



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5071 Name Sandy W. Vatcher Corps CofE

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Sandy W. Vatcher</u> |
| 2. What is your full Address? | 2. <u>Brugges</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>21</u> Years <u>0</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Sailor</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, Sandy W. Vatcher, 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.

Sandy W. Vatcher SIGNATURE OF RECRUIT.
Jas W. P. [unclear] Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

The above questions were then read to the Recruit in my presence. I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St Johns on this 16 day of May, 1915

Jas W. P. [unclear] 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 1915
Place } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Sandy W. Vatcher
 Apparent age 31 years 0 months. Height 5 feet 5 inches
 Chest Measurement { Girth when fully expanded 36 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin J. Coast | Relationship Mother
Elizabeth Vatcher, Bureau
 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 _____									Signature of Officers certifying correctness of entries
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. *S071* Name *Sandy W. Batchelor* *CoFE*

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. *Sandy W. Batchelor*
2. What is your full Address? } *Blugged Coast*
3. Are you a British Subject? 3. *yes*
4. What is your age? 4. *21* Years Months
5. What is your Trade or Calling? 5. *Sailor*
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*

Sandy W. Batchelor 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.

Sandy W. Batchelor SIGNATURE OF RECRUIT.
Jos. W. Pittman Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

Sandy W. Batchelor 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 signed as replied to, and the said recruit has made and signed the declaration and taken the oath before me at
on this *16* day of *May*, 191*5*.
Signature of Attesting Officer *Edwards Kent*

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 191*5*
Place } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

5071

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

Name J. Edward W. Patches
 Apparent age 21 years 0 months. Height 5 feet 05 inches
 Chest Measurement { Girth when fully expanded 36 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Elizabeth Patches, Bureau
S. Coast | Relationship Mother

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 L'epot	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 <u>16-5-18</u>									
Joined at <u>St. John's</u> on <u>Nov 16-1918</u>									
<u>Discharged. St. John's. Dec 30 1918</u>									
<u>Admitted 0.134 Hospital Barracks 17-7-18</u>									
<u>Discharged from Hospital 25-8-18</u>									
<u>Spent 14 days leave 2-10-18</u>									
<u>Returns to Headquarters 15-10-18</u>									
<u>Demobilization St. John's 30-12-18</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 30-12-18 (date of discharge) 8 years 229 days
 Pensions _____

C.R.

5071

Extract of Daily Orders Part II, Depot, St. John's, dated
Jan. 2nd 1918.

DEMOBILIZATION.

The under noted man has been discharged, confirmed by Officer
i/c records on noted dates.

5071 Pte. Alex. Vacher

Discharged 30-12-18

C.R. 5076

Extract from daily Orders part II, Depot. St. John's
dated December 3rd., 1918.

The undernoted discharged on demobilization have been approved
by O. C. Discharge depot from noted date. He is removed from
depot Strength and transferred to discharge depot pending
confirmation by Officer i/c Records.

#5071 pte. S. Vatcher

2-12-18.

C.R. 5071

Extract from Daily Orders, Part 11, UNIT: The Royal
Newfoundland Regiment, dated October 18th., 1918.

The undermentioned returned from Special Duty at
DRY DOCK, 15/10/18.

5071 Pte. S. Vatcher.

C.R. 5071

Extract of Daily Orders, Part 11, Unit: The Royal Newfoundland Regiment,
dated Oct. 2nd 1916.

THE FOLLOWING PROCEEDED ON SPECIAL DUTY AT DOCK GUARD 2/10/16:

5071 Pte. S. Vatcher.

C.R. 5071

Extract from Daily Orders Part 11 Unit The Royal Nfdl.
Regt. St. John's, dated August 26th. 1918.

5071 Pte. S. Vatcher.

Discharged from Barracks Veneraal Hop. 25/8/1918. their
forfeiture of 80, p. day ceasing from that date.

C.R. 5071

Extract from Daily Orders part 11, from Unit The Royal
Hild. Regt. St. John's, dated May 17th, 1918

#5071 Pte. S. Vatcher.

Attested for General Service with the Royal Hild. Regt .
from 16.5.18

Vatcher, Sandy

5071

Ray & Capt.



THE ROYAL NEWFOUNDLAND REGIMENT
HEADQUARTERS

St. John's, Newfoundland,

October 16th, 1918 191

From Asst. Adjutant,
Depot

To Paymaster and Officer i/c Records,
Militia Department

Re Separation Allowance for 5071 Pte. S. Vatcher

Above noted man has been to see me about his Separation Allowance. He states his mother has not yet received any payment of same. Application was first made through Orderly Room and forwarded to your Department 8-7-18, and he claims he has applied for it twice since from the Pay Office.

Will you please look into the circumstances surrounding the non-payment of this claim and advise me, so that I can be in a position to communicate the desired information to Pte. Vatcher.

OCD*AG

W. M. G. H.
Ass't Adjutant
Depot The Royal Newfoundland Regiment
St. John's, Nfld.

*will come for 50th day
commencing July 16th 1918*

ROYAL NEWFOUNDLAND REGIMENT
(Separation Allowance Branch)

MOTHER

62738

NOTICE:

THIS STATUTORY DECLARATION is to be filled in correctly in every detail and a complete reply must be given to each question.

Each statement is considered as being made on Oath and the form is to be signed before a Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace and returned to:

THE PAYMASTER,
Separation Allowance Branch,
St. John's, Nfld.

- | | | |
|----|---|-------------------------------------|
| 1. | Name in full of soldier. Rank. Reg't. or Unit. | Reg't. No. |
| | <i>Sandy H. Valche</i> | <i>5076</i> |
| 2. | Age of soldier. | Married or single. |
| | <i>21</i> | |
| 3. | Name in full of mother. Age. Occupation. | Permanent Address |
| | <i>Elizabeth Valche 68 Hours wife</i> | <i>Burgeo</i> |
| 4. | Give name of your husband. Age. Occupation. | Where employed. |
| | <i>Dead</i> | |
| 5. | If your husband is not supporting you, state the reason. | |
| | | |
| 6. | If your husband is a chronic invalid and totally incapacitated, state nature of malady. (A Medical Certificate must be enclosed with this document stating from what date husband has been totally incapacitated and for how long incapacity is likely to continue) | |
| | | |
| 7. | If you are a widow, state date and place of death of your husband. | |
| | <i>Drowned at sea 1899</i> | |
| 8. | Have you married again since death of above mentioned husband. | |
| | <i>No</i> | |
| 9. | Names of your other children. Address in full. | Age. Occupation. Married or single. |
| | <i>May A. Dickes Belleoram</i> | <i>48 H. W. married</i> |
| | <i>Maria Dickes Burgeo</i> | <i>46 H. W. do</i> |
| | <i>Joseph Valche do</i> | <i>44 Seaman do</i> |
| | <i>Isadora Matthews do</i> | <i>42 single Widowed</i> |
| | <i>Anna Rossini Ramas</i> | <i>39 do do</i> |
| | <i>Margherita Brophy Boston</i> | <i>36 do do</i> |
| | <i>May Valche Burgeo</i> | <i>28 do do</i> |

*Allowment correct for
solicits payment
commencing July 16th 1918*

M.A.

10. State amount earned by (a) Yourself
(b) Your husband. *Nothing*
11. State amount and source of any other income. *Nothing*
12. State value of real property belonging to you and your husband. *Only a dwelling house*
13. State value of personal property belonging to you and your husband. *None*
14. If husband is dead, state value of real and personal property left by him. *Nothing*
15. Actual amount contributed by soldier during the year prior to enlistment. *\$40 per month*
16. Was this amount contributed weekly or monthly. *Monthly*
17. Did this amount include payment of son's board, etc. *No Yes*
18. State your son's trade or occupation prior to enlistment. *Mariner*
19. State amount of his wages per week. *\$10 per week*
20. State name and address of his last employer. *R Moulton Ltd*
21. State amount of monthly support from son since enlistment. *\$15.00*
22. State amount of allotment received by you from son monthly. *—*
23. State from what date did you receive allotment. *August 1st & Sept 1st*
24. Actual amount contributed by — Weekly. — Monthly.
other children. *None*
25. Are any of these children in the employ of you or husband. *No*

26. If not receiving support from other children, state cause. Explain fully.

Widow - having family

27. With whom are you residing at present?

Daughter

28. Have you made a previous claim for Separation Allowance? If not, why? Give particulars.

No

29. Are you already in receipt of Separation Allowance from any source? If so, how much

No

30. Are you in receipt of any payment from any Patriotic Fund? If so, how much

No

31. Was the soldier at the time of his enlistment an employee of the Hfld. Government.

No

32. In what capacity and in what place.

No

33. Is he in receipt of a salary as such while serving in the Royal Hfld. Regt. If so, how much?

No

I herewith make this solemn declaration conscientiously believing the same to be true and knowing it to be of the same force and effect as if made under Oath and in virtue of the Evidence ACT.

Signature of applicant..... *Elizabeth Vetter*

Place of residence..... ..

Declared and subscribed before me *Burger*
at..... ..

this *10th* day of *October* 191*8*

Signature of Barrister of the
Supreme Court, Stipendiary Magistrate,
Notary Public or Justice of the Peace, *Joseph Small JP*

This application must be signed by two responsible parties, one of whom must be a clergyman the other a representative of your local Patriotic Fund Committee, certifying that to the best of their knowledge after careful investigation, the above statements are correct and the soldier first above mentioned is the sole support of the applicant.

Signature of Clergyman..... *Eric S. Torrante*

Signature of Member of Patriotic
Fund Committee.

Approved 19/10/18.

W.P.R.
M.A.

Dec. 30th 18

No. 5071 Pte. Sandy W. Vatcher,

Burgeo.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 23."

Yours faithfully,

Captain,
Paymaster & O.i/c Records.

Enc '1 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5071 Rank Lt Name Sandy W. Vatcher
 Intended place of residence Burgess
2. Occupation Sailor
 Classification of soldier C Medical Category ATI
3. The above named man is discharged in consequence of Demobilization
4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.
- Place NOV 30 1918
 Date NOV 30 1918 W. H. Maynard
 Comanding 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 NOV 30 1918 Sandy Vatcher
 Signature of soldier
C. B. Dukeshire
 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 Sandy Vatcher
 Signature of soldier
J. P. Daymond Sgt
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 16. 5. 18 No of days on Military
 Discharged from service Dec 2nd 1918 plus 25 day Service 229 25 day

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.
- Place St John R. H. Lait Capt.
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment
- Date DEC 2 1918

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed
- Place St John's Nfld M. Rowley Capt
 Officer i/c Records
 The Royal Newfoundland Regiment
- Date DEC 2 1918 Dec 20 1918
A. B. 20/9/23

16
30
31
26
30
31
30
30
29

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 5071 Rank Plt Name Hatcher - Sandy
 Date of Enlistment 16.5.16 Address Burgos District Burgos
 Occupation Barber Classification for Discharge C Medical Category ATF
 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	D 400A	B 1915	2	do 2nd	" 3	
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K	1	do 4th	" 5	
B 179b	B 103	ME 2	1		" 6	
B 179c	B 120	M 93	1			

Date 30 11 18

Michael R. S. M.
for O. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Sandy Hatcher

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. [Signature]

Date 30-11-18

O i/c. Re-clothing.

g. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 9-4 to his home at Bangor and Release Certificate No. 18 issued.

Date 30-11-18

C. D. Dickson
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 30-11-18

Date 30-11-18

Walter Tait
Depot Paymaster.

Discharge approved for Dec 2nd 1918

Forwarded with following documents to O.C Discharge Depot.

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

Date 30-11-18

C. D. Dickson
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Date

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

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

Date DEC 2 - 1918

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

MEDICAL HISTORY

Surname

Watches

OF

Christian Name

Sandy W.

Table I.—GENERAL TABLE:

Birthplace:—Parish

Burgeo

County

Nfld

SPECIAL RESERVE

REGULAR ARMY

Examined	on <i>16</i> day of <i>May</i> 191 <i>8</i>	on	day of	191
	at <i>St. John's</i>	at		
Declared Age	<i>21</i> years	days	years	days
Trade or Occupation	<i>Sailor</i>			
Height	<i>5</i> feet	<i>5</i> inches	feet	inches
Weight	<i>134</i> lbs.			lbs
Chest Measure: {	Girth when fully expanded	<i>36</i> inches		inches
	Range of Expansion	<i>3</i> inches		inches
Physical Development				
Vaccination Marks {	Right	Left	Right	Left
	Arm			
Number	<i>18 ca.</i>			
When Vaccinated	<i>5/7/1910</i>			
Vision	R. E.—V=	<i>6/6</i>	R. E.—V=	
	L. E.—V=	<i>6/6</i>	L. E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<i>Lamminton</i>			
(Rank)	<i>Major</i>			
	Medical Officer.		Medical Officer.	
Enlisted	at <i>St. John's</i>	at		
	on <i>16</i> day of <i>May</i> 191 <i>8</i>	on	day of	191
	Corps	Regtl. No.	Corps	Regtl. No.
Joined on Enlistment	<i>Regt. No. 2071</i>			
Transferred to	<i>Nfld</i>			
Became non-effective by	on	day of	191	on
(Signature)		day of	191	
(Rank)				

Table II.—Only for admission to hospital or to the sick list in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In case of syphilis, admissions and re-admissions to hospitals will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer	
	Day	Month	Year	Day	Month	Year					
<i>Savannah</i>	<i>17</i>	<i>7</i>	<i>18</i>	<i>25</i>	<i>8</i>	<i>18</i>	<i>V-D-S.</i>	<i>39</i>	<i>3 I.V. Inj. Ars. diarsensol</i>	<i>Discharged</i>	<i>Archie J. [signature]</i>

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 previous occupation
(Captain Foreign)

Sandy Patchin

Signature of Man.

W. D. Dickstein

Reg. No.

Signature of the Vocational Officer or his Representative.

Place

St. Johns Nfld.

Date

30-11-18

1918

16

Burgess

The Royal Newfoundland Regiment

Class for Demobilization:—

C

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date NOV 29 1918

Regimental No. 5071...

Name Vatcher, Sandy

Address Burgess

Present Medical Category A.H.

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

Members of Board

R.H. Stout Capt

O.C. Discharge Depot.

P. Paterson

Senior Medical Officer

Geo Burden

M. O. Depot

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at

~~St. John's~~ *May 15/18*

1. Name *Sandy W Vatcher* Age (a) Declared *21*
(b) Apparent

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

What severe illnesses have you had? *none.*

3. Height *5ft 5"* Weight *134*

4. Eyesight (a) Left *6/6* (b) Right *6/6*

5. Physical Defects (Examine after strenuous exercise)

6. Examination of Lungs *n*
Measurement (a) Expiration *33* (b) Inspiration *36*

7. Examination of Heart *n*

8. Examination of Urine *✓*

9. Examination of Mouth—(Defective Speech)

Teeth

Throat

Nose

Ears—(Otorrhea)

(Deafness)

n

10. Have you been successfully vaccinated, and when? *yes 1 year ago I can't say*

11. Name and address of next of kin *Mother Elizabeth Burgess LaPoile*

REMARKS--

*A 11**W. Borden
A. C. G. P.*



This Form is to be used in connection with Pamph. M. E. (1)
N. F. 1914

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of *Sandy W. Vatcher*

Entered *19th*

aged *21 Years*

conducted at *Burgeo*

Date: *April 24th 1908*

Recruiting Officer: *Joseph Small S. M.*

NO. OF TEST

FINDING

- | | |
|----|---|
| 1 | <i>No</i> |
| 2 | <i>No</i> |
| 3 | <i>No</i> |
| 4 | <i>No</i> |
| 5 | <i>No</i> |
| 6 | <i>No</i> |
| 7 | <i>Yes</i> |
| 8 | <i>Yes</i> |
| 9 | <i>No</i> |
| 10 | <i>Not colour blind</i> |
| 11 | <i>No impediment in speech - good physique</i> |
| 12 | <i>No varicose veins legs & feet in good condition</i> |
| 13 | <i>Teeth good - mouth in good condition</i> |
| 14 | <i>Tonsils and throat in good order</i> |
| 15 | <i>No ear trouble of any kind</i> |
| 16 | <i>Chest normal</i> |
| 17 | <i>Heart and lungs in good condition.</i> |
| 18 | |
| 19 | <i>Vision good</i> |
| 20 | <i>No deformities or stiffness of fingers, hands &c</i> |
| 21 | |
| 22 | <i>No impairment of shoulder joints</i> |
| 23 | |
| 24 | <i>Ankles and feet strong & in good condition</i> |
| 25 | <i>No impairment of hip joints</i> |
| 26 | <i>Feet, toes &c in good condition</i> |
| 27 | <i>No hemorrhoids or fistula</i> |
| 28 | <i>Hearing good</i> |
| 29 | <i>No physical weakness or deformity</i> |
| 30 | |
| 31 | <i>No hernia &c</i> |
| 32 | <i>No varicocele</i> |
| 33 | <i>Yes</i> |
| 34 | <i>5 ft. 6 in.</i> |
| 35 | <i>135 lbs</i> |
| 36 | <i>34 inches - Expansion 2 in</i> |
| 37 | <i>\$1200⁰⁰</i> |
| 38 | <i>Mrs Elizabeth Vatcher, Burgeo, Nfld</i> |
| 39 | <i>Mrs Elizabeth Vatcher (Mother)</i> |

Signature of Medical Examiner:

J. Mc Donald M. D.

This man's mother is a widow and her only support. I Small

Sept. 26th., 1918.

Mrs. Elizabeth Vatcher,
Burgee.

Dear Madam:-

Application has been made by your son Pte. Sandy Vatcher #50V1 to have Separation Allowance issued to you.

I enclose Statutory Declaration in connection with same which kindly have completed in the presence of a Magistrate or Justice of the Peace, and return to me at your earliest convenience.

Yours faithfully,

Capt. & Paymaster.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Number of Sheet one

Regiment of Royal Newfoundland

Signature of O. C. Company P. B. Duke Lieut

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>5071</u> <u>Waterloo Squadron</u>	Age on	21 years months	<u>Sailor</u>	
Joined		Place and Date of Enlistment	<u>St Johns</u> <u>16.5.18</u>	Religion <u>Copt.</u>	
Joined		Period of } with Colours } with Reserve }	29 years.	Place of Birth <u>Burgio</u>	
Joined			36 years.		

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
				<u>Demobilized 30th 7/18.</u>					

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5071 Rank Plt Name Vatcher - Sandy
 Date of Enlistment 16.5.18 Address Burgos District Burgos
 Occupation Railor Classification for Discharge Medical Category AE
 Recommendation S.M.B. Disability Rating 21-11-2
 Passed to Demobilization Officer with following documents:—

N.F. P36	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	B 1915	2.	do 2nd	" 3	
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K	1	do 4th	" 5	
B 179b	B 103	ME 2	1		" 6	
B 179c	B 120	M 93	1			

Date 30.11.18

Thomas L. M.
for O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Sandy Vatcher

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 A. ...*

Date 30-11-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 94 to his home at Burgess and Release Certificate No. 18 issued.

Date 30-11-18 *AS Dickson*
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 30-11-18

Date 30-11-18 *Henry Lamb*
Depot Paymaster.

Discharge approved for Dec 2nd 1918

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	1	N.F. Med.	D.F. 1	1	4
B 175	W 3494	B 122		Board 1st.	" 2.	1	10.00 B
B 178a	1. D 400A	B 1915	2	do 2nd.	" 3.	2	
B 179	D 400B	Form L		do 3rd.	" 4.	1	
B 179a	D 400C	Form K	1	do 4th.	" 5.		
B 179b	B 103	ME 2	1		" 6.		
B 179c	B 120	M 93	1				31.11.18

Date 30-11-18 *AS Dickson*
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-
Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Date *R.H. Lamb Capt.*
O. C. Discharge Depot.

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

Date Dec 2nd *W. Newbury Col.*
P1-11-18

Reg. No. 2071 - Rank Pte Name Vatcher Sandy D
Attested 6-5-18. Address Burgess
Allotment 50 Allotee Mrs Elizabeth Vatcher (Mother)
Date of Allotment 1-8-18. Returned from Overseas
Embarked for Overseas Cause

Vacc 18-5-18. ^{Sc} Proc 5/18, 27029-18

H.L. 8-6-18. To 18-6-18. R.L. 6-7-18

8-7-11 Application for separation allowance set to 10 m.
17-7-12 Admitted to V. D. S. Hos. and perfects 50¢ per Day.
25-8-19 Discharged from V. D. S. 30 3 days sick leave.
2-10-18 Special Duty buy back, he returned 10-10-18.

Discharged from Dept. 2-7-28. to be credited 28 days from date.

October 16th, 1918

From Asst. Adjutant,
Depot

To Paymaster and Officer i/c Records,
Militia Department

Re Separation Allowance for 5071 Pte. S. Vatcher

Above noted man has been to see me about his Separation Allowance. He states his mother has not yet received any payment of same. Application was first made through Orderly Room and forwarded to your Department 8-7-18, and he claims he has applied for it twice since from the Pay Office.

Will you please look into the circumstances surrounding the non-payment of this claim and advise me, so that I can be in a position to communicate the desired information to Pte. Vatcher.

CCD*AC