



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5289 Name Dorman Huster Corps Medt.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---|
| 1. What is your name? | 1. <u>Dorman Huster</u> |
| 2. What is your full Address? | 2. <u>Springdale 213.</u> |
| 3. Are you a British Subject? | 3. <u>Yes.</u> |
| 4. What is your age? | 4. <u>19</u> Years <u> </u> Months |
| 5. What is your Trade or Calling? | 5. <u>Lumberman</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, Dorman Huster 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.

22/5/18

Dorman Huster SIGNATURE OF RECRUIT.
R. R. Poulter Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Dorman Huster 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..... on this 22 day of May 1918

Signature of Attesting Officer Edwards Lieut

↑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 May 22 1918
Place St. John's } 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

5289

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

Name Dorman Slyseter
 Apparent age 19 years _____ months. Height 5 feet 3 3/4 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 Nathaniel Slyseter
Dorman Slyseter | Relationship Father.
Springdale, G.B. Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards list of engagement reckons from <u>22.5-18</u>									
Joined at <u>St John's</u> on <u>May 22. 1918.</u>									
<u>15/7/19</u>									
Embarked <u>St John's S.S. Colantilla to Halifax</u> <u>22.7.18</u>									Embarked for <u>156 S 23 78</u>
Disembarked <u>France</u> <u>25.11.19</u> <u>James Duff</u> <u>5.2.1919.</u>									
Transferred from <u>Lower</u> <u>22.7.19</u> <u>Armed Wounded</u> <u>19.4.19</u>									
to file for demobilization <u>22.5.19</u> <u>Armed Wounded</u> <u>1-6-1919</u>									
Demobilization <u>St John's</u> <u>15.7.1919</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>15-7-1919</u> (date of discharge) <u>1</u> years <u>55</u> days									
Pensions									

C.R. 5289

Extract from daily orders part II Royal Newfoundland Regiment
Depot St. John's dated 17-7-19.

The discharge of the undernoted on de mobilisation has been
CONFIRMED by officer i/c Records from noted date
12-7-19.

5289, Pte. Dorman Huxter.

C.R. 5289

Extract from Daily Orders Part II Unit The Royal H&A.
Regt. St. John's, June 20th, 1919.

The discharge of the undernoted on demobilization has
been APPROVED by C.O. Discharge Doped with effect from
1-7-19.

5289 Pte. D. Huxter.

C.R. 5289

Extract from Daily Orders Part 11 Depot, St. John's,

Date June 18th 1919.

5289, Pte. D. Huxter.

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

C.R.

5289

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

The undermentioned of the 1st. Battalion left
Reuen Camps 22/4/19, embarked at Havre 22/4/19,
disembarked at Southampton 23/4/19 and reached
Hazeley Down Camp 23/4/19.

#5289 Pte. D. Huxter.

C.P. 5289

Extract from Nominal Roll of Draft No. 86 of the 3rd.
Battalion of the Newfoundland Regiment to the 1st.
Battalion, F. E. F., Embarked Southampton 23/11/16.

#5289 Pte. D. Huxter,

C.R. 5289

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

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

#5289 Pte, Norman Huxter.

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. St. John's, dated May 23, 1918.

#5289 Pte. Dorman Huxter.

Attested for Gener ⁴
1 Service with the Royal Nfld.
Regt. from 22.5.18

Lo Hunter

C.R.

5289

PHC

Medical Report on an Invalid.

Station Moelytown
BasalDate 30/11/19

1. Unit Royal Newfoundland 7. Former Trade } Interman
or Occupation }
2. Regimental No. 5289 7A. If with previous service in Army, state—
3. Rank pl (a) Former Unit;
4. Name Muxler Boorman (b) Regimental No.;
5. Age last birthday 20 (c) Date of Discharge;
6. Enlisted { on May 27/18 (d) Cause of Discharge.
at Pl 9th

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. nil
10. Place of origin of disability. nil
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. nil
12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
- (b) constitutional or hereditary, and not aggravated by service during the present war.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

He complains of no disability

14. If the disability is an injury, was it caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

no

15. Was a Court of Inquiry held on the injury?

- If so—
- (a) When?
 - (b) Where?
 - (c) Opinion?

no

16. Was an operation performed? If so, what?

no

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

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

no

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

no

Rehabilitation

W.R. [Signature]

20. Do you recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

Capl Rame
Officer in medical charge of case

I have satisfied myself of the general accuracy of this report, and concur therewith.

except †

Station *Weymouth*

Officer in charge of Hospital.

Date *30/4/19*

*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.

† Delete this word if no exceptions are to be made.

No. 14238/1147.

N.F.P./79.

From: 1447 NEWFOUNDLAND CONTINGENT

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

Officer Commanding,
2nd. Bn. Royal Newfoundland Rgt.,
Hazeley Down Camp,
Winchester.

September 4th, 1918

Sept 6th 1918

Subject: 5289, Pte. D. Huxter,

With reference to the following telegram (7676) from the Hon. Minister of Militia, received

Receipt hereunder.

Okant LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commdg. 2nd Batt'n
Royal Newfoundland Regiment

"Pay to 5289, Pte. D. Huxter, £8:4:0.

Draft £8:4:0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Received the sum of eight

Pounds Four Shillings on account of cable remittance from Newfoundland.

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

D Huxter

No. 5289 Rank Private
Witness: 1227 J. Murphy Plc.

*150111
1447*

1014

029927
No. 17761/1928



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 Wfld. Regt.
Winchester.

2nd November 1918

Nov 6 1918

Subject: 5289, Pte. D. Huxter

With reference to the following telegram (9428) from the Hon. Minister of Militia, received

Pay to 5289 Huxter £2:1:0

Draft £2:1:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

A. J. Munnell Maj.
Chief Paymaster & O. i/c Records.

Receipt hereunder
Cham J.

LIEUT. COLONEL
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commdg. 2nd Batt'n,
Royal Newfoundland Regiment.

Received the sum of Two
pounds One sh on account of
cable remittance from Newfoundland.

D Huxter
No. 5289 Rank Private
Witness A. L. Carter, Pte.

No. 3707/1057

b
PD 1996443
N.M.I. 199.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding *Depot*
^{1st} ~~2nd~~ Batt. *3rd* Nfld. Regiment
Winchester

3rd May 191 9

191

5289 Pte. D. Huxter

Receipt hereunder.

With reference to the following
telegram from the Minister of
Militia / / (162)

Officer Commdg. Batt'n.

"Pay to-5289 D. Huxter
£15-0-0

Received the sum of *Fifteen*

Cheque £ 15-0-0 is enclosed.
for payment to this Soldier.
Kindly obtain his receipt
hereon.

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

A. O. Minahan Pay

Chief Paymaster & O. i/c Records.

D Huxter

No. *5289* Rank *Pvt*

Witness *W. Lamb*

No. 5289

Name

Leuxter D.

Sqn., Batty.,
or Company

D.

Corps

R. Newfoundland

Date of
enlistment

22/5/18

G.C.
BadgesService of
Proficiency

Pay

Date of last entry in
Company Conduct SheetNo. and date
of last drunkPeriod not reckoning towards
freedom from extra fine

Sheet No.

Signature O.C.
Company, etc.

Character

Army Form B. 122.

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
Field	8/1/19	Plt		Det. Amours, shirt, cap, cap badge	Sgt Speer	Pay for same	8/1/19	May Bernard	8/4
Rowen	21/5/19			Det. A. kit	Chas Watson	Pay for same	2/4/19	May Bernard	Wm H

[P.T.O.]

Hunter, D

5289

Ray & Dept.

July 15, 1919

#5289 Pte. Donnan Huxter,

Springdale, N.D.B.

Dear Sir:-

Please find enclosed Discharge Certificate #3051.

Yours truly

Captain,
Quartermaster & O.I/c Records.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5289 Rank Pte. Name Huxley T.
 Intended place of residence Springdale
 2. Occupation Lumberman
 Classification of soldier 2 Medical Category AI

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 17 1919

H. M. S. Hunt
 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 JUN 16 1919

D. Huxley
 Signature of soldier
W. C. Newman
 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 JUN 16 1919

D. Huxley
 Signature of soldier
W. C. Newman
 Signature of witness *S.P.*

STATEMENT OF SERVICE

7. Enlisted for service 22-5-18 No. of days on Military
 Discharged from service 1-7-19 Plus 14 days Service 420

APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S

Date JUL 1 1919

R.H. Lait Major
 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 15 1919

M. Bowley Capt
 Officer i/c Records
 The Royal Newfoundland Regiment

10
30
15

Aug 10 20 29 18059

The Royal Newfoundland Regiment

Class for Demobilization: 8.

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 16.6.19

Regimental No 5289

Name Hunter, A.

Rank

Address Springdale N.S.B.

Present Medical Category AT

Recommended for :-

(a) Immediate discharge

(b) Standard Medical Board

Members of Board

Ret Lt Major
O.C. Discharge Depot.

Paton
Senior Medical Officer

Dee Burden
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5289 Rank Plt Name Hunter
 Date of Enlistment 22-5-18 Address Springdale District St. John's
 Occupation Lumberman Classification for Discharge 17 Medical Category H
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N. F. 136	B 208	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	Cr
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	R 103	ME 2		" 6	
B 179c	R 120	M 93			

Date 16.6.19 for O. C. Discharge Depot. H. Hunter

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation. A Hunter

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable Abs.

(b) Clothing Supplied Amelton

Date 17-6-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. *R.18.4.4* to his home at *Springdale* and Release Certificate No. *2852* issued.

Date *17-6-19*

J.A. Knowlton
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 *15-7-19*

Date *17-6-19*

H. M. News H.
Depot Paymaster.

Discharged approved for *1-7-19*

Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1
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
B179c	B 120	M 93		

Date *17-6-19*

J.A. Knowlton
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity
R.H. Salt Capt.

Date *JUL 1 1919*

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.

Huxter
Signature of Man.

Reg. No. 5289

J. A. Shawcraft
Signature of the Vocational Officer or his Representative.

Place

ST. JOHN'S.

Date

17-6-19

191

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

MEDICAL HISTORY

OF

Surname Ruxley

Christian Name Dorman

Table I.—GENERAL TABLE.

Birthplace:—Parish Springdale P.B. County Nfld

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	at		at	
Declared Age	years	days	years	days
Trade or Occupation	<u>Lumberman</u>			
Height	feet	inches	feet	inches
Weight	<u>120</u> lbs.			lbs.
Chest Measurement	Girth when fully expanded	<u>35</u> inches		inches
	Range of Expansion	<u>3</u> inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V=	<u>6/6</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>[Signature]</u>			
(Rank)				
Enlisted	at		at	
	on	day of	on	day of
Joined on Enlistment	Corps	Regtl. No.	Corps	Regtl. No.
	<u>The Royal</u>	<u>1289</u>		
Transferred to				
Became non-effective by	on	day of	on	day of
(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 *Lorman Huxter*

Regiment from which discharged **Royal Newfoundland**

Regimental number *5289*

Intended address *Springdale N. D. B*

Height on discharge *5* Feet *6*

Color of hair on discharge *Dark*

Complexion

Color of eyes

Descriptive Marks

Figure on discharge

Christian name of Father

Christian name of Mother

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth *Springdale 12th Aug 1898*

Nature and locality of civil employment required

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

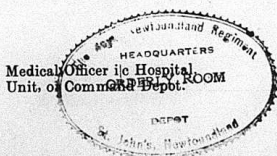
(Soldier's signature in full) *L Huxter*

Pte
(Rank)

Station *L*

Date *16-6-19*

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 Report on an Invalid.

Station Stapeley D. Camp
 Date 30-4-19

1. Unit Royal Newfoundland
 2. Regimental No. 5289
 3. Rank Private
 4. Name Houston Dorman
 5. Age last birthday 20
 6. Enlisted { on May 22/18
 at St. John's

7. Former Trade } Fisherman
 or Occupation }
 7A. If with previous service in Army, state—
 (a) Former Unit ;
 (b) Regimental No. ;
 (c) Date of Discharge ;
 (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

nil

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. nil

10. Place of origin of disability. nil

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. nil

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
 (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
 (b) constitutional or hereditary, and not aggravated by service during the present war.
 (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c. nil

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

He complains of no disability

14. If the disability is an injury, was it caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

u

15. Was a Court of Inquiry held on the injury?

If so—(a) When?

- (b) Where?
- (c) Opinion?

u

16. Was an operation performed? If so, what?

u

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

u

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

u

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

7

20. Do you recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

Repatriation
no
no
Capt R.A.M.C.

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith,

except †

Station

Wazey D. Camp

Date

35-11-19

Officer in charge of Hospital.

*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.

† Delete this word if no exceptions are to be made.

July 21, 1919

5289 Pte. Norman Huxter,

Springdale, N.D.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, *Dorman* 2. Surname, *Harster*

3. Rank, *Pvt* 4. Regt. No. *5789*

5. Address in full to which future payments of gratuity are to be forwarded, *Springdale N.S.B.*

6. Date of enlistment in the Regiment, *May 22/18*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge, *No*

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 Mfld. If so, give dates and particulars of such service, *Overseas*

12. Give total length of time which you served on active service, whether in Mfld. or Overseas, *Thirteen months*

9 days 1. 2.

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

not applicable

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

89.28 Clothing 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) date of discharge *July 4/18*

(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.

Germany & France

21. (a) Are you receiving treatment from the War Rel. 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.

-3- *J. arman Hurter*

Signature of Applicant: _____

Place of Residence: *Spruce Dale N.W.B.*

Declared before me at: *St John's*

This *17th* day of *June* 19*18*...

John M. Carthy

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

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



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Dorman Huxter, Regl. No. 5289
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
 Dollars and 75 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 August 1st 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
4473	Mother	Mrs Nathaniel (Hornah) Huxter	Springdale Green Bay	50
			Total Allotment, \$	50

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

(Sig.) Watson Lumb

Officer Commanding

E Company(Sig.) Dorman Huxter(Rank) PtH. JohnsJuly 2nd 1918

May 22nd. 1918.

The Royal Newfoundland Regiment,

5289 To Dorman Hexter (Recruit).

Powles Rm

May 20th. 1918 To Board while waiting passage to St. John's. \$3.00.
(As per voucher).

Cred for \$3.00
CERTIFIED *Correct*

OK JSP



ACCOUNT	<i>1000</i>	INITIALS	<i>MS</i>
CH. NO.	<i>709</i>	INITIALS	<i>MS</i>
IND. LEDGER	<i>RM</i>	INITIALS	<i>MS</i>
PAY LEDGER	<i>RM</i>	INITIALS	<i>MS</i>
GEN. LEDGER	<i>RM</i>	INITIALS	<i>MS</i>

Recd. Payment
Dorman Hexter

Prices consistent with quality and the best. A satisfied customer is our first consideration.

R. W. MANUEL, Proprietor
Mrs. R. W. MANUEL, Proprietress

Lewisporte *May 20* 1918
Newfoundland

Mr. Borman Hustler

Dr. Manuel Hotel.

May 19 & 20

To Board and Lodging

~~4~~
3 00

Motor Boat Hire

Cartage

Storage

Extras

Repayment in full

May 20th / 18

R. W. Manuel

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of Royal Marine Light Infantry

Number of Sheet Out
Signature of O. C. Company P. B. D. Williams

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	
No.	<u>5284</u>	Age on	<u>19</u> years	<u>months</u>	<u>Labourer</u>	
Joined	Date	Place and Date of Enlistment	<u>17th</u>		Religion	
Joined	Date	Period of		Place of Birth		
Joined	Date	with Colours <u>1/58</u> years.		<u>Springdale</u>		
Joined	Date	with Reserve <u>3/65</u> years.				

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<u>Demobilized</u>	<u>H. J. G. J. 15</u>	<u>7</u>			

To be carried over.

Army Form B. 121.

5289
Demobilization Form 3

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5289 Rank Plt. Name Huotera D.

Date of Enlistment 22-5-18 Address Springdale District St. John's

Occupation Limberman Classification for Discharge Plt. Medical Category A

Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. 1/36	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 400H	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 16-6-19 for Mr. Huotera O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation: A. Huotera

Particulars passed to Vocational Officer for information and action.

Date 17-6-19

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied Ambleton

Date 17-6-19 O i.c. Re-clothing Ambleton

5289

Demobilization Form 3

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5289 Rank Plt. Name Hunter D.
 Date of Enlistment 22-5-18 Address Springdale District St. John's
 Occupation Footman Classification for Discharge Plt. Medical Category Plt.
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N. F. 1/36	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 16.6.19 for Hunter D.
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation Hunter D.

Particulars passed to Vocational Officer for information and action.

Date 17-6-19

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable £60.00
- (b) Clothing Supplied Am. Robinson

Date 17-6-19 O. C. Re-clothing _____

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. R. 1144 to his home at Spungdale and Release Certificate No. 2852 issued.

Date 17-6-19

J. H. Snow 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 15-7-19

Date 17-1-19

J. H. Snow Capt.
Depot Paymaster.

Discharge approved for 1-7-19

Forwarded with following documents to O.C. Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med	D.F. 1	1
B 178	W 3494	B 122	Board Ist.	" 2	1
B 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	
B179c	B 120	M 93			

Date 17-6-19

J. H. Snow Capt.

O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:-

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUL 1 1919

O. C. Discharge Depot.

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

Date July 11 1919

J. H. Snow Capt.
Officer in Records

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. R. 1844 to his home at Springdale and Release Certificate No. 2852 issued.

Date 17-6-19

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 15-7-19

Date 17-1-19

H. M. [unclear]
Depot Paymaster.

Discharge approved for 1-7-19

Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1
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
B179c	B 120	M 93		

2 Form B

Date 17-6-19

J. H. Shaw Capt.
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUL 1 1919

O. C. Discharge Depot.

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

Date July 11 1919

[Signature]
Officer in Records

Reg. No. *1249* Rank *Plt* Name *Huske, A.*
Attested Address *Springdale*
Allotment Allottee
Date of Allotment Returned from Overseas *29.5.19.*
Returned on S.S. *Osirian* C. S. *Discharge!*

16.6.19

PASSED TO DEMOBILIZATION OFFICER

1.7.19

DISCHARGE APPROVED ON DEMOBILISATION