



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5161 Name Ed Thornhill Corps Coq.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---|
| 1. What is your name? | 1. <u>Ed Thornhill</u> |
| 2. What is your full Address? | 2. <u>Little Bay East
Fortune Bay</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>19</u> Years <u>—</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Fisherman</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? | 10. Name
Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes</u> |

I, Ed Thornhill 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.

Ed Thornhill SIGNATURE OF RECRUIT.

18.5.18 John C. [unclear] Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 18 day of May 1918

Signature of Attesting Officer Edwards 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 compiled with. I accordingly approve, and appoint him to the:

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

Date May 18 1918 }
Place St. John's } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

5161

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

Name Eli Thornhill
 Apparent age 19 years — months. Height 5 feet 10 inches
 Chest Measurement { Girth when fully expanded 37½ inches
 Range of expansion 4½ inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin George Thornhill
Seller Bay East | Relationship Father
Fortune Bay 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 Lepot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing 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 <u>Engagement</u> reckons from <u>18-5-14</u> Jointed at <u>St John's</u> on <u>May 18-1918</u>									<u>Leone Capt. 20.7.18</u> <u>Reed Lt. Rank 7.9.18.</u>
<u>Discharged July 24 1919</u>									
<u>Countersigned St. Columella to St. John's 22-7-18</u> <u>To Headquarters for demobilization 22-5-19</u> <u>Arrived to Headquarters 1-6-1919</u>									
Total Service forfeited as above <u>Demobilization St. John's 4-7-1919</u>									
Total Service towards Engagement to <u>4-7-1919</u> (date of discharge) <u>1</u> years <u>48</u> days									
Pension _____									

E. Thornhill

C.R. 5161

[Handwritten signature]

Reg. No. 5161 Rank Pte Name Thornhill E. D.
Attested 18-5-18 Address Little Bay East J. B.
Allotment 50 Allotee Mrs Geo. Thornhill (mother)
Date of Allotment 1-8-18 Returned from Overseas 22-7-18
Embarked for Overseas 111 22 1918 Cause _____

20-5-18	Val
A.R. 1898	- 25/19 R.L. 4-7-18.
20-7-18	1869 Proc
22-7-18	Promoted To Lance Corporal

C.R. 5161

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

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

5161, Pte. Eli Thornhill.

C.R.

5161

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

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

5161 Pte. E. Thornhill.

C.R. 5161

Extract from Daily Orders Part 11 Depot, St. John's,
Date 9-6-19.

5161 Pte. E. Thornhill

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

C.R. 5761

Extract from Daily Orders part 11, from Unit^y The Royal
Field Regt. St. John's, dated July 21st, 1918.

The following man embarked for overseas on H.M.S.
"Columbella" July 22, 1918.

#5161 B/Up1. Eli Thornhill.

C.R. 5161

Extract from Orders, Part 11 by Lt. Col., B.J. Barton, D.S.O.,
Commanding 2nd Bn., Royal Newfoundland Regiment, dated 9/9/18.

Reference to Bn. Orders Part 11, of 7/9/18 "Reverts" should read
No. 5161 L/Cpl. Thornhill and not 4938 L/Cpl. Thornhill.

C.R. 5161

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. St. John's, dated July 23, 1918.

#5161 Pte. E. Thornhill.

to be Lance-Corporal from July 20, 1918

Extract from Daily Orders part 11, from U it The Royal Wfld.
Regt. St. John's, dated May 20, 1918.

#5161 Pte. Eli Thornhill.

Attested for General Service with the Royal Wfld. Regt. S
from 18.5.18

CR 5161

NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 4 Sent by R Rec'd by Check No. 11

Place from Little Bay East

To C E Keckler



Received no word from
 516 1/2 Thornhill Knisley
 aware of these ~~pl~~
 reply.

Mr J R Thornhill

Mr Edwards
 per way in
 done

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	Recd	By	Sent	by	Check

Dated **June 6 1919**
To **Mr. G.R. Thornhill**
 Little Bay East.

Beg to inform you 5161 Thornhill will be discharged to-morrow. Have informed him of your message.

A.E. Hickman
Minister of Militia.

C.R. 5161-

Counter No. _____

NEWFOUNDLAND POSTAL TELEGRAPHS.



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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 Militia Dept.

Line Number	Rcd	By	Sent	by	Check

Dated May 29th. 1919.

To Mrs. G. R. Thornhill, Little Bay East F.B.

5161 Thornhill with draft 5360 Dodge not with draft.

A. E. HICKMAN

Minister of Militia.

Charge to Dept. of Militia.

FOR TYPEWRITER

copy C.R. 5161
NEWFOUNDLAND POSTAL TELEGRAPHS



CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 16 Sent by J Rec'd by _____ Check 12 No. _____

Place from Little Bay East

To King of Melilla



Kindly inform me of
no 5151 and 5360
 are passengers by
 Caravan

Mrs J R Thornhill

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 Newfoundlands } Former Trade or Occupation } Iskerman
2. Regtl. No. 5161 3. Rank. plc 7a. If the soldier claims previous service in Army, he should state—
4. Name J. Thornhill Elke (a) Former Regts. or Corps; with Regtl. Nos.
(Surname) (Christian Names)
5. Age last birthday. 20
6. Posted for duty on..... at..... in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—
(a) When (d) Particulars of Pension or Gratuity (if any)
(b) Where
(c) Opinion of Court

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

Statement of Case.

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

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

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

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

20. Do you recommend—

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

Repatriation

W. J. Procter *Capt. Raine*
 Medical Officer in charge of case.

Station *Hazeley Down*

Date *3/4/19*

* 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. 4472359

N.F.P./79.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
2/Bn. Royal Newfoundland Regt.,
Hazaey Down Camp,
Winchester.

P.P. 21
20th March 1919

Recd. 21/3/19
1919

5161 Pte. Thornhill E.

With reference to the following telegram from the Minister of Militia / / (84)

"Pay to- 5161 Thornhill,
£8. 0. 0.

Cheque £8. 0. 0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

M.A. Minnaul Maj.
Chief Paymaster & O. i/c Records.

Receipt hereunder

Kare
COMMANDED BY *Kare* LIEUT. COLONEL
OFFICER COMMANDING 2ND BATT' REGT.

Received the sum Eight pounds
in respect of

telegraphic remittance from the Minister of Militia.

E Thornhill
No. 5161 Rank Private
Witness W. Barnes

6

Thornhill, E.

5161

Ray Sept.

July 5, 1919

#5161 Pte. Eli Thornhill,

Little Bay West, F.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 & O.i/c Records

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

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

- Christian name *Eli*
S. Rank *Pte*
5. Address in full to which future payments of gratuity are to be forwarded *Little Bay East, F. B.*
6. Date of enlistment in the Regiment *May 18/18*
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 *—*
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 field, if so, give dates and particulars of such service *Overseas*
12. Give total length of time which you served on active service whether in field or overseas *From May 18/18 to June 6/19* 12

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.

Clothing allowance & back pay \$54.49

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, (b) Reason for discharge.

No
June 6/19
Temporary 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.

No

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: *Eli Thonhill*
 Place of Residence: *Little Bay East F. B.*
 Declared before me at: *St. John's, Nfld.*
 This *6th* day of *June* 19*19*.....

Signature of Barrister of the
 Supreme Court, Stipendiary Magis-
 trate; Notary Public, Justice of the
 Peace, or Commissioner of affidavits.
John M. Carthy
J.P.

POST DISCHARGE PAY.

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

July 4, 1919

#5161 Pte. Eli Thornhill,

Little Bay East, F.B.

Dear Sir:-

Please find enclosed Discharge

Certificate No. 2370.

Yours truly

Captain,
Sergeant & Officer i/c Records.

The Royal Wld. Regiment

DEMOBILIZATION

No. 5161 Rank

Name Thornhill E

Warned for demobilization on

JUN 6 1919

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5161 Rank Private Name Thornhill E
 Intended place of residence Little Bay E
2. Occupation Fisherman
 Classification of soldier E Medical Category AI

DEMobilIZATION.

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

Date JUN 6 1919

J. H. Marshall
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place and Date ST. JOHN'S

JUN 6 1919

DISCHARGE APPROVED BY DEMOBILISATION
 SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCOUNTS

E. Thornhill
 Signature of soldier

J. H. Marshall
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place and Date ST. JOHN'S

JUN 6 1919

E. Thornhill
 Signature of soldier

W. J. Cooney
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 18-5-18 No of days on Military
 Discharged from service 20-6-19 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 in Charge Records, The Royal Newfoundland Regiment, twenty-eight days from date.

Place ST. JOHN'S

JUN 20 1919

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

Date

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place St. John's, Nfld

Date July 11 1919

W. H. Cooney Capt.
 Officer in Charge Records
 The Royal Newfoundland Regiment

201917370

The Royal Newfoundland Regiment

Class for Demobilization:—

A

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *14.5.19*

Regimental No. *5161*

Name *Montwill* *S. Li*

Address

Present Medical Category..... *A-i*

Recommended for:— { (a) Immediate discharge

(b) ~~Senior~~ Medical Board

Members of Board {

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

Spencer
Senior Medical Officer

W. Burden
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5161 Rank Plt Name Thornhill E
 Date of Enlistment 16 5 18 Address Little Bay E District Johns
 Occupation Soldier Classification for Discharge E Medical Category AI
 Recommendation S.M.B. _____ Disability Rating _____
 Passed to Demobilization Officer with following documents:—

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 5 6 19

O. C. Discharge Depot

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable. \$60.00

(b) Clothing Supplied _____

Date 6-6-19

O i/c. Re-clothing _____

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. B.1509 to his home
at Little Bay and Release Certificate No. 2385 issued.

Date

6-6-19

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 4-7-19

Date

SUBJECT TO ADJUSTMENT OF DEERAS PAY ACCT.

J.A. Shaw Capt.
Depot Paymaster.

Discharge approved for

21-6-19
Forwarded with following documents to O.C. Discharge Depot.

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

Date

6-6-19

J.A. Shaw Capt.
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

JUN 20 1919

Eligible for War Service Gratuity

Date

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

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

Date

Civil Re-establishment Committee



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

To resume farmer occupation

El. Thonhill
Signature of Man.

Reg. No. 5761

J. H. Snow Capt.
Signature of the Vocational Officer or his Representative.

Place

Rt. Johns

Date

191

The Royal Newfoundland Regiment.

DEMOBILIZATION

CIVILIAN CLOTHING GUARANTEE.

I, No. 5161, Rank Pte., Name Thornhill E.

hereby undertake to supply myself with civilian clothing, consisting of one suit of clothes, one cap, one tie, one collar, one overcoat, within 28 days from date, in consideration of being issued with clothing allowance to the amount of \$ 60.00

Date JUN 6 1919

ST. JOHN'S.

E. Thornhill
Signature of Soldier.

J. W. Chaucey
Signature of Witness

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

MEDICAL HISTORY

Surname Thornhill

OF

Christian Name Eli

Table I.—GENERAL TABLE.

Birthplace:—Parish Pittet, May East 29. County Nfld

	SPECIAL RESERVE		REGULAR ARMY	
	on	at	on	at
Examined	18	Sp hus	day of	191
Declared Age... ..	19	years	years	days
Trade or Occupation	Fidderman			
Height	5	10	feet	inches
Weight	146			lbs.
Chest Measurement {	37 1/2			inches
	37 1/4			inches
Physical Development... ..				
Vaccination Marks {	Right	Left	Right	Left
When Vaccinated				
Vision	R. 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)	<u>Lamm Peterson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.			Medical Officer.
Enlisted	at	Sp hus	at	
	on	18	on	day of 191
		day of		191
	Corps	Regtl. No.	Corps	Regtl. No.
Joined on Enlistment... ..	<u>The Royal 5161</u>			
	<u>Nfld Regt</u>			
Transferred to... ..				
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				

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 readmissions to hospitals will be shown. The subsequent progress, including particulars sent out of hospital, transfers, etc., will be given in the special syphilis case sheet.

Signature of Medical Officer

G. H. Keppell

MAJOR, R.A.M.C.
OFFICER in MILITARY HOSPITAL.

[P.T.O.]

DEMOBILIZATION: CLOTHING CARD.

Reg. No. 516 Rank Pvt Name L. Thornhill, E.

Address Little Bay District Fortune

(a) To be issued Money Allowance in lieu of Clothing \$60.00

1. Has clothes in possession

2. To provide clothes himself

(b) Civilian Clothing to be obtained

(c) Articles issued in accordance with Demobilization Regulations Complete

Lieut.
R. Clothing Office
Discharge Depot-Newfoundland

DEMOBILIZATION: CLOTHING CARD.

Reg. No. 516 Rank Pte Name Thornhill, E.
 Address Little Bay E. District Fortune

(a) To be issued Money Allowance in lieu of Clothing \$60.00

1. Has clothes in possession
2. To provide clothes himself

(b) Civilian Clothing to be obtained

(c) Articles issued in accordance with Demobilization Regulations Complete

Lieut.
 R. Clothing Office
 Discharge Depot - Newfoundland

DEMOBILIZATION: CLOTHING CARD.

Reg No. 516 Rank Pte Name L. Thornhill, E.

Address Little Bay District Fortune

(a) To be issued Money Allowance in lieu of Clothing \$60.00

1. ~~His clothes in possession~~

2. To provide clothes himself

(b) Civilian Clothing to be obtained

(c) Articles issued in accordance with Demobilization Regulations Complete

Lieut.
R. Clothing Officer
Discharge Depot - Newfoundland

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 for 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. *5761* 3. Rank. *Plk.*
4. Name *Thorpehill* *Ed.*
(Surname) (Christian Names)
5. Age last birthday. *20*
6. Posted for duty on..... at.....
in category (or grade).....
7. Former Trade or Occupation } *Soldier*
- 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 a (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*

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. *5761* 3. Rank *S. Pl.*
4. Name *Thornhill* *Th*
(Surname) (Christian Names)
5. Age last birthday. *20*
6. Posted for duty on at
in category (or grade)
7. Former Trade or Occupation } *Sickerman*
- 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regtl. Nos.
(b) Date of Discharge;
(c) Cause of Discharge.
(d) Particulars of Pension or Gratuity (if any)
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) Where
(c) Opinion of Court

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

Statement of Case.

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

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

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

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, etc., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

The Complaints of no disability

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

20. Do you recommend—
- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?

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

Repatriation

W.E. Proemer, Cap Rmc.

Station *Hazeley Down*

Date *3/11/19*

Medical Officer in charge of case.

* 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



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 *Edw. Thornhill*

Regiment from which discharged **Royal Newfoundland**

Regimental number *5161*

Intended address *Little Bay & Fortune Bay*

Height on discharge *5* ^{Feet} *10*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks —

Figure on discharge *Normal*

Christian name of Father *George*

Christian name of Mother *Ellen*

Wife's maiden name in full —

Date and place of marriage —

Christian names of children —

Place and date of soldier's birth *Little Bay & Nov. 3, 1899*

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) *Edw. Thornhill* (Rank) *Pte*

Station *St. John's Nf* Date *4-6-19*

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

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

Station

Date

Little Bay
East

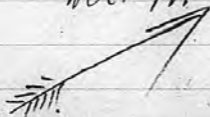
Fortune Bay

Nov. 13th
1927

Dear Sir

A letter came
here for me July 4/1927
to find enclosed Discharge
certificate No 2370. and
I was away. I found
at the certificate No 2370
a few days ago
5161 Chi Ghounhill

Mr. M. Howley



Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

Fold Here

OCT 20 1921

1921.

The accompanying ~~Victory Medal and/or~~ British War Medal

is/are forwarded herewith to

Eli Thornhill

in respect of his service as No. 5161 Rank Pte.

Name E. Thornhill Royal Nfld. Regt.
~~4th Bn. 1st Div. C.F.C.~~

Receipt of the same should be acknowledged hereon.

Received metal on table 23rd 1921.

Signature _____

Date Nov 12th 1921

Address Eli Thornhill, Little Bay East
Fortune Bay [P.T.O.]

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121.
39.Number of Sheet oneRegiment of Royal NewfoundlandSignature of O. C. Company Edwards

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	
No. <u>5161</u>	<u>Thorpehill, Eli</u>	Age on <u>19</u> years months	<u>Fisherman</u>	<u>Fisherman</u>	<u>23-7-18</u>	<u>Promoted Lance Corporal</u>
Joined _____	Date _____	Place and Date of Enlistment } <u>St John</u>	Religion	<u>Cong.</u>	<u>7-9-18</u>	<u>Resent at own request</u>
Joined _____	Date _____	Period of } with Colours <u>14 1/2</u> years.	Place of Birth	<u>Little Bay East, N.S.</u>	<u>W. Phipps Captain</u>	
Joined _____	Date _____		with Reserve <u>3 1/2</u> years.			<u>2nd Lt. R. H. NEWELL</u>

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
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Demobilized Sept 4 1919

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

85161

DEMOBILIZATION OF

Reg. No. 5161 Rank Plt Name Thornhill E
 Date of Enlistment 185.18 Address Little Bay E District Loburne
 Occupation Tradesman Classification for Discharge 1 Medical Category AI
 Recommendation S.M.B. _____ Disability Rating _____
 Passed to Demobilization Officer with following documents:—

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 5.6.19

for E. Thornhill
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Eli Thornhill

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable: \$6.00

(b) Clothing Supplied _____

Date 6-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. B.1509 to his home at Little Bay and Release Certificate No. 2385 issued.

Date 6-6-19 J.A. Snow Capt.
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 7-7-19

Date 6-6-19 W.H. Lewis Lt.
Depot Paymaster.

Discharge approved for 20-6-19

Forwarded with following documents to O.C Discharge Depot.

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

Date 6-6-19 J.A. Snow Capt.
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer file Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUN 20 1919 R.H. Lewis Capt.
O. C. Discharge Depot.

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

Date June 11, 1919 R.H. Lewis

Reg. No. 5161 Rank Pt Name Thornhill, E

Attested Address Little Bay East

Allotment Allottee

Date of Allotment Returned from Overseas 1-6-19

Returned on S.S. Corsican Cause Discharge

5-6-19

PASSED TO DEMOBILIZATION

7-6-19

DISCHARGE APPROVED ON DEMOBILIZATION