



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4907 Name Belah Stokes Corps Amelia

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Bela Stokes
2. What is your full Address? 2. Safe Harbor B. B.
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 24 Years Months
5. What is your Trade or Calling? 5. Julian
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, B. Belah Stokes 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.
B. Belah Stokes SIGNATURE OF RECRUIT.
John J. [unclear] Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, B. Belah Stokes 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.
 on this 25 day of April 1915
 Signature of Attesting Officer Geo J. Barty, Major

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 April 25 1915
 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)

Report Oct. 1915

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name B.elah Stokes
 Apparent age 29 years 7 months. Height 5 feet 9 1/2 inches
 Chest Measurement { Girth when fully expanded 37 inches
 Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Benjamin Stokes
Safertown B.B.B. Relationship Father
 Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or L'epot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for a part of 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 length of engagement reckons from <u>25-4-18</u>									
Joined at <u>M. Has</u> on <u>April 25 1918</u>									
<u>Discharged July 7 1919</u>									
<u>Report for duty 29-4-18</u>									
<u>Embarked St. Omer train to Halifax N.S. 11.6.18.</u>									
<u>Embarked for St. Omer 26-10-18</u>									
<u>Disembarked France 26-10-18</u>									
<u>Joined Battalion 3-11-1918</u>									
<u>Transferred from Queen's to Princess Patricia's 23-1-19</u>									
<u>6 Mts for Demobilization 23-3-19 Arrived England 7-6-1919</u>									
<u>Total Service forfeited as above Demobilization St. Omer 7-7-1919</u>									
Total Service towards Engagement to <u>7-7-1919</u> (date of discharge)									
Pensions " " " " " " " " " " " "									

C.R. 4707

Extract from Daily Orders Part II Unit The Royal WFLA.
Regt. St. John's, July 10th, 1919.

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

4707 Bte. Belah Stokes.

C.R. 4707

Extract from Daily Orders Part II June 12th 1919 Unit Royal
Newfoundland Regiment.

The discharge of the undernoted on demobilisation has been APPROVED by
O.C. Royal Discharge Depot with effect from noted date
23/6/19.

4707, Pte. Belah Stokes.

C.R: 4707

Extract from Daily Orders Part 11 Depot, St. John's,
Date 11-6-19.

4707 Pte. Belah Stokes

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

Extract from Nominal Roll 1st. Battalion
C.R. 4707
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.

#4707 Pte. B. Stokes.

C.R. 4707

Extract from Daily Orders Part 11 Unit The Royal Field.
Regt. By Lt. Col. T.G. Mathias, D.S.O. Commanding 1st
Bn. 3-11-18.

The following joined the Batta. 3-11-18.

4707 Pte. B. Stokes.

C Coy.

C.R. 4707

Extract from Nominal Roll Re-inforcement Draft No. 55 Barked Folkestone
26/30/18, from 2nd Batta, Royal Newfoundland Regiment, Hasleby Down Camp,
Winchester, to 1st Batta, Royal Newfoundland Regiment, N.S.F.

4707 Pte. Stokes, B.

MP.

C.R. 4707

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

#4707 Pte. B. Stokes.

Embarked for Overseas with draft 11-8-18

C.R. 4707

Extract from Daily Orders part 11, from Unit The Royal Nfld.
Regt. St. John's, dated April 26, 1918.

#4707 Pte. Belah Stokes.

Attested for General Service with the Royal Nfld. Regt.
from the 25/4/18 to report 29/4/18

B. Stokes

C.R. 4707

~~Pr 10~~

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* 7. Former Trade or Occupation } *Fisherman*
2. Regtl. No. *4705* 3. Rank. *Plt.* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Stokvis B.* (a) Former Regts. or Corps ;
(Surname) (Christian Names) with Regtl. Nos.
5. Age last birthday. *30*
6. Posted for duty on *13. 4. 18.* at *St. John's*
in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge ;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When (d) Particulars of Pension or Gratuity
(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. *h.e.*
12. Place of origin of disability. *h.e.*
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. *h.e.*

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.)

He complains of no disability

16. Was an operation performed? If so, when and what was its nature?

no

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

no

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?

no

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?

no

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.

Repatiation
W. E. Lawrence
1919

Station *Hazelrigg D. Camp*

Capt. R. M. C.
 Medical Officer in charge of case.

Date *29. 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. 4860/214

From: NEWFOUNDLAND

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

27th March, 1919

4707 Pte. Stokes B.

With reference to the following telegram from the Minister of Militia, / / (99)

"Pay to- 4707 Stokes

£8. 0. 0.

Kindly advise whether this remittance should be

- (1) forwarded to you for payment to this Soldier;
- (2) retained to credit of his account; or
- (3) otherwise dealt with.

A. C. [Signature]
Chief Paymaster & O. i/c Records

POSTMASTER & OFFICER IN CHARGE RECORDS.
NEWFOUNDLAND CONTINGENT,
58, VICTORIA STREET,
N.F.P. 450,
S.W. 1.
ENGLAND.

To: Officer Commanding,
1/Bn. Royal Newfoundland Regiment,
B.E.F.

10-11-1919

~~4707 Pte Stokes B.~~

This man wishes this amount retained to credit of his account please

Approved

3-11-19

10-11-1919

Aly

No. 425/20/P&A

N.F.P. /80.

From: **NEW FOUNDLAND**

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

CHIEF PAYMASTER & OFFICER I/C RECORDS.
NEW FOUNDLAND CONTINGENT,
58 VICTORIA STREET,
To: Officer Commanding
1st. Bn. R. Newfoundland Regt.
B.E.F.

9th. January, 1919

23-3 1919

Subject: 4707 Pte. B. Stokes.

ANSWER

With reference to the following telegram (221) from the Hon. Minister of Militia, received

Pay to 4707 Stokes - £8:4:0

Kindly advise whether this amount should be remitted to you for payment to this Soldier, retained to credit of his account, or otherwise dealt with.

A. C. Munnell Maj.
Chief Paymaster & O. 1/c Records.

The man whose this amount retained to the credit of his account please
J. G. Prather LIEUT. COL.
Commanding 1st Bn. ROYAL NEWFOUNDLAND REGIMENT.
RECEIVED
1560 231
27 JAN 1919
PAYMASTER'S OFFICE

To:- The Chief Paymaster,
Royal Newfoundland Regiment,
58 Victoria Street,
London, S.W.

Sir:-

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

Commencing on the 1st July 1918.

Regt. No.	Rank	Name	Amount	Signature
1707	Lt	Stokes B.	\$250	B. Stokes

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

B. Stokes

Date

July 1/18

Stokes, B.

4707

Pay Dept

Jaweeer,

July 7, 1919

#4707 Pte. Belah Stokes,

Safe Harbor, B.B.

Dear Sir:-

Please find enclosed Discharge Certificate
No. 2763.

Yours truly

Captain
Paymaster & O.i/c Records.

*Discharge
Brady*

signed

[Signature]

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4707 Rank Pfc Name Stokes Belah
 Intended place of residence Safe Hill B. B.

2. Occupation Truckman
 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 9 1919 *for* H. Mous. Lt.
 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 9 1919
B. Stokes
 Signature of soldier
A. Bloustein
 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 9 1919
Belah Stokes
 Signature of soldier
James G. ...
 Signature of witness SP1.

STATEMENT OF SERVICE

7. Enlisted for service 23-4-18 No of days on Military
 Discharged from service 23-6-19 plus 14 days Service 439

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 23 1919
R. H. ... Capt.
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place St. John's, Nfld.
 Date July 7/1919
M. Howley, Capt.
 Officer in Charge
 The Royal Newfoundland Regiment

20 B 2079/1763

6
31
30
7
74

The Royal Newfoundland Regiment

Class for Demobilization:

Ej

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *7.6.19*

Regimental No. *4707*

Name *Stokes Bela*

Address *Safe 41 - B.B.*

Present Medical Category *A1*

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

R.H. Carr

O.C. Discharge Depot.

Members of Board {

L. Johnson

Senior Medical Officer

R.W. Burden

M.O. Depot

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 4707 Rank Plt Name Stokes Belah
 Date of Enlistment 25.4.18 Address St. John's District Bonaville
 Occupation Fisherman Classification for Discharge L1 Medical Category H.I.
 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.	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 7.6.19 O. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

B. X. Stokes
mt J. J. J. J.

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 Alb. G. G. G.

Date 9-6-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. ^{R. 1671} to his home.
 at Safe AC and Release Certificate No. 2487 issued.

Date 9-6-19
J.A. Shaw 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 9-6-19
J.A. Shaw Capt
Depot Paymaster.

Discharge approved for 23-6-19
 Forwarded with following documents to O.C Discharge Depot.

N.F. P36.	B 268.	B 121.	1	N.F. Med.	D.F. 1.	1
E 178.	W 3494.	B 122.	2	Board 1st.	" 2.	1/2
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 9-6-19
J.A. Shaw 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 23 1919
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

Stokes B

Signature of Man.

J. A. Snowlapt

Reg. No. 4807

Signature of the Vocational Officer or his Representative.

Place St Johns

Date JUN 9 1919

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Confidential Information

For the use of the Civil Re-establishment Committee.

Report No.	Class	No. of C. R. C. File	No. of H. Q. File
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Name Stokes Bela No. 4707 Rank Pl R. N. R. or Regiment

Home Address Sage Hill City Address

Age 30 Height 5 ft. 11 ins. Complexion Fair Eyes Blue Hair Black Character

Date of enlistment 25-4-18 Where enlisted ST. JOHN'S Where seen service France

Ship returned by Canadian Date of return JUN 1 1919 How Long 18 mos

Birthplace Sage Hill Date of discharge JUN 23 1919 Religion Meth

Name and address next of kin Father - Newfoman - Sage Hill

Cause of disability

Condition which prevents the soldier from earning a full livelihood

Degree of incapacity (Please state in fractions) Eng. Board Newfoundland Board

Probable duration of incapacity

Is final disability likely to prevent return to previous occupation?

Recommendation of Newfoundland Board

Members of Board

INFORMATION TO BE FURNISHED BY SAILOR OR SOLDIER.

DEPENDENTS	NAME	AGE	WHERE-IF EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1					
2					
3					
4					
5					

Occupation prior to enlistment Fisherman

Regular trade or profession

Average earnings previous to enlistment \$ 7 00 00 Any other income

Name and address of last employer Sage Hill

If in receipt of sick benefits or other insurance—name of society Amt. per mo. \$

At what age left school? What grade, standard, &c., was he in?

Has he had any further education since leaving school, if so what?

Whether given Vocational Training while in Hospital in England. If so, what subjects?

If unable to follow previous occupation, name preference

References

Witness James Conerman I declare that the above statement is correct.

Date JUN 9 1919 Signature Bela X Stokes

Recommendation by Interviewer as to classes likely to be of use, and general remarks:

PENSION—Class Amount per month, \$ Period granted for Dating from

First Payment date

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

MEDICAL HISTORY

Surname Stokes OF Christian Name Belah

Table I.—GENERAL TABLE.

Birthplace:—Parish St. John's, B B, County Wfld

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>25</u> day of <u>April</u> 191 <u>8</u> at <u>St John's Wfld.</u>		on _____ day of _____ 191____ at _____	
Declared Age	<u>29⁷/₁₂</u> years _____ days		years _____ days	
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet <u>9¹/₂</u> inches		feet _____ inches	
Weight	<u>142</u> lbs.		lbs. _____	
Chest Measurement	Girth when fully expanded... <u>37</u> inches		_____ inches	
	Range of Expansion... <u>4</u> inches		_____ inches	
Physical Development				
Vaccination Marks	Arm	<u>Three</u>		
	Number			
When Vaccinated	<u>7 years ago.</u>			
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)		(b)	
(b) Slight defects but not sufficient to cause rejection				
Approved by (Signature)	<u>L. J. ...</u>			
(Rank)	<u>Major</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St John's Wfld.</u> on <u>25</u> day of <u>April</u> 191 <u>8</u>		at _____ on _____ day of _____ 191____	
Joined on Enlistment	Corps.	<u>The Royal Wfld Regt.</u>	Corps.	
	Regtl. No.	<u>4707</u>	Regtl. No.	
Transferred to				
Became non-effective by	on _____ day of _____ 191____		on _____ day of _____ 191____	
[Signature]				
[Rank]				

July 8, 1919

#4707 Pte. Bela Stokes,

Safe Harbor, B.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

Paymaster & U. I. c. Captain
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..... *Bela* 2. Surname..... *Stokes*

3. Rank..... *Ore* 1. Regtl. No..... *4707*

5. Address in full to which future payments of gratuity are to be forwarded..... ~~*St. John's*~~ *74 Pleasant St* *St John's*

6. Date of enlistment in the Regiment..... *Apr. 30/18*

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 30/18*
To June 9/19..... 1. ².....

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?..... *No*

16. Have you, during the present war, served in the Imperial Forces?..... *No*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled..... *No*

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?..... *No*

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

19. Are you now serving in the Regt.?..... If not give? - (a) date of discharge..... *New 9/19* (b) Reason for discharge.....

..... *Temporary* *Mobilization*

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 Sept 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..... *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:

his
Bela X Stokes

Place of Residence:

Safe Str. B.B.

Declared before me at:

St. Johns, Nfld

This

9th

day of

June

19*.1.9.*

John W. Carthy

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

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

THIS TICKET TO BE SHOWN AT THE GANG /AY AND RETAINED BY THE SOLDIER

The Royal Newfoundland Regiment

DISEMBARKATION TICKET

Group No. 4

No. _____

Rank _____

Name _____

Address _____

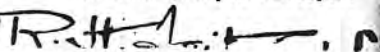
PASS. You are granted permission to be absent from Depot

until

JUN 5 1919

on which date you will report

for demobilization, (see over)



EMPIRE BARRACKS

ST. JOHN'S, N.F.

COMMANDING DISCHARGE DEPOT

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* 7. Former Trade or Occupation } *Fisher*
2. Regtl. No. *4707* 3. Rank. *Pte* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Stokes* *B.* (a) Former Regts. or Corps; with Regtl. Nos.
- (Surname) (Christian Names)
5. Age last birthday. *30*
6. Posted for duty on *12/2/18* at *St. John's* in category (or grade).....
8. If the disability is an injury was it caused
- (a) in action (b) on field service
- (c) on duty (d) off duty? (b) Date of Discharge;
9. If a Court of Inquiry was held on an injury state:— (c) Cause of Discharge.
- (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 | } <i>na</i> | ..... |
| (ii.) Previous active service.. .. . |  | ..... |
| (iii.) Climate in pre-war service .. .. . |  | ..... |
| (iv.) Ordinary military service before the war .. .. . |  | ..... |
| (v.) Serious negligence or misconduct on the man's part. } .. .. . |  | ..... |

14 (a). If not due to any of these causes, to what specific condition do you attribute it? } *Na.*

In all cases such as facial injuries, eye, ear, nose and throat, discharges, etc., a specialist's report is to be attached with radiographs when 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 complaints of no disability

16. Was an operation performed? If so, when and what was its nature?

na.

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

na.

18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?

na

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

na

20. Do you recommend—

- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?

Note—(b) is only applicable to soldiers invaded at Foreign Stations.

Repatrication

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

Station *Atterley Down*

Date *22/7/19*

* Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause

Casualty Form - Active Service.

Regiment or Corps ROYAL NEWFOUNDLAND REG.

Rank Pte Surname Stokes Christian Name Belch

Religion Method Age on Enlistment 29 years 7 months

Enlisted (a) 29/4/18 Terms of Service (a) DURATION Service reckons from (a) 29/4/18

RFB 1915

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

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

Occupation Postman J. W. Curran Cap. Signature of Officer.

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				
		Embarked ...	26 OCT 1918		
		Disembarked... Jamaica Station		3 NOV 1918	
		<u>Arrived in UK</u>		<u>23/4/19</u>	

JMI

(a) In the case of a man who has re-engaged for or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) Signaller, Shoeing Smith, &c. (1991.) W & W 1887 - P 124, 1,000,000, 1918. D & S Form B.103. (E. 124)

next of kin Father, Benjamin Stokes Cap. R. D. Mfld.



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 *Bela Stokes*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4707*

Intended address *Safe H. B. B.*

Height on discharge *5 Feet "*

Color of hair on discharge *Black*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *—*

Figure on discharge *Tall*

Christian name of Father *Benjamin*

Christian name of Mother *(Dead)*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Safe H. Sept. 23, 1889*

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)

Bela X Stokes
his mark

(Rank) *Pte*

Station

ST. JOHN'S.

Date

5-6-19

I certify that the above named soldier signed the foregoing declaration in my presence, and that the above description and details are, to the best of my knowledge correct.

Station

Date



WWB/OR.

Feb. 17, 1920.

9585

To:- Major Howley,
O.I.C. Pay and Records.

Capt. Murphy,
Employment Officer.

Mr. C. McGrath,) Accountants.
Mr. G. Pomeroy) -

Bela Stokes, 4707

From:- V. O.

This is to certify that the man named above will complete his course on Feb. 28th. If any extension is in the meantime granted, I will notify you.

W. W. Blackall.
Vocational Officer.

December 13 th 1919

Major Howley
O. I. C. Records

Please pay to B. Stokes, 4707
the sum of seven dollars
in payment of allowance for week ended this date
and charge same to Civil ReEstablishment Committee

\$7.00

Pension \$30.00

854

NO. 24653	<i>Ed</i>
ISSUED	INITIALS
PAY ORDER	INITIALS
DATE	INITIALS

Whitler

Vocational Officer

of Staff

Jany 27th 1920

Major Howley
O. I. C. Records

Please pay to B. Stokes, 4707
the sum of four dollars and sixty six cents
in payment of arrears of allowance for week ended Jan 24th
and charge same to Civil Re-establishment Committee

\$4.66

Pehsion \$10.00

ACCOUNT	
CHK. NO.	27096
PAY LEDGER	INIT - LI
PAY LEDGER	INITIALS
PAY LEDGER	INITIALS

W.B.H.
W.B. Marshall
.....
Vocational Officer

B. Stokes

Feb 7th 1920

Major Howley
O. I. C. Records

Please pay to B. Stokes, 4707
the sum of nine dollars and thirty two cents
in payment of arrears of allowance for two weeks to date
and charge same to Civil Re-establishment Committee

\$9.32

Pension \$10.00

J. B. ...

G. W. Beckell
Vocational Officer

AMOUNT	
EX. NO.	28253
DATE	
BY	
FOR	

Bela Stokols

Major Howley,
O.I.C. Pay and Records.

March 6, 1920.

Please pay B. Stokes, 4707,
the sum of eleven dollars and sixty six cents,
in payment of allowances for week ending this date,
and charge same to Civil Re-establishment Committee.

\$11.66

W. B. Hunter
.....
Vocational Officer.

W. B. Hunter
C. F. H.

for

Bela Stokes

ACCOUNT	
CHK. NO.	31401
INITIALS	<i>Leu</i>
INT. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

May 3rd 1920

Major Howley
O.I. C. Records

Please pay to B. Stokes, 4707
the sum of fifty dollars
in payment of P. & A. Bonus
and charge same to Civil Re-establishment Committee

\$50.00

Pension \$10.00

A.C.A.

ACCOUNT NO.	36598
DATE	
BY	
PAY TO THE ORDER OF	
AMOUNT	
INITIALS	
DATE	

W. B. Shell
Vocational Officer

B. Stokes

Stokes

4707

January 30th 1920.

Miss A. March,
East End Post Office.

Dear Madam

On January 22nd, you received from this Department a registered letter addressed to Bellah Stokes, Woodworking School, City. Mr. Stokes has applied to you to get some trace of this letter, but he states you advised him that no such letter was received by you. I may add for your information that I have your receipt for his Badge together with fourteen others, signed by you on the 22nd inst, please.

Kindly advise as to what steps we should take to have this traced, please.

Yours truly,

Lieut.



Department of Militia, Newfoundland
 Medical Department

Medical Report on an Invalid

NOTES :

- (a) This report is solely concerned with Pensions.
- (b) A single copy only is required.
- (c) "Aggravated" being now a technical term, carrying right to pension, discrimination in its use is essential.
- (d) Be as brief as possible compatible with lucidity.
- (e) Avoid dubiety—"perhaps," "possibly," "might" and the like.
- (f) Only sufficient clinical data need be given to establish the degree of disability and assist the Board in arriving at a decision.

STATEMENT OF CASE

Station St John's
 Date 4/2/19

- | | |
|-----------------------------------|--|
| 1. Unit <u>Royal Newfoundland</u> | 5. Age last birthday <u>20</u> |
| 2. Regimental No. <u>4707.</u> | 6. Enlisted on <u>April 1918</u> |
| 3. Rank <u>Plt.</u> | at <u>St John's</u> |
| 4. Name <u>Stokes, Bela.</u> | 7. Former trade or occupation <u>Fisherman</u> |

8. Disability

Haemorrhoids

9. History Joined Regiment in April 1918. went overseas with Regiment to Germany in army of occupation. While on service in France became troubled with haemorrhoids & was sent to hospital. Had days of being unable to do forward duties.

10. What is his present condition ?

(This is the important question. Be brief—the clearer the case the less need be written. Read note f above).

General condition fairly good. complains of his hemorrhoids which cause a lot of pain & on yesterday he is unable to walk. He had to give up his work & states he has great difficulty in defecation. Large external peduncle on left side of anus, which protrudes & gives lot of pain on walking. States "now small compared to what it was." Has been resting for a few days & feels slightly better.

11. Was ~~anatomical~~ advised and refused ?
operation

no

12. Do you recommend discharge as permanently unfit ?

yes

Signature

J. H. Miller

Rank or Qualification

Capt.

Remarks if any by Officer in Charge Hospital.

Place

Signature

Date

Rank

Faint handwritten notes at the bottom of the page, possibly bleed-through from the reverse side.



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 *Stokes, Bela*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4707*

Intended address *Cape Hr. Bonnavente Bay, 7th Pleasant St*

Height on discharge *5* Feet *"*

Color of hair on discharge *Brown, wavy*

Complexion *Dark*

Color of eyes *Blue*

Descriptive Marks

Figure on discharge *-*

Christian name of Father *-*

Christian name of Mother *-*

Wife's maiden name in full *-*

Date and place of marriage

Christian names of children

Place and date of soldier's birth *Cape Hr. Bonnavente Bay*

Nature and locality of civil employment required *Fisherman*

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) *B. Stokes*
his mark

(Rank)

Station *St John's* Date *4/2/19*

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.

J. J. Sullivan
Medical Officer i/c Hospital,
Unit, or Command Depot.

Station *St John's* Date *4/2/19*

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 4707 Rank Pvt. Name Stokes Delah
 Date of Enlistment 25-4-18 Address Leif St. District Bonaville
 Occupation Submarine Classification for Discharge F Medical Category H.I.
 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
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 92		

Date 7-6-19 O. C. Discharge Depot Leif St.

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

Date 9-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R. 1171* to his home at *Safe H/2* and Release Certificate No. *2487* issued.

Date *9-6-19*

J.A. Shawcroft
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 *7/1/19*

Date *9-1-19*

J. Smith
Depot Paymaster.

Discharge approved for *23-6-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P136	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 *9-6-19*

J.A. Shawcroft
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 23 1919*

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

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

Date *June 16/19*

Jamie [Signature]
for O.C. Records

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R. 1171* to his home at *Safe H/2* and Release Certificate No. *2487* issued.

Date

9-6-19

J.A. Shawliff
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to

Date

9-1-19

J.A. Shawliff
Depot Paymaster.

Discharge approved for

23-6-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P136	B 268	B 121	1	N.F. Med.	D.F. 1.	1
F 178	W 3494	B 122	2	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

9-6-19

J.A. Shawliff
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 23 1919

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

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

Date

June 16/19

Jamieson [Signature]
for O.C. Records.

Reg. No. 4707 Rank PLS Name Stukas, W.

Attested Address Safe Pt. 1

Allotment Allottee 1

Date of Allotment Returned from Overseas 2-5-19

Returned on S.S. Corsican Cause Discharge

2619
23-619

PASSED TO DEMOBILIZATION CENTER
DISCHARGE APPROVED ON DEMOBILIZATION CENTER