



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5228 Name Chesley Green Corp. Meath

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Chesley Green
2. What is your full Address? 2. St. John's Harbor
S.B.
3. Are you a British Subject? 3. yes
4. What is your age? 4. 21 years 0 Months
5. What is your Trade or Calling? 5. Wagonman
6. Are you Married? 6. no
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. no
8. Are you willing to be vaccinated or re-vaccinated? 8. yes
9. Are you willing to be enlisted for General Service? 9. yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? 10. } Name
} Corp.
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, Chesley Green 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.

Chesley Green SIGNATURE OF RECRUIT.
Jas W Pittman Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Chesley Green 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 stated as replied to, and the said recruit has made and signed the declaration and taken the oath before me.

on this 20 day of May 1915
Signature of Attesting Officer C. B. Dicks 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.....
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).....

C.R. 5228

Extract from Daily Orders Part 11 Unit The Royal Hfld. Regt.
St. John's, Aug. 16th. 1919.

The Discharge of the Undernoted on demobilization has been
CONFIRMED by Officer i/c Records from 6-8-19.

5228 Pte. C. Green.

C.R. 5228

Extract from Daily Orders Part II Unit The Royal Nfld. Regt.
St. John's, July 14th, 1919.

The discharge of the undernoted on demobilization has been
APPROVED by O.C. Discharge Depot with effect from 23-7-19.

5228 Pts. C. Greene.

C.R. 5228

Extract from Daily Orders Dated 11th July 1919 The Royal Nfld.

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

5228 Pte. C.Green.

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

C.R. 5228

Extract from Daily Orders part 11, from Unit The Royal 221 A.
Reg .St. John's, date 4 July 25, 1918.

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

#5228 Pte. Chesley Green.

C.R. 5228

Extract from Daily Orders part 11, from Unit The Royal Hfld.
Regt. St. John's, dated May 21, 1918

#5228 Pte. C. Green

Attested for General Service with the Royal Hfld. Regt.
from 20.5.18 to report 24.5.18

C. M. Wood

C.R. 5228

~~P. H. D.~~

SIGNALLER'S RECORD SHEET.

Rgtl. No. 5228 Rank P Name & Initial Green. C.
 Unit Royal Newfoundland Regt

STANDARD TESTS. (Details overleaf.)

No.	Map Reading		Electrical Instrument		Signal Training	
	Date	Officer's Sig.	Date	Officer's Sig.	Date	Officer's Sig.
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						

*Qualified in all Standard Tests
 of Whitley Capt.*

CLASSIFICATION TESTS.

Instrument	Flag	Buzzer	Lamp	Shutter	Semaphore	Date
Sending ...	99%	100%	98%	99%	%	
Reading ...	99%	100%	99%	100%	%	

* R.A. Signallers only.

Classified as 1st Class Signaller at Hagley Down Camp
 Date 9/12/18 Signature of Classifying Officer Whitley Capt.
 Reclassified as _____ Class Signaller at _____
 Date _____ Signature of Classifying Officer _____

Courses

Other qualifications

NOTE.—This Sheet is to be used as an Office Record during training, and on completion pasted in the Signaller's A.B. 64.

MAP READING. STANDARD TESTS.

No. of Test.	DESCRIPTION OF TEST.
1.	Point out on a map the conventional signs of objects enumerated.
2.	From a map to point out on the ground points and objects selected on the map, and <i>vice versa</i> .
3.	Measure shortest distance from point A to B on a map according to scale.
4.	Set a map without a compass (a) by the ground. (b) by the sun and stars.
5.	Describe a point on a squared map by means of a map reference, and <i>vice versa</i> .
6.	Measure on a map the distance from one point to another by road.
7.	Set a map by compass.
8.	Determine if a point A is visible from point B by studying contours, but without drawing a section.
9.	Take a bearing with a protractor off a map.
10.	Convert a magnetic bearing into true bearing, and <i>vice versa</i> .
11.	Take a bearing with a compass and measure it on a map with protractor.

SIGNAL TRAINING. STANDARD TESTS.

1. Accept a message including counting and filling in preamble.
2. Fill in Sent Column on message form.
3. Fill in Signal Register.
4. Fill in Received Column on message form.
5. Send and receive a verbal message on the telephone.
6. Call up with (a) flag, known and unknown station.
(b) buzzer.
(c) ringing phone.
7. Put through a call on a 4 plus 3 switch unit.
8. VISUAL. Carry out duties of reader. (For R.A. Signallers includes Semaphore.)
9. " " " caller. " " "
10. " " " writer. " " "
11. " " " answerer. " " "
12. " " " answer-reader. " " "
13. " " " sender. " " "
14. LUCAS LAMP. Set up and align.
15. " " Replace cells.
16. " " Connect up cells.
17. " " Trace the electric circuit with a view to locating a fault.
18. " " Change a bulb.
19. " " Change nightshades.
20. " " Test flexible cord.
21. TELESCOPE. Set up on stand and align.
22. " " Focus on a blue flag unreadable to the unaided eye and read a message.
23. HELIOGRAPH. Set up and align with vane.
24. " " Change to duplex and align.
25. " " Regulate the heat.

ELECTRICAL INSTRUMENTS TESTS.

- | | |
|--|---|
| <p style="text-align: center;">CELLS.</p> <ol style="list-style-type: none"> 1. Render active. 2. Connect in series and parallel. <p style="text-align: center;">TELEPHONE D. III.</p> <ol style="list-style-type: none"> 3. Connect and insert cells and cell connections. 4. Test instrument. 5. Localise and remedy the following faults:—
(a) Adjustment of buzzer.
(b) Dirty key contact.
(c) Dirty Pressel switch contact.
(d) Receiver discs and washers.
(e) Microphone capsule. 6. Connect up earth return, metallic return, and use of condenser terminal. <p style="text-align: center;">FULLERPHONE.</p> <ol style="list-style-type: none"> 7. Connect and insert cells and cell connections. 8. Test instrument. 9. Localise and remedy the following faults:—
(a) Adjust No. 1 or (A) contact of armature.
(b) Adjust No. 2 or (B) contact of armature.
(c) Dirty contacts. <p style="text-align: center;">VIBRATOR, R.A.</p> <ol style="list-style-type: none"> *10. Connect up hand set and cell connections. *11. Test instrument. *12. Localise and remedy the following faults:—
(a) Adjustment of buzzer.
(b) Dirty key contact.
(c) Dirty Pressel switch contact.
(d) Receiver disc and washers.
(e) Microphone capsule. 13. Connect up earth and metallic return. | <p style="text-align: center;">MISCELLANEOUS.</p> <ol style="list-style-type: none"> 14. Connect up Fullerphone and Telephone on same circuit so that they may be used at the same time without interruption. 15. 4 plus 3 Buzzer Unit. Connect up. <p style="text-align: center;">LINEMAN'S DUTIES.</p> <ol style="list-style-type: none"> 16. Identify lines by labels. 17. Draw and explain a simple circuit diagram. 18. Draw and explain a simple route diagram. 19. Make a reef knot, barrel hitch and clove hitch. 20. Joint and insulate (a) D. II. } Single or
(b) D. III. } Twisted.
(c) D. V. }
(d) D. twin Mk. III. 21. Make simple joint in enamelled wire or single airtline. 22. Lay cable (a) in open country.
(b) in trenches. 23. Tap in on (a) metallic circuit,
(b) earth circuit,
and determine on which side the fault is. 24. Test with Q. and I. detector—
(a) cells;
(b) a circuit, for disconnection earth and contact;
(c) In order to pick up wires in a rope. |
|--|---|

* R.A. only.

This space to be pasted in A.B. 64.

No. 21641/2523/P&A

2041. 753
06443



NEWFOUNDLAND CONTINGENT

From:

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

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

30th December, 1918

2 - 1 - 1919

Subject: 5228, Pte. C. Green,

With reference to the following telegram (11296) from the Hon. Minister of Militia, received

"pay to 5228 Green, £5.0.0.

Draft £5.0.0. is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

Receipt hereunder.

Chambers
COMMANDING ~~2ND BATTAL~~ ROYAL NEWFOUNDLAND REGT.
Lieut. Colonel
Batt'n
Royal Newfoundland Regiment

Received the sum of five
Pounds on account of

C Green
cable remittance from Newfoundland.

No. 5228 Rank Pte

Witness A Maunders

J. H. Marshall
Chief Paymaster & O.1/c Records.

B

No 2392/352

From: NEWFOUNDLAND CONTINGENT

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

Officer Commanding,
2nd Bn. Ryl Nfld Regt.

Winchester.

11th February 1919

February 14th 1919

5228. Pte G. Green.

With reference to the following
telegram from the Minister of
Militia / / (11)

"Pay to-5228. Green.

£5.0.8.

Cheque £5.0.8. is enclosed.
for payment to this Soldier.
Kindly obtain his receipt
hereon.

Receipt hereunder.

P. Kane *Cpt*
LIEUT. COLONEL,
Officer Commanding 2nd Bn. Ryl Nfld Regt.

Received the sum Five pounds
& eight pence in respect of
telegraphic remittance from the
Minister of Militia.

A. O. Guinness Maj.
Chief Paymaster & O. i/c Records.

C. Green
No. 5228 Rank Private

Witness M. Rockets

Green, C.

5228

Ray sept.

August 6th 1919.

#5228, Pte. C. Green.

Hant s Mr. T.B

Dear Sir:

Enclosed please find Discharge Certificate #3422.

Yours truly,

Capt.

Officer i/c Records.

RS/.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5225 Rank PLS Name Green C
 Intended place of residence Hants Harbor

2. Occupation Tradesman
 Classification of soldier E Medical Category BT

3. The above named man is discharged in consequence of

DEMOBILIZATION Eligible for War Service Gratuity

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

Place, ST. JOHN'S

Date JUL 9 1919

[Signature]
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place, ST. JOHN'S

Date JUL 9 1919

[Signature]
 Signature of soldier

[Signature]
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place, ST. JOHN'S

Date JUL 9 - 1919

[Signature]
 Signature of soldier

[Signature]
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 20-5-18 No. of days on Military
 Discharged from service 23-7-19 Plus 14 days Service 444

APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S

Date JUL 23 1919

[Signature]
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place, ST. JOHN'S

Date August 6/1919

[Signature]
 Officer in Charge
 The Royal Newfoundland Regiment

12
30
31
6
49

[Handwritten] B20791 3422

The Royal Newfoundland Regiment

Class for Demobilization: *76*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *8.7.19*

Regimental No. *5225*

Name *Green Chesley*

Address *Beants St.*

Present Medical Category *A.i.*

Recommended for:— (a) Immediate discharge

(b) ~~Standing Medical Board~~

Members of Board

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

J. Parsons
Senior Medical Officer

W. B. Deane
M. O. Depot

The Royal Newfoundland Regiment

DEMobilIZATION OF *Green, R.*

Reg. No. *5728* Rank *Pvt* Name *Green, R.*
 Date of Enlistment *20.5.18* Address *St. John's* District *St. John's*
 Occupation *Fisherman* Classification for Discharge Medical Category *AI*
 Recommendation S.M.B. Disability Rating
 Passed to Demobilization Officer with following documents:—

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

Date *8.7.19*

O. C. Discharge Depot

PARTICULARS FOR DEMOBILIZATION

i. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Chas Green

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable *#65*

(b) Clothing Supplied

Date *9-7-19*

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 2281 to his home
 at Hawthorn and Release Certificate No. 3362 issued.

Date 9-7-19 *J. A. Snowcroft*
 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 8-19

Date 7-7-19 *J. A. Snowcroft*
 Depot Paymaster.

Discharge approved for 23-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	1	N.F. Med.	D.F. 1	1
F. 178	W 3494	B 122	1	Board 1st.	" 2	2
R 178a	1 / D 400A	1 / B 1915	1	do 2nd.	" 3	2 Form B
B 179	D 400B	Form L		do 3rd.	" 4	
B 179a	1 / D 400C	Form K		do 4th.	" 5	
B 179b	B 103	ME 2			" 6	
B 179c	B 120	M 93				

Date 9-7-19 *J. A. Snowcroft*
 Demobilization Officer.

APPROVED.

Documents as above forwarded to—

Officer i/c Records.
 Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUL 23 1919 *J. P. Coofie Capt*
 O. C. Discharge Depot.

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

Date

Civil Re-establishment Committee



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

To resume former Occupation,

Green C.

Signature of Man.

Reg. No. 5928

J. H. Knowlton
Signature of the Vocational Officer or his Representative.

Place

St Johns

Date

9-7-19.

191

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

MEDICAL HISTORY

OF

Surname Green

Christian Name Chester

Table I.—GENERAL TABLE.

Birthplace:—Parish St. John's County Nfld

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	20	May	1918	191
	at	St. John's	at	
Declared Age	21	years		
Trade or Occupation	Fisherman		years	days
Height	5	feet	84	inches
Weight		746	lbs.	lbs.
Chest Measurement	Girth when fully expanded		37	inches
	Range of Expansion		5	inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V	6/6	R.E.—V	
	L.E.—V	6/6	L.E.—V	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defect but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	Lamm Baker			
(Rank)	Major			
				Medical Officer.
Enlisted	at	St. John's	at	
	on	20	day of	May
		1918		191
Joined on Enlistment	Corps	Regtl. No.	Corps	Regtl. No.
		Royal 1228		
		Nfld Regt		
Transferred to				
Became non-effective by	on	day of	191	on
(Signature)			day of	191
(Rank)				



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

Chesley Green

Regiment from which discharged **Royal Newfoundland**

Regimental number

5778

Intended address

Hants Hr.

Height on discharge

5 Feet *10*

Color of hair on discharge

Black

Complexion

Fair

Color of eyes

Blue

Descriptive Marks

—

Figure on discharge

Sally

Christian name of Father

Simon

Christian name of Mother

Rachel

Wife's maiden name in full

—

Date and place of marriage

—

Christian names of children

Hants Hr. June 7, 1896

Place and date of soldier's birth

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)

Chesley Green.

Pb.
(Rank)

Station

ST. JOHN'S.

Date

5-7-19

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



Station

Date

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

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

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

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

1. Unit and Corps. *Royal Artillery (Forward Coy.)* Former Trade or Occupation } *Fisherman*
2. Regt. No. *5728* 3. Rank. *P.Lt.* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Green* *W. J. Green* (a) Former Regts. or Corps; with Regt. Nos.
- (Surname) (Christian Names)
5. Age last birthday. *20*
6. Posted for duty on..... at..... in category (or grade).....
8. If the disability is an injury was it caused
- (a) in action (b) on field service (b) Date of Discharge;
- (c) on duty (d) off duty? (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—
- (a) When (d) Particulars of Pension or Gratuity (if any)
- (b) Where
- (c) Opinion of Court

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

Statement of Case.

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

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

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

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

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

No complaint of no sensibility

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

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

refatuation

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

W. Proenier, Capt. Rame
 Medical Officer in charge of case.

Station *Hazeley Down*

Date *2/4/19*

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

August 15, 1919

Mr. Chesley Greene,
Hants Harbor, T.B.

Dear Sir:-

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

Yours truly.

Captain & Paymaster.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes, if any questions are not applicable, the words "NOT APPLICABLE" must be written out. On completion this Declaration is to be returned to THE OFFICER I/C

RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

- Christian name..... *Chesley* 2. Surname..... *Greene*
3. Rank..... *Pvt* 4. Regtl. No..... *5228*
5. Address in full to which future payments of gratuity are to be forwarded..... *Hants Harbor* *P.B.*
6. Date of enlistment in the Regiment..... *Mon 20/1/18*
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..... *no*
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *no*
11. Were you on active service only in Hfld. If so, give dates and particulars of such service..... *Overseas*
12. Give total length of time which you served on active service, whether in Hfld. or Overseas..... *Fourteen months*
- 12

13. Have you had more than one enlistment? If so, give particulars of discharge and re-enlistments, and under what regimental numbers.
no

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.
no

15. Have you been issued with a War Service Badge?
no

16. Have you, during the present war, served in the Imperial Forces?
no

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.
no

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?
no

(b) If so, was such reversion in consequence of Misconduct or inefficiency?
no

19. Are you now serving in the Regt.? *no* If not give? - (a) date of discharge *July, 27/19* (b) Reason for discharge

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

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

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

Signature of Applicant: *G Green*
Place of Residence: *St Johns Harbor S.B.*
Declared before me at: *St Johns*

This 10 day of *July* 1919...

John M. Coakley

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

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

FORM K

No. 4135



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Chesley Green, Regl. No. 5278²

hereby agree, until further notification by me, and in, similar official form to make an Allotment of Sixty Dollars and 00 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 July 1/18.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
4-813	Father	Lincoln Green P.	Hants Hbr	60
Total Allotment, \$				60

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.) H. G. James 2/HK
 Officer Commanding
 Company
St Johns
June 17/1918

(Sig.) Chesley Green
 (Rank) Private

5
Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Number of Sheet The

Regiment of Royal Newfoundland

Signature of O. C. Company [Signature]

Regimental Number and Name		Enlistment		Trade
No.	<u>5228</u>	Age on	<u>21</u> years <u>0</u> months	<u>Fisherman</u>
Joined	Date	Place and Date of Enlistment	<u>St John's</u>	Religion
Joined	Date		<u>26. 5. 18</u>	<u>Methodist</u>
Joined	Date	Period of } with Colours <u>179</u> years. with Reserve <u>385</u> years.	Place of Birth	
Joined	Date		<u>St John's N. F. B.</u>	

Good Conduct Badges, Service pay or proficiency pay

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
-------	-----------------	------	-----------------------	---------	--------------------	--------------------	---	-----------------	---------

Demobilized St John's 6⁵/₁₉

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5278 Rank Pvt Name Green, C
 Date of Enlistment 20.5.18 Address Partz St District Trinity
 Occupation Fisherman Classification for Discharge B Medical Category A I
 Recommendation S.M.B. Disability Rating
 Passed to Demobilization Officer with following documents:—

N.F. Pj36	B 268	B 121	N.F. Med.	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 8-7-19 O. C. Discharge Depot H. H. H. H.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.
 I am in a position to resume civilian occupation.

Chesley Green

~~Handwritten text~~ passed to Vocational Officer for information and action.

Date

2. Clothing.
 Certified that Clothing Regulations have been complied with—
 (a) Clothing Allowance payable \$6.00
 (b) Clothing Supplied Chesley Green

Date 9-7-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *112281* to his home at *Hants 14* and Release Certificate No. *3362* issued.

Date *9-7-19*

J. A. Snowcroft
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 *1-1-19*

Date *9-7-19*

H. M. H. H.
Depot Paymaster.

Discharge approved for *25-7-19*

Forwarded with following documents to O.C Discharge Depot.

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

2 Form B

Date *9-7-19*

J. A. Snowcroft
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date *JUL 23 1919*

N. R. Cooper Capt
for O. C. Discharge Depot.

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

Date *July 23/19*

Reg. No. *1228* Rank *Plt.* Name *Green, C.*

Attested Address. *Hanks Hs.*

Allotment Allottee ..

Date of Allotment *0* Returned from Overseas *JUL 1 1919*

Returned on S S *Cassandra* Cause *Discharge*

9.7 19
23.7 19

PASSED TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED ON DEMOBILISATION

C.P. Form B. 179A 3228

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 382 (vi. 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 Depot*
- 2. Regtl. No. *5228* 3. Rank
- 4. Name *Green* *Chesley*
(Surname) (Christian Name)
- 5. Age last birthday *20*
- 6. Posted for duty on at
in category (or grade)
- 7. Former Trade or Occupation } *Sickerman*
- 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regtl. Nos.
- 8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge;
(c) Cause of Discharge.
- 9. If a Court of Inquiry was held on an injury state:—
(a) When (d) Particulars of Pension or Gratuity (if any)
(b) Where
(c) Opinion of Court

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

Statement of Case.

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

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

14. State whether the disabilities are

(a) attributable to

(b) aggravated by

(i.) Service during the present war

(ii.) Previous active service.

(iii.) Climate in pre-war service

(iv.) Ordinary military service before the war

(v.) Serious negligence or misconduct on the man's part.

14 (a). If not due to any of these causes, to what specific condition do you attribute it?

The complaints of his disability

15. What is his present condition?

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

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

16. Was an operation performed? If so, when and what was its nature?

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

18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

20. Do you recommend—

(a) Discharge as permanently unfit?

(b) Change to United Kingdom?

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

Reprobation

W.E. Proctor Capt Rame

Medical Officer in charge of case.

Station *Hazley, Linn*

Date *22/4/16*

* 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