



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 11379 Name Allan Parsons ~~Corps~~ with

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Allan Parsons</u> |
| 2. What is your full Address? | 2. <u>St. George</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>20</u> Years <u>—</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Student</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, Allan Parsons 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.

Allan Parsons SIGNATURE OF RECRUIT.
John Pitman Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Allan Parsons 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 20 day of March 1918
 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 Battalion
 If enlisted by special authority, such will be attached to the original Attestation.
 Date.....1918
 Place.....
 Approving Officer [Signature]

† 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).....

Reg. No. 4379 Rank Pte. Name Parsons A.
 Attested 30.3.18. Address Water Street, Hls Grace:
 Allotment 70 Alloted Mrs Wm (Annie) Parsons (mother)
 Date of Allotment _____ Returned from Overseas _____
 Embarked for Overseas JUN 11 1918 Cause _____

30.3.18	Vac.	1 st Dec 17/18	2 nd Dec 17-5-18	3 rd Dec 17-5-18	4/6/18
		At L. 1.1.18. 15. 17. H. 18. Left. 17. 18.			

C.R. 4379

Extract from Daily Orders Part II Royal Newfoundland Regt.
Depot St. John's dated Aug. 12th 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from noted date
4-8-19.

4379, L/C. A. Parsons.

C.R. 4379
2

Extract from Daily Orders Part II Royal Newfoundland
Regiment Depot St. John's dated July 22nd 1919.

The discharge of the undernoted on demobilization has
been APPROVED by O.C. Discharge Depot with effect from
following date

~~19-7-19.~~
21-7-19

4379, L/C. PARSONS, A.

C.R. 4379

Extract from Daily Orders Part II Unit The Royal Field Regt.
St. John's, July 24th 1919.

G

4379 Lt/Col. A. Parsons.

Reported at Headquarters 1-7-19 ex "Cassandra" which sailed
Glasgow 24th June, 1919.

C.R. 4379
2

Extract of Orders Part 2 By Lt.Col.B.J.Barton, D.S.O.
Commanding 2nd Battalion Royal Newfoundland Regiment.

Ref.Bn.Orders Part 2 of 20/11/18 "Promotions" should read
as from 8/11/18

To be Lance Corporal as from 21/11/18.

4379 Pte.Parsons A. "C" Coy.

C.R. 4379

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

#4379 Pte. A. parsons.

Embarked for overseas with draft 11-6-18

C.R. 4379

Extract from Daily Orders part 11, from Unit The Royal
Newfoundland Regiment, St. John's, April 1st, 1918.

#4379 Pte. A. Parsons.

Attested for General Service with the 1st, Newfoundland
Regiment with effect from 30/3/18.

Parsons, A.

CR. 4379

P.V.R. O.

No. 16341/1764.

N.F.P./79.

From:

1794 507 e
~~NEWFOUNDLAND CONTINGENT~~

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

Officer Commanding,
2nd. Bn. Royal Nfld. Rgt.,
Winchester.

October 10th, 1918

Oct. 10th 1918

Subject: 4379, Pte. A. Parsons,

With reference to the following telegram (636) from the Hon. Minister of Militia, received

Pay to 4379, Pte. A. Parsons, £2.18.0.

Draft £ 2.18.0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

A. C. Minshall Maj.
Chief Paymaster & O. i/c Records.

Witness:

Receipt hereunder.

J. J. Barton LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commdg. Batt'n
Royal Newfoundland Regiment

Received the sum of £2-18-0

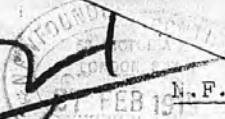
Two pounds eighteen shillings on account of cable remittance from Newfoundland.

Allan Parsons
No. 4379 Rank Pte.

P. Williams

No. 2482/388

06742



N.F.F./79.

From. NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding.
2nd Bn. Ryl Nfld Regt
Winchester

13th February 1919

Feb'y 16th 1919

4379L/ C Parsons A. C

With reference to the following telegram from the Minister of Militia / / (17)

"Pay to- 4379. Parsons.

£3.0.0.

Cheque £ 3.0.0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

A. S. [Signature]

Chief Paymaster & O. i/c Records.

Receipt hereunder.

J. J. Barton LIEUT. COLONEL.
Officer Comdng 2nd Batt
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

Received the sum of £ 3.0.0

Three Pounds. in respect of

telegraphic remittance from the Minister of militia.

A. Parsons

No 4379 Rank L/c

Witness Cpl R. J. Mercer

To:- The Chief Paymaster,
Royal Newfoundland Regiment,
58 Victoria Street,
London, S.W.

Sir:-

Please charge the amount set opposite my name to my account and pay it to the N.W.C.A. "Prisoners of War Fund" in quarterly instalments for the period of the year.
Commencing on the 1st July 1918.

Regtl. No.	Rank	Name	Amount	Signature
1379	Plt	Larsen A	\$2.50	A. Parson

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

Date

July 1/18

A. Parson

Harsons, A

4379

Ray Sept.

August 4th 1919.

#4379, L/C.A. Parsons,

Hr. Grace.

Dear Sir:

Enclosed please find Discharge Certificate #3525.

Yours truly,

Capt. & Paymaster.

RS/.

The Royal Newfoundland Regiment

Class for Demobilization: —

16.

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

July 18/19

Regimental No. *4379.*

Name

Parsons A.

Address

H. Grace.

Present Medical Category

41

Recommended for: —

(a) Immediate discharge

(b) Standing Medical Board

Members of Board

A. R. Cooper Cabot

O. C. Discharge Depot.

J. Paterson
Senior Medical Officer

Geo. Berdeau

M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 379 Rank 1st Lt Name Jamison A
 Date of Enlistment 30-5-18 Address St. John's District St. John's
 Occupation Plumber Classification for Discharge 1 Medical Category A1
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

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

Date 18-7-19

O. C. Discharge Depot. M. J. [Signature]

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

at Parsons.

Particulars passed to Vocational Officer for information and action.

Date 19-7-19

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60

(b) Clothing Supplied [Signature]

Date 19-7-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. P2497 to his home at M Grace and Release Certificate No. 3725 issued.

Date 19-7-19

[Signature]
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 4-8-19

Date 14-7-19

[Signature]
Depot Paymaster.

Discharge approved for 21-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. Pj36	B 268	B 121	N.F. Med.	D.F. 1
F 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		

[Handwritten: 2 Form B]

Date 19-7-19

[Signature]
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 JUL 21 1919

L. R. COOPER, CAPT.
O. C. Discharge Depot.

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

Date

Civil Re-establishment Committee



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

To resume former Occupation.

A. Parsons.

Signature of Man.

[Handwritten Signature]

Reg. No. 4379.

Signature of the Vocational Officer or his Representative.

Place ST. JOHN'S.

Date 19-7-19. 191

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

MEDICAL HISTORY

OF

Surname Parsons

Christian Name Allan

Table I.—GENERAL TABLE.

Birthplace:—Parish St. George County Newfoundland

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>30</u> day of <u>March</u> 191 <u>8</u>		on day of 191	
	at <u>St. Johns</u>		at	
Declared Age	<u>20</u> years — days		years days	
Trade or Occupation	<u>Clerk</u>			
Height	<u>5</u> feet <u>4 1/2</u> inches		feet inches	
Weight	<u>111</u> lbs.		<u>12</u> lbs.	
Chest Measurement	Girth when fully expanded... <u>32</u> inches		inches	
	Range of Expansion... <u>4</u> inches		inches	
Physical Development				
Vaccination Marks	/			
	/			
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>Lambert Parsons</u>			
(Rank)	<u>Major</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St. Johns</u>		at	
	on <u>30</u> day of <u>March</u> 191 <u>8</u>		on day of 191	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>The Royal 4399</u>			
Transferred to	<u>2nd Regt</u>			
Became non-effective by	on day of 191		on day of 191	
(Signature)				
(Rank)				



Descriptive Return of a Soldier Discharged on Account of Disability

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

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

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

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

Name in full *Parsons, Allan*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4379*

Intended address *H. Grace*

Height on discharge *5* Feet *4 1/2*

Color of hair on discharge *Light Brown*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *Median*

Figure on discharge *William*

Christian name of Father *William*

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 *H. Grace 8-11-1897*

Nature and locality of civil employment required _____

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

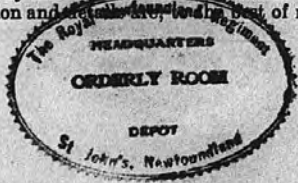
(Soldier's signature in full) *Allan Parsons*

A. L. L. L.
(Rank)

Station *ST. JOHN'S.*

Date *17-7-19*

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



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

Station

Date

NOTE—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.); King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.
 In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. *Royal Newfoundland* 7. Former Trade or Occupation } *cook*
2. Regtl. No. *4379* 3. Rank. *Rgtl* 7a. If the soldier claims previous service in Army, he should state
4. Name *Parsons* *Allen* (a) Former Regts. or Corps; with Regtl. Nos.
- (Surname) (Christian Names)
5. Age last birthday. *21*
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
- (b) Where
- (c) Opinion of Court
- (d) Particulars of Pension or Gratuity (if any)

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 general disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability. *nil*
12. Place of origin of disability. *nil*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | — | — |
| (ii.) Previous active service | — | — |
| (iii.) Climate in pre-war service | — | — |
| (iv.) Ordinary military service before the war | — | — |
| (v.) Serious negligence or misconduct on the man's part. } | — | — |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, etc., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

The complainant of his 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.

Reparation

W. G. Procuireux, Capt. R.A.M.C.

Medical Officer in charge of case.

Station *Hazeley Barron*

Date *8.14.19*

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

August 12, 1919

Mr. Allan Parsons,
Harbor Grace.

Dear Sir:-

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

Yours truly,

Captain & Paymaster.

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 *Allan* 2. Surname *Parsons*

3. Rank *Capt.* 4. Regtl. No. *4379*

5. Address in full to which future payments of gratuity are to be forwarded *H. Grace, C. B.*

6. Date of enlistment in the Regiment *March 29/18*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....

8. Relationship of such dependents.....

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

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....

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 March 29/18 to July 19/19*

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.

No

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

No

16. Have you, during the present War, served in the Imperial Forces?

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

July 19/19
Temporary

No

Revoluntarization

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.

No

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:

Allan Parsons

Place of Residence:

*No 100, C. P.,
St. John's, Nfld.*

Declared before me at:

This *19th* day of

July 19*19*

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

John M. Carthy

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

ST. JOHN'S, JUL 19 1919

Royal Newfoundland Regiment.

Billeting Account,

To *Lieut. A. Parsons*

Billeting Soldiers as undermentioned

from *July 1st 19* to *July 16th 19*

A.C.

4379 - Lieut. A. Parsons 16 60

<i>Btm</i>	
<i>3577</i>	INITIALS
	INITIALS
	INITIALS

Certified correct for \$

16. 60 - INITIALS

R.J.

A. Parsons
Billeting Officer.

1891

The accompanying Victoria Order and the British War Medal

is forwarded herewith

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records, in respect of his service

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S, Nfld.



Fold Here

Signature

Date

Address

1891

OCT 15 1921

1921.

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

is/are forwarded herewith to

Allan Parsons

in respect of his service as No. 4379 Rank Pte.

Name A. Parsons Royal Nfld. Regt.
~~Nfld. Forestry Corps~~

Receipt of the same should be acknowledged hereon.

Received British War Medal

Signature Allan Parsons

Date Oct. 21 / 21

Address Mr Grace

[P.T.O.]

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Number of Sheets one

Regiment of The Royal Afla

Signature of O. C. Company W. W. W.

Regimental Number and Name		Enlistment		Trade		Good Conduct Badges, Service pay or proficiency pay	
No.	<u>4379</u>	Age on	<u>20</u> years — months	<u>Clerk</u>		Promoted to lance Corporal <u>21/8-11-18</u>	
Joined	Date	Place and Date of Enlistment	<u>St. John's</u> <u>30-3-18</u>	Religion			
Joined	Date	Period of	with Colours <u>128</u> years. with Reserve <u>365</u> years.	meth			
Joined	Date			Place of Birth			
Joined	Date			<u>St. John's</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
	5			Demobilized	St. John's	4	8		19

To be carried over

Army Form B. 121.

4379

CR

Army Form B. 179a

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.

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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*
- 2. Regtl. No. *4379* 3. Rank. *Act. Sgt.*
- 4. Name *Loucons* *Alan*
(Surname) (Christian Names)
- 5. Age last birthday. *21*
- 6. Posted for duty on..... at.....
in category (or grade).....
- 7. Former Trade or Occupation } *Cook*
- 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.
(d) Particulars of Pension or Gratuity (if any)
- 8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty?
- 9. If a Court of Inquiry was held on an injury state :—
(a) When
(b) Where
(c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

- 11. Date of origin of disability.
- 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.

nil
nil
nil

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war
 - (ii.) Previous active service
 - (iii.) Climate in pre-war service
 - (iv.) Ordinary military service before the war
 - (v.) Serious negligence or misconduct on the man's part. }
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it ?

He complained of no disability

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, etc., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition ?
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

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 ?

Repatriation

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.

W. E. Proennin *Capt. Rowe*
 Medical Officer in charge of case.

Station *Hazeley Down*
 Date *8/14/19*

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

14379

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 14379 Rank Lt Col Name Parsons, A
 Date of Enlistment 30.3.18 Address St. John's District St. John's
 Occupation Bank Classification for Discharge E Medical Category A1
 Recommendation S.M.B. _____ Disability Rating _____
 Passed to Demobilization Officer with following documents:—

N.F. P136	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 18.2.19 O. C. Discharge Depot. [Signature]

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

A Parsons.

Particulars passed to Vocational Officer for information and action.

Date 19-7-19

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$60.00
- (b) Clothing Supplied _____

[Signature]
 1919 JUL 15

Date 19-7-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. P.2497 to his home at St Grace and Release Certificate No. 3725 issued.

Date 19-7-19

[Signature]
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 4-8-19

Date 14-7-19

[Signature]
Depot Paymaster.

Discharge approved for 21-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P136	B 268	B 121	N.F. Med.	D.F. 1
F 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 19-7-19

[Signature]
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 JUL 21 1919

L. R. COOPER, CAPT.

O. C. Discharge Depot.

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

Date Aug 1 19

[Signature]

Reg. No. 4379 Rank. LC Name. J. J. Jansons

Attested ... Address. Ft. Grace

Allotment ... Allottee ..

Date of Allotment ... Returned from Overseas ..

Returned on S S. Cassandra Cause. Discharge ^{July} 1919

19.7.19
21.7.19

PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILIZATION.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4379 Rank 21 pl Name Parsons A
 Intended place of residence St. John's

2. Occupation clerk
 Classification of soldier E Medical Category A 1

3. The above named man is discharged in consequence of
DEMOBILIZATION
Eligible for War Service Gratuity

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.
 Place, ST. JOHN'S
 Date JUL 19 1919
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.
 Place, ST. JOHN'S
 Date JUL 19 1919
 Signature of soldier A. Parsons
 Signature of witness James O. Newman

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, ST. JOHN'S
 Date JUL 19 1919
 Signature of soldier A. Parsons
 Signature of witness James O. Newman

STATEMENT OF SERVICE

7. Enlisted for service 30-5-18 No. of days on Military
 Discharged from service 21-7-19 Plus 14 days Service 432

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty eight days from date.
 Place, ST. JOHN'S
 Date JUL 21 1919
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed
 Place, ST. JOHN'S
 Date August 4/1919
 Officer i/c Records
 The Royal Newfoundland Regiment

213 2079/2525

✓
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