

4729



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4729 Name Albert Sellars Corps 6 of 6

Questions to be put to the Recruit before Enlistment.

1. What is your name? *Albert Sellars*
2. What is your full Address? *Harbour Grace*
3. Are you a British Subject? *Yes*
4. What is your age? *19* Years *7* Months
5. What is your Trade or Calling? *Fisher-man*
6. Are you Married? *no*
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so, which? *no*
8. Are you willing to be vaccinated or re-vaccinated? *Yes*
9. Are you willing to be enlisted for General Service? *Yes*
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? *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? *Yes*

I, *Albert Sellars* do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

A *Albert Sellars* SIGNATURE OF RECRUIT.
 26-4-18 *James Arklie* Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, *Albert Sellars* 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 endorsed as replied to, and the said recruit has made and signed the declaration and taken the oath before me at *St Johns* on this *26* day of *April* 191*8*

Signature of Attesting Officer *Edmund*

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 *26* day of *April* 191*8*

If enlisted by special authority, such will be attached to the original attestation.

Date *26* 191*8* Place *St Johns* } 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) *Albert Sellars* re-enlisted in the (Regiment) *6th* on the (Date) *26 April 1918*

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Albert Sellers
 Apparent age 19 years 7 months. Height 5 feet 6 1/2 inches
 Chest Measurement { Girth when fully expanded 36 inches
 Range of expansion 5 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Thomas Sellers Ar Grace
 | Relationship Father

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or L'opot	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>26-4-18</u>									Signature of Officers certifying correctness of entries <u>W. H. King 7/19</u>
Joined at <u>St. John's</u> on <u>April 26-1918</u>									
<u>Discharged</u> <u>May 19/19</u>									
<u>Embarked St. John's train to Halifax N.S. 11-6-1918.</u>									
<u>Embarked for B.C. 26-10-18</u>									
<u>Joined Battle Force 3-11-1918</u>									
<u>Transferred from Force 22-4-1919</u>									
<u>Approved for medals 23-4-1919</u>									
<u>Temporarily absent for demobilization 22-5-1919</u>									
<u>Arrived to embarkment 18-6-1919</u>									
<u>Demobilization 11-11-1919</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>9-7-1919</u> [date of discharge]					1	years <u>85</u> days			
Pensions									

C.R. 4729

Extract from Daily Orders Part II Royal Newfoundland
Regiment, Depot St. John's, dated 12-7-19.

The discharge of the undernoted on demobilization has
+
been CONFIRMED by Officer i/c Records from noted
date 9-7-19.

4729, Pte. A. Sellars.

C.R. 4729

Extract from Daily Orders Part II Unit The Royal Rifles. Regt.
St. John's, June 27th, 1919.

The discharge of the undernoted on demobilization has been
APPROVED by G.O. Discharge Depot with effect from 25-6-19

4729 Pte. Albert Sellars.

C.R. 4729

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

Date June 18th 1919.

4729, Pte. A. Sellars.

Reported at Headquarters 1/6/19. NZ "Corsican"

which sailed Liverpool. May 22/1919.

C.R. 4729

Extract from Daily Orders Part II Unit The Royal 22nd. Regt
By Lt. Col. T. G. Nathan, D.S.O., Commanding 1st Bn. 3-21-20

The following joined the Bn. 3-21-20

4729 Pte. A. Sellars.

3 Copy

C.R. 4729

Extract from Nominal Roll Re-enforcement Draft No. 55, Embarked Folkestone,
26/10/18, from 2nd Batta, Royal Newfoundland Regiment, Hasleby Down, Camp,
Winchester, to 1st Batta, Royal Newfoundland Regiment B.M.F.

4729 Pte. Sellars, A.

MP.

C.F. 4729

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

#4729 Pte. H. Sellars.

Embarked for overseas with draft 11-6-18

Extract from Daily Orders part 11, from Unit The Royal
Newfoundland Regiment, St. John's, dated April 29, 1918.

#4729 Pte. A. Sellars.

Attested for General Service with the Royal Nfld. Regt.
Dated from 28/4/18.

N Sellers

C.R. 47

4729

~~PRU~~

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi), 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 } *Yickerman*
2. Regtl. No. *4729* 3. Rank. *Pte* 7a. If the soldier claims previous service in Army, he should state—
4. Name *S. Evans* (Surname) *B.* (Christian Name) (a) Former Regts. or Corps; with Regtl. Nos.
5. Age last birthday. *20*
6. Posted for duty on *20/5/18* at *St. John's* 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. 179a (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." *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 | na | |
| (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? } na

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

15. What is his present condition?

(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

no
 The complaint is no disability

16. Was an operation performed? If so, when and what was its nature? na
17. If not, was an operation advised and declined? na
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? na
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? na

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.

Registration
 W.P. [Signature]
 M.O.
 Capt. P.A.M.C.

Station Hazelton, B.C.

Date 28/4/19..

Medical Officer in charge of case.

* 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



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Albert Sellars, Regl. No. 4729

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

Allotment begins 1st June 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend.	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>3935</u>	<u>mother</u>	<u>Mrs Thomas (Frances) Sellars</u>	<u>Harvey Street St. John's St. Lawrence Place</u>	
Total Allotment, \$				<u>60^s</u>

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

Sig.) James Scott

Officer Commanding
A Company

(S) Albert Sellars

(Rank) Plt

H. Johns
May 17 1918



Nº 4168 a



1ST. NEWFOUNDLAND REGIMENT

I, Albert Sellers, **ALLOTMENTS**, Regl. No. 4729

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

Allotment begins 1st June 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3935	mother	Mrs Thomas (Frances) Sellers	Harvey Street Harbour Grace	
			Total Allotment, \$	<u>60^s</u>

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.) G James
 Officer Commanding
a Company

(Sig.) Albert Sellers
 (Rank) Pte

H Johns
May 17 1918

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
4729	Lt	Sellers H	£250	H Sellers

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

Date

July 1/18

H Sellers

No. 16732/1819

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.

Officer Commanding,
1/Bn Royal Nfld. Regt.,
Winchester



17th October 1918

6 Oct. 30th

1918

Subject: 4729. Pte. A. Sellars,

With reference to the following telegram (8940) from the Hon. Minister of Militia, received

Pay to 4729 Sellars £2:1:0

Draft £ 2:1:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Receipt hereunder.

J. P. Bairn LIEUT. COLONEL,
COMMANDING 2nd Bn ROYAL NEWFOUNDLAND REGT.
Officer Commdg. Batt'n
Royal Newfoundland Regiment

Received the sum of £2-1-0

£2-1-0 on account of cable remittance from Newfoundland.

A. Sellars

No. 4729 Rank Pte.

H. C. Manning Maj.
Chief Paymaster & O. i/c Records.

Witness.

H. C. Manning

No. 4729 Name Sellers. H. Sqn., Batty., or Company I Corps ROYAL NEWFOUNDLAND REG. Date of enlistment 10/10/18 G.C. 10 Service or Proficiency Pay 10/10/18

Date of last entry in Company Conduct Sheet () No. and date of last drunk () Period not reckoning towards freedom from extra fine () Sheet No. One Signature O.C. Company, etc. W. M. [Signature] Character [Signature]

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>Field</u>	<u>11/18</u>	<u>Pvt</u>	<u>1</u>	<u>1 case of Intoxication & Insult</u>	<u>Sgt White</u>	<u>Admonished</u>	<u>27/12/18</u>	<u>Lt Col Mather</u>	<u>Pay for same</u>
<u>"</u>	<u>8/4/19</u>	<u>"</u>	<u>1</u>	<u>Deficient of Cap you appear 9/5/19</u>	<u>Sgt [Signature]</u>	<u>Pay for same</u>	<u>8/4/19</u>	<u>Ngo Bernard</u>	<u>do</u>
<u>do</u>	<u>1/19</u>	<u>"</u>	<u>1</u>	<u>Ref. 1/19</u>	<u>"</u>	<u>do</u>	<u>1/19</u>	<u>do</u>	<u>do</u>

Army Form B. 122

Sellers, A

4729

May Sept.

July 11, 1919

#4729 Pte. Albert Sellars,

Harvey St.,

Harbor Grace.

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

W. J. W. Captain.
Quartermaster & L. C. Records

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, *Albert Sillis* 2. Surname, *Albert Sillis*
3. Rank, *Private* 4. Reg't No. *4729*
5. Address in full to which future payments of gratuity are to be forwarded, *Harvey St. St. Grace*
6. Date of enlistment in the Regiment, *21st 1918*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge, *Dorothy*
8. Relationship of such dependents, *Wife Thomas Sillis*
9. Address in full of such dependents, *Harvey St*
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier, *No*
11. Were you on active service only in Nfld. If so, give dates and particulars of such service, *France*
12. Give total length of time which you served on active service, whether in Nfld. or Overseas, *15 months*
13.

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

One

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.

Yes

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

Yes

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

Yes

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.

Yes

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

Yes

(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 *24 June* (b) Reason for discharge *Home 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.

Yes

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.

Yes

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: *Albert Sellers*
 Place of Residence: *Harvey St. No. 1100*
 Declared before me at: *St. Johns*
 This *26th* day of *June* 19*19*....

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

W. M. Quinn

POST DISCHARGE PAY.			
Date paid	to	Paid to	War Service
		Soldier, Dependents	Invalidity.
.....
.....
.....
Certified correct.			Paymaster

July 9, 1919

#4729 Pte. Albert Sellers,

Harbor Grace.

Dear Sir:-

Please find enclosed Discharge Certificate

No. 2877.

Yours truly

Paymaster & O.i/c Records Captain

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4729 Rank PC Name Sellers A
 Intended place of residence Mc Grace

2. Occupation Tradesman
 Classification of soldier E Medical Category A 4

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 24 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 and date ST. JOHN'S
JUN 24 1919
 Signature of soldier A. Sellers
 Signature of witness J. Howley Capt

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
JUN 24 1919
 Signature of soldier A. Sellers
 Signature of witness J. Howley Capt

STATEMENT OF SERVICE

7. Enlisted for service 26-4-18 No of days on Military
 Discharged from service 25-6-19 Plus 14 Days Service 440

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S
 Date JUN 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, Nfld
 Date July 9 1919
 Officer in Charge Records
 The Royal Newfoundland Regiment

25/32029/277

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 24-6-19

Regimental No 4729

Name Sellers, Albert

Rank Pte

Address Hr. Grace

Present Medical Category A1

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

Members of Board {

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

(sgnd) L. Paterson

Senior Medical Officer

" F. W. Burden

M. O. Depot

Military Service: 440 days

RECEIPT FOR A SOLDIER'S DOCUMENTS

HEADQUARTERS NEWFOUNDLAND REGIMENT

Commissions Board

Please receive documents as indicated below

No. RANK AND NAME

+129 G. Sellars. A.

N. F. P. 68	Non-effective account.	Medical history sheet.	Nfld. medical history sheet	Medical report on an invalid.	Proceedings on discharge.	Civil life qualification.	Descriptive return.	Active service casualty form.	Regimental conduct sheet	Company conduct sheet	Field conduct sheet	Report of Newfoundland Medical Boards					Attestation paper	Identity certificat	Allotment papers	A. P. W. 5463	Headquarters Travelling Board	Proceedings on discharge	D. F. 1	
E. 178	E. 178a	E. 179	E. 268	W. 3194	D. 400A	E. 103	E. 120	E. 121	E. 122	1st. Board	2nd Board	3rd Board	4th Board	Board	E. 1915	Form L	Form K	A. P. W. 5463	D. F. 2	D. F. 1				

Received above noted documents,

Dated _____ 19__

Signature of Officer forwarding documents:

Date 14.7.1919

The Royal Newfoundland Regiment

Class for Demobilization: 6

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 24.6.19

Regimental No. 4729

Name Sellers Albert Rank Pte.

Address H. Grace

Present Medical Category A7

Recommended for: (a) Immediate discharge _____
(b) Standard Medical Board _____

Members of Board

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

H. Watson
Senior Medical Officer

D. W. B. ...
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4929 Rank Plt Name Sellers A.
 Date of Enlistment 26.4.18 Address Weymouth District Weymouth
 Occupation Interment Classification for Discharge 8 Medical Category AI
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. 136	B 208	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	R 120	M 93		

Date 24.5.19 O. C. Discharge Depot. [Signature]

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable.....

(b) Clothing Supplied.....

Date.....

O. i. c. Re-clothing.....

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. R. 1914 to his home at Mr. Grace and Release Certificate No. 2993 issued.

Date 24-6-19

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 9-7-19

Date 24-6-19

J.H. [unclear]
Depot Paymaster.

Discharged approved for 95-6-19

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

N.F. P36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3484	B 122	Board Ist	" 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
B179c	B 120	M 93		

2 Tom B

Date 24-6-19

J.A. Snowball
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

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

with following additional documents.

Eligible for War Service Gratuity

Date JUN 25 1919

R.H. [unclear] MAJOR
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.

A. Sellers

Signature of Man.

J. A. Snowcroft
Signature of the Vocational Officer or his Representative.

Reg. No. 4729

Place

ST. JOHN'S

Date

24-6-19

191

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

MEDICAL HISTORY

Surname Sellers OF Christian Name Alton Albert

Table I.—GENERAL TABLE.

Birthplace:—Parish Harbour Grace County Nfld.

	SPECIAL RESERVE		REGULAR ARMY	
	on	at	on	at
Examined	26	April 1918	day of	191
Declared Age	19 $\frac{3}{2}$	years	days	years
Trade or Occupation	Fisherman			
Height	5	feet 6 $\frac{1}{2}$	feet	inches
Weight	135		lbs.	lbs.
Chest Measurement {	36		inches	inches
	5		inches	inches
Physical Development				
Vaccination Marks {	Right	Left	Right	Left
	—	(One)		
When Vaccinated	5 years ago			
Vision	R. E.—V=	6/10	R. E.—V=	
	L. E.—V=	6/10	L. E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<i>Alton Albert</i>			
(Rank)	Medical Officer.			Medical Officer.
Enlisted	at	St John's Nfld.	at	
	on	26 day of April 1918	on	day of 191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	The Royal Nfld Regt.	4729		
Transferred to				
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				

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 Signature
26-4-17	Var. <i>SB</i>
4-5-18	T.A.B. <i>SB</i>
17-5-18	T.A.B. <i>SB</i>
25-5-18	do. <i>SB</i>
<p><i>It is hereby certified that this soldier has been before a Travelling Medical Board and has been classified as <u>6</u> for Discharge on Demobilisation. Medical category <u>SB</u></i></p> <p><i>24.6.19</i> _____ <small>Date of T.M.B. Captain</small></p>	

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



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 *Albert Sellers*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4729*

Intended address *St. John's*

Height on discharge *5* Feet *8*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *—*

Figure on discharge *Medium*

Christian name of Father *Thomas*

Christian name of Mother *Frances*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *St. John's, 30 Sept. 1899*

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) *Albert Sellers*

Plt
(Rank)

Station *St. John's*

Date *24-6-19*

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

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 Corp. *Royal Newfoundland Land* 7. Former Trade or Occupation } *Fisherman*
2. Regtl. No. *4739* 3. Rank. *Pte.* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Sellers, A.* (Surname) (Christian Names) (a) Former Regts. or Corps; with Regtl. Nos.
5. Age last birthday. *20*
6. Posted for duty on *20. 11. 18* at *St. John's* 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*

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? } *na.*

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

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

No complaint of no disability

16. Was an operation performed? If so, when and what was its nature? *na.*
17. If not, was an operation advised and declined? *na.*
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? *na.*
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? *na.*

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.

Repatriation

W. Procunier

Medical Officer in charge of case.

Station *Hazleghat Camp*

Date *24. 4. 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

Casualty Form—Active Service.

Regiment or Corps ROYAL NEWFOUNDLAND REG.Rank Pte. Surname Sellars Christian Name AlbertReligion C. E. Age on Enlistment 19 years 7 monthsEnlisted (a) 24/1/18 Terms of Service (a) DURATION Service reckons from (a) 24/1/18

Date of promotion to present rank _____ Date of appointment to lance rank _____

Extended () Re-engaged () Qualification (b) _____
or Corps Trade and Rate _____Occupation Fisherman J. G. A. Curran Capt. Signature of Officer.

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. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...	26 OCT 1918		
		Disembarked...			
		Joined Battalion	3 NOV 1918		
		Arrived in UK		25/1/19	

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shoeing-Smith, &c. (17591.) Wt. W. 1887-E. 212. 1,000,000. D & S. Form B.103. (E. 1254.)

Rect of Rev Father, Thomas Sellars, St. Michael, Spfld I.P.T.O.

ORIGINAL

9286

NEWFOUNDLAND CONTINGENT

N.F.P./54

384

To: The Hon. The Min. of Militia.
St. John's,
Newfoundland.

" " Company.

MEMORANDUM OF STOPPAGES/CREDITS on account of

Cable to Nfld.

NOTE:- Charge under

Column

Credit Pay & Record Office. London.

Regtl No.	Rank & Name	Particulars & Authority	AMOUNT					
			£	s	d			
✓ 4729	Pte Sellars.	Cable to Nfld 5.5.19 charged as 10/- should read 12/- dr.diff. per Vr.323. <i>OK</i>			2	0		
					2	0		

CHECKED.
C.L.
16-6-19

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

R.A. Minard Maj.

13th June

1919.

Chief Paymaster & O. i/c Records.

CERTIFIED that the above Stoppages/Credits have been made
in the Pay Book " " Co'y for Period / / to / /

Dated at _____

191

C.C. " " Company.
Battalion:

DUPLICATE.

NEWFOUNDLAND CONTINGENT

N.F.P./54⁰

To: The Hon. The Min. of Militia.
St. John's,
Newfoundland.

No. 384
" " Company.

MEMORANDUM OF STOPPAGES/CREDITS on account of
Cable to Nfld.

NOTE: - Charge under Column
Credit Pay & Record Office, London

Regtl No.	Rank & Name		Particulars & Authority	AMOUNT				
				£	s	d		
4729	Pte	Sellars.	Cable to Nfld 5.5.19 charged as 10/- should read 12/-, dr. diff. per Vr. 232.			2		0
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> CHECKED. <i>C.L.</i> 16-6-19 </div>						2		0

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

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

13th June

1919.

Chief Paymaster & O. i/c Records.

CERTIFIED that the above Stoppages/Credits have been made
in the Pay Book " " Co'y for Period / / to / /

Dated at _____

191

C.C. " " Company.
Battalion.



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Albert Sellars, Regl. No. 4729

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

Allotment begins 1st June 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3435	mother	Mrs Thomas (Frances) Sellars	Harvey Street Harvey Street Harbour Grace	
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.) James Gient
 Officer Commanding
A Company
W. Johns
May 17 1918

(Sig.) Albert Sellars
 (Rank) Pte

ST. JOHN'S, JUN 24 1919

Royal Newfoundland Regiment.

Billeting Account,

To Pte A Sellers

Billeting Soldiers as undermentioned

from June 1/19 to June 25/19

H729 Pte A Sellers 25.00

ACCOUNT	<u>B.M.</u>
SA. NO.	<u>24845</u>
IND. LEDGER	INITIALS
PAY LEDGER	INITIALS
GRN. LEDGER	INITIALS

Certified correct for \$ 25.00

J. A. Snow Capt.
Billeting Officer.

A. Sellers.

B. H. S.

C.R. 4729

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

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

Name, *Albert Sellers*

Date, *19/11/19*

Place, *Harbor Grace*

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

SEP 23

1921.

The accompanying **Victory Medal** and/or **British War Medal**
is/are forwarded herewith to

Albert Sellars

in respect of his service as No. 4729 Rank Pte.

Name A. Sellars Royal Nfld. Regt.

Receipt of the same should be acknowledged hereon.

Received Victory & British War Medals

Signature Mrs. A. Sellars

Date Oct. 3rd.

Address Harvey St. Harbor Grace

[P.T.O.]

Receipt for Army Book 64

No. 4729 Name A. Sellar

To Certify that I have received the AB 64 of the above
named soldier.

Name A. Sellar

Date July 29, 1920

Place Hs. Grace

N.B. For completion and return to the Department of Militia
insert in corner of envelope "AB 64"

W

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121.
39.Number of Sheet 5th

Regiment of

Royal Newfoundland

Signature of O. C. Company

W. M. Churchill

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>4729</u> <u>Sellers</u> <u>Albert</u>	Age on	<u>19</u> years <u>1</u> months	<u>Fisherman</u>	
Joined	Date	Place and Date of Enlistment	<u>St. John's</u> <u>26.4.18</u>	Religion	
Joined	Date	Period of	with Colours <u>18</u> years. with Reserve <u>36</u> years.	Place of Birth	
Joined	Date			<u>St. John's</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>9 7/19</u>			

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

479

DEMOBILIZATION OF

Reg. No. 4729 Rank Plt Name Sellers A.
 Date of Enlistment 26.11.18 Address St. Johns District St. Johns
 Occupation Postman Classification for Discharge 2 Medical Category AI
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N. F. 136	B 288	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 400H	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 24.6.19 O. C. Discharge Depot. St. Johns

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action.

Date 24.6.19

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable _____
- (b) Clothing Supplied _____

Date _____ O i/c. Re-clothing _____

The Royal Newfoundland Regiment

4799

DEMOBILIZATION OF

Reg. No. 4799 Rank Plt Name Sellers A.
 Date of Enlistment 26.11.18 Address St. George's District St. George's
 Occupation Interpreted Classification for Discharge 2 Medical Category AI
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N. F. 136	B 268	B 121	N. F. Med.	D. F. 1.
B 178	W 3494	B 122	Board Iss.	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400H	Form L.	do 3rd	" 4
B 179a	D 400C	Form K.	do 4th	" 5
B 179b	B 108	ME 2.		" 6
B 179c	B 120	M 93.		

Date 24.5.19 O. C. Discharge Depot. J. H. News H.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date 24.5.19

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable _____
- (b) Clothing Supplied _____

Date _____ O i/c. Re-clothing _____

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 5-1714 to his home at 44 Grace and Release Certificate No. 26913 issued.

Date 24-6-19 J.A. Swaboff
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

Date 24-6-19 J.A. Swaboff
Depot Paymaster.

Discharge approved for 25-6-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. 136	B 268	B 121	N.F. Med	D.F. 1
B 178	N 3404	B 122	Board 1st	" 2
B 178a	D 53A	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
B179c	B 120	M 93		

2 Form B

Date 24-6-19 J.A. Swaboff
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:-

Officer in Records.
Board of Pension Commissioners.

with following additional documents **Eligible for War Service Gratuity**

Date JUN 25 1919 R.H. Sait MAJOR
O. C. Discharge Depot.

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

Date July 18/19 J.A. Swaboff

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 1964 to his home at W. H. Graham and Release Certificate No. 29713 issued.

Date 24-6-19 *J. A. Lamball*
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

Date 24-1-14 *J. A. Lamball*
Depot Paymaster.

Discharge approved for 25-6-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. 136	B 268	B 121	N.F. Med	D.F. 1	<i>2 Form B</i>
B 178	W 3484	B 122	Board Ist.	" 2	
B 178a	D 250A	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	
B179c	B 120	M 83.			

Date 24-6-19 *J. A. Lamball*
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents **Eligible for War Service Gratuity**

Date JUN 25 1919 *R.H. Lait* MAJOR
O. C. Discharge Depot.

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

Date July 1919 *[Signature]*

Reg. No. 4729 Rank Pte Name Sellers, A

Attested Address St Grace

Allotment A. S'tee

Date of Allotment Returned from Overseas 29-5-79

Returned on S.S. Corsican Cause Discharge

PASSED TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED ON DEMOBILISATION.

24.6.19
25.6.19