



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 4388 Name Joseph D. Diamond Corps Meth

4288

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

1. What is your name? ..... 1. Joseph D. Diamond
2. What is your full Address? ..... 2. Flowers Cove St. Caths.
3. Are you a British Subject? ..... 3. Yes
4. What is your age? ..... 4. 19 Years 2 Months
5. What is your Trade or Calling? ..... 5. Gooderman
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, Joseph D. Diamond do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfill the engagements made.

H. 31-12-17 Joseph D. Diamond SIGNATURE OF RECRUIT.  
Robert Cull Signature of Witness.

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

I, Joseph D. Diamond 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.....  
on this 31st day of Dec 1917

Signature of Attesting Officer W. H. [Signature]

### †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 compiled with. I accordingly approve, and appoint him to the:.....

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

Date Dec 31 1917 } Approving Officer.  
Place St. John's }

† 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 Joseph D. Diamond  
 Apparent age 18 years 8 months. Height 5 feet 9 inches  
 Chest Measurement { Girth when fully expanded 36 inches  
 Range of expansion 4 1/2 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin George Diamond  
Flowers Cross St. Charles 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>31-12-17</u>									<u>Lance Cpl 13 <sup>3</sup>/<sub>18</sub></u>
Joined at <u>St John's</u> on <u>December 31-17</u>									
<del>Discharged August 24 1919</del>									
Embarked <u>St John's train to Halifax</u> <u>28-5-18</u>									
to <u>Halifax</u> for <u>discharge</u> <u>24-6-19</u> Arrived <u>NY</u> <u>1-7-19</u>									
<u>Demobilization</u> <u>St John's</u> <u>24 <sup>8</sup>/<sub>19</sub></u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>4-8-19</u> [date of discharge] <u>1</u> years <u>217</u> days									
" " Pensions " " " " " " " " " " " "									

C.R. 4288

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. *4258*
- 3. Rank... *C1*
- 7. Former Trade or Occupation } *Yuskeoman*
- 7a. If the soldier claims previous service in Army, he should state—  
(a) Former Regts. or Corps ; with Regtl. Nos.
- 4. Name *Diamond - Jos B*  
(Surname) (Christian Names)
- 5. Age last birthday... *19*
- 6. Posted for duty on... at...  
in category (or grade)...
- 8. If the disability is an injury was it caused  
(a) in action (b) on field service  
(c) on duty (d) off duty ?  
(b) Date of Discharge ;  
(c) Cause of Discharge.
- 9. If a Court of Inquiry was held on an injury state :—  
(a) When (d) Particulars of Pension or Gratuity (if any)  
(b) Where  
(c) Opinion of Court

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

### Statement of Case.

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

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



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

*The Complaint of no disability*

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

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

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

*Repatriation*

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

*W. G. Procmier Capt. R.D.M.C.*  
 Medical Officer in charge of case.

Station *Hazleydown*

Date *4/4/19*

\* 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

C.R. 4288

Extract from Daily Orders Part II Royal Newfoundland Regiment  
Depot St. John's dated Aug. 8th 1919.

The discharge of the undernoted on demobilization has been  
CONFIRMED by Officer i/c Records from noted date 4-8-19.

4288, L/C. J. Diamond.

C.R. 4288

**Extract from Daily Orders Part 11 Unit The Royal Wfld.  
Regt. St. John's, July 10th, 1919.**

**The discharge of the undernoted on demobilisation has been  
APPROVED by O.C. Discharge Depot, with effect from 19-7-19.**

4288 L/Cpl. J. Diamond.

C.R. 4288

Extract from Daily Orders Regt. St. John's Royal Nfld.  
Regt. St. John's, July 3rd, 1919.

4288 L/Cpl. J.D. Diamond.

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

Extract from Daily Orders Regt. St. John's Royal Nfld.  
Regt. St. John's, July 3rd, 1919.

C.R. 4288

Extract from Nominal Roll Embarked St. John's for Overseas,  
Mar. 20, 1918.

4288 L/C. Diamond J.



C.R. 4288

Extract of Daily Orders part 11, from Unit The Royal Wfld.  
Regiment, St. John's, dated March 22, 1918.

#4288 Pte. Diamond.

Promoted Lance Corporal with effect from 25/3/18.

C.R. 4288

Extract of Daily Orders part 11, from Unit Royal  
6/1st Newfoundland Regiment, dated January 8, 1916.

#4288 Pte. J. Diamond.

tested for General Service with the 1st Newfound-  
-land Regiment posted to H. Coy and given numbers  
as shown, with effect from December 31, 1917.

J. Diamond.

4288

P. + P. 10





No. 5963/873

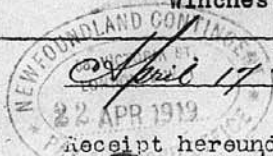
N.F.F./79.

FROM: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,  
2/Bn. Royal Newfoundland Regiment,  
Hazley Down Camp,  
Winchester.

6th April 1919



1919

4288 W/Cpl Diamond J.S.

Receipt hereunder.

With reference to the following telegram from the Minister of Militia / / ( 137 )

*E. Kearn* Capt  
LIEUT. COLONEL,  
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

"Pay to- 4288 Diamond

£8. 4. 0.

Cheque £ 8. 4. 0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Received the sum of Eight Pounds Four Shillings in respect of telegraphic remittance from the Minister of Militia.

*A. C. Minard*  
Chief Paymaster & O. i/c Records.

J. D. Diamond  
No. 4288 Rank Lance Corporal  
Witness W. Rockett

No. 21619/2504/P.&.A

06619 2504 3



NEWFOUNDLAND CONTINGENT

From:

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

~~Officer Commanding,~~  
~~2/Bn. Royal Nfld. Regt.,~~  
~~Hazley Down Camp,~~  
Winchester,

30th December, 1918

2-1-1919

Subject: 4288 L/C. J. Diamond,

With reference to the following telegram (21296) from the Hon. Minister of Militia, received

"Pay to 4288 Diamond, £8.7.0.

Draft £8.7.0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Receipt hereunder.

*[Signature]*

LIEUT. COLONEL,  
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.  
Royal Newfoundland Regiment.

Received the sum of Eight

Pounds Seven Shillings account of cable remittance from Newfoundland.

*[Signature]*  
for Chief Paymaster & O. 1/c Records.

J. D. Diamond.

No. 4288 Rank Serge

Witness A. Maund

*[Handwritten mark]*

TO, - The Chief Paymaster,  
Royal Newfoundland Regiment,  
.58 Victoria Street,  
London, S.W.

Sir:-

Please charge the amounts set opposite my name to my account and pay it to the N.W.S.A. "Prisoners of War Fund" in quarterly instalments for the period of one year.

Commencing on 1st July 1918.

Regtl. No.	Rank.	Name	Amount	Signature.
4288	4/cpl	Diamond. J.	\$2.50	

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

Date

June 26<sup>th</sup> 18

0222 1/2. L. ...

B  
No. 2750/358.

FROM: NEWFOUNDLAND CONTINGENT

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

17th February 1919

4288. I.C. Diamond J.D.

With reference to the following  
telegram from the Minister of  
Militia / / (24.)

"Pay to-4288. Diamond.

£12.7.0.

Cheque £12.7.0. is enclosed  
for payment to this Soldier.  
Kindly obtain his receipt  
hereon.

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

TO: Officer Commanding,  
2nd/Bn. Ryl Nfld Regt.  
Winchester.

*February 19th 1919*

Receipt hereunder.

*J. D. Diamond*  
LIEUT. COLONEL  
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

Received the sum of *Twelve pounds*  
*Seven Shillings* in respect of  
telegraphic remittance from the  
Minister of Militia.

*J. D. Diamond*  
No. 4288 Rank *Lieut Colonel*

Witness *M. Rockett*





Diamond, J

4288

Hay Sept.

August 4th 1919

#4238, L/C.J.Diamond,  
Flowers Cove, St. Barbe.

Dear sir:

Enclosed please find Discharge Certificate  
# 3325.

Yours truly,

Capt. Paymaster.

RS/.

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 4288 Rank 2/cpl Name Deanond J  
 Intended place of residence Flowers Cove St Marks  
 2. Occupation Fisherman  
 Classification of soldier E Medical Category A-1

3. The above named man is discharged in consequence of

### DEMobilIZATION Eligible for War Service Gratuity

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

Place, ST. JOHN'S

Date JUL 7 1919

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

### CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place, ST. JOHN'S

Date 7-7-19

*[Signature]*  
 Signature of soldier

*[Signature]*  
 Signature of witness

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

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

Place, ST. JOHN'S

Date 7-7-19

*[Signature]*  
 Signature of soldier

*[Signature]*  
 Signature of witness

### STATEMENT OF SERVICE

7. Enlisted for service 31-12-17 No. of days on Military  
 Discharged from service 21-7-19 Plus 14 days Service 382

### 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 JUL 21 1919

*[Signature]*  
 Officer in Charge Depot  
 The Royal Newfoundland Regiment

### CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place, ST. JOHN'S

Date August 4/1919

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

*[Handwritten notes]*  
 2029/33 50

1  
 21  
 28  
 31  
 20  
 31  
 20  
 21  
 4  
 21

# The Royal Newfoundland Regiment

Class for Demobilization:—

*E*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date ..... *5-7-19* .....

Regimental No. *4288* .....

Name ..... *Diamond Joseph* .....

Address ..... *Flowers Cove* .....

Present Medical Category ..... *Ai* .....

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

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

Members of Board {

*RJ G. J. Majors*  
.....  
O.C. Discharge Depot.

*Watson*  
.....  
Senior Medical Officer

*Seaburn*  
.....  
M. O. Depot



# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 4288 Rank S/Corpl. Name Diamond J. Shiverslove  
 Date of Enlistment 31-12-17 Address St. Barthe District H.I.  
 Occupation Taskorman Classification for Discharge 4 Medical Category H.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 5-7-19

O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date .....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:

(a) Clothing Allowance payable \$60.00

(b) ~~Clothing~~ Supplied

Date 7-7-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R2224 to his home at Flowers Cove and Release Certificate No. 3268 issued

Date 7-7-19

J.A. Knowlton  
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 4-8-19

Date 7-7-19

1  
Depot Paymaster.

Discharge approved for 21-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1
F 178	W 3494	B 122	Board 1st	" 2
R 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		

2 Form B

Date 7-7-19

J.A. Knowlton  
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

JUL 21 1919

Date .....

J.R. Coyle Capt  
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.

*J. Diamond*

Signature of Man.

*J. H. Shavel*

Signature of the Vocational Officer or his Representative.

Reg. No. 4288

Place *St. Johns*

Date *7-7-19* 191



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

# MEDICAL HISTORY

OF

Surname

*Diamond*

Christian Name

*Joseph D.*

Table I.—GENERAL TABLE.

Birthplace:—Parish


*St. Louis Co.*

County

*Hyde.*

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	at	on	at
Examined	<i>21<sup>st</sup></i> day of <i>Dec</i> 191 <i>7</i>	<i>St. John's</i>	day of	191
Declared Age	<i>18</i> years	<i>2</i> Mos	years	days
Trade or Occupation	<i>Fisherman</i>			
Height	<i>5</i> feet	<i>9</i> inches	feet	inches
Weight		<i>140</i> lbs.		lbs.
Chest Measurement	Girth when fully expanded...		<i>34 1/2</i> inches	inches
	Range of Expansion..		<i>1 1/2</i> inches	inches
Physical Development	Right	Left	Right	Left
Vaccination Marks	Arm	Number		
	/	/		
When Vaccinated				
Vision	R. E.—V= <i>4/6</i>		R. E.—V=	
	L. E.—V= <i>6/6</i>		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)	<i>Samuel P. Adams</i>			
(Rank)	<i>Major</i>			
	Medical Officer.		Medical Officer.	
Enlisted	at	at	at	at
	on	on	on	on
	<i>21<sup>st</sup></i> day of <i>Dec</i> 191 <i>7</i>	<i>St. John's</i>	day of	191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
Transferred to	<i>Royal Hydr Regt 4288</i>			
Became non-effective by	on	on	on	on
	day of	day of	day of	day of
	191	191	191	191
[Signature]				
[Rank]				

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature, syphilis, admissions and re-admission of treatment out of hospital
	Day	Month	Year	Day	Month	Year			
 Hazeley Down	24	MAY	1918	13	6	18	Mumps	20	Normal Course Duty
Hazeley Down	23	2	19	18	3	19	Influenza	23	To duty



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

Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In case 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

Normal course. Recovered. Disch'd to  
Duty

C. Morse  
(Capt. R.A.M.C. (ee))

To duty.

W. H. W. W. W.  
CAPT. R.A.M.C.



**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 West Surrey* Former Trade or Occupation *Ironman*
2. Regtl. No. *4487* 3. Rank *Lance Pl* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Diana Joseph B* (Surname) *Joseph B* (Christian Names) (a) Former Regts. or Corps; with Regtl. Nos.
5. Age last birthday *19*
6. Posted for duty on..... at..... in category (or grade).....
8. If the disability is an injury was it caused  
(a) in action (b) on field service  
(c) on duty (d) off duty? (b) Date of Discharge;  
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—  
(a) When (d) Particulars of Pension or Gratuity (if any)  
(b) Where  
(c) Opinion of Court

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

### Statement of Case.

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

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



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

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

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

*The Complaint of his disability*

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

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

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

*Repatriation*

*W. E. Proemier. Capt R.D.M.C.*  
 Medical Officer in charge of case.

Station *Azuley Down*

Date *1/4/19*

\* 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



## 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

*Joseph Diamond*

Regiment from which discharged

**Royal Newfoundland**

Regimental number

*4588*

Intended address

*Flowers Cove*

Height on discharge

*5* Feet *9*

Color of hair on discharge

*Black*

Complexion

*Fair*

Color of eyes

*Brown*

Descriptive Marks

—

Figure on discharge

*Tall*

Christian name of Father

*George*

Christian name of Mother

*Mary*

Wife's maiden name in full

—

Date and place of marriage

—

Christian names of children

—

Place and date of soldier's birth

*Flowers Cove, 6th Oct, 1900*

Nature and locality of civil employment required

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

(Soldier's signature in full)

*J. Diamond*

*P.C.*  
(Rank)

Station

**ST. JOHN'S.**

Date

*5-2-19.*

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

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



August 11, 1919

Mr. Joseph Diamond,  
Flowers Cove,  
Straits Bell Isle.

Dear Sir:-

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

Yours truly

Captain & Paymaster.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 20th. 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..... *Joseph D.*..... 2. Surname..... *Diamond*

3. Rank..... *Lt Cpl*..... 4. Regt. No..... *4288*.....

5. Address in full to which future payments of gratuity are to be forwarded..... *Howers Cove (Strait)*

6. Date of enlistment in the Regiment..... *Dec 25/17*.....

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge..... *No*

8. Relationship of such dependents..... *No*.....

9. Address in full of such dependents..... *No*.....

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *No*

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

12. Give total length of time which you served on active service, whether in Hfld. or Overseas..... *1 yr 6 mos*

13.....

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.

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

..... *No* .....

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

..... *No* .....

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

..... *No* .....

19. Are you now serving in the Res? If not give - (a) Date of discharge.

*July 7/19* (b) Reason for discharge *Demob.*

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.

..... *England only* .....

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee.

..... *No* .....

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



Signature of Applicant: *J. D. Deacons.*  
 Place of Residence: *Lowbers Ave (Straits)*  
 Declared before me at: *St Johns*  
 This *7<sup>th</sup>* day of *July* 19*19*.

Signature of Barrister of the  
 Supreme Court, Stipendiary Magistrate,  
 Notary Public, Justice of the Peace,  
 or Commissioner of affidavits. *John McCarthy*

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







4288  
Jewmans, Cove.  
14/11/19.

7483

Dear Sir.

I am sorry to be  
troubling you in this way.  
but as I have not received  
any Discharge papers yet,  
I would ask you, if you  
could, give me any information  
when they are on let me  
know if they have been  
sent to me or not.

I would be glad if you  
would forward them to  
Jewmans Cove.

I Remain Yours,  
truly.

J. L. Diamond.

to Jewmans Cove  
sent Aug 4/19

Write P.M. at Jewmans Cove to re-address

February 19th. 1918.

Newfoundland Regiment.

To Pte 1288 J. W. Diamond

To Board and lodging at Manuel Hotel, Lewisporte.

( $\frac{1}{2}$  Cost of accompanying Bill while waiting train  
connections when on Home Leave)

\$3.30

ACCOUNT	B.M.
CH. NO.	1363
IND. LEDGER	W.S. Jew.
PAY LEDGER	W.S. Jew.
GEN. LEDGER	W.S. Jew.

OK.

Adjutant  
Depot, First Newfoundland Regiment,  
St. John's, Nfld.

21-2-18.

Recd. W. J. Diamond

28-2-18

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
H 121  
20.

Regiment of

*Royal Field.*

Signature of O. C. Company

Number of Soldiers

*200*  
*W. A. G. G.*

Regimental Number and Name		Enlistment		Troop	Good Conduct Badges, Service pay or proficiency pay
No.	<i>Diamond J. D.</i>	Age on	<i>18</i> years <i>2</i> months	<i>Yesherman</i>	
Joined	Date	Place and Date of Enlistment	<i>St. John's</i>	Religion	
Joined	Date	Period of	<i>2-12-17</i>	<i>Mish</i>	
Joined	Date	with Colours <i>2 1/2</i> years. with Reserve <i>3 1/2</i> years.		Place of Birth	<i>20-3-18 Promoted Lance Corporal</i>
Joined	Date				

Place	Date of Offence	Rank	Cases of Breakdown	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<i>Nagles D Coy</i>	<i>27-10-18</i>	<i>LC</i>		<i>Failing to comply with an order</i>	<i>Sgt Penny</i>	<i>Reprimanded</i>	<i>28-10-18</i>	<i>Lt Col B. J. Batten</i>	<i>M.H.</i>
				<i>Demobilized St. John's 4/19</i>					

To be carried over



14788

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 4288 Rank Private Name Diamond J  
 Date of Enlistment 31-12-17 Address Flowers Lane District St. Johns  
 Occupation Fisherman Classification for Discharge F Medical Category F1  
 Recommendation S.M.B. \_\_\_\_\_ Disability Rating \_\_\_\_\_

Passed to Demobilization Officer with following documents:—

N.F. P36	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	1	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	ME 2			" 6	
B 179c	B 120	M 93				

Date 5-7-19 O. C. Discharge Depot St. Johns St.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

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

*J. Diamond*

Particulars passed to Vocational Officer for information and action.

Date.....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied Full

*[Signature]*

Date 7-7-19 O i/c. Re-clothing.



3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. B2224 to his home at Flowers Lane and Release Certificate No. 3268 issued.

Date 7-7-19

J.A. Snow 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 7-8-19

Date 7-7-19

J.A. Snow Capt  
Depot Paymaster.

Discharge approved for 21-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1	
F 178	W 3494	B 122	Board 1st	" 2	
F 178a	D 400A	B 1915	do 2nd	" 3	J. Snow B
L 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 7-7-19

J.A. Snow 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 JUL 21 1919

A.R. Cooper Capt  
O. C. Discharge Depot.

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

Date July 21/19

Reg. No. *4248* Rank *Plc.* Name *Piamond J.*

Attested ..... Address *Flowers Ave.*

Allotment ..... Allottee ..

Date of Allotment ..... Returned from Overseas *JUL 1 1919*

Returned on S S *Cassandra* Cause *Discharge*

*7.4.19*  
*21.7.19*

**PASSED TO DEMOBILIZATION OFFICER**

**DISCHARGE APPROVED ON DEMOBILISATION.**