

# THE ROYAL NEWFOUNDLAND REGIMENT

No. 5462. Name Sewry	Stratten s	bij E.
Questions to be put to th	e Recruit before Enlistmen	wa.
I. What is your name?	I Herry orra	ne h
2. What is your full Address?	2. U	egve-
3. Are you a British Subject?	3	Ionths
5. What is your Trade or Calling?	5. Avenue	May O'M's
6. Are you Married?	6	
<ol> <li>Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which?</li> </ol>		•••••
8. Are you willing to be vaccinated or re-vaccinated?	8	•••••
9. Are you willing to be enlisted for General Service?	9	•••••
10. Did you receive a Notice, and do you understand its meaning. and who gave it to you?	Name	··········
11. Are you willing to serve upon the conditions as em signed by you if you are accepted?	bcdied in the roll of service to be $\}$ 11	Mes.
made by me to the above questions are true and that	Men signati	URE OF RECRUIT.
Nous Walter		I will, as in duty
CERTIFICATE OF MAGISTR.	ATE OR ATTESTING OFFICER.	
The Recruit above named was cautioned by me that he would be liable to be punished as provided in the Arm		the above questions
The above questions were then read to the Recruit		A second
I have taken care that he understands each question as replied to, and the said recruit has made and signed the on this	ne declaration and taken the oath before	The Established
The state of the s	Omcor	•••••
	APPROVING OFFICER.	
I certify that this Attestation of the above-named F		
quired forms appear to have been complied with. I acco		‡·····
If enlisted by special authority, such will be attached	to the original attestation.	
	•••••	Approving Officer.
Place		S. S. Contract of the contract
† The signature of the Approving Officer is ‡ Here insert the "Corps" for which the Reci	to be affixed in the presence of the Rec ruit has been enlisted.	cruit.
		MANAGER AND ASSOCIATION

Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz:—(Name).....on the (Date)

Extract from Daily Ordero Part 11 Unit The Royal Rild. Rogt. St. John's, 20-0-19

The discharge of the undernoted on denobilization has been APPROTED by O.O. Discharge Dapot.

5042 Pte. H. Stratton

Extract from Daily Orders Part II The Royal Sewfoundland Regiment Depot St. John's dated October 20th 1919.

The discharge of the undernoted on demobilization has been CONFIRMED by Officer i c Records from noted date
18-10-191

5462, Pte. H. Stratton.

Astract from Delly Orders Part II Royal Resfoundland Regiment, dated 20/9/15. (Special).

heturned from Overseas and reported to Militia Department. 18/5/19.

5462, Pte. H. Stratton.

5462

Extract from casualties from Pay & Record Office, London. dated 19/8/19.

5462 Pte. H. Stratton, Royal Newfoundland Regt., discharged hospital 15/8/19, reported at P.& R.O., London, 18/8/19, from R.B. Depot, Winchester, having been granted furlough from 18/8/19 to 23/8/19.

Authority:

Passes in possession of man concerned.

C. 5462

Extract from Dailyborders Part 11 Unit The Royal Nfld. Regt. St. John's, 28-9-19.

The following returned from Overseas and retported at Dept. of Militia 18-9-19.

5462 Pte. H. Stratton.

C.P. 5462

Extract from telegram received from Synoptical, London Sept. 6th, 1919.

The following embarked "Saturnia" Blasgo to Quebec Sept. 5th.

A R.Q.M.S. 462 Stratton.

St. John's.

12 Sept.1919

Dear Mr. Hickman.

Perhaps you would let me know what to say in reply to Mr. J.B.Granter, the writer of the enclosed letter.

Kindly return it when you write.

Yours faithfully.

Apredstanis

Hon.A.E. Hickman,

Minister of Militia

Hon. A.B. Morine, K.C., C 1 t y.

Dear Mr. Morine.

In answer to your letter of the 12th inst., covering letter from Mr. J.B. Granter, of Greenspond, making enquiries as to the whereabouts of #5462 Pte. Henry Stratton, I may say that this man is one of the draft of 28 other ranks which left Glasgow on S.S. "Saturnia," September 5th, for Quebec. They should arrive in St. John's on Monday.

I am returning Mr. Granter's letter herewith.

Yours faithfully,

Minister of Militia.

NEWFOUNDLAND CONTINCENT 19

# **.**

5462 PTE. H. STRATTEN was admitted to Hilsea
Military Hospital from 2nd Battn, Winchester,
on 13/5/19, suffering from V.D.G., and
discharged from that Hospital as fit to
rejoin unit on 15/8/19.

Authority: - A.F. B. 178A from Hospital.

#### HENFOUNDIAND CONTINGENT LENGRANDUM.

# 10. 9409 / R. a. C.

Prom Pas & Record Office, 58 Victoria Street, London, S.W.

8th July, 1919.

REPATRIATION.

Officer Commanding Hilsen Mil. Hospital, Hilsen, Hants.

10th July 1919.

It being desirable to repatriate the remainder of this Contingent so soon as possible and opportunities being uncertain, will you kindly state, so far as may be practicable, the date on which the following may be discharged from hespital, and be ready to embask?

5462 Pte. Stratton, H.

5462 Pte. Stratton, H.

Progressing satisfactorily, will probably be fit for discharge in the course of ten days.

(Sgd. W.G. Clements Lieut. Colonel, R.A.M.C. Officer in Charge.

(Tn. Ref. No. 4616.)

It may be added that in the absence of direct transport to Newfoundland there will be no alternative but to travel via Canda, and the mends physical condition should be considered accordingly, slao kindly state whether any treatment may be necessary during to voyage to Canadian port, thence overland, the short sea journey to Newfoundland and thence again per rail to St. John's,

(Sgd.) H.A. Timewell.

Major Chief Staff Officer. (London)

For Original ree File M-9-36

AUGUST 25th 1919.

Mr. John Stratton,

Greenspond.

Dear Sir:

I am directed to acknowledge receipt of your letter of the 12th inst., and in reply I am to state that we have telegraphed the Record Office, London, asking the present whereabouts of your son, #5462 Pte. H. Stratton, and when he is likely to be repatriated. Upon receipt of a reply I shall again communicate with you.

From our records it will appear that he has been recently discharged from the Hillses Military Hospital, Hants.

Yours faithfully,

Captain, Military Secretary.

Greensfrond. Ay 12 ! 1919. Hon. A. E. Hickman Dean Sir . Some Fine age I wired you seeking information, as to the eondition of my son whom at that time I understood was sick in England. I received your Message Sated fully 29: which ran as follows " 5-46? The Honry Stratten at Hillsen Hillsen Will be discharged in a few days! As Pratically all of our Boys are Home, and as I have not heard from sine you quite understand my Lein anxious. What I would like to know "is the discharged from Hospital" "If so what fine will He be coming Home !! Also will He, come direct John. Stratten

Exertact from telegram received from Synoptical, London, July 21st, 1919.

With meference to your telegram July 16th.

5462 Stratton at Hillsea Military Hospital will be discharged in a few days.

## C.R. 5462 'AL TELEGRAPHS EWFOUNDLAND



# Cable Connection with all the World

# All Messages Sent are Subject to the Following Conditions:

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

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message

remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

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

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

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

CNOT	TRANSMITTED)	í

Signature o	f Sender		Addr	ess St. John's.	
Line Number	RcdBy	Sent	by	Check	
Dated	July 22nd	1919.			
To	Mr. John	Stratton,			
	Gree	nspond.		×	

5462 Pte. Henry Stratton at Hillsea Military Hospital Hants will be discharged in a few days

> A.E. HICKMAN Minister of Militia.

Chg. to Dept. of Militia.

NEWFOUNDLAND POSTAL TELEGRAPHS. CABLE CONNECTION WITH ALL PARTS OF THE WORLD some Fig. 2 ) some by H Roca of M April elas gend 15/ 5462 Pre Henry Stratton pick winchester Kindly Enquire his Condition John Stratten

Extract from telegram from synoptical, from military dated July 15th. 1919.

Please inform whereabouts and condition of 5462 Stratton.

C:R: 5462

Extract from Dely Orders part 11, them Unit TheReyal Bild.Rogt.Sy.Hjohm's dated July 85,1918

The following men cubashed for divisions on H.H.S. "Columbell" July 28,1918.

#5462 Pte.Henry Stratton.

Extract from Daily Orders part 11, from Unit The Royal Fild.Regt.St.John's, dated May 29,1918

#5462 Pte. H. Stratten.

Attested for General Service with the Royal Efld.Regt. from May 27th,1918

A JOSOL 3 46 V Reprint for Royal Nifel. Regt of Army Form B. 178A.

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

# MEDICAL HISTORY

A STATE OF THE PARTY OF THE PAR	OF /
Surname Otraller	Christian Name Henry
/ Table I C	ENEDAL TABLE

$\mathcal{A}$	Table I.—GENERAL TABL	E	1
Birthplace:—Parish Ane		1110	X
	on SPECIAL RESERVE 195.	REGULAR ARMY on day of	
Examined	at Stychnic.	on day of	191
Declared Age	24 years days	years	days
Trade or Occupation	Fisherman		
Height	feet 7 tuches	feet	inches
Weight	149 lbs.		lbs.
Chest   Girth when fully expanded   Measure-   Range of Expansion	36 inches		inches inches
Physical Development			
Vaccination Marks Arm	Right Left	Right   Left	
When Vaccinated	ben		
Vision }	RE.—V= //L.E.—V=///	R.E.—V= 1.E.—V=	
(a) Marks indicating congenital peculi- arities or previous disease	(a)	(a)	
(b) Slight defects but not sufficient to cause rejection	(b)	(6)	
Approved by (Signature)	L'annotaberon		-A
(Rank)	Medical Officer.	Modi	100
Hulisted	on My th day of May 1918.	at day of	ol Officer.
Joined on Enlistment	Regtl. No.	Corps Regtl.	No.
	Reguirent.		
Transferred to		倒 4	
Became non-effective by		. 50	
(Signature)	on day of 191	on day of	191
(Rank)		7	Г

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	1 Signatures
<u> </u>		
18 5/8	Vacc. 40	
	TAB. LO	
4-9-18	TAB. 10	
1-7-18	TABA	
		3
		and the second
<u> </u>		

#### 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
4.99	TO A SOURCE MANNEY Show the way on a second				
and the	-				•
THE STATE OF THE S			·		
A Meladowick (Editor)					
				4 255	
				,	

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms		an 1	Nu Nu	amber of Sheet one
B 121. 39.	Regimen	t of okelloyal	Nu lew foundland Signature of O. C. Compan	y Crockfie
Regimental Number and Name	Enlistment	Trade	Good Conduct Badges, Service pay or proficiency pay	

					No. of the second	-1			
	mental Num	ber and Nat	ne	Enlistment	Trade	Good Conduct Badges, S	ervice pay o	r proficiency pay	
No. 1.162	Strat	ten	La	Age on 2 of years months	Religion O	+			
Joined		Date	1	Place and Date of Enlistment	Bill				
Joined		Date			7 9	-			
Joined		Date		Period of F	lace of Birth				
Joined		Date	- Democrated	with Reserve years	Tolensoona	4		`	
Place	Date of Offence	Rank	Cases of Drunken- ness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
									•
									121
									n B.
									Form
									. Агшу
,									Am
			300	To be carried over,					

Norm.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvia.), 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 Pr., or P. (17) 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.

Transfer to Class W., W. (T), P.,	or P. (1), of the Keserve.
1. Unit and Corps. Royal Man found low	or Occupation
2. Regtl. No. 3.4.6.2 3. Rank.	7a. If the soldier claims previous service in Army, he should state—
4. Name Aratten Menoy (Surname) (Christign Names)	(a) Former Regts, or Corps; with Regtl. Nos.
5. Age last birthday2.5	在1000000000000000000000000000000000000
6. Posted for duty on at	1 m
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;
The first of the product of the second of th	(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	kai kirila na mana mana na kai
Note.—The foregoing particulars are to be filled in and A.F.B. 179 is seen by the Officer in charge of the case.	B (statement by the soldier) completed before the soldier

#### 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.

12. Place of origin of disability.

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.

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Security of amountable of the control of the contro

		(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?	
les, eye, ear, some and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible and in cases of amputation the exact position		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 Complains of ho desability
sheuld be stated.			
	16.	Was an operation performed? If so, when and what was its nature?	
	17.	If not, was an operation advised and declined?	
		•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 treat- ment 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?	
			en en general en
	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.	poemin Cyl Hame
		tion Hozeley bourn	Medical Officer in charge of case.
	it is	• Loss of teeth on or immediately after active service, should due to some other cause	d be attributed thereto, unless there is evidence that

(a) attributable to

(b) aggravated by

14. State whether the disabilities are

(i.) Service during the present war (ii.) Previous active service....

Fig. 6 No. 5 Strutten . Defect Verin In Ohice Morchetes, wie not make Rec. besto h. Br.

Nº 6163



# THE ROYAL NEWFOUNDLAND REGIMENT

#### ALLOTMENTS

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	Address	AMOUNT (each perso	
484	tather	m. John Stratter	Greenspore		
			1 13	3	
	1				
`					
		Electrical and the second			
<u> </u>				-	
			Total Allotment, S		
NOTE.	This form must be signed by the Office required payments	completed by the Officer Commanding Company and hande on application.	ng Company, signed by the Voluned to the Paymaster as authority	teer, counte	

Nº 6163



## THE ROYAL NEWFOUNDLAND REGIMENT

# **ALLOTMENTS** 1. Henry Stratter , Regl. No. 57 62 hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and 7 Ats. Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person and Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person and Persons concerned, viz.: Duy 10 1/18 Allotment begins Identity Certificate No. Whether Wife, Child. other Relative or Friend AMOUNT (each person) m John Stratter Greenspond 1484 Father Total Allotment, S 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.) Ewalson Lient (Sig.) Henry X tratter Officer Commanding

Stratton, A 5462

Pay Dept.

H.F.P./54.

MO.544 .

From: Pay & Record Office, London.

To: Minister of Militia, St. John's Mfld.

#5462 Pte.H.Stratton

Hespital Stoppages whilst at Hilden Military Hespital as per voucher 758.

£ 2.11.9.

# DEPARTMENT OF MILLIPIA.

WAR SERVICE CRASSILLY.

So. John's Newfoundland.

Designation required of Officers and non of the Royal Revfoundland Regiment, who claims War Service Greatity under Order-in-Council dated January 28th, 1918,

A complete reply much be given to every prection in this Declaration Phone has be no blonds and no declared my questions are not applicable, the words Top LPPLICABLET must be written out.

On completion this Declaration is to be returned to MED OFFICER I/C

PRODUCE, MAY & RECORD OFFICE, ST. JOHN'S.
Christian name Meury Samone Stratton
3. Renk
5. Address in full to which future powrents of gratuity are to be
forwarded. Greensport
,
6. Date of enlistment in the Regiment
7. Name of dependent, if any, to whom Separation Allowance is being
issued, or was being issued, irmediately prior to your discharge
not applicable
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, II so, give dates and
perticulars of such service Duenseas
•••••••
***************************************
12. Give total length of time which you served on active service,
whother in liftd.or Oversees deneuteen mouths.
······································

John Mar More of the Control of the
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. Not applicable
***************************************
15. Have you been issued with a War Service Badge?
16. Have you, during the present war, served in the I perial Dorces. W.
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 mount received, or to which you are entitled
18.Did you revert Oversees to a rank lower than the substantive
renk hold by you on your arrivel in England?
(b) If so was such reversion in consequence of Misconduct or
inefficiency?
19. Are you now serving in the Root, 2. 10 To not give 2- (c) date
of discharge October 4/19. (b) Reason for discharge
Demok
***************************************
20. Did you at any time serve at the front in an actual theatre of
the state of the s
Var? If so give particulars of places, and dates of such service
17. Are you entitled to receive, or have you received any 6: tuity
An the nature of Past perchange Pay from the Mederal Percess 11
21.(a) Are you receiving treatment from the Wivil Re-Establishment
Com.(b) If so are you in receipt of full pay and allowances from
that Cormittee
And I che 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.
to the state of th

Place of To	0 Smarth	
ETSCO OT 168	sidence: Treuspord,	
Declared bea	sidence: Greene pord, fore ne et: Si Johnson	
This	Joth day of Systember 1919	rfo
	Signature of Berrister of the Supreme Court, Stipendiary Hegistrate, Notary Public, Hustice of the Peace, or Commissioner of affidevits.	X

	POST	DISCHARG	E PAY.				
Da te	paid	Paid Soldier.	Paid Dependent	War Service Gratuity.	0	Net amount due	
- 							•
				:		•••••••••	•
	Ċ	crtified	correct.	• • • • • • • • • • • • • • • • • • • •	Paymast	ter	•

Greenspond.
Nov. 26 : 7613 Dec 3/19 bal 4/18 72 2800 17447 29320 108.72

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

# ${\bf MEDICAL_{OF} HISTORY}$

Surname Streeter

Christian Name

A

	Table 1.—GEN.	ERAL TABLE.						
Birthplace:—Parish	Parish County							
7 may 2	SPECIAL R	ESERVE.	REGULAR ARMY.					
***	on day of	191	on day of	191				
Examined								
•	at		at	days				
Declared age	years	days	years	days				
Trade or occupation								
Height	feet	inches	feet	inches				
Weight		lbs.		lbs.				
Chest Girth when fully expan- Measure- ded Range of expansion		inches		inches				
Physical development	Right	Left	Right	Left				
Vaccination marks Number								
When vaccinated								
Vision	R.E. – V. = L.E. – V. =		R.E. – V. = L.E. – V. =					
	(a)		(a)					
(a) Marks indicating congenital peculiarities or previous disease								
	(b)		(b)					
(b) Slight defects but not sufficient to cause rejection								
Approved by (Signature) (Rank)								
		Medical Officer.	-3	Medical Officer.				
			at					
Enlisted	f at							
	on day of	191	on day of	191 Regtl. No.				
Joined on culistment	G. Uffel.	S46/2	Corps	Regti. No.				
	<b>4</b>							
Transferred to	<u> </u>			1.00				
Became non-effective by			2 (2)					
<u> </u>	on day of	191	on day of	191				
(Signature)	\	•						
(Rank)								
(Black to be sure that the sure of the sur				[P.T.6				

	Admitted to hospital		Discharged from hospital			Number	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of		
Name of hospital		150/250	Year	Day Month Year		Disease	Number of days in hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In case of syphilis, admissions and re-admissions to hopping with well become . The subsequent progress, including particulars of treatment out of hopping, transfers, &c., will be given in the special syphilis case sheet	Signature of Medical Officer
Hilsea	13	_ح	19	15 6	6 19.	Ginnelas	95	Coppiere inte auna prit unants a producti. Tradeci 14 7.00 imjo, tot is but, unant detecti, provinti homy. Fir a rijoi mit	
								in be undered d'heating proviatio mongo.	•
								Jir t rijai wir	Clanford Can
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								The state of the s	
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						Hill .			
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7								•	
						100			

Oct.18,1919

#3462 Pte.Henry Stratton, Green spond.

De ar Sir:-

Please find enclosed Discharge Certificate #3868.
Yours tmly

Major

Paymaster.

Demobilization Form 5

### The Royal Newfoundland Regiment

PROSEEDINGS ON DISCHARGE
1. No. 2 462. Rank. Ste Name Stratton At. Intended place of residegace. Leenshood.
2. Occupation
3. The above named man is discharged in consequence of  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  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, ST. JOHN'S  Date  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 for the page.  Place, ST. JOHN'S  Date 20 - 9 - 19  Signature of witness
STATEMENT OF SERVICE  7. Enlisted for Service.  7. Enlisted for Service.  7. Enlisted from service.  7. Plus 14 days  8. Service.
APPROVAL OF DISCHARGE
8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer ile Records, The Royal Newfoundland Regiment, twenty-eight days from datay Place, ST. JOHN'S 4-10-10 Difficor Commanding Discharge Depot The Royal Newfoundland Regiment
CONFIRMATION OF DISCHARGE
9. The discharge of above mentioned soldier is hereby confirmed Mowley, Mays Place, STROHNE 18/1919  Office is Records The Royal Newfoundland Regiment
and 20.79/388.

### The Koyal Pewfoundland Kegiment

Class for Demobilization:—

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

Discharge Depot: Headquarters The Royal Newfoundla	ind Kegiment
	Date
Regimental No. 5462	E of
Name Stratton to &	L. M. M.
Address Greenspond	(1996년) 전 1997년 (1997년) 1992년 - 1997년 (1997년) 전 1997년 1982년 (1997년) 전 1997년 (1997년)
Present Medical Category A	
Fresent medical Category	
	((a) Immediate discharge Suu Dis
Recommended for:—	(b) Standing Medical Board
	10.
	A mowley of.
	O.C. Discharge Depoi.
	To aleron
It is hereby certified that this soldier Board	Senior Medical Officer
has been before a Travelling Medical	Doer Bunder
Board and has been classified as	* A Panot
E for Discharge on Demobilisa-	M.O. Dapot
게 없는 것이 없는 것이 없는 것이 있다. 그런 것이 없는	
tion. Medical gategory 4.1.	
19,9,99 may Captain	
Dute of T.M.B. Maistant Adjutant Discharge Const. News aundiand	

## The Royal Newfoundland Regiment

DEMOBILIZATION OF
Rec. No. 462 Range & An & Name Stratton A
Date of Enfishment 245-196 Address Jarran from District Bonants
Occupation Justerman Classification for Discharge E Medical Category A
Recommendation S.M.B
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 179 D 400B Form L do 3rd " 4
B 179a D 400C Form K do 4th " 5 "
B 179b B 103 ME 2 " 6 " 6
B 179c B 120 M 93
Date. 20 O. C. Discharge Depot
I. Civil Re-Establishment.
I amin a position to resume civilian occupation.
11 Hint 1
Henry Histon
Particulars passed to Vocational Officer for information and action
Date
2. Clothing.
Certified that Clothing Regulations have been complied with:
(a) Clothing Allowance payable 4.05.
(b) Clothing Supplied A thrown of f
Date. 2. 0 9 1. 9 O i/c. Re-clothing.

3. Transportation and Release Certificate.  The above named has been provided with Travelling Warrant No. 2.5.4.4
at free ported and Release Certificate No. 3848. issued.
Date 20 9 - 19 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 20-9-19  Subject to Adjustment of Overseas PAY ACCI
Discharge approved for. 4-10-19
Forwarded with following documents to O.C Discharge Depot.
N.F. P 36.
Date 96-9-17 Demobilization Office.
APPROVED.
Documents as above forwarded to:—
Officer ilc Records. Board of Pension Commissioners.
with following additional documents.
Eligible for War Service Gratuity
Date 20-9-19 Amount of O. C. Discharge Depot.
Received the above noted documents from O. C. Discharge Depot.
Executed 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 fellows:

To resume furmer Occupation.

Leny Hostrotton Signature of Man.

Signature of the Vocational Officer or his Representative.

Place St. To hi

Date 20 - 9 - 191 9



### 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 occuring in the description subsequent to the date of admission to pension should be noted in red ink. Name in full Regiment from which discharged Royal Alewfoundland Regimental number Intended address Height on discharge Color of hair on discharge Complexion Color of eyes 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 verspond 24-8-1892 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)

(Rank)

Station

I call that the Bold naded soldier signed the foregoing de my presence, and that the above description and details are, to the best of my knowledge correct.



Medical Officer i|c Hospital. Unit, or Command Depot.

Nº 6163



### THE ROYAL NEWFOUNDLAND REGIMENT

# ALLOTMENTS I, Henry Strattin , Regl. No. 54 62

Identity Certificate No.	hether Wife, Child. other Relative or Friend	N (i - f - 11)			
1.10		Name (in full)	· ·	Address	AMOUN' (each pers
184 7	ather !	m. John Stra	etter	Greenspone	
				BB	
			- 12-17		
		•			
					-
		•			-
				Total Allotment, S	كا

Hr. Stratton # 6642. Yallrea Hospital # 2-11-19 12.58 13.54 Balance to Payment 72-15-8 2.36 Danages at Hellrea Hotel 9/8 6.00 12 days allot @ 50 20.00 out Feb 1920. Oct 18/19 % Pay led no 15813. -70.00 out in Feb 1920 noy 18 118:72 Dec 3 Istat 293.20. ler. Pay 6/9/19. to 17/9/19 12 dys @#1.10 13.20 280.00 W. S. Gratuly Total 293.20

0647 treenspond. Paymaster April 15-Dept of Militia It oms Dear Six . I understand that all soldiers after bein, discharged should receive four months By or in round figures the sum of From Hundred and eights dollars \$ 280. 2 after beny home a considerable time I wrote your department encoronery this matter, think it was Late in Teluary or in January Last, Shortly after & received a checque of one Hundred and Eighteen dollars \$1/800 stating final By. now I understand from all ex-soldiers that frined up when I did and arrived Home much earlier that they have all received the two Hundred and eighty \$ 280 = mentioned above. That being so why have only received one Hundred and explanen \$11000 will you kinds explain, or if it is not your work will you Clease Pass this letter to whom it may concern, and as I am auxious for an explanation; Knidly reply by earliest Possible mail Yours Fruly. 5462 The Henry Stratten. otele

Sett of Hilitia Greenshond.

Holminga. 18ay 10/920

Genstemen recently 6-9-19 not credited could bay from 1320 to 17-9-19 = 12days W Stratuly 471105 7000 28000 293.20 I wrote you in reference to Total Gedits a sum of money that runderstood was due me as an a Soldier. Tay at cheesea Hospeta 12.58 I stated that up to the time of writing I had received only Sept 5 bal du tolaymeste dat 13.54 \$ 11 2 but Shall undonetood the If leaving landon + 2215-8 2.31 total amount due me was \$280 03 Clamages at delses Hospitas 1/8 you will to be correct my first; No 18 hay 7000 Payment was \$ 118.60 and by \$ 293.20 Forat of \$ 268.60. De B overpaid acet Total Delits

And I acknowledge with thanks (2) But I am at a lost to know why The reduction of \$21.40 as I understand all my half received sovy to have to trouble you again, But I would welcome an explanation, and I trust you will jive this matter your attention, and Kindly forward reply at your earliest convientes your! Ful. 5:462 The Honry Straten

## ST. JOHN'S, Sept 19 K /19

## Royal Newfoundland Regiment.

Billeting Account, To the H	Stratt	m
Billeting Soldiers as undermentioned		<u> </u>
from Sefe 22 nd /19 to Oct 4 19		Mad I
5462 Mit H Shatter	13	80
AGCOUNT CH. NO. 1140 J INITIALS IND. LEDGER INIT ALS	-	
PAY LEDGER INITIALS  GEN. LEDGER INITIALS  Contified correct for S. A. J.		
R. F Billeting Officer.	-	

54 62 Kov. 27/19. To. Capt: Houley. Chief Paymoster. Dear Sir. I am forwarding my Har Gratuity papers which I forgot to hand in when I was discharged I was wondering why it was I didn't get my Gratuity till now I found out that I had to give in my papers, which I friget to do. How Dir would you send this my money on as soon as possible as I have been home Livo mos, and haint got any and am in need fit. By So doing you will Oblige yours Sincirely

Henry Stratten

## DEPARTMENT OF MILITIA.

\$ 118 PA	Y VOUCHER.	Dec 3 1919
Received from the sum of one hund	the First Newfor	undland Regiment
the sum of Pay. West balance of Pay. West	le + lighten	— QDouars.
Ch. No. 2.11.3.9. Initials. CBA. Pay Ledger 35.55 Initials. WW.	Regtl. No	Rapa C
Gen. Ledger Initials		

Rame Healton

Reenspord

### December 3,1919

H. Stratton, GREENSPOND.

Dear Sir:

I enclose herewith cheque for \$118.72, balance of War Service Gratuity due you.

Yours truly,

Major Paymaster

IM-Enc.

Reg. No	5462 Rank Ptu Name Stratten, H	
	27-5-18 Address Greenshoud Da	(her)
D	for Overseas.  Cause.	
S.Z.	46 9,8 - 24 9,8, 28 4,8 R.L. 4-7-18, 3 N Inoe 11-7-18.	
11/1/8	admitter To M. J.D. Hos (numps)	
•	•	

C.R. 4164 for 2 1784

(d) Particulars of Pension or Gratuity

(if any)

Note.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under part. 392 cv. of Evia.), 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.

2. Regtl. No. 6.4. 62	a Rank	Ph	or Occupation  7a. If the soldier claims previous ser Army, he should state—	
4. Name(Surname	bratten 25	(Christian James)	(a) Former Regts. or Corps; with Regtl. Nos.	
5. Age last birthday.	25			
6. Posted for duty on in category (or a	at grade) at			
8. If the disability is	an injury was it caus	sed .		
(a) in action	(b) on field se	rvice		
(c) on duty	(d) off duty?		(b) Date of Discharge;	
			(c) Cause of Discharge.	
9. If a Court of Inqu	iry was held on an	injury state :—		
(a) When				

(c) Opinion of Court Norz.—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 exclasively 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.

(b) Where

- 12. Place of origin of disability.
- 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.

err to explicit or some milital

hit hit

14.	State whether the disabili	ities are	(a) attributable to	(b) aggravated by
	(i.) Service during the	present war		
	(ii.) Previous active serv	vice		
	(iii.) Climate in pre-war	service		
	(iv.) Ordinary military s	ervice before the war		
	(v.) Serious negligence man's part.	or misconduct on th	e}	1 1 1 1 1 1 1 1 1 1 1 1
14	(a). If not due to any of specific condition	of these causes, to w do you attribute it?	<b>5</b> 0	
ear, throat, throat, throat, throat, throat, throat, throat to be with a p h s suble; uses of n the oution stated.	What is his present condition (A note should be may when it is likely to gress of the disability of the disability when the disability was an operation performed.	de as to Weight in all ca afford evidence of the f ty.)		lains of no invited
10.	was its nature?	ir ii so, when and wi	nat	
17.	If not, was an operation ad	lvised and declined?	*	
18.	In the case of loss or decay teeth the result of wo directly attributable to a service under such cond ment was unobtainable?	unds, injury or disea active service or throu litions that dental trea	ase oh	•
19.	Give particulars of any other not in themselves suffici State whether or not the have been aggravated by a war, and if so, to what or conditions?	ient to cause invalidir ey are attributable to service during the prese	ng. or	

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.

rocumer.

apt Ram

Medical Officer in charge of case,

Station Payely Down

Date 6/4/19

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