



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 5860 Name James Keefe Corps B. I.

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

- |  |                                 |
|--|---------------------------------|
| 1. What is your name? .....  | 1. <u>James Keefe</u>           |
| 2. What is your full Address? .....  | <u>Marystown, N.B.</u>          |
| 3. Are you a British Subject? .....  | <u>Yes</u>                      |
| 4. What is your age? .....   | <u>18</u> Years <u>0</u> Months |
| 5. What is your Trade or Calling? .....  | <u>Fisherman</u>                |
| 6. Are you Married? .....  | <u>No</u>                       |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? .....                             | <u>No</u>                       |
| 8. Are you willing to be vaccinated or re-vaccinated? .....  | <u>Yes</u>                      |
| 9. Are you willing to be enlisted for General Service? .....   | <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, James Keefe 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.

James Keefe SIGNATURE OF RECRUIT.

Pte D. Dowden Signature of Witness.

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

I, James Keefe 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 29 day of July 1918

Signature of Attesting Officer E. B. 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 July 30 1918 .....

Place .....

Approving Officer. W. H. P.

† 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 James Keefe  
 Apparent age 18 years ..... months. Height 5 feet 6  $\frac{3}{4}$  inches  
 Chest Measurement { Girth when fully expanded 36 inches  
                             { Range of expansion 4 inches  
 Distinctive marks .....

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Martin Keefe  
Marys - Town | 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 _____									
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. 5860 Name James Feeffe Corps B. I.

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

- |  |                                    |
|--|------------------------------------|
| 1. What is your name? .....  | 1. <u>James Feeffe</u>             |
| 2. What is your full Address? .....  | 2. <u>Marystown, N.B.</u>          |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u>                      |
| 4. What is your age? .....   | 4. <u>18</u> Years <u>1</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 .....                     |
|  | 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, James Feeffe 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.

James Feeffe SIGNATURE OF RECRUIT.  
P. L. D. Dowden Signature of Witness.

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

I, James Feeffe 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 29 day of July 1918

Signature of Attesting Officer C. B. 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 July 30 1918 .....

Place St. Johns .....

Approving Officer. W. H. M.

† 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).....

5860  
DESCRIPTIVE REPORT ON ENLISTMENT

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

Name James Kiefe  
 Apparent age 18 years    months. Height 6 feet 6 3/4 inches  
 Chest Measurement { Girth when fully expanded 36 inches  
 Range of expansion 4 inches  
 Distinctive marks   

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Martin Kiefe  
Marys-Town | 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>29-7-18</u>									
Joined at <u>Marys</u> on <u>July 29-1918</u>									
<u>Discharge at Johns Jan. 9/1919</u>									
<u>Special duty Home Defense Ferry Ht.</u>									
<u>Returns to Headquarters 2-10-1918</u>									
<u>Remobilization Ht. 9-1-1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 9-1-1919 (date of discharge)    years 165 days  
 " " Pensions " " " " " " " " " " " "

C.R. 5-860

Extract of Daily Orders Part II? Depot St. John's

Date Jan. 10th 1919

Demobilization

The discharge of the undernsted man ~~XXX~~ on demobilization  
has been confirmed by the Off cer i/c Records on noted date.

5860 Pte. Jas. Keefe

Discharged 9-1-19

C.R. 5860

Extract from Daily Orders Part 11 Unit The Royal Nfld.  
Regt., St. John's, Dec. 12th, 1918.

The undernoted man discharged on Demobilisation has been approved by C.C. Discharge Depot from noted date. He is removed from Depot strength to Discharge Depot pending confirmation by officer i/s Records.

5860 Pte. James Keefe.

12-12-18.

C.R. 5860

Extract from Daily Orders part 11, Depot-St. John's dated Nov. 21st. 1888

The undermentioned returned from special duty at R.N.C.D. DRY  
DOCK, 20-11-18.

5860 Pte. J. Keefe.

28.

C.R. 5860

Extract from Daily Orders part 11. Depot. St. John's dated Nov. 18th.

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#5860 Pte. J. Keefe.

THE ABOVEMENTIONED PROCEEDED ON SPECIAL DUTY  
TO R. N. CO'S DRY DOCK. 16-11-18.

\*\*\*\*\*



C.R. 5860

Extract of Daily Orders, Part 11, Unit: The Royal Newfoundland Regiment,  
dated Octr. 2nd 1918.

THE FOLLOWING RETURNED FROM SPECIAL DUTY AT PETTY HARBOUR:

5860 Pte. J. Keefe.

C.R. 5860

Extract from Daily Orders part 11 Depot St. John's dated Sep. 16/.1918.

5860 Pte. J. Kesse

The above mentioned soldier proceeded on Special Duty to Petty  
Harbour 14-9-18

C.R. 5860

Extract from Daily Orders Part 11 Unit The Royal Hfdl.

Regt. St. John's, dated Aug. 22, 1918.

5860 Pte. J. Keefe.

Grant & leave from 22-8-18 to 1-9-18.

C.R. 5860

Extract from Daily Orders part 11, from Unit The Royal  
Nfld. Regt. St. John's, datwd July 30, 1918.

#5860 Pte. James Keefe.

Attested for General Service with the Royal Nfld.  
Regt. from 29-7-18

Keefe, James

5860

Ray sept.

Jan. 9th., 19.

#5860 Pte. James Keefe,  
Marystown, C.B.

Dear Sir:-

Please find enclosed "Discharge  
Certificate No. 304."

Yours faithfully,

Captain,  
Paymaster & Officer i/c Records.

Enc'l. 1. -

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 5860 Rank Pvt Name James R. Keefe  
 Intended place of residence W. Anson St. St. John's

2. Occupation Fishes. mar.  
 Classification of soldier A Medical Category A 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 DEC 9 1918  
 Date .....

Almoney Lake  
 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  
Dec 9<sup>th</sup> 1918

James R. Keefe  
 Signature of soldier

W. H. Keefe  
 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 Dec 7<sup>th</sup> 1918  
St John's

James R. Keefe  
 Signature of soldier

W. H. Keefe  
 Signature of witness

## STATEMENT OF SERVICE

7. Enlisted for service 29. 7. 18 No of days on Military  
 Discharged from service Dec 17<sup>th</sup> 1918 plus 28 days. Service 165 Day

## 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  
DEC 12 1918  
 Date .....

R. H. Laitant  
 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 January 9/1919

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

20  
21  
21  
21  
165

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 5860 Rank Pfc Name Keefe-James  
 Date of Enlistment 29.7.18 Address Marytown District P.B.  
 Occupation Fisherman Classification for Discharge A Medical Category AD  
 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	D 400A	B 1915	2	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	1		" 6	
B 179c	B 120	M 93	1			

Date 28.11.18

Stanley East  
 O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action

Date.....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied Joseph A. Knowlton

Date 6-12-18

O i/c. Re-clothing.



3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 77 to his home at Marystown and Release Certificate No. 155 issued.

Date 9-12-18

Osborne R. Cap  
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 9-1-18

Date 9-12-18

W. H. Cap  
Depot Paymaster.

Discharge approved for 12-12-18

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
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	*	do 4th	" 5	
B 179b	B 103	ME 2	1		" 6	
B 179c	B 120	M 93	1			

Date 9-12-18

Osborne R. Cap  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

DEC 12 1918

Date .....

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

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

Date Dec 12/1918

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

# MEDICAL HISTORY

Surname Keefe OF James Christian Name

Table I.—GENERAL TABLE

Birthplace :—Parish St. John's County Newfoundland

	SPECIAL RESERVE		REGULAR ARMY	
	Right	Left	Right	Left
Examined	on <u>29</u> day of <u>July</u> 191 <u>8</u>	on	day of	191
	at <u>St. John's</u>	at		
Declared Age	<u>18</u> years	days	years	days
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet <u>6 3/4</u> inches		feet	inches
Weight		<u>140</u> lbs.		lls.
Chest Measurement	Girth when fully expanded	<u>36</u> inches		inches
	Range of Expansion	<u>4</u> inches		inches
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V=	<u>6/6</u>	R.E.—V=	
	L.E.—V=	<u>4/6</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>Lammie Peterson</u>			
(Rank)		Medical Officer		Medical Officer
Enlisted	at <u>St. John's</u>	at		
	on <u>29</u> day of <u>July</u> 191 <u>8</u>	on	day of	191
Joined on Enlistment	Corps	Regtl. No.	Corps	Regtl. No.
	<u>Royal</u>	<u>5860</u>		
Transferred to	<u>1st Lt</u>			
Became non-effective by	on	day of	191	on
(Signature)				
(Rank)				





## Descriptive Return of a Soldier Discharged on Account of Disability

**INSTRUCTIONS**—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station," and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. i/c Records together with the remainder of the man's documents.

Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

Name in full **James Keefe**

Regiment from which discharged *1st. Newfoundland*

Regimental number **5860**

Intended address **Marystown**

Height on discharge **5 Feet 6 $\frac{3}{4}$**

Color of hair on discharge **Brown**

Complexion **Fair**

Color of eyes **Blue**

Descriptive Marks

Figure on discharge

Christian name of Father **Martin**

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.

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)

(Rank)

Station

Date

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

## 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 previous occupation. Fishing

Witness to Peter H. James <sup>his</sup> + Keefe  
Signature of Man.

Signature of the Vocational Officer or his Representative. Reg. No. 5860

Place St. Johns Hld  
Date Dec 6 1918

# The Royal Newfoundland Regiment

Class for Demobilization:—

*A*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

NOV 27 1918

Date .....

Regimental No. *5860*

Name *Keefe James*

Address *Marystown*

Present Medical Category *A II*

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

Members of Board {

*R. H. Lait Capt.*

O.C. Discharge Depot.

*Paterson*

Senior Medical Officer

*Geo Burden*

M. O. Depot

# ROYAL NEWFOUNDLAND REGIMENT.

*Copy.*

Medical Examination held at *Marystown*

Date..... 191.....

1. Name *James Keefe* Age (a) Declared *18*  
(b) Apparent *"*

2. Do you know of anything wrong with you? *No.*

What severe illnesses have you had? *None.*

*5860 ✓*

3. Height *68 <sup>3</sup>/<sub>4</sub> in.* Weight *137*

4. Eyesight (a) Left *Good* (b) Right *Good.*

5. Physical Defects (Examine after strenuous exercise)

*Stone.*

6. Examination of Lungs  
Measurement (a) Expiration *36 <sup>1</sup>/<sub>2</sub>* (b) Inspiration *38 <sup>1</sup>/<sub>2</sub>*

7. Examination of Heart *Normal*

8. Examination of Urine ..

9. Examination of Mouth—(Defective Speech) ..

Teeth ..

Throat ..

Nose ..

Ears—(Deafness, Otorrhea) ..

10. Have you been successfully vaccinated, and when? *No.*

11. Name and address of next of kin  
*Martin Keefe, Marystown.*

REMARKS—

We consider this man { *Fit*  
~~Temporarily unfit for Military Service~~  
~~Permanently unfit for Military Service~~

(If unfit, Form M.S.B. 10 A, should be filled and attached).

*A. J. C. M.*

*John Donald.*

Medical Examiners.

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at Headquarters on July 29 1915

1. Name James Keefe Age (a) Declared 18  
(b) Apparent

2. Do you know of anything wrong with you? Right Blind

What severe illnesses have you had? none

Eyes Blue  
Complex Fair  
Marks

5860

3. Height 5ft. 6 3/4

Weight 140

4. Eyesight (a) Left 4/6

(b) Right 4/6

5. Physical Defects (Examine after strenuous exercise)

6. Examination of Lungs

Measurement

(a) Expiration

37

(b) Inspiration

36

7. Examination of Heart

8. Examination of Urine

9. Examination of Mouth—(Defective Speech)

Teeth

Throat

Nose

Ears—(Otorrhea)

(Deafness)

10. Have you been successfully vaccinated, and when? No

11. Name and address of next of kin Father Martin Marystown P.B.

REMARKS—

A 11

Archibald  
W. Curdson  
Medical Examiners.



# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39.

Regiment of

*Royal Newfoundland Regt*

Number of Sheet *One*

Signature of O. C. Company *Chas Dickson*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>James Keepe</i>	Age on <i>18</i> years months	<i>Fisherman</i>		
Joined	Date	Place and Date of Enlistment	Religion	Place of Birth	
Joined	Date				
Joined	Date	Period of	with Colours <i>165</i> years.	with Reserve <i>365</i> years.	
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
									<i>Demobilized St John's 9/19</i>

To be carried over.

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 5860 Rank Plt Name Keefe James  
 Date of Enlistment 29.7.18 Address Marytown District PB  
 Occupation Fisherman Classification for Discharge A Medical Category AI  
 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.....	<u>1</u> D 400A.....	B 1915.....	<u>2</u>	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 28.11.18

*W. H. ... Capt.*  
 O.C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

**1. Civil Re-Establishment.**

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

Particulars passed to Vocational Officer for information and action.

*James Keefe*  
*mak* *Joseph A. Knowlton*  
 Witness

Date.....

**2. Clothing.**

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) ~~Clothing Supplied~~ *Joseph A. Knowlton*

Date 6-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 77 to his home at Maystown and Release Certificate No. 155 issued.

Date 9-12-18

Os 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 9-1-18

Date 9-12-18

Staley Capt  
Depot Paymaster.

Discharge approved for 12-12-18

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	<u>Form B</u>
B 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	X	do 4th	" 5		
B 179b	B 103	ME 2	✓ 1		" 6		
B 179c	B 120	M 93	✓ 1				

Date 9. 12. 18

Os Dicks Capt  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—  
Officer i/c Records.  
Board of Pension Commissioners.  
with following additional documents.

Date DEC 12 1918

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

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

Date Dec 12/1918

M. Bowley Capt  
Ayc R

Reg. No. 5860 Rank Pte Name Keefe James E.

Attested 29-7-18 Address Warrystown, P. Bay

Allotment..... Allottee .....

Date of Allotment..... Returned from Overseas.....

Embarked for Overseas..... Cause.....

Vacc 9-8-18 1st Inoc 15-10-18

4.1.22-9.11-28 28 7/8 B. etc 28-8-18.

14-9-18. Special duty Petty Harbour, B. etc. 1-10-18

16-11-18. Special duty by boat, returns 20 11 18.

28-11-18 asked to Demobilization Officer

12-12-18. **DISCHARGE APPROVED ON DEMOBILIZATION.**

ROYAL NEWFOUNDLAND REGIMENT.

*Duplicate*

Medical Examination Held at Headquarters on July 29 1918

1. Name James Keefe Age (a) Declared 18  
 5860 (b) Apparent

2. Do you know of anything wrong with you? Right Blinks

What severe illnesses have you had? None

*Eyes Blue  
 Complexion Fair  
 Moustache*

3. Height 5-6 3/4 Weight 140  
 4. Eyesight (a) Left 4/1 (b) Right 4/1  
 5. Physical Defects (Examine after strenuous exercise) ~

6. Examination of Lungs ~  
 Measurement (a) Expiration 32 (b) Inspiration 36

7. Examination of Heart ~

8. Examination of Urine ~

9. Examination of Mouth—(Defective Speech)  
 Teeth  
 Throat  
 Nose  
 Ears—(Otorrhea)  
 (Deafness)

10. Have you been successfully vaccinated, and when? no

11. Name and address of next of kin Father Martin Macoyston P.B.

REMARKS—

A 11  
Sgt Archil Dart  
20 Borden

# ROYAL NEWFOUNDLAND REGIMENT

297

Medical Examination Held at Mapleton Placentia Bay

1. Name James Keefe Age (a) Declared 18  
 (b) Apparent 18
2. Do you know of anything wrong with you? No

What severe illness have you had?



3. Height 68 3/4 inches Weight 137  
 4. Eyesight (a) Left Good (b) Right good
5. Physical Defects (Examine after strenuous exercise)

6. Examination of Lungs  
 Measurement (a) Expiration 36 1/2 (b) Inspiration 38 1/2

7. Examination of Heart Normal  
 EXAMINED AT HEADQUARTERS ON July 29<sup>th</sup> 18

8. Examination of Urine Normal  
 AND PLACED IN CLASS F II

9. Examination of Mouth—(Defective Speech) Normal
- Teeth Normal
  - Throat Normal
  - Nose Normal
  - Ears—(Deafness, Otorrhea) Normal

10. Have you been successfully vaccinated, and when? No

11. Name and address of next of kin Martin Keefe - Mapleton Placentia Bay

REMARKS—

We consider this man {

- Fit
- ~~Temporarily unfit for Military Service~~
- ~~Permanently unfit for Military Service~~

(If unfit, Form M.S.B., 10 A, should be filled and attached).

Att  
Chm

J. H. M. Donald, M.D.

Medical Examiners.