



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. ~~1925~~ ⁴⁹²⁷ Name Geo. Elson Corps Meeth

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Geo. Elson
2. What is your full Address? 2. Bathurst
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 20 Years 3 Months
5. What is your Trade or Calling? 5. Seaman
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, Geo. Elson 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.

Geo. Elson SIGNATURE OF RECRUIT.

Frank Gurney Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Geo. Elson 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 6 day of May 1915.

Signature of Attesting Officer W. J. G. [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 complied with. I accordingly approve, and appoint him to the:

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

Date May 6 1915

Place St. John's } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name George Elson
 Apparent age 20 years 3 months. Height 5 feet 5 inches
 Chest Measurement { Girth when fully expanded 36 inches
 Range of expansion 5 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Henry Elson
Boston | 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>Nov 5-18</u>									
Joined at <u>St Paul's</u> on <u>Nov 6-1918</u>									
<u>Discharged July 14 1919</u>									
<u>Embarked St Paul's St Columella to Halifax NB 22 Feb 19</u>									
<u>Embarked for R.C.A. 23-1-19</u>									
<u>Re-embarked for France 28-11-1918</u>									
<u>Joined 8th Bn. 5/19</u>									
<u>Transferred from 8th Bn. 22/19 Arrived Amiens 23/19</u>									
<u>to the army and law for demobilization 22-3-1919 Arrived Hld 1-6-1919</u>									
<u>Demobilization St Paul's 14-7-1919</u>									
Total Service forfeited as above _____									
Total Service towards Engagement to <u>14-7-1919</u> [date of discharge] <u>1</u> years <u>70</u> days									
Pensions " " " " " " " " " " " "									

C.R. 4927

Extract from Daily Orders part 11, from Unit The Royal Newfoundland
Reg St. John's, dated July 25, 1918.

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

#4927 Pte. George Elson.

C.R. 4927

Extract from Nominal Roll of draft No. 56, from the
2nd., Battalion of the Regiment to the 1st., Battalion
B. E. F. Embarked Southampton 23/11/18.

#4927 Pte. G/ Elson.

C.R. 4927

Extract from Daily Orders Part II Royal Newfoundland
Regiment. Depot St. John's dated Aug. 1st 1919.

The discharge of the undernoted on demobilization
has been confirmed by officer i/c Records from
noted date 14-7-19.

4927, Pte. G. Elson.

C.R. 4927

Extract from "Daily Order Part II Unit The Royal WFLC, Regt.
St. John's, July 4th, 1919.

The discharge of the undernote on demobilisation has been
APPROVED by C.C. Discharge Depot with effect from 30-6-19

4927 Pte.G.Elson.

C.R. 4927

Extract from Telegram received from Synoptical, London,
June 6th 1919.

Remittance received as follows:— Have not been paid
Soldier repatriated, you can adjust?

4927 Elson

£.8.4.5.

C.R. 4927

Extract from Daily Orders Part A1 Depot, St. Johns,

Date June 18th 1919.

4927, Pte. G. Elson.

Reported at Headquarters 1/6/19.

on "Corsican"

which sailed Liverpool May 22/1919.

C.R. 4927

Extract From Nominal Roll from 1st. Battalion
Royal Newfoundland Regiment dated 30-4-19.

The undermentioned of the 1st. Battalion left
Rouen Camps 22/4/19, embarked at Havre 22/4/19,
disembarked at Southampton 23/4/19 and reached
Hazeley Down Camp 23/4/19.

~~#5225-Plax~~

4927 Pte. G. Elsen.

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. St. John's, dated May 7, 1918.

#4927 Pte. G. Elson.

Attested for General Service with the Royal Nfld. Regt.
from 6.5.18

C.R.

No. 4927 Name *Edsom G.* Sqn., Batty., or Company *D.* Corp. *R. Newfoundland* Date of enlistment *6/5/18* G.C. Badges *1 1/2* Service or Proficiency Pay *Level*
 Date of last entry in Company Conduct Sheet No. and date of last drink Period not reckoning toward freedom from extra fine Sheet No. Signature G.C. Company, etc. *W. L. ...*

Army Form B. 122

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
<i>Diana</i>	<i>8.4.19</i>	<i>Sgt</i>		<i>Def. 1/-</i>	<i>62 MB New</i>	<i>Pay for same</i>	<i>8.4.19</i>	<i>Major Bernard</i>	

G. Elson

C.R.

4927

~~1110~~

Medical Report on an Invalid.

Station Hazeley Down

Date 15/19

1. Unit Royal Newfoundland
2. Regimental No. 4927
3. Rank plc
4. Name Elson George
5. Age last birthday 21
6. Enlisted { on May 4/18
at El John
7. Former Trade or Occupation { Plumber
- 7A. If with previous service in Army, state—
(a) Former Unit;
(b) Regimental No.;
(c) Date of Discharge;
(d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. nil
10. Place of origin of disability. nil
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. nil
nil

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
- (b) constitutional or hereditary, and not aggravated by service during the present war.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

na.

13. What is his present condition?

Recomplies to disability

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

14. If the disability is an injury, was it caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

15. Was a Court of Inquiry held on the injury?

- If so—
- (a) When?
 - (b) Where?
 - (c) Opinion?

16. Was an operation performed? If so, what?

na.

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

na.

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

na.

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

na.

Reoperation

20. Do you recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

W. P. Swann *Capt Hamer*

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except †

Station *Wozley Brown*

Officer in charge of Hospital.

Date *1/5/19*

*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.

† Delete this word if no exceptions are to be made.

No 4024 A



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, George Elson, Regl. No. 4927

hereby agree, until further notification by me, and in similar official form to make an Allotment of _____ Dollars and forty 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 1st June 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>2892</u>	<u>Mother</u>	<u>Mrs Henry (Mary) Elson</u>	<u>Bethwood</u>	
Total Allotment, \$				<u>609</u>

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.) [Signature]
Officer Commanding
A Company
[Signature]
1918

Sig.) George Elson
Rank) Private
Witness
James Arkhe Cope

Elson, G.

4927

Hay Sept.

June 11, 1919

Mrs. Henry Elson,
Netwood.

Dear Madam:

With reference to your telegram
of May 20th, I beg to state that I have cabled
\$40.00, to 4927, Pte. Geo. Elson.

Yours truly,

Lieut.
For Paymaster

NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 66 Sent by _____ Rec'd by _____ Check 8 No. _____

Place from St John's to _____

To Mr of militia



Cable 4927 per George
Elson Hayley forty dollars
Mrs Henry Elson

July 14th 1919.

#4927, Pte. G. Kiscn.

Botwood. Twill.

Dear Sir:

Enclosed please find Discharge Certificate
#3241.

Yours truly,

Capt. & Paymaster.

RS/.

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 4927 Rank Pte Name Blair G
 Date of Enlistment 6.5.18 Address Botwood District St. John's
 Occupation humberman Classification for Discharge C Medical Category A I
 Recommendation S. M. B. _____ Disability Rating _____
 Passed to Demobilization Officer with following documents:—

N. P. 1436	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 28.6.19 O. C. Discharge Depot Miss H

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

G. Elson
not with J. Jones

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 _____

Adlb. Boston

Date 22-6-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No B2001 to his home at Bethesda and Release Certificate No. 3077 issued.

Date 28-6-19

[Signature]
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 14-7-19

Date 28-6-19

[Signature]
Depot Paymaster.

Discharged approved for 30-6-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36	B 268	B 121	<input checked="" type="checkbox"/>	N.F. Med	D.F. 1	<input checked="" type="checkbox"/>	
B 178	W 3494	B 122		Board 1st	" 2	<input checked="" type="checkbox"/>	
B 178a	D 400A	B 1915	<input checked="" type="checkbox"/>	do 2nd	" 3	<input checked="" type="checkbox"/>	<i>Form B</i>
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 *[Signature]*

[Signature]
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

JUN 30 1919

Eligible for War Service Gratuity

Date

[Signature] MAJOR
O. C. Discharge Depot.

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

Date

Civil Re-establishment Committee



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

To resume former Occupation.

E. J. ...

Signature of Man.

Milobow...

Reg. No. 4927

Signature of the Vocational Officer or his Representative.

Place ST. JOHN'S.

Date JUN 28 1919 191

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

MEDICAL HISTORY

Surname Elson OF George Christian Name

Table I.—GENERAL TABLE.

Birthplace:—Parish Botwood County Nfld

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	at	6 th day of May 1918	at	day of 191
Declared Age		30 years — days		years days
Trade or Occupation		Lumberman		
Height		5 feet 5 inches		feet inches
Weight		127 lbs.		lbs
Chest Measurement	Girth when fully expanded	36 inches		inches
	Range of Expansion	5 inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V=	6/10	R.E.—V=	
	L.E.—V=	6/10	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>James P. ...</u>			
(Rank)				
Enlisted	at	6 th day of May 1918	at	day of 191
		Corps. Regtl. No.		Corps. Regtl. No.
Joined on Enlistment		The Royal 4927 Nfld Regt		
Transferred to				
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				

Medical Report on an Invalid.

Station Hazelhurst CampDate 1-5-19

1. Unit Royal Newfoundland
2. Regimental No. 4927
3. Rank Pte
4. Name Edson George
5. Age last birthday 21
6. Enlisted $\left\{ \begin{array}{l} \text{on } \text{May 4/15} \\ \text{at } \text{St John's} \end{array} \right.$
7. Former Trade } Plumber
or Occupation }
- 7A. If with previous service in Army, state—
- (a) Former Unit;
- (b) Regimental No.;
- (c) Date of Discharge;
- (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. nil
10. Place of origin of disability. nil
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. nil
nil

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
- (b) constitutional or hereditary, and not aggravated by service during the present war.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.
- na

13. What is his present condition?

He complains of no disability

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

14. If the disability is an injury, was it caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

15. Was a Court of Inquiry held on the injury?

- If so—
- (a) When?
 - (b) Where?
 - (c) Opinion?

16. Was an operation performed? If so, what?

na

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

na

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

na

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

na

Repatiation

20. Do you recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

W. E. Proctor
Sgt. R. J. M. Capt. R. H. C.
 Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except †

Station *Hazley House*

Officer in charge of Hospital.

Date *1 - 5 - 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.

† Delete this word if no exceptions are to be made.

July 30th 1919.

Mr. G. Elson,
Botwood, N.D.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 war Service.
Gratuity.

Yours truly,

Capt. & Paymaster.

RS/.

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 *George* 2. Surname *Elson*

3. Rank *Private* 4. Regtl. No. ~~4927~~ *4927*

5. Address in full to which future payments of gratuity are to be forwarded. *George Elson - Botwood Notre Dame Bay*

6. Date of enlistment in the Regiment. *6th May* *1915*

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

8. Relationship of such dependents.
Mother

9. Address in full of such dependents.
Mary Elson

.....
Botwood - Notre Dame Bay

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

11. Were you on active service only in Mfld, if so, give dates and particulars of such service.
England August - 18

.....
France - November 18

12. Give total length of time which you served on active service, whether in Mfld. or Overseas.
From 6th May 18 5

.....
28th June 1919 1 $\frac{1}{2}$

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

no

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

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?

not applicable

19. Are you now serving in the Res? *no* If not give - (a) date of discharge *26th June 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.

no

no

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

no

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

Signature of Applicant:

Mr. E. Olson
George E. Olson

Place of Residence:

W. D. 13
Mark
W. D. 13

Declared before me at:

St. John

This

25th

day of

June

19*17*...

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

Wm. J. Quinn

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

Receipt for Army Book 64

No. 4927 .. Name Elson G.

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

Name George Elson

Date July 27 1920

Place Bolwood

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

Casualty Form - Active Service.

Regiment or Corps P. Newfoundland
 Rank Pte Surname Olson Christian Name G.
 Religion Methodist Age on Enlistment 20 years 3 months
 Enlisted (a) 6/15/18 Terms of Service (a) Duration Service reckons from (a) 6/15/18
 Date of promotion to present rank..... Date of appointment to lance rank.....
 Extended (.....) Re-engaged (.....) Qualification (b).....
 Occupation Lumberman or Corps Trade and Rate 1st Lt Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, etc., 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 ...			
		Disembarked...		28 NOV 1918	
		Joined Batt.		5 JAN 1919	
		<u>Arrived in UK</u>		<u>23/4/19</u>	

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shoeing-Smith, &c.

(17591.) Wt. W 1887-P 1194. 1,000,000. B.U.S. D & S. Form B.103. (E. 1256.)

[P.T.O.]

Next of Kin: Father: Henry Olson: Botwood: N.S.S.D.

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S, Nfld.

Fold Here

OCT 15 1921

1921.

The accompanying ~~Victory Medal and/or~~ British War Medal
is/are forwarded herewith to

~~FORWARDED TO~~ George Elson

in respect of his service as No. 4927 Rank Pte.

Name G. ELSON Royal Nfld. Regt.
~~1st Bn. 1st Coy.~~

Receipt of the same should be acknowledged hereon.

Received My British War Medal.

Signature George Elson

Date Oct. 28th 1921

Address Botwood.

[P.T.O.]

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121.
39.Number of Sheet *1*Regiment of *Royal Newfoundland*Signature of O. C. Company *J. James*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.		Age on	20 years months	<i>Serviceman</i>	
<i>4927</i>	<i>Elson Geo</i>	Place and Date of Enlistment	<i>St John's 6.5.18</i>	Religion	
Joined	Date	Period of	with Colours 170 years. with Reserve 136 years.	<i>Methodist</i>	
Joined	Date			Place of Birth	
Joined	Date				

Place	Date of Offence	Rank	Cases of Drunkenness.	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<i>Demobilized</i>	<i>St John's</i>	<i>14/7/19</i>			

To be carried over

Army Form B. 121.

Reg. No. *4927* Rank *Pte* Name *Elson George*

Attested Address *Botwood*

Allotment Allottee

Date of Allotment Returned from Overseas *29-5-19*

Returned on S.S. *Cororan* Cause *Discharge*

28 6 19
30 6 19

PASSED TO DEMOBILIZATION OFFICERS
DISCHARGE APPROVED ON DEMOBILISATION

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4927 Rank Plt Name Blaney S
 Date of Enlistment 6.5.18 Address Botwood District Twyft
 Occupation Lumberman Classification for Discharge 6 Medical Category AI
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N. F. 136	B 268	B 121	N. F. Med	D. F. 1
B 178	W 3494	B 122	Board Ist	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
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		

Date 28.6.19 O. C. Discharge Depot. [Signature]

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

[Signature] Elson
 with [Signature] Gocheray

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 22-6-19

O i.c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. to his home
at Burwood and Release Certificate No. 3077 issued

Date 28-2-1919 Alfred [Signature]
Demo Director 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 14-7-19

Date 15-6-19 [Signature]
Depot Paymaster.

Discharge approved for 30-6-19
Forwarded with following documents to O.C. Discharge Depot

N.F. P/36	B 208	B 121	N.F. Med	D.F. 1
B 178	W 3404.	B 122	Board Ist.	" 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
B179c	B 120	M 93		

Handwritten notes: 1, 2, Form B, 15.5.25

Date [Signature] [Signature]
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:-
Officer in Records.
Board of Pension Commissioners.

with following additional documents:

Eligible for War Service Gratuity

Date JUN 30 1919 R.H. Sait MAJOR
O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot [Signature]
Date July 28 1919



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 *George Elson*

Regiment from which discharged **Royal Newfoundland**

Regimental number *4927*

Intended address *Bethwood,*

Height on discharge *5* Feet *7*

Color of hair on discharge *Black*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks *—*

Figure on discharge *medium*

Christian name of Father *Nancy*

Christian name of Mother *Nancy*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Bethwood, Feb 14th, 1898*

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) *George Elson*

W. L. W.
(Rank)

Station *S. H. Johns*

Witness W. L. W.
Date *27-6-19*

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.

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 *28-6-19*

Regimental No. *4927*

Name *Ellis, George*

Address *Portwood*

Present Medical Category *A1*

Recommended for:— (a) Immediate discharge

(b) ~~Seconding Medical Board~~

for *H.R. Cooper Capt*
O.C. Discharge Depot.

Members of Board

H. Paterson
Senior Medical Officer

T.W. Bundeau
M.O. Depot

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4927 Rank Pte. Name Elson, G.
 Intended place of residence Bethwood Lunenburg
2. Occupation h. m. l. s. m. a. n.
 Classification of soldier #1 Medical Category DT
3. The above named man is discharged in consequence of

DEMOBILIZATION Eligible for War Service Gratuity

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

Place, ST. JOHN'S

Date JUN 28 1919

J. M. West
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 28-6-19

G. M. Elson H. S.
Signature of soldier

J. A. Knowlton
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 28-6-19

G. M. Elson
Signature of soldier

J. W. Chancey Esq.
Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 6-5-18 No. of days on Military
 Discharged from service 30-6-19 Plus 14 days Service 435

APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S

Date JUN 30 1919

R. H. Lait Major
Officer Commanding Discharge Depot
The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

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

Place, ST. JOHN'S

Date July 14/1919

J. W. Bowley Capt
Officer i/c Records
The Royal Newfoundland Regiment

Ans B 2079 (341)

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30
14
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