

THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 6327

Name Joseph Jaddore Corps RC

Questions to be put to the Recruit before Enlistment

- 1. What is your name? 1. Joseph Jaddore
- 2. What is your full Address? 2. Con. Five Fortuna
- 3. Are you a British Subject? 3. yes
- 4. What is your age? 4. 24 Years Months
- 5. What is your Trade or Calling? 5. Turner
- 6. Are you Married? 6. no
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. no
- 8. Are you willing to be vaccinated or re-vaccinated? 8. yes
- 9. Are you willing to be enlisted for General Service? 9. yes
- 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? 10. yes Name Corps
- 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? 11. yes

I, Joseph Jaddore do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

SIGNATURE OF RECRUIT.

Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON-ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 15th day of Oct 1915.

Signature of Attesting Officer [Signature]

+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 [blank]

If enlisted by special authority, such will be attached to the original attestation.

Date OCT 16 1915 1915

Place St. John's

[Signature]
The Royal Newfoundland Regiment

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: RC

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

C.R. 6327

Extract from Daily Orders, Part 11, UNIT: The Royal Newfoundland
Regiment, dated October 17th 1918.

Strength Increases.

6327 Pte. Joseph Jeddore.

Attested for General Service with the Royal Newfoundland
Regt, from 15/10/18.

C.N. 6327
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)

St. John's Dept. of Militia.

Signature of Sender _____

Address _____

Line Number	Recd	By	Sent	by	Cheek

Dated

Nov. 9th, 1918.

To

Mr. Noah Jedore,

Comm River, F.B.

Regret to inform you that your son ~~En.~~#6327 Pte. J. Jedore, was admitted to Military Hospital Yesterday Nov. 8th, suffering from Debility.

J.R. Bennett,

Minister of Militia.

FOR TYPEWRITER

C.I.V. 6327
Serial No.

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(NOT TRANSMITTED)

Signature of Sender _____

St. John's Dept. of Militia.
Address _____

Line Number	Recd	By	Sent	by	Check

Dated Nov. 11, 1918.

To Mr. Noah Jedore,
Conn River, F.B.

Beg to inform you that your son #6327 Pts. J. Jedore, is now slightly improved.

J.R. Bennett,
Minister of Militia.

FOR TYPEWRITER

C.R. 6327
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 _____

Address Dept. of Militia.

Line Number	Rcd	By	Sent	by	Check

Dated

Nov. 25th, 1918.

To

Mr. Noah Jeddore,

Conn River, F.B.

Beg to inform you that your son No. 6327 Pte. J. Jeddore, is now convalescent.

J.R. Bennett

Minister of Militia.

FOR TYPEWRITER

C.R. 6327

Extract from Daily Orders page 11, dated Nov. 20th.
regt St. John's.

#6327 Pte. J. Jeddore.

TRANSFERRED FROM MID. HOSPITAL TO ASCACONI 27-11-18.

BC.

C.N. 6327

Extract from Orders part 11, UNIT: The Royal Newfoundland Regt.,
dated Dec. 7th. ~~1918~~ 1918.

HOSPITAL.

6327 Pte. J. Jeddere.

Discharged from Mesaseri 5/18/18.

C.R. 6327

Extract from PRELIMINARY REPORT from the DIRECTOR MEDICAL
SERVICES to O.C. Depot, dated Dec. 7th. 1918.

At a Medical Board held on FRIDAY AFTERNOON December 6th., the
following was a finding:-

6327 Pte. J. Jeddore

Recommended Discharge as permanently Unfit.

C.R. 6327

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/c Records.

6327 Pte. Jas. Jeddore

Discharged 25-12-18

January 21st., 1919

#6527 Pte. Joseph Jeddore,

Con n River,

Fortune Dist.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 624."

Yours faithfully,

Captain,
Paymaster & O. i/c Records

Enc'l 1.

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, nfld.*
 Date *Dec 5/18*

- 1. Unit *Royal Newfoundland*
- 2. Regimental No. *6327*
- 3. Rank *Pte*
- 4. Name *Jedore, Joseph.*
- 5. Age last birthday *24 yr.*
- 6. Enlisted on *Oct. 15, 1918*
- 7. Former trade or occupation *Run hurna*

8. Disability

Plenisy.

9. History

*Admitted M.D.Mp. 8/11/18 discharged to
 Escaron 26/11/18. Discharged from store 5/12/18*

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.
Shortness of breath on
Exertion. No cough. T. Normal.
Breath sounds clear but slight dullness at
Base Rt. lung. Mid-axillary line.

11. Was sanatorium advised and refused? No
operation

12. Do you recommend discharge as yes
permanently unfit?

Signature

Richard Galt
for M.D. Report

Rank or Qualification

Remarks if any by Officer i/c Hospital.

Place

Signature

Date

Rank

COPY

C. R. C. Form B.
25-10-18-5009

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

Joseph Jeddore

Signature of Man.

Reg. No. 6327

(sgnd) G. E. Dicks, Capt.

Signature of the Vocational Officer or his Representative.

Place St John's, Nfld.

Date 20-12-18 191

COPY

The Royal Newfoundland Regiment**PROCEEDINGS ON DISCHARGE**1. No. **6327** Rank **Pte.** Name **Jos. Jeddore**Intended place of residence **Conn. River, Fortune**2. Occupation **Lumberman**Classification of soldier **B** Medical Category **F**

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 **(sgnd) C. D. Duley, Capt.**Date **Dec. 21, 1918** 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** **(sgnd) Joseph Jeddore**
Signature of soldier**Dec. 21, 1918** **" C. B. 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 **St. John's** **(sgnd) Joseph Jeddore**
Signature of soldier**St. John's** **" J. Daymond, Sht**
Signature of witness**STATEMENT OF SERVICE**7. Enlisted for service **15-10-18** No of days on MilitaryDischarged from service **24-12-18 plus 28 days** Service **99****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** **(sgnd) R. H. Tait, Capt.**
Officer Commanding Discharge Depot
The Royal Newfoundland Regiment.Date **24 Dec., 1917****CONFIRMATION OF DISCHARGE**

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

Place

Date Officer i/c Records
The Royal Newfoundland Regiment

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

MEDICAL HISTORY

Surname

Jeddore

OF

Christian Name

Joseph

Table I.—GENERAL TABLE

Birthplace:—Parish

Coar River B. County Newfoundland

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	15 th	Oct		191
at	<i>St. John's</i>			
Declared Age	24	years		days
Trade or Occupation	<i>Lumberman</i>			
Height	5	feet	6 $\frac{1}{2}$	inches
Weight	132	lbs.		lbs.
Chest Measurement	Girth when fully expanded		36	inches
	Range of Expansion		4 $\frac{1}{2}$	inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Number			
When Vaccinated	<i>1/2</i>			
Vision	R.E.—V=	<i>5/6</i>	R.E.—V=	
	L.E.—V=	<i>5/6</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>Lamm Peterson</i>			
(Rank)	Medical Officer		Medical Officer	
Enlisted	at	<i>St. John's</i>	at	
	on	15 th day of <i>Oct</i>	on	day of 191
Joined on Enlistment	Corps	<i>Royal Artillery Regt</i>	Corps	
	Regtl. No.	<i>6327</i>	Regtl. No.	
Transferred to				
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				

9

A Corps

Demobilization Form 1

400A

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 **5 Dec 1918**

Regimental No. **6327**

Name **Jeddore Joseph**

Address **Conroy River**

Present Medical Category **A# E**

Recommended for: (a) ~~Immediate discharge~~
(b) Standing Medical Board **Standing med Bd.**

Proceeding of MS in file

Members of Board

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

J. Peterson
Senior Medical Officer

Geo. Burden
M. O. Depot

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 *Jeddore, Joseph*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *6327*
 Intended address *Conn River*
 Height on discharge *5* Feet *7"*
 Color of hair on discharge *Black*
 Complexion *Pallow*
 Color of eyes *Brown*
 Descriptive Marks
 Figure on discharge *Medium*
 Christian name of Father *Noel*
 Christian name of Mother *Sinah*
 Wife's maiden name in full
 Date and place of marriage
 Christian names of children
 Place and date of soldier's birth. *Conn River, Aug. 17, 1894*
 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) *Joseph Jeddore*

(Rank) *1st Lt*

Station *St Johns*

Date *Dec 3 '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.

Archibald
 Medical Officer i/c Hospital.
 Unit, or Command Depot.

Station *St. John's nfld*

Date *Dec 5 '18*

The Royal Newfoundland Regiment

140 210

DEMOBILIZATION OF

Reg. No. *6327* Rank *Pte* Name *Jeddore Joseph*
 Date of Enlistment *15-10-18* Address *Lamb. River* District *St. George*
 Occupation *Lumberman* Classification for Discharge *B* Medical Category *E*
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P/36.....	B 268.....	B 121.....	1	N.F. Med.....	D.F. 1.....	1
B 178.....	W 3494.....	B 122.....		Board 1st.....	" 2.....	
B 178a.....	D 400A.....	B 1915.....	2	do 2nd.....	" 3.....	3
B 179.....	D 400B.....	Form L.....		do 3rd.....	" 4.....	
B 179a.....	D 400C.....	Form K.....	1	do 4th.....	" 5.....	
B 179b.....	B 103.....	ME 2.....		<i>12th Bd.</i>	" 6.....	
B 179c.....	B 120.....	M 93.....	1			

Date *9-12-18*.....

M. S. Miley 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. Miley*.....

Date *20-12-18*.....

O i/c. Re-clothing.

January 8th., 1938.

THIS IS TO CERTIFY that Joseph Jeddore,
Regimental No. 6327 served with the Royal
Newfoundland Regiment. Date of enlistment,
October 15th., 1918; date of discharge
January 21st., 1919.

J. A. McGrath,
Clerk, War Pensions.

JAM/SM