

REPORT OF THE MEDICAL OFFICER

First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 564

Name in full James Hunt Age 23

Address Grand Falls Bay Bonaville

Married S Single Single Height 5 Weight 140

Color light Hair black Eyes brown

Other distinguishing marks none

Nearest relative Mother Elizabeth Hunt

Address Bonaville

Dependents None

Occupation paper hanger Present Wage 50 p.m.

Previous service _____

Decorations _____

General Remarks _____

Date of Enlistment _____

I, James Hunt, 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 conditions of my service.

added for war
Aldermantown
1st August 1914
James Hunt

James Hunt

Declared before me this first day of October 1914

J. W. March

16.

DESCRIPTIVE REPORT ON ENLISTMENT.

Applicable to all ranks. To correspond with entries on the Medical History Sheet **Reg. No. 504**

Name **James Hunt**

Apparent age **25** years _____ months. Height _____ feet _____ inches.

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

Distinctive marks **Color: Light, Hair: Black, Eyes: Brown,**

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin **Elizabeth Hunt, Bonavista, Nfld.**

| 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) Signature of Officer verifying entry from certificate.

(a)	(b)	(c)	(d) Verified from certificate.

Particulars as to Children.

Christian Names	Date and Place of Birth	(d) Verified from certificate.

STATEMENT OF THE SERVICES.

Corps in which served	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed 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 16/9/14									
Joined at St. John's on 16th September '14									
<i>Discharged at home Nov. 1/1918</i>									
<i>Embarked at St. John's for S. I. 3rd Dec. Embarked at S. I. 20th Dec. Disembarked at S. I. 31st Dec. Embarked for Liverpool 13th Jan.</i>									
<i>Transferred to 10th Bn. for 1915 to Salisbury 1916 then to 10th Bn. for 1917</i>									
<i>Embarked at St. John's 2-3-16. Disembarked at Liverpool 10-3-16</i>									
<i>10th Bn. 4-7-16. 10th Bn. 22-1-17</i>									
<i>Admitted 87th A. F. S. W. Irish Const. 17/8-17. Involuntarily to England 24-8-17</i>									
<i>Admitted 87th A. F. S. W. Irish Const. 17/8-17. Involuntarily to England 24-8-17</i>									
<i>Embarked at S. I. 3-2-18. Disembarked at Liverpool 6-2-18. Involuntarily to England 15-2-18</i>									
<i>WOUNDED 13th Dec. Admitted 10th Bn. S. I. 13-2-18. Involuntarily to England 15-2-18</i>									
<i>Admitted 10th Bn. 31-3-18. Disembarked at St. John's 14-8-18</i>									
<i>In responsible for ship large No. 20-9-18</i>									
<i>Arrived Newfoundland 12-16-18</i>									
<i>Discharged Medically unfit 1-11-18</i>									
Total Service forfeited as above									
Total Service towards Engagement to 1-11-18 (date of discharge) 4 years 17 days									
" " " Pension " " " " " " " "									

C.R. 564

James Hunt was attested for General service
with the NEWFOUNDLAND REGIMENT onSept..16th/14
Regimental No 564 was allotted to Pte. James Hunt.

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th, 1919.

C.R. 564

Extract from Nominal Roll Subacted St. John's per S.S.
Florizel" Oct.4.1914.

564 Hunt James.

CR 564

Extract from Nominal Roll of Co. 1st Bn. Wild. Regt.
Embarked at Davenport for active Service 20-8-15.

564 Pts. J. Hunt.

Disembarked Alexandria, 31-8-15. Proceeded to Abbassia,
Cairo, same date. Embarked Alexandria for Gallipoli.
13-9-15.

C. 564

Extract from Officers N.C.O's and men
of the Newfoundland Regiment who were
employed as Transport to the 1st., 2nd.
and 3rd., Composite Battalions engaged
on the Western Frontier in Egypt.

Dec----Feb.

#564 Pte. J. Hunt.

The above man did not embark for Gallapoli
but were left behind at Alexandria when the
Battalions sailed on Sept. 13th., 1915.
22/4/16.

To be used only for Special Reserve Recruits, and for Special Reservists entering Regular Army.

MEDICAL HISTORY

Surname Hunt OF Christian Name _____

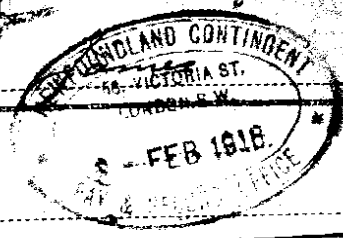


Table 1.—GENERAL TABLE.

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on _____ day of _____ 191		DATE 23 SEP 191	
Declared Age	23 years		days	
Trade or Occupation	Paper Stanger			
Height	feet	inches	feet	inches
Weight	lbs.		lbs.	
Chest Measurement	Girth when fully expanded	inches	inches	inches
	Range of expansion	inches	inches	inches
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V		R.E.—V	
	L.E.—V		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)				
(Rank)				
Enlisted	at St. John's N.F. on _____ day of _____ 191		at _____ day of _____ 191	
Joined on Enlistment	Corps. <u>1st Regt. Reg.</u>	Regtl. No. <u>507</u>	Corps.	Regtl. No.
Transferred to	<u>Royal Newfoundland</u>			
Became non-effective by	on _____ day of _____ 191		on _____ day of _____ 191	
(Signature)				



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.

Date	Brief Details, and Signature
16.4.15	Vae.
17.5.15	[Faint handwritten notes]
23.7.18	<p>Board held Reclassified 1911</p> <p>H. Logan Rym Rmest</p> <p>[Faint handwritten notes]</p>
16.5.18	<p>Boarded Army Prov Corp. rank of E category.</p> <p>(contract 1914-1918)</p> <p>Cap. Rym.</p>

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

564 Pte. JAMES HUNT. ✓

C.R. 3572

EXT. OF CASUALTY LIST RECEIVED AUG. 30th 1917.

"ADMITTED WANDSWORTH."

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 _____

Line Number	Recd	By	Sent	by	Check

Dated

August 30, 1917.

To

Mrs. Elizabeth Hunt,

Bonavista.

Regret to inform you that Record Office
London, officially reports No. 564, Private

James Hunt, has been admitted to Wandsworth.

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

JOHN R. BENNETT
~~XXXXXXXXXXXX~~ R.A. SQUIRES
Colonial Secretary.

FOR TYPEWRITER

No. 11358/720

F.P./79.

NEWFOUNDLAND CONTINGENT

From:
Chief Paymaster & O. i/c Records,
Newfoundland Contingent,
58, Victoria Street,
London, S.W. 1.

To:
Officer Commanding,
2/1st Newfoundland Regt.
Ayr, N. B.

26th, October 191 7

[Signature] 191 7

ANSWER

Subject: 564, Pte. Jas. Hunt.

With reference to the follow-
ing telegram from the Hon. the
Minister of Militia, (6197)
received 25/10/17,-

Receipt hereunder
[Signature]
Officer Comdg. 2nd Bactn.
1st Newfoundland Regiment

"Pay to 564 Hunt £7.

Cheque £7.0.0. is enclosed
for payment to this Soldier.
Kindly obtain his receipt
hereon.

Received the sum of Seven
Pounds on account of
cable remittance from Newfoundland.

[Signature]
Major
Chief Paymaster & O. i/c Records.

[Signature]
No. 564 Rank Pte. Hunt

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 Dept of Militia.

Line Number	Recd	By	Sent by	Check

Dated **March. 22nd, 1918.**

To **Elizabeth Hunt, Bonavista.**

Regret to inform you that Record Office, London, officially reports **No. 564, Private James Hunt at 56th General Hospital Etaples, March 16th G.S.W. left arm severe.**

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

J.R. Bennett

Acting **Minister of Militia.**

FOR TYPEWRITER

No. 6922/13

NEWFOUNDLAND CONTINGENT

N.F.P./48.

Pay & Record Office,
98, Victoria Street,
London. S.W. 1,
To: Officer in Charge,
Red Cross Hospital, 4th May 1918
Esher

With reference to request of (No.) 564 (Rank) Pte
(Name) J. Hunt Cheque No. 8044 for
£ 3:0:0 is enclosed for payment to this Soldier as may
be deemed fit.

Kindly complete Receipt Form on back of cheque before
presenting at a Bank.

Received

£3.00.

J. S. Anderson
Chief Paymaster & Officer i/c Records.

No. 632

WESTERN UNION

ANGLO-AMERICAN DIRECT UNITED STATES CABLEGRAM

Fix <u>19</u> Code <u>2/21</u> WORDS CHARGE		SENT At _____ To _____ By _____	FOR STAMPS THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.
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VIA WESTERN UNION

14/5/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To EFM G M HUNT

33 COOK STREET STJOHNS (Newfoundland)

PLEASE CABLE FIVE POUNDS THROUGH MINISTER MILITIA

FEELING FINE

JAMES HUNT

Handwritten notes:
 19/7/18
 38/11/18
 47/11/18
 3/11/18

CHARGED
 PAY BOOK 1st class
 Date 16/5/18
Handwritten initials: JKH

Authorised.

NOT TO BE TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature _____ Address 58 Victoria St. S.W. 1.

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

CR 5-64

extract from Nominal Roll Draft No. 36, 200 Other Ranks
from 2nd., (Reserve) Battn. Royal Newfoundland Regiment
and proceeded to join the 1st., Battn. Royal Nfld. Regt.,
B. E. F., Embarked Southampton 4/2/18.

#564 Pte. J. Hunt.

BC.

C.R. 564

Extract from Daily Orders part 11, from Unit The
Royal Wfld. Regt. G.H.Q. 3rd Echelon, dated March 31, 1918.

#564 Pte. J. Hunt.

Invalided to England (Wounded) March 31 1918.

Original

Medical Report on an Invalid *Reclassified*

Station 3rd London General Hospital,

Date DSWOETH S. W

- 1. Unit 1st Newfoundland
- 2. Regimental No. 864
- 3. Rank Private
- 4. Name Sermt. James
- 5. Age last birthday 25
- 6. Enlisted { on Aug 9th 1914
at Sr Johns
- 7. Former Trade or Occupation } Patrol Maker
- 7a. If with previous service in Army, state--
(a) Former Unit;
(b) Regimental No.;
(c) Date of Discharge;
(d) Cause of Discharge. } N/A

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

G. S. W. Left arm - Fracture of humerus.
Burns of face.

Statement of Case.

Note.--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. 12th March 1918
- 10. Place of origin of disability. Paschendale.
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. Pt. received 7 or 8 wounds of left arm in regim (Elbow joint - lower end of humerus was fractured. He also got the left side of his face burnt. Admitted here 21-3-18. Has had was some movement as far as arm. There is much limitation in flexion & extension of Elbow joint. Burns on face healed.
- 12. Give your opinion as to the causation of the disability, stating whether in your opinion it is--
 - (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3). G-S-W.
 - (b) constitutional or hereditary, and not aggravated by service during the present war. Active Service.
 - (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

13. 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.

All wounds healed. ^{the} limitation of movements of elbow to flexion 90° (extension 135°).
Left cheek quite healed.

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

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

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?

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. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

Has been wounded twice before. On 26th March 1916 when "right hip" was damaged, & 18th April 1917 when he was wounded in the wrist & above it by a gas shell.
All wounds healed.

20. Do you recommend—
(a) Discharge as permanently unfit, or
(b) Change to England?

Reclassification

D.A. Davis
Officer in medical charge of case.

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

except †
3rd London General Hospital,
Station WANDSWORTH, S.W.

H.E. Dineen
Officer in charge of Hospital T. F. Commanding,
General Hospital,
Wandsworth, S.W. 18.

Date 23/7/18

* 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.

Opinion of the Medical Board.

Notes.—(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 Minister of Pensions should be in possession of the most reliable information to enable him 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, (a) caused or aggravated by service in the present war, (b) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

(iv) In answering question 21 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.

1. (a.) State whether the disability is clearly attributable to—
 - (i.) Service during the present war; *Yes*
 - (ii.) Climate; *No*
 - (iii.) Ordinary military service; *No*
 - (iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or *No*
 - (v.) Whether it is constitutional or hereditary. *No*
- (b.) If due to one of the first three of these causes, to what specific conditions do the Board attribute it? *G. I. A.*
22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which? *No*
23. Is the disability permanent? *some may persist*
24. If not permanent, how soon do the Board recommend re-examination? *see remarks*
25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

Degrees of disablement should be expressed in the following percentages:—
100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil. *20*
26. If an operation was advised and declined, was the refusal unreasonable? *No*
27. Do the Board recommend—
 - (a) Discharge as permanently unfit, or
 - (b) Change to England? *Classification Category B1*
28. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic training) is desirable in a—
 - (a) Sanatorium; *✓*
 - (b) Hospital; *✓*
 - (c) Convalescent home; *✓*
 - (d) Asylum; or *✓*
 - (e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended. *✓*
29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended? *No*
30. Does the man require the constant attendance of another person? *No*

Signatures:—

Station _____

Date 23/7/18

Approved _____

Station _____

Date _____

[Signature] President.
[Signature] Members.

Administrative Medical Officer.

C.R. 564

Extract from Casualties received from P & R Office
London, dated July 25, 1918.

564 Pte. J. Hunt,

Was discharged from the 3rd L.G.H. on 24-7-18 and granted furlough to 2-8-18. Fit for Ill Employment. Classified by Med. Bd. Biii, 25-7-18.

C.F. 564

Extract from C.P. & O i/c Records
Newfoundland Contgt. Aug. 2nd 1918

From 2nd. Bn
To The Chief Paymaster

Pte. 564 J. Hunt.

Pt. J. Hunt who was due to report to you on 31/7/18 is marked Bill and is presumed there is a possibility of his being repatriated as medically unfit

Pte. Hunt was due to report here on the 2/8/18 fro Hospital; he was granted 10 days extention and when he reports on the 12th., arrangements will be made for his furlough or discharge as may be.

Sd. B. J. Barton
Lieut. Col.,
2nd. Bn. Royal Nfld., Rg

C.R. 564

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.,
St. John's Nfld. Regt., Oct. 14, 1918.

The undernoted man returned from Overseas and reported at
Depot from. 12-10-18.

564 Pte. J. ⁴unt.

564

Preliminary Report

Extract from ~~list~~ to O.C. Depot from The Director of Medical Services dated October 19th 1918.

At a Medical Board held on Friday October 18th., the following was a finding:-

564 Pte. J. Hunt

Recommended Discharge - Permanently Unfit. Massage and Electrical Treatment.

C.R. 564

**Extract of list of men of the Royal Newfoundland Regiment,
discharged on various dates.**

564 Pte. J. Hunt

Medically unfit Discharged 1-11-18

LAST PAY CERTIFICATE

N.F.P./94

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 26/5/17.

Regtl No. 554 Rank Pte Name Hunt, J. Unit "A" Coy ROYAL N.F.L. was Repatriated to Newfoundland on / / Authority Cause

DR. STATEMENT OF ACCOUNT

		PARTICULARS					PARTICULARS					CH.		
		£	s	d		£	s	d		£	s	d		
To:	Balance Dr. from "A" Coy	30/8/18			1	0	1	0		1	0			
	Allotment 42 days @ .50		24	30	5	0	8	Pay	49 days @ \$ 1.00		49	00	1 1 10	
	Cash Payments:							Field Allow	49 days @ \$.10		4	90		
	1st Payment 6/9/18					10	0	Other Allow	days @ \$		53	90	1 1 6	
	2nd " 15/9/18					10	0	Other Credits:						
	3rd " 20/9/18					4	6	8						
	Other Debits:													
	8 Days Forcible Pay					1	16	8						
	Total Debits					13	4	8	Total Credits			12	5	4
	Balance due by Paymaster					13	4	8	Balance due to Paymaster			13	4	3

C.S.
22/9/18

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of

Winchester September 20th 191 8

Made up/Checked in accordance with information received in the Pay & Record Office W.D. Huggins (2/Lieut) and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London, 191

Chief Paymaster & Officer i/c Records.

C.R. 564

Extract from Daily Orders part 11, Repot. St. Johns
dated Nov. 21st., 1918.

Having been found medically unfit is discharged
from 1-11-18.

#564 James Hunt.

BO.

This space to be left blank for the Chelsea Number.

[Blank box for Chelsea Number]

Refer Complete



Proceedings on Discharge.

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

No. 564 Army Rank Private

Name Hank James
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps ROYAL NEWFOUNDLAND REGIMENT.

Battalion, Battery, Company, Depôt, &c.
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge November 1st 1918

Place of discharge St. John's, Nfld.

1. Description at the time of discharge.

Age <u>25</u> years _____ months	Descriptive marks. <u>Bullet wound Rt. Breast</u> <u>Broken Rt. Instep & Lt. Leg</u>
Height <u>5</u> feet <u>9 1/2</u> inches	
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.	
Complexion <u>Flesh</u>	
Eyes <u>Brown</u>	
Hair <u>Black</u>	
Trade _____	
Intended place of residence <u>Boonavista</u>	
(To be given as fully as practicable) <u>Newfoundland</u>	

(The measurements and description should be carefully taken 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 residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of being no longer physically fit for war service on account of wounds received in action.

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character :—

4. Character awarded in accordance with King's Regulations :—

Certified that the above is an accurate copy of the character given by me on Army Form B. 2087* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer. _____

Army Form B. 2088 has been issued to*

18
31
~~30~~
1
47

To be filled in on the soldier quitting the Colours.

Declarative 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 Commissioners of Chelsea Hospital. Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.1.

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

A Name in full 1st Newfoundland Hunt James
Regiment from which discharged 1st Newfoundland
Regimental Number 564
Where born (Parish, Town and County), and when Bonavista Nov 4th 1893
Intended address

Bonavista
Height on discharge 5 Feet 9 1/2 Inches
Colour of Hair on discharge Black **Colour of Eyes** Brown
Descriptive marks Bullet wound Rt Wrist **Complexion** Fresh
Figure on discharge Broken Rt Instep & to knee
Christian name of Father Medium
Christian name of Mother William
Wife's Maiden name in full Elizabeth
Date and Place of Marriage —
Christian names of Children —
Nature and locality of civil employment desired

COPIES SENT		
TO	NO	DATE
M of M	1	13 SEP 1918
O.C. 1st Div		
2nd Div		
3rd Div		

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) J Hunt Det

Station 3rd London General Hospital WANDSWORTH, S.W. **(Rank)** Det **Date** 19 July 18
 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.
B. A. Davies Medical Officer i/c Hospital.

Station WANDSWORTH **Date** 17 July 18

B Period of Service and in what Corps ...	Regiment	Years	Days	All Service Abroad with Stations		Years	Days
				India	S. Africa		
Disallowed ...							
Service towards Pension ...							
Date inclusive to which pay has been issued	Sum due on account of advance of Pension }						
Sums due on account of public debts ...							

Rank on Discharge
Character (as on Certificate of discharge)
Where born, and on what date
Date and Place of first Enlistment
Trade on Enlistment
Cause of Discharge
Number of G.C. Badges **Medals**
Wounds, and Actions in which received
Other distinguishing marks

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.
Station _____ **Officer in Charge** _____
Date _____

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. 564 Rank Pte Regiment 1st Newfoundland

Name

(Surname first)

Arant James

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

Have been employed in the paper making industry.

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.

Paper making with the Anglo Newfoundland Development Co. Newfoundland, for 4 two years.

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

COPIES SENT		
To	No	DATE
M. OF M.	152/100	23 SEP 1918
O.C. 1ST. EN.		
.. 2ND. EN.		

4. What is the name of your Approved Society?

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

Date 23

Signature James Hunt

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 or reclassification in a category from which men are being transferred to Class P. or P.(T.) of the Reserve 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. 3 (ii), item 3, of Army Council Instruction No. 1912, 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.

Nov. 27th. 18.

Pte. J. Hunt,
Bonavista.

Dear Sir:

I enclose herewith cheque for \$15.00
being amount due you on account of Pay.

Yours truly,

Capt.
Paymaster

1918 - 1919

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 15⁰⁰

Oct 12th 1918

Received from the First Newfoundland Regiment
the sum of fifteen Dollars.
on account ~~balance~~ of Pay.

Ch. No.	3882	Initials	ker
Pay Ledger	307	Initials	wn
Gen. Ledger		Initials	

Regtl. No. Rank

LM.

June 28, 1920

Ex Pte. James Hunt,
Grand Falls.

Dear Sir:

I notice that you have not yet claimed your War Service Gratuity. In this connection I enclose form of claim which kindly complete in the presence of a Magistrate or a Justice of the Peace and return to this Office, when the amount due you will be forwarded.

Yours truly,

Major

Paymaster.

Enc.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th. 1919.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

Christian name *James* 2. Surname *Hunt*

3. Rank *Private* 4. Regtl. No. *564*

5. Address in full to which future payments of gratuity are to be

forwarded, *James Hunt*

#3. Peligon Road Grand Falls

6. Date of enlistment in the Regiment. *Sept. 16th 1914*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....

Mrs. William Hunt Bonavista

8. Relationship of such dependents *Mother*

9. Address in full of such dependents.....

Mrs. William Hunt Bonavista B.B.

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *Yes*

11. Were you on active service only in Nfld, if so, give dates and particulars of such service.....

"Not Applicable"

12. Give total length of time which you served on active service, whether in Nfld. or Overseas.....

Oversas. 4. yrs. 4. 7. days. 1. 1.

13. Have you had more than one enlistment? If so, give particulars of discharge and re-enlistments, and under what regimental numbers.

.....
..... *"Not Applicable"*

14. Have you already received any payment of Post Discharge pay or War Service Gratitude? If so, state amount you and your dependents have already received and by whom paid.....

*Have Not received Post Discharge pay...
Not War Service Gratitude*.....

15. Have you been issued with a War Service Badge? *J. Wain*.....

16. Have you, during the present war, served in the Imperial Forces? *No.*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.....

..... *"Not Applicable"*

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *"Not Applicable"*

(b) If so, was such reversion in consequence of misconduct or inefficiency? *"Not Applicable"*

19. Are you now serving in the Res? *No.* (a) Date of discharge *Nov. 1st 1915* (b) Reason for discharge *In consequence of being no longer physically fit for War Service on account of wounds received in action*

Wounds Seal right wrist, Broken right malleolus & left arm

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service....

Egypt Western Front. 1915 France 1916 Engage. 1st July 12th April 1916. 14th April 1917 23rd April 1917. 16th August 1917 March 13th 1918

21. (c) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee.....

..... *"Not Applicable"*

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under Oath.

Signature of Applicant:

J. Hunt

Place of Residence:

3 Polypow Road

Declared before me at:

Orange Falls

This

15th

day of

July

19*20*...

H. J. Stephens

Notary Public

Signature of Barrister of the
Supreme Court, Stipendiary Magis-
trate, Notary Public, Justice of the
Peace, or Commissioner of affidavits.

POST DISCHARGE PAY.

Date paid

Paid

Paid

Soldier. Dependent

War Service
Gratuity.

Net amount
due

Date paid	Paid	Paid	War Service Gratuity.	Net amount due
.....
.....
.....

Certified correct.

Paymaster

July 23, 1920.

Mr. J.Hunt,
3 Pollygan Road,
Grand Falls.

Dear Sir:-

With ~~reference to~~ your application for War Service
Gratuity I enclose you five cheques for seventy dollars
(\$70.00) each, and one for twenty four dollars and fifty
cents (\$24.50), representing the amount due you on account
of War Service Gratuity.

Yours faithfully,

Major
Paymaster.

m. D.

RECEIPT.

I hereby certify that I have received the 1914-1915

STAR.

No 564 Name J. Hunt

Witness. H. Bishop

Date 28th March

Place Grand Falls

Bell Island

Janth 70 19 20

9477

To Mr W H Rendell Lieut Colonel
Chief Staff Officer Department of
Militia

Sir

I have not received my separation allowance for about a year and as my son James was my only support I am entitled to gratuity of 30 dollars for six months and I would like to know the reason I am not receiving it I had one son killed and I never received any thing from him for years before for he went to Canada and joined the Canadian Army and I had another married son in the N & F of forestry my son James is now living in Grand Falls and I am staying now for the

8865

1218

7323

6942

27

27

Q. Has A. been paid
at all other? R

winter on Bell Island with a
married son my sons name and
number is James B Hunt no 564
My present address Mrs William Hunt
in care of Mr Weston Hunt Bell
Island C B

Kindly let me know how it is
I am not receiving the money
and oblige

Mrs William Hunt

3. Was 50. paid
again? Yes
How?

