



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 6252 Name William Kearney <sup>Corps</sup> R

### Questions to be put to the Recruit before Enlistment.

- |  |   |
|--|---|
| 1. What is your name? .....  | 1. <u>William Kearney</u>                 |
| 2. What is your full Address? .....  | 2. <u>St Marys</u>                        |
| 3. Are you a British Subject? .....  | 3. <u>yes</u>                             |
| 4. What is your age? .....   | 4. <u>21</u> Years <u>        </u> Months |
| 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 .....<br>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, William Kearney .....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.

10/10/18 .....SIGNATURE OF RECRUIT.

William Kearney .....SIGNATURE OF WITNESS.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, William Kearney .....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 10<sup>th</sup> day of Oct .....1918

Signature of Attesting Officer John C. Dicks 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 10<sup>th</sup> Oct .....1918

Place St. John's ..... } Approving Officer.

John C. Dicks ..... }  
The Royal Newfoundland Regiment

† 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 William Kearney

Apparent age 21 years          months. Height 5 feet 5 3/4 inches

Chest Measurement { Girth when fully expanded 38 inches  
 Range of expansion 4 inches

Distinctive marks         

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mary Davis  
St Marys | 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 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 _____									
Joined at _____ on _____									
Total Service forfeited as above.....									
Total Service towards Engagement to _____ [date of discharge] _____ years _____ days									
" " Pensions " _____ [ " " ] " " "									



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 6252 Name William Kearney Corps Rt.

### Questions to be put to the Recruit before Enlistment.

- |  |                                 |
|--|---------------------------------|
| 1. What is your name? .....  | 1. <u>William Kearney</u> ..... |
| 2. What is your full Address? .....  | 2. <u>St Marys</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, William Kearney 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.

10/10/18 William Kearney SIGNATURE OF RECRUIT.  
G. Peters Lt Signature of Witness.

William Kearney OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, William Kearney 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 10<sup>th</sup> day of Oct 1918.

Signature of Attesting Officer C. B. Dickson 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 OCT 11 1918 .....

Place .....

C. B. Dickson Lieut Major, Commanding Depot, The Royal Newfoundland Regiment. } Approving Officer.

† The signature of the Approving Officer is to be affixed in the Spaces 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

6252

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

Name William Kearney  
 Apparent age 21 years     months. Height 5 feet 5<sup>3</sup>/<sub>4</sub> inches  
 Chest Measurement { Girth when fully expanded 38 inches  
 { Range of expansion 4 inches  
 Distinctive marks    

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mary Davis  
St Marys | 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 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 _____									
Joined at _____ on _____									
<u>Discharged By 13/19</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to \_\_\_\_\_ [date of discharge] \_\_\_\_\_ years \_\_\_\_\_ days  
 " " Pensions " [ " " ] " " "

C.R. 6252

Extract from Daily Orders Part II Royal Newfoundland Regiment,  
Depot St. John's, dated Oct. 20th 1919.

The discharge of the undernoted on demobilization has been  
CONFIRMED by Officer i/c Records from noted date  
13-2-19.

6252, S. Kearney.

C.R. 6252

Extract from daily Orders part 11, Depot. St. John's  
dated December 18th., 1918.

DISCHARGED FROM M. I. D. HOSPITAL 16-12-18.

6252 Pte. W. Kearney.

C.R. 6252

Extract from Daily Orders part I<sup>4</sup> H, Depot ST. J. dated Jan. 17, 1919.

The undernoted discharge on demobilization have been approved  
by O. C. Discharge Depot on noted date. 15-1-19.

# 6252 Pte. H<sub>m</sub>. Kearney.

C.R. 6252

Extract from Daily Orders, Part 11, UNIT: The Royal Newfoundland Regiment, dated October 12th 1918.

Strength Increases.

6252 Pte. William Kearney.

Attested for General Service with The Royal Newfoundland Regiment,  
from 10/10/18.



C.R. 6252

# NEWFOUNDLAND POSTAL TELEGRAPHS.

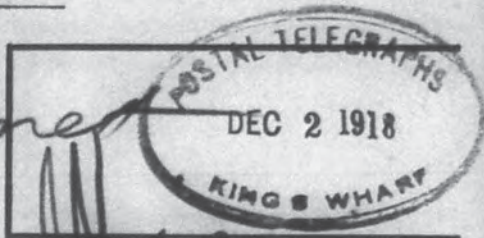
CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. \_\_\_\_\_ Sent by \_\_\_\_\_ Rec'd by \_\_\_\_\_ Check \_\_\_\_\_

No. \_\_\_\_\_

Place from \_\_\_\_\_

To \_\_\_\_\_



How is my son William  
 Kearney please advise  
 Mrs Mary Davis

C.R. 6252

C.R. 6252

Extract from Daily Orders part 11, Depot. St. John's  
dated December 3rd., 1918.

HOSPITAL.

#6252 Pte. W. Kearney

Admitted M. I. D. Hospital 29-11-18.

C.P. Counter No. 6252

# NEWFOUNDLAND POSTAL TELEGRAPHS.



## Cable Connection with all the World

### All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender \_\_\_\_\_ Address Dept. of Militia.

Line Number	Rcd	By	Sent	by	Check

Dated Dec. 2, 1918.

To Mrs. Mary Davitt,  
St. Mary's.

Regret to inform you that there is no improvement in the condition of your son No. 6252 Pte. W. Keamy.

J.R. Bennett,  
Minister of Militia.

FOR TYPEWRITER

C.R. 6252  
Counter No.

# NEWFOUNDLAND POSTAL TELEGRAPHS.



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I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender \_\_\_\_\_ Address Dart. of Militia.

Line Number	Rcd	By	Sent	by	Check

Dated Dec. 9th, 1918.

To Mrs. Mary Davis,

St. Mary's.

beg to inform you that your son No. 6252 Pte. W. Kearney, is now suffering from Mumps.

J.R. Bennett

Minister of Militia.

FOR TYPEWRITER

C.R. Counter No. 6252

# NEWFOUNDLAND POSTAL TELEGRAPHS.



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The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

**(NOT TRANSMITTED)**

**Dept. of Militia.**

Signature of Sender \_\_\_\_\_ Address \_\_\_\_\_

Line Number	Rcd	By	Sent	by	Check

Dated

**Nov. 30th, 1918.**

To

**Mrs. Mary Davis,  
St. Mary's.**

**Regret to inform you that your son was admitted to  
Military Hospital Yesterday Nov. 29th, suffering from  
Mumps.**

**J.R. Bennett,  
Minister of Militia.**

**FOR TYPEWRITER**

Kearney, W<sup>d</sup>

6252

Ray rept.

February 13th., 1919

#6252 Pte. William J. Kearney,  
St. Mary's, P.B.

Dear Sir:-

Please find enclosed "Discharge  
Certificate No. 871."

Yours truly,

Captain,  
Paymaster & U. i/c Records

Enc '1 1.

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 6252 Rank Pvt Name Wm Kearney

Intended place of residence... St John's N.B.

2. Occupation fisherman

Classification of soldier e Medical Category 2 ii

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

**DEMOBILIZATION**

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

Place ..... JAN 15 1919 ..... W. G. Kearney Capt

Date ..... JAN 15 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

15-1-19

W. G. Kearney  
Signature of soldier

W. G. Kearney 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 Jan 15<sup>th</sup> 1919

ST. JOHN'S

W. G. Kearney  
Signature of soldier

W. G. Kearney  
Signature of witness

### STATEMENT OF SERVICE

7. Enlisted for service ..... 10-10-18 ..... No of days on Military

Discharged from service... 16-1-19 plus 28 days ..... Service 127 days

### APPROVAL OF DISCHARGE

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

Place ST. JOHN'S

JAN 16 1919

Date .....

R. H. Lant Capt  
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 Nfld

Date February 13/1919

W. G. Kearney Capt  
Officer in Charge of Records  
The Royal Newfoundland Regiment

W. G. Kearney 2079/871

22  
30  
31  
31  
13  
07



# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 6252 Rank Pte Name Keowney Wm  
 Date of Enlistment 10.10.18 Address St. Marys District St. Marys  
 Occupation Fisherman Classification for Discharge 10 Medical Category A  
 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.....		Board 1st.....	" 2.....	
B 178a.....	1 D 400A.....	1 B 1915.....	2	do 2nd.....	" 3.....	3
B 179.....	D 400B.....	Form L.....		do 3rd.....	" 4.....	
B 179a.....	D 400C.....	Form K.....	1	do 4th.....	" 5.....	
B 179b.....	B 103.....	ME 2.....			" 6.....	
B 179c.....	B 120.....	M 93.....	1			

Date 25.1.19 Joseph A Snowford  
 O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am.....in a position to resume civilian occupation.

W. Keowney

Particulars passed to Vocational Officer for information and action.

Date.....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:

(a) Clothing Allowance payable.....

(b) Clothing ~~Supplied~~.....

60.00  
Joseph A Snowford

Date 15-1-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 494R to his home at St Marys and Release Certificate No. 785- issued.

Date 15-1-19

OSDicks 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 13-2-19

Date 15-1-19

Joseph A. Lawrence  
Depot Paymaster

Discharge approved for 16-1-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36.....	B 268.....	B 121.....	1	N.F. Med.....	D.F. 1.....	1	
B 178.....	W 3494.....	B 122.....		Board 1st.....	" 2.....	1	271-8
B 178a.....	D 400A.....	B 1915.....	2	do 2nd.....	" 3.....	2	
B 179.....	D 400B.....	Form L.....		do 3rd.....	" 4.....		
B 179a.....	D 400C.....	Form K.....	1	do 4th.....	" 5.....		
B 179b.....	B 103.....	ME 2.....			" 6.....		
B 179c.....	B 120.....	M 93.....	1				

Date 15-1-19

OSDicks Capt  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

JAN 16 1919

Date .....

[Signature]  
O. C. Discharge Depot.

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

Date .....

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

# MEDICAL HISTORY

Surname Kearney

Christian Name William

Table I.—GENERAL TABLE

Birthplace :—Parish St Mary County Newfoundland

**SPECIAL RESERVE**

**REGULAR ARMY**

Examined .....	on <u>10<sup>th</sup></u> day of <u>Oct</u> 191 <u>8</u>	on	day of	191
	at <u>St Johns</u>	at		
Declared Age .....	<u>31</u> years	days	years	days
Trade or Occupation .....	<u>Fisherman</u>			
Height .....	<u>5</u> feet <u>5<sup>3</sup>/<sub>4</sub></u> inches		feet	inches
Weight .....	<u>130</u> lbs.			lbs.
Chest Measurement	Girth when fully expanded .....	<u>38</u> inches		inches
	Range of Expansion .....	<u>H</u> inches		inches
Physical Development .....				
Vaccination Marks	Arm .....	Right	Left	Right
	Number .....			Left
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)		(b)	
(b) Slight defects but not sufficient to cause rejection .....				
Approved by (Signature)	<u>Lammell at arm</u>			
(Rank)		Medical Officer		Medical Officer
Enlisted .....	at <u>St Johns</u>	at		
	on <u>10<sup>th</sup></u> day of <u>Oct</u> 191 <u>8</u>	on	day of	191
Joined on Enlistment .....	Corps	Regtl. No.	Corps	Regtl. No.
	<u>Royal Nfld Regt.</u>	<u>6252</u>		
Transferred to .....				
Became non-effective by .....	on	day of	191	on
(Signature)		day of	191	
(Rank)				

**Table II.—Only for admission to hospital or to the sick**

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on Syphilis, admissions of treatment
	Day	Month	Year	Day	Month	Year			
M. G. B. Hospital	29	11	18	16	12	18	Mumps	18	

G.T.4

Table III - Board: Cause of Injury, Vaccination, Incubation, Infection, etc. -  
List in case of Warrant Officers treated in quarters

The cause, nature or treatment of the case likely to be of interest or of future use. In case of readmissions to hospitals will be shown. The subsequent progress, including particulars of hospital, transfers, etc., will be given in the special syphilis case sheet.

Signature of Medical Officer

*W. W. Burden*

It is hereby certified that this soldier  
has been before a Board of Officers and  
has been found to be fit for duty  
from the date of his discharge.

Date of P.M.M.  
Medical Officer



# 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 work at fishing

W Kearney

Signature of Man.

A. B. Dicks Capt.

Signature of the Vocational Officer or his Representative.

Reg. No. 6252

Place **ST. JOHN'S.**

Date 15/1/19. 191

400 a

Placental Army 5

Demobilization Form 1

# The Royal Newfoundland Regiment

Class for Demobilization:  
*C*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

*27.12.18*

Regimental No. *6252*

Name *Kearney William*

Address *St. Johns*

Present Medical Category

*A II*

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

Members of Board

*R.H. Jait Capt*

O.C. Discharge Depot.

*L. Paterson*

Senior Medical Officer

*S.W. Burden*

M. O. Depot





## 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 *Keatney, William Joseph.*  
 Regiment from which discharged *1st. Newfoundland*  
 Regimental number *6252*  
 Intended address *St. Mary's, Nfld.*

Height on discharge Feet  
 Color of hair on discharge *Light brown*  
 Complexion *Fair*  
 Color of eyes *Blue*  
 Descriptive Marks *Birthmark on left side of neck.*  
 Figure on discharge *Normal*  
 Christian name of Father *Timothy*  
 Christian name of Mother *Mary*  
 Wife's maiden name in full  
 Date and place of marriage } *not married*  
 Christian names of children }

Place and date of soldier's birth. *St. Mary's, Nfld., March 31<sup>st</sup> 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)

*William Joseph Keatney*  
 (Rank) *Plt.*

Station

*Prince's Link.*

Date

*18/12/18.*

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.

*J. R. Steele Lieut*  
 Medical Officer i/c Hospital.  
 Unit, or Command Depot.

Station

Date



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, William Kearney, Regl. No. 6752

hereby agree, until further notification by me, and in similar official form to make an Allotment of  
3 Dollars and 50 Cents, per diem, from my Pay,  
to, and for the benefit of the undermentioned Person <sup>and</sup> <sub>or</sub> Persons, such payment to be made on proof  
of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> <sub>or</sub> Persons  
concerned, viz :

Allotment begins 1 Nov 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)	
7523	Grand Mother	Mrs Martha Lewis	St Marys		50
Total Allotment, \$					50

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

(Sig.) J Clift Capt  
Officer Commanding

(Sig.) William Kearney  
(Rank) Pte

St Johns Co  
Oct 14 1918



Report for Service <sup>654</sup> ~~602~~

# ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at St John's on OCT 10 1918 191

1. Name William Kearney Age (a) Declared 21  
(b) Apparent

2. Do you know of anything wrong with you? no

What severe illnesses have you had? none

6252

eyes blue  
Croup Sore  
marks soon on death with marks on left side of neck

3. Height 5-5 3/4 Weight 130

4. Eyesight (a) Left 4/6 (b) Right 4/6

5. Physical Defects (Examine after strenuous exercise) 4

6. Examination of Lungs ?

Measurement (a) Expiration 34 (b) Inspiration 58

7. Examination of Heart ?

8. Examination of Urine

9. Examination of Mouth—(Defective Speech)

Teeth Attention

Throat m

Nose

Ears—(Otorrhea)

(Deafness)

10. Have you been successfully vaccinated, and when? yes 10 years ago 1st 2 arm

11. Name and address of next of kin Mother Mary Davis St Marys

12. Category

REMARKS—

A"

Archibald  
St J. Sinden

Medical Examiners.

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39.

Number of Sheet One  
Signature of O. C. Company Pl. Dicks

Regiment of Royal Newfoundland Regt

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>6252</u>	Age on <u>21</u> years <u>00</u> months	Place and Date of Enlistment <u>St John's 1919</u>	<u>Yushman</u>	
Joined	Date	Period of } with Colours <u>127</u> years. with Reserve <u>365</u> years.	Religion <u>R.C.</u>	Place of Birth <u>St Marys</u>	
Joined	Date				
Joined	Date				

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>St John's</u>	<u>13</u>	<u>2</u>		<u>19</u>

To be carried over.

# The Royal Newfoundland Regiment

9  
6252

## DEMOBILIZATION OF

Reg. No. 6252 Rank Pte. Name Kearney, Wm  
 Date of Enlistment 10.10.18 Address St. Marys District St. Marys  
 Occupation Fisherman Classification for Discharge Bo Medical Category A  
 Recommendation S.M.B. .... Disability Rating .....

Passed to Demobilization Officer with following documents:—

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

Date 25.1.19

Joseph H Snowling  
 O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am ..... in a position to resume civilian occupation.

W. Kearney

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 .....

Joseph H Snowling

Date 15-1-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 494 R to his home at St Marys and Release Certificate No. 785 issued.

Date 15-1-19

C. B. Dicks 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 13-2-19

Date 15-1-19

Joseph A. Snowling  
Depot Paymaster

Discharge approved for 16.1.19

Forwarded with following documents to O.C Discharge Depot.

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

Date 15.1.19

C. B. Dicks Capt.  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

JAN 16 1919

Date .....

R. H. Sait Capt.  
O. C. Discharge Depot.

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

Date Jan 20<sup>th</sup> 1919

W. A. ...  
...

Reg. No. 1252 Rank Pte Name Jearney Wm  
 Attested 10-10-18 Address St Mary's  
 Allotment 50 Allottee Mr Martha Jearney (by mother)  
 Date of Allotment 1-11-18 Returned from Overseas.....  
 Embarked for Overseas ..... Cause.....

Fall 11-10-18 1<sup>st</sup> Ince 31-10-18.  
 9-11-18 Admitted to M. I. S. Hoop  
 16-12-18 Discharged from M. I. S. Hoop.

PASSED TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED ON DEMOBILISATION.

12-1-19  
 16-1-19