



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4609 Name Wm S Hatcher Corps RofR

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>William S Hatcher</u> |
| 2. What is your full Address? | 2. <u>Road Blanche</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>75</u> years <u>7</u> Months |
| 5. What is your Trade or Calling? | 5. <u>School Teacher</u> |
| 6. Are you Married? | 6. <u>no</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>no</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? | 10. (Name)
(Corps) |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes</u> |

I, Wm S Hatcher 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.

Wm S Hatcher SIGNATURE OF RECRUIT.
James Pittman Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.
 I, Wm S Hatcher do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.
 The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.
 The above questions were then read to the Recruit in my presence.
 I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St John's on this 22 day of April 1918
Geo. Leamy Major
 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.....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).....

Effective 1-6-18

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name William D. Hatcher
 Apparent age years months. Height 5 feet 7 inches
 Chest Measurement { Girth when fully expanded 35 inches
 Range of expansion 4 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Robert Hatcher
Roethmane | Relationship Father

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or L'opot	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. Pny		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>April 22. 1918</u>									<u>Lane Lt. 13 7/18</u>
Joined at <u>St John's</u> on <u>April 22. 1918</u>									
<u>Discharged August 7 (1919)</u>									
<u>Report for duty 1-6-18</u>									
<u>Embarked at St John's N.S. Colubella to Halifax N.S. 22. 7. 1918.</u>									
<u>To Newfoundland for demobilization 24-6-1919.</u>									
<u>Revised Newfoundland 1. 7. 1919</u>									
<u>Demobilization St John's 7. 8. 1919</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>7-8-1919</u> [date of discharge]									
									<u>1</u> years <u>68</u> days
Pensions									

W. Hatcher

C.R.

4609

PRO

Despatching
Office
Stamp



Arrival
Office
Stamp

No. 337

From

Trinitia Lodge

Registered Letter Addressed—

Mr. S. Hatcher #609
743 University St
Montreal

C.R. 4609

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

~~XXXXXXXXXXXX~~

The discharge of the undernoted on demobilisation has been CONFIRMED
by officer i/c Records from 7-8-19.

4609 E/S. W. Hatcher

C.R. 4609

Extract from Daily Orders Part II Unit The Royal H21A. Regt.
St. John's, July 15th, 1919.

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

4609 L/Cpl. W.Hatcher.

C.R. 4609

Extract from Daily Orders Part VIII Unit The Royal Nfld.
Regt. St. John's, July 24th, 1919.

4609 B/Cpl. W. Hatcher.

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

C.R. 4609

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

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

#4609 L/Cpl. William Hatcher.

CF 4609

Extract from Daily Orders part 11, from Unit The Royal
Rifles, Regt. St. John's, dated July 15, 1918.

#4609 Pte. W. Hatcher.

To be Lance-Corporal from July 15, 1918.

C.R. 4609

Extract from Daily Orders part 11, from Unit The Royal Wfld.
Regt. St. John's, dated April 25, 1918.

#4609 Pte. William Hatchet.

Attested for General Service with the Royal Wfld. Regt. from
22/4/18 to repost 1/6/18.

No. 21605/2492/P.&.A.

21005 21005
NEWFOUNDLAND CONTINGENT



From:

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

21005
Officer Commanding,
2/Bn. Royal Nfld. Regt.,
Hazelby Down Camp,
Winchester.

30th December, 1918

2-1-1919

Subject: 4609 L/C. W. Hatcher,

Receipt hereunder.

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

Stamp

LIEUT. COLONEL
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commanding 2nd Battalion, Royal Newfoundland Regiment.

"Pay to 4609 Hatcher, £10.0.0.

Received the sum of Ten

Draft £ 10.0.0. is enclosed for payment to this Soldier.

Pounds on account of

Kindly obtain his receipt hereon.

cable remittance from Newfoundland.

W. attached

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

No. 4609 Rank L/Cpl

Witness H. Maunders

B

No. 18952/2104

65496
F.C.



NEWFOUNDLAND CONTINGENT

From:

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

To:

Officer Commanding,
2/Bn Royal Nfld. Regt.
Winchester.

21st November 1918

Subject: 4609, L/Cpl. W. Hatcher,

Nov. 22nd 1918

Receipt hereunder.

Chas. J. [Signature]

LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commanding,
Royal Newfoundland Regiment.

Received the sum of £10

pounds on account of

cable remittance from Newfoundland.

W. Hatcher

No. 4609 Rank L/c.

Witness A. L. Carter, etc.

With reference to the following telegram (9984) from the Hon. Minister of Militia, received

Pay to 4609 Hatcher, £10:0:0

Draft £10:0:0 is enclosed for payment to this Soldier.

Kindly obtain his receipt hereof.

A. J. [Signature]

Chief Paymaster & O. i/c Records.

No. 1946/286

067148

N.F.P. /79.

From: NEWFOUNDLAND CONTINGENT

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

To: *[Signature]* Officer Commanding,
2/Bn Royal Nfld Regt.
Winchester.

3rd February 1919

4609. L/Cpl Hatcher. W.S.

With reference to the following telegram from the Minister of Militia / / (1055.)

"Pay to- 4609. Pte. W.S. Hatcher."

£10.0.0.

Cheque £10.0.0. is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

[Signature]
Chief Paymaster & O. i/c Records.

B

February 6th 1919

Receipt hereunder,

[Signature] LIEUT. COLONEL
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commdg. 2nd Batt'n.

Received the sum of Ten pounds

in respect of

telegraphic remittance from the Minister of Militia.

W. S. Hatcher

No. 4609 Rank Lieut Col / moral

Witness M. Rockets

No. 4165/825

N.F.P./79.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
2/Bn. Royal Newfoundland Regt.
Winchester.

P. D. 064 278
14/3/1917
14th. March 1919

March 15th to _____ 1917

4609 L/Cpl. Hatcher W. S.

With reference to the following telegram from the Minister of Militia / / (77)

Receipt hereunder.
P. Kane LIEUT. COLONEL.
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commandg. 2nd Batt'n.

"Pay to- 4609 Hatcher
£6. 0. 0.

Received the sum of *£6.00*
in respect of

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

telegraphic remittance from the Minister of Militia.

A. D. ...
Chief Paymaster & O. i/c Records.

W. S. Hatcher
No. *4609* Rank *Lower Corp.*
Witness *W. Roberts*

B

N.F.P./80

NO. 6447/935

N.F.C. 100.

From. NEW FOUNDLAND AND CONTINGENT

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

To: Officer Commanding,
2nd Batt. Ryl. Nfld Regiment
Winchester



29th April 1919

May 2nd 1919

4609 L/C Hacher W.S.

With reference to the following telegram from the Minister of Militia / / (155)

Receipt hereunder.
J. Seymour
LIEUT. COLONEL.
OFFICER COMMANDING 2ND BR. ROYAL NEWFOUNDLAND REGT.

"Pay to-4609 Hacher W.S.

Received the sum of Six pounds

£6-0-0

Cheque £6-0-0 is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

19
15
in respect of telegraphic remittance from the Minister of Militia.

Chief Paymaster & O. i/c Records.

W. F. Hacher

No 4609 Rank L/cpl.

Witness W. Barnes

B

Hatcher, D^{rs}

4609

Ray Sept.

August 7th 1919.

#4609, L/C. W. Hatcher.

Rose Blanche.

Dear Sir;

Enclosed please find discharge Certificate
3541.

Yours truly,

Capt. &

Officer i/c Records.

RS/.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4609 Rank 4Cpl Name Hatcher Ed
 Intended place of residence Rose Blanche
 2. Occupation School Teacher
 Classification of soldier E Medical Category A I

3. The above named man is discharged in consequence of
DEMobilIZATION
Eligible for War Service Gratuity

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.
 Place, ST. JOHN'S
 Date JUL 10 '1919'
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.
 Place, ST. JOHN'S
 Date JUL 10 1919
 Signature of soldier
 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 10.7-19
 Signature of soldier
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 22.4-18 No. of days on Military
 Discharged from service 24.7-19 Plus 14 days Service 473

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge, The Royal Newfoundland Regiment, twenty eight days from date.
 Place, ST. JOHN'S
 Date JUL 24 1919
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place, ST. JOHN'S
 Date August 7/1919
 Officer in Charge Records
 The Royal Newfoundland Regiment

MSB 5079/2541

9
21
20
31
7
28

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. *4609*

 Name *Hatcher Hm*

 Address *Rose Blanche*

 Present Medical Category *A-1*

 Recommended for:—

- (a) Immediate discharge
- (b) ~~Standing Medical Board~~

Members of Board

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

L. Paterson
Senior Medical Officer

F. Berden
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 609 Rank Sgt Name Hatcher W. Joseph
 Date of Enlistment 23-4-18 Address Rose Blanche District B. H. 100
 Occupation School Teacher Classification for Discharge 4 Medical Category A
 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.
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. Alford W.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

W. J. Hatcher

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable _____

(b) Clothing Supplied _____

Date 10-9-19

O i.c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant ^{DP2366}..... to his home
 at Rose Blanche and Release Certificate No. 3387..... issued.

Date 10-7-19.....

J.A. Snoweoff
 Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection
 therewith settled. He has received pay and allowances to 7-8-19.....

Date 10-7-19.....

H. [Signature]
 Depot Paymaster.

Discharge approved for 24-7-19.....

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	✓	N.F. Med.	D.F. 1	✓
F 178	W 3494	B 122		Board 1st	" 2	
R 178a	D 400A	B 1915		do 2nd	" 3	2. Form B
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 10-7-19.....

J.A. Snoweoff
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
 Board of Pension Commissioners.

with following additional documents

Eligible for War Service Gratuity

Date JUL 24 1919.....

N.R. Cooper 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.

W. S. Hatcher

Signature of Man.

Reg. No. 4609

J. H. Crawford

Signature of the Vocational Officer or his Representative.

Place

M. Johns

Date

10-7-19

191

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

MEDICAL HISTORY

Surname Hatcher OF Christian Name William

Table I.—GENERAL TABLE.

Birthplace:—Parish Rose Blanche County Nfld.

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>22nd</u> day of <u>April</u> 191 <u>8</u>		on _____ day of _____ 191	
	at <u>St John's Nfld.</u>		at _____	
Declared Age	<u>25</u> years _____ days		years	days
Trade or Occupation	<u>School Teacher</u>			
Height	<u>5</u> feet <u>7</u> inches		feet	inches
Weight	<u>132</u> lbs.			lbs.
Chest Measurement	Girth when fully expanded... <u>35</u> inches			inches
	Range of Expansion... <u>4</u> inches			inches
Physical Development				
Vaccination Marks	Arm	<u>(line)</u>		
	Number			
When Vaccinated	<u>7 years ago</u>			
Vision	R.E.—V=	<u>4/6</u>	R.E.—V=	
	L.E.—V=	<u>6/6</u>	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>L. Munn Patterson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.			Medical Officer.
Enlisted	at <u>St John's Nfld.</u>		at _____	
	on <u>22nd</u> day of <u>April</u> 191 <u>8</u>		on _____ day of _____ 191	
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment	<u>The Royal Nfld Regt.</u>			<u>4609</u>
Transferred to				
Became non-effective by	on _____ day of _____ 191		on _____ day of _____ 191	
[Signature]				
[Rank]				

At 1860

Provincia di ...

Roma e ...

Dec. Reg. L. F. Bn.

V. p. ...

1860

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

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

1. Unit and Corps. *Royal Newfoundland* } Former Trade or Occupation } *School Teacher*
2. Regtl. No. *4609* 3. Rank. *Cpl* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Hatcher* *Wm* (a) Former Regts. or Corps ;
 (Surname) *Wm* (Christian Names) with Regtl. Nos.
5. Age last birthday *25*
6. Posted for duty on at
 in category (or grade)
8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty ? (b) Date of Discharge ;
 (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
 (a) When (d) Particulars of Pension or Gratuity
 (b) Where (if any)
 (c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179a (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. *nc*
12. Place of origin of disability. *at*
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. *nc*

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? }

see Complaints of no disability

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

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.)

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

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

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

Repatriation

W. E. Prosser, Capt. R.D.M.C.

Medical Officer in charge of case.

Station *Mazely Brown*

Date *4/14/19*

* 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



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 *William S. Hatcher*

Regiment from which discharged *Royal Newfoundland*

Regimental number *608*

Intended address *Rose Blanche*

Height on discharge *5* Feet *8*

Color of hair on discharge *Black*

Complexion *Fair*

Color of eyes *Grey*

Descriptive Marks
Figure on discharge *Medium*

Christian name of Father *Robert*

Christian name of Mother *Annie*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Rose Blanche, 29 March 1893*

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) *William S. Hatcher*

A. C.
(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.



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

Station

Date

August 15, 1919

Mr. William Hatcher,
Rose Blanche.

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 & Kaymaster.

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 *W. Moran* &..... 2. Surname *Hatters*.....

3. Rank *Lt. Col.*..... 4. Regtl. No. *4609*.....

5. Address in full to which future payments of gratuity are to be forwarded, *Rose Blanche, South Coast, Newfoundland*

6. Date of enlistment in the Regiment... *2.2.1914*.....

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

Not Applicable.....

8. Relationship of such dependents... *Not Applicable*.....

9. Address in full of such dependents... *Not Applicable*.....

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

11. Were you on active service only in Mfld. If so, give dates and particulars of such service... *No*.....

12. Give total length of time which you served on active service, whether in Mfld. or Overseas... *173 days Newfoundland and England*.....

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? *Not applicable*.....

19. Are you now serving in the Regt.? *Yes*. If not give? - (a) Date of discharge *July 10/19*..... (b) Reason for discharge. *Senst. (Temp.)*.....

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service. *No*.....

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*..... *I am not*.....

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: *William B. Hatala*

Place of Residence: *Rose Blaine*

Declared before me at: *St. Johns*

This *10th* day of *July* 19*.19*.....

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

John M. Corbett

POST DISCHARGE PAY.

Date paid	Paid Soldier.	Paid Dependant.	War Service Gratuity.	Net amount due
.....
.....
.....

Certified correct.

Register

November 13, 1919.

F. C. R.

Major Howley,
O. I. C. Pay and Records.

Please pay W. S. Hatcher 4609,
the sum of Two hundred and ten dollars,
being first moiety towards Theological course,
plus fifty dollars towards transportation to Montreal. Charge
same to the Civil Re-establishment Committee.

\$210.00

Hatcher
Major

For V. O.

ok. received
Hatcher

ACCOUNT	19583	<i>Law</i>
CH. NO.		
IND. LEGAL		
PAY LEGAL		
GR. LEGAL		

January 12th 1920

Major Howleg
O. I. C. Records

J.P.B.

Please furnish me with a Sight Draft on the Bank of Montreal Montreal, for the sum of one hundred and sixty dollars in favour of Wm. Hatcher, 4609 being second moiety of assistance granted towards course in Arts in McGill University. and charge same to Civil Re-establishment Committee

\$160.00

Exch - 20

W.S. Rackall

NO.	25957	INITIALS	<i>W</i>
DATE	_____	INITIALS	_____
PAY TO ORDER OF	_____	INITIALS	_____
AMOUNT	_____	INITIALS	_____

.....
Vocational Officer

24
January 13, 1920.

The Bank of Montreal,

Dear Sirs:

Kindly furnish draft
on Montreal, in favour of Wm. Hatcher, for the
sum of \$160.00, for which I enclose cheque for
\$160.20, which includes cost of same.

Yours truly,

Major
Paymaster

LM-
Enc.

C.R. 4609

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 *W. S. Walker*

Date *Dec. 16/19.*

Place *Queen's College*

*Montreal
Canada*

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121.
30.

Number of Sheets 1

Regiment of Royal Marines

Signature of O. C. Company A. James

Regimental Number and Name		Enlistment	Trade	Good Conduct Badge, Service pay or proficiency pay
No. <u>1609</u>	<u>Hatcher Wm</u>	Age on <u>25</u> years — months	<u>School Teacher</u>	<u>13-7-18 Promoted to Lance Corporal</u>
Joined _____ Date _____		Place and Date of Enlistment <u>St John's 22.2.18</u>	Religion <u>C of E</u>	
Joined _____ Date _____		Period of } with Colours <u>10 1/2</u> years. with Reserve <u>5 1/2</u> years.	Place of Birth <u>Rose Blanche</u>	
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
				<u>Demobilized St John's</u>			<u>7 8/19</u>		

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

DEMOLIZATION OF

Reg. No. 4609 Rank Sergeant Name Hatcher W.
 Date of Enlistment 22-11-18 Address Paris Beach District B-11
 Occupation School Teacher Classification for Discharge F Medical Category H
 Recommendation S.M.B. _____ Disability Rating _____
 Passed to Demobilization Officer with following documents:—

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1
B 178	W 3494	B 122	Board Ist.	" 2
B 178a	D 400A	B 1915	do 2nd.	" 3
B 179	D 400B	Form L	do 3rd.	" 4
B 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 L. J. Mous W.
O. C. Discharge Depot.

PARTICULARS FOR DEMOLIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

W. B. Hatcher

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with—

(a) Clothing Allowance payable \$60

(b) Clothing Supplied Complete

Date 10-7-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. TP 2366 to his home at Rose Blanche and Release Certificate No. 3387 issued.

Date 10-7-19 J.A. Bruneoff
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 7-8-19

Date 11-7-19 J.A. Bruneoff
Depot Paymaster.

Discharge approved for 24-7-19

Forwarded with following documents to O.C Discharge Depot.

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

Date 10-7-19 J.A. Bruneoff
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUL 24 1919 K.R. Cooper Capt.
O. C. Discharge Depot.

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

Date July 31 1919

Reg. No. *4609* Rank *PL* Name *Habeber, Tom*
Attested Address *Rose Blanche*
Allotment..... Allottee ..
Date of Allotment..... Returned from Overseas *JUL 1 1919*
Returned on S S *Cassandra* Cause *Dysentery*

8.7.19
24.7.19

PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILISATION.

C.R. 4609

Army Form B. 179a

Note.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve. In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

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

1. Unit and Corps. Royal Infantry Former Trade or Occupation Soldier
2. Regtl. No. 4609 3. Rank Private 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regtl. Nos.
4. Name Butcher (Surname) William (Christian Names) (a) Former Regts. or Corps; with Regtl. Nos.
5. Age last birthday 28
6. Posted for duty on at in category (or grade)
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—
(a) When (d) Particulars of Pension or Gratuity (if any)
(b) Where
(c) Opinion of Court

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

Statement of Case.

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

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.)

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?

Repatriation

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

W.B. Proctor Capt R.A.M.C.
 Medical Officer in charge of case.

Station *St. Agely, Bourne*

Date *4/14/19*

* 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