



# FIRST NEWFOUNDLAND REGIMENT

S.A.

## ATTESTATION OF

No. 2987 Name William Moore Corps

### Questions to be put to the Recruit before Enlistment.

1. What is your name? ..... 1. William Moore
2. What is your full Address? ..... 2. Bay Roberts, CB
3. Are you a British Subject? ..... 3. Yes
4. What is your age? ..... 4. 20 Years 7 Months
5. What is your Trade or Calling? ..... 5. Printer
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 ..... Yes
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? ..... II. Yes

I, William Moore 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.

8 July, 27th/16 Wm Moore SIGNATURE OF RECRUIT.  
Chas. N. Aye Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, William Moore 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 fully 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 27th day of July 1916.

Signature of Attesting Officer Chas. N. Aye Capt.

### †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).....

Applicable to all ranks. To correspond with entries on the Medical History Sheet.

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 _____									
Joined at _____ on _____									
Total Service forfeited as above.....									
Total Service towards Engagement to _____ [date of discharge] _____ years _____ days									
" " " Pension " _____ [ " " ] _____ " _____ "									





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No. 2987 Name William Moore Corps .....

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| 1. What is your name? .....  | 1. <u>William Moore</u> .....                    |
| 2. What is your full Address? .....  | 2. <u>Bay Roberts, CB</u> .....                  |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u> .....                              |
| 4. What is your age? .....   | 4. <u>20</u> Years <u>7</u> Months .....         |
| 5. What is your Trade or Calling? .....  | 5. <u>Printer</u> .....                          |
| 6. Are you Married? .....  | 6. <u>No</u> .....                               |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? .....                             | 7. <u>No</u> .....                               |
| 8. Are you willing to be vaccinated or re-vaccinated? .....  | 8. <u>Yes</u> .....                              |
| 9. Are you willing to be enlisted for General Service? .....   | 9. <u>Yes</u> .....                              |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?....                                       | 10. { Name .....<br>Corps ..... <u>Yes</u> ..... |
| 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. <u>Yes</u> .....                             |

I, William Moore ..... 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.

8 July 27th/16 ..... SIGNATURE OF RECRUIT.

Chas. Aye ..... Signature of Witness.

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on this 27th day of July ..... 1916.

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# DESCRIPTIVE REPORT ON ENLISTMENT

Applicable to all ranks. To correspond with entries on the Medical History Sheet.

Name William Moore  
 Apparent age 20 years 7 months. Height 5 feet 6 inches  
 Chest Measurement { Girth when fully expanded 36 1/2 inches  
 Range of expansion 3 1/2 inches  
 Distinctive marks

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John B. Moore, Bay Roberts.  
 Relationship Father

## 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>27-7-16</u>									<u>Lance Corp'l. 13</u>
Joined at <u>St John's</u> on <u>July 27<sup>th</sup> 16</u>									
<u>Discharged March 27/19</u>									
<u>Embarked St John's St. Michael for Det 28<sup>th</sup> Co</u>									<u>Embarked for 186<sup>th</sup> 30<sup>th</sup> 16</u>
<u>Joined Batten 12-12-16 with Batten 23-1-17</u>									
<u>Went to base depot 23-5-17. Home unit 19-16-17</u>									<u>Admitted 103<sup>rd</sup> Coy. 1st Bn. 19<sup>th</sup> 17</u>
<u>Went to base depot 1-4-18. Home unit 30-4-18</u>									
<u>Went to base depot 1-4-18. Home unit 30-4-18</u>									<u>Admitted 88<sup>th</sup> St. 60<sup>th</sup> 8<sup>th</sup> 18</u>
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<u>Went to base depot 1-4-18. Home unit 30-4-18</u>									<u>Admitted 88<sup>th</sup> St. 60<sup>th</sup> 8<sup>th</sup> 18</u>
<u>Went to base depot 1-4-18. Home unit 30-4-18</u>									
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<u>W</u>									





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

*William Moore*

aged

*no yes*

conducted at

*CLB*

Date:

*July 27/16.*

Recruiting Officer:

NO OF  
TEST

FINDING

1 *no*

2 *no*

3 *no*

4 *no*

5 *no*

6 *no*

7 *yes*

8 *yes*

9 *no - no*

10 *n*

11 *n*

12 *n*

13 *n*

14 *n*

15 *n*

16 *n*

17 *n*

18 *n*  
19 *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 *n*

34 *5-6"*

35 *116 1/2*

36 *38-36 1/2"*

37 *\$6.50 per week*

38 *Father in John C. Moore Bay Roberts.*

39 *none*

Signature of Medical Examiner:

*L. W. Borden*

C.R. 2987

Extract from Daily Orders Part II Unit The Royal Wilt.  
Regt. St. John's, March 27th, 1919.

The discharge of the Undernoted has been CONFIRMED by  
Officer L/C Records no date noted below

2987 L/C. WM. Moore

24-3-19



C.R.

2987

Extract from Nominal Roll of Mfld. Regt. Draft No. 16  
from 2nd Bn. Depot, to 1st Bn. B.S.F. Rebarbed South-  
ampton, 30-11-16.

2987 Pte. W. Moore.

C.R. 2987

Extract of DAILY ORDERS PART II ROYAL NEWFOUNDLAND  
REGIMENT DEPOT ST. JOHN'S, MARCH 12TH/19.

-----

The discharge of the undernoted on Demobilization has  
been APPROVED by O.C. Discharge Depot on noted date.

#2987 Pte. Wm. Moore.

10/3/19.



C.R. 2987

Extract from Daily Orders Part 11 Unit The Royal WFLA.  
St. John's, 11-2-19.

The Undernoted returned from Overseas and reported to  
Depot 7-21-19.

Repatriated on a/c of Demobilization.

2987 L/C. Wm. Moores.

C.R. 2987

Extract from Nominal Roll of The Royal Nfld. Regt.

Embarked S.S. Corsican, Jan. 30th, 1919.

2987 Moore.



C.R. 2987

Extract from Nominal Roll Of the ~~British~~ Royal Nfld.  
Regt. 24-1-19.

The undermentioned who was transferred fr om  
B.E.F. to the 2nd Bn., Winchester, awaiting repa-  
tiation. 19-1-19.

2987 L/C. W. Moores.

C.R. 1590  
2987

SICK AND WOUNDED N.C.O.'S AND MEN OF THE EXPEDITIONARY FORCE - FRANCE.

ROYAL ARMY MEDICAL CORPS.

LIST NO H. A. 21336

101279	Pte. Clowes, W.	RAMC. 1/6 Lond. F Amb.	Myalgia & Cont. Measles.	Adm 14 Sty H. Wimereux 2nd April 1918.
30683	Cpl. Iddenden, W.	RAMC 9 Cav. F Amb. att 10 Essex. Regt.	Boils. Buttock. Mild.	Adm 14 Sty H. Wimereux 6nd. April 1918.
6697	A/Cpl. Davies, R.J.	RAMC 14 Sty Hpl.	Orchitis (Non "V")	Dis to Duty With Unit. in 14 Sty H. Wimereux 2nd April '18
96805	Pte. Hancock, W.T.	" 14 Do.	Constipation.	Dis to Duty With Unit in 14 Sty H. Wimereux 2nd. April '18

NEW FOUNDLAND CONTINGENT.

LIST NO H. A. 21336

2987	Pte. Moore, W.	1 Newfoundland,	V.D.G.	Dis. to Details St Omer. ex 4 Sty H. Arques. 1st. April. 1918.
------	----------------	-----------------	--------	--

ADMIRALTY.

LIST NO H. A. 21336

10173	Pte. Allen, W.	R.M.L.C.	Sick. N.Y.D. Mild.	Adm 10 Can Sty H. Calais. 31st. March '18.
10663	Pte. Barton, E.	R.M.L.C.	Sick. Do.	Adm 10 Can Sty H. Calais 31st. March '18.
10723	Pte. Bell, J.	Do.	Sick. Do.	Adm 10 Can Sty H. Calais 31st. March '18.
10190	Pte. Burns, R.	Do.	Sick. Do.	Adm 10 Can Sty H. Calais 31st. March '18.
8936	Pte. Branchley, A.	Do.	Sick. Do.	Adm 10 Can Sty H. Calais 31st. March '18.

ARMY ORDNANCE CORPS.

LIST NO H. A. 21336

T1189.	S/sgt. West, R.	A.O.C. O.M.W. (Hy) 2.	Sick. Mild. N.Y.D.	Adm 10 Can Sty. H. Calais 31st. March '18.
--------	-----------------	-----------------------	--------------------	--

SOUTH AFRICAN RECORD OFFICE.

LIST NO H. A. 21336

1590	Pte. Leite, J.M.	1 Sth. Afr. Inf.	Mumps. Mild.	Adm 14 Sty H. Wimereux 2nd. April '18.
------	------------------	------------------	--------------	--



C.R. 2987

Extract of Daily Orders Part 11, from Unit: Newfoundland Regiment, G.H.Q.  
3rd. Echelon dated 6-4-18.

2987 Pte. W. Moore

Royal Nfld. Regt., Adm. Hptl. Venereal. 9/1/18. Dis. 1/4/18.

C.R. 2987

Extract of Memorandum from P. & R.O., London dated March 2nd. 1918.

DIVISIONAL CERTIFICATE.

The following Certificate has been received:-

2987 Pte. W. Moore, M.M.

(Card.)



C.R. 2987

Extract of Casualties received from Pay & Record Office,  
London, dated January 14, 1918.

#2987 Pte. W. Moore. ✓

V.D.G., Admitted 4th Stationary Hospital, Arques St. Omer  
January 8, 1918.

2987 Pl. William Moore

November 19, 1917.

John E. Moore Esq.,  
Bay Roberts.

Dear Sir:-

Confirmation has been received by this department of the award for gallantry, recently earned by your son.

I am taking this opportunity of conveying to you my congratulations on the distinction earned by your son on the field of battle. It is due in a very large measure, to the gallant and conspicuous conduct of such men, that the First Newfoundland Regiment has gained such fame as a fighting force.

I have the honour to be,

Sir,

Yours faithfully,

Minister of Militia.

WFR/KMD.



C.R. 2987

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P. & R.O. 12th May 1917.

2987, Pte W. Moore.

L Newfoundland L. Drags. LCT Heel & Toe L Adn. 11 Con. Dep. Bychy  
5th May 1917.

C.R. 2987

Extract from Nominal Roll Draft ( All Ranks) to 1st  
Bn. B.E.F. Embarked Southampton.

2987 Pte. W. Moore.

30-11-16



CR 2987

Extract from Nominal Roll Embarked St. John's for Overseas,  
28/8/16.

2987 Pte. W. Moore.

C.R. 2987

July 10th, 18

Mr. John Moore,

Bay Roberts.

Dear Sir:-

The following extract from Honours and Awards is quoted in connection with the deed for which No. 2987, Private W. Moore won the Military Medal:-

"For great bravery in beating off a counter-attack. This man was in a post out in front of our trench, and although the enemy tried to bomb them out, he stuck to his post and kept the enemy off." 9/10/17 "

E  
I wish to congratulate you on the conduct of your son which reflects credit, not only on himself, but on his Regiment.

Yours faithfully,

Lieut. Col.,

Chief Staff Officer.



No. 431

Received from

Received a Registered Postal Packet  
addressed as on the  
Receipt Form bearing  
the above No.

Office }  
Stamp }

A REGISTERED POSTAL PACKET

Addressed—

Received a Registered Postal Packet  
addressed as above...

*De W Moon*  
*Bay Roberts*

W. Moore

2987

RRD





# 1ST. NEWFOUNDLAND REGIMENT

1. Tom Meone

, Regl. No.

hereby agree, until further notification by me, and in similar official form to make an Allotment of \_\_\_\_\_ Dollars and 50 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup>/<sub>or</sub> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup>/<sub>or</sub> Persons concerned, viz. :

## Allotment begins

[illegible]

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

(Sig.) *Chas H. Ayre Capt.*

Officer Commanding

**Company**

(Sig.)

(Rank)

19F





No 2987 Rank Pt 1 Name Moore Wm

Pay	F.A.	Weg	Total
100	10		110
Less Allotment			50
Net Rate			60

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£	s	d	£	s	d
						From	To								
Balance					Balance		8/6/17						16	2	7
Acquittance Rolls					Pay @ Net Rate	9/6/17	13/2/17	190	60	114	00	23	8	6	
Hospital Advances		8	8	8	Ration allow.								1	4	6
A.B. 64 30 Frames		1	2	0	14 days @ 1/9	16/2	28/2	13	7	80			1	12	1
P. & R.O. Payments					(31-4-11)										
9-10-8					(1-17-0)										
40-10-8 Cheque 7219	15 <sup>th</sup>	31	00												
Cash 4950	25 <sup>th</sup> 17	1	10	0											

CHECKED.

*He*

40-15-7  
42-7-8

SERIAL No	REGTL No	RANK & NAME	DATE OF AWARD	AUTHORITY	RECORD
2087		PTE. W. MOORE.	9/10/17	Special Order of the day No 6 D.R.O. dated 7/1/17	For great bravery in beating off a counter-attack. This man was in a post out in front of our Trench, and although the Enemy tried to Bomb them out he stuck to his post and kept the Enemy off. 9/10/17



**WILL. 723**

Name

*William Moore*

Regtl. No

*2987*

Rank

*Pte*

Regiment

**ROYAL NEWFOUNDLAND REGIMENT.**

Date of:—

*10/3/17*

Receipt ...

...

*19/3/18*

Transfer ...

...

Final disposal and  
to whom sent ...

C.R. 2987

Extract from HONOURS AND AWARDS" Jan.5th,1918.

2987 Pte. W. Moore, M.M.

"For great bravery in beating off a counter-attack. This man was in a post out in front of our trench, and although the enemy tried to bomb them out, he stuck to his post and kept the enemy off."9/10/17.



C.R. 2987

June 19th 1919.

From: Casualty Officer  
To: #2987, L/C. W. Moore, M.M.,  
Bay Roberts.

I have recently received from the Chief Paymaster, London the 29th Divisional Certificate No. 473, issued by the General Officer Commanding the 29th Division, in recognition of your gallant services on the 22nd Oct. 1917.

I am attaching receipt which I shall be glad if you will sign and return to this Office at your earliest convenience.

Lieut.

CASUALTY OFFICER.

FAE/AW/





Moore, D<sup>ear</sup>

2987

Joseph

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 2987 Rank Lt Col. Name Moore Wm  
 Intended place of residence 5 Leinster Street, St John's  
 2. Occupation Printer  
 Classification of soldier E Medical Category ATI

3. The above named man is discharged in consequence of DEMobilIZATION

## Eligible for War Service Gratuity

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.

Place for H. News

Date MAR 10 1919 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.

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT.

Place and date ST. JOHN'S Wm Moore

Signature of soldier

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 Wm Moore

Signature of soldier

T. J. D. and D.  
 Signature of witness

## STATEMENT OF SERVICE

7. Enlisted for service 27-7-16 No of days on Military  
 Discharged from service 10-3-19 Plus 14 days Service 971 Days

## APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.

Place St John's R. H. Sait

Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment.

Date MAR 10 1919

## CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed W. Bowley Capt  
 Place St John's, Nfld Officer i/c Records  
 Date March 24/1919 The Royal Newfoundland Regiment

2079/1441

5  
31  
30  
31  
30  
31  
31  
28  
24  
71



March 24, 1919

#2987 L/Corpl. William Moore,

#5 Carters Hill,

City

Dear Sir:-

Please find enclosed "Discharge Certificate  
No. 1441."

Yours truly,

Captain,  
Paymaster & O.i/c Records

# The Royal Newfoundland Regiment

Class for Demobilization: *Ex*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *10-3-19*

Regimental No. *2987*

Name *Moore* *William* *L/Capt*

Address .....

Present Medical Category *A1*

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

Members of Board {

*R.H. Lait Capt*  
O.C. Discharge Depot.

*H. Atkinson*  
Senior Medical Officer

*Geo Burden*  
M. O. Depot



# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 2987 Rank Lt Col Name Moore, Edm.  
 Date of Enlistment 27-7-16 Address 5 Carter St District St. John's  
 Occupation Printer Classification for Discharge E Medical Category A1  
 Recommendation S.M.B. .... Disability Rating .....  
 Passed to Demobilization Officer with following documents:—

N.F. P36.....	B 268.....	B 121.....	1	N.F. Med.....	D.F. 1.....	1
B 178.....	W 3494.....	B 122.....	1	Board 1st.....	" 2.....	
B 178a.....	1 D 400A.....	1 B 1915.....		do 2nd.....	" 3.....	3
B 179.....	D 400B.....	Form L.....		do 3rd.....	" 4.....	
B 179a.....	D 400C.....	Form K.....		do 4th.....	" 5.....	
B 179b.....	B 103.....	ME 2.....		" 6.....	" 6.....	
B 179c.....	B 120.....	M 93.....				

Date 10-3-19

H. Mews  
 O. C. Discharge Depot.

## PARTICULARS FOR DEMOBILIZATION

### 1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

Wm. Moore

Particulars passed to Vocational Officer for information and action.

Date 10-3-19

Joseph H. Lawrence

### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable £6.00  
 (b) Clothing Supplied Joseph H. Lawrence

Date 10-3-19

O i/c. Re-clothing.

### 3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. \_\_\_\_\_ to his home  
at \_\_\_\_\_ and Release Certificate No. 1444 issued.

Date

10-3-19

C. B. Duke Capt  
Demobilization Officer

### 4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection  
therewith settled. He has received pay and allowances to 24-3-19

Date

10-3-19

H. M. News H  
Depot Paymaster.

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT.

Discharge approved for 10-3-19

Forwarded with following documents to O.C Discharge Depot.

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

Date

10-3-19

C. B. Duke Capt  
Demobilization Officer.

### APPROVED.

Documents as above forwarded to:—

Officer i/c Records.

Board of Pension Commissioners.

with following additional documents.

**Eligible for War Service Gratuity**

**MAR 10 1919**

Date

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

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

Date



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

# MEDICAL HISTORY

Surname

Moore

Christian Name

William

Table 1.—GENERAL TABLE.

Birthplace:—Parish

County

	SPECIAL RESERVE.		REGULAR ARMY.	
Examined	on 27 day of July 1916	at St. John's Nfld.	on day of 191	
Declared Age	20 years	7 months	years	days
Trade or Occupation				
Height	5 feet	6 inches	feet	inches
Weight		116½ lbs.		lbs.
Chest Measure-ment	Girth when fully expanded...	36½ inches		inches
	Range of expansion...	3½ inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
When Vaccinated				
Vision	R.E.—V=	L.E.—V=	R.E.—V=	L.E.—V=
(a) Marks indicating congenital peculiarities or previous disease				
(b) Slight defects but not sufficient to Cause Rejection				
Approved by (Signature)	Lammie Paterson			
(Rank)	Major			
	Medical Officer.			Medical Officer.
Enlisted	at St. John's	at		
	on 25 day of July 1916	on day of 191		
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment	11th A.F. LD. Regt. 2987			
Transferred to				
Became non-effective by				
(Signature)				
(Rank)				





## Civil Re-establishment Committee



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

*To resume work at printing trade.*

*Wm. Moore*

Signature of Man.

Reg. No. *2987*

*L. Murphy, Capt.*

Signature of the Vocational Officer or his Representative.

Place *Dept. Shilitia*

Date *March 10,* 191*9.*

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 question 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... *William* 2. Surname... *Moore*  
3. Rank... *Lance Corporal* 4. Regt. No... *2987*  
5. Address in full to which future payments of gratuity are to be forwarded... *William Moore, Bay Roberts, Newfoundland*  
6. Date of enlistment in the Regiment... *July 27, 1916*  
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge... *Not applicable*  
8. Relationship of such dependents... *Not applicable*  
9. Address in full of such dependent... *Not applicable*  
10. Is said dependent, now, or was said dependent, at any time in receipt of Separation Allowance on account of another soldier?... *no*  
11. Were you on active service only in Nfld. If so, give dates, and particulars of such service... *No*  
12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *2 years 7 months*



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 Gratuity? If so, state amount you and your dependents have already received and by whom paid... *No*.....

15. Have you been issued with a War Service Badge?.... *No*.....

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.... *No*.....

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?.... *No*.....

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

19. Are you now serving in the Regt.? *No*.... If not give:- (a) Date of discharge. *Mar 10<sup>th</sup> 1919*... (b) Reason for discharge.....  
...*Demobilization*.....

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.....

*Yes, France Dec 1/16 to Jan 14/19*  
*Officer, Cambrai, Langemarck.*

21. (a) Are you receiving treatment from the Civil Re-Establishment Com.? *No*

(b). If (b), are you in receipt of full pay and allowances from that Committee.... *No*.....

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: *Wm. Moore*

Place of Residence: *Ray Roberts Wfd.*

Declared before me at: *H. Johns Wfd.*

This *12th*, day of *March* 19*19*.

*John McCarthy*

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 Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	.....	.....	<i>5 mos.</i>	<i>350.00</i>
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
Certified Correct.			Paymaster.	







M.F. A.3.  
20M-10-17

CR 2987

# DEPARTMENT OF MILITIA

ADDRESS REPLY TO  
DEPT. OF MILITIA  
AND QUOTE NO.

ST. JOHN'S, NEWFOUNDLAND,

June 19th 1919.

RECEIVED FROM DEPARTMENT OF MILITIA:

One 29th Divisional Certificate, No. 473.

SIGNED... *Wm. Moore* .....

DATE. *June 22nd* 1919

Kindly sign and return to Dept. of Militia.



C.R.

2987

Extract from Daily Orders Part II Unit The Royal Newfoundland  
Regiment, Station G.H.Q. 3rd Echelon, date 19-8-18.

Awarded Military Medal, Supr L.C. 14-1-18.

2987, Pte. W. Moore.

C.R. 2987

RECEIPT.

FOR ISSUE OF RIBAND OF VICTORY MEDAL 1914-1919.

I certify that I have received an issue of 2 inches  
of Riband of Victory Medal 1914-1919.

DATE. *Jan. 9<sup>th</sup> 1920*  
PLACE. *Bury. Roberts*

NO. *2987*...NAME... *Wm Moore*...



1991

Fold Here

ON HIS MAJESTY'S SERVICE



To the Officer in Charge of Records,

*Royal Nfld. Regt.*

*Dept. of Militia,*

*ST. JOHN'S, Nfld.*

Fold Here



OCT 5 1921. 1921.

The accompanying **Victory Medal** and/or **British War Medal**  
is/are forwarded herewith to

William Moore

in respect of his service as No. 2987 Rank Pte.

Name W. Moore Royal Nfld. Regt.  
~~Nfld. Fusiliers Corps.~~

Receipt of the same should be acknowledged hereon.

Received Victory Medal<sup>and</sup> British War Medal

Signature Wm Moore

Date Oct 8th

Address Bay Roberts

[P.T.O.]



C.R. 2987

Copy of Will of 2987, Pte Moore, W.

In the event of my death I give the whole of my property and effects to my father, Mr. John Moore, Bay Roberts, Newfoundland.

(Sgd). William Moore  
Pte. 2987, 2/1st. Nfld.  
March 10th. 1917.

Certified true copy,

2/2/18.

G.H.Q., 3rd. Echelon, Officer i/c No. 1 Infantry Section.

B.E.F.

Receipt (for Army Book 64

No. 2987 Name W Moore  
2

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

Name Wm. Moore

Date Aug 26<sup>th</sup> 1920

Place St. John's

N.B. For completion and return to the Department of Militia  
Insert in corner of envelope "AB 64"



## Casualty Form—Active Service.

Regimental Number **C.R. 2987**

Regiment or Corps 2/1 Newfoundlands Regt.  
 Rank Pte Surname Moore Christian Name William **2153**  
 Religion Salvation Army Age on Enlistment 20 years 7 months.  
 Enlisted (a) St John's Terms of Service (a) Duration Service reckons from (a) 21/7/16  
 Date of promotion to present rank \_\_\_\_\_ Date of appointment to lance rank \_\_\_\_\_  
 Extended { \_\_\_\_\_ } Re-engaged { \_\_\_\_\_ } Qualification (b) \_\_\_\_\_  
 or Corps Trade and Rate \_\_\_\_\_

Signature of Officer i/c Records.

Report		Record of promotions, reductions, transfers, casualties, &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	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
	<b>Embarked</b>	<b>S'hampton</b>	<b>embarked</b>	<b>30 NOV 1916</b>	
	<b>Disembarked</b>	<b>Rouen</b>	<b>Disembarked</b>	<b>1- DEC 1916</b>	
	<i>Unit</i>	<b>Volned Battalion</b>	<i>r France</i>	<i>12/12/16</i>	<i>B 213</i>
			<i>✓ With</i>	<i>DATE 25. 1. 17</i>	
<i>9.4.17</i>	<i>N.Z. St. Hosp.</i>	<i>Ad. I.L.V. Foot</i>	<i>Amiens</i>	<i>29.3.17</i>	<i>H.A. 8046</i>
<i>18.4.17</i>	<i>6th Hosp.</i>	<i>Ad. So</i>	<i>Rouen</i>	<i>14.17</i>	<i>H.A. 8145</i>
<i>24.5.17</i>	<i>299 B.D.</i>	<i>Joined Base Depot</i>	<i>Do</i>	<i>23.5.17</i>	<i>Nom Roll</i>
<i>23.6.17</i>	<i>O.C. Unit</i>	<i>Joined Battalion</i>		<i>19 JUN 1917</i>	<i>B 213</i>
<i>12.1.18</i>	<i>---</i>	<i>WITH . Bn. 30-12-17.</i>		<i>5.1.18.</i>	<i>B 213</i>
<i>5.1.18</i>	<i>88th</i>	<i>Ad. Gonsard</i>		<i>5.1.18</i>	<i>B 213</i>
<i>12-1-18</i>	<i>"</i>	<i>"</i>	<i>2 New G. Hq. Ap</i>	<i>2-1-18.</i>	<i>E.D. 6265</i>
<i>Am</i>	<i>"</i>	<i>Joined Base St</i>	<i>Rouen</i>	<i>3-4-18</i>	<i>Loc</i>

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) Signaller, Shoching Smith, &c.

[P.T.O.]

2987 PTE W. Moore

[illegible]



Army Form ~~B.~~ 121.

**Forms**  
**B. 121.**  
**89.**

Newfoundland

Number of Sheet

Signature of O. C. Company

Army Form B. 121.

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 2987 Rank Lt Name Moore, Edm

Date of Enlistment 27-7-16 Address 5 Carters Hill District St. Johns

Occupation Printer Classification for Discharge E Medical Category A1

Recommendation S.M.B. .... Disability Rating .....

Passed to Demobilization Officer with following documents:—

N.F. P136	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	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 10-3-19

for O. C. Discharge Depot.

## PARTICULARS FOR DEMOBILIZATION

### 1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action.

Date 10-3-19

### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$6.00

(b) Clothing Supplied Joseph A. Lawrence

Date 10-3-19

O i/c. Re-clothing.



### 3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. .... to his home  
at ..... and Release Certificate No. 1444 issued.

Date 10-3-19 .....

C. B. Dicks Capt  
Demobilization Officer

### 4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection  
therewith settled. He has received pay and allowances to 24-3-19 .....

Date 10-3-19 .....

H. M. News Lt  
Jm Depot Paymaster.

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT.

Discharge approved for 10.3.19 .....

Forwarded with following documents to O.C Discharge Depot.

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.....	D 400C.....	Form K.....	do 4th.....	" 5.....
B 179b.....	B 103.....	ME 2.....		" 6.....
B 179c.....	B 120.....	M 93.....		

Date 10 3 19 .....

C. B. Dicks Capt  
Demobilization Officer.

### APPROVED.

Documents as above forwarded to:—

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

**Eligible for War Service Credit**

Date MAR 10 1919 .....

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

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

Date March 11 19 .....

Baronetti  
Depot Receiver



## 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

*Wm Moore*

Regiment from which discharged

*Royal Newfoundland*

Regimental number

*2987*

Intended address

*5 Carvers Hill*

Height on discharge

*5 Feet 6*

Color of hair on discharge

*Brown*

Complexion

*Fair*

Color of eyes

*Blue*

Descriptive Marks

*medium*

Figure on discharge

Christian name of Father

*John*

Christian name of Mother

*Mary*

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth

*Bay Roberts 1896 February 10<sup>th</sup>*

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)

*William Moore*

Station

*St John's*

Date

*March 10/19*

(Rank)

*Pte R.*

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.



Station

Date



MILITARY MEDAL.

2987

Pte. W. Moore.

Date of Award.

Authority.

Daily Orders 1st Bn. 27/10/17.

Reference.

London Gazette.

EXTRACT FROM STATEMENT OF A/C TO ~~11/1~~ 30-1-19 FROM PAY &

RECEIVED DIRECTOR'S OFFICE LONDON

2987 L/C. Moore, W.

Cr. Bal. £12:1:9 plus 1 day's pay (31-1-19)

This transferred to Pay Office 14-3-19



C.R. 2987

Wm. Moore was attested for General Service  
with the NEWFOUNDLAND REGIMENT on ... July 27. th 1916  
Regimental No. 2987 was allotted to Pte Wm. Moore

AUTHORITY:

Record Officer

Dept. of Militia,  
March 25th. 1919.

Reg. No. 29 87 Rank Lt Col Name Morse Wm W. W.

Attested ..... Address Bay Roberts

Allotment ..... Allottee .....

Date of Allotment ..... Returned from Overseas 2-19

Returned on S.S. .... Cause Discharge

10.3.19.

10.3.19.

PASSED TO DEMOBILIZATION OFFICE  
DISCHARGE APPROVED ON DEMOBILIZATION