



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4845 Name Harry Hayward Corps meth

Questions to be put to the Recruit before Enlistment.

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

I, Harry Hayward 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.

A
1-5-18

Harry Hayward SIGNATURE OF RECRUIT.
James Oddie Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Harry Hayward 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 1st day of May 1918

Signature of Attesting Officer James Oddie

† 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)

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Harry Hayward
 Apparent age 19 years 8 months. Height 5 feet 6 inches
 Chest Measurement { Girth when fully expanded 35 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Alfred Hayward,
Bonaville | Relationship mother

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Lepot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>1-5-1918</u>									
Joined at <u>St John's</u> on <u>May 1-1918</u>									
Discharged <u>July 5-1919</u>									
<u>Embarked St. John's train to Halifax N.S. 11-6-1918</u>									
<u>Embarked for B.E.F. 26-10-18</u>									
<u>Embarked France 26-10-18</u>									
<u>Joined Battle. 3-11-1918.</u>									
<u>Transfer from Queen 22-4-19 Arrived Demobilized 23-4-19</u>									
<u>to the embarkment for demobilization 22-5-1919</u>									
<u>Arrived the embarkment 1-6-1919</u>									
<u>Demobilization St. John's 5-7-1919</u>									
Total Service forfeited as above _____									
Total Service towards Engagement to <u>5-7-1919</u> (date of discharge) <u>1</u> years <u>66</u> days									
Pensions " _____ (" ") " _____ "									

C.R. ~~4680~~

4845
" 46.

Extract from Orders by Lt. Col. B.J. Barten, D.S.O.,
Commanding 2nd Battalion Royal Newfoundland Regiment, dated
10/10/18.

The undermentioned will hold himself in readiness
to join the Newfoundland Forestry Corps on one months
probation as from 11/16/18. Major J.W. March, M.C.,
will conduct this party.

"C" Company.

4680 (?) L/Cpl. Hayward (?)

C.R.

4845'

Extract from Daily Orders part II, Unit the Royal Field
Regiment dated July 9th. 1919.

The discharge of the undernoted on demobilisation has
been CONFIRMED by Officer i/o Records on noted date.

#4845 Pte, Harry Hayward

5-7-19.

C.R. 4845

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, Junellth, 1919.

The discharge of the undernoted on demobilization has been
APPROVED by O.C. Discharge Depot, with effect from 21-6-19.

4845 Pte. H. Hayward.

C.R.

4845

Extract from Daily Orders Part II Depot, St. John's,

Date

106-19

4845 Pte. H. Hayward

Reported at Headquarters 1-6-19. ex "Corsican"
which sailed Liverpool May 22/1919.

C.R. 4845

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

The undermentioned of the 1st. Battalion left
Rover Camps 28/4/19, embarked at Havre 28/4/19,
disembarked at Southampton 28/4/19 and reached
Hazeley Down Camp 28/4/19.

#4845 Pte. H. Hayward.

C.R. 4845

Extract from Daily Orders Part 11 Unit The Royal Nfld.

Regt. by Lt. Col. T.G. Mathias , D.S.O. 1st Bn. 4-11-18.
n

The following joined the Battn. 3-11-18.

4845 Hqs. H. Haywards

A. Coy.

C.R. 4845

Extract from Nominal Roll Re-enforcement Draft No.55, Embarked Folkestone
26/10/18, from 2nd Batta. Royal Newfoundland Regiment, Haslepy Down Camp,
Winchester, to 1st Batta, Royal Newfoundland Regiment, B.E.F.

4845 Pte. Hayward, H.

MP.

C.R. 4840

Extract from Daily Orders Part 11. from Unit The Royal W21d.
Regiment, St. John's, dated June 14th 1918.

4845 Pte H. Hayward

Embarked for Overseas with draft 11-8-18.

C.R. 4845

Extract from Daily Orders part 11, from Unit The Royal "Fid."
Regt. St. John's, dated May 2nd, 1918.

#4845. Pte. H. Hayward.

Attested for General Service with the Royal WFLD. Regt. from
1/5/18.

H. Hayward

4845

P. H. P. O.

To:- The Chief Paymaster,
Royal Newfoundland Regiment,
58 Victoria Street,
London, S.W.

Sir:-

Please charge the amount set opposite my name to my account and pay it to the N.W.C.A. "Prisoners of War Fund" in quarterly instalments for the period of one year.

Commencing on the 1st July 1918.

Regt. No.	Rank	Name	Amount	Signature
1844	Pte	Hayward	£2.50	H Hayward

I have the honour to be, Sir,
Your obedient Servant.

H. Hayward

to July 1/18

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

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

1. Unit and Corps... *Royal Newfoundland* 7. Former Trade or Occupation } *Fisherman.*
2. Regtl. No. *4845* 3. Rank... *Pte* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Hayward* *H.* (a) Former Regts. or Corps, with Regtl. Nos.
- (Surname) (Christian Names)
5. Age last birthday... *20*
6. Posted for duty on... *25/4/18* at... *St. John's*
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 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. *hi*
12. Place of origin of disability. *hi*
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. *hi*

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? *he*

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.)

He explains you 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? *no*

17. If not, was an operation advised and declined? *no*

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? *no*

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? *no*

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. B. ...
W. B. ...
Capt. Name.

Station *W. B. ...*

Date *29/3/19*

Medical Officer in charge of case.

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

From: NEWFOUNDLAND CONTINGENTChief Paymaster & O. i/c Records,
Newfoundland Contingent,
Pay & Record Office,
58, Victoria Street,
London, S.W. 1.To:
Officer Commanding,
2/Bn. Royal Newfoundland Regt.,
Winchester.September 26th, 191830 SEP 1918 191Subject: 4845, Pte. H. Hayward,With reference to the follow-
ing telegram (8321) from the Hon.
Minister of Militia, received

"Pay to 4845, Pte. H. Hayward, £4.0.0."

Draft £4.0.0. is enclosed
for payment to this Soldier.
Kindly obtain his receipt
hereon.

Chief Paymaster & O. i/c Records.

Receipt hereunder.

Chant
LIEUT. COLONEL.
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commdg. Batt'n
Royal Newfoundland RegimentReceived the sum of £4.0.0
four pounds on account of
cable remittance from Newfoundland.H HaywardNo. 4845 Rank pte

Witness

B. Manning

No. 4850/208

From: NEWFOUNDLAND CONTINGENT NEWFOUNDLAND CHIEF PAYMASTER 89, VICTORIA STREET, S.W. 1. N.F.P./80

Chief Paymaster & O.I/c Records,
Newfoundland Contingent,
58, Victoria Street;
London, S.W. 1.

To: ~~4850~~ 1/Bn. Royal Newfoundland Regiment,
ENGLAND.
B.E.F.

A. 27th March 191

10-4-191
4850 - The Hayward

4845 Pte. Hayward H.

With reference to the following telegram from the Minister of Militia, / / (99)

properly dealt

This man wishes this amount retained to credit of his account please

"Pay to- 4845 Hayward

£6. 0. 0.

Kindly advise whether this remittance should be

- (1) forwarded to you for payment to this Soldier;
- (2) retained to credit of his account; or
- (3) otherwise dealt with.

[Handwritten signature]

Chief Paymaster & O. i/c Records

Hayward, N

4545

Hay Sept.

July 5, 1919

#4845 Pte. Harry Hayward,

Bonavista, B.B.

Dear Sir:-

Please find enclosed Discharge

Certificate No. 26361,

Yours truly

Captain
Raymaster c/o O.I/c Records.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4.845 Rank Plt Name Hayward H
 Intended place of residence Bonaville

2. Occupation Fisherman
 Classification of soldier F Medical Category A 2

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

Eligible for War Service Gratuity

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

Place ST. JOHN'S
 Date JUN 7 1919
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date ST. JOHN'S
JUN 7 1919
 Signature of soldier H. Hayward
 Signature of witness Ambleston
 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 and Date ST. JOHN'S
JUN 7 1919
 Signature of soldier H. Hayward
 Signature of witness James Leonard
 Signature of witness SM-

STATEMENT OF SERVICE

7. Enlisted for service 1-5-18 No of days on Military
 Discharged from service 21-6-19 plus 14 days Service 431.....

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S
JUN 21 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 July 5/1919
 Officer i/c Records
 The Royal Newfoundland Regiment

AB 2079/2626

The Royal Newfoundland Regiment

Class for Demobilization:

E. 6.

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *6.6.19*

Regimental No. *4 F 4 5*

Name *W. J. ...*

Address *...*

Present Medical Category *A-1*

Recommended for— (a) Immediate discharge
(b) ~~Standing Medical Board~~

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

Members of Board

W. ...
Senior Medical Officer

...
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4045 Rank Private Name Hayward S H
 Date of Enlistment 1-8-18 Address Paradise District Paradise
 Occupation fisherman Classification for Discharge H Medical Category H.1
 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 6-6-19

O. C. Discharge Depot. H. Hayward

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable. #60.00
 (b) Clothing Supplied At the barracks

Date 7-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. PA 1553 to his home at Bonanza and Release Certificate No. 21-6-19 issued.

Date 7-6-19

J.A. Shaw Capt
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 5-7-19

Date 7-6-19

Depot Paymaster.

Discharge approved for 21-6-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	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 92		

2 Form B

Date 7-6-19

J.A. Shaw Capt
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 JUN 21 1919

R.H. Gait 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

H Hayward

Signature of Man.

Reg. No. *4846*

J. A. Shawbess

Signature of the Vocational Officer or his Representative.

Place *St Johns*

Date *JUN 7* 1919

191

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

MEDICAL HISTORY

Surname Kayward OF Christian Name Kerry

Table I.—GENERAL TABLE.

Birthplace:—Parish Bonaville County Nfld

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	1	May	1918	191
Declared Age...	at	19 years		at
Trade or Occupation	Fisherman			
Height	5	feet	6	inches
Weight	130 lbs.			
Chest Measure- ment {	Girth when fully expanded....	35 inches		inches
	Range of Expansion..	3 inches		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 defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>James Paterson</u>			
(Rank)	year			
	Medical Officer.		Medical Officer.	
Hullisted	at	1918		at
Joined on Enlistment...	on	day of	May	1918
	Corps.	Regtl. No.		Corps.
		The Royal 484 th		
	Nfld Regt			
Transferred to..				
Became non-effective by	on	day of	191	on
(Signature)				
(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 *Harry Hayward*

Regiment from which discharged **Royal Newfoundland**

Regimental number *H 842*

Intended address *Bonavista*

Height on discharge *5* Feet *6*

Color of hair on discharge *Dark Brown*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *—*

Figure on discharge *Medium*

Christian name of Father *Alfred*

Christian name of Mother *Emily*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Bonavista, Aug. 18th 1899*

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)

Harry Hayward *Pte.*
(Rank)

Station **ST. JOHN'S.**

Date *5-4-19*

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



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

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

1. Unit and Corps. *Royal Newfoundland Land* 7. Former Trade or Occupation } *Fisherman*
2. Regt. No. *4846* 3. Rank. *Plt.* 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regt. Nos.
4. Name *Hayward, A.*
(Surname) (Christian Names)
5. Age last birthday. *20*
6. Posted for duty on *25. 11. 18* at *St. John's* 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 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? } *n/a.*

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 complaints of no 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 ?

na
na
na
na

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. J. Proctor
Medical Officer in charge of case.

Station *Hampstead Camp*

Date *29. 11. 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

Casualty Form—Active Service.

Regiment or Corps 21st ROYAL NEWFOUNDLAND REGT.Rank Pvt Surname Hayward Christian Name HarryReligion Meth Age on Enlistment 19 years 8 monthsEnlisted (a) 1/5/18 Terms of Service (a) Duration Service reckons from (a) 1/5/18

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

Extended (.....) Re-engaged (.....) Qualification (b)
S (.....) or Corps Trade and rateOccupation Fisherman J. M. Emerson Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 215, Army Form A. 24 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. 215, Army Form A. 24, or other official documents.
Date	From whom received				
		Embarked ...		26 OCT 1918	
		Disembarked		3/11/18	
		Joined Battalion			
		Arrived in UK		9/3/19	

(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, Shoeing-Smith, etc.

W. 5527—M2225 1000m/117 (25648) C.F.A.S., Ltd., Forms B. 103 E/1555.

[P.T.O.]

Next of Kin: mother, Miss Alfred Hayward Donovista 1st Lt.
 (Signature)

5924

Bonavista

24-7-19

Dear Sir:- I am writing to you to see about my money I havent got any since I came home all the rest of the boys got it or I cant get back to my old job again what I was doing before I enlisted I am going away and I thought I would write to see about my money fast before I go

I remain
yours truly

4845 pte Harry Hayward

July 10/19
Aug 5/19

sep 5/19 mailed to Bonavista

File

July 29th 1919.

Mr. H. Hayward,
Bonaville.

Dear sir:

Referring to your application, I enclose
cheque for seventy dollars (\$70.00) being amount
of first payment due you on account of War Ser-
vice Gratuity.

Yours truly,

Capt & Paymaster.

RB-

1393

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 & RECORDED OFFICES, ST. JOHN'S.

- Christian name..... *Harvey* 2. Surname..... *Haywood*
- 3. Rank..... *Pte* 4. Regt. No..... *4845*
- 5. Address in full to which future payments of gratuity are to be forwarded..... *Bonavista -*
-
- 6. Date of enlistment in the Regiment..... *May 1/18*
- 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..... *to*
- 9. Address in full of such dependents..... *to*
-
- 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..... *Thirteen months*
and 20 days 13.

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

Not applicable

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

£ 71.69. Clothm. Etc

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) Rate of discharge. *June 2/19* (b) Reason for discharge.

Demobilization

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

France, Belgium & Germany

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: *H Hayward*

Place of Residence: *Bonanza*

Declared before me at: *A John used*

This *7th* day of *June* 19*19*

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

POST DISCHARGE PAY.

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

Certified correct.

Paymaster

Receipt for Army Book 64

No. *4845* Name *Hayward*

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

Name *Harry Hayward*

Date. *Aug. 3/20*

Place. *Port Union*

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

WJ

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121.
39.Number of Sheet oneRegiment of Royal Marine ArtillerySignature of O. C. Company G. J. Smith

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.		Age on	years	months	
<u>4845</u>	<u>Hayward H</u>	<u>18</u>	<u>5</u>	<u>8</u>	
Joined	Date	Place and Date of Enlistment		Religion	
Joined	Date	<u>St John's</u>		<u>Methodist</u>	
Joined	Date	Period of		Place of Birth	
Joined	Date	with Colours	<u>66</u>	<u>Bonanza</u>	
		with Reserve	<u>368</u>		

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</u>	<u>St John's</u>	<u>5-19</u>			

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 505 Rank Plt Name Hayward A.
 Date of Enlistment 1-5-18 Address Bonaville District Bonaville
 Occupation Quartermaster Classification for Discharge H. Medical Category A.1.
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:-

N.F. F36	B 268	B 121	N.F. Med.	D.F. 1.	1
B 178	W 3494	B 122	Board 1st.	" 2.	
B 178a	D 400A	B 1915	do 2nd.	" 3.	3
B 179	D 400B	Form L	do 3rd.	" 4.	
B 179a	D 400C	Form K	do 4th.	" 5.	
B 179b	E 103	ME 2.		" 6.	
B-179c	B 120	M 93			

Date 6-6-19 for H. Hayward O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

H Hayward

Particulars 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 Ameliorated

Date 7-6-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 17-15-20 to his home at Comanada and Release Certificate No. 2441 issued.

Date 7-6-19
J. H. Shaw Capt.
 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 5-7-19.

Date 7-1-19
 Depot Paymaster.

Discharge approved for 21-6-19

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 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		

2 Form B

Date 7-6-19
J. H. Shaw Capt.
 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 JUN 21 1919
R. H. Sait Capt.
 O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.
 Date June 14/19
J. H. Shaw Capt.
 Officer in Records.

Reg. No. *4841* Rank *Plt* Name *Hayward. H*
Attested Address *Monrovia*
Allotment Allottee
Date of Allotment Returned from Overseas *29.1.19.*
Returned on S.S. *Corrian* Cause *Discharge*

6-6-19 PASSED TO DEMOBILIZATION OFFICER
21-6-19 DISCHARGE APPROVED ON DEMOBILISATION.

2/2/19

DEPARTMENT OF VETERANS AFFAIRS
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION
AVIS DE DÉCÈS

TO:
A:

DATE ... 27 Sept. 73

NAME HAYWARD Harry G.
NOM

Service No. 4845 WW1
Matriculo No

CPC No.
CCP No

WVA No. 236287
AAC No

Information Received from: S.P.M.E. "NF" Dist.
Information reçue de:

Date of Death N/S
Date du Décès

Place N/S
Endroit

Distribution: WSR-DASG ✓
VI - ASS
DO - BD
HO - BC

Pour le chef,

for Chief, Central Registry Division.
Dépôt central des dossiers.