First Newfoundland Regiment
attestation
No. 3933
Questions to be put to the Recruit before Enlistment.
I. What is your name? $\qquad$
2. What is your full Address? $\qquad$

2.

3. Are you a British Subject? $\qquad$
4. What is your age? $\qquad$
5. What is your Trade or Calling? $\qquad$
6. Are you Married? $\qquad$
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-vaccinated? ........................................... $\}$
9. Are you willing to be enlisted for General Service? $\qquad$
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... $\}$


Name
10. ..........

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?
made by me to the above question are true, and that $I$ am willing to fulfil the engagements made.

gATh TO BE TAKEN BY ZOECRUIT FAN ATTESTATION.
. 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 de end 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 take/ care that he upaerspands each question, and that his answer to each question has peen.ays nan as replied to and the said reg rut as mage and signed thegclaration and takin the oath before in? on this.... . . day of . .


CERTIFICATE OF APPROVI VG 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...............
It enilsted by pighayayhority, such will be attached to the geigifal attestation.


- 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, vis:-(Name) . . . . . . . . . . . . . . . . . . . . . . .reenlisted in the (Regiment) . . . . . . . . . . . . . . . . . . . . . . . . . . . . .on the (Date)
$\qquad$

Name
Apparent age... years/ Henths. $/$ Height feet inches Chest Measurement $\left\{\begin{array}{l}\text { Girth when fully expanded. } \\ \text { Range of expansion }\end{array}\right.$
Distinctive marks $\qquad$

## INFORMATION SUPPLIED BY RECRUIT


(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.
(a)
(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


## gatraet from tol egraa from Hilitary to Syno, London Dated June 13th 1919.

3933
3990 Nalsh disputes Dehit Balance \$58.88 May 31st:
please verify and report.

#   

##  

3933 Pte. Timothy Walsh.

# G.R. 3933 

Extraot from Lally orders part in Lepot, Sts John ${ }^{2}$ s, Date 12-6-19

## 3933 Pte. T.Walsh

Roportod at Hoazquaxtors 1-6-19. ex "Coxisican" which saj.Ied Liverpuo'土 May 22/3.919.

## Hxtraet Prom telegram from Syne. Lond on to Military.

 Dated June 16th 1919.
## C.R. 3933

3933, Walsh square as at May 20th. Presume that balances referred to in your telegram are at date of disembarkation.

$$
\text { CR. } 3933
$$

Zizeot trom Daily Ordeze Part II Unit Rogal Monfoundiand Regt. dated June 18 th 1929.

The discharge of the undernoted ondenobilisation has beon Approved by 0.O. Diseharge Depet the With effeat from 25/6/19.

3933, Pte, T. Walsh.

Mrs. Lawrence Walsh, Port Union.

## Dear Madam:-

I beg to inform you that we have received an answer to the enquiry that we forwarded to our pay and record office, concerning the whereabouts of \#3933 ute. Timothy walsh. Which states that he is now with the list., Battalion of the Royal Newfoundland Regiment in France, and in good health. If you want to write him, his address will be .

Mgaiess rte. Timothy Walsh, list. Battalion. Royal Milia, Regiment. B. E. $D_{0}$.
$0 / 0$ Pay and Record offices. 53, Tíctoris ${ }^{4}$ Str eat. London, S. W. 2. giglaild.

Any further information that we get concerning hin will at once be communicated to you.

$$
\mathrm{X}_{\text {ours }} \text { faithfully, }
$$


dasurity Officer.
TVI/BC.

## CR. 3933

${ }^{4}$ xtract of Telegram from Syn., LOMDON, to Military. Maroh 23rd/19.

IN ANSWER TO YOUR TELEGRAM MARCH 2lst
\#3933 Walsh, B.E.F.

## C.R. $39^{33}$

#  Hiasol 2teto. 2939. 

Inform whereabouts 3933 Walsh.
C.R. 3933 NEWFOUNDLAND POSTAL TELEGRAPHS. CABE CONNECTION WTTH ALL PARTS of THE WORLD Ho aso a

$$
\text { Prut-unon } 20
$$

Havent hears from 393z Rurvate Dimathy ralah poir four monit: Findy inform the og where le is.

Mer Lawrence Vold

$$
\text { C.R. } 3933
$$

## mesciauzineo walith,

## poet Diten.

## Deas Imtant

I Am Aireated by the Minitioe of Mintia to aomondedge recolst of your tolegram of Weroh 10th regevaing the wheronbout s of Ho. 3985 Pte. Pimothy waigh, and in wogly I hog to ritate thet we heve toswarded gour enguizy on to our Bay a Record Oftice Lendon; and upon secetipt of - yeply wo will immedifitely eominniseate with yet.

Youra esthinily.


ILout.
dasualty Ozficer.
WTW/KR.

## C.R: 3933

## Hxtrant Irom damalities ........... Riet Ho. H.A. 35359

3933 Pte. T. Walsh

Bronchitis Dis. to Newfoundland Base Dep. ex 6 Gen.H. Roven 13 Mar. 19.

Extrect f 20 m War OePice, Lijt NO.H.A. 35333

ADMITTRED 6 GIN. HOSPITAL ROURN 4 MAROH 2919.

43933 Pte. T. Weleh.

INPIURNZA MTH.

Estreet Irom List of Sick and Wounded M.O.Os. and Men of theb Expeditionary Force - France, dated 23 Fov. 1918.

List Fo: H.A. 31776.

3933 Pte. T. Walsh

1 Fewfoundlands...........G.S.T. Ohest. Dis. to 5 Rest Camp St. Martins Olass "A" ex 10 Con. Dep. 2nd Nov.

## C.M. 39.3 .3

Elovamber, 8th., 1918.

## Dear Madeant-

I heg to infosm you, that woid hea been
 that fe9ss Pte, rinothy Welah is reportod comvalescent at Bontege, Yraneo, 0at. 25th。

Iouss falthtaily,

Intonts. gamelty geticer: cer ontoz stase eqzicors.

## C.R. 3933



3933 Pte. T.Walsh.

TOUNDED 21-10128
-

## C.R. $39^{35}$

## zentua, astet moveniver 6the. 2018.

3933 Walsh Convele scent
Boulogne October 25 th.,

## C.R. 3933

Hov sua 18

## ure. Briaget Weloh

Port Union

Dear was. Welsh:-
WIthifreference to jour ceble onquisy of even alate onquiring as to the einaition df H0. 3938, Private Mimothy Walah, whes to inform you by direction that a aabio is being geapatohed to the Reoord Ofitec, Iond on in this comnection, and when reply hes been recelved, you will immediately be infozmed of same.

Yourw saith inizy.

Casualty Ofsteer. Casuaity Orescer


## Cable Connection with all the Worlir. 3933

## All Messages Sent are Subject to the Following Conditions:

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

In case the Message shall never reach its destination by reason of any neglect or de srit 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 resuking from the non-transmission or non-delivery of the Message, or delay or crror in the transmission or celivery 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 ntirely ccased for tho purposr: 3 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. (a.diheN.P. T. sionlh..ve full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph bolon ing to or worked by any administration or authority not controlled by the N. P. T. exclusively, alihough worked as part of or in connect.on 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 TRANBMITTED)
Signature of Sender
Address Dopt of Militiz.

| Number | Red - By | Sent by | Check |
| :---: | :---: | :---: | :---: |

Dated

## To

 Bridget Wałsh , Ca talinaRegret to inform you that Record office, London, officially reports Ho, 8933 Pzivate Timothy Walsh at 14th General Hospitel wimereux 0ot. 24th suffering from GS.W. chest

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

J. R. Bennet<br>Minister of Militia.

## C.R. 3933

## Bxtraot from Telegram to Synoptioal, London from Kilitary St2 John's dated $28 / 10 / 18$.

Inform Condition of:

3933 Walsh.

## C.R. 3933

## Hxtzeat from war 0effiel bist Ho. H. A. SLONR.

## 

\#3933 Pte. T. Walsh
G.S.W. Chest.
.

# Entract Inogm noz orfion Lilat Ho. H. 4. 30sso atatod 2 Vo . 2920 



$\$ 3933$ Pte. T. Walsh.

wounded

## C.R 3933

## Extract from Casualties List No. HoA. 30773.

```
3933 Pte. T. Walsh
```

I/NIld.GSW Chest adm. 14 Gen.H. Wimereux 24 0ctober/18. MM.

Betract od Nominel Roll Draft. (SII Ranits) to 1st Bn. B.I.I. Embarked Flokestone.

3933 Pte. T.Walsh.

25-5-18.

## 期TTOUNDLAND OONTINGENT.

prefrect of Hominal Roll of Draft Ho, 46,- 230 Other Renks from and. Bn., Dopoi, Winchester, to let. Eattn. The Aoyal Howfoundiend mogiment, BoE.F. Tribeariked Polkeatone, $25 / \tilde{5} / 28$.

8938 Pto. T. Walsh.
A. Fa. H. 103 fone for wach noldiez: aent to SxC. Echoln B E.P.

## C.R. 3933

##  Orerseen, par S.8. "phorisel" oot.3,191\%.

3933 Pte. T. Walsh.

## C.R.R933

# Hxtract Erom Daily Orders Rart 11 Unit The Rogal M13A. Fegto, sto John's, Aug.6th, 1917. 

3933 Pte. T. Walsh.

Attested Aug, 6th, 1917.

Reg. No. $\qquad$ 3093 Rank $\qquad$ Name Urals?

Attested $\qquad$ 8.17

Allotment $\qquad$ Allotee $\qquad$ here Priest (la a mane) band (hotien)
Date of Allotment $\qquad$ Returned from Overseas $\qquad$
Embarked for Overseas $\qquad$ 3.10 .17

Cause $\qquad$

d. Welah

$$
P+\ldots \cdot 0_{0}
$$

1. Unit

Royal" suofownd lewd
2. Regimental No.
3. Rank

jer
4. Name

## Walsh

5. Age last birthday Q/
6. Enlisted $\left\{\begin{array}{l}\text { on aug b/1y } \\ \text { at OL When }\end{array}\right.$

Medical Report on an Invalid.
Station


Date

7. Former Trade or Occupation

7A. If with' previous service in Army, state -
(a) Former Unit;
(b) Regimental No.;
(c) Date of Discharge;
(d) Cause of Discharge.
8. Disability in respect of which invaliding is Proposed.
(Other disabilities should be reported upon in answer to question No. 19).

## Statement of Case.

Note. -The answers to the following questions are to be filled in by the Officer in medical charge of the ease. In answering them he will carefully discriminate betuceen the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.
9. Date of origin of disability.

> zit
nil
10. Place of origin of disability.
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing

$$
\begin{aligned}
& \text { nil } \\
& \text { nil }
\end{aligned}
$$

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is-
(a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific conditimon to which it is attributed should be stated, see Notes on page 3).
(b) constitutional or hereditary, and not aggravated by service during the present war.
(c) attributable to or aggravated by want of proper care on the man's part, eff. intemperance, misconduct, fe.

13. What is his present condition?

Weight should be given in all eases aachen it is likely to afford evidence of the progress of the disability.
14. If the disability is an injury, was it caused-
(a) In action?
(b) On field service?
(c) On duty?
(d) Off duty?
15. Was a Court of Inquiry held on the injury?
If so-(a) When?
(b) Where?
(c) Opinion ?
16. Was an operation performed ? If so, what?
17. If not, was an operation advised and declined?
18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.
20. Do you recommend -
(a) Discharge as permanently unfit, or (b) Change to England?

$$
\begin{aligned}
& \text { Ha } \\
& \text { na } \\
& \text { na } \\
& \text { na }
\end{aligned}
$$



I have satisfied myself of the general accuracy of this report, and concur therewith, except $\dagger$
Station Dtagelajpron Officer in charge of Hospital.
-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.
$\dagger$ Delete this word if no exceptions are to be made.

No. 3663

1st. NEWFOUNDLAND REGIMENT.

I,
ALLOTMENTS

hereby agree, until further notification by me, and in Similar official form to make an Allotment of
$\qquad$ Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person $\frac{\text { and }}{\text { or }}$ Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person $\frac{\text { and }}{\text { or }}$ Persons concerned, viz.:

Allotment begins.


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

(Sig.)



Pst. NEWFOUNDLAND
ALLOTMENTS

hereby agree, until further notification by me, and in similar official form to make an Allotment of
$\qquad$ Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person $\frac{\text { and }}{\text { or }}$ Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person $\frac{\text { and }}{\text { or }}$ Persons concerned, viz. :

Allotment begins.

, Regt. No.

$$
3933
$$

$\qquad$


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.





$$
3933
$$




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:
If pesime former Gecopation
$\qquad$ y toraloh $\qquad$
Signature of Man.


Reg. No. 3933

Place


Date $\qquad$ JUN 91919 191

Che Royal 3etmfommlanio Regiment

DEMOBILIZATION OF
Reg. No. 3.9.33. Rank... pet t
Date of Enlistment. . 6 .
Aug 191.7.Adreses..

$\qquad$
Occupation $\qquad$ Classification for Discharge. E $\ldots . .$. Medical Category 1. Recommendation S.M.B. $\qquad$ Disability Rating $\qquad$ Passed to Demobilization Officer with following documents:-


1. Civil Re-Establishment.

I am. $\qquad$ in a position to resume civilian occupation.

$$
y \text { rask }
$$

- Particulars passed to Vocational Officer for information and action.

Date. $\qquad$
$\qquad$
2. Clothing.

Certified that Clothing Regulations have beep complied with:-
(a) Clothing Allowance payable.
(b) Clothing -supplied $\ldots$.

Date....9-6-1.9
3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. $16.6 .6 . .$.


Date

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to Date ....7............ 19

Discharge approved for
$\cdots \cdots \cdots \cdots \cdot \cdots \cdot$


Forwarded with. following documents to O.C Discharge Depot.


## APPROVED.

Documents as above forwarded to:-

- Officer ic Records.

Board of Pension Commissioners.
with following additional documents.
Eligible for War Service Gratuity JuN 231919

## Date


O. C. Discharge Depot.

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

## Date

$\qquad$

## The Koyal 3etmouniland kegiment

## Class for Demobil-

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

> Date
76.19

Regimental No. .3.7.3.3.
Name
 …
Address ... ar. arrinte.


$$
\text { Recommended for:- }\left\{\begin{array}{l}
\text { (a) Immediate discharge } . . . . \\
\text { (b) Stonding-Mectical Beenct. }
\end{array}\right.
$$



Demobilisation Form 2
The Royal 今ewfoumiland Regiment
PROCEEDINGS ON DISCHARGE

2. Occupation $\qquad$
$\qquad$
Classification of soldier $\qquad$ Medical Category .... $\cap$....... DEMOBILIZATION
3. The above named man is discharged in consequence of. $\qquad$
$\qquad$
$\qquad$ 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:.JQENI'....
Date $\qquad$ JuN 9... 1919 The Royal Newfoundland Regiment
, CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE
5. I hereby acknowledge that $I^{\prime}$ 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 dater:. J.OHN'S.
…...........Jtin $9 \cdots 1919$


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.

$\qquad$ JUN 9
1919
$\qquad$


STATEMENT OF SERVICE
7. Enlisted for service . $0 .-8.19 . .$.


APPROVAL OF DISCHARGE
8. The discharge of the above mentioned soldier is hereby approved to be confirmed $\mathrm{R}^{2} \mathrm{y}$ the Officer i|c Records, The Royal Newfoundland Regiment, twenty-eight days from date.

Place. ST. UOM动"S.


Date JUN 231919
The Royal Newfoundland Regiment.
$\qquad$ CONFIRMATION OF DISCHARGE


Place
Date


## Ju2y 7,7919

## \#3933 Pte. Timothy waleh.

## Catailina.

## *eer Sir:-

Llease find enclosed Discharge Certilleste
B. 2762 .

Yours tru2y

Captrin
Payne $s$ ter \& U.i/C Hocoxdis

$$
\text { Jo.2y } \quad \text { i, } 192.9
$$

\#3933 pto. Thmoth Taish,
Catalins.

## ear Sir:-

Referring to your appliaation $I$ enclose cheque for seventiyliollers (i70.001, being mount of fixst payment due you on ciccountor the war Service Gratuity.

Yours truly

Captain


## DEPARMMEIV OF IIILITTA.

WAR SERVICE GRATUITX.
St.John's, Nowfoundland.
Declaration recuired of of:icers and men of the Royal Newfound and Regitient, who clains Var Survice Gratiaty under order-in-Council dated Jonuary 28 th. 1919.

A complete roply rust be fiven to ofeay question in this Declaration Thax riust be no blonlis and no deshes. If any questions are not applicable, the words "HOT APPLICABLE" tust be written out.
on conpletion this Declaration is to be roturned to WHE OFFICER I/C


hualak...
 forworded.
6. Dete of enlistnent in the Reginent... 7.Nane of dependent, if any, to whon Seyeretion lillowance is being issucd, or was boing issucd,jrmodictnity pricer to your discherge.
8. Iicictionship of such dependents.

- 9.Aduress in full of such dependents $\qquad$

10. Is seid dependent, now, or wes scill inpendent, et ony tiro in recoipt. of Soperction Allorence on c.ccount of mother sildier?............. 11. Wore you on ective service only in lffld, $\mathrm{H}:$ : so, erive dates and perticulers of such service.

11. Give totcl longth of tinc wich/ inu served on cotije service,
 1........9.\%....
12. Have you had more then onc enlistnent? If so, give particulars of dischargo and re-cnlistments, end under what rocimental numbers.

13. Have you alroady roceived ony payment of Poat Discharge pay or For Scrvice Gretuity? If so, stc.te anount you and your dependents heve clreedy received and by whom peid.

## . ..............................яене..........................................

15.Heve you boon issucd trith a Var Scrvicc Bcarce............... 16. Heve you, during the prosent wer, sorved in the Inporicl Dorees..fes 27.ire you entitled to recoive, or heve you received any Grituity in tho neture of Pest Discherge Pay fron the In periol Foregs? If so, stete arount received; or to vich you ere ontiticd...........
18. Die you revert oversees to $s$ ronk lower then the sybstentivo ronk hold by you on your errivel in Enclend?...............
(b) If so, wes such roversion in consequance of risconaluct or incfficiency?
19.Lre you now fervins in the Rest.?.......I jot dive?- (i) Bete

20. Dia you at any tine serve at the front in an cetucl thoctro of or? If so sive popticulers of plecos, ma dates of such sorvicg...
than er
 21. ( $二$ ) Lro you recciving trectrent fror. the Uivil Ro-EStablishncnt Cri. (b) If so aro you in recoipt of full pey ond dllowences fror: that Cornittee
And I the this solcan docleration, conscientiously believin; it to be truc, cnd knoring thet it is of the sare force ond, effect es if rede uncer onth.

Imnothy watoh
Sianature of tpplicent:
Plece of Zesidenco:
Doclerod before ne at: This


Siznaturc of Berrister of the
Suprene Court, Sti trate; llotery Fuilic, perce, or Corrissioner of affidevits.

POET DESCGARED BMy.


# Th:- Major Henley, <br> O. I. C. Pay \& Records. 

## From: - V. 0 .

Frank Touse, 3933 .

This is to certify that this man's course comes to an end on February 28th.


PN | $\mu \mathrm{k}$.
OR wosh
Luno

## 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. IIC 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


Regiment from which discharged
Regiment from which discharge loyal Newfoundland
Regimental number
Intended address l atalina
Height on discharge
8
Color of hair on discharge Black
Complexion Haw
Color of eyes


Descriptive Marks
Figure on discharge hod user
Christian name of Father
Christian name of Mother
Water es and place of marriage
Christian names of children

Place and date of soldier's birth
Nature and locality of civil employment required
I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct
(Soldier's signature in full)


Station
ST. JOHN'S.
Date $5-6-19$
I certify that the above named soldier signed the foregoing declaration in my presence, and that the above description ard details are, to the best of my knowledge correct.

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.

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Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

Name in tut OHmaity Walsh
Regiment from which discharged Royal Newfoundland
Regimental number 3933
Intended address catalina
Height on discharge 5 Feet 8

Color of hair on discharge Black
complexion Haw
Color of eyes
Descriptive Marks

mesereatrant Medium
Christian name of Father
Christian name of Mother

Date and place of marriage


Christian names of children
Place and date of solders birth batahina, 22 hay 1898
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) timothy walt

Station
ST. JOHN'S.
Date $\quad 5-6-19$
I certify that the above named soldier signed the foregoing declaration in my presence, and that the above description ard details are, to the best of my knowledge correct.

Casualty Form-Active Service.
 Religion $\qquad$ . Surname Enlisted (a) 6 p 7 Toms of Service (a) al

Age on Enlistment, 10...... years . $\qquad$ 2. $\qquad$ ....months Date of promotion to present rank $\qquad$ Date gif appointment to lance rank. (a) $6 ., 8 . . .1 .2 \ldots$ Qualification (b).



(a). In the case of a man who has re-angaged for, or enlisted info section $D$, Army Reserve, particulars of such re-engagement orfenlis mint will be entered.
(b) Signaller, Shoeing-Smith, \&c.
W. $\mathrm{Ir} 8 \mathrm{I} 4-\mathrm{Mrr} 88$

1000 m
$1 / 27$
(27227)

SP\&CO, Ltd.
Forms B./103/4
E. 1354 .

LP.T.O.

## The Royal Newfoundland Regiment

## DISCHARGE DEPOT



June 9 th 1919

Fran Adjutant, Discharge Depot

2xio Paymaster and Officer i/0 Records, Militia Department

## 3993 Pto. T. Welsh

The account of the above named, who returned on the "Corsican", shows a debit balance off \$58,88 up to May 3lst, but Pte. Welsh disputes this. Could this be verified by cable, please, as the discharge of this men has been approved today.

IRC /C


ALLOTMENTS
$\qquad$ Reef. No. 3933
hereby agree, until further notification by me, and in Similar official form to make an Allotment of
$\qquad$ Dollars and Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person $\frac{\text { and }}{\text { or }}$ Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person $\frac{\text { and }}{\text { or }}$ Persons concerned, viz. :

Allotment begins.


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.


## The fropal inflo. Fiegiment

 DemobilizationNo. 433 Rank.....
Name Milolda Warned for demobilization on

SEPARATI OIT ALI JVANCE.

 sectsion........aphrowed


Date.......4.9/19.2.1 Instructions. $\qquad$
$\qquad$

- $\qquad$
$\qquad$
Allotment of $60 \%$ per day payable to Ahs Budget Walah sis mother from $1 / 10 / 1$ in to $7 / 7$ lig. riasontinued on account of heing disclanged, (Hemolilejed)

THIS STATUNORY DECLAPAMTOY is to be ifiled in corractly in overy catall, and a comploto reply must be giver to ench question.

Fach statement is consjáorod as being mado on onth, nna the form 1 s to be sizne a before a Earrister of she Supreme court, Stipendiary Magistrate, Norary Public or Justico of the Penco.

Q1) Name of Roservist
(Iimore then one gimo all names)
3995 simothy Waloh
(2) Naine of applicant, an: ago
(3) State whether you ero the natural motinor, stepraothor or foster -mother.

Chwother
Lawrance Walah etge is 8 dead and his age.
(5) If he is not supporting you state the reason

- Dead $\qquad$
(6) If you ate a widow, stato date of your hostiand's death.

Dee 1906
(7) Ha7s you married egain since death of the abcve menti oned husband? $\qquad$
(8) State names, ages of your othor

- children, whether married or single ot widowers.
$\qquad$
Name.
Ler Walsh


Marries or single Anastisora
married
(9) Heve gax of the children mentione in " 8 ", Folunteared for service
curing the grect wax 1914 1918? If so state strmes, and where poseible ह.ve oizjelal numbers and the pults in wish they cnilstos, with datea of onlistan ant.
$\qquad$
$\qquad$



















$\qquad$







$\qquad$ About 15 Oct 1915
(17) State amount contributed by your other children per weld.

Hone
(18) If not receiving support irwin other children, state cause. prom what cate hove you roosivos?
this amount? this amount?
$\qquad$
(20)

If Bo, state his name ald the unit in which he served giving his official number

## I make this solemn declaration oonselentiousiy belfoving

It to bo true and knowing to to be of the same pore and effect as if made under oath.
a
 Address. 0 Lelia $F:$ ß.....

Declared before me nt. Galdeurn thisbe...
day of..... croce 2921.

Signature of Barrister of the Supreme Court) of thy Public, stipendiary magi strata Justice

He, the undersigned, have reviewed the replies given in the foregoing declaration and to the best of our knowledge they are correct, and the applicant ia mainly and totally dependent on the Reservist if rat mentioned.

Signature of Clergymen.


Signet tu re of Member
of Patriotic Fund Coramitte0............................................

$$
J \mathrm{H} / \mathrm{m}
$$

## Mas 22, 1921.

## Mrs.Bridgot Walah, catal1na.

## Dear Madam:

With reference to your application for Separation Allowanco, I beg to state that the same has been approved, and I enclose oheque for \$424. 51 representing amount due to dato of tour son's discharge, also one P 0 \% $\$ 120.00$ being amoupt due on account of War Service Gratuity.

Yours trily.

Paymate or.

Bno's. 2

Squadron, Troop, Battery and Company Conduct Sheet.
Regiment of


Good Conduct Badges, Service pay or proficiency pay

The zonal seemfoundano regiment

DEMOBILIZATION OF
Reg. No. 3.9.3. 3 Rank.. Pt e
Date of Enlistment. 6 .. An g. 191.7. Address. .District . .fyentin… Occupation $\qquad$ Classification for Discharge. 3 ........Medical Category . A. $7 . .$. Recommendation S.M.B. $\qquad$ Disability Rating $\qquad$
Passed to Demobilization Officer with following documents:-


1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date. $\qquad$
$\qquad$
2. Clothing.

Certified that Clothing Regulations have been complied with:-
(a) Clothing Allowance payable.
(b) Clothing Supplied $\qquad$
Date. $\qquad$
3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No, ..............to his home at $\qquad$ batalitivar men em crate re to
$\qquad$ $t-1.9$
4. Pay and Allowances.

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

Date $\qquad$
 Depot/Pashfaster.
$\qquad$
Forwarded with following documents to O.C Discharge Depot.


APPROVED.
Documents as above forwarded to :-
Officer i|c-Records.
Board of Pension Commissioners.
with following additional documents.
Eligible for War Service fantail

Date $\mathrm{JUN} 23 \mathrm{~S}^{1919.19}$ $\qquad$ O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.
Date funara/:9


Attested
Allotment.
Date of Allotment
Returned on S.S.

Returned from Overseas.
Cause
$2 \rightarrow-5>8$ Allottee


