

THE ROYAL NEWFOUNDLAND REGIMENT

| No. 5518: Name Kenner, Whoraip Como Mark. | |
|--|---------|
| Questions to be put to the Recruit before Enlistment. | |
| I. What is your name? I Conserve Theories | •• |
| 2. What is your full Address? | |
| 3. Are you a British Subject? 3. 4. What is your age? 4. Years | •• |
| 5. What is your Trade or Calling? 5 | |
| 6. Are you Married? 6 | |
| 7. Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which? 7. | •• |
| 8. Are you willing to be vaccinated or re-vac- | • |
| 9. Are you willing to be enlisted for General Service? · 9. | |
| 10. Did you receive a Notice, and do you understand its meaning. and who gave it to you? | |
| 11. Are you willing to serve upon the conditions as embedded in the roll of service to be signed by you if you are accepted? | |
| made by me to the above questions are true, and that I am willing to fulfil the engagements made. SIGNATURE OF RECRU Witness. | IT. |
| OATH TO BE TAKEN BY RECRUIT ON ATTESTATION. I | uty |
| 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 question to be punished as provided in the Army Act. | ons |
| 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 duty onte as replied to, and the said recruit the made and signed the declaration and taken the oath before me at | red A |
| †CERTIFICATE OF APPROVING OFFICER. | |
| I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the quired 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. | re- |
| Date | lcer. |
| † 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. | |

| (a) Christian and Survama of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage. (b) Christian and Survama of Woman to whom married, and whether spinster or widow. (c) Place and date of marriage. (c) Christian Names STATEMENT OF THE SERVICES STATEMENT O | pparent | age | | aut a iti | -76 | | ıt S | , f | eet 73 | 4 inches |
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| STATEMENT OF THE SERVICES STATEMENT OF THE SERVICES Service not allowed to reckon for a fisher the first of persons of the first of the | (4 | 2) Christian | and Surname of W | oman to whom marri | ied, and whether | spinster or wid | ow. (b) Pla | ace and | date of marriag | ge. |
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C.R. 5528

Extract from Daily Orders Part 11 Unit The Royal Hilld. Regt. St. John's, July 16th, 1919.

The discharge of the undernoted on demobilisation has been APPROVED by 0.07 Discharge Depot with effect from 28-7-19

C.R. 5528

Extract from Daily Orders Part II Royal Newfoundland Regt. Depot St. John's dated Aug. 21st1919.

The discharge of the undernoted on demobilization has been CONFIMED by Officer i/c Records from noted date

11-8-19.

5528, Fte. Kenneth Upward.

Extract from Beily Orders part 11, from Unit the Royal Bild Regt. St. John's dated July 28, 1918.

The following man embaried for everseas on A.H.S. Columbellar July 22,1913.

#5528 Pte.Kenneth Wpwards.

C.R. 5528

Extract from Dolly Orders Regional Unit The Royal Riid.
Rogt. St. John's Waly Srdy 3740

5528 Pte. K. Upward.

Reported at Headquarters 127-13 or "Casantra" which sailed Hassew June 24th/1919.

Extract from Daily Orders part 11, from Unit The Royal Effic. Regt. St. John's, Cated May 21, 1918

#5528 Pte. K. Upwards

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

C.R. 5528 K'llpward



THE ROYAL NEWFOUNDLAND REGIMENT

| diem, from my P be made on pro | Cents, per di | undermentioned Person and order tion of the relative Ide | or the benefit of th tity of, and produ ed, viz.: | to, and for of ident concerne |
|-----------------------------------|---------------|---|---|-------------------------------|
| Amount (each pers | Address | NAME (in full) | Whether Wife, Child, other Relative or Friend | Identity Certificate |
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| 4. | Harrys A | | | |
| ay | green Be | | | |
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| | Total Allotn | | <u> </u> | |
| | | pleted by the Officer Comma Commanding Company and h application. | | |

Officer Commanding

NEWFOUNDLAND CONTINGENT

From:

Chief Paymaster & O. 1/e Record Newfoundland Contingent. Pay & Record Offica (58. Victoria Street, London, S. W.

Officer Commanding. 2/Bn. Royal Nfld. Regti. Hazeley Down Camp. Winchester.

5th January. 1919

Subject: 5528 Pte. K. Upward,

. With reference to the following telegram (106) from the Hon. Minister of Militia, received

"Pay to 5528 Upward, £510.0.

Draft £5.0.0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Chief Paymaster & O.) 1/c Records.

8-1- 1919

Receipt hereunder.

78.7. Barton LIEUT. COLONEL.

Received the sum of Time ounds on account of

cable remittance from Newfoundland.

& upward.

No. 5528 Rank Pte.

Helaundes

Upward, L 5528

A 3041

Pay 20eps.

August 14, 1919

#5528 Pte.Menneth Upward, Harry's island, N.D.B.

Dear Sir:-

Flease find enclosed Discharge Certificate #3731.
Yours truly,

Captain & Paymaster.

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

MEDICAL HISTORY

Surname Mewora

F Christian Name Kenneth

| Birthplace:—Parish Man | | a B.Coun | 411 | |
|--|--|---|----------|------------------|
| Birtiipiace.—i arisii. 47-44 | , 9 | a count | l | |
| | | RESERVE | REGULA | R ARMY |
| | on 30 day of | May 1918. | on day | of 191 |
| Examined | at Stype | is. | at | |
| Declared Age | 19 year | s days | year | s days |
| Trade or Occupation | Fisher | ren | | |
| Height | √ feet | 73 tuches | feet | inches |
| Weight | | 149 lbs. | 1 | lbs. |
| Chest (Girth when fully expanded | | 38 inches | | inches |
| Measure- ment Range of Expansion | | 3 inches | | inches |
| | | - | | |
| Physical Development | | | 01.1 | |
| Vaccination Marks | Right | Left | Right | Left |
| Vaccination Marks Number | | | | |
| When Vaccinated | · / . | | | |
| | R.HV = 96 | | R.E.—V= | |
| Vision } | I.EV= | ng church Paradicina Adrian a Stationardio harvalari (ba. 1986) | 1EV= | |
| | 96 | | 87H 0. | |
| [| (a) | | (a) | |
| (a) Marks indicating congenital peculi- | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | | | |
| arities or previous disease | | | | |
| | | | <u>`</u> | |
| water to a | (b): | | (b) · | |
| (b) Slight defects but not sufficient to cause rejection | | 14. (a) | | |
| Cause rejection | · · · · · · · · · · · · · · · · · · · | | | |
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| Approved by (Signature) | & anull | atorn | | |
| (Rank) | mas | 2- | | |
| | 0/ | Medical Officer. | | Medical Officer. |
| | at Hydrus | | at | |
| Enlisted | on day | of May 1918. | on day | of 191 |
| | Corps. | Regtl. No. | Corps | Regtl, No. |
| Joined on Enlistment | Kuyae Wes | 1528 | | 1 |
| * | Rossia | • | | |
| | Juneur. | | | • |
| Transferred to., | | | | |
| | Maria Santa | | | |
| Became non-effective by | | + X | | |
| | on day | of 191 | on day | of 191 |
| (Signature) | 83.40 | | | |
| (Rank) | 100 | | | |
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| | | | | [P.T.O. |

Table III.—Beards: Courts of Inquiry, Vaccination, Inoculations, &c.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.

| gio | cal Appliances; Particulars of Dental Treatment, &c. |
|---------|--|
| Date | Brief Details, and Signatures |
| | |
| | * |
| 31-5-18 | Pace IP |
| 13-6-18 | TAB IP |
| 4-7-18 | 에 대통령의 경우 전문에 있는데 전문에 있었다면 함께 되었다. 그런 그는 |
| 20-7-18 | |
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| | It is hereby cartified that this soldier has been before a Travelling Milions. |
| | Board and has been classified as |
| | tion. Medical category Af |
| | July 12/19 All with |
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Table IV.—SERVICE TABLE.

| Station or Troopship | Date of Arrival or Embarkation | Date of Departure or Disembarkation | Station or Troopship | Date of Arrival or Embarkation | Date of Departure or Disembarkation |
|----------------------|--------------------------------------|---|----------------------|--------------------------------------|---|
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| (S) | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | | |

Hamp Ton Villrage Aug 12/28 Amosta of Apolitia CR. 5528 With Johns Sir. Jam unding to you to find out if there is any button or fadge That I am allowed to wear for sening in the Army overseas f was in the Royal 78.7. In Regiment for one year and seventy turday and served overseas and recent a discharge at st Johns

Int I had my papers and have nothing to show that I was in the army. They munder Was 5525. and & belong \$ \$7720 would you please It me know Jours Viny trucky Tenneth Upward G' Bridge Painters Hampton Village Jungo Co Hus Brumwok

| Reg. No. 5528 Rank Pie Name Upwers X | / |
|--|-----|
| Attested 30 - 578. Address Harry Mr. M. D. B. | |
| Allottent Co Allottee Robert Upward Fath | ev. |
| Date of Allotment P- P. Returned from Overseas | |
| Embarked for Overseas JUL 2 2 1918 Cause | |
| 198 Vaca 2nd hore 11-7-18 | |
| 13 4/8 13- Jace | |
| 4.2. 16 4.8 - 24 4.8. K. L. 3-7-18. | |
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Descriptive Return of a Soldier Discharged on Account of Disability

INSTRUCTIONS—This form is to be completed in the case of every discharged soldien 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 "Pate" 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 \mid c Records together with the remainder of the man's documents: |
|---|
| Changes occuring in the description subsequent to the date of admission to pension should be noted in |
| red ink. Name in full Upward. Henneth |
| Name in full Upward. I much |
| Regiment from which discharged Royal Dewfoundland |
| Regimental number 55 28 0 0 0 |
| Regimental number 5528 A.B. Intended address Harry J. 4.B. |
| Height on discharge / Keet Y |
| Color of hair on discharge Light Brown |
| Complexion |
| Color of eyes Blue. |
| Descriptive Marks Scar on left a. |
| Figure on discharge Madum |
| Christian name of Father Cole A. |
| Christian name of Mother |
| Wife's maiden name in full |
| Date and place of marriage |
| Christian names of children |
| 11 . II Jept. 21, 1877 |
| Christian names of children Place and date of soldier's birth Harrys H. Sofot. 21, 1699 Nature and locality of civil employment, required |
| 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) Kurnuth Upward. (Rank) Ct. Station ST. JOHN'S. Date 8-7-19 |
| Station ST. JOHN'S. Date 8-7-19 |
| Station Date |
| 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.

earlier to demon other auth of the

Note.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (XvI) or xviat.), 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 Incases 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 Sectretary, Royal Hospital, Chelsea, S.W. 3.

| Medical Report on a Soldier Boarded Prior to Dis | scharge or |
|---|------------|
| Medical Report on a Soldier Boarded Prior to Dis Transfer to Class W., W. (T), P., or P. (T), of the | Reserve. |
| 1. Unit and Corps. Poyal New Journalland 7. Former Trade or Occupation | Esternay |

| 1. Unit and Corps | oyal / leu | foundla | 7. For | ner Trade } | funca |
|---|---|--|--|--|--|
| 2. Regtl. No 2223. | 3. Rank | S to store | . 7a. If th | e soldier claims pr my, he should state | evious service in |
| 4. Name Uhwa (Surname) | id jus | Christian Names) | | Former Regts. or Co with Regtl. Nos. | orps; |
| 5. Age last birthday | 20 : | | (.93) | e ins of the disabil | 27 62 7 67 8 67 1 1 1 1 |
| 6. Posted for duty on. | at | | • | | ्रा किरुव के सम्बद्ध |
| in category (or gr | ade) | | | | Cuffees Shalls to |
| 8. If the disability is ar | injury was it caused | | • | | |
| (a) in action | (b) on field servi | | | | |
| (c) on duty | (d) off duty? | that a fire and | lw ochl Ada | (b) Date of Discharge (c) Cause of Dischar | ge; ge,, |
| 9. If a Court of Inquir | y was held on an inj | ury state : | | dotanoue as sev | |
| (a) When | | Mariatra | - 11381 11 44 | (d) Particulars of Pe | |
| (b) Where | | devote a | engen jakina. Suring bulius | (if any) | oria. |
| (c) Opinion of Co | ourt | result belief | tinia monto | na Zwa more sa | |
| Note.—The foregoing is seen by the Officer in ch | g particulars are to be fi large of the case. | | 79 B (statement | | ted before the soldier |
| | | | | in themselves acti | forte |
| them he will take care to co in the invalid's military and disease. 10. If brought | to the following question infine himself exclusivel medical documents. He forward for invaliding ics should be reported | ns are to be filled in y to the medical as e will also carefully g, disability in res | by the Medical pect of the case distinguish and pect of which i | Officer in charge of the and to such information clearly state when case nvaliding is proposed | case. In answering in as may be recorded as are due to venereal d to be stated here. |
| 11. Date of origin of di | sability. H | il. | | Smettrittusses | 201 170 200 |
| 12. Place of origin of d | | uit: | allen S hoone | mea es opperador l | |
| 13. Give concisely the the disability in so | | e history of 90 | Asimak Malitic of sta |) Change to United | i) -stoV, |

* Loss of meth on or inimidately after across should be attributed from a mark their a solder a solden to

8583/P2003, 250,000, 1/19, D. & S.

relevant official documents.

Medical Officer in eligible of case

History Sheet bearing on the case and in other

| | | State | | er the c | lisabilit | ies are | Section for | Magazi ta | | (a) attrib | ytable | te | (b) ag | grava | ted by | |
|--|-----|---------|-----------|----------------------|---------------------|-----------------|-------------|--------------------------|------|------------|--------|-------|--------|---------|----------|--|
| | | (i.) | Servi | ce durin | g the p | resent v | ar . | *********** | | | | | | | | |
| | | (ii.) | Previ | ous acti | ve servi | ce | | ** | | | | | | | | |
| | | (iii,) | Clima | te in pr | e-war s | ervice | | A yo | | | | | | i. | 11. 27.2 | |
| | | (iv.) | Ordin | ary mil | itary se | rvice be | fore th | e war . | • | | ., | ••••• | | | | |
| | | (v.) | | ıs negli n's part | | or misc | onduct | on the | } | /. | 7 663 | | •••• | •••• | | |
| #1 A.T | 14 | (a). If | not spe | due to | any of dition of | these lo you | causes | , to wha | **} | - 1 | A | | | | 0. | |
| ases such | 15. | What | is his p | resent o | conditio | n? | | ો. | | The | Lo | mp | lain | 0 | no | |
| re, ear, d throat, ties, &c., alist's re- | | | when | | kely to a | ford et | | n all case of the pro | | 3, | | dis | abili | ity | no no | |
| d with | | | • · · · · | | | | | | | | | | | | | |
| cases of tion the position be stated. | | | | | | | | | | | | | | radi k | | |
| | | | | | | | | | | Form | | | | | | |
| | | | | | | | | | | | | | 1 | | | |
| | 16 | Wasa | n opera | tion ne | rformed | ? If s | o when | and wha | | | | | | State ! | | |
| | | | its na | | | | o, | | | | | | | - | | |
| | 17. | If not | , was a | n opera | tion ad | vised a | nd decli | ned ? | | | | | | | | |
| | 18. | | | | | | | the loss or diseas | | | | | | | | |
| | | dire | ectly a | ttributa | ble to a | ctive s | ervice o | r throug | h | | | | | | | |
| | | | | der suc unobtai | | itions t | hat den | tal trea | t- | | | | | | | |
| | 19. | Give p | articul | ars of a | av other | r disabil | ities exi | isting, bu | ıt 🕦 | | | | | | | |
| | | not | in th | emselve | s suffici | ent to | cause i | nvaliding | g. | | | | | | | |
| | | hav | e been | aggrava | ted by | service o | during t | he preser | ıŧ | | | | | | | |
| | | | r, and i | | what or | by wha | t specifi | c militar | y | | • | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | n | | | | | |
| | | | | | | | | | | 1 | lepo | the | iteo | 'n | | |
| | 20. | | | nmend– | | | | | | | 1 | | | | | |
| | | | | harge a | | | | | | | | | | | | |
| * | | | | nge to U | | | | i le si si | | | C 10 | | | | | |
| | | TAOLE- | | n Statio | | e to sol | cuers in | valided | "> | <u></u> | | | | | | |

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

August 13,1919

Mr. Kenneth Upward, Harry's Hr., N.D.B.

Dear Sir:-

Referring to your application I enclose the que for Seventy dollars (\$70.00), being amount of first payment due you on account of War Service Gratuity.

Yours traly

DEPARTMENT OF HILLIPTA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and nen 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 deahes, 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. Kenneth 2. Surname. Word |
| 3. Rank. 4. Regtl. 10. SJ. 78 |
| 6.Address in full to which future parants of gratuity are to be |
| forwarded. Tharup In No 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 |
| - uo |
| 8. Relationship of such dependents |
| 9./ddress in full of such dependents. |
| |
| 10. Is said dependent, now, or was said dependent at my time in receipt |
| of Separation Allowance on account of another soldier? |
| 11. Were you on active service only in Mfld. II so, give dates and |
| particulars of such service. Oblivseas |
| · |
| |
| 12. Give total length of time which you served on active service, |
| whether in Effd.or Oversees. |
| whether in fill of Oversess |
| |

| 13. Have you had more than one enlistment? If so, give particulars |
|---|
| of discharge and re-onlistments, and under what regimental numbers. |
| 10 |
| *************************************** |
| |
| t of that Discharge pay or |
| 14. Have you clroady received any payment of Post Discharge pay or |
| War Service Grabuity? If so, state amount you and your dependents |
| have already received and by whom paid |
| NEVE CITOLOGY TODAY |
| |
| 15. Have you been issued with a War Service Badge? |
| as were you during the present war, served in the liperial bolless. |
| ar two you entitled to receive, or have you received any Grandley |
| the nature of Post Discharge Pay from the Imperial Foreces in |
| so, state mount received, or to which you are entitled |
| so, suche in outre recording |
| 18.Did you revort Overseas to a rank lower than the substantive |
| west hold by you on your arrival in England?. |
| (b) If so, was such reversion in consequence of Miscondado of |
| inefficiency? |
| 19. Are you now serving by the Rosts? |
| of discharge . Leason for discharge. |
| |
| ٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠ |
| 20, Did you at any time serve at the front in an actual theatre of |
| s will a detes of Such Scriber |
| Cu. p. Cums. |
| |
| 21.(a) are you receiving treatment from the Givil Re-Establishment |
| om (b) If so are you in receipt of full pay and allowences it of |
| W-1 00 militas |
| And I this soloun declaration, conscientiously believing it to the true, and knowing that it is of the same force and effect as if the true and knowing that it is of the same force and effect as if |

Signature of Applicant: - Kenneth Upward.

Place of Residence: Horry's A. N. B.

Declared before ne at: White

This I of day of Man 19.!.9...

Signature of Berrister of the Supreme Court, Stipendiary Heads that Marky trate; Hotery Public, Bustice of the Peace, or Commissioner of affidevits.

| Do to | | DISCHARG | | | | |
|-----------|---------------------------------------|----------|---------------------------------------|--------------------------|---|-------------|
| De 68 | pgia | Soldier. | Paid Dependent | War Service Gratuity. | Net amound due | at |
| - | | ••••• | • • • • • • • • • • • • • • • • • • • | | • | · • • • • • |
| • • • • • | · · · · · · · · · · · · · · · · · · · | ortified | correct. | : | Sayra shor | |

Nº 6329



THE ROYAL NEWFOUNDLAND REGIMENT

| om my Pay | Cents, per diem, fro | | |
|---------------------|--|--|--|
| | | indermentioned Person and Person or Person | |
| or Person | Certificates by the Person | on of the relative Identity | |
| | 118 | Enquel 1st | concerned, viz.: Allotment begins |
| AMOUNT (each person | Address | NAME (in full) | Identity Whether Wife, Child. Certificate other Relative or No. Friend |
| 60 | ra Sr. | RobertUpwa | Hol Hather |
| | M1 " | | |
| | Harrys At. | d' | |
| | y win suy | | |
| | 5 to 10 to 1 | | |
| | <u>.</u> | | |
| | | | |
| | • • | * | |
| | | | |
| 6 | Total Allotment, S | | |

(Sig.) Evatoon Lunt

(Sig.) Y geneth Experiend.
(Rank)

11 + 92 Sursex Det 4/20 Aprister of Aprilitia At Johns pear Sir. Received from letter of August 17 saying that of was to receive a Class 2 war tadge for service in the R. R.A. whether issue out yet and if they are would you please Send me one as of chave

withing to show that I was in the army as of trave bostmy discharge paper. please arrower and Tell me in I can get arrother discharge paper, yours faithfully. 5528 Expt. Kenneth lipward Go Bridge Paintin

Susser H. B. Camada

55 28 Upwood Bleau make first for W. S. G. A.C. 17/7/19

Reg. No. 5528 Rank 96 Name Upword. X.
Attested 3. Address Forry's Hr. NDB Allottee . Allotment...... Date of Allotment...... Returned from Overseas... PASSED TO DEMOBILIZATION OFFICER

DEPARTMENT OF MILITIA. REGIMENTAL PAY BRANCH.

| \$ 70 00 PAY | VOUCHERJuly 17 19 19 |
|--|-------------------------------|
| Received from th | e First Newfoundland Regiment |
| the sum of leventy | Dollars. |
| on account of Pay. W.S. | K lipwords |
| Ch. No. 3150 Initials. Pay Ledger. 251 Initial WN | Regtl. No. Rout |
| Gen. Ledger Initials | |

170. 5528 Rank Pt.

emor cem.

CR 5528

MOR ISSUE OF BRITISH MAR MEDAT-191451919.

I contify that I have received an issue of 2 inches of Riband of British was Model-1914-1919.

NAME. Kumith hound 552 P

PAGE. Henry. o. Harden.

Fold Here

ON HIS MAJESTY'S SERVICE

To the Oscer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia, ST. JOHN'S. Nf.

Fold Here



The accompanying Victory Modal and or British War Medal is/are forwarded herewith to Kenneth Upward n respect of his service as No. 5528 Rank Pte. Royal Nfld: Regt. ame K. Upward Receipt of the same should be acknowledged hereon. peived taken 25 19/91 ... hature Kennelly Expurad Address Harry Harbour

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

B 121. Signature of O. C. Company Regimental Number and Name Trade Good Conduct Badges, Service pay or proficiency pay Enlistment months Place and Date of Enlistment 30 -5-18 Toined Date Toined) with Colours /74 years. Place of Birth Date Joined Toined Date of award or of order dispensing with trial Name of Date of Rank Punishment awarded Place OFFENCE By whom awarded REMARKS Offence Witnesses Demobilized Solomis To be carried over,

PYMA

Demobilization Born

The Royal Newfoundland Regiment

| DEMOBILIZATION OF | | | |
|--|--|--|--|
| Reg. No. 5528 Rank PE Name Upwardy | | | |
| Date of Enlistment 30.5.18 Address Barry & glassistrict Swilly 12. | | | |
| Occupation Les Compland. Classification for Discharge Medical Category | | | |
| Recommendation S.M.B | | | |
| Passed to Demobilization Officer with following documents:—, | | | |
| The state of the s | | | |
| N.F. P 36 B 268 B 121 N.F. Med D.F. 1 | | | |
| B 178 B 122 Board 1st 2 | | | |
| B 178a | | | |
| B 179 D 400B Form L do 3rd | | | |
| B 179a | | | |
| B 1790. B 103. ME 2 | | | |
| 3 1100 | | | |
| Date July 14/19. O. C. Discharge Depot. | | | |
| PARTICULARS FOR DEMOBILIZATION | | | |
| Chil D. Battilland | | | |
| I amin a position to resume civilian occupation. | | | |
| 1 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 | | | |
| L / 079 | | | |
| (a) Clothing Allowance payable | | | |
| (b) Clothing Supplied VIII WWW. | | | |
| Date. 141 - 7 - 19. O ilc. Re-clothing. | | | |

| 3. Transportation and Release Certificate. The above named has been provided with Travelling Warrant No. R2395 to his home |
|--|
| at .Hannyk. J.S.L.d and Release Certificate No. 3338 issued. |
| Date 14-7-19. Demobilization Officer |
| 4. Pay and Allowances. The herein named soldier's accounts have been correctly balanced and all matters in connection |
| therewith settled. He has received pay and allowances to |
| Date |
| Discharge approved for 25 7-19 |
| Forwarded with following documents to O.C Discharge Depot. |
| N.F. P 36 |
| Documents as above forwarded to:— |
| Officer ilc Records. Board of Pension Commissioners. |
| with following additional documents. Eligible for War Service Gratuity |
| 100 P 1 P1. |
| JUL 28 1919 O. C. Discharge Depot. |
| Received the above noted documents from O. C. Discharge Depot. |
| Of The state of th |
| Date acj. 7/19 |

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 furmer Cocupation.

| : | Upwards. |
|---|-------------------|
| | Signature of Man. |
| Mullouole | Reg. No. 5528 |
| ature of the Vocational Officer or his Repres | entative. |

ST. JOHN'S.

Place

Date 14-7-19

191

1. Weren

The Royal Newfoundland Regiment

| DEMOBILIZATION OF | | | |
|--|--|--|--|
| Reg. No. 5.7.9 Rank P/E Name Ukroans | | | |
| Date of Enlistment. 30.5.19 Address Among & Clarito Swellast | | | |
| Occupation J. Medical Category J Classification for Discharge | | | |
| Recommendation S.M.B | | | |
| Passed to Demobilization Officer with following documents:— | | | |
| N.F. P 36 B 268 B 121 N.F. Med D.F. 1 | | | |
| B 178 W 3494 B 122 Board 1st " 2 | | | |
| B 178a | | | |
| B 179 D 400B Form L do 3rd " 4 | | | |
| B 179a D 400C Form K do 4th " 5 | | | |
| B 179b B 103 ME 2 | | | |
| B 179c B 120 M 93 | | | |
| Date July 10/19 L. O. C. Discharge Depot. | | | |
| PARTICULARS FOR DEMOBILIZATION | | | |
| I. Civil Re-Establishment. | | | |
| I am in a position to resume civilian occupation | | | |
| Went of a season o | | | |
| Officer is stocked as | | | |
| Particulars passed to Vocational Officer for information and action. | | | |
| 21/10/ TOW 101 6/41/01/2 | | | |
| Date | | | |
| 2. Clothing. | | | |
| Certified that Clothing Regulations have been complied with | | | |
| (a) Clothing Allowance payable (1) | | | |
| (b) Clothing Supplied | | | |
| Date // _ 7 - 19 | | | |

| 3. Transportation and Release Certificate. |
|--|
| The above named has been provided with Travelling Warrant No. 77.2.3.9.5 to his home |
| at . Hanny Juld and Release Certificate No. 3538 issued. |
| Mill An |
| Date 14-7-19 (MOUNDIN |
| **Demobilization Officer |
| 4. Pay and Allowances. |
| The herein named soldier's accounts have been correctly balanced and all matters in connection |
| therewith settled. He has received pay and allowances to |
| Date |
| Discharge approved for. |
| |
| Forwarded with following documents to O.C Discharge Depot. |
| N.F. P 36 B 268 B 121 |
| Б 178 W 3494 |
| 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 " 6 |
| B 179c |
| Alu lolante C |
| Date Demobilization Officer. |
| |
| APPROVED. |
| Documents as above forwarded to:— |
| Officer i c Records. Board of Pension Commissioners. |
| with following additional documents. |
| with following additional documents. Eligible for War Service Gratuity |
| 100101 |
| Date JUL 28 1919 R. C. Collet Calif. |
| |
| Received the above noted documents from O. C. Discharge Depot. |
| A Company of the Comp |
| Date |
| Date |

The Koyal Pewfoundland Regiment

Class for Demobil-ization:—

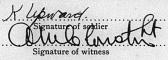
| Class for Demobilization:— | Report of Demobilization Travelling Board, held on soldier for discharge. |
|---|---|
| Discharge Depot: Headquarters The Royal Newfour | adland Pagiment |
| The Hoyal Revious | Date July 12/19 |
| Regimental No. 5528 | . 0 |
| Name Upward K. | |
| Address Harrys | ≯ . |
| , ί | |
| Present Medical Category 47 | |
| | - (a) Immediate discharge (b) Standing Medical Board |
| | d'A Coope Calit |
| | O.C. Discharge Depot. |
| | Plate |
| Members of Boa | rd Senior Medical Officer |
| | Zwherden |
| | M.O. Depot |

The Royal Newfoundland Regiment PROCEEDINGS ON DISCHARGE Intended place of residence Classification of soldier. Medical Category. 3. The above named man is discharged in consequence of DEMOBILIZATION ble for War Service Gratuity His accounts are correctly balanced and I have impartially inquired into all matt accordance with Regulations. Place, ST. JOHN'S Date JUL. 1.4.1919 ...

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

| 5. I hereby acknowledge that | have received all my pay and allowances (including clothing allowance) and all |
|---------------------------------|--|
| just demands up to the prese | t date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, |
| of all financial responsibility | in my connection. |
| Place ST IOHN'S | X Upward. |

Date JUL 1 44919



CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

| 5. I hereby certify that I am in a position to resum | [2] [2] [2] [2] [2] [3] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4 |
|--|--|
| Place, ST. JOHN'S | Signature of soldier |
| Date JUL 1 4 1919 | Signature of soldier |
| Date | Signature of witness |
| | |

| | STATEMENT O | F SERVICE | |
|------------------------------|-------------|---|-----------------------|
| 7. Enlisted for service 3.0 | 3-18 | • | No. of days on Milita |
| Discharged from service IIII | 2.8 1919 | Plus 14 days | Service 439 |

APPROVAL OF DISCHARGE

| 8. | The discharge of the above mentioned soldier is hereby approved to be confi | firmed | by the | Officer i c | Records |
|----|---|--------|--------|-------------|---------|
| | The Royal Newfoundland Regiment, twenty eight days from date. | m A | 1 | 0 | |

14. Place, ST. JOHN'S

JUL 28 1919

Officer Commanding Discharge Depor The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

CR. 5528

August 17th 1920 .

No. 5528 Ex.Pte. Kenneth Upward.

C/O Bridge Painters.

Hampton Village,

King's County, N.B.,

Canada.

bear Sir:

In reply to your letter of August 13th.

I may say that the Class 2 mar Badge is now in preparation for issue and will likely be despatched within
the next week of two.

The Class 2 War Badge is issued to men discharged on demobilization - not to men invalided out, and to whom the Silver War Badge has been issued.

Yours faithfully,

Lieut.Col. Chief Staff Officer

CANADA

DEPARTMENT OF VETERANS AFFAIRS

RECORD OF SERVICE

DVA. 95-7-1. Vol. 1

ROYAL NEWFOUNDLAND REGINENT

Name:

Service Number:

1. Date of Birth:

 Date & Place of Appointment, Enlistment or Enrolment:

Unit on Appointment, Enlistment or Enrolment;

4. Theatres of Service:

5. Date & Place of Retirement or Discharge

6. Type of Termination of Service:

7. Rank or Rating on Retirement or Discharge:

Kenneth UPWARD

5528

21st September, 1899.

30th May, 1918. St. John's, Newfoundland.

Royal Newfoundland Regiment.

NEWFOUNDLAND-CANADA AND OVERSEAS

11th August, 1919. St. John's, Newfoundland.

"Demobilization"

Private

AWARDS: BRITISH WAR MEDAL

OTTAWATTERNADDI., Canada.

July 31st 19 52

JED.
JOY H.M. JACKSON,
DIRECTOR,
WAR SERVICE RECORDS.