



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3430 Name Alexander Soper Corps Artillery

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Alexander Soper
2. What is your full Address? 2. St. John's, Nfld.
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 19 Years 2 Months
5. What is your Trade or Calling? 5. Fighting
6. Are you Married? 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. No
8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
9. Are you willing to be enlisted for General Service? 9. Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? 10. { Name
Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? 11. Yes



I, Alexander Soper, 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.

6 Jan 1916 Alexander Soper SIGNATURE OF RECRUIT.
..... Herold Mitchell Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at on this 19 day of January 1916.

Signature of Attesting Officer Thos. R. Opre

† 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 compiled with. I accordingly approve, and appoint him to the
If enlisted by special authority, such will be attached to the original attestation.

Date 1916

Place

} Approving Officer.

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.

‡ Here insert the "Corps" for which the Recruit has been enlisted.

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Andrew Popper
 Apparent age 1 years 2 months. Height 5 feet 8 inches
 Chest Measurement { Girth when fully expanded 37 1/2 inches
 Range of expansion 4 1/4 inches
 Distinctive marks _____



INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Maryann Day
Carin Hills | Relationship Mother (late)

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									
Joined at					on				

Total Service towards Engagement to _____ (date of discharge) _____ years _____ days
 " " " Pensions " _____ [" "] _____ " _____ "



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3430 Name Alexander Soper Corps Methodist

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Alexander Soper
2. What is your full Address? 2. St. John's Bay
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 19 Years 2 Months
5. What is your Trade or Calling? 5. Working
6. Are you Married? 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so, which? 7. No
8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
9. Are you willing to be enlisted for General Service? 9. Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... 10. { Name
Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? 11. Yes

I, Alexander Soper 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.

Alexander Soper SIGNATURE OF RECRUIT.
David Mitchell Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly stated 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 19 day of Jan 1917

Signature of Attesting Officer Charles R. Opre

† 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 1st

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)

13
17
21
17
99

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Alexander Pope
 Apparent age 19 years 2 months. Height 5 feet 8 inches
 Girth when fully expanded 37 1/4 inches
 Chest Measurement Range of expansion 14 1/4 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Maryann Day
Clarinda | Relationship Mother (for)

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 19-1-17

Joined at St. John's on January 19

Discharged April 17, 1919

Embarked St. John's train to Halifax N.S. 17 Embarked for B.L.S. 6
Admitted 89th Seaboard 22 Discharged to reinforcements 2 4 8 Wounded 12
Admitted 10 ccs. 13 W. to High 12 Invalides to England 13 Admitted 5 19
Wardsworth 13 Embarked from port to Holy W. 13 Embarked for
B.L.S. 9 Joined B.L.S. France 19 Admitted 4 ccs. 14 D. 25 Admitted
3 ccs. 11 Wounded 12 to 5 ccs. 11 Admitted 5 19
for demobilization 30-1-1919 Arrived home from 12-1-1919
Demobilization 17-4-1919

Total Service forfeited as above.....

Total Service towards Engagement to 17-4-19 [date of discharge] 2 years 89 days

" " Pensions " " " " " " " "

C.R. 3430

Extract from Orders by Major G.T. Mathias, D.S.O. Commdg.
1st Battn. Royal Nfld. Regt. 20-8-18.

The following joined the Battalion 19-8-18 and is posted
to C. Company.

3430 Pte. A.Soper.

COPY

Demobilization Form 2.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 3430 Rank Pte. Name Soper, Alex.

Intended place of residence. Random Island

2. Occupation Fisherman

Classification of soldier B Medical Category E

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 ST. JOHN'S (sgnd) H. Mews, Lt.

Date APR 2 1919 for Commanding Discharge Depot
The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place and date ST. JOHN'S (sgnd) A. Soper

APR 2 1919

Signature of soldier

" J. H. Snow, Lt.

Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place and Date ST. JOHN'S (sgnd) A. Soper

APR 2 1919

Signature of soldier

" W. J. Eaton

Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 19-1-17 No of days on Military

Discharged from service 3-4-19 plus 14 days Service 819

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S (sgnd) R. H. Sait Capt.

APR 3 1919

Officer Commanding Discharge Depot
The Royal Newfoundland Regiment.

Date

CONFIRMATION OF DISCHARGE

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

Place

Date Officer i/c Records
The Royal Newfoundland Regiment

The Royal Newfoundland Regiment



PROCEEDINGS ON DISCHARGE

1. No. 3430 Rank Private Name Soper, Alex
 Intended place of residence Random Island

2. Occupation Fisherman
 Classification of soldier B Medical Category E

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 ST. JOHN'S

Date APR 2 1919

H. H. H.
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place and date ST. JOHN'S

SUBJECT TO ADJUSTMENT OF SERVICE

Signature of soldier

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

Signature of soldier

Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 19-1-17 No of days on Military
 Discharged from service 3-4-19 Plus 14 day Service 819

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. Lant
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

Date APR 3 1919

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place St. John's

M. Bowley
 Officer i/c Records
 The Royal Newfoundland Regiment

Date April 17/1919

A.F.B 2079/1972

Casualty Form—Active Service.

Regiment 1st. Royal NewfoundlandRank Plt Surname Soper Christian Name AlexanderReligion Methodist Age on Enlistment 19 years 2 months.Enlisted (a) 19/1/17 Terms of Service (a) Duration Service reckons from (a) 19/1/17

Date of promotion to present rank _____ Date of appointment to lance rank _____

Extended Re-engaged Qualification (b) _____
or Corps Trade and Rate _____Occupation: Fisherman

Signature of Officer 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				
		Embarked ...		<u>9.8.18</u>	
		Disembarked ...			
		ARRIVED D	<u>I.B.D.</u>	<u>13.8.18</u>	
		Joined Battalion		<u>19.8.18</u>	
	<u>44 CCS Ad Piro</u>	<u>✓</u>		<u>25/10/18</u>	<u>808401</u>
	<u>3 Clasp. Hq</u>	<u>✓</u>	<u>Boulogne</u>	<u>" "</u>	<u>Ad 30844</u>
	<u>7 Co. Hq</u>	<u>✓</u>		<u>30/10/18</u>	<u>Ad 3108</u>
	<u>"S" LPO</u>	<u>✓</u>	<u>Amiens</u>	<u>7/1/18</u>	<u>Ad</u>
		Transferred to U. K.			<u>Env. 3/18</u>
		<u>for Re-patriation</u>			
		<u>Int</u>			
			Officer i/c No 1 Infantry Section		<u>Capt. Lt Col.</u>
			G.H.Q. 3rd Echelon,		

(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. Signatur, Shering-smith, &c.

(P.T.O.)

Note off in: - Mother (for) Day Mrs Mary Ann Clarendon I.D. Hqd

[2000-2-2-19]



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 *Alexander Super*

Regiment from which discharged *Royal Newfoundland*

Regimental number *3430*

Intended address *Trinity Bay Random I.D.*

Height on discharge *5* Feet *8*

Color of hair on discharge *Dark Brown*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *Medium*

Figure on discharge *Medium*

Christian name of Father *Nancy Ann*

Christian name of Mother *Nancy Ann*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Random I.D. Trinity Bay*
Feb 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)

Alexander X Super

(Rank)

Station

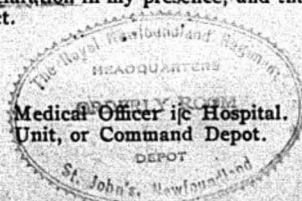
ST. JOHN'S.

Date

24-3-19

Walter R. Edwards

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

Ward _____ Hospital. _____
 No. of Bed _____ Date May 30th 1918

Rank and Name.	2nd <u>Bull</u> Corps.	Facility - Raved.
<u>34</u> <u>Alper.</u>	<u>Royal Newfoundland</u>	<u>B</u>

HISTORY OF CASE. Completed by M.O. i/c case.)

REPORT ON RESULT OF X-RAY EXAMINATION. (To be completed by Radiographer.)

No. of Plate _____

Plate shows rifle bullet lying almost in contact with external surface of middle $\frac{1}{3}$ of shaft of femur.

Signature of M.O. Max

Date 30-5-18

Signature of Radiographer H. C. Aldridge

Date 30 MAY 1918

MAJOR, R.A.M.C.T.

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

MEDICAL HISTORY

OF

Surname SoperChristian Name Alexander

441 19-1-17

Table I.—GENERAL TABLE



Birthplace:—Parish

County

		SPECIAL RESERVE.		REGULAR ARMY.	
Examined	on 19 day of Jan 1917	on	day of	191	
	at St John's Hfd	at			
Declared Age	19 years 2 days		years		days
Trade or Occupation	Fisherman				
Height	5 feet 8 inches		feet		inches
Weight	131 lbs.				lbs.
Chest Measurement	Grith when fully expanded	37 1/4 inches			inches
	Range of Expansion	4 1/4 inches			inches
Physical Development					
Vaccination Marks	Arm	Right	Left	Right	Left
	Number				
When Vaccinated					
Vision	R.E.—V= 6/6		R.E.—V=		
	L.E.—V= 6/6		L.E.—V=		
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)		
(b) Slight defects but not sufficient to Cause rejection	(b)		(b)		
Approved by (Signature)	W. Burden				
(Rank)	Lieut				
Enlisted	at St John's Hfd				
	on 19 day of Jan 1917	on	day of	191	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.	
	4/1 Hfd Regt	3430			
Transferred to	Royal Newfoundland				
Became non-effective by					
(Signature)		on	day of	191	
(Rank)					

Table II.—Only for admission to hospital or to the sick list in case of Warrant Officers treated in quarters.

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
8th LONDON GENERAL HOSPITAL MARLBOROUGH.	13	4	18	27	4	18	G.I. W R thigh penetrating	14	Wounded in France 10-4-18 by a bullet in part of thigh.	G.C. Hall Capt RMC



Department of Militia, Newfoundland
Medical Department

Medical Report on an Invalid

NOTES:—

- (a) This report is solely concerned with Pensions.
- (b) A single copy only is required.
- (c) "Aggravated" being now a technical term, carrying right to pension, discrimination in its use is essential.
- (d) Be as brief as possible compatible with lucidity.
- (e) Avoid dubiety—"perhaps" "possibly" "might" and the like.
- (f) Only sufficient clinical data need be given to establish the degree of disability and assist the Board in arriving at a decision.

STATEMENT OF CASE

Station *St John's Nfld*

Date *March 27th 1918*

- | | |
|-----------------------------------|--|
| 1. Unit <i>Royal Newfoundland</i> | 5. Age last birthday <i>21</i> |
| 2. Regimental No. <i>3430</i> | 6. Enlisted on <i>15th Jan. 1917.</i> |
| 3. Rank <i>PL</i> | at <i>St John's</i> |
| 4. Name <i>Soper. Alex.</i> | 7. Former trade or occupation <i>Fisherman</i> |

8. Disability *l. SW. R. Thigh.*

Penetrating

l. SW. R. leg.

9. History *wounded 10/4/18. R. Thigh. Bullet.*
In 3rd Bn. Gen Hp. 13/4/18 to 27/4/18.
wounded again 14/5/18. R. leg. Shrap. In Hp. 2 weeks.

10. What is his present condition?

(This is the important question. Be brief—the clearer the case the less need be written. Read note f above.)

Wounds well healed
cause no disability
General health good



11. Was sanatorium advised and refused?
operation

no

12. Do you recommend discharge as
permanently unfit?

yes

Signature

Archibald
for

Rank or Qualification

M.D. Report

Remarks if any by Officer in Hospital.

Place

Signature

Date

Rank

Opinion of the Medical Board



In para. 13, the President should write "may" or "cannot" at x
Erase inapplicable words

13. For pension purposes, the disability x *may* be considered as aggravated by:—
due to

(a) Service during this war. (b) ~~Climate~~ (c) ~~Ordinary Military Service~~
Remarks if any:—

14. Does the Board concur in preceding report? (see Sect. 10) If not give differing opinion and additional findings.

*Scars of leg & thigh not causing any trouble
no implication of nerves or bone*

15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market?

(b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a full livelihood in the general labor market lessened by that portion of his disability to or incurred during service?

(State in percentage.)

Remarks if any:—

16. Is the disability permanent?

17. Has the disability been aggravated by (a) Intemperance (b) Misconduct

18. The refusal of operation is:— (a) Reasonable
sanatorium (b) Unreasonable

Remarks if any:—

19. If fit subject for Hospital do you recommend admittance to

{ General Hospital,
Naval and Military Con-
valescent Hospital,
Jensen Tuberculosis Camp.

20. We recommend discharge from the Army
retention in

Remarks if any:—

Signatures

President

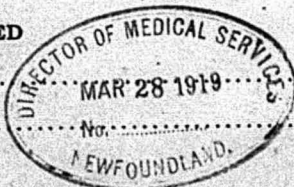
Place

Date

APPROVED

Station

Date



Administrative Medical Officer



Department of Militia, Newfoundland

Medical Department

Medical Report on an Invalid

NOTES :

- (a) This report is solely concerned with Pensions.
- (b) A single copy only is required.
- (c) "Aggravated" being now a technical term, carrying right to pension, discrimination in its use is essential.
- (d) Be as brief as possible compatible with lucidity.
- (e) Avoid dubiety—"perhaps," "possibly," "might" and the like.
- (f) Only sufficient clinical data need be given to establish the degree of disability and assist the Board in arriving at a decision.

STATEMENT OF CASE

Station....ST. JOHN'S.....

Date.....MARCH 27TH 1919.....

1. Unit *Royal Newfoundland*

5. Age last birthday 21.

2. Regimental No. 3430

6. Enlisted on 19TH. JAN. 1917.

3. Rank PTE.

at ST. JOHN'S.

4. Name SOPER ALEX.

7. Former trade or occupation FISHERMAN.

8. Disability

G.S.W. R. THIGH PENETRATING.

G.S.W. R. LEG.

9. History

WDED. 10/4/18 R. THIGH BULLETT. IN 3RD. L.G.H. 13/4/18. TO 27/4/18. WDED AGAIN 14/6/18. R. LEG SLIGHT IN HP. 2 WEEKS.



10. What is his present condition?

WDS. WELL HEALED & CAUSE NO DISABILITY GENERAL HEALTH GOOD.

(This is the important question. Be brief—the clearer the case the less need be written. Read note f above).

11. Was sanatorium advised and refused? **NO**
operation

12. Do you recommend discharge as permanently unfit? **YES.**

Signature

ARCH. C. TAIT.

Rank or Qualification

FOR M.O. DEPOT.

Remarks if any by Officer i | c Hospital.

Place

Signature

Date

Rank

Opinion of the Medical Board

In para. 13, the President should write "may" or "cannot" at x
Erase inapplicable words



13. For pension purposes, the disability x **MAY** be considered as aggravated by:—
due to
(a) Service during this war. (b) Climate. (c) Ordinary Military Service
Remarks if any:—

14. Does the Board concur in preceding report? (see Sect. 10). If not give differing opinion and addi-
tion if desired. **SCARS OF LIMB & THIGH NOT CAUSING ANY TROUBLE NO IMPLICATION OF NERVES OR BONE**

15. (a) **THE ENTIRE DISABILITY**—To what extent is his capacity lessened at present for earn-
ing a full livelihood in the general labor market? **NIL.**

- (b) **PENSIONABLE DISABILITY**—To what extent is his capacity at present for earning a full
livelihood in the general labor market lessened by that portion of his disability to or incurred
during service? **NIL.**
(State in percentage.)

Remarks if any:—

16. Is the disability permanent?

17. Has the disability been aggravated by (a) Intemperance (b) Misconduct

18. The refusal of operation is:— (a) Reasonable
sanatorium (b) Unreasonable

Remarks if any:—

19. If fit subject for Hospital do you recommend admittance to { General Hospital
Naval and Military Con-
valescent Hospital,
Jensen Tuberculosis Camp.

20. We recommend discharge from the Army
retention in

Remarks if any:—

N.S. FRASER.

J.S. TAIT.

President

Signatures

L. PATERSON. MAJOR.

ST. JOHN'S.

Place

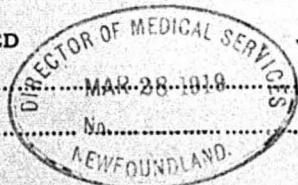
MARCH 28TH. 1919.

Date

APPROVED

Station

Date



(SGD) CLUNY MACPHERSON. MAJOR.

Administrative Medical Officer.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 3430 Rank Plt Name Superalex
 Date of Enlistment 1917 Address Random District Trinity
 Occupation Fisherman Classification for Discharge B Medical Category E
 Recommendation S.M.B. Permanently unfit Disability Rating Nil
 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.....	D 400C.....	Form K.....	do 4th.....	" 5.....
B 179b.....	B 103.....	ME 2.....		" 6.....
B 179c.....	B 120.....	M 93.....		

Date 1.4.19

H. Mews H.
for O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am.....in a position to resume civilian occupation.

a Super

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied Amelioration

Date 1-4-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R.1143 9 429 to his home at London - Lee and Release Certificate No. 1742 issued.

Date 12-4-19



J.A. Crawford
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 17-4-19

Date 2-4-19

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACT

J.A. Crawford
for Depot Paymaster.

Discharge approved for 3 4. 19

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36.	B 268.	B 121.	N.F. Med.	D.F. 1.
F 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 2. 4- 19

J.A. Crawford
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

Date APR 3 1919

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

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

12/4/19

J.A. Crawford
for Officer i/c Records

No. 3430 Name Soper A.

~~Sgt. Batty,~~
~~or Company~~

"N" C ^{ORDS} Royal Newfoundland Reg

Date of enlistment

19. 1. 17

G.C. Badger

Service or
Proficiency Pay

Date of last entry in
Company Conduct Sheet } 12.9.17

No. and date
of last drunk)

Period not reckoning towards
freedom from extra fine

Sheet No.

Signature O.C.
Company, etc.

Character

[illegible]

Army Form B. 122

(P.T.O.)

3430
No. ~~255~~ Name *Soper Alexander* Sqr., Batty.,
or Company } *C B* Corps *1st Newfoundland* Date of enlistment } *7.1.17* G.C. Badges } Service or Proficiency Pay }
Date of last entry in } *12.9.17* No. and date } Period not reckoning towards } Sheet No. *1* Signature G.C. } Character }
Company Conduct Sheet } of last drunk } freedom from extra fine } Company, etc. } *J. R. Steele 27 1/2* } *Good*

[illegible]

Army Form B. 122

Army Form B. 121.

Soper Alex

3430

Pay Dept

A. Soper

C.R. 3430

P. x P.O.

COPIES SENT		
TO	NO	DATE
M. OF M.	11439/24	17/2/88
O.C. 1st		
2nd		

NEWFOUNDLAND CONTINGENT

NFP/82.

SEPARATION ALLOWANCE

1ST NEWFOUNDLAND REGIMENT
JAN 1918

1. Regimental No. and Rank

3430

Private

Name

Alexander Soper

Unit

Nfld. Regt.

2. Full Name of Dependent. Mother

Mary Ann Day

3. Address

Lady Cove
North West Arm
Trinity Bay

4. Have you made previous claim for Separation Allowance? If so, state particulars.

No

5. Is Separation Allowance being paid on your account to anyone in Nfld or elsewhere?

No

6. Date of Marriage.

7. Name and Address of your last Employer.

Fisherman

8. The amount of your salary or wages immediately prior to Enlistment.

\$300.00 per year

9. Are your wages or any portion being paid by your employer during your absence?

No

10. If paid, what is the amount per month?

Nil

11. Name of Corps prior to enlistment in the Nfld Contingent.

Nil

I CERTIFY that the above is a true statement.

Alexander Soper

Witness
Officer
Lieut

Signature of Officer forwarding this application.

Woodhouse

Unit

Date



COMM. 1ST NEWFOUNDLAND REGT.

LIEUT. COL.

TO, - The Chief Paymaster,
Royal Newfoundland Regiment,
58 Victoria Street,
London, S.W.

Sir:-

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

Commencing on 1st July 1918.

Regtl. No.	Rank,	Name	Amount	Signature.
3430	Pte	Saper. A.	\$250	A. Saper

I have the honour to be, Sir,
~~for the Committee,~~
Your obedient servant.

Date

12/7/18

Witness Cpl Head
Alex & Saper
Mark

No. 8325/721

From

Chief Paymaster & O. i/c Records,
Newfoundland Contingent,
58, Victoria Street,
London, S.W. 1.

138669
NEWFOUNDLAND CONTINGENT

To

Officer Commanding,
2/Bn Royal Nfld. Regt.

Winchester.

~~SUBJECT~~

27th May 1918

Subject: 3430, Pte. A. Soper;

With reference to the following telegram (4698) from the Hon. Minister of Militia, received

Pay to 3430 Soper £5:0:0

Draft £ 5:0:0 is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

H. R. ...
Chief Paymaster & O. i/c Records.

Receipt hereunder.

Cham
LIEUT. COLONEL,
Officer Commanding,
1st Newfoundland Regiment

Received the sum of Five
Pounds on account of

cable remittance from Newfoundland.

Soper
No. 3430 Rank PC

No. 3430 Rank 1st Lt Name Soper J.

Pay	F.A.	Wkg	Total	N.F.D. 1/22
100	10		110	
Less Allotment			60	
Net Rate			50	

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£ s d		
						From	To					
Balance					Balance		21 st / ₁₇			4	5	3 ⁴
Acquittance Rolls		5	15	2 ¹ / ₂	Pay @ Net Rate	22 nd / ₁₇	27 th / ₁₈	127	50	63	50	13 0 11 ⁴
Hospital Advances		1	0	0	Ration Allow							17 6 ⁴
A.B. 64.					10 days @ 1/9							
P.&R.O. Payments												
6.15.2 ✓ 44/4/18 Cheque no 8018		11	8	0								

11-8-6

18-3-8

R/C
29/4/18



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Alex Saper, Regl. No. 3430

hereby agree, until further notification by me, and in similar official form to make an Allotment of _____ Dollars and Sixty Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons concerned, viz: m st

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.)

Officer Commanding

Company

(Sig.)

(Rank)

St John's
Feb 21 1917

C.R. 3430

Extract from Daily Orders part II, Depot St. John's dated April 19th. 19

The discharge of theu/n on demoblization has been CONFIRMED by
Officer i/c Records on 17-4-19.

#3430 Pte. Alex. Soper.

C.R. 3430

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, April 10th, 1919.

The discharge of the Undernoted on demobilization
has been APPROVED by O.C. Discharge Depot from 3-4-19.

3430 Pte. Alex. Soper.

C.R.

3430

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

The undernoted returned from Overseas and reported to
Depot 7-2-19.

Repatriated on A/C of Demobilization.

3430 Pte. Alex. Soper.

C.R. 3430

Extract from Nominal Roll of the Royal Nfld. Regt.
St. John's, Jan. 30th. 1919.

3430 Soper.

C.R. 3430

Extract from Nominal Roll of the Royal Rifle.
24-1-19.

The undermentioned who was transferred
from B.E.F. to the 2nd Bn., Winchester 19-1-19
awaiting Repatriation.

3430 Pte. A. Soper.

C.R. 3430

Extract from War Office List No. H. A. 31108.

ADMITTED 7 CON. DEP. BOULOGNE 30 Oct. 1918.

#3430 Pte. A. Soper.

P. U. O.

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

C.R. 3430

NO.1. RECORD OFFICE - H O U N S L O W.

LIST NO H.A. 31802.

DIS. TO 5 REST CAMP. ST MARTINS BOULOGNE EX 10 CON. DEP. 8 NOV.16

69652	Pte. Chambers W.	11/R. Surr.	Myalgia
11982	Pte. Edwards W.	12/E.Surr.	Myalgia.
27426	Pte. Luck C.P.	12/E.Surr.	P.U.O.
19737	Pte. Crookston D.D.	1/Cyc. Cps.	Influenza.
206769	Pte. Hull W.G.	2/4 Queens.	ICT R.Toe.
103921	Cpl. Hipwell A.J.	36/MG. X 24/Mx.	Gas Shell Phos.
60444	Pte. Blackley J.C.	1/7 Mx.R.	Wd. Gassed Must.
207912	L/C. Catley E.	10/Q.R.W.Surr.	Influenza.
32699	Pte. Bryan J.T.	19/Mx.R.	ICT Heel.
203023	Pte. Honeybone P.	33/Mx.R.	Adenitis Neck.
53451	Pte. Taylor W.J.	1/7 Mx.R.	SW Concussion.
22692	Pte. Laundon A.	19/Cyc.Corp.	Influenza.
67863	Pte. Barlow L.	11/R.W.Surr.	Myalgia.
113839	Pte. Smith M.	30/MG. x 9 Mx.	Gas Must.
20010	Pte. Millington J.W.	23/Mx.	Debility.
68665	Pte. Garrett R.J.	11/R.W.Surr.	P.U.O.
4550	L/C. Smith R.	23/Mx.R.	GSW Knee R.

15009	L/C Goode R.	17/Mx.R.	GSW Bttk.L.
651342	L/C. Smith A.R.	1/21 Lond.R.	Influenza.

DIS. TO DUTY (NEW DISEASE SUPERVENING) EX 10 CON. DEP. 8 NOV.18.

48279	Pte. Hazel H.	12/E.Surr.	GSW Face.
720620	Pte. Mabbutt W.	2/24 Lond.R.	Wd. Gas Sh. Must. Wd.

ADMITTED 10 CON. DEP. EXAULT 9 NOV.18.

25103	Pte. Whitby G.	11/Q.R.W.Surr.	Influenza. St.
26168	Pte. Colyear C.B.	23/Mx.R.	Myalgia. Mild.
202995	Pte. Payne H.R.	2/4 Q.R.W.Surr.	Dyspepsia. Mild.
48450	Pte. White J.J.	12/E.Surr.R.	Influenza. Mild.

NEW FOUNDLAND - EXPEDITIONARY FORCE.

LIST NO H.A. 31802.

3430 Pte. Soper A. 1/R.Newfld. P.U.O. Dis.to 5 Rest Camp.St.Martins Boulogne ex 10 Con.Dep. 8 Nov.18.



Handwritten signature or initials.

C.R. 3430

Extract from War Office List No. H.A. 31406.

ADMITTED 10 CON. DEP. ACAULT 1st., NOV. 1918.

3430
~~#2404~~ Pte. A. Soper.

P.U O. MILD.

C.R. 3430

Extract of Telegram to Synoptical London dated May 22nd. 1918.

Pay as follows:

3430 Soper

Royal Nfld, Regt.....5 pounds.

C.R. 3430

Extract from Daily Orders Part 2, by Lt. Col. R. A. Berners, D.S.O.
7-5-18.

The following having reported back from the 1st Batta. ~~4400~~ is
posted to "H" Coy.

3430 Pte. Soper.

6-5-18.

C.R. 3430

NEWFOUNDLAND CONTINGENT.

Extract of Casualties from P.&R.O., London dated April 29th 1918.

3430 Pte. A. Soper

ex 3rd. London General Hospital 27/4/18 *is posted fit for duty.*
Authority: A.Fs. W.3016 from 3rd. L.G.H.

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

MACHINE GUN CORPS.

LIST.No.H.A.21878.

39418	Pte.Swaine,S.	42-	M.G.Corps.	GSW.Scalp.R.	.DIED.in 14 Gen.H.Wimereux.12th.April.at.2-0.PM.
35353	L/C.Wrigley,J.H.	29-	M.G.Bn.	GSW.R.Thigh.Sev.	.Adm.14 Gen.H.Wimereux.12th.April'18.
88642	Pte.Wilson,W.	25-	do.	Spr.L.Ankle Sev.	.Adm.14 Gen.H.Wimereux.12th.April'18.
121871	" Denton,R.	40-	do.	GSW.R.Arm.Mild.	.Adm.14 Gen.H.Wimereux.12th.April'18.
98890	" Morton,H.	31-	do.	ICT.Foot.Mild..	.Adm.14 Gen.H.Wimereux.12th.April'18.

NEW - FOUNDLAND - EXPEDITIONARY FORCE.

LIST.No.H.A.21878.

3420	Pte.Soper,A.	1-	Newfoundlanders.	GSW.R.Thigh.Mild.	Adm.14 Gen.H.Wimereux.12th.April'18.
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No.TWO.RECORD OFFICE - EXETER.

LIST.No.H.A.21878.

27091	Cpl.Vickery,J.	7-	Somerset.	GSW.R.Leg.Mild.	.Adm.14 Gen.H.Wimereux.12th.April'18.
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ARMY ORDNANCE CORPS.

LIST.No.H.A.21878.

T/1610	Arm.S/Sgt.Bray,CF.	A.O.C.	R.Co.	N.Y.D.Mild.	.Adm.39 Gen.H.Havre.12th.April'18.
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ROYAL NAVAL DIVISION.

LIST.No.H.A.21878.

10360	Pte.Symes,H.	R.Marine Lab.Co.	Felliculit.	.Dis.to Unit.Havre.ex 39 Gen.H.12th.April'18.
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NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender

J.R.Bennett

Address

Militia Dept.

Line Number	Recd	By	Sent by	Check

Dated April 15th 1918.

To Mrs Mary Ann Day, Clarenville,

Regret to inform you that Record Office, London,
officially reports 3430 Pte. Alex Soper at Wandsworth
G.S.W. right thigh.

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

J.R.Bennett.

Minister of Militia.

FOR TYPEWRITER

C.R. 3430

Extract from Nominal Roll Draft No. 32: 111 Other Banks from 2/1st
Newfoundland Regt., Ayr, 1/1st Hfld. Regt., B.E.F. Embarked
Southampton 6/11/17.

3430 Pte. Soper, A.

MP.

C.R. 3430

Extract from Nominal Roll embarked St. John's Pre S.S.Florizel
17.3/17

#3430 Pte. A. Soper.

3430
C.R.

Extract from Daily Orders Part 11 Unit The Royal Wfld.
Regt., St. John's, Jan. 19th, 1917.

3430 Pte. Alexander Soper.

Attested this day, posted to E Coy., and assigned number
as shown

EXTRACT FROM STATEMENT OF ACCOUNT TO 30-1-19 FROM PAY AND

RECORD OFFICE, LDONET

3430 Pte. Soper, A.

Dr. Bal.

13/9

plus 1 day's pay (31-1-19)

This transferred to Pay Office 3-4-19

Reg. No. *34 2020* Rank *Pte* Name *Sapper Alex.*
Attested Address *Clareville*
Allotment Allottee
Date of Allotment Returned from Overseas *2-19.*
Embarked for Overseas Cause *Discharge*

28.3.19. *dis. his. from the Army.*

1.4.19. PASSED TO DEMOBILIZATION OFFICE

3.4.19. DISCHARGE APPROVED ON DEMOBILIZATION

Dec. 15th., 1922.

Major J. M. Howley, O.B.E.,

Paymaster,

Militia Bldg.

Dear Sir:-

Replying to your letter of November 17th., regarding the separation allowance i.e. Mrs Annie Day of Lady Cove, T.B.

I have gone through the papers carefully, and in my opinion Mrs. Day would not be entitled to any allowance previous to the demobilization of her son, because of total disability of Mr. Day. If Mr. Day had been totally disabled before April 17th., 1919, he would have called on Dr. Anderson much sooner than December 19th.

I am returning papers concerning the case.

Yours faithfully,

Commissioner.



DEPARTMENT OF MILITIA

ST. JOHN'S, NEWFOUNDLAND

November 17th. 1922

Dr. W. H. Parsons,

City.

Dear Sir:-

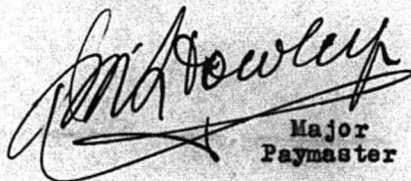
I enclose application for Separation Allowance completed by Mrs Annie Day of Lady Cove, T.B., together with correspondence on the matter.

Among others there is a letter from Dr. Anderson of Heart's Content setting forth to the best of his recollection the condition of Samuel Day prior to his death.

We shall be obliged for an opinion from you regarding the possibility of the disease from which Mr. Day died, rendering him totally incapacitated for any great period of time. More precisely, could he, in your opinion, be considered to have been totally incapacitated before April 17th. 1919 - his death occurring on December 21st. 1919?

A reply at your earliest convenience will oblige.

Yours truly,


Major
Paymaster

Alex. Soper
3440

April 17, 1919

#3430 Pte. Alexander Soper,

Random Island, T.B.

Dear Sir: -

Please find enclosed "Discharge Certificate

No. 1972."

Yours truly

Paymaster & C. I. / Records
Capt.

The Royal Newfoundland Regiment

Class for Demobilization:—

B

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

28-3-19

Regimental No.

3430

Name

Alexander Super

Address

Randall Rd 118

Present Medical Category

E

Recommended for:—

(a) ~~Immediate discharge~~

(b) Standing Medical Board

R. J. Hart Capt.
O.C. Discharge Depot.

Members of Board

Senior Medical Officer

Geo Burden
M. O. Depot

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 former occupation (fishing)

A. Super
Signature of Man.

Reg. No. *3430*

J. A. Shaw
Signature of the Vocational Officer or his Representative.

Place **ST. JOHN'S.**

Date *1-4-19* 191

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 34430 Rank. PLC Name Superintendent
 Date of Enlistment 19.1.17 Address Random 1st District Trinity
 Occupation fisherman Classification for Discharge B Medical Category E
 Recommendation S.M.B. Permanently unfit Disability Rating 70%
 Passed to Demobilization Officer with following documents:—

N.F. P36	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 1-4-19

H. M. W. H.
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am.....in a position to resume civilian occupation.

a Super

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied Amelioration Fund

Date 1-4-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R1148 9 429* to his home
at *Random Lee* and Release Certificate No. *1942* issued.

Date *1-4-19*

J.A. Brown
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 *17-4-19*

Date *2-4-19*

J.H. News
Depot Paymaster.

3-4-19
SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT.

Discharge approved for.....

Forwarded with following documents to O.C Discharge Depot.

N.F. P136.....	B 268.....	B 121.....	N.F. Med.....	D.F. 1.....
F 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 *2-4-19*

J.A. Brown
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

Date *APR 3 1919*

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

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

Date



NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 66 Sent by u Rec'd by _____ Check 7/6d No. _____

Place from _____

To _____

Ladylove 2
J. M. Howley
Militia



Kindly forward one moneys
allowance and oblige.

3430 Ex. Pte. Alex Soper

Apr. 18

May

June

July

Aug.

24077

3 chs mailed
7/10/19

Completing payment
[Signature]

NEWFOUNDLAND CONTINGENT

NFP/82.

SEPARATION ALLOWANCE

1. Regimental No. and Rank	3430 Private
Name	Alexander Soper
Unit	Newfoundland Regt.
2. Full Name of Dependent. (Mother)	Mary Ann Day,
3. Address	Lady Cove, N. West Arm, Trinity Bay.
4. Have you made previous claim for Separation Allowance? If so, state particulars.	No
5. Is Separation Allowance being paid on your account to anyone in Nfld or elsewhere?	No
6. Date of Marriage.	-----
7. Name and Address of your last Employer.	Fisherman
8. The amount of your salary or wages immediately prior to Enlistment.	\$300.00 per year
9. Are your wages or any portion being paid by your employer during your absence?	No
10. If paid, what is the amount per month?	Nil
11. Name of Corps prior to enlistment in the Nfld Contingent.	Nil

I CERTIFY that the above is a true statement.

his
Alexander X Soper
mark

Witness,
C. B. Dicks, Lt

Signature of Officer forwarding this application.

J. S. Woodruffe, Lt, Colonel.

Unit 1st Newfoundland Regiment

Commanding 1st Newfoundland Regt

Date _____

DUPLICATE
MAIL COPY

NEWFOUNDLAND CONTINGENT.

NFP/82.

Posted.

SEPARATION ALLOWANCE

1. Regimental No. and Rank	<u>3430 Private</u>
Name	<u>Alexander Soper</u>
Unit	<u>Newfoundland Regt.</u>
2. Full Name of Dependent.	<u>(Mother) Mary Ann Day,</u>
3. Address	<u>Lady Cove, N. West Arm, Trinity Bay.</u>
4. Have you made previous claim for Separation Allowance? If so, state particulars.	<u>No</u>
5. Is Separation Allowance being paid on your account to anyone in Nfld or elsewhere?	<u>No</u>
6. Date of Marriage.	<u>-----</u>
7. Name and Address of your last Employer.	<u>Fisherman</u>
8. The amount of your salary or wages immediately prior to Enlistment.	<u>\$300.00 per year</u>
9. Are your wages or any portion being paid by your employer during your absence?	<u>No</u>
10. If paid, what is the amount per month?	<u>N-1</u>
11. Name of Corps prior to enlistment in the Nfld Contingent.	<u>Nil</u>

I CERTIFY that the above is a true statement.

Witness,
his
Alexander X Soper
mark
C. B. Dicks, Lt

Signature of Officer forwarding this application.

J. S. Woodruffe, Lt, Colonel.

Unit 1st Newfoundland Regiment Commanding 1st Newfoundland Regt

Date _____

15928

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 20th. 1919.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes, 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 name..... *Alexander* Surname..... *Soper*

3. Rank..... *Pte* 4. Regt. No..... *3430*

5. Address in full to which future payments of gratuity are to be forwarded..... *Randon L. N. B.*

6. Date of enlistment in the Regiment..... *Jan. 19/17*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge..... *No*

8. Relationship of such dependants..... *—*

9. Address in full of such dependants..... *—*

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..... *Overseas.*

12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *From Jan. 19/17 to*

Apl. 2/19 date of temporary discharge

under w
No

received and by w.
Clothing
.....
.....

No.

40

Circus?
No

the su
No

...

No

Q. pl. 2/19. (1)
Temporary

Reclassification

War? If so give particulars of places and dates of such service.

France, Belgium & Germany From Mar, 1918
to Feb. 15, 1919. Cambrai, Comestres,
Appres.

1 pay an
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.

-3-

a - Super

Signature of Applicant:

Place of Residence:

Declared before me at:

This

3rd

day of

April 1919.

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

John McCarthy

POST DISCHARGE PAY.

Date paid

Paid

Soldier

Paid

Dependent

War Service
Gratuity

Net amount

due

\$250.00

5 mos.

Certified Correct.

Paymaster.

[Signature]

April, 23, 1919

#3430 Pte. Alexander Soper,

Random Island, T.B.

Dear Sir:-

Referring to your application I enclose cheque for
Seventy dollars (\$70.00), being amount of first payment due you
on account of the "War Service Gratuity."

Yours truly

Capt.
Paymaster & Officer i/c Records

RECEIVED 18-12-17.

ANSWERED

cheque sent
Lady Cove
18-12-17

Lady Cove
Dec 26th 17

Capt Ayre
Dear Sir:-

I have not Received my
November cheque yet.
dont know if it is
gone astray or not. please
let ^{me} ~~you~~ know if you have
sent it or not.

I Oblige

Mrs Samuel Day

Lady Cove

Random Island
Trinity Bay.

P.S. my sons name is

3430 The A. Soper
6 Company
1st Nfld Regt.



GENERAL POST OFFICE,
ST. JOHN'S, NEWFOUNDLAND

February 6th, 1918.

Dear Sir:-

Referring to your enquiry of 2nd January for a
letter addressed to Mrs. Samuel Day,

Lady Cove, F. Bay.

I have to inform that the letter has been re-addressed and
forwarded to Trinity Bay.

Yours truly,

J. A. Robinson
Postmaster General.

2nd Lieut. Maddick,
Dept. of Militia,
City.

ST. JOHN'S, April 2nd /19

Royal Newfoundland Regiment.

Billeting Account,

To Lt. A. Soper

Billeting Soldiers as undermentioned

from Feb 8th /19 to Mar 23rd /19

3430 - Lt. A. Soper

45 40

P.B.M.

15005

Certified correct for \$

45.40

Lieut. A. Houston

Billeting Officer.

RJ
a Soper

7295

3430

Lady Long
Nov 18th

To the
Military Department: 1919
Mr Houely.
Dear Sir,

Please send
me my discharged
Badge that I sent
in for while I
was in town.

Please send by
Return Mail.

Please to sign
Mr Alex Lopez

Lady Long
Y. Bay

THE BOARD OF
PENSION COMMISSIONERS
FOR NEWFOUNDLAND

J. A. CLIFT, K.C., C.B.E., CHAIRMAN
MAJOR W. H. PARSONS, M.C.,
R.A.M.C., MEDICAL ADVISER
LIEUT. C. C. OKE, SECRETARY



In reply refer to

No.

St. John's Dec. 15th., 1922.

Major J. H. Howley, O.B.E.,
Paymaster,
Militia Bldg.

Dear Sir:-

Replying to your letter of November 17th., re-
garding the Separation Allowance i.e. Mrs Annie Day of
Lady Cove, T.B.

I have gone through the papers carefully, and
in my opinion Mrs. Day would not be entitled to any allow-
ance previous to the demobilization of her son, because
of total disability of Mr. Day. If Mr. Day had been
totally disabled before April 17th., 1919, he would have called
on Dr. Anderson much sooner than December 19th.

I am retaining papers concerning the case.

Yours faithfully,

W. H. Parsons
Commissioner.

Claim refused
W. H. Parsons
J. H. Howley
3 Jan 1923

Lady Lane

Plat 17 1922
3430 Alex Soper

Dear Madam

as you want to no how
long mr Samuel day
was sick as I lived
next door to him and
was home part of the
time I no about him I
can say truly he was
sick one year or more
I no he died dec 2 1919
as I was under talker
but the date he was
taken sick I no not
I no sandy suport his

Henry Soper

Lady Lane

at Lady Lane

T B

Health Center

October 4, 1922.

Dear Major Hawley.

James Sept 30 in reference
Samuel Day received Oct 3rd.

I am sorry I cannot give
you information from any
document in my possession but
from recollection, brought to
mind by M^{rs} Day's letter to
me, I believe her statement that
he was suffering from Diabetes
correct. Further if I remember
correctly he was suffering from
Phthisis Pulmonalis quite a usual
sequel to Diabetes.

Regretting I cannot give
you more definite information
beyond fact that in all likelihood
he had been suffering some months
previous to his final illness. I am

Yours Truly
A. Henderson

September 30th. 1922

Dr. Anderson,

Hts. Content.

Dear Sir:-

We have an application for Separation Allowance from Mrs Samuel Day of Lady Cove, T.B., and in order to establish her claim it is necessary to show that her husband was totally incapacitated for some period prior to the date of her son's discharge.

She claims that shortly before Christmas 1919, she and her husband visited you at Heart's Content, but that you found the husband too far gone to be able to do anything for him.

Are you in a position to state from your knowledge of the case whether he was totally incapacitated for any length of time previous to his death on Dec. 21st. 1919, and if so, what is the probable date of commencement of his total disability (approximate).

I shall be much obliged if you can give me this information at your earliest convenience.

Yours truly,

Major
Paymaster

BRAMWELL BOOTH

GENERAL.

Colonel THOS. MARTIN,
Territorial Commander
for Newfoundland.



CHAS SOWTON

COMMISSIONER

The Salvation Army

SUB-TERRITORIAL HEADQUARTERS

Cor. Springdale & Gen. Sts. - St. John's, N. F.

Sept. 23, 1922.

Major Howley,
City.

Dear Major Howley:-

I called to see Mrs Mary Ann Day, formerly of Random, now at 5 George Street, as per your request.

I found that her husband had been sick for one year Dr. Anderson of Hearts Content pronounced it diabetes but it was too late for him then to do anything to help him.

While his son was at the War in summer time he caught some fish averaging to about two quintals per summer.

The mother says the son has been unable to give her much assistance the past year, as he is not very strong and very often not able to obtain work.

She had to borrow money to get here to the City and she is remaining now with friends until she can get some means to go back to her home.

Mrs Day informed me that there was money due her which she did not get.

This is all the information I could obtain, but as far as I am personally concerned I think she is a needy case and worthy of assistance.

Sincerely yours,

R. Sainbury
Staff Captain

ROYAL NEWFOUNDLAND REGIMENT
(Separation Allowance Branch)

NOTICE

MOTHER

THIS STATUTORY DECLARATION is to be filled in correctly in every detail, and a complete reply must be given to each question.

Each statement is considered as being made on Oath, and the form is to be signed before a Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace and returned to:

The Paymaster
Separation Allowance Branch
St. John's, Nfld.

(1) Name in full of soldier Alexander Soper Rank Private Reg't or Unit Royal Nfld Reg. 3430

(2) Age of soldier 24

Married or single Single

(3) Name in full of mother Mary Ann Soper Age 52 Occupation Sewing Permanent Address Randown, Trinity Bay, St. George's, Nfld.

(4) Give name of your husband Samuel Soper Age Dead Occupation (married twice)

(5) If your husband is not supporting you give the reason.

(6) If your husband is a chronic invalid and totally incapacitated, state nature of malady. (A Medical Certificate must be enclosed with this document stating from what date husband has been totally incapacitated, and for how long incapacity is likely to continue).

(7) If you are a widow, state date and place of death of your husband

Dec. 21, 1919 at
Randown, Nfld.

(8) Have you married again since death of above mentioned husband?

No

(9) Names of your other children. Address in full Age Occupation, Married or single

Miss Honora Soper Martin Randown, Nfld. 20 — Married

(10) State amount earned by (a) Yourself (b) Your husband

about \$10.00 yearly

(11) State amount and source of any other income

None

12. State value of real property belonging to you and your husband *No value*
13. State value of personal property belonging to you and your husband *No value*
14. If husband is dead state value of real and personal property left by him. *No value*
15. Actual amount contributed by soldier during the year prior to enlistment *An average of \$160⁰⁰ yearly*
16. Was this amount contributed weekly or monthly *Each Fall at end of fishing season*
17. Did this amount include payment of son's board, etc. *yes*
18. State your son's trade or occupation prior to enlistment *Fisherman*
19. State amount of his wages per week *As in Item 15.*
20. State name and address of his last employer *Spished for myself*
21. State amount of monthly support from son since enlistment *\$18⁰⁰ xx*
22. State amount of allotment received by you from son since enlistment *\$18⁰⁰ xx*
23. State from what date did you receive allotment? *April 1917*
24. Actual amount contributed by other children *Nothing* Weekly Monthly
25. Are any of these children in the employ of you or your husband? *_____*
26. If not receiving support from other children, state cause. Explain fully *Honora Martin is married*
27. With whom are you residing at present? *With my sister Bessie Jane Morris.*

(28) Have you made a previous claim for Separation Allowance. If not, why? Give particulars?

No.

(29) Are you already in receipt of any payment from any Patriotic Fund? If so, how much?

No

(30) Are you already in receipt of Separation Allowance from any source? If so, how much?

No

(31) Was the soldier at the time of his enlistment an employee of the Nfld. Government?

No.

(32) In what capacity and in what place?

(33) Is he in receipt of a salary as such while serving in the Royal Newfoundland Regiment? If so, how much?

I herewith make this solemn Declaration conscientiously believing the same to be true and knowing it to be of the same force and effect as if made under Oath, and in virtue of the evidence Act.

Signature of Applicant-----

Place of Residence-----

Declared and subscribed before me at-----

day of-----1922

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

This application must be signed by two responsible parties one of whom must be a Clergyman, the other a representative of your local Patriotic Fund Committee, certifying that to the best of their knowledge after careful investigation the above statements are correct and the soldier first above mentioned is the sole support of the applicant.

Signature of member of the Patriotic Fund Committee

R. L. Fairbairn
Minister.

January 3rd.1923.

Mrs Mary Ann Day,
Lady Cove, T.B.,

Dear Madam:-

With reference to your application for Separation Allowance, I have been directed to inform you that the allowance cannot be granted you, for the reason that it has not been shown that you were totally dependent on your son during the period of his service.

Yours truly,

Major
Paymaster

November 17th. 1922

Dr. W. H. Parsons,
City.

Dear Sir:-

I enclose application for Separation Allowance completed by Mrs Annie Day of Lady Cove, T.B., together with correspondence on the matter.

Among others there is a letter from Dr. Anderson of Heart's Content setting forth to the best of his recollection the condition of Samuel Day prior to his death.

We shall be obliged for an opinion from you regarding the possibility of the disease from which Mr. Day died, rendering him totally incapacitated for any great period of time. More precisely, could he, in your opinion, be considered to have been totally incapacitated before April 17th. 1919 - his death occurring on December 21st. 1919?

A reply at your earliest convenience will oblige.

Yours truly,

Major
Paymaster