



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 1980 Name Isaac Eddy Corps Meth

Questions to be put to the Recruit before Enlistment

1. What is your name? 1. Isaac Eddy
2. What is your full Address? 2. Newfoundland
P. Bay
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 21 Years Months
5. What is your Trade or Calling? 5. Tradesman
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, Isaac Eddy 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.

Isaac Eddy SIGNATURE OF RECRUIT.

J. W. Pittman Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Isaac Eddy 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 explained as replied to, and the said recruit has made and signed the declaration and taken the oath before me as follows:

on this 9 day of May 1915
Signature of Attesting Officer J. W. Pittman

† 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 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

4980

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

Name Edgar Eddy
 Apparent age 21 years 5 months. Height 5 feet 8 inches
 Chest Measurement { Girth when fully expanded 38 inches
 Range of expansion 5 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Eddy Sound
Island R. B. | 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 L'epot	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>19-5-16</u>									
Joined at <u>St John's</u> on <u>1904 9-19-18</u>									

Discharged August 7 1919

Embarked St John's N. B. Columbia to Halifax N.S. 22-7-1918
Admitted South Park Military Hospital Liverpool N.S. 15-8-18
Transferred from Royal Military Hospital Liverpool to 3 London General Hospital
Weymouth 5-6-18 to depot Winchester 14-10-18
To the front line for demobilization 24-6-1919. Arrived Liverpool 1-7-1919

Total Service forfeited as above.....

Remobilization St John's 7-8-1919

Total Service towards Engagement to 7-8-1919 (date of discharge) 1 years 91 days

Pensions

Reg. No. 4980 Rank PT Name Eddy Isaac
Attested 9-1-18 Address Sound Island N.Y.
Allotment 70cts. Allotee Mr John Eddy (Father)
Date of Allotment 1/7/18 Returned from Overseas _____
Embarked for Overseas JUL 22 1918 Cause _____

10-5/18 Voce Apr 10/18 sub Isaac 20/18 sub Isaac 30/18
G.L. 28-578 to 3-6-18 held.

C.R.

4980

Extract from Daily Orders Part 11 Unit The Royal Rifles Regt. St.
John's, Aug. ^{16th} 18th, 1919.

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

4980 Pte. I. Eddy.

C.R. 4980

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

The discharge of the undernoted on demobilization has
been APPROVED by O.C. Discharge Depot with effect from 24-7-19

4980 Pte. J. Eddy.

C.R. 4980

Extract from Daily Orders Berwick Unit The Royal Nfld.

Regt. St. John's, July 3rd, 1919.

4980 Pte. I. Eddy.

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

Extract from Daily Orders Berwick Unit The Royal Nfld.

Regt. St. John's, July 3rd, 1919.

C.R. 4980

Extract from Casualties from Pay and Record Office, London, dated
15th. October, 1918.

4980 PTE. I. EDDY (admitted from Major Garty's
Reinforcement Draft from Wfld) fit
for duty.

The abovementioned man , ex 3rd London General Hospital, 14/10/18
has been furnished warrant and proceed direct to Depot.

Authority: Memo from 3rd London General Hospital.

C.R. 4980

Extract from Casualties from Pay and Record Office, London dated
14th Sept. 1918.

4980 Pte. T.E. Eddy

was admitted to the 1st Western General Hospital, Fazakerley,
Liverpool, 15/8/18. (He was first reported to Canadian Record
Officer, who reports him to this office 12/9/18.)

Authority: Letter from Canadian Records.

C.R. 4980

Extract from casualties received from Pay & Record
Office, London, 7 Oct. 1918.

4980 Pte. I. Eddy,

Was transferred from Taxed Military Hospital, Liverpool,
to the 3rd London, General Hospital on 5-10-18.

MM.

C.R. 4980

Extracted from Casualties received from P.&R. Office London,
Aug. 24, 1918.

The Undermentioned man of the 1st draft from Newfoundland was
admitted sick, to Foxeth Park Military Hospital, Southdown Road
Liverpool. on 16/8/18.

4980 Pte. Eddy I.

C.R. 4980

Extract from Daily Orders part 11, from Unit The Royal
N2d. Regt. St. John's, July 25, 1918

The following man embarked for overseas on H.M.S. "Columbella"
July 22, 1918.

#4980 Pte. Isaac Eddy.

Extract from Daily Orders part 11, from Unit The Royal Mfld.
Regt. St. John's, dated May 10, 1918. 5

#4980 Pte. I. Eddy.

Attested for General Service with the Royal Mfld. Regt.
from 9.5.18.

T. E. Eddy

C.R. 4980

~~1980~~

Notes

Cas. 14/9/18

NEWFOUNDLAND COMJRGENT,
 HAY & PERROD OFFICE.

NO. 14 SEP 1918

PRE. NOS.

8091

Forwarded with the Compliments of the

Secretary of the War Office. Memorandum
 received from the Officer in Charge of
 Records, Canadian Expeditionary Force,
 relating to 4980 Ft Eddy, I. E.

War Office,
 6 Banastre St
 Embury Court
 Embury Rowment S.C.2.
 13 Sept. 1918.

The Officer in Charge of Records,
 Newfoundland Expeditionary Force

Ans. 58 Victoria Street, S.W.

Has been furnished with a Warrent to return

14/10/18

To be Discharged from Hospital tomorrow.

Unit.	Squadron, battery, or company.	Regtl. No.	Rank and Name.	
R. Infd.		4980	Plé	Eddy. J.

[Signature]
Capt. Ramey

To Off. 1/2 Records.. 58 Victoria St.
To Dept for disposal.
Admitted to Hospital from Trench Mil? Hop Liverpool
Admitted to a pool of transport.

Registrar, R.A.M.C.f.
3rd London General Hospital,
WANDSWORTH, S.W.

Eddy, Isaac

4980

Receipt

August 7th 1919.

#4980, Pte. Isaac Eddy.

Sound Isld. P.B.

Dear Sir:

Enclosed please find Discharge Certificate
3537.

Yours truly,

Capt.™

Officer i/c Records.

RS/.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4980 Rank Pte Name Eddy J
 Intended place of residence Sound Old

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 10 1919

J. M. H.
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place, ST. JOHN'S

Date JUL 10 1919

Eddy
 Signature of soldier

J. H. Munn
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place, ST. JOHN'S

Date JUL 10 1919

Eddy
 Signature of soldier

J. H. Munn
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 9-5-18 No. of days on Military
 Discharged from service 24-7-19 Plus 14 days Service 458

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 24 1919

N. R. Cooper Capt
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

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

Place, ST. JOHN'S

Date August 7/1919

J. M. Bowley Capt
 Officer in Charge
 The Royal Newfoundland Regiment

W. B. 207915537

23
30
31
7
41

The Royal Newfoundland Regiment

Class for Demobilization
6

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

 Date *8.7.19*

 Regimental No. *4980*

 Name *Eddy Isaac*

 Address *Land Island*

 Present Medical Category *Ai*

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

Members of Board {

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

L. Patton
 Senior Medical Officer

Geo. Burden
 M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 14950 Rank Plt Name Haynes
 Date of Enlistment 9 5 18 Address Beaufort St. St. John's District Plunkett
 Occupation Fisherman Classification for Discharge 6 Medical Category A.I.
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P136	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.
E 179a	D 400C	Form K	do 4th.	" 5.
B 179b	B 103	ME 2		" 6.
B 179c	B 120	M 93		

Date 9/19

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. £6.00

(b) Clothing Supplied

Date 10-7-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R23339874 to his home
at Sound, I. Id. and Release Certificate No. 3403 issued.

Date 10-7-19 J. A. Snowcliff
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 10-7-19 H. M. [unclear]
Depot Paymaster.

Discharge approved for 24-7-19

Forwarded with following documents to O.C Discharge Depot. 5

N.F. P 36	B 268	B 121	N.F. Med	D.F. 1	2 Form B
F 178	W 3494	B 122	Board 1st	" 2	
F 178a	D 400A	B 1915	do 2nd	" 3	
H 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 10-7-19 J. A. Snowcliff
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 24 1919

D. R. Cooper Cabot
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 Eddy

Signature of Man.

J. H. Snowless

Reg. No. 4980

Signature of the Vocational Officer or his Representative.

Place

St. Johns

Date

10-7-19

191

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

MEDICAL HISTORY

OF

Surname GradyChristian Name Isaac

Table I.—GENERAL TABLE.

Birthplace:—Parish Souram Island P.P. County Nfld

	SPECIAL RESERVE		REGULAR ARMY	
	on	at	on	at
Examined	9 day of May 1918	S. Johns	day of	191
Declared Age	21 years		days	
Trade or Occupation	Fisherman			
Height	5 feet 8 inches			inches
Weight	145 lbs.			lbs.
Chest Measurement {	Girth when fully expanded ...	38 inches		inches
	Range of Expansion	5 inches		inches
Physical Development				
Vaccination Marks {	Right	Left	Right	Left
	Arm			
Number				
When Vaccinated				
Vision	L.E.—V=	66	R.E.—V=	
		66	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) Samuel Paterson

(Rank)

Medical Officer.

Medical Officer.

Enlisted	SPECIAL RESERVE		REGULAR ARMY	
	on	at	on	at
	9 day of May 1918	S. Johns	day of	191
	Corps.	Regtl. No.	Corps.	Regtl. No.

Joined on Enlistment	SPECIAL RESERVE		REGULAR ARMY	
	on	at	on	at

Became non-effective by	SPECIAL RESERVE		REGULAR ARMY	
	on	at	on	at

(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 case; nature or treatment of the case likely to be of interest or of future use. In case of syphilis, admissions and re-admissions to hospitals 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				
TOXTETH PARK LITARY HOSPITAL, LIVERPOOL.	15	8	18	5	10	18	Influenza	52	Slight ^{no} serious lung trouble: fed to hand.	<i>J. D. Logan</i>
<i>3rd Wm Bennett Chorlton-on-Medley</i>	5	10	18	14	10	18	do	7	2 months	CAPTAIN, R.A.M.C.-I. <i>G. C. Hall</i> <i>Capt. Hall</i>



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 *Eddy, Isaac.*

Regiment from which discharged **Royal Newfoundland**

Regimental number *4980*

Intended address *St. John's, N.F.*

Height on discharge *5* Feet *8*

Color of hair on discharge *Light Brown*

Complexion *Fair*

Color of eyes *Gray*

Descriptive Marks _____

Figure on discharge *Medium*

Christian name of Father *John*

Christian name of Mother *Hennetta*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *St. John's, N.F. Dec. 2 - 1897*

Nature and locality of civil employment required _____

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

(Soldier's signature in full) *Isaac Eddy*

(Rank) *Pvt*

Station _____ Date *5-7-19*

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



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

Station _____ Date _____

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.

In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

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

1. Unit and Corps *Royal W. F. S. B.* 7. Former Trade or Occupation } *S. Liberman*
2. Regtl. No. *4980* 3. Rank *Pvt.* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Eddy Isaac* (a) Former Regts. or Corps; with Regtl. Nos.
- (Surname) (Christian Names)
5. Age last birthday *192*
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 general 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, &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.)

No complaints of no disability

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

profound

20. Do you recommend—
 (a) Discharge as permanently unfit?
 (b) Change to United Kingdom?
 Note—(b) is only applicable to soldiers invaded at Foreign Stations.

O.E. Procter
 Medical Officer in charge of case.

Station *Hagley*
 Date *1.11.19*

* 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

August 15, 1919

Mr. Isaac Eddy,
Sound Island, P.B.

Dear sir:-

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

Yours truly,

Captain & Paymaster.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

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

- Christian name..... *Isaac* 2. Surname..... *Eddy*
3. Rank..... *Pte* 4. Regtl. No..... *4980*
5. Address in full to which future payments of gratuity are to be forwarded..... *Sound Island P.B.*
-
6. Date of enlistment in the Regiment..... *Nov. 9. 1918*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
na
8. Relationship of such dependents..... *na*
9. Address in full of such dependents.....
.....
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *na*
11. Were you on active service only in field, if so, give dates and particulars of such service..... *Overseas*
-
12. Give total length of time which you served on active service, whether in field or Overseas..... *Fourteen months*
- 1.?

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

no

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.

no

15. Have you been issued with a War Service Badge?

no

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

no

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

no

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

no

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

no

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

Aug. 24/19

(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.

England

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.

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. Eddy*
 Place of Residence: *Sears Island P. I.*
 Declared before me at: *St. Johns*
 This *10* 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 G. Carthy
JG

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



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Isaac Eddy, Regl. No. 4950
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
 Dollars and 70 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 1-7-18.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
4440	Father	Mr John Eddy	Sound Island P. Bay	70
			Total Allotment, \$	<u>70</u>

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

(Sig.)

Isaac Eddy

Officer Commanding

B Company

Nfld Regt

June 26th 1915

(Sig.)

Isaac Eddy

(Rank)

Private

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.Number of Sheet oneRegiment of Royal NewfoundlandSignature of O. C. Company C. Dicks Lieut

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.		Age on	years months		
4960	Eddy, Grace	21		Fisherman	
Joined	Date	Place and Date of Enlistment		Religion	
Joined	Date	9.5.18		Meth.	
Joined	Date	Period of } with Colours 19 ¹ / ₂ years. with Reserve 3 ¹ / ₂ years.		Place of Birth	
Joined	Date				Sound Island P. Bay

Place	Date of Offence	Rank	Cases of Drunkenness.	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order disposing with trial	By whom awarded	REMARKS
				Demobilized	H. Davis	7 ⁸ / ₁₉			

To be carried over

C.R.

4980

Army Form B, 179a

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 Artillery*

2. Regt. No. *4980* 3. Rank... *Pte*

4. Name... *Edy Isaac*
(Surname) (Christian Names)

5. Age last birthday... *22*

6. Posted for duty on... at...
in category (or grade)...

7. Former Trade or Occupation } *Fisherman*

7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regt. Nos.

(b) Date of Discharge ;

(c) Cause of Discharge.

(d) Particulars of Pension or Gratuity (if any)

9. If a Court of Inquiry was held on an injury state :—
(a) When
(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.

12. Place of origin of disability.

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? }

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.)

He complains of no disability

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

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

O. E. Proenier - 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

The Royal Newfoundland Regiment

94910

DEMOBILIZATION OF

Reg. No. 4980 Rank Plt Name Harry J
 Date of Enlistment 9 5 18 Address Sounds District Placentia
 Occupation Asst. mail Classification for Discharge 6 Medical Category AI
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P38	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 9/9/19

11 11 11
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

I Eddy

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable. \$6.00

(b) Clothing Supplied

All rights reserved

Date 10-7-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 223339874 to his home at Sound Ford and Release Certificate No. 3403 issued.

Date 10-7-19 J.A. Lowloff
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 11-7-19 J.A. Lowloff
Depot/Paymaster.

Discharge approved for 24-7-19

Forwarded with following documents to O.C Discharge Depot.

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

Date 10-7-19 J.A. Lowloff
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 24 1919 N.R. Cooke Capt.
O. C. Discharge Depot.

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

Date July 31 1919 J.A. Lowloff

Reg. No. *4980* Rank *Pfc* Name *Eddy J.*

Attested ... Address *Sound Edal*

Allotment ... Allottee

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

Returned on S S *Cassandra* Cause *Discharge*

9.7.19

24.7.19

**PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILISATION.**