

FIRST NEWFOUNDLAND REGIMENT

ATTESTATION, OF

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χo.	, syame	
	Questions to be put to the	Recruit before Enlistment.
I.	What is your name?	1
2,	What is your full Address?	2 Clasthown
3.	Are you a British Subject?	3
4.	What is your age?	4
5.	What is your Trade or Calling?	5 T. N. S. C. T. M. Acco.
6.	Are you Married?	6
7.	Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which?	7//O
8.	Are you willing to be vaccinated or re-vac-	6. 70 7. 70 8. 73 INE BURNIAN 9. 453
	Are you willing to be enlisted for General Ser-	[M] [] [[] [] [] [] [] [] [] [
	Did you receive a Notice, and do you under- stand its meaning, and who gave it to you?} Are you willing to serve upon the conditions as em to be signed by you if you are accepted?	Name
mad	te by me to the above questions are true, and that	am willing to fulfil the engagements made. SIGNATURE OF RECRUIT. Signature of Witness.
bou	OATH TO BE TAKEN BY R. I True allegiance to His Majesty King George the Fifth, nd, honestly and faithfully defend His Majesty, His He enemies, according to the conditions of my service.	ECRUIT ON ATTESTATION.
	CERTIFICATE OF MAGISTRA	TE OR ATTESTING OFFICER.
he	The Recruit above named was cautioned by me that would be liable to be punished as provided in the Army	if he made any false answer to any of the above questions
	The above questions were then read to the Recruit	
		and that his answer to each question has been duly entered
88 1		declaration and taken the oath before me at
on	this	bottorge & back, mad
	†CERTIFICATE OF A	PPROVING OFFICER.
		cruit is correct, and properly filled up, and that the re-
qui	red forms appear to have been complied with. I accor	dingly approve, and appoint him to the;
	If enlisted by special authority, such will be attached	to the original attestation.
Dat Pla	210 VITA 6	Approving Officer.
	† The signature of the Approving Officer is to ‡ Here insert the "Corps" for which the Recru	

DESCRIPTIVE REPORT ON ENLISTMENT Applicable to all ranks. To correspond with entries on the Medical History Sheet. Name.... Height feet Apparent age. (Girth when fully expanded... Chest Measurement Range of expansion Distinctive marks ... INFORMATION SUPPLIED BY RECRUIT Willia Summer Name and Address of next of kin Relationship 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) (d) Particulars as to Children Christian Names Date and Place of Birth STATEMENT OF THE SERVICES Service not al-lowed to reckon for fixing the rate of pension Service in Re-serve not allow-ed to reckon to-wards G. C. Pay Signature of Officers certi-Corps in Rgt. or which served Depot Promotion, Reductions, Casualties, &c. fying correctness of Army Rank Dates entries Service towards limited engagement reckons from Total Service forfeited as above.....



FIRST NEWFOUNDLAND REGIMENT 4261 ATTESTATION OF Name Withus Tunner Corps Coffe.

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No	40	01
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Questions to be put to the Recruit before Enlistment.
1. What is your name? 1 Let thus Clanne
2. What is your full Address?
3. Are you a British Subject? 3
4. What is your age?
5. What is your Trade or Calling? 5. J. Askerman
6. Are you Married? 6. 100
7. Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which?
8. Are you willing to be vaccinated or re-vac-
9. Are you willing to be enlisted for General Ser-
to Did you receive a Notice and do you under) (Name
stand its meaning, and who gave it to you?} 10
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?
OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.
I
CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.
The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.
The above questions were then read to the Recruit in my presence.
I have taken care that he understands each question, and that his answer to each question has been duly entered
as replied to, and the said recruit has made and signed the declaration and taken the oath before me at
Signature of Attesting Officer Storg Lbarty Mayor
†CERTIFICATE OF APPROVING OFFICER.
I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the re-
quired 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
Place Al Johnson 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).....

DESCRIPTIVE REPORT ON ENLISTMENT Applicable to all ranks To correspond with entries on the Medical History Sheet. hus Jumms Name. years 5 months. Height 2 feet Girth when fully expanded inches Chest Measurement Range of expansion. inches Distinctive marks. INFORMATION SUPPLIED BY RECRUIT Lums Name and Address of next of kin .. Mulhony Relationship 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) (d) Particulars as to Children Christian Names Date and Place of Birth STATEMENT OF THE SERVICES Service in Re-Corps in Rgt. or which served Depot Promotion, Reductions, Casualties, &c. gnature of Officers certied to reckon to wards G. C. Pa Army Rank Dates fying correctness of Days Days S rvice towards limited engagement reckons from Total Service forfeited as above..... _ years /50 A Total Service towards E

Reg. No. Whi Rank Old Name Summer O. Attested 1911211 Address Say AttAbout Allotment 10 Allotee H. W. W. W. Returned from Overseas	
Embarked for OverseasCause	
Was 191121171 W Jack 31,12117 3/11/18, 2md 92 H.L. 10.1.18 - 20.1.18 1 K18.25/11/19	er

C.F. 4261

Extract from Daily Orders Part II Royal Newfoundland Regiment, dated October 20th 1919. Deptt St. John's.

The discharge of the undernoted on demobilisation has been CONFIRMED by Officer i/c Records from noted date 17-5-19.

4261, . A. Simms

CR. 4261

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt. St. John's, May 5th, 1919

4261 Pte. E. Simms

APPROVED for discharge 3-5-19.

C.R. 4261

Authors from Dally Orders Port 11 Unit the Royal Rild. Roys St. John's, MAS-19.

The Undernoted Se turned does oversees and Reported to Depot 7-2-19.

Repatriated on A.F.B179.

4261 Pte. Arthur Simms.

C.R. 4261 X

Antiques from Medical 2013 of the 2010 Mile. Ages Industrial S.S. Constant, Jun. 2013/05-

4261 Simms.

Extract from Casualties received from Pay a Record Office, London, Dec. 15th, 1918.

The undermentioned was attached to End Battn., Winchester on dates stated. From 1st Battn., B.R.F. Classified "B"

4261 Pte. A. Simms.

Extract of DAILY ORDERS, PART II, Royal Newfoundland Regiment in France, dated 21/11/18.

To England "B" 12/11/18.

#4261 Pte. A. Simms.

C.R.4261

Extract from Orders by Lt. Col. B.J. Barton, D.S.O., commanding 2nd Battalien Reyal Newfoundland Regiment, dated 14/11/18.

ARRIVALS.

The undermentioned having reported back from the 1st Battalien is taken on the strength and posted to "H" Company:

4261 Pte. A. Simms as from 13/11/18.

Extract from War Office List No. H.A. 31195

DIS. TO 5 REST CAMP ST. MARTINS DTLS. EX 10 CON. DEP. 30 OCT. 1918.

Habl Pte. A. Simms

INFLUENZA.

Extract from War Office List No. H. A. 31092.

ADMITTED 10 COM DEP. ECAULT 27 Oct. 1918.

#4261 Pte. A. SAMMS

INFLUENZA.

C.R. 4261

Extract from Casualties List No. H.A. 30883.

4261 Pte. A. Simms.

Adm. 7 Con. Dep. Boulogne 25th Oct'18.

Influenza 31t.

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1				LIST NO.H.A.29806
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	49413 Gm	r. Doyle J.	RGA.30 S.Bty.	V.D.b.C.mild.
f .		ADM. 13 (I	LARVARD U.S.A) GEN. H. B	OULOGHE 5 OCT. 18.
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1				
NE	WFOUND:	LAND EXPEDI	TIONARY FOR CE	LIST NO.H.A.2300
42	61 Pte. Simm	A. 1/N'Indlad.	N.Y.D.MildAdm.54	Ge n. H. Aubenigne 3 Oct. 12.

Extract of Rominal Roll to B. E. F. embarged Folkostone. 2-7-18

#4261 Pte. A.Simms.

Entruot from Seminal Soll Draft "H" Company Emberhod S.S. Florizel, Jan. 89th, 1916.

4261 Pte. Simms A.

C.R. 4261

Protect from Bully Orders Part 11 Unit The Royal Hild. Regt. St. John's, Dec. 20th, 1917.

4261 Pte. A. Simms.

Attested for General Service with the Lst Nfld. Regt, with effect from Dec. 20th/17.

ACCOUNTS COLLECTED QUARTERLY. 302 WATER STREET. St. John's, Nowfoundland, M Dt. A. Simms. Sto 4261. In account with Charles Ellis, ENGLISH AND AMERICAN HIGH-CLASS TAILORING. Bleve pay this hil and clayed my ared.

From Officer Commanding Discharge Depot.

To Paymaster &Officer i/c Records Militia Department.

4261 Pte. A. Simms.

The above noted man has made application to havehis allotment of 70% per day cancelled from and including February Ist. 1919.

Please carry out and advise.

noted County



DEPARTMENT OF MILITIA

ST. JOHN'S, NEWFOUNDLAND

March 1st. 1919

From; the Paymaster & O 1/c Records,

To: The Officer Commanding, Royal Hfld. Reg't., Discharge Deput.

Re 4261, Pte. A. Simms

The above man's allatment of 70g per day, has been cancelled from and including February 1st. 1919.

For Paymaster & 0 1/c Records.

a. Simms . 4261. P. 1. P. 0

Norz. 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 is 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, Chelsea, 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. Former Trade or Occupation 7a. If the soldier claims previous service in Army, he should state-(a) Former Regts. or Corps; with Regtl. Nos. (Christian Names) · 5. Age last birthday..... 6. Posted for duty onat in category (or grade)..... 8. If the disability is an injury was it caused (b) on field service (a) in action (b) Date of Discharge; (c) on duty (d) off duty? (c) Cause of Discharge. 9. If a Court of Inquiry was held on an injury state :-(a) When (d) Particulars of Pension or Gratuity (if any) (b) Where (c) Opinion of Court Note.—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. 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	(A)
(i.)) Service during the prese	ent war	140	(b) aggravated by
) Previous active service.		tro	
	Climate in pre-war servi		20	
	Ordinary military service		no	
	Serious negligence or r man's part.		~~~~~	
14 (a). If	not due to any of the specific condition do y	nese causes, to what you attribute it?	1} ch,A.	
ses such in future in futu	is his present condition? (A note should be made as when it is likely to afford gress of the disability.)	to Weight in all cases of the pro-	hingen bompla ise.	abnormal gs. of
16. Was an	operation performed? I	If so, when and what		
17. If not,	was an operation advised	and declined?		
18. *In the teeth	case of loss or decay of to the result of wounds, thy attributable to active	eeth,—Is the loss of		

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?

ment was unobtainable?

service under such conditions that dental treat-

20. Do you recommend-

(a) Discharge as permanently unfit?

(b) Change to United Kingdom?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Refatiation ,

ROYAL NEWFOUNDLAND REG.

Date

Medical Officer in charge of case.

* Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

Nº 4504



H 1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and Seventy Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person and Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person and Persons concerned, viz.: Jany 14 1918. Allotment begins. Identity Certificate No. Whether Wife, Child, other Relative or Friend AMOUNT (each person) NAME (in full) ADDRESS her with aune S' Author MoTher Total Allotment, \$ 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. Officer Commanding Company

hutins flymmet 4d

Nº 4504



1st. NEWFOUNDLAND REGIMENT |.

ALLOTMENTS

I,	MATERIAL STATES	Surrey		, Regl. No	uah	01
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				Total Allotment, \$		*10
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Sig.)	Mouley	1		11 40		
e	0	fficer Commanding	(S),	M. Muy X. Or	unia.	A
		Company	(Rank)	yet.		ON YE
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EO,- The Chief Paymaster,
Royal Newfoundland Regiment,
59 Victoria Street,
London, S.W.

Sir:-

Please charge the amounts set opposite my name to my account and pay it to the N.T.C.A. "Prisoners of "ar Fund" in quarterly instalments for the period of one year.

Correcting on the 1st July 1918.

Regtl.	Rank	Name		Amount	Signature;
4961	Ble	Dimmis	a	\$25	•

I have the honour to be, Sir,

a simo

ato 24-6-16

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Simms, fl. 4261

Aay Loeph.

Bell Island, C.B., May 15th, 1921.

My Dear Dr. Parsons:-

I am enclosing you a letter which I received last evening from Dr. E. P. Hayden of St. Anthony, with reference to 4261, Private Arthur A. Simms. You will notice what he has to say in the matter.

I do not remember the soldier in question and I am not acquainted with Dr. Hayden; hence I cannot throw any light on the subject, but I would be grateful for your advice and would be glad to communicate particulars to Dr. Hayden on receipt of your reply.

with kind regards.

Yours faithfully.

Leob Trumply

Major W. H. Parsons, M.C., Secretary,

Board of Pension Commissioners.

freely

Surname

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

MEDICAL HISTORY

Christian Nane Oloth

	27	able I.—GE	NERAL T	ABLE.	-27 17	0 6 10		
Birthplace: —Parish	21	auckn	w/	County	My	Ud.		
		SPECIAL	RESERVE.			REGULAR	ARMY.	
	on	19th day	of Die,	1917	on	day	of	191
Examined	at	21	Johns		at			
Declared Age		19 390		Ales		years		days
Trade or Occupation		14	elerma	•				
Height		J feet	8		J.4.	feet		inehea
Weight	****		. 14		201.0		-:	lbs.
Chest Girth when fully expand Measurement Range of Expansion.	led		39	inches				inches
			4					merica
Physical Development		Right	Left		k	ight	J.ei	t.
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(Number		Was a series						
When Vaccinated	(R.E.	_v.64			R.EV=	4 6 6		
Vision	···· } L.E.	-V= 6			L.E.—V≃			
	((a)			7	(a)			
(a) Marks indicating congenital arities or previous disease	100					75.5		
arities or previous disease								
	(6)				(6)		4.3	
(b) Slight defects but not sufficie	ent to						100	
	7.4	ver i vi		10				
Approved by (Sign	usture)	to as	01					
	Rank)	ammy	averan	•			1	
		mi	Medica	d Officer.			Medica	d Officer.
Enlisted	∫ at	S. I	1:		nt			
Elineted	on	19 Cd day		191 7	on	day		191
Joined on Enlistment		Corps.	Regtl.	No.	Con	rjæ.	Regti.	No.
	10	held						
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[Sign.	ature)	1						20
(= 0	Rank]							
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Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, ac.; 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 Signature

Date

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9/1/:		Josephore	ligaturale	OYAL NEWFOUN	DLAND REG.	A p
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			Board and	has been Discharge	oʻas si fi on Doguc	od as bilisa-
			tion. Medic 30 H 19 Dem of TM	al category	Holling	
	i i			J	cremen automa-No	Wisumultane*

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
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		HEALT STATE		700	
					PAR DEPART

Norz.—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, Chelsea, S.W. 3.

M_J:_1	D		s to be sent to the Secreta	ry, Royal Hospital, Chelsea	SW 3
medical	Keport on	a Soldier D	I ID .	or to Dischar	
T	-toport on	a Soldier D	oarded Price	or to Dischan	~~
Iranst	er to Class	17 XX7 (T)	D / -	to Dischar	ge or
	CIESS I	V ., XV . (1).	P. or P. (T)	of the Poss	

Transfer to Class W., W. (T), P.,	or P.(T) of the Possesses		
1. Unit and Corps to mae lew four not			
2. Regtl. No. 1. 261. 3. Rank. Ple.	or Occupation }		
4. Name SIMINS A	7a. If the soldier claims previous service in Army, he should state— (a) Former Regts. or Corps;		
5. Age last birthday	with Regtl. Nos.		
6. Posted for duty on at			
8. If the disability is an injury was it caused			
(c) on duty (d) off duty?	(b) Date of Discharge;		
 If a Court of Inquiry was held on an injury state:— (a) When 	(c) Cause of Discharge.		
(b) Where (c) Opinion of Court	(d) Particulars of Pension or Gratuity (if any)		
NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (seen by the Officer in charge of the case.	(Statement by the selection)		
Note.—The answers to the following questions are to be filled in by the them he will take care to confine himself exclusively to the medical aspect of the invalid's military and medical documents. He will also carefully distingues.	e Medical Officer in charge of the case. In answering		
10. If brought forward for invaliding, disability in respect o (Other disabilities should be reported upon in answer to ques	f which invaliding is proposed to be stated here. stion No. 19). If no disability enter "nil."		
1. Date of origin of disability.	C C C C C C C C C C C C C C C C C C C		
2. Place of origin of disability.			
3. 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. All Say and on her	etates he was lying in no mans fair		
sent John the line con all over him and few	er rowaguted to		
WL10700/1800. 800,000(E), 8/8 8 C/V PA	T.F. B 103.		

14. State whether the disabilities are

Note—(b) is only applicable to soldiers invalided at

(b) Change to United Kingdom?

Foreign Stations.

Medical Officer in charge of case.

ROYAL NEWFOUNDLAND REG.

(b) aggravated by

(a) attributable to

Date · Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause

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1	0/1		C C	*
WEDUNDLAND CONT.	FORTA 8	28 NOW 3 W) 	
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Army Form	m B. 103.		Regin	nental Nu	mber 4.261.
		Casualty Form Active			· ·
.	Reg	iment or Corps Yangal Ven		d	19-7-18
Ranks	Surname	ای مسند	nristian Name	A CANADA OL MADA A CAD	· ·
Religion	ન્હ ન	Age on En		2014 HARRIST THE TOTAL	CHARLES ASSESSED AND AND AND ADDRESS OF A
	Charles of the August of Sandara	Terms of Service (a)	- C	years	months
Date of pro	omotion to presen	t rank Date of a	ppointment to lar	ice rank	•••••
Extended		Re-engaged	Qualification (b)		
5		Re-engaged	or Corps Trade a	nd rate	•••••
Occupation	& islay	man - H	440	PARTY REPORT	ature of Officer
	Report		THE REPORT OF THE PARTY OF THE	7	
	- I	Record of promotions, reductions, transfers, easualties, &c., during active service, as reported on Army Form B 213, Army Form A, 38, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of	Remarks Taken from Army Form B. 213. Army Form A.36
Date	From whom received	The authority to be quoted in each case.		Casualty	B. 213, Army Form A.36 or other official documents.
Many area		A Z Embarked	9 1111	918	
			- 2 JUL	10.10	
		28-6-18. Disembarked	1 3 JUL	1918	
-					
De la la		Joined Battali	or field	9-7-18	Buzd. 13/71
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1	Courses		Doulaque	25/10/18	HA 3088=
11				0	· <u>· · · · · · · · · · · · · · · · · · </u>
11/18	moo	a Sugland "B".	Mance	13/1/0	Tree

(a) In the case of a man who has re-engaged for, or collisted into Section D. Army Reserve, particulars of such re-engagement or collistment will be entered.

(b) Signaller, Shoting-Smith, &c.

W. SEZT-M2003 1000m 7/17 (25886) C. P. & S., Ltd. Forms B./103 E/1555.

(P.T.O.

No 2 Medical Board Base Depot.

INSTRUCTIONS FOR MEN PROCEEDING TO ENGLAND.

No. 4241 Renk. pte Name. Simms A.
Unit. 1/ Newfoundland.
You will proceed to ENGLAND today the 12/11/18 , reporting to
the M.L.O. S/S " 'Lydia' " on the left bank of the
River opposite petail Issue office at 7/30 am
On arrival at SOUTHAMPTON you will report to the Embarkation
Offices for the necessary warrant to convey you to
where you will report to the O.C. Depot of your Unit. The unconsumed portion of the current day's rations and THREE
day's rations will be carried on the person.
AUPHORITY. D.A. G. C.R. No. 1858/278 dated 24/27/16.
REASON. 18' Personnel.

12

/¹¹/1918.

Major.

PENSION COMMISSIONERS FOR NEWFOUNDLAND

Hon. J. A. CLIFT, K. C., C.B.E. Major W. H. Parsons, M.C. R.A.M.C.



In reply refer to

St. Johns,

May 26th.1921

Dear Capt .Murphy,

I have to acknowledge your letter of the 16th. enclosing one from Dr. Hayden having reference to the case of 4261 Arthur Simms.

His file shows that he was discharged 3-5-19 as A I having served 515 days. Capt Officelly examined him on Jan.8/19 and his report is that there was nothing abnormal in the lungs but that he complained of pain on the right side.

His B 103 States that he arrived in Epgland on France
July 5th. Joined the Battalion on the 9th. and was sent to the
27 F.A. with W.Y.D. 24-9-18. Was discharged to Rest Camp 25-10-18
and to England 12-11-18 and from there to Winehester.

I would like to get a more definite statement fro the Doctor as to the date he actually reported to him and his findings at that time.

You will note that it is practically two years since Simms was discharged and it is very difficult to judge in such cases, but we will go into it carefully and do what we can.

Yours Faithfully

May 17,1919

#4261 Pte. Arthur Simms.

St. Anthony

Dear Sir:-

Please find enclosed "Discharge Certificate Lo. 2221."

Yours truly

Paymester & 0.1/c Records

	PROCEEDINGS ON DISCHARGE
1.	No. 426 t. Rank Private Name Surum atter. Intended place of residence. St authory.
2.	Occupation Disherman: Classification of soldier E Medical Category A.I.
3.	The above named man is discharged in consequence of DEMOBILIZATION. Fligible 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 Comanding Discharge Depot The Royal Newfoundland Regiment
	CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE
5.	I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.
	Place and date .S.T. J.OHN'S. Signature of soldier
	MAY 1 1919 Signature of witness
6.	CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER I hereby certify that I am in a position to resume civilian occupation immediately on discharge. Place and Date ST. JOHN'S. Signature of soldier Signature of witness
	CTATEMENT OF SERVICE
7.	Enlisted for service 19-12-17. Discharged from service 3-5-19. Plus 14649 Service 5/5.
0	APPROVAL OF DISCHARGE
	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. Place ST. JOHN'S.
	Officer Commanding Discharge Depot The Royal Newfoundland Regiment. Date
	The discharge of bove mentioned policy is hereby confirmed Mowley least Place May 17/1919. Officer ilc Records The Royal Newton Indian Regiment
	I II I POA . I

Report of Demobilization Travelling Board, held on soldier for

Class for Demobil- ization		Report of Demobilization Travelling Board, held on soldier for
16/		discharge.
Discharge Depot: Headquarters T	he Royal Newfoundland Date	30.4.19
Regimental No. 5 4261.		
	mrkur /	n i
Address	<i>M</i>	ensery
Present Medical Category	Z	
Reco	ommended for:— $\begin{cases} (a) & I \\ (b) & S \end{cases}$	mmediate discharge
	(RJI Lait Capt.
	Members of Board	Senior Medical Officer
		2w Burden
		M . O. De pot

DEMOBILIZATION OF
Reg. Nov. 64 Rank Name flagours Atollegy
Date of Entistment / 9 - 1 2 - 1) Address Misselfory District Bartis
Occupation toolor many Classification for Discharge. Ty. 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
B 179 do srd
B 179a D 400C Form K do 4th " 5
B 179c. B 120. M 93
of the line
Date. O. C. Discharge Depot.
PARTICULARS FOR DEMOBILIZATION
TAXTOURING FOR DEMODIBILITY
r. Civil Re-Establishment.
I amin a position to resume civilian occupation.
Tail in a position to resume civinal occupation.
and the state of t
Particulars passed to Vocational Officer for information and action.
Date
2. Clothing.
Certified that Clothing Regulations have been complied with:-
(a) Clothing Allowance payable to the state of the state
(a) Clothing Allowance payable (b) Clothing Supplied Cliffe Courton
Date _ 5 - 19 Oilc. Re-clothing.

3. Transportation and Release Certificate.	P. 5.72
The above named has been provided with T	# 18
at	Certificate No
, ,-	la fine 1
Date	Harry Jan Jan
	Demobilization Officer
	U Santa
4. Pay and Allowances.	and the property of the second to the last the graph
The herein named soldier's accounts have b	een correctly balanced and all matters in connection
therewith settled. He has received pay and al	lowances to
1-5-19	um - 11
Date	Depot Paytgaster.
	Depot raymaster.
Discharge enground for	5-191
Discharge approved for	
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	do 2nd " 3 12
B 178a D 400A B 1915	
B 179 D 400B Form L	
B 179a D 400C Form K	do 4th
B 179b B 103 ME 2	The state of the s
B 179c B 120 M 93	
9 5-19	ASI Soul.
Date	1 the most feely
	Demobilization Officer.
ADDROVED	
APPROVED. Documents as above forwarded to:—	
	1
Officer i c Records. Board of Pension Commissioners.	•
with following additional documents	Commence the Commence of the Street, the Street, St. 1991.
. Eligible	for War Service Gratuity
, Eligible	IOI Wat German
Carried State of the Control of the	- 111 m
MAY 3 1919	1. It. atail Capi.
Date	O. C. Discharge Depot.
Received the above noted documents from O. C. Discha	rge Depot.
11.	Section 2 de la 1816 d
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 fellows:

To serve forme occupation

icer or his Representative.

author Simo

Signature of Man

Reg. No. 4261

/ -

Date Hay 181- 1919



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 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 ather Simus Regiment from which discharged Royal Newfoundland Intended address Stanthony, St Barbe. Regimental number 4261 Height on discharge 5 Feet 8 Color of hair on discharge Black Complexion Fan Color of eyes Blue Descriptive Marks — Figure on discharge medium Christian name of Father William Christian name of Mother Amie. Wife's maiden name in full -Date and place of marriage Place and date of soldier's birth Stanthony, July 11 1899 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) author Jinny

(Rank)

Station Stolus

Date 30 - 4-19

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.

Medical

Station

Date

Delase pay to Lieut. Col, W. F. Audell the sum of Seventy Sollars from my war Service Gratuity a sinons Paymaster Phivate Alouis Mea 1,0 May 1919

DEPARTMENT OF HIJITIA. 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.

되었다고 있다면 하다 그 아이들에 살아왔다면 가게 되었다. 그 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은 사람들이 가득하다면 되었다.
A complete reply must be given to every question in this Declaration. There must be no blanks and no dakhes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.
on completion this Declaration is to be returned to THE OFFICER I/C
RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.
Christian none. Attlus
3. Renk. Private
6.Address in full to which future payments of gratuity are to be
forwarded. Startland.
6.Date of enlistment in the Regiment. December 1917
7. Name of dependent, if any, to whom Separation Allowance is being
issued, or was being issued, immediately prior to your discharge
hat applicable
8. Relationship of such dependents. hat applicable
9. Address in full of such dependents. hat applicable
10.1s 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, II so, give dates and
perticulars of such service. Lot applicable
12. Give total length of time which you served on active service,
whother in Hild.or Oversces. One Fear and fine
month.

13. Have you had more than one enlistment? If so, give particulars
of discharge and re-enlistments, and under what regimental numbers.
hat 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
15. Have you been issued with a War Service Badge?
16. Have you, during the present war, served in the Imperial Borees.
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
upplicable.
18. Did you revert Overseas to a rank lower than the substantive
renk hold by you on your arrival in England?
(b) If so, was such reversion in consequence of Misconduct or
inefficiency? hot appleasible
19. Are you now serving in the Rost .? If not give?- (a) date
of discherge My 1919. (b) Reason for discharge Beneleligies
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
. Olardon Belquim
21.(a) Are you receiving treatment from the Givil Re-Establishment
Com.(b) If so are you in receipt of full pay and allowences from
that Corrittee. a' No - B' NO
And I take this solemn decleration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under Oath.

-3-

Signature of Applicant: Arthur & Service

Place of Residence: At anthony

Declared before no at: At John

This | all deport has 19/18

Robert also p

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

	PO	ST DISCHAF	RGE PAY. :		
Date	paid	Paid Soldier	Paid Dependent	War Service Gratuity - Umes	Not mount due
					av.
444	C	ertified (Correct.	Роу	master.



THE ROYAL NEWFOUNDLAND REGIMENT

HEADQUARTERS

St. John's, Newfoundland,

February 27th 1919

From Officer Commanding Discharge Depot.

To Paymaster &Officer i/c Records Militia Department.

426I Pte.A.Simms.

The above noted man has made application to havehis allotment of 70¢ per day cancelled from and including February Ist. 1919. Please carry out and advise.

His Meferty Jouesment William Aguires of pillies Island, for Board & Godgy furnished to h Simus No 4261.
Return soldier 42. Dage Board & Godging of \$1.50 per deg ACCOUNT BY TO CHEET IN CHEET OF Sipley

THE CHOSEN -- INT. OF THE UNILLIES

PAY LEURSA -- INT. OF THE UNILLIES

THE TANKER WILLIAM

THE TANKER OF THE Stepending Majicher Pillep Sola Jun 19/19

July 11th 1919.

Mr. Wm. Squires.

Pilley's Island, N.D.B.,

Nfld.

Dear Sir:

I enclose herewith cheque for sixty
three dollars (\$63.00) due you for Board & Lodging furnished to #4261.A.Simms.

Yours truly,

Capt.

Paymaster & O.i/c Records.

RS/.

hunister of hilitia

Left 25 th 1919

Leas Sir. I have in my possess ion eighty how Pounds of English money in moter which I brought with mexion England when I came home demobilised about a month ago and the sate of exchange is so low here it would mean the loss of a few dollars, if I change Them here, ban you hindly change them for me and give me a bheque for anywhere near full value. Trusting a reply at your earliest convience and trusting you will oblige me if possible. Tremain respectfully four

J. Quarter Please deliver to bearer 4261 Demms. 1-poBoob. But Referwent 120 Dhis and charge to account of

C.R. 4261

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAT 1914-1919.

I certify that I have received an issue of 2 inches of Riband of British War Medel-1914-1919.

Name ... A .. Dimmes

Place St. ednthong.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Number of Short City

Forms B 121. Regiment of 1 & New Jonnstand

ignature of O. C. Company Moulufy

170	39.				Regiment of		i misjauk		gnature of O. C. Company	17
	No. #361 Joined Joined Joined Joined		ns G		Enlistment Age on / g years 3 months Place and Date of Enlistment / g - 3 - 7 Period of with Colours 15 0 years. With Reserve 3 6 5 years.	Religion 6. of . f.	Good Conduct Badges, Ser		lciency pay	
	Place	Date of Offence	Rank	Cases of Drunk- eness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
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					Demolilized	A. C.	17 5			
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			to me							
								1		
					To be carried over					

14161

Demobilization Ea

DEMOBILIZATION OF	of a
Reg. No. 44-2 al Rank Name	fammes tattaget
Date of Enlistment, dQ 12 17 Address	Loudyney District A. Day h.
Occupation	
Recommendation S.M.B Disability R.	ating
Passed to Demobilization Officer with following documents:—	•
N.F. P 36	
B 179 D 400B Form L do 3rd	
B 179a D 400C Form K do 4th	" 5
B 1796 B 103 ME 2	
Date	O. C. Discharge Depot.
r. Civil Re-Establishment. I amin a position to resume civilian occ	upation. author Sinns
Particulars passed to Vocational Officer for information as	nd action.
Date	
a. Clothing.	
Certified that Clothing Regulations have been complied w	įth:—
(a) Clothing Allowance payable	
(b) Clothing Supplied	alle ton ston Sund
Date - 5 - 19	O ilc. Re-clothing.

3. Transportation and Release Certificate.				•
The above named has been provided with	经验产生 经验的	THE PARTY AND IN		is home
at and Rele	ase Certificate N	0	issued.	
1-5-10	1	A Marie	mp_	1
Date	f	Demobilla	otron Officer	/
- L	- 0			
4. Par and Allowances.				
The herein named soldier's accounts have	e been correctly	balanced and a	ll matters in con	nnection
therewith settled. He has received pay and	allowances to .	11-5-	- 14	acusa(
1-5-10		11	mil i	
Date	es arman anti-ter	/J.	Markett	
		Depot P	aymaster M	dex i
Discharge approved for	- 5 - 1	9		
	,		Ters ALFENDER	
Forwarded with following documents to O	.C Discharge De	pot.	2.0	
N.F. P 36	/ N.F. Med	D.F. 1		
	/ Board 1st		17	
B 178a D 400A B 1915			5.	
B 179				
B 179a D 400C Form K		" 5		
B 179b B 103 ME 2		" 6		
B 179c B 120 M 93				
B 1180			b"	
2-5-19	2	de	mente	in
Pate	1	Demo	bilization Officer	
Y			de la constantina della consta	
APPROVED.	M. Santing-Live		Althorough Day	
Documents as above forwarded to:-				
Officer i c Records. Board of Pension Commissione	rs.			
with following additional documents.				- 1
Glici	ble for W	ar Servic	e Gratuit	V
Dugi	010 101 44	ar ourse	o Gravare	
		<u></u>	1	
_ MAY 3 1919.	A LONG TO	P.J.	tul a	μ.
Date		O. C	Discharge Depot.	•••••
	10 10 100		• · · · · · · · · · · · · · · · · · · ·	1.33(5-if (5-))
Received the above noted documents from O. C. Dis	charge Depot.	HAPP	\sim	
		Ithe hear	In och	4
nlitia		2 11	. 0	0
Date	To	Thex	1/x New	105
	1	// //	an and	>

Reg. No. 476	1. Rank to Name Simms . a.	
Attested	Address It ankhory	
Allotment	Allottee	7.
Returned on S.S.	Returned from Overseas 7-2-10	··············
\\ \tag{\tag{\tag{\tag{\tag{\tag{\tag{		
1.1.19.	PASSED TO DEMODILIZATION OFFICE	ER
3.1.19.	DISCHARGE APPROVED ON DEMORILISATION.	
Kieg en Ass		••••••