



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 5519 Name Baxter Taylor Corps West

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

- |  |                                    |
|--|------------------------------------|
| 1. What is your name? .....  | 1. <u>Baxter Taylor</u>            |
| 2. What is your full Address? .....  | 2. <u>Post Office West</u>         |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u>                      |
| 4. What is your age? .....   | 4. <u>10</u> Year <u>11</u> Months |
| 5. What is your Trade or Calling? .....  | 5. <u>Seaman</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 <u>West</u>                |
| 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, Baxter Taylor 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.

Baxter Taylor SIGNATURE OF RECRUIT.

John Jones Signature of Witness.

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

I, Baxter Taylor do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

### CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. Johns

on this 20th day of May 1915.

Signature of Attesting Officer C. S. Dicks Lieut

### † CERTIFICATE OF APPROVING OFFICER.

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

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

Date.....1915

Place.....

} Approving Officer.

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

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



C.R. 5519.

Extract from Casualties received from Pay & Record Office,  
London, April 24th, 1919.

The undermention was discharged from 3rd London General  
Hospital on 17/4/19 and reported to Depot same date. Marked  
fit for 1 duty.

5519 Pte. B. Taylor.



C.R. 5519

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

Remittance received as follows:- Have not been paid  
Soldiers repatriated, you can adjust.

5519 Taylor

£.8.4.0.



C.R. 5519

Extract from Daily Orders Part II Royal Newfoundland Regiment  
Depot St. John's dated 17-7-19

The discharge of the undernoted on demobilization has been  
CONFIRMED by Officer i/c records from noted date.  
15-7-19.

5519, Pte. Baxter Taylor.

C.R. 5519

Extract from Daily Orders Part II Unit The Royal WFLC.

Regt. "1" the Field, 21st 51-3-19.

5519 Pte. B. Taylor

Invalided to U.K. 20-3-19 Sick.

C.R. 5579

Extract from Casualties received from Pay  
and Record Office, London dated 17th. April 1919.

The undermentioned was discharged from 3rd. London  
General Hospital, on 17/4/19. He is marked I, Duty  
and report to 2nd. Battn. Winchester, 17/4/191

#5519 Pte. B. Taylor.

AUTHORITY. A.F's. W. 3127 from 3rd. LHM.



C.R. 5519

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

Date

June 18th 1919.

5519, Pte. B. Taylor.

Reported at Headquarters 1/6/19.

ex "Corsican"

which sailed Liverpool May 22/1919.

C.R. 5519

Extract from Daily Orders Part 11 Unit The Royal Wfld. Regt.  
St. John's, June 20th, 1919.

The discharge of the undernoted on demobilization has been  
APPROVED by O.C. Discharge Depot with effect from 1-7-19.

5519 Pte. B. Taylor.

C.R. 5519

Extract of War Office ListtNo. H.A. 35116 from Pay  
& Record Office, London, dated Feb. 28th/19.

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Admitted to 6 General Hospital ROUEN, Feb. 17th/19.

INFLUENZA SEVERE.

5519 Pte. B. Taylor.



C.R. 5519

Extract from Casualties received from Pay & Record Office,  
London dated 19th. March 1919.

The undermentioned, ~~xxxxxxx~~ was transferred from the 2nd.  
to the 3rd. London General Hospital on 17/3/19.

5519 Pte. B. Taylor.

C.R. 5519

Extract from Daily Ordres part II, Depot Winchester  
by Lieut. Col. B.J. Barton, D.S.O. Officer Commanding  
2nd. Battalion dated 19-4-19.

The following having reported back from the 1st. Battalion  
is taken on the strength and posted to "H" Company from

#5519 Pte. B. Taylor.

17-4 -19.

CR 5519

April 14th, 1919

Mr. Esau Taylor

Post Br. N. D. B.

Dear Sir:-

I beg to inform you that additional information has to-day been received from the Visiting Committee of the Newfoundland War Contingent Association concerning the condition of your son, No. 5519, Private Baxter Taylor, to the effect that he is now progressing favourably.

Yours faithfully,

Lieut. Col.,

Chief Staff Officer.



CR. 5519

Extract from War Office List No. H. A. 17683

Admitted St. Andrews Hos. Dollis Hill, London N.W.  
10th. March 1919.

5519 Pte. B. Taylor.

Influenza.

C.R. 5519

Extract of telegram from Syn., London,  
to Military.

March 15th/19.

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INFLUENZA.

#5519 Taylor.

C.R. 5519  
Counter No. \_\_\_\_\_

# NEWFOUNDLAND POSTAL TELEGRAPHS.



## Cable Connection with all the World

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

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

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

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

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

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

**(NOT TRANSMITTED)**

Signature of Sender \_\_\_\_\_ Address Dept of Militia.

Line Number	Rcd	By	Sent	by	Check

March 15th, 1919

Dated

To

Esau Taylor, Boot Hr. N.D.B.

Regret to inform you that Record Office, London, officially reports No. 5519, private Baxter Taylor now at St. Andrew's Hospital, London suffering from influenza

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

J.R. Bennett

Minister of Militia.  
Chge Dept of Militia.

**FOR TYPEWRITER**

C.R. 3-3-19

Extract from Nominal Roll of draft No. 56, from the 2nd.,  
Battalion, Winchester to the 1st., Battalion of the  
Newfoundland Regiment, Embarked Southampton, 23/11/18.

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5519 Pge. B. Taylor.

C.R.

5519

Extract from Daily Orders part 11, from Unit The Royal  
Rifles, Reg. St. John's, dated July 28 25th, 1918.

The following men embarked for overseas on H.M.S.  
"Columella" July 22, 1918.

~~James~~ Pte. Baxter Taylor

5519



C.R. 5579

Extract from Daily Orders part 11, from Unit The Royal  
Nfld. Regt. St. John's, dated May 31, 1918

#5519 Pte. B. Taylor

Attested for General Service with the Royal Nfld. Regt.  
from May 30, 1918

B Taylor

C.R.

5519

~~1895~~

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*
2. Regtl. No. *5519* 3. Rank. *Pte*
4. Name *Taylor* *Baxter*  
(Surname) (Christian Names)
5. Age last birthday. *21*
6. Posted for duty on *30-5-18* at *St. Johns*  
 in category (or grade).....
7. Former Trade or Occupation } *Fisherman*
- 7a. If the soldier claims previous service in Army, he should state—  
 (a) Former Regts. or Corps ; with Regtl. Nos.
8. If the disability is an injury was it caused  
 (a) in action (b) on field service  
 (c) on duty (d) off duty ?
9. If a Court of Inquiry was held on an injury state :—  
 (a) When (b) Date of Discharge ;  
 (b) Where (c) Cause of Discharge.  
 (c) Opinion of Court (d) Particulars of Pension or Gratuity (if any)

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.
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.

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

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war .. .. .
  - (ii.) Previous active service .. .. .
  - (iii.) Climate in pre-war service .. .. .
  - (iv.) Ordinary military service before the war .. .. .
  - (v.) Serious negligence or misconduct on the man's part. } .. .. .

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

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? *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.*

*Repatriation*

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.

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

Station

*Hogel's D. Camp*

Date

*14-5-19*

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

**OPINION OF THE MEDICAL BOARD.**

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

21. Give diagnosis and particulars of:—

- (a) Any disability claimed or discovered.
- (b) The present condition thereof.

22. 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 part of the soldier .. .. . | .....               | .....             |
- Give details:

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it? .. .. .

23. Is the disability in a final stationary condition? If not

- (a) How long is the present degree of disability likely to last?
- (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

25. If an operation was advised and declined, was the refusal unreasonable?

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

Opinion of Military Member in case of disagreement.

OR

- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures:—

Station *Lozely D. Camp* ..... } President or Chairman.  
 Date *14-5-19* ..... } Members.

Discharge Approved under Para. 392 (xvi) King's Regulations.

Station ..... } Only applicable in cases of Patients in Hospitals.  
 Date ..... } Officer in charge, Central Hospital.

OR

Discharge Approved under Para. 392 ( ) King's Regulations.  
 or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T).)

Station .....  
 Date ..... O.C. Discharge Centre.







No. 7446/1475.

N.F.P. No.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,  
1/Bn Royal Newfoundland Regiment.  
Winchester.

15th May 1919

1919.

5519 Pte Taylor B.

With reference to the following telegram from the Minister of Militia / / 19 ( 185 ):

"Pay to-5519 Taylor.  
£8:4:0:

Cheque £8:4:0: is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

*B. A. Minchin Maj.*  
Chief Paymaster & O. i/c records.

Receipt hereunder.

Officer Commdg.                      Batt'n.

Received the sum of                       
                     in respect of  
telegraphic remittance from the  
Minister of Militia.

No.                      Rank                     

Witness:

3rd London gen. Harro.  
Wandsworth

To pay Master

Please pay to  
me the sum of one pound  
as charge same to my  
account

5519 Det. P. Taylor.  
Royal. W. Regs.

Approved  
Wm. H. H. H.

A.R. £1-0-0  
M.R. 14/4/19  
Receipt No. 2015



22a

3rd London. gen. Hosp.  
Manx West S.W. 18

To pay Master 28.3.19

Please pay to me  
The sum of one pound  
on charge the same to  
my account.

.5569. Pet B Taylor

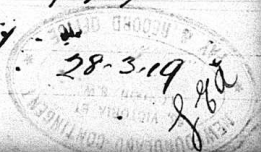
Royal Afld Reg

Approved  
Wm Taylor  
Comptroller



A.K. £ 1-0-0 W.R. 28/3/19

Receipt No. 1854





3rd London. Gen. Hosp.  
Wanswort. S.W. 18  
March. 24. 19.

To pay master

please pay to  
me two pounds in charge  
same to my account.

5519 Pet B Taylor  
Royal Field Reg.

*Wm Taylor*



2.0.0  
24/3/19  
Receipt 1919

He  
gza

3rd London Gen Hosp  
Wanswort S W 18

March 22. 19

To Pay Master

Royal Wld Reg

Please pay to me  
The sum of one pound  
and charge the same to  
my account

5519 Det. B. Taylor

Royal Wld Reg

OK #10-0  
22/31.9 WLD  
R 1779

Re approved  
Major  
represented



L Ed

37 of London General Hospital  
Mar 21<sup>st</sup> 1919.

To Paymaster.

Royal Newfoundland Regt.

Please pay to me the sum  
of One Pound and charge  
the same to my account.  
I oblige

W. D. Taylor  
5519 Royal N.F.D. Regt.



One pound approved

W. D. Taylor

21/3/19

OK £1.0.0  
21/3/19

Receipt 1771

Tea

No. 4616/47

N.F.P./80.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,  
3rd. London General Hospital,  
Wandsworth, S.W.

24th March 1919

5519 Pte. Taylor B.

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

"Pay to- 5519 Taylor

£10. 6. 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.

*R.O. Munroe Maj.*  
Chief Paymaster & O. i/c Records.

10  
25/3/1919  
NEWFOUNDLAND CONTINGENT  
58 VICTORIA STREET  
LONDON, S.W.  
10  
Kindly place  
this remittance  
to the credit of  
5519 Pte Taylor B  
a/c please.

*H. J. G. ...*  
for 6. 6

3rd LONDON GENERAL HOSPITAL,  
WANDSWORTH, S. W.

Deposited

22/3/19

*J.W.*

Taylor, B

5519

Hay Sept.



July 15, 1919

#5519 Pte. Baxter Taylor,

Boat Harbor, N.D.B.

Dear Sir:-

Please find enclosed Discharge Certificate #3044.

Yours truly

Captain,  
#3ymester & v.i/c Records

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 5519 Rank Pte Name Jay Col B  
 Intended place of residence Boat Hill  
 2. Occupation Fishermen  
 Classification of soldier E Medical Category A1

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 17 1919

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, ST. JOHN'S

Date JUN 17 1919

B Taylor  
 Signature of soldier

Am. Colchester  
 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, ST. JOHN'S

Date JUN 17 1919

B Taylor  
 Signature of soldier

W. Beaton Oms.  
 Signature of witness

## STATEMENT OF SERVICE

7. Enlisted for service 30-5-18 No. of days on Military  
 Discharged from service 1-7-19 Plus 14 days Service 413

## APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S

Date JUL 1 1919

R. H. Lint Major  
 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

Date July 15/1919

M. Bowley Capt  
 Officer i/c Records  
 The Royal Newfoundland Regiment

d 9/8/19/3044

# The Royal Newfoundland Regiment

Class for Demobilization:

*E*  
*6*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 16.6.19

Regimental No 5579

Name Laylor B. Rank Pte

Address N.S.B.

Present Medical Category A1

Recommended for: — (a) Immediate discharge  
(b) Standard Medical Board

Members of Board

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

H. Peterson  
Senior Medical Officer

J.W. Borden  
M. O. Depot

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 5519 Rank PLC Name Taylor B.  
 Date of Enlistment 30.5.18 Address Box 14 District Twillingate  
 Occupation Fisherman Classification for Discharge 6 Medical Category AI  
 Recommendation S. M. B. \_\_\_\_\_ Disability Rating \_\_\_\_\_

Passed to Demobilization Officer with following documents:—

N.F. 1136	B 268	B 121	1	N.F. Med	D.F. 1	1
B 178	W 3494	B 122		Board 1st	" 2	3
B 178a	D 400A	B 1915	1	do 2nd	" 3	
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
B 179b	B 103	ME 2			" 6	
B 179c	B 120	M 93				

Date 16.6.19 O. C. Discharge Depot Twillingate

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am / in a position to resume civilian occupation.

*B Taylor*

Particulars passed to Vocational Officer for information and action.

Date \_\_\_\_\_

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$16.00
- (b) Clothing Supplied \_\_\_\_\_

*Amelton*

Date 17-6-19

O i.c. Re-clothing



**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrants No. R. 1841 to his home at Point Hill and Release Certificate No. 2865 issued.

Date 17-6-19 *J.A. Newbott*  
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 15-7-19

Date 17-1-19 *J.A. Newbott*  
Depot Paymaster.

Discharge approved for 1-7-19  
Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1	<i>2 Form B</i>
B 178	2 W 3494	B 122	Board 1st	" 2	
B 178a	1 D 400A	B 1915	do 2nd	" 3	
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	1 D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B179c	B 120	M 93			

Date 17-6-19 *J.A. Newbott*  
O. C. Discharge Depot.

**APPROVED.**

Documents as above forwarded to:—

- Officer i/c Records.
- Board of Pension Commissioners.

with following additional documents.

**Eligible for War Service Gratuity**

Date JUL 1 1919 *R.H. Sait*  
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.

B Taylor

Signature of Man.

Reg. No. 5519.

J. H. Crawford

Signature of the Vocational Officer or his Representative.

Place

ST. JOHN'S

Date

17-6-19.

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Used only for Special Reserve Recruits, and for Special Reservists enlisting into the Regular Army.

# MEDICAL HISTORY

Surname Taylor OF Christian Name Baxter

Table I.—GENERAL TABLE.

Birthplace:—Parish Booth Har. Nfld. County Nfld.

*Quincy, Prov.*

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	30 <sup>th</sup>	May		1918
at	St. John's			
Declared Age	20	years		days
Trade or Occupation	Fisherman			
Height	5	feet	9 3/4	inches
Weight	144	lbs.		lbs.
Chest measurement	Girth when fully expanded		37	inches
	Range of Expansion		4	inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	/	/		
When Vaccinated				
Vision	R.E.—V=	6/6	R.E.—V=	
	L.E.—V=	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)	<i>L. M. Paterson</i>			
(Rank)	Major		Medical Officer.	
Enlisted	at	St. John's	at	
	on	day of	on	day of
		May		1918
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	Royal Nfld. Regiment.	5519.		
Transferred to	ROYAL NEWFOUNDLAND REGIMENT.			
Became non-effective by	on	day of	on	day of
(Signature)				
(Rank)				

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on syphilis, admissions of treat
	Day	Month	Year	Day	Month	Year			
St. Andrew's Hospital, Dollis Hill, London, N.W.	10	3	1919	17	3	19	Influenza	8.	

st in case of Warrant Officers treated in quarters.

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

Signature of Medical Officer

*Small red pen c*









## 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 *Baxter Taylor*

Regiment from which discharged **Royal Newfoundland**

Regimental number

*5519*

Intended address

*R. D. Bay*

Height on discharge

*5* Feet *10*

Color of hair on discharge

*Dark*

Complexion

*Fair*

Color of eyes

*Brown*

Descriptive Marks

Figure on discharge

*Tall*

Christian name of Father

*Esau*

Christian name of Mother

*Susan*

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth

*Booth Hr. N. D. Bay 8<sup>th</sup> Jan 1898*

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)

*B. Taylor*

*Pt.*  
(Rank)

Station

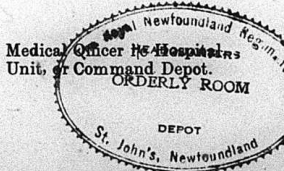
Date

*16-6-19*

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



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. *1st Regt. Newfoundland*
2. Regtl. No. *5519* 3. Rank. *Capt*
4. Name *Taylor* *Baxter*  
(Surname) (Christian Names)
5. Age last birthday. *21*
6. Posted for duty on *20-5-18* at *St. John's*  
in category (or grade).....
7. Former Trade or Occupation } *Fisherman*
- 7a. If the soldier claims previous service in Army, he should state—  
(a) Former Regts. or Corps; with Regtl. Nos.
8. If the disability is an injury was it caused  
(a) in action (b) on field service  
(c) on duty (d) off duty? (b) Date of Discharge;  
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—  
(a) When (d) Particulars of Pension or Gratuity (if any)  
(b) Where  
(c) Opinion of Court

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

### Statement of Case.

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

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

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

**OPINION OF THE MEDICAL BOARD.**

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

14. State whether the disabilities are
- |  |         |                     |                   |
|--|---------|---------------------|-------------------|
| (i.) Service during the present war  | .. .. . | (a) attributable to | (b) aggravated by |
| (ii.) Previous active service  | .. .. . | } <i>na</i>         | .. .. .           |
| (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? | .. .. . |                     | } <i>na</i>       |

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.)
- na complains 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*

*Repatriation*

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.

*W.S. Proctor* *Capt. R.A.M.C.*  
 Medical Officer in charge of case.

Station *Bagley, D.O. camp*

Date *11-8-19*

\* 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

21. Give diagnosis and particulars of—
- (a) Any disability claimed or discovered.
- (b) The present condition thereof.
22. 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 part of the soldier | .. .. .             | .. .. .           |
- Give details:

- 22 (a). If not due to any of these causes, to what specific condition do the Board attribute it? .. .. .
23. Is the disability in a final stationary condition? If not
- (a) How long is the present degree of disability likely to last?
- (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

25. If an operation was advised and declined, was the refusal unreasonable?

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

Opinion of Military Member in case of disagreement.

OR

- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures:—

Station ..... *Hazeley D. Camp* ..... { President or  
Chairman.

Date ..... *12-5-19* ..... { Members.

Discharge Approved under Para. 392 (xvi) King's Regulations.

Station ..... { Only applicable  
in cases of  
Patients in  
Hospitals.

Date ..... Officer in charge, Central Hospital.

OR  
Discharge Approved under Para. 392 ( ) King's Regulations.  
or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station .....  
Date ..... O.C. Discharge Centre.













**Casualty Form—Active Service.**



Regiment or Corps..... *ROYAL NEWFOUNDLAND REG*

Rank *Pte* Surname *Jaylor* Christian Name *JR*

Religion *Methodist* Age on Enlistment *20* years *30* months

Enlisted (a) *20/5/18* Terms of Service (a)..... DURATION..... Service reckons from (a) *30/5/18*

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

Extended { *S* } Re-engaged { } Qualification (b).....

Occupation *Fisherman* or Corps Trade and Rate..... *ML Coy Cap* Signature of Officer.

Report		Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received			
		Embarked ...		
		Disembarked...	<i>28 NOV 1918</i>	
	<i>6 Gen H. Adam</i>	<i>Adm Influenza ser.</i>	<i>17-2-19</i>	<i>Alt 35116</i>
	<i>Ex. 6. Gen to UK.</i>	<i>HMT Formosa</i>	<i>8-3-19</i>	<i>B210 2-083</i>
	<i>Jmt</i>	<i>ML Coy Cap</i>		<i>for Lt Col</i> <i>1/c No. 1 Inf Det.</i>

(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 (17691.) Wt. W 1887-P 1124. 1,000,000. 6/18. D & S. Form B.103. (E. 1254.)

Next of kin: *Father* *Esau Jaylor* *Brook St. Notre Dame Bas* *N L D.*

July 21, 1919

#5519 Pte. Baxter Taylor,  
Boat Harbor, N. D. B.

Dear Sir:-

Referring to your application I enclose cheque for  
seventy dollars (\$70.00), being amount of first payment due  
you on account of the war service gratuity.

Yours truly,

Captain & Paymaster.



DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

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

Christian name..... *Booster* ..... 2. Surname..... *Joyson* .....

3. Rank..... *Pte* ..... 4. Regt. No. .... *5519* .....

5. Address in full to which future payments of gratuity are to be forwarded..... *Boast Str.* ..... *N. W. B.* .....

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

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....  
..... *No* .....

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..... *Thirteen months* .....

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.

*\$71.68 Cohen, Etc*

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

*no*

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

*no*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.

*no*

18. Did you revert overseas to a rank lower than the substantive rank held by you on your arrival in England?.....

*no*

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

*no*

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

*no*

*Jan 1/18*

*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 - Somme*

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.





Boat Harbor

a D B

J R Bennett  
St Johns

6. 8. 19

Dear Sir. While I was  
in England. James Taylor  
wired me forty Dollars  
from Spring Dale office  
it was wired the 12<sup>th</sup> May  
1919. I leaved England  
for home on the 22<sup>nd</sup> May  
an didnt get the money  
I was to the office in  
Springdale. it didnt  
come back there.

please look it up  
for me. I remain  
yours truly

No 5519

pet B Taylor

Boat Harbor  
Falls Bay. a D B



C.R. 5519

RECEIPT.

FOR ISSUES 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.

NAME.. *Baxter Taylor.*

DATE.. *Nov. 25. 1919*  
PLACE... *Boat Harbour*

*25*  
*1919*



# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 5519 Rank N/C Name Taylor B.  
 Date of Enlistment 30.5.19 Address Booth St District Lowlygate  
 Occupation Fisher Classification for Discharge 16 Medical Category AI  
 Recommendation S. M. B. \_\_\_\_\_ Disability Rating \_\_\_\_\_

Passed to Demobilization Officer with following documents:—

N. F. 136	B 268	B 121	1	N. F. Med	D. F. 1	1
B 178	W 3494	B 122		Board Ist.	" 2	
B 178a	D 400A	B 1915	1	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	1		" 6	
B 179c	B 120	M 93				

Date 16.6.19

*J. H. Mansfield*  
 O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

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

*B Taylor*

Particulars passed to Vocational Officer for information and action.

Date \_\_\_\_\_

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$16.00

(b) Clothing Supplied \_\_\_\_\_

*W. Johnston*

Date 17-6-19

O. i/c. Re-clothing

**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrants No. R.1841 to his home at 2001 1/2 St. and Release Certificate No. 31003 issued.

Date 17-6-19 *J.A. [Signature]*  
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 15-7-19

Date 17-1-19 *J.A. [Signature]*  
Depot Paymaster.

Discharge approved for 1-7-19  
Forwarded with following documents to O.C. Discharge Depot.

N.F. P36	B 288	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B179c	B 120	M 93		

*2 Form B*

Date 17-6-19 *J.A. [Signature]*  
O. C. Discharge Depot.

**APPROVED.**

Documents as above forwarded to:—

Officer in Records.  
Board of Pension Commissioners.

with following additional documents:

**Eligible for War Service Gratuity**

Date JUL 1 1919 *R.H. [Signature]*  
O. C. Discharge Depot.

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

Date July 20 1919

*[Signature]*  
*[Signature]*

Reg. No. 5619 Rank Pvt Name Taylor, B. L Co  
Attested 30-5-18 Address Box 101 Dr. T. D. B.  
Allotment 6000 Allottee Mrs. Esau Taylor (Father)  
Date of Allotment 1/18/18 Returned from Overseas  
Embarked for Overseas Jan 22 1918 Cause

1/18 Acc

15/18

5/18

Inoc. 2nd time 4-7-18, 3rd Inoc 11-7-18.  
16-6-18 to 24-6-18 29/18 R. L.



