

THE ROYAL NEWFOUNDLAND REGIMENT

™ Que	estions to be put to th	ne Recruit before Enlishment.
1. What is your name?		· Commo or co
2. What is your full Address	ess?}	Hanks Hy
3. Are you a British Subje	ect?	3
4. What is your age?		4
5. What is your Trade or		5. July
6. Are you Married?		6
Have you ever served in jesty's Forces, naval or	any Branch of His Ma military, if so,* which?	} ,
8. Are you willing to be cinated?	vaccinated or re-vac-	8
9. Are you willing to be enli	sted for General Service?	· 9
0. Did you receive a Notice, its meaning, and who gav	and do you understand) e it to you?	Name
Are you willing to serve usigned by you if you are according to serve using the serve users.	ipon the conditions as eml	bedied in the roll of service to be
. Orthe	ATH TO BE TAKEN BY I	Signature of Witness. RECRUIT ON ATTESTATION.
ear true allegiance to His Maj bund, honestly and faithfully do nemies, according to the conditi		do make oath, that I will be faithful an h, His Heirs and Successors, and that I will, as in dut rs and Successors, in Person, Crown and Dignity against a
	was cautioned by me that	ATE OR ATTESTING OFFICER. If he made any false answer to any of the above question
	then read to the Recruit	
		and that his answer to each question has been daily entere
	uit has made and signed th	te declaration and taken the oath before me at
	Signature of Attesting	Officer LASTONKO LIEST
		APPROVING OFFICER.
I certify that this Attests	ion of the above-named R	secruit is correct, and properly filled up, and that the redingly approve, and appoint him to the f
		to the original attestation.
MALAZ	1918)
ate	La la respecta de la compansión de la comp	(Annuada - Ast.
Place A Solo Signature of	the Appropriate Office to	Approving Office to be affixed in the presence of the Recruit.

[Appli	DESCRIPTIVE RI		N ENLISTN		2348
Name arthur	Tree				
Apparent age 2 Y	years mor	iths.	Height	5 fee	et 2/2 inches
Chest Measurement	rth when fully expansion	经验证证证 证	inches	alizea i e i	
Distinctive marks	10.453 (50.55)		563		<u></u>
		70122 103	The 9th Action	50.4%	
1	NFORMATION	SUPPLIED	, BY REC	RUIT	
Name and Address of ne	xt of kin,	neve		100	2
riano	/13/	Relation		LOUN	ν_{c}
(a) Christian and Surn	ame of Woman to whom man (c) Present address.	lars as to Ma		(b) Place and d	ate of marriage.
(a)	(b) Present address.	(d) Initials of Offi	cer verifying entry. (c)		(d)
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	A STATE OF THE STA				
		ilars as to Ch	ildren		- Re 2
Christian Name				Date and Place	of Birth
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appropriate Control of the State of the Stat	STATEMENT	OF THE	SERVICE	S.	1.1v - 100
Corps in which served Rgt. or Depot Promotic	on, Reductions, alties, &c.	k Dates		Service in Re- reve not allow- i to reckon to- ards G. C. Pay	Agnature of Officers certi- fying correctness of entries
Service towards lighted engagem	ent reckons from 23-	23-10.5		An Ada	resident
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bolisch	arjed	Ju	ay 8	119	19
0 1 20	10 000	/ / 60	()		
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Joines 10 Mm	5-1-19 Ira	referen for	n for	22	12.5-19
armes to ent	melant 11-	6-1919	mang a		1951
	Demo	lilial	w J	1160	ns 3/191
Total Service forfeited a	s above	0	30-14 × 1		
Total Service towards Hugagement to	3-7-1919	[date of dische	rge]	#2 days	

(

Place	Date of offence	Rank	Cases of Drunken- ness		Offence	Na	mes of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
Romen	5/1/19/19	DK.		deficient of the	yord, table haufs, were the	2	Sms Watson	pury for same	1/1/19	May Bernard	y h
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Artract from Daily Orders part II, Unit the R. Mfld.R. dated 5-7-19.

The discharges of the undernoted on demobilization has been COMFIRMED by Officer i/c Records on 3-7-19.

#5348 Pte. A. Greene.



Extract from Monday, Roll from 1st. Rantalion Royal NewfoundLand Royalmont anted 30-4-19.

The undermentioned of the let. Battalion left Rouse Camps 32/4/19, echarked at Havre 22/4/19; disembarked at Southampton 23/4/19 and reached Hazeley Down Camp 23/4/19.

#5348 Pte. A. Green.

Extract from Pailly Orders Part 11 Depot. St. John's, Date 776-19.

5348 Pte. A. Greene.

Reported at Headquarters 1-6-19. mx "Corsican" which sailed Liverpool May 22/1919.

Extract arth Filip briens Ford 11 Depot. St. Johnts.

CR 5348

Extract from Daily Orders Part 11 Unit the Reyal Mild. Regt. Depot St. John's, June 9th, 1919

The discharge of the undermoted on demobilization has been discharge here APPROVED O.C. Discharge Depot with effect from 19-6-19.

5348 Pte. A.Greens.

C.R. 5348

Extract from Nominal Roll of Draft No. 56, from the 2nd., Battalian of the Regiment, Windhester to the 1st., Battalian of the Regiment, B. E. F. Embarked Southempton 25/11/18.

#5348 1te. A. Green/

Extract frombally Orders part 11.fro: Unit The Royal Bild. Abgt. St. John's acted July 25.1918.

The follow ag man enhanked for eversous on H.H.S. "Columbella" July 28,1918.

#5348 Pte .Arthur Green.

Extract from Daily Orders part 11, from Unit of the Royal Mfld Regt.St.John's dated May 25.1918.

#5348 Pte. Arthur Green.

Attested for General Service with the Royal Mfld Regt. from 25.5.18

1 Hrvnv C.R. 5348 Note.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvia.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has safered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (I) when the control of the cases of soldiers not discharged or transferred to the Reserve as above the are qualified by length of service to consideration of a control of the control of the case of soldiers. S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

A 10 THE AMERICAN PROPERTY AND THE CORP. A PROPERTY AND A 12 OF THE AMERICAN	
1. Unit and Corps. Royal newfoundland.	7. Former Trade or Occupation } His herman
2. Regtl. No. 5.3.48 3. Rank. Dtc.	7a. If the soldier claims previous service in Army, he should state—
4. Name (Christian Names) 5. Age last birthday	(a) Former Regts. or Corps ; • with Regtl. Nos.
5. Age last birthday	, to the state of
6. Posted for duty on 3. 4. 3/18 at 50 John's in category (or grade)	

- 8. If the disability is an injury was it caused
 - (a) in action
- (b) on field service
- (c) on duty
- (d) off duty?

- (b) Date of Discharge;
- (c) Cause of Discharge.
- If a Court of Inquiry was held on an injury state:—
 - (a) When
 - (b) Where
 - (c) Opinion of Court

(d) Particulars of Pension or Gratuity (if any)

Nors.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here.

(Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability.

hie

12. Place of origin of disability.

13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

M

4:11		construction of the second second		
	14.	State whether the disabilities are	(a) attributable to	(b) aggravated by
		(i.) Service during the present war	f	
		(ii.) Previous active service	\	medical Commission of the Comm
		(iii.) Climate in pre-war service	.)	COLLAR DATE
1		(iv.) Ordinary military service before the war		
	10	(v.) Serious negligence or misconduct on the man's part.)	roisust!
	14	(a). If not due to any of these causes, to what specific condition do you attribute it?	A.	Sign Made Delta .
In all cases such	15.	What is his present condition?		- Annota Ave.
ies, eye, ear, nose and throat, disabilities, &c., a specialist's re- port is to be attached with		(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)	Accorpe	in for
where possible; and in cases of				z internel a stant i in i i j
where possible; and in cases of amputation the exact position chould be stated.				
				rational to a
				n
		transport a cost W		
	16.	Was an operation performed? If so, when and what was its nature?	ha.	
	17.	If not, was an operation advised and declined?	H .	
	18.	*In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?	La.	1
	19.	Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, State whether or not they are attributable to con have been aggravated by service during the present war, and if so, to what or by what specific military conditions?	fu.	
				diva)
		BESKATHAR BEKKTOLOGIC -	I tro	
	20	Do you recommend—	Repor	·
	20.	(a) Discharge as permanently unfit?	' /	Ch 1 mine
			. 1	W William
		 (b) Change to United Kingdom? Note—(b) is only applicable to soldiers invalided at Foreign Stations. 	Ester	MY Bam
	Sta	ation Hazeley Down.	Medical Officer in	charge of case.
	Da			
	it is	 Loss of teeth on or immediately after active service, shows due to some other cause. 	uld be attributed thereto, un	nless there is evidence that

with the major some one

Nº 4748



1ST. NEWFOUNDLAND REGIMENT

concerne	Ulotment begins	gu	ly 1 st	e Identity	Certifica	tes by the F	'erson	Pe	rsons
Identity Certificate No.	Whether Wife, Child, other Relative or Friend	•	NAME (in full)	1		Address	ام	AMO each p	
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						Total Allotn	ient, §	<i>i</i> .	60
	This form must be signed by the Office required payments	er Comma	nding Company	ommanding and handed	Company,	signed by the ymaster as aut	Volunte hority to	er, cou	inter- e the

Nº 4748



1ST. NEWFOUNDLAND REGIMENT

	lotment begins	guly	1.05	V				and .
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						Total Allotmen	t, §	1
TE THE	s form must be a		. 06 0			signed by the Vo		60

2/Bn Royal Nfld. Regt. Winchester.

13th November 5348, Pte. A. Green,

9656

Pay to 5348 Green £4:2:0

4:2:0

From:

NEWFOUND AND CONTINGENT

To:

Chief Paymaster & O. ile Records
Newfoundland Contingent,
Pay & Record Office,
58. Victoria Sarae.

Officer Commanding, 2/Bn Royal Nfld. Regt.

Winchester.

13th November 19

London.

13th November 1191 0

Subject: 5348, Pte. A. Green,

With reference to the following telegram (9656) from the hon. Minister of Militia, received

Pay to 5348 Green £4:2:0

Draft 2 4:2:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon. N.F.P. /79.

Receipt hereupfer.

LIEUT. COLONEL.

COMMANDING 2nd Bn. ROYAL NEWFOUNDLAND REGT, Officer Commdg. 2nd Batt'n Royal Newfoundland Regiment

Received the sum of Low founds two shillings on account of

cable remittance from Newfoundland.

arthur Ereen

Mo. 5348 Rank Do. Witness: - OA. L. Carter, Gte.

Chief Paymaster & O. 1/c Records.

Green, A

5348

Pay roepl.

July 3, 1919

#5348 Pte.arthur Greene,

Hants Harbor, T.B.

Dear Sir:-

Referring to your application I enclose chaque for Seventy dollars (\$70.00), being amount of first payment due you on account of the har Service Cratuity.

Yours truly

Paymaster & Officer i/c Records.

1550/

DEPARTMENT OF MILLITIA. WAR SERVICE GRATUTTY.

St. John's, Newfoundland.

Decimation 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 mostion in this Declaration There must be no blocks and no debbes. If any questions are not appliable, the words "NOT APPLICABLE" must be written out.

On complete reply must be given to every mestion are not appliable, the words "NOT APPLICABLE" must be written out.

RECORDS, PAY & RECORD OFFICE, ST. JOHN 3.
Chalables none. Arthur 2.50 mane. Greene
8. Renk Ate
5. Address in full to which future payon to of gratuity are to be
forwarded Manta Hi. IB
- M. G 20.7
6. Days of enlistment in the Regiment. M. Mary 1918
7. Name of dependent, if any, to when Separation Allowance is being
issued, or was boing issued, irmediately prior to your discharge
not applicable
8. Relationship of such dependents. 56.
9. Address in full of such dependents
10. Is said dependent, now, or was said dependent at my time in receipt
of Separation Allowance on account of another soldier?
11. Were you on active service only in Nfld, If so, give dates and
particulars of such service. Onerseas.
••••••
12. Give total length of time which you served on active service,
whether is liftdor Oversess Thelse months and
Jounty Soo dough

13. Have you had more than one enlistment? If so, give partitudes
of discharge and re-onlistments, and under what regimental numbers.
of discherge and re-chirt hot applicable

14. Have you already received any payment of Post Discharge pay or
14. Have you already received the Feb. War Service Gratuity? If so, state amount you and your dependents
and hy whom palu
1 40 ld, contract
15. Have you been issued with a War Service Bedge?
15. Have you been issued with a war served in the Imperial Borces.
a Doet Discharge Pay 110m
t received or to which you ex-
inofficiency?
the Realister
VI m I IVII The REASON 10 TO
of discharge flowing Semobilization
20. Did you at any time serve at the front in an actual theatre of
morticulars of places, and
Vanua (91.8.
the treatment from the wivin No-120 to
in receipt of full pay
And I she this solem decleration, conscientiously believing it to be true and knowing that it is of the same force and effect as if be true and knowing that it is of the same force and effect as if
be true, and knowing that it is of the

Signature of Berrister of the Supreme Court, Stipendiamy Legistra's ; Notary Public, Missice of the Pecce, or Commissioner of affidevits.

		DISCHARGE Paid Soldior.		War Sorvice Gratuaty.	Net amount due	
<u> </u>	• • • •					
• • • • •	• • • • •	• • • • • • • •				
• • • •	• • • • • • • • • • • • • • • • • • • •	crtificd	correct.		Paymester	

June 11, 1919

Mrs. Pheebe Green, Hant's Hr.

Dear Madam:

I beg to acknowledge receipt of your letter of May 7th, enclosing cheque for \$20.63, and as requested I have cabled £4.2.2 to No.5348, Pté.A. Green.

Yours truly,

Lieut. For Paymaster.

Jul. 3,1919

#5348 Pte Arthur Green.
Hents Harbor, T. B.

"ear Sim:
Please find enclosed Discharge

Certificate Bo.2328.

Yours truly

Captain aymaster = 0.1/c Records.

The Koval Mild. Kegiment DEMOBILIZATION

No. 5346 Rank

Name Tree M

Warned for demobilization on

med for demodulization of

JUN 5 1313

2. Occupation

The Royal Newfoundland Regiment PROCEEDINGS ON DISCHARGE I. No. 5 34 & Rank Intended place of residence... . Medical Category . Classification of soldier ... Eligible for War Service Gratuity His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations. Place ..BT. JOHN'S. Comanding Discharge Depot Date ... JUN.5... 1919..... 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 . JOHN'S JUN 5 1919 ignature of witnes

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

an occupation immediately on discharge.
Signature of soldier Signature of witness
Signature of witness
The second secon

STATEMENT OF SERVICE

Discharged from service. 19-6-19 The 14 day	Service . 4. 0. 6
Enlisted for service	

APPROVAL OF DISCHARGE

8.	The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer ic Records
	The Royal Newfoundland Regiment, twenty-eight days from date.
	Q 40 47.1r

Place gr. JOHN.S.... Officer Commanding Discharge Depot The Royal Newfoundland Regiment.

JUN 19 1919

CONFIRMATION OF DISCHARGE

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

The Royal Newfoundland Regiment

COB 2079/2328

The Royal Newfoundland Regiment

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

Discharge Depot: Headquarters The Royal Newfour	ndland Regiment
	Date
Regimental No 5.34.8.	
Name Green arthur	∿ :
Address Hants Hr.	
·	
Present Medical Category/+ 7	
Recommended for:—	(a) Immediate discharge
	O.C. Discharge Depot.
Members of Board	Senior Medical Officer Subburder M. O. Denot
	Senior Medical Officer
	Xw Derden
	M O Denot

The Royal Newfoundland Regiment

Reg. No Side & Rank Pt Name Green Athers									
Date of Enlistment 24.5 18 Address Thanks Ar District Junity									
Occupation The Medical Category T Medical Category T.									
Recommendation S.M.B									
Passed to Demobilization Officer with following documents:—									
N.F. P 36 B 268 B 121 N.F. Med D.F. 1									
B 178 W 3494 B 122 Board 1st " 2									
B 178a D 400A B 1915 do 2nd " 3									
B 179 D 400B Form L do 3rd " 4									
B 179a									
B 179b B 103 ME 2 " 6 " 6									
B 179c B 120 M 93									
Date. 4.6.19 f. O. C. Discharge Depot.									
PARTICULARS FOR DEMOBILIZATION									
I. Civil Re-Establishment.									
r. Civil Re-Establishment. I amin a position to resume civilian occupation.									
I amin a position to resume civilian occupation									
I amin a position to resume civilian occupation									
I amin a position to resume civilian occupation.									
Particulars passed to Vocational Officer for information and action.									
Particulars passed to Vocational Officer for information and action. Date									
Particulars passed to Vocational Officer for information and action. Date									
Particulars passed to Vocational Officer for information and action. Date									
Particulars passed to Vocational Officer for information and action. Date									

3. Transportation and Release Certificate.
The above named has been provided with Travelling Warrant No. 1452 to his home
at Hawk A and Release Certificate No. 2320 issued.
Date 5-6-19- Gub Court
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
Date 19-6-19 Hill With
Discharge approved for 19 - Q - 19
Forwarded with following documents to O.C Discharge Depot.
N.F. P 36.
5-6-19 Dun Coff
Date Demobilization Officer.
APPROVED.
Documents as above forwarded to:— Officer ilc Records.
Board of Pension Commissioners.
with following additional documents.
Higible for War Service Gratulty
Date JUN 19 1919 O. C. Discharge Depot.
Received the above noted documents from O. C. Discharge Depot.
Date

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 foll

follows:	Ļ						
***************************************	90	risu	me zo	٠···	r OV	rupat	ton
						Signati	ire of Man.
	MDe	Lines	officer or his Re	rpresentative.	Reg. No	a gr	en
						. /	
Date J-			191				

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

MEDICAL HISTORY

Surname	en (,		Chris	stian Na	me(lethur,	
Birthplace:—Parish	Houts	e I.—GE Hr.	NERAL 1919.	TABL	10	les.	
		SPECIAL	RESERVE	}		REGULAR	
Examined	1 011	370 day of	May	1918	оп	day of	191
Examined	at	Sugo	hus.		at		
Declared Age	8	year	s	days		years	day
Trade or Occupation		1 is	herman				
Height		🤰 feet	24	tnches		feet	inche
Weight		115		lbs.			· lbs
Chest Girth when fully expanded.		33		inches			inches
		3		inches			inches
Physical Development							
	-	Right	Left		Righ	it	Left
Vaccination Marks }		_	1 Sea	v			
When Vaccinated	-	10					
	. K.BV	10 years	ags.		R.E.—V=		
Vision	·· } L.E.—V=	= 71 4	36.		L.EV=		
				*1			
	(a)				(a)		
(a) Marks indicating congenital pecu arities or previous disease	li-						
	(6)				(b)		
b) Slight defects but not sufficient	to				(6)		
cause rejection	1						
	3 . Ar.		0				
Approved by (Signature	e va	mark	ale	~		-	
(Rank	:)	mas	·				
	1. <	en al wa	Medical				Medical Officer.
nlisted	at O	2	4.	- 2	at		March Ages
	Con	day of	Regtl. N		Corne	day of	191
oined on Enlistment		e Mar.	esegui. P		Corps		Regtl. No.
	Commo		2348				
	ال						
ransferred to	-						
ecame non-effective by							
(Signatur	on re)	day of		191	on	day of	191
					<u>;</u>		79.
(Rank					ů		J. Tala
							[P.T.O.

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.

Brief Details, and Signatures

Date 7

		The state of the s
24-5-18	Vace. to	
	vace. D	
13-6-18	TABIAD	
	1 17 13 1 20	
20-6-18	TABLE	
27-6-18	TAB.) B	
		It is hereby cordified that this soldier
		has been b five a Travelling II died'
		nuas artificación de 1 de 1 de 1 de 1 de 1
		Board and has been e'smilled as
		E for Discharge on Demobilisa-
		Tor Descuer ge on the mounts
		tion Medical category
		110h. 11 0000000 000000 0000000 0000000000
		46.19 111 Wall
		tion. Medical outegory
		1
	And the same of th	

Table IV SERVICE TABLE	-SERVICE TAR	TT
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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
			1		
			· .		
	10 To				



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 Disabili-

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 Ic 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 Green . C.

Regiment from which discharged Royal Newfoundland Hants Str. 28

Height on discharge

Intended address

Color of hair on discharge

Complexion

Color of eves

Descriptive Marks

Figure on discharge Christian name of Father

Christian name of Mother

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth

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)

BT. JOHN'S. Station

Date -- 15-19

Shr. y July. 1893.

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.

ic Hospital Medical and Depot.

(Rank)

Note.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvia.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve. In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelses, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps Toyal New foundland 2. Regtl. No. 23. 48 3. Rank.	d.7. Former Trade Tisherman
	7a. If the soldier claims previous service in Army, he should state—
4. Name (Surname) (Christian Names)	(a) Former Regts. or Corps; with Regtl. Nos.
5. Age last birthday 25. 18 at St.	CAMBARA SANY SEE

- in category (or grade)..... 8. If the disability is an injury was it caused
 - (a) in action
- (b) on field service
- (c) on duty
- (d) off duty?

- (b) Date of Discharge;
- (c) Cause of Discharge.
- 9. If a Court of Inquiry was held on an injury state :-
 - (a) When
 - (b) Where
- (c) Opinion of Court is seen by the Officer in charge of the case.

(d) Particulars of Pension or Gratuity (if any)

Note.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier

Statement of Case.

Nors.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclasively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distriguish and clearly state when cases are due to venereal disease.

- 10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
- 11. Date of origin of disability.
- 12. Place of origin of disability.
- 13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

	14.	State whether the disabilities are (a) attributable to (b) aggravated by
100		(i.) Service during the present war
		(ii.) Previous active service
		(iii.) Climate in pre-war service
1		(iv.) Ordinary military service before the war
		(v.) Serious negligence or misconduct on the man's part.
	14	(a). If not due to any of these causes, to what specific condition do you attribute it?
In all cases such as facial mjuries, eye, ear, nose and throat, disabilities, ecc., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.		What is his present condition? (A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)
	16.	Was an operation performed? If so, when and what was its nature?
	17.	If not, was an operation advised and declined?
	18.	*In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
	19.	Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?
		- til
		1 hatrid
	20.	war, and if so, to what or by what specific military conditions? Do you recommend—
		(a) Discharge as permanently unfit?
		(b) Change to United Kingdom?
		Note—(b) is only applicable to soldiers invalided at Foreign Stations.
	Sta	tion Hazeley hours bump Medical Officer in charge of case.
	Da	te .29: 4: 19
	it is	 Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that due to some other cause
		(4.) 전 1982년 1982년 1984년 - 미리 전 1987년 1일

my Forn	a B. 103.	The same of the sa	Reg	imental N	umber 53 45
· · · (.·	The second second	Casualty Form -Active S			
· ().	Regi	ment or Corps U. Lew Coun Sieen Chris		7,	
ık	M ethor	dist	stian Name C	,	
ligion	23/5/18 T	dist Age on Enl erms of Service (a) Duration	Service recke	ons from (23/5/18
	motion to present	rank Date of ap	pointment to la	ance rank.	~)
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tended					
cupation.	Fisherma	in TT	Frade and Rate	Sig	nature of Office
•	Report	Record of promotions reductions transfers equalities		Date of	Remarks Taken from Army Form
Date -	From whom received	&c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Casualty	B.213, Army Form A.36, or other official documents
		Embarked			
		. Disembarked	28 NOV 1	10	
		Joined Batt.	5	JANI	910 -
		<u> </u>			
100	e e e e e e e e e e e e e e e e e e e	arrived in UK		13/4/19	
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[P.T.O.

Hants Harbor 529? June 2 20/19. Minister of militia Dear Sin- Thomas On the seventh of may I sent you a money order of \$20.63 asking you to kindly Cable the \$20.00 tomy Son ple Outher Freen Winchester England I have received no word since that date and an anscious to be received it, would you kindly send would to me munediately and

let me know if you received the money and sent same to him. Would like to hear from you coon as you can write. Thanking you for kinduess. Yours Phoebe Free

FORM K

Nº 4748



1ST. NEWFOUNDLAND REGIMENT

Dollars and Cents, per diem to, and for the benefit of the undermentioned Person and Persons, such payment to be of identity of, and production of the relative Identity Certificates by the Person concerned, viz.: Allotment begins Allotment begins NAME (in full) NAME (in full) ADDRESS	made on proof
of identity of, and production of the relative Identity Certificates by the Personnerned, viz.: Allotment begins. Identity Whether Wife, Child, Certificate Whether Wife, Child, Other Relative or Name (in full) Address	
Concerned, viz.: Allotment begins July 1st Identity Whether Wife, Child, Certificate Other Relative or NAME (in full) ADDRESS	or reisons
No. Friend	AMOUNT (each person)
4395 mother men Semeon Green Orsets Chart Casto	in 60
	1.
Total Allotment,	5 60

1.10152 Stanto Dr. To the Paymaster: Abt militia st John's. Sir. Would you Please forward application forms for Separation Mowance, & oflige. Sign 534 x ex pte Aithur Green Santo Starbour Trinty Bay.

•

March 25, 1920

Ex Pic.Arthur Green, Hant's Hr., T.B.

Dear Bir:

With reference to

your letter of March 15th kindly inform us what relation claimant for Separation Allowance is to you Yours truly,

> Capt. For Paymaster

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

data to a first of the property of the

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S, Nfld.

Fold Here

1346

worthby.

The accompanying Victory Medal and or British War Medal

•	Agthur Green	<u> </u>
n respect	of his service as No.	5348 Rank Pte.
Name	A. Green	Royal Nfld. Regt.
	ipt of the same should be	
	Od 19.	
Signature	Orthur 9.	run.
Date	oct 19/21	
Address_	Hauts &	4. Truity Bay

Squadron, Troop, Battery and Company Conduct Sheet. Army Form B. 121. Number of Sheet _CAL B 121. Regimental Number and Name Enlistment Trade Good Conduct Badges, Service pay or proficiency pay No. Place and Date | 23 Joined Date Joined Date) with Colours 147 years. Place of Birth Toined Date Ioined Date Date of award or of order Date of Place Rank Name of OFFENCE Offence Punishment awarded By whom awarded Witnesses REMARKS dispensing with trial Demobelyes St John 3 79 To be carried over.

251348

Demobilization Form 8

The Royal Newfoundland Regiment

DEMOBILIZATION OF				
Reg. No. 5346 Rank Pt Name Treen Arthury				
Date of Enlistmenty 24 5 /8 Address Hants At District Junety				
Occupation Tusherman Classification for Discharge Medical Category H. T.				
Recommendation S.M.B				
Passed to Demobilization Officer with following documents:—				
N.F. P 36 B 268 B 121 N.F. Med D.F. 1				
B 178				
B 178a				
B 179 D 400B Form L do 3rd " 4				
B 179a				
B 179b				
В 179с В 120 М 93				
Wille 1				
11/11/45/9				
Date. # 6: 19 Depot.				
PARTICULARS FOR DEMOSPLIZATION				
PARTICULARS FOR DEMODIFICATION				
I. Civil Re-Establishment.				
I am in a position to resume civilian occupation.				
d Green				
Particulars passed to Vocational Officer for information and action.				
Tartedians passed to vocational omost for information and arrives				
Date				
2. Clothing.				
Certified that Clothing Regulations have been complied with:-				
(a) Clothing Allowance payable 200				
(b) Clothing Supplied A Man Caff				
(U) Crothing Supplied				
Date. 5-6-19 Oilc. Re-clothing.				

The above named has been provided with Travelling Warrant No. 11.145.2 to his home at
Date
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
The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to
Date
Date
Forwarded with following documents to O.C Discharge Depot. N.F. P 36.
N.F. P 36 B 268 B 121 N.F. Med D.F. 1
Б 178
B 178a
Date JUN 19 1919 Eligible for War Service Gratulty O. C. Discharge Depot.

Reg. No	314. Rank to Name Gulw. a. Address Haut fr.	
Attested	Address 4auts 4v.	
Allotment	Allottee	
Date of Allo	etment	.
Returned on	tment Returned from Overseas 29.1.19 S.S. LOUSULOW Cause ANDRUGE	
4-6-19	PASSED TO DEMOBILIZATION OFFICES	
19-4-19	DISCHARGE APPROVED ON DISCORDING TICK.	