



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

R.C.

No. *3620* Name *Peter Neville* Corps

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. *Peter Neville*
2. What is your full Address? 2. *Black Horse Rd*
3. Are you a British Subject? 3. *Yes*
4. What is your age? 4. *18* Years *0* Months
5. What is your Trade or Calling? 5. *Clerk*
6. Are you Married? 6. *No*
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. *No*
8. Are you willing to be vaccinated or re-vaccinated? 8. *No*
9. Are you willing to be enlisted for General Service? 9. *Yes*
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... 10. { Name
Corps *1st*
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? 11. *Yes*

I, *Peter Neville* 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.

Peter Neville SIGNATURE OF RECRUIT.
E. N. H. 17 Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, *Peter Neville* 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 *14* day of *April* 191*5*

Signature of Attesting Officer *[Signature]*

†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 *1st*

If enlisted by special authority, such will be attached to the original attestation.

Date.....191*5*
Place..... } Approving Officer.

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.
‡ Here insert the "Corps" for which the Recruit has been enlisted.

* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz:—(Name).....re-enlisted in the (Regiment).....on the (Date).....

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Peter Heville
 Apparent age 18 years _____ months. Height 5 feet 9 inches
 Chest Measurement { Girth when fully expanded 36 1/2 inches
 Range of expansion 4 1/2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Heville
Black Hawk Rd | 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 " _____ (" ") _____ " _____



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3620 Name Peter Neville Corps R.C.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Peter Neville</u> |
| 2. What is your full Address? | 2. <u>Blank Street</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>18</u> Years <u>0</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Clerk</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, Peter Neville 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.

E 18-4-17 Peter Neville SIGNATURE OF RECRUIT.
P. E. duval Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Peter Neville 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 on this 18 day of April 1915.

Signature of Attesting Officer P. E. duval

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the.....

If enlisted by special authority, such will be attached to the original attestation.

Date.....191..... } Approving Officer.
 Place..... }

† 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 Peter Neville

Apparent age 18 years months. Height 5 feet 9 inches

Chest Measurement { Girth when fully expanded 36 1/2 inches
Range of expansion 4 1/2 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Neville

Black Hawk Rd | 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>18-4-17</u>									Lt. Col. Kept 16-7-7. General for 16. 16-2-18. Lt. Col. Kept 18-10-18.
Joined at <u>Mex's</u> on <u>April 18 '17</u>									
<u>Discharged March 14/1919</u>									
Embarked <u>St John's St. Regis</u> to <u>Halifax N.S.</u> 19 7/17 Embarked for <u>Oct 27 3/18</u>									
Disembarked <u>Portsmouth</u> 29-3-18 joined <u>8th Btn</u> in the field 24-4-18 <u>Admitted</u>									
24th <u>Step. Coy</u> <u>St. Regis</u> <u>Ct. Regts</u> 4-5-18 <u>Exp to 1st Bn</u> <u>Admitted</u> 11-5-18 <u>Joined 2nd Bn</u> <u>from 14/18</u>									
Promoted to <u>Company</u> 25 5/18 <u>Admitted</u> 7-11-18 <u>Admitted</u> 16 5-18 <u>Admitted</u> then									
posted to <u>1st Bn</u> <u>Admitted</u> 16 7/18 <u>Admitted</u> for <u>demobilization</u> 30-1-1919 <u>Admitted</u>									
<u>Kept</u> <u>Admitted</u> <u>Admitted</u> <u>Admitted</u>									
<u>Demobilization</u> <u>Admitted</u> 14-3-19									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>14-3-1919</u> (date of discharge)					1 years <u>331</u> days				
Pensions									

C.R. 3650

Extract of Daily Orders, Part 11, ROYAL WESSEX REGIMENT,
REGIMENT, ST. JOHN'S, WILD. March 4th 1919.

The discharge of the undernoted on demobilization has
been APPROVED by O.C. Discharge Depot on noted date.

28/2/19.

#3620 L/C. P. Neville.

C.R. 3620

Extract from Preliminary Report of Medical Board held on Thursday
Feb. 20th 1919.

3620 PTE. P. Neville.

Recommended Discharge as permanently unfit.

C.R. 3620

Extract from Daily Orders Part II Unit The Royal Nfld.
Regt. St. John's, 11-2-19.

The Undernoted returned from Overseas and reported to
Depot. 7-2-19.

Repatriated on A.F. B179.

3620 L/C. Peter Neville.

C.R. 3620

Extract from Nominal Roll of the Royal A.F.M. Regt.
Published S.S. Garrison, Jan. 30th, 1919.

3620 L/C. Neville.

C.R. 3620

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

3620 Pte. P. Neville.

THE ABOVE MENTIONED TO BE LANCE CORPORAL .-

Extract from Orders by Lt. Col., B. J. Barton DSO.
Commanding 2nd., Battalion of the Newfoundland Regiment
dated 17-10-18.

3620 Pte. P. Nevill.

The following having reported back from the 1st., Battalion
and posted to "H" Company.

C.

C.R. 3690

EXTRACT FROM CASUALTIES RECEIVED FROM PAY AND
RECORD OFFICE, LONDON DATED 2 OCTOBER 1918.

3620 Pte. P. Neville.

EX CONVALESCENT HOSPITAL 2/10/18 IS GRANTED FURLOUGH TO
TATTOO 11/10/18. FGT FOR 1 DUTY.

BC.

C 3620

Extract from Telegram from Synoptical, dated Sept., 19th.m 1918.

With reference to your telegram Sept., 13th Aug. 2nd., 3620 Neville in Hospital that date advised this Office amount should be retained and placed to his credit.

C.R. 3625

Extract from Telegram to Synoptical, London, dated Sept. 13th 1918.

With reference my telegram August 2nd., 3620
Neville £10. amount not received up to August
7th., Inquire and report.

C.R. 3620

Extract from Casualties received from P & R Office London,
Aug.17-18.

3620 Pte.P Neville.

Was transferred from the 3rd L.G.H. S.W.18.to the Conv.H.
Eastbourne, on 15-8-18.

A.F.W.3119 from Eastbourne Hospital.

C.R. 3620

Extract from Casualties received from B & R Office, London,
Aug. 16-18.

3620 Pte. Neville.

Was transferred from the 3rd L.G.H. to the Summerdown Conv.
Hospital, Eastbourne, on 15-8-18.

Authority;

A.F.W. 3016 from 3rd L.H.H.

C.R. 3620

Extract of Code Telegram from Secretary of State (received June 23rd. &
1918) dated June 24th. 1918.

Following from Reeve:-

Association Visiting Committee reports :

Progressing favourably.

3620 Pte. Peter Neville.

C.R. 3620

Extract from Daily Orders part 11, from Unit The
Royal Wilt. Regt. In the Field, dated 8-6-18

#3620 Pte. P. Neville.

Invalided to England 25-5-18 Sick.

C.R. 3620

Extract of REEVE ASSOCIATION VISITING COMMITTEE report dated June 3rd. '18.

3620 Pte. Peter Neville

Royal Nfld. Regt.....Improving.

C.R. 3620

Extract from Code Telegram from Secretary of State
Received June 1st, 1918, to Governor June 3rd, 1918.

The following from Reeve Association Visiting Committee
reports the condition of the following men in Hospital:

#3620 Pte. Peter Neville.

Improving.

C.R. 3620

Extract of Telegram to Military St. John's from London dated May 29th
1918.

3620 Neville

Royal Nfld. Regt..... Trench Fever. *at Handsworth*

C.R. 3620

May 30th 18

Dear Mr. Neville,

I regret to have to inform you that a report has this day been received from the Record Office of the Royal Newfoundland Regiment, London, to the effect that

3620, Private Peter Neville, is at Wandsworth suffering from French Fever.

I trust that later reports will bring news of his convalescence.

Any further information received at this Office as to his condition will be at once notified to you.

Yours faithfully,

Mr. John Neville,
Blackmarsh Road.

W. F. Rendell
for Minister of Militia. C.S.O. Lieut. Col

C. 2.—Casualties.

1198 C.R. 3620



3rd London General HOSPITAL, at Wandsworth, S.W.

Affiliated to _____

NOMINAL ROLL of Sick and Wounded from the * France Expeditionary Force
 admitted on 26/5/18 from Hospital Ship _____, or
 _____, or
 _____, Dover.

* Here insert which Expeditionary Force.

NOTE.—These rolls should be forwarded direct to the War Office, Alexandra House, Kingsway, W.C., *not later than the day after admission*; envelopes to be marked C. 2, Casualties; rolls are not to be telegraphed in advance.

Regtl. No.	Rank	Name (Surname first)	Corps	Disease or Injury (State whether sick or wounded, and whether slight, severe or dangerous)
3620	Pte	Neville, P.	R. Nfld R.	Trench Fever
		(Sgd) H. FAGAN,	Major, R.A.M.C.T., Registrar.	

NOTE.—Admissions to the outlying sections of the hospital should be shown separately. If the distance of these sections should render it impossible to forward the rolls the day after the admissions, the sections should be instructed to send lists (on these Army Forms) direct to the War Office.

C.R. 3620

SICK AND WOUNDED N.C.O.'s AND MEN OF THE EXPEDITIONARY FORCE - FRANCE.

INFANTRY RECORD OFFICE - HAMILTON

No. H.A. 23552

Adm. 11 Stv. H. Rouen 14 May '18.

480006	Pte. Sherin M.	101/Lab. Co. 1st. Bn/	'W' Gas Pois. 'B'	Shl. Sev.
		R. Scots.		
33854	" Murphy R.	16/H.L.I.	P.U.O. (T.F.)	
42368	" Loughlin R.	1/7 do. Egypt. Draft.	ICT. Back.	Mild.
30033	" Kerr J.	4/R. Scots. Hussars.	Albaninuria.	
51125	" Linnane J.	1/5 K.O.S.B.	P.U.O.	Sev.
265474	" Naylor A.	1/7 Scots. Rif.	do.	Mild.
201700	" Shearn F.J.	1/5 K.O.S.B.	do.	"
200229	" Cosens C.	1/5 H.L.I.	do.	"
51006	" Phillips J.	1/4 R.S. Fus.	do.	"
241196	" Rice H.	1/5 K.O.S.B.	do.	"
240755	" Shearman J.	1/5 do.	do.	"

Adm. 11 Stv. H. Rouen 15 May '18.

275806	Pte. Hulland H.	5/6 R. Scots.	GSW. Leg. R.	Sev.
41640	" Nelson R.	5/6 do.	P.U.O.	"
50886	" McKay J.	17 do.	do. TF.	"
203148	" Mackintosh J.	1/4 R.S. Fus.	ICT. Hands.	Mild.
201365	" Anderson R.	1/4 K.O.S.B.	Scabies.	"
240054	" Strachan R.	1/5 R.S. Fus.	do.	"
241176	" Kettlewell J.	1/6 H.L.I.	P.U.O.	"
24814	" Clafferty G.	1/5 K.O.S.B.	do.	"
477989	" Spencer J.	160 Lab. Coy. late 1/ KOSB.	Taenia Solium Sev.	"

NEW FOUNDLAND - EXPEDITIONARY FORCE

No. H.A. 23552

Adm. 11 Stv. H. Rouen 15 May '18.

3620	Pte. Neville P.	1/R.N. Fld. R.	P.U.O.	Mild.
------	-----------------	----------------	--------	-------



1162

SICK AND WOUNDED N.C.O's AND MEN OF THE EXPEDITIONARY FORCE - FRANCE.

LONDON INFANTRY RECORD OFFICE LONDON E.O.

LIST No. H.A. 23405.

DIS. TO M.B. DEP. ETAPLES EX CON. DEP. 11th MAY 1918. CLASS MB.

21045	Pte.	Venables, G.	2nd. Roy. Fus.	
47313	"	Hill, E.	12th. K.R.R.	
41963	"	Scott, R.	14th. Londons	
16774	"	Steele, M.	2nd. Roy. Fus.	Class A.
R/2448	"	Millgrove, F.	11th. K.R.R. Att.	Do.
			75 P.O.W.Go.	
S/20655	"	Dowell, F.	7th. Rifle Bde.	Do.
85651	"	Plane, G.	10th. Roy. Fus. Att.	Do.
			37 M.G.C.	
303907	"	Ford, P.	1/5th. Londons.	Do.
65618	"	Cox, B.	2nd. Do.	Do.
B/203726	"	Wood, A.	7th. Rifle Bde.	Do.
245467	"	Gato, F.	1/2nd. Londons.	Do.
14382	"	Oldacre, P.	? 6th M.G.C. Depot	Do.
			2nd Lond.R.W.F.	

FOOT GUARDS.

LIST No. H.A. 23405.

3659	L/O.	Hughes, H.	1st. Welsh Gds.
16438	Pte.	Simpson, J.	2nd. Scots Gds.
1487	"	Davies, D.	1st. Welsh Gds.

Dis.to MB Dep.Etaples ex Con.Dep.11 May'18.	Class A.
Dis.to MB Dep.Etaples ex Con.Dep.11 May'18	Class A.
Dis.to MB Dep.Etaples ex Con.Dep.11 May'18	Class A.

SOUTH AFRICAN RECORD OFFICE.

LIST No. H.A. 23405.

4885	Opl.	Boyle, J.	3rd. S. Africans.
------	------	-----------	-------------------

Dis.to MB Dep.Etaples ex Con.Dep.11 May'18	Class A.
--	----------

NEWFOUNDLAND CONTINGENT.

LIST No. H.A. 23405.

3620	Pte.	Neville, P.	1st. Newfoundland
------	------	-------------	-------------------

Dis.to MB Dep.Etaples ex Con.Dep.11 May'18	Class A.
--	----------

SICK AND WOUNDED N.G.O.'s AND MEN OF THE EXPEDITONARY FORCE - FRANCE.

C.R. 3620

No. 1. RECORD OFFICE. SHREWSBURY.

LIST No. H.A. 23302.

ADM. 6 CON. DEP. ETAPLES 9th MAY 1918.

52850	Pte. Grant, M.	.9th Welsh.	.IOT. Feet
222030	" Jones, A.J.	1st Mons.	Gassed Shell W.
18098	" Hodson, J.H.	6th K.S.L.I.	PUO Tr. Fever
238187	" Birch, G.H.	6th do.	D.A.H.
27520	" Rees, E.	1st do.	Gassed Shell W.
39984	" Lloyd, R.	2nd S. Lances.	GSW. Deltoid L.
59842	" Morris, P.	.2nd Welsh.	Gassed Shell W.

INFANTRY RECORD OFFICE - WARWICK.

LIST No. H.A. 23302.

ADM. 6 CON. DEP. ETAPLES 9th MAY 1918.

241883	Pte. Webber, S.R.	.2/6th R. Warwicks.	Tonsillitis
267807	" Tombs, L.R.	2/4th Ox. & Bucks L.I.	GSW. Eyelid L.
35706	" Cain, E.	2/6th R. Warwicks.	Tonsillitis
28218	" King, H.	2/5th Glos.	GSW. Hand L.
28673	" Newman, E.	.2/5th R. Warw. att. 147 POW Co (B1)	Influenza
33895	Pte. Cohen, I.	Ox. & Bucks L.I.	P.U.O.
307422	" Barker, S.	7th R. Warwicks.	Constipation

FOOT GUARDS & MACHINE GUN GUARDS.

LIST No. H.A. 23302.

ADM. 6 CON. DEP. ETAPLES 9th MAY 1918.

3659	L/O. Hughes, H.	1st Welsh Gds.	GSW. Thumb L.
1402	Pte. Minchin, A.	MG Guards Depot	Influenza
18438	" Simpson, J.	2nd Scot Gds.	Cellulitis Hand R.
10086	" German, G.	3rd Cold. Gds.	Gas Shell Burns W.

NEWFOUNDLAND EXPEDITONARY FORCE.

LIST No. H.A. 23302.

3620 pte. Neville, P. 1st R. Newfnd. AOT Neck. . . . Adm. 6 Con. Dep. Etaples 9th May '18.

SICK AND WOUNDED N.C.O's AND MEN OF THE EXPEDITIONARY FORCE - FRANCE

C.R. 3620

No. 1 - RECORD OFFICE - HOUNSLOW

LIST No.H.A.23074

127987 L/O.Hobson,H.W. M.G.O. 2 Bn. I.C.T. Knee R. Sev. . Adm.6 Gen.H.Rouen 4th.May'18.
 (4-E.Surreys).
 12152 Pte.Garnham,J. 4-Midd'x Rgt. G.S.W. Leg R. Sev. . Adm.6 Gen.H.Rouen 4th.May'18.
 12395 " Bremer,A. 2/7 Londons do. Arm L. . DIED in 6 Gen.H.Rouen 4th.May'18.

No. TWO - RECORD OFFICE - HOUNSLOW

LIST No.H.A.23074

ADM. 5 GEN. HOS. ROUEN 5th. MAY 1918.
 24502 Pte.Hurn,A. 6 E.Kents G.S.W. IX (1) VIII (1) Sev.
 957 Sgt.Jamblin,W.H. 6- do. G.W. IX (1) Sev.
 14093 Pte.Dearnley,W. 6- do. G.W. VIII (1) IX (1) Dang.
 28389 " Neare,G.R. 6-R.W.Kents G.W. VIII (1) L.Sev.
 14071 " Brown,J.H. 6-E.Kents P.O.U.O. Mild

WINCHESTER RECORD OFFICE

LIST No.H.A.23074

15106 Pte.Flaherty,J. 13 K.R.R.Corpse Lumbago MildAdm.5 Gen.H.Rouen 5th.May'18.
 A/203858 Cpl.Hain,W.E. 13- do. P.O.U.O. Sev. Adm.5 Gen.H.Rouen 5th.May'18.
 32466 Pte.Boyce,W. 13-K.R.R.C. G.W. IX (1) L.Mild . . .Adm.5 Gen.H.Rouen 5th.May'18.
 42146 " Johnson,E. 1- do. P.U.O. MildAdm.6 Gen.H.Rouen 4th.May'18.
 99205 L/C.Rodgers,S. M.G.O. 37 Bn. I.O.T. Hand Mild . . .Adm.6 Gen.H.Rouen 4th.May'18.
 (15 London).
 6374 " Bailey,J.A. M.G.O. 38 Co. Gas Shell W. Sev. . . .Adm.6 Gen.H.Rouen 4th.May'18.
 (Rif.Bde).
 43414 Pte.Gottrell,W.J. 1-K.R.R.C. Bronchitis Mild . . .Adm.6 Gen.H.Rouen 4th.May'18.
 532496 " Patten,F. 13-Rif.Bde. P.U.O. " . . .Adm.6 Gen.H.Rouen 4th.May'18.

NEWFOUNDLANDLAND EXPEDITIONARY FORCE

LIST No.H.A.23074

3620 Pte.Neville,P. 1 R.Newfoundland I.O.T. L.Leg & PUO. Adm.24 Gen.H.Etaples 4th.May'18.
 Mild



1068

3620

C.R.

Extract from Daily Orders Part 11 Unit The Royal Nfkd.
Regt., April 18th, 1917.

3620 Dte. P. Neville,

Attached to the strength from Apl. 18th, 1917.

NEWFOUNDLAND CONTINGENT G. R. 3620

Extract of Nominal Roll of Draft No. 40; 80 Other Ranks from 2nd. Bn.,
Royal Newfoundland Regiment, Winchester, to 1st. Bn., Royal Newfoundland
Regiment, B. E. F.

Embarked Southampton, 27/3/18.

3620 Pte. P. Neville.

Extracts of daily orders part 11 by LIEUT. COL. BERNERS.D.S.O.
commanding 3rd. Bat. ROYAL NFD. REGT. Dated 6/3/18.

C.R. 3624

3620 L/Cpl. NEVILLE ✓

The above N.C.O. reverts to Private from 26/2/18.

C.R. 3620

Extract from Nominal Roll, embarked St. John's for Overseas 19-~~7~~⁵-17.

3620 PTE. P. NEVILLE.

A Neville

C.R. 3620

A.R.W.

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* } Former Trade
 or Occupation }
2. Regtl. No. *3620* 3. Rank *Lt.* 7a. If the soldier claims previous service in Army, he should state—
 (a) Former Regts. or Corps ;
 with Regtl. Nos.
4. Name *NEVILLE*
 (Surname) (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....
 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
 (b) Where (if any)
 (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."
11. Date of origin of disability.
12. Place of origin of disability.
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.
Contracted French Fever in France, evacuated to U.K. Treated at 3rd Lt. G. H. and discharged without cured.

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | Yes | |
| (ii.) Previous active service | No | |
| (iii.) Climate in pre-war service | No | |
| (iv.) Ordinary military service before the war | No | |
| (v.) Serious negligence or misconduct on the man's part. } | No | |

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

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., 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 now complains of no disability

16. Was an operation performed? If so, when and what was its nature?
17. If not, was an operation advised and declined?
18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

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.

Station ... Hazelton Camp
 Date ... 8th Aug 1919

Medical Officer in charge of case.

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



This Form is to be used in connection with Pamph. M. E. (1) N. F. 1915

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of *Peter Neville*
aged *18* conducted at *Hodges*
Date: *16/6/17.* Recruiting Officer:

NO OF TEST

FINDING

- 1 no
- 2 no
- 3 no
- 4 no
- 5 no
- 6 no
- 7 yes
- 8 yes
- 9 no - ho
- 10 "
- 11 "
- 12 "
- 13 teeth to be attended to
- 14 "
- 15 "
- 16 "
- 17 "
- 18 "
- 19 9/16 Ball
- 20 "
- 21 "
- 22 "
- 23 "
- 24 "
- 25 "
- 26 "
- 27 "
- 28 "
- 29 "
- 30 "
- 31 "
- 32 "
- 33 no
- 34 5 ft 9 in
- 35 132 lbs
- 36 32-36 1/2
- 37 \$ 5.00 per week
- 38 father John -
- 39 no

so report April 18th 17. 3620

Black Marsh Road.
J. W. Gordon

Signature of Medical Examiner:

Dr

admits to

FORM K

Nº 3610



4 / 1ST. NEWFOUNDLAND REGIMENT *4*

ALLOTMENTS

I, P. Neville, Regl. No. 3670

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and sixty 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 June 1st 1917

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<i>3287</i>	<i>Mother</i>	<i>Mrs John Neville (Mary)</i>	<i>Polackman's Pond</i>	<i>60</i>
Total Allotment, \$				<i>60</i>

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.) *Chas. L. Appleby*

Officer Commanding *3* Company

(Sig.) *P. Neville*

(Rank) *Pt*

*John W. S.
May 16 1917*

No. 3610



4/ 1ST. NEWFOUNDLAND REGIMENT 4

ALLOTMENTS

I, P. Neville, Regl. No. 3620

hereby agree, until further notification by me, and in similar official form to make an Allotment of 60 Dollars and Sixty 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

June 1st 1917

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3387	Mother	Mrs John Neville (Mary)	Blackmusk Road	60
Total Allotment, \$				60

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.) Thas. A. [Signature]

Officer Commanding
6 Company

John W. [Signature]
May 16 1917

(Sig.) P. Neville

(Rank) Plt

Only for use with Men returned from an Expeditionary Force
or from Garrison's Abroad.

Admitted 26 5 18
Army Form W. 3016.
(In Books of 200.)

No. _____ Date 15/8/18 191

- * (1) To the Officer i/c Records } 58 Victoria St
* (2) The Officer Commanding } Royal Wiltshire
* (3) The Paymaster } 58 Victoria St Station.

* Strike out that which is inapplicable.

Regimental No. 3620

Rank and Name Pte Neville P

Regiment or Corps Royal Wiltshire Regt.

has been granted a furlough from transferred to 15/8/18 to

His address while on leave will be Summerdown Com. Hb.

I consider he is fit for

* Strike out that which is inapplicable.

- * I. DUTY.
* II. COMMAND DEPT.
* III. EMPLOYMENT.

Officer in charge G. Hall, Capt. Genl Hospital.

Registrar, R.A.M.C.I.
Station.

Four copies to be made, and one copy sent to each Officer mentioned (above and one copy filed in the office.)

In the case of men of the Royal Flying Corps, Royal Engineers and Army Ordnance Corps, two copies of Army Form W. 3016 will be sent to the Officer in charge Records concerned and one to the Paymaster, instead of one copy to the Officer i/c Records, the Paymaster and O.C. shown in the Schedule.

12876/292

3rd London Gen. Hospital,
Wandsworth.

6th August 8

3620, Pte. P. Neville,

✓
6984

Pay to 3620 Neville £10:0:0

No 2 account

MB

To Report to O.C. Records, 38
Victoria St. in London.

If a General Mobilization is ordered every soldier on pass must return
immediately to his unit without waiting for instructions.



No. _____

Regiment Queen's Own

PASS.

No. 362 (Rank) O/S

(Name) Neville

has permission to be absent from his quarters, from

Jan 2. 18. 18 to Feb 2. 18. 18

for the purpose of proceeding to London.

(Station) Eastbourne

A. Evan Macpherson Capt.
Commanding.

(Date) 2-18-18

C. Division I.P.O.

COPYRIGHT RESERVED.

RAILWAY WARRANT for Journeys in the United Kingdom.

No. 599940

This Warrant is to be used as a ticket by Officers, N.C.O.'s and men (in uniform) but in all other cases it must be presented to the Booking Clerk at the Station where the holder is authorised to commence the journey, and a railway ticket will be issued in exchange.

L. B. & C.

The Directors of the _____ Railway Company are hereby requested to provide conveyance as shown hereon.

This Warrant is ^{*Chargeable} ~~not chargeable~~ against the Public Pub.
*Strike out one and initial here

Date 2 OCT 1918
Station from EASTBOURNE
Station to London (Victoria)
Route via _____
Single
Return

Nature of duty or for what other service (if not under route state below whether for a recruit or for a man on Discharge).
To O.C. Record Newfoundland and Ryf.
58 Victoria St. S.W.
Signature and Rank of Issuing Officer [Signature] for Col. R.A.M.

The particulars on the back of this Warrant should be fully completed.

Number to be conveyed.
(To be filled in by the Issuer.)

To be filled in by Railway Company.
Distance to be shown when mileage rate applies.

Officers, 1st Class ...
Warrant Officers, 2nd Class when available, otherwise 3rd Class ...
Women and Children 12 years of age and upwards, at fares for adults, as above ...
Children between 8 and 12 years of age, half fares for adults, as above ...
Soldiers, 3rd Class ...
Women and Children 12 years of age and upwards, at fares for adults, 3rd Class ...
Children between 8 and 12 years of age, half fares for adults, as above ...

Ordinary Fare. Military Fare. Amount payable at Military Rate.

Number to be conveyed	Ordinary Fare.	Military Fare.	Amount payable at Military Rate.
<u>One</u>			



Guns and Carriages ...
4-Wheeled ...
2-Wheeled Vehicles ...
Total Weight of Guns, &c. ...
Horses or Mulas { In horse boxes ...
 { In cattle trucks ...
Bicycles ...

No.	Weight, including Contents			Mileage.	Rate.
	Tons	cwts.	qrs.		
TOTAL ... £					

To be filled in by Booking Clerk when a ticket is issued. No. of ticket issued _____ Route via _____ Station _____ Date _____ (Signature)

Counter-Signature of Official representing Railway Company _____
Any alteration in the Warrant which may be absolutely necessary must be verified by the signature of the person who makes the alteration. When a steamship journey is included, the class to which the passengers are entitled should be stated, if it differs from that by Railway. The weight of baggage and stores not packed in Army Vehicles must be included, separate forms to be used for traffic not so packed. (REV) W/4873/1000. 2/12. S.B., L.A. (1916).

Form to be filled in by the Issuer of Warrant.

When the names of the party are too numerous, the name of the person in charge and the number (in words) of the men of each rank need only be entered in these columns.

Wives and families of Warrant Officers, Non-Commissioned Officers and Men on the MARRIED ROLL.

Regiment or Corps.	Squadron, Battery, or Company.	REG. NOS., RANK AND NAMES.	NAMES.	Children.	
				Sex.	Age.
<i>Newfoundland</i>	<i>1st Battn.</i>	<i>Neville P. (3620-P.S.)</i>			

Authority for journey:— *To Officer in Charge, Newfoundland Regiment, 58 Victoria St. S.W.*

J. S. DeBolt

LIEUT. FOR

(Signature of Officer)

COMMANDANT

HOSPITAL

WESTBOURN

To OFFICER I/C RECORDS at *38 Victoria St.
London, W.C.*

The undermentioned

was ^{is} ~~are~~ being discharged from

~~was~~ ^{was} admitted to ~~were~~ ^{were}

The ~~this~~ Hospital to *Caetbourn Convalescent*

on *2.10.18* leaving

Station ~~a.m.~~ ~~p.m.~~



No.	Rank	Name	Battalion and Regiment	Remarks
<i>3620</i>	<i>Pte</i>	<i>Neville P.</i>	<i>1st Newfoundland Regt.</i>	<i>To O.C. Records</i>

D. Evan Mather
Capt.
O.C. C. D. W.

Officer i/c. Records,
Newfoundland Contingent,
58, Victoria Street,
LONDON, S.W.



The undermentioned man is being discharged Hospital on Wednesday next, Octr. 2nd, Class I, Duty, and will be sent to report himself to you that day :

No. 3620, Pte. Neville, P. 1st Newfoundlands. Served in France.
Transferred here on
15: 8: 1918.

Summerdown,
EASTBOURNE,
29: 9: 1918.

J. Sidebotham

LIEUT FOR

-COL. R.A.M.C.

COMMANDANT CONVALESCENT HOSPITAL

No.

961

Ang **ANGLO-AMERICAN**
WESTERN UNION  **DIRECT UNITED STATES**
CABLEGRAM

Prefix <i>1</i> Code <i>14</i>		SENT		FOR STAMPS
WORDS	CHARGE	At _____	To _____	By _____
<i>14</i>	<i>2 1/2</i>	VIA ANGLO.		THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.

30/7/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To EFM JOHN NEVILLE

BLACKMARSH ROAD STJOHNS (Newfoundland)

CABLE TEN POUNDS THROUGH MINISTER MILITIA

3620 NEVILLE

Chge 9/11

CHARGES	
PAY BOOK	<i>at 3.</i>
Date <i>6/8/18</i>	by <i>W.C.</i>

9/11 ✓

Authorised.

NOT TO BE
TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

58 Victoria St. S.W. 1.

Signature _____

Address _____

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

No. 3620 Rank Pte Name P. Neville

Pay	F.A.	Wkg	Total	N.W.P. 73
100	10		110	<i>etc.</i>
Less Allotment			20	
Net Rate			90	

DEBITS	Date	£	s	d	CREDITS	Period		Days	Rate	£	s	d
						From	To					
Balance					Balance		12 ⁴ / ₁₈					2 17 7
Acquittance Rolls		1	9	4	Pay @ Net Rate	13 ⁴ / ₁₈	2 ¹⁰ / ₁₈	174	50	8	00	17 17 6
Hospital Advances		4	12	0	<i>P.A. 10dys</i>	2 ¹⁰ / ₁₈	11 ¹⁰ / ₁₈	10	7			1 0 10
A.B. 64.						3 ¹⁰ / ₁₈	12 ¹⁰ / ₁₈	10	50	5	00	1 0 6
P.&R.O. Payments		6	0	0								
<i>E.g.m.</i>			2	11								
<i>Other</i>				5								
<i>Receipts</i>				9								
<i>Hosp. Adv. 28552</i>				5								
<i>Receipts 9100</i>				1								

21-15-11-
1-0-6
22-16-5

12-4-8
C.D.C. 5-0
21-11-12-9-8
9-0-10-8
21-9-8

~~9-10-3~~
~~1-6-9~~

3rd LONDON GENERAL HOSPITAL

No. _____

13 AUG 1918

WANDSWORTH, S.W. 18.

3rd London Gen. Hosp

Aug 13th 1918

Dear Sir

Please allow to me the sum of one pound credit which may be used

STAMP
INITIALS
[Handwritten initials]

me ok. £ 1.00. 5 to P. G. Verille

RECEIVED
13. 8. 18
Sgd [Signature]
APPROVED

no 3620 1st Regt

G C Hall
Capt

8512

KB 17/18 3rd London by train
July 5th 1918

To Chief Paymaster

NEW FOUNDLAND CO. LTD.
55, VICTORIA ST.
LONDON, S.W. 1
5/7/18

Pay Received

Office
073.21.0-0

Please remit to me the sum of
one pound from any credit
Due to me and to blidge -
3620 Pto V. Neville
Signed. Approved
S. Chaffin
at Royal Wld Regt

APR 5/7/18
No. 8090



Dear Sir
If you please a
one pound out of my credit.

Pte P. J. Neville No 3620

1st Royal Newfoundland.

Date 24/6/18

FILE
GRAND
INITIALS
AKB 25/6/18

AKB £1-0-0
7/7/18
Signed
7872
at home
11/11/18

No. _____

N.F.P./45.

NEWFOUNDLAND CONTINGENT

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

Please remit to Mr. P. J. Neville

Royal Nfld Regt

the sum of one pounds one pound s. (£-1-12..)

on account of any balance that may be due to me.

J.H.
1.0-0.

Ed. 30/7/18.

Receipt no 8360

Dated at Essex Red X Hosp
July, 30-7-18 1918

Regtl. No. 3620, Rank Pte

Name P. J. Neville

Approved H. J. Ballantyne
Officer I/C.,

Essex Red Cross Hospital.

FILED BRANCH
INT
31/7/18
[Signature]

No. _____

10913/259

N.F.P./45.

NEWFOUNDLAND CONTINGENT

*P.K. £2-0-0 hrs.
8/6/18
611*

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

Please remit to Pte. P. J. Neville

~~Mr~~ Royal Infld. Regt.

the sum of £2 pounds — s. (two Pounds)

on account of ^{any} balance that may be due to me.

10913/259/8/7/18



Regt. No. 3600 Rank Pte

Name Pte. P. J. Neville

Approved _____

*G. C. Hall
Cape*

Officer I/C.,

3rd London General Hospital.

Dated at _____

July 6th 1918



10913/259/P&A

3rd. London General

Wandsworth, S. W. 18.

8th, July 8

3620 Pte.

P. J. Neville

2. 0. 0

KFB
10/7/18

NEWFOUNDLAND CONTINGENTTELEGRAM full text
extract from MINISTER OF MILITIA No. A.G. 55/24

Dated 13 / 9 / 18 (8089), Received 14 / 9 / 18

Decoded by H.H.B. Checked by W.H.J.Branch Pay Acted upon (Initial) Acknowledged per No. dated / /

397.

With reference your telegram 2nd. August- 3620- Neville-
£10.- amount- not received- up to- Aug. 17th- enquire into-
report- fullstop.-

MILITARY.

W.H.J.

EXTRACT OF TELEGRAM.

"Despatched 29/9/18 (1227):

"Military. St. John's."

"Reference your telegram 13th Sept.-reference your telegram 2nd Augst-
"3620- Neville- in hospital at- that date- advised- this office- amount-
"should be retained- and- placed to his credit- fullstop.-"

(Sd) SYNOPTICAL."

W.R.F.

Leville, Peter.

9620

Ray Sept.

March 14, 1919

#3620 L/Cpl. Peter Heille,
Blackmarsh Rd.,
City.

Dear Sir:-

Please find enclosed "Discharge Certificate
No. 1297."

Yours truly,

Captain,
Paymaster & C. i/c Records

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5620 Rank 1/Corporal Name Steville Peter
 Date of Enlistment 18 4 17 Address Black Marsh St District St Johns
 Occupation Clerk Classification for Discharge B Medical Category FE1
 Recommendation S.M.B. Physically unfit Disability Rating lib
 Passed to Demobilization Officer with following documents:—

N.F. Pj36	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 28 2 19

H M
 W O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

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 Jason A. Shaw

Date 28-2-19

O i.c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. _____ to his home
at _____ and Release Certificate No. 1284 issued.

Date 28-2-19

R.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 14-3-19

Date 28-2-19

W. H. M. Capt.
Depot Paymaster.

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT

Discharge approved for 28 2 19

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1
F 178	W 3494	B 122	Board 1st	" 2
R 178a	D 400A	B 1915	do 2nd	" 3
L 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 2 19

R.B. Dicks Capt.
Demobilization Officer.

APPROVED.

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

Eligible for War Service Gratuity

Date FEB 28 1919

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

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

Date

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 3630 Rank 4/4pl Name Neville Peter
 Intended place of residence Blackman's Road St. John's.
 2. Occupation Clerk.
 Classification of soldier B. Medical Category B.

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
 Date FEB 28 1919 Atkinson Capt
 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. SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT.

Place and date ST. JOHN'S. Neville P.
 Signature of soldier
28-2-19 Atkinson 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. Neville P.
 Signature of soldier
28-2-19 W. J. ... RQMS
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 18.4.17. No of days on Military
 Discharged from service 28.2.19 Plus 14 days. Service 695

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. R. H. ... Capt
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date FEB 28 1919

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place St. John's, Nfld. R. H. ... Capt
 Officer in Charge Records
 The Royal Newfoundland Regiment.
 Date March 14/1919

Handwritten: 2079/1297

13
 34
 30
 31
 31
 20
 31
 30
 37
 31
 28
 14
 331

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

MEDICAL HISTORY

Surname Hewille OF Christian Name Peter

Table I.—GENERAL TABLE.

Birthplace:—Parish St John's County Nfld

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>18th</u> day of <u>April</u> 1917		on _____ day of _____ 191	
	at <u>Headquarters</u>		at _____	
Declared Age	<u>18</u> years — days		years days	
Trade or Occupation	<u>Clerk</u>			
Height	<u>5</u> feet <u>9</u> inches		feet inches	
Weight	<u>132.</u> lbs.		lbs.	
Chest Measurement	Grith when fully expanded ... <u>56 1/2</u> inches		inches	
	Range of Expansion .. <u>4 1/2</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>6/6</u>	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to Cause rejection	(b)		(b)	
Approved by (Signature)	<u>W.S. Provenier</u>			
(Rank)	<u>Lieut.</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St John's</u>		at _____	
	on <u>18th</u> day of <u>April</u> 1917		on _____ day of _____ 191	
Joined on Enlistment	Corps.		Corps.	
	Regtl. No.	<u>3620.</u>	Regtl. No.	
Transferred to	<u>ROYAL NEWFOUNDLAND REGIMENT.</u>			
Became non-effective by	on _____ day of _____ 191		on _____ day of _____ 191	
(Signature)				
(Rank)				

15/8

[P. 10.]

Table II.—Only for admission to hospital or to the sick list in case of Warrant Officers treated in quarters.


Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the case, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
<i>3rd London General Hospital Wandsworth.</i>	<i>26</i>	<i>5</i>	<i>18</i>	<i>15</i>	<i>8</i>	<i>18</i>	<i>Trench Fever</i>	<i>81</i>	<i>Reported sick in France 15. 5. 18 Transferred to immersion Camp Eastbourne</i>	<i>S. M. S. M. S. Capt. R. A. M. O.</i>
<i>Wid. Gen. Hosp. 6 Waterloo</i>	<i>15</i>	<i>8</i>	<i>18</i>	<i>2</i>	<i>10</i>	<i>18</i>	"	<i>48</i>	CONVALESCENT TREATMENT PHYSICAL EXERCISE & MASSAGE. DISCHARGED FIT TO DUTY <i>duty</i>	 Capt. R. A. M. O. M. O. No "C" DIVN.

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.: Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.

Date	Brief Details, and Signature
12-5-17	Vacc.
21-4-17	} T.A.B. <i>W.S.P.</i>
10-5-17	
23/5/17	2nd vac.
8-1-19.	Recommended Repatriation
	<p><i>Woolwich Ind.</i> <i>Royal Newfoundlands Regt.</i></p>
	<p>It is hereby certified that this soldier has been before the Standing Medical Board and has been classified as <u>B</u> for discharge on Demobilisation. Medical category <u>E</u> <u>21.2.19</u> <small>Date of S.M.B.</small></p> <p><i>H. M. W. H.</i> <small>Captain Assistant Adjutant for Discharge Dept. Newfoundlands</small></p>

TABLE IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation

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 as clerk.

Neill B.
Signature of Man.

Reg. No. *9620*

Edw. Cuff

Signature of the Vocational Officer or his Representative.

Place

St John's

Date

28/2/19.

191

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* } Former Trade
 2. Regtl. No. *3620* 3. Rank. *Pfc.* } or Occupation }
 4. Name *W. E. VILLE* }
 (Surname) (Christian Names) }
 5. Age last birthday.....
 6. Posted for duty on..... at.....
 in category (or grade).....
 7a. If the soldier claims previous service in Army, he should state—
 (a) Former Regts. or Corps ;
 with Regtl. Nos. (b) Date of Discharge ;
 (c) Cause of Discharge.
 8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty ? (d) Particulars of Pension or Gratuity
 (if any)
 9. If a Court of Inquiry was held on an injury state :—
 (a) When (d) Particulars of Pension or Gratuity
 (b) Where (if any)
 (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."
11. Date of origin of disability.
12. Place of origin of disability.
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.
- Contracted French Fever in France. Evacuated to U.K. Treated at 3rd Lt. and discharged to unit cured.*

14. State whether the disabilities are

(a) attributable to

(b) aggravated by

- (i.) Service during the present war *no*
- (ii.) Previous active service. *no*
- (iii.) Climate in pre-war service *no*
- (iv.) Ordinary military service before the war *no*
- (v.) Serious negligence or misconduct on the } *no*
man's part. }

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

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., 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 now complains of no disability

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

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

18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

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. H. H. H. H.
ROYAL NEWFOUNDLAND REG.

Station

Anglo-Burmese Camp
Jan 8 1914

Date

Medical Officer in charge of case.

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

OPINION OF THE MEDICAL BOARD.

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) *The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

21. Give diagnosis and particulars of:—

(a) Any disability claimed or discovered.

Complaint of pain in chest

(b) The present condition thereof.

None of anything abnormal in the chest

22. 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 part of the soldier

..... ✓

.....

Give details:

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

..... ✓

.....

23. Is the disability in a final stationary condition? If not

(a) How long is the present degree of disability likely to last?

(b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures). ml
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

25. If an operation was advised and declined, was the refusal unreasonable?

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only? Yes
- OR
- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Opinion of Military Member in case of disagreement.

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service? No

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures:—

Station *S. Huss*

Date *Feb 20/19*

[Signature] { President or Chairman.
[Signature] } Members.
[Signature]

Discharge Approved under Para. 392 (xvi) King's Regulations.

Station *[Circular Stamp: DISCHARGE CENTRE, FEB 20 1919]*

Date *[Circular Stamp: FEB 20 1919]*

Officer in charge, Central Hospital. Only applicable in cases of Patients in Hospitals.

Discharge Approved under Para. 392 () King's Regulations, or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station

Date

O.C. Discharge Centre.



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 *Peter Neville*

Regiment from which discharged *Royal Newfoundland*

Regimental number *3620*

Intended address *Black Head Road*

Height on discharge *5 Feet 9.*

Color of hair on discharge *black*

Complexion *dark*

Color of eyes *Blue*

Descriptive Marks *—*

Figure on discharge *Medium*

Christian name of Father *John*

Christian name of Mother *Ann*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *St John 28-2-1900*

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) *Peter Neville*

L/Cpl.

(Rank)

Station *St John*

Date *18-2-19*

I certify that the above named soldier signed the foregoing declaration in my presence, and that the above description and details are, to the best of my knowledge correct.



Station

Date

Casualty Form - Active Service.

Regiment or Corps *21 Royal New Forest Reg*

Rank *Pte* Surname *Neville* Christian Name *Peter*

Religion *R.C.* Age on Enlistment *18* years *12* months

Enlisted (a) *18.4.17* Terms of Service (a) *Duration* Service reckons from (a) *18.4.17*

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

Extended { } Re-engaged { } Qualification (b)
or Corps Trade and rate

Occupation *Clerk* *in 7th and 2nd Div* Signature of Officer.



Report		Record of promotions, reductions, transfers, casualties, &c., 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 ...	<i>27 MAR 1918</i>		
		Disembarked	<i>27 MAR 1918</i>		
		Joined Battalion	<i>4. 4. 18.</i>		
<i>4.5.18</i>	<i>24 G.A.</i>	<i>advt det. L Reg + P.M.M.)</i>		<i>4.5.18</i>	<i>W 5591 11A 2018.</i>
	<i>6 Cavalry</i>	<i>Arrived</i>	<i>Essex</i>	<i>9.5.18</i>	<i>H.A. 23302</i>
<i>15.5.18</i>	<i>D 280.</i>	<i>Arrived</i>	<i>London</i>	<i>14.5.18</i>	<i>Lee</i>
	<i>11 Prov. Coy</i>	<i>ad P.M.M. unit</i>	<i>Raven</i>	<i>15/5/18</i>	<i>WA 23552</i>
	<i>Spontaneously</i>	<i>To England</i>		<i>25/5/18</i>	<i>W 5000</i>
		<i>in 7th</i>			
		<i>D. 1st No. 1</i>			
			<i>MAJOR</i>		
			<i>Infantry Section</i>		
			<i>G.H.Q. 3rd Echelon</i>		

[Handwritten signature]

WWE/MS

February 17th 1920.

9580

To:- Major Howley,
O. I. C. Pay & Records.
Mr. McGrath, Accountants.
Mr. Geo. Pomeroy.

From:- Vocational Officer.

Peter Neville 3620.

This is to certify that this Man's course comes to an end on February 28th. If an extension is in the meantime granted, I shall notify you.

W.W. Blackall
Vocational Officer.

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 question are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

Christian name *Peter* 2. Surname *Neville*
3. Rank *Lance Corporal* 4. Reg't. No. *3620*
5. Address in full to which future payments of gratuity are to be forwarded *Black Mark Road, St. John's*
6. Date of enlistment in the Regiment *Apr 17/17*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *No*
8. Relationship of such dependents *_____*
9. Address in full of such dependent *_____*
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 *From Apr 17/17 to Feb 28/19 date of temporary discharge*

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

No

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.....

Clothing allowance \$60 —
Also 82.50

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?.....

19. Are you now serving in the Regt.?..... If not give:- (a) Date of discharge..... (b) Reason for discharge.....

Feb. 28/19
Temporary

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 - Mar 28/18 to May 1918, Armentieres

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: *Neville Peter*
 Place of Residence: *Blackmarsh Rd. Sifshin*
 Declared before me at: *St John's, Nfld*
 This *12th* day of *March 1919*

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

POST DISCHARGE PAY.			War Service	Net amount
Date paid	Paid Soldier	Paid Dependent	Gratuity	due
.....	<i>6 mos.</i>	<i>280.00</i>
.....
.....
Certified Correct.			Paymaster.	

Nº 3610



To be sent
to G. Roberts
245 Hamilton
Avenue

1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, _____, Regl. No. 3610
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
 _____ Dollars and _____ 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 _____

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
				60
			Total Allotment, £	60

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.) *Chas R. Aye Capt.*
 Officer Commanding
 _____ Company

(Sig.) _____
 (Rank) _____

ST. JOHN'S, FEB 28 1919

Royal Newfoundland Regiment.

Billeting Account,

To *L/C P. Neville*

Billeting Soldiers as undermentioned

from *Feb 21st / 19* to *Feb 28th / 19*

3620. L/C P. Neville

7 20

Certified correct for \$ *7. 20*

R.S.

Capt. Dicks

Billeting Officer.

Civil Re-Establishment Committee.
(DEPARTMENT OF MILITIA.)

FORM R
21-11-19-1000

MAJOR HOWLEY

March 20th 1920

Officer in Charge of Pay and Records.

Please pay to **P. J. Neville,** 3620
the sum of **fourteen dollars**
in payment of allowance for week ended this date
in connection with re-education.

\$14.00

Pension Monthly

Nil

J.P.H.

Wages Monthly

ACCOUNT	32526
GEN LEDGER	
PAY LEDGER	
GEN LEDGER	INITIALS

J. W. Mackall.
VOCATIONAL OFFICER.

Wes. G. Smith

March 6, 1920.

Major Howley,
O.I.C. Pay and Records.

Please pay 3620 Peter Neville,
the sum of fourteen dollars,
being amount of pay and allowances for week ending this date,
and charge same to Civil Re-establishment Committee.

\$14.00

J.B.H.
[Signature]

.....
Vocational Officer.

ACCOUNT	
CH. NO.	31393
ISS. NO.	
PAY L. NO.	
C. L. NO.	

[Signature]

P. Neville

April 12th 1920

Major Howley
O. I. C. Records

6
Please pay to P. J. Neville, 3120
the sum of sixty dollars
in payment of P. & A. Bonus
and charge same to Civil Re-establishment Committee

\$60.00

Pension

Nil

J. C. R.

J. W. Marshall

ACCOUNT	
CHK. NO.	34625
INITIALS	<i>J. W. Marshall</i>
ISS. LEDGER	
...	
...	

Vocational Officer

[Signature]

P. J. Neville

March 13th 1920

Major Howley
O. I. C. Records

3/20

Please pay to P. J. Neville,
the sum of fourteen dollars
in payment of allowance for week ended this date
and charge same to Civil Re-esta blishment Committee

3120

\$14.00

Pension

Nia

J.P.H.

ACCOUNT	31988
CK NO	
CASH LEDGER	
PAY LEDGER	
GEN LEDGER	

For Woodchull

[Signature]

Woodchull

Vocational Officer

P. J. Neville

Civil Re-Establishment Committee.
(DEPARTMENT OF MILITIA.)

FORM R
16-11-19-2000

MAJOR HOWLEY

Officer in Charge of Pay and Records.

Please pay to P. Neville, 3620
the sum of fourteen dollars
in payment of allowance for week ended this date
in connection with re-education.

\$14.00

Pension Monthly Nil

Wages Monthly

P. Neville

62528
VOCATIONAL OFFICER.

MAY 24 '20



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

OCT 5 1921
1921.

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

is/are forwarded herewith to

Peter Neville

in respect of his service as No. 3620 Rank Pte.

Name P. Neville Royal Nfld. Regt.
~~Other Forces, Corps.~~

Receipt of the same should be acknowledged hereon.

Received Oct 13th 1921

Signature Peter J. Neville

Date Oct 13th 1921

Address P.O. Box 3.

C.R. 3620

RECORD.

FOR ISSUE OF RIBAND OF VICTORY MEDAL 1914-1919.

I certify that I have received an issue of 2 inches
of Riband of Victory Medal 1914-1919. .

DATE Jan 14th 1920 .

PLACE City Black Marsh Rd.

NO. 3620 NAME P. J. Neville

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121.
39.

Number of Sheet First

Regiment of 1st Newfoundland

Signature of O. C. Company _____

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay <i>Appointed to 1st Lt. 16/7/17. Reverted to the ranks 26/2/18 sufficient. Promoted to 2nd Lt. 1/10/18.</i>
No.	<i>3620 Neville Peter.</i>	Age on	18 years - months	<i>Blank.</i>	
Joined _____ Date _____		Place and Date of Enlistment	<i>St John's 18.4.17</i>	Religion	
Joined _____ Date _____		Period of	with Colours	<i>33 1/2 years.</i>	
Joined _____ Date _____			with Reserve	<i>36 1/2 years.</i>	

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
				<i>Demobilized St. John's 14³/₁₉</i>					
				<i>To be carried over</i>					

A3620

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 3620 Rank Lt/Temp Name Henriker Peter
 Date of Enlistment 18.4.17 Address 3 St. Charles St. St. John's District St. John's
 Occupation Private Classification for Discharge B Medical Category F-1
 Recommendation S.M.B. Physically unfit Disability Rating Nil
 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 21.3.19 H. Mans H-
 Q. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable. # 600.00
- (b) Clothing Supplied given to new friend

Date 28-2-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. to his home
at and Release Certificate No. 1284 issued.

Date 28-2-19 R.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 14-3-19

Date 28-2-19 W. H. M. Capt.
SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT. Depot Paymaster.

Discharge approved for 28-2-19

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	Form B
B 178a	D 400A	B 1915	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		" 6	
B 179c	B 120	M 93			

Date 28-2-19 R.B. Dicks Capt.
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-
Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date FEB 28 1919 R.H. Daint Capt.
O. C. Discharge Depot.

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

Date March 1/1919 R. H. Daint Capt.
Joseph Hoopes

Reg. No. 3640 Rank. *L/Pl* Name *Yewille, Peter*
Attested Address. *Blackmarsh Lane*
Allotment..... Allottee
Date of Allotment..... Returned from Overseas..... *2-19.*
Embarked for Overseas Cause *Discharge*

20-2-19 Rec. Dis. Permanently unfit

FEB 27 1919

PASSED TO DEMOBILIZATION OFFICER

28.2.19.

DISCHARGE APPROVED ON 28.2.19

EXTRACT FROM STATEMENT OF A/C TO 31-1-19
FROM PAY AND RECORD OFFICE, LONDON

3620 L/C. Neville, P. Dr. Bal. £1-8-4

This transferred to Pay Office 26-3-19