



# First Newfoundland Regiment

## ATTESTATION PAPER

Regimental No. 718.

Name in full James Joseph Burke Age 27.

Address 27 Livingstone Street.

Married      Height 5ft 11      Weight 135  
 Single

Color Dark      Hair D. Brown      Eyes Blue

Other distinguishing marks Scar on 1 thumb

Nearest relative Michael Burke.

Address 27 Livingstone St.

Dependents \_\_\_\_\_

Occupation Labourer      Present Wage 7<sup>50</sup> week.

Previous service \_\_\_\_\_

Decorations \_\_\_\_\_

General Remarks \_\_\_\_\_

Date of Enlistment 15<sup>th</sup> Dec

I, James Joseph Burke do sincerely promise and swear that I will be faithful and bear true allegiance to His Majesty, and that I will faithfully serve His Majesty in any place where I may be needed (or in the Colony of Newfoundland, as the case may be), against all His enemies and opposers whatsoever, according to the condition of my service.

Declared before me this 15<sup>th</sup> day of Dec. 1914  
James Burke

Michael Burke

**DESCRIPTIVE REPORT ON ENLISTMENT.**

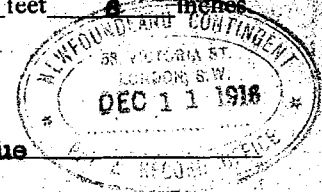
(To correspond with Entries on the Medical History Sheet.)  
Applicable to all ranks.

Reg. No. 729

Name Joseph Joseph Burke

Apparent age 27 years 0 months. Height 5 feet 8 inches

Chest measurement { Girth when fully expanded \_\_\_\_\_ inches.  
Range of expansion \_\_\_\_\_ inches.



Distinctive marks Color: Dark, Hair: Dark Brown, Eyes: Blue

Other distinguishing marks: Scar on left thumb

**INFORMATION SUPPLIED BY RECRUIT.**

Name and Address of next of kin Michael Burke, 27 Livingstone St., St. John's

Relationship \_\_\_\_\_

**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	Regt. or Depot	Promotions, 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>15/12/14</u>									
Joined at <u>St. John's</u> on <u>15th December '14</u>									
Embarked	St. John's	Embarked	St. John's	Embarked	St. John's	Embarked	St. John's	Embarked	St. John's
<p><i>Embarked St. John's 5/15. Embarked St. John's 20/15. Disembarked Halifax and returned for leave 31/15. Embarked for Gallipoli 10/16. Landed Anzac Bay night of 19/20 Sept 15. Evacuated and arrived H.M. 15/16. Embarked for England 16/16. Embarked Port 14/16. Disembarked H.M. 22/16. Wounded 2/16. Admitted 29 C.C.S. Staff wound left side of face 5/16. Received 11/16. Wounded 1/16. Admitted 4 C.C.S. 9.5.16. Landed 2/16. Transferred to England 4/16. Admitted H.M. 6/16. Transfer to H.M. 9/16. To Newfoundland per St. John's from H.M. 22/16. Arrived Newfoundland 6/17.</i></p>									
<i>Discharged Medically Unfit 24-1-1917</i>									
Total Service forfeited as above ...									

Total Service towards Engagement to 24-1-17 (date of discharge) 2 years 41 days  
 " " " Pension \_\_\_\_\_

2/1st NEWFOUNDLAND REGIMENT.

*Pte Burke James*

No. *718* is unlikely to be fit for Service with the

Expeditionary Force for *Six* months, on account of

*G. S. W. it should be*

*XII II 1*

I recommend that he be posted to the Depôt at St. John's,  
Newfoundland.

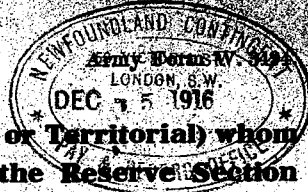
*Total at Present*

*W. S. Austin*  
Capt. R.A.M.C. M.O.,

*I/C. 2/1st Newfoundland Regt.*

*21-12-16*

*A.Y.R.*

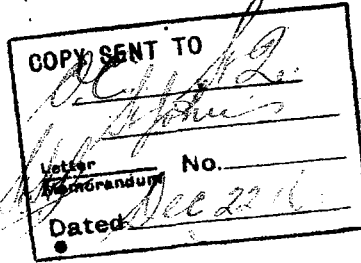


**Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man fit for General Service.**

No. Burke 718 Rank Pte  
Name (surname first) Burke - James, Joseph  
Regiment 1<sup>st</sup> Newfoundland

1. State what special qualifications you have for employment in civil life.

*Dock labourer + Seaman*



2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed?

*Worked from day to day - odd jobs  
Employed by Red Cross Steamboat Coy.*

3. What is the nature and locality of the employment you desire?

*Same kind of work as far as possible  
at St John's, Newfoundland*

4. What is the name of your Approved Society? *Longshoremen's Union*

5. Have you been employed whilst with the Colours? If so, in what capacity?

*Bomber*

Date 14/10/16

Signature James Joseph Burke

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 4 (ii), item 3, of Army Council Instruction No. .... of 1916.

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

*Certified True Copy  
W. W. [unclear]  
C. [unclear]*

Army Form B. 179.

Medical Report on an Invalid.

Station 3rd London General Hospital  
Wandsworth, S.W.

Date 7. 11. 16

1. Unit 1st Newfoundland  
2. Regimental No. 718  
3. Rank Pte  
4. Name Burke, J. J.

5. Age last birthday 29  
6. Enlisted { on Dec 12<sup>th</sup> 1914  
at St John's Newfoundland  
7. Former Trade { Hoist Labourer & Seaman,  
or Occupation

8. Disability.

R. S. W. R. Shoulder XII TVI  
Muscular spinal nerve paralysis.

Statement of Case.

Notes.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. July 1<sup>st</sup> / 7 / 16

10. Place of origin of disability. Seaman.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

*was advancing when a bullet struck  
his L<sup>th</sup> shoulder & penetrated behind He found his L<sup>th</sup> arm  
powerless directly he was shot & his wrist dropped.  
He had intense pain on admission with clean wound.*

12. (a) Give your opinion as to the causation of the disability.

active service

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3).

R. S. W.

18. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

His left arm is in splint with

The arm is hyperextended to retain tension on muscles. He is unable to extend muscles behind waist & has some injury to the whole of the postural cord. This condition is steadily improving & he has no pain now.

14. If the disability is an injury, was it caused

(a) In action?

yes

(b) On field service?

yes

(c) On duty?

yes

(d) Off duty?

yes. no war

15. Was a Court of Inquiry held on the injury?

If so—(a) When?

(b) Where?

(c) Opinion?

16. Was an operation performed? If so, what?

17. If not, was an operation advised and declined?

no

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly\* attributable to active service?

19. Do you recommend

(a) Discharge as permanently unfit, or

(b) Change to England?

W. Cheselton  
Capt R.M.C.

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except

Station

2nd London General Hospital  
Wandsworth SW.

Date

9<sup>th</sup> Nov 1916

Officer in charge of Hospital.

C. Col. R.M.C.

\* 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.

+ Delete this word if no exceptions are to be made.

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Date

Opinion of the Medical Board.

Norms.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165. Pay Warrant, 1913).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

*Active Service*

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

*G. S. W.*

21. Has the disability been aggravated by

*no*

(a) Intemperance?

*no*

(b) Misconduct?

*✓*

(c) Any of the conditions mentioned in Question 20, and if so which?

22. Is the disability permanent?

*no*

23. If not permanent, what is its probable minimum duration?

*Twelve months*

To be stated in months

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

*Total at present.*

In defining the extent of his inability to earn a livelihood, estimate it at  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , or total incapacity.

24a. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?

*—*

25. If an operation was advised and declined, was the refusal unreasonable?

*no.*

26. Do the Board recommend

(a) Discharge as permanently unfit, or

*yes.*

(b) Change to England?

Signatures:—

*A. F. Wollebrin Major Retired* resident.

Station *3rd London General Hospital Wandsworth* *S. J. I. Wetherall Capt RMC* Members.

Date *4.XI-16* *R. B. Howard, C.O.*

Station *3rd London General Hospital Wandsworth* *A. F. Wollebrin Major Retired*

Date *4.XI-16* *Administrative Medical Officer.*

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*no*

**NEWFOUNDLAND.**  
**REPORT OF MEDICAL BOARD**  
**ON SOLDIER OR NAVAL RESERVIST RETURNED**  
**FROM OVERSEAS**

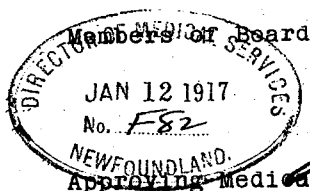
Station St. John's, Nfld. Date Jan. 10th., 1917.  
No. 718 Age 29 Height 5ft. 8in.  
Rank Pte Complexion  
Name Burke, J. J. Eyes Blue Hair D. Brown  
Unit 1/Nfld. Regt.  
Address 27 Livingstone St., St. John's Former Trade Dock Labourer  
and Seaman  
Enlisted at St. John's, Nfld. on Dec. 12th., 1914.  
Disease or disability G.S.W. Left Shoulder. Musculo Spiral N. Paralysis

Present condition *Left arm practically helpless, some  
wasting of muscles. No power in hand or wrist*

Estimated disability *70% for six months*

Recommendation of Medical Board  
*discharge*

Class

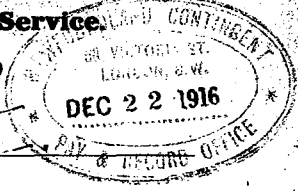


*R. H. Fraser*  
*J. B. Paterson*  
*J. J. Cairns*  
Approving Medical Officer.

*Clay Macpherson, M.D.*

*Certified true copy*

Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man fit for General Service.



No. 718

Rank Pfc

Name (surname first) Burke James Joseph

Regiment Newfoundland

1. State what special qualifications you have for employment in civil life.

*Dock Labourer & Seaman*

2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed?

*Worked from day to day - odd jobs  
Employed by Red Cross Steamboat Coy*

3. What is the nature and locality of the employment you desire?

*Same kind of work as far as possible  
at St John's Newfoundland*

4. What is the name of your Approved Society?

*Longshoremen Union*

5. Have you been employed whilst with the Colours? If so, in what capacity?

*Bomber*

Date 14 October 1916

Signature James Joseph Burke

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**Casualty Form—Active Service.**

*Captain J. J. Clerk*

Regiment or Corps Newfoundland  
 Regimental No. 718 Rank Pte Name Durke J.  
 Enlisted (a) Dec 15/15 Terms of Service (a) one year Service reckons from (a) Dec 15/15  
 Date of promotion to present rank \_\_\_\_\_ Date of appointment to lance rank \_\_\_\_\_ Numerical position on roll of N.C.Os. \_\_\_\_\_  
 Extended Duration War Re-engaged Aug 15/15 Qualification (b) \_\_\_\_\_

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be noted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embka Sibout Nfld		3.2.15	
		Disembka Alexandria		1.9.15	
		Embka for Gallipoli		13.9.15	
		Embka Port Suez		14.3.16	
		Disembka Marseilles		22.3.16	
		very slight wound of face caused by particles of shell	France	2.5.16	B 213. 3.5.16
		Admitted	29 C.C.S.	3.5.16	E.D. 9486. 6.5.16
		Rejoined Battalion	In the field	11.5.16	B 213. 14.5.16
		dam. G.W. L. Shoulder	France	2.7.16	E.D. 11959
		transferred to England		4.7.16	W 3083

*20 C.C.S. 14.7.16*  
*4 C.C.S.*

*J. J. Clerk Capt*  
*for the Infantry Records*  
*1st Bn 3rd Coy*

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) e.g., Signaller, Shooting Smith, etc., etc., also special qualifications in technical Corps duties.

*Belvedere*

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.  
[686] W:017/2121 1000m 6/15ss 83 56

Forms  
B. 121  
39.

Regiment of *1<sup>st</sup> Newfoundland*

Signature of O. C. Company

Number of Sheet  
*J. W. March*  
*Capt.*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<i>Burke J.</i>	Age on	<i>27</i> years <i>0</i> months	<i>Labourer.</i>	
Joined	Date	Place and Date of Enlistment	<i>St. John's Dec. 15/1914</i>	Religion	
Joined	Date	Period of	<i>St. C.</i>	Place of Birth	
Joined	Date		<i>with Colours</i> years.		
Joined	Date		<i>with Reserve</i> 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
	<i>23/5/16.</i> <i>23/5/16.</i>	<i>Pte.</i>		<i>Absent from Church Parades.</i> <i>Absent from tattoo 23/5/15 to 9.10 AM</i> <i>23/5/15.</i>	<i>Cpl. Edwards</i> <i>Cpl. Edwards</i>	<i>2 days 0 B.C.</i>	<i>25/5/15</i>	<i>Capt. March.</i>	
				<i>(i) Causing disturbance.</i> <i>(ii) Resisting police escort.</i> <i>(iii) Using obscene language.</i> <i>(iv) Drunk.</i>	<i>Doc. evidence</i> <i>Cpl. King</i> <i>Pte. Jones.</i> <i>G. M. P.</i>	<i>8 days B.C.</i>	<i>26/5/15</i>	<i>H. R. S. Buttons.</i>	
<i>Stabs.</i>	<i>25/6/15</i> <i>3/7/15</i> <i>5/7/15</i> <i>7/7/15</i> <i>18/7/15</i>			<i>Late on 9 AM parade.</i> <i>Absent Tattoo.</i> <i>Late 7 AM parade.</i> <i>Refusing to obey order.</i> <i>Absent from 7 AM p.d.</i>	<i>Sgt. Peckham</i> <i>Cpl. Angus.</i> <i>Capt. Ayre</i> <i>Sgt. Green.</i> <i>Cpl. Fowlow</i>	<i>2 days B.C.</i> <i>2 days B.C.</i> <i>5 days B.C.</i> <i>2 days B.C.</i>	<i>25/6/15</i> <i>7/7/15</i> <i>8/7/15</i> <i>28/7/15</i>	<i>Capt. J. W. March</i> <i>do</i> <i>do</i> <i>do</i>	
				<i>To be carried over</i>					

CERTIFICATE TO BE SIGNED BY THE SOLDIER ON DISCHARGE

I hereby acknowledge that I have received all my pay and allowances, (including clothing allowance), and all just demands up to the present date.

Name James G. Burke (Sig. of Soldier).

Address 27 Livingston St (Sig. of Witness).

*Gordon B. Fatis*

\*\*\*\*\*

RECEIPT.

C.R. 718

I hereby certify that I have received the 1914-1915

STAR.

No 718 Name James Burke

Witness

Hardy

Date

3/12/19

Place

St Johns

Original in File M-3-14

C.R. 718

COPY OF LETTER SENT TO:- 1596A. O'ROURKE, 704J. O'NEILL FORT AMHERST, #  
1027 PTE. W. DODD, 718 J. BURKE, SIGNAL HILL.

May 30th. 1918.

Sdr:-

You will take up duty as night watchman at Fort Amherst, from 1st. June next until you are notified that your services will not be required longer.

It will be your duty to keep a look-out from the time the regular watchmen finish duty for the day until they resume duty the next day. Your special duty will be to keep a careful lookout for any vessels or anything that may approach the harbour of St. John's by water, and if should be of such a nature as to cause suspicion that it is a ship of war, submarine, ~~airplane~~ or other craft of the enemy you will immediately report same to the senior Naval Officer, H.M.S. Briton, and to the Orderly Officer, Guard Room, Princes Rink Barracks. You will arrange to keep watch alternately.

You will be paid at the rate of seventy dollars per month whilst engaged in this service, which amount will be paid to you in weekly installments on application to the Paymaster, Militia Building, Water Street.

I have the honour to be

Sir,

Your obedient Servant ,

Major.

District Officer Commanding.

Newfoundland/

C.R. 718

Extract of Casualties received from Pay & Record Office,  
London, dated July 18, 1916.

#718 Pte. J.J. Burke. ✓

Gunshot wound Chest slight.

Admitted 24th General Hospital, Staples, 3rd July 1916.

C.R. 718

Extract from Casualties received from P.&R.O. dated  
July 6th., 1918.

Admitted 3rd., London General Hospital on July 4th. 1918.

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#718 Pte. J. Burke.

G.S.W. L. WRIST.

BC.

62  
MAY 31 1916

Dear Sir,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that the injuries sustained by No. 718, Private J. J. Burke, of which you have already been informed, consisted of wounds in the left side of face caused by particles of shell.

This information has been received by mail.

Yours faithfully,

Mr. Michael Burke,  
27 Livingstone St.

Colonial Secretary.

C.R. 718

Extract from Nominal Roll of Draft embarked for  
Overseas per S.S. Stephens March 20th 1918.

No. 6 Platoon.

718 Pte. J. Burke.