



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5239 Name Walter Short Corps Inftry

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---------------------------------|
| 1. What is your name? | 1. <u>Walter Short</u> |
| 2. What is your full Address? | 2. <u>Stants St. Bay</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>19</u> Years Months |
| 5. What is your Trade or Calling? | 5. <u>fisherman</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? | 10. Name
Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes</u> |

I, Walter Short 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.

Walter Short SIGNATURE OF RECRUIT.
W. R. Daymond SIGNATURE OF WITNESS.

20/5/18

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Walter Short 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 St. John's on this 20 day of May 1918.

Signature of Attesting Officer Charles R. ...

†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 May 20 1918

Place St. John's } Approving Officer.

The signature of the Approving Officer is to be affixed in the presence of the Recruit.
Here insert the "Corps" for which the Recruit has been enlisted.

* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz:—(Name) re-enlisted in the (Regiment) on the (Date)

DESCRIPTIVE REPORT ON ENLISTMENT

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

5239

Name Water Shot

Apparent age 19 years months. Height 5 feet 5 1/4 inches

Chest Measurement { Girth when fully expanded 34 inches
 Range of expansion 4 inches

Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Emily Shot
Wants St Bay | Relationship Mother

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>1-20-5-18</u>									
Joined at <u>St Johns</u> on <u>Monday 20-1918</u>									
<u>Embarked St Johns S. Colombelle to Halifax N.S.</u>									<u>22-7-18</u>
<u>Embarked for B.C.</u>					<u>23-11-18</u>				
<u>Disembarked France</u>					<u>25-11-18</u>				
<u>Joined Bather</u>					<u>5-7-1919</u>				
<u>Transfers from Rover 12 to Anna Kimblet</u>					<u>23-12-1919</u>				
<u>To be engaged for demobilization</u>					<u>22-5-1919</u>				<u>Arrived Capetown 1-6-1919</u>
<u>Demobilization St Johns</u>					<u>3-7-1919</u>				
Total Service forfeited as above.....									
Total Service towards Engagement to <u>3-7-1919</u> [date of discharge]					<u>1</u> years <u>45</u> days				
Pensions " " " " " " " " " " " "									

C.R. 5239

Extract from Daily Orders Part 11 Unit The Royal WFLA.
Regt. St. John's, July 7th, 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by officer i/c Records with effect from 3-7-19.

5239 Pte. Walter Short.

C.R. 5239

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

Date June 7th, 1919

5239 Pte. Walter Short

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

C.R. 5239

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

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

#5239 Pte. W. Short.

C.R. 5239

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. Depot, St. John's, June 9th, 1919

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

5239 Pte. Walter Short.

C.R. 5-239

Extract from Nominal Roll of draft No. 56, from the 2nd.,
Battalion, Winchester to the 1st., Battalion of the
Newfoundland Regiment, Embarked Southampton, 23/11/18.

#5239 Pte. W. Short.

C.R. 5239

Extract from Daily Orders part 11, from Unit The Royal
Wfls. Regt. St. John's, ~~22nd~~, dated July 25, 1918

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

#5239 Pte. Walter Shest.

C.R. 5239

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. St. John's, dated May 22, 1918.

#5239 Pte. Walter Short.

Attested for General Service with the Royal Nfld. Regt.
from 21.5.18

W. Short

C.R. 5239

1880

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 Former Trade or Occupation } Tradesman
2. Regt. No. 5239 3. Rank..... 7a. If the soldier claims previous service in Army, he should state—
4. Name Short Walter (Surname) (Christian Names) (a) Former Regts. or Corps; with Regt. Nos.
5. Age last birthday. 21.....
6. Posted for duty on May 21st 1918 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
na
na
na
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?
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?

na.
na.
na.
na.
Reproportionation

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.

O. E. Proemier . Capt Rame

Station . Hazeley Down

Medical Officer in charge of case.

Date 20/4/19

* 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

No. 18597/2064

NEWFOUNDLAND CONTINGENT



D
0654/73
7/1

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.

18th November 1918

Subject: 5239, Pte. W. Short

Nov. 20th 1918

Receipt hereunder.

Chambers

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

LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commdg. 2nd Batt'n,
Royal Newfoundland Regiment.

pay to 5239 Short £2:1:0

Received the sum of Two pounds
one shilling on account of
cable remittance from Newfoundland.

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

- Walter Short

A. A. Minshall Maj.
Chief Paymaster & O. i/c Records.

No. 5239 Rank Pte.

Witness A. L. Carter, Pte.

No. 5239 Name Short, W. Sqn., Batty., or Company } D. Corp. Newfoundland Date of enlistment } 20/5/18 G.C. Badges } Service of Proficiency Pass }
 Date of last entry in Company Conduct Sheet } No. and date of last drink } Period not reckoning towards freedom from extra fine } Sheet No. } Signature O.C. Company, etc. } W. Longest } Character } Good

Army Form B. 122.

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
				Deficient for 1st class		Admin. order	1/1/19		Deficient
				Deficient of 1st class		Admin. order	2/1/19		Deficient

Short, W

5239

Ray rept.

July 3, 1919

#5239 Pte. Walter Short,

Hants Harbor, T.B.

Dear Sir:-

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

Yours truly

Captain,
Paymaster & Officer i/c records.

587

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 *J. A. Short*.....
 3. Rank *S. Private*..... 4. Regt. No. *5239*.....
 5. Address in full to which future payments of gratuity are to be forwarded.....
D. A. Short
St. John's Bay
 6. Date of enlistment in the Regiment..... *May 20th / 18*.....
 7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
Minnie Short
 8. Relationship of such dependents..... *Sister*.....
 9. Address in full of such dependents..... *St. John's Bay*.....
 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 Hfld. If so, give dates and particulars of such service..... *No*
 12. Give total length of time which you served on active service, whether in Hfld. or Overseas..... *11 Months in Hfld.*
11 Months Overseas

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

No

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

No

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

No

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

No

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

No

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

No

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

19. Are you now serving in the Regt.?
If not give:- (a) date of discharge (b) Reason for discharge.

Yes

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.

No

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

No

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

Signature of Applicant:

W. P. Short

Place of Residence:

San Antonio, T. B.

Declared before me at:

S. J. G. Rio, N. G. L.

This

5th day of *June* 19*19*.....

John M. McCarthy
J.P.

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

POST DISCHARGE PAY.

Date paid Paid
Soldier. Dependent.

War Service
Gratuity.

Net amount
due

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

Certified correct.

Paymaster

Jul 3, 1919

#5239 Pte. Walter Short,

Hant Harbor, T.B.

Dear Sir:-

Please find enclosed "Discharge Certificate
No. 2273."

Yours truly

Captain
Paymaster & Officer i/c Records.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5239 Rank Plt Name Short, Walter
 Intended place of residence St. John's
2. Occupation Fisherman
 Classification of soldier R Medical Category PT
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 5 1919
- H. Mustard
 Comanding 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 5 1919
- Walter Short
 Signature of soldier
A. McEustace
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.
- Place and Date ST. JOHN'S
5-6-19
- Walter Short
 Signature of soldier
W. J. Eaton
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 21-5-18 No of days on Military
 Discharged from service 19-6-19 Plus 14 days Service 409

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.
- Place ST. JOHN'S
 Date JUN 19 1919
- R. H. Lait Capt.
 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 3/1919
- Mr. Bowley Capt
 Officer i/c Records
 The Royal Newfoundland Regiment

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

MEDICAL HISTORY

Surname Short

OF Christian Name Walker

Table I.—GENERAL TABLE

Birthplace:—Parish Hants. Co. N.B. County Nfld

SPECIAL RESERVE

REGULAR ARMY

Examined	on <u>21</u> day of <u>May</u> 191 <u>8</u>	on	day of	191
	at <u>S. Johns</u>	at		
Declared Age	<u>19</u> years	days	years	days
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet <u>5 1/4</u> inches	feet	inches	
Weight	<u>120</u> lbs.	lbs.		
Chest Measure-ment	Girth when fully expanded	<u>34</u> inches	inches	
	Range of Expansion	<u>4</u> inches	inches	

Physical Development

Vaccination Marks	Right	Left	Right	Left

When Vaccinated

Vision	R.E.—V= <u>6/12</u>	R.E.—V=
	L.E.—V= <u>6/12</u>	L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by (Signature) L. M. Patterson

(Rank) Major Medical Officer.

Medical Officer.

Enlisted at S. Johns on 21 day of May 1918

Corps. Regt. No. Corps. Regt. No.

Joined on Enlistment Rehoboth Nfld. Regt. 1239

Became non-effective by on day of 191 on day of 191

(Signature)

(Rank)

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (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 } Former Trade } Fisherman
 or Occupation }
2. Regtl. No. 5239 3. Rank 1st Lt 7a. If the soldier claims previous service in Army, he should state—
 (a) Former Regts. or Corps; with Regtl. Nos.
4. Name Short Walter
 (Surname) (Christian Names)
5. Age last birthday 21
6. Posted for duty on May 20/18 at St. Johns
 in category (or grade).....
8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty ? (b) Date of Discharge ;
 (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
 (a) When (d) Particulars of Pension or Gratuity (if any)
 (b) Where
 (c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 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 general 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? } *a. c.*

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.)

The employee of an disability

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

Repatriation

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.

*Regimental Surgeon
Capt R.A.M.C.*

Station *Harley D. Camp*

Date *30-4-19*

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



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 Office 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

Walter Short

Regiment from which discharged **Royal Newfoundland**

Regimental number

5239
Hants H. I.B.

Intended address

Height on discharge

5 Feet *6*

Color of hair on discharge

Black

Complexion

Fair

Color of eyes

Brown

Descriptive Marks

Figure on discharge

Medium

Christian name of Father

Thomas
Emily

Christian name of Mother

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth

Hants H. 17th Oct. 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)

Walter Short

A. G.
(Rank)

Station

St John's

Date

4-6-19

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.

Medical Officer in Hospital.
Unit, or Command Depot.

Station

Date

Casualty Form - Active Service.

Regiment or Corps ROYAL NEWFOUNDLAND REG.

Rank Pte Surname Short Christian Name W.

Religion Methodist Age on Enlistment 19 years — months

Enlisted (a) 20/5/18 Terms of Service (a) DURATION. Service reckons from (a) 20/5/18

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

Extended — Re-engaged — Qualification (b) —
or Corps Trade and Rate —

Occupation Fisherman Signature of Officer W. H. Long Capt.

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 ...			
		Disembarked...		28 NOV 1918	
		Joined Batt.		5 JAN 1919	
		Arrived in UK			

Short

(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-P 1124. 1,000,000/8/18. D & S. Form B.103. (E. 1955.)
 Next of Kin: Mother: Emily Short: Santa St.: Trinite Bay: N.S.L.D. (P.T.O.)

The Royal Newfoundland Regiment

Class for Demobilization:—

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

Regimental No. 57229

Name Short Walter Pls

Address Hants St

Present Medical Category A1

Recommended for:—

- (a) Immediate discharge
- (b) Standing Medical Board

Members of Board

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

Spencer
Senior Medical Officer

Dee Burden
M.O. Depot

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 5239 Rank Pvt Name Shant Walsby
 Date of Enlistment 21.5.18 Address Rantz Hs District Trinity
 Occupation Fisherman Classification for Discharge R 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	
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 4.6.19

[Signature]
O. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

[Signature]

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 Army cap

Date 5-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *P. 44. 4. 3. 557* to his home at *Hants Ar* and Release Certificate No. *2289* issued.

Date *5-6-19* *J.A. Snow Capt.*
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 *3-7-19*

Date *5-6-19* *H. W. Hunt*
Depot Paymaster.

Discharge approved for *19-6-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	1	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122		Board 1st	" 2	1
B 178a	1 D 400A	B 1915	1	do 2nd	" 3	2 Form B.
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	1 D 400C	Form K		do 4th	" 5	
B 179b	B 103	ME 2	1		" 6	
B 179c	B 120	M 93				

Date *5-6-19* *J.A. Snow Capt.*
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity
Eligible for War Service Gratuity

Date *R.H. Sait Capt.*
O. C. Discharge Depot.

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

Date *JUN 10 1919*

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.

Signature of Man.

Reg. No.

Walter Short

Signature of the Vocational Officer or his Representative.

J. H. Brown Capt.

Place

ST. JOHN'S.

Date

5 - 6

1919

June 11, 1939

Mrs. Moses Short,
Hant's Hr.

Dear Madam:

I beg to acknowledge receipt
of your letter of May 1st. enclosing \$20.63, and
as requested I have cabled £4. 2. 2, being the
equivalent of \$20.00, to No. 5239, Ptc. Walter
Short.

Yours truly

Lieut.
Per Paymaster.

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

OCT 20 1921

1921.

The accompanying ~~Victory Medal~~ British War Medal

is/are forwarded herewith to

Walter Short

in respect of his service as No. 5239 Rank Pte.

Name W. Short Div. 18 Royal Nfld. Regt.

Receipt of the same should be acknowledged hereon.

Received _____

Signature I received the medal

Date Oct 21 1921

Address Wants Harbour Trinity Bay

[P.T.O.]

Receipt for Army Book 64

No. 5239 Name W. Shook

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

Name Walter Shook

Date.....

Place Hanks Harbor

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

WJ 12/20

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
59.

Number of Sheet 0122

Regiment of Royal Newfoundland

Signature of O. C. Company C. B. Dick's Lieut

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay		
No.	<u>5239</u> <u>Street Walter</u>	Age on	<u>19</u> years <u>1</u> months	<u>Jesuit</u>			
Joined		Date	<u>20.5.1914</u>			Religion	
Joined		Date	} with Colours <u>4 1/2</u> years. with Reserve <u>3 1/2</u> years.	<u>Meth</u>		Place of Birth	
Joined		Date					<u>Hault Harbor T.B.</u>
Joined		Date					

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>John's</u>	<u>3 1/2</u>			

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5239 Rank Plt Name Short Walter
 Date of Enlistment 21.5.18 Address Rantz As District Trinity
 Occupation Farmer Classification for Discharge R Medical Category AI
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P36	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 4.6.19

H. H. H. H.
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a v ivilian occupation.

Walter Short

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable £6.00

(b) Clothing Supplied new cap

Date 5-6-19

O i/c. Re-clothing.

15239

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5239 Rank Pvt Name Short Walter
 Date of Enlistment 2.5.18 Address Bank St Trinity District Trinity
 Occupation Fisherman Classification for Discharge R Medical Category AI
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P36	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 4.6.19 O. C. Discharge Depot. W. Short

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.
 I am in a u vivilian occupation.

Walter Short

Particulars passed to Vocational Officer for information and action.

Date
 (Stamp: OFFICE FOR WORKING MEN)

2. Clothing.
 Certified that Clothing Regulations have been complied with:—
 (a) Clothing Allowance payable \$6.00
 (b) Clothing Supplied none

Date 5-6-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *A.4.14.9:557* to his home at *Hanks Ave* and Release Certificate No. *2289* issued.

Date *5-6-19*
J.A. Snow Capt
 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 *3-7-19*

Date *5-1-19*
H. W. ...
 Depot Paymaster.

Discharge approved for *19-16-19*

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

N.F. P36.	B 268.	B 121.	N.F. Med.	D.F. 1.
F 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.		

Form B.
P 24

Date *5-6-19*
J.A. Snow Capt
 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 *JUN 19 1919*
R.H. ...
 O. C. Discharge Depot.

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

Date *June 10 1919*
J. ...
R. ...

Reg. No.

1239

nk.

He

Name

Short. W.

Attested

Address

Laurel

Allotment

Allottee

Date of Allotment

Returned from Overseas

1.6.19

Returned on S.S.

Cyprian

Cause

Discharge

4.6.19

PASSED TO DEMOBILIZATION C

19.6.19

DISCHARGE APPROVED ON DEMOBILIZATION.