



FIRST NEWFOUNDLAND REGIMENT /

ATTESTATION OF

No. 4391 Name Phillips Herbert Corps CofC.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--------------------------------|
| 1. What is your name? | 1. <u>Herbert Phillips</u> |
| 2. What is your full Address? | 2. <u>76 Le Marchant Rd</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>Years 19 Months</u> |
| 5. What is your Trade or Calling? | 5. <u>Chick</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 <u>Royal Artillery</u> |
| 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, Herbert Phillips 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.

H Phillips SIGNATURE OF RECRUIT.
A. James Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Herbert Phillips 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 S. York

on this 7th day of April 1915.
 Signature of Attesting Officer A. James

†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 Bn

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

Date 7th April 1915 } Approving Officer.
 Place S. York }

† 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)



4 FIRST NEWFOUNDLAND REGIMENT /

ATTESTATION OF

No. 4391 Name *Phillips Herbert* Corps *Cof C.*

Questions to be put to the Recruit before Enlistment

- | | |
|--|--|
| 1. What is your name? | 1. <i>Herbert Phillips</i> |
| 2. What is your full Address? | 2. <i>76 Le Marchant Rd
St. Johns</i> |
| 3. Are you a British Subject? | 3. <i>Yes</i> |
| 4. What is your age? | 4. <i>19</i> Years <i>19</i> Months |
| 5. What is your Trade or Calling? | 5. <i>Clerk</i> |
| 6. Are you Married? | 6. <i>no</i> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <i>no</i> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <i>Yes</i> |
| 9. Are you willing to be enlisted for General Service? | 9. <i>Yes</i> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... | 10. { Name
Corps <i>Royal Newfoundland Regt</i> |
| 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. <i>Yes</i> |

I, *Herbert Phillips* 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.

*A. Company
8-4-18*

H Phillips SIGNATURE OF RECRUIT.
Spence J. Okplant Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.
The above questions were then read to the Recruit in my presence.
I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at *St. Johns* on this *8th* day of *April* 191*8*.
Signature of Attesting Officer' *J. James*

†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 compiled with. I accordingly approve, and appoint him to the
If enlisted by special authority, such will be attached to the original attestation.
Date.....191.....
Place.....
Signature of Approving Officer *J. James*

† 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).....

C.R. 4391

2

Extract from Daily Orders Part 11 Unit the Royal Wfld.
Regt. St. John's, Jan. ³⁰~~29~~th, 1919.

Having been found Medically unfit is discharged from
Nov. 5th, 1918.

4391 Pte. H. Philips.

Preliminary Report

CR 4391

Extract from List to C.C. Depot from The Director of Medical Services
dated October 19th 1918.

At a Medical Board held on Friday, October 18th., the following was
a finding:-

4391 Pte. H. Phillips.

Recommended Discharge - Permanently Unfit.

C.R. 4391

Extract from Daily Orders Part 11 Unit The Royal Hfld.Regt.,
St. John's Oct.14th,1918.

The undernoted man returned from Overseas and reported at
Depot. from 12-10-19.

4391 Pte. H. Philips.

C.R. 4391

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

#4391 Pte. H. Philips.

Embarked for overseas with draft 11-6-18

C.R. 4391

Extract from telegram from Synoptical,
London dated September 20th 1910.

4391 Phillips.

The above mentioned exhibited by Government
Transport September 20th., at London arriving
at Montreal.

Being sent here for DECHANE.

Extract from Daily Orders part 11, from Unit The
Royal Newfoundland Regiment, St. John's, dated
April 9th, 1918.

#4391 Pte. H. Phillips.

Attested for General Service with the 1st, Newfound-
land Regiment from 8/4/18.

Phillips, H.

C.R. 4391

P.R.C.

5

D

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

MEDICAL HISTORY

Surname Phillips OF Christian Name Herbert

Table I.—GENERAL TABLE.

Birthplace:—Parish St Johns County Newfoundland

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>8</u> day of <u>April</u> 191 <u>8</u>		on day of 191	
	at <u>St Johns</u>		at	
Declared Age	<u>19</u> years days		years days	
Trade or Occupation	<u>Clerk</u>			
Height	<u>5</u> feet <u>9</u> inches		feet inches	
Weight	<u>128</u> lbs.		lbs.	
Chest Measurement	Girth when fully expanded. <u>34</u> inches	 inches	
	Range of Expansion. <u>3</u> inches	 inches	
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R. E.—V= <u>6/6</u>		R. E.—V=	
	L. E.—V= <u>6/6</u>		L. E.—V=	
(a) Marks indicating congenital peculiarities or previous disease				
(b) Slight defects but not sufficient to cause rejection				
Approved by (Signature)	<u>Lambert</u>			
(Rank)	<u>Major</u>			
	Medical Officer.			Medical Officer.
Enlisted	at <u>St Johns</u>		at	
	on <u>8</u> day of <u>April</u> 191 <u>8</u>		on day of 191	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>Det Royal Nfld Regt</u>	<u>4391</u>		
Transferred to				
Became non-effective by				
	on day of 191		on day of 191	
(Signature)				
(Rank)				

R. E.—V=

L. E.—V=

COPIES SENT

To	No.
M. OF M.	<u>1000/10</u>
(*) O.C. 1st. En.	
.. 2ND ..	

23 SEP 1918

Medical Report on an Invalid.

Station Hazelton Ck.
Date 10-9-18

1. Unit Royal W. Regt.
2. Regimental No. 4391
3. Rank Pte.
4. Name PHILLIPS Herbert.
5. Age last birthday 19 yrs.
6. Enlisted { on 8 April 1918.
 at S. Toronto.
7. Former Trade } Clerk.
or Occupation }
7A. If with previous service in Army, state—
(a) Former Unit;
(b) Regimental No.; n.a.
(c) Date of Discharge;
(d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question 12.)

V. D. H.

COPIES SENT		
To	No.	Date
M. OF M.	<u>1374/114</u>	<u>23 SEP 1918</u>
O.C. 1ST. BR.	<u>W.H.</u>	
" 2ND BR.	<u>W.H.</u>	

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.
10. Place of origin of disability.
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.
12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

He states that since he returned he was off work with Rheumatism, he was in bed about 2 months; since joining the depot in July, he early complained of pain in chest, cough, breathlessness. He has been on walking exercises, tonic and fresh air treatment.

- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
(b) constitutional or hereditary, and not aggravated by service during the present war.
(c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

? aggravated by show of military service.

Constitutional

n.a.

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.

Anemic: flat chested: small
expansion of lung: blowing bruis
we get. Dulness over both
apices posteriorly - Bronchic breathing
UR++ and pectoriloquy
unfit for active service.

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

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

na.

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

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

na.

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

na.

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

na.

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?

na.

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

Consolidated with apices.

20. Do you recommend—
(a) Discharge as permanently unfit, or
(b) Change to England?

Discharge as permanently unfit
for active service.

M. K. [Signature]
Capt. R. [Signature]

Officer in medical charge of case.

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

Station _____

Officer in charge of Hospital.

Date _____

*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.

LAST PAY CERTIFICATE

N.F.P./94

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 26/5/17.

Regtl No. 4391 Rank Lt Name Phillips H Unit Postal 74th D who was transferred to St Johns on 23/9/18 Authority _____ Cause Repatriation

DR. STATEMENT OF ACCOUNT

PERIOD:	PARTICULARS	£ s d					PARTICULARS	£ s d						
		£	s	d	£	s		d	£	s	d			
From 3/6/18 to 23/9/18	Balance Dr. from						Balance Cr. from							
	Allotment 28 days @ 50¢	114	00	2	17	7	Pay 28 days @ \$1.00							
	Cash Payments:						Field Allow 28 days @ \$1.00 ²⁸ 250	30	80	16	6	7		
	4/9/18 15/-						Other Allowances days @ \$							
	12/9/18 15/-				2	5	0	Other Credits:						
	27/9/18 15/-													
	23/9/18 Casual 11.11				1	1	1							
	Laundry Ltd.					2	11							
	Total Debits				16	6	7	Total Credits				16	6	7
	Balance due by Paymaster							Balance due to Paymaster						
				16	6	7					16	6	7	

Copy of bill 579 \$163 11/5/18

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of

C Company
Harley Down Camp 23/9/1918
(Place) (Date)

W. M. Emerson
O.C. "C" Company.

Made up/checked in accordance with information received in the Pay & Record Office London to 20/9/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

25 SEP 1918 191

Chief Paymaster & Officer i/c Records..

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
4391	Pte	Phillips H.	£350	H Phillips

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

H Phillips

Date July 1/18

Phillips, Herbert

4391

Hay Sept.

WWB/EB

January 29th 1920.

To:- Major Howley,
O. I. C. Pay & Records.

From:- V. O.

H. Phillips 4391.

This is to inform you that the man named in the margin
completes his course under the Civil Re-establishment Committee
on January 31st.

Howley.
V. O.


COPY.

This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. <u>4391</u>	Army Rank <u>Private</u>
Name <u>Phillips Herbert</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
Corps <u>ROYAL NEWFOUNDLAND REGIMENT.</u>	
Battalion, Battery, Company, Depôt, &c. <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)</small>	
Date of discharge <u>November 1st 1918</u>	
Place of discharge <u>St. John's, Nfld.</u>	
1. Description at the time of discharge.	
Age <u>19</u> years <u>7</u> months Height <u>5</u> feet <u>7</u> inches Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins. Complexion <u>fair</u> Eyes <u>blue</u> Hair <u>light brown</u> Trade <u>Electrician</u> Intended place of residence <u>79, Le Marchant Rd. St. John's.</u> <small>(To be given as fully as practicable)</small>	Descriptive marks. <div style="text-align: center;">  </div>
2. The above-named man is discharged in consequence of <u>being no longer physically fit for war service</u>	
<small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small>	
3. Military character:—	
4. Character awarded in accordance with King's Regulations:—	
<div style="display: flex;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-size: small; margin-right: 5px;">To be filled in on the soldier quitting the Colours.</div> <div style="border: 1px solid black; flex-grow: 1;"></div> </div>	
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.	
Initials of Commanding Officer.	
Army Form B. 2088 has been issued to*	

23
31
30
31
31
30
31
1
208

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class _____

6. Campaigns, Medals and Decorations

Certificate of education

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place) _____

(Date) _____ Commanding _____ Batta. _____ Regiment.

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) St Johns nfld. _____ W. S. Phillips (Signature of Soldier.)

(Date) 15/10/18. _____ E. Walsh (Signature of Witness.)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. *Additional certificate in the case of a soldier who takes his discharge at his own request.*

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier.)

10. *Statement of service.*

Service towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service " " _____ (the date of confirmation of discharge) ... " " "

Total ... " " "

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for _____ (date)

(Place) _____

Signature _____

(Date) _____

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

No reservations

D+S Phillips

E. walsh.

Medical Report on an Invalid.

Station Hayden Down CampDate 10-9-18

1. Unit Royal Mfld
2. Regimental No. 4391
3. Rank Pte
4. Name Philip Herbert
5. Age last birthday 19
6. Enlisted { on 8th April 1918
at St John's Mfld
7. Former Trade } Clerk
or Occupation }
- 7A. If with previous service in Army, state—
(a) Former Unit ;
(b) Regimental No. ; Ma
(c) Date of Discharge ;
(d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

V. D. H.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.
10. Place of origin of disability.
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

He states that prior to enlistment he was off work with rheumatism. He was in bed about two months. Since joining the depot July 8th he early complained of pain in chest, cough and breathlessness. He has been on breathing exercises, tonic and fresh air treatment.

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
- (b) constitutional or hereditary, and not aggravated by service during the present war.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

Aggravated by strain of Military Services.

Constitutional

Na

13. What is his present condition? *Anaemic, flat chested, small expansion of lung, blowing heart over apex bilaterally over both apices posteriorly. Bronchial breathing V.R.++ and pectoriloquy unfit for active service.*
- Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.
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? *na*
- If so—(a) When?
 (b) Where?
 (c) Opinion?
16. Was an operation performed? If so, what? *na*
17. If not, was an operation advised and declined? *na*
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? *na*
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war. *Consolidation both apices.*

20. Do you recommend—
- (a) Discharge as permanently unfit, or
 (b) Change to England?

Discharge as permanently unfit for active service

J. H. Knight Capt R.A.M.C.
 Officer in medical charge of case.

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

Station _____

 Officer in charge of Hospital.

Date _____

*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.

NOTES.—(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 Minister of Pensions should be in possession of the most reliable information to enable him 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, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentials between them.*

(iv.) In answering question 21 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.

1. (a.) State whether the disability is clearly attributable to—
 - (i.) Service during the present war; *Pulse 102 temp. normal weight 144 lb*
 - (ii.) Climate; *vide sect 15*
 - (iii.) Ordinary military service; *Also has mitral systolic murmur*
 - (iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or *aggravated by*
 - (v.) Whether it is constitutional or hereditary. *yes*
- (b.) If due to one of the first three of these causes, to what specific conditions do the Board attribute it?
22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which?
23. Is the disability permanent? *no*
24. If not permanent, how soon do the Board recommend re-examination?
25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.

60% six months
26. If an operation was advised and declined, was the refusal unreasonable?
27. Do the Board recommend—
 - (a) Discharge as permanently unfit, or *yes*
 - (b) Change to England?
28. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic training) is desirable in a—
 - (a) Sanatorium;
 - (b) Hospital;
 - (c) Convalescent home;
 - (d) Asylum; or
 - (e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.
29. With reference to Army Council Instruction No. 114 of 1917, is any surgical appliance recommended?
30. Does the man require the constant attendance of another person?

Signatures:—

M. S. Fraser President.

Station M. J. John

J. Sinclair Suit } Members.

Date Oct 18 1918

L. Paterson major }

Approved

OCT 18 1918

Cluny Macpherson

Station

Administrative Medical Officer.

Date

D. M. S. NEWFOUNDLAND.





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 *Herbert Phillips*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *4391*
 Intended address *76 Le Marchant St. St John's*
 Height on discharge *5* Feet *9*
 Color of hair on discharge *Light Brown*
 Complexion *Fair*
 Color of eyes *Blue*
 Descriptive Marks
 Figure on discharge *Medium*
 Christian name of Father *James. J.*
 Christian name of Mother
 Wife's maiden name in full
 Date and place of marriage
 Christian names of children
 Place and date of soldier's birth. *St John's. Apr. 12th 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) *Herbert Phillips*

Station *St John's*

Date *Oct 15th /18*

(Rank) *Pte*

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.

Robert Cuthbert
 Medical Officer of Hospital,
 Unit, or Command Depot.

Station *St John's*

Date *Oct 15/18*

COPY

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178* to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Philips Christian Name Herbert

TABLE I.—GENERAL TABLE.

Birthplace ... Parish St Johns County Anglo.

Examined ... on 8 day of April 1918.
at St Johns

Declared Age ... 19 years ... days.

Trade or Occupation ... Clerk

Height ... 5 feet, 9 — inches.

Weight ... 128 lbs.

Chest Measurement { Girth when fully Expanded. 34 inches.

{ Range of Expansion 3 inches.

Physical Development ...

Vaccination Marks { Arm ... Right Left
Number

When Vaccinated ...

Vision ... R.E.—V— 6/6
L.E.—V— 6/6

(a) Marks indicating congenital peculiarities or previous disease ...

(b) Slight defects but not sufficient to cause rejection ...

Approved by (Signature) Off Lt Colonel Peterson
(Rank) Major Medical Officer.

Enlisted ... at St Johns
on 80 day of April 1918.

Corps.	Regtl. No.
ROYAL NEWFOUNDLAND REGIMENT.	4391

Transferred to ...

Became non-effective by

on ... day of ... 1918

(Signature) _____
(Rank) _____

LAST PAY ORIGINAL TE

N.F.P./94

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 26/5/17.

Regtl No. 4591 Rank Plt Name Phillips H. Unit Royal 7th L.D. who was transferred
to St John on 23/9/18 Authority _____ Cause Repatriation

STATEMENT OF ACCOUNT

	PARTICULARS	\$	¢	£	s	d	PARTICULARS	\$	¢	£	s	d	
PERIOD: FROM <u>30/8/18</u> TO <u>27/9/18</u>	Balance Dr. from						Balance Cr. from						
	Allotment 28 days @ 50¢	14	00	2	17	7	Pay 28 days @ \$100						
	Cash Payments:						Field Allow 28 days @ \$107/250	130	80	6	6	7	
	<u>6/9/18</u> 15¢						Other Allowes days @ \$						
	<u>12/9/18</u> 15¢				2	5	0	Other Credits:					
	<u>20/9/18</u> 15¢												
	<u>23/9/18</u> Casualty				1	1	1						
	Other Debits:												
	<u>Laundry Etc.</u>					2	11						
		Total Debits				16	6	7	Total Credits			16	6
	Balance due by Paymaster						Balance due to Paymaster						
					16	6	7				16	6	7

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of

C. Company
Harley Down Camp (Date) 23/9/18
(Place) _____

W. M. Emerson
O.C. "C" Company.

Made up/Checked in accordance with information received in the Pay & Record Office London to 30/8/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

25 SEP 1918 191

5/2/18

Chief Paymaster & Officer i/c Records.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

On completion this Declaration is to be returned to THE OFFICER I/C

RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

Christian name *Herbert* 2. Surname *Phillips*
3. Rank *Private* 4. Regtl. No. *4391*

5. Address in full to which future payments of gratuity are to be forwarded.....
Herbert Phillips

..... *76 Le Marchant Road, City*
6. Date of enlistment in the Regiment..... *April 8th 1918*

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..... *Not applicable*

9. Address in full of such dependent..... *Not applicable*

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 Nfld. 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 Nfld. or Overseas..... *Eighty four days in Newfoundland*
One hundred and twenty four Overseas

13. Have you had more than one enlistment? If so, give particulars of discharge and re-enlistments, and under what regimental numbers.....
Not Applicable

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.....
Not Applicable

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

16. Have you, during the present war, served in the Imperial Forces?.....
No

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.....
No

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?.....
Not Applicable

(b). If so, was such reversion in consequence of misconduct or inefficiency?.....
Not Applicable

19. Are you now serving in the Regt.?..... If not give:- (a) Date of discharge.....
Nov. 1st 1918 (b) Reason for discharge.....
Physically unfit for War Service

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.....
Not Applicable

21. (a) Are you receiving treatment from the Civil Re-Establishment Com.?

(b). If (a), are you in receipt of full pay and allowances from that Committee.....
Not Applicable

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.

JUN 28 1919

Capt. Howley,
O. I. C. Records.

Please pay to H. Philips, No 4391
the sum of **seven dollars**
in payment of allowance for week ended this date
in connection with re-education.

\$7.00

Pension \$30.00

W. B. Lachell
Vocational Officer.

H. Philips

JUN 21 1919

Capt. Howley,
O. I. C. Records.

Please pay to H. Phillips, No 4391
the sum of **seven dollars**
in payment of allowance for week ended this date
in connection with re-education.

\$7.00

Pension \$30

W. W. Mitchell
Vocational Officer.

H. Phillips

JUN 7 1919

Capt. Howley,
O. I. C. Records.

Please pay to H. Phillips, No 4391
the sum of **four dollars and sixty six cents**
in payment of allowance for week ended this date
in connection with re-education.

\$4.66

Pension \$30

G. W. K. Kell
Vocational Officer

H. Phillips

JUN 14 1919

Capt. Howley,
O. I. C. Records.

Please pay to H. Phillips, No 4391
the sum of four dollars and sixty six cents
in payment of allowance for week ended this date
in connection with re-education.

\$4.66

Pension \$30

E. W. Keckell
Vocational Officer.

H. Phillips

BB/EB

November 18, 1919.

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

20082	Ed

J. C. R.

Please pay H. Phillips 4391,
the sum of five dollars,
on account of arrears up to November 15th. Charge same to the
Civil Re-establishment Committee.

\$5.00

Howley
Major

For V. O.
H. Phillips

February 7th 1920

Major Howley
O. I. C. Records

Please pay to H. Phillips, 4391
the sum of nine dollars and thirty three cents
in payment of allowance for week ended yhis date
and charge same ti Civil Re-establishment Committee

\$9.33

Pension \$20.00

CH. NO.	28156	INITIALS	How
ISS. LEDGER		INITIALS	
PAY LEDGER		INITIALS	
GEN. LEDGER		INITIALS	

How
Vocational Officer

April 6th 1920

Major Howley
O. I. C. Records

Please pay to H. Phillips, ~~2222~~ 4391
the sum of forty dollars
in payment of P. & A. Bonus
and charge same to Civil Re-establishment Committee

\$40.00

Pension \$20.00

ACCOUNT NO.	
AMOUNT	33998
DATE	
PAY TO ORDER OF	
GEN LEDG	

H. C. A. G. B. K. M. C. H. A. L. L.

Vocational Officer

H. Phillips

May 10th, 1919

Capt. Howley,
O. I. C. Records.

Please pay to **Mr. H. Philips, No 4391**
the sum of **four dollars and sixty six cents**
in payment of allowance for week ended this date
in connection with re-education.

\$4.66

Pension \$30

ACCOUNT	<i>G. R. [unclear]</i>
CH. NO.	<i>19742</i>
IND. LEDGER	---
PAY LEDGER	---
GEN. LEDGER	---

G. R. [unclear]
Vocational Officer.

H. Philips

MAY 17 1919

Capt. Howley,
O. I. C. Records.

Please pay to Mr. H. Phillips, No 4391
the sum of four dollars and sixty six cents
in payment of allowance for week ended this date
in connection with re-education.

\$4.66

Pension \$30

W. W. McCall
Vocational Officer.

H. Phillips

MAY 24 1919

Capt. Howley,
O. I. C. Records.

Please pay to H. Philips, No 4391
the sum of four dollars and sixty six cents
in payment of allowance for week ended this date
in connection with re-education.

\$4.66

pension \$30

H. P. Phillips

G. W. McCall
Vocational Officer

Capt. Howley,
O. I. C. Records.

MAY 31 1919

Please pay to H. Philips, No 4391
the sum of **four dollars and sixty six cents**
in payment of allowance for week ended this date
in connection with re-education.

\$4.66

Pension \$30

W. M. Mchell.
Vocational Officer

H. Philips

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 84 $\frac{60}{100}$

Mar 27 1920

Received from the First Newfoundland Regiment
the sum of Eighty four Dollars.
on account of Pay. P.D. Pay
balance

H. Phillips

Ch. No.	33109	Initials	Jur
Pay Ledger	383	Initials	[Signature]
Gen. Ledger		Initials	[Signature]

Regtl. No. _____ Rank _____

[Signature]

No. 4391

Rank

P6

Name

H Philips

1918 - 1919

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 15⁰⁰

Oct 12th 1918

Received from the First Newfoundland Regiment

the sum of Fifteen ⁰⁰/₁₀₀ Dollars.
on account of Pay.

H. Phillips

Ch. No. 3892	Initials. EW
Pay Ledger 312	Initials. UN
Gen. Ledger.....	Initials.....

Regtl. No.

Rank



No. 4391

Rank O6

Name Philip H.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 25 ⁰⁰/₁₀₀

Mar 14 1919

Received from the First Newfoundland Regiment
the sum of Twenty five Dollars.
~~on account~~ of Pay. Clothing
balance

St Phillips

Ch. No. 12722	Initials
Pay Ledger 383	Initials
Gen. Ledger	Initials

Regtl. No. 4586 Rank Pte

Medical Report on an Invalid.

Station Stagely New Camp
 Date 10-9-18

- | | | |
|----------------------|---|---|
| 1. Unit | <u>Royal Newfoundland</u> | 7. Former Trade } <u>Clerk</u>
or Occupation } |
| 2. Regimental No. | <u>4391</u> | 7A. If with previous service in Army, state— |
| 3. Rank | <u>Pte.</u> | (a) Former Unit; |
| 4. Name | <u>Phillips Herbert.</u> | (b) Regimental No.; <u>Na.</u> |
| 5. Age last birthday | <u>19</u> | (c) Date of Discharge; |
| 6. Enlisted | { on <u>8th April 1918</u>
{ at <u>St John's Nfld.</u> | (d) Cause of Discharge. |

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19)

V. D. H.



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.
10. Place of origin of disability.
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.
12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
 - (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
 - (b) constitutional or hereditary, and not aggravated by service during the present war.
 - (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

He states that prior to enlistment he was off work with rheumatism. He was in bed about two months. Since joining the depot July 8th he early complained of pain in chest, cough and breathlessness. He has been on breathing exercises, tonics and fresh air treatment.

Aggravated by strain of military services

*Constitutional
 Na*

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.

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?

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. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

Anemia, flat chested, small expansion of lung, blowing breath over apex of dulness over both apices posteriorly, No roushial breathing V.R. ++ and post or dlog
Unfit for active service

na.

na

na

na

na
Consolidation both apices

20. Do you recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

Discharge as permanently unfit for active service
Mr. C. R. Pore

Officer in medical charge of case.

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

Station _____

Officer in charge of Hospital.

Date _____

*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.

Notes.—(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 Minister of Pensions should be in possession of the most reliable information to enable him 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, (a) caused or aggravated by service in the present war, (b) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

(iv.) In answering question 21 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.

21. (a.) State whether the disability is clearly attributable to—

- (i.) Service during the present war;
- (ii.) Climate;
- (iii.) Ordinary military service;
- (iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or
- (v.) Whether it is constitutional or hereditary.

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

22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which?

23. Is the disability permanent?

24. If not permanent, how soon do the Board recommend re-examination?

25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.

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

27. Do the Board recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

28. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic training) is desirable in a—

- (a) Sanatorium;
- (b) Hospital;
- (c) Convalescent home;
- (d) Asylum; or
- (e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

29. With reference to Army Council Instruction No. 1275 of 1917, is any surgical appliance recommended?

30. Does the man require the constant attendance of another person?

*Heart 102 temp normal weight 144 lbs
No sed. 13. Also has mitral
systolic murmur.
aggravated by*

Yes

No

60% six months

Yes

Signatures:—

R. H. ... President.

Station *St John's*

J. Sinclair
G. Patterson Members.

Date *Oct 18th 1918*

Approved
Station *St John's*
Date *Oct 18 1918*
No.
NEWFOUNDLAND.

Cluny Macpherson Major
Administrative Medical Officer.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Form
B 121
39

Number of Sheet one

Regiment of The Royal Aflca

Signature of O. C. Company G. James

Regimental Number and Name		Enlistment		Trade	
No.	<u>Herbert Phelps</u>	Age on	19 years - months	<u>Leather</u>	
<u>1291</u>		Place and Date of Enlistment	<u>St Johns</u> <u>18-1-18</u>		
Joined	Date	Period of	with Colours	Place of Birth <u>St Johns</u>	
Joined	Date		212 years.		
Joined	Date		with Reserve 365 years.		

Good Conduct Badges, Service pay or proficiency pay

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>Halifax, N.S.</u>	<u>15-6-18</u>	<u>Pvt.</u>		<u>Absent from Barracks to base,</u> <u>without permission</u>	<u>C.S.M. Patrick</u>	<u>3 days. C. B.</u>	<u>17.6.18</u>	<u>Capt. Munro</u>	<u>Ja</u>
<u>St. John's B. C.</u>	<u>5-8-18</u>	<u>Pvt</u>		<u>Keely Rifle</u> <u>not complying with order</u>	<u>C.S.M. Lewis</u> <u>Sgt Parks</u>	<u>Ext. Picquet</u>	<u>6.8.18</u>	<u>Capt. Emerson</u>	<u>Ph</u>

COPIES SENT

TO

No. 13199/154

M. of M. 13199/154

O.C. 1st Bn.

" 2nd Bn.

" 3rd Bn.

" 4th Bn.

" 5th Bn.

" 6th Bn.

" 7th Bn.

" 8th Bn.

" 9th Bn.

" 10th Bn.

" 11th Bn.

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" 86th Bn.

" 87th Bn.

" 88th Bn.

" 89th Bn.

" 90th Bn.

" 91st Bn.

" 92nd Bn.

" 93rd Bn.

" 94th Bn.

" 95th Bn.

" 96th Bn.

" 97th Bn.

" 98th Bn.

" 99th Bn.

" 100th Bn.

Discharged Medically Unfit

St. John's, 5th 18

To be carried over

B 4391

October 19th. 1918

From Assistant Adjutant
Depot.

To Paymaster & Officer i/o Records.
Militia Dept.

8187, Pte. Rideout, D.
4391, " Phillips, H.
5022, " Boone, Wm.

The marginally noted men were recommended for discharge as permanently unfit by Medical Board, held on Friday, October 18th. I am sending them herewith for your attention, and necessary action, please.

WFC

COPY

January 27th, 1919

Officer Commanding,
Royal Nfld. Regt.

SIR:

The undermentioned men have been discharged
on the dates given, as medically unfit.

Kindly note and post in D.O. Pt.II.

I have etc.

(sgnd) J. M. Howley, Capt. etc.

4391	Pte.	H. Phillips	Nov. 5/18
3173	"	A. Miller	Nov. 26/18
5612	"	M. Walsh	Jan. 14/19
8418	"	A. G. Hillier	Jan. 14/19
5712	"	F. Adams	Dec. 19/18
8064	"	E. Ivany	Dec. 31/18
3208	"	M.F. Martret	Jan. 11/19
8160	"	D. Powell	Dec. 27/18
2530	"	E. Courtney	Jan. 10/19
3690	"	J. Little	Jan. 22/19
2439	"	A. Oxford	Jan. 28/19
2106	"	E. Young	Jan. 28/19
5282	"	H. Vail	Dec. 20/18

Reg. No. *4391* Rank *Pte* Name *Phillips A.*
Attested Address *1 Le Fortant St.*
Allotment..... Allottee
Date of Allotment..... Returned from Overseas *12-10-18*
Embarked for Overseas Cause *Discharge*

18-10-18 *Loc. Dis - Permanently - unfit*

5-11-18

~~DISCHARGED - MEDICALLY UNFIT~~