



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4973 Name Levi Jacobs Corps Metk

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>Levi Jacobs</u> |
| 2. What is your full Address? | 2. <u>Little Heart Lane</u>
<u>Random Bay</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>21</u> Years |
| 5. What is your Trade or Calling? | 5. <u>Fisherman</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, Levi Jacobs 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.

.....SIGNATURE OF RECRUIT.

Joseph P. P. P. Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Levi Jacobs 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 9 day of May 1918

Signature of Attesting Officer C. Crooks 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.

Date191.....
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

4973

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

Name Levi Jacobs
 Apparent age 21 years 5 months. Height 5 feet 4 inches
 Chest Measurement { Girth when fully expanded 35 1/2 inches
 Range of expansion 5 1/2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin James Jacobs Little Heath
Free Radom B.P. | Relationship Father

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>9-5-1918</u>									
Joined at <u>St. John's</u> on <u>Monday 9-19-18</u>									
<u>Discharged July 4 1919</u>									
Embarked <u>St. John's train to Halifax N.S.</u> <u>11-6-1918</u>									
Embarked <u>by B.C.R.</u> <u>26-10-18</u>									
Re-embarked <u>France</u> <u>26-10-18</u>									
Joined <u>Battln. 5th</u>									
Transferred from <u>Loos</u> <u>22nd 7th 1919</u> Arrived <u>Wimereux</u> <u>23rd 7th 1919</u>									
To the <u>English Channel</u> for demobilization <u>22-5-1919</u>									
Arrived <u>Wimereux</u> <u>1-8-1919</u>									
<u>Remobilization St. John's</u>									
Total Service towards Engagement to <u>4-7-1919</u> (date of discharge) <u>57</u> years <u>57</u> days									
" " Pensions " " " " " " " " " " " "									

C.R. 4973

Extract from Daily Orders Part II ~~xxx~~ Royal Newfoundland
Regiment Depot St. John's dated 8-7-19.

The discharge of the undersigned on demobilization has
been CONFIRMED by Officer i/c Records from 4-7-19.

4973, Pte. Levi Jacobs.



4973

Extract from Daily Orders Part II Unit The Royal Nfld.
Regt. Depot St. John's, June 10th, 1919

The discharge of the undernoted on demobilization has been
APPROVED by C.G. Discharge Depot with effect from 20-6-19.

4973 Pte. Levi Jacobs.

C.R. 4973

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

Date 9-6-19

4973 Pte. Levi Jacobs

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

C.R.

4973

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

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

#4973 Pte. J. Jacobs.

C.R. 4973

Extract from General Order re-inforcement Draft No. 55: Embarked Folkestone,
26/10/18, from 2nd Batta, Royal Newfoundland Regiment, Havelock Down Camp,
Winchester, to 1st Batta, Royal Newfoundland Regiment, B.C.F.

4973 Pte. Jacobs, L.

Et.

C.R. 4973

Extract from Daily Orders part 11, from Unit The Royal
Field Regt. St. John's, dated June 14, 1918

#4973 Pte. L. Jacobs.

Embarked for overseas with draft June 11th, 1918.

Extract from Daily Orders part 11, from Unit The Royal Wilt.
Regt. St. John's, dated May 10, 1918.

#4973 Pte. L. Jacobs.

Attested for General Services with the Royal Wilt. Regt.
from #.5.18

Le Jacobs

C.R. 4973

PRD



NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi), 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. *4977* 3. Rank. *Plt.* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Jacobus P.* (Surname) (Christian Names) (a) Former Regts. or Corps ; with Regtl. Nos.
5. Age last birthday. *32*
6. Posted for duty on *11. 5. 18* at *St. John* 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." *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 ? } *na*

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.)

He complains of disability

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.

Rehabilitation
W. P. Wilson
Capt R. A. M. C.

Station *Hazelby D. Camp*

Medical Officer in charge of case.

Date *29-4-19*

* 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

FORM K



No 4406



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Levi Jacobs, Regl. No. 4972, hereby agree, until further potification by me, and in similar official form to make an Allotment of Dollars and Fifty Five Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person and Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person and Persons concerned, viz :

Allotment begins 1-6-18

Table with 5 columns: Identity Certificate No., Whether Wife, Child, other Relative or Friend, NAME (in full), ADDRESS, AMOUNT (each person). Row 1: 4172, Mother, Mrs William (Hannah) Jacobs, Little Hearts Ease, Random I.B., 55.

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.) A. Summers, Officer Commanding Company

(Sig.) Levi Jacobs, (Rank) Private

J. Johns, 6-1918



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Lewis Jacobs, Regl. No. 4973
hereby agree, until further notification by me, and in similar official form to make an Allotment of
..... Dollars and fifty-five 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..... 1-6-18.....

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>4172</u>	<u>Mother</u>	<u>Mrs William (Hannah) Jacobs</u>	<u>Little Bay to Edge Ranch on S.B.</u>	<u>55</u>
			Total Allotment, \$	<u>55</u>

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.) Al Summers

Officer Commanding
Company

(S) Lewis Jacobs

(Rank) Private

D. Johns

8 6 1918

To:- The Chief Paymaster,
Royal Newfoundland Regiment,
55 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
1973	Pte	Jacob L	\$2.50	J. Jacob

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

J. Jacob

Date

July 1/18

No. 3955/157 NEWFOUNDLAND

N.F.P./80.

From: Chief Paymaster & O.i/c Records,
Newfoundland Contingent,
58, Victoria Street,
London, S.W. 1.

CONTINGENT
CHIEF PAYMASTER & O.I.C. RECORDS.
NEWFOUNDLAND CONTINGENT,
58, VICTORIA STREET,
1st Batt. Ryl. Nfld. Regt.
LONDON, ENGLAND.
F. E. F.

12th March 1919

4973. Pte. Jacobs. L.

With reference to the following telegram from the Minister of Militia, / / (75)

"Pay to- 4973. Jacobs

£3. 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.

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

14-3-1919

4973 Pte L Jacobs

*The man wishes this amount
to be paid to the credit of his account
please.*

A. [Signature]
COMMANDING 1st Bn. ROYAL NEWFOUNDLAND REGIMENT.

Vertical stamp: RECEIVED

No. 15441/1599.

N.F.P./79.

NEWFOUNDLAND CONTINGENT

From:

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

To:

Officer Commanding,
2/Bn. Royal Newfoundland Rgt.,
Winchester.

049730
[Handwritten initials]

September 26th, 1918

30 SEP 1918 191

Subject: 4973, Pte. L. Jacobs,

With reference to the following telegram (8321) from the Hon. Minister of Militia, received

"Pay to ⁹4973, Pte. L. Jacobs, £3.0.0.

Draft £ 3.0.0. is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

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

Witness

[Signature]

Receipt hereunder.

[Signature] ^{Capt} LIEUT. COLONEL,
OFFICER COMMANDING 2/BATTN
ROYAL NEWFOUNDLAND REGIMENT

Received the sum of £3.0.0

three pounds on account of cable remittance from Newfoundland.

L. Jacobs
No. 4973 Rank Pte

No. 6973 Name Jacobs L. Sqn., Batty., or Company A Corps ROYAL NEWFOUNDLAND REG. Date of enlistment 9/15/18 Service or Proficiency Pay 10.12

Date of last entry in Company Conduct Sheet 18/12/18 No. and date of last drunk 18/12/18 Period not reckoning towards freedom from extra fine 18/12/18 Sheet No. One Signature O.C. Company, etc. W. H. Sumner Capt Character 10.12

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>Field</u>	<u>18/12/18</u>	<u>Pte</u>		<u>Def of iron rations</u>	<u>Coy. Moore</u>	<u>Admonished</u>	<u>16/11/18</u>	<u>Colt. Mathias</u>	<u>B-7</u>
<u>Trench</u>	<u>24/12/18</u>	<u>Pte</u>		<u>Def of cordigan jacket</u>	<u>Sgt. Bern</u>	<u>Pay for same</u>	<u>26.12.18</u>	<u>Lt A Sumner</u>	<u>9/10</u>
<u>Kitchen</u>	<u>18/12/18</u>	<u>Pte</u>		<u>Deficiency of kit value - 1/8</u>	<u>Cpl. W. Ward</u>	<u>Pay for same</u>	<u>15.12.18</u>	<u>Major B. B. B.</u>	<u>15/12</u>

Army Form B. 122

Jacobs, Levi

4973

Sept

July 4, 1919

#4973 Pte. Levi Jacobs,

Little Hearts Mass., T.B.

Dear Sir:-

Please find enclosed Discharge
Certificate No. 2391.

Yours truly

Captain,
Paymaster & O.i/c Records.

The Royal Wld. Regiment

DEMOBILIZATION

No. 4973 Rank _____

Name Jacob L _____

Warned for demobilization on

JUN 6 1919

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4973 Rank Private Name Jacob L. Little Heath Esq.
 Intended place of residence.....
2. Occupation Drumman
 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 6 1919
 for H. M. S. Pirut
 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. 6 1919
Jacob L.
 Signature of soldier
W. J. [unclear] Capt
 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 6 1919
Jacob L.
 Signature of soldier
W. J. [unclear] Dms
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 9-5-18 No of days on Military
 Discharged from service 20.6.19. Plus 14 days Service 4.2.2

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S
JUN 20 1919
R. H. [unclear] Capt
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place St. Johns, Nfld
 Date July 4/1919
[unclear] Capt
 Officer in Charge Records
 The Royal Newfoundland Regiment

The Royal Newfoundland Regiment

Class for Demobilization:—

↑
E4

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 11-5-19.....

Regimental No. ... 4975

Name Jacobs, Levi Pte

Address Little Hearts Lane

Present Medical Category..... A7

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

Members of Board {

R.H. [Signature] Capt.
O.C. Discharge Depot.

[Signature]
Senior Medical Officer

[Signature]
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4973 Rank Plt Name Joseph L.
 Date of Enlistment 9 5 18 Address Little Trappens District Trinity
 Occupation Footman Classification for Discharge C Medical Category A1
 Recommendation S.M.B. _____ Disability Rating _____
 Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	1	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122	1	Board 1st	" 2	
B 178a	D 400A	B 1916		do 2nd	" 3	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 5.6.19

J. G. G. G.
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Joseph L.

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 1000000

Date 6-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R.1530.G.601* to his home at *Little Hearts Rose* and Release Certificate No. *2394* issued.

Date *6-6-19*

J.A. 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 *4-1-19*

Date *6-6-19*

J. H. Mears Lt.
Depot Paymaster.

Discharge approved for *20-6-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	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
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 Forms B

Date *6-6-19*

J.A. Snow 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

JUN 20 1919

Date

R.H. Sait 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

Jacobs L

Signature of Man.

J. A. Shaw Capt.

Signature of the Vocational Officer or his Representative.

Reg. No. *4973*

Place _____

Date _____

191 _____

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

MEDICAL HISTORY

OF

Surname

Jacobs

Christian Name

Levi

Table I.—GENERAL TABLE.

Birthplace:—Parish

*Little Wests Ease P.S. County**Nfld*

SPECIAL RESERVE

REGULAR ARMY

Examined	on <i>9</i> day of <i>May</i> 191 <i>8</i>	on	day of	191
	at <i>S. Johns</i>	at		
Declared Age	<i>31</i> years — days		years	days
Trade or Occupation	<i>Fisher</i>			
Height	<i>5</i> feet <i>4</i> inches		feet	inches
Weight	<i>121</i> lbs.			lbs.
Chest Measurement	Girth when fully expanded	<i>35 1/2</i> inches		inches
	Range of Expansion	<i>5 1/2</i> inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm			
	Number			
When Vaccinated				
Vision	L. E.—V= <i>6/6</i>		R. E.—V= <i>6/6</i>	
	<i>6/6</i>			
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<i>L. J. Peterson</i>			
(Rank)				
	<i>S. Johns</i>			
Enlisted	at <i>S. Johns</i>	at		
	on <i>9</i> day of <i>May</i> 191 <i>8</i>	on	day of	191
	Corps.		Corps.	
	Regtl. No.		Regtl. No.	
Joined on Enlistment	<i>The Royal Nfld Regt</i>			
	<i>11973</i>			
Transferred to				
Became non-effective by	on	day of	191	on
(Signature)			day of	191
(Rank)				

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. *4873* 3. Rank. *Pte.* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Jacob L.* (Surname) *L.* (Christian Names) (a) Former Regts. or Corps; with Regtl. Nos.
5. Age last birthday. *22.*
6. Posted for duty on *11/5/18.* 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;
9. If a Court of Inquiry was held on an injury state:— (c) Cause of Discharge.
- (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. }

na

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

na.

In all cases such as facial injury, ear, 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.)

Re complaint of disability.

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

na

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

na

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 ?

na

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

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.S. Proctor Capt Proctor

Station Hazley Down

Medical Officer in charge of case.

Date 29/7/19..

* Loss of teeth 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 *Levi Jacobs*

Regiment from which discharged **Royal Newfoundland**

Regimental number *4973*

Intended address *Little Hearts Lane, 113*

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 *William*

Christian name of Mother *Hannah*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *Little Hearts Lane, March 22nd 1897*

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) *Levi Jacobs*

Pte
(Rank)

Station *St Johns*

Date *4-6-19*

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.

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

Casualty Form—Active Service.Regiment or Corps ROYAL NEWFOUNDLAND REG.Rank ote Surname Jacobs Christian Name LeveReligion Meth Age on Enlistment 21 years monthsEnlisted (a) 9/5/18 Terms of Service (a) DURATION Service reckons from (a) 9/5/18Date of promotion to present rank Date of appointment to lance rank Extended Re-engaged Qualification (b) or Corps Trade and Rate Occupation Fisherman Signature of Officer J. M. Euston

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
			Embarked ...	<u>26 OCT 1918</u>	
			Disembarked...	<u>3 NOV 1918</u>	
			Joined <u>Batalion</u>		
			<u>Arrived in UK</u>	<u>13/4/19</u>	

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shoeing-Smith, etc. (17591) Wt. 19 1887 £1124. 1,000,000. 8/18. D & S. Form B/103. (E. 2282.)

I.P.T.O.

Next of kinFather, ~~John~~ James Jacobs, Little Heart's Ease, Randome, B. Newfoundland.

July 5, 1919

#4973 Pte. Levi Jacobs,

Little Hearts East, T.B.

Dear Sir:-

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

Yours truly

Raymaster & Co. i/c Records. Captain

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

- Christian name..... *Kevin Jacobs* 2. Surname.....
3. Rank..... *Rt Lt* 4. Regtl. No. *4973*
5. Address in full to which future payments of gratuity are to be forwarded..... *Little Heart's Case, S.S.*
6. Date of enlistment in the Regiment..... *May 8/18*
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..... *Do*
9. Address in full of such dependents..... *Do*
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 17 days* 1.

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.

£83.44 Clothing & Ration

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.?..... If not give:- (a) date of discharge.

no

June 20/19

(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: *Levi Jacob* *S. B.*

Place of Residence: *Ribble Heart's Ess.*

Declared before me at: *St John's, nged*

This *6th* 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. Cahill
J.P.

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

~~Post Office~~

Little Hearts Ease
August. 11th 119

Mr A. E. Hickman
Minister of Militia.

Dear Sir,

As the
regimental allotments have
come to hand again, to
day. And Levi Jacobs's
allotment that I (his
mother) received is \$1.65
less than Arthur Jacobs
that his mother received.
I should like to know
why the alteration has
been made.

I may say that both
these Cheques (Levi Jacobs
& Arthur Jacobs) have

been coming in the
one envelope all the
time altho' they are
nothing to each other.
both of them are
Mrs William Jacobs
Kindly let me know
why this alteration
has been made. And
oblige

Yours etc

Mrs Wm Jacobs

4996 Arthur Jacobs allt
55[¢] Direct 7/7/19 \$3.85
4973 Levi Jacobs allt
55[¢] Direct 4/7/19 \$2.20

FORM K

No 4406

**1st. NEWFOUNDLAND REGIMENT****ALLOTMENTS**I, Levi Jacobs, Regl. No. 4943

hereby agree, until further notification by me, and in similar official form to make an Allotment of
 Dollars and Fifty-five 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 1-6-18

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
4172	Wife	Mrs William (Hannah) Jacobs	Little Heart's Case Random I.B.	55
			Total Allotment, \$	55

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.) A. Summers A.

Officer Commanding

Company

Dr. Johns8-6-18

(Sig.)

(Rank)

Levi Jacobs
Private

JUNE

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

Fold Here

Signature

Date

Address

SEP 9 1921

1921.

The accompanying **Victory Medal** and/or **British War Medal**

is/are forwarded herewith to

Levi Jacobs

in respect of his service as No. 4973 Rank Pte.

Name L. JACOBS Royal Nfld. Regt.

~~Nfld. Force, 2nd Div.~~

Receipt of the same should be acknowledged hereon.

Received Victory Medal and British War Medal

Signature 4973 Pte L. Jacobs

Date Sept 13th 1921

Address Little Hearts Case Pandora I. C.

[P.T.O.]

Receipt for Army Book 64

No. *4973* Name *L. Jacobs*

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

Date *Sept. 25th 1920* Name *L. Jacobs*
Place *Little Hearts Case J. B.*

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

5 10/20



Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121.
39.Number of Sheet 01Regiment of Royal NewfoundlandSignature of O. C. Company A. Dicks Lieut

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	
No.		Age on	years months			
4973	Jacobs Sen	21		Fisherman		
Joined	Date	Place and Date of Enlistment		Religion		
Joined	Date	9.5.18		Meth.		
Joined	Date	Period of } with Colours / 57 years. with Reserve / 36 1/2 years.		Place of Birth		
Joined	Date			Little Heath East T. Bay		

Place	Date of Offence	Rank	Cases of Drunkenness.	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial.	By whom awarded	REMARKS
				Demobilized	St John's	14	7/19		

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

24973
4973

DEMOBILIZATION OF

Reg. No. 1973 Rank PL Name Jacob L
 Date of Enlistment 9.5.18 Address Little West End District Trinity
 Occupation Footman Classification for Discharge Medical Category A1
 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 5-6-19

for Mrs. H.
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Jacob L

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 Man's Coat

Date 6-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R. 1530 G. 601* to his home at *Little Hearts Cove* and Release Certificate No. *2394* Issued.

Date *6-6-19*

J.A. Snowball
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 *4-7-19*

Date *6-6-19*

J.A. Snowball
Depot Paymaster.

Discharge approved for *20-6-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1
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		

Form B
pl. 2.3

Date *6-6-19*

J.A. Snowball
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer in Records
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

JUN 20 1919

Date *June 11/1919*

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

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

Date *June 11/1919*

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

Reg. No. *4973*. Rank *Pte* Name *Jacobs, Levi*

Attested Address *Little Heath Lane.*

Allotment Allottee

Date of Allotment Returned from Overseas *29.1.19.*

Returned on S.S. *Corsican* Cause *Discharge.*

5619
20619

PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILISATION.