



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3855 Name Eugene Farrell Corps SA

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Eugene Farrell.</u> |
| 2. What is your full Address? | 2. <u>Port Au Basque</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>19</u> Years <u>7</u> Months |
| 5. What is your Trade or Calling? | 5. <u>fisherman</u> |
| 6. Are you Married? | 6. <u>No.</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No.</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes.</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... | 10. { Name
Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes.</u> |

FOR THE DURATION OF THE WAR

I, Eugene Farrell 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.

Eugene Farrell SIGNATURE OF RECRUIT.
W. G. Stewart Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Eugene Farrell 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 signed the declaration and taken the oath before me at St John's on this 17 day of June 1915.

Signature of Attesting Officer J. G. Stewart

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

Date 1915
 Place } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name *Eugene Farrell*

Apparent age *19* years *7* months. Height *5* feet *7* inches

Chest Measurement { Girth when fully expanded *34 1/2* inches
Range of expansion *4 1/2* inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin *Mrs Elizabeth Farrell*
101 W. 11th Ave Relationship *Mother*

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 _____									
Joined at _____ on _____									
Total Service forfeited as above.....									} _____
Total Service towards Engagement to _____ [date of discharge] _____ years _____ days									
" " Pensions " _____ [" "] _____ " _____ " _____									

2888



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3855 Name Eugene Farrell Corps SA

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Eugene Farrell.</u> |
| 2. What is your full Address? | 2. <u>Port au Basque</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>19</u> Years <u>7</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Sisterman</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so, which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? | 10. { Name |
| | { Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes.</u> |

I, Eugene Farrell 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.

7/12/17

Eugene Farrell SIGNATURE OF RECRUIT.
W. H. Richardson Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Eugene Farrell do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me on this 12 day of June 1917.

Signature of Attesting Officer W. H. Richardson

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the

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

Date 1917 } Approving Officer.
 Place

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

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

12
22
34
365
37
38

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Eugene Sarrett.
 Apparent age 19 years 7 months. Height 5 feet 7 inches
 Chest Measurement { Girth when fully expanded 34 1/2 inches
 Range of expansion 4 1/2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mr. Elizabeth Sarrett.
201 Bay Bouque | Relationship mother.
 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>12-6-17</u>									
Joined at <u>St John's</u> on <u>June 12th 17</u>									
<u>Enlist 9.19.19. Discharged</u>									
<u>Embarked St. John's N.S. Hoisted to Halifax N.S. 4th 17</u>									Embarked for B.C. 4-2-18 Disembarked 6-12-18 Joined in the field 15-2-18 Wounded 4-10-18 Admitted 5 th Can B.C.F. P.S.W. 13-0-18 Transferred to England 19-10-18 Admitted 5 th B.P. Warranted 19-0-18 Discharged they were to discharge 18-4-19 Admitted Warranted 10-3-19 Further than report discharge 7-3-19 To H.Q. for demobilization 12-3-19 Arrived Newfoundland 24-3-19
<u>Embarked for B.C. 4-2-18</u>									
<u>Disembarked 6-12-18</u>									
<u>Joined in the field 15-2-18</u>									
<u>Wounded 4-10-18</u>									
<u>Admitted 5th Can B.C.F. P.S.W. 13-0-18</u>									
<u>Transferred to England 19-10-18</u>									
<u>Admitted 5th B.P. Warranted 19-0-18</u>									
<u>Discharged they were to discharge 18-4-19</u>									
<u>Admitted Warranted 10-3-19</u>									
<u>Further than report discharge 7-3-19</u>									
<u>To H.Q. for demobilization 12-3-19</u>									
<u>Arrived Newfoundland 24-3-19</u>									
Total Service forfeited as above <u>10 months 9th 19</u>									

Total Service towards Engagement to 9-5-19 (date of discharge) 1 years 342 days
 Pensions _____



3855

Extract from Daily Orders part II, Depot
St. John's dated May 12th., 1919/.

The discharge of the undernoted on demobilisation
has been CONFIRMED by Officer i/c Records on 9-5-19.

3855 Pte. Eugene Farrell.

C.R. 3855

Extract from Daily Orders part II, Depot St. John's dated April 28, 1919

The discharge of the undernoted on demobilization has been APPROVED by
O. C. Discharge Depot on noted date.

#3855 Pte. Eugene Farrell,

25-4-19.

C.R. 3855

Extract from Daily Orders Part II Unit The Royal
RFA, Regt. St. John's, Mar. 25th, 1919

The following officers, Non-Commissioned officers,
Men returned from overseas and reported at Depot
MM 24-3-19.

3855 Pte. E. Farrell.

C.R. 3855

Extract of Preliminary Report of a Medical Board held on Tuesday
Afternoon April 22nd. The following was the finding.

19.

Recommended Discharge from the Army.

REQUIRES HOSPITAL TREATMENT.

#3855, Pte. E. Farrell.

C.R. 3855

Extract of telegram from Syn., London, to
Military dated March 15th/19.

Following has embarked "Baltic" Liverpool
for Halifax.
March 12th.
under A. F.B. 179.

#3855 Farrell.

C.R. 3855

Extract from Casualties received from Pay & Record
Office, London, Mar. 7th, 1919

The U/M man ex 3rd L.G.H. was granted extension of
furlough to noon 7-3-19 to report to Depot 2/Bn. for
repatriation

3855 Pte. E. Farrell

C.R. 3855-

Extract of Casualties from Pay & Record Office, London.

Dated March 14th/19.

The undermentioned ex 3rd London G. Hospital S.W. , 4/3/19 reported at the Pay & Record Office, and was granted furlough to 6/3/19. He is marked as unfit for further service and is to be repatriated forthwith to Newfoundland.

#3855, Pte. E. Farrell.

AUTHORITY:

A. fs. ~~W.3201~~ W.3201, from 3rd L.G.H.

C.R.

3855

Extract from Casualties received from Pay & Record
Office, London, Feb. 13, 1919.

The undermentioned man was admitted to 3rd L.G.H.
Rouem, 10-2-19.

3855 Pte. A. Farrell.

C.R. 3855

Extract from Daily Orders by Lt. Col. B.J. Barton,
Commanding 2nd Bn., Royal Nfld. Regt. 18-1-19.

The following having reported back from 1st Bn. and posted to "H" Company from 17-1-19.

3855 Pte. E. Farrel.

C.R. 3855

Extract of Casualties from Pay & Record Office London, dated Jan.
10/1/19.

The undermentioned was discharged from 3rd London G, Hospital 9/1/19
and granted furlough to 18/1/19. Marked 1. Duty.

3855 PTE. E. Farrell.

A.Fs. W. 3016 from 3rd L.G.H. 1.

C.R. 3855

Dec 4th 18

Mrs. Elisabeth Farrell
Port aux Basques

Dear Madam:-

I beg to inform you that additional information has been received to-day from the Visiting Committee of the Newfoundland War Contingent Association to the effect that your son, No. 3855, Private Gregory D. Farrell is now progressing favourably.

Yours faithfully,

Lieut. Col.,

Chief Staff Officer.

C.R. 3855

Nov. 13th 19.

Mrs. Elizabeth Farrell,
Port-aux-Basques.

Dear Sir:-

I beg to inform you that additional information has to-day been received by this Department through the Visiting Committee of the Newfoundland War Contingent Association, to the effect that No. 3855, Pte. Eugene Farrell, is now slightly improved.

Yours faithfully,

Lieut. Col.,
Chief Staff Officer.

C.R. 8855

November, 6th. 1918.

Mrs. Elisabeth Farrell,
Fert aux Basques.

Dear Madam:-

I beg to inform you, that word has been received from the Record Office, London, that #5855 Eugene Farrell is now progressing favourably.

Yours faithfully,

Lieut.

Casualty Officer,
for Chief Staff Officer.

C.R. 3855

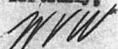
Nov. 2 19

Mrs. Elizabeth Farrell
Chammel

Dear Madam:-

I am directed to acknowledge receipt of your wire of yesterday's date requesting us to make enquiries regarding your son, No. 3855, Private Eugene Farrell; and I beg to say that in accordance with same a cable is being despatched to the Record Office, London in this connection, and the reply will be forwarded to you when received.

Yours faithfully,



Lieut.

Casualty Officer.

for Minister of Militia.

C.R. 3855

Extract from Telegram from Pay & Record Office,
London, dated November 6th., 1918.

With reference my telegram Nov. 3rd.
3855 Farrell progressing favourably.

NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

C.R. 3855

Date No. 85 Sent by Ba Recd & by mo Check 13/11

Place from Channel 1

To Minister of Militia



Please make enquiries how
 3855 pte Eugene Farrell
 is progressing anxious to
 know

Elizabeth Farrell

C.R. 3855

Extract from Casualties No. C. 1731 dated 31-10-18.

#3855 Pte. E. Farrell.

WOUNDED 4-10-18.

C.R. 3855

Abstract from Telegram: from Military St. John's to Synoptical,
London dated 28/10/18.

Inform condition of:

3855 .Fanell.

COUNTY NO. 3835

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

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

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

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

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

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

(NOT TRANSMITTED)

Signature of Sender _____ Address Dept of Militia.

Line Number	Recd	By	Sent	by	Check

Dated Oct 22nd, 1918

To Elisabeth Farrell, Port Aux Basques

Regret to inform you that Record Office, London, officially reports No. 3655, Private Eugene Farrell at 5rd London General Hospital Wandsworth suffering from G.S.W. breast and knee

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

J R. Bennett

Chie Dept of Militia

Minister of Militia.

FOR TYPEWRITER

C.R. 3855

Extract from Nominal Roll of sick and wounded
from the France Expeditionary Force to the
3rd., London General admitted 19/10/18.

#3855 Pte. E. Farrell.

G.S.W. BREAST & KNEE.

C.R. 5835

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

D U B L I N - - - RECORD OFFICE

No. H.A. 30273

Adm. 53 Gen. Hos. Boulogne 12th October 1918.

27428	L/C. Duncan T.	.....	5th R. Ir. Fus.	.....	Pleurisy Mild.
14632	Pte. Russell J.	.....	5th do.	.....	Bronchitis Mild.

Adm. 55 Gen. Hos. Boulogne 13th October 1918.

42499	Pte. Bittle S.	.....	9 R. Irish Fus.	.....	MGB. Wd. Foot Slt.
43211	L/C. Conlow J.	.....	7/8 R. Innis Fus.	.....	Gassed W. Slt.
28988	Pte. Doyle J.	.....	9 R. Irish Fus.	.....	GSW Knee Slt.
4857	L/C. Grafton J.	.....	9th do.	.....	" Leg Slt.
42390	Pte. Green J.A.	.....	1 do.	.....	" Head Sev.
41617	" Mays J.T.	.....	12 R. Irish Rifles.	.....	" Side Slt.
41410	" Montgomery S.W.	.....	9 R. Irish Fus.	.....	" Shldr. Slt.
25240	" Pickering W.	.....	9 do.	.....	" Back & Shldr. Sev.
4000	" Hudson J.	.....	8 R. Irish Rifs.	.....	Infl. Groin Rt. Slt.
25626	" Sherrod M.	.....	9 R. Innis Fus.	.....	NYD Abdominal Slt.

C O R K - - - RECORD OFFICE

No. H.A. 30273

Adm. 55 Gen. Hos. Boulogne 13th October 1918.

593	Pte. Jennings T.	2 Leinsters	Influenza Slt.
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Adm. 83 Gen. Hos. Boulogne 13th October 1918.

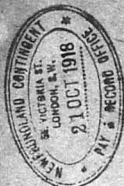
6609	Pte. Brown T.C.	7 R. Irish Regt.	Sciatica Sick Mild.
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NEWFOUNDLAND EXPEDITIONARY FORCE

No. H.A. 30273

Adm. 55 Gen. Hos. Boulogne 13th October 1918.

3855	Pte. Farrell B.	1 R. Newfoundland.	SW Thigh Slt.
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20/14

C.R. 3855

Extract from Nominal Roll Draft No. 36, 200 Other ranks
from 2nd., (Reserve) Batta. Royal Newfoundland Regiment
and proceeded to join the 1st., Battalion Royal WFLA/
Pvt., B. E. F.,
Embarked Southampton 4/2/18.

#3855 Pte . E. Farrell.

C.R. 3855

Extract from Nominal Roll Embarked St. John's for Overseas,
per S.S. "Floribel" Aug.4,1917.

3855 Pte. E. Farrell.

C.R. 3855

Extract from Daily Orders Part II Unit The Royal
FIELD. Regt., St. John's, June. 12th, 1917.

3855 Pte. E. Farrell.

Attested this day, post ed P. Coy, and assigned number
as shown.

E. Farrell

C.R.

3855

P.R.O.

Admitted 10 2 19. Army Form W. 3202.
(In books of 100.)

NOTIFICATION that a Soldier has been sent Home from Hospital to await Discharge under para. 392 (xvi.) King's Regulations.

Soldier's } 3855 Rank Plé
Regtl. No. }

Name Tarrell. E.
(Surname first)

Corps or Regiment } R. Infd. W. India
(also Unit if known) }

To Officer i/c of Records 58 Victoria St

Regimental Paymaster 58 Victoria St.

The above-named man, who appeared before a Medical Board, and whose discharge as "no longer physically fit for war service" was approved by the President of the Board on the 1 3 19, has been sent to Wandsworth on warrant to await instructions as to his final discharge; he has been given £1 (one pound) advance on account of plain clothes.

He proceeded on (date) 4 3 19

to (full address) 58 Victoria St
S.W.

Date 4 3 19 James Coy { Officer
Comm.

Place Wandsworth Registrar, R. Hospital.

Three copies to be made, one copy sent to each of the above mentioned, and one copy filed in the Office, S. W.

Notification to the Regimental Paymaster that a Soldier is about to be brought before an Invaliding Board at a Central Hospital with a view to discharge from the Service.

NOTE.—This notification is sent in order that the Officer i/c Records, at the time the soldier's documents reach him from the Officer i/c Hospital, may be in possession of particulars of the soldier's children in respect of whom separation allowance is being paid.

This information is required by the Ministry of Pensions at the time of assessing the soldier's pension, and it is important that this Army Form should be returned to the Officer i/c Records in time for despatch to the Controller, Ministry of Pensions, with the soldier's documents.

To enable the Ministry of Pensions to make the assessment by the termination of the period covered by the temporary pension allowance and thereby avoid hardship to the soldier, it is essential that there should be no delay in completing and forwarding this Army Form to the Officer i/c Records.

Part I.

A.F.W. 3977a has been sent to O.O.	A.F.W. 3977a has been sent to The Officer i/c Records, 58 Victoria St.	The Regimental Paymaster, 58 Victoria St.
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The undermentioned soldier is about to be brought before an Invaliding Board at this hospital with a view to discharge from the Service.

No. 3855 Rank Private
 Name Farrall Eugene
 (Surname). (Christian names in full).
 Unit and Corps Royal Newfoundland Regt.
 Station 3rd Gen Hospital Unit - Cpt
Went down with sw Officer i/c Hospital.
 Date 21 Feb 1919

NOTE.—If the soldier claims to be repatriated abroad and is prepared to embark at the first available opportunity, the Officer i/c Hospital has been instructed to complete such of the following particulars as the soldier can furnish. This information is required by the Officer i/c Records to enable him to verify the claim.

The soldier claims repatriation to _____ (Country).
 (i) Where enlisted _____
 (ii) Date of arrival in United Kingdom _____
 (iii) Port of arrival _____
 (iv) Ship on which arrived _____
 (v) Name of Shipping Line or Agent _____
 (vi) Names and addresses of two references who can verify the above particulars _____



In such a case the Officer i/c Records is to verify the soldier's claim forthwith and report to the Officer i/c Hospital on Part II. of Army Form W. 3977a whether the claim is substantiated or not.

Part II. of this Army Form is to be completed by you, or if necessary by the Secretary, T.F. Association, and forwarded without delay to the Officer i/c Records.

Station _____
 Date _____ 191 _____
 Officer i/c Hospital.

Notification to the Officer i/c Records that a Soldier is about to be brought before an Invaliding Board at a Central Hospital with a view to discharge from the Service.

NOTE.—On receipt of this notification the Officer i/c Records is to ensure that he has all the documents of the soldier that should be in his possession, or prepare temporary documents in the event of absence or loss of the originals.

Army Form W. 3977c has been sent to the Regimental Paymaster with instructions for that Officer to return it to the Officer i/c Records after having filled in the particulars of the names and dates of birth of the soldier's children for whom separation allowance is being paid, on receipt of which the Army Form is to be attached to the soldier's documents. In the event of the soldier's discharge documents being forwarded to the Controller, Ministry of Pensions, Army Form W. 3977c is to accompany them whenever possible; the despatch of the documents is not, however, to be delayed for this purpose. If the Army Form has not been received by the Officer i/c Records from the Regimental Paymaster in time for transmission with the discharge documents, it is to be forwarded to the Controller, Ministry of Pensions, as soon as received.

Part I.

A.F. W. 3977A has been sent to O.C.	The Officer i/c Records, <u>58 Victoria St</u> <u>SW</u>	A.F. W. 3977c has been sent to The Regimental Paymaster, <u>58 Victoria St</u> <u>SW</u>
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The undermentioned soldier is about to be brought before an Invaliding Board at this hospital with a view to discharge from the Service.

You are requested to forward without delay Army Form B. 178, or temporary document, for the soldier.*

No. 3855 Rank Private
 Name Jarrell Eugene
 (Surname) (Christian names in full)
 Unit and Corps Royal Newfoundland Regt.
 Station 3rd Gen Hospital 58 Victoria St
London SW Officer i/c Hospital.
 Date 21 Feb. 1919

* Strike out if inapplicable.

NOTE.—If the soldier claims to be repatriated abroad and is prepared to embark at the first available opportunity, the Officer i/c Hospital is to complete such of the following particulars as the soldier can furnish before transmitting the Army Form to the Officer i/c Records:—

- The soldier claims repatriation to _____ (Country).
- (i) Where enlisted _____
 - (ii) Date of arrival in United Kingdom _____
 - (iii) Port of arrival _____
 - (iv) Ship on which arrived _____
 - (v) Name of Shipping Line or Agent _____
 - (vi) Names and addresses of two references who can verify the above particulars _____



In such a case the Officer i/c Records is to verify the soldier's claim forthwith and report on Part II. of this Form whether the claim is substantiated or not.

Part II.

Officer i/c Hospital, _____

The soldier's claim to be repatriated abroad* _____ accepted. { Insert "is" or "is not." }
 On termination of his leave he is to report to the Officer Commanding, _____ { Strike out if inapplicable. }
 at _____ (Station)

Station _____

Date _____ 191 _____

Officer i/c _____ Records.

067084

No. 1776/258/P.&.A

N.F.P./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.R.Nfld.Regt.
Winchester

3rd February 1919

Feb 7 1919

3855 Pte. Farrell E.

With reference to the following
telegram from the Minister of
Militia 30/ 1/19 (976)

Receipt hereunder.

Chambers
LIEUT. COLONEL
COMMANDING 2ND BN ROYAL NEWFOUNDLAND BATTALION
Officer Commandg. 2nd BATTALION

"Pay to- 3855 Pte.E.Farrell
£6:0:0

Received the sum of Six

Cheque £ 6:0:0 is enclosed.
for payment to this Soldier.
Kindly obtain his receipt
hereon.

Pounds in respect of
telegraphic remittance from the
Minister of Militia.

A.S. Minns
Chief Paymaster & O. i/c Records.

Pte E Farrell

No. 3855 Rank Pte

Witness J.R. Hopkins & son

3rd London Gen
Hospital

Yours
Wm

Wm (17)



Dear Sir.

Will you please
send me 1 Pound ^{to my credit}
No. 3855
London General Hospital,
WILDSWORTH, S. W. 19

Pte E Farrell

O.K. 1-0-0.

Royal A & S D

28-12-14 Regiment

Receipt to Lieut Pay Master
114

58 Victoria St.

O.K. # 1-0-0 M.R. 13/12/18
Receipt # 10329.

To Regimental pay-master
Sir

please advance me
the sum of one pound (£1) out of his

13/12/18

3555 pl. & arrears
Lieutenant Col. Repts.

[Handwritten signature]

Approved
W. K. M. J. W.
Capt. R. M. J.

RECEIVED
13 DEC 1918
MANSOURIAH S.M. 28
C. M. J. W.

Pg. 1.

3rd London gen
Hospital

Dear Sir

Will you kindly
allow me £1 from my
credit —

Yours Sincerely

3855 Pte E Target

Royal Newfld Regt

The B. Co. Ltd

HC



P.L.H.

O.K. £1-0-0 M.R. 19/12/18

Recd post No 10374

Now in the 3rd London Gen Hosp
Wandsworth SW 18

Yr Breast & Knee Miss to Scally.

28 Park Circus

Glasg

Dear Sir or Madam.

I am writing to see if you
are the People to communicate with the
Newfoundland Regt. as I have a friend
I would like to know if he is killed or
missing or wounded So if you would be
so kind to let me know this is his
Address Pte Eugene Farrell

38th Royal L. H. & Q. Regt

A Company B E France.

Oblige me by return off.

Yours

Yours faithfully

Miss Elsie Scally

NEWFOUNDLAND CONTINGENT, PAY & RECORDS OFFICE.	
Ref. Nos. VV	9058
Rec'd	22 OCT 1918
File No.	91
ETICS	
Li.	
Comd	
P & A.	23/10/18
R & C.	
B & E	
P.S.	

NEWFOUNDLAND CONTINGENT



To: Chief Paymaster & Officer i/c Records,
Newfoundland Contingent,
58, Victoria Street,
London, S.W. 1.

Please remit to

E. Farrell

the sum of 2 pounds 0 s. (£ 2)

on account of any balance that may be due to me..

Regtl. No. 3855 Rank Pte.

Name E. Farrell

10261

Approved, 28 NOV 1918

Officer I/C.,

3rd London Trench Hospital.

30/11/18

Dated at _____

27-11-1918

19563/378

P.S.D.

*C.R. 22-0-0
N.R. 28/11/18*

*affirmative (rebound)
W. M. M. M.
Capt. Farrell*

19565578

3rd London Gen.
Wandsworth.

29th November 8

3855 Pto

E. Farrell

2:0:0

August 11128
30/11/18

P.P.A.

Farrell, E

3855

Hay sept.

May 9th, 1919

#3855 Pte. Eugene Farrell,

Port aux Basques.

Dear Sir:-

Please find enclosed "Discharge Certificate
No. 2188."

Yours truly

Captain,
Paymaster & O.i/c Records

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 take a course to fit me
for a checker*

Eugene Larnell
Signature of Man.

Reg. No. *3865*.

W. E. Matthews,
Signature of the Vocational Officer or his Representative.

Place

S. John's.

Date

April 25 1919

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. _____ to his home at _____ and Release Certificate No. 2188 issued.

Date 25-4-19

J.A. Crawford
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 9-5-19

Date 25-4-19

H. Newsitt
Depot Paymaster.

Discharge approved for 25-4-19

Forwarded with following documents to O.C Discharge Depot.

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

Date 25-4-19

J.A. Crawford
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date APR 25 1919

R.H. Salt
O. C. Discharge Depot.

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

Date

The Royal Newfoundland Regiment

Class for Demobilization:—

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

Regimental No. *3855*

Name

Eugene Farrell

Address

Port aux Basques

Present Medical Category *E*

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

(b) Standing Medical Board

Members of Board

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

A. Peterson
Senior Medical Officer

Beckenden

M. O. Depot

ORIGINAL.

NEWFOUNDLAND CONTINGENT

N.F.P. /54.

No 305

To: The Hon. The Minister of Militia.
St. John's,
Newfoundland.

" " Company.

MEMORANDUM OF STOPPAGES/CREDITS on account of
Ration Allowance.

NOTE: - Charge under
Credit

Column

Regtl No.	Rank & Name		Particulars & Authority	AMOUNT				
				\$	¢	£	s	d
3855	Pte	Farrell E.	Undercredited Ration Allowance whilst on furlough as per Sr.3007.				6	3
3855	"	Farrell E.	Undercredited Ration Allowance whilst on furlough as per Sr.3046.				2	1
CHECKED <i>etc</i> 2-5-19							8	4

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

A.C. Minshall Maj.

7th May 1919. Chief Paymaster & O. i/c Records.

CERTIFIED that the above Stoppages/Credits have been made
in the Pay Book " " Co'y for Period / / to / /
Dated at _____

191

O.C. " " Company.
Battalion.

DUPLICATE

N.F.P./54.

NEWFOUNDLAND CONTINGENT

No 305

To: **The Hon. The Minister of Militia,
St. John's,
Newfoundland.**

" " Company.

MEMORANDUM OF STOPPAGES/CREDITS on account of
Ration Allowance.

NOTE: - Charge under
Credit

Column

Regtl No.	Rank & Name		Particulars & Authority	AMOUNT					
				£	s	d	£	s	d
3855	Pte	Farrell E.	Undercredited Ration Allowance whilst on furlough as per Sr.3007.						
3855	"	Farrell E.		Undercredited Ration Allowance whilst on furlough as per Sr.3046.				6	3
							2	1	
							8	4	

CHECKED.

e.H.

7-5-19

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

7th May

191 9. Chief Paymaster & O. i/c Records.

CERTIFIED that the above Stoppages/Credits have been made
in the Pay Book " " Co'y for Period / / to / /

Dated at _____

191

C.C. " " Company.
Battalion.

May 10th., 1919

#3855 Pte Eugene Farrell,
Port au Basques.

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 Gratitude."

Yours truly

Paymaster & C. I. / Records

Capt.

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 *Eugene*..... 2. Surname *Parvell*

3. Rank *Private*..... 4. Regtl. No. *3855*

5. Address in full to which future payments of gratuity are to be forwarded..... *Port aux Basques*

..... *Newfoundland*

6. Date of enlistment in the Regiment..... *17-6-17*

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

..... *not applicable*

8. Relationship of such dependents..... *not applicable*

9. Address in full of such dependents.....

..... *not applicable*

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *not applicable*

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

..... *not applicable*

12. Give total length of time which you served on active service, whether in Hfld. or Overseas..... *1 yr 10 mos (one year*

& ten months)..... *1 1/2*

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

not applicable

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

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?

not applicable

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

not applicable

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

No

25-4-19

(b) Reason for discharge

Demobilization

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service.

Yes

4-2-18 to 18-10-18

in Belgium & France

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: Eugene Larree

Place of Residence: Port aux Basques

Declared before me at:

This 2nd day of May 1919.....

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of affidavits. *Raymond A. Gagnier, at Law*

POST DISCHARGE PAY.					Net amount
Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.		due
.....	<i>James</i>	.....	<i>280.00</i>
.....
.....
Certified correct.				Registrar	<i>71</i>

WWE/EB

February 16th 1920.

1580

To:- Major Howley,
O. I. C. Pay & Records.
Mr. Chas. McGrath, Accountants
Mr. Geo. Pomeroy.

From:- Vocational Officer.

Edgar Farrell 3858.

This is to certify that this man's course comes to an end on February 28th. If an extension is in the meantime granted, I shall notify you.

W.W. Blackall.
Vocational Officer.

GGB/ME

February 21, 1920

To:- Major Howley
Mr. Pomeroy
Mr. McGrath
Mr. Egan.

From:- V. G.

E. Farrel 3855

This is to certify that the man named
in the margin has been granted onemonth's
extension to his course from February 20th;
this means that his course will terminate on
March 20th next.

C. C. Byrnes
Secretary
Civil Re-establishment Committee.

ORIGINAL

No. 3848 NEWFOUNDLAND CONTINGENT 1919/20

To: The Minister of Militia,
St. John's, Newfoundland. " " Company.

MEMORANDUM OF STOPPAGES/CREDITS on Account of

Paymaster's, Advances.

NOTE:- Charge under Column.

Credit Pay and Record Office London.

Regtl No.	Rank & Name		Particulars & Authority	AMOUNT				
				£	s	d		
✓ 3855	Pte.	Farrell E	Casual Payment P.&.R.O. 4//3//19 as per Vr.1509		1 0	0		
✓ 4342	"	Aitkens S	Casual Payment P.&.R.O. 10//3//19 as per Vr.1599		10 0			
					1 10	D		

CHECKED
WVE
11/3/19

Makes in
Pay Book
7-3-19/19

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

March 11th 1919. J.H. Marshall Cpt
Chief Paymaster & O. 1/c Records.

CERTIFIED that the above Stoppages/Credits have been made
in the Pay Book " " Co'y for Period / / to / /

Dated at _____

_____ 191 _____ O.C. " " Company,
_____ Battalion.

SEPARATION ALLOWANCE.

Claimant *Elizabeth Farrell* *Mother*
On account of *Eugene Farrell* No. *5822* Rank. *Pte.*

Decision *Refused*
During period of son's service
husband was not incapacitated

Robinson C.S.
107th Regt. Inf. Co.
1st Div. 1st Army
Date *March 1, 1920*

Instructions.....
.....
.....
.....

Allotment of *60* \$ per day payable to *John Farrell*
his *father* from *1/7/17* to *9/5/19*
Discontinued on account of *being discharged*
R. G. Summey

**ROYAL WIDOWS AND SOLDIERS
(Separation Allowance Branch)**

NOTICE

NOTICE

THIS STATUTORY DECLARATION is to be filled in correctly in every detail, and a complete reply must be given to each question.

Each statement is considered as being made on Oath, and the form is to be signed before a Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace and returned to:

**The Paymaster
Separation Allowance Branch
St. John's, Nfld.**

1. Name in full of soldier. Rank. Reg't or Unit. Reg't No.
Ernest Farrell Private *Reg't 2505* 3855
2. Age of soldier. Married or single.
 22 years Married
3. Name in full of mother. Age. Occupation. Permanent Address.
Elizabeth Farrell 47 ——— Port aux Basques
4. Give name of your husband. Age. Occupation. Where employed.
John Farrell 52 *Ironworker* Port. aux Basques
5. If your husband is not supporting you state the reason.
Husband dead
6. If your husband is a chronic invalid and totally incapacitated, state nature of malady. (A Medical Certificate must be enclosed with this document stating from what date husband has been totally incapacitated and for how long incapacity is likely to continue).
See No 5
7. If you are a widow, state date and place of your husband's death.
July 9th 1919 Labrador
8. Have you married since death of above mentioned husband?
No
9. Names of your other children. Address in full. Age. Occupation. Married or single.

<i>Harold</i>	<i>Port aux Basques</i>	<i>6</i>	—————	<i>Single</i>
<i>Luba</i>	<i>do</i>	<i>9</i>	—————	<i>Single</i>
<i>Ida</i>	<i>do</i>	<i>14</i>	—————	<i>Single</i>
<i>Jennie</i>	<i>do</i>	<i>20</i>	—————	<i>Married</i>
<i>Matthew</i>	<i>do</i>	<i>24</i>	—————	<i>Married</i>
10. State amount earned by (a) Yourself (b) Your husband.
Nothing
11. State amount and source of any other income.
None
12. State value of real property belonging to you and your husband.
None

13. State value of personal property belonging to you and your husband The house we live in only

14. If husband is dead state value of real and personal property left by him Only the house & furniture

15. Actual amount contributed by soldier during the year prior to his enlistment. Forty dollars per month

16. Was this amount contributed weekly or monthly Monthly

17. Did his amount include payment of son's board, etc. Yes

18. State your son's trade or occupation prior to enlistment. Trimmer

19. State amount of his wages per week \$15⁰⁰ per week (about)
He receives from Civil Establishment

20. State name and address of his last employer. Working for himself

21. State amount of monthly support from son since enlistment Eighteen dollars per month

22. State amount of allotment received by you from son since enlistment Eighteen dollars per month for two years

23. State from what date did you receive allotment About August 1917

24. Actual amount contributed by other children None

25. Are any of these children in the employ of you or your husband No

26. If not receiving support from other children, state cause. Explain fully None who might help me, are married. Other three children young

27. With whom are you residing at present? With family at Fort Ave. Resque

28. ~~Have you made a previous claim for Separation Allowance. If not, why? Give particulars.~~ Father only dead since July 1919 and did not bother before.

29. Are you already in receipt of Separation Allowance from any source? If so, how much?

No.

30. Are you already in receipt of any payment from any Patriotic Fund? If so, how much?

No.

31. Was the soldier at the time of his enlistment an employee of the H.M.A. Government?

No.

32. In what capacity and in what place?

—

33. Is he in receipt of a salary as such while serving in the Royal Newfoundland Regiment? If so, how much?

No.

I herewith make this solemn Declaration conscientiously believing the same to be true and knowing it to be of the same force and effect as if made under Oath, and in virtue of the Evidence Act.

Signature of Applicant Eugene Farrell

Place of Residence The Springdale St. Johns

Declared and subscribed before me F. C. Beckwith J.P. this tail day of January 1920

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace F. C. Beckwith J.P.

This application must be signed by two responsible parties one of whom must be a Clergyman, the other a representative of your local Patriotic Fund Committee, certifying that to the best of their knowledge after careful investigation the above statements are correct and the soldier first above mentioned is the sole support of the applicant.

Signature of ~~Magistrate~~ J. B. Oldford Magistrate

Signature of member of the Patriotic Fund Committee Robert Edwards Stipendiary Magistrate

Mar. 4, 1920

Mrs. Elizabeth Farrell,
Port au Basque.

Dear Madam:-

With reference to your application for Separation Allowance, I have been directed to inform you that same cannot be granted, because during the period of service of your son Eugene, your husband was alive, and presumably as capable of supporting his family as ever he was. Consequently you cannot be considered to have been dependent upon your son during his period of service.

Yours truly

Major

Paymaster.

May 10th, 1919

Capt. Howley,
O. I. C. Records.

Please pay to Mr. E. Farrell, No 3855, the sum of three dollars and thirty three cents in payment of allowance for part week ended this date and charge same to /Civil Re-establishment Committee.

\$3.33

ACCOUNT	<i>E. Farrell</i>
CHK NO.	<i>19747</i>
IND. LEDGER	
PAY LEDGER	
GEN. LEDGER	

E. W. Mitchell
Vocational Officer

E. Farrell

Oct 22nd 1919

Major Howley
O. I. C. Records

Please pay to E. Farrell, 3855
the sum of six dollars
in payment of arrears of allowance for eighteen days to Oct 18th
and charge same to Civil Re-establishment Committee

\$6.00

Pension

\$20.00

J. C. Hunter

Major,
for Vocational Officer

E. Farrell

ACCOUNT	_____
CH. NO. <i>16179</i>	INITIALS <i>CBH</i>
IND. LEDGER	INITIALS _____
PAY LEDGER	INITIALS _____
GEN. LEDGER	INITIALS _____

Civil Re-Establishment Committee.
(DEPARTMENT OF MILITIA.)

FORM R
16-12-19-2000

April 17th 1920

MAJOR HOWLEY

Officer in Charge of Pay and Records.

Please pay to **E. Farrell, 3855**
the sum of **eight dollars and seventeen cents**
in payment of allowance for week ended this date
in connection with re-education.

\$8.17

Pension Monthly

\$25.00

Wages Monthly

J. C. ...
W. M. McNeill

ACCOUNT	35187	INITIALS	
CHK. NO.		INITIALS	
IMP. LEDGER		INITIALS	
PAY LEDGER		INITIALS	
GEN. LEDGER		INITIALS	

VOCATIONAL OFFICER.

E. Farrell

Civil Re-Establishment Committee.
(DEPARTMENT OF MILITIA.)

FORM R
16-12-19-2000

April 13th 1920

MAJOR HOWLEY

Officer in Charge of Pay and Records.

Please pay to **E. Farrell, 3855**
the sum of **eight dollars and seventeen cents**
in payment of allowance for week ended this date
in connection with re-education.

\$8.17

Pension Monthly

\$25.00

Wages Monthly

ACCOUNT	34652
GEN LDR	INITIALS
PAY LEDGER	INITIALS
GEN LEDGER	INITIALS

J. C. A.
Howley
VOCATIONAL OFFICER.

E. Farrell

May 3rd 1920

Major Howley
O. I. C. Records

Please pay to E. Farrell, 3855
the sum of thirty five dollars
in payment ofm P. & A. Bonus
and charge same to Civil Re-establishment Committee

\$35.00

Pension

\$25.00

A. C. J.
W. W. Meckell.

ACCOUNT	
CHK. NO.	36575
INITIALS	<i>[Signature]</i>
INV. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

Vocational Officer

E. Farrell

MAY 17 1919

Capt. Howley,
O. I. C. Records.

Please pay to E. Farrell, No 3855
the sum of eleven dollars and sixty six cents
in payment of allowance for week ended this date
in connection with re-education.

\$11.66

Pension Nil

W. H. Bell
Vocational Officer.

E. Farrell

MAY 24 1919

Capt. Howley,
O. I. C. Records.

Please pay to E. Farrell, No 3855
the sum of **eleven dollars and sixty six cents**
in payment of allowance for week ended this date
in connection with re-education.

\$11.66

Pension Nil

W. H. Marshall
Vocational Officer

Eugene Farrell

MAY 31 1919

Capt. Howley,
O. I. C. Records.

Please pay to E. Farrell, No 3855
the sum of eleven dollars and sixty six cents
in payment of allowance for week ended this date
in connection with re-education.

\$11.66

Pension Nil

B. W. B. K. Hall.
Vocational Officer

E. Farrell

ST. JOHN'S, APR 25 1919

Royal Newfoundland Regiment.

Billeting Account,

To Pte. E. Farrell

Billeting Soldiers as undermentioned

from Mar 24th /19 to Apr 17th /19

3855. Pte. E. Farrell 26 00

B 8 m

ACCOUNT

NO

16943 EW

IND LEDGER

INITIALS

REV LEDGER

INITIALS

GEN LEDGER

INITIALS

Certified correct for \$ 26.00

R. J. Eugene

M. L. Stone
Billeting Officer.

Casualty Form—Active Service.

Regiment or Corps Royal Newfoundland

A.

Rank Plt Surname Truell Christian Name Eugene

Religion Presb Age on Enlistment 19 years 7 months

Enlisted (a) 12-1-17 Terms of Service (a) Duration Service reckons from (a) 12-6-17

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

Extended { } Re-engaged { } Qualification (b)
or Corps Trade and Rate

Occupation Fosterman Truell Eugene Signature of Officer.



Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.21, 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.21, Army Form A.36, or other official documents.
Date	From whom received				
			Embarked ...	3 FEB 1918	
			Disembarked...	6 FEB 1918	
		Wounded in Action <u>4/10/18</u> Joined Battalion		15 FEB 1918	
		<u>2 Amusees Admitted Snow White Mex</u>	Lined.	<u>8/10/18</u>	<u>Eno 7817</u>
		<u>55 Gen M.</u>	<u>Boulogne</u>	<u>13/10/18</u>	<u>NA 30273</u>
		<u>Plt Capt. de Bannock & Englands</u>	<u>France</u>	<u>19/10/18</u>	<u>W 3087</u>
			<u>For Officer i/c No 1 Infantry Section</u>		
			<u>3rd Echelon, General Headquarters.</u>		

JSM

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) Signaller, Sheering-Smith, &c.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 3.F.5.5 Rank 06 Name Finnell Eugene
 Intended place of residence God: Ave. Berger St. George
 2. Occupation Fisherman
 Classification of soldier B Medical Category E

3. The above named man is discharged in consequence of.....

DEMobilIZATION.

Eligible for War Service Gratuity

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

Place ST. JOHN'S
 Date APR 25 1919
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date ST. JOHN'S
APR 25 1919
 Signature of soldier Eugene Finnell
 Signature of witness A. M. Johnston

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 and Date ST. JOHN'S
24-4-19
 Signature of soldier James O'Sullivan
 Signature of witness PEI

STATEMENT OF SERVICE

7. Enlisted for service 12-6-17 No of days on Military Service 697
 Discharged from service 25-4-19 plus 14 days

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 APR 25 1919
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place St. Johns, Nfld
 Date May 9/1919
 Officer i/c Records
 The Royal Newfoundland Regiment

A.F. 22079/1388



Department of Militia, Newfoundland
Medical Department

Medical Report on an Invalid

NOTES :

- (a) This report is solely concerned with Pensions.
- (b) A single copy only is required.
- (c) "Aggravated" being now a technical term, carrying right to pension, discrimination in its use is essential.
- (d) Be as brief as possible compatible with lucidity.
- (e) Avoid dubiety—"perhaps," "possibly," "might" and the like.
- (f) Only sufficient clinical data need be given to establish the degree of disability and assist the Board in arriving at a decision.

STATEMENT OF CASE

Station *St Johns*

Date *April 27th 1919*

1. Unit *Royal Newfoundland*
2. Regimental No. *3855*
3. Rank *plc*
4. Name *Farrill, E.*
5. Age last birthday *31*
6. Enlisted on *June 17/17*
at *St Johns*
7. Former trade or occupation *Fisherman*
8. Disability *9. S.W. leg. wrist*

9. History *wounded at the Oct. 1918. Ulcer & radius fract. Conf. in Hosp. 4 mos. Discharged from Hosp. 3 days before embarking for Sfld. left on May 15/19*

10. What is his present condition?

(This is the important question. Be brief—the clearer the case the less need be written. Read note f above).

Wrist very deformed. Complete
ankylosed. Scar on ^{front of} surface
2. in long I. discharging sinuses
rec. fingers. almost immobile.
Body rather thin. Does not
Complain of any thing.
Heart beats 84. a little weak
otherwise normal
Lungs normal.

11. Was sanatorium advised and refused?
operation

No

12. Do you recommend discharge as permanently unfit?

Yes

Signature

[Handwritten Signature]

Rank or Qualification

Capt.

Remarks if any by Officer in Charge Hospital.

Place

Signature

Date

Rank

Opinion of the Medical Board

In para. 13, the President should write "may" or "cannot" at x
Erase inapplicable words

13. For pension purposes, the disability x may be considered as aggravated by due to

(a) Service during this war. (b) ~~Climate.~~ (c) ~~Ordinary Military Service.~~
Remarks if any:—

14. Does the Board concur in preceding report? (see Sect. 10). If not give differing opinion and additional findings.

Yes. Left hand quite useless. Scaly discolored & deformed. Still under treatment

15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market?

(b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a full livelihood in the general labor market lessened by that portion of his disability to or incurred during service?

(State in percentage.)

60% 6 months of hospital treatment

Remarks if any:—

16. Is the disability permanent?

17. Has the disability been aggravated by (a) Intemperance (b) Misconduct

18. The refusal of operation sanatorium is:— (a) Reasonable (b) Unreasonable

Remarks if any:—

19. If fit subject for Hospital do you recommend admittance to General Hospital
Naval and Military Con-
valescent Hospital,
Jensen Tuberculosis Camp.

20. We recommend discharge from retention in the Army

Remarks if any:—

[Signature]
.....
President

Signatures..... *[Signature]*
..... *[Signature]*

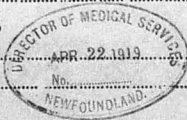
Place..... *[Signature]*

Date..... *Apr 22/19*

APPROVED

Station.....

Date.....



[Signature]
.....
Administrative Medical Officer. Major

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

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

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

1. Unit and Corps... *Royal Newfoundland* } former Trade } *Fisherman*
 2. Regtl. No. *855* 3. Rank... *Plt* 7a. If the soldier claims previous service in Army, he should state—
 4. Name *FARRELL B.* (a) Former Regts. or Corps ;
 (Surname) *21* (Christian Names) with Regtl. Nos.
 5. Age last birthday...
 6. Posted for duty on *4-8-17* at *St John's Newfoundland*
 in category (or grade) *A1*...
 8. If the disability is an injury was it caused
 (a) in action *Yes* (b) on field service *Yes*
 (c) on duty *Yes* (d) off duty? *No*
 9. If a Court of Inquiry was held on an injury state:—
 (a) When
 (b) Where *N.A.*
 (c) Opinion of Court
 (d) Particulars of Pension or Gratuity (if any)

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

Statement of Case.

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

- Left forearm*
 11. Date of origin of disability. *1st Oct. 1918.*
 12. Place of origin of disability. *France*
 13. Give concisely the essential facts of the history of the disability in so far as it is reported in the Medical History Sheet bearing on the case and in other relevant official documents.
Wounded France L.S.W. left forearm. Causing compound fracture radial artery and injury to nerves and tendons. Wound not completely healed.

14. State whether the disabilities are
- | | | | | | |
|--|-------|---------------------|-------|-------------------|-------|
| (i.) Service during the present war | .. .. | (a) attributable to | .. .. | (b) aggravated by | .. .. |
| (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? *M.A.*

In all cases such as "bad" 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? *Large irregular scar extending over dorsal surface left forearm and lower third is attached to underlying tissues. also irregular on dorsal surface of arm. 200 small scars about centre of palm of hand, and one on ulnar aspect of hand as result of operation scars not painted on.*
- (A note should be made as to what extent 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? *of operation scars not painted on.*
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? *There is marked swelling over whole dorsal surface of hand and lower third of forearm. Several ill. movements*
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? *of extension limited. There is loss of operation in thumb, digit and middle finger. also loss of hand grip. fragments of protraction & supination etc.*

20. Do you recommend—
- (a) Discharge as permanently unfit? *Repetition. Discharged as permanently unfit*
- (b) Change to United Kingdom? *Wolmer Camp*
- Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Station *Wolmer Camp*

Date *Nov. 13. 1914*

Medical Officer in charge of case.

* Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

OPINION OF THE MEDICAL BOARD.

NOTES.—(1) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

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

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

21. Give diagnosis and particulars of:—

- (a) Any disability claimed or discovered.
- (b) The present condition thereof.

E.S.W. L. Jorram
Damage to median nerve. Nerve left.

22. State whether the disabilities are:—

- | | | | | | |
|--|-------|---------------------|-------|-------------------|-------|
| (i.) Service during the present war | .. .. | (a) Attributable to | .. .. | (b) Aggravated by | .. .. |
| (ii.) Previous active service | .. .. |  |  |  |  |
| (iii.) Climate in pre-war service | .. .. |  |  |  |  |
| (iv.) Ordinary military service before the war | .. .. |  |  |  |  |
| (v.) Serious negligence or misconduct on the part of the soldier | .. .. |  |  |  |  |
- Give details:

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

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

- (a) How long is the present degree of disability likely to last? *no*
- (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a. *6 mo.*

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

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

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

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only? Yes
- OR
- (b) In what other grade do the Board place him? -
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)? -

Opinion of Military Member in case of disagreement.

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

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

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

29. Does the soldier require:—

- (a) An attendant for his journey home? | No
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures:—

Station WANDSWORTH

Date 1-3-19

W. W. Yates, Major (President or Chairman)
W. B. Carleton, Esq. (Members)

Discharge Approved under (LONDON GENERAL HOSPITAL) King's Regulations.

Station WANDSWORTH

Date 3-3-19

J. E. Donneton
 Officer in charge, Central Hospital.

Only applicable in cases of Patients in Hospitals

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

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

Station

Date

O.C. Discharge Centre.

Descriptive Return of a Soldier medically boarded before Discharge or Transfer to the Reserve.

INSTRUCTIONS.—Parts A, and D, of this Army Form are to be completed for every soldier prior to his being medically boarded with a view to discharge or transfer to Class W, W(T), E, or E(T), of the Reserve, as follows:—

(a) By the O.C. unit prior to the soldier being sent to the Discharge Centre.

(b) By the Officer in Charge Hospital, when the soldier is a patient in hospital, prior to his being brought before an Invaliding Board.

It is most important that all particulars should be correctly filled in, and that the soldier should be given a full opportunity of examining the Army Form before he signs the Certificate below, so, if awarded a pension, his subsequent identification may depend on the correctness of these entries. The "rank," "station," and "date" following the soldier's signature are to be in his own handwriting.

This Army Form is to be forwarded with the proceedings of the Medical Board to the Officer in Charge Records, and Parts B and C, completed by that officer before forwarding the Form with the remainder of the soldier's documents, to the Controller, Ministry of Pensions, Barton Court, King's Road, London, S.W.3.

PART Soldier's Name Farrell Eugene
(Surname) (Christian names in full)

A. Unit from which discharged Royal Newfoundland Regiment
 Regimental Number 3855 Rank on discharge Private Age on discharge 21
 Married, widower with children, or single Single
 Occupation before enlistment Fisherman
 Special qualifications (if any) for employment in civil life } Cannot say, owing to wounds
 Nature and locality of employment desired Newfoundland
 Full postal address to which proceeding on discharge } Port au Boeuf, Newfoundland
 Name of Approved Society (if any) Nil

Part A of Army Form D. 400 is to be filled in and W. 463A of the Reserve Form D. 400 is to be filled in at the same time by using carbon paper.

Parts B, and C, are to be completed by the Controller of Pensions.

PART

	Regiment	Years	Days	All services abroad, with Stations	Years	Days
B. Period of service, and in what Corps				India South Africa		
Disallowed						
Service towards pension						
C. Number of G.C. badges						
Wounds and actions in which received						

PART

D. Where born (parish, town and county), and date Newfoundland
 Colour of hair on discharge Light Brown Colour of eyes Brown Complexion Flesh
 Christian name of father John
 Christian name of mother Elsabeth

NOTE.—Army Forms D. 400 and W. 463A and B are issued in sets in pad form for use with carbon paper in cases where the soldier is a patient in hospital. Army Forms D. 400 and W. 463A are similarly issued in sets for use in cases where the soldier is not a patient in hospital. The Statements on Parts A, and D, of Army Form D. 400 and on Part A, of Army Form W. 463A, and B are to be completed by the Officer in Charge Hospital before a soldier is brought before an Invaliding Board. The Statements on Parts A, and B, of Army Form D. 400 and on Part A, of Army Form W. 463A are to be completed by the O.C. unit before the despatch of a soldier to the Discharge Centre.

Wife's maiden name in full
Date and place of marriage

~~Wife's maiden name in full
Date and place of marriage~~

Christian names
of children and
dates of birth

~~N/A~~

Date and place of 1st enlistment St John's Newfoundland

Figure on discharge Slight Height 5' 5"

Descriptive and other distinguishing marks 2 Scar & 1 minor flesh wound

I certify that I am the soldier referred to and that all the particulars contained in Parts A. and D. above are, to the best of my knowledge, correct.

(Signature in full) Eugene Leavelle

Station Handsworth Rank Private Date 11/3/19

I certify that the above-named soldier signed the foregoing declaration in my presence.

W. E. W. [Signature] (Rank) Officer i/c Hospital

THE CONTROLLER,

MINISTRY OF PENSIONS,
BURTON COURT,
1, KING'S ROAD,
LONDON, S.W.3.

The soldier named overleaf was

Discharged under para. _____ King's Regulations

or

Transferred to Class * _____ of the Reserve.

Strike out,
whichever
is applicable.

Military character

I certify that the details of service overleaf and other particulars are, to the best of my knowledge, correct.

Station _____ Officer i/c Records.

Date _____ 191

Insert P., or P.(T).

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

MEDICAL HISTORY

Surname Larrell OF Christian Name James



Table I.—GENERAL TABLE.

Birthplace:—Parish Port Aux Basques County

		SPECIAL RESERVE.		REGULAR ARMY.	
Examined	on <u>12</u> day of <u>June</u> 191 <u>7</u>	on	day of	191	
	at <u>Headquarters</u>	at			
Declared Age	<u>19</u> years <u>7</u> months <u>days</u>		years		days
Trade or Occupation	<u>Fisherman</u>				
Height	<u>6</u> feet <u>7</u> inches		feet		inches
Weight	<u>116</u> lbs.		lbs.		lbs.
Chest Measurement	Girth when fully expanded... <u>34 1/2</u> inches		inches		inches
	Range of Expansion... <u>4 1/2</u> inches		inches		inches
Physical Development					
Vaccination Marks	Right	Left	Right	Left	
	—	<u>1 Scar</u>			
When Vaccinated					
Vision	R.E.—V= <u>4/12</u>		R.E.—V=		
	L.E.—V= <u>4/12</u>		L.E.—V=		
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)		
(b) Slight defects but not sufficient to cause rejection	(b)		(b)		
Approved by (Signature)	<u>James Paterson</u>				
(Rank)	<u>Major</u>		Medical Officer.		Medical Officer.
Enlisted	at <u>St John's</u>	at			
	on <u>12</u> day of <u>June</u> 191 <u>7</u>	on	day of	191	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.	
Transferred to	<u>St John's 3865</u>				
	ROYAL NEWFOUNDLAND REGIMENT.				
Became non-effective by	on	day of	191	on	day of
(Signature)	<u>James Larrell</u>				
(Rank)	<u>Records</u>				

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3rd London Gen Hosp Wandsworth	19	10	18	9	1	19	flw left forearm, comp. bon. fcd. transp. confusio to Radical injury of left forearm	872	Wound of left forearm, on olecranon, greatly improved under massage. Saline dressings.	S.M.W. M.D., Capt RAMEY
3rd London General Hospital, WANDSWORTH, S.W.				10	2	19	G.S.H. L. Forearm		Board held - see verbatim Disability: G.S.H. L. Forearm Damage to tendon N. hum. stiff Cause - G.S.H. on Active Service Disability: 30%	H. W. M. D. Capt RAMEY 3rd London General WANDSWORTH, S.W.

MEDICAL REPORT ON AN INVALID.

NOTE.—This Form is only applicable to men discharged from Hospitals; and when filled in is to be attached to A.F. 8972A and forwarded to the CONTROLLER, MINISTRY OF PENSIONS, BURTON COURT, KING'S ROAD, LONDON, S.W. 3.

Name Farrell Eugene Regtl. No. 3855 Rank Pte. Unit and Corps Royal Newfoundland
(Surname) (Christian Name) Port aux Basques Newfoundland

1. State the nature of the disability or disabilities from which this man is suffering..

E.S.W. d. Dream

2. What is the present condition of such disability or disabilities?

*wound practically healed
use of limb restored two yrs.*

3. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic treatment) is desirable in a:—

NOTE.—Treatment shall only be recommended for the disability for which the man was discharged from the Navy or Army or Air Force during the present war. Provided that if the existing disability has happened to be due to or aggravated by service in the present war, treatment may be recommended for an incapacity manifestly certified as in consequence of that disability.

- (a) Sanatorium or other institution for tuberculosis ..
 (b) Hospital, and if so, what class? ..
 (c) Convalescent Home ..
 (d) Asylum, or ..
 (e) Other institution ..
 (f) Is out-patient hospital treatment or treatment at home recommended. If so, which?

Yes.

4. With reference to Army Council Instructions, is any surgical appliance recommended?

No

5. Is the invalid willing to accept the offer of treatment or not? If not, state the reason given for the refusal, and say whether you consider the refusal reasonable

✓

Signature *W. H. G. ... Major* President.

Station *2nd Lond. Gen. Hospital* *Chas. B. Canby* *Col.* Members.

Date *1-3-19*

Approved.

Station **2nd LONDON GENERAL HOSPITAL**
WANDSWORTH

Date *3-3-19*

A. E. ...
Officer in charge, Central Hospital.

Col. ...
P.T.O.

Reg. No. 5855 Rank Pte Name Farrell E.

Attested Address Port au Basque

Allotment Allottee

Date of Allotment Returned from Overseas 24-5-19

Returned on S.S. Train Cause Discharge

22.4.19 Lic. Dis- from the Army & requires treatment

APR 24 1919 PASSED TO DEMOBILIZATION OFFICER

25.4.19. DISCHARGE APPROVED ON DEMOBILISATION.



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 *Eugene Farrell*

Regiment from which discharged *Royal Newfoundland*

Regimental number *3855*

Intended address *Port aux Basques*

Height on discharge *5* Feet *6*

Color of hair on discharge *Dark Brown*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks *Scar left hip. Left arm*

Figure on discharge *medium*

Christian name of Father *John*

Christian name of Mother *Elizabeth*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Port aux Basques, October 11th, 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) *Eugene Farrell*

Pf
(Rank)

Station *ST. JOHN'S.*

Date *21-11-19*

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



STATEMENT BY A SOLDIER CONCERNING HIS OWN CASE.

NOTE.—This Form is to be filled in by every soldier prior to the compilation of Army Form B 179A, whether a patient in hospital or not, and attached thereto. The questions are to be answered in the soldier's own words, and the Form is to be signed by him and the signature witnessed. In the event of the soldier being unable to write he should affix his mark, such act being witnessed.

Regimental No. 3863Rank PteName Farrell Eugene

(Surname)

(Christian Names)

Unit and Corps

} 1st Royal Tank Regt

Note.—Before answering the questions below, the soldier is to note that

(a) The statements made by him will be checked by official records.

(b) In answering Question 2 any special matters which in his opinion caused any unfitness from which he may be suffering or which aggravated it should be clearly stated.

If the soldier is unable to read, the above notes are to be read to him by an officer.

1. (a) In what countries have you served during this war, and for what periods?

Newfoundland 6 weeksScotland 5 monthsEngland 5 monthsFrance 9 months

(b) In what capacity?

heavy gunner. (Pte)
(1st class)

2. If you are suffering from any disease, wound, or injury, state what it is, the date upon which it started, and what, in your opinion, was the cause of it.

(If more space is required a sheet of foolscap should be used, and firmly attached to this form.)

left wrist completely
disabled + hand useless
wounded 4th October 1918
by shrapnel.

3. Give the names of any hospitals where you have been treated for the above disease, wound or injury during the present war.

3rd Long Gen Hospital
+ in hospitals in France
names forgotten

4. Did you suffer from the disease or injury mentioned in above answer to Question 2, or anything like it, before joining the Army? If so, give details and dates.

No.

5. Give the names (and addresses if you know them) of any hospitals you were in or doctors who attended you before you joined the Army.

Not known.

6. Give the name of your National Health Approved Society, and (if possible) your Membership Number.

Orange Lodge
Post Ansbacque

7. What is the name and address of your last employer before joining the Army?

Fisherman worked
for myself.

8. (a) What was your occupation before joining the Army?

Fisherman

- (b) What was your trade before joining the Army?

Fisherman

(To be checked by A.F.B.64 or A.F.B.103.)

The above statement has been read over to me; I agree to it, and have nothing further to add.

Station 3rd Long Gen Hospital Signed (Soldier) C. Larrell

Date 22/2/19 Signed G. Walker

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121.
20.

Regiment of 1st Newfoundland.

Number of Sheets First

Signature of O. C. Company [Signature]

Regimental Number and Name		Enlistment		Trade
No.	<u>3855 Farrell Eugene</u>	Age on	19 years 7 months	<u>Fisherman</u>
Joined	Date	Place and Date of Enlistment	<u>St Johns 12-6-17</u>	Religion
Joined	Date			<u>S. A.</u>
Joined	Date	Period of	with Colours 342 years. with Reserve 365 years.	Place of Birth
Joined	Date			

Good Conduct Badges, Service pay or proficiency pay

Place	Date of Offence	Rank	Cause of Discharge	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS



Demobilized St Johns 9/19

To be carried over

Army Form B. 121.

Fold Here

MAJESTY'S SERVICE

Charge of Records,

His Royal High Regt.,

Dep't of Militia,

St. John's Hld.

Fold Here



July 8th. 1921. 1917.

The accompanying King's Certificate, on his d' (No. 1295), is forwarded herewith to

Eugene Farrell

in respect of his service as No. 3855 Rank Pvte.

Name Eugene Farrell, Corps Royal Field Regt.

Receipt of the same should be acknowledged hereon.

Received July 14th 1921

Signature Eugene Farrell

Address Port aux Basques

Charge,

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



Aug. 29th 1921.

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

3855 Pte. E. Farrell

in respect of his service as No. 3855 Rank Pte.

Name E. Farrell Royal Nfld. Regt.
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received on Septh 8 1921

Signature E. Farrell

Date Septh 8 1921

Address Eugene Farrell
Port aux Basques [P.T.O.]

13855

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 38111 Rank H Name Parrell, Eugene
 Date of Enlistment 12.6.17 Address Post Office, St. Georges
 Occupation fisherman Classification for Discharge B Medical Category E
 Recommendation S.M.B. Unsoundly unfit Disability Rating 60% bonus + treatment
 Passed to Demobilization Officer with following documents:—

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

Date 24.4.19 H. Mins. Lt.
 O. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am not in a position to resume civilian occupation. of Parrell

Particulars passed to Vocational Officer for information and action.

Date 24-4-19 Chubbouston St.

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable. \$100.00
- (b) Clothing Supplied Chubbouston St.

Date 25.4.19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

8

The above named has been provided with Travelling Warrant No. to his home
at and Release Certificate No. 2150 issued.

Date 25-4-19
Demobilization Officer *J.A. Snowling*

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 7-5-19

Date 25-4-19
Depot Paymaster *J.A. Snowling*

Discharge approved for 25-4-19

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.....	1	<i>Final</i>
F 178a.....	D 400A.....	B 1915.....	do 2nd.....	" 3.....	2	
B 179.....	D 400B.....	Form L.....	do 3rd.....	" 4.....		
B 179a.....	D 400C.....	Form K.....	do 4th.....	" 5.....		
B 179b.....	B 103.....	ME 2.....		" 6.....		
B 179c.....	B 120.....	M 93.....				

Date 25-4-19
Demobilization Officer *J.A. Snowling*

APPROVED.

Documents as above forwarded to:-

Officer in Records,
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date APR 25 1919
O. C. Discharge Depot *R. S. ...*

Received the above noted documents from O. C. Discharge Depot. *A. H. ...*

Date 1/5/19
for officer in Records



THE ROYAL NEWFOUNDLAND REGIMENT
DISCHARGE DEPOT

ST. JOHN'S, NEWFOUNDLAND.

April 24th, 1919

From Officer Comanding,
Discharge Depot

Office of D.H.S.
To Board of Pension Commissioners,
Militia Bldg

5855 Pte. E. Farrell

Above noted man was before the Standing Medical Board
on 22-4-19 and was recommended for discharge as perman-
ently unfit and requires Hospital treatment.

His discharge on demobilization has been approved by the
Officer Commanding, effective from and I am send-
ing him herewith for your attention and necessary action please.

Copy of his Medical Board will be forwarded you in due
course.

Adjutant
Discharge Depot

Copy to Bd. of Pension Commissioners.



NEWFOUNDLAND POSTAL TELEGRAPHS

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 48 Sent by [Signature] Rec'd by _____ Check [Signature] No. _____

Place from Channel
To Adjutant Royal [Signature]
[Signature]



Delayed reaching home
Please grant Extension
leave to 21 st

3855 Farrel

Entered to April 1st
Nov 1919 [Signature]



Veterans
Affairs

Affaires des
anciens combattants

DEATH NOTIFICATION — AVIS DE DÉCÈS

FILE NO — DOSSIER N°

1814177

NAME — NOM

Favrell Eugene

SERVICE NO — MATRICULE

3855 Royal Nfld
Regt. OK

DATE OF DEATH — DATE DU DÉCÈS

13/3/83

CPC NO — CCP N°

2600286

WVA — AAC N°

PLACE OF DEATH — ENDROIT DU DÉCÈS

St. John Regional Hosp. St. John N.B.

INFORMATION RECEIVED FROM — INFORMATION RECUE DE

DUA93 St. John N.B.

Y.S.

FOR RECORDS MANAGER — POUR LE GESTIONNAIRE DE POSSIERS

2/6/83

DATE