Write you. I think it is
due me to receive what
ever there is for the parents
of those who risk their lives
in defence of the Empire.
My other and youngest son
volunteered last spring
but ~~not~~ being old enough was
rejected so you see my sons
have done their duty
and I expect those in
Authority to do the same
towards me.

Hoping to receive a speedy
reply I remain
Yours truly
James Day

3499

Sept. 2nd. 1918.

Mr. James Day,
FORTUNE HARBOUR.

Dear Sir:

With reference to your letter of Aug. 24th.
I enclose form of Claim for Separation Allowance, which
kindly have completed and signed before a Magistrate or
Justice of the Peace and returned to this office, on re-
ceipt of which your claim will be considered.

Yours truly,

Lieut.
For Paymaster

3499

May 5th.

7

Mr. James Day,

Fortune Harbour,

Notre Dame Bay.

Dear Sir:-

Your letter of April 15th. to Hon. J. R. Bennett has been referred to me for attention.

In reply I beg to state that Private Martin Day has declared an allotment in favor of his wife.

Yours truly,

Lieut.
Deputy Paymaster.

3499

April 26, 1919

Mrs. Martin Day,

#48 Gilbert St.,

City.

Dear Madam:-

I enclose cheque for One hundred dollars (\$100.00), being balance due you in payment of retroactive Separation Allowance; you will also find enclosed cheque for Thirty dollars (\$30.00), being amount of first payment due you on account of the "War Service Gratuity."

Yours truly

Captain,
Paymaster & U.I/c Records

ST. JOHN'S, FEB 21 1919

Royal Newfoundland Regiment.

Billeting Account,

To Mr. M. Day
Charlton Street

Billeting Soldiers as undermentioned

from Feb 8th /19 to Feb 21st /19

Monday

3499 - Mr. M. Day 14 40

B. M. E.
11652

Certified correct for \$ 14.40

R.J.

Billeting Officer.

DUPLICATE

Casualty Form - Active Service.

Regiment or Corps *2/1st Royal Newfoundland.*
 Rank *Che* Surname *Day* Christian Name *Martin*
 Religion *R.C.* Age on Enlistment *23* years *5* months
 Enlisted (a) *1-3-17* Terms of Service (a) *Duration* Service reckons from (a) *1-3-17*
 Date of promotion to present rank Date of appointment to lance rank
 Extended () Re-engaged () Qualification (b)
 or Corps Trade and rate
 Occupation *Limboon* *J. M. Eason* Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
			Embarked ... 3 APR 1918		
			Disembarked ... 6 APR 1918		
<i>15-6-18</i>	<i>59868</i>	<i>Reported missing</i>	<i>12-6-18</i>		
	<i>Followed</i>	<i>by P.O. 10/6/18 found</i>	<i>24 June 18</i>	<i>17/6/18</i>	<i>ED 2615</i>
		<i>Reported from ship</i>	<i>Found</i>	<i>25-6-18</i>	<i>ED 2615</i>
		<i>Transferred to U. K.</i>			<i>Part 2. 3/12</i>
		<i>for Re-patriation</i>			
	<i>mit</i>				<i>Lt</i>
					<i>1st Officer i/c 1st Infantry Section</i>
					<i>G.H.Q. 3rd Echelon.</i>

(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.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121
59.

Number of Sheet First
Signature of O. C. Company W. R. Cope Capt.

Regiment of 1st Newfoundland.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay				
No.		Age on	years	months	Religion				
3499	Day, Martin	23	5	months	Lumberman				
Joined	Date	Place and Date of Enlistment		Religion					
Joined	Date	St. John's N.B.		R. C.					
Joined	Date	Period of		Place of Birth					
Joined	Date	with Colours 2 ¹⁰ / ₃₆₅ years.							
Joined	Date	with Reserve years.							
Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
St John's	30-4-17	Pte.		Absent from g am 30-4-17 until 4 pm 4-5-17.	C. S. M. Gardiner.	3 Days C.B.	5/5/17	L. R. Cope Capt.	Forfeits 5 Days pay by R. W. Nib.
Barry Camp	5-8-17	Pte.		Absent from Tattoo 5-8-17 until 10.20 P.M. 5-8-17	Cop. Mayben	2 days C.B.	6-8/17	Capt. S. Robertson	
Det.	10-11-17	"		Absent from tattoo Roll Call list reported at 11.45 pm.	Capt. M. C. Stratton	2 days C.B.	17-11-17	Lt. M. Emerson	Forfeits 1 day's pay by R. W. Nib.
R. P. School	23/11/17	L/Cpl.		Absent from sick parade	Cpl. Stratton	Reprimanded	23/11/17	R/Lt. C. O. Whitaker	
M. P. School	22/12/17	"		Out of barracks while on light duty & remaining absent until 6-30 am 23/12/17.	L/Cpl. Phelan	Deprived of 2 days pay	24/12/17	Lt. Col. Whitaker	Forfeits 1 day's pay by R. W. Nib.
Disembarked St. John's, 10 ⁵ / ₁₇									
To be carried over									



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

Sgt. Martin.

Regiment from which discharged

Royal Newfoundland

Regimental number

3rd Bn.

Intended address

St. John's.

Height on discharge

Feet 4"

Color of hair on discharge

Dark.

Complexion

Dark.

Color of eyes

Brown.

Descriptive Marks

Figure on discharge

Medium

Christian name of Father

James.

Christian name of Mother

Mary.

Wife's maiden name in full

Mary Kay.

Date and place of marriage

St. John's. Jan. 1916.

Christian names of children

Mary.

Place and date of soldier's birth

St. John's Sept. 1896.

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)

Martin D G

Station

St. John's.

Date

18-7-19.

(Rank)

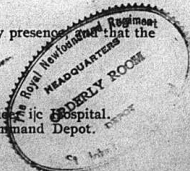
Sgt.

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



The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 3499 Rank Pte Name Day M.
 Date of Enlistment 1-3-17 Address St Johns District St Johns
 Occupation Lumberman Classification for Discharge E Medical Category A.I.
 Recommendation S.M.B. _____ Disability Rating _____
 Passed to Demobilization Officer with following documents:—

B 178a	D 400A	B 1915	do 2nd	" 3	3
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B 179c	B 120	M 93			

Date 21-2-19 M. J. Day
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

M. J. Day

Particulars passed to Vocational Officer for information and action.

Date 24-2-19 Overick Cpl

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied _____

Date 24-2-19 Overick
O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. _____ to his home at _____ and Release Certificate No. 1185 issued.

Date 24-2-19

C. S. Drinks Capt.
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 10-3-19

Date 24-2-19
SUBJECT TO ADJUSTMENT OF OVERLEAF PAY ACCT.

W. M. Capt.
Depot Paymaster.

Discharge approved for 24. 2. 19

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	1	N.F. Med.	D.F. 1	1	
F 178	W 3494	B 122		Board 1st	" 2	1	<u>S.M.B</u>
F 178a	D 400A	B 1915		do 2nd	" 3	2	
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 24. 2. 19

C. S. Drinks Capt.
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

FEB 24 1919

Date _____

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

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

Date 24/2/1919

W. M. Capt.
Depot Paymaster.

Reg. No. *3499* Rank *PLC* Name *Day W.*

Attested Address *Lotham Str. N.B.*

Allotment Allottee

Date of Allotment Returned from Overseas *7-2-19*

Returned on S.S. Cause *discharge*

FEB 21 1919 PASSED TO DEMOBILIZATION OFFICER

24.2.19.

DISCHARGE APPROVED ON DEMOBILIZATION.

The Royal Newfoundland Regiment

CIVILIAN RE-ESTABLISHMENT ON DEMOBILIZATION

No. 3499 Rank Plt Name Mr Day
 Former Occupation Turner man Address 60 Charlotte St District St John
 Class A Medical Category AT Disability Rating
O.C. Discharge Depot.

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

Date 24/1/19

To be forwarded Orderly Room in Duplicate.

W. S. Call
 Demobilization Officer

The Royal Newfoundland Regiment

CIVILIAN RE-ESTABLISHMENT ON DEMOBILIZATION

No. 3499 Rank Pte Name W. Day
 Former Occupation Turnerman Address 60 Charlotte St. District St John's
 Class B Medical Category A1 Disability Rating
O.C. Discharge Depot.

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

Date 24 7/19 Confirmed Chute Off
 Demobilization Officer

To be forwarded Orderly Room in Duplicate

