



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5867 Name John Guff Corps Infantry

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. John Guff
- 2. What is your full Address? 2. Templeton 1818
- 3. Are you a British Subject? 3. Yes
- 4. What is your age? 4. 20 Years Months
- 5. What is your Trade or Calling? 5. Fireman
- 6. Are you Married? 6. No
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. No
- 8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
- 9. Are you willing to be enlisted for General Service? 9. Yes
- 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? 10. Name Corps
- 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? 11. Yes

I, John Guff 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.

John Guff SIGNATURE OF RECRUIT.

Edmund Guff Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, John Guff 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 Johni on this 29 day of July 1915.

Signature of Attesting Officer Ed Dickson

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 1st
 If enlisted by special authority, such will be attached to the original attestation.

Date July 30 1915
 Place St. John's } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name John Tuff
 Apparent age 20 years months. Height 5 feet 1 1/2 inches
 Chest Measurement { Girth when fully expanded 37 1/2 inches
 Range of expansion 3 1/2 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin William Tuff
Templeman Rd | Relationship Father
 Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	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 limited engagement reckons from _____									
Joined at _____ on _____									
Total Service forfeited as above.....									

Total Service towards Engagement to _____ [date of discharge] _____ years _____ days
 " " Pensions " _____ [" "] _____ " _____



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5867 Name John Guff Corps Infantry

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. John Guff
- 2. What is your full Address? 2. St. James St. St. John's
- 3. Are you a British Subject? 3. Yes
- 4. What is your age? 4. 20 Years Months
- 5. What is your Trade or Calling? 5. Printer
- 6. Are you Married? 6. No
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7. No
- 8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
- 9. Are you willing to be enlisted for General Service? 9. Yes
- 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? 10. Name Corps
- 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? 11. Yes

I, John Guff 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.

John Guff SIGNATURE OF RECRUIT.

Wm. Raymond Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at..... on this 29 day of July 1915.

Wm. Dickson Signature of Attesting Officer

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.....

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

Date July 30 1915 } Approving Officer.

Place St. John's

† 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. 5867

Extract from Daily Orders part II, Depot
St. John's dated Jun. 24th., 1919.

The discharges of the undernoted on demobilisation
have been COMPLETED by Officer I/c Records on

23-1-19
~~23-1-19.~~

5867
~~#5867~~ Pte. John Tuff.

C.R. 5867

Extract from Daily Orders appt 1, Depot Lt. John's dated Dec. 28th. 1918.

The undernoted discharge on demobilisation have been approved by Officer Commanding discharge depot. From noted date. He is removed from depot strength and transferred to discharge depot pending confirmation by Officer in charge of Records.

#5867 Pte. John Tuff

NO.

26-12-18.

C.R. 5867

Extract from Daily Orders, Part 11, UNIT, The Royal Newfoundland Regiment, dated Nov. 28th. 1918.

HOSPITAL.

5867 Pte. J. Tuff.

Discharged from Escazevi 26/11/18.

C.R. 5867

Extract from Daily Orders part 11, Depot. St. John's dated
November 11th., 1918.

HOSPITAL.

5867 Pte. J. Tuff.

Transferred from General Hospital to Escasoni 9/11/18.

BC.

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 St. John's Dept. of Militia.

Line Number	Rcd	By	Sent	by	Check

Dated **Oct. 22, 1918.**

To **Mr. Wm. Tuff,**
Templeman, B.B.

beg to inform you that your son #5867 Pte. Tuff is now Convalescent.

J.R. Bennett,
Minister of Militia.

NEWFOUNDLAND POSTAL TELEGRAPHS.



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(NOT TRANSMITTED)

Signature of Sender _____ Address St. John's Dept. of Militia.

Line Number	Rcd	By	Sent	by	Check
-------------	-----	----	------	----	-------

Dated **Oct. 21, 1918.**

To **Mr. William Tuff,
Templeman B.B.**

beg to inform you that your son #5867 Pte. Tuff, is improving.

J.R. Bennett,

Minister of Militia.

FORM NO. ...

C.R. 5867



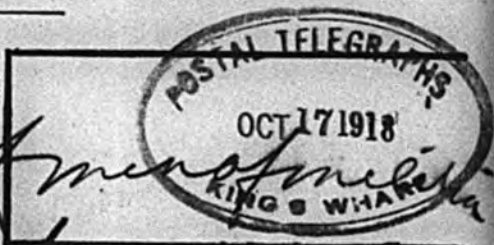
NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. _____ Sent by Ms Rec'd by _____ Check _____ No. _____

Place from St John's 17

To J R Bennett



⁵⁸⁶⁷
How is ^{the} John Luff
anxious to know reply

Mrs com Luff

Still seriously ill.

Counter No. 5867

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

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(NOT TRANSMITTED)

Signature of Sender _____ Address St. John's Dept. of Militia

Line Number	Rcd	By	Sent by	Check

Dated **Oct. 17th, 1918.**

To **Mrs. Wm. Tuff,
Newtown.**

**Request to inform you that your son 5867 Pts. John Tuff,
is still seriously ill.**

**J.R. Bennett,
Minister of Militia.**

FOR TYPEWRITER

GR 5867
Counter No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



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(NOT TRANSMITTED)

Signature of Sender _____ Address **St. John's Dept. of Militia**

Line Number	Rcd	By	Sent	by	Check

Dated **Oct. 16th, 1918.**

To **Mr. William Tuff,
Templeman, P.B.**

Regret to inform you that your son #5867 Pte. John Tuff is very dangerously ill at General Hospital.

**J.R. Bennett,
Minister of Militia.**

FOR TYPEWRITER

C.R. 5867
Counter No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

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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 **St. John's Dept. of Militia**

Line Number	Rcd	By	Sent	by	Chock

Dated **Oct. 15.1918.**

To **Mr. William Tuff,**

Templeman, B.B.

Regret to inform you that #5867 Pte. Tuff, Admitted to General Hospital on Saturday, seriously ill of Influenza & Bronchitis.

J.R. Bennett,

Minister of Militia.

FOR TYPEWRITER

C.R. 5867

Extract from DailynOrders Part 11 Unit The Royal Mfld.
Regt., St. John's Oct.5th,1918.

5867 Pte. J. Tuff.

Admitted to Barracks Hospital 2-10-18.

C.R. 5867

September 24, 1918.

#5867 Pte. J. Tuff.

Rev. & Dear Sir:-

I am directed to acknowledge receipt of your communication of 10th instant in connection with the above soldier. Under the regulations no difference is made between brothers married or unmarried in determining exemptions if same are of Military age. In this case, having three brothers not in service, he will be unable to claim exemption.

As he has enlisted voluntarily and has been serving for some time, I regret that no further action can be taken.

I have the honour to be,

Sir,

Your obedient servant,

Major.

Deputy Registrar.

Rev. S. Baggs,

Newtown, B.B.



C.R. 5867

THE ROYAL NEWFOUNDLAND REGIMENT
HEADQUARTERS

St. John's, Newfoundland,

September 17th*18 191

From O. C Depot,

To D.O.C., Newfoundland,
Militia Department,
Stott Building.

5867, Pte John Tuff

The above named soldier is 21 years of age and enlisted July 23rd/18. I have investigated the circumstances of his case and they coincide with those detailed in the attached letter. His brother Jabez was in the Regiment and was killed November 19, 1916

R. H. Lait

Captain,

O.C. Depot.

RH/TJW

ENC:

Newtown,
Bonavista Bay,
Sept. 10th. 1918.

J. R. Bennett Esq.,
Ministry of Militia,
St. John's.

Dear Sir:-

I beg to write you a few lines in the interest of No. 15864 Pte. John Tuff who wishes me to report his circumstances, and to know if even now he may be granted an exemption.

Pte. Tuff is about 20 yrs. of age. One other brother, Joseph, is 31 yrs. of age, and is unmarried, while two brothers are married with families. Another brother, Pte. James Tuff, has already been in service of the King, and fell in battle in November 1916. Pte. John Tuff, then, had two unmarried brothers one of whom had served in the Regiment, and has been killed in action. Would not, therefore, Pte. Tuff's case come under ground (b) of the exemption form?

Both parents are living, but both are in a poor state of health. The father has been unwell for several years;

and although he goes fishing occasionally, yet his state of health is such that he should remain in, and around, his home for the most part.

Pte. Tuff says that when his weight was being determined, he was several pounds short of the required weight, he being 114 lbs. On going to St. John's to report for service, Pte. Tuff did not apply for exemption. If he had, possibly he would have been exempted.

I am sending along this report re this young man; and his case may be considered in the interest of all concerned.

Yours sincerely,

Samuel Baggs,
Meth. Minister.

O. C. DEPOT,
FOR YOUR INFORMATION AND ATTENTION
[Signature]
Major.
District Officer Commanding,
Newfoundland.

Sept 1. 4

C.R. 5867

Extract from Daily Orders Part 11 Unit The Royal Nfld.

Regt. St. John's, dated August 15th, 1918.

5867 Pte. J. Tuff.

Granted leave from 15-8-18 to 24-8-18.

C.R. 5867

Extract from ~~Salisbury~~ Daily Orders part II, from Unit
The Royal Nfld. Regt. St. John's, dated July 30, 1918

#5867 Pte. John Tuff.

Attested for General Service with the Royal Nfld.
Regt. from 29-7-18

H. A. LESLIE. M.D., C.M.

CLARKE'S BEACH, *Newtown*

Sept. 10th 1918

R

This is to certify
That Mr R. Tuff 5864
has been ill under
my attendance
the last couple weeks

CUPIDS:

~~MONDAY, 10-12 A.M.~~
~~WEDNESDAY, 10-12 A.M.~~
~~FRIDAY, 4-6 P.M.~~
SATURDAY, 10-12 P.M.

VISITS,

BRIGUS:

~~TUESDAY, 4-6 P.M.~~
~~THURSDAY, 4-6 P.M.~~

H. A. Leslie
Dispenses own Prescriptions at Cupids.

Sept 10, 18
Newtown
PBB

This is to certify
that Pte Raymond
Duff of Fox Cove
has been ill under
medical attendance
until today

H. J. Hallie
M.D.

Duffy





NEWFOUNDLAND POSTAL TELEGRAMS

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 37 Sent by St Rec'd by mo Class 12pd No. _____

Place from Newtown

To Capt O'Grady
J. L. B. Armstrong

SEP 2 1918
JL

Lost ticket wesleyville
St John's Can I get
one from magistrate
Greenspond reply -
587 Pte John Huff

Make affidavit concerning loss of your
license; warrant to get pass from
magistrate - a/a -

Went
3/9

Sept 10/18
Newtown
B.B.

This is to certify
That Pte John Toff
of the 1st Bn
has been ill & under
medical attendance
until today

H. O. Keelin
M.D.

M. D.





NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 19 Sent by MS Rec'd by _____ Check Roll No. _____

Place from Newtown 24

To Capt O'Spady

And Old Farm



Will you extend leave till Sept second doctor attending us suffering from colds and inoculation.

Mrs Raymond & John Luff
Leave Extended

& to bring doctors. Message sent -
Certified JH Aug 28/18

No enquiry respecting this Message will be attended to without the production of this paper.

October 16th, 1918

From Asst. Adjutant,
Depot

To Casualty Officer,
Militia Department

The following information has been received from
the General Hospital this afternoon -

5867 Tuff

Very dangerously ill.

AC

September 17th*18

From O. C Dept.

To D.O.C., Newfoundland.
Militia Department,
Stott Building.

5867, Pte John Tuffe

The above named soldier is 21 years of age and enlisted July 23rd/18. I have investigated the circumstances of his case and they coincide with those detailed in the attached letter. His brother Jabez was in the Regiment and was killed November 19, 1916

Captain,
O.C. Depot.

~~RHC~~ TJW

ENC:

1867, John

5867

Hay Sept.

January 23rd., 1919

#5867 Pte. John Tuff,
Templeman, B.B.

Dear Sir:-

Please find enclosed "Discharge
Certificate No.695. "

Yours faithfully,

Captain,
Paymaster & O.i/c Records

Enc'1 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5867 Rank Pvt. Name John Tuff
 Intended place of residence Templeman St.

2. Occupation fisherman
 Classification of soldier P. Medical Category P.

DEMOBILIZATION.

3. The above named man is discharged in consequence of.....

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.

Place
 Date DEC. 23. 1918 Abbott Capt
 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. Johns John Tuff
 Signature of soldier
Dec 23rd 1918 Abbott Capt
 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 Dec 23rd 1918 John Tuff
 Signature of soldier
St. Johns Abbott Capt
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 29. 7. 18 No of days on Military
 Discharged from service 26. 12. 18 plus 28 days Service 179 days

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S R.H. Sait Capt.
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date DEC. 26. 1918

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed
 Place St. Johns, Nfld. R.H. Sait Capt.
 Officer in Charge
 The Royal Newfoundland Regiment
 Date January 23/1919

at B 2079/695

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5867 Rank Pte Name Tuff John
 Date of Enlistment 29-7-18 Address Temp. Amas District Bonaville
 Occupation Fisherman Classification for Discharge B Medical Category C
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	1	N.F. Med	D.F. 1	1
B 178	W 3494	B 122		Board 1st	" 2	
B 178a	1. D 400A	1. B 1915	2	do 2nd	" 3	3
B 179	2. D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K	1	do 4th	" 5	
B 179b	B 103	ME 2		<u>H2 Truss 1</u>	" 6	
B 179c	B 120	M 93	1			

Date 17-12-18

W. H. Cap
O. C. Discharge Depot

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

John Tuff

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~~ Joseph H. Lawford

Date 23-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R411* to his home at *Demphersman BB* and Release Certificate No. *563* issued.

Date *23-12-18* *CPDukes 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 *13-1-19*

Date *23-12-18* Depot Paymaster.

Discharge approved for *26.12.18*

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36.....	B 268.....	B 121.....	N.F. Med.....	D.F. 1.....	<i>20mm</i>
F 178.....	W 3494.....	B 122.....	Board 1st.....	" 2.....	
B 178a.....	D 400A.....	B 1915.....	do 2nd.....	" 3.....	
B 179.....	B 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 *24.12.18* *CPDukes Capt*
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—
Officer i/c Records,
Board of Pension Commissioners.
with following additional documents.

Date *DEC 26 1918* *RH Lat Capt*
O. C. Discharge Depot.

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

Date *Dec. 30/1918*

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

MEDICAL HISTORY

Surname Guff OF John Christian Name

Table I.—GENERAL TABLE

Birthplace:—Parish Templeton County Newfoundland

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	29	July		191
	at	St John's	at	
Declared Age	20	years		days
Trade or Occupation	fisherman			
Height	5	feet	1 1/2	inches
Weight			113	lbs.
Chest Measurement	Girth when fully expanded		32 1/2	inches
	Range of Expansion		3 1/4	inches
Physical Development				
Vaccination Marks	Arm	Right	Left	Right
	Number			
When Vaccinated				
Vision	R. E.—V=	6/12	R. E.—V=	
	L. E.—V=	6/12	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)	A. J. Paterson			
(Rank)	1904		Medical Officer	
Enlisted	at	St John's	at	
	on	29 day of July	on	day of 191
Joined on Enlistment	Corps	Royal	Regtl. No.	5867
		107th B. Regt		
Transferred to				
Became non-effective by				
(Signature)	on	day of	on	day of
(Rank)				

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 of hospital, transfers, etc., will be given in the special syphilis case sheet.

Signature of Medical Officer

Temp. & Pulse normal for three weeks.

E. Ryan

W. Watson



Descriptive Return of a Soldier Discharged on Account of Disability

INSTRUCTIONS—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station," and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. i/c Records together with the remainder of the man's documents.

Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

Name in full *Jeff John*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *5867*
 Intended address *Templeman B.B.*
 Height on discharge *5* Feet *8*
 Color of hair on discharge *fair*
 Complexion *fair*
 Color of eyes *blue*
 Descriptive Marks
 Figure on discharge *medium*
 Christian name of Father *William*
 Christian name of Mother *Selena*
 Wife's maiden name in full
 Date and place of marriage
 Christian names of children
 Place and date of soldier's birth. *Templeman Jan. 12th 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) *John Jeff*

(Rank) *Pte*

Station *St John's*

Date *Nov 26/18*

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.

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

Station *St John's*

Date *Nov 27/18*

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 work at Fishing

his
John Luff
mark

witness J. E. Sinclair
etc

Signature of Man.

Reg. No. *5867*

Charles C. ...

Signature of the Vocational Officer or his Representative.

Place *St. Johns N.Y.L.D.*

Date *23/12/18* 191

E

Bonawente

Demobilization Form 1

400A

The Royal Newfoundland Regiment

Class for Demobilization:—
B

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 12.17.19

Regimental No. 5867

Name *Staff Sgt John P. ...*

Address *Leamington
Bonaventure Bay*

Present Medical Category *A# E*

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

*Proceedings of S.M.B
in file
&*

Members of Board

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

L. Pateron
Senior Medical Officer

W. Burden
M. O. Depot

C

Bonavente



The Royal Newfoundland Regiment

REPORT OF HEADQUARTERS TRAVELLING BOARD HELD ON SOLDIER ON REGIMENTAL STRENGTH

Depot: Headquarters, Royal Newfoundland Regiment

Date *Nov 26th 1918*

Regimental No. *5867*

Name *Suff John*

Address *Temp Amou. B. B.*

Disease or Disability *Influenza + Bronchitis*

Finding of last Standing Medical Board, _____

held on _____ 19 _____

Present Condition _____

Recommendation *Standing Medical Board*

Category *10*

*"Proceedings of
S.M.B. in file"*

Members
of
Board

_____	O. C. Depot
<i>Waterson</i>	D. D. M. S.
<i>LeBorden</i>	M. O. Depot
<i>Exp</i>	



Department of Militia, Newfoundland

Medical Department

Medical Report on an Invalid

NOTES:—

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

STATEMENT OF CASE

Station **St. John's**

Date **Nov. 26th '18.**

- | | | |
|-----------------------------------|-------------------------------|-----------------------|
| 1. Unit <i>Royal Newfoundland</i> | 5. Age last birthday | 20 years |
| 2. Regimental No. 5867 | 6. Enlisted on | July 29th '18. |
| 3. Rank PTE | at | St. John's |
| 4. Name TUFF, JOHN | 7. Former trade or occupation | Fisherman |
| | 8. Disability | |

INFLUENZA AND BRONCHITIS

9. History
- Entered General Hospital, St. John's 12-10-18.
 Discharged to Convalescent Hospital (Escasoni),
 9-11-18.
 Discharged to Barracks 26-11-18.**

10. What is his present condition?

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

General condition good.
No accompaniments chest.
Complains occasional stitches in side.

Medical Department

Medical Report on an Incubid

11. Was sanatorium advised and refused?
operation

12. Do you recommend discharge as permanently unfit?

Yes

TREATMENT OF CASE

Signature **L. PATERSON**.....

Rank or Qualification **Major**.....

Remarks if any by Officer in Hospital.

Place Signature

Date Rank

Opinion of the Medical Board

In para. 13, the President should write "may" or "cannot" at x
Erase inapplicable words

13. For pension purposes, the disability x ~~may~~ be considered as ~~aggravated by~~ due to
- (a) ~~Service during this war.~~ (b) ~~Climate.~~ (c) Ordinary Military Service
Remarks if any:—
14. Does the Board concur in preceding report? (see Sect. 10) If not give differing opinion and additional findings.
Yes. Complained of stitch in side before enlistment.
Weight 123½ lbs
15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market? **Nil**
- (b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a full livelihood in the general labor market lessened by that portion of his disability to or incurred during service? **Nil**
(State in percentage.)
- Remarks if any:—
16. Is the disability permanent?
17. Has the disability been aggravated by (a) Intemperance **No** (b) Misconduct **No**
18. The refusal of operation sanatorium is:— (a) Reasonable (b) Unreasonable
- Remarks if any:—
19. If fit subject for Hospital do you recommend admittance to **No**

General Hospital, Naval and Military Con- valescent Hospital, Jensen Tuberculosis Camp.
--
20. We recommend discharge from retention in the Army **Permanently Unfit**

Remarks if any:—

(Sgd) N. S. FRASER

President

J. SINCLAIR TAIT

Signatures.....

L. PATERSON, Major

Place St. John's, Nfld.,
Date Nov. 30th., 1918

APPROVED

Station
Date



(Sgd) CLUNY MACPHERSON, Major
D.M. 6. NEWFOUNDLAND
Administrative Medical Officer

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at Hopkinton on July 29 1918

1. Name John Duff Age (a) Declared 20 years
(b) Apparent

2. Do you know of anything wrong with you? no

What severe illnesses have you had? none

eyes
comp.
mark's
new
light

5864

3. Height 5ft 1 1/2 Weight 113
4. Eyesight (a) Left 6/12 (b) Right 6/12
5. Physical Defects (Examine after strenuous exercise) ~

6. Examination of Lungs ~
Measurement (a) Expiration 29 (b) Inspiration 32 1/2

7. Examination of Heart ~

8. Examination of Urine ~

9. Examination of Mouth—(Defective Speech)
Teeth
Throat
Nose
Ears—(Otorrhea)
(Deafness) ~

10. Have you been successfully vaccinated, and when? no

11. Name and address of next of kin Sgt William Dempsey B.B.

REMARKS—

A 11

Archibald
St. Burden
Medical Examiners.

Silver Badge
O.K.

Dec 26
1920

Dear Henryson

Address - Gentlemen

Dear Sir i
Send a few lines
to one and.
all of you too let
know that i have
received my Badge all
the rest off the Boys
have there i suppose
mind must gone
astray by mild
Please right and
let me know if its
was send to one. #5867
= John Juffs

5867

TUFF, JOHN

PTE

TEMPLEMAN B. B.


BOARDS

1st

30/11/18

N11

DISCHARGED 23/1/19



Department of Militia, Newfoundland

Medical Department

Medical Report on an Invalid

NOTES:—

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

STATEMENT OF CASE


Station **St. John's**

Date **Nov. 26th '18.**

- | | | |
|-----------------------------------|-------------------------------|-----------------------|
| 1. Unit <i>Royal Newfoundland</i> | 5. Age last birthday | 20 years |
| 2. Regimental No. 5867 | 6. Enlisted on | July 29th '18. |
| 3. Rank PTE | at | St. John's |
| 4. Name TUFF, JOHN | 7. Former trade or occupation | Fisherman |
| 8. Disability | | |

INFLUENZA AND BRONCHITIS

9. History **Entered General Hospital, St. John's 12-10-18.
Discharged to Convalescent Hospital (Escasoni),
9-11-18.
Discharged to Barracks 26-11-18.**



Department of Militia, Newfoundland

Medical Department

Medical Report on an Invalid

NOTES:—

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

STATEMENT OF CASE

Station **St. John's**

Date **Nov. 26th '18.**

- | | | |
|-----------------------------------|-------------------------------|-----------------------|
| 1. Unit <i>Royal Newfoundland</i> | 5. Age last birthday | 20 years |
| 2. Regimental No. 5867 | 6. Enlisted on | July 29th '18. |
| 3. Rank PTE | at | St. John's |
| 4. Name TUFF, JOHN | 7. Former trade or occupation | Fisherman |
| | 8. Disability | |

INFLUENZA AND BRONCHITIS

9. History **Entered General Hospital, St. John's 12-10-18.
Discharged to Convalescent Hospital (Escasoni),
9-11-18.
Discharged to Barracks 26-11-18.**

10. What is his present condition?

General condition good.
No accompaniments chest.
Complains occasional stitches in
side.

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

11. Was sanatorium advised and refused?
operation

12. Do you recommend discharge as
permanently unfit?

Yes

Signature L. PATERSON.....

Rank or Qualification Major.....

Remarks if any by Officer i/c Hospital.

Place Signature

Date Rank

Opinion of the Medical Board

In para. 13, the President should write "may" or "cannot" at x
Erase inapplicable words

13. For pension purposes, the disability x **may** be considered as ~~aggravated by~~ due to

(a) ~~Service during this war.~~ (b) ~~Climate~~ (c) Ordinary Military Service
Remarks if any:—

14. Does the Board concur in preceding report? (see Sect. 10) If not give differing opinion and additional findings.

Yes. Complained of stitch in side before enlistment.

Weight 123½ lbs

15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market? **Nil**

(b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a full livelihood in the general labor market lessened by that portion of his disability to or incurred during service? **Nil**

(State in percentage.)

Remarks if any:—

16. Is the disability permanent?

17. Has the disability been aggravated by (a) Intemperence **No** (b) Misconduct **No**

18. The refusal of operation sanatorium is:— (a) Reasonable
(b) Unreasonable

Remarks if any:—

19. If fit subject for Hospital do you recommend admittance to

}	General Hospital,	No
	Naval and Military Convalescent Hospital,	
	Jensen Tuberculosis Camp.	

20. We recommend discharge from retention in the Army **Permanently Unfit**

Remarks if any:—

(Sgd) N. S. FRASER.....

President

J. SINCLAIR TAIT

Signatures.....

L. PATERSON, Major

Place **St. John's, Nfld.**.....

Date **Nov. 30th., 1918**.....

APPROVED

Station.....

Date.....



(Sgd) CLUNY MACPHERSON, Major
D. M. S. NEWFOUNDLAND,
Administrative Medical Officer



Descriptive Return of a Soldier Discharged on Account of Disability

INSTRUCTIONS—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station," and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. i/c Records together with the remainder of the man's documents.

Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

Name in full **TUFF, JOHN**
 Regiment from which discharged *1st. Newfoundland*
 Regimental number **5867**
 Intended address **Templeman, B.B.**

Height on discharge **5 Feet 2in.**
 Color of hair on discharge **Fair**
 Complexion **Fair**
 Color of eyes **Blue**
 Descriptive Marks **----**
 Figure on discharge **Medium**
 Christian name of Father **William**
 Christian name of Mother **Selina**
 Wife's maiden name in full **-----**
 Date and place of marriage **-----**
 Christian names of children **-----**

Place and date of soldier's birth. **Templeman, June 12th 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) **(Sgd) JOHN TUFF**

(Rank) **PTE**

Station **St. John's**

Date **Nov. 26th '18.**

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.

L. PATERSON

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

Station **St. John's**

Date **Nov. 28th '18.**

ROYAL NEWFOUNDLAND REGIMENT.

Supplement

5867

Medical Examination Held at *Headquarters* on *July 29* 191*9*

- 1. Name *John Suff* Age (a) Declared *20 years*
(b) Apparent
- 2. Do you know of anything wrong with you? *no*

What severe illnesses have you had? *none*

*eyes
comp
muscle*

*blue
light*

- 3. Height *5ft 1 1/2* Weight *113*
- 4. Eyesight (a) Left *4/12* (b) Right *4/12*
- 5. Physical Defects (Examine after strenuous exercise) ~

- 6. Examination of Lungs ~
Measurement (a) Expiration *29* (b) Inspiration *32 1/2*

7. Examination of Heart ~

8. Examination of Urine ~

- 9. Examination of Mouth—(Defective Speech)
 - Teeth
 - Throat
 - Nose
 - Ears—(Otorrhea)
 - (Deafness)

- 10. Have you been successfully vaccinated, and when? *no*
- 11. Name and address of next of kin *Father William Templeman BBB*

REMARKS—

A 11
*Sgd Archibald Sault
J.W. Burdau*

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of Regt Newfoundland Regt

Number of Sheet One
Signature of O. C. Company Crisiko Lieut.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	
No.	<u>5867 John Guff</u>	Age on	<u>20</u> years <u>0</u> months	<u>Yeshernan</u>		
Joined	Date	Place and Date of Enlistment	<u>St Johns</u>	Religion		
Joined	Date		<u>29/7/18</u>	<u>Cath</u>		
Joined	Date	Period of	with Colours	Place of Birth		
Joined	Date		<u>179</u> years	<u>Hempden</u>	<u>B/B</u>	
			with Reserve			
			<u>36</u> years			

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<u>Demobilized St Johns</u>	<u>23</u>	<u>19</u>			

To be carried over.

Army Form B. 121.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5867 Rank Pte Name Tuff John
 Date of Enlistment 29-7-18 Address Templeman District Bona Vista
 Occupation Fisherman Classification for Discharge B Medical Category E
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P/36.....	B 268.....	B 121.....	1	N.F. Med.....	D.F. 1.....	1
B 178.....	W 3494.....	B 122.....		Board 1st.....	" 2.....	
B 178a.....	1 D 400A.....	1 B 1915.....	2	do 2nd.....	" 3.....	3
B 179.....	2 D 400B.....	Form L.....		do 3rd.....	" 4.....	
B 179a.....	D 400C.....	Form K.....	1	do 4th.....	" 5.....	
B 179b.....	B 103.....	ME 2.....		H2 Trav. Bd. 1	" 6.....	
B 179c.....	B 120.....	M 93.....	1			

Date 17-12-18

Henry Capro
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

John Tuff

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 *Joseph H. Knowlton*

Date 23-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 411 to his home at Demplennan and Release Certificate No. 563 issued.

Date 23-12-18

C. B. Dicks 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 73-1-19

Date 23-12-18

Depot Paymaster.

Discharge approved for 26.12.18

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	✓ 11	N.F. Med.	D.F. 1	✓ 11	
B 178	W 3494	B 122		Board 1st	" 2	✓ 11	John B
B 178a	✓ 11 D 400A	✓ 11 B 1915	✓ 2	do 2nd	" 3	✓ 12	J. B. ✓
B 179	✓ 11 D 400B	Form L		do 3rd	" 4		
B 179a	D 400C	Form K	✓ 11	do 4th	" 5		
B 179b	B 103	ME 2			" 6		
B 179c	B 120	M 93	✓ 11				

Date 24.12.18

C. B. Dicks Capt
Demobilization Officer.

APPROVED. ✓

Documents as above forwarded to:—

Officer in Charge Records.
Board of Pension Commissioners.

with following additional documents.

Date DEC 26 1918

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

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

Date Dec. 30/1918

Mr. Howley Capt
R. H.

Reg. No. 5867 - Pte Rank Name Tuff John
Attested 29-7-18 Address Templeran B B
Allotment 50 Allottee Mrs Wm Tuff Mother
Date of Allotment 1-9-18 Returned from Overseas
Embarked for Overseas Cause

Vacc 15-5-18. 1st Junc 2-8-18. 2nd 27-9-18

H.A. 16-5-18. To 24-8-18.

Leave extended to Sept 2nd (Sick at home) Ret 17-9-18.

2-10-18. Admitted to barracks hosp.

12-10-18. " " General

9-11-18 Transferred to Escasoni

4-11-18 Discharged from

29-11-18 Recommended Discharge permanently

Until

17-12-18

PASSED TO DEMOBILIZATION OFFICER

26-12-18.

DISCHARGE APPROVED ON DEMOBILISATION.