



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 585

Name in full Alexander Edward Parsons Age 20

Address Harbour Grace

~~Married~~ Single Height 5' 9" Weight 140

Color dark Hair dark brown Eyes blue

Other distinguishing marks burn on left leg, nose slightly crooked

Nearest relative Edward Parsons m.d.a.

Address Harbour Grace

Dependents none

Occupation chaffer Present Wage 75 per mo.

Previous service _____

Decorations _____

General Remarks _____

Date of Enlistment _____

I, Alexander Edward Parsons, do sincerely promise and swear that I will be faithful and bear true allegiance to His Majesty and that I will faithfully serve His Majesty in any place where I may be needed (or in the Colony of Newfoundland as the case may be) against all his enemies and opposers whatsoever according to the conditions of my service.

Declared before me this third day of October 1914

Reg. engaged for war a. witness
Alexander E. Parsons

R. Pousell

Sept 22

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Name Alexander Edward Parsons
 Apparent age 20 years months. Height 5 feet 9 inches.
 Chest measurement { Girth when fully expanded inches.
 { Range of expansion inches.
 Distinctive marks Color: Dark, Hair: Dark Brown, Eyes: Blue
 Other distinguishing marks: Burn on lip & leg, nose slightly crooked

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Edward Parsons M.H.A., Harbour Grace, Newfoundland
 | 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.	
(a)	(b)	(c)	(d)

Particulars as to Children.

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES.

Corps in which served	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Re-serves 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>22/9/14</u>									
Joined at <u>St. John's</u> on <u>22nd September '14</u>									
		<u>Scopias</u>		<u>31/10/15</u>					
		<u>Returned to duty</u>		<u>26/11/15</u>					
		<u>Promoted to Lt/Capt</u>		<u>27/2/16</u>					
<i>Embarked St. Helier for to 3rd Co. Grenadier Regt. 20/10/15 Hebe used sustained for Cairo 31/8/16 Embarked Silesia Bay (night of 19/20 Sept 15 - Admitted 16th Sept 15 with 1 Battalion 1-3-16 Embarked Port Sep 14/15 H. Aspinall 22-3-16. Admitted 87 F.A. Hospital 25-11-16 transferred to H.H. 25-16 Invalided to Hospital 9-5-16 transferred to H.H. 25-16 Invalided to Hospital 9-5-16 Newfoundland July 1916</i>									
<i>Embarked to C. F. 20/15 Desembarked Halifax 13/15 Embarked for Admitted 31-10-15. 2/16 Desembarked transferred to H.H. 25-16 Newfoundland 22-6-16</i>									
<i>Discharged Medically Unfit 20-3-17</i>									
Total Service forfeited as above									
Total Service towards Engagement to <u>20-3-17</u> (date of discharge) <u>2</u> years <u>180</u> days									
" " " Pension " " " " " " " "									

DESCRIPTIVE REPORT ON ENLISTMENT.

Applicable to all ranks. To correspond with entries on the Medical History Sheet.
Reg. No. 585

Name Alexander Edward Parsons

Apparent age 20 years months. Height 5 feet 9 inches.

Chest measurement { Girth when fully expanded inches.
Range of expansion inches.

Distinctive marks Color: Dark, Hair: Dark Brown, Eyes: Blue.

Other distinguishing marks: Burn on lip & leg, nose slightly curved.

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Edward Parsons, M.H.A., Harbor Grace, Nfld.

| 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) Signature of Officer verifying entry from certificate.

(a)	(b)	(c)	(d)
			Verified from certificate.

Particulars as to Children.

Christian Names	Date and Place of Birth	(d)
		Verified from certificate.

STATEMENT OF THE SERVICES.

Corps in which served	Regt. or Depot	Promotions, 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>22/9/14</u>									
Joined at <u>St. John's</u> on <u>22nd September '14</u>									
<i>Dischd. Halifax Mar 20/17</i>									
Total Service forfeited as above									
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days									
" " " Pension " _____ (") _____ " _____ "									

A. E. Parsons.

585

A. E. P. O.

No. 585 Name Parsons, A.E. Sqn., Batty., } or Company B. Corps 1st Newfoundland Date of enlistment }
 G.C. Badges } Service or Proficiency Pay }
 Date of last entry in Company Conduct Sheet } No. and date of last drunk } Period not reckoning towards freedom from extra fine } Sheet No. 1 }
 Signature O.C. Company, etc. } J. L. ... } Character

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
		<u>Pte.</u>							

Army Form B. 122

a/c.

CO. B

RANK Corp

NAME W. Parsons

ALLOTMENT —

Date	P.M.As. etc.	Amount	PAY	Amount
	Dr. Balance		Credit Balance <u>17/3/16.191</u>	<u>449 3/2</u>
	<u>Hospital.</u>	<u>1 10 0</u>	Exchange " <u>191</u>	
	<u>A.B. 64.</u>		<u>PAY @ NET RATE:</u>	
	<u>Air Rous.</u>	<u>8 8 3 1</u>	From <u>18/3/16</u> To <u>23/6/16</u> = <u>98</u> days	
	<u>P. & R.O.</u>	<u>9 15 6 1</u>	@ <u>1.15</u> = <u>112.70 1</u>	<u>23 3 1/2</u>
	<u>Uniform.</u>		From _____ To _____ days.	<u>67 12 3/4</u>
	<u>Cash.</u>	<u>47.18.8 49 8 8</u>	@ _____ = _____	
		<u>16 11</u>	From _____ To _____ days.	
		<u>67 12 5</u>	@ _____ = _____	
		<u>67.12.5</u>		

224

W.P.

W.P.

S. S. Grampian

PAY LIST.

to

191

Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

No. *585* Rank *Lance Corporal* Name *H. P. Parn*

Died (a) at _____ on the _____ of _____ 191 .

Deserted at *On Fulburg* on the _____ of _____ 191 .

I Certify to the correctness of above in every particular.

Commanding Squadron, Troop,
Battery or Company.

STATEMENT OF ACCOUNT.

[FORM 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month.....				Balance Cr. last month..... <i>12/5/16 P.A.O.</i>	<i>47</i>	<i>19</i>	<i>9 1/2</i>
	Cash issues (Date of each issue to be stated)				Pay <i>42</i> days at <i>1.15</i> from <i>13/6</i> to <i>23/6</i> <i>= £48.50</i>	<i>9</i>	<i>18</i>	<i>5 1/2</i>
					Proficiency, Service or good conduct pay			
					days at _____ from _____ to _____			
					Messing allowance _____ days at _____			
					from _____ to _____			
<i>Feb. 21</i>	<i>100 - Quarters</i>							
<i>" 28</i>	<i>100 - " 191</i>							
<i>March 13</i>	<i>Uniform B.L. "</i>							
<i>May 14</i>	<i>Unif. of Genl Office</i>							
<i>June 22</i>	<i>Unif. of Genl Office</i>							
	<i>Hospital Advances</i>							
	Consolidated stoppage							
	Balance due by the Paymaster				Balance due to the Paymaster.....			
		<i>£57</i>	<i>18</i>	<i>3</i>		<i>£57</i>	<i>18</i>	<i>3</i>

I hereby Certify that the above account is correct in every particular, ~~and that the debtor balance of £ _____ is correctly chargeable against the Public~~ (b)

Dated at _____ day of _____ 191 . Paymaster.

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with A.F.B. 2090 or Army Form O. 1815.

(b) Words in Italics to be struck out when there is no debtor balance.

[Signature]

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 585 L/Opl. A. E. Parsons
 Company. From 16 (Dates inclusive)

(Substituting A.F.O.—1625) N.F.P/36.
 Embarked per S. S. Grampian
 From Liverpool Date 28/6/17
 Draft No. CR.

DR.	Classification (See procedure)																								
Date	Pay Book Col.	Particulars	Rate	Dys	£	s	d	Date	Pay Book Col.	Particulars	Rate	Dys	£	s	d										
	8	Forfeited Pay							1	Pay															
	9	Allotments							2	Field Allowances															
	10								3	Other Allowances															
	11/12	Total Stoppages							4/5	Total @ 4.85 2/3															
	13	Fines							6a																
	14	Clothing and Necessaries							This account is in accordance with information received at the Pay & Record Office to <u>3/5/17</u> and is therefore subject to amendment if, and as may be found necessary.																
	15	Arms & Accoutrements																							
	16	Barrack Damages																							
	17	Hospital Stoppages																							
	17a	Miscellaneous Stoppages																							
	19	Casual Payments																							
	20	1st Payment																							
	21	2nd "																							
	22	3rd "																							
	23	Final "																							
	24	Balance Debit Last Period																							
	28	" Due by Paymaster			23/6/16																				
						1	0	0		27	Balance Due to Paymaster														
						1	0	0																	



191

CERTIFIED CORRECT
 NEWFOUNDLAND CONTINGENT.

O.C. PAYMASTER "Company" RECORDS

CHECKED.

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 585 ¹⁶/₁₀ Cpl. A. E. Parsons
 Company. From (Dates inclusive)

(Substituting A.F.O. 1625) N.F.P/36.
 Embarked per S. S. Grampian
 From Liverpool Date 23/6/17
 Draft No. _____ CR.

DR. Classification (See procedure)

Date	Pay Book Col.	Particulars	Rate	Dys	£	s	d	Date	Pay Book Col.	Particulars	Rate	Dys	£	s	d
	8	Forfeited Pay							1	Pay					
	6	Allotments							2	Field Allowances					
	10								3	Other Allowances					
	11/12	Total Stoppages							4/5	Total @ 4.85 2/3					
	13	Fines							6a						
	14	Clothing and Necessaries						This account is in accordance with information received at the Pay & Record Office to 315/17, and is therefore subject to amendment if, and as may be found necessary.							
	15	Arms & Accoutrements													
	16	Barrack Damages													
	17	Hospital Stoppages													
	17a	Miscellaneous Stoppages													
	19	Casual Payments													
	20	1st Payment													
	21	2nd "													
	22	3rd "													
	23	Final "													
	24	Balance Debit Last Period													
	28	" Due by Paymaster					23/6/16								
					1	0	0								
					1	0	0								



CERTIFIED CORRECT. NEWFOUNDLAND CONTINGENT.

O.C. PAYMASTER & COMPANY, S.W.

CHECKED.

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 585 Lt/Opl. A. E. Parsons
 Company. From 16 (Dates inclusive)

(Substituting A.F.O. 1625) N.F.P/36.
 Embarked per S. S. Grampian
 From Liverpool Date 23/6/17
 Draft No. _____ CR.

DR. Classification (See procedure)

Date	Pay Book Col.	Particulars	Rate	Dys	£	s	d	Date	Pay Book Col.	Particulars	Rate	Dys	£	s	d
	8	Forfeited Pay							1	Pay					
	6	Allotments							2	Field Allowances					
	10								3	Other Allowances					
	11/12	Total Stoppages							4/5	Total @ 4.86 2/3					
	13	Fines							6a						
	14	Clothing and Ne													
	15	Arms & Accoutre													
	16	Barrack Damag													
	17	Hospital Stop													
	17a	Miscellaneous													
	19	Casual Paymen													
	20	1st Payment													
	21	2nd "													
	22	3rd "													
	23	Final "													
	24	Balance Debit Last Period													
	28	" Due by Paymaster						23/6/16							
													1	0	0
													1	0	0
									27	Balance Due to Paymaster					



191

CERTIFIED CORRECT
 NEWFOUNDLAND CONTINGENT.

O.C. PAYMASTER "O" Company. COBBS

CHECKED.

NEWFOUNDLAND CONTINGENT.

MEMORANDUM.



No. 2030/24.

From PAY & RECORD OFFICE.

58, VICTORIA STREET, LONDON, S.W.

H.T./N.M.

26, May, 1916.

To From

Medical Officer i/c 3rd. London General Hospital, Wandsworth, S. W.

SUBJECT: NO. 585 PTE. A. E. PARSONS.

REPLY

Dated

191

Reference Nos.

Please return ORIGINAL and retain DUPLICATE.

The following is an extract from a personal letter from Lieut. Parsons R.A.M.C., 113th. Field Ambulance, B.E.F., addressed to me, and which it may be advisable to communicate to you, please:-

"....Reference to my brother Alex. who is in Wandsworth Hospital- I understand from the M.O. of hospital he was in here that it is imperative he should have the best possible attention from the beginning, otherwise there is a possible chance of tubercular trouble intervening, so I have written the O.C. Reserve also Walter Rendell to find out whether there is any chance of giving him a Commission. He was given his stripe in the field with that object in view and getting him into the Officers ward right away would ensure him the best possible attention....."

A. Hope Gosse Capt.

Paymaster & O. i/c Records.

In reply to attached memo. I beg to state that 585 L/Cpl. Parsons has made satisfactory progress while a patient in this hospital. There is no distinction made in the medical treatment of officers and men.

The M.O. i/c of L/Cpl. Parsons is of opinion that the pleurisy is not of tuberculous origin.

The patient goes to Esher Convalescent Home in a few days.

A. Hope Gosse, Capt R.A.M.C. For O.C.

Stamp: RECEIVED MAY 30 1916 with fields for Rec'd., Ack'd., Ans'd., File No.

The attached communication is
evidently intended for you, and is forwarded with
the compliments of

The Chief Paymaster
Canadian Expeditionary Force



JUN - 6 1916

Extract from Casualty List shewing correction received from the Base,
Alexandria, in reply to an enquiry.

JUN - 6 1916

LIST.

CASUALTY.

H.3600 Parsons 585 Pte.A.E., 1 Northumberland
Fusiliers.

Trans. to C.C. ex
16 S.H., W. Mudros,
8/11/15.

Should read:-

1st Newfoundland Regt.

- do -

War Office

Alexandra House

King'sway

3rd June 1916

C.2.Casualties. 15.

CENTRAL REGISTRY,
LONDON
5 - JUN. 1916
CANADIAN
EXPEDITIONARY FORCE

The Officer in Charge
Newfoundland Contingent Record Office,
58, Victoria Street, S.W.

JUN - 6 1916

The enclosed list of corrections to
casualty lists, received from the Base, Alexandria,
in reply to enquiries from this Department, is
forwarded for your information, with the
compliments of the Secretary of the War Office.

[Handwritten signature]

RECEIVED ON

War Office,
Alexandra House,
Kingsway,
W.C.

3rd June, 1916.

NEWFOUNDLAND CONTINGENT.

MEMORANDUM.

No. 2384/237.

From
 PAY & RECORD OFFICE,
 58, VICTORIA STREET,
 LONDON, S.W.
 H.A./N.M. 19, June, 1916.

To
 O. C.,
 2/1 Newfoundland Regiment,
 Newton-on-Ayr,
 Scotland.

SUBJECT: NO. 595 L/C.A.E. PARSONS.

REPLY

Dated 28th

1916

Reference Nos.

Please return **ORIGINAL** and retain **DUPLICATE.**

This man, who is at Esher Convalescent Red Cross Hospital, cannot be fit for duty for six weeks.

The M.O.i/c 3rd. London General Hospital (with which Esher is affiliated) states that a sea voyage would greatly benefit him, as he has been suffering from pleurisy with effusion. He is willing to discharge him from hospital if sanction can be obtained from you to allow him to accompany his brother, Capt. Parsons of the R.A.M.C., to Newfoundland.

In the ordinary course of events L/C. Parsons would not be discharged from hospital for at least three or four weeks.

Capt. Parsons is prepared to bear the expense, if that would in any way interfere with his brother's chance of going. At the same time he has consented to conduct three men of this Contingent, suffering from tubercle of the lung, and who would require medical attention, to Newfoundland.

Will you kindly telegraph on receipt of this, as the matter is extremely urgent?

H. A. Anderson.

for Capt.

Paymaster & O. i/c Records.

*Approved
H.S.*

ASSISTANT
 QUARTERMASTER
 2/1 N.F. REGIMENT,
 NEWTON-ON-AYR, N.S.

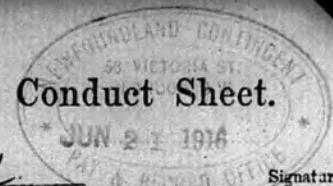
2000
 JUN 2 1916

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4A.
 (535) W13871/604 400m 3/15e-1 93 56

Forms
B. 121.
32.



Number of Sheet 1

Regiment of Newfoundland

Signature of O. C. Company Louis Alexander Capt

Regimental Number and Name			Enlistment	Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.			Age on <u>19</u> years <u></u> months	<u>Motor Mechanic</u>	
<u>585</u>	<u>Parsons AB</u>		Place and Date of Enlistment	Religion <u>Presbyterian</u>	
Joined <u> </u> Date <u> </u>	Joined <u> </u> Date <u> </u>	Joined <u> </u> Date <u> </u>	Period of $\left\{ \begin{array}{l} \text{with Colours} \quad \text{years.} \\ \text{with Reserve} \quad \text{years.} \end{array} \right.$	Place of Birth <u>Har Grace, NT</u>	

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

To be carried over

Army Form B. 121.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.



Wm P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4
1916 W. 2017/2124 1000m 6/15ss 93 56

Forms B. 121. 39.

Regiment of *Newfoundland*

Number of Sheet *1*
Signature of O. C. Company *Comd Abland Capt*

Regimental Number and Name <i>585 Parson A.E.</i>		Enlistment		Trade <i>Motor Mechanic</i>		Good Conduct Badges, Service Pay or Proficiency Pay
Age on <i>19</i> years months		Place and Date of Enlistment		Religion <i>Presbyterian</i>		
Period of		with Colours years		Place of Birth <i>Harbour Grace</i>		
		with Reserve years				

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>Sgt</i>							

To be carried over

Army Form B. 121.

Admitted to hospital on
- 10-5-16

Army Form W. 3016.

No. _____

Date June 22nd 1916

(1) To the Officer i/c Records,

58 Victoria St-
S W (Station.)

(2) The Officer Commanding,

Newfoundland Cont.
Ayer (Station.)

(3) The Paymaster,

58 Victoria St-
S W (Station.)

Regimental No. 585

Rank and Name P/O Parsons A Es.

Regiment or Corps 1st Newfoundland

has been granted a furlough from June 22nd to July 1st

His address while on leave will be:—

58 Victoria St, S W.

This man has been furnished with a warrant to
Victoria & given an advance of £1 (one pound)

I consider he is fit for* Duty.
 Light duty.

A. Hope Gosse Capt. R.A.M.C.T.

Officer in charge Registrar Hospital,
3rd London General Hospital,
WANDSWORTH, S. W. (Station).

* Strike out that which is inapplicable.

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

Admitted to hospital on
- 10-5-16

Army Form W. 3016.

No. _____

Date June 22nd 1916

(1) To the Officer i/c Records,

58 Victoria St-
S W (Station.)

(2) The Officer Commanding,

Newfoundland Cont.
Ayr (Station.)

(3) The Paymaster,

58 Victoria St-
S W (Station.)

Regimental No. 585

Rank and Name L/C Parsons A G

Regiment or Corps 1st Newfoundland

has been granted a furlough from June 22nd to July 1st

His address while on leave will be:—

58 Victoria St, S. W.

This man has been furnished with a warrant to
Victoria & given an advance of £1. (one pound)

I consider he is fit for* ~~Light duty~~ ^{Duty.}

A. Hope Gosse Capt. R. A. M. C. T.

Officer in charge Registrar, R.A.M.C.T.,
3rd London General Hospital,
WANDSWORTH, S. W. (Station).

* Strike out that which is inapplicable.

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

L/Cpl. 585 A. E. Parsons.

Liverpool

Grampian

23/6/16.

1

Ration Allowance

1 0 0

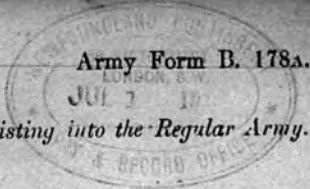
Cr. Balance 23/6/16.

23/6/16

1 0 0

1 0 0

1 0 0



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

MEDICAL HISTORY

Surname Parsons OF Christian Name Alexander Edward

Table I.—GENERAL TABLE.

Birthplace:—Parish		County				
		SPECIAL RESERVE.		REGULAR ARMY.		
Examined	on	day of	191	on	day of	191
	at			at		
Declared age		20	years		years	days
Trade or occupation		<u>Shaffer</u>				
Height		5	feet	9	inches	inches
Weight		140			lbs.	lbs.
Chest Measurement {	Girth when fully expanded				inches	inches
	Range of expansion ...				inches	inches
Physical development						
Vaccination marks {	Arm	Right	Left	Right	Left	
	Number					
When vaccinated						
Vision	R.E. - V =			R.E. - V =		
	L.E. - V =			L.E. - V =		
(a) Marks indicating congenital peculiarities or previous disease	(a)			(a)		
	(b)			(b)		
(b) Slight defects but not sufficient to cause rejection						
Approved by (Signature)						
(Rank)						
			Medical Officer.			Medical Officer.
Enlisted	at	<u>St. John's St</u>		at		
	on	day of	191	on	day of	191
Joined on enlistment		Corps	Regtl. No.		Corps	Regtl. No.
		<u>149th Regt. Reg</u>	<u>585</u>			
Transferred to						
Became non-effective by						
	on	day of	191	on	day of	191
(Signature)						
(Rank)						

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

Name of hospital	Admitted to hospital			Discharged from hospital			Disease	Number of days in hospital	Remarks bearing on the cause, 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, &c., will be given in the special syphilis case sheet	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3 RD LONDON GENERAL HOSPITAL WANDSWORTH.	10	5	16	22	6	16	Pleurisy.	44	Came to line service (France). rather Pleurisy right side with slight effusion. In discharge breath is impaired. Remitted. Sent to hospital. Sent to Eraser.	H. H. C. H. H. H. Capt. A. H. M. (T.)

Casualty Form—Active Service.

NEWFOUNDLAND
58, VICTORIA
LONDON
MAY 22 1916
729

Regiment or Corps Newfoundland

Regimental No. C.R. 585 Rank Pte Name Parsons A. E.

Enlisted (a) 3.10.14 Terms of Service (a) One year Service reckons from (a) Enlistment

Date of promotion to present rank 27/2/16 Date of appointment Duration of War Numerical position on roll of N.C.Os.

Extended Re-engaged 19.8.15 Qualification (b)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
	<u>unit promoted H/Pl</u>			<u>27/2/16</u>	<u>Aug 01010 27/4/16</u>
		<u>Embarked St John's, NEWLD</u>			<u>3/10/14.</u>
		<u>Disembarked Alexandria</u>			<u>1/9/15.</u>
		<u>Embarked for Gallipoli</u>			<u>13/9/15. Auth. C 4411.</u>
<u>15/11/15.</u>	<u>"Kildonan Castle"</u>	<u>Admitted, Scabies</u>	<u>H.S. "Kildonan Castle"</u>		<u>29/10/15.</u>
<u>6/11/15.</u>	<u>16th. Stat. Mudros.</u>	<u>do</u>	<u>16th. Stat. Mudros.</u>		<u>31/10/15. C 4564.</u>
<u>1/3/16</u>	<u>unit with Battalion</u>		<u>unit</u>	<u>1/3/16</u>	<u>Annual roll</u>
		<u>Emb'k'd Port Suez</u>	<u>24. 3. 16</u>		
		<u>Disemb'k'd MARSEILLES</u>	<u>27. 3. 16</u>		
	<u>87 7. a</u>	<u>Admitted Pleurisy</u>	<u>87 7. a</u>	<u>28. 4. 16.</u>	<u>EO 9207.</u>
	<u>do</u>	<u>Transferred</u>	<u>22. 8.</u>	<u>30. 4. 16</u>	<u>EO 9467.</u>
	<u>29 CB</u>	<u>do</u>	<u>24.</u>	<u>25. 16.</u>	<u>EO 9486.</u>
	<u>1st Aus G. Coy</u>		<u>1st Aus G. Coy</u>	<u>3. 5. 16</u>	<u>A 8360</u>

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
9.5.16	<i>J. N. David</i>	"Invaluable to Captain"	<i>J. N. David</i>	9.5.16	W 3083
<i>CHG</i> <i>20/5/16</i>	<i>J. N. David</i>				
<i>J. N. David</i>					

220 Clerk
Capt for Lt Col
Officer of Infantry Records
3rd
Schlaup

Parsons 22

585

Pay Dept

STATEMENT OF ACCOUNT

No. _____

Name Pansons A.C. Lc

Date	Particulars	Ch.No.	Dr.	Gr.	Bal.
July 6	Pay to date 13 days @ 1 ⁵ / ₂₂			14 95	14 95
31	" " " 25 " do			41 25	56 20
Aug 31	" " " 31			51 15	107 35
	Ration allowance to 1.0.0			4 86	112 21
	Pay 16 days @ 1 ⁵ / ₂₂			18 40	130 61
	Bonus			13 30	143 91
	b. Allowance			25 00	168 91
	Balance b/c			8 45	
July 27	To Pay.				
		141	20 00		148 91
Aug 8	" "	143	20 00		128 91
11	" "	145	15 00		113 91
24	" "	149	10 00		103 91
Sept 4	" "	2	15 00		88 91
15	" "	8	20 00		68 91
	Ration allowance	142	4 86		64 05
	D x Clothing	147	38 30		25 75
	To Pay		18 00		10 75
	Balance due on Dr		10 75		0
			168 91	168 91	0

Signed A. J. Lamy SSM

COPY

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 585 I/Cpl. A. E. Parsons
 Company. From _____ To _____ (Dates inclusive)

(Substituting A.F.O. 1625) N.F.P/36.
 Embarked per S. S. Gramplan
 From Liverpool Date 23/6/17
 Draft No. _____ CR.

DR.	Classification (See procedure)										CR.					
Date	Pay Book Col.	Particulars	Rate	Dys	£	s	d	Date	Pay Book Col.	Particulars	Rate	Dys	£	s	d	
	8	Forfeited Pay							1	Pay						
	0	Allotments							2	Field Allowances						
	10								3	Other Allowances						
	11/12	Total Stoppages							4/5	Total @ 4.86 2/3						
	13	Fines							6a							
	14	Clothing and Necessaries							<p>This account is in accordance with information received at the Pay & Record Office to <u>3/5/17</u> and is therefore subject to amendment if, and as may be found necessary.</p>							
	15	Arms & Accoutrements														
	16	Barrack Damages														
	17	Hospital Stoppages														
	17a	Miscellaneous Stoppages														
	19	Casual Payments														
	20	1st Payment														
	21	2nd "														
	22	3rd "														
	23	Final "														
	24	Balance Debit Last Period <u>23/6/16</u>														
	28	" Due by Paymaster			1	0	0		27	Balance Due to Paymaster				1	0	0
					1	0	0							1	0	0



191

CERTIFIED CORRECT.

NEWFOUNDLAND CONTINGENT.
P. J. [Signature]
 O.C. " " Company.
 PAYMASTER & OFFICER IN CHARGE

CHEQUE
[Signature]

COPY

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 585 L/Cpl. A. E. Parsons
 Company. From _____ To _____ (Dates inclusive)

(Substituting A.F.O. 1625) N.F.P/36.
 Embarked per S. S. Gramplan
 From Liverpool Date 23/6/17
 Draft No. _____ CR.

DR.	Classification (See procedure)																	
Date	Pay Book Col	Particulars	Rate	Dys	£	s	d	Date	Pay Book Col.	Particulars	Rate	Dys	£	s	d			
	8	Forfeited Pay							1	Pay								
	9	Allotments							2	Field Allowances								
	10								3	Other Allowances								
	11/12	Total Stoppages							4/5	Total @ 4.88 2/3								
	13	Fines							6a									
	14	Clothing and Necessaries																
	15	Arms & Accoutrements																
	16	Barrack Damages																
	17	Hospital Stoppages																
	17a	Miscellaneous Stoppages																
	19	Casual Payments																
	20	1st Payment																
	21	2nd "																
	22	3rd "																
	23	Final "																
	24	Balance Debit Last Period 23/6/16																
	28	" Due by Paymaster			1	0	0		27	Balance Due to Paymaster								
					1	0	0											

This account is in accordance with information received at the Pay & Record Office to 3/5/17 and is therefore subject to amendment if, and as may be found necessary.

1 0 0
1 0 0

CERTIFIED CORRECT.

NEWFOUNDLAND CONTINGENT

A. J. [Signature]
 O.C. " " Company.
 PAYMASTER & OFFICER IN CHARGE

MAY 1917 191

[Handwritten Signature]

COPY

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 595 L/Cpl. A. E. Parsons
 Company. From _____ To _____ (Dates inclusive)

(Substituting A.F.O. 1625) N.F.P/36.
 Embarked per S. S. Grampian
 From Liverpool Date 23/6/17
 Draft No. _____ CR.

DR.	Classification (See procedure)										CR.				
Date	Pay Book Col.	Particulars	Rate	Dys	£	s	d	Date	Pay Book Col.	Particulars	Rate	Dys	£	s	d
	8	Forfeited Pay							1	Pay					
	9	Allotments							2	Field Allowances					
	10								3	Other Allowances					
	11/12	Total Stoppages							4/5	Total @ 4.88 2/3					
	13	Fines							6a						
	14	Clothing and Necessaries													
	15	Arms & Accoutre													
	16	Barrack Damages													
	17	Hospital Stoppage													
	17a	Miscellaneous													
	19	Casual Payments													
	20	1st Payment													
	21	2nd "													
	22	3rd "													
	23	Final "													
	24	Balance Debit Last Period 23/6/16													
	28	" Due by Paymaster			1	0	0		27	Balance Due to Paymaster			1	0	0
					1	0	9						1	0	0

CERTIFIED CORRECT.

NEWFOUNDLAND CONTINGENT.

A. S. [Signature]
 O.C. " " Company.
 PAYMASTER & OFFICER IN CHARGE

9 MAY 1917 191

[Handwritten Signature]



1st Newfoundland Regiment

HEADQUARTERS

St John's, Newfoundland,

April 29th-17. 191

Sir:-

L/Cpl Parsons was discharged from the 16th inst., He has been paid up to, and including March 31st, 1917, and he also has received a casual payment of \$55.00 for April month.

Yours truly,

Charles R. Aye

Capt & O.C. Headquarters,

1st Nfld Regiment.

E. Company.

Lieut. J. M. Howley,

Paymaster,

Colonial Bldg.,

City.



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 *Alexander Parsons*

Regiment from which discharged *1st. Newfoundland*

Regimental number *588*

Intended address *Harbor Grace.*

Height on discharge *5* Feet *11"*

Color of hair on discharge *Dark Brown.*

Complexion *fair.*

Color of eyes *blue.*

Figure on discharge *Medium.*

Christian name of Father *Edward.*

Christian name of Mother *Mrs.*

Wife's maiden name in full } *not married.*

Date and place of marriage } *not married.*

Christian names of children } *not married.*

Place and date of soldier's birth. *Harbor Grace. April 17, 1894.*

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) *Ally. E. Parsons* (Rank) *4/cp.*

Station *St. John's. 27* Date *Dec 7/1916.*

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

J. W. Borden Lewis
Medical Officer i/c Hospital,
Unit, or Command Depot.

Station *St. John's. 27* Date *Dec 7, 1916.*

Notification by President of Medical Board of Approval of a Soldier's Discharge under Paragraph 392 (xvi) King's Regulations.

(To be completed and dispatched on the day on which the discharge is approved)

To the Secretary.-
Pensions & Disabilities Board,
St. John's.

The Soldier named below has appeared before an Army Medical Board at this station and his discharge from the Service as "no longer physically fit for War Service" has THIS DAY been approved. (The discharge will be confirmed for a date 14 days after the date on this notification, See A C I 1623 of 1916.

Soldier's surname Parsons, Christian Name Alexander C.
(in full)

Regt No and Rank 588 Lt/Col Regt or Corps 1st Regt
(If T.F. this should be stated)

His Address on discharge will be Harbour Grace,

The Soldier states that* ~~an~~ ^{an} allotment is being issued in respect of him.

Station St. John's
Date Dec 9/16

Cluny Macpherson, Major
~~President of Board~~
(Approving Officer)





1ST NEWFOUNDLAND REGIMENT

QUESTION SHEET

St. John's, Newfoundland,

191

From

Mc
Headquarters

To

Class 6
Topical Records
H. Q.

Sir:—Your attention to the within is requested at your earliest convenience.

(Sig.)

Arthur James MacKay

NOTE:—Please fill in and return ORIGINAL, retaining COPY for your records.

SUBJECT

QUESTION

REPLY

#555

*Recommended
for discharge
by M. I. Board.*

15/12/16

4/pe
Parsons
a/c

*This officer is at
present on duty*

Noted.

M.D.

McRecords

*Please do not
confirm discharge
till further
notice from me*

MacKay

Copy of original

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

MEDICAL HISTORY

OF

Surname

Parsons

Christian Name

Alexander E.



Table I.—GENERAL TABLE.

Birthplace:—Parish

County

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	at	191	at	191
Declared age	20 years	days	years	days
Trade or occupation	<i>Chaffeur</i>			
Height	5 feet	9 inches	feet	inches
Weight	140 9			lbs.
Chest Measurement {	Girth when fully expanded	inches		inches
	Range of expansion	inches		inches
Physical development				
Vaccination marks {	Right	Left	Right	Left
	Arm			
Number				
When vaccinated				
Vision	R.E. - V =		R.E. - V =	
	L.E. - V =		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)				
(Rank)				
Enlisted	at		at	
	on	day of	on	day of
Joined on enlistment	Corps	Regtl. No.	Corps	Regtl. No.
	<i>Regt</i>	<i>585</i>		
Transferred to				
Became non-effective by	on	day of	on	day of
(Signature)				
(Rank)				

Medical Officer.

Johns

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

Name of hospital	Admitted to hospital			Discharged from hospital			Disease	Number of days in hospital	Remarks bearing on the cause, 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, &c., will be given in the special syphilis case sheet	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
<p><i>37th Co London General Hospital Wandsworth SW</i></p>	10	5	16	22	6	16	Pleurisy	44	<p><i>Cause. Active Service. (France)</i> <i>Nature. Pleurisy. Rt. side with slight effusion.</i> <i>No doubtful tubercle bacilli in sputum.</i> <i>Result. Recovered. sent to Essex.</i></p>	<p><i>J. J. Wethered Cap. R.A.M.C.S.</i></p>

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
Oct. 1914	J. V.
21.8.15	Ch. V.
30.8.15	R.
24.4.15	Vacc.
18.8.15	Id for. Foreign Service.

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

Notification by President of Medical Board of Approval of a Soldier's Discharge under Paragraph 392 (xvi) King's Regulations.

(To be completed and dispatched on the day on which the discharge is approved)

To the Officer I/C Records. _____

The Soldier named below has appeared before an Army Medical Board at this Station and his discharge from the Service as "no longer Physically fit for War Service" has THIS Day been approved. (the discharge will be confirmed for a date 14 days after the date on this notification. See A C I 1623 of 1916.

Soldier's Surname Parson Christian names Alexander C
(In full)

Regt No and Rank 585 Lt Col Regt or Corps 1st Inf

His address on discharge will be Harbour Grace

The Soldier states that ^{AN} ~~NO~~ allotment is being issued in respect of him.

Army Form D 400a and Army Form BI79 for the above named Soldier are forwarded herewith.

Station St. John's Date Dec 8/16
Cary Macpherson Major
~~President of Board~~
(Approving Officer)



S. S. Crampian

PAY LIST.

to 23rd June

1916. Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

No. 585

Rank Lance Corporal

Name H. E. Parsons.

Died (a)

at

on the

of

191

Deserted at

Fulbrough

on the

of

191

I Certify to the correctness of above in every particular.

Commanding Squadron, Troop, Battery or Company.

STATEMENT OF ACCOUNT.

[FORM 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month.....				Balance Cr. last month.....	47	19	9 1/2
	Cash issues				Pay 422 days at 1. 15 ⁰ from 13 ⁰ to 23 ⁰ /10			918 5 1/2
	(Date of each issue to be stated)				= #48.30			
		£	s.	d.	Proficiency, Service or good conduct pay			
	Feb. 21 " (100 lining)	1	0	7	days at from _____ to _____			
	" 28 " (100 ")	1	0	6	Messing allowance days at			
	March 13 " "	1	0	0	from _____ to _____			
	May 19 (Uniform)	2	8	6	Clothing and kit allowance			
	June 22 (P.H.O.)	4	7	8	Amount produced by the sale of Necessaries			
	His Patent Advances	1	10	0	Personal Clothing and Effects from Form 2...			
	Consolidated stoppage				Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
	Balance due by the Paymaster				Deferred Pay or Gratuity.....			
		£	57	18	Balance due to the Paymaster.....			
				3		£	57	18
								3

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ 57 18 3 is correctly chargeable against the Public (b)

Dated at this day of

191

191



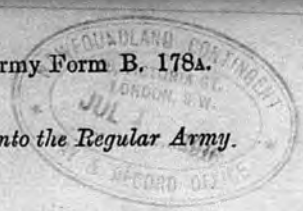
J. H. Marshall Paymaster & OFFICER IN CHARGE RECORDS

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with A.F.B. 2090 or Army Form O. 1815.

(b) Words in Italics to be struck out when there is no debtor balance.



(Duplicate) Copy



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

MEDICAL HISTORY

Surname

Pearsons

OF
Christian Name

Alexander Edward

Table I.—GENERAL TABLE.

Birthplace:—Parish

County

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of 191	on	day of 191
Examined	at		at	
Declared age	20	years days		years days
Trade or occupation	<i>Chaffeur</i>			
Height	5	feet 9 inches		feet inches
Weight		140 lbs.		lbs.
Chest Measure- ment { Girth when fully expanded .. Range of expansion ..		inches		inches
		inches		inches
Physical development	Right	Left	Right	Left
Vaccination marks { Arm Number				
When vaccinated				
Vision	R.E.—V.=		R.E.—V.=	
	L.E.—V.=		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)				
(Rank)				
	Medical Officer.		Medical Officer.	
Enlisted	at	<i>St. Johns N. of L.D.</i>	at	
	on	day of 191	on	day of 191
Joined on enlistment	Corps	Regtl. No.	Corps	Regtl. No.
	<i>1st Field Reg.</i>	<i>585</i>		
Transferred to.. .. .				
Became non-effective by				
	on	day of 191	on	day of 191
(Signature)				
(Rank)				

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

Name of hospital	Admitted to hospital			Discharged from hospital			Disease	Number of days in hospital	Remarks bearing on the cause, 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, &c., will be given in the special syphilis case sheet	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3 rd London General Hosp.	10	5	16	22	6	16	Pleurisy	44	<p>cause Active Service (France)</p> <p>Nature Pleurisy, right side with slight effusion. No tubercle bacilli in sputum.</p> <p>Result. Recovered sent to Esler.</p>	<p>—</p> <p>Capt R. A. M.C.T.</p>

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th. 1919.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

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

Christian name *Alexander E.* Surname *Parsons*

3. Rank *Y.C.P.* 4. Regtl. No. *585*

5. Address in full to which future payments of gratuity are to be forwarded. *No. 1 Pictouia Ave. Toronto Ont.*

6. Date of enlistment in the Regiment. *Sept. 22nd 1914*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. *Not applicable*

8. Relationship of such dependents. *do*

9. Address in full of such dependents. *do*

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *Not applicable*

11. Were you on active service only in Hfld, if so, give dates and particulars of such service. *Not applicable*

12. Give total length of time which you served on active service, whether in Hfld. or Overseas. *Sept. 22nd 1914 to April 18th 1917*
March 20th

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

Yes. (1) #585 in the Newfoundland Regt. Sept 22/14 to discharge March 20th 1917. Re Enlisted in R.A.F. Aug. 10/17 to 20-6-19.

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.

\$30.00 clothing allowance. N.Y.S.D. Regiment.

15. Have you been issued with a War Service Badge? *Yes.*

16. Have you, during the present war, served in the Imperial Forces? *Yes.*

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. I have not received any. About \$400.00*

have not received any. About \$400.00

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? *Not applicable.*

19. Are you now serving in the R.A.F.? *No.* (a) Date of discharge *March 20th 1917* (b) Reason for discharge *Medicallly unfit.*

Medicallly unfit.

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.

Gallipoli. Sept. 1915. to Feb. 1916. Egypt. Feb. 1916. to March 1916. France. March 1916 to May 1916.

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. *No.*

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: *Ally. E. Parsons.*
 Place of Residence: *No 1 Rectoria Ave Toronto Ont.*
 Declared before me at: *Toronto.*
 This *29th* day of *May* 19*19*...

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

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

P.O. 4304 396.

Toronto, Ont.

April 11th 1919

Department of Militia
St. John's
Newfoundland.

Sir:

I beg to make application
for my war gratuity.

I have served with
The Regiment from Sep 22/14
to April 18th 1917 in England
Gallipoli, Egypt and France.

Enclosed please
find receipt for ribbon of
the 1914-15 Star.

I have the honor
to be

Sir

Your obedient

servant.

Alex. E. Parsons

Lt. R.A.F.

Ex. 4cp. (585)

~~File~~

5769

1 Pictoria Ave.
Toronto.
Ont.
July 7th 19.

Officers Mc Pay & Record.
St Johns. Office.
Newfoundland

Sir:-

On or about
the 1st of June I
registered a gratuity
form duly filled
in and signed
by me, since then

I have received
no word whether
the form has been
received or not
Would you
kindly acknowl-
-ed receipt of
form if it has
been received.

Thanking you in
anticipation

I have the honor
to be

Yours ^{truly} obedient servant
W. R. A. F.

5/5

BB*EB

March 19th, 1921.

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

585

Please pay to A. E. Parsons,
the sum of one hundred and sixty-five dollars,
being a re-fund of customs duty on account of woodworking machinery.
Charge same to the Civil Re-establishment Committee.

\$165.00

ACCOUNT	
CHK. NO. <i>5468</i>	INITIALS
IND. AMOUNT	
PAY TO ORDER	
GEN. LEDGER	

A. E. Parsons

Locational Officer.

*Recd Payment
of Parsons*

March 19 1921

Copy

N.F. 2
60,000-8-19 H

FOR DUTY

Report No.

Entry No.

Port of St. Paul, Minn 73 70

Imported by W. Parsons per

Master, from

Goods were purchased in Chicago and

Imported by Direct

Marks and Numbers	Number of Packages	DESCRIPTION OF GOODS	Value in Currency of Invoice	Value for Duty in Dollars.	QUANTITY	Rate of Duty	DUTY
		<u>Woodworking machinery</u>	<u>600.00</u>	<u>600.00</u>	<u>5 Pcs</u>	<u>25%</u>	<u>150.00</u>
					<u>add</u>	<u>10%</u>	<u>15.00</u>
							<u>165.00</u>

True & certified copy will be mailed from St. Paul.

J. C. R.

585
April 22nd. 1919

Lieut. Alex. E. Parsons, R.A.A.,
P.O. Box, 396,
T O R O N T O.

Dear Sir:

With reference to your letter of
April 11th. I enclose form of claim for War Service
Gratuity, which kindly have completed before a Solicitor
and return to this Department, so that your claim may be
considered by the authorities.

Yours truly,

Lieut
For Paymaster

Newfoundland Patriotic Association.

EMPLOYMENT COMMITTEE.

St. Johns, Newfoundland.

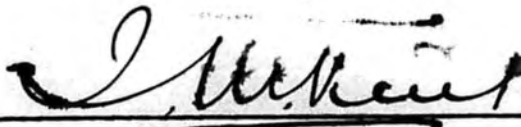
July 20th, 1917.

Hon. P. T. McGrath, LL.D.,

Hom. Treasurer Nfld. Pat. Finance Com.

Sir,-

I have the honour to request the sum of Sixty Dollars (\$60.00), one months Salary due the Secretary, from June 23rd, to July 23rd, 1917.



Chairman.



No.



1st NEWFOUNDLAND REGIMENT

VOUCHER

In Acct. with L/Cpl. A.E. Parsons

Voucher No. 28963

Cheque No. 28963

Reg'l A/c No.

Name

C.B. Folio No.

Date	Req'n No.	Invoice No.	Particulars.	Amount.
Mar. 16	332		Bonus 1 week @ \$1.90	\$13 30
			Clothing.	25
				\$38 30

CERTIFICATION

PAYMASTER

Dissectⁿ Sheet No.

Recap. Sheet No. 332

Checked by

RECEIPT

March 16th 1917.

Received from the 1st: NEWFOUNDLAND REGIMENT the sum of
~~Thirty Eight~~ Dollars
 and Thirty Cents in Payment as above stated.

March 16th 1917.

\$38.20

[Sig] A.E. Parsons

Newfoundland Patriotic Association.

EMPLOYMENT COMMITTEE.

St. John's, Newfoundland,

May 26th, 1917.

Hon. P. T. McGrath, LL.D.,
Hon. Treasurer,
Nfld. Patriotic Fin. Com.

Sir,-

We have the honour to request the sum of
Sixty.....DOLLARS
for purposes of general disbursements. (*Secretary Salary*)

We have the honour to be,-

Sir,

Your obedient servants.

St. Kent
Chairman

Alex. E. Parsons
Secretary

Received from the Hon. P. T. McGrath, Hon. Treasurer of the Nfld.
Patriotic Finance Com. the sum of Sixty Dollars.
this Twenty Sixth day of May, 1917.

Tr. Bowring *[Signature]*

No.



1st NEWFOUNDLAND REGIMENT

VOUCHER

In Acct. with #585 Lance-Cpl. A.E. Parsons

Voucher No. 30758.

Cheque No. 30758.

Reg'l A/c No.

Name

C.B. Folio No.

Date	Req'n No.	Invoice No.	Particulars.	Amount.
May 21	384		Ration Allowance due whilst on Furlough in Eng.	\$4 86
				\$4 86

CERTIFICATION

Dissect Sheet No.

Recap. Sheet No. 384

Checked by

[Signature]

[Signature]
PAYMASTER

RECEIPT

May 21st, 1917.

Received from the 1st. NEWFOUNDLAND REGIMENT the sum of

Four----- Dollars

and Eighty six----- Cents in Payment as above stated.

May 1917.

\$ 4.86

[Sig.] *A.E. Parsons*

No. _____



1st NEWFOUNDLAND REGIMENT

VOUCHER

In Acct. with A. E. Parsons, Voucher No. 31801.
Secretary Employment Com. Cheque No. 31801.

Reg'l A/c No. _____ Name _____ C.B. Folio No. _____

Date	Req'n No.	Invoice No.	Particulars.	Amount
June 23	414		Salary from May 23rd-June 23rd	\$60 00
				\$60 00

CERTIFICATION

Dissect^a Sheet No. _____
 Recap. Sheet No. 414.
 Checked by [Signature]

[Signature: M. Howley]
 PAYMASTER

RECEIPT

June 25th, 1917.

Received from the 1st. NEWFOUNDLAND REGIMENT the sum of
Sixty----- Dollars
 and ----- Cents in Payment as above stated.
 June 1917.

\$60.00 [Sig.] [Signature: A. E. Parsons]

No.



1ST NEWFOUNDLAND REGIMENT

VOUCHER

In Acct. with L/Cpl. A.E. Parsons Voucher No. 25457
1st. Nfld. Regiment Cheque No. 25457

Reg'l Ac No. Name C.B. Folio No.

Date	Req'n No.	Invoice No.	Particulars.	Amount
Aug 24			on a/c. Pay	10
				\$ 10

CERTIFICATION

Dissectⁿ Sheet No.

Recap. Sheet No. 151

M. Howley
PAYMASTER

Checked by

RECEIPT

24th August 1916

Received

from the 1st. NEWFOUNDLAND REGIMENT the sum o

Ten Dollars and Cents in Payment as above stated.

24th August 1916

\$ 10.00

[Sig.] *A. E. Parsons*

No.



1st NEWFOUNDLAND REGIMENT

VOUCHER

In Acct. with A.E. Parsons, Lce/Cpl. Voucher No. 25360
1st. Nfld. Regiment Cheque No. 25360

Reg'l A/c No. _____ Name _____ C.B. Folio No. _____

Date	Req'n No.	Invoice No.	Particulars.	Amou
		I	Pay	I5
				\$ I5

CERTIFICATION

Dissectⁿ Sheet No. _____
Recap. Sheet No. I45
Checked by _____

PAYMASTER

RECEIPT

10th August 1916

Received from the 1st. NEWFOUNDLAND REGIMENT the sum of
Fifteen Dollars
and _____ Cents in Payment as above stated.

10th August 1916

\$ 15.00

[Sig.]

No.



1ST NEWFOUNDLAND REGIMENT

VOUCHER

In Acct. with Pte. A.E. Parsons

Voucher No. 25319

Cheque No. 25319

Reg'l A/c No.

Name

C.B. Folio No.

Date		Req'n No.	Invoice No.	Particulars.	Amou nt	
Aug.	4			Pay	20	
						\$ 20

CERTIFICATION

Dissectⁿ Sheet No.

Recap. Sheet No. 43

M. Bowley

PAYMASTER

Checked by

RECEIPT

191

Received from the 1st. NEWFOUNDLAND REGIMENT the sum o
Twenty Dollars
and Cents in Payment as above stated.

August 4th. 1916 191

\$ 20.00

[Sig.]

Pte. A. E. Parsons

Newfoundland Patriotic Association.

EMPLOYMENT COMMITTEE.

St. John's, Newfoundland,

June 23th 1917

Hon. P. T. McGrath, L.L.D.

Hon. Treasurer.

Nfld. Patriotic Finance Committee.

Sir:-

I have the honour to request the sum of
Sixty-----Dollars
for the purpose of paying the Secretary from May 23th
to June 23th inclusive.

I have the honor to be

Sir.

Your obedient servant



Chairman.



Pen 18

Medical Report on an Invalid.

Station St. John's Inf
Date Dec. 7, 1916

- 1. Unit 1st Inf Regiment
- 2. Regimental No. 588
- 3. Rank Lance Corp.
- 4. Name Parsons Abraham E.
- 5. Age last birthday 22
- 6. Enlisted { on 1 October 1914
at St. John's Inf
- 7. Former Trade { Sales agent
or Occupation

8. Disability.

Pleurisy.

Statement of Case.

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

- 9. Date of origin of disability. May 1915
- 10. Place of origin of disability. Stobbs Camp Scotland.
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. Was taken sick with pleurisy at Stobbs Camp. was sent to Cottage Hosp. Hawick. was there until June 30, 1915. was then sent to Convalescent Camp, Denholm, was there till August 17, 1915. Reported for Duty at Aldershot Aug 19, 1915. From there to Dordanelles. Was taken sick again with pleurisy in trench in France April 28, 1916. sent to 3rd London General. was there till June 1916. from there to Convalescent Home till July 1, 1916 then invalided home.

History of attack of pleurisy in 1904.
(The above on his own statements)

- 12. (a) Give your opinion as to the causation of the disability. v
- (b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3). Not caused by active service but aggravated by military training.

13. What is his present condition?

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

General Condition fair. Shortness of breath on walking up hills. Slight dulness in his axillary line extending forwards. (right side)

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

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

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

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

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

Aspirations at 3rd London General

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

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

19. Do you recommend

- (a) Discharge as permanently unfit, or
- (b) ~~Change to England?~~ ✓ Yes.

J. W. Burden Lieut.

Officer in medical charge of case.

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

Station St. Albans

Date Dec 8th 1916

Officer in charge of Hospital.

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

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

Opinion of the Medical Board.

Ans.—(i) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as in the event of the man being invalidated, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1913).

(iv) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i) active service, (ii) climate, or (iii) ordinary military service.

Approved
(a) *iii* *yes*
b. exposure

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

21. Has the disability been aggravated by

Chairman Pensions Board.

Ref. Yours of 21/12/16 re L/Cpl. Alex. Parsons.

Period of Disability is shown at Ans.22.

Period for Re-exam. :- When no period is stated the Medical Board intend it to be understood in future that they mean that no re-exam. is necessary for a period of ONE YEAR, in which period they understand that all cases come up for re-exam. in any case.



Chmy Macpherson

Major.
Secy. Medical Board.

Signatures :-

A. L. L. L.

President.

L. Paterson major

J. Sinclair Capt

Members.

Station _____

Date *Dec 8th 1916*

Approved.

Station _____

Date _____



Chmy Macpherson, Major.
Administrative Medical Officer. *D. M. L.*

Opinion of the Medical Board.

Ques.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Articles 1162 and 1163, Pay Warrant, 1913).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

Approved
(a) *iii* *yes*

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

b. exposure

21. Has the disability been aggravated by

(a) Intemperance?

no

(b) Misconduct?

no

Is the disability permanent?

yes

If not permanent, what is its probable minimum duration?

be stated in months.

22. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{2}$, $\frac{1}{3}$, $\frac{1}{4}$, or total incapacity.

1/4 disability for 12 months

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

—

26. Do the Board recommend

(a) Discharge as permanently unfit, or

yes

(b) Change to England?

Signatures:—

A. S. Hase

President.

L. Paterson major

Members.

J. Sinclair Capt

Station _____

Date *Dec 8th 1916*

Approved

Station _____

Date _____

Henry Macpherson, Major
Administrative Medical Officer. *H.M.S.*



Y
100
OCT 14 1900
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 11 1921.

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

is/are forwarded herewith to

Alexander E. Parsons

in respect of his service as No. **585** Rank **Pte.**

Name **A.E. Parsons**

Royal Nfld. Regt.

Nfld. Inf. Corps.

Receipt of the same should be acknowledged hereon.

Received Victory & British War Medal.

Signature A. E. Parsons.

Date Oct 13th 21

Address 24 Grace

[P.T.O.]

C.R. 585

RECEIPT.

I hereby certify that I have received the 1914-15
STAR.

aw

No. 583

Name A. E. Parsons

per Parsons

Witness -----

Date May 17 1922

Place Harbor Grace

RECEIPT FOR ISSUE OF
RIBAND OF 1914-15 Star.

C.R. 585

I certify that I have received an issue
of 3 inches of Riband of 1914-15 Star.

Name *McParsons*

V.I.R.A.F.

Date *April 11, 1919.*

Place *London, Ont.*

PLEASE SIGN, AND RETURN TO DEPT. OF MILITIA.

CR 385
P. O. Box 396.
Toronto
Ont.

March 27th 1919

Department of Militia
St Johns. N. F. S. D.

Sir

I have the honor to make
claim for issue of Riband
of 1914-15 Star

I have served
as a (585) Yep. with the Royal
N. F. S. D. Regiment in Gallipoli
Mudros and Western Egypt
from the date the Regiment
went to Egypt until they
came back to France.

I have the honor to be.

Sir.

Yours Obedient servant
H. C. Parsons.

Lieut.
Royal Air Force

Retard posted
Apr. 4/19

C.R. 585

June 30, 191 .

Mr. Edward Parsons, M.H.A.,
Harbor Grace.

Dear M^r. Parsons:-

I am writing to inform you that I am forwarding by "Express" one Kit Bag, which belongs to your son #585 L-Corp. A.E. Parsons of The Royal Newfoundland Regiment.

Enclosed you will find, receipt, will you kindly sign same and return at your earliest convenience.

Yours faithfully,



Lieut.
for Lieut.Col.C.S.O.

Enc'l 1.

No. of Paper 1087

PERSONAL EFFECTS.

Name Parsons. A. E. No. 585.

Rank R/Cpl. Regiment THE ROYAL NEWFOUNDLAND REGT.

Article	Where stored	Notified by
<u>Kit. Bag.</u>		
	Final disposal	
		Shipped from Depot.

Remarks: Repacked & sent to
Next of Kin - Father
Edward Parsons

585
C.R. ~~849~~

Extract from Daily Orders Dept 22 Unit The Royal WGLA.
Regt., St. John's, April 14th, 1917.

~~635~~ L/Cpl. Parsons.

Attached to the Strength from April 14th, 1917.

C.R. 585

Extract from list of men of the Royal Newfoundland Regiment
discharged on various dates.

#585 Pte. Alex, E. Parsons discharged, Mar. 20th 1917, Medically
unfit

C.R. 585

Extract from Roll, of Officers
N. O. O. ' S and men DISCHARG-
ED From the Royal Newfoundland
Regiment.

<u>Regtl. #</u>	<u>rank</u>	<u>name</u>	<u>date</u>	<u>reason.</u>
585	Pte.	Parsons Alex E.	20/3/17	Med. Unfit.

C.R. 585

Extract from Telegram from P.&.R.Office; June.26th,1916

Returning on Grampian to Québec.

585 Parsons

C.R. 585

Extract of Casualty List received from P.&.R.O.

22/6/16.

585, L/Cpl. A. Parsons.



Transferred to Newfoundland.

COPY OF TELEGRAM.

Dated

May 12, 1916.

To

Mr. Edward Parsons, M.H.A.,
Harbor Grace.

Regret to inform you that the Record Office,
London, officially reports No. 585, Lance-Corporal Alexander
Edward Parsons, has been admitted Third London General
Hospital, Wandsworth, suffering from pleurisy.
Upon receipt of further information I shall immedi-
ately wire you and trust that the next report will
be of his convalescence.

J. R. BENNETT,

Colonial Secretary.

C.R. 585

Copy of Cablegram to Governor St. John's Nfld from P.&.R.O. 11/5/16.

585. Pte Parsons. ✓

Admitted Wandsworth Pleurisy.

C. 2.—Casualties.

COLONIAL CONTINGENTS ONLY.

Army Hospital 326216



1572

3rd, London General

HOSPITAL, at

Wandsworth, S.W.

Affiliated to

NOMINAL ROLL of Sick and Wounded from the * **France** **Expeditionary Force**
 admitted on **10th. May, 1916** from Hospital Ship "**St. David**" Southampton
 or
 Dover.

* Here insert which Expeditionary Force.

The nature of the casualty is required for telegraphing details overseas. If the details given are insufficient, reference back to the hospital for further information is rendered necessary. The following instructions should therefore be carefully followed in all Colonial cases:

- (a) In the case of sickness, the nature and degree should be stated, e.g., enteric, slight.
- (b) In the case of wounds, the nature of the wound, the part of the body affected, and the severity of the injury should be stated, e.g., gunshot, skull, severe.

If a limb has been amputated the fact should be recorded.

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. The duplicate of the rolls should be sent to the Officer in charge of Records of the Colonial Contingent concerned.

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, and to the Colonial Contingent Record Office concerned.

Regtl. No.	Rank	Name (Surname first)	Corps (Battn. numbers to be shown, also full title of Colonial Unit)	Casualty (See note in large type above).
585	L/Cpl.	Parsons A.E.	1st. Newfoundland	Pleurisy

C.R. 585

(Sd.) **A. Hope Gosse, R.A.M.C.T.**
3rd, London General Hospital,
Wandsworth S. W.

C.R. 585

Extract from Daily Orders part II, Unit
the Royal Newfoundland Regiment, dated
May 20th. 1916 from 3rd. Echelon, B.E.F.

585 L/C. A. Parsons.

Inv. to Eng. ST. DAVID 9/5/16.

SICK & WOUNDED N.C.Os & MEN OF THE EXPEDITIONARY FORCE - FRANCE.

C.R. 583



PELSTON RECORD OFFICE.

LIST NO. H. 8504.

12734	L/C.	Chadwick, A.	8/L.N.Lancs.	SW.Leg, Back & Infect. Seriously Ill in 2 Can. Gen. H. Le Treport 7th May 16
11726	,,	Milner, T.	16/Lancs. Fus.	Skin Disease.....Adm. 26 Gen. H. Etaples 9th May 16.
2217	,,	Ward, G.	2/Manch. R.	-do- -do-
13391	,,	Durham, H.	10/N.Lancs. R.	Impetigo.....Dis. to Base Dep. Etaples ex 26 Gen. H. 9th May 16.
8475	,,	Gardner, J.	1/Bord. R.	GSW. Foot Knee.....To Eng. per HS. "St. David" ex 1 Aust. Gen. H. 9th May 16.
5064	,,	Kershaw, M.	1/ -do-	Ampt. Arm. -do-
6095	,,	Jones, W.	1/Lancs. Fus.	Dyspepsia. -do-
10170	,,	Hargreaves, B.	15/ -do-	Nephritis. -do-

SHREWSBURY RECORD OFFICE.

LIST NO. H. 8504.

16075	Pte.	Jones, D.	10/Welsh R. "C"	Haemorrhoids.....Dis. to 3 Con. Dep. L. Treport ex 2 Can. Gen. H. 7th May 16.
14317	,,	Cittingham, E.	10/Ches. R.	GSW. Leg L.....Dangerously Ill in 2 Can. Gen. H. Le Treport 7th May 16.
23672	,,	Jenkins, G. A.	16/Welsh R.	Boils.....Dis. to Base Dep. Etaples ex 26 Gen. H. 9th May 16.
27479	,,	Warton, S.	2/Welsh Inf.	Tonsillitis. Slt.....Adm. 1 Aust. Gen. H. Rouen 9th May 15. ex ano. nos.
5065	,,	Pickering, H.	2/Welsh Fus.	Pleurisy.....To Eng. per HS. "St. David" ex 1 Aust Gen. H. 9th May 16.

TERRITORIAL FORCE SHREWSBURY RECORD OFFICE.

LIST NO. H. 8504.

2086	Pte.	Jones, J. P.	6/Welsh Inf.	GSW. Hand, Legs. &Adm. 1 Aust. Gen. H. Rouen 9th May 15. ex ano. nos. Face. Sev.
------	------	--------------	--------------	---

NEWFOUNDLAND CONTINGENT.

LIST NO. H. 8504.

585	L/C.	Parsons, A. E.	1/Newfoundland.	Pleurisy.....To Eng. per HS. "St. David" ex 1 Aust. Gen. H. 9th May 16.
-----	------	----------------	-----------------	---

C. VALRY RECORD OFFICE. CANTERBURY.

LIST NO. H. 8504.

8156	QSM.	Grace, A. V.	2/Drag. Gds.	Neurasthenia.....To Eng. ex 26 Gen. H. Etaples 9th May 16.
------	------	--------------	--------------	--

C.R. 583ⁿ

NEWFOUNDLAND CONTINGENT.

585 L/C A.E. Parsons.

1/Newfoundland. Pleurisy. Albuminuria Silt Adm. 1 Aust. Gen. Hos. Roue n
ex ano Hos. 3rd May 16th.

Extract of Casualty List received from P & R.O. May 12th 1916.

C.R.

585

Extract from Daily Orders Part 11 Unit The Newfoundland
Regiment, (In the Field) ~~27-2-16~~ 22-4-16

585 Pte A. Parsons

Promoted L/Cpl. 27-2-16.

C.R. 583

P R O M O T I O N .

Extract of Regimental Order dated April, 11, 1916.

By Lieut.Col.Sir.W.E.Davidson,K.C.M.G.,Officer Comdg.

#585 Pte. A. Parsons, B.Co.,

to be Lance Corporal.

The above promotion to date from February 27, 1916.

5
Feb. 8, 1916.

Dear Sir,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that

No. 585, Private Alex. E. Parsons, who was previously reported with scabies at Mudros on 31st October, returned to duty on 26th November.

This information has been received by mail.

Yours faithfully,

Mr. Edward Parsons, M.H.A.,

Colonial Secretary.

Harbour Grace.

C.R. 5-85

745

CASUALTY REPORT.

Telephone Message from British Red Cross Society.

Received 11th January 1916.

No. 585. Pte. A.E. Parsons reported by Base Details
returned to duty, 26/11/15.

✓
P (5)

December 10, 1915.

Dear Sir,

I regret to have to inform you that a report has this day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 585, Private Alexander Edward Parsons, was admitted to Sixteenth Stationary Hospital, Madras, from Cape Helles, on Oct. 31st, suffering from Scabies. This information was received by mail.

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. Edward Parsons, M.H.A..

Colonial Secretary.

Mr. Grace.

C.R. 5-8-5-

Extract of Sick and Wounded N.C.O.s. and Men of the Mediterranean Expeditionary
Force, No. H. 3055, dated Nov. 15th. 1915.

585 Pte. A.E. Parsons

1/NewfoundlandScabies.....Adm. 16 S.H. Mudros ex Cape Helles 31st
Oct. 1915.

C.R.

585

Extract from Nominal Roll of Co. 1st Bn. Wild. Regt.
Embarked at Devenport for Active Service 20-8-15.

585 Pte. A.E. Parsons.

Disembarked Alexandria, 31-8-15. Proceeded to Abbassia,
Cairo, same date. Embarked Alexandria for Gallipoli
13-9-15.

C.R. 585

Extract from Nominal Roll Embarked St. John's per S.S.
"Florissol" Oct. 4. 1914.

585 Parsons Alex. Ed.

C.R. 585

Alex. E. Parsons was attested for General service
with the NEWFOUNDLAND REGIMENT on ..Sept. 22nd/14..
Regimental No 585 was allotted to Pte. Alex. E. Parsons.

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th. 1919.



July 30, 1990

Your file - Votre référence

Mr. W. David Parsons
13 Rostellan Street
St. John's, Newfoundland
A1B 2T7

Our file - Notre référence

PROTECTED

Dear Mr. Parsons:

RE: 585 PARSONS, A.E.
LT. (N/S) PARSONS, M.

We have received the eligibility forms returned by you regarding your late uncle's and late aunt's medals.

According to Regulations, deceased veterans' medals can only be issued to the persons listed on the form and since all these persons are deceased, it is regretted that we cannot comply with your request.

For your information, they were both awarded the following medals for which we are enclosing statements of the required qualifications:

The 1914-15 Star
The British War Medal
The Victory Medal

I am sorry that my reply could not be more favourable.

Yours sincerely,

Diane Vincent
80/ (Mrs.) C. Moncrieff
Chief, Awards & Documentation

NFD
WWI



2 sets

*L. 1914-15 Star
B.C.M.
Issued in
1921*

STATEMENT OF ELIGIBILITY FOR HONOURS AND AWARDS

DÉCLARATION D'AYANT DROIT POUR DÉCORATIONS ET CITATIONS

The information you provide on this form will be used by Veterans Affairs solely to determine the rightful owner of the service award(s) of the veteran named below. It is protected from unauthorized disclosure by Canada's Privacy Act and you may request it at any time by quoting the date and subject of this correspondence.

Le Ministère se servira des renseignements que vous consignerez sur cette formule uniquement afin de déterminer le détenteur légitime de la décoration ou de la citation de l'ancien combattant ci-dessous. Ces renseignements sont protégés en vertu de la Loi sur la protection des renseignements personnels. Vous pouvez les obtenir en tout temps en mentionnant la date et le sujet de cette correspondance.

Please complete and return this form to the following address with the signature of the most eligible person.

Cette formule doit être remplie et retournée à l'adresse suivante avec la signature de la personne la plus admissible.

Veterans Affairs Canada
Honours and Awards Section
284 Wellington Street
Ottawa, Ontario
K1A 0P4

Anciens Combattants Canada
Section des citations et décorations
284, rue Wellington
Ottawa (Ontario)
K1A 0P4

JUN 21 1990

Name of veteran - Nom de l'ancien combattant <i>Mr. ALEXANDER EDWARD PARSONS</i>	Service number(s) - Matricule(s) <i>ROYAL NEWFOUNDLAND REGIMENT No. 585</i>
---	--

Name - Nom	Address - Adresse
Widow/Widower - Veuve/Veuf <i>DECEASED</i>	
Eldest living child - L'aîné des enfants vivants <i>NIL.</i>	
Father - Père <i>EDWARD PARSONS (DECEASED - 1929)</i>	<i>HARBOUR GRACE NEWFOUNDLAND.</i>
Mother - Mère <i>SUSAN TAYLOR PARSONS (DECEASED - 1935)</i>	<i>HARBOUR GRACE NEWFOUNDLAND</i>
Eldest living brother or sister - L'aîné des frères ou soeurs <i>NONE</i>	

I, the undersigned, do hereby declare that the above information is true and correct and I make this solemn declaration knowing that it is of the same force and effect as if made under oath.

Je, soussigné, déclare par la présente que les renseignements qui précèdent sont vrais et authentiques et je fais cette déclaration solennelle, conscient du fait qu'elle a la même valeur et même portée que si elle était faite sous serment en vertu de la Loi.

W.D. Parsons

Signature of eligible person - Signature de la personne admissible

W.D. PARSONS

NEPHEW.

June 14/90

Date



Issued 1922 / 1914-15 Star
BWM
VM.

STATEMENT OF ELIGIBILITY FOR HONOURS AND AWARDS

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Honours and Awards Section
284 Wellington Street
Ottawa, Ontario
K1A 0P4

DÉCLARATION D'AYANT DROIT POUR DÉCORATIONS ET CITATIONS

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Anciens Combattants Canada
Section des citations et décorations
284, rue Wellington
Ottawa (Ontario)
K1A 0P4

Name of veteran - Nom de l'ancien combattant NURSING SISTER MAYSIE PARSONS	Service number(s) - Matricule(s) C.A.M.C.
--	---

Name - Nom	Address - Adresse
Widow/Widower - Veuve/Veuf DR. W. MARCIE	DECEASED.
Eldest living child - L'ainé des enfants vivants Nil.	
Father - Père EDWARD PARSONS (DECEASED 1929)	HARBOUR GRACE NEWFOUNDLAND
Mother - Mère SUSAN TAYLOR PARSONS (DECEASED 1935)	HARBOUR GRACE NEWFOUNDLAND
Eldest living brother or sister - L'ainé des frères ou sœurs NONE.	

I, the undersigned, do hereby declare that the above information is true and correct and I make this solemn declaration knowing that it is of the same force and effect as if made under oath.

Je, soussigné, déclare par la présente que les renseignements qui précèdent sont vrais et authentiques et je fais cette déclaration solennelle, conscient du fait qu'elle a la même valeur et même portée que si elle était faite sous serment en vertu de la Loi.

W.D. Parsons

Signature of eligible person - Signature de la personne admissible

W.D. PARSONS

NEWFEN.

June 14/90
Date

13 Rostellan St.,
St. John's, Nfld.,
June 14, 1990.

Mrs. C. Moncrieff,
Chief, Awards & Documentation,
284 Wellington St.,
Ottawa, K1A 0P4.

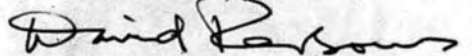
Dear Mrs. Moncrieff,

Thank you for the forms regarding the service medals that I enquired about. I have completed the two forms. As all my aunts and uncles of my father's family are now deceased, I was not sure if there was any further information that I could give you.

Please let me know if any additional data is necessary.

Thank you for your assistance,

Sincerely,



W. David Parsons.



Veterans Affairs
Canada

Anciens Combattants
Canada

Box: 32

NFLD . 1914-18

MEDAL ACTION CARD
FICHE D'ACTION DES MÉDAILLES

SURNAME (in block letters) — NOM DE FAMILLE (en lettres moulées) PARSONS		CHRISTIAN NAMES — PRÉNOMS Alexander E.		FILE NO. — N° DE DOSSIER
REG. NO. — MATRICULE 585		RANK ON DISCHARGE - GRADE À LA LIBÉRATION Pte.		UNIT — UNITÉ
WAR SERVICE BADGE NO. N° D'INSIGNE DE SERVICE DE GUERRE			DATE DISPATCHED — DATE DE LA REMISE	
ADDRESS — ADRESSE				
MEDALS — MÉDAILLES			ADDRESS AND DATE DISPATCHED ADRESSE ET DATE DE LA REMISE	
1914-15 Star			APR 17 1991	
BWM				
VM.				



September 25, 1990

Your file - Votre référence

Dr. W. David Parsons
13 Rostellan Street
St. John's, Newfoundland
A1B 2T7

Our file - Notre référence

PROTECTED

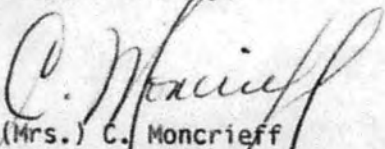
Dear Sir/Madame:

Please refer to your letter concerning your late aunt's and
uncle's service medals.

Certain regulations govern the issue of deceased veterans' medals.
Enclosed is an eligibility form listed in the order of precedence;
please complete all parts of this form and return it to our Department
with the signature of the first eligible person.

When the information is received, we will then proceed with your
inquiry.

Yours sincerely,


(Mrs.) C. Moncrieff
Chief, Awards & Documentation

SEP 14 1990

*2 sets
of docs*

13 Rostellan St.,
St. John's, Nfld.,
Sept. 6, 1990.

Mrs. C Moncrieff,
Honours and Awards,
284 Wellington St.,
Ottawa, Ont.

Dear Mrs Moncrieff,

Re: WW1 Medals to

~~W. S. Parsons, A.E. Royal Newfoundland Regt.~~
~~W. S. Parsons, A.E. Royal Newfoundland Regt.~~
t. (N/S) Parsons, Maisie C.A.M.C.

Thank you for the information sent to me regarding the medals to my Aunt and Uncle, noted above.

Their sister is alive and well. Would she be eligible to request their medals? If she is, I would appreciate it if you would send me the forms to complete and be signed by her.

Thank you,
Sincerely,

David Parsons

Dr. W. David Parsons,
13 Rostellan St.,
St. John's, Nfld. A1B-2T7.



MAR 13 1991

STATEMENT OF ELIGIBILITY FOR HONOURS AND AWARDS

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Please complete and return this form to the following address with the signature of the most eligible person.

Veterans Affairs Canada
Honours and Awards Section
284 Wellington Street
Ottawa, Ontario
K1A 0P4

DÉCLARATION D'AYANT DROIT POUR DÉCORATIONS ET CITATIONS

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Anciens Combattants Canada
Section des citations et décorations
284, rue Wellington
Ottawa (Ontario)
K1A 0P4

Name of veteran - Nom de l'ancien combattant <i>PARSONS, MAISIE</i>	Service number(s) - Matricule(s) <i>LT. (N/S) C.A.M.C.</i>
--	---

Name - Nom	Address - Adresse
Widow/Widower - Veuve/Veuf <i>deceased DR. W. MARCEY</i>	
Eldest living child - L'ainé des enfants vivants <i>— Nil</i>	
Father - Père <i>deceased EDWARD PARSONS HARBOUR GRACE, NFLD</i>	
Mother - Mère <i>deceased SUSAN PARSONS HARBOUR GRACE, NFLD</i>	
Eldest living brother or sister - L'ainé des frères ou sœurs <i>GERTRUDE SOARES.</i>	<i>900 PALMER DRIVE BRONXVILLE NEW YORK 10708 USA</i> / <i>c/o Lt. W.D. PARSONS 10 ROSELLAN ST. JOHN'S NFLD A1B 2T9</i>

I, the undersigned, do hereby declare that the above information is true and correct and I make this solemn declaration knowing that it is of the same force and effect as if made under oath.

Je, soussigné, déclare par la présente que les renseignements qui précèdent sont vrais et authentiques et je fais cette déclaration solennelle, conscient du fait qu'elle a la même valeur et même portée que si elle était faite sous serment en vertu de la Loi.

Gertrude Soares

Signature of eligible person - Signature de la personne admissible

Feb. 11th 1990

Date



MAR 13 1991

STATEMENT OF ELIGIBILITY FOR HONOURS AND AWARDS

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Honours and Awards Section
284 Wellington Street
Ottawa, Ontario
K1A 0P4

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Anciens Combattants Canada
Section des citations et décorations
284, rue Wellington
Ottawa (Ontario)
K1A 0P4

Name of veteran - Nom de l'ancien combattant PARSONS, ALEXANDER EDWARD		Service number(s) - Matricule(s) 585 Royal Newfoundland Regt.	
Name - Nom Widow/Widower - Veuve/Veuf deceased		Address - Adresse	
Eldest living child - L'ainé des enfants vivants nil			
Father - Père deceased EDWARD PARSONS HARBOUR GRACE, NFLD			
Mother - Mère deceased SUSAN PARSONS HARBOUR GRACE, NFLD			
Eldest living brother or sister - L'ainé des frères ou soeurs GERTRUDE SOARES		900 PALMER DRIVE, BRONXVILLE NEW YORK 10708 USA c/o At. W.D. Parsons, 10 ROSTELLAN ST. JOHN'S NFLD. A1B 2T9	

I, the undersigned, do hereby declare that the above information is true and correct and I make this solemn declaration knowing that it is of the same force and effect as if made under oath.

Je, soussigné, déclare par la présente que les renseignements qui précèdent sont vrais et authentiques et je fais cette déclaration solennelle, conscient du fait qu'elle a la même valeur et même portée que si elle était faite sous serment en vertu de la Loi.

Gertrude Soares

Signature of eligible person - Signature de la personne admissible

Feb. 11th 1990

Date



Veterans Affairs
Canada

Anciens Combattants
Canada

**REPLACEMENT OF
HONOURS AND AWARDS**

**REMPLACEMENT DE
DÉCORATIONS ET CITATIONS**

Regimental no.-N° de régiment

585

File no.-N° du dossier

NAME AND ADDRESS-NOM ET ADRESSE

Mrs. Gertrude Soares
c/o Dr. W.D. Parsons
10 Rostellan
St. John, Newfoundland
A1B 2T9

March 14, 1991

PROTECTED

PARSONS, A.E.

Sir
Madam

Monsieur
Madame

MAR 21 1991

Replacement of service awards may be made on a pre-payment basis only. If you will forward to us a bank money order, postal money order, or cheque made payable to the Receiver General for Canada in the amount stated below, we will be happy to send replacement(s) of the following indicated award(s) by return mail.

Pour faire suite à votre demande, permettez-moi de vous informer que nous pourrions remplacer la(les) décoration(s) militaire(s) sous indiquée(s), par retour du courrier, sur réception d'un mandat-poste, d'un mandat bancaire ou d'un chèque, du montant sous mentionné, à l'ordre du Receveur général du Canada.

Please return this letter with your payment to:

Veillez retourner la présente avec votre remise adressée de la façon suivante :

Veterans Affairs Canada
Honours and Awards Section
284 Wellington Street
Ottawa, Ontario
K1A 0P4

Anciens Combattants Canada
Section des citations et décorations
284, rue Wellington
Ottawa (Ontario)
K1A 0P4

- The 1914-15 Star
L'étoile de 1914-15
- The British War Medal
La médaille de guerre Britannique
- The Victory Medal
La médaille de la Victoire

BADGES
BOUTONS

Class "A" (no charge)
Classe "A" (gratuit)

Class "C" (no charge)
Classe "C" (gratuit)

Amount-Montant

\$ 10.70

Remarks-Observations

P. Moncrieff
Honours and Awards-Décorations et citations

Canada