



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 5689 Name Henry Thomas Saunders Coy E.

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

- |  |                                    |
|--|------------------------------------|
| 1. What is your name? .....  | 1. <u>Henry Thomas Saunders</u>    |
| 2. What is your full Address? .....  | 2. <u>Change Islands</u>           |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u>                      |
| 4. What is your age? .....   | 4. <u>27</u> Years <u>0</u> Months |
| 5. What is your Trade or Calling? .....  | 5. <u>Carpenter</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 .....<br>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, Henry Thomas Saunders, 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.

Henry T. Saunders SIGNATURE OF RECRUIT.  
Wm. O'Sea Signature of Witness.

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

I, Henry Thomas Saunders, 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's on this 11th day of June, 1915.

Signature of Attesting Officer Edwards

### †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.....191..... } 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).....re-enlisted in the (Regiment).....on the (Date).....

# DESCRIPTIVE REPORT ON ENLISTMENT

568.7

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

Name Henry Thomas Saunders

Apparent age 21 years 0 months. Height 5 feet 11 inches

Chest Measurement { Girth when fully expanded 29 inches  
 Range of expansion 4 inches

Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Frank Saunders  
Gander Bay | Relationship Brother

### 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 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>11-6-18</u>									
Joined at <u>St Albans</u> on <u>June 11-1918</u>									
<u>Discharged August 11 1919</u>									
<u>Embarked at Harwich for Constantinople to Malindi 22-7-18</u>									
<u>Remained at Malindi on Isolation for mumps started from Sydney 29-7-18</u>									
<u>Arrived Falmouth London 9-8-18. State to Winchester 9-9-18</u>									
<u>to be found fit for demobilization 24-6-19 Arrived Southampton 1-7-19</u>									
<u>Demobilization St Albans 8-8-1919</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>8-8-1919</u> (date of discharge) <u>1</u> years <u>59</u> days									
Pensions " " " " " " " " " " " "									

H Saunders

C.R. 5687

~~120~~

6

No. 19689/2212

*065705*  
*[Handwritten signature]*



NEWFOUNDLAND CONTINGENT 1918

From:

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

To:

Officer Commanding,  
2/Bn Royal Nfld. Regt.  
Winchester, Hants.

2nd December 1918

Dec. 5th 1918

Subject: 5687, Pte. H. T. Saunders

With reference to the following telegram (10340) from the Hon. Minister of Militia, received

Pay to 5687 Saunders £10:0:0

Draft £10:0:0 is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

*[Handwritten signature]*

Chief Paymaster & O. i/c Records.

Receipt hereunder.

*[Handwritten signature]*

Lieut. Colonel  
Officer Commanding  
2nd Bn. Royal Newfoundland Regiment

Received the sum of Ten  
pounds on account of  
cable remittance from Newfoundland.

H. T. Saunders

No. 5687 Rank Pte.

Witness: A. L. Carter, Pte.

C.R. 5687

Extract from Daily Orders Part II Royal Newfoundland Regt.

Depot St. John's dated Aug. 19th 1919.

The discharge of the undernoted on demobilization has been  
CONFIRMED by Officer i/c Records from noted date 8-8-19.

5687, Pte. H. saunders.

C.R. 5687

Extract from Daily Orders Part 11 Unit The Royal Nfld.  
Regt. St. John's, July 15, 1919.

The discharge of the undernoted on demobilization has been  
APPROVED by O.C. Discharge Depot with effect from 25-7-19.

5687 Pte. H. Saunders.

C.R. 5687

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

5687 Pte. A. Saunders.

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

C.R. 5687

Extract from Daily Orders part 11, from Unit The Royal  
Wilt. Reg. St. John's, dated July 25, 1918.

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

#5587 Pte. Henry Saunders.



C.R. 5687

**Extract from Nominal Roll of Casualties by O.C. Embarkation  
Casualty Section, No.6 District Depot, Aldershot, Canada.**

5687 Pte. Saunders, H. Reported from Aldershot 15-8-18 Overseas  
27-8-18,

MM.

C.R. 5687

Extract from Orders, Part 11, by Lt. Col., B.J. Barton. D.S.O., commanding  
2nd Bn. Royal Newfoundland Regiment, dated 10/9/18.

The undermentioned who arrived from Newfoundland on the 9/8/18  
is taken on the Strength from that date:

5687 Pte. H. Saunders.

C.R. 5687

~~XXXXXXXXXX~~  
Details of Draft under Capt. Murphy, admitted  
Quarantine at Alferuhet. (no date given).

#5687 Pte. H. Saunders.

C.R. 5687

Extract from Daily Orders part 11, from Unit The Royal  
Nfld. Regt. St. John's, dated June 13, 1918.

#5687 Pte. H. T. Saunders.

Attested for General Service with the Royal Nfld. Regt.  
from 11.6.18 to Report - 1-7-18

No 6699/1050

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,  
2nd Batt. Ryl. ~~Nfld.~~ Regiment  
Winchester.

N.F.C. No. 170.  
NEWFOUNDLAND CONTINGENT  
PAY & RECORD OFFICE  
LONDON, S.W. 1  
MAY 1919

16th May 1919

May 27th 1919.

5687 Pte. H. Saunders

With reference to the following telegram from the Minister of Militia / / 19 ( 186 ):

"Pay to- 5687 H. Saunders  
£7. 0. 0.

Cheque £ 7. 0. 0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

*A. A. Minnie*  
Chief Paymaster & O. i/c Records.

Receipt hereunder.

*P. Kamm*  
LIEUT. COLONEL.  
OFFICER COMMANDING 2ND BATT. RYL. NEWFOUNDLAND REGT.

Received the sum of Seven pounds in respect of telegraphic remittance from the Minister of Militia.

H. Saunders  
No. 5687 Rank Private  
Witness: M. Hackett

N<sup>o</sup> 6387



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Henry Saunders, Regl. No. 5687  
 hereby agree, until further notification by me, and in similar official form to make an Allotment of  
8 Dollars and 67 Cents, per diem, from my Pay,  
 to, and for the benefit of the undermentioned Person <sup>and</sup> or Persons, such payment to be made on proof  
 of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> or Persons  
 concerned, viz.:

Allotment begins August 1<sup>st</sup>

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
4863	Sister.	Edith Locke	Herring Neck.	60
Total Allotment, \$				60

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

(Sig.) H. G. James 2<sup>d</sup> Lieut  
 Officer Commanding  
 of Company

(Sig.) Henry Saunders  
 (Rank) Private

July 15<sup>th</sup> 1918

Saunders, A

5687

Ray sept.

August 8th 1919.

#5687, Pte. H. Saunders,  
Change 1st ds.

Dear Sir:

Enclosed please find Discharge Certificate  
#3632.

Yours truly,

Capt. \*

O .i/c Records.

RS/.



# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 5687 Rank. Pte Name. Saunders H  
 Intended place of residence. Change Islands  
 2. Occupation Carpenter  
 Classification of soldier. R Medical Category. AI

3. The above named man is discharged in consequence of  
**DEMobilIZATION**  
**Eligible for War Service Gratuity**

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.  
 Place, ST. JOHN'S  
 Date JUL 11 1919  
 Commanding Discharge Depot  
 The Royal Newfoundland Regiment

## CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.  
 Place, ST. JOHN'S  
 Date JUL 11 1919  
 Signature of soldier: Henry Saunders  
 Signature of witness: J. H. Snowcroft

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

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.  
 Place, ST. JOHN'S  
 Date JUL 11 1919  
 Signature of soldier: Henry Saunders  
 Signature of witness: W. J. Eaton Qms.

## STATEMENT OF SERVICE

7. Enlisted for service. 11.6.18 No. of days on Military  
 Discharged from service. JUL 25 1919 Plus 14 days Service. 424

## 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 JUL 25 1919  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment

## CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.  
 Place, ST. JOHN'S  
 Date August 8/1919  
 Officer i/c Records  
 The Royal Newfoundland Regiment

APP 2079/2637

20  
37  
8

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 5687 Rank AFI Name Henry H Saunders  
 Date of Enlistment 11.6.18 Address St. Johns District 200  
 Occupation Carpenter Classification for Discharge 16 Medical Category A3  
 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 103.....	ME 2.....		" 6.....
B 179c.....	B 120.....	M 93.....		

Date 12.7.19 .....

H. Saunders  
O. C. Discharge Depot.

## PARTICULARS FOR DEMOBILIZATION

### 1. Civil Re-Establishment.

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

Henry Saunders

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 11-7-19 .....

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. **B2326** to his home at **Orange Isd** and Release Certificate No. **3459** issued.

Date **11-7-19** *J.A. Snowcraft*  
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 **8-8-19**

Date **11-7-19** *J.A. Snowcraft*  
Depot Paymaster.

Discharge approved for **20-7-19**

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1
F. 178	W 3494	B 122	Board 1st	" 2
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 **11-7-19** *J.A. Snowcraft*  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

- Officer i/c Records.
- Board of Pension Commissioners.

with following additional documents.

**Eligible for War Service Gratuity**

Date **JUL 25 1919** *N.D. Cooper Capt.*  
O. C. Discharge Depot.

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

Date .....

# 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 ..... 10.7.19 .....

Regimental No. 5687.

Name ..... Saunders Henry .....

Address ..... Orange Islands .....

Present Medical Category ..... 4j .....

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

Members of Board

Ret Lt Col Major  
O.C. Discharge Depot.

Spateron  
Senior Medical Officer

Geo Barden  
M. O. 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 former Occupation.

*Henry Saunders*

Signature of Man.

Reg. No. 3659

*J. A. Snowcraft*

Signature of the Vocational Officer or his Representative.

Place

*Rt. John*

Date

*11-7-17*

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

# MEDICAL HISTORY

Surname Saunders OF Christian Name Henry Thomas

Table I.—GENERAL TABLE.

Birthplace:—Parish Change Islands, St. John's County Newfoundland

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	on <u>11<sup>th</sup></u> day of <u>June</u> 19 <u>18</u>	at <u>St. John's</u>	on	day of 19 <u>1</u>
Declared Age...	<u>22</u> years	days	years	days
Trade or Occupation	<u>Carpenter</u>			
Height	<u>5</u> feet <u>4</u> inches		feet	inches
Weight	<u>124</u>	lbs.		lbs.
Chest Measurement	Girth when fully expanded	<u>37</u> inches		inches
	Range of Expansion	<u>4</u> inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm			
Number	<u>1 Scar.</u>			
When Vaccinated	<u>3 months ago.</u>			
Vision	R.E.—V=	<u>6/6</u>	R.E.—V=	
	L.E.—V=	<u>6/6</u>	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>L. J. Peterson</u>			
(Rank)	<u>2nd Lt.</u>			
	Medical Officer.			Medical Officer.
Enlisted	at <u>St. John's</u>		at	
	on <u>11<sup>th</sup></u> day of <u>June</u> 19 <u>18</u>		on	day of 19 <u>1</u>
	Corps.	Regtl. No.	Corps	Regtl. No.
Joined on Enlistment	<u>Royal Artillery</u>	<u>5687</u>		
	<u>Regiment.</u>			
Transferred to				
Became non-effective by	on	day of 19 <u>1</u>	on	day of 19 <u>1</u>
(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. (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 Regt* } Former Trade or Occupation } *Cook*
2. Regtl. No. *5687* 3. Rank... *Sgt* 7a. If the soldier claims previous service in Army, he should state—
4. Name... *James South O'Leary Thoo* (a) Former Regts. or Corps ; with Regtl. Nos.
5. Age last birthday... *27*
6. Posted for duty on..... at..... in category (or grade).....
8. If the disability is an injury was it caused  
(a) in action (b) on field service  
(c) on duty (d) off duty? (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 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

### Statement of Case.

**NOTE.**—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability. *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*



14. State whether the disabilities are
- |  | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war .. .. .                | .....               | .....             |
| (ii.) Previous active service.. .. .                       | .....               | .....             |
| (iii.) Climate in pre-war service .. .. .                  | .....               | .....             |
| (iv.) Ordinary military service before the war .. .. .     | .....               | .....             |
| (v.) Serious negligence or misconduct on the man's part. } | .....               | .....             |

14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?  
*(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)*

*The Complaints of no disability*

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

20. Do you recommend—

(a) Discharge as permanently unfit?

(b) Change to United Kingdom?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

*W. E. Poemier . Capt. Rame.*  
 Medical Officer in charge of case.

Station *Hazley Down* .. .. .

Date *3/11/19* .. .. .

\* Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause



# 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 *Saunders, Henry, Thos.*

Regiment from which discharged *Royal Newfoundland*

Regimental number *5687*

Intended address *Chang Is. Foggo.*

Height on discharge *5* Feet *3*

Color of hair on discharge ~~*Black*~~ *Black*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks

Figure on discharge *Medium*

Christian name of Father *(Dead)*

Christian name of Mother *(Dead)*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Chang Is. Sept 23, 1895.*

Nature and locality of civil employment required

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full)

*Henry J Saunders* (Rank) *Rt*

Station

*St. John's*

Date

*7-7-19.*

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.

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

Station

Date

August 18, 1919

Mr. H.T. Saunders,  
Change Islands.

Dear Sir:-

Referring to your application I enclose cheque for  
Seventy dollars (\$70.00), being amount of first payment due  
you on account of 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..... *H. J.* ..... 2. Surname..... *Saunders* .....  
3. Rank..... *Pte* ..... 4. Regtl. No..... *56 87* .....  
5. Address in full to which future payments of gratuity are to be forwarded..... *Chape Islands* .....  
6. Date of enlistment in the Regiment..... *June 11 1918* .....  
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..... *no* .....  
9. Address in full of such dependents..... .....  
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....  
11. Were you on active service only in Nfld. If so, give dates and particulars of such service..... *Overseas* .....  
12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *Thirteen months* .....  
..... 1. <sup>2</sup> .....

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 Gratitude? If so, state amount you and your dependents have already received and by whom paid.

.....  
.....  
.....

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

.....

16. Have you, during the present war, served in the Imperial Forces?

.....

17. Are you entitled to receive, or have you received any Gratitude in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.

.....  
.....

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

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

.....  
.....

19. Are you now serving in the Regt.?  
..... If not give:- (a) Date of discharge.  
*July 27, 19*..... (b) Reason for discharge.

.....  
.....

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service.

.....  
.....  
*England*

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

.....  
.....

.....

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

Signature of Applicant: - *Henry J Saunders*

Place of Residence: *Chapel Island*

Declared before me at: *For Jones*

This *11* day of *July* 19*19*....

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

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



1901

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



C.R. 5687

Oct. 20 1921.


The accompanying ~~Warrant~~ British War Medal

is/are forwarded herewith to

Henry T. Saunders

in respect of his service as No. 5687 Rank Pte.

Name H. T. Saunders Royal Nfld. Regt.  
~~Nfld. Forestry Corps.~~

 Receipt of the same should be acknowledged hereon.

Received

Frank S. Loefler  
(Brother-in-law)

Signature

Date

June 5/22

Address

Herring Head

[P.T.O.]

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39.

Regiment of *Royal Newfoundland.*

Number of Sheet

Signature of O. C. Company

*One*  
*W. D. [Signature]*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay				
No.		Age on	years	months	Trade				
Joined	Date	Place and Date of Enlistment			Religion				
Joined	Date	Period of	with Colours	years.	Place of Birth				
Joined	Date		with Reserve	years.					
<i>5684</i>	<i>Henry J. Saunders</i>	<i>St John</i>	<i>22</i>		<i>Carpenter</i>				
		<i>18/6/18</i>			<i>C of C</i>				
			<i>159</i>		<i>St John's Bay</i>				
			<i>365</i>						

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<i>Demobilized</i>	<i>St John's</i>	<i>8/8/19</i>			

To be carried over.

Post Office Department, Newfoundland

~~See No~~ 5687

From Post Office at Lander Bay

Dear Sir:

Under register letter  
no 4956 there is no  
person here by that  
name of Cte Henry  
G. Saunders, and  
forwarding same by  
mail.

Yrs Respectfully

5687  
Postmaster  
Lander Bay

7 Feb

ADDRESS LETTERS RESPECTING

~~Money payment to Accountant  
On M.O. Business, Supt. M.O. Branch.  
On Enquiries to Enquiry Branch  
On Telegrams to Supt. Telegraphs  
On General business to Minister of Posts.~~

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 567 Rank Plt Name Saunders H  
 Date of Enlistment 11-6-18 Address Chapel Falls District Fogo  
 Occupation Carpenter Classification for Discharge 1/6 Medical Category AI  
 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	1
B 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	3
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B 179c	B 120	M 93			

Date 7-19

O. C. Discharge Depot. H. News H

### PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Henry Saunders

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 11-7-19

O i/c. Re-clothing.

41287

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 567 Rank Plt Name Saunders H  
 Date of Enlistment 11.6.18 Address Change Falls District Logo  
 Occupation Carpenter Classification for Discharge 1/6 Medical Category A1  
 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	1
B 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	3
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B 179c	B 120	M 93			

Date 11-7-19 O. C. Discharge Depot H. News H

### PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.  
 I am  in a position to resume civilian occupation.

Henry Saunders  
 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 Other clothing

Date 11-7-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *B2326* to his home at *Orange 22d* and Release Certificate No. *3459* issued.

Date *11-7-19* *J. A. Shewell*  
Demobilization Office

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 *8-1-19*

Date *11-7-19* *J. A. Shewell*  
Depot Paymaster

Discharge approved for *25-7-19*

Forwarded with following documents to O.C. Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med	D.F. 1	<i>Form B</i>
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 103	ME 2		" 6	
B 179c	B 120	M 93			

Date *11-7-19* *J. A. Shewell*  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer in Records.  
Board of Pension Commissioners.

with following additional documents.

**Eligible for War Service Gratuity**

Date *JUL 25 1919* *K. R. Cooper Capt.*  
O. C. Discharge Depot.

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

Date *Aug 9/19*