

2831

2831

ROYAL NEWFOUNDLAND REGT.

Decreed 3-6-33

1914-1918



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 2831 Name Clarence F. Fullen Corps

Questions to be put to the Recruit before Enlistment.

1. What is your name? Clarence John Fullen
2. What is your full Address? St. Johns
3. Are you a British Subject? Yes
4. What is your age? 22 Years 1 Months
5. What is your Trade or Calling? Tailor
6. Are you Married? No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? No
8. Are you willing to be vaccinated or re-vaccinated? Yes
9. Are you willing to be enlisted for General Service? Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? No
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? Yes

I Clarence F. Fullen 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.

Clarence John Fullen SIGNATURE OF RECRUIT.

W. H. Field Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I Clarence F. Fullen 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. Johns on this 10th day of June 1915

Charles A. [Signature] Signature of Attesting Officer

†CERTIFICATE OF APPROVING OFFICER.

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

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

Date 1915 } Approving Officer.
Place }

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name James John Sullivan
 Apparent age 21 years 7 months. Height 5 feet 8 inches
 Chest Measurement { Girth when fully expanded 39 $\frac{1}{2}$ inches
 Range of expansion 3 $\frac{1}{4}$ inches
 Distinctive marks.....



INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Philip Sullivan, Burges
 | Relationship Father.

Particulars as to Marriage

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

(a)	(b)	(c)	(d)

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from _____									
Joined at _____ on _____									
Total Service forfeited as above.....									

Total Service towards Engagement to _____ [date of discharge] years _____ days
 " " " Pension " _____ [" "] " " " "



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 2831 Name Clarence Fullen Corps

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? Clarence John Fullen
- 2. What is your full Address? B. Burgeo
- 3. Are you a British Subject? Yes
- 4. What is your age? 21 Years 7 Months
- 5. What is your Trade or Calling? Tailor
- 6. Are you Married? No
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? No
- 8. Are you willing to be vaccinated or re-vaccinated? Yes
- 9. Are you willing to be enlisted for General Service? 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, Clarence Fullen 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.

Clarence John Fullen SIGNATURE OF RECRUIT.
H. P. Field Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Clarence Fullen 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 Burgeo

on this 10th day of June 1916
Signature of Attesting Officer Chas. A. Cape Capt.

†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.....191..... } Approving Officer.
Place..... }

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name *Thomas John P. Sullivan*
 Apparent age *21* years *7* months. Height *5* feet *8* inches
 Chest Measurement { Girth when fully expanded *39 1/2* inches
 Range of expansion *3 1/4* inches
 Distinctive marks.....

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin *Philip Sullivan, Bergen*
 | Relationship *Father*

Particulars as to Marriage

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

(a)	(b)	(c)	(d)

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <i>1-6-16</i>									
Joined at <i>Albany</i> on <i>June 1st 16</i>									
									<i>Cum gratias P. Sullivan</i>
									<i>Cum gratias for</i>
									<i>James went 11.11.16</i>
									<i>Admitted 21 Oct to 'Gas' 27.2.17</i>
									<i>Discharged to duty with unit 13.3.17</i>
									<i>Admitted King's Hosp. 27.4.17</i>
									<i>Admitted King's Hosp. 27.4.17</i>
									<i>Noted to Dept 18.5.17</i>
									<i>Discharged medically unfit</i>
									<i>28.8.17</i>
Total Service forfeited as above.....									
Total Service towards Engagement to <i>28-8-17</i> (date of discharge) <i>1</i> years <i>89</i> days									
" " " Pension " " " " " " " "									



This Form is to be used in connection with Pamph. M. E. (1)
N. F. 1915

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of *Clarence Filleul*
aged *21* conducted at *6 L B*
Date: *May 15/16* Recruiting Officer:

NO OF TEST FINDING

- 1 *no*
- 2 *no*
- 3 *no*
- 4 *no*
- 5 *no*
- 6 *no*
- 7 *yes*
- 8 *yes*
- 9 *no - no*
- 10 *✓*
- 11 *✓*
- 12 *✓*
- 13 *✓*
- 14 *✓*
- 15 *✓*
- 16 *✓*
- 17 *✓*
- 18 *✓*
- 19 *6/18 Both*
- 20 *✓*
- 21 *✓*
- 22 *✓*
- 23 *✓*
- 24 *✓*
- 25 *✓*
- 26 *✓*
- 27 *✓*
- 28 *✓*
- 29 *✓*
- 30 *✓*
- 31 *✓*
- 32 *✓*

28 3'

33 *yes 14 years ago one ear left on -*
34 *5.9*
35 *146*
36 *36 1/2 39 1/4*
37 *\$ 200 - 00 per year*
38 *Parents Mr Philip Filleul Burgeo*
39 *none*

J. J. Signature of Medical Examiner: *Geo Burden Lewis*

Fillard, b.j.

C.R. 2830

P.Y.R.O.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No.	2831	Army Rank	Private
Name	Clarence John Filleul.		
<small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>			
Corps	First Newfoundland Regiment		
<small>-Battalion, Battery, Company, Depot, &c. (If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)</small>			
Date of discharge	August 28 th 1917.		
Place of discharge	St John's, Nfld.		
1. Description at the time of discharge.			
Age	22 years	9 months	Descriptive marks.
Height	5 feet	8 1/2 inches	
Chest measurement	girth when fully expanded _____ ins.		
	range of expansion _____ ins.		
Complexion	fair		
Eyes	brown		
Hair	dark		
Trade	Sailor		
Intended place of residence	Sturgeons, Nfld.		
<small>(To be given as fully as practicable)</small>			
<small>(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)</small>			
2. The above-named man is discharged in consequence of <u>being no longer physically fit for war service</u>			
<small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small>			
3. Military character:—			
4. Character awarded in accordance with King's Regulations:—			
<div style="display: flex; justify-content: space-between;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-size: small;">To be filled in on the soldier quitting the Colours.</div> <div style="border-bottom: 1px solid black; width: 90%;"></div> </div>			
<small>Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.</small>			
			Initials of Commanding Officer.
Army Form B. 2088 has been issued to*			

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class

6. Campaigns, Medals and Decorations

Certificate of education

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

(Place) _____

(Date) _____

Commanding _____ Bttn. _____ Regiment.

8. Certificate to be signed by the soldier on discharge.

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) A. J. Johns

(Date) 29/8/17

George T. Elliott (Signature of Soldier.)

G. J. Jones (Signature of Witness.)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. Additional certificate in the case of a soldier who takes his discharge at his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier.)

10. Statement of service.

Service towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service " " _____ (the date of confirmation of discharge) " " "

Total " " "

11. Confirmation of discharge.

The discharge of the above-named man is hereby confirmed for _____ (date)

(Place) _____

(Date) _____

Signature _____

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

No reservations.
Glaunce Fittell

UK 50 Victoria St

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

MEDICAL HISTORY

OF

Surname Felleue

Christian Name Blairance



Table I.—GENERAL TABLE.

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY	
	Right	Left	Right	Left
Examined	on 31 day of May 1916 at St. John's Nfld.		on _____ day of _____ 191____ at _____	
Declared Age	21 years 7 ^{mo} days		_____ year _____ days	
Trade or Occupation	Tailor			
Height	5 feet 8 inches		_____ feet _____ inches	
Weight	146 lbs.		_____ lbs.	
Chest Measurement	Girth when fully expanded... 29 1/4 inches		_____ inches	
	Range of expansion... 2 3/4 inches		_____ inches	
Physical Development				
Vaccination Marks	Arm		Right	Left
	Number	1 scar.		
When Vaccinated	14 years ago.			
Vision	R.E.—V= 6/18		R.E.—V=	
	L.E.—V= 6/18		L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to Cause Rejection	(b)		(b)	
Approved by (Signature)	<i>Lamont Patterson</i>			
(Rank)	Major Medical Officer.		Medical Officer.	
Enlisted	at St. John's on 31 day of May 1916		at _____ on _____ day of _____ 191____	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
Transferred to	1st Nfld. Reg. 2831			
Became non-effective by	<i>Newfoundland</i>			
(Signature)	on _____ day of _____ 191____		on _____ day of _____ 191____	
(Rank)				



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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of further 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, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
KING GEORGE HOSPITAL LONDON, S.E.	24	4	17	9	5	17	J. G. V. R. Leg.	12	Reported sick in France with pain in right leg & foot. The right heel was raw, the skin having come off. On admission leg much improved still some pain. reflexes normal. Temp. normal. Discharged to report to OTC Records, 5 Victoria St. Fit for light duty.	<i>G. Stake</i> Lieut. Col. I. M. S.

certified true copy

subscribed & sworn

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Filleul Christian Name Clarence

TABLE I.—General Table.

Birthplace { Parish _____
County _____

Examined { on 31 day of May 1916,
at St. Johns Wfld.

Declared Age 21 years 7 ^{two} days.

Trade or Occupation Tailor

Height 5 feet 8 inches.

Weight 146 lbs.

Chest Measurement { Girth when fully Expanded 39 $\frac{1}{4}$ inches.
Range of Expansion 2 $\frac{3}{4}$ inches.

Physical Development _____

Vaccination Marks { Arm _____ RIGHT | LEFT
Number _____ | 1 scar

When Vaccinated 14 years ago

Vision { R.E.—V = 6/8
L.E.—V = 6/8

(a) Marks indicating congenital peculiarities or previous disease—

(b) Slight defects but not sufficient to cause rejection—

Approved by Samuel Paterson
Rank Capt Medical Officer.

Enlisted { at St. Johns
on 31 day of May 1916

Joined on enlistment	Corps	Regtl. No.
	<u>St. Newfoundland</u>	<u>2831</u>
Transferred to		

Became non-effective by _____
on _____ day of _____ 191
(Signature) _____
(Rank) _____

TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and Signature
	<u>TXP</u>
<u>24-7-16</u>	<u>1st Inoculation LP</u>
<u>31-7-16</u>	<u>2nd " LP</u>
<u>7-8-16</u>	<u>3rd " LP</u>
<u>25-8-16</u>	<u>Vacc LP</u>
<u>13-11-16</u>	<u>Fit for foreign Service H.W.</u>
<u>12-6-17</u>	<u>TA 13 R. Inoculations</u>
<u>22-6-17</u>	<u>2 Capt. Home</u>

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

October 3rd. 1917.

Private Clarence Fillard,
Burgeon.

Dear Sir,-

Kindly present yourself to Doctor F. McDonald
Burgeon, for re-examination, on whatever date between
November 5th. and 12th. the Doctor notifies you to ap-
pear.

Yours faithfully,
12

Secretary.

JH/.

FOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

Message sent 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 message be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender *Philip Filluel* Address _____

Line Number	Rcd	By	Sent by	Check

Dated May 1, 1917.
To Mr. Philip Filluel,
Burgoo.

Regret to inform you that Record Office, London, officially reports No. 2831, Private Clarence J. Filluel, has been admitted King George Hospital, London, suffering from inflammation connective tissue leg. Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

J. R. BENNETT,
Colonial Secretary.

FOR TYPEWRITER



DEPARTMENT OF MILITIA

ADDRESS REPLY TO
DEPT. OF MILITIA
AND QUOTE NO.

ST. JOHN'S, NEWFOUNDLAND,

November 3rd., 1917.

Capt. J. M. Howley,

Secty. Pensions & Disabilities Board.

2831 Pte. Clarence Filleul
Burgeo

Sir:-

The marginally noted man should report to
Dr. F. McDonald, Burgeo, for re-examination, on
whatever date between November 5th. and 12th. the
Doctor notifies him to appear.

I have the honour to be,

Sir,

Your obedient servant,

Cluny Macpherson

Major, D. M. S.

2/1st NEWFOUNDLAND REGIMENT.

A. Lillend. C.

No. *2831* is unlikely to be fit for Service with the
Expeditionary Force for *6* *weeks* months, on account of

I recommend that he be posted to the Depôt at St. John's,
Newfoundland.

J. D. Smith M.O.,
Capt. Rank.
I/C. 2/1st Newfoundland Regt.

Barry Camp
AVR.

16-7-17

No. _____

From Reg. Post Office

Registered Letter Addressed—

Mr. Clarence Fullard
Bungo

Received by _____

A. M.

Despatching
Office
Stamp

ST. JOHN'S EAST
MAY 13 1875

Arrival
Office
Stamp

[Handwritten signature]

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 2831 Private Mutual Co

(Substituting A.F. O. 1625). N.F.P./36.

F Company. From 7. 7. 17 To 18. 7. 17 (Dates inclusive).

Embarked per S.S. _____

From Liverpool Date 18. 7. 17

DR. Classification (See Procedure). B

Draft No. 43. CR.

Date	Pay Book Col.	PARTICULARS	Rate	Dys	£	s	d	Date	Pay Book Col.	PARTICULARS	Rate	Dys	£	s	d	
	8	Forfeited Pay							1	Pay	1.00	12	12	00		
	9	Allotments	50	12	6	00			2	Field Allowance	10	1	1	20		
	10								3	Other Allowances						
	11/12	Total Stoppages			6	00	14	8	4/5	Total @ 4.86 2/3			12	20	14	3
	13	Fines							6	Balance Credit Last Period						
	14	Clothing & Necessaries							6a	<u>OTHER CREDITS:</u>						
	15	Arms & Accoutrements								Ration Allowance,						
	16	Barrack Damages								/ / 17 to / / 17 %						
	17	Hospital Stoppages														
	17a	Miscellaneous Stoppages														
	19	Casual Payments														
14-7-17	20	1st Payment					10	0								
	21	2nd "														
	22	3rd "														
16-7-17	23	Final "					10	0								
	24	Balance Debit Last Period														
	28	" Due by Paymaster					9	7		27	Balance Due to Paymaster					
					2	14	3						2	14	3	

checked.
This account is in accordance with information received at the Pay & Record Office to / / 17 and is therefore subject to amendment if, and as may be found necessary, with information received at the Pay & Record Office to / / 17.

CHECKED.
APV
24/7/17
GSK

NEWFOUNDLAND CONTINGENT
39, VICTORIA ST.,
LONDON, S.W.
JUL 24 1917
PAY & RECORD OFFICE

191

CERTIFIED CORRECT.
NEWFOUNDLAND CONTINGENT

F. J. J. Marshall
PAYMASTER & OFFICER IN CHARGE RECORDS

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 2831. Pte. J. J. ...

(Substituting A.F. O. 1625). N.F.P./36.

DUPLICATE MAIL COPY
Posted 2 - AUG 1917

Company. From 7-7-17 To 18-7-17 (Dates inclusive).

Embarked per S.S.

From Liverpool Date 18-7-17

DR. Classification (See Procedure). B

Draft No. 43

CR.

Date	Book Col.	PARTICULARS	Rate	Dys	£	s	d	Date	Pay Book Col.	PARTICULARS	Rate	Dys	£	s	d
	8	Forfeited Pay							1	Pay	1.00	12	12	00	
	9	Allotments	50	12	6	00			2	Field Allowance	10		1	20	
	10								3	Other Allowances					
	11/12	Total Stoppages			6	00	1 4 8		4/5	Total @ 4.86 2/3			13	20	2 11 3
	13	Fines							6	Balance Credit Last Period					
	14	Clothing & Necessaries							6a	<u>OTHER CREDITS:</u>					
	15	Arms & Accoutrements								Ration Allowance,					
	16	Barrack Damages								/ /17 to / /17 %					
	17	Hospital Stoppages													
	17a	Miscellaneous Stoppages													
	19	Casual Payments													
14-7-17	20	1st Payment					10 0								
	21	2nd "													
	22	3rd "													
16-7-17	23	Final "					10 0								
	24	Balance Debit Last Period													
	28	" Due by Paymaster					9 7		27	Balance Due to Paymaster					
					2	14	3							2	14 3

checked.
 This account is, in accordance with information received at the Pay & Record Office to JUL/24/1917 and is therefore subject to amendment if, and as may be found necessary.
 RECEIVED AT THE PAY & RECORD OFFICE

NEWFOUNDLAND CONTINGENT
 ST. VICTORIA ST.,
 LONDON, S.W.
 JUL 24 1917
 PAY & RECORD OFFICE

CHECKED.
 R.N.
 2477 RRO

CERTIFIED CORRECT.
 NEWFOUNDLAND CONTINGENT
J. W. Marshall
 PAYMASTER & OFFICER I/C RECORDS

✓
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 29th, 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..... *Clarence J.* 2. Surname..... *Fillard*

3. Rank..... *Pte.* 4. Regtl. No. *2831*

5. Address in full to which future payments of gratuity are to be forwarded..... *Burgoes, District of Burgoes*

6. Date of enlistment in the Regiment..... *May 1916*

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

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

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

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

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

12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *From May 1916 to*

Sept. 1917..... 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.
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.

Clothing allowance back pay + Pension monthly \$ 35.00
#40

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

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?

19. Are you now serving in the Regt.? *No* If not give? - (a) date of discharge *Sept. 1917* (b) Reason for discharge

Physical unfitness

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.

France - Nov. 29/16 to Feb. 7/17
Somme - Gassed

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.

Lawrence F. Fild

Signature of Applicant:

Place of Residence:

Burgeo, District of Burgeo

Declared before me at:

St. John's, Nfld.

This

14th day of *May*, 19*19*....

John McGohey

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

POST DISCHARGE PAY.				Net amount due
Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	
.....	<i>U man</i>	<i>780 00</i>
.....
.....
Certified correct.			Paymaster	<i>Mc</i>

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 2831 Killuel

F Company. From 7.7.17 To 18.7.17 (Dates inclusive).

DR. Classification (See Procedure).

(Substituting A.F. O.1625). 2 N.S.P./36.

Embarked per S.S. _____

From _____ Date _____

Draft No. _____ CR.

Date	Pay Book Col.	PARTICULARS	Rate	Dys	£	s	d	Date	Pay Book Col.	PARTICULARS	Rate	Dys	£	s	d
	8	Forfeited Pay							1	Pay	1 ⁰⁰	12	2	60	
	9	Allotments	50	12	6	00			2	Field Allowance	10	12	1	20	
	10								3	Other Allowances					
	11/12	Total Stoppages			6	00	1 4 8		4/5	Total @ 4.86 2/3			13	20	2 14 3
	13	Fines							6	Balance Credit Last Period					
	14	Clothing & Necessaries							6a	<u>OTHER CREDITS:</u>					
	15	Arms & Accoutrements								Ration Allowance,					
	16	Barrack Damages								/ /17 to / /17 :					
	17	Hospital Stoppages								= days @ /					
	17a	Miscellaneous Stoppages													
	19	Casual Payments	14	7	16		10								
	20	1st Payment	16	7	16		10								
	21	2nd "													
	22	3rd "													
	23	Final "													
	24	Balance Debit Last Period					24 8								
	28	" Due by Paymaster					9 7		27	Balance Due to Paymaster					
							2 14 3								2 14 3

Barr Camp
July 25th 1917

CERTIFIED CORRECT.

Macross
 O.G. "F" Company.

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 2831 Villuel

(Substituting A.F. O.1625). N.F.P./36.

F Company. From 7.7.17 To 18.7.17 (Dates inclusive).

Embarked per S.S. _____

DR. Classification (See Procedure).

From _____ Date _____

Draft No. _____ CR.

Date	Pay Book Col.	PARTICULARS	Rate	Dys	£	s	d	Date	Pay Book Col.	PARTICULARS	Rate	Dys	£	s	d
	8	Forfeited Pay							1	Pay	1 ⁰⁰				
	9	Allotments	50	12	6	00			2	Field Allowance	1 ⁰⁰	12	12	00	
	10								3	Other Allowances			1	20	
	11/12	Total Stoppages			6	00	1 4 8		4/5	Total @ 4.86 2/3			13	20	2 14 3
	13	Fines							6	Balance Credit Last Period					
	14	Clothing & Necessaries							6a	<u>OTHER CREDITS:</u>					
	15	Arms & Accoutrements								Ration Allowance,					
	16	Barrack Damages								/ /17 to / /17 :					
	17	Hospital Stoppages								= days @ /					
	17a	Miscellaneous Stoppages													
	19	Casual Payments													
	20	1st Payment					10								
	21	2nd "					10								
	22	3rd "													
	23	Final "													
	24	Balance Debit Last Period													
	28	" Due by Paymaster					9 7		27	Balance Due to Paymaster					
							2 14 3								2 14 3

Barry Camp
July 25 1917.

CERTIFIED CORRECT.

James Quinn
 O.O. "F" Company.

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 2831 Fulluel

(Substituting A.F. O.1625). N.F.P./36.

F Company. From 7.7.17 To 18.7.17 (Dates inclusive).

Embarked per S.S. III 27 1917

DR.

Classification (See Procedure).

From _____ Date _____

Draft No. _____ CR.

Date	Pay Book Col.	PARTICULARS	Rate	Dys	£	s	d	Date	Pay Book Col.	PARTICULARS	Rate	Dys	£	s	d
	8	Forfeited Pay							1	Pay	10	12	12	10	
	9	Allotments	30	12	6	00			2	Field Allowance	10	12	1	20	
	10								3	Other Allowances					
11/12		Total Stoppages			6	00	148		4/5	Total @ 4.86 2/3			13	20	2 14 3
13		Fines							6	Balance Credit Last Period					
14		Clothing & Necessaries							6a	<u>OTHER CREDITS:</u>					
15		Arms & Accoutrements								Ration Allowance,					
16		Barrack Damages								/ /17 to / /17 :					
17		Hospital Stoppages								= days @ /					
17a		Miscellaneous Stoppages													
19		Casual Payments					10								
20		1st Payment					10								
21		2nd "													
22		3rd "													
23		Final "													
24		Balance Debit Last Period													
28		" Due by Paymaster					97		27	Balance Due to Paymaster					
							2143								2143

Barry Camp

July 25th 1917.

CERTIFIED CORRECT.

Wm. A. G. G. G.
O.G. "F" Company.

Qty 6157

NEWFOUNDLAND CONTINGENT

N.F.P/33.

Temporary A/c.

Regtl No. 2831 Rank Plt

Name G. J. Fullin

Pay	F. Allow	Working	Total
\$100	10 ⁰⁰		1.10
Less Allotment			50
Net Rate			60

Date	DEBITS	£ s d			CREDITS	£ s d		
		£	s	d		£	s	d
1917	Balance	1	1		Balance	2	2	1/2
	<u>P.M. ADVANCES:</u>							
	A.B. 64				<u>Pay @ Net Rate:</u>			
	Acquittance Rolls	5	1	10	23/12/17 to 9/5/17 = 138 days	17	0	3
	Hospital Advances				60 ⁰⁰ = \$ 8280			
	<u>STOPPAGES:</u>				9/5/17 to 18/5/17 = days	1	0	0
	hospital dys =							
	Forfeited Pay /dys 2/10		4	6				
	Miscellaneous	5	6	4				
	Cables							
	<u>P.&R.O. PAYMENTS:</u>				1/17 to 1/1 = days			
	Sundry Bills							
	Cash	16	0	0				

[Handwritten Signature]



3 1ST. NEWFOUNDLAND REGIMENT 10

ALLOTMENTS

1 Harvey Gillen

Regl. No. 2891

hereby agree, until further notification by me, and in similar official form to make an Allotment of 50 Dollars and 50 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

Aug 1st /16.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>2676</u>	<u>Father</u>	<u>Joseph Gillen</u>	<u>Burgeo</u>	<u>50</u>
		<u>Commencing</u>		
		<u>1916</u>		
Total Allotment, \$				

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

(Sig.) Chas. H. Auye Capt
Officer Commanding
Company
July 24th
St John's 1916

(Sig.) Harvey Gillen
(Rank) Private

Classification B Draft No 43.
Embarcated at Liverpool 18.7.17

Army Form O. 1625.

PAY LIST.

to

191

Voucher No.

NON-EFFECTIVE ACCOUNT.



Regiment or corps *2/1st Newfoundland*
 No. *2831* Rank *Pte.* Name *Fitzell C.*
~~Died~~ at on the of 191 .
~~Deserted~~ at on the of 191 .

I Certify to the correctness of above in every particular.

No statement of a/c to hand { *James Stewart* } Commanding Squadron, Troop,
 Battery or Company.

STATEMENT OF ACCOUNT.

[FORM 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month	-	-	-
	Cash issues (Date of each issue to be stated)				Pay 12 days at 1-10 from <i>7/7 to 18/7/17</i> <i>13.20</i>	2	14	3 ✓
	<i>July 14th</i> 1917		10		Proficiency, Service or good conduct pay			
	"				days at from _____ to			
	"				Messing allowance days at			
	"			10 0	from _____ to			
	<i>Allowment</i> <i>12 Day @ .50 = 6.00</i>		14	8 ✓	Clothing and kit allowance			
	Consolidated stoppage.....				Amount produced by the sale of Necessaries			
	<i>Casual Pay</i> <i>16/7/17</i>		10		Personal Clothing and Effects from Form 2...			
	Balance due by the Paymaster		9	7 ✓	Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
		£	2	14	Deferred Pay or Gratuity			
			3	1 ✓	Balance due to the Paymaster.....			
		£	2	14				3 ✓

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ 2 14 3 is correctly chargeable against the Public^(b).

NEWFOUNDLAND CONTINGENT

Dated at

this



191

Paymaster.

PAYMASTER & OFFICER IN CHARGE

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with A.F.B. 2090 or Army Form O. 1815.
 (b) Words in italics to be struck out when there is no debtor balance.

W. 9667-4002-750M. 9/15. Forms
 H. & J., Ltd., Bury St., E.C. O. 1625.
 27

CHECKED.
MR N
 2477 *RR.O.*

C.R. 2831

Clarence J. Filleul was attested for General service
June 1st 1916
with the NEWFOUNDLAND REGIMENT on

Regimental No 2831 was allotted to Pte. C.J. Filleul.

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th. 1919.

C.R. 2831

Struck from roll of Officers and
was DISMISSED from the Royal West-
York Regiment.

Regt 4

RANK

NAME

DATE

REMARKS.

2831

Pte.

FILLEUL C. JOHN

28/8/17

MED. UNFIT.

✓.RI 2831

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt., St. John's, Aug. 6th, 1917.

2831 Pte. C.J. Filluel.

Attached to Strength from Aug. 4th 1917.

C.R. 2831

Extract from War Office List No. H.A. 8755.

NFLD. CONTINGENT.

#2831 Pte. C. J. Filleul.

ICT. Right. Leg and PUO. slight.

Admitted 20th Gen. Hosp. Dannes Camiers ~~ex. 18th Gen. Hosp.~~

18th April 1917.

C.R. 2831

Extract from Casualties received from P. & R. Office London,
March 17th, 1917.

2831 Filloul.

21st Casualty Clearing Station France, Feb. 27, gassed.

C.R. 2831

Extract of Casualty List received from P. & R.O. March 23 1917.

2831. Pte C. J. Filleul.

Wounded.

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 _____

Line Number	Rcd	By	Sent	by	Check

Dated **March 17, 1917.**

To **Mr. Philip Filleul,
Burgeo.**

Regret to inform you that Record Office,
London, officially reports **No. 2831, Private Clarence
J. Filleul, was at Twentyfirst Casualty Clearing
Station, France, February seventh, having been gassed.**

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

J. R. BENNETT,
Colonial Secretary.

C.R.

2831

Extract from Nominal Roll Draft (All Ranks) to 1st
Bn. B.E.F. Embarked Southampton.

2831 Pte. C. Filleul.

#0-11-16.

C.R. 2831

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

28/8/16.

2831 Pte. C. Filleul.

No. 4

Date 9-5-1917

(1) To the Officer i/c Records,

58 Victoria St
S.W. (Station).

(2) The Officer Commanding,

Newfoundland Contingent
Ayr (Station).

(3) The Paymaster,

Newfoundland Contingent
58 Victoria St SW (Station).

Regimental No. 2831

Rank and Name Pte Filleul G J

Regiment or Corps 1/ Newfoundland

has been ~~granted a furlough from~~ discharged to Report to O/C Records
58 Victoria St

~~His address while on leave will be~~

~~X~~ (Fit for light duty)

~~I commandeer this is no longer~~ [Signature]
Officer in charge

OFFICER, R.A.M.O.

Officer in charge _____ Hospital,



(Station).

• Strike out that which is inapplicable

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the Office.



STANDING MEDICAL BOARD
OF THE
PENSIONS AND DISABILITIES BOARD OF THE
NEWFOUNDLAND PATRIOTIC ASSOCIATION.

In replying please mention Date and

No. 2831

All communications should be addressed to
the Secretary, MAJOR CLUNY MACPHERSON,
St. John's, Newfoundland.

St. John's, Newfoundland
November 3rd, 1917.

Sir:—

The Pension and Disabilities Board, requiring a report on the Pensioner named in the margin, kindly notify him to appear before you during the week of November 5th. - 12th.

2831 Pte. C. Filleul
Burgeo

A form of examination for you to fill out is enclosed herewith.

Pensioner will be notified to appear before you on whatever date you find convenient.

If another Registered Medical Practitioner is in your neighbourhood, or likely to be there during the week, it is preferable that you should both examine the Pensioner at the same time, and both sign report

The fee laid down by the Pensions and Disabilities Board for such examination is one dollar (\$1.00) for each Doctor for each examination.

I have the honor to be,

Sir,

Your obedient servant,

Cluny Macpherson

Major-Secretary.

Finlay McDonald, Esq., M. D.,
Burgeo.

To the Medical Board, or Medical Examiner.

The Pensions and Disabilities Board requires a report on the present condition of

2831 Pte. Clarence Filleul

The object is to enable the Board to decide the degree of pension, if any, to be awarded for the next ensuing year. To this end clear and decisive answers to the questions in the accompanying report should be filled in by the Board, as it is essential that the Pensions and Disabilities Board should be in possession of the most reliable information to enable them to decide on the man's claim to Pension.

Expressions such as "may", "might", "probably", &c. should be avoided.

On page 4 of this sheet will be found the scale of Pensions as proposed for Newfoundland, by the Patriotic Association of Newfoundland.

The identity of the Pensioner should be established, to prevent personation. For that purpose a description of the pensioner and of the Disabling condition is given below. Should any items be omitted we should be glad if you will fill them in on the second copy and return to us.

Apparent age	22
Height	5'8 $\frac{1}{2}$ "
Complexion	Fair
Colour of Eyes	Brown
Colour of Hair	Dark
Mark of Identification	

INFLAMATION CONNECTIVE TISSUE RIGHT LEG
GASSED AND HEART TROUBLE

Condition August 14th., 1917. Right leg is now in good condition. Heart a bit rapid. ~~No organic trouble.~~ States he is always coughing, the result of being gassed. Nothing on examination. Cannot walk up hill. Valvular disease of heart (mitral systolic) pulse 100

Two copies of a Report Form are enclosed in order that you may retain a copy in case of loss of the original in the mail. Please return your report direct to me by Registered Post.

You will please forward also, under the description of the pensioner's present condition, his signature. Please have him affix this to the copy also which you retain.

Sympathetic consideration for the pensioner is desired, but at the same time self-help is to be encouraged in every way possible. The purpose of the pension may be defeated by lowering the independence and self-respect of the pensioner.

I have the honour to be,

Sir,

Your obedient servant,

Cluny Macpherson

Major, D. M. S.

Report of the Medical Board.

- (1) Are you satisfied that pensioner presenting for examination is the man named above. **Yes**
- (2) What employment does he follow? **None, formerly tailor**
- (3) What have been his average weekly earnings the past year? **Nothing since discharged**
- (4) What are his present weekly earnings? **Nothing**
- (5) Name and address of present employer, or if unemployed, of last employer. **Not employed- R. Moulton, Ltd., Burgeo**
- (6) The present state of the disabling condition. **Nov. 19th, 1917.**

Right leg in good condition. Always coughing, spitting blood the last two weeks- Valvular disease of heart (Mitral systolic), Pulse, sitting 100- Standing 112, after walking up a flight of stairs (very slowly) 144.

- (7) Is the Disability permanent? **Yes**
- (8) Has it become better, or worse, during the past year? **No improvement since discharged**
- (9) Will it materially improve, or get worse? **No chance for improvement**
- (10) To what extent is his capacity for earning a full livelihood at his employment, or in the general labour market, lessened at present?
(Extent should be stated as TOTAL, 4-5, 3-5, 2-5, 1-5, or NOTHING.) **Total**
- (11) Is the pensioner married, or a widower, and if so, and he has children, give names and ages. (Pensioner's statement may be accepted). **Single**

- (12) Are any others dependent on Pensioner? Give names and relationship. **No**

(13) You will please have Pensioner show you his Discharge. What date does his Discharge bear? **Aug. 29th, 1917**

Signature of Pensioner (to be procured at examination).

James Pitt



Date. **Nov. 19th, 1917.** *Frederic M. Donald* M. D.

Place. **Burgeo** M. D.

Approved. *for Total*
Date. *29.11.17*

Cluny Macpherson, Major

13.—Those who are entitled to be awarded pensions shall be divided into six classes, and each member of each class shall be awarded a pension in direct proportion to his partial or total disability, as follows:—

Class 1.—Total disability, 100 per cent.

For example—Loss of both eyes.
Loss of both hands, or all fingers and thumbs.
Incurable tuberculosis.
Loss of both legs, at or above knee joint.
Insanity.
Permanent extreme leakage of valves of heart

Class 2.—Disability 80 per cent and less than 100 per cent.
Pension 80 per cent of Class 1.

For example—Loss of one hand and one foot.
Loss of both feet.
Disarticulation of leg at hip.

Class 3.—Disability 60 per cent and less than 80 per cent.
Pension 60 per cent of Class 1.

For example—Loss of one hand.
Loss of leg at or above knee.
Loss of tongue.
Loss of nose.

Class 4.—Disability 40 per cent and less than 60 per cent.
Pension 40 per cent of Class 1.

For example—Loss of one eye.
Loss of one foot.
Total Deafness.
Loss of two thumbs.

Class 5.—Disability 20 per cent and less than 40 per cent.
Pension 20 per cent of Class 1.

For example—Loss of one thumb.
Ankylosis of elbow, knee, shoulder, wrist or ankle.

Class 6.—Disability under 20 per cent, a gratuity not exceeding \$100.

For example—Total deafness in one ear.
Partial deafness in both ears.
Loss of index or other finger.

D. M. S. NEWFOUNDLAND.



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

Saint John's
.....
Aug 6/17
.....

Date

1. Unit *1st. Newfoundland*

5. Age last birthday.

*22*2. Regimental No. *2831*

6. Enlisted on

31 May, 1916

3. Rank.

Pte

at

S. John's

4. Name.

Private Clarence

7. Former trade or occupation

Sailor

8. Disability

Is I.C.7. R. Leg.

Gassed. & that trouble.

9. History

States: he was gassed in France in Feb. 1917. was in hospital 20 days after being discharged from hospital developed Inflam. cornuehine tissue right leg. while in hosp was laid he had that trouble

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.)

Right leg is now in good condition.
Habit rapid to organs trouble.
States he is always complaining the
result of being gassed. nothing on
examination.

11. Was sanatorium advised and refused?
operation

✓

12. Do you recommend discharge as permanently unfit?

✓

Signature

Geo. Borden

Rank or Qualification

MO

Remarks if any by Officer in 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:— *He now well though feels better on a hot day. Cannot walk up hill. Valvular disease of heart (mitral systolic) pulse 100*

14. At present his capacity for earning a full livelihood in the general labor market is lessened by:—
(Here the president should write in Total, 4-5, 3-5, 2-5, 1-5).

Remarks if any:— *40% 3 months*

15. Is the disability permanent?

Yes

16. Has the disability been aggravated by

- (a) Intemperance. *W*
- (b) Misconduct. *W*

17. The refusal of operation ~~sanatorium~~ is:—

- (a) Reasonable.
- (b) Unreasonable. *✓*

Remarks if any:—

18. We recommend discharge from ~~retention in~~ the Army

Remarks if any:—

Signatures. *H. H. Grace* President
John E. Dineen

Place *St. Johns*
Date *Aug. 14 1917*

APPROVED

Station
Date

Clayton Macpherson, Major
Administrative Medical Officer.

2/1st NEWFOUNDLAND REGIMENT.

Pte Fillet C.

No. *2831* is unlikely to be fit for Service with the
Expeditionary Force for *6 (six)* months, on account of

I recommend that he be posted to the Depôt at St. John's,
Newfoundland.

J. S. Poutier M.O.,
Capt. Name.
I/C. 2/1st Newfoundland Regt.

Barry Camp

AYR.

16-7-17

1
Killeul, Co.

2831

Pay - sept.

DUPLICATE

N.F.P./54.

DUPLICATE

MAIL COPY

6-SEP 1917

NEWFOUNDLAND CONTINGENT

Deputy Paymaster
Officer Commanding,
1st Newfoundland Regt.



St. John's, Newfoundland.

MEMORANDUM of STOPPAGES/CREDITS on Account of

BALANCE FROM PREVIOUS PAY BOOK.

NOTE:- Charge under Column

Credit Pay & Record Office, London, S. W. 1.

Regtl No.	Rank & Name	Particulars & Authority	AMOUNT					
			£	s	d			
2831	Pte Filleul, C	Debit Balance "H" Company, 6/7/17, not brought forward				5	4	

This man has been discharged & paid in full.

This man was discharged previous to receipt of this advice. Stoppage cannot be effected.
M. Bowley, Lt. Paymaster

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

24th, August 1917

A. D. [Signature] Major,
Paymaster & Officer i/c Records.

CERTIFIED that the above Stoppages/Credits have been made in the Pay Book of "Headquarters" for Period / / to / / and credited to Pay & Record Office, London, S. W. 1.

Dated at St. John's, Newfoundland.

Deputy Paymaster,
Battalion.

ORIGINAL of this FORM to be COMPLETED and RETURNED INTACT to Paymaster & Officer i/c Records, Newfoundland Contingent, 58, Victoria Street, London, S.W. 1.
DUPLICATE to accompany PAY BOOK as VOUCHER.

Deputy Paymaster
~~Officer Commanding,~~
1st Newfoundland Regt.,

St. John's, Newfoundland.

MEMORANDUM of STOPPAGES/CREDITS on Account of

BALANCE FROM PREVIOUS PAY BOOK.

NOTE:- Charge under Column
Credit Pay & Record Office, London, S. W. 1.

Regtl No.	Rank & Name		Particulars & Authority	AMOUNT						
				£	s	d	£	s	d	
2851	Pte	Filleul, C	Debit Balance "H" Company, 6/7/17, not brought forward				3	4		
							3	4		

Disched previous to receipt of this advice
9/10/17

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

Major,
24th, August 1917 Paymaster & Officer i/c Records.

CERTIFIED that the above Stoppages/~~Credits~~ have been made in the Pay Book of "~~Headquarters~~ Company for Period / / to / / and credited to Pay & Record Office, London, S. W. 1.

Dated at St. John's, Newfoundland.

Deputy Paymaster,

Battalion.

ORIGINAL of this FORM to be COMPLETED and RETURNED INTACT to Paymaster & Officer i/c Records, Newfoundland Contingent, 58, Victoria Street, London, S.W. 1. DUPLICATE to accompany PAY BOOK as VOUCHER.

Burgeo
Jan 9/7

Sheriff M Hawley
Dear Sir.

Would like very much if you
would get my badge sent to me. I have now
been home nearly 2 months. I think it time I
had received it. My number is 2831. please see
that I get it as soon as possible.

Sincerely Yours
Clarence Lilleul.

(# 2831
Clarence Lilleul)
Burgeo.

No.



1st NEWFOUNDLAND REGIMENT

VOUCHER

In Acct. with #2831 Pte. Clarence Filleul Voucher No. 1026.

Cheque No. 1026.

Reg'l A/c No. Name C.B. Folio No.

Date	Req'n No.	Invoice No.	Particulars.	Amount
Aug. 6	30		Pay on a/c	\$15
				\$15 00

CERTIFICATE

Dissectⁿ Sheet No.

Recap. Sheet No. 30

M. Howley
PAYMASTER

Checked by *[Signature]*

RECEIPT

August 6th, 191 7.

Received from the 1st. NEWFOUNDLAND REGIMENT the sum of **Fifteen** Dollars and Cents in Payment as above stated.

August 191 7.

\$ 15.00

[Sig.] *Clarence Filleul*

No.



1st NEWFOUNDLAND REGIMENT

VOUCHER

In Acct. with #2831 Pte. C.J. Filleul.

Voucher No. 1558

Burgis.

Cheque No. 1558

Reg'l A/c No.

Name

C.B. Folio No.

Date		Req'n No.	Invoice No.	Particulars.	Amount	
Aug	27	49		Balance of pay.	18	00
				Bonus	13	70
				Clothing	25	00
						56 70

CERTIFICATON

56 70

Dissect^a Sheet No.

Recap. Sheet No.

Checked by *W.C.B.*

M. Howley
PAYMASTER

RECEIPT

Aug 27th., 1917.

Received from the 1st. NEWFOUNDLAND REGIMENT the sum of
~~Fifty six~~ ----- Dollars
and ~~seventy~~ ----- Cents in Payment as above stated.
Aug 27th., 1917.

\$ ~~56.70~~

[Sig.] *Thomas Filleul*

C.R. 2831

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

I certify that I have received an issue of 2 inches
of Riband of British War Medal-1914-1919.

Name. *Clarence P. Filleau*

Date *30th November*

Place *Burgis.....*

C.R. 2831

Extract from Nominal Roll of Nfld. Regt. Draft No.14
from 2nd Bn. Depot, to 1st Bn. ~~Depot~~ B.E.F. Embarked
Southampton, 30-11-16.

2831 Pte. C. Filleul.

C.R. 2831

RECEIPT.

FOR ISSUE OF RIBAND OF VICTORY MEDAL 1914-1919.

I certify that I have received an issue of 2 inches
of Riband of Victory Medal 1914-1919.

NO. 2831... NAME *Launce Fitch*

DATE *12th January 1920*

PLACE *Burgess*

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

The Royal Nfld Regt.,

Dept of Militia,

St. John's Nfld. .

Fold Here

July 5th. 1921. 1919.

The accompanying King's Certificate, on his discharge,

(No. 1016), is forwarded herewith toClarence Filleul.in respect of his service as No. 2831 Rank Pvte.Name C. Filleul. Corps Royal Nfld Regt.Receipt of the same should be acknowledged hereon. M.J.

Received

this 19th Day of July 1921

Signature

Clarence Filleul

Date

19th of July 1921

Address

Burgess of F.L.D. P.O. Box 10



COPY.

Casualty Form Active Service.

Regiment or Corps Newfoundland
 Regimental No. 2831 Rank Plt Name Fuller C.F.
 Enlisted 1915 Terms of Service (a) Duration Service reckons from (a) 1.6.16
 Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N.C.Os. }
 Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 86, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 86, or other official documents.
Date	From whom received				
		<u>Southampton</u>		<u>30.11.16</u>	
		<u>Discharged</u>		<u>1.12.16</u>	
<u>29.1.17</u>	<u>Unit</u>	<u>Deprived 1 day pay deff kit</u>	<u>Home</u>	<u>3.12.16</u>	<u>O7810 476</u>
	<u>Unit</u>	<u>Joined Battalion</u>	<u>France</u>	<u>12.12.16</u>	<u>B213</u>
<u>88.2.17</u>	<u>88.2.17</u>	<u>Adm. M.D. Transferred</u>	<u>88 M.S.</u>	<u>9.1.17</u>	<u>P.D. 8666</u>
<u>21.4.17</u>	<u>21.4.17</u>	<u>With Battalion</u>		<u>23.1.17</u>	
<u>O.C.</u>	<u>O.C.</u>	<u>Adm. M.D.</u>	<u>France</u>	<u>1.2.17</u>	<u>E.D. 9807</u>
<u>25.3.17</u>	<u>21.4.17</u>	<u>Wounded in Action</u>	<u>21 C.C.S.</u>	<u>27.2.17</u>	<u>E.D. 743</u>
<u>24.4.17</u>	<u>18.4.17</u>	<u>Discharged to Duty</u>	<u>Unit</u>	<u>13.3.17</u>	<u>E.D. 1437</u>
<u>30.4.17</u>	<u>20.4.17</u>	<u>Adm. I.C.S. Legt.</u>	<u>Field</u>	<u>8.4.17</u>	<u>E.D. 3059</u>
		<u>P.U.D.</u>	<u>Dames Cairns</u>	<u>18.4.17</u>	<u>M.A. 8755</u>
		<u>Inv. to England</u>	<u>Age S. Bookill</u>	<u>27.4.17</u>	<u>W 3083</u>

"Princess Elizabeth"

(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) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

By his section
 2nd Echelon

C.R.
2093

Regiment or Corps 2/1 Newfoundland Regt.

Rank Pte Surname Filleul, H.G. Christian Name E. J.

Religion 698 Age on Enlistment 21 years 7 months.

Enlisted (a) John's Terms of Service (a) Duration Service reckons from (a) 1/6/16

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

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

Signature of Officer-in-Charge _____



Date	Report From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
			Embarked ... Embarked <u>Shampton</u>		30 NOV 1916
			Disembarked <u>Rouen</u>		1-DEC 1916
	<u>29 I.B.D</u> <u>Unit</u>	<u>Defined 1 Days Pay. Defic of Kit.</u> <u>Joined Battalion</u>	<u>France</u>	<u>3/12/16</u>	<u>61810. 47 B.</u>
	<u>88 I.A.</u> <u>21 CCS</u>	<u>Adm Influenza transferred</u>	<u>88th B.I.P.S.</u> <u>With BATT.</u>	<u>9/1/17</u> <u>25. 1. 17</u>	<u>ED 8666.</u>
	<u>21 CCS</u>	<u>Admitted N.V.D.</u>	<u>France.</u>	<u>1/2/17</u>	<u>ED 9504</u>
	<u>G.C.</u>	<u>Wounded in Action Gassed.</u>	<u>21 CCS.</u>	<u>27/2/17</u>	<u>ED 443.</u>
<u>25.3.17.</u>	<u>21 G.C.</u>	<u>Discharged to Duty</u>	<u>Unit</u>	<u>12.3.17</u>	<u>ED. 1437</u>
<u>24.4.17.</u>	<u>18 G.C.</u>	<u>Ad. 2 1/2 legs</u>	<u>In the Field</u>	<u>8.4.17.</u>	<u>ED. 3059</u>
<u>30.4.17.</u>	<u>20 G. Hosp.</u>	<u>Ad. P.U.O.</u>	<u>Barneshamers</u>	<u>18.4.17</u>	<u>H.A. 875.</u>

(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, Shoelng-Smith, &c.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
	"Princess Elizabeth"	Invalidated to England		27.4.17	W 3083

Doobner
 O. I/c No. 1 Reg. Infantry Section
 G.H.Q. 3rd Echelon

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.
Forms B. 121.
[894] W:017/2121 1000m 6/18ss 23 56

Regiment of

Newfoundland.

Number of Sheet

First

Signature of O. C. Company

William Lawlor

Regimental Number and Name <i>No. 71 Killuel J.</i>		Enlistment Age on <i>21</i> years <i>7</i> months	Trade <i>Tailor</i>	Good Conduct Badges, Service Pay or Proficiency Pay	
Joined <i>Sept</i> Date <i>5/9/16</i>		Place and Date of Enlistment <i>John</i>	Religion <i>P. O.</i>	LONDON, S. W. 18 JUL 1917 PAY & RECORD OFFICE	
Joined Date		Period of { with Colours <i>1 89</i> years. with Reserve <i>3 35</i> years.	Place of Birth <i>Burgis</i>		
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>Medically Unfit 28 8/17</i>					

To be carried over

Certified true Copy
 Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. Forms B. 121.
29.
 [636] W5017/2124 1000m 6/18ss 52 56

Regiment of Newfoundland

NEWFOUNDLAND REGIMENT
 ST. JOHN'S, N.F.

Number of sheet 1st

Regimental Number and Name		Enlistment		Trade <u>Sailor</u>	Good Conduct Badges, Service Pay or Traffic Pay
No.	<u>2531 Lilluel C. G.</u>	Age on	<u>21</u> years <u>7</u> months		
Joined <u>Sept.</u> Date <u>5/9/16</u>		Place and Date of Enlistment	<u>St John's</u>		
Joined _____ Date _____					
Joined _____ Date _____		Period of	with Colours _____ years.	Place of Birth <u>Burgw</u>	
Joined _____ Date _____					with Reserve _____ years.

Signature of O. C. Company [Signature]

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

To be carried over

Army Form B. 121.



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 *Jubel Cloreuse*

Regiment from which discharged *1st. Newfoundland*

Regimental number *2831.*

Intended address *Burgo.*

Height on discharge *5* Feet *8 1/2.*

Color of hair on discharge *Dark*

Complexion *Fair*

Color of eyes *Brown*

Figure on discharge *Medium*

Christian name of Father ~~*James*~~ *Philip*

Christian name of Mother *Jessie.*

Wife's maiden name in full *✓*

Date and place of marriage *✓*

Christian names of children *✓*

Place and date of soldier's birth. *Burgo. 29th Nov. 1894.*

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) *James Filley* *Plt*
(Rank)

Station *St Johns* Date *Aug 6th 1914*

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.

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

Station *St Johns* Date *Aug. 6/14*