

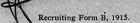
THE ROYAL NEWFOUNDLAND REGIMENT

Questions to be put to the Recruit before Enlistment. I. What is your name? 2. What is your full Address? . 3. Are you a British Subject? ... 4. What is your age? 5. What is your Trade or Calling? 7. Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which? 8. Are you willing to be vaccinated or re-vac-) 9. Are you willing to be enlisted for General Service? . . . 10. Did you receive a Notice, and do you understand 10. its meaning, and who gave it to you?.....) Corps 11. Are you willing to serve upon the conditions as emb died in the roll of service to be signed by you if you are accepted?..... a.m. Mado 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. SIGNATURE OF RECRUIT. Signature of Witness. OATH TO BE TAKEN BY REORUIT ON ATTESTATION. 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. 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.....191 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.

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Chest Me	. /	(Range of expa		/	inches	hes	
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hont,			T.	Relatio	nship	Fut	the s
			Particular				
(a) Christia	n and Surname of Woman t		and whether Initials of O	spinster or wide ficer verifying e	w. (b) Place ntrv.	
	(a)		(6)		(4)		(d)
		•	Particula	rs as to C	hildren		
	Chris	tian Names			1	Date and	Place of Birth
		STATE	EMENT (OF THE	-		•
Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not al lowed to recko for fixing the rate of pensio		- Catives
Service towa	rds limited	l engagement reckons fron	1				
Joined at		on			-		
							2
Tot	tal Service	forfeited as above					

" " Pensions "





THE ROYAL NEWFOUNDLAND REGIMENT

	Questions to be p	out to the	Recruit be	fore Enlistmen	nt.	
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2.	What is your full Address?	}	2	hos	there	To de
3.	Are you a British Subject?	·	3	16		V
	What is your age?		4	2. Years		ıs
	What is your Trade or Calling?		5	tus	erma	لرو
	Are you Married?		6	m		
	Have you ever served in any Branch of jesty's Forces, naval or military, if so,*	His Ma)	7	no		
8.	Are you willing to be vaccinated or cinated?		8	yes		
9.	Are you willing to be enlisted for General	Service?	9	490		
	Did you receive a Notice, and do you un its meaning. and who gave it to you? · · · ·		10	Name Corps		• • • • • • • • • • • • • • • • • • • •
l. s	Are you willing to serve upon the conditioning t	ons as emb	died in the	roll of service to	o be } 11 ····	Upp.
ad	I. Thomas. W.t. te by me to the above questions are true, s	000	line		ements made.	
nad	I. Thomas. W. v. le by me to the above questions are true, s	o Ol	an willing to	fuifil the engage	eclare that the ements made. SIGNATURE Signature of	OF RECRUIT
o ear	Thomas Wo	o Olympia that for the Care Barrier Care Bar	am willing to	ATTESTATION.	ements made. SIGNATURE Signature of '	OF RECRUIT
o ear	I. Hornke. Ut. te by me to the above questions are true, s OATH TO BE TAI True allegiance to His Majesty King George d, honestly and faithfully defend His Majesty alles, according to the conditions of my service.	cen profits, dis Heirs	am willing to	ATTESTATION. do make oath risk in Person, Co.	ements made. SIGNATURE Signature of ' , that I will I and that I wi rown and Dign	OF RECRUIT
ear un en	I. Homes. Ut. te by me to the above questions are true, s A T I W I BE TAIL OATH TO BE TAIL True allegiance to His Majesty King Govern	CEN BY Heirs	am willing to	ATTESTATION. do make oath and Successors, in Person, C	ements made. SIGNATURE Signature of Value of V	OF RECRUIT Witness. be faithful an ill, as in duty against a
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ear un en	OATH TO BE TAIL OATH TO BE TAIL Turue allegiance to His Majesty King George d, honestly and faithfully defend His Majesty lies, according to the conditions of my service. CERTIFICATE OF I The Recruit above named was cautioned by would be liable to be punished as provided in The above questions were then read to th I have taken care that he understands each epiled to, and the said recruit has made and	MAGISTRA y me that the Recruit question, signed the	am willing to RORUIT ON His Heirs a and Successo TE OR ATTES if he made ar Act. in my presence and that his a declaration in the second control of the	ATTESTATION. do make eath and Successors. rs. in Person, C. TING OFFICER by false answer to each questions.	sments made. SIGNATURE Signature of ' a, that I will and that	OF RECRUIT Witness. be faithful and ll, as in duty against a
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earning and a real real real real real real real re	I. OATH TO BE TAIL. OATH TO BE TAIL. True allegiance to His Majesty King George the decided of the conditions of my service. CERTIFICATE OF IT. The Recruit above named was cautioned by would be liable to be punished as provided in the above questions were then read to the state of the conditions of my service. The above questions were then read to the same taken care that he understands each epiled to, and the said recruit has made and this 2.2. It day of the same taken the conditions of the co	MAGISTRA V me that a the Army le Recruit question, signed the Artesting ATE OF A-named Reh. I accor	ECRUIT ON HIS Helrs a and Successo TE OR ATTES if he made at Act. in my present and that his a declaration of the correction of the cor	ATTESTATION. do make oath and Successors, rs, in Person, Control of the successors of the successor of the successo	signature of the state of the s	of RECRUIT Witness. be faithful and ll. as in duty against a labove question on duly entered at the faithful and that the re-
ear oun ien	OATH TO BE TAIL OATH TO BE TAIL True allegiance to His Majesty King George d, honestly and faithfully defend His Majesty lies, according to the conditions of my service. CERTIFICATE OF I The Recruit above named was cautioned by would be liable to be punished as provided in The above questions were then read to the I have taken care that he understands each epiled to, and the said recruit has made and this 2.2. The day of the conditions of the above ed forms appear to have been compiled wit If enlisted by special authority, such will be	MAGISTRA V me that a the Army le Recruit question, signed the Artesting ATE OF A-named Reh. I accor	ECRUIT ON HIS Helrs a and Successo TE OR ATTES if he made at Act. in my present and that his a declaration of the correction of the cor	ATTESTATION. do make oath and Successors, rs, in Person, Control of the successors of the successor of the successo	signature of the state of the s	of RECRUIT Witness. be faithful and lil, as in duty against a labove questions on duly entered at the faithful and distribution duty entered at the faithful and duty entered at th

viz:—(Name)......on the (Date)

		able to all rank		and with entries		History Sheet.	03,01
Name	Thom	as -	1000	dfe	ne .		
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Chest Measu	rement	th when fu			inches	es	
Distinctive n	narks						
		NFORMA	TION SI	JPP U ED	BY, RE	CRUIT	11
Name and A			T.	Relation	ship o	Fut	offine
(a) Cl	vistian and Surna	me of Wamun to		rs as to Ma	ORGANIZATION CONTRACTOR	(6) Plus and	
(a	ristian and Surna	(c) Prese	t address. (d)	Initials of Office	cer verifying ent	rv.	(d)
						64 (34) 10 (4)	
	Čhristian Names	19	Particula	rs as to Ch	ildren		
	Christian Names					Date and Place	ce of Birth
Corps in Rgt.	or Promotion	STATE	Army Rank	OF THE	SERVIC	Service in Re- serve not allow- ed to reckon to- wards G. C. Pay	Signature of Officers certifying correctness of entries
			<u> </u>		Years Days	Years Days	entries
Service towards ly Joined at Joined	Sino	on on the state of	Keay 2	5-18 2-1918 2-19-9-	18 A A	1 30 ye	18-1918 M-1918
t dan de	and the feet as						(1) 1.5 miles
Total Service toward	s Engagement to_	30-11	1-1918	[date of discha	rge]	nrs 193 days	

SCRIPTIVE DEPORT ON ENLISTMENT

Extract from Daily Orders partll Dopot St. John's dated Sept. 30/1918

#5321 Pte. T. Woddfine

The above mentioned soldier returned from Special duty at Bonavista on 27/9/18

C.R. 534

Extract from Daily Orders Part 11 from Depot St. John's August 30/18.

5321

#531 Pte. T. Woodfine.

The follwoing No C. Os and men proceeded to Bonavista on Special Duty

C.R. 5321

Regiment, dated Dec. 10th. 1918.

STRENGTH DECREASES.

5321 Pte. Thes. Weedfine

Having been found Medically Unfit is Discharged from 29/11/18.

Extract from Twilly Stratus Medical Board Held on Saturday Nov.16th, 1818.

5321 Pte. T. Woodfine.

Recommended Discharge-Permanently Unfit.

MM.

1 MARCH 18 RESPONDED AND THE

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

#5321 Pte. Thomas Woodfine.

Attested for General Service with the Royal Hfld. Regt. Grom 22.5.18

Extract from Daily Orders Part 11 Unit The Royal Effd.
Regt. St.John's, July 7th, 1919.

The discharge of the underneted on demobilization has been COMPIRMED BY OFFICER 1/o Records with effect from 3-7-19.

5821 Pte. Edward Smith.

Woodfine, Thomas

5321

Aay Dept.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 5321 Army Rank	Private
Name Thomas W	oodfine
(The name must agree strictly with that on enlistment, unl	ess changed subsequently by authority.)
corps The Royal New	wfoundland degt
Battalion, Battery, Company, Depôt, &c (If attached to the Regular Establishment of the Special Reserv Staff of the Army, it	e or Permanent Staff of the Territorial Force, &c., or to General should be so stated.)
Date of discharge //Www.	4 20/1918
Place of discharge_	Johns, Med
1. Description at the	time of discharge.
Age 21. years months	Descriptive marks.
Height 5 feet 7 inches	
Chest girth when fully expandedins.	
measure- ment range of expansion ins.	
Complexion Aan	
Eyes	
Hair 1 dark	
Trade_ Jungsman	
Intended place of Northern 3 ay	
residence (To be given as fully	
as practicable) (The measurements and description should be carefully take	n on the day the man leaves his unit, but in the case of men sent
home from abroad for discharge, the age and intended place of r confirms the discharge at home.)	n on the day the man leaves his unit, but in the case of men sent esidence should be left blank to be filled in by the Officer who
	barra lana
O The shows named man is dischaused in concess	
2. The above-named man is discharged in consequence	ence of very no confer
Mujorcally fit f	or war service
Alupically fit f	or war service
Alupically fit f	or war service
Muyaically fit f	ne King's Regulations and be identical with that on the discharge
- physically fit f	ne King's Regulations and be identical with that on the discharge
Muyaically fit f	ne King's Regulations and be identical with that on the discharge
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The cause of discharge must be worded as prescribed in the certificate. If discharged by superior authority, the Noyand day and the certificate of the certificate of the certificate of the certificate. If discharged by superior authority, the Noyand day of the character avaraged in accordance with ixing and the certificate of the cause of discharge must be worded as prescribed in the certificate. If discharge must be worded as prescribed in the certificate of the certificate of the certificate of the certificate of the cause of discharge must be worded as prescribed in the certificate. If discharge must be worded as prescribed in the certificate of the cause of discharge must be worded as prescribed in the certificate. If discharge must be worded as prescribed in the certificate of the cause of discharge must be worded as prescribed in the certificate of the cause of discharge must be worded as prescribed in the certificate of the cause of discharge must be worded as prescribed in the certificate of the cause of discharge must be worded as prescribed in the certificate of the cause o	the King's Regulations and be identical with that on the discharge e of the letter to be quoted.) The Ring's Regulations and be identical with that on the discharge e of the letter to be quoted.) The Regulations :— The Regulations is a Regulations in the discharge e of the letter to be quoted.) The Regulations in the discharge e of the letter to be quoted.

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:

I am going home todall combines my forme book of fuking.

Thomas Woodfine the Marke Signature of Man.

The Vocational Officer or his

Place A. Jula ".

WW. (5 191 5

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

ment erecurs it faces at the control of the control	MEDICAL H	HISTORY	10	Interpolation mast.
Surname Waady	line	Ohristian Nam	e Mma	9
	Table I.—GENER	AL TABLE	7/1//	
Birthplace:—Parish M	en Bay BD.	County	, nga	
	SPECIAL RES		REGULAR	ARMY
Examined	on W day of M		on day of	191
	at ponu	days	at , years	days
Trade or Occupation	Jinh.	nan (
Height	of feet	7 tuches	feet	inches
Weight		46 lbs.		lbs.
Chest Girth when fully expanded		72 inches		inches
ment (Range of Expansion		inches		inches
Physical Development	Right	Left	Right	Left
Vaccination Marks	Right			
(Number			1	
	REV = 6/6		R.E.—V=	
Vision }	L. E. – V=		1,.B.—V=	And the second s
	(a) t		(a)	
(a) Marks indicating congenital peculi- arities or previous disease				
	(6)		(b)	
(b) Slight defects but not sufficient to cause rejection				
			*	<u> </u>
Approved by (Signature)	Kamas Par	lean		
(Rank)	man	Medical Officer.		Medical Officer.
	at to theo		at	
Enlisted	on VV day of	Mar. 1918	on day o	
	October Corps.	Regtl. No.	Corps	Regtl, No.
Joined on Enlistment	Allahal	021		
Transferred to	72,39			
4.111000000				•
Became non-effective by				
(Signature	on day of	191	on day	of 191
(Rank)		•		
(Rank)	l,		l	[P.T.O.

Table III.—Boards: 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.

, gr	at rippliances, farticulars of Demar Freatment, Ge.
Date	Brief Details, and Signatures
23-5-18.	Vace &
13-6-18	TaB. \ 10
20-6-18	TaB. 10 T.A.B.
4-7-18	TAB) P
	1

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
		İ			
	-				
	100				.*
				4.	
				7	



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

Date

Station St. John s. Mfld.

		the Contract of the Contract o			
ı.	Unit Royal No	ewfoundland	5.	Age last birthday	20
2.	Regimental No.	5321	6.	Enlisted on .	May 23rd '18.
3.	Rank	Pte.		at	St. John's.
4.	Name WOODFINE,	THOMAS	7.	Former trade or occupation	Fi sherman.

8. Disability

History of Fainting Attacks and Gastritis.

9. History In October 1917, whilst working on railroad one night, was seized with fainting attack, which began as pain in left side, about precordial area. Was unconscious for about fifteen minutes. Since that time has had three similar attacks to one as described above.

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. Temp. 98.8. Pulse 90.

Respiratory System.

Department of Atlus

Digestive System.

On examination, Normal.
Cardiac dullness, slightly increased to left. Otherwise normal.
Complains of pain in stemach, and vomiting after meals. (Has lost considerable weight?). Bowels regular.

Urogenital System. Lymphatic System. Mervous System.

Normal. Normal. Normal.

sanatorium II. Was - advised and refused? operation

12. Do you recommend discharge as permanently unfit?

Section of missions as a minute

Yes.

J. B. O. REILLY. Signature Capt. Rank or Qualification R.A.M.C.....

Remarks if any by Officer i|c Hospital.

Place Signature Rank Date

AS OF CASE BURNER & MANAGEMENT OF THE SECOND
Opinion of the Medical Board

In para. 13, the President should write "may" or "cannot" at x Erase inapplicable words be considered as aggravated by:-13. For pension purposes, the disability x cannot (a) Service during this war. Remarks if any:— (b) Climate. (c) Ordinary Military Service 14. Does the Board concur in preceding report? (see Sect. 10) If not give differing opinion and additional findings. Had same attacks three years ago from a fright. Pulse 88. 15. (a) THE ENTIRE DISABILITY-To what extent is his capacity lessened at present for earning a full livelihood in the general labor market? (b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a ful livelihood in the general labor market lessened by that portion of his disability to or incurred during service?

(State in percentage.) Remarks if any:-16. Is the disability permanent? Yes (b) Misconduct (a) Intemperence No. 17. Has the disability been aggravated by 18. The refusal of $\frac{\text{operation}}{\text{sanatorium}}$ is:— $\frac{\text{(a)}}{\text{(b)}} \frac{\text{Reasonable}}{\text{Unreasonable}}$ Remarks if any:-General Hospital, Naval and Military Con-19. If fit subject for Hospital do you recommend admittance to valescent Hospital, Jensen Tuberculosis Camp. discharge from the Army 20. We recommend retention in Permanently Unfit Remarks if any:-..... N. . S. . FRASER...... PresidentJ. S. TAIT SignaturesL. PATERSON, Major. Place .. St. John Date Nov. 16th .. 18.......

Station .

(Sig). CLUNY MACPHENSON, Lajor.

Administrative Medical Officer

D. M. S. NEWFOUNDLAND.



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 search should be completed in the ruspital at which a had 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. iIc Records together with the remainder of the man's documents.

changes occurring in the description subsequent to the date of admission to pension sin
Name in full Woodfine, Thomas
Regiment from which discharged 1st. Newfoundland
Regimental number 5321
Intended address Northern Bay. Bay a Virde District.
Height on discharge 5. Feet 7"
Color of hair on discharge Dark
Complexion fair
Color of eyes Blue
Descriptive Marks
Figure on discharge Medum
Christian name of Father Richard
Christian name of Mother Kate
Wife's maiden name in full
Date and place of marriage
Christian names of children
Place and date of soldier's birth. Northern Bay December 3 , 189
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) Thomas X Woodfine

Station St. Johns, refla. Nov. 6, 1918.

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.

PL

Station St. Johns, reflect.

Aov. 6/. 8



The Royal Newfoundland Regiment

REPORT OF HEADQUARTERS TRAVELLING BOARD HELD ON SOLDIER ON REGIMENTAL STRENGTH

Date	2° hor 19/8
Regimental No. 5321	
Name Wordsin, 3	\\\
Address Aorthum Bay, Ba	ey de Verde District
Disease or Disability	
History of	1 tainting attacks & fastule,
Finding of last Standing Medical Boar	rd,
held on19	
Present Condition	
\	
\	
Recommendation (300 due	to Military service)
. Sin	Ange 1 S. M
Category CII'	
att.	, PM.
	O. C. Depot
Members Of	Bake 1:
Board	D. D. M. S.
sted Co	Kookeelly ligh
MOL	M. O. Depot

NEWFOUNDLAND POSTAL TELEGRAPHS. CABLE CONNECTION WITH ALL PARTS OF THE WORLD Place from By ack he as 12 Post No. 1 FIF Figure 19 To appain Agrady OCT 12 191 R 5321 Fle L'Moodfine fainted in Church this morning don't Know if anything unordinary report quick Rev. E. oBrien as fossible I, admision do A. P. northernbay diam ductor Med before MEDICAL DEPT. trearning him

NEWFOUNDLAND POSTAL TELEGRAPHS. CABLE CONNECTION WITH ALL PARTS OF THE WORLD Line kight some how Western Day Niglika Hages Divade Thomas woodfine Cannot Ceave here today impossible Very ill Uport when better In Dunne Measip Rene To be Noted

Nº 4681



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS I, Thomas Woodfin , Regl. No. 532/ hereby agree, until further notification by me, and in similar official form to make an Allotment of

Dollars and Tinta Conts per diam from my Pay

Certificate No.	Whether Wife, Child other Relative or Friend	NAME (in full)	Address	AMOUNT (each person
324	Father	Mr. Richard Woodfins	Bang de Verde	6
	4			
			un (Paul)	
		•	•	
			1 (1969) 1 (1969) 1 (1969)	
			Total Allotment, \$	6
		completed by the Officer Commanding er Commanding Company and handed on application.	Company, signed by the Volun	

ORM 93.

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at Headquarters may 23/18

1.	1. Name Thomas Wood Jins	Age (a) Declared 20
		(b) Apparent
2.	2. Do you know of anything wrong with you?	
	What severe illuesses have you had?	
	13	121
	٠, ١, ١	
3.	3. Height oft 7"	Weight 145
4.	4. Eyesight (a) Left 6/6	(b) Right 6/6
	5. Physical Defects (Examine after strenuous exercise	e) . ₩
6.	6. Examination of Lungs	33
	Measurement (a) Expiration	37 (b) Inspiration 37 7
7.	7. Examination of Heart	
8.	8. Examination of Urine	
ο.	9. Examination of Mouth—(Defective Speech)	
	Teeth	
	Throat	
	\sim	
	Nose	
	Ears—(Otorrhea)	
	(Deafness) (
10.	10. Have you been successfully vaccinated, and when	? no 11 0
	Name and address of next of kin 30 Hay	Richard bothern Dery
11.	11. Name and address of next of kin 3 at hun	RJE VerdE Diel
RE	Remarks	<i>10</i> 0 0 0 1
		Arthur, N. Carrell
,	All	
		Water

Medical Examiners.

No. 4681



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

Identity Certificate No.	Whether Wife, Child,	Name (in full)	Address	AMOUNT (each person
324	Father	Mr. Richard Woods	ing Northern Bang	6
			·	
******		· · ·		
			Total Allotment. 5	
S	his form must be office grant by the Office equired payments of	r Commanding Company and han	Total Allotment, 5 ing Company, signed by the Volunded to the Paymaster as authority	teer, counte

po stort from Bay She militing Defet 27/17/9 3854 Gentlemen I write to know if you will send forme a service budge. I sulisted the 22 and May 1918. My Mar is 5-321 I perved as Regimental police for & months. of was 193 days with the colours. I was discharge as being phisically unfit on The 38 th Law of / Nove 1918. You can forward the salue to exte. This. Wordfine Payment Dist. Bad de Verde

5321

February 4, 1919

Thomas Woodfine, Northern Bay.

Dear Sir:

With reference to your letter of Jan.27th. I beg to state that I have forwarded your badge to the above address, and no doubt you will receive it in due time.

Yours truly,

For Paymaster & O i/c Records.

Nº 4681



1ST. NEWFOUNDLAND REGIMENT

to, and of iden	for the benefit of	notification by me, and in sim Dollars and Sixty the undermentioned Person and or I duction of the relative Identi	Cents, per diem, for Persons, such payment to be many	rom my Pay ade on proof
Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	Address	AMOUNT (each person
324	Father	Mc. Richard Woodfu	Bay do Verde	6
÷ .				
NOTE.—7	This form must be	completed by the Officer Commandir Commanding Company and hand	Total Allotment, 5	teer, counter

Officer Commanding

A John June 12 191 8

Company

5321 Pt. Thomas Woodfine Livilian Clothing \$ 60 00 ch.6492.

Squadron, Troop, Battery and Company Conduct Sheet. Army Form B. 121. Number of Sheet TV Regimental Number and Name Enlistment Trade Good Conduct Badges, Service pay or proficiency pay Place and Date)
of Enlistment Date Period of Date_ Date of award or of order dispensing with trial Date of Name of Rank OFFENCE Punishment awarded By whom awarded REMARKS Offence Witnesses

B 121.

Joined_ Joined_ Joined

Toined

Place

To be carried over.

19968-

Nov. 18th, 1918

From Officer Commanding Dopot

To Paymaster and Officer i/c Records, Militia Department

5614 Pte. A. Whitehorn 5321 " T. Woodfine 5799 " J. Clarke

> The marginally noted men have been recommended for discharge as permanently unfit by Medical Board held on Saturday, November 16th.

I am sending them herewith for your attention and necessary action, please. Their accounts on Company Pay Sheets have been squared up to and including 18-11-18, and they have credit balances and allotments as undernoted.

	Cr. Bal.	Allotment
5614 Whitehorn	\$121.50	None
5321 Woodfine	2.00	60d
5799 Clarke	3.80	None

Reg. No. 5321 Rank Pto Name Woodfine J. Attested 22-5-18 Address Nothern Allotee 1/2 1 of Woodfine (Ja) Allotment 60 Date of Allotment 1-4-18 Embarked for Overseas 30 5/18 5 9 5/18 8.4 9 5/8 "True mo mor, 27 6/18 Very ill will report as soon as possible The havellens board lecomment DISCHARGED - MEDICALLY UNFIT