



# THE ROYAL NEWFOUNDLAND REGIMENT,

## ATTESTATION OF

No. 4547 Name Wm Pike Corps Mceath



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

1. What is your name? ..... 1. William H Pike
2. What is your full Address? ..... 2. 106 Spruce Dale St
3. Are you a British Subject? ..... 3. yes
4. What is your age? ..... 4. 99 Years 11 Months
5. What is your Trade or Calling? ..... 5. clerk
6. Are you Married? ..... 6. no
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,\* which? } 7. no
8. Are you willing to be vaccinated or re-vaccinated? ..... 8. yes
9. Are you willing to be enlisted for General Service?.. 9. yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? ..... 10. Name ..... Corps .....
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... 11. yes

I, William H Pike 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 Wm H Pike SIGNATURE OF RECRUIT.  
22.4.18 Frank J. Jones Signature of Witness.

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

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

### CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.  
The above questions were then read to the Recruit in my presence.  
I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St John on this 22 day of April 1918  
Signature of Attesting Officer Wm Churchill - Lieut

### 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 April 22 1918  
Place St John } Approving Officer.

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

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

Report 1-6-18

# DESCRIPTIVE REPORT ON ENLISTMENT

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



Name William H Pike  
 Apparent age 19 years 11 months: Height 5 feet 7 1/2 inches  
 Chest Measurement { Girth when fully expanded 37 1/2 inches  
 Range of expansion 4 1/2 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin William Pike  
106 Springdale St | 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 L'epot	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. Pny		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limit of engagement reckons from <u>22-4-18</u>									Lane Capt. 14 <sup>8</sup> / <sub>18</sub> Corporal. 22 <sup>5</sup> / <sub>19</sub>
Joined at <u>St John's</u> on <u>April 22, 1918</u>									
<del>Discharged July 29, 1919</del>									
Reported for duty <u>1-6-19</u>									
Embarked <u>St John's</u> train to <u>Halifax N.S.</u> <u>23-9-18</u>									
to <u>Newfoundland</u> for demobilization <u>24-6-1919</u>									
Arrived <u>Newfoundland</u> <u>1-7-1919</u>									
<u>Demobilization</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 29-7-1919 (date of discharge) 1 years 59 days  
 " " Pensions 22-4-18 - 1-6-18 40 days " " " "

# The Royal Newfoundland Regiment



## PROCEEDINGS ON DISCHARGE

1. No. 4547 Rank Capt Name Pike Wm  
 Intended place of residence 106 Springdale St St John's  
 2. Occupation Clerk  
 Classification of soldier 2 Medical Category A1

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 16 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 16 1919  
 Signature of soldier  
 Signature of witness

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

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.  
 Place, ST. JOHN'S  
 Date JUL 15 1919  
 Signature of soldier  
 Signature of witness

### STATEMENT OF SERVICE

7. Enlisted for service 22-4-18 No. of days on Military  
 Discharged from service JUL 15 1919 Plus 14 days Service 464

### APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge, The Royal Newfoundland Regiment, twenty-eight days from date.  
 Place, ST. JOHN'S  
 Date JUL 15 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 July 29/1919  
 Officer in Charge  
 The Royal Newfoundland Regiment

9  
31  
30  
29  
9

20 B 2049/0292

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

**MEDICAL HISTORY**

OF

Surname

*Pike*

Christian Name

*Wm H.*

*A*

Table I.—GENERAL TABLE.

Birthplace:—Parish

*St John's*

County

*Nfld.*



	SPECIAL RESERVE		REGULAR ARMY	
	on	at	on	at
Examined	22 <sup>nd</sup> day of April 1918	St John's, Nfld.	day of	191
Declared Age	19 <sup>1/2</sup> years	days	years	days
Trade or Occupation	Clerk			
Height	5 feet	7 1/2 inches	feet	inches
Weight	158 lbs.			lbs.
Chest Measurement	Girth when fully expanded... 37 1/2 inches			inches
	Range of Expansion... 4 1/2 inches			inches
Physical Development	Right	Left	Right	Left
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V= 6/6 L.E.—V= 6/6		R.E.—V=	L.E.—V=
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<i>Lammie Paterson</i>			
(Rank)	<i>Major</i>			
	Medical Officer.			Medical Officer.
Enlisted	at St John's, Nfld.	at		
	on 22 <sup>nd</sup> day of April 1918	on	day of	191
Joined on Enlistment	Corps. The Royal Nfld Regt.	Regtl. No. 4547	Corps.	Regtl. No.
Transferred to				
Became non-effective by	on	day of	191	on
	day of		191	day of
[Signature]				
[Rank]				



B

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.

Copied  
 VB

1. Unit and Corps. *Royal Newfoundland* 7. Former Trade or Occupation } *Clerk*
2. Regtl. No. *4547* 3. Rank. *Lt Col* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Pike* *William A.* (a) Former Regts. or Corps ;  
 (Surname) (Christian Names) with Regtl. Nos.
5. Age last birthday *20*
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 ?
9. If a Court of Inquiry was held on an injury state :—  
 (a) When (b) Date of Discharge ;  
 (b) Where (c) Cause of Discharge.  
 (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 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. *no*
12. Place of origin of disability. *no*
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. *no*

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.)

*He complains of no disability*

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

*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. S. Procter* *Staff*  
*Rank*

Medical Officer in charge of case.

Station *Hazley Down*  
 Date *10/14/19*

\* 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

# The Royal Newfoundland Regiment



Class for Demobilization:—

*6.*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

*July 14/19*

Regimental No. *4547*

Name

*Pte William*

Address

*106 Springdale St*

Present Medical Category

*A7*

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

Members of Board

O.C. Discharge Depot.

*J.P. Paterson*  
Senior Medical Officer

*D.W. Borden*  
M.O. Depot



C.R. 4547

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

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

Date *Nov 14<sup>th</sup>*  
Place *St. John's*

Name *W. H. Pike*

C.R. 4547

extract from daily orders sent 11 Royal Newfoundland Regiment  
 depot St. John's dated Aug. 1st 1919.

~~Extract from~~

The discharge of the undernoted on demobilization has been  
 confirmed by officer i/c Records from noted date 29-7-19.

4547, Cpl. Wm. Pike.

C.R. ~~7557~~  
434

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.  
St. John's, July 19th, 1919.

The discharge of the undernoted on demobilization has been  
APPROVED by C.C. Discharge Depot with effect from 15-7-19

4557 Cpl. W. Pike.

C.R. 4547

Extract from Daily Orders Part II Unit The Royal Field. Regt.  
St. John's, July 3rd 1919.

4547 Pte. W. Pike.

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

C.R. 4547

Extract from Daily Orders By Major H.S. Sullivan,  
Commanding Newfoundland Forestry Companies, 6-22-18.

The undermentioned having reported for duty from  
the 2nd Bn. Royal Nfld. Regt. is attached to the  
Strength for rations, from this date, and attached  
to "B" Company.

4547 L/Cpl. W. Pike.

C.R. 4547

Extract from Daily Orders Part 11 Unit The Royal Field. Regt.  
St. John's, dated Aug. 14, 1918.

4547 Pte. W. Pike.

To be L/Cpl. from 14-8-18.

C.R. 4547

Entrained

Extract from Nominal Roll ~~XXXXXXXXXX~~ for Overseas At.St.

John's Sept.22,1918.

4547 Pike William.

C.R. 4547

Extract from, m. D. O. t. ii, Unit the Royal Mfld. Regt.  
by Lieut. Col. B. Barton, D. S. O. Officer Commanding  
2nd. Bn. dated 27-5-19.

To be acting Corporal from 22/5/19.

~~4545~~<sup>4547</sup> Pte. W.R. Pike.



C.R.4547

Extract from Daily Orders part 11, from Unit The Royal  
Mfld. Regt. St. John's, dated June 1st, 1918

#4547 Pte. W.H. Pike

Appeared in error in Daily Orders Part 11, No. 33 of April  
30th, 1918 as struck off thre strength from 29.4.18  
Authority K.R. & R. Para 392 Sub Section (vi)

GR. 4547

Extract from Daily Orders part 11, from Unit The Royal  
~~Force~~  
Newfoundland Regiment, St. John's, dated April 30, 1918.

#4547 Pte, W. Pike.

Struck off the strength from 29/4/18. Authority K.R.&R.  
Para. 29E Sub Section (vi).

C.R. 4547

Extract from Daily Orders part 11, from Unit The Royal  
Nfld. Regt. St. John's, dated April 25, 1918.

#4547 Pte. William Pike.

Attested for General Service with the Royal Nfld. Regt.  
from 25/4/18 to report 1/6/18.

Reg. No. *H 547* Rank. *Cy* Name. *Pete W*  
Attested ..... Address. *106 Springdale St*  
Allotment..... Allottee .....  
Date of Allotment..... Returned from Overseas. *JUL 1 1919*  
Returned on S S *Cassandra* Cause. *Discharge*

*15 7 19* PASSED TO DEMOBILIZATION OFFICER  
*15 7 19*

**DISCHARGE APPROVED ON DEMOBILISATION**

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121  
39.

Number of Sheet 67A

Regiment of Royal Newfoundland

Signature of O. C. Company G. James Hunt

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>H 574</u>	Age on	19 years 11 months	<u>Clerk</u>	<u>Remotol Leave Corp 14 5-18</u> <u>" act Corp 22-3-19</u>
Joined _____ Date _____		Place and Date of Enlistment	<u>St Johns 22.4.18</u>	Religion	
Joined _____ Date _____		Period of } with Colours / 99 years. with Reserve / 7 1/2 years.	Place of Birth		
Joined _____ Date _____			<u>St Johns</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
				<u>Demobilized St. Johns, 29 7/19</u>					

To be carried over

Army Form B. 121.

Pike, W.

C.R. 4547

P.V.R.O.

21128/638/R.&O.

G.P. & O. i/c Records,  
Newfoundland Contingent.

Officer Commanding,  
Mfld Forestry Corps,  
Wanchester. *Keenote*

*Keenote*

Pay & Record Office.

19th December, 8.

Railway Warrant:  
4547 L/C. Pike, W.

I enclose correspondence and Railway Warrant relative to journey from London to Aberfeldy for above-named N.C.O. and two others. As will be observed, Railway authorities state that L/C. Pike travelled with three others on this warrant from Perth to Aberfeldy. Also L/C. Pike states that warrant was made out in error for three instead of four, which is incorrect.

Will you, therefore, interview L/C. Pike with a view to clearing up this matter, and ascertain why he allowed another man to travel on the warrant?

Kindly reply to, and return Warrant and correspondence to Railway Company concerned.

Major,

Chief Paymaster & O. i/c Records.

HB/NV

7

No. 4469/656

N.F.P. /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,  
2/Bn. Royal Newfoundland Regt.,  
Hazeley Down Camp,  
Winchester.

*P. B. 21/31*  
20th March 1919

March 22<sup>nd</sup> 1919.

4547 I/Cpl Pike W.

Receipt hereunder.

With reference to the following  
telegram from the Minister of  
Militia / / ( 84 )

*E. Kant*  
LIEUT. COLONEL,  
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

"Pay to- 4547 Pike,  
£10. 0. 0.

Received the sum of Ten

Cheque £ 10. 0. 0 is enclosed.  
for payment to this Soldier.  
Kindly obtain his receipt  
hereon.

Pounds in respect of  
telegraphic remittance from the  
Minister of Militia.

*D. A. Munnell Maj*  
Chief Paymaster & O. i/c Records.

*W. H. Pike*  
No 4547 Rank L. Cpl.  
Witness *J. J. Walsh*



No. 24/13



N.F.P./79.

NEWFOUNDLAND

CONTINGENT

From:

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

To:

Officer Commanding,  
2nd. Bn. Newfoundland Regt.,  
Hazeley Down Camp,  
Winchester, Hants.

2nd. January, 1918.

8th Jan. 1918

Subject: 4547. L/C W. Pike.

Receipt hereunder.

With reference to the following telegram (11365) from the Hon. Minister of Militia, received

*W.H. Pike for Capt. W.H. Pike*  
Officer Commanding *2nd Bn. Newfoundland Regt.*  
Royal Newfoundland Regiment.

Pay to 4547 Pike - £10:0:0

Received the sum of Ten

Draft £10:0:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Ten Pounds on account of cable remittance from Newfoundland.

Chief Paymaster & O. 1/c Records.

W.H. Pike  
No 4547 Rank L. Cpl.  
Witness [Signature]

Hike, W.

4577

Ray Sept.

July 29th 1919.

#4547, Cpl. Wm. Pike,  
106, Springdale street,  
City.

Dear Sir:

Enclosed please find Discharge Certificate # 3292.

Yours truly,

Capt.<sup>us</sup> Paymaster.

RS/.

# The Royal Newfoundland Regiment

## DEMobilIZATION OF

Reg. No. 4547 Rank Serjeant Name Pike W<sup>ms</sup>  
 Date of Enlistment 22.4.18 Address 10.6 Springdale St. St. John's  
 Occupation clerk Classification for Discharge 2 Medical Category AI  
 Recommendation S.M.B. \_\_\_\_\_ Disability Rating \_\_\_\_\_

Passed to Demobilization Officer with following documents:—

N.F. P36	B 268	B 121	7	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 July 14/19 O. C. Discharge Depot Mrs H

### PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am ✓ in a position to resume civilian occupation.

W. H. Pike

Particulars passed to Vocational Officer for information and action.

Date \_\_\_\_\_

2. Clothing.

Certified that Clothing Regulations have been complied with:—

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

Date 14-7-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. \_\_\_\_\_ to his home at 106 Springfield St. and Release Certificate No. 3612 issued.

Date 16-7-19 ..... *Amblin*  
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 24-7-19

Date 11-7-19 ..... *J. H. Smith*  
Depot Paymaster

Discharge approved for 15-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1
F. 178	W 3494	B 122	Board 1st	" 2
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 17-7-19 ..... *Amblin*  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—  
Officer in Records.  
Board of Pension Commissioners.

with following additional documents:

**Eligible for War Service Gratuity**

JUL 15 1919

Date ..... *H. R. Cooke Capt.*  
O. C. Discharge Depot.

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

Date July 28/19 .....

# The Royal Newfoundland Regiment

## DEMobilIZATION OF

Reg. No. 415 447 Rank Serjeant Name Pike W<sup>m</sup>  
 Date of Enlistment 22 4 18 Address 106 Springdale St. St. John's  
 Occupation plumber Classification for Discharge 10 Medical Category MI  
 Recommendation S.M.B. \_\_\_\_\_ Disability Rating \_\_\_\_\_  
 Passed to Demobilization Officer with following documents:—

N.F. P36	B 268	B 121	7	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122		Board 1st	" 2	1
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	MB 2			" 6	
B 179c	B 120	M 93				

Date July 28 1945 O. C. Discharge Depot St. John's

### PARTICULARS FOR DEMobilIZATION

#### i. Civil Re-Establishment.

I am / in a position to resume civilian occupation.

W. H. Pike

Particulars passed to Vocational Officer for information and action.

Date \_\_\_\_\_

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

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

Date 14 7 1945 O i.c. Re-clothing.

**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrant No. \_\_\_\_\_ to his home at 106 Springfield St. and Release Certificate No. 3612 issued.

Date 16-7-19 ..... Ambler  
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 29-7-19

Date 16-7-19 ..... [Signature]  
Depot Paymaster.

Discharge approved for 15-7-19 .....

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

Date 17-7-19 ..... Ambler  
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 15 1919 ..... N.R. Cooke 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,

*W. Pike*

Signature of Man.

*M. Blomster*

Reg. No. 4547

Signature of the Vocational Officer or his Representative.

Place **ST. JOHN'S.**

Date 15-7-19 191





## 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 *William Pike*

Regiment from which discharged **Royal Newfoundland**

Regimental number *4549*

Intended address *106 Springdale St.*

Height on discharge *5* Feet *5*

Color of hair on discharge *Dark Brown*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks

Figure on discharge *Stolid*

Christian name of Father *William*

Christian name of Mother *Emma*

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth *Carboneau, May 1<sup>st</sup>, 1895*

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) *William Pike*

*Chas. J. ...*  
(Rank)

Station **ST. JOHN'S**

Date *14-9-16*

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.

Date

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 *William A.* 2. Surname *Pine*

3. Rank *Corporal* 4. Regtl. No. *H. 547*

5. Address in full to which future payments of gratuity are to be forwarded *106 Spruce Dale St. City*

6. Date of enlistment in the Regiment *April 20/18*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *no*

8. Relationship of such dependents *—*

9. Address in full of such 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 *2 1/2 years*

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.

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

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.

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?

(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 31/19*

*no*  
*Demobilization*

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.

*England, and Scotland*

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee.

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under Oath.

Signature of Applicant: *William H. Pike.*

Place of Residence: *106 Springdale St. City,*

Declared before me at: *St John's,*

This *17<sup>th</sup>* day of *July* 191*7*.....

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of affidavits. *John M. Carthy*  
*J.P.*

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

FORM K

No 4366



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, William Pike, Regl. No. 4574

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and Sixty Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person and or Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person and or Persons concerned, viz.:

Allotment begins 8-6-18

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)	
4132	Father	William Pike	106 Springdale St - St Johns	60	
Total Allotment, \$				60	

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, countersigned by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

Sig.) W. Summers

Officer Commanding  
"B" Company

(Sig.) Wm Pike

(Rank) Private

St Johns  
8-6-1918

FORM K

N<sup>o</sup> 4366



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, William Pike, Regl. No. 4547

hereby agree, until further notification by me, and in similar official form to make an Allotment of \_\_\_\_\_ Dollars and Eighty Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup>/<sub>or</sub> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup>/<sub>or</sub> Persons concerned, viz.:

Allotment begins 8-6-18

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)	
4132	Father	William Pike	106 Springdale St - St. Johns		60
Total Allotment, \$					60

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, countersigned by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

Sig.) W. Summers  
Officer Commanding  
"B" Company  
St. Johns  
8-6-1918

(Sig.) Wm Pike  
(Rank) Private