



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 6163 Name John Reddole Corps 4th.

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

- |  |                                      |
|--|--------------------------------------|
| 1. What is your name? .....  | 1. <u>John Reddole</u>               |
| 2. What is your full Address? .....  | 2. <u>No. 1 Grace St. St. John's</u> |
| 3. Are you a British Subject? .....  | 3. <u>Yes.</u>                       |
| 4. What is your age? .....   | 4. <u>20</u> Years <u>1</u> Months   |
| 5. What is your Trade or Calling? .....  | 5. <u>Carpenter</u>                  |
| 6. Are you Married? .....  | 6. <u>No.</u>                        |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? .....                             | 7. <u>No.</u>                        |
| 8. Are you willing to be vaccinated or re-vaccinated? .....  | 8. <u>Yes.</u>                       |
| 9. Are you willing to be enlisted for General Service? .....   | 9. <u>Yes.</u>                       |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? .....                                     | 10. Name .....<br>Corps .....        |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... | 11. <u>Yes.</u>                      |

I, John Reddole 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.

14/9/18 John Reddole SIGNATURE OF RECRUIT.  
George Walsh Signature of Witness.

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

I, John Reddole 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 on this 14 day of Sept 1915.  
Signature of Attesting Officer C. Dickson

### †CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the .....  
If enlisted by special authority, such will be attached to the original attestation.

Date SEP 16 1918 ..... 1918  
Place St. John's ..... 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) .....





*JG*

# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 6163 Name John Peddle Corps Math.

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

- |  |                             |
|--|-----------------------------|
| 1. What is your name? .....  | 1. <u>John Peddle</u> ..... |
| 2. What is your full Address? .....  | 2. <u>St. John's</u> .....  |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u> .....         |
| 4. What is your age? .....   | 4. <u>20</u> Years .....    |
| 5. What is your Trade or Calling? .....  | 5. <u>Lawyer</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, John Peddle ..... 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.

John Peddle ..... SIGNATURE OF RECRUIT.

George Walsh ..... Signature of Witness.

John Peddle ..... do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

**CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.**

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 14 day of Sept 1918.

Signature of Attesting Officer Robert Smith

**†CERTIFICATE OF APPROVING OFFICER.**

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

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

Date SEP 16 1918 .....

Place St. John's .....

Approving Officer John Brown

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

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

# DESCRIPTIVE REPORT ON ENLISTMENT

6163

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

Name John Peddle  
 Apparent age 20 years      months. Height 5 feet 8 3/4 inches  
 Chest Measurement { Girth when fully expanded 36 inches  
 Range of expansion 3 1/2 inches  
 Distinctive marks     

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Father James Peddle  
Mr. Grace 203 | Relationship Father

### Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow.		(b) Place and date of marriage.	
(c) Present address.		(d) Initials of Officer verifying entry.	
(a)	(b)	(c)	(d)

### Particulars as to Children

Christian Names	Date and Place of Birth

## STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from _____									Signature of Officers certifying correctness of entries
Joined at _____ on _____									
<u>Wickhampton Feb 20 1919</u>									
Total Service forfeited as above.....									

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

C.R. 6163

Extract from Daily Orders Part II Unit the Royal Hfld.  
Regt. Feb. 21st, 1919.

The discharge of the undernoted on demobilization have been CONFIRMED  
by Officer I/C Records on noted dates:- 20-2-19.

#6163 Pte. John Peddle.

C.R. 6163

Extract from Daily Orders Part 11 Unit The Royal Nfld.  
Regt. St. John's, Jan.30th,1919.

The discharge of the undernoted man has been approved  
on Demobilization by O.C.Discharge Depot on noted date.

6163 Pte. J.Peddle.

23-1-19.

C.R. 6163

Extract of Daily Orders Part II, dated Dec. 27th 1918.

Hospital.

6163 Pte. J. Fiddle

Discharged from M.I.D. Hospital 26-12-18

C.R. 6163

Extract from Daily Orders, Part 11, UNIT: The Royal Newfoundland  
Regiment, dated Dec. 7th. 1918.

HOSPITAL.  
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6163 Pte. J. Peddle

Transferred from Escasoni to MID. 5/12/18.



C.R. 6165  
Serial No.

# NEWFOUNDLAND POSTAL TELEGRAPHS.



## Cable Connection with all the World

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

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

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

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

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

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

(NOT TRANSMITTED)

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

Line Number _____	Rcd _____	By _____	Sent _____	by _____	St. John's Dept. of Militia.
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Dated

To Nov. 4, 1918.

Mr. James Peddle, Lt.  
Hr. Grace,

Beg to inform you, that your son # 6165 Pte. J. Peddle, is now improved.

J.R. Bennett,  
Minister of Militia.

FOR TYPEWRITER

# NEWFOUNDLAND POSTAL TELEGRAPHS.



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(NOT TRANSMITTED)

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

Line Number	Rcd	By	Sent	by	Check

Dated Dec. 18th, 1918.

To Jasem Peddle,

Hr. Grace,

Beg to inform you that your son No. 6163 Pte. J. Peddle, is now Improved.

J.R. Bennett,  
Minister of Militia.

C.P. 6163  
Counter No.

# NEWFOUNDLAND POSTAL TELEGRAPHS.



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(NOT TRANSMITTED)

Signature of Sender \_\_\_\_\_ Address \_\_\_\_\_  
St. John's Dept. of Militia

Line Number	Recd	By	Sent	by	Check

Dated Oct. 28, 1918.

To Mr. James Peddle.

Hr. Grace, C.B.

beg to inform you that your son #6163 Pte. J. Peddle is now Improved at Military Hospital St. John's.

J. B. Bennett,  
Minister of Militia.

FOR TYPEWRITER

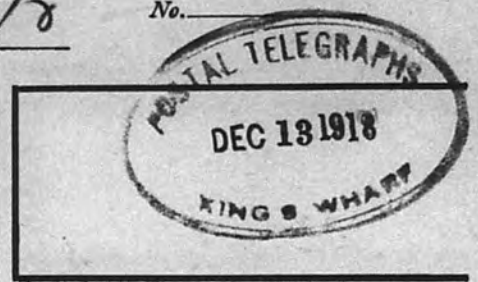
C.R. 6163

# NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 53 Sent by \_\_\_\_\_ Rec'd by \_\_\_\_\_ Check 18 No. \_\_\_\_\_

Place from St. John's  
To J. R. Bennett



How is James pedder  
no 6163 General Hospital  
please reply.

Mrs James pedder

C.R. 6163  
Counter No.

# NEWFOUNDLAND POSTAL TELEGRAPHS.



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(NOT TRANSMITTED)

**Dept. of Militia.**

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

Line Number	Rcd	By	Sent	by	Check

Dated Dec. 13, 1918.

To Mrs. James Peddle.

Hr. Grace.

Beg to inform you that your son No. 6163 Pte. J. Peddle, is now slightly improved.

J.R. Bennett,  
Minister of Militia.

FOR TYPEWRITER

J.R. 6163  
Counter No. \_\_\_\_\_

# NEWFOUNDLAND POSTAL TELEGRAPHS.



## Cable Connection with all the World

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**(NOT TRANSMITTED)**

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

Line Number	Rcd	By	Sent	by	Check

Dated Dec. 9th 1918.

To Mr. James Peddle,

Mr. Grace.

Regret to inform you that your son No. 6163 Pte. J. Peddle, is now suffering from Mumps.

J.R. Bennett,  
Minister of Militia.

FOR TYPEWRITER

C.R. 6163

Extract from Daily Orders part 11. Depot St. John's dated Oct. 28th. 1918.

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HOSPITAL

#6163 Pte. J. Peddle.

TRANSFERRED TO M. I. D. HOSPITAL. 26-10-18.

DC.

C.R. 6163

EXTRACT FROM DAILY ORDERS PART II DEPOT  
ST. JOHN'S DATED OCTOBER 24th., 1918.

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#8163 Pte. J. peddle.

ADMITTED TO BARRACKS HOSPITAL 22/10/18

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BC.





# NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. B Sent by \_\_\_\_\_ Rec'd by \_\_\_\_\_ Check 10/- No. \_\_\_\_\_

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

To Hon J R Bennett  
Min of Marine



How is no 6163 ple  
John peddle need  
please answer.

James peddle  
condition Improved

C.R. 6163  
Counter No.

# NEWFOUNDLAND POSTAL TELEGRAPHS.



## Cable Connection with all the World

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(NOT TRANSMITTED)

Signature of Sender \_\_\_\_\_ Address St. John's Dept. of Militia

Line Number	Rcd	By	Sent	by	Check

Dated Oct. 30, 1918.

To Mr. James Peddle.,  
Hr. Grace.

beg to inform you that #6163 Pte. John Peddle's condition is improved.

J R Bennett,  
Minister of Militia.

FOR TYPEWRITER

C.R. 6163  
Counter No. \_\_\_\_\_

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(NOT TRANSMITTED)

Signature of Sender \_\_\_\_\_ Address **St. John's Dept. of Militia.**

Line Number	Rcd	By	Sent	by	Check

Dated

Nov. 7th, 1918.

To

Mr. Mr. James Peddle,  
Hr. Grace.

Beg to inform you that you son # 6163 Pte. J. Peddle, is now convalescent.

H.R. Bennett,  
Minister of Militia.

FOR TYPEWRITER

C.R. 6163  
Counter No.

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Signature of Sender \_\_\_\_\_ Address **St. John's Dept. of Militia.**

Line Number	Rcd	By	Sent	by	Check

Dated

To Mr. James Peddle,  
Hr. Grace, C.B.

Beg to inform you that your son #6163 Pte. J. Peddle, is now ~~improved~~ convalescent.

J.R. Bennett,  
Minister of Militia.

FOR TYPEWRITER

C.R. 6163

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

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#6163 Pte. J. Peddle.

Discharged from M.I.D. Hospital and admitted to  
Escasoni Con. Hosp. 15-11-18.

DC.

Extract from Daily Orders Part 11 depot, St. John's dated Sept 16/1918

6163 Pte. John Peddle.

ATTAESTED FOR GENERAL SERVICE WITH THE ROYAL NEWFOUNDLAND REGIMENT  
from 14-9-18.

---

Pedde form.

6163

Ray D. 7/15

February 20, 1919

#6163 Pte. John Peddle,  
Harbor Grace.

Dear Sir:-

Please find enclosed "Discharge  
Certificate No. 952."

Yours truly,

Captain,  
Paymaster & O.i/c Records

Enc'l 1.



# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 6163 Rank Private Name Peddle John  
 Intended place of residence Harbor Grace

2. Occupation Carpenter  
 Classification of soldier C Medical Category ATV

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

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.  
 Place JAN 23 1919  
 Date .....  
 for W. H. L. Capt  
 Commanding Discharge Depot  
 The Royal Newfoundland Regiment

### CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place and date Jan 23 19  
 Signature of soldier John Peddle  
 Signature of witness C. B. Dicks Capt.

### CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place and Date 23-1-19  
 Signature of soldier John Peddle  
 Signature of witness W. J. Eaton R.Q.M.S.

### STATEMENT OF SERVICE

7. Enlisted for service 14-9-18 No of days on Military  
 Discharged from service 23-1-19 Plus 28 days Service 160 days

### APPROVAL OF DISCHARGE

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

Place ST. JOHN'S  
 Date 23-1-19  
 for R. H. L. Capt  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment

### CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place St. John's, Nfld.  
 Date February 20/1919  
 for W. Bowley Capt  
 Officer in Charge Records  
 The Royal Newfoundland Regiment

17  
31  
30  
31  
31  
20  
110

J. F. B. 20/19/19

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 4163 Rank pte Name Peddle John  
 Date of Enlistment 14.9.18 Address St. George's District St. George's  
 Occupation Carpetweaver Classification for Discharge e Medical Category A#  
 Recommendation S.M.B. \_\_\_\_\_ Disability Rating \_\_\_\_\_

Passed to Demobilization Officer with following documents:—

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

Date 28.12.18 Signature: Mooney Capt  
O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

**1. Civil Re-Establishment.**

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

Particulars passed to Vocational Officer for information and action. Signature: John Peddle

Date.....

**2. Clothing.**

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable to be paid
- (b) ~~Clothing~~ Supplied by Joseph A. Lawrence

Date 23-1-19

O i/c Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *me* ..... to his home  
 at *London* ..... and Release Certificate No. *826* ..... issued.

Date *23-1-19* .....

*ASD Dick Capt*

Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection  
 therewith settled. He has received pay and allowances to *20-2-19* .....

Date *23-1-19* .....

*Money Capt.*

Depot Paymaster.

Discharge approved for. *23. 1. 19* .....

Forwarded with following documents to O.C Discharge Depot.

N.F. P36.....	B 268.....	B 121.....	N.F. Med.....	D.F. 1.....
F 178.....	W 3494.....	B 122.....	Board 1st.....	" 2.....
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 *23 1. 19* .....

*ASD Dick Capt*

Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.  
 Board of Pension Commissioners.

with following additional documents.

Date *23-1-19* .....

*R.H. Jait Capt.*

O. C. Discharge Depot.

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

Date .....

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

# MEDICAL HISTORY

OF

Surname Pedelle Christian Name John

Table I.—GENERAL TABLE

Birthplace :—Parish St. George County Newfoundland.

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	14	Sept 1918		191
	at	St. Johns	at	
Declared Age	20	years		days
Trade or Occupation	Carpenter			
Height	5	feet 8 3/4 inches		
Weight		133 lbs.		
Chest Measurement	Girth when fully expanded	36 inches		
	Range of Expansion	3 1/2 inches		
Physical Development				
Vaccination Marks	Arm	Right	Left	Right
	Number			
When Vaccinated				
Vision	R.E.—V=	6/6	R.E.—V=	
	L.E.—V=	6/6	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)	L. M. Peterson			
(Rank)	Major		Medical Officer	Medical Officer
Enlisted	at	St. Johns	at	
	on	14 day of Sept 1918	on	day of 191
Joined on Enlistment	Corps		Corps	
	Regtl. No.		Regtl. No.	
Transferred to	Royal Nfld. Regt 6165			
Became non-effective by				
(Signature)				
(Rank)				

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on Syphilis, admissions of treatment
	Day	Month	Year	Day	Month	Year			
M. J. D. Hospital	26	10	18	15	11	19	Influenza.	20	? T.B.
Caccaroni	15	11	18	5	12	18	Conduct	21	
M. J. W. Hospital	5	12	18	26	12	18	Mumps	21	

List in case of Warrant Officers treated in quarters

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

Signature of Medical Officer

*W. Posow*

*S. W. Burden*



## Civil Re-establishment Committee



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

*To work as Carpenter*

*John Peddle*

Signature of Man.

Reg. No.

*6163*

*W. S. Duke*  
Signature of the Vocational Officer or his Representative.

Place

*St John's*

Date

*23/1/19.*

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# The Royal Newfoundland Regiment

Class for Demobilization:—

*C*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date ..... *27.12.15* .....

Regimental No. .... *6163* .....

Name ..... *Siddle John* .....

Address ..... *N<sup>o</sup> 9 race* .....

Present Medical Category ..... *A II* .....

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

Members of Board {

..... *R. H. Lait Capt.* .....

O.C. Discharge Depot.

..... *H. Paterson* .....

Senior Medical Officer

..... *W. Burden* .....

M. O. Depot



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

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

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

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

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

Name in full *John Peddle*

Regiment from which discharged *Royal Newfoundland*

Regimental number *6163*

Intended address *St. John's*

Height on discharge *5* Feet *8 3/4*

Color of hair on discharge *Fair*

Complexion *Blue*

Color of eyes

Descriptive Marks

Figure on discharge

Christian name of Father *James Peddle*

Christian name of Mother *Jane Peddle*

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth *St. John's 1899*

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)

Station

*John Peddle*  
*Witness J. Carmichael Esq.*

(Rank)

*Pte*

Date

*St. John's Newfoundland* *December 28/18*

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

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

Station

Date





# ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at St. John's on Sept 14 1918

1. Name John Peacle Age (a) Declared 20  
(b) Apparent

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

What severe illnesses have you had? none

Blue  
Blow Light  
marks

6163

3. Height 5-8 3/4 Weight 135  
4. Eyesight (a) Left 6/12 (b) Right 6/6  
5. Physical Defects (Examine after strenuous exercise) 7

6. Examination of Lungs  
Measurement (a) Expiration 32 1/2 (b) Inspiration 36

7. Examination of Heart 7

8. Examination of Urine

9. Examination of Mouth—(Defective Speech)

- Teeth
- Throat
- Nose
- Ears (Otorrhea)
- (Deafness)

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

11. Name and address of next of kin father James Mr Grace CB.

REMARKS—

H 77

Archie Gait  
W. Gordon  
Medical Examiners.

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39.

Regiment of

*Royal Newfoundland Regt*

Signature of O. C. Company

Number of Sheet *One*  
*C. B. Dickson*

Regimental Number and Name		Enlistment		Trade
No.		Age on	20 years	months
<i>6163</i>	<i>John Peddle.</i>			<i>Carpenter</i>
Joined	Date	Place and Date of Enlistment	Religion	
Joined	Date	<i>St. John's</i>	<i>Meth.</i>	
Joined	Date	Period of	Place of Birth	
Joined	Date		<i>St. John's</i>	
		with Colours	years.	
		with Reserve	years.	
		<i>160</i>		
		<i>365</i>		

Good Conduct Badges, Service pay or proficiency pay

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Name of Witnesses.	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<i>Demobilized St John's 20</i>					<i>2/19</i>

To be carried over.

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 4163 Rank pte Name Peddle John  
 Date of Enlistment 14 9 15 Address St. George's District St. John's  
 Occupation Carpenter Classification for Discharge c Medical Category A II  
 Recommendation S.M.B. \_\_\_\_\_ Disability Rating \_\_\_\_\_

Passed to Demobilization Officer with following documents:—

N.F. P 36	B 268	B 121	/	N.F. Med	D.F. 1	/
B 178	W 3494	B 122		Board 1st	" 2	
B 178a	D 400A	B 1915	2	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 28 12 15 
  
 O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

**1. Civil Re-Establishment.**

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

Particulars passed to Vocational Officer for information and action.

*John Peddle*

Date.....

**2. Clothing.**

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$ 00.00
- (b) Clothing Supplied Joseph A. Lawrence

Date 23-1-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

Stayed at *Staying at*  
 The above named has been provided with Travelling Warrant No. *711* to his home  
 at *London* and Release Certificate No. *826* issued.  
 Date *23-1-19* *Asdicks Capt.*  
 Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection  
 therewith settled. He has received pay and allowances to *20-2-19*  
 Date *23-1-19* *W. H. W. Capt.*  
 Depot Paymaster.

Discharge approved for *23 1 19*  
 Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	✓ 1	N.F. Med.	D.F. 1	1
E 178	W 3494	B 122		Board 1st	" 2	1
R 178a	D 400A	B 1915	✓ 2	do 2nd	" 3	20
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K	✓ 1	do 4th	" 5	
B 179b	B 103	ME 2			" 6	
B 179c	B 120	M 93	✓ 1			

Date *23-1-19* *Asdicks Capt.*  
 Demobilization Officer.

APPROVED.

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

Date *23-1-19* *R.H. Sait Capt.*  
 O. C. Discharge Depot.

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

Date *Jan 30 1919* *Asdicks Capt.*  
*W. H. W. Capt.*



Reg. No. 6163 Rank Pt Name Puddle John H. Coy  
 Attested 14-9-18 Address St. Grace  
50" Allotment Allottee Mother Mrs Jno Puddle  
 Date of Allotment 1-11-1918 Returned from Overseas.....  
 Embarked for Overseas ..... Cause.....

Vac 16-9-18. 1st 28-9-18 3rd Inc 2-10-18  
 4 leave 2-10-18 to 8-10-18. Reto 10-10-18.  
 22-10-18 Adm - to Barracks Hosp  
 26-10-18 Transferred to M.I.S.  
 15-11-18 Transferred from M.I.S. to Escasoni  
 5-12-18 " " Escasoni to M.I.S.

28-12-18  
 23-1-19

**PASSED TO DEMOBILIZATION OFFICER**

**DISCHARGE APPROVED ON DEMOBILISATION.**