



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5235 Name Alfred Snook Corps S.A.

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Alfred Snook
2. What is your full Address? 2. St. John's Harbour
Trinity Bay
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 25 Years Months
5. What is your Trade or Calling? 5. Labourer
6. Are you Married? 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. No
8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
9. Are you willing to be enlisted for General Service? 9. Yes
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. Yes

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.

21-5-18

Alfred Snook SIGNATURE OF RECRUIT.
E. D. Richards 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. John's on this 21st day of May 1918.

Signature of Attesting Officer E. D. Richards

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 compiled with. I accordingly approve, and appoint him to the
If enlisted by special authority, such will be attached to the original attestation.

Date May 21st 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)

C.R. 5235

Extract from Daily Orders part II, unit the Royal Wfld.
Regiment dated July 5th. 1919.

The discharge of the undernoted on demobilisation has been
~~RECORDED~~ CONFIRMED by Officer i/o Records on noted date.

⁵²³⁵
~~#3266~~ Pte. Alfred Snook.

2-7-19.

C.R. 5235

Extract from Daily Orders Part 11 Depot, St. John's,
Date June 7th 1919

5235 Pte. Alfred Snook.

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

C.R. 5235

Extract: from Daily Orders Part II Unit The Royal WFLD.
Regt. St. John's, June 9th. 1919.

on demobilization
The discharge/ of the undersigned has been approved by O.C.
Discharge Depot, with effect from ¹⁸ 15-6-19.

5235 Pte. Alf. Snook.

C.R. 5235

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

The Following men embarked for overseas on H.M.S.
"Columbella" July 22, 1918.

#5235 Pte. Alfred Snook.

C.R. 5235

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

#5235 Pte. Alfred Snooks

Atteste for General Service with the Royal Mfld. Regt.
from 21.5.18.

A Snook

C.R. 5235

11
A 10

18334/1996

2/Bn Royal Wfld. Regt.
Winchester, Hants.

10th November 8
5237, Pte. A. Snook,

9654

Pay to 5235 Snook 22:1:0

2:1:0

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 Coy } Former Trade } Fisherman
or Occupation }
2. Regtl. No. 1235 3. Rank. plc 7a. If the soldier claims previous service in Army, he should state—
4. Name Snook Alfred (a) Former Regts. or Corps ;
(Surname) (Christian Names) with Regtl. Nos.
5. Age last birthday. 26
6. Posted for duty on at.....
in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge ;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When (d) Particulars of Pension or Gratuity
(b) Where (if any)
(c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here.
(Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
11. Date of origin of disability. nil
12. Place of origin of disability. nil
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. nil

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war ✓
- (ii.) Previous active service. ✓
- (iii.) Climate in pre-war service ✓
- (iv.) Ordinary military service before the war ✓
- (v.) Serious negligence or misconduct on the } man's part. } ✓
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it ? }

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, 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 Complaints of no disability

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

20. Do you recommend—
- (a) Discharge as permanently unfit ?
- (b) Change to United Kingdom ?
- Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Repatriation

W.E. Procuier. Capt. Rank

Station *Hazlebury*

Medical Officer in charge of case.

Date *2/4/19*

* 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. 18334/1996

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.

To:

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



13th November 1918

Nov. 14th 1918

Subject: 5235, Pte. A. Snook,

Receipt hereunder:

Handwritten signature: A. Snook

With reference to the following telegram (9854) 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 5235 Snook £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.

A Snook

Handwritten signature: J. H. Marshall
Chief Paymaster & O. i/c Records.

No. 5235 Rank Private

Witness, A. L. Carter, Pte.

No. 210/49/P&A.

N.F.P./79.

From: NEWFOUNDLAND CONTINGENT

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

To: 6545
Officer Commanding,
2/Bn Royal Nfld. Regt.,
Hazley Down Camp,
Winchester.



5th January, 1919

Subject: 5235, Pte. A. Snook,

With reference to the following telegram (106) from the Hon. Minister of Militia, received

"Pay to 5235 Snook, £2.9.4.

Draft £ 2.9.4. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

F. H. Maxwell
Chief Paymaster & O. i/c Records.

B

Jan 1918

Receipt hereunder.

J. J. Bester **LIEUT. COLONEL,**
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Comdg. 2d Batt'n
Royal Newfoundland Regiment

Received the sum of Two

pounds newfoundland account of
cable remittance from Newfoundland

A. Snook

No. 5235 Rank Private

P. W. Swenson
cas

No. 4610/671

N.F.F./79.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
2/bn. Royal Newfoundland Regiment,
Hazeley Down Camp,
Winchester.

24th March 1919

5235 Pte. Snook A.

With reference to the following telegram from the Minister of Militia / / (89)

"Pay to- 5235 Snook
£4. 19. 0

Cheque £4. 19. 0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

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

W. H. C.
March 24th 1919

NEWFOUNDLAND
PAY & RECORD OFFICE
LONDON S.W. 1

Receipt hereunder

LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commandg. 2nd Batt'n.

Received the sum of Four pounds

thirteen Shillings in respect of

telegraphic remittance from the Minister of Militia.

Snook

No. 5235 Rank Private

Witness C. Peasey

Snook, A

5235

Ray Sept.

July 2, 1919

#5235 Pte. Alfred Snook,

Hants Harbor, T.E.

Dear Sir:-

Please find enclosed "Discharge Certificate
No. 229A."

Yours truly

Captain,
Quartermaster & Officer in Charge Records.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5285 Rank Pte. Name Snook, A.
 Intended place of residence St. John's, Trinity Bay
 2. Occupation Fisherman
 Classification of soldier E Medical Category A. 1

3. The above named man is discharged in consequence of DEMOLIZATION.

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 4 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 4 1919
 Signature of soldier Alfred Snook.
 Signature of witness J. A. Snow 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.
May 4th /19
 Signature of soldier Alfred Snook.
 Signature of witness R. Kelly Capt.

STATEMENT OF SERVICE

7. Enlisted for service May 21 at 1/8 No of days on Military
 Discharged from service 18-6-19 Thru 14 days Service 208 days

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 18 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 2/1919
 Officer in Charge Records
 The Royal Newfoundland Regiment

at J B 20791294

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.

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

Reg. No.

Deferd. Snook

Place

Date

4-6-19

191

The Royal Newfoundland Regiment

Class for Demobilization:—
1/1

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

 Date *11-5-47*

 Regimental No. *5225*

 Name *S. ...* *M. ...* *P. ...*

Address

 Present Medical Category *A-1*

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

Members of Board {

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

P. ...
Senior Medical Officer

S. ...
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5235 Rank PLT Name Snook, W. J.
 Date of Enlistment 21.5.18 Address St. John's District 1
 Occupation Fisherman Classification for Discharge 2 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

H. M. S. Clerk
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Depled Snook

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 Snook

Date 4-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *P. 1413 9.534* to his home at *Hank W.T.P.* and Release Certificate No. *2275* issued.

Date *4-6-19*

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 *1-7-19*

Date *4-6-19*

H. West
Depot Paymaster.

Discharge approved for *18-6-19*

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 349A	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*

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 18 1919*

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

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

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 Corps. *Royal Newfoundland* } Former Trade or Occupation } *Infantry*
2. Regt. No. *5735* 3. Rank. *Pvt* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Smith* } (Surname) } *Alfred* } (Christian Names) } (a) Former Regts. or Corps; with Regt. Nos.
5. Age last birthday. *26*
6. Posted for duty on at in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—
(a) When (d) Particulars of Pension or Gratuity (if any)
(b) Where
(c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

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

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

11. Date of origin of disability. *nil*
12. Place of origin of disability. *nil*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

- | 14. State whether the disabilities are | (a) attributable to | (b) aggravated by |
|---|---------------------|-------------------|
| (i.) Service during the present war | ✓ | |
| (ii.) Previous active service. | ✓ | |
| (iii.) Climate in pre-war service | ✓ | |
| (iv.) Ordinary military service before the war .. | ✓ | |
| (v.) Serious negligence or misconduct on the }
man's part. } | ✓ | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? ✓

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, 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?

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. E. Procter, Capt. R.A.M.C.
Medical Officer in charge of case.

Station *Hazley Down*

Date *2.1.19*

* 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

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

MEDICAL HISTORY

Surname Snaok

OF

Christian Name Alfred

Table I.—GENERAL TABLE.

Birthplace:—Parish St. John's, Nfld.

County Nfld.

	SPECIAL RESERVE		REGULAR ARMY	
	Right	Left	Right	Left
Examined	on <u>21</u> day of <u>May</u> 19 <u>18</u>	on	day of	19 <u>1</u>
	at <u>St. John's</u>	at		
Declared Age	<u>24</u> years — days		years	days
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet <u>11 3/4</u> inches		feet	inches
Weight	<u>155</u> lbs.			lbs.
Chest Measurement {	Girth when fully expanded	<u>39</u> inches		inches
	Range of Expansion	<u>4</u> inches		inches
Physical Development				
Vaccination Marks {	Arm			
	Number	<u>Scar</u>		
When Vaccinated	<u>3 yrs ago</u>			
Vision	R.F.—V= <u>4/5</u>		R.E.—V=	
	L.E.—V= <u>4/5</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>Samuel Peterson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.			Medical Officer.
Enlisted	at <u>St. John's</u>	at		
	on <u>21</u> day of <u>May</u> 19 <u>18</u>	on	day of	19 <u>1</u>
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment	<u>Regimental</u>	<u>1235</u>		
	<u>Nfld. Regt</u>			
Transferred to				
Became non-effective by	on	day of	19 <u>1</u>	on
(Signature)		day of		19 <u>1</u>
(Rank)				



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 *Alfred Snook*

Regiment from which discharged **Royal Newfoundland**

Regimental number *5235*

Intended address *Hants Hs.*

Height on discharge *5* Feet *11 3/4*

Color of hair on discharge *light*

Complexion *Ruddy*

Color of eyes *Brown*

Descriptive Marks

Figure on discharge *Tall.*

Christian name of Father *Enoch.*

Christian name of Mother *Martha*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *Hants Hs., Feb 27th, 1893*

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*

ste
(Rank)

Station *S. Johns*

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

July 2, 1919

#5235 Pte. Alfred Snook,

Hant's 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
Commandant & Officer i/c Records.

475

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. *Snook*

3. Rank. *Private* 4. Regtl. No. *5235*

5. Address in full to which future payments of gratuity are to be forwarded. *Hants., Harbour, Trinity Bay,*

6. Date of enlistment in the Regiment. *15-5-18*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. *na.*

Mrs. Ezekiel Snook

8. Relationship of such dependents. *Mother*

9. Address in full of such dependents. *Mrs. Ezekiel Snook*
Hants. Harbour. Trinity Bay

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *na*

11. Were you on active service only in Hfld. If so, give dates and particulars of such service. *Overseas*

12. Give total length of time which you served on active service, whether in Hfld. or Overseas. *13. Months*

..... *13*

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

..... *1. when enlisted*

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? *no. applicable*

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

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

... *did not serve in the actual theatre of war*

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: *Alfred Snook*
 Place of Residence: *Dennis Harbour & Bay*
 Declared before me at: *St Johns*
 This *fifteenth* day of *June* 19*.19...*

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

Wm Guinness JP

POST DISCHARGE PAY.

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

ST. JOHN'S, *June 7th 19*

Royal Newfoundland Regiment.

Billeting Account,

To

*M^{rs} F. Newberry
Pennywell. R.A.*

Billeting Soldiers as undermentioned

from *June 1st 19* to *June 6th 19*.

*10? Mr. A. Smokes 7 00
6 days, 1 meal*

ACCOUNT	INITIALS
GN. NO. <i>23129</i>	INITIALS <i>EW</i>
INS. LEDGER	INITIALS
EDGER	INITIALS
GEN. LEDGER	INITIALS

Certified correct for

M. J. French

A. Smokes
Billeting Officer.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5735 Rank Plt Name Snook H. J.
 Date of Enlistment 21.5.18 Address Nants Pt District St. John's
 Occupation fisherman Classification for Discharge 2 Medical Category AI
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. F36	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 for H. J. Snook O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Depred Snook

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 new cap

Date 4-6-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R. 1413 9.534* to his home at *Hank Spr. T.P.* and Release Certificate No. *2275* issued.

Date *4-6-19* *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 *5-7-19*

Date *4-6-19* *J.A. Snow Capt.*
Depot Paymaster.

Discharge approved for *18-6-19*

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

N.F. P 36	B 268	B 171	N.F. Med.	D.F. 1
F 178	W 3494	B 122	Board 1st	" 2
F 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* *J.A. Snow Capt.*
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer in Charge Records,
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date *JUN 18 1919* *R.H. East Capt.*
O. C. Discharge Depot.

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

Date *June 12/19* *J. M. East Capt.*
for Records

Reg. No. *1735* Rank *Plt.* Name *Brooks, A.*
Attested Address. *Quar 41*
Allotment..... Allottee ..
Date of Allotment..... Returned from Overseas. *6.19*
Returned on S S. *Crossman* Cause. *Discharge*

4.6 19
18.6 19

PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILIZATION