





THE ROYAL NEWFOUNDLAND

ATTESTATION OF

No. 5328 Name Simon & Radges Corps Mill
Questions to be put to the Recruit before Enlistment.
1. What is your name? I Semon 7. Kodgen
2. What is your full Address? January January
3. Are you a British Subject?
4. What is your age?
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? 7.
8. Are you willing to be vaccinated or re-vac- a large state of the vaccinated?
9. Are you willing to be enlisted for General Service? • 9
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?
11. Are you willing to serve upon the conditions as emb died in the roll of service to be 3 11
made by me to the above questions are true and that I am willing to fulfil the engagements made.
OATH TO DE TAKEN BY RECRUIT ON ATTESTATION. I
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.
on thisday of
†CERTIFICATE OF APPROVING OFFICER.
I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the re-
quired 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 Approving Officer.
Place)
† 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)......on the (Date)

..........

A	DESCRIPTIVE REPO			5328
Name Simon	9 Rodgen			
Apparent age	years months. Girth when fully expanded. Range of expansion	J6 inc	hes .	eet inches
Sibleys	OVE	Relatiouship 4	gens atter	date of marriage
(a)	(c) Present address. (d) In	tials of Officer verifying en	ntrv.	(d)
				m* ,.35 to
	Particulars	as to Children		1
Christian Na	mes	teri ere	Date and Pla	ce of Birth
Corps in Rgt. or Prom	STATEMENT OF	THE SERVI Service not allowed to reckor for fixing the rate of pension	Service in Re-	Signature of Officers certifying correctness of
Service towards	2 2 2	Years Day	-	entries
Dipcharge	ed July 11 /1919			
Dentrarker Line from	France 25 11-18	Arrived Dim	attley Lots	N.S. 22-7-18 136 5-1-19.
to the folde	Domonto 1	and of	1-6-19 Had A	11-7-1919
Total Service forfeit	ed as above			
Total Service towards Engagemen	11-7-1919	[date of discharge]	ears 51 days	(## 1,) (#) (**********************************

C.R. 5328

extract from soily orders for II Royal Be foundland regiment sepot st. John's dated 17-7-19.

The discharge of the undernoted on demobilisation has been constituted by Officer 1/c Records from noted date : 11-7-19.

5328, Pte. simon kodgers.

C.R. 5328

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. June 28th, 1919.

The discharge of the undernoted on demobilization has been APPROVED by O.C. Discharge Depot with effect from 27-6-19.

5328 Pte. S.Rodgers.

Extract from Paity Orders Part 11 Depot. St. John's, Date June 18th 1919.

5328m Pte. S. Rodgers.

Reported at Headquarters 1/6/19. which sailed Liverpool May 32/1919.

nz "Corsican"

Extract from Nominal Poll 1st. Betta 5328

Royal Newfoundland Regiment dated 30-4-19.

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

#5328 Pte. S, Rodgers.

Extract from Nominal Roll of draft No. 56 from the End., Battalion Winchester to the lat. Battalion, Royal Newfoundland Regiment B. S. F., Embarked Southampton 23/11/18.

#5328 Pte/ S/ B. Rodgers

C.R. 5328

Extract from Daily Orders part 11, from Unit The Royal Bild. Begt. St. John's, dated Jily 25,1918.

The following men emberhed for overseas on H.M.S. "Solumbelle" July 28,1918.

#5328 Pte.Simeon Rodgers.

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

#5328 Pte. Simeen Rodgers.

Attesed formGeneral Service with the Reyal Mfld.Rwgt.

I.I. Rodgers C.R. 5328 Nors.—This 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. (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.

Transfer to Class	** ** ** * * * * * * * * * * * * * * * *		
1. Unit and Corps. Moyu. 2. Regtl. No. 5. 3. 2. 8. 3. Rank	I newfound lane	4. Former Trade or Occupation } 3 is h	
2. Regtl. No 3. Rank		7a. If the soldier claims previous s	ervice in
4. Name Rayers (Surname) 5. Age last birthday. 2. 2.	S. G. (Christian Names)	Army, he should state— (a) Former Regts. or Corps; with Regtl. Nos.	To be considered that a second of the second
(Suffname) 2 .2	(Christian Names)	with Rysu. Nos.	22-E 2000 8000 -0 2000 0000
5. Age last birthday		CHARGEMENT OF TO 15018	De Period
6. Posted for duty on	18 at St Johns		end virgining

- 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
 - (b) Where
 - (c) Opinion of Court

(d) Particulars of Pension or Gratuity (if any)

1674 (95%)

partie made on the fit only on the

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 veneral 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.

12. Place of origin of disability.

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.



to good the the spirit of soils after althought to missing mouth to

ann	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?	And the state of t
such mjur-	15.	What is his present condition?	
ear, hroat, &c., 's re- o be with a p h s sible; ses of		(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)	decoplais fro
sition tated.			
			Control of the second section of the second
			Let Market in . The second second
	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 treat- ment was unobtainable?	ra.
	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?	A .
			tim
			a triate
	90	Do you recommend—	Repatriation
	-	(a) Discharge as permanently unfit?	
			Will warne
		(b) Change to United Kingdom? Note—(b) is only applicable to soldiers invalided at	pyra ~
		Foreign Stations.	m'.
			Capt hame
	Stat	tion Hazely Down.	Medical Officer in charge of case.
	Dat	7	That Many V. b. G
	it is	 Loss of teeth on or immediately after active service, should to some other cause 	ld be attributed thereto, unless there is evidence that

Army Form B 179k

Nº 6039



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

	Whether Wife, Child.	NAME (in full)	•	1	Address	Amor (each p	
43	mother	mas Stephen (Ma	ny Ann	Sitter	, Com		6
		Mrs Stephen (Ma Rudgers (Se	neim)	7	Bay Som		7
			* 1				
					Total Allotment, S		6
NOTE.	This form must be or signed by the Office required payments or	completed by the Officer Co r Commanding Company a	mmanding and handed	Company, sig	med by the Volunt	teer, cou	nter
		on Link					

From:

NEWFOUNDLAND

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

19th November 1918

Subject: 5328, Pte. S.G.Rodgers

With reference to the following telegram (9869) from the Hon. Minister of Militia, received

Pay to 5328 Rodgers £6::0:0

Draft £6:0:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereom.

Chief Paymaster & O. 1/c Records.

Officer Commanding, 2/Bn Royal Mfld. Regt. Winchester.

Nov. 21 N 1918

SON AND COM

Receipt bereuraekt karral

OING 2ND BM. ROYAL NIVIOUNDLAND RECORDING TO COMMING. 2 nd Batt'n,

Royal Newfoundland Regiment.
Received the sum of

founds on account of

cable remittance from Newfoundland.

19 Rodyers

No. 532 8 Rank

Witness

Carter, &

N.F.P./80. CONTINGENT

From:

Chief Paymaster & U.i/c Records, Newfoundland Contingent,

58, Victoria Street. London, S.W. 1.

5th April

1919

5328 Pte. Rodgers S.G.

With reference to the following telegram from the Minister of Militia, / / (118)

"Pay to-5328 Rodgers

£6. 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.

thief Paymaster & O. i/c. Records

To: Officer Commanding, 1/Bn. Royal Newfoundland Regiment. B.E.F.

191

Rodgers, S

5328

Pay Loepl

July 11,1919

#5328 Pte.Simon G.Regers, Sibley's Cove, T.B.

Dear sir:-

Please find enclosed Discharge Certificate #2938.
Yours truly

Captain, Paymaster & U.i/c Records

The Koval Mild. Regiment

No. 5378 Rank

Name Modello

Warned for demobilization on



The Royal Newfoundland Regiment

	PROCEEDINGS ON DISCHARGE
1	No. 5328 Rank. Att. Name Podgles, S. Intended place of residence Publicy Cove, Limity
2.	Occupation
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 26 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 JUN 2 01919 Date 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 Signature of soldier Signature of witness
	STATEMENT OF SERVICE
7.	Enlisted for service
	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 Officer Commanding Discharge Depot The Royal Newfoundland Regiment
	Date JUN: 27.1919 The Royal Newfoundland Regiment
	CONFIRMATION OF DISCHARGE
9.	Place, ST JOHN'S Date Date The discharge of above mentioned soldier is hereby confirmed to the local to the
	a FB2079/2938

The Royal Pewfoundland Regiment

Class for Demobil- ization:—	1000 000 000 000 000 000 000 000 000 00
一月	STATES CONTRACTOR

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

Discharge Depot:	Headquarters The Royal Ne	wfoundland Regiment
		Date 25 6 19
Regimental No		
Name /	ino Lim	Rank 7
Address	Llego Com	
Present Medical Ca		
	Recommended for :	(a) Immediate discharge(b) Standard Medical Board
		O.C. Discharge Depot.
	Members of Board≺	Senior Medical Officer
		Red Berden

The Koyal Pewfoundland Kegiment

DEMOBILIZATION OF					
Reg. No. 5.33 & Rank The Name todgers					
Date of Enlistment 19.5.18 Address Jublan Borre District Trently					
Occupation Justerman Classification for Discharge					
Recommendation S. M. B. Disability Rating					
Passed to Demobilization Officer with following documents:—					
N.F. P 36					
B 178 W 3494 B 122 Board 1st "2					
B 178a D 400A B 1915 do 2nd "3					
B 179a D 400C Form K do 3rd 4 4 4 5					
B 179b B 103 ME 2 " 6 " 6					
B 179c					
1 Mix II					
Date. 35-6-19 W. C. Discharge Depot.					
PARTICULARS FOR DEMOBILIZATION					
1. Civil Re-Establishment.					
I amin a position to resume civilian occupation.					
DEA08 A EV					
S. Tradyn					
The state of the s					
Particulars passed to Vocational Officer for information and action.					
Date					
2. Clothing.					
Certified that Clothing Regulations have been complied with:					
Certified that Clothing Regulations have been complied with:					

Date	Demobilization Officer
	Demonization Omeer
4. Pay and Allowances.	
The herein named soldier's accounts have been correct	etly balanced and all matters in co
nection therewith settled. He has received pay and allo	owances to
Date 2.4. — 4.4	I Mins A
	Depot Paymaster.
Discharged approved for 27-6-	19
Forwarded with following documents to O.C. Discharge	D
	Depot.
N.F. P 36 B 268 B 121 N.F. Med	D.F. 1
B 178 W 3494 B 122 Board 1st	" 2 7 Frank
178a D 400A B 1915 do 2nd	3
179 D 400B Form L do 3rd	" 4
3 179a D 400C Form K do 4th	5
B 103 ME 2	" 6
B179c B 120 M 93	
Date 26-6-19	and the state of t
J. 1	
	O. C. Discharge Depot.
PPROVED.	
Documents as above forwarded to:	
Officer ic Records.	
Board of Pension Commissioners.	
with following additional documents.	
Engible for wa	ar Service Gratuity
.IIIN 2.7-1916	P. H. Sait MAJOR
Date	
	O. C. Discharge Depot.

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 farmer Occupation.

8.0	Rody	<i>1</i> 2.
	c ag	Signature of Man.
whoh	Peg. No.	1328.
work	1,	

Signature of the Vocational Officer or his Representative.

Place ST. JOHN'S.

Date JUN 2 3 1919 191

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

ent examples and an $oldsymbol{J}_{ij}$	MEDICAL HISTOR	Y who had	
Surname Polges.	OF Christian No.	me Simon	Gigarii in small
	Table I.—GENERAL TABI	LE.	
Birthplace:—Parish	00 0 100	nty 14es.	
	SPECIAL RESERVE	REGULA	R ARMY
= : }	on day of May 1918	on day	of 191
Examined	at Styphis.	at	
Declared Age	19, years day	s year:	s days
Trade or Occupation	& Sherman.		
Height ···· ····	5 feet 8, tuche		inches
Weight	138. 1bs		lbs.
Measure- ment Range of Expansion	inche inche		inches
ment (Range of 1987) and on 1987	у .		
Physical Development	Right Left	Right	Left .
Vaccination Marks Arm	Kight Jen		
(Number			
When Vaccinated	ر الما	D B V	
Vision }	I. E. –V=	R.E.—V= 1.E.—V=	
	(a)	(a)	
••(a) Marks indicating congenital peculi- arities or previous disease			
	(b)	(6)	
(b) Slight defects but not sufficient to cause rejection			•
Approved by (Signature)	Jan Post		
(Rank)	Bass.		
A STATE OF THE STA	Medical Officer		Medical Officer.
Bulisted	at Jeyohus	at	
Enlisted	on Luday of May 191	on day	
	Corps. Regtl. No.	Corps	Regtl. No.
Joined on Enlistment	N C378		
	regiment.		
Transferred to			
Became non-effective by	, to	on day	of 191
(0)	on day of 191	on day	. 191

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

Date	Brief Details, and Signatures
Date	oriei Details, and Signatures
3-5-18	Pace. 48
	746.
20-6-18	TAB TAB TO TAB
27-6-18	TABLE
1 = 18	6 5 7 8
4-1-18	1 AB) &
	This hamabu and a zoz
	It is hereby certified that this soldier
	has been before a Travelling M diou!
	Board and has been c'assistat as
	for Dischargeon Demobilisa-
	tion. Medical category
	tion. Medical category
	Date of T.M.B.
	Discharge on Anjanat
	*

Table IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
			•		
				1230	
•					
	•				
		•			
		,		1	
		7	100 100 100 100 100 100 100 100 100 100		



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 Roard

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 \mid c Records together with the remainder of the man's documents.

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

Name in full Signon Rodgers
Regiment from which discharged Koyal Pewfoundland
Regimental number 5-328
Intended address Lilleys Cove Aubleys Cove.
Height on discharge . 5 Feet 10
Color of hair on discharge Sown
Complexion Fair
Color of eyes Brown.
Descriptive Marks
Figure on discharge Sall,
Christian name of Father Stephen
Christian name of Mother Many
Wife's maiden name in full ——
Date and place of marriage
Christian names of children
Place and date of soldier's birth Dibleys. Cone 6-12-ayr. 21. 1798
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 fuli) Simon Podyns (Rank)

description and details are, to the best of my knowledge correct.

Date Jane 24 - 6-19.

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

I certify that the above named soldier signed the foregoing declaration in my presence, and that the above

Note.—This 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. (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. T. Toyal Newfoundlas	and 7. Former Trade \ \frac{1}{2}.
1. 6.	or Occupation Jousherman
2 Regtl Nov 328 3 Rank 9	7a. If the soldier claims previous service in

4. Name Hadgers (Christian Names)

Army, he should state—

(a) Former Regts. or Corps;
with Regtl. Nos.

5. Age last birthday. 22....

- 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
 - (b) Where
 - (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 veneral 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.
- 12. Place of origin of disability.
- 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 nil

3.1	14.	State whether the disabilities are		(a) attributable to	(b) aggravated by
		(i.) Service during the present war			
		(ii.) Previous active service			
e la	- 1 404 MP	(iii.) Climate in pre-war service		\2	TO STATE OF THE ST
		(iv.) Ordinary military service before the war	• •		A Saleman T
		(v.) Serious negligence or misconduct on the man's part.	e}	·····	×
	14	(a). If not due to any of these causes, to we specific condition do you attribute it?	bat)	· Na.	
such njur- ear, iroat, &c., s re- be with p h s sible; es of the sition ated.	15.	What is his present condition? (A note should be made as to Weight in all cawhen it is likely to afford evidence of the pagress of the disability.)	ises bro-	He completed and a	lains of no
	10	Was an operation performed? If so, when and w	hat	Na,	
	10.	was its nature?	паг		
	17.	If not, was an operation advised and declined?		MA	
	18.	*In the case of loss or decay of teeth,—Is the loss teeth the result of wounds, injury or dise directly attributable to active service or throus service under such conditions that dental tre- ment was unobtainable?	ase	na	
	19.	Give particulars of any other disabilities existing, not in themselves sufficient to cause invalidi State whether or not they are attributable to have been aggravated by service during the pres war, and if so, to what or by what specific milit conditions?	or ent	Za	•
		The state of the s			
				Report	ation
	20.	. Do you recommend—		Kepar	
		(a) Discharge as permanently unfit?	~	400	/
		(b) Change to United Kingdom?			
		Note—(b) is only applicable to soldiers invalided Foreign Stations.	at 4	12 pocumies	· Callor
	Sta	ation Lageley Houndamp		Medical Officer in	charge of case.
	Da	te 28 4 19			
	it i	 Loss of teeth on or immediately after active services due to some other cause 	, sho	uld be attributed thereto, u	nless there is evidence that

	Don't	ment or Corps. ROYAL NEWFOUNDLAND	REG.	0	
7		(18)		J L.	
RankJ.				***************************************	······································
Religion	22/5/10 11	o dist () Age on En DURATION.	Corries resis	years	~ ~ ~ /5/16
Enlisted (a)					
Date of pro	motion to present i	rank Date of a			
Extended	Re-		ion (b)		
[.		() or Corps	Tade and Rate		······································
Occupation.	Tisherma	an II	2001	Sig	nature of Office
	Report	Record of promotions reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36,
Date	From whom received	The authority to be quoted in each case.			or other official documents
		· Embarked			
7		Disembarked	28 NOV 19	2	
		Joined Batt		LANIL	TTA -
		Onred Batt.		JAN) 18
		trived in Wi		3/4/15	
				2.1/.1.	•
and the second				$I_{-1} = I_{-1} = I_{-1}$	
in the second se					
1					
MAL			-		
-				1	
-	*				
	of a man who has re-engaged hoeing-Smith, &c	for, or enlisted in Section D. Army Reserve, particulars of si (17591.) Wt, W 1887-P 1124. 1,00%0			

Field 84/9 the Act cerence 9/ Church subtray to show 8/4/9 Major Berner	Date of last entry Company Condu	ct Sheet	dw ag Lag	of tast	detink	Names of stree more mobile this burnent awarded	Sheet No.	Company, etc.	1 - Market	Law Start	Place
O'clo 84/9 the Acticences 9/ Chull her lay to seem 8/4/9 Mayor Borner	Place		Rank			Offence	Names of Witnesses	Punishment awarded		By whom awarded	Remark
						Deficilies 9/-	CAUCE MED	Pacy for allow	8/4/9		ruerd
	.										
						A			l	., ., .,	

July 12,1919

#5329 Pte.Simon Redgers,

silbey's Cove. T.B.

Poar Sir:-

for Seventy dollars (\$70.00), being amount of first payment due you on account of the war service Gratuity.

Yours truly

Captain raymaste & 0.1/c records

DEPARTMENT OF MITAINA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

(C. C. Land C. C. L. C.
lated January 28th.1919.
complete reply must be given to every question in this Declaration complete reply must be given to every questions are not phove must be no blanks and no dashes, if my questions are not applicable, the words "NOT APPRIMATE" must be wratten out. On completion this Declaration is to be returned to THE OFFICER I/C
Christian name
Christian name
5. Address in full to which future payments of gratuity are to be
5. Address in full to which future power to or order Bang. forwerded Siblings bowe Ismity Bang.
29 Pro en 1518
6. Date of collistment in the Regiment. 22 may 19.18
- to whop Sonowa Land Aller
was being issued introducterly prior to your arresting
a seed domand on the seed of t
o the se form of such dependence,
9./daross in fall of and the first of the property of the prop
10.1s said dependent, now, or was bril dependent at my tire in receipt
a gammation thousand on occount of thether Sales and
001x in 1110 12 500110 according
perticulars of such service. Annue. Jurmany
on eative Service.
12. give total length of time which you served on active service,
and an or recession by
whether in file of the state of

13. Have you had more than one enlistment? If so, give particulars
of discharge and re-enlistments, and under what regimental numbers.
mo
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. Mt. M.
15. Have you been issued with a War Service Badge? . M.Q
16. Have you, during the present war, served in the Inperial Borees.
17.Are you entitled to receive, or have you received may Gratuity
in the nature of Pest Discharge Pay from the Imperial Forces? If
so, state amount received, or to which you are entitled. A
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? . N
19. Are you now serving in the Rost ? If not give ?- (a) date
of discharge . 26 hun! 9. (b) Reason for discharge
of discharge . 26. Jun! A. (b) Reason for discharge. Neurobelystico
·······
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 & Germany but
no in any action of war
21.(a) Are you receiving treatment from the Wivil Re-Establishment
Com.(b) If so are you in receipt of full pay and allowances from
that Cosmittee. M.
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: Simon, Rodgers

Place of Residence: Sibley Cove Trinky Bay

Declared before ne at: It was

This 26 th day of June 19.19...

Signature of Berrister of the Supreme Court, Stipendiary Heals trate; Hetery Public Hustice of the Peace, or Commissioner of affidevits.

POST D'SCHARGE PAW.

Date part raid raid Van Savvice Net amount due Cravery.

Cortilled correct.

Paymester

Nº 6039



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)		Address	Amor (each p	
43	Mother	Mrs Stephen (Ma Rodgers (Ser		Sibleys Com	4	
		· · · · · · · · · · · · · · · · · · ·		,		
				Total Allotment, \$		6
81	his form must be congress by the Officer equired payments of	Commanding Company a	mmanding (nd handed	Company, signed by the Volunto the Paymaster as authority	teer, cou	inter e th

THE ROYAL NEWFLD. REGT. DR TO Pte. S.G.Redgers, #5328

То		from	Old Perlican to St. John's\$30 Torquay toOld Perlican	.70
To			Old Perlican to Torquay 3.	
			\$9 .	.70

As per vpuchers attached.



CH TO 25/8 INTIME
THO LEDGER ... INITIALS...
PAY LEDGER ... INITIALS...



& Trody

June 1 ecewed who k g Rodgers 8 0 1425 Prank Bursey.

June 3th REceived from Pte S. 4. Rodgers the sum of \$ 3.00. from sal Jorquey to Old perlicensynd mrchestry & riscole

O.C.S. TELEGRAM REID NEWFOU Received Delivered ST. JOHN'S, June 26/19

Royal Newfoundland Regiment.

Billeting Account,

To Ph S. Rodgers

	Section Control of the Control of th		
	as undermentioned /19 to fine 23/19		
5328 7	Oh & Rodgen	23.	80
•	Accey . 7 24 938 Co.	٠	
	PAY LEGGER - INITIALS - CON LEGGER - CON LEGGER - INITIALS - CON LEGGER - CON LEGGER - INITIALS - CON LEGGER - CON L		-
Certified correct f			
	Billeting Officer.		
مي ا	(Dalman)		

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

Fold Here

The accompanying Victory Medal and/or British War Medal

is/are forwarded herewith to in the variety by the transfer to Simon G. Rodgers in respect of his service as No. 5328 Rank . Pte. S.G. Rodgers Royal Nild. Regt.
Nild. Forestry Corps. archite to seed Receipt of the same should be acknowledged hereon. Date

Sebbly bow J. B.

[P.T.O.]

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

B 121. 39.				Regiment of	Loyal	Layfound!	aus	Number of Signature of O. C. Company	Sheet Me Dicks		
Regimental Number and Name No. 5329 Joined Date Joined Date Joined Date Joined Date				Ralistment Age on Cycars months Place and Date Of Senitron Place and Colours (Senitron Senitron Seni							
Place	Date of Offence	Rank	Cases of Drunken- ness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS		
			1	Demobilized St	Shnis	11 79		e de la companya de			
				× .							
									Атшу Рогт В. 121.		
			Т	'o be carried over.					Ā		

1334

stordiere leserales barnehillentine Form 3

The Koyal Pewfoundland Kegiment

DEMOBILIZATION OF								
Reg. No 5338 Rank Hel Name Lodgers								
Date of Enlistment 19 5 18 Address Leblers Cherry District Samuely.								
Occupation Lestermain Classification for Discharge H Medical Category H.								
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								
B 178a								
B 179a D 400C Form K do 4th " 5								
B 179b								
B 179e								
p Must								
Date. 35 6.19. O. C. Discharge Depot.								
PARTICULARS FOR DEMOBILIZATION								
1. Civil Re-Establishment.								
I amin a position to resume civilian occupation.								
TEPROVED								
and the state of t								
Si Pagar								
Particulars passed to Vocational Officer for information and action.								
Particulars passed to Vocational Officer for information and action.								
Particulars passed to Vocational Officer for information and action. Date								
Date NUL								
Date								
Date NUL								
Date								
Date 2. Clothing. Certified that Clothing Regulations have been complied with: (a) Clothing Allowance payable (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c								

3. Transportation and Release Certificate.	1977
The above named has been provided with Travelling Warrants No. at	to his home
Date 26-6-1990 MOSTANISISOM MANOR	bilization Officer
4. Pay and Allowances.	Care of Tropage
The herein named soldier's accounts have been correctly balanced an nection therewith settled. He has received pay and allowances to	all matters in con-
Date Date Do	ppot Paymaster.
Discharge approved for	1 P 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
N.F. P 36	2 Form B
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 M 93	
Date 26-6-19 1 There & O. C. D	scharge Depot.
APPROVED.	.cos l
Documents as above forwarded to:— Officer i c Records. Board of Pension Commissioners.	
with following additional documents. Eligible for War Service	e Gratuity
Date JUN 27 1919 O. C. Di	MAJOR scharge Depot.
Received the above noted documents from O. C. Discharge Thotal Date Date Documents from O. C. Discharge Thotal Date Date Date Date Date Date Date Date	Ma

Reg. 1	No	1326. Rank Mi Name ladgers. S. Address Sully & love.	
Attest	ed	Address Selly's love.	
Alletn	nent	Allottee	~~~
Date o	of Allo	tment	5
Retur	ned on	tment Returned from Overseas 29.5.1 S.S. Lausilau Cause Aiselangs	•
		1	
266	19	ASSED TO DEMOBILIZATION OFFICER	
41	207.	DISCHARGE APPROVED ON DEMOBILISATION.	•••••
	5		·····
•••••			••••••
•••••			••••