

FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3118 Name Reuben Oliver Perry Corps Co B

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Reuben Oliver Perry
2. What is your full Address? 2. River of Ponds
Port Saunders
3. Are you a British Subject? 3. yes
4. What is your age? 4. 19 years 2 Months
5. What is your Trade or Calling? 5. fisherman
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. { 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, Reuben Oliver Perry 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.

Reuben Oliver Perry SIGNATURE OF RECRUIT.
S. M. Fraser Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Reuben Oliver Perry 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 signed the declaration and taken the oath before me at.....
on this 15 day of September 1916
Signature of Attesting Officer S. M. Fraser

† 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.....
Place..... } 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.

* 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, viz:—(Name).....re-enlisted in the (Regiment).....on the (Date).....

DESCRIPTIVE REPORT ON ENLISTMENT

Applicable to all ranks. To be filled out with entries on the Medical History Sheet.

Name Heber Oliver Perry

Apparent age 19 years 2 months. Height 5 feet 9 inches

Chest Measurement { Girth when fully expanded 38 inches
Range of expansion 4 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mr. Tom Perry
Truce of Woods | Relationship brother

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	Rgt. or Depot	Promotion, 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>15-9-16</u>										
Joined at <u>St John</u> on <u>September 15-16</u>										
<u>Cum gratia</u>	<u>St John's S. B. Hospital to Windsor</u>			<u>31 '17</u>					<u>Cum gratia 1918-11-6</u>	
<u>Disembarked</u>	<u>Queen's Barracks, Sandhurst</u>			<u>2-7-17</u>					<u>Admitted</u>	
<u>Wounded</u>	<u>Shell. Wounded</u>	<u>lost 9-10-17</u>		<u>2-11-17</u>					<u>Admitted</u>	
<u>Wounded</u>	<u>20-11-17</u>	<u>Admitted 21 Oct. 1917</u>		<u>22-11-17</u>					<u>Admitted 3 hrs. New Hosp. Abbeville 25 '17</u>	
<u>Discharged</u>	<u>21-12-17</u>									
Died 3 rd Nov. 1917. New Hosp. Abbeville										<u>Admitted</u>
Rephrased, Bunched, Amputation, Splints, & Operation										
Total Service forfeited as above.....					<u>24</u>	<u>12</u>				
Total Service towards Engagement to <u>24-12-17</u> (date of discharge) <u>1</u> years <u>101</u> days										
Pension										

C.R. 3118

Rubens O. Perry was attested for General Service
with the NEWFOUNDLAND REGIMENT ON September 15th 1916
Regimental No. 3118 was allotted to Pte. R.O. Perry

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th 1919.

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

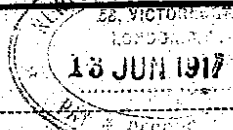
MEDICAL HISTORY

Surname Perry

OR

Christian Name Arthur Oliver

Table 1.—GENERAL TABLE.



Birthplace:—Parish

County

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on 15 day of Sept 1916 at St John's St		day of 191	
Declared Age	19 years 7 months		years	days
Trade or Occupation	fisherman			
Height	5 feet 9 inches		feet	inches
Weight	129 1/2 lbs.			lbs.
Chest Measurement	Girth when fully expanded... 38 inches			inches
	Range of expansion... 4.			inches
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated	No 9/16/16			
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)	A. M. Paterson			
(Rank)	Major			
	Medical Officer.			Medical Officer.
Enlisted	at St John's St on 15 day of Sept 1916		at day of 191	
Joined on Enlistment	Corps.		Corps.	
	Regtl. No.	3118	Regtl. No.	
Transferred to				
Became non-effective by				
(Signature)	on day of 191		on day of 191	
(Rank)				

Table II.—Only for admission to hospital or to the si

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bear syphilis, admi of t
	Day	Month	Year	Day	Month	Year			
Whitney Hosp. St. Johns.	22	11	16	22	12	16	Measles	31	
Whitney Hosp Windsor N.S.	17	3	17	31	3	17	Mumps	15	

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.; Examinations for Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.

Date	Brief Details, and Signature
Jan 5/17. 10-15-17 18-1-17 27-1-17	Vaccination SP } T.A.B. SP 3 SP

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
Lt. Morizel Windsor P. D. Alameda	Jan 31 16. 4. 17	Feb 3/17 16. 4. 17			

This Form is to be used in connection with Pamph. M. E. (1)
N. F. 1915

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of

Ruben Perry

aged

19 years 2 months

conducted at

ALB

Date:

September 15/16

Recruiting Officer:

NO OF TEST

FINDING

1

NA

2

NA

3

NA

4

NA

5

NO

6

NA

7

yes

8

yes

9

low - NO

10

n

11

n

12

n

13

n

14

n

15

n

16

n

17

n

18

n

19

1/2 Both

20

n

21

n

22

n

23

n

24

n

25

n

26

n

27

n

28

n

29

n

30

n

31

n

32

n

33

NO

34

5'9"

35

120 lbs

36

34 / 38'

37

1700 per year

38

parents. Mr John Perry. River of Roads

39

none

Signature of Medical Examiner:

J. W. Burdick

CR. 3198

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt., St. John's, Nov. 9th, 1916.

3118 Pte. R.O. Parry.

Having been admitted to Hospital suffering from Measles
becomes liable to Hospital stoppage (Maintenance Allowance)
of 50¢ per day and Field Allowance until discharged as
recovered

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 be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender John Perry Address _____

Line Number	Rcd	By	Sent	by	Check
-------------	-----	----	------	----	-------

Dated October 18, 1917.
To Mr. John Perry,
River of Ponds,
St. Barbe.

Regret to inform you that Record Office London, officially reports No. 3118, Private Reuben O. Perry, was at Twentyfourth General Hospital, Etaples, October tenth, suffering from mild gunshot wound in the chest. Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

JOHN R. BENNETT, R.A. SQUIRES
Colonial Secretary.

FOR TYPEWRITER

C.R. 3118

Extract from War Office List No. C. 1400
dated 4/12/17.

#3118 PTE. R. BERRY

WOULDED

20/11/17

BC.

Country No. _____

NEWFOUNDLAND POSTAL TELEGRAPHS.

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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 John M. Strickland Address _____

Line Number	Rcd	By	Sent	by	Check

Dated December 3, 1917.

To Mr. John Perry,
River of Ponds,
St. Barbe.

Regret to inform you that Record Office, London, officially reports No. 3118, Private Reuben O. Perry was at Third Australian General Hospital, Abbeville, November twentyfifth suffering from severe gunshot wounds in the head and leg. Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

R. A. SQUIRES,
Colonial Secretary.

FOR TYPEWRITER

C.R. 3118

Extract of Casualties received from Pay & Record Office,
London, dated December 14/1917.

#3118 Pte. R. Perry. ✓

Dangerously ill, Gunshot wound Head, Left leg. amputation
O.C. 3rd Australian General Hospital, Abbeville, reports
17/12/17.

NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

MA 157
Name No. _____ Sent by _____ Rec'd by _____ Check _____
Place from _____
To _____
Via Port Saunders

DEC 17 1917

R A Squires
Col Secty
please advise quick
as possible if
any further news
of no 3118 pte
Reuben Perry
John Perry

C.R. 3118

#3118 Pte. Reuben O. Perry.

Extract of Casualty list received December 21, 1917.
Previously reported Gunshot wounds head and leg
severe, November 25th. Now reported Gunshot wound
head, amputation right leg - dangerously ill.
At 3rd Australian General Hospital, Abbeville,
December 17th.

C.R. 3118

Extract of Casualty list received Dec 26, 1917.

42118 Pte. Reuben C. Perry.

Died 3rd Australian General Hospital, Abbeville, December
24th, Gunshot Wounds Head, Leg, Nephritis.

Counter No. _____

NEWFOUNDLAND POSTAL TELEGRAPHS.

Cable Connection with all the World

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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 _____

Line Number	Rcd	By	Sent	by	Check
-------------	-----	----	------	----	-------

December 26, 1917.

Dated

To

Mr. John Perry,

River of Ponds,

St. Barbe.

Regret to inform you Record Office, London, today reports No. 3118, Private Reuben O. Perry, died at Third Australian General Hospital, Abbeville, December twentyfourth, as a result of gunshot wounds in head and leg and nephritis.

R.A. SQUIRES

Colonial Secretary.

NOTE FOR OPERATOR

This message is not to be sent until receiving office notifies that message to Rev. T. Greavett, Bonne Bay, has been delivered and acted upon.

FOR TYPEWRITER

C.F. 3118

Extract of Casualties received from Pay & Record Office
London, dated January 8, 1918.

The following casualties in the 1st Hfld. Regt. with the
British Expeditionary Force, is reported under various date:

#3118 Pte. R. Perry. ✓

Previously reported wounded now reported died of wounds.

May 14, 1918.

Dear Mr. Perry:-

I am writing to inform you that it is my regrettable duty to forward to you, one package of effects, which belonged to your son, the late #3118 Pte. A.B. Perry of The Royal Newfoundland Regiment.

I am enclosing herewith, receipt. Will you kindly sign same and return at your earliest convenience.

Assuring you of my deepest sympathy in your bereavement, and in the added sorrow which the receipt of these effects must entail.

I am,

Yours sincerely,

Captain.

Mr. John Perry,

River of Ponds,
Port Saunders.

of Paper *1/2*

PERSONAL EFFECTS.

Name *Perry* *AB* No. *3118*
 Rank *Pvt* Regiment *1st Regt*

Article	Where stored	Notified by
1 Cotton bag Containing:-	Final disposal	
2 Dices		
1 Mess		
1 Photo		
1 Dagger		
2 Religious Books		
1 Paper in Case		
2 Pocket Knives		
1 Comb		
1 Mountaineer		
1 Tooth Brush		
1 Shaving . . .		
1 Card		

Remarks :- *Cas Report, A.S.A. at [unclear] 20/12/17*

Next of Kin: John Perry
Rev. J. P. [unclear]
1st [unclear]

NON-EFFECTIVE ACCOUNT.

Regiment or corps **ROYAL NEWFOUNDLAND REGIMENT**
 No. **2118** Rank **Private** Name **Perry, R. O.**
 Died (a) **Deceased** at **France** on the **24** of **Dec.** 191**7**.
 Deserted at _____ on the _____ of _____ 191**7**.

I Certify to the correctness of above in every particular.

 { *Commanding Squadron, Troop,
 Battery or Company.*

STATEMENT OF ACCOUNT.

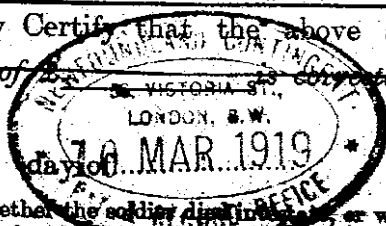
[Form 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month	24	12	14
	Cash issues (Date of each issue to be stated)				Pay days at _____ from _____ to _____	18	7	3
	£ s. d.				Proficiency, Service or good conduct pay days at _____ from _____ to _____			
	191				Messing allowance _____ days at _____			
	"				from _____ to _____			
	"				Kit allowance			
	"				Amount produced by the sale of Effects from Form 2			
	Consolidated stoppage				Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
					Deferred Pay or Gratuity			
	Balance due by the Paymaster	18	7	3	Balance due to the Paymaster			
		£18	7	3		£18	7	3

RECEIVED
 21
 MAR 1919

I hereby Certify that the above account is correct in every particular, ~~and that the~~ **NEWFOUNDLAND CONTINGENT,**
~~debtor balance of _____ is correctly chargeable against the Public.~~

Dated at _____
 this _____ day of _____ 191**9**



191

CHIEF PAYMASTER & OFFICER IN CHARGE RECORDS.
Paymaster.

- (a) Here state whether the soldier died in the service, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B. 2090 or Army Form O. 1815.
- (b) Words in Italics to be struck out when there is no debtor balance.

July 3, 1919

John Perry,
River of Ponds,
St. Barbe.

Dear Sir:

I enclose herewith cheque for
\$93.50, being balance of estate of late Pte.
R.O. Perry, due you as Administrator of his
estate.

I am also enclosing Letters
of Administration.

Yours truly,


Paymaster & O /c Records.

Capt.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 93 ⁵⁰/_x

June 30 1919

Received from the First Newfoundland Regiment
the sum of Ninety Three ⁵⁰/_x Dollars.
~~on account~~
balance of Pay. Estate

Ch. No.	25730	Initials	EW
Pay Ledger	78	Initials	EW
Gen. Ledger		Initials	

Regtl. No. _____ Rank _____

[Handwritten signature]

Nov 22 1919

The Paymaster & Officer i/c Records
St. John's Mfld.

Sir:-

No. 3118
Rank Pte.
Name J. Perry

I have the honour by direction, to advise you that the claim for pension on account of the Marginally noted has been considered by the Board, and it has been ordered that if there is an allotment, Separation allowance, or Patriotic Fund allowance, being paid on his account, that it should be cancelled from Nov 1st 1919

Kindly govern yourself accordingly, and advise me of the amount paid by your Det., on this account.

I have the honour to be,

Sir,

Your obedient servant,

[Signature]
Asst. Secretary.

B.F.C. Form 11.

Discontinued

31/10/19

John Perry

Port Saunders

St Barbs

9917

Fort Saunders
Jan 26 1970

Dear Sir

I wrote you regarding Gratuity money which I think is due to my son. You was unable to give me information as I did not give his regimental no. and name. His regimental No. is 3118.

NAME Ruben Chives Perry

Please supply me with information and oblige

Yours truly
John Perry

For mar dues in France 24/2/17

1049

Post
saunders

March 20th 1920

To Capt of Militia
Dear Sir

the name of my son
is Reuben Oliver Perry
PO 3118 I have not
Received any Gratuity money
and you know that it is due
to me so please send it to
me as quick as possible as I
am in need of it

Yours truly John Perry

Gratuity is not payable to depend-
of deceased men of

Compensed Post

93⁵⁰/₁₀₀ Balance of estate paid to Wherry
June 30th 1920 - N.H.

11956
To His Majesty Government
Department of Militia
St. Johns
N. F. L. D.

April 21st 1921 Port. Saunders
N. F. L. D.

Dear Sir

I am writing in to see if I
am entitled, to War Service money,
for my poor boy who was killed in
the war, please write and let me
know if I am, or not.

I am Sir

Your Obedient Servant
Mr. John Perry

Please answer

of

His address was
No 3118 Ste. Rubben. O. Perry
N. F. L. D. Regt.

No gratuity of deceased men
apply to Hd of Gen. Comms.

May 17th. 1921

George T. Carty Esq.,

City

Dear Sir:-

re #3118 Reuben Perry (Deceased)

With reference to your enquiry re the above mentioned soldier, I beg to advise as follows:-

He died on December 24th. 1917.

His allotment - 50¢ per day, payable to his father, - was continued until October 31st. 1919, the sum of \$338.00 being paid after his death, in monthly payments.

The balance of his estate - \$93.50 - was paid to his father, in June 1919.

The same remarks re gratuity as in the case of Ambrose Ellis, concerning whom I have to-day written you, apply in this case.

Yours truly,

Major,
Paymaster

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

The Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

NO STAMP REQUIRED

Dept. of Militia,

St. John's.

Sept 15 1921

I beg to acknowledge receipt of
Memorial Plaque issued in respect of services of
the late No. 3118 Rank Sgt

Name Reuben O. Perry
Royal Newfoundland Regt

John Perry (Sgd.)
Father Relationship.

Address Port Saunders

RECEIVED
SEP 22 1921
MILITIA DEPT.

Army Form B. 103.

Regimental Number **C.R. 3118**

Casualty Form - Active Service.

Regiment or Corps **1st Newfoundland**
 Rank **Pte** Surname **Berry** Christian Name **Ruben Oliver**
 Religion **C of E** Age on Enlistment years months
 Enlisted (a) **15-9-16** Terms of Service (a) **Duration** Service reckons from (a) **15-9-16**
 Date of promotion to present rank Date of appointment to lance rank
 Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and Rate
 Occupation **fisherman** Signature of Officer **A. Frost**

Report		Record of promotions, reductions, transfers, casualties, etc. during active service, as reported on Army Form B.213, Army Form A.36, or other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
			Embarked Hampton	11/4/17	
			Disembarked... Rowen	12/6/17	
			Joined Battalion	2 JUL 1917	B.213
	de Mont	Wounded in Action	9 OCT 1917	B.213	2 OCT 1917
9-10-17	64 CCL	Ad. Shoulder Chest		9-10-17	B.213
5-11-17	29 G.P.D	James Base Depot	Rowen	11/11/17	Rowen Hill
10/11/17	de Mont	Rejoined Battalion		10/11/17	B.213
28 NOV 1917	O.C	WOUNDED IN ACTION		20 NOV 1917	A.F.B. 213.
23/11/17	21 CCL	Ad. Groin leg of	897A	23/11/17	B.213
	3rd Gen	do	Arheville	26/11/17	A. 16798
Undated.	Brd. Aus. Gen. HP.	Died of Wounds	France	24/12/17	casualty rep. N/089414/3 dated 29/12/17.

(a) In the case of a man who has re-engaged for, or enlisted in, another unit, the name of the unit to which he is transferred or re-engaged for, or the name of the unit in which he is enlisted, shall be entered.
 (b) Signaller, Shooting-Smith, & Co. 117, Mark Lane, London E.C.3. Printed by the War Office, London. P.T.O.

Receipt for Army Book 64

No. 3118 Name. R. Perry

To Certify that I have received the AB 64 of the above named soldier.

Date Aug 2 / 1920

Name. John Perry

Place. River, Ponds, St. Barbes, District

E.B. For completion and return to the Department of Military insert in corner of envelope "AB 64"

[Handwritten mark]

C.R. 3118

Fort Saunders
March 9/20

Dear Sir

This is to Certify that I have
received a memorial scroll
and with accompanying message
from the King.

I am your Obedient
John Terry