

C.R. 6224

Extract from Kelly's report on the Unit the Royal Artillery,
No. 10 in Section Oct. 24, 1918.

6224 Pte. John Collier.

Presented for General Service with the Royal Artillery, from
Oct. 24.

C.R. 6224

Extract from Daily Orders part II, Depot, St. John's dated Dec.
18th.

HOSPITAL

6224 Pte. J. Collier.

ADMITTED

DISCHARGED FROM M.I.D. HOSPITAL AND ADMITTED TO ESCOBSON I

CON. HOSP. 15-11-18.

BC.

C.R. 6224

Extract from Daily Orders, Part II, XVII: The Royal Newfoundland
Regiment, dated Nov. 18th. 1918.

HOSPITAL.

6224 Pte. J. Collier

Discharged from Hospital 26/11/18.

C.R. 6224
Counter No. _____

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

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

Line Number	Recd	By	Sent	by	Check

Dated ~~Nov~~ 28, 1918.
To ^{Oct} Mrs. Mary Collier,
St. Alban's, F.B.

Reg to inform you that your son #6224 Pte. J. Collier at
Military Hospital St. John's is now improving.

J.R. Bennett,
Minister of Militia.

FOR TYPEWRITER

C.R. 6224
Counter No.

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I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender

St. John's Dept. of Militia.
Address

Line Number	Recd	By	Sent	by	Check

Dated Nov. 11, 1916.

To Mrs. Mary Collier,
St. Albans, P. Bay.

beg to inform you that your son #6224 Pte. J. Collier, is now convalescent.

J.R. Bennett,
Minister of Militia.

FOR TYPEWRITER

CR 6224

Extract from Medical Board held on MONDAY AFTERNOON December 2nd..
the following were the findings.

#6224 Pte. J. Collier..

RECOMMENDED DISCHARGE AS PERMANENTLY UNFIT.

C.R. 6224

Extract of Daily Orders Part II, dated Dec. 27th 1918.

DEMOBILIZATION.

The undernoted man's discharge on Demobilization has been approved by O.C. Discharge Depot from noted dates. He is removed from Depot strength and transferred to Discharge Depot pending confirmation by Officer i/o records.

6224 Pte. John Collier.

Discharged 24-12-18

C.R. 6224

Extract from Daily Orders part II, Depot St. John's dated Jan. 25th. 1919

The discharge of the und. noted has been COMPLETED by Officer 1/s
Records on 21-1-19.

#6224 Pte. John Collie.

Department of Militia, Newfoundland

Medical Department

Medical Report on an Invalid

NOTES.—

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

STATEMENT OF CASE

Station *St John's*
Date *Nov. 29th 1915*

- 1. Unit *Royal Newfoundland*
- 2. Regimental No. *6224*
- 3. Rank *Plt*
- 4. Name *Bollin John (of Mass)*
- 5. Age last birthday *21 years*
- 6. Enlisted on *3rd Oct 1915*
at *St John's*
- 7. Former trade or occupation *Lumberman*

8. Disability

Influenza.

- 9. History *Admitted M.I.D. H. 7/10/15. Discharged to Escaroni 15/11/15 for Convalescence.*

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 fair.
P.S.O. T Normal.

Prolonged breathing all over Base of left lung
Shortness of breath on exertion.
No pain in chest.

11. Was sanatorium advised and refused? No.
operation

12. Do you recommend discharge as permanently unfit? yes.

Signature

Archibald
for M.O. Depot

Rank or Qualification

Remarks if any by Officer i/c Hospital.

Place Signature

Date Rank

January 21st., 1919

#6224 Pte. John Collier,

St. Alban's,

Fortune Dist.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 622."

Yours faithfully,

Paymaster & O. i/c ^{Captain.}
Records

Enc'l 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. *6224* Rank *Plt* Name *John Collier*
 Intended place of residence *St John's Fortuna Street*

2. Occupation *Summerman*
 Classification of soldier *B* Medical Category *C*

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 *St John's* Date *DEC 20 1918*
Attesty Capt
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place and date *St John's* *John Collier*
Dec 21st 1918 Signature of soldier
C. S. Dicks Capt
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place and Date *Dec 20 1918* *John Collier*
St John's Signature of soldier
Raymond
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service *3. 10. 18* No of days on Military
 Discharged from service *24. 12. 18 plus 98 days* Service *111 Days*

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'S* *R. H. Sait Capt*
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date *DEC 24 1918*

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place *St John's Med* *M. Howley Capt*
 Officer i/c Records
 The Royal Newfoundland Regiment.
 Date *January 21 1919*

CD B 2019/622

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 6224 Rank Pte Name Edwin John
 Date of Enlistment 3.10.15 Address Malvern District Toronto
 Occupation lumbarment Classification for Discharge B Medical Category F
 Recommendation S.M. sent by profit Disability Rating sent to 20%
 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		NO
B 178a	D 400A	B 1915	2	do 2nd	" 3		3. JMB
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			" 6		
B 179c	B 120	M 93	1				

Date 19.11.15 W. H. Kelly Capt
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I 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:—

- (a) Clothing Allowance payable \$60.00
- (b) Clothing Supplied Joseph H. Snowling

Date 20.12.15 O. i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 367 to his home
 at St Albans and Release Certificate No. 579 issued.

Date 20-12-18 Ch Dicks C.M.
 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 21-1-19

Date 20-12-18 Stobley Capt.
 Depot Paymaster

Discharge approved for 24.12.18

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	Form B
B 178	W 3494	B 122		Board 1st	" 2.	1	
B 178a	D 400A	B 1915	2	do 2nd	" 3.	2	
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			" 6.		
B 179c	B 120	M 93	1				

Date 24.12.18 Ch Dicks Capt.
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:-
 Officer in Records.
 Board of Pension Commissioners.
 with following additional documents.

Date DEC 24 1918 R. [Signature]
 O. C. Discharge Depot.

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

Date Dec. 28/1918

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

MEDICAL HISTORY

OF

Surname

Allard (of Mary)

Christian Name

John

Table I.—GENERAL TABLE

Birthplace:—Parish

St. John's

County

Newfoundland

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	3	<i>Oct</i>		191
at	<i>St. John's</i>			
Declared Age	21	years		days
Trade or Occupation	<i>Turner</i>			
Height	5	feet	<i>5 1/4</i>	inches
Weight			<i>151</i>	lbs.
Chest Measurement	Girth when fully expanded		<i>38</i>	inches
	Range of Expansion		<i>4</i>	inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
When Vaccinated				
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>L. Armand Peterson</i>			
(Rank)	<i>Major</i>		Medical Officer	
Enlisted	at	<i>St. John's</i>		at
	on	3	day of <i>Oct</i>	191
Joined on Enlistment	Corps	<i>Royal Newfoundland</i>		Regtl. No.
		<i>6224</i>		
Transferred to				
Became non-effective by	on	day of	191	on
(Signature)				
(Rank)				

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 as Lumberman.

John Collier

Signature of Man.

Charles A. Capt.

Reg. No. *6224.*

Signature of the Vocational Officer or his Representative.

Place *St John's N.Y.C.D.*

Date *20/12/18.* 191

Fortune

Demobilization Form 1

570 A

The Royal Newfoundland Regiment

Class for Demobilization:—
B

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *Nov. 28 / 11 / 18*

Regimental No. *6224*

Name *Collins John (Pfc)*

Address *Bay Des Peres St. Albans*

Present Medical Category *E*

Proceeding 8th B in file

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

Members of Board
} *R.H. Dait Capt*
O.C. Discharge Depot.
J. Paterson
Senior Medical Officer
See Burden
M. O. Depot

Boarded



Descriptive Return of a Soldier Discharged on Account of Disability

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

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

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

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

Name in full *Collin John*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *6224*
 Intended address *St Albans*
 Height on discharge *5 Feet 8 1/4 in*
 Color of hair on discharge *Dark Brown*
 Complexion *Fair*
 Color of eyes *Brown*
 Descriptive Marks
 Figure on discharge *Medium*
 Christian name of Father
 Christian name of Mother *Mary*
 Wife's maiden name in full
 Date and place of marriage
 Christian names of children
 Place and date of soldier's birth. *St Albans. 6th Aug 1897*
 Nature and locality of civil employment required

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full) *John Collier Private* (Rank)

Station *St Johns* Date *29th Nov 1915*

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.

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

Station *St Johns* Date *29th Nov 1915*

FORM K

Nº 7381



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, John Collier, Regl. No. 6224
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
 _____ Dollars and no Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{and} Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and} or Persons
 concerned, viz.:

Allotment begins Nov 1st 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
7395	Mother	(Mary) Mrs. Robert Collier	St. John's Bay St. John's	- 60
Total Allotment, \$				- 60

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, counter-signed by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

(Sig.) [Signature]
 Officer Commanding
5 Company
St. John's
2-10-1918

(Sig.) _____
 (Rank) Pte.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of

Royal Newfoundland Regt

Number of Sheet

One

Signature of O. C. Company

C. A. Dickson

Regimental Number and Name		Enlistment		Trade
No.	<i>John Collier</i>	Age on	<i>21</i> years <i>11</i> months	<i>Makerman</i>
Joined	Date	Place and Date of Enlistment	<i>St John's</i>	Religion
Joined	Date		<i>3/10/18</i>	<i>R.C.</i>
Joined	Date	Period of	with Colours	Place of Birth
Joined	Date		<i>1 1/2</i> years	
			with Reserve	
			<i>3 1/2</i> years	

Good Conduct Badges, Service pay or proficiency pay

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<i>Demobilized</i>	<i>St John's</i>	<i>21/19</i>			

To be carried over.

Army Form B. 121.