



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4929 Name Sezekiah Houghman Corps 6 of 6

Questions to be put to the Recruit before Enlistment.

- | | |
|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| 1. What is your name? | 1. <u>Sezekiah Houghman</u> |
| 2. What is your full Address? | 2. <u>Post Rexton</u>
<u>Trinity Bay</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>21</u> Years <u>5</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Fisherman</u> |
| 6. Are you Married? | 6. <u>no</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>no</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? | 10. Name |
| | Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>yes</u> |

I, Sezekiah Houghman 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.

.....
Sezekiah Houghman SIGNATURE OF RECRUIT.

.....
James Arklie Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Sezekiah Houghman 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 John on this 6th day of May 1918

Signature of Attesting Officer James Skid

CERTIFICATE OF APPROVING OFFICER.

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

Date 1918 }
Place } 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)

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Ezekiah Ploughman
 Apparent age 21 years 5 months. Height 5 feet 6 inches
 Chest Measurement { Girth when fully expanded 35 inches
 Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin William Ploughman
Port Rexton, Trinity Bay Relationship Father

Particulars as to Marriage

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

(a)	(b)	(c)	(d)

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>6-5-18</u>									
Joined at <u>St John's</u> on <u>7 Nov 6-1918</u>									
<u>Discharged July 5, 1919</u>									
<u>Crews</u>		<u>St John's team to Halifax N.S.</u>		<u>11/6/18</u>					
<u>Crews</u>		<u>for B.C.</u>		<u>26-10-18</u>					
<u>Headquarters</u>		<u>Traverse</u>		<u>26-10-1918</u>					
<u>Traverse</u>		<u>from Ross</u>		<u>22/19</u>					
<u>Traverse</u>		<u>to Newfoundland for demobilization</u>		<u>5/22/19</u>					
<u>Traverse</u>		<u>to Newfoundland</u>		<u>1-6-19</u>					
		<u>Demobilization</u>		<u>St John's</u>					<u>5/7/19</u>
Total Service forfeited as above.....									
Total Service towards Engagement to <u>5-7-1919</u> [date of discharge]					<u>1</u> years	<u>61</u> days			
" " Pensions " " " " " " " " " " " "									

C.R. 4929

Extract from Daily Orders Part II Unit The Royal Rifle
Regt. St. John's, June 11th, 1919.

The discharge of the Undernoted on demobilisation has been
APPROVED by G.O. Discharge Depot with ~~immediate~~ effect from
21-6-19.

4929 Pte. H.Ploughman.

C.R. 4929

Extract from Daily Orders Part 11 Depot, St. John's,

Date 10-6-19.

4929 Pte. H. Ploughman

Reported at Headquarters 1-6-19. ex "Corsican"
which sailed Liverpool May 22/1919.

C.R. 4929

Extract from Nominal Roll from 1st. Battalion
Royal Newfoundland Regiment dated 30-4-19.

The undermentioned of the 1st. Battalion left
Rouen Camps 22/4/19, embarked at Havre 22/4/19,
disembarked at Southampton 23/4/19 and reached
Hazeley Down Camp 23/4/19.

#4929 Pte. H. Ploughman

C.R. 4929

Extract from Daily Orders Part 11 Unit The Royal Field.
Regt. By Lt. Col. T.G. Mathias, D.S.O. Commanding the 1st
Battn. 3-11-18.

The following joined the Battn. 3-11-18.

4929 Pte. D. Floughman.

C Coy.

C.R. 4929

Extract from Serial 1011 Re-inforcement Draft No. 55. Subscribed Folkestone,
26/10/18, from 2nd Batta, Royal Newfoundland Regiment, Borden Camp,
Winchester, to 1st Batta, Royal Newfoundland Regiment, B.C.F.

4929, Pte. Ploughman, H.

C.R. 4929

Extract from Daily Orders part II, Unit, The Royal Nfld.
Regiment dated July 9th. 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records on 5-7-18.

4929 Pte. Hezekiah Ploughman.

C.R. 4929

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

#4929 Pte. H. Ploughman.

Embarked for overseas with draft 11-6-18

Extract from Daily Orders part 11, from Unit The Royal
Hfld. Regt. St. John's, dated May 7, 1918.

#4929 Pte. H. Ploughman .

Attested for General Service with the Royal Hfld. Regt.
from 6.5.18

H. Howman

C.R.

4929

[Handwritten signature]

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

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

1. Unit and Corps. *Royal Newfoundland* 7. Former Trade or Occupation } *Trickman*
2. Regtl. No. *493* 93. Rank. *Plt* 7a. If the soldier claims previous service in Army, he should state—
4. Name, *Ploughman Hezekiah* (a) Former Regts. or Corps; with Regt. Nos.
- (Surname) (Christian Names)
5. Age last birthday. *22*
6. Posted for duty on *May 4, 18* at *St. Johns* in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty ? (b) Date of Discharge ;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When (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 a (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to 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. *nil*
12. Place of origin of disability. *nil*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

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
4929	Plt	Stewart H	\$250	H. Ploughman

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

H. Ploughman

Date

July 1/18

No. 16004/1706.

N.F.P./79.

NEWFOUNDLAND CONTINGENT

From:

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

To:

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

October 3rd, 1918

9 OCT 1918

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Subject: 4929, Pte. H. Ploughman,

Receipt number.

With reference to the following telegram. (8528) from the Hon. Minister of Militia, received

Chambers
LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commanding, Battery
Royal Newfoundland Regiment

"Pay to 4929, Pte. H. Ploughman, £2.0.0.

Received the sum of £2-0-0

Draft £2.0.0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Two pounds on account of cable remittance from Newfoundland.

Herzkich Ploughman

L. J. J. Marshall
Chief Paymaster & O. i/c Records.

No. _____ Rank _____

Witness

P. Manning

No. 4395/173

From: NEWFOUNDLAND

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

CHIEF PAYMASTER & OFF. N.F.F.C./80 PDS.
NEWFOUNDLAND CONTINGENT
58, VICTORIA STREET,
To: Officer Commanding, W. 1
1/Bn. Royal Newfoundland Regt.,
D.E.F.

19th March 1919

4929 Pte Ploughman H.

With reference to the following telegram from the Minister of Militia, / / (82)

"Pay to- 4929 Ploughman,

£5. 0. 0.

Kindly advise whether this remittance should be

- (1) forwarded to you for payment to this Soldier;
- (2) retained to credit of his account; or
- (3) otherwise dealt with.

J.A. Pinard Maj.
Chief Paymaster & O. i/c Records.

8-4-1919

4929 Pte Ploughman H.

This man wish the amount retained to credit of his account please

Deposited
19/3/19 J/W

Houghman, H

4929

Sept.

The Royal Nfld. Regiment

DEMOBILIZATION

No. 4979 Rank

Name Ploughman H

Warned for demobilization on

JUN 7 1919

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4979 Rank Pvt Name Ploughman H
 Intended place of residence Port Rexton, Treaty

2. Occupation Soldier
 Classification of soldier E Medical Category A

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 JUN 7, 1919
H. Ploughman
 for Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date ST. JOHN'S
7-6-19
H. Ploughman
 Signature of soldier
J. A. Snow Capt.
 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 and Date ST. JOHN'S
7-6-19
H. Ploughman
 Signature of soldier
James O'Sullivan
 Signature of witness SM

STATEMENT OF SERVICE

7. Enlisted for service 6-5-18 No of days on Military
 Discharged from service 21-6-19 14 days Service 426

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S
 Date JUN 21 1919
R. H. Latour
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place St. John's, Nfld.
 Date July 5/1919
M. Bowley Capt.
 Officer i/c Records
 The Royal Newfoundland Regiment

A. B. 20/19/2639

The Royal Newfoundland Regiment

Class for Demobilization: *E*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

 Date *6.6.19*

 Regimental No. ... *4929*

 Name *Ploughman H.*

 Address *Port Antonio S.B.*

 Present Medical Category *A-1*

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

Members of Board {

R.H. East Capt.
O.C. Discharge Depot.

H. Paterson
Senior Medical Officer

See Burden
M.O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4929 Rank Pte Name Thompson H
 Date of Enlistment 6.5.18 Address Port Rington District Trinity
 Occupation Fisherman Classification for Discharge F4 Medical Category A
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P36	B 268	B 121	1	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122	2	Board 1st	" 2	
B 178a	D 400A	B 1915	1	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 6.6.19

O. C. Discharge Depot. H. Thompson

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

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 7.6.19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 1578 to his home
at Port Rexton and Release Certificate No. 2461 issued.

Date 7-6-19 *J.A. Snowball*
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 5-7-19

Date 7-6-19 *J.A. Snowball*
Depot Paymaster.

Discharge approved for. 21-6-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1
E 178	W 3494	B 122	Board 1st	" 2
R 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		

2 Form B

Date 7-6-19 *J.A. Snowball*
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

JUN 21 1919

Date *R.H. Lait C.I.C.*
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

H. P. Ploughman

Signature of Man.

Reg. No. *4929*

J. D. Crawford

Signature of the Vocational Officer or his Representative.

Place

at Johns

Date

JUN 7 1919

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

MEDICAL HISTORY

Surname Ploughman OF Christian Name Herzekiah

Table I.—GENERAL TABLE.

Birthplace:—Parish Port Rexton T.B. County Nfld.

	SPECIAL RESERVE		REGULAR ARMY	
	on	at	day of	191
Examined	6th	St John's, Nfld.		
Declared Age	21 ⁵ / ₁₂	years		
Trade or Occupation	Fisherman			
Height	5 feet 6	inches		
Weight	122 lbs.			
Chest Measure-ment	Girth when fully expanded... 35 inches			
	Range of Expansion... 4 inches			
Physical Development				
Vaccination Marks	Right	Left	Right	Left
When Vaccinated				
Vision	R.E.—V=	6/30	R.E.—V=	
	L.R.—V=	6/6	L.R.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Laminot Paterson</u>			
(Rank)	Medical Officer.			
Enlisted	at	St John's, Nfld.	at	
	on	6th day of May 1918	on	day of 191
	Corps.	Regtl. No.	Corps	Regtl. No.
Joined on Enlistment	The Royal Nfld Regt, 4929			
Transferred to				
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				

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. (I), of the Reserve.

In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service for consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

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

1. Unit and Corps. *Royal Newfoundland*
2. Regtl. No. *4929* 3. Rank. *1st Lt*
4. Name *Ploughman* *Bezekiah*
(Surname) (Christian Names)
5. Age last birthday *22*
6. Posted for duty on *May 4/18* at *St. Johns*
in category (or grade).....
7. Former Trade or Occupation } *Fisherman*
- 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regtl. Nos.
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—
(a) When (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 a (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to 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. *nil*
12. Place of origin of disability. *nil*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

July 16, 1919

#4929 Pte. Herbert Eloughman,

Fort Rexton, T.B.

Dear Sir :-

Referring to your application I enclose cheque
for Seventy dollars (\$70.00), being amount of first payment
due you on account of the War Service Gratuity.

Yours truly

Captain & Paymaster

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

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

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

Christian name..... *Herziah* Surname..... *Plowman*

3. Rank..... *Pte* 4. Regtl. No. *4929*

5. Address in full to which future payments of gratuity are to be forwarded,..... *Post Rexton, N.B.*

6. Date of enlistment in the Regiment..... *May 4/18*

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

8. Relationship of such dependents.....

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

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

11. Were you on active service only in field, if so, give dates and particulars of such service..... *Overseas*

12. Give total length of time which you served on active service, whether in field or Overseas..... *From May 4/18 to June 7/19*

13. Have you had more than one enlistment? If so, give particulars of discharge and re-enlistments, and under what regimental numbers.

..... *No*

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.

.....

15. Have you been issued with a War Service Badge?..... *No*

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?..... *No*

(b) If so, was such reversion in consequence of Misconduct or inefficiency?.....

19. Are you now serving in the Res?..... *No* If not give- (a) date of discharge..... *June 7/19*

(b) Reason for discharge..... *Temporary 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....

France, Belgium + Germany - From Oct. 25/18 to April 1919

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee..... *No*

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

H. Ploughman

Signature of Applicant:

Place of Residence:

Declared before me at:

This

7th

day of

*Port Rexton, N. B.
St. John's, Nfld
June*

19*19*.....

John McCarty

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

POST DISCHARGE PAY.

Date paid

Paid

Paid

War Service
Gratuities.

Net amount
due

Soldier. Dependent.

.....

.....

.....

Certified correct.

Paymaster

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121.
39.

Number of Sheet 5

Regiment of Royal Newfoundland Signature of O. C. Company Lt Jamieson

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	
No.	<u>4929</u>	Age on	<u>21</u> years	<u>fisherman</u>		
	<u>Ploughman H.</u>		months			
Joined	Date	Place and Date of Enlistment		Religion		
		<u>St. John's</u>		<u>C. of E.</u>		
Joined	Date	Period of } with Colours <u>6</u> years. with Reserve <u>3</u> years.		Place of Birth		
Joined	Date			<u>Port Kenton</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</u>	<u>St John's</u>	<u>5</u>	<u>7</u>		

To be carried over



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 *Ploughman Hezekiah*

Regiment from which discharged **Royal Newfoundland**

Regimental number *4929*

Intended address *Port Jernston T.B.*

Height on discharge *5* Feet

Color of hair on discharge *Light Brown*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *—*

Figure on discharge *Medium*

Christian name of Father *Geo.*

Christian name of Mother *Mary*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Port Jernston 23-11-1896*

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) *Hezekiah Ploughman* (Rank) *Pl.*

Station **ST. JOHN'S.** Date *5-6-19*

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.



Station _____ Date _____

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 4929 Rank Pte. Name H. Ploughman
 Date of Enlistment 6-5-18 Address Port Rector Trinity
 Occupation Fisherman Classification for Discharge F. Medical Category A.
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	1	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122	2	Board 1st	" 2	3
B 178a	D 400A	B 1915	1	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 6-6-19 for H. Ploughman O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable. \$65.00
- (b) Clothing Supplied Am. Clothing Co.

Date 7-6-19 O. i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. ⁴¹¹⁻¹⁰ to his home at Port Rexton and Release Certificate No. 2461 issued.

Date 7-6-19 *J.A. Drew Giff*
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 5-7-19

Date 7-6-19 *J.A. Drew Giff*
Depot Paymaster.

Discharge approved for 21-6-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	1 N.F. Med.	D.F. 1	2 Form B
B 178	W 3494	B 122	1 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 7-6-19 *J.A. Drew Giff*
Demobilization Officer.

APPROVED.

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

Eligible for War Service Gratuity

JUN 21 1919

R.H. Sait Capt.

Date O. C. Discharge Depot.

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

Date June 16/19 *J. Mellick*
for Receiver

Reg. No. *4929* Rank Name *Ploughman 4.*
Attested Address. *Port Kishor*
Allotment Allottee
Date of Allotment Returned from Overseas *1.6.19*
Returned on S.S. *Crossman* Cause *Discharge*

6.6.19
21.6.19

PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILISATION