





THE ROYAL NEWFOUNDLAND REGIMENT

40. 5515 Name of the ment com	(# 24)
Questions to be put to the Recruit before Enlistment.	
I. What is your name? I	
2. What is your full Address?	1750
3. Are you a British Subject?	
4. What is your age? Months	
5. What is your Trade or Calling? 5	
6. Are you Married? 6.	
7. Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which?	
8. Are you willing to be vaccinated or re-vac- 8.	
9. Are you willing to be enlisted for General Service? · · 9.	
0. Did you receive a Notice, and do you understand } 10	
1. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted.	
Signature of Reci	QUIT.
OATH O BE TAKEN BY RECRUIT ON ATTESTATION. I	l and duty ist all
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 que e would be liable to be punished as provided in the Army Act. The above questions were then read to the Recruit in my presence.	stions
I have taken care that he understands each question, and that his answer to each question has been during	200.15
s replied so, and the said recruit has made and signed the declaration and taken the oath before me at this. I have of Attesting Officer	ow
†CERTIFICATE OF APPROVING OFFICER.	1664
I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that it uired forms appear to have been compiled with. I accordingly approve, and appoint him to the:	e re-
ate	061000
	omcer.
† 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 Certif	cate of

Be used only for Special Reserve Recruits, and for Special Reservists enlisting into the Regular Army. 30-5-18

MEDICAL HISTORY

Surname of meen

Christian Name Willis



Birthplace:—Parish Bry	Table I.—GEN	h	BLE	1/01	
January Control of the Control of th	SPECIAL 30 day of		91 8.	REGULAR	ARMY 191
Examined	at Sulphu		,	on day of at	7
Declared Age	20 years		days	years	days
Trade or Occupation	Fisherm	an .	ches	C4.	inches
Height	. feet		- 1	reet	
Weight		133	lbs.		lbs.
Chest Measure- Measure- Range of Expansion		103	ches		inches
Physical Development					
Vaccination Marks	Right	Left	\neg	Right	Left
When Vaccinated	6/20				rical roa
Vision }	L.EV= 6/24			R.EV	go pelation !
	(a)			(a) .	to the
(a) Marks indicating congenital peculi- arities or previous disease				1 dar	"megall
	<u>. </u>			1,10	
(b) Slight defects but not sufficient to	(6)			(b) (b) (c) (c)	
cause rejection 17	soutz Janua ,	n) .			1
Approved by (Signature)	Lammer	Paros	-	*	
(Rank)	man	_			
	SKARL	Medical Of	ficer.		Medical Officer.
Enlisted	at Systems.	of May	191 8.	at	100
	on day Corps.	Regtl. No.	191 %.	on day of	Regtl. No.
Joined on Enlistment	Royae Hea.	1825			
1.42	Reguieut.		•		
Transferred to	· · · · · ·				
Became non-effective by	on day	of	191	on day of	191
(Signature)		,			
(Rank)					[p.T.o.

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

Name of Hospital	A	dmitted Hospita	to \	Discharged from Hospital			Disease		Disease		Number Re Days in Hospital	
	Day	Month	Year	Day	Month	Year			Hospital	Remarks bearing syphilis, admission of tr		
ort Pilt Challan	8	8	/8	19	8	18	mung 5		11	/		
				1	et-		Park the second second					
ALLITARY HORDITAL	24	MAR	19 19	28	3	19	P. U. O.		4			
HAZELEY DOWN												
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•							yer is			1202 200		
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ist 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 and re-admissions to hospitals will be shown. The subsequent progress, including particulars ment out of hospital, transfers. etc., will be given in the special syphilis case sheet. Signature of Medical Officer C Extra Tras No Conflications & Ct Super MAJOR, R.A.M.O. Cured [P.T.O.

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.; Examinations for Field of Foreign Service, Extension, Re-engagement, or Prolongation of service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.

Brief Details, and Signatures 31-5-18 lace & 20-7-18 MM yo 4. 4.19 Republishin and Mogni MIN DONNE. It is hereby contilled Matthia soldier has been before a Transling M dient Boarde and has been classified as 6 for Discharge on De Bilintion, Medical category Table IV.—SERVICE TABLE.

V
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Receiving Form **NEWFOUNDLAND POSTAL TELEGRAPHS** Received as 5525 Willis pinsen arrived Alfohns no word three months Can for Tive has Lanuel persent



THE ROYAL NEWFOUNDLAND REGIMENT

ncerned,	viz.: otment begins	august NAME (in full)	, Le	Certificates by the Person	AMOUNT (each person)
No.	nother	mrs Same	iel	Brighton Yneen Bay	, Se
516		(10.010)		y aza say	
				Total Allotment,	
sig		r Commanding Company and		Company, signed by the Volu	



THE ROYAL NEWFOUNDLAND REGIMENT

dentity Whether Wife, Child. other Relative or Friend	NAME (in full)	151 /,	Address	AMOUNT (each person)
mother of	me Same	uel B	rightor	- - 3 ë
516		7 -	5-y	
	. 1			
			Total Allotment,	s .
OTE.—This form must be comp signed by the Officer Co required payments on a	mmanding Company and			
ig.) Catson	Commanding	(Sig.) Wi	leins.	insent

July 7, 1919

#5525 Pte. Willis Pincent.

grighton, N.D.B.

Dear Sir :-

Please find onclosed Discharge Certificate No. 2705.

Yours truly

Captain Paymester & O.i/c Records.

The Koval Mild. Regiment

No. O	27:	Ran	k	
	1	١,	. 1	1,5
Name	Vu	ver.	7	W

Warned for demobilization on

JUN 9 1919

N. F. P. /79

NEWFOUNDLAND ONTINGENT

Chief Paymaster & O.1/c. accords, Newfoundland Contingent,

Pay & Record Office, 58, Victoria Street, London, S.W. 1.

27th January,

191 9

Subject: 5525, Pte. W. Pinsent,

With reference to the following telegram (846) from the Hon. Minister of Militia, received

"Pay to 5525, Pinsent, £4.2.0.

Draft £4.2.0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Chief Paymaster & O. i/c Records.

Officer Commanding, o/pho Royal Nfld. Regt., Winchester.

Receipt hereunder.

LEUT. COLONEL, DING 2ND BN. ROYAL NEWFOUNDLAND REGT.

Royal Newfoundland Regiment.

Received the sum of Jans Chuist __ on account of cable remittance from Newfoundland.

Which Comment

No. 5525 Rank

Witness M.

From:

в. vicтопі N. F. P. /79. CONTINGENT To: Officer Commanding. 2/Bn. Royal Newfoundland Regt., Hazeley Down Camp, Victoria Street, Winchester. London, S.W. 1. Hard 20th h March Pinsent W. Receipt hecounder, reference to the follow-LIEUT. COLONEL, ram from the Minister of (82) Officer Commdg. 2 Batt n. o-5525 Pinsent, 2:0 Received the sum Taur kours 84. 2. 0 is enclosed. two Shellings in respect of to this Soldier. btain his receipt telegraphic remittance from the Minister of Militia. Munall Fine Worksh Osemount ter & O. i/c Records. No. Sisis Frank Witness W. Barnes

Extract from Daily Oriers part 11 from Unit The Royal Bild Rogs. St. John's, dated May 21,1918

#5525 Pte. W. Pinsent

Attested for Several Service with the Royal Hald-Rogt. from May 30,1218

Extract from Daily Orders part 11, from Unit The Royal Mf1d. Regt. St. John's, datwd July 25, 1918.

The following man embarked for overseas on H.M.S. "Columbella" July 22,1918.

#5525 Pte. Willis Pinsent.

extract from telegram to Synoptical London,

Inform condition & whereabouts of 5525 Pinsent.

Jan. 13th 1919.

Dear Sir:

I beg to inform you that we have received a reply to the telegram we forwarded to our Pay and Record Office London, enquiring the whereabouts of your son #5525 Pte. Willis Pinsent, which states that he is now at the Depot of the Royal Mewfoundland Regiment at Winchester, Hants, England. Any communication that you want to send will find him at the above address. Yours faithfully.

Lieut.

CASUALTY OFFICER.

Mr. Samuel Pinsent, Brighton, N.D.B.

WVE/MP.

Extract of Telegram from Synoptical, London to Military St.
John's dated Jan. 10th 1919.

In answer to your telegram Jan.7th #5525 Pinsent Depot.

C.R. 55-25

Extract from paily Orders by Major M.S. Sullivan, Commanding Revfeuedland forestry Company 25-10-18.

The undermentioned man having rejoined his Unit is struck off the Strength from this date.

5525 Pte. W. Pinsent.

Lient Casualry officer Mach 4 1919 Wen sir letter to my son willis Pencent No 5-5-25 as we cannot hear from him at all. If he is such or comming home will you please cable to us, we have witten to him lots of times but cannot get any levers from, we are uneasy about him would kike to hear from him! I remain yours truly Mrs Samuel Pencent Brighton Via Treton W, y, S, B,

C.R. 5-5-25

March 2141 19

Mrs.Samuel Pinsent, Brighton N.D.B.

Dear Madam:

I beg to acknowledge receipt of your letter of March 4th, also one addressed to your son, which I have forwarded to him C/O Pay and Record Office London, and I have also asked them to furnish this Department with his present address and upon receipt of a reply we will immediately communicate with you.

Yours fel thfully,

Lieut.

Casualty Officer.

WWW/MP.

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt. St. John's, July 10th, 1919.

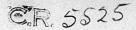
The discharge of the undernoted on demobilization has been CONFIRMED by Officervi/c Records from 7-7-19.

5525 Pte. Willis Pinsent.

Extract from Bally Orders Bart 11 Unit the Royal Bills. Rogt. Dopot, St.John's, June 15th, 1919

The discharge of the undernoted on deschilination has been APPROVED by O.G. Discharge Depot with effect from 85-6-19.

5525 Pte. Willis Pinsent.



Extract from Daily Orders Part 11 Depot, St. John 2s, Date 12-6-19.

5525 Pte. Willis Pinsent

Reported at Headquarters 16 /19. ex "Corsican" which salled Liverpool May 22/1919.

ambriet from Cally Orders Part 18 Bapos, at. 306.40.

Extract from Casualties received from P.S.R.Office london, Aug. 20th, 1918.

The undermentioned man was admitted to Central Hospital, Chatam, (from Major Carty's draft from Hfld.) and discharged from Hospital on 19-8-18, reported at their office same date and was sent direct to Depot. Winchester.

5525 Pte.Pinsent, W.

Authority: Officer 1/c. Records Hfld. Regt.

July 29th 1919.

Mr. Willis Pinsent, Brighton, H.D.B.

Dear sin:

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

Yours truly,

Capt. & Paymaster.

Diguet by

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.

dated January 28th.1919.
A complete reply must be given to every question in this Declaration There must be no blanks and no dakhes. 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
REMARDS, PAY & RECORD OFFICE, ST. JOHN'S.
Christian name. H. Jenset 2. Suramo Guernt
3. Ranz. J. La
5. Address in full to which fature payments of gratuity are to be
forwarded. W. Pencent. Brighton Nata Dame Bay
May
6. Date of enlistment in the Regiment. 40th 1918
7.Name of dependent, if any, to whom Separation Allowance is being
issued, or was being issued, imediately prior to your discharge M. Samuel Pencent Brighton NDB
8. Relationship of such dependents Mother.
9./ddress in full of such dependents. Brighton D. B.
Newfoundland.
10. Is said dependent, now, or was said dependent at any time in receipt
of Separation Allowance on account of mother soldier?
11. Were you on active service only in Nfld, 17 so, give dates and
particulars of such service. Active Service not in.
Newfoundland

12. Give total length of time which you served on active service,
whother in Hild. or grosses. Achiev. Heravice Our Leas.
from August 1918 to april 1919.

13. Have you had more than one enlistment? If so, give particulars
of discharge and re-enlistments, and under what regimental numbers.
One endistment humber 55.25.
,
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. Haningt. Williamed.
ang
15. Have you been issued with a War Service Badge? . No. hour.
15. Have you been issued with a war bottles barried Borres Min
16. Heve you, during the present war, served in the Imperial Dorces
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
renk hold by you on your arrivel in England?
(b) If so, was such reversion in consequence of Misconduct or
inefficiency?
To the man new corrier in the Rest.? M If not give?- (a) date
of discharge June 9th 1919. (b) Reason for discharge Wight for
deraice.
the front in on actual theatre of
20, Did you at any time serve at the front in an actual theatra of
War? If so give particulars of places, and dates of such service
On the lines in James on Mounds
21.(a) Are you receiving treatment from the Wivil Ro-Establishment
Com.(b) If so are you in receipt of full pay and allowences from
that cornittoe. No. Wounds healed over Sea?
And I take 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:

Place of Residence: Doclared before me at:

This

ure of Applicant: Willis Ameent
of Residence: Brighton
ed before ne at:

242 day of July 19.19....
witness!

Signature of Berrister of the Sumbauland.
Supreme Court, Stipendiery Hegistrate; Notary Public, Lastice of the Corgymon
Peace, or Commissioner of affidevits.

	POST	DISCHARG	E PAY.		
Da te	paid	Poid Soldior.	Paid Dependent	War Sorvice Graduity.	Net amount due
<u> </u>	• • • • •				
		Ocasi fi od	correct.	i	Paymaster

July 23th1919. The Departmer The sum effen dellars \$10.00m is due 5525 Pte W?Pinsent Brighten. to transportation to his home. Voucher attached leveling convert

	LLING WARRANT
Gene	Bewfoundland Regiment
No.5525 Rank 110	Class Passage and Meal for
From - ST. JOHN'S -	To The Royal Demonstration Regiment DEPOT A. JOHN'S. N.F. SIGNATURE OF ISSUING OFFICER Demonstrate of Communications of

August 2md, 1919

N. C.S.

#5525, Pte. W. Pinsent Brighton, Swillingste Dist.

Enclosed herewith please find cheque for \$10.00 amount of refund due you on account of transportation to your home.

Capt. Paymaster.

Army Form B. 121. Squadron, Troop, Battery and Company Conduct Sheet. Number of Sheet One. > The Royal Newformalana Signature of O. C. Company CSDicks B 121. Good Conduct Badges, Service pay or proficiency pay Regimental Number and Name Enlistment 5575 Religion Place and Date }
of Enlistment Toined Toined Date Toined Toined Date Name of award or of order dispensing with trial OFFENCE Punishment awarded By whom awarded REMARKS Witnesses Absent from Rose Ball of Lanene 4 days CB 24-19 Baps Willying Mills 22-50 releck To be carried over.

YON INDUF OF BRITISH WAR MEDAL-1944-1949.

I portify team I have received an issue of 2 inches of Riband of Friels was Mosel-1984-1989.

Milly Pincent

ENER Now Ito

The Royal Newfoundland Regiment

DEMOBILIZATION OF
Reg. No. 5000 Rank Name Jungent Works
Date of Rulistment 30. 5. 18 Address Drughtyn District Swellyats
Occupation Tusterman. Classification for Discharge Ly Medical Category. A.
Recommendation S.M.B
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 178
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 " 6
B 179c B 120 M 93
Date
PARTICULARS FOR DEMOBILIZATION
r. Civil Re-Establishment.
I amin a position to resume civilian occupation.
Willis new Linsent
1 Logalow MW
Particulars passed to Vocational Officer for information and action.
Date.
a. Clothing.
Certified that Clothing Regulations have been complied with:-
1
(a) Clothing Allowance payable A. C.
(b) Clothing Supplied
Date. 9. — 19. 9 Oile. Re-clothing.

3. Transportation and Release Certificate.		Due C	115-
The above named has been provided wi	th Travelling Warrant	15-201-	to his home
at	ease Certificate No	A. 3.6 issued	i.
Date 9-6-19	J.A	Demobilization Offic	er
4. Pay and Allowances.			
The herein named soldier's accounts ha	ve been correctly bala	anced and all matters	in connection
therewith settled. He has received pay an	d allowances to	MENT OF DVERSEN P	Y. ACCI
Date 9-1-19	ζ;	Depot Paymaster.	lt
	95/1	79	- 686
Discharge approved for	22-0-4	·/	
Forwarded with following documents to C	D.C Discharge Depot.	To the second of	16.7 ²
N.F. P 36 B 268 B 121	/. N.F. Med	D.F. 1	
Б 178 W 3494 В 122	Board 1st	" 2	/ E
B 178a D 400A B 1915		" 3 J.	D.
B 179 D 400B Form L	/	" · · · · · · · · · · · · · · · · · · ·	············
B 179a J D 400C Form K	/ do 4th	# 5	
B 179b			
B 120			
9 6-19	201	man to	11.
Date	/ /	Demobilization (Officer.
APPROVED.			
Documents as above forwarded to:— Officer ilc Records.			
Board of Pension Commissione	ers.		
with following additional documents.	Total		
	c Was C	ervice Gratu	ty
Fligible	e for wal 3	ervice Gratu	
Date JUN 23 1919		P. St. Jait	Taul.
Date		O. C. Discharge	Depot.
	na manganan		
Received the above noted documents from O. C. Di	scharge Depot.	and the state of the state of	
		Bureley, C. J. (5)	4
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

Janseni- W.

Reg. No. 5'0' 25"

Signature of Man.

Simply of the Vectional Officer or his Representative

Place

- gohus

Date JUN 9 1

191

Reg. No.	5-526 Rank T & Name Vensent W. Address Brighton	
Allotment	Allottee	
Date of A	Returned from Overseas 27.5.	79
7.6 1	DISORABGE APPROVED ON DEMOBILISATION.	
70.9.	DISCHARGE APPROVED ON DEMOBILISATION.	
		···· ·· ···
STATE OF THE PARTY OF		

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0.

11/13/

Demobilizatio

The Royal Newfoundland Regiment

DEMOBILIZATION OF TO THE PARTY OF THE PARTY
Reg. No. 5000 Rank Name Tinsent Wollis
Date of Enlistment 30 . 5. 18 Address Brightyn District Swelly at
Occupation
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 / do 2nd 3
B 179 D 400B Form L do 3rd " 4
B 179a D 400C Form K do 4th " 5
B 179b
B 179c
Date. 7. 6. 7. 9. C. Distharge Depot. PARTICULARS FOR DEMOBILIZATION
r. Civil Re-Establishment. I am
Willisman ruseut
Particulars passed to Vocational Officer for information and action.
Date
2. Clothing.
Certified that Clothing Regulations have been complied with:-
(a) Clothing Allowance payable A
(b) Clothing Supplied UMUO W. W. M.
DateQ.—6.—/9.

3. Transportation and Release Certificate.
The above named has been provided with Travelling Warrant No to his home
at
9. 6. 19 M Snow toft-
Date
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
1-1-19 MILI
Date
M. Depot Paymaster.
Discharge approved for.
Forwarded with following documents to O.C Discharge Depot.
20 marded with following documents to O.C Discharge Depot.
N.F. P 36 B 268 B 121 N.F. Med D.F. 1
E 178 W 3494 B 122 Board 1st " 2
B 178a
B 179
B 179a
B 179b
B 1790
9. 6. 19 He man tast.
Date Demobilization Officer.
APPROVED.
Documents as above forwarded to:—
Officer ilc Records. Board of Pension Commissioners.
with following additional documents.
Eligible for War Service Gratuity
MIN 22 1910 P. H. Jait Call:
Date ON AD 1913
O. C. Discharge Depot.
Received the above noted documents from O. C. Discharge Depot.
ameliant, the
Date June 19/19 fort ferents

Note: The Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvia.), 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. (7), or the considered impairment in case of soldiers not discharged or transferred to the Reserve as above, but which considered the consideration for a Service Pension this Form is to be sent to the Secretary, Rayal Hospital, Chelsea, S.W. 3. Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve. 1. Unit and Corps. Koyal New foundland 7. Former Trade & Fisherman or Occupation 2. Regtl. No. 5.5.25 3. Rank.... 7a. If the soldier claims previous service in Army, he should state-4. Name PINCENT Killis (a) Former Regts. or Corps; with Regtl. Nos. 5. Age last birthday. 2.0..... 6. Posted for duty on at..... in category (or grade) 8. If the disability is an injury was it caused (b) on field service (a) in action (d) off duty? (b) Date of Discharge: (c) on duty (c) Cause of Discharge. 9. If a Court of Inquiry was held on an injury state:-(a) When (d) Particulars of Pension or Gratuity (if any) (b) Where (c) Opinion of Court Note.—The foregoing particulars are to be filled in and A.F.B. 179 n (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case. Statement of Case Norg.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering the 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." Debility 11. Date of origin of disability. 13. Give concisely the essential facts of the history of the disabilities of the disab 12. Place of origin of disability. the disability in so far as it is recorded in the Medical across, treated at farthfitt, History Sheet bearing on the case and in other relevant official documents. chatan and after for Depot reported sick with Delility of the start was on very fight buty towis and appeal a regues, later sent to forestry Batallion for a month to recuperate and on returnwas

1300. 000,000(1, 8/18, 8.0.,F.Rd. marked B. 19.9.18. & given employment

	14	1. State	whether the disabilities are	(a) attributable to	(b) aggravated by
		(i.)	Service during the present war	ho `	40
		(ii.)	Previous active service	Lo .	
		(iii.)	Climate in pre-war service	ho	
		(iv.)	Ordinary military service before the war	. Ao	
		(v.)	Serious negligence or misconduct on the man's part.	, ko	•••••••••••••••••••••••••••••••••••••••
	14	(a). If	not due to any of these causes, to what specific condition do you attribute it?	Constitutional	
ses such	15	. What i	is his present condition? Comenu	a flight D	ilitation 7
throat, es, &c., ist's re- to be with raphs ossible;			(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)	heart, to	vight infla
cases of on the position			Scapu	lan region	no crepitalio
stated.			Condition view	- 11 .	
				much imp	trea under
				sealmen	
	16.	Was an	operation performed? If so, when and what its nature?		
	17.	If not,	was an operation advised and declined?		
		*In the teeth direc servi	case of loss or decay of teeth,—Is the loss of h the result of wounds, injury or disease thy attributable to active service or through ice under such conditions that dental treat- t was unobtainable?		
	19.	Give pa not i State have war,	articulars of any other disabilities existing, but in themselves sufficient to cause invaliding, e whether or not they are attributable to or been aggravated by service during the present and if so, to what or by what specific military itions?		
					N. ar
•	20.	Do von	recommend—	1 1	allo 1
				11 malre	
			Discharge as permanently unfit?	Report.	
		Note-	Change to United Kingdom? (b) is only applicable to soldiers invalided at oreign Stations.	101-	otion ,
				-1.1	

Station H. J. Crauss.

Medical Officer of charge of case DMS

Date . 5. 14. 19.

Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that

The Royal Newfoundland Regiment



Class for Demobilization:

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

Discharge Depot: Headquarters The Royal Newfoun	Date
Regimental No. 5525 Name Punaenth Bughton	
Name	- Sunt 12
Address Osughtor	· // / / / / / / / / / / / / / / / / /
Present Medical Category	
Pagammended for:	(a) Immediate discharge
Recommended 1911	(b) Stending Medical Board
	Pet Sant Cal
	O.C. Discharge Depot.
	LA Merson
Members of Board	Senior Medical Officer
	DevBurden
	M. O. Depot

(1, 24) from the must delittated Recommend Freshy Bon for amont brecupe ate. M. heather M. hope seef mores author

Name in full





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 Jc 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. Sussent Willis

Regiment from which discharged Hoyal Newfoundland
Regimental number 1/2/
Intended address Aniskhow. 7.43,
Height on discharge ✓ Feet ⋬
Color of hair on discharge Light-
Complexion
Color of eyes Ysuy.
Descriptive Marks
Figure on discharge miduum
Christian name of Father Samuel.
Christian name of Mother Elizaahll
Wife's maiden name in full
Date and place of marriage
Christian names of children
Place and date of soldier's birth Briakton 1898.
Nature and locality of civil employment required
I declare that I am the soldier referred to above that all the particulars contained in the above statement are, to the best of my knowledge, correct
(Soldier's signature in full) Linsent X Wellis
mark. ((Rank) MLC
Station ST. JOHN'S. Date V. C.

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.

Date

dedical Officer ic John's, Novicuro

5-4-19 Army Form B. 1794

7a. If the soldier claims previous service in

Army, he should state—
(a) Former Regts. or Corps;

7. Former Trade or Occupation

Note.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (vi.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in cases of soldiers not discharged or transferred to the Reserves as above, but who can equalified 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.

(35 °S)

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

1. Unit and Corps. Royal. Newfoundans.
2. Regtl. No. 5320 3. Rank. The

4. Name PINCENT.

	[1] - [1] -	(Christian Names)		ith Regtl. Nos.
5. Age last birthday. 🦨	0			
B. Posted for duty on	at			
in category (or gra		•••••••••••••••••••••••••••••••••••••••	•	
. If the disability is an i	njury was it cause	ed		
(a) in action	(b) on field ser	vice ,		
(c) on duty	(d) off duty?		(6)	Date of Discharge;
. If a Court of Inquiry	was held on an in	ninggreetete .	(c)	Cause of Discharge.
(a) When	was need on an in	ijury state :		
(b) Where			(d)	Particulars of Pension or Gratui (if any)
(c) Opinion of Cour				
Note.—The foregoing pen by the Officer in char	particulars are to be	filled in and A.F.B. 13	79 в (statement by	the soldier) completed before the soldi
ne invalid s military and m ease. 10. If brought for	edical documents. H ward for invaliding	le will also carefully o	by the Medical Offi ect of the case and distinguish and cle	cer in charge of the case. In answeric to such information as may be recordarly state when cases are due to venere aliding is proposed to be stated here.). If no disability enter "nil"
10. If brought for (Other disabilities	ward for invaliding should be reported	ons are to be filled in I ly to the medical aspete will also carefully of	by the Medical Offi ect of the case and distinguish and cle	arly state when cases are due to veneral
ease. 10. If brought for	ward for invalidin should be reported lility.	ons are to be filled in I ly to the medical aspete will also carefully of	by the Medical Offi ect of the case and distinguish and cle	arly state when cases are due to venere
asa. Other disabilities Date of origin of disab Place of origin of disab Give concisely the ess the disability in so far i	ward for invaliding should be reported lility.	one are to be filled in ply to the medical aspete will also carfully c g, disability in resp. upon in answer to	by the Medical Offi ect of the case and distinguish and cle	ary state when cases are due to vener aliding is proposed to be stated her b). If no disability enter, "nil."
Date of origin of disab Place of origin of disab Place of origin of disab Place of spirit of disab Place of origin of disab	ward for invaliding should be reported lility.	one are to be filled in ply to the medical aspete will also carfully c g, disability in resp. upon in answer to	by the Medical Offi ect of the case and distinguish and cle	arly state when cases are due to venere
Date of origin of disab Place of origin of disab Flace of origin of disab Cive concisely the ess the disability in so far a History Sheet bearing	ward for invaliding should be reported lility. Sility. Sility. Sility it is recorded in g on the case aments.	one are to be filled in ply to the medical aspete will also carfully c g, disability in resp. upon in answer to	by the Medica: Office of the case and isstinguish and cle ect of which inv. question No. 18	ary state when cases are due to vener aliding is proposed to be stated her b). If no disability enter, "nil."
Date of origin of disab Place of origin of disab Place of origin of disab Place of spirit of disab Place of origin of disab	ward for invaliding should be reported lility. Sility. Sility. Sility it is recorded in g on the case aments.	one are to be filled in your are to be filled in you the medical aspite will also carefully of the medical aspite will also carefully of the medical whom in answer to the Medical and in other a leaf of the medical and in other a leaf of the medical who will be medical and in other a leaf of the medical whom is the medical and in other a leaf of the medical who will be medical who will be medical who will be medical and in other a leaf of the medical who will be medical and in other a leaf of the medical who will be medical as a leaf of the medical who will be medical as a leaf of the medical and in other a leaf of the medical as a le	by the Medica: Office of the case and institution of the case of t	treated at the treated at the spirit state when cases are due to venere aliding is proposed to be stated her in it is no disability enter "nil." Treated at the spirit states at
Date of origin of disab Place of origin of disab reduced origin of disab Place of origin of disab Place of origin of disab Place of origin of disab	ward for invaliding should be reported lility. Sility. Sility. Sility it is recorded in g on the case aments.	one are to be filled in ly to the medical aspect will also carefully considered aspect will be a second aspect with the medical and in other and the second aspect will be a second aspect with the second aspect will be a second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect with the second aspect will be a second aspect with the second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will be a second aspect with the second aspect will	by the Medica: Office of the case and institute of the case of the cas	treated at the treated at the spirit state when cases are due to venere aliding is proposed to be stated her in it is no disability enter "nil." Treated at the spirit state when cases are due to venere in it." Treated at the spirit state with the spirit state wi
Date of origin of disab Place of origin of disab	ward for invaliding should be reported lility. Sility. Sility. Sility it is recorded in g on the case aments.	one are to be filled in your are to be filled in you the medical aspite will also carefully of the medical aspite will also carefully of the medical whom in answer to the Medical and in other a leaf of the medical and in other a leaf of the medical who will be medical and in other a leaf of the medical whom is the medical and in other a leaf of the medical who will be medical who will be medical who will be medical and in other a leaf of the medical who will be medical and in other a leaf of the medical who will be medical as a leaf of the medical who will be medical as a leaf of the medical and in other a leaf of the medical as a le	by the Medica: Office of the case and institute of the case of the cas	treated at the treated at the spirit state when cases are due to venere aliding is proposed to be stated her in it is no disability enter "nil." Treated at the spirit states at

14. State whether the disabilities are (a) attributable to (b) aggravated by	OPINION OF THE MEDICAL BOARD.
(i.) Service during the present war (ii.) Previous active service.	NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a man being evalued, it is essential that the Minister of Pensions should be in possession of the most reliable
(iii.) Climate in pre-war service	information to enable him to decide upon the man's claim to pension.
(iv.) Ordinary military service before the war	Expressions such as "may," "might," "probably," etc., are to be avoided.
(iv.) Ordinary military service before the war	(ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in
(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? 15 What is his resent condition? The man span is the specific and the made as to Weight in all cases of the disability. The specific and the spe	the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Crimaty military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.
14 (a). If not due to any of these causes, to what specific condition do you attribute it?	A CONTRACTOR OF THE CONTRACTOR
airmed shight will the	· 21. Give diagnosis and particulars of :—
teres such 15. What is his present condition? when the such 15. What is his present condition? when the such 15. What is his present condition? when the such 15. What is his present condition? when the such 15. What is his present condition? when the such 15. What is his present condition? when the such 15. What is his present condition?	(a) Any disability claimed or discovered.
d throat throat the first the first throat the first throat throa	(b) The present condition thereof.
d with graphs right stages to be supply the stages of the	a ref
cases of some the creditations and with which is a condition only much impor-	
stated.	
under Trabment	
16. Was an operation performed? If so, when and what	
was its nature?	22. State whether the disabilities are:— (a) Attributable to (b) Aggravated by
17. If not, was an operation advised and declined?	(i) Service during the present war
18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease	(ii.) Previous active service
directly attributable to active service or through	(Nii.) Climate in pre-war service
service under such conditions that dental treat- ment was unobtainable?	(iv.) Ordinary military service before the war
19. Give particulars of any other disabilities existing, but	(v.) Serious negligence or misconduct on the
not in themselves sufficient to cause invaliding,	part of the soldier
State whether or not they are attributable to or have been aggravated by service during the present	Give details:
war, and if so, to what or by what specific military	[Head Control of the
conditions?	
	22 (a). If not due to any of these causes, to what
1 Xin	specific condition do the Board attribute
20. Do you recommend—	
(a) Discharge as permanently unfit?	23. Is the disability in a final stationary condition? If
(b) Change to United Kingdom?	not
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.	(a) How long is the present degree of dis- ability likely to last?
major ba din	(b) If the present degree of disability is not
Medical Officer in charge of case	likely to last 12 months can a further assessment at a reduced rate be made
Station : 4. V. Jerry January	with reasonable confidence to cover a
Date 3-44-19	period of 12 months in all? If so, the reduced percentage and the period to
· Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that	which it will be applicable should be
it is due to some other cause	indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures). (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army? 25. If an operation was advised and declined, was the refusal unreasonable? If the Military 26. (a) Do the Board recommend discharge as physically disagreement with the Civilunfit for further War Service, i.e., do they place him in Grade IV. only? (b) In what other grade do the Board place him? (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)? Only to be asswered when 27. Do the Board find that the soldier has suffered any impaired in other than Grade IV. impairment in health since his entry into the Service ? 28. Is treatment being recommended on Army Form 29. Does the soldier require :-(a) An attendant for his journey home? (b) Transport from railway station to his home? (c) The constant attendance of another person in his own Signatures :-President or Station Chairman. Date Members. Discharge Approved under Para. 392 (xvi) King's Regulations. Station Only applicable in cases of Officer in charge, Central Hospital. Patients in Hospitals. OR Discharge Approved under Para. 392 () King's Regulations. or Transfer Approved to Class of the Reserve. (insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(I), P. or P.(I)).

O.C. Discharge Centre.

Station

Intended place of residence..... 2. Occupation

The Royal Newfoundland Regim PROCEEDINGS ON DISCHARGE

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3-6-19
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ARGE othing allowance) and all Newfoundland Regiment,
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e of witness BY SOLDIER discharge. of soldier c of witness No of days on Military

3.	Classification of soldier Medical Category TI 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 prought before me, in accordance with Regulations. Place Commanding Disclarge Depot The Royal Newfoundland Regiment
5.	CERTIFICATE TO BE SIGNED BY 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, and hereby release the Discharge Degot, Royal Newfoundland Regiment of all financial responsibility in my connection. Place and drie JOHN'S. JUN JUN 919 Signature of witness
6.	CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER I hereby certify that I am in a position to resume civilian occupation immediately on discharge. Place and Date Signature of soldier Signature of witness
7.	STATEMENT OF SERVICE Enlisted for service 30.5.(S. No of days on Military Discharged from services UN. 2.3.1819. Plus 1.4. days. Service 40.4.
8.	APPROVAL OF DISCHARGE The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer ile Records The Royal Newford and Discharge Depot The Royal Newfoundland Regiment.
	CONFIRMATION OF DISCHARGE The discharge of above mentioned solder is hereby confirmed to the solder of the discharge of the
ע	a. 413 20 79/2708.