



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4166 Name Stephen Stapleton Corps R.C. 4166

Questions to be put to the Recruit before Enlistment.

- | | |
|--|-------------------------------------|
| 1. What is your name? | 1. <u>Stephen Stapleton</u> |
| 2. What is your full Address? | 2. <u>Mary's town, Beem Bay St.</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>21</u> Years <u>2</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Masterman</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, Stephen Stapleton 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.

9/29-11-17

Stephen Stapleton SIGNATURE OF RECRUIT.
Walter J. [Signature] Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Stephen Stapleton 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.....

on this 27th day of Nov 1917

Signature of Attesting Officer Walter J. [Signature]

†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 Nov 27 1917 Place [Signature] } 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).....

Reg. No. 4166 Rank Plt Name Stapleton P.
Attested 29-11-17 Address Mary's Lane
Allotment 60x Allotee Mr John Ely Stapleton Mother
Date of Allotment 12/18 Returned from Overseas _____
Embarked for Overseas _____ Cause _____

Vac 29-11-17 Ince 6-12-17. 2nd 11-12-17
H. S. 18/12/17 - 27/12/17, 2nd Ince. 17/12/17
granted Ext. 7/1/18. re. 22/11, Retd. 9. 1. 18

C.R. 4166

Extract from Daily Orders Part II Royal Newfoundland Regt.
Depot St. John's dated 8-7-19.

The discharge of the undernoted on demobilization has been
CONFIRMED by officer i/c Records from noted date 4-7-19.

4166, Pte. Stephen Stapleton.

C.R. 4166

Extract from Daily Orders Part 11 Unit The Royal WFLA.
Regt. Depot, St. John's, June 10th, 1919.

The Discharge of the undernoted on demobilisation has been
APPROVED by O.C. Discharge Depot with effect from 20-6-19.

4161 Pte. S. Stapleton.

C.R. 4166

Extract from Daily Orders Part 11 Depot, St. Johns,

Date

June 18th 1919.

4166, Pte. S. Stapleton

Reported at Headquarters

1/6/19.

ex "Corsican"

which sailed Liverpool May 22/1919.

C.R. 4166

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

Date 9-6-19.

4166 Pte. S. Stapleton

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

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

C.R. 4166

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.

#4166 Pte. S. Stapleton.

C.R. 4166

Extract of Nominal Roll to B. E. F. embarked
Folkestone. 2-7-18

#4166 Pte. S. Stapleton.

C.R. 4166

Extract of Nominal Roll to B. E. F. embarked
Folkestone. 2-7-18

#4166 Pte. S. Stapleton.

C.R. 4166

Extract from Sergeant Roll No. 1 "I" Company 1st
S.S. Platoon Jan. 20th, 1918.

4166 Pte. Stapleton S.

C.R.

4166

Extrast from Daily Orders Part 11 Unit The Royal Nfld.
Regt., Nov.30th, 1917.

4166 Pte. S. Stapleton.

Attested for General Service with the Newfoundland Regt.
with effect from Nov.29th, 1917.

S. Stapleton

C.F. 4166

F R O

Medical Report on an Invalid.

Station Hazely Down
Date 30.4.19

- | | |
|---|--|
| <p>1. Unit <u>Royal Warwick.</u></p> <p>2. Regimental No. <u>4166.</u></p> <p>3. Rank <u>Pte</u></p> <p>4. Name <u>Stapleton S.</u></p> <p>5. Age last birthday <u>22.</u></p> <p>6. Enlisted { on <u>29.11.18</u>
at <u>St John's</u></p> | <p>7. Former Trade } <u>Fisherman.</u>
or Occupation }</p> <p>7A. If with previous service in Army, state—</p> <p>(a) Former Unit;</p> <p>(b) Regimental No.;</p> <p>(c) Date of Discharge;</p> <p>(d) Cause of Discharge.</p> |
|---|--|

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— nil
- (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.

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?

m

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

If so—(a) When?

- (b) Where?
- (c) Opinion?

m

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

m

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

m

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?

m

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.

m

Repatration

20. Do you recommend—

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

W.K.S.

Major H. H. H. H.

Officer in medical charge of case.

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

Station *Hazley Down*

Date *30-4-19*

Officer in charge of Hospital.

*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.

No. 7720/338

NEWFOUNDLAND CONTINGENT



From:

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

To:

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

16th May 1918

May 20 1918

Subject: 4166, Pte. S. Stapleton,

With reference to the following telegram (4380) from the Hon. Minister of Militia, received

Receipt hereunder.

Pay to 4166 Stapleton £5:3:0

Draft £ 5:3:0 is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

Okam
LIEUT. COLONEL
Officer Commdg. 2nd Batt'n REGT.
Royal Newfoundland Regiment

Received the sum of £ 5. 3. 0.

_____ on account of
cable remittance from Newfoundland.

Stephen Stapleton

No. 4166 Rank PT

A. C. Minnie
Chief Paymaster & O. 1/c Records.

038538

TO, - The Chief Quartermaster,
Royal Newfoundland Regiment,
58 Victoria Street,
London, S.W.

Sir:-

Please charge the amounts set opposite my name to my account and pay it to the N.W.C.A. "Prisoners of War Fund" in quarterly instalments for the period of one year.

Commencing on the 1st July 1918.

Regtl. No.	Rank	Name	Amount	Signature:
4166	Pte	S Stapleton	\$2 ⁵⁰ / ₁₀₀	

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

Date

28-6-18

S Stapleton

N^o 4584



1st. NEWFOUNDLAND REGIMENT 1.

ALLOTMENTS

I, Stephen Stapleton, Regl. No. 4166

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and 60 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and} _{or} Persons, such payment to be made on proof of identity of, and production of ^{the} relative ^{Identity} ~~Identity~~ Certificates by the Person ^{and} _{or} Persons concerned, viz :

Allotment begins

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3498	Mother	Mrs John Elizabeth Stapleton	Wantageham St John West	60
Total Allotment, \$				60

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

Sig.) W. H. H. L.

Officer Commanding
N Company

(S) Stephen Stapleton
(Rank) Pl

Stephen

Jan 17 1918

Stapleton, S

#166

Hay sept

July 5, 1919

#4166 Pte. Stephen Stapleton,
Marjstown.

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 & O.i/c Records.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

A complete reply must be given to every question in this Declaration there must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out. On completion this Declaration is to be returned to THE OFFICER I/C

RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

- Christian name, *Stephen* Surname, *Shapleton*
3. Rank, *Pte* 4. Regtl. No. *4166*
5. Address in full to which future payments of gratuity are to be forwarded, *Marys town*
6. Date of enlistment in the Regiment. *28 Nov 1917*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge, *not applicable*
8. Relationship of such dependents, *no*
9. Address in full of such dependents, *no*
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *no*
11. Were you on active service only in Nfld. If so, give dates and particulars of such service, *Overseas*
12. Give total length of time which you served on active service, whether in Nfld. or Overseas, *eg 3 hrs mos*
three weeks 1.

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

Not applicable

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.

51.19

Clothings & Ration

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 downwards 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

19. Are you now serving in the Post? If not give? - (a) Date of discharge

June 2/19

no

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 and Germany

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: *S. Stapleton*

Place of Residence: *Memphdown*

Declared before me at: *St Johns Rd*

This *6th* day of *June* 19*69*....

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

POST DISCHARGE PAY.

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

Certified correct

Paymaster

July 4, 1919

#4166 Pte. Stephen Stapleton,
Marystown,
Burin Dist.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 289."

Yours truly

Captain,
Paymaster & Officer i/c Records.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4.1.6.6 Rank P.6 Name Bassellon S
 Intended place of residence St. John's Burin

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 6 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 6 1919
 Signature of soldier
 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 6 1919
 Signature of soldier
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 29-11-17 No of days on Military
 Discharged from service 20-6-19 plus 14 days Service 583

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
JUN 20 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
JUN 4 1919
 Officer in Charge
 The Royal Newfoundland Regiment

a P.B. 2079/2289

31
31
28
31
30
30
24
4
217

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 *14.3.19*

 Regimental No. *4166*...

 Name *S. Campbell*

Address

 Present Medical Category *A-1*

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

Members of Board {

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

L. Paterson
Senior Medical Officer

H. C. Bevan
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4166 Rank MC Name Stapleton B
 Date of Enlistment 29 11 17 Address Marystown District Burns
 Occupation Submarine Classification for Discharge 6 Medical Category H I
 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 349A	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 5 1 18

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

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable. \$60.00

(b) Clothing Supplied all clothing

Date 6-6-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R.1525 to his home at Manystown and Release Certificate No. 2393 issued.

Date 6-6-19

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 4-7-19

Date 6-6-19

J.A. Snowball
Depot Paymaster.

Discharge approved for 20-6-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P136	B 268	B 121	/	N.F. Med.	D.F. 1	/
E 178	W 3494	B 122	/	Board 1st	" 2	/
R 178a	D 400A	B 1915	/	do 2nd	" 3	2 Form B
L 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 6-6-19

J.A. Snowball
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

JUN 20 1919

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

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

S. Stapleton

Signature of Man.

Reg. No. 4166

J. A. Snowball

Signature of the Vocational Officer or his Representative.

Place

St Johns

Date

191

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

MEDICAL HISTORY

Surname Stepelin OF Christian Nane Stepelin

Table I.—GENERAL TABLE.

Birthplace:—Parish Manxton Rural Div. County Wilt

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	191	191
Examined	on	29 th	day of	Nov
	at	St. John		
Declared Age		21	years	2
			Months	
Trade or Occupation		Fisherman		
Height		5	feet	3
				inches
Weight				137
				lbs.
Chest Measurement	Girth when fully expanded			39 $\frac{1}{2}$
		Range of Expansion		5 $\frac{1}{2}$
				inches
				inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
When Vaccinated				
Vision	R. E.—V=	$\frac{4}{6}$	R. E.—V=	
	L. E.—V=	$\frac{6}{6}$	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>Lionel P. Atson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at	St. John's	at	
	on	29 th	day of	Nov
				191
			Corps.	Regtl. No.
Joined on Enlistment				
Transferred to		<u>1st Regt</u>		<u>2166</u>
Became non-effective by	on		day of	191
(Signature)				
(Rank)				

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.

Date	Brief Details, and Signature
24-11-17	Vac 20
6-12-17	T.M.B. 20
12-12-17	do 20
18-12-17	T.M.B. 20

It is hereby certified that this soldier has been before a Travelling Medical Board, and has been classified as 1 for Discharge on Demobilisation. Medical category 1

24-5-19
Date of T.M.B.

[Signature]
Discharge Officer

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

Casualty Form—Active Service.

Regiment or Corps Royal Newfoundland 29-10-1895

Rank Private Surname Stapleton Christian Name Stephen

Religion Age on Enlistment 21 years months

Enlisted (a) 29.11.17 Terms of Service (a) Duration Service reckons from (a) 29.11.17

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

Extended (.....) Re-engaged (.....) Qualification (b)
S or Corps Trade and rate

Occupation Islam Signature of Officer [Signature]

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B 215, 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. 215, Army Form A. 36, or other official documents.
Date	From whom received				
		<u>A I</u> Embarked ...	<u>2 JUL 1918</u>		
		<u>28. 6 - 18</u> Disembarked	<u>5 JUL 1918</u>		
		Joined Battalion	<u>Field</u>	<u>9.7.18</u>	<u>B 113 d. 13/7/18</u>
		<u>Arrived in Wk.</u>		<u>9/3/19</u>	

Int

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve) particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, &c.
 W. 5527—M2093 1000m 7/17 (25698) C. P. & S., Ltd, Forms B.103 E/1555.

NEXT OF KIN: Elizabeth Stapleton, Marystown, Grand



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 *Stephen Stapleton*

Regiment from which discharged **Royal Newfoundland**

Regimental number *2166*

Intended address *Maytown*

Height on discharge *5* feet *3*

Color of hair on discharge *Brown*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks *Warts - left arm*

Figure on discharge *Normal*

Christian name of Father *John*

Christian name of Mother *Elizabeth*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth

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)

Stephen Stapleton

(Rank) *PT₂*

Station

St. John's Mt.

Date

2-6-13

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 of Hospital,
Unit, or Command Depot.

Station

Date

The Royal Nfld. Regiment

DEMOBILIZATION

No. 4166 Rank

Name Stephen S

Warned for demobilization on

JUN 6 1919

Medical Report on an Invalid.

Station Hayley Down Camp

Date 1904. 4. 19

- 1. Unit Royal Newfld
- 2. Regimental No. 4166
- 3. Rank Pte
- 4. Name Stapleton S.
- 5. Age last birthday 22.
- 6. Enlisted ^{on} 29 " 17
_{at} St John

- 7. Former Trade or Occupation } Fisherman
- 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
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?

to complain of a 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?

na

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

If so—(a) When?

(b) Where?

(c) Opinion?

na

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

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?

na

Officer in medical charge of case.

*Major
L. A. N. G.*

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

Station

700 Camp

Officer in charge of Hospital.

Date

30 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.

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

No. 4166 Name *Stapleton J.* Sqn., Batty., or Company *Royal Newfoundland* Date of enlistment *29-11-17* G.C. Badges *1* Service of Proficiency Pay *1*
 Date of last entry in Company Conduct Sheet *✓* No. and date of last drunk *✓* Period not reckoning towards freedom from extra fine *✓* Sheet No. *1* Signature O.C. Company, etc. *W. H. ...* Character *Very 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
<i>Field</i>	<i>8-12-18</i>	<i>Plt</i>		<i>Deficient of Iron rations</i>	<i>Sgt Goobie</i>	<i>Pay for same</i>	<i>6-12-18</i>	<i>Maj Bernard</i>	
<i>Rover</i>	<i>29/3/19</i>	<i>Plt</i>		<i>Def. of kit</i>	<i>Chas Watson</i>	<i>pay for same</i>	<i>1-4-19</i>	<i>Maj Bernard</i>	<i>W.H.</i>

RECEIPT.

FOR ISSUE OF RIBAND OF VICTORY MEDAL 1914-1919, 1919.

C.R. 4166

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

DATE.....

NO. 4166 NAME Stephen Stapleton

DATE May 6/20

PLACE Manxton

CR 4166

RECEIPT.

FOR ISSUE OF RIBAND OF VICTORY MEDAL 1914-1919.

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

DATE *Jan. 17th/20* NO. *4166* NAME *Pte. S. Stapleton*
 PLACE *Maystone*

C.R. 4166

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

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

Date *May 14 1920*
Place *Marystown*

Name *Stephen Stapleton H. 21066*

Receipt for Army Book 64

No. 4166 Name S. Stapleton

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

Name S. Stapleton # 4166

Date July 28th 1907
Place Manaytown

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

WV

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
30.

Regiment of

1st Newfoundland

Number of Sheets

One

Signature of O. C. Company

W. H. V.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>4166</u>	Age on	<u>21</u> years <u>2</u> months	<u>Fisherman</u>	
<u>Stapleton P.</u>		Place and Date of Enlistment	<u>St. John's</u> <u>29-11-17</u>	Religion	
Joined	Date	}	<u>21 8</u> years.	<u>R.B.</u>	
Joined	Date		<u>1</u> with Reserve <u>365</u> years.		
Joined	Date				Place of Birth

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 St. John's</u>		<u>4 $\frac{2}{9}$</u>			

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

9466

DEMobilIZATION OF

Reg. No. 4166 Rank Plt Name Stapleton
 Date of Enlistment 29.11.17 Address Maryborough District Burns
 Occupation Liberman Classification for Discharge 6 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 5.6.19

O. C. Discharge Depot

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable. \$60.00

(b) Clothing Supplied

AMB [Signature]

Date 6-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R.1525 to his home at Marystown and Release Certificate No. 2393 issued.

Date 6-6-19

J.A. Shaw Buff
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 4-7-19

Date 6-6-19

H. M. Stewart
Depot Paymaster.

Discharge approved for 20-6-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	1	N.F. Med.	D.F. 1	1
F 178	W 3494	B 122	1	Board 1st	" 2	1
F 178a	D 400A	B 1915	1	do 2nd	" 3	2 Form B
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 6-6-19

J.A. Shaw Buff
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratiuity

Date JUN 20 1919

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

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

Date June 11 1919

Reg. No. 4166 Rank Pte Name Stapleton, S.
Attested Address Maytown Busin
Allotment Allottee
Date of Allotment Returned from Overseas 1-6-19
Returned on S S Corsican Cause Discharge

5-6-19
20-6-19

PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILISATION