



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 4676 Name Alfred Snook Corps C of E

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

- |                                                                                                                                    |                                               |
|------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|
| 1. What is your name? .....                                                                                                        | 1. <u>Alfred Snook</u> .....                  |
| 2. What is your full Address? .....                                                                                                | 2. <u>Battle Mt, Labrador</u> .....           |
| 3. Are you a British Subject? .....                                                                                                | 3. <u>yes</u> .....                           |
| 4. What is your age? .....                                                                                                         | 4. <u>24</u> Years <u>      </u> Months ..... |
| 5. What is your Trade or Calling? .....                                                                                            | 5. <u>Fisherman</u> .....                     |
| 6. Are you Married? .....                                                                                                          | 6. <u>no</u> .....                            |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } .....                           | 7. <u>no</u> .....                            |
| 8. Are you willing to be vaccinated or re-vaccinated? .....                                                                        | 8. <u>yes</u> .....                           |
| 9. Are you willing to be enlisted for General Service? .....                                                                       | 9. <u>yes</u> .....                           |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? .....                                     | 10. Name .....                                |
|                                                                                                                                    | Corps .....                                   |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... | 11. <u>yes</u> .....                          |

I, Alfred Snook 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  
24-4-18

Alfred Snook SIGNATURE OF RECRUIT.  
James Ankle Signature of Witness.

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

I, Alfred Snook 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 Johns on this 24 day of April 1918

Signature of Attesting Officer James Ankle

### †CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the: .....

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

Date.....1918 }  
Place..... } Approving Officer.

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

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

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Alfred Snook  
 Apparent age 24 years - months. Height 6 feet 4 inches  
 Chest Measurement { Girth when fully expanded 38 inches  
 Range of expansion 4 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mary Snook Battle St., Labrador  
 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 L'epot	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>24-4-18</u>									
Joined at <u>St. John's</u> on <u>April 24-1918</u>									
<u>Discharged July 14-1919</u>									
<u>Embarked St. John's S.S. Columella to Halifax N.S. 22-7-18.</u>									
<u>Embarked for <sup>Halifax</sup> <del>St. John's</del> <sup>London</sup> <del>St. John's</del> <sup>Sept 26-18</sup> <del>St. John's</del> <sup>Sept 26-18</sup></u>									
<u>Embarked for <sup>St. John's</sup> <del>St. John's</del> <sup>Sept 23-11-18</sup> <del>St. John's</del> <sup>Sept 23-11-18</sup></u>									
<u>Joined Base Depot <sup>St. John's</sup> <del>St. John's</del> <sup>Nov 28-11-18</sup> <del>St. John's</del> <sup>Nov 28-11-18</sup></u>									
<u>Arrived <sup>St. John's</sup> <del>St. John's</del> <sup>Nov 23-11-18</sup> <del>St. John's</del> <sup>Nov 23-11-18</sup></u>									
<u>Arrived <sup>St. John's</sup> <del>St. John's</del> <sup>Nov 1-6-1919</sup> <del>St. John's</del> <sup>Nov 1-6-1919</sup></u>									
<u>Demobilization <sup>St. John's</sup> <del>St. John's</del> <sup>July 14-1919</sup> <del>St. John's</del> <sup>July 14-1919</sup></u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 14-7-1919 [date of discharge] 1 years 82 days  
 Pensions " " " " " " " " " " " "

Snook, A

4676

Hay Sept.

July 14, 1919

#4676 Pte. Alfred Snook,  
Battle Harbor,  
Labrador.

Dear Sir:-

Please find enclosed Discharged Certificate #3015.

Yours truly,

Raymaster & U.I/c Records. **Captain,**

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 4676 Rank P6 Name Snook A  
 Intended place of residence Battle Hill Labrador

2. Occupation Fisherman  
 Classification of soldier E Medical Category A 1

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 16 1919

*[Signature]*  
 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 16 1919

*[Signature]*  
 Signature of soldier

*[Signature]*  
 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  
JUN 16 1919

*[Signature]*  
 Signature of soldier

*[Signature]*  
 Signature of witness

### STATEMENT OF SERVICE

7. Enlisted for service 24-4-18 No of days on Military  
 Discharged from service 30-6-19 PLUS 14 DAYS Service 447

### APPROVAL OF DISCHARGE

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

Place ST. JOHN'S  
 Date JUN 30 1919

*[Signature]*  
 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 14/1919

*[Signature]*  
 Officer in Charge  
 The Royal Newfoundland Regiment

*[Handwritten]* A 11079/3015

**Casualty Form—Active Service.**

ROYAL NEWFOUNDLAND REG.

Rank Pte Regiment or Corps ROYAL NEWFOUNDLAND REG.  
 Surname Snook Christian Name A.  
 Religion 6 of 6 Age on Enlistment 24 years — months  
 Enlisted (a) 24/4/18 Terms of Service (a) DURATION Service reckons from (a) 24/4/18  
 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. R. 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		
		<u>Arrived in UK</u>		<u>13/4/19</u>	

(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, Shoeling-Smith, & Co (17581.) W & W 1887-P 1124. 1,000,000. 8/18. D & S. Form B/103. (E. 1256.)

Next of Kin: — Mother: Mary Snook Battle Co: Sabadori N. F. L. D.

# 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

*16.6.19*

Regimental No *4676*

Name *S. Cook*

*sergeant*

Rank

Address

*300th St.*

Present Medical Category

*A-1*

Recommended for: (a) Immediate discharge

(b) Standard Medical Board

Members of Board

*R. H. Lait Major*  
O.C. Discharge Depot.

*M. P. Brown*  
Senior Medical Officer

*S. W. Burden*  
~~M. O. Depot~~

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. H67L Rank Pte Name Patrick A. Brooks  
 Date of Enlistment 24.4.18 Address Buller St. St. John's District St. John's  
 Occupation Fisherman Classification for Discharge 6 Medical Category A1  
 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	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 16.6.19 O. C. Discharge Depot. St. John's

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am \_\_\_\_\_ in a position to resume civilian occupation.  
Patrick A. Brooks  
fisherman

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 16-6-19 O i/c. Re-clothing \_\_\_\_\_



**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrants No. P. 1823 to his home at Battle Pt Labrador and Release Certificate No. 2843 issued.

Date 16-6-19

*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 14-6-19

Date 16-6-19

*J.A. Snowcraft*  
Depot Paymaster.

Discharge approved for 30-6-19  
Forwarded with following documents to O.C. Discharge Depot.

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
B179c	B 120	M 93		

*2 Form B*

Date 16-6-19

*J.A. Snowcraft*  
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 30 1919

*R.H. Jant*  
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,

*proof. A+*

Signature of Man.

*J. A. Crawford*

Reg. No. 4673

Signature of the Vocational Officer or his Representative.

Place

*RT Johns*

Date

*16-6-19.*

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

# MEDICAL HISTORY

Surname Snoor OF Christian Name Alfred

Table I.—GENERAL TABLE.

Birthplace:—Parish Battle of Labrador County 1

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>24<sup>th</sup></u> day of <u>Apr</u> 191 <u>8</u> at <u>S. Johns</u>		on _____ day of _____ 191 _____ at _____	
Declared Age	<u>24</u> years _____ days		years _____ days	
Trade or Occupation	<u>Fisherman</u>			
Height	<u>6</u> feet <u>4</u> inches		feet _____ inches	
Weight	<u>187</u> lbs.		lbs. _____	
Chest Measurement	Girth when fully expanded... <u>38</u> inches		_____ inches	
	Range of Expansion... <u>4</u> inches		_____ inches	
Physical Development				
Vaccination Marks	Arms	<del>_____</del>		
	Number			
When Vaccinated				
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>Lanning Peterson</u>			
(Rank)	<u>Major</u>			
Enlisted	at <u>S. Johns</u> on <u>2<sup>nd</sup></u> day of <u>Apr</u> 191 <u>8</u>		at _____ on _____ day of _____ 191 _____	
Joined on Enlistment	Corps.	<u>The Royal</u>	Corps.	
	Regtl. No.	<u>4676</u>	Regtl. No.	
Transferred to	<u>Africa Regt</u>			
Became non-effective by	on _____ day of _____ 191 _____		on _____ day of _____ 191 _____	
[Signature]				
[Rank]				

Table II.—Only for admission to hospital or to the sick

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on syphilis, admission of treatment
	Day	Month	Year	Day	Month	Year			
Gosham	26	4	18				Septic Aemia		

ist in case of Warrant Officers treated in quarters.

the cause, nature or treatment of the case likely to be of interest or of future use. In case of  
and re-admissions to hospital will be shown. The subsequent progress, including particulars  
sent out of hospital, transfers, etc., will be given in the special syphilis case sheet.

Signature of Medical Officer

*R. ...*

*[Handwritten signature]*

**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
3-5-18	Inoc 1 <sup>st</sup> LP
25.4.18	Vacc LP
10-5-18	T. A. B. 2 <sup>nd</sup> LP
17-5-18	T.A.B. 3 <sup>rd</sup> LP

It is hereby certified that this soldier has been before a Travelling Medical Board and has been classified as E for Discharge on Demobilisation. Medical category A  
 16.6.19  
 Date of T.M.B. *[Signature]*

**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 *Snook, Alfred*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4676*

Intended address *Battle St. Labrador*

Height on discharge *6 Feet 7 in*

Color of hair on discharge *Black*

Complexion *Dark*

Color of eyes *Brown*

Descriptive Marks *Tall.*

Figure on discharge *Tall.*

Christian name of Father *—*

Christian name of Mother *Mary*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Labrador 10-3-1894*

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) *Alfred Snook* (Rank) *Plt*

Station *—* Date *13-6-19*

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 i|c Hospital.  
Unit, or Command Depot.

Station *—* Date *—*

**Medical Report on an Invalid.**

Station Hazelton Down  
 Date 1/5/19

- |                                   |                                              |
|-----------------------------------|----------------------------------------------|
| 1. Unit <u>Royal Newfoundland</u> | 7. Former Trade } <u>Fisherman</u>           |
| 2. Regimental No. <u>4676</u>     | or Occupation }                              |
| 3. Rank <u>plc</u>                | 7A. If with previous service in Army, state— |
| 4. Name <u>Snook Albert</u>       | (a) Former Unit;                             |
| 5. Age last birthday <u>28</u>    | (b) Regimental No.;                          |
| 6. Enlisted { on <u>Apr 24/18</u> | (c) Date of Discharge;                       |
| at <u>01/18</u>                   | (d) Cause of Discharge.                      |

**8. Disability in respect of which invaliding is Proposed.**  
 (Other disabilities should be reported upon in answer to question No. 19).

Statement of Case.

*Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.*

9. Date of origin of disability.
10. Place of origin of disability.
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

*nil*  
*nil*  
*nil*  
*nil*

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
- (b) constitutional or hereditary, and not aggravated by service during the present war.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

*na*



13. What is his present condition?

*He complains of no disability*

*Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.*

14. If the disability is an injury, was it caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

15. Was a Court of Inquiry held on the injury?

- If so—
- (a) When?
  - (b) Where?
  - (c) Opinion?

16. Was an operation performed? If so, what?

*na*

17. If not, was an operation advised and declined?

*na*

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly\* attributable to active service?

*na*

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

*na*

*Repatriation*

20. Do you recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

*W. C. Proctor*

*Sgd. W. C. Proctor*

*Capt. Rame*

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except †

Station *Hazley Down*

\_\_\_\_\_  
Officer in charge of Hospital.

Date *1/5/19*

\*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.

† Delete this word if no exceptions are to be made.

July 16, 1919

#4676 Pte. Alfred Snooks,

Battle Harbor,

Labrador.

Dear Sir:-

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

Yours truly

Captain & Paymaster

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

- Christian name *Alfred* ..... 2. Surname *Sooke* .....
3. Rank *Pte* ..... 4. Regtl. No. *4676* .....
5. Address in full to which future payments of gratuity are to be forwarded..... *Battle St. Labrador* .....
6. Date of enlistment in the Regiment..... *Apr 24/18* .....
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....  
.....
8. Relationship of such dependents.....  
.....
9. Address in full of such dependents.....  
.....
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....
11. Were you on active service only in 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..... *From Apr 24/18 to June 16/19* ..... 1.3 .....

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

..... *No* .....

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

.....

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

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

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.

.....

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..... (b) Reason for discharge.....

..... *Temporary* ..... *Demobilization* .....

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

*France, Belgium & Germany - From Nov. 1918 to April 1919*

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

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:

*him*  
*alfred S. Lago*  
*mark*

Place of Residence:

*Battle St. Labrador,*  
*St. John's, Nfld.*

Declared before me at:

*17th* day of *June* 19*19*

This

*John M. Carthy*

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

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



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Alfred Snook, Regl. No. 4676

hereby agree, until further notification by me, and in similar official form to make an Allotment of                      Dollars and Fifty Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup> <sub>or</sub> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> <sub>or</sub> 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)
3889	mother	Mrs Stephen (Mary) Snook	Rattle Her, Labrador	
			Total Allotment, \$	50

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.) [Signature]  
Officer Commanding  
A. Company  
St John's  
May 16th 1918

Sig.) Alfred Snook  
[Signature]  
Rank Pte.  
Witness: James Arkhe  
Capt.

ST. JOHN'S, June 9<sup>th</sup> 1919

# Royal Newfoundland Regiment.

Billeting Account,

To M<sup>rs</sup>. Tracey

St. Le. Merchant. St.

Billeting Soldiers as undermentioned

from June 1<sup>st</sup> 1919 to June 7<sup>th</sup> 1919

4626 - Mr. A. Brock 7 Lo

ACCOUNT

CR NO

IND LEDGER

PAY LEDGER

Certified correct for

B. M. Tracey  
23 139

7 Lo

R. G. [Signature]

Billeting Officer.

m Tracey

ST. JOHN'S, June 16<sup>th</sup> /19

# Royal Newfoundland Regiment.

Billeting Account,

To M<sup>10</sup> M. Tracey  
Le. Merchant. Rd

Billeting Soldiers as undermentioned

from June 7<sup>th</sup> /19 to June 14<sup>th</sup> /19

4676 Mr. A. Smith 7 Lo

ACCOUNT	<u>B.M.</u>
CH. NO	<u>23768</u> <u>Rev</u>
IND. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

Certified correct for \$ 7.20

[Signature]  
Billeting Officer.  
M. Tracey





A Snook

C.R.

4676

~~1110~~

Medical Report on an Invalid.

Station Hazley Down

Date 1/15/19

- 1. Unit Royal Newfoundland
- 2. Regimental No. 4678
- 3. Rank Pte
- 4. Name Saunders Albert
- 5. Age last birthday 25
- 6. Enlisted { on April 18  
at St John's
- 7. Former Trade } Fisherman  
or Occupation }
- 7A. If with previous service in Army, state—  
(a) Former Unit;  
(b) Regimental No.;  
(c) Date of Discharge;  
(d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

- 9. Date of origin of disability. nil
- 10. Place of origin of disability. nil
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. nil

- 12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—  
(a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition, to which it is attributed should be stated, see Notes on page 3).  
(b) constitutional or hereditary, and not aggravated by service during the present war.  
(c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

na.

13. What is his present condition?

*Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.*

*He complains of no disability*

14. If the disability is an injury, was it caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

15. Was a Court of Inquiry held on the injury?

- If so—(a) When?
- (b) Where?
- (c) Opinion?

16. Was an operation performed? If so, what?

*na.*

17. If not, was an operation advised and declined?

*na.*

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly\* attributable to active service?

*na.*

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

*na.*

*Repatriation*

20. Do you recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

*W.E. Proemier. Capt Ramo*

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except †

Station *Hazeley Brown*

Officer in charge of Hospital.

Date *1/5/19*

\*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.

† Delete this word if no exceptions are to be made.





C.R. 4676

Extract from Daily Orders Part II Royal Newfoundland Regiment  
17th  
Depot St. John's dated July ~~19th~~ 1919.

The discharge of the undernoted on demobilization has been  
CONFIRMED BY Officer i/c Records from noted date  
14-7-19.

4676, Pte. Alfred Snook.

C.R. 4676

Extract from Daily Orders Part 11 Unit The Royal Nfld.  
Regt. St. John's, June 19th, 1919.

The discharge of the undernoted on demobilization has been  
APPROVED by O.C. Discharge Depot with effect from 30-6-19.

4676 Pte. A. Snook.



C.R. 4676

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

Date                      June 18th 1919.

4676, Pte. A. Snook.

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

C.R.

4676

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.

#4676 Pte. **A** Snook.

C.R. 4676  
Counter No.

# NEWFOUNDLAND POSTAL TELEGRAPHS.



## Cable Connection with all the World

### All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

**(NOT TRANSMITTED)**

Signature of Sender \_\_\_\_\_ Address \_\_\_\_\_

Line Number	Rcd	By	Sent	by	Check
-------------	-----	----	------	----	-------

*Dated*      **January 21st., 1919**

*To*      **Mrs. Mary Snook,  
Battle Hr. Labrador.**

**BEG TO INFORM YOU THAT LAST REPORT CONCERNING WHEREABOUTS  
OF YOUR SON WAS WITH THE FIRST BATTALION ON ACTIVE  
SERVICE.**

**J. R. Bennett,  
Minister of Militia.**

**FOR TYPEWRITER**

C.R. 4676

EXTRACT FROM NOMINAL ROLL, OF SICK AND WOUNDED  
DATED. 30 SEPTEMBER 1918.

---

ADMITTED TO ALEXANDRA HOSPITAL, GOSHAM. 26/9/18.  
4676 Pte. ALFRED SNOOK.

CYST NECK.

C.R. 4676

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.

---

4676 <sup>1</sup>/<sub>2</sub> te. A. Snook.

=

C.R. 4676

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

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

#4676 Pte. Alfred Snook

C.R. 4676

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

#4676 Pte. Alfred Snook.

Attested for General Service with the Royal Nfld. Regt.  
from 24/4/18.

Receipt for Army Book 64

No. 4676 Name A. Snook

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

Name A. Snook

Date Aug 16<sup>th</sup> 1920  
Place Battle Hill

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.

Number of Sheet 101Forms  
B 121.  
39Regiment of Royal NewfoundlandSignature of O. C. Company W. M. Churchill

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay		
No.	<u>Smacka</u>	Age on	<u>21</u> years <u>0</u> months	<u>Fisherman</u>			
Joined	Date	Place and Date of Enlistment	<u>St John's</u>	Religion			
Joined	Date	Period of	with Colours <u>12</u> years. with Reserve <u>30</u> years.	Place of Birth			
Joined	Date			<u>St John's, Labrador</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>St John's</u>	<u>14</u>	<u>7</u> <u>19</u>		

To be carried over

Army Form B. 121.

44676  
Demobilization Form 3

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 44676 Rank Plt Name Snook A  
 Date of Enlistment 24.4.18 Address Bulky Hr District Clarendon  
 Occupation Fisherman Classification for Discharge ..... Medical Category AI  
 Recommendation S.M.B. .... Disability Rating .....  
 Passed to Demobilization Officer with following documents:—

N.P. 136	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 16.6.19 .....  
 O. C. Discharge Depot. [Signature]

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am ..... in a position to resume civilian occupation. with Snook  
mark

Particulars passed to Vocational Officer for information and action.

Date 16.6.19 .....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable £6
- (b) Clothing Supplied [Signature]

Date 16-6-19 ..... O i/c. Re-clothing

**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrants No. R 1823 to his home at Battle Hill and Release Certificate No. 2843 issued.

Date 16-6-19

*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 14-6-19

Date 16-6-19

*J.M. [Signature]*  
Depot Paymaster.

Discharge approved for 30-6-19

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

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	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 Form B*

Date 16-6-19

*J.A. Snowball*  
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 30 1919

*R.H. [Signature]*  
O. C. Discharge Depot.

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

Date July 10 1919

*J. [Signature]*  
*[Signature]*

Reg. No. *4676* Rank *1st Lt* Name *Snodgrass, G*

Attested ..... Address *Hattle Jr.*

Allotment ..... Allottee .....

Date of Allotment ..... Returned from Overseas *29.1.19.*

Returned on S.S. *Corsican* Cause *Discharge*

*16.6.19*

*1.7.19*

**PASSED TO DEMOBILIZATION OFFICER**

**DISCHARGE APPROVED ON DEMOBILISATION**

# NEWFOUNDLAND POSTAL TELEGRAPHS



## Cable Connection with all the World

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In case the Telegram shall never reach its destination by reason of any neglect or default of the Minister of Posts and Telegraphs or his Servants whilst the Telegram remains under the control of the Minister of Posts and Telegraphs, he will refund the amount paid by the Sender for such Telegram.

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The control of the Minister of Posts and Telegraphs over the Message shall be deemed to have entirely ceased for the purpose of these Conditions at any point where, in the course of the transit of the Telegram to its destination, it may be entrusted by the Minister of Posts and Telegraphs (and the Minister of Posts and Telegraphs shall have full power so to entrust the Telegram) for further transmission by or through any system belonging to or worked by any administration or authority not controlled by the Minister of Posts and Telegraphs exclusively, although worked as a part or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender \_\_\_\_\_ Address \_\_\_\_\_

LINE NUMBER	RCD	BY	SENT	BY	CHECK

DATED **Oct. 31st., 1921.**

TO **Postmaster,  
Battle Hr., Lab.**

**Return to this Department Registered Package addressed to  
4676 ExPte. S. Snook, Battle Hr. Medal forwarded in  
error, his at this office. Rush reply.**

**DEPT. OF MILITIA**

**Chg. Dept. of Militia.**

Office of  
July 25, 1987

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DEPARTMENT OF VETERANS AFFAIRS

To Copy for H.O. File

Ottawa, Ont.

Date July 28, 1967

Attention of

NAME SNOOK, George Alfred

SERVICE 4676 WW1  
NUMBER ROY.NFLD.  
REGT.

C.P.C. No.  
W.V.A. No. 49830

NAVY  
ARMY X  
R.C.A.F.

The DEPARTMENT has received information from

Mrs. Ethel Snook, (widow) Mary's Harbour, Labrador July 4, 1967

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death June 11, 1967  
Cause of Death  
Place of Death not stated

Name and Address of next of kin (if known)

Copies to: W.S.R.  
V. I.  
~~INDEX~~  
D.O.  
H.O.

} Destroy form if advice of death already received.  
ST. JOHN'S NFLD.

E. C. Richards  
for  
Chief, Central Registry