

Recruiting
Form A, 1914.



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 1175.

Name in full John Thomas Aspell Age 19.
 Address 39, Longs Hill.
 Married Single Height _____ Weight 122
 Color _____ Hair _____ Eyes _____
 Other distinguishing marks Scar Right leg near ankle.
 Nearest relative Gerald Aspell. (Brother)
 Address 39 Longs Hill.
 Dependents Brother.
 Occupation Labourer Present Wage £1/10 per day.
 Previous service _____
 Decorations _____
 General Remarks John's Aspell
 Date of Enlistment 21st Feb. 1915.

Renounced his services
 I, John T. Aspell, do sincerely promise and swear that I will be faithful and bear true allegiance to His Majesty, and that I will faithfully serve His Majesty in any place where I may be needed (or in the Colony of Newfoundland, as the case may be), against all His enemies and opposers whatsoever, according to the condition of my service.

John T. Aspell

Declared before me this 1st day
 of March, 1914

Quist...

DESCRIPTIVE REPORT ON ENLISTMENT.

Applicable to all ranks. To correspond with entries on the Medical History Sheet. Reg. No. 1175

Name John Thomas Aspell

Apparent age 19 years months. Height 5 feet 6 inches.

Chest measurement (Girth when fully expanded inches. Range of expansion inches.)

Distinctive marks

Other distinguishing marks: Scar right leg near ankle

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Gerald Aspell, 39 Longs Hill, St. John's

Relationship Brother

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.

Table with 4 columns: (a), (b), (c), (d) for marriage details.

Particulars as to Children.

Table with 2 columns: Christian Names, Date and Place of Birth.

STATEMENT OF THE SERVICES.

Main service record table with columns: Corps in which served, Regt. or Depot, Promotions, Reductions, Casualties, etc., Army Rank, Dates, Service not allowed to reckon, Service in reckoned, Signature of Officers certifying correctness of entries.

Service towards limited engagement reckons from 21/2/15

Joined at St. John's on 21st February '15

Handwritten notes detailing service events: Embarked 22.9.15, landed 2.8.15, promoted to sergeant, etc.

Demobilization 19.3.1919

Total Service forfeited as above

Total Service towards Engagement to 19.3.1919 (date of discharge) 4 years 27 days

Pension information line

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Reg. No. 1175

Name John Thomas Aspell

Apparent age 19 years months. Height 5 feet 6 inches.

Chest measurement { Girth when fully expanded inches.
Range of expansion inches.

Distinctive marks

Other distinguishing marks: Scar right leg near ankle

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Gerald Aspell, 30 Longs Hill, St. John's

| Relationship brother

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	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Re-serve not allowed to reckon towards G. O. Pay		Signature of Officers certifying correctness of entries
					years	days	years	days	
Services towards limited engagement reckons from <u>31/3/15</u>									<p> </p> <p> </p> <p> </p> <p> </p> <p> </p> <p> </p> <p> </p> <p> </p> <p> </p> <p> </p>
Joined at <u>St. John's</u> on <u>31st February '15</u>									
Total Service forfeited as above									
Total Service towards Engagement to (date of discharge) years days									
" " " Pension " (") "									

District. A. Johns
March 19/1919

Spell, J. T.

1175

Ray Sept.

In reply please quote
Date and Initials

/ JAM/JG

COMMISSION OF GOVERNMENT



NEWFOUNDLAND

Department of Public Health & Welfare and War Pensions

ST. JOHN'S

July 25th. 1940.

TO WHOM IT MAY CONCERN

Re: # 1175, Pte. John Thomas Aspell,
Royal Newfoundland Regiment

This is to certify that the above named enlisted at St. John's on the 21st February, 1915. Embarked at St. John's on the S. S. Stephano 22.4.15. Embarked M. E. F. 20.8.15. Disembarked Alex. and entrained for Cairo 31.8.15. Embarked for Gallipoli on the 13.9.15, Landed Sulva Bay night of 19-20 September, 1915. Admitted 24 C.C.S. Rheumatism 5 12/15. Admitted H. S. Folkstone Rheumatism 5.12.15. Admitted 21st General Hospital Alex. 5.2.16. Invalided to England 23.3.16. Admitted Wandsworth 4.4.16. Transferred to Addington Park Cove Home, Croydon, 13.4.16. Furlough then attacked depot 3.8.16. Furlough to Newfoundland 10.10.16. Arrived Newfoundland October 1916. Attached to Strength Depot 15.1.17. Home Defence Duty at Hearts Content 26.6.17. Recalled and reported to Headquarters 13.10.17. Employed Militia Depot, Orderly, 11.17. Demobilization at St. John's on the 19.3.19.



J. A. McGrath
J. A. MCGRATH
Accountant

JAM/JG

July 25th. 1940.

TO WHOM IT MAY CONCERN

Re: # 1175, Pte. John Thomas Aspell,
Royal Newfoundland Regiment

This is to certify that the above named enlisted at St. John's on the 21st February, 1915. Embarked at St. John's on the S. S. Stephano 22.4.15. Embarked *M/S. P.* 20.8.15. Disembarked Alex. and entrained for Cairo 31.8.15. Embarked for Gallipoli on the 13.9.15, Landed Silva Bay night of 19-20 September, 1915. Admitted 24 C.C.S. Rheumatism 5.12.15. Admitted H. S. Folkstone Rheumatism 5.12.15. Admitted 21st General Hospital Alex. 5.2.16. Invalided to England 23.3.16. Admitted Wandsworth 4.4.16. Transferred to Addington Park Cove Home, Croydon, 13.4.16. Furlough then attacked depot 3.8.16. Furlough to Newfoundland 10.10.16. Arrived Newfoundland October 1916. Attached to Strength Depot 15.1.17. Home Defence Duty at Hearts Content 26.6.17. Recalled and reported to Headquarters 13.10.17. Employed Militia Depot, Orderly, 11.17. Demobilization at St. John's on the 19.3.19.

J. A. McGRATH
Accountant



1st Newfoundland Regiment

HEADQUARTERS

St. John's, Newfoundland,

December 12th. 1917. 191

From O.C. Companies,
Depot.

To Paymaster and Officer i/c Records,
Dept. of Militia.

Re Memorandum of Stoppages No. 11.

1175. Pte. J. Aspell.

This man's account was transferred to Pay Office
on 23-11-17.

3899. Pte. J. Ophrey.

This man was discharged from the Regiment on
23-11-17.

I have the honour to be,

Sir

Your obedient Servant,

W. H. [Signature] O.C. # COY.

1st NEWFOUNDLAND REGIMENT,
ST. JOHN'S, NFLD.

Santos & S. Craicon



Army Form O. 1625.

PAY LIST. *Sep^r 30th to Oct 9th* 1916. Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps *21 New Zealand Regt*
 No. *1175* Rank *Private* Name *Aspell J. J.*
 Died^(a) at _____ on the _____ of _____ 191 ____
 Deserted at *Furlough* on the *9th* of *October* 1916

I Certify to the correctness of above in every particular.

R. D. Rowse
Capt. { Commanding Squadron, Troop,
 Battery or Company.

STATEMENT OF ACCOUNT.

[FORM 1.]

Date.	Dr.	£	s.	d.	Cr.	£	s.	d.		
	Balance Dr. last month				Balance Cr. last month	-	-	-		
	Cash issues (Date of each issue to be stated)				Pay 10 days at 1 ⁰ from <i>27/11</i> to <i>9/12/16</i>	2	5	2 1/2		
		£	s.	d.	Proficiency, Service or good conduct pay					
	<i>Oct 6th 1916</i>		15	0	days at _____ from _____ to _____					
	<i>9 "</i>		15	0	Messing allowance days at _____					
	<i>"</i>				from _____ to _____					
			1	10	0	Clothing and kit allowance				
					Amount produced by the sale of Necessaries					
	Consolidated stoppage.....		1	5	1/2	Personal Clothing and Effects from Form 2...				
	<i>10 days Allowance 50/-</i>				Amount of Savings Bank balance, including					
	<i>Bo. Co + B. Co Damages</i>				interest (if no balance, to be so stated)					
	Balance due by the Paymaster		5	9	8	Deferred Pay or Gratuity				
		£	2	11	5 1/2	Balance due to the Paymaster.....	6	3		
							£	2	11	5 1/2

I hereby Certify that the above account is correct in every particular, and that the ~~debit balance of £~~ is correctly chargeable against the Public^(b) LAND CONTINGENT

Dated at this day of *October* 1916. *R. D. Rowse* PAYMASTER & OFFICER *Paymaster*

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with A.F.B. 2090 or Army Form O. 1815.

(b) Words in Italics to be struck out when there is no debtor balance.

CH. ED. 7/10

STATEMENT OF ACCOUNT

No. 1178

Name Apell J. J.

Date	Particulars	Ch.No.	Dr.	Cr.	Bal.
	Brought forward		908 70	933 53	24 83
March 5	14 days Pay @ 1 1/2			15 40	40 23
	Subsistence allowance			52 40	
	Clothing allowance			14 40	54 63
	Allotment			60 00	114 63
	To Pay		7 00		107 63
		2759	82 80		24 83
	Washington University 6 M ^s @ 70 ⁰⁰			420 00	
March 18	To Pay				424 83
		13233	70 00		374 83
April 19	" "	15951	70 00		304 83
May 19	" "	20074	70 00		234 83
June 19	" "	24103	70 00		164 83
July "	" "	2749	70 00		94 83
July 19	" "	1588	70 00		24 83
			1418 50	1443 53	24 83

Signed Albany S. M.

9
11
1920

STATEMENT OF ACCOUNT

No. 1175

Name Aspell J.

Date	Particulars	Ch.No.	Dr.		Cr.		Bal.	
	Brought forward		771	20	796	03	24	83
Nov 30	By Pay 30 days @ 1 1/2%							
15	To Pay				24	00	57	83
30	"	5411	9	00			48	83
	" Allotment	5966	9	00			39	83
	"		15	00			24	83
Dec 31	By Pay 31 day @ 1 1/2%							
15	To Pay				34	10	58	93
25	"		9	60			49	33
31	To allotment		9	60			40	33
	"		15	50			24	83
Jan 31	By Pay 31 days @ 1 1/2%							
15	To Pay				34	10	58	93
31	"	8303	9	00			49	93
	To Allotment		9	60			40	33
	"		15	50			24	83
Feb 28	By Pay 28 days @ 1 1/2%							
15	To				30	80	55	63
28	"		9	00			46	63
	To Allotment		7	80			39	83
	"		14	00			24	83
March 15	By Pay 15 days @ 1 1/2%							
	Allotment		2	50	5	50	30	33
5	To Pay						29	88
	"						24	83
			908	70	933	53	24	83

Signed AJ Joany S.S.M.

STATEMENT OF ACCOUNT

No. 1175Name Aspell J. T.

Date	Particulars	Ch. No.	Dr.	Cr.	Bal.
	Brought forward		635 90	660 72	24 83
July 31	By Pay 31 days @ 1 1/2%			34 10	58 93
15	To Pay				49 93
31	To Allotment 31 days @ 1 1/2%		9 00		34 43
	To Pay		15 50		24 83
	To Pay		9 60		
Aug 31	By Pay 31 days @ 1 1/2%			34 10	58 93
15	To Pay	1135	9 00		49 93
31	To Allotment 31 days @ 50¢		15 50		34 43
	To Pay		9 60		24 83
Sept 30	By Pay 30 days @ 1 1/2%			33 00	57 83
15	To Pay	1789	9 60		48 83
	To Allotment 30 days @ 50¢		15 00		33 83
30	To Pay	3131	9 00		24 83
Oct 31	By Pay 31 days @ 1 1/2%			34 10	58 93
15	To Pay	4018	9 50		49 43
31	To Allotment		15 50		33 93
	To Pay	4086	9 10		24 83
			771 20	796 03	24 83

Signed Alvany E. M.

STATEMENT OF ACCOUNT

No. 1178Name Aspell J.

Date.	Particulars	Ch. No.	Dr.	Cr.	Bal.
			436 80	461 63	24 83
Jan 31	By Pay 31 days @ $1\frac{1}{2}\%$				
	To Allotment 31 days @ 50¢			34 10	58 93
15	To Pay		15 50		43 43
30	"	3218	9 00		34 43
		3652	19 60		24 83
Feb 28	By Pay 28 days @ $1\frac{1}{2}\%$				
15	To Pay			30 80	55 63
	To Allotment 28 days @ 50¢	4133	9 00		46 63
30	To Pay		14 00		32 63
		4392	7 80		24 83
March 31	By Pay 31 days @ $1\frac{1}{2}\%$				
15	To Pay			34 10	58 93
31	"	4885	9 00		49 93
	To allotment	5159	9 60		40 33
			15 50		24 83
April 30	By Pay 30 days @ $1\frac{1}{2}\%$				
	To Pay			33 00	57 83
	To allotment 30 days @ 50¢	3667	9 00		48 83
		6085	9 00		39 83
			15 00		24 83
May 31	By Pay 31 days @ $1\frac{1}{2}\%$				
15	To Pay			34 10	58 93
31	"	6737	9 00		49 93
	To allotment 31 days @ 50¢	7197	9 60		40 33
			15 50		24 83
June 30	By Pay 30 days @ $1\frac{1}{2}\%$				
15	To Pay			33 00	57 83
30	To allotment 30 days @ 50¢	7677	9 00		48 83
	To Pay		15 00		33 83
			9 00		24 83
			635 90	660 73	24 83
			635 90	660 73	24 83

Signed J. Frank S.M.

STATEMENT OF ACCOUNT

No. 1175Name Aspell J. J.

Date	Particulars	Ch. No.	Dr.	Cr.	Bal.
	Brought forward		249 80	266 93	17 13
Apr 30	By Pay 30 days @ $1\frac{1}{2}\%$			53 00	50 13
15	To Pay				45 13
30	To allotment		5 00		32 13
	30 days @ 5.4		13 00		17 13
			15 00		
May 31	By Pay 31 days @ $1\frac{1}{2}\%$			34 10	51 23
15	By Pay				39 23
30	To allotment		12 00		32 63
	31 days @ 5.4		6 60		17 13
			15 50		
June 30	By Pay 30 days @ $1\frac{1}{2}\%$			38 00	50 13
15	To Pay		9 00		41 13
30	To allotment		9 00		32 13
	30 days @ 5.4		15 00		17 13
	Transferring all the content of former 13-10-17				
Oct 31	By Pay 10 days @ $1\frac{1}{2}\%$			19 80	36 93
	To allotment				27 93
	To Pay		19 00		17 13
			10 80		
Nov 30	By Pay 30 days @ $1\frac{1}{2}\%$			25 30	50 13
	To Pay			33 00	34 13
	To allotment		16 00		19 13
	7 days @ $1\frac{1}{2}\%$		15 00	7 70	26 83
					19 83
30	To Pay		17 00		
Dec 31	By Pay 31 days @ $1\frac{1}{2}\%$			34 10	43 93
19	To Pay		33 60		40 33
31	Allotment		15 50		24 83
			436 80	461 63	24 83

Signed A. J. Evans

March 19, 1919

#1175 Pte. John T. spell,

#59 Springdale St.,

City

Dear Sir:-

Please find enclosed "Discharge Certificate
#011381."

Yours truly,

Captain,
Paymaster & O.i/c Records

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Rrg. No. 1175 Rank Plt. Name Appell J. J.
 Date of Enlistment 5-12-1921 Address St. John's District St. John's
 Occupation Post Office Classification for Discharge D Medical Category E
 Recommendation S.M.B. Permanent Disability Rating 4.6%
 Passed to Demobilization Officer with following documents:—

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1.	<u>26.4</u>	<u>1</u>
B 178	W 3494	B 122	Board 1st	" 2.	<u>28.0</u>	<u>1</u>
B 178a	D 400A	B 1915	do 2nd	" 3.	<u>3</u>	<u>3</u>
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 March 1st 1919

H. M. S. H.
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am 2 in a position to resume civilian occupation.

Plt J. J. Appell

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

Date 5-3-19

CMJ
O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. to his home
 at and Release Certificate No. 1398 issued.

Date 5.3.19

R. B. Dukes Capt.
 Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection
 therewith settled. He has received pay and allowances to 17-3-19

Date 5-3-19

R. B. Dukes Capt.
 Depot Paymaster.

Discharge approved for 5.3.19

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1	Form B
F 178	W 3494	B 122	Board 1st	" 2	
F 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	<u>268</u>	" 6	
B 179c	B 120	M 93	<u>2105</u>		

Date 6.3.19

R. B. Dukes Capt.
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
 Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

MAR 5 1919

Date

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

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

Date

St Johns
July 2th 1819
59 Springdale st

To Lieut Col Rendell

Dear Sir

As I have been speaking to you
about Advancing my Gratuity money, my
Reasons for asking is.
I have decided on making my home
In Canada And therefore would like to
have it before I leave I expect to
be leaving on the 15th of July

over

And Oblige
your Obedient Servant

Ex Pte John T. Caspell
- 11/5 -

AM.

II

One pay. authority

W. T. Rendell
Lieut. Col.

11/7/19



DEPARTMENT OF MILITIA

 STATEMENT OF ACCOUNT OF J. Aspell, Pte. No. 1175

 FROM 1/2/19 To 28/2/19
(both days inclusive)

 LEDGER FOLIO No. No. 32

Date	Particulars	No. of Days	Rate per Day	Amount	
				Dr.	Cr.
	CR.				
	Pay	28	1 00		28 00
	Field Allowances	28	10		2 80
	Other "				
	Balances from previous paybook				
	DR.				
Feb. 28	To Allott. 28 days, Forfeited Pay			14 00	
	Fines				
	Clothing and Necessaries				
	Arms and Accoutrements				
	Casual Payments				
" 15	1st Payment			2 00	
" 28	2nd "			7 80	
	3rd "				
	Balance from previous paybook				
	Final Cash Payment				
				30 80	30 80
	Totals				
	Debit Balance				
	Credit Balance				
	Checked by			30 80	30 80

Demobilization Form 2.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 1175..... Rank Private..... Name Aspell J. J.
 Intended place of residence 59, Springdale St St Johns
 2. Occupation Shoemaker
 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
 Date MAR 5 1919.....
K. M. West
 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
5-3-19
J. J. Aspell
 Signature of soldier
R. H. Lait
 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
5-3-19
J. J. Aspell
 Signature of soldier
R. H. Lait
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 22-2-15..... No of days on Military
 Discharged from service 5-3-19 Plus 14 days..... Service 1487.....

APPROVAL OF DISCHARGE

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

Place St. John's
 Date MAR 5 1919
R. H. Lait
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place St. John's, Nfld
 Date March 19/1919
M. Howley Capt
 Officer in Charge
 The Royal Newfoundland Regiment

2019 2079/1381

Wald 1149

To be used (a) for recruits enlisting direct into the Regular Army and (b) for men of the Territorial Force when they are admitted to Regular Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Aspell Christian Name John

TABLE I.—GENERAL TABLE.

Birthplace ... Parish _____ County _____

Examined { on _____ day of _____ 191
at _____

Declared Age years _____ days.

Trade or Occupation ... _____

Height feet _____ inches.

Weight lbs. _____

Chest Measurement { Girth when fully Expanded _____ inches.
Range of Expansion _____ inches.

Physical Development ... _____

Vaccination Marks { Arm ... _____ Right _____ Left _____
Number _____

When Vaccinated _____

Vision { R.E.—V= _____
L.E.—V= _____(a) Marks indicating congenital peculiarities or previous disease ... { (a) _____
_____(b) Slight defects but not sufficient to cause rejection { (b) _____
_____Approved by (Signature) _____
(Rank) _____

Medical Officer.

Enlisted { at _____
on _____ day of _____ 191

Corps.	Regt. No.
<u>Newfoundland</u>	<u>706</u>
	<u>1145</u>

Became non-effective by _____

on _____ day of _____ 191

(Signature) _____

(Rank) _____

No. _____

Date April 13th 1916.

(1) To the Officer i/c Records,

58 Victoria St.
S.W. (Station.)



(2) The Officer Commanding,

Newfoundland Contingent
Ayr- (Station.)

(3) The Paymaster,

58 Victoria St.
S.W. (Station.)

Regimental No. 1175

Rank and Name Plt Aspell J. J.

Regiment or Corps 1st Newfoundland

has been granted a furlough from transferred on April 13th

His address while on leave will be: - to
Addington Park Connaught House.
Croydon.

If consider he is fit for Duty Light duty.

A. Hope Gosse Capt. R.A.M.C.T.

Officer in charge Registrar, Hospital,
3rd London General Hospital,
WANDSWORTH, S.W. (Station.)

* Strike out that which is inapplicable.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office.

The Royal Newfoundland Regiment

21175

DEMOBILIZATION OF

Reg. No. 1175 Rank Private Name Joseph J. J. J.
 Date of Enlistment 3/12/22 Address St. John's District St. John's
 Occupation Printer Classification for Discharge B Medical Category E
 Recommendation S.M.B. Permanent Disability Disability Rating 40%
 Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1	268	1
B 178	W 3494	B 122	Board 1st	" 2	268	1
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 March 1st 1919

O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

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

Date 5-3-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. _____ to his home
at _____ and Release Certificate No. 1398 issued.

Date 5-3-19
Demobilization Officer R. B. Dicks Capt.

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 19-3-19

Date 5-3-19
Depot Paymaster H. M. M. M. M. M.

Discharge approved for 5-3-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1	1	Form B
F 178	W 3494	B 122	Board 1st	" 2	1	
B 178a	D 400A	B 1915	do 2nd	" 3	2	
B 179	D 400B	Form L	do 3rd	" 4		
B 179a	D 400C	Form K	do 4th	" 5		
B 179b	B 103	ME 2	<u>368</u>	" 6		
B 179c	B 120	M 93	<u>2.5.0.5-1</u>			

Date 6-3-19
Demobilization Officer R. B. Dicks Capt.

APPROVED.

Documents as above forwarded to:-
Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date MAR 5 1919
O. C. Discharge Depot R. H. Sait Capt.

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

Date March 1919
R. H. Sait Capt.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th. 1919.

A complete reply must be given to every question in this Declaration There must be no blanks and no dashes, if any 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... *John T.* 2. Surname... *Aspell*

3. Rank... *Private* 4. Regtl. No... *1175*

5. Address in full to which future payments of gratuity are to be forwarded... *59 St. John's St. St. John's*

6. Date of enlistment in the Regiment... *22nd Feb'y 1915*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....

8. Relationship of such dependents.....

9. Address in full of such dependents.....

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....

11. Were you on active service only in Nfld. If so, give dates and particulars of such service.....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *4 years 1 mo*

13. Have you had more than one enlistment? If so, give particulars of discharge and re-enlistments, and under what regimental numbers.

.....
.....

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid. *no*

.....
.....

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

16. Have you, during the present war, served in the Imperial Forces...

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.

.....

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

(b) If so, was such reversion in consequence of Misconduct or inefficiency?

19. Are you now serving in the Res.?. *no* ... If not give - (a) date of discharge. *1.9 (Nov) 1919.* (b) Reason for discharge. *Dismissed before*

.....
.....

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service. *Ch. H. P. O. L. H.*

.....
.....

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee.

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under Oath.

Signature of Applicant:

Place of Residence:

Declared before me at:

J J Ayres
54 Princeton St

This

9th

day of

April 19*19*

J M [Signature]

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

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	<i>6 mos.</i>	<i>420.00</i>
.....
.....
Certified Correct.			Paymaster.	

2

DEPARTMENT OF SOLDIERS' CIVIL RE-ESTABLISHMENT

Halifax, N.S., July 5th, 1920

TO THE PAYMASTER, St. Johns, Nfld. M. D. DISTRICT.....

Name Aspell, J.T. 1175 Private 1st Div. Nfld.
(Ex-No.) (Ex-Rank) (Batt.)

was admitted for treatment under this Department on 12-5-20
(Date)

On receipt of this form, please complete and detach lower portion, and return same to Asst. Director
"B" Unit, Dept of S.C.R., at Nurses' Home, Corner Jubilee Rd. & Summer St., Halifax, N.S.

Discharged from H.M.F. at St. Johns, Nfld. on March 1919

Jan 7th 1922

Major Howley
O. I. C. Records

Please pay to J. Aspell, 1175
the sum of fifty five dollars
in pymnt of P. & A. Bonus
and charge same to Civil Re-establishment Committee

\$55.00

Pension \$5.00

J. C. Corder

.....
Vocational Officer

ACCOUNT	_____
CK. NO. <i>1165</i>	INITIALS _____
INL. LEDGER	INITIALS _____
PAY LEDGER	INITIALS _____
GEN LEDGER	INITIALS _____

[Handwritten signature/initials over the ledger section]

J. Aspell



Miss Isabell Moore
12 Wablegrave Street
St Johns
Newfoundland

Halifax, N.S.

Aug 7. 1919

To Capt J. M. Howley
Paymaster
Officer of records

Dear Sir

Please give to
Miss Isabell Moore my
war service gratuity money
As I have left St Johns
and I am now residing
in Halifax

and Oblige
your obedient
Servant

1175 Ex. Pte. J. J. Aspell
202 North Street
Halifax, N.S.

P.S. Bill please go down to
the militia Dept and give
this note to Capt Rowley
go down the 19th of this month
and when you get it will
you go to the Bank of
Montreal and cash it
for me you can sign my
name on the Back
as it is hard to cash
it up here and send
the money on to me

And Oblige
your Brother
Jack

Send it as a Register letter

May 26th 1921

Major Howley
O. I. C. Records

Please pay to J. T. Aspell, 1175
the sum of ten dollars
in payment of incidental expences from Halifax to St. John's
and charge same to Civil Re-establishment Committee

\$10.00

ACCOUNT		
OK. NO.	6186	INITIALS <i>JTB</i>
INT. LEADER		INITIALS <i>[scribble]</i>
PAY LEADER		INITIALS <i>[scribble]</i>
GEN. LEADER		INITIALS <i>[scribble]</i>

J.C.R.

J. Hunter

Vocational Officer

J. T. Aspell

May 28th 1921.

Major Howley,
O. i/c Pay & Record Office.

Please pay J. T. Aspell, 1175 the sum of eighteen dollars in payment of allowances to date. Charge same to the Civil Re-establishment Committee.

\$18.00

ACCOUNT		
CHK NO.	6223	INITIALS Ew
INTL. LEAFLET		HOW AID
PAY LEAFLET		INITIALS
GEN. LEAFLET		INITIALS

[Signature]
Vocational Officer

J. T. Aspell

J. C. S.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 70⁰⁰

July 11 19 19

Received from the First Newfoundland Regiment,
the sum of Seventy Dollars.
on account of Pay. W.S.H.
~~balance~~

J. Aspell A.C.D.

Ch. No. <u>2749</u>	Initials <u>EW</u>
Pay Ledger <u>105</u>	Initials <u>W</u>
Gen. Ledger.....	Initials.....

Regtl. No. Rank

No. 1175

Rank 206

Name

Jaspeel

22.6.16 - 2.8.16

9 Rurality

31

2

Rondol.

~~42 days~~

~~~~~

1175 Aspell,  
claims did  
not receive  
ration allowance  
for period 22.6.16  
2.8.16. Verify of

correct. military



Halifax N. S.

Jun 5<sup>th</sup>/1920

8186

~~Willes~~

To Paymaster, J. M. Hecaley;  
Officer of records.  
Royal Nfld. Regt.

Dear Sir:

as I have wrote to you  
some time ago. Concerning my  
ration money. and not receiving  
any reply. I therefore ask if it  
is to much trouble to write  
and let me know, as it is due  
to me since 1916. The furlough  
consists of 42 days.

Hoping this will receive  
your best attention. and a reply  
at an early date, as I need it  
at present.

Present.

present.

Believe me to be  
Your Obedient Servant,  
# 1175 Ex pte J. J. Lippell  
202 North Street  
Halifax, N. S.

As our ledgers here will  
back only to 22-12-17; and  
this Ration Allee. should  
show on 1916 <sup>Pipbooks</sup> ledger a  
cable to "Rurality" is  
the only way to trace.

22/6/16 - 2/8/16

---

Ref # 216 Days 2/6/16 - 2/8/16

As this furlough  
was granted in 1916  
Synodical should  
be referred to for  
information. Pay books  
for that period are  
still in possession of  
that office. All

Halifax N. S.  
Nov 26<sup>th</sup> / 19

7729

To Capt J. M. Howley.  
Paymaster,  
The Royal Field Regiment.  
Dear Sir:

Could you give me any  
information concerning my ration  
money of 42 days granted from  
the Pay & Record Office, London Eng  
that I did not get.

I would like for you to  
see about it, and forward it on  
to me as I am in need of it  
at present.

Hoping to receive a favourable  
reply at an early date

I remain

Your Obedient Servant.

# 1145 Ex-172 J. J. Aspell.  
20<sup>th</sup> North Street.  
Halifax, N. S.





St. John's,

FEB 15 1918

(Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To *M<sup>rs</sup> M. Wall*

*Springdale St*

Billeting soldiers as undermentioned

from *Feb 8<sup>th</sup> /18* to *Feb 15<sup>th</sup> /18*

*1175 Pte J. Aspell*

*6 00*

Certified correct for \$ *6.00*

*R. J.*

*W. H. [Signature]*  
Billeting Officer

St. John's,

FEB 22 1918

(Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To Mrs. M. Wall

Springdale St

Billeting soldiers as undermentioned

from Feb 15<sup>th</sup> /18 to Feb 22<sup>nd</sup> /18

1175 Pte. J. Aspell

6 00

Certified correct for \$ 6 00

R. J.

*R. J. Aspell*

Billeting Officer

St. John's,

MAR 1 1918  
(Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To *M<sup>rs</sup> Wall*  
*Springdale St*

Billeting soldiers as undermentioned

from *Feb 22<sup>nd</sup> / 18* to *Mar 1<sup>st</sup> / 18*

|                             |             |
|-----------------------------|-------------|
| <i>1175. Pte. J. Aspell</i> | <i>6 00</i> |
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Certified correct for \$ *6.00*

*R.S.*  
*Geo L. Bant*  
Billeting Officer  
*Major*

St. John's,

MAR 8

1918

(Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To *M<sup>rs</sup>. M. Wall.*

Billeting soldiers as undermentioned

from *Mar 1<sup>st</sup> / 18* to *Mar 8<sup>th</sup> / 18*

*1175. Pte. J. Aspell.*

*6 00*

Certified correct for \$

*6.00*

*R. J.*

*[Signature]*

Billeting Officer

St. John's,

FEB 1 1918

(Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To *M<sup>rs</sup>. M. Wall*

*Springdale St*

Billeting soldiers as undermentioned

from *Jan 25<sup>th</sup> /18* to *Feb 1<sup>st</sup> /18*

*1175 Pte. J. Aspell*

*6 00*

Certified correct for \$

*6.00*

*R. J.*

*R. J.*  
Billeting Officer

St. John's, JUL 5 - 1918  
(Date)

**1st Newfoundland Regiment**  
**BILLETING ACCOUNT**

To *Mr. Wall*  
*Springdale, N.S.*

Billeting soldiers as undermentioned

from *June 28<sup>th</sup> / 18* to *July 5<sup>th</sup> / 18*

|                             |             |
|-----------------------------|-------------|
| <i>1175. Pte. J. Aspell</i> | <i>6.00</i> |
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Certified correct for \$ *6.00*

*A.7* *A. B. Dickson, Lieut.*  
Billeting Officer



St. John's, JUN 28 1918  
(Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To Mrs. Wall.  
Springdale. St. John's

Billeting soldiers as undermentioned

from June 21st/18 to June 28th/18

|                     |      |
|---------------------|------|
| 1175 Pte. J. Asfull | 6 00 |
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Certified correct for \$ 6. 00

2  
A.S.

C. B. Dickson  
Billeting Officer

St. John's,

JAN 18 1918

(Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To *M<sup>rs</sup> M. Wall.*  
*59 Springdale St.*

Billeting soldiers as undermentioned

from *Jan 11<sup>th</sup> 18.* to *Jan 18<sup>th</sup> 18.*

*1175 Pte. J. Aspell.*

*6 00*

Certified correct for \$ *6.00*

*R. J.*

Billeting Officer

JAN 25 1918

St. John's,

(Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To *Mrs. M. Wall.*  
*Springdale St.*

Billeting soldiers as undermentioned

from *Jan 18<sup>th</sup> / 18* to *Jan 25<sup>th</sup> / 18*

|                            |          |           |
|----------------------------|----------|-----------|
| <i>1175 Pte J. Aspell.</i> | <i>6</i> | <i>00</i> |
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Certified correct for \$

*6.00*

*R. S.*

Billeting Officer

Royal.

St. John's, JAN 11 1888

Regiment

Newfoundland ~~Forestry Companies,~~

Billeting Account,

To M<sup>rs</sup> M. Wall.

59 Springdale St

Billeting Soldiers as undermentioned

from Jan 4<sup>th</sup> /18. to Jan 11<sup>th</sup> /18.

1175 Pte J. Aspell.

6 00

Certified correct for \$ 6.00

*R. J.*

Billeting Officer.  
R. J.

St. John's, **JAN 4 1918**

*Royal*

*Regiment*

~~Newfoundland Forestry Companies,~~

Billeting Account,

To *M<sup>rs</sup>. M. Wall*

*59 Springdale St*

Billeting Soldiers as undermentioned

from *Dec 28<sup>th</sup> /17* to *Jan 4<sup>th</sup> /18*

|                           |              |
|---------------------------|--------------|
| <i>1175 Pte J. Aspell</i> | <i>12.00</i> |
|---------------------------|--------------|

Certified correct for \$ *12.00*

*M. Dulup*

Billeting Officer.



St. John's,

MAR 22 19

(Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To Mrs M. Wall.

Springdale St

Billeting soldiers as undermentioned

from Mar 15<sup>th</sup> /18 to Mar 22<sup>nd</sup> /18

1175 Pte J Aspell

6 00

Certified correct for \$ 6.00

R.J.

*[Signature]*

Billeting Officer



St. John's,

MAR 29 1918

(Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To *M<sup>rs</sup> M. Wall*

Billeting soldiers as undermentioned

from *Mar 22<sup>nd</sup>/18* to *Mar 29<sup>th</sup>/18*

|                              |             |
|------------------------------|-------------|
| <i>1175. Pte. J. Caspell</i> | <i>6 00</i> |
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Certified correct for \$ *6.00*

*R. J.*

*C. S. James*  
Billeting Officer

St. John's, APR 5 - 1918  
(Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To Mrs. M. Wall  
Springdale St.

Billeting soldiers as undermentioned

from Mar 29<sup>th</sup> /18 to Apr 5<sup>th</sup> /18

|                      |   |    |
|----------------------|---|----|
| 1175. Pte. J. Aspell | 6 | 00 |
|----------------------|---|----|

Certified correct for \$ 6.00

R 5

W. J. James  
Billeting Officer

St. John's, APR 19 1918  
(Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To *M<sup>rs</sup>. M. Wall.*  
*Springdale St.*

Billeting soldiers as undermentioned

from *Apr 12<sup>th</sup>/18* to *Apr 19<sup>th</sup>/18*

|                             |             |
|-----------------------------|-------------|
| <i>1175. Ste. J. Aspell</i> | <i>6.00</i> |
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Certified correct for \$ *6.00*

*R.T.*

*W. James*  
Billeting Officer

St. John's, APR 12 1918  
(Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To Mrs M. Wall

Springdale, St

Billeting soldiers as undermentioned

from Apr 5<sup>th</sup> /18 to Apr 12<sup>th</sup> /18

|                      |      |
|----------------------|------|
| 1175. Pte. J. Aspell | 6.00 |
|                      |      |
|                      |      |
|                      |      |
|                      |      |

Certified correct for \$ 6.00

R. J.

R. J. James  
Billeting Officer

St. John's, MAY 24 1918  
(Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To *M<sup>rs</sup> Wall*  
*Springdale St*

Billeting soldiers as undermentioned

from *May 17<sup>th</sup> / 18* to *May 24<sup>th</sup> / 18*

*1175 Ste. J. Aspell* 6 00

*St. J. Aspell* 7123 *ew*

Certified correct for \$ *6.00*

*R.M.* *J.R.L.*

*C.B. Dick's Lieut.*  
Billeting Officer

*A.T.*

ST. JOHN'S, FEB 28 1919

# Royal Newfoundland Regiment.

Billeting Account,

To Mrs. Wall  
Springdale St

Billeting Soldiers as undermentioned

from Feb 21<sup>st</sup> /19 to Feb 28<sup>th</sup> /19

|                             |          |           |
|-----------------------------|----------|-----------|
| <u>1175 - Mr. J. Popple</u> | <u>7</u> | <u>20</u> |
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Certified correct for \$ 7.20

A.S. Joseph A. Lawrence  
77 Billeting Officer.

ST. JOHN'S

(date)

1st NEWFOUNDLAND REGIMENT,  
Billeting Account,

To J. T. Aspell

Billeting soldiers as undermentioned

from Jan 1<sup>st</sup> to Feb 2<sup>nd</sup>.

At Aspell, 2 w. & d.

13-

Certified correct for \$13.00

J. J. Brady  
Billeting Officer.



St. John's, JUN 21 1918  
(Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To Mrs. Wall  
Springdale, N.S.

Billeting soldiers as undermentioned  
from June 14<sup>th</sup> / 18 to June 21<sup>st</sup> / 18

|                       |      |
|-----------------------|------|
| 1175. Pte. J. Russell | 6 00 |
|                       |      |
|                       |      |
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|                       |      |

Certified correct for \$ 6.00

R. J. *C. Dicks*  
Billeting Officer

St. John's,

(Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To *M<sup>rs</sup> Wall*  
*Springdale. Strat*

Billeting soldiers as undermentioned

from *June 7<sup>th</sup> /18* to *June 14<sup>th</sup> /18*

|                             |             |
|-----------------------------|-------------|
| <i>1175. Pte. J. Aspell</i> | <i>6 00</i> |
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Certified correct for \$ *6 00*

*A. J.*

*Orz Dickson*  
Billeting Officer

St. John's, JUN 7 - 1918  
(Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To Mrs Wall  
Springdale Street

Billeting soldiers as undermentioned

from May 31<sup>st</sup> / 18 to June 4<sup>th</sup> / 18

1175. Pte. J. Aspell

6 00

Certified correct for \$ 6.00

R.T

C. B. Dickson  
Billeting Officer

St. John's,

MAY 3 1918  
(Date)

St. John's

1st Newfoundland Regiment  
BILLETING ACCOUNT

To *M<sup>rs</sup> Wall*

*Springdale St*

Billeting soldiers as undermentioned

from *May 24<sup>th</sup> / 18 to May 31<sup>st</sup> / 18*

|                           |             |
|---------------------------|-------------|
| <i>1175. H. J. Aspell</i> | <i>6 00</i> |
|---------------------------|-------------|

Certified correct for \$

*6.00*

*R.7*

*C. B. Duke Lieut*  
Billeting Officer

ST. JOHN'S,

(date)

16/2/17

1st NEWFOUNDLAND REGIMENT,

Billeting Account,

To Pte J. Aspell

Billeting soldiers as undermentioned

from Feb 2 to Feb 16

Pte J. Aspell

10<sup>00</sup>

Certified correct for \$ 10<sup>00</sup>

J. Phelan Capt.

Billeting Officer.

9

ST. JOHN'S,

July 1917.

(date)

1st NEWFOUNDLAND REGIMENT,

Billeting Account,

To John S. Aspell.

Billeting soldiers as undermentioned

from July 2 to July 6

1175, J. S. Aspell.

10

Certified correct for \$10<sup>00</sup>

J. S. Aspell Capt.  
Billeting Officer.

R

ST. JOHN'S, NOV 9 1917  
(date)

1st NEWFOUNDLAND REGIMENT,

Billeting Account,

To *M<sup>rs</sup> M. Wall*

*59 Springdale St*

Billeting soldiers as undermentioned

from *Nov 2<sup>nd</sup> /17* to *Nov 9<sup>th</sup> /17*

*1175. Pte J. Aspell*

*6 00*

Certified correct for \$ *6.00*

*Abbey J.*

Billeting Officer.

*R.J.*



ST. JOHN'S,

NOV 2 1917

(date)

1st NEWFOUNDLAND REGIMENT,

Billeting Account,

To M<sup>rs</sup>. Wall.

59 Springdale St.

Billeting soldiers as undermentioned

from Oct 26<sup>th</sup> /17 to Nov 2<sup>nd</sup> /17

1175: Pte. J. Aspell.

6 00.

Certified correct for \$ 6.00.

*R. S.*

Billeting Officer.

R.S.

ST. JOHN'S,

OCT 26 1917

(date)

1st NEWFOUNDLAND REGIMENT,

Billeting Account,

To

Mr. Wall.

59. Springdale St.

Billeting soldiers as undermentioned

from Oct 12<sup>th</sup>/17. to Oct 26<sup>th</sup>/17.

1175 Pte. J. Aspell.

12. 00

Certified correct for \$ 12. 00

W. J. Aspell

Billeting Officer.

R. J.

ST. JOHN'S,

NOV 16 1917

(date)

1st NEWFOUNDLAND REGIMENT,

Billeting Account,

To *M<sup>rs</sup> M Wall*

*59 Springdale St.*

Billeting soldiers as undermentioned

from *Nov 9<sup>th</sup>/17* to *Nov 16<sup>th</sup>/17*

|                            |          |           |
|----------------------------|----------|-----------|
| <i>1175 Pte J. Aspell.</i> | <i>6</i> | <i>00</i> |
|----------------------------|----------|-----------|

Certified correct for \$ *6 00*

*[Signature]*  
Billeting Officer.

*R.S.*

ST. JOHN'S,

DEC 14 1917

(date)

1st NEWFOUNDLAND REGIMENT,

Billeting Account,

To *M<sup>rs</sup> M. Wall.*

*Springdale St*

Billeting soldiers as undermentioned

from *Dec 7<sup>th</sup> /17* to *Dec 11<sup>th</sup> /17*

|                            |             |
|----------------------------|-------------|
| <i>1175 Pte J. Aspell.</i> | <i>6 00</i> |
|----------------------------|-------------|

Certified correct for \$ *6.00*

*[Signature]*  
Billeting Officer.

*R.S.*

St. John's,

NOV 30 1917

(Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To *M<sup>rs</sup> M. Wall.**59. Springdale St*

Billeting soldiers as undermentioned

from *Nov 23<sup>rd</sup>/17* to *Nov 30<sup>th</sup>/17*

|                           |             |
|---------------------------|-------------|
| <i>1175-Pte J Aspell.</i> | <i>6 00</i> |
|                           |             |
|                           |             |
|                           |             |
|                           |             |
|                           |             |
|                           |             |
|                           |             |

Certified correct for \$ *6.00**R. T.*

Billeting Officer

*R. T.*

DEC 7 1917

St. John's, (Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To *M<sup>rs</sup> M. Wall.*

*Springdale St.*

Billeting soldiers as undermentioned

from *Nov 30<sup>th</sup> /17* to *Dec 7<sup>th</sup> /17*

*1175 Pte J. Aspell.*

|  |   |    |
|--|---|----|
|  | 6 | 00 |
|--|---|----|

Certified correct for \$ *6.00*

*[Signature]*

Billeting Officer

*R.S.*

ST. JOHN'S,

JUN 23 1917  
(date)

1st NEWFOUNDLAND REGIMENT,

Billeting Account,

To J. S. Aspell

Billeting soldiers as undermentioned

from June 22 to June 26<sup>th</sup>  
4 days 1 meal

3.90

1175 J. S. Aspell

Certified correct for \$ 3.90

J. J. Blundy  
Billeting Officer.

ST. JOHN'S, MAY 11 1917  
(date)

1st NEWFOUNDLAND REGIMENT,  
Billeting Account,

To J. Y. Aspell.  
59 Springdale St.

Billeting soldiers as undermentioned

from Apr. 27<sup>th</sup> to MAY 11 1917

# 1175 J. Y. Aspell 10 - -

Certified correct for \$ 10<sup>00</sup>

W. H. L. L. L.  
Billeting Officer.



ST. JOHN'S, JUN 1-  
(date)

1st NEWFOUNDLAND REGIMENT,

Billeting Account,

To

J. T. Aspell  
Depot

Billeting soldiers as undermentioned

from May 11 to JUN 1- 1947 15

J. T. Aspell  
1175

Certified correct for \$15<sup>00</sup>

Capt. Hunt  
Billeting Officer.

15

ST. JOHN'S,

JUN 28 1877  
(date)

1st NEWFOUNDLAND REGIMENT,

Billeting Account,

To Pts. J. J. Aspell

59 Spenglers St -

Billeting soldiers as undermentioned

from June 1<sup>st</sup> to June 22<sup>nd</sup>

1175 Pts. J. J. Aspell

1800

Leaving for the Quarters:

Refriger Party Saturday morning

Certified correct for \$ 1800

J. J. Aspell

Billeting Officer:

J. J.

St. John's,

JUL 12 1918

(Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To Mr Wall

Spennigdale St

Billeting soldiers as undermentioned

from July 3/18 to July 12/18

1175 - 76 of Aspell

6.00

Certified correct for \$ 6.00

G.H.S.

C.B. Dick / Lieut.

Billeting Officer

St. John's,

FEB 8 1918

(Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To *M<sup>rs</sup> M. Wall.*

*59. Springdale St*

Billeting soldiers as undermentioned

from *Feb 1<sup>st</sup> /18* to *Feb 8<sup>th</sup> /18*

*1175 Pte. J. Aspell.*

*6 00*

Certified correct for \$ *6.00*

R.S.

*[Signature]*

Billeting Officer

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

1175

PAY VOUCHER.

\$17.<sup>00</sup>/<sub>100</sub>

Nov. 30<sup>th</sup> 1917

Received from the First Newfoundland Regiment  
the sum of Seventeen <sup>00</sup>/<sub>100</sub> Dollars.

on account  
balance of Pay. to 30/11/17

Pte J Aspell

|                         |                      |
|-------------------------|----------------------|
| Ch. No. 1650            | Initials R.W.        |
| Pay Ledger 288          | Initials [Signature] |
| Gen. Ledger [Signature] | Initials [Signature] |

Regt. No. [Signature] Rank

No. 1175 Rank Pvt.

Name J. Aspell

J. T. Repell

1125

P. + P. 6.

COPY

Sailed P.W. S. Corsican 9<sup>16</sup>

Army Form O. 1625.

PAY LIST. Sept 20 to Oct. 9 1916. Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps 2<sup>d</sup> Newfoundland Reg. No. 1175 Rank Private Name Aspell J. J. Died (a) at Fulbath on the 9<sup>th</sup> of October 1916.

I Certify to the correctness of above in every particular.

Commanding Squadron, Troop, Battery or Company.

STATEMENT OF ACCOUNT.

[FORM 1.]

Table with columns: Date, Dr., £, s, d., Cr., £, s, d. Rows include: Balance Dr. last month, Cash issues (Oct 6, 9 1916), Consolidated stoppage (10 Days Allowance 50), Balance due by the Paymaster (£ 2 11 5 1/2).

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ 2 11 5 1/2 is correctly chargeable against the Public.

Dated at this day of N. S. W. 1916. J. J. Aspell Paymaster.

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with A.F.B. 2090 or Army Form O. 1815. (b) Words in Italic to be struck out when there is no debtor balance.



*Canadian 9/10/16* COPY

OCT 12 1916  
Army Form O. 1625.

PAY LIST. *Sept 30<sup>th</sup> to Oct 9<sup>th</sup>* 1916. Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps *21, Newfoundland*  
 No. *1175* Rank *Pte* Name *Aspell J. J.*  
 Died<sup>(a)</sup> at \_\_\_\_\_ on the \_\_\_\_\_ of \_\_\_\_\_ 191 .  
 Deserted at *Furlough* on the *9<sup>th</sup>* of *October* 1916.

I Certify to the correctness of above in every particular.

*R. D. Russell* { Commanding Squadron, Troop,  
*Capt.* Battery or Company. *H*

STATEMENT OF ACCOUNT. [FORM 1.

| Date | Dr.                                              | £        | s.        | d.           | Cr.                                                                                 | £        | s.       | d.           |
|------|--------------------------------------------------|----------|-----------|--------------|-------------------------------------------------------------------------------------|----------|----------|--------------|
|      | Balance Dr. last month .....                     |          |           |              | Balance Cr. last month .....                                                        |          |          |              |
|      | Cash issues<br>(Date of each issue to be stated) |          |           |              | Pay 10 days at 1.10 from <i>30/9/16</i> to <i>9/10/16</i>                           | <i>2</i> | <i>5</i> | <i>2 1/2</i> |
|      |                                                  | £        | s.        | d.           | Proficiency, Service or good conduct pay                                            |          |          |              |
|      | <i>6. 10. 1916</i>                               |          | <i>10</i> | <i>0</i>     | days at _____ from _____ to _____                                                   |          |          |              |
|      | <i>9. 10. "</i>                                  |          | <i>10</i> | <i>0</i>     | Messing allowance days at _____                                                     |          |          |              |
|      | <i>"</i>                                         |          |           |              | from _____ to _____                                                                 |          |          |              |
|      |                                                  | <i>1</i> | <i>10</i> | <i>0</i>     | Clothing and kit allowance .....                                                    |          |          |              |
|      | Consolidated stoppage.....                       |          |           |              | Amount produced by the sale of Necessaries                                          |          |          |              |
|      | <i>10 days allotment 80</i>                      |          |           |              | Personal Clothing and Effects from Form 2...                                        |          |          |              |
|      | <i>100.00 - 20.00 = 80</i>                       | <i>1</i> | <i>1</i>  | <i>5 1/2</i> | Amount of Savings Bank balance, including interest (if no balance, to be so stated) |          |          |              |
|      | Balance due by the Paymaster                     |          |           |              | Deferred Pay or Gratuity .....                                                      |          |          |              |
|      |                                                  | <i>£</i> | <i>2</i>  | <i>11</i>    | Balance due to the Paymaster.....                                                   | <i>6</i> | <i>3</i> | <i>1/2</i>   |
|      |                                                  |          |           |              |                                                                                     | <i>£</i> | <i>2</i> | <i>11</i>    |
|      |                                                  |          |           |              |                                                                                     |          |          | <i>5 1/2</i> |

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ \_\_\_\_\_ is correctly chargeable against the Public<sup>(b)</sup>. NEWFOUNDLAND CONTINGENT.

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 191 . Paymaster.



(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with A.F.B. 2090 or Army Form O. 1815.  
 (b) Words in Italics to be struck out when there is no debtor balance.

CHECKED

C.R.

1175

**John Thos. Aspell** was attested for General Service  
with the NEWFOUNDLAND REGIMENT on ~~Feb.~~ 21st 1915...  
Regimental No. 1175 was allotted to Pte **J.T. Aspell**

AUTHORITY:

Record Officer

Dept. of Militia,

March 25th. 1919.

INVALID SOLDIER.

2/1st NEWFOUNDLAND REGIMENT.



I recommend for Furlough 106 aspell, J. T.

for 3 months on account of delirium following

Interic Fever (Lasting 8 mos.)

when rendered unfit for duty, will you kindly arrange for his  
examination shortly before his Furlough expires.

Signed H. G. Horlock  
M.O.

28.9.16



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, John Thomas Aspell, Regl. No. 1175 hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and 34 1/2 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person and Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person and Persons concerned, viz.:

Table with 5 columns: Identity Certificate No., Whether Wife, Child, other Relative or Friend, NAME (in full), ADDRESS, AMOUNT (each person). Row 1: 1107, Brother, General Peter Aspell, 3rd Long Hill, 50.

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.) [Signature] Officer Commanding Company [Signature] 17 10/41 1915

(Sig.) John Thomas Aspell (Rank) Private

Form T.R.1

| CLASS OF SERVICE | SYMBOL |
|------------------|--------|
| Day Message      |        |
| Day Letter       | Blue   |
| Night Message    | Nite   |
| Night Letter     | N L    |

If none of these three symbols appears after the check (number of words) this is a day message. Otherwise its character is indicated by the symbol appearing after the check.

# ANGLO-AMERICAN TELEGRAPH COMPANY, LIMITED.

CONNECTING WITH  
THE WESTERN UNION TELEGRAPH COMPANY.

| CLASS OF SERVICE | SYMBOL |
|------------------|--------|
| Day Message      |        |
| Day Letter       | Blue   |
| Night Message    | Nite   |
| Night Letter     | N L    |

If none of these three symbols appears after the check (number of words) this is a day message. Otherwise its character is indicated by the symbol appearing after the check.

176Z M 36NL

FY BROOKLYN NY 20

LIEUT COL RANDELL

CHIEF STAFF OFFICER

CARE RECORDS MILITIA BLDG.

WATER ST STJOHNS NF

PLEASE VERIFY REPORT OF PRIVATE <sup>P</sup>ASTELL REGISTERED NUMBER ONE ONE SEVEN FIVE  
DEVELOPED RHEUMATISM DURING THE WAR REPLY AT ONCE TO DR PEARSE UNITED WAR  
VETERAN GRAND CENTRAL PALACE FORTY SIXTH STREET AND LEXINGTON AVENUE NEWYORK-  
CITY

DR V M MEYERS

1035P

167







| CLASS OF SERVICE DESIRED                                                                                                         |  |
|----------------------------------------------------------------------------------------------------------------------------------|--|
| Fast Day Message                                                                                                                 |  |
| Day Letter                                                                                                                       |  |
| Night Letter                                                                                                                     |  |
| Patrons should mark an X opposite the class of service desired. Otherwise the telegram will be transmitted as a FAST DAY MESSAGE |  |

# ANGLO-AMERICAN TELEGRAPH COMPANY, LIMITED.

CONNECTING WITH  
THE WESTERN UNION TELEGRAPH COMPANY.

|                |
|----------------|
| Receiver's No. |
| Check          |
| Time Filed     |

Send the following telegram, subject to the terms on back hereof, which are hereby agreed to

Feb. 21 192 3

To:

Dr. Pearce,  
United War Veteran,

Central Palace, Forty Sixth Street and Lexington  
Avenue, New York City.

C.R. 1175

Reply to cable from Dr. Meyers Brooklyn concerning one one seven five John Thomas Aspell follows admitted twenty fourth Casualty Clearing Station Suvla Bay rheumatism fifth December ~~thirteen~~ fifteen transferred to Base Depot Alexandria eighth ~~thirteen~~ nineteen sixteen admitted seventeenth General Hospital Alexandria fever not yet diagnosed fifth February nineteen sixteen transferred twenty first General Hospital Alexandria enteric ninth February nineteen sixteen invalided to England twenty third March nineteen sixteen admitted third London General Hospital Wandsworth fourth April nineteen sixteen transferred Addington Park Convalescent Home Croydon thirteenth April nineteen sixteen discharged hospital twenty second June nineteen sixteen fullstop No reference to rheumatism in medical board on discharge from army nineteenth March nineteen nineteen fullstop pension for thirty percent disability diminishing to nil in March nineteen twenty two was paid for enteric.

(Night Letter)

W.F. RENDELL

LIEUT

Col. Militia Dept.

THE BOARD OF  
PENSION COMMISSIONERS  
FOR NEWFOUNDLAND

HON. J. A. CLIFT, K. C., C. B. E.  
MAJOR W. H. PARSONS, M. C.  
R. A. M. C.




In reply refer to

No. 1388

C.R. 1175

St. Johns,

Jany. 14th/31

  
Lt. Col. W. F. Rendell,  
Chief Staff Officer,  
City.

Sir:-

I have the honour by direction to acknowledge receipt of your communication of Jany. 10th with reference to the case of 1175 Ex-Pte. J. J. Aspell, whose address is 48 John Street, Halifax.

In reply I would say that Aspell was taken on the strength of the Dept. Soldiers' Civil Re-Establishment, Canada, for treatment from 12-5-20 and discharged 15-9-20. For this period he was entitled to \$50.00 per month making a total of \$206.87. The Dept. of S. C. R., however, paid Aspell the sum of \$301.74, showing an overpayment of \$95.07. On his discharge from Hospital he was granted a pension of \$15.00 per month dating from Sept. 18th. His account has been adjusted to the 31-1-31 and still shows a debit balance of \$27.57. Pension will, therefore, be held until this amount is recovered.

I have the honour to be,  
Sir,  
Your obedient servant,

  
Asst. Secy.

CGO/EBD.



Halifax N.S.  
Jan. 3<sup>rd</sup> 1921

To Lieut. Col. Rendell.  
Militia Dept.

Dear Sir:

I have been notified by the Halifax Pension Board that I was granted a pension in April 1<sup>st</sup> 1920 of which I haven't received up to date, I have wrote several times to Major Parson's but received no answer as yet,

Therefore I have taken steps in writing to you to see if you would let me know at your earliest convenience

Yours Obediant Servant,  
1175 ex-pte J. J. Aspell.  
46 John St. Halifax N.S.

Receipt for Army Book 64

No. *1175*..... NAME *Aspell J.T.*.....

To Certify that I have received the *1.7* 64 of the above  
named soldier.

Name *Aspell J.T.*.....

Date *July 12<sup>th</sup> 1920.*

Place *Halifax N.S.*.....

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

C.R. 1175

RECEIPT.

FOR ISSUE OF RIBAND OF VICTORY MEDAL/1914-1919.

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

NO 1175.....NAME *J. T. Aspell*...

DATE *16/3/20*...

PLACE... *Halifax*

RECEIPT.

C.R. 1175

I hereby certify that I have received the 1914-1915

STAR.

No 1175 Name Exc Ptic of J Aspell

Witness Frank S. Ritchie

Date Jan 9<sup>th</sup> / 20

Place Halifax N.S.

Halifax N. S.  
Jan 5<sup>th</sup> 1920

C.R. 1175

Leut. Col. Rendell;  
Chief Staff Officer,  
Royal Nfld Regt.

Dear Sir:

would you oblige me  
by forwarding on the 1914-  
1915 Starr as I haven't rec-  
eived it as yet.

and Believe me to be  
Your Obedient Servant-

1175 ex pte of J. Aspell  
202 North Street.

Halifax, N. S.

Records

Attention

R

RECEIPT FOR ISSUE OF

RIBAND OF 1914-15 Star.

C.R. 1175

I certify that I have received

of 3 inches of Riband of 1914-15 Star.

I certify that I have received an issue  
of 3 inches of Riband of 1914-15 Star.

Date.....

Place..... Name *J. J. Repell*.....

Date *May 11 1911*

Place *St. Johns*.....

Please sign this and return to Dept. of Militia.

CIRCULAR LETTER

C.R. 1175

St. John's,

March 13th 1919.

Riband of 1914-15 Star.

Please complete the following claim and return it to this Department. If possible, call at Room No. 3 for your issue.

Lieut. Colonel.

Chief Staff Officer.

CLAIM FOR ISSUE OF RIBAND  
of 1914-15 STAR.

Department of Militia,

St. John's.

I hereby make claim for issue of Riband of 1914-15 Star.

I certify that I am entitled to this issue,

having served on\* *Gallipoli*  
from *Sept 20<sup>th</sup>* 1915 to *Dec 3<sup>rd</sup>* 1915.

(Date) *May 19* (NO) *1175* (Rank) *St.* (Name) *J. J. Lyzell*

(Place) *St. John's*.....

\*Fill in theatre of War where you served in Gallipoli, Mudros, Lemnos, or Western Egyptian Frontier.

C.R. 1175

Extract from Daily Orders Part II Unit The Royal  
Said, Regt., St. John's, Oct. 15th, 1917.

The following man has been recalled from Special  
Guard Duty and reported to Headquarters Oct. 12th, 1917.

1175 Pte. J. Aspell.



C.R. 1175

Extract from Daily Orders Part 11 Unit The Royal  
Nfld. Regt., St. John's, Jans, 23rd, 1917.

The following man now on Strength has been told off  
for (Home Defence) duty and attached to Heart's Content  
Station from <sup>June</sup> 26/17.

1175 Pte. J. Aspell.

C.R. 1175

Extract of Daily Orders Part II Royal Newfoundland  
Regiment Depot St. John's dated March 22nd 1919.

-----

The Discharge of the undernote on Demobilization has  
been CONFIRMED by Officer i/c Records on noted  
date.

19/3/19.

#1175 Pte. John Aspell.

2

C.R. 1175

Extract from Daily Orders part II, Depot Winchester, dated  
March 7th., 1919.

The discharge of the undernoted on demobilization has been APPROVED  
by O. C. Discharge Depot on 5-3-19.

#1175 pte. J. Aspell.

C.R. 1175

Extract from Medical Board held on TUESDAY March 4th., 119  
the following were the findings.

1175 Pte. J. Aspell.

3rd., Board. Recommended discharge from the Army.

C.R.

1175

Extract from Daily Orders Part II Unit The Royal Nfld.  
Regt., St. John's, Jan. 15th, 1917.

1175 Pte. J.T. Aspell.

Attached to the strength from Jan. 15/17.

C.R.

1175

Extract of Casualty List received from P.&R.O.

22/6/16.

1175, Pte J. T. Aspell. ✓

Then following man is discharged from Woldinghad Enteric  
Depdt. 22/6/16. and is granted 6 weeks furlough to 2/8/16.

CR 1175

Extract from Casualties received from the Pay and Record Office  
London, April 14th 1916.

#1175 Pte. J. T. Aspell.

TRANSFERRED FROM THIRD LONDON GENERAL HOSPITAL TO ADDINGTON PARK  
CONVALESCENT HOME, CROYDON 18-4-16.



C.R. 1175

Extract from Casualties received from P & R Office London,

Apr. 6, 1916.

Admitted 7<sup>th</sup> London Gen. Hosp. 4/6/16

/175 Pte. Aspell J.T.

Enteric.



C.R. 1175

Extract from War Office List No.H.7421.

1175 Pte.Aspell, J.T.

1/Wfld.R.

To England per HS Dunluce Castle ex 21 Gen.Hospital <sup>23</sup>~~24~~ Mar'16.

C.R. 1175

SICK & WOUNDED N.C.O.s & MEN OF THE EXPEDITIONARY FORCE - MEDITERRANEAN.



PRESTON RECORD OFFICE.

LIST NO.H.6129.

|                             |              |                           |                                                        |
|-----------------------------|--------------|---------------------------|--------------------------------------------------------|
| 20779 Pte. Crollen, T.      | 6/Borders.   | Double Otitis Medis.      | Adm.17 GH.Alexandria 7th Feb.16.                       |
| 18660 Pte. Brown, J.        | 6/ -do-      | Arthritis Knees.          | -do-                                                   |
| 18490 Pte. Edge, J.D.       | 6/L.N.Lancs. | Bronchitis.               | -do-                                                   |
| 17069 Pte. Lord, H.         | 6/E.Lancs.   | Old GSW.R.Slt.            | -do-                                                   |
| 27874 L/C. Gallagher, J.    | 9/Lan.Fusrs. | Bronchitis.....           | Dis.to Duty ex 17 GH.Alexandria 7th Feb.16.            |
| 18461 Pte. Knowlis, C.H.    | 6/E.Lancs.   | NYD.Fever Slt..           | Adm.17 GH.Alexandria 9th Feb.16.                       |
| 11280 Pte. Griffin, J.W.    | 6/Border R.  | Disc.Shldr.Slt.           | -do-                                                   |
| 27129 Pte. Solway, G.       | 9/Lan.Fusrs. | Varicocele Slt.           | -do-                                                   |
| 27924 L/C. Yeardeley, E.    | 9/ -do-      | Diarrhoea Slt.            | -do-                                                   |
| 11479 Cpl. Busby, A.        | 6/H.Lancs.   | -do-                      | -do-                                                   |
| 16540 Pte. James, F.        | 11/Manch.R.  | VDG.                      | -do-                                                   |
| 16512 Pte. Fidler, F.       | 11/Manch.R.  | Gastritis & Neurasthenic. | Trans.to Luxor Con.Hos.ex 17 GH.Alexandria 9th Feb.16. |
| 29971 Pte. Marsh, P.W.      | 11/ -do-     | Constipation...           | Adm.17 GH.Alexandria 10th Feb.16.                      |
| 7763 Pte. Cleg, H.          | 6/Border R.  | Frequency of Micturition. | -do-                                                   |
| 102376 Pte. Pollin, J.      | 6/ -do-      | Boils.                    | -do-                                                   |
| 3016 Pte. McEwan, A.        | 11/Manch.R.  | Hernia.                   | -do-                                                   |
| 11173 Pte. Luke, W.         | 6/K.O.R.L.   | NYD.Fever.                | -do-                                                   |
| 27750 Sjt. Wilby, J.W.      | 9/Lan.Fusrs. | VDG.....                  | Dis.to Duty ex 17 GH.Alexandria 9th Feb.16.            |
| 22134 Pte. Walsh, W.        | 6/L.N.Lancs. | Bronchial Cat...          | Trans.to Mustapha Con.D.ex 17 GH.9th Feb.16.           |
| 18855 Pte. Wilson, W.       | 6/K.O.R.L.   | Lumbago.....              | Dis.to Duty ex 17 GH.Alexandria 10th Feb.16.           |
| 16276 Pte. Stringfellow, T. | 6/L.N.Lancs. | Perineal Abscess.         | -do-                                                   |
| 20156 Sjt. Wilbrahan, C.    | 6/ -do-      | Enteric Fever..           | Trans.to 19 GH.Alexandria ex 17 GH.10th Feb.16.        |

5911

TERRITORIAL FORCE PRESTON RECORD OFFICE.

LIST NO.H.6129.

|                         |            |           |                                              |
|-------------------------|------------|-----------|----------------------------------------------|
| 3084 Pte. Fallon, E.    | 6/Manch.R. | VDSC..... | Dis.to Duty ex 17 GH.Alexandria 7th Feb.16.  |
| 2710 Pte. Armstrong, H. | 5/E.Lancs. | VDSC..... | Dis.to Duty ex 17 GH.Alexandria 10th Feb.16. |

NEWFOUNDLAND CONTINGENT.

LIST NO.H.6129.

|                          |                |                  |                                                |
|--------------------------|----------------|------------------|------------------------------------------------|
| 1175 Pte. Aspell, J.R.T. | 1/Newfoundland | Enteric Fever... | Trans.to 21 GH.Alexandria ex 17 GH.9th Feb.16. |
|--------------------------|----------------|------------------|------------------------------------------------|

C.R. 1175

NEWFOUNDLAND COAST GUARD

Extract of Casualty List received from P.&R.O.  
Feb. 24th, 1916.

1175, Pte J.P. Aspell. ✓

1/Newfoundland NYD. Fever.

Adm. 17 GH. Alexandria 4 Feb. 16.

Extract from Nominal Roll Co. 1st. Bn. **C.R.** 1175  
Embarked, at Devonport for Active Service 20-8-15

Disembarked Alexandria, 51-8-15, Proceeded to Abbassia,  
Cairo, same date, Embarked ~~for~~ Alexandria for Gallipoli  
15-9-15.

1175 Pte. J. Aspell.

CR 1175

Extract from Nominal Roll Embarked St. John's, for Overseas,  
per S.S. "Stephano" April 22, 1915.

1175 Pte. Repell J.





THE BOARD OF PENSION COMMISSIONERS FOR NEWFOUNDLAND

STATEMENT OF ACCOUNT OF

Pension No 1286 Regt.No 1175 Name Aspell T.

WITH

THE DEPARTMENT OF SOLDIERS CIVIL RE-ESTABLISHMENT OF CANADA

PAY AND ALLOWANCES

| <u>PERIOD</u>       | <u>AMOUNT</u>   | <u>AMOUNT<br/>REFUNDED</u> | <u>BALANCE</u> | <u>REMARKS</u> |
|---------------------|-----------------|----------------------------|----------------|----------------|
| 12-5-20 to 30-6-20  | \$16.45         | \$16.45                    |                |                |
| paid wife           | 78.70           | 78.70                      |                |                |
| June 30 advance     | 20.00           | 20.00                      |                |                |
| July 31             | 70.00           | 70.00                      |                |                |
| Aug. 31st.          | 70.00           |                            | \$70.00        |                |
| Sept. 15th. Balance | 70.87           | 70.87                      |                |                |
|                     | <u>\$326.02</u> | <u>\$256.02</u>            | <u>\$70.00</u> |                |

MAINTENANCE

| <u>PERIOD</u>      | <u>AMOUNT</u>   | <u>AMOUNT<br/>REFUNDED</u> | <u>BALANCE</u> | <u>REMARKS</u> |
|--------------------|-----------------|----------------------------|----------------|----------------|
| 12-5-20 to 30-6-20 | \$100.00        | \$100.00                   |                |                |
| 1-7-20 " 28-7-20   | 70.00           | 70.00                      |                |                |
| 1-8-20 " 31-8-20   | 62.00           | 62.00                      |                |                |
| 1-9-20 " 15-9-20   | 41.25           |                            | \$41.25        |                |
|                    | <u>\$273.25</u> | <u>\$232.00</u>            | <u>\$41.25</u> |                |



UNITED STATES VETERANS BUREAU  
WASHINGTON

March 26, 1923.

IN REPLY REFER TO:  
C-A - 323  
TCRD/lmt - 0.25

Subject: John Thomas Aspell, Rgt. 1175,  
Pvt. RFLD Reg.

From: U. S. Veterans' Bureau.

To: Board of Pension Commissioners for Newfoundland,  
St. Johns,  
Newfoundland.

1. Reference is made to the case of John Thomas Aspell, Newfoundland ex-service man, whose address is given as 5710-4th Avenue, Brooklyn, New York.
2. Forwarded herewith for your information in this case is letter from Mrs. John T. Aspell, dated March 19, 1923, which is relative to the man's claim for treatment and pension.
3. All communications relative to this case should bear the symbols 0.25.

L. B. Rogers,  
Assistant Director.

By *J. D. Hester*  
F. D. Hester, Chief, *MD*  
Territorial, Insular and  
Foreign Relations' Sub-Division.

2 Incls.



March 25, 1925.

O-A - 325  
TWRD/lmt - 0-25

Subject: John Thomas Aspell, Egt. 1175,  
Pvt. RFLD Reg.

From: U. S. Veterans' Bureau.

To: Board of Pension Commissioners for Newfoundland,  
St. Johns,  
Newfoundland.

1. Reference is made to the case of John Thomas Aspell, Newfoundland ex-service man, whose address is given as 5710-4th Avenue, Brooklyn, New York.
2. Forwarded herewith for your information in this case is letter from Mrs. John T. Aspell, dated March 19, 1925, which is relative to the man's claim for treatment and pension.
3. All communications relative to this case should bear the symbols 0-25.

L. E. Rogers,  
Assistant Director.

By \_\_\_\_\_  
F. D. Hester, Chief,  
Territorial, Insular and  
Foreign Relations' Sub-Division.

2 Incls.

5710-4<sup>th</sup> Ave  
Brooklyn, N.Y.  
March 19<sup>th</sup> 1923

~~A~~ Family Relations

To Dr. Pease.

Grand Central Palace:

Dear Sir:

This is to verify that my Husband  
John L. Aspell was first Invalided  
from Gardinell's March 8<sup>th</sup> 1915 and  
admitted to East Mudras Hospital su-  
ffering from Rheumatism, was Hon-  
ourably discharged from the Regt. March  
19<sup>th</sup> 1919 and was later admitted to  
Camp Hill Hospital Halifax N. S.  
May 12<sup>th</sup> 1920 suffering from the above  
disease and discharged from that Insti-  
tution Sept 15<sup>th</sup> 1920 after being under  
pay and allowances from the U.S. Govt.

Hoping this will meet with a  
favourably reply.

And O.Blige

Mrs J. L. Aspell

5710-4<sup>th</sup> Ave

Brooklyn, N.Y.



DEPARTMENT OF  
SOLDIERS' CIVIL RE-ESTABLISHMENT

IN YOUR REPLY REFER TO FILE NO.

ACCOUNTANT'S BRANCH

Nurses' Home,  
Cor. Jubilee Rd., & Summer St.,  
Halifax, N.S., March 14th 1923,

Lieut. Col. Rendell,  
Chief Staff Officer c/o Records,  
Militia Bldg.,  
Water St.,  
St. Johns, Newfoundland.

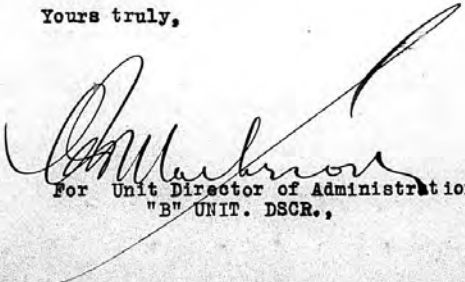
# 1175, ex-Pte. J.T. Aspell

Dear Sir:-

We have been requested by Mrs. Aspell, to forward you a complete statement of Account in connection with the above mentioned Man, for the period he was on the strength of this Unit for Treatment, therefore, attached find Statement of Account, which I trust is the information you require.

Yours truly,

CEM/EH

  
For Unit Director of Administration,  
"B" UNIT. DSCR.,

#1175 Pte. J. T. ASPELL

Admitted Hospital 12.5.20  
Discharged Hospital 15.9.20

Allces. \$1.10 per day Less Assigned Pay \$20.00 per month  
Separation Allces. \$30.00 Allces. in lieu of C.P.F. \$10.00  
Clothing Allces. @ \$7.00 per month from 1.7.20.

Credits

|         |                    |         |
|---------|--------------------|---------|
| Allces  | 12/5 to 31/5/20    | \$47.80 |
| "       | 1/6 to 30/6/20     | 73.00   |
| "       | 1/7 to 31/7/20     | 74.10   |
|         | Clothing Allowance | 7.00    |
| Allces. | 1/8 to 31/8/20     | 74.10   |
|         | Clothing Allowance | 7.00    |
| Allces. | 1/9 to 15/9/20     | 39.50   |
|         | Clothing Allowance | 3.50    |

Total Credits \$326.00

Debits

|           |               |               |
|-----------|---------------|---------------|
| Ck. 44536 | dated 15/6/20 | 20.00 (Dept.) |
| 46028     | " 29/6/20     | 16.45 (Man)   |
| 46029     | " 29/6/20     | 78.68 (Dept.) |
| 48273     | " 30/7/20     | 10.00 (Man)   |
| 48274     | " 30/7/20     | 60.00 (Dept.) |
| 50461     | " 30/8/20     | 10.00 (Man)   |
| 50462     | " 30/8/20     | 60.00 (Dept.) |
| 50896     | " 15/9/20     | 37.87 (Man)   |
| 50897     | " 15/9/20     | 33.00 (Dept.) |

Total Debits \$326.00

  
ACCOUNTANT  
B UNIT D.S.C.R.

Form T-R.1

| CLASS OF SERVICE | SYMBOL |
|------------------|--------|
| Day Message      |        |
| Day Letter       | Blue   |
| Night Message    | Nite   |
| Night Letter     | N L    |

If none of these three symbols appears after the check (number of words) this is a day message. Otherwise its position is indicated by the symbol appearing after the check.

# ANGLO-AMERICAN TELEGRAPH COMPANY, LIMITED.

CONNECTING WITH  
THE WESTERN UNION TELEGRAPH COMPANY.

## NIGHT LETTER

| CLASS OF SERVICE | SYMBOL |
|------------------|--------|
| Day Message      |        |
| Day Letter       | Blue   |
| Night Message    | Nite   |
| Night Letter     | N L    |

If none of these three symbols appears after the check (number of words) this is a day message. Otherwise its position is indicated by the symbol appearing after the check.

88Z OK 41 NL COLLECT TEX

BB BROOKLYN NY MARCH 30 1923

LIEUTENANT COL RENDELL

CARE MILITIA STJOHNSNF.

PLEASE WIRE BY WESTERN UNION AUTHORITY TO MR PIERCE GRAND CENTRAL PALACE  
NEWYORK TO PAY ALLOWANCES TO 1175 EX PRIVATE J T ASPELL YOU HAVE ALL  
PARTICULARS IT IS VERY URGENT

MRS J T ASPELL

5710 4 AVE BROOKLYN.

1125PM



# NEWFOUNDLAND POSTAL TELEGRAPHS



## Cable Connection with all the World

All messages sent are subject to the following conditions :

The Minister of Posts and Telegraphs may decline to forward the Telegram, 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 Telegram shall never reach its destination by reason of any neglect or default of the Minister of Posts and Telegraphs or his Servants whilst the Telegram remains under the control of the Minister of Posts and Telegraphs, he will refund the amount paid by the Sender for such Telegram.

The Minister of Posts and Telegraphs 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 Telegram, 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 Minister of Posts and Telegraphs over the Message shall be deemed to have entirely ceased for the purpose of these Conditions at any point where, in the course of the transit of the Telegram to its destination, it may be entrusted by the Minister of Posts and Telegraphs (and the Minister of Posts and Telegraphs shall have full power so to entrust the Telegram) for further transmission by or through any system belonging to or worked by any administration or authority not controlled by the Minister of Posts and Telegraphs exclusively, although worked as a part 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 \_\_\_\_\_

Address \_\_\_\_\_

| LINE NUMBER | RCD | BY | SENT | BY | CHECK |
|-------------|-----|----|------|----|-------|
|             |     |    |      |    |       |

DATED

MARCH 31st 1923.

TO

MRS. J.T. ASPELL 5710 4th AVE. BROOKLYN, N.Y.

REGRET CANNOT BE RESPONSIBLE FOR PAY AND ALLOWANCES  
FOR YOUR HUSBAND PRESENT DISABILITY NOT DUE TO SERVICE.  
HAVE WRITTEN VETERANS' BUREAU FULLY.

PENSION COMMISSIONERS.

NIGHT LETTER

CHARGE TO B.P.C.

FOR TYPEWRITER

March 25th 1923.

The U. S. Veterans' Bureau,  
Inspector & Foreign Relations Sub-Division,  
Washington, D. C.

1175 John T. Aspell,  
Inf. Regiment.

Dear Sir:-

I beg to refer to your communication of January 29th C-A- 323 SCR- which was forwarded to this office through the Dept. Soldiers' Civil Re-Establishment, Ottawa, together with report in duplicate on SCR Form 346.

This Board cannot be responsible for the hospitalization of Mr. Aspell in view of the fact that the disability for which he was receiving pension was Debility following Enteric Fever, and as his last Medical Board stated that the effects of that disability has now passed away, pension was discontinued. It is regretted, therefore, that we cannot be responsible for his present disability at this late date.

Yours faithfully,

Secretary.

EED.







1386

Aspell John S.

|                                                                                                   |       |    |
|---------------------------------------------------------------------------------------------------|-------|----|
| Rension @ \$15 <sup>00</sup> from 1 <sup>1</sup> / <sub>4</sub> to 15 <sup>9</sup> / <sub>4</sub> | 127   | 50 |
| 5 <sup>00</sup> .. 16 <sup>9</sup> / <sub>4</sub> .. 31 <sup>1</sup> / <sub>4</sub>               | 17    | 50 |
|                                                                                                   | <hr/> |    |
|                                                                                                   | \$145 | 00 |



DEPARTMENT OF  
SOLDIERS' CIVIL RE-ESTABLISHMENT

IN YOUR REPLY REFER TO FILE NO.  
SCR/56-J-22.  
Your Ref. C-A-323.

Ottawa, Ont., February 3rd., 1923.

The Secretary,  
Board of Pension Commissioners,  
St. Johns, Newfoundland.

#1175 - Pte. R.F.L.D. Reg.  
John T. Aspell, 5710 - 4th Ave.,  
Brooklyn, N.Y., U.S.A.

Dear Sir:-

Attached, hereto, please find memorandum received from the Veterans' Bureau enclosing medical reports dated the 16th ultimo in the case of the marginally named ex-member of the Newfoundland Forces. These reports are obviously intended for your office and the Veterans' Bureau have been requested to address all future communications concerning this man direct.

Yours truly,

F.W. Blakeman, M.D.  
For Director of Medical Services,  
D. S. C. R.

TJF/GMB.

UNITED STATES VETERANS BUREAU

WASHINGTON

January 29, 1923.

Subject: **John T. Aspell, Regt. #1175,** In reply refer to:  
**Pvt., R.F.L.D. Reg.** **C-4-525 SOB-**  
From: U.S. Veterans Bureau **Office: 40 T. 1. & V. R.,**  
**Sub-Div.**

To: Director Medical Services,  
Department Soldiers' Civil Re-Establishment,  
Ottawa, Canada.

1. Reference is made to the case of John T. Aspell, a Canadian ex-service man, whose address is given as 5710 4th Ave., Brooklyn, N.Y.
2. There is inclosed for the information of the Department a report, in duplicate, on S.C.R. Form 346 dated Jan. 16, 1923 of an examination in the case of the above named discharged soldier.

Respectfully,

ROBT. U. PATTERSON  
Assistant Director.

By F. D. HENST.....  
Chief, Territorial, Insular and  
Foreign Relations ~~Section~~ Sub-Division.

2 Incls.

# MEDICAL REPORT FORM

To be used when an Ex-member of the Canadian or Imperial Forces applies,  
or is recommended, for treatment in the United States of America.

Handwritten: Handwritten, Jan 16, 1925, Typist Gets

Place 5710 4th Ave., Brooklyn, N.Y. Date Jan 16, 1925 19  
From Grand Central Palace, NYC

1. (a) Surname APPELL (b) Christian name JOHN, FRED.  
 (c) Regimental or Serial No. 1175 (d) Rank Pvt. (e) Original Military Unit R. F. I. D. #45  
 (f) Present Address 5710 - 4th Ave., Brooklyn, NYC.
2. Age last birthday 26 Height 5'6" Weight 148 lbs. Complexion \_\_\_\_\_  
 3. Enlisted at St. Johns N. F. I. D. on Feb. 21, 1915.  
 4. Discharged at St. Johns N. F. I. D. on March 1919.  
 5. Last Medical Board held at St. Johns N. F. I. D. on Sept. 15, 1921.  
 6. Pension No. ? 7. Married or Single Married 8. Present occupation Painter  
 (Important)  
 9. Next of kin Wife Relationship Wife  
 Address 5710 - 4th Ave., Brooklyn, NYC.

| 10. Dependents      | Relationship | Age              |
|---------------------|--------------|------------------|
| <u>Ethel Appell</u> | <u>Wife</u>  | <u>24 years.</u> |

(NOTE—The man's identity as an ex-member of the Canadian or Imperial forces should be established by the examining physician, by examination of Discharge Certificate, Protection Certificate (Ex-Imperials) or other military documents in the man's possession. If there are no documents available confirming his statements, this should be indicated in a-foot note on this form)

11. Present Disability 1. Acute articular rheumatism  
2. Valvular disease, chronic cardiac mitral regurgitation.
12. Was disability caused or aggravated by war service Caused.
13. What is the man's present condition? (Please report as fully as possible, and, if Specialist's examination is required, have report attached.)

About Dec. 1915 while stationed in Bordenalls first had an attack of acute rheumatic fever. Under treatment for a period of approximately 5 months, then returned to duty. No further attack during service. Never troubled in a similar way prior to service. About May 1920 condition of swollen joints recurred. Hospitalized at Halifax N.S. about 4 months. Present trouble started Jan. 6, 1922. Under treatment by Dr. Myers of 6th St., Brooklyn, NYC. Disclaim at present complaints of swelling of both wrists, both ankles and right knee. Physically, patient is confined to bed apparently acutely ill. Temperature 102/6. Pulse 136. Respiration 30. Skin hot and moist, pupils equal, regular and react normally. Teeth poorly kept. Throat slightly injected. Swallow small. No adenopathy. No thyroid signs about. Chest expansion good. Lungs negative. Heart apex in 5th interspace within mid clavicular line. No apparent enlargement by percussion, no thrills. Auscultation reveals a loud systolic murmur at apex transmitted to axilla. Diastolic second accentuated. Abdomen negative. Rectrices, both wrists, both ankles and right knee edematous and extremely painful to active or passive movements.

13. Present condition (continued)

14. What is the nature of treatment required? hospital inpatient

15. Is treatment required as an In-patient of an Institution? Yes

16. What is probable duration of In-patient treatment? Two weeks

17. For how long will patient probably be incapacitated for employment after hospital treatment is completed?

Uncertain

18. If the man has been treated in Hospitals in the United States since discharge from the Forces, please indicate:

| <u>Name of Institution</u> | <u>Address</u> | <u>Dates of Hospitalization</u> |
|----------------------------|----------------|---------------------------------|
|                            |                | from _____ to _____             |
|                            |                | from _____ to _____             |
|                            |                | from _____ to _____             |

19. Remarks

U. S. Veterans Bureau,  
Received

JAN 23 1925

Medical Division  
Territorial, Insular &  
Foreign Stations Sub-Div.

20. This man has been medically examined by me today. I find that he requires treatment as \_\_\_\_\_

Patient for a disability caused or aggravated by war service as described above. On receipt of authority, he will be admitted to \_\_\_\_\_

(Name and Address of Institution)

The District Supervisor will be advised immediately on admission.

Signed E. B. Reder

E. B. Reder, M. D. Medical Officer, Local  
Sub Div., Det. #2, USVS,  
San Francisco, 1925.

Man's Signature (Important)

J. S. Aspinall  
(Examining Physician)  
(To be obtained at time of examination)

Date of Admission (if applicable)

IMPORTANT: 1. In no case should treatment be undertaken until authority has been received by the United States Veterans' Bureau from the Department of Soldiers' Civil Re-Establishment, except in cases of emergency, which should be clearly indicated on the form.

2. In-patient treatment for service disability should be recommended in all cases where the man is unable to continue in employment while under treatment.



# MEDICAL REPORT FORM

To be used when an Ex-member of the Canadian or Imperial Forces applies,  
or is recommended, for treatment in the United States of America.

Revised Jan. 15, 1923, Typist Scott.

No. 5710-4th Ave., Brooklyn, N.Y. Date Jan. 14, 1925, 19

1. (a) Surname SPELL (b) Christian name JOHN. THOS.  
 (c) Regimental or Serial No. 1175 (d) Rank Pvt. (e) Original Military Unit R. F. I. D. 206  
 (f) Present Address 5710 - 4th Ave., Brooklyn, N.Y.
2. Age last birthday 25 Height 5'8" Weight 145 lbs. Complexion \_\_\_\_\_
3. Enlisted at St. John's H. F. L. D. on Feb. 21, 1915,
4. Discharged at St. John's H. F. L. D. on March 1919,
5. Last Medical Board held at St. John's H. F. L. D. on Sept. 15, 1921,
6. Pension No. ? 7. Married or Single married 8. Present occupation Painter,  
 (Important)
9. Next of kin wife Relationship wife  
 Address 5710 - 4th Ave., Brooklyn, N.Y.

| 10. Dependents     | Relationship | Age              |
|--------------------|--------------|------------------|
| <u>Ethel Spell</u> | <u>wife</u>  | <u>24 years,</u> |

(NOTE—The man's identity as an ex-member of the Canadian or Imperial forces should be established by the examining physician, by examination of Discharge Certificate, Protection Certificate (Ex-Imperials) or other military documents in the man's possession. If there are no documents available confirming his statements, this should be indicated in a footnote on this form.)

11. Present Disability Acute articular rheumatism.  
Valvular disease, chronic aortic mitral regurgitation.
12. Was disability caused or aggravated by war service Caused.
13. What is the man's present condition? (Please report as fully as possible, and, if Specialist's examination is required, have report attached.)

About Dec. 1915 while stationed in Bermuda first had an attack of acute rheumatic fever. Under treatment for a period of approximately 3 months. Then returned to duty. No further attending during service. Never troubled in a similar way prior to service. About May 1920 condition of swollen joints recurred. Hospitalized at Halifax N.S., about 4 months. Present trouble started Jan. 1, 1923, with treatment by Dr. Evans of St. J. H. F. L. D., Brooklyn, N.Y. Distress at present consists of swelling of both wrists, both ankles and right knee. Physically, patient is confined to bed apparently nearly all. Temperature 102/4. Pulse 130. Respiration 28. Skin hot and moist. Pupils equal, regular and react normally. Teeth partly loose. Throat slightly inflamed. Tonsils small. No adenopathy. No thyroid signs shown. Chest exam. has been done, negative. Heart exam. in all instances within normal limits. No special enlargement by percussion, or thrill. Auscultation reveals a loud systolic murmur at apex transmitted to axilla. Mitral regurg. moderate. Abdomen negative. Extremities, both wrists, both ankles and right knee swollen and extremely painful to active or passive movements.

N.B.—Every question should be answered. There should be no blanks.

THE BOARD OF PENSION COMMISSIONERS FOR NEWFOUNDLAND

Pension No. 1386

Regt. No. 1175 Rank Pte Name John Aspell

Corps. served with Royal Newfoundland Regiment

Date of Medical Board March 7/22

Pensionable Disability NIL for      months.

Pension granted: \$ NIL per month for      months.

Total authorized amount \$     

or Gratuity granted: \$      payable in      equal monthly installments.

Granted to:-

Name John Aspell

Address 12 Waldegrave St.

MAR 16 1922

11/3/22

Date case disposed of:     

Approved by:

members of board

[Signature] Chairman.

[Signature]

Remarks:

[Handwritten signatures and initials]

## SIXTH BOARD

## Report of Medical Board.

Station St. John's, Nfld. Date MARCH 7TH., 1922.  
 No. and Rank 1175 PRIVATE Age Height  
 Name JOHN ASPELL Complexion  
 Unit Royal Newfoundland Eyes Hair  
 Address 12, WADEGRAVE STREET

Former Trade

Enlisted at ST. JOHN'S On 21.6.16

(The Board will please note how the soldier's appearance corresponds with above description).

Disease or Disability Original DEBILITY FOLLOWING ENTERIC.

Subsequent

Present Condition (Compare with previous Board)

*Wt 154 P 96.*  
*Occasionally feels pains in shoulders.*  
*No diarrhoea.*  
*Apep 1" inside nipple line. Slight systolic*  
*murmur just at apex, & not transmitted*

THE ENTIRE DISABILITY: To what extent is his capacity lessened at present for earning a livelihood in the general labour market?

PENSIONABLE DISABILITY: To what extent is his capacity at present for earning a full livelihood in the general labour market lessened by that proportion of his disability due to or incurred during service?

Recommendation of Medical Board

Members of Board

*Clay Macpherson M.D.*  
*J.P. Paterson*





THE BOARD OF PENSION COMMISSIONERS FOR N.F.L.D.

Pension No. 1286

Regt. No. 1175 Rank Private Name John L. Aspell

Pensionable Disability 10% for \_\_\_\_\_ months


Pension granted \$ 7.50 per month ending 15.3.22

Additional Allow. for wife @ \$ 2.50 per month.

Additional Allow. for 10% children @ \$ \_\_\_\_\_ per month

Total monthly rate \$ 10.00 from Jan. 1st. 1922.

Approved:-

 Secretary

Date Dec 5/21



# The Board of Pension Commissioners for Newfoundland.

DISABILITY

Pension No. 1386

## CLAIM FOR PENSION.

I hereby make claim for pension and solemnly declare that the answers given by me to the following questions are true.

1. What is your full name? John Thomas Aspell No. 1175
2. What is your address? 12 Waldegrave St City
3. (a) Are you married? yes On what date? July 14. 1919  
(b) What is your wife's maiden name? Ethel Laura Moore  
(c) When was she born? 1898 May 12<sup>th</sup>  
(d) Is she living with you? yes  
(e) Is she supported by you? yes
4. (a) How many children living under the age of sixteen years (if boys) or seventeen years (if girls) have you?  
(b) Are they living with you? none  
(c) Are they being supported by you? X  
(d) Have any of them contracted marriage? X  
(e) Give full particulars of children hereunder:—

### PARTICULARS OF CHILDREN

| (Name in Full) | (Sex) | Date of Birth<br>(Day, Month, Year.) |
|----------------|-------|--------------------------------------|
|----------------|-------|--------------------------------------|

*(Empty space for listing children)*

John Thomas Aspell  
Signature of Pensioner.

### IMPORTANT

This claim form must be signed in the presence of either a representative of the Board of Pension Commissioners, a Barrister, Solicitor, Notary Public, Justice of the Peace, or any person authorized to administer an oath, who will make the following declaration:

I solemnly declare that I was present and saw the claimant (described above) sign this claim for pension form and to the best of my knowledge and belief he is the claimant he represents himself to be.

Date 20/1/20 Signature M. Mussey  
Address \_\_\_\_\_  
Occupation \_\_\_\_\_

THE BOARD OF PENSION COMMISSIONERS FOR NEWFOUNDLAND

STATEMENT OF ACCOUNT OF

Pension No 1386 Regt. No 1175 Name Aspell T.

WITH

THE DEPARTMENT OF SOLDIERS CIVIL RE-ESTABLISHMENT OF CANADA

PAY AND ALLOWANCES

| PERIOD              | AMOUNT   | AMOUNT   | BALANCE | REMARKS |
|---------------------|----------|----------|---------|---------|
|                     |          | REFUNDED |         |         |
| 12-5-20 to 30-6-20  | \$16.45  | \$16.45  |         |         |
| paid Wife           | 78.70    | 78.70    |         |         |
| June 30 advance     | 20.00    | 20.00    |         |         |
| July 31             | 70.00    | 70.00    |         |         |
| Aug. 31st.          | 70.00    |          | \$70.00 | # 35    |
| Sept. 15th. Balance | 70.87    | 70.87    |         |         |
|                     | \$326.02 | \$256.02 | \$70.00 |         |

MAINTENANCE

| PERIOD             | AMOUNT   | AMOUNT   | BALANCE | REMARKS |
|--------------------|----------|----------|---------|---------|
|                    |          | REFUNDED |         |         |
| 12-5-20 to 30-6-20 | \$100.00 | \$100.00 |         |         |
| 1-7-20 " 28-7-20   | 70.00    | 70.00    |         |         |
| 1-8-20 " 31-8-20   | 62.00    | 62.00    |         |         |
| 1-9-20 " 15-9-20   | 41.25    |          | \$41.25 | # 68    |
|                    | \$273.25 | \$232.00 | \$41.25 |         |

O.S.  
M.S.

THE BOARD OF PENSION COMMISSIONERS FOR NEWFOUNDLAND

Pension No. 1396

Regt. No. 1175 Rank Pte. Name John Aspell

Corps. served with Royal Newfoundland Regt

Date of Medical Board September 13 1921

Pensionable Disability 10% for 6 months.

Pension granted: \$ 5<sup>00</sup> per month for 6 months.

Total authorized amount \$ 30<sup>00</sup>

or Gratuity granted: \$ \_\_\_\_\_ payable in \_\_\_\_\_ equal monthly installments.

Granted to:-

Name John Aspell

Address \_\_\_\_\_

Date case disposed of: SEP 27 1921

Approved by:

Members of Board

M. C. O'Connell Chairman.

W. H. Ross

\_\_\_\_\_

Remarks:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Noted*  
*24/9/21*  
*W. H. Ross*

*Boj*  
*23/9/21*



# Report of Medical Board.

|                       |                       |                                                                                               |                        |
|-----------------------|-----------------------|-----------------------------------------------------------------------------------------------|------------------------|
| Station               | St. John's, Nfld.     | Date                                                                                          | SEPTEMBER 13TH., 1921. |
| No. and Rank          | 1175 PRIVATE          | Age                                                                                           | Height                 |
| Name                  | JOHN A SPELL          | Complexion                                                                                    |                        |
| Unit                  | Royal Newfoundland    | Eyes                                                                                          | Hair                   |
| Address               |                       |                                                                                               |                        |
| Former Trade          |                       |                                                                                               |                        |
| Enlisted at           | ST. JOHN'S On 21.6.16 | (The Board will please note how the soldier's appearance corresponds with above description). |                        |
| Disease or Disability | Original              | <u>DEBILITY FOLLOWING ENTERIC.</u>                                                            |                        |

### Subsequent

Present Condition (Compare with previous Board)

*WR 148*

*Very slight blurring of front sound; P. 88.*

*Complains of pains felt sometimes in right shoulder, and "stitches" in side.*

**THE ENTIRE DISABILITY:** To what extent is his capacity lessened at present for earning a livelihood in the general labour market?

*10%*

**PENSIONABLE DISABILITY:** To what extent is his capacity at present for earning a full livelihood in the general labour market lessened by that proportion of his disability due to or incurred during service?

Recommendation of Medical Board

*10% bms*

Members of Board

*Clay Macpherson*  
*J. S. Jones*



Jany. 14th/21

Lt. Col. F. F. Rendell,  
Chief Staff Officer,  
City.

Sir:-

I have the honour by direction to acknowledge receipt of your communication of Jany. 10th with reference to the case of 1175 Ex-Pte. J. J. Aspell, whose address is 46 John Street, Halifax.

In reply I would say that Aspell was taken on the strength of the Dept. Soldiers' Civil Re-Establishment, Canada, for treatment from 12-8-20 and discharged 15-8-20. For this period he was entitled to \$50.00 per month making a total of \$308.67. The Dept. of S. C. R., however, paid Aspell the sum of \$301.74, showing an overpayment of \$95.07. On his discharge from Hospital he was granted a pension of \$15.00 per month dating from Sept. 15th. His account has been adjusted to the 31-1-21 and still shows a debit balance of \$27.57. Pension will, therefore, be held until this amount is recovered.

I have the honour to be,  
Sir,  
Your obedient servant,

Asst. Secy.

COO/EBB.

PENSION No 1386PENSION No 1386

PENSIONER'S NAME

Aspell J. J.1175

| PARTICULARS                                                                                                         | DR  |    | CR. |    |
|---------------------------------------------------------------------------------------------------------------------|-----|----|-----|----|
|                                                                                                                     | \$  | c. | \$  | c. |
| <i>J.M.C.</i><br>Pension @ 50 <sup>00</sup> from 12 <sup>5</sup> / <sub>20</sub> to 15 <sup>3</sup> / <sub>20</sub> |     |    | 206 | 67 |
| Legs Amt Pd by Canadian S. Ch. from 12 <sup>5</sup> / <sub>20</sub> to 15 <sup>3</sup> / <sub>20</sub>              | 301 | 74 |     |    |
| Dr Bal to 15 <sup>3</sup> / <sub>20</sub> Hospital Pension                                                          |     |    | 95  | 07 |
|                                                                                                                     | 301 | 74 | 301 | 74 |
| Pension @ 15 <sup>00</sup> from 16 <sup>3</sup> / <sub>20</sub> to 31 <sup>1</sup> / <sub>2</sub>                   |     |    | 67  | 50 |
| Dr Bal amt to 15 <sup>3</sup> / <sub>20</sub> Bt Pwrd                                                               | 95  | 07 |     |    |
| Dr Bal - - 31 <sup>1</sup> / <sub>2</sub>                                                                           |     |    | 27  | 57 |
|                                                                                                                     | 95  | 07 | 95  | 07 |

P. No. 1386

Aspell John J.

|                                                     |        |       |
|-----------------------------------------------------|--------|-------|
| Pension @ 15 <sup>00</sup> from 16.9.20 to 31.12.20 | 52.50. | 52.50 |
| 10% increase                                        | 5.25   | 5.25  |



THE BOARD OF PENSION COMMISSIONERS  
FOR NEWFOUNDLAND.

Pension No. 1386

Regt. No. 1175 Rank Pte Name John T Aspell

Corps Served with ROYAL NEWFOUNDLAND REGIMENT

Date of Medical Board Sept. 15, 1920

Pensionable disability 30% for 12 months

Pension Granted: \$15.00 per month for 12 months

Total Authorized amount \$180.00

or Gratuity Granted:

Payable in \_\_\_\_\_ equal monthly instalments.

Granted to:-

Name John T Aspell,

Address 202 North Street, Halifax, N S

Date case disposed of \_\_\_\_\_

Approved by:

Members of Board

[Signature] Chairman

[Signature]

Remarks:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## DEPARTMENT OF SOLDIERS' CIVIL RE-ESTABLISHMENT

M.F.S.

## MEDICAL HISTORY OF AN INVALID

## ON DISCHARGE FROM TREATMENT

## INSTRUCTIONS WHICH MUST BE READ BY MEDICAL REPRESENTATIVES, S. C. R.

- This form will be used in all cases as a final Medical Board when a patient admitted for a disability due to or aggravated by service, is discharged from treatment under this Department, with the exception of Class 2 Out-Patients, where pensionable disability has not obviously changed during treatment. "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
- The Physician or Surgeon in charge of the case is responsible for the proper completion of Sections 1 to 21. The signature of the man to Section 25, Page 4 will be obtained in all cases.
- In answering the questions, Physicians or Surgeons will carefully obtain and record the man's statements concerning his condition. They will distinguish observations made by themselves from hearsay, and will distinctly state the authority for statements not resulting from their personal observation. It must be made clear whether such statements are obtained from the man concerned, from witnesses, or from documents, regimental or otherwise.
- Special care is required in answering question 9. Please read the questions carefully. All questions must be answered. Write "N. A." if not applicable.
- If space provided under any section is insufficient, add another sheet. Such sheets must be initiated by the Medical Board. A note will be made of attached papers by the Medical Board under the Section. "Opinion of the Medical Board."
- In no circumstances may information other than that in sections 9, 10, 11 and 12 be communicated to the man, directly or indirectly.
- The nomenclature of diseases, as provided by the Department, will be followed, if possible.

Place Halifax, N.S. DATE 14-9-20.

1. (a) Former Unit 1st Hfld. Regt. (b) Regimental No. 1175 (c) Rank Pte.  
 (d) Surname Aspell. (e) Christian Name John T.  
 (f) Personal Address (where cheques may be sent) 302 North St. Halifax, N.S.
2. Age last birthday 25 Date of birth 18-5-95.
3. Enlisted at St Johns Hfld. on 21-2-15.
4. Personal description:  
 (a) Height 5' 8" (b) Weight 140 (c) Complexion.....  
 (d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks.....  
Scar front right lower leg.
5. Next of kin and Address Mrs. Ethel Aspell. (2)
6. Former trade or occupation Shoe cutter.

7. (a) Service: (The information should be secured from personal documents, but if documents are not available, the man's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted.)

Years

Days

## PERIODS

|                                                       | From                 | To                 |
|-------------------------------------------------------|----------------------|--------------------|
| In Canada <u>1st Hfld.</u>                            | <u>Nov. 1916.</u>    | <u>May 1919.</u>   |
| In England.....                                       | <u>Feb 21. 1915.</u> | <u>April 1916.</u> |
| In France.....                                        | <u>Apr. 1916.</u>    | <u>Nov 1916.</u>   |
| In other parts <u>Gallipoli &amp; adjacent region</u> | <u>Aug 1916.</u>     | <u>March 1916.</u> |

- (b) Date of Discharge Mar 1919 Pension No..... Pension Class.....
8. Original disease or injury Rheumatic fever.  
 (a) Date of origin Dec. 1915. (b) Place of origin Gallipoli.  
 (c) Cause Infection.

This Form is to be completed in quadruplicate and forwarded, together with all other available Medical Documents, to the Unit Medical Director for approval and disposal as follows: } 1. District Office, B.P.C., 2 copies.  
 } 2. D.M.S. Dept. S.C.R., Ottawa, 1 copy.  
 } 3. Unit Medical Director, S.C.R., 1 copy.

9. Disability for which the man was discharged from the service.....

**Medically unfit.**

10. Present Disability: (Here state the exact nature of the disability resulting from the disabling condition:—(a) Weakness, slight, moderate, marked, etc. (b) Loss complete or partial, of an organ or member of its functions. (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons. (d) Any other cause for restriction in choice of occupation.)

**Rheumatic heart disease.**

11. Present Condition:

(a) (Important, to be a full description of the present disabling condition or conditions only. "History" must be recorded in Section 12. Describe all abnormalities, anatomical and functional, constituting to present disability. Objective findings are to be stated first, then subjective findings.) Before completing this Section the man should be stripped and subjected to a thorough physical examination.

**For present condition see report attached by Dr. H.F. Moore, of 14-9-20, and report by Dr. K.A. MacKenzie, of 14-9-20.**

(b) Has the man now any affection of the following systems not described in Section 11 (a) as above?  
(Answer yes or no.—If the answer to any part is yes, give a brief description of the present condition.)

Nervous System..... **no** Cardio-Vascular..... **no** Genito-Urinary..... **no** Special Senses..... **no** Respiratory..... **no**  
(If pulse rate abnormal B.P. will be taken.) (Albumin and sugar will be excluded.)  
Integumentary..... **no** Disturbances of Mentality..... **no** Digestive..... **no** Muscular..... **no**  
Osseous and Joint System..... **no** Any other general condition..... **no**

12. History (a) (of condition referred to in Section 11 a.) (b) Give a complete history, with dates of origin, of any affection from which the man has suffered, either prior to enlistment, during service or since discharge and not included in answer to Section 12 (a) above. (c) Give a description of wounds, scars and deformities.

**Had rheumatic fever Dec 1915, at Gallipoli, evacuated to Egypt and in Feb 1916 to England. Enteric fever in Egypt before being invalided to England. In May 1920 had a second attack of Rheumatic fever, admitted to Camp Hill 10-5-20. Enteric fever in Egypt Feb 1916. Circular scar front R lower leg, pre-enlistment. no disability from it.**

13. (a) Did the present disabling condition have its origin before enlistment? **No.**

(b) If so, has it been aggravated on service? **No.**  
(If aggravated, give a description, so far as it is possible to do so, of the disabling condition at time of enlistment.)

14. Was the disability caused or aggravated (a) by intemperance or improper conduct; or, (b) by unreasonable refusal to accept treatment? **No.**

The Regimental Documents will be referred to when available.  
(If the answer is in the affirmative, state in percentages to what extent in your opinion the patient is incapacitated by that causation or aggravation. In answering this question Conduct Sheets should be considered. If treatment has been refused, the circumstances of the refusal should be described on Page 4.)

15. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there are more than one. **Permanent.**

16. Treatment now completed:

(a) Where treated (Place and Institution) **Camp Hill.**

(b) Duration of treatment: from **10-5-20.** to **14-2-20.**

(c) Nature of treatment **Medicinal and Physic therapy.**

(d) Results of treatment **Improvement.**

17. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?  
(If the answer is yes, state nature of treatment required and probable duration.)

**No.**

18. (a) Can the former trade, or occupation, be resumed? **Should have light sedentary**  
(If not, briefly state why.)

**work only because of heart condition.**

(b) Name of Course in Industrial Re-training, if any, taken by the man **None.**

19. (a) If the man requires any orthopaedic accessories, state exact requirements. **No.**

(b) If any such have been supplied, state date. **No.**

20. (a) Is the identity of the man satisfactory? **Yes.**

(b) Has the discharge certificate been presented? **No.**

21. Recommendation as to disposal of case **Discharge from hospital.**

**Sgd. G. B. Kennedy.**  
Signature of Medical Representative by whom the case is brought forward.

#### OPINION OF MEDICAL BOARD

22. Does the Board concur with the preceding report? If not give differing opinion, with reasons, quoting the number of the answer criticised:

**Yes.**

23. A. State specifically whether treatment is required or not. **No.**  
(Any further recommendations as to disposal, e.g., Employment or Vocational Training, may then be made, but the method of disposal must be carefully explained to the man.)

B. It is certified that the man :

(a) ~~Does not require treatment.~~ Give the nature of the condition, the treatment required and its probable duration.)

(b) Does not require treatment.

(c) Should pass under his own control.

(d) ~~Should pass under his own control.~~

(Strike out condition not applicable.)

24. It is recommended that the man be discharged. (When not for discharge add special recommendation.)

Before signing, the Senior Medical Officer of the Medical Board will read Sections 9, 10, 11, 12 and 23 to the man, who will then sign the statement below (Sec. 25).

Place..... **Halifax, N.S.**

**Sgd. E.K. MacLellan.**

Senior Medical Officer

Date..... **15-9-20.**

Member.

#### STATEMENT OF THE MAN

25. (Sections 9, 10, 11, 12 and 23 are to be read to the man, and either "satisfied" or "not satisfied" struck out.)

I, the undersigned..... have heard read the description and history of my disability, and present condition, and am satisfied (or ~~satisfied~~) with it, and have not withheld any information concerning any affection from which I suffered, either prior to, or during service. (If dissatisfied, statement should follow.)

I complain, in addition of.....

**Sgd. J.T. Aspell.**

Signature of man.

26. TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned..... understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it. I have had read and explained to me the consequences of such refusal as provided for in Order-in-Council, P.C. 387, clause 22.

Witness.....

Signed.....

Is this refusal of treatment in your opinion reasonable or unreasonable?.....

Place.....

Senior Medical Representative.

Date.....

Member.

Unit **"B" UNIT DSCR** Date **15-9-20.**

Approved

**Sgd. G.B. Wigwell.**

Unit Medical Director.

**SOB Dept. of SOR, Sept 16, 1920. Sgd. G.B. Elliot, for Asst. Director,**

**for H.S.&P.E.I. Dept. of SOR.**



/MFB.

C O P Y.

CAMP HILL HOSPITAL. Dept. of Physio therapy.

To Dr. Kennedy.

1175 Ex Pte. Aspell, J.T.

Having this date examined the marginally noted man. I am of the opinion that further treatment in this department will be of no benefit.

sgd. E.F. Moore.  
I/c Physio therapy.

Halifax, N.S. 14-9-20.

.....

1175 Aspell, Ex Pte. J.T.

The marginally named was admitted to this Department on 8-7-20 complaining of generalised ~~muscular~~ arthritis. The treatment was at first ionisation with sodii salicylate 5% solution followed by massage. Later he was treated by anti condensation. He has improved a good deal. At present he suffers only slight amount of discomfort from the right shoulder. More particularly in damp cold weather. There is no evidence of thickening of the ligaments of joint, no limitation of movements and no grating.

14-9-20. sgd. E.F. Moore. I/c Dept. Physio therapy.

Aspell, J. T. Ex Pts. #1176.

The m/m man has been treated in this Hospital since May 18th for acute rheumatism. He has now recovered sufficiently to be discharged from hospital. He had a previous attack of acute rheumatism in 1915.

The findings in heart at present are as follows:-

Apx heart. 5th space diffuse nipple line.

Cardiac Area of dullness, slightly increased to left.

Murmurs. Systolic in mitral and aortic areas.

2nd sound present. No diastolic murmur. No thrills.

Blood pressure. Systolic 130. Diastolic 70.

Increased pulsation in vessels of neck capillary pulsation present.

Diagnosis. Organic heart disease. Mitral and suspected early aortic disease. The two attacks of rheumatism (rheumatic fever) strongly support the diagnosis of organic disease although the physical signs are not conclusive.

Disability. 50%.

Prognosis. Permanent and probably progressive.

sgt. K. A. MacKennis, M.D.

/MVB.

## PENSION ACCOUNT.

## Hospital Period

Name Aspell J. J. Regt. No. 1175 Rank Pte Hospital 6 SCR

Remarks \_\_\_\_\_

| Date of Admission               | Date of Discharge                | Number of Days           | Rate of Pension | Total Cr. | Previous Pension |              |        | Payments |                                  |         | Total Dr. |
|---------------------------------|----------------------------------|--------------------------|-----------------|-----------|------------------|--------------|--------|----------|----------------------------------|---------|-----------|
|                                 |                                  |                          |                 |           | Rate             | Date Paid to | Amount | Amount   | Date                             | Ch. No. |           |
| 14 <sup>5</sup> / <sub>20</sub> | 15 <sup>10</sup> / <sub>20</sub> | 5 <sup>↓</sup><br>Smo do | 50 00           | 256 67    |                  |              |        | 10 00    | 30 <sup>8</sup> / <sub>20</sub>  | back    |           |
|                                 |                                  |                          |                 |           |                  |              |        | 60 00    | 30 <sup>8</sup> / <sub>20</sub>  | back    |           |
|                                 |                                  |                          |                 |           |                  |              |        | 20 00    | 15 <sup>4</sup> / <sub>20</sub>  | cash    |           |
|                                 |                                  |                          |                 |           |                  |              |        | 10 00    | 15 <sup>4</sup> / <sub>20</sub>  | cash    |           |
|                                 |                                  |                          |                 |           |                  |              |        | 60 00    | 15 <sup>4</sup> / <sub>20</sub>  | cash    |           |
|                                 |                                  |                          |                 |           |                  |              |        | 37 87    | 15 <sup>4</sup> / <sub>20</sub>  | cash    |           |
|                                 |                                  |                          |                 |           |                  |              |        | 33 00    | 15 <sup>4</sup> / <sub>20</sub>  | cash    |           |
|                                 |                                  |                          |                 |           |                  |              |        | 27 87    | 30 <sup>10</sup> / <sub>20</sub> | cash    |           |
|                                 |                                  |                          |                 |           |                  |              |        | 32 00    | 30 <sup>10</sup> / <sub>20</sub> | cash    |           |



June 29th., 1923.

Mrs. Marion L. Foster,  
Director of Home Service Section,  
American National Red Cross,  
165 Remsen Street,  
Brooklyn, N. Y.

Re- #1175 ~~Sts.~~ J. T. Aspell,  
Royal Newfoundland Regiment.

Dear Madam:-

Your letter of June 6th., to Director of Medical Services, Dept. of Soldiers' Civil Re-Establishment, Ottawa, has been forwarded to us. As stated in our former letter, this man contracted Typhoid Fever in Gallipoli. This diagnosis was confirmed in both Base Hospitals, although the first report stated that he had Rheumatism. Any Medical Man who was in the line with his battalion could easily understand how a diagnosis of Rheumatism might be made in a case of Typhoid Fever, or Trench Fever, at first. He was returned home in 1917. His first definite attack of Rheumatism was when he was in Halifax last year.

I regret that we are unable to agree with Doctor Pierce that this man's present condition is directly traceable to service, but, I can assure you that his claim has been given every consideration by the Board.

Yours faithfully,

Medical Adviser.

WHP/FG.

May 15, 1923.

Mrs Marion L. Foster,  
Director of Home Service Section,  
American National Red Cross,  
165 Remsen Street,  
Brooklyn. N.Y.

Dear Mrs. Foster:-

Your letter of April 17th., to the Bureau of Pensions, D.S.C.R. Ottawa, concerning John Aspell, 5710 4th Avenue, Brooklyn. N.Y. has been referred to this Department.

For your information I beg to give you the following facts:- Mr. Aspell was discharged from the Newfoundland Regiment in March 1919, with Debility following Enteric, and his disability was estimated to be less than 5%. In 1918 he contracted Enteric in Gallipoli, and was returned home in 1917. His file does not show that he ever had Rheumatic Fever whilst in the Army, but before the Enteric was diagnosed, it was put down as Rheumatism. Later on, whilst in Halifax, he contracted Rheumatic Fever and was placed in Hospital under the D.S.C.R.; as there was some slight doubt about the case at that time, we paid him allowances. Later, we were quite sure that the Rheumatism was not in any way connected with his service, and it was agreed that we were not at all responsible for his condition. He is therefore not entitled to any compensation.

I wish to thank you for your interest in the matter.

Yours faithfully,

CCO/ET.

Secretary.

AMERICAN NATIONAL RED CROSS

|                                            |                                              |                                               |                                   |                                      |                                            |
|--------------------------------------------|----------------------------------------------|-----------------------------------------------|-----------------------------------|--------------------------------------|--------------------------------------------|
| HON. WARREN G. HARDING<br><i>President</i> | ROBERT W. DE FOREST<br><i>Vice-President</i> | HON. WILLIAM H. TAFT<br><i>Vice-President</i> | JAMES M. BECK<br><i>Counselor</i> | ELLIOT WADSWORTH<br><i>Treasurer</i> | MISS MABEL F. BOARDMAN<br><i>Secretary</i> |
|--------------------------------------------|----------------------------------------------|-----------------------------------------------|-----------------------------------|--------------------------------------|--------------------------------------------|

**BROOKLYN CHAPTER**

|                                        |                                               |                                    |                                       |                                             |                                     |                                        |
|----------------------------------------|-----------------------------------------------|------------------------------------|---------------------------------------|---------------------------------------------|-------------------------------------|----------------------------------------|
| ADRIAN VAN SINDEREN<br><i>Chairman</i> | MRS. THOMAS R. FRENCH<br><i>Vice-Chairman</i> | GUY DU VAL<br><i>Vice-Chairman</i> | EDW. W. ALLEN<br><i>Vice-Chairman</i> | MRS. WILLIAM D. BURGENT<br><i>Secretary</i> | THOMAS W. HYNES<br><i>Treasurer</i> | G. FOSTER SMITH<br><i>Asst. Treas.</i> |
|----------------------------------------|-----------------------------------------------|------------------------------------|---------------------------------------|---------------------------------------------|-------------------------------------|----------------------------------------|

**BROOKLYN CHAPTER**  
**HOME SERVICE SECTION**

168 RENSEN STREET  
BROOKLYN, N. Y.  
TELEPHONE, MAIN 3061



A. E. VAUGHAN, *Executive Secretary*

HOME SERVICE SECTION

THE HOME SERVICE SECTION GIVES AID AND COUNSEL TO THE FAMILIES OF MEN SERVING IN EVERY BRANCH OF THE ARMY AND NAVY, AND TO DISABLED MEN SUFFERING FROM ILLNESS OR INJURIES INCURRED IN THE WORLD WAR. IT ALSO GIVES ADVICE AND INFORMATION REGARDING BACK PAY, COMPENSATION, INSURANCE, MEDICAL TREATMENT, HOSPITAL CARE, VOCATIONAL TRAINING, EMPLOYMENT, AND ANY OTHER SUBJECTS THAT MAY INTEREST THE DISABLED WORLD WAR VETERAN AND HIS FAMILY.

April 17, 1923.

Bureau of Pensions  
Department of Soldiers' Civil Re-Establishment  
Ottawa, Canada.

Re: John Aspell  
5710-4th Ave.  
Brooklyn, N. Y.

Formerly: Pvt. Royal New Foundland  
Regiment.

Discharged: March 19, 1919.  
Pension No. 1138 (?)

Dear Sir:

We have for some time been interested in the above named man and have assisted him financially since January 17, 1923. We have learned from the District Office of the Veterans' Bureau in New York City that on March 23, 1923 Mr. Aspell was recommended for treatment and compensation.

We would appreciate it if you will send us the present status of his claim.

We thank you for your kind cooperation.

Yours very truly,

*(Mrs.) Marion Lounsbury Foster*  
Director Home Service Section.

MAY..CP.  
34774





CANADA

IN YOUR REPLY REFER TO FILE NO.

DEPARTMENT OF  
SOLDIERS' CIVIL RE-ESTABLISHMENT

RBP/BC.

1386

OTTAWA, 5th May, 1923.

SCR. 56 J-22.

The Secretary,  
Board of Pension Commissioners,  
St Johns, Newfoundland.

No. 1175, Pte. Jno. T. Aspell,  
5710 4th Ave., Brooklyn, New York.

Dear Sir,-

Attached hereto please find  
a communication received from the Home Service Section  
of the American Red Cross, regarding the marginally  
named.

The Director is being advised  
that her communication has been forwarded to you, and  
that you will no doubt reply direct, forwarding the  
information she requests.

Yours truly,



*F. W. Blakeman*

F.W. Blakeman, M.D.  
For Director Medical Services.



CANADA

IN YOUR REPLY REFER TO FILE NO.

SCR-56 J-22.

DEPARTMENT OF  
SOLDIERS' CIVIL RE-ESTABLISHMENT

OTTAWA, June 12, 1923.

The Secretary,  
Board of Pension Commissioners for Mfld.,  
St. John's, Mfld.

RE: #1175 - Pte. J.T. Aspell.

Dear Sir:-

We are enclosing herewith for your information copy of a communication received from the American Red Cross under date of June 6, together with copy of our reply thereto of even date.

Yours truly,

F. W. Blakeman, M.D.,  
for  
Director Medical Services.

FWB/TC.

Encls.

SCR-56 J-22.

OTTAWA, June 12, 1923.

Mrs. Marion L. Foster,  
Director, Home Service Section,  
American Red Cross,  
165 Remsen Street,  
Brooklyn, N.Y.

RE: #1175 - Pte. J.E. Appell, 1st Div. Hhd.

Dear Madam:-

Your letter of June 6, in reference to the marginally named ex-Newfoundland soldier, has been received.

You are advised that this office has nothing whatever to do with ex-Newfoundland pensioners resident in the United States, and consequently the Department is not in a position to advise you in reference to this case.

A copy of your letter of June 6 has been forwarded to the Board of Pension Commissioners for Newfoundland. You should, therefore, communicate direct with them.

Yours truly,

F. M. Blakeman, M. D.,  
for  
Director Medical Services.

FWB/TC.

June 6, 1923.

Director of Medical Services,  
Dept. of Soldiers' Civil Re-establishment,  
Ottawa, Canada.

Re: Your file No.  
SCR. 56 J-22  
No. 1175,  
Pte. John T. Aspell,  
Previous address:  
5710 - 4th Ave.  
Present address:  
361 - 58th Street,  
Brooklyn, N. Y.

My dear Sir:

We have been interested since January 1923 in the above named discharged, disabled Canadian soldier. Under date of April 17, 1923 we wrote the Department of Soldiers' Civil Re-establishment in regard to his claim. Our inquiry was acknowledged on May 5th and with the information that our letter had been sent to the Secretary Board of Pension Commissioners of Newfoundland. Under date of May 25, 1923 we received a reply, copy of which we are enclosing.

This reply is so confusing to us, that we are bringing the matter to your attention as we should like to have your advice in the matter and also instructions for appealing against this decision. You will notice from the report which we received from the Pension Commissioners for Newfoundland, that this man's disability is clearly traceable to service. He was discharged with a disability and although it was estimated to be less than 5% at the date of his discharge, the service connection is established and we believe that in this case, as in many others, the illness progressed until he became entirely disabled.

We are told that his file does not show that he ever had rheumatic fever, yet it would seem from the way the report is worded, that some physician did recognize a rheumatic condition, that his service record notes rheumatism which was afterwards changed; however, the subsequent history of this patient seems to indicate that the original diagnosis was probably correct. Moreover, we should like to bring to the attention of the proper authorities the fact that this claimant was examined, according to the arrangements made by the Canadian Government, at the District Office of the U. S. Veterans' Bureau, District #2, New York City, and that the physician, Dr. Pierce, who is duly authorized by the Canadian Government to examine its claimants in this district, found him to be in need of treatment, considered the disability traceable to his service, and recommended treatment and compensation. After receiving the report of Newfoundland, we consulted Dr. Pierce, but he informed us that although he is still of the opinion that the man's condition of helplessness which is directly traceable to his service, he has made his examination and recommendations and has no authority to take any further steps or give us any further advice in the matter.

We hesitate to withdraw relief from this patient and permit him to become



public charge until we are sure that nothing further can be done in the matter. We do not presume to question the decisions that are made by the Commissioners or the regulations which govern the awards made for your disabled veterans. At the same time we are aware that generous provisions have been made for men who have become disabled in service. We think it possible that through a misunderstanding or technicality, this man is being deprived of the benefits which he needs and to which he may be entitled.

Your advice will be greatly appreciated.

Yours very truly,

(Mrs.)

Director, Home Service Section.

Ross..SK  
34774



May 10th., 1923.

Dr. V. M. Myers,  
441 Fifty-Eight Street,  
Brooklyn, N. Y.

Re-#1175 J.T. Aspell,  
Royal Newfoundland Regiment.

Dear Doctor:-

I have to acknowledge receipt of your letter of April 23rd., regarding the case of the above noted.

For your information Mr. Aspell was discharged from the Newfoundland Regiment in March 1919 with Debility following Enteric and his disability was estimated to be less than 5%.

In 1916 he contracted Enteric in Gallipoli and was returned home in 1917.

His file does not show that he ever had Rheumatic Fever while in the Army, but before the Enteric was diagnosed it was marked down as Rheumatism.

Last year while in Halifax he contracted Acute Rheumatic Fever and was placed in Hospital under the D.S.C.R. and, as there was some slight doubt at that time we paid him allowances. Later we were quite sure that the Rheumatism was not in any way connected with his service, and, it is regretted that we are unable to be responsible for his present condition.

Yours faithfully,

Chairman.

1386

DR. V. M. MYERS  
441 FIFTY-EIGHTH STREET  
BROOKLYN, N. Y.

*Mrs. H. K. Moore  
Caled*

Apr. 23-1923

Pension Commission

St. John, Newfoundland:-

Gentlemen:-

Regarding the case of John V. Agrell -  
privately no 1175, First Dist. S. D. - Mr Agrell has  
been under my care since Jan 6<sup>th</sup> - 1923 for  
Arterial Rheumatism and at this date he is still  
unable to work. - From the history I have been  
able to get on this case it would appear that this  
is a second attack and that the previous (and original)  
attack occurred while in the army - Mr Agrell is  
naturally, after such a long illness, in a very poor financial  
state - and if there is any way in which his pension  
could be continued to cover the period of present illness it  
would be of great help to him -

Sincerely,

V. M. Myers

*Please  
E.S.P.*

*Adm.  
Mrs. A. H. Moore  
1211 1/2 Ave. C  
St. John*



UNITED STATES VETERANS BUREAU  
NEW YORK, N. Y.

OFFICE OF DISTRICT MANAGER  
DISTRICT NO. 2

Apr. 24, 1925.

IN REPLY REFER TO:

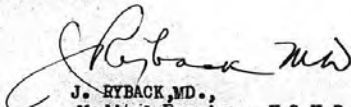
RE: John T. Aspell,  
Pvt. #1175, First NFLD.

Pensions Commissioners,  
St. Johns, Newfoundland.

Gentleman:

This will certify that I have examined above mentioned claimant by request of the U.S. Veterans' Bureau; that he has given me a history of a primary attack of acute articular rheumatism while connected with the army, and I am of the opinion that his present disability, if a recurrent attack, is traceable to his military service, or of service origin.

Respectfully yours,

  
J. RYBACK, MD.,  
Medical Examiner, U.S.V.B.



UNITED STATES VETERANS BUREAU  
WASHINGTON

April 11, 1923.

Subject: John T. Aspell, Regt.#1175  
Pvt.R.F.L.D.Reg.  
From: U.S.Veterans'Bureau

IN REPLY REFER TO:  
C-4-323 SCR  
GT/mab 0;25

To: Board of Pension Commissioners  
for Newfoundland,  
St. John's, Newfoundland

1. Reference is made to the case of John T. Aspell, a Newfoundland ex-service man, whose address is given as 5710 4th Avenue, Brooklyn, New York.
2. The decision of the Board that responsibility cannot be accepted for hospitalization in the above case is noted, and has been transmitted to the wife of the claimant through the Manager of District No. 2.

By direction,

*F. D. Hester*

F. D. Hester, Chief, T.  
Territorial, Insular and  
Foreign Relations Sub-Division,  
Medical Division.

1386

*File*

PENSION No 1386PENSION No 1386

PENSIONER'S NAME

Aspell J. P.  
11 75

## PARTICULARS

DR

CR.

\$

c.

\$

c.

*J. P. Aspell*

Pension @ 50<sup>00</sup> from 12<sup>5</sup>/<sub>20</sub> to 15<sup>9</sup>/<sub>20</sub>  
 Less Amt Pa by C.A.R. from 12<sup>5</sup>/<sub>20</sub> to 15<sup>9</sup>/<sub>20</sub>  
 D + Bal to 15<sup>9</sup>/<sub>20</sub> for FT Period

301 74

206 67

301 74

95 07

301 74

~~MM~~

*Pen No 1376*

Reference No. 200953.

Feb. 2, 1921.

The Board of Pension Commissioners for Canada,  
Halifax, N.S.

For attention of J.W.C. Ross.

Dear Sir:-

With reference to your letter of Jan. 24th, re  
John Thomas Aspell, 1175.

I beg to inform you that this man has been over-  
paid to the amount of \$95.07, as the enclosed state-  
ment shows.

He was granted Pension of \$15 per month, from  
September 15/20, for twelve months, and will have no  
monies coming to him before April 1/21.

Kindly inform Pensioner to this effect when he  
again calls at your Office for information.

Yours faithfully,

Asst. Secy.

JAWcG/HT

THE BOARD OF PENSION COMMISSIONERS FOR CANADA

MEMORANDUM

To Secretary, B.P.C. Newfoundland.

Halifax, N.S. January 24th, 1921.

From Halifax, D.O., B.P.C.

ASPELL, John Thomas  
#1175.Pte.  
46 John St, Hfx.N.S.

ALWAYS QUOTE B.P.C. 200953.  
B. P. C. No. PLEASE

1. The m/n has again made inquiries at this office reference to pension monies, which it would appear are due him.
2. This man is badly in need of funds and out of employment and it would therefore be appreciated by this office if immediate action could be taken to have adjustment cheque forwarded him at your very earliest convenience.
3. His correct address is as quoted in the margin.
4. Thanking you in anticipation of an early reply.

|             |         |        |
|-------------|---------|--------|
| Initials    | E.S.S.  | W.S.M. |
| Date        | 29-1-21 |        |
| Referred to |         |        |
| Answered    |         |        |

*Joseph*  
\_\_\_\_\_  
Manager, Halifax, D.O.  
B.P.C.

3/10.



Halifax N.S.  
Jan 23<sup>rd</sup> 1921

1780  
J. G. Higgins,  
President. G. W. V. A.  
St. John's.

Dear Sir:

Having received notice for my membership fee, to the above Association there are one or two matters which I should like to draw your attention to.

Firstly Sir being a returned Soldier I have been in Hospital in Halifax for a period of four months through war disability, and had been granted a pension at 30<sup>th</sup> from the Nfld. Govt through the Militia Dept of Canada, my pension was to have been in force since April 1920 and up to this time of writing this have not received

one cent I have written time & again to the Militia Dept but it seems as if my letters were all placed in the waste paper basket and nothing more thought of them, no doubt I shall never taken up the matter with the Association, before and no doubt it's a well deserving case I am a married man and even if I am out of Nfld. I am still a Nfld Soldier and think I am perfectly justified in placing my case before the Association, and have no doubt but the Association will stand by such a case.

Someone must know about my pension it is nearly ten months overdue now and secondly Sir I was granted a course and when I reported here to make arrange-

me in this particular case  
Wishing yourself and the Association every good luck in its undertakings in justice to the returned men, and trusting to have a very early and favourable reply.

I am Respectfully  
Yours

Brother Member.

Ex 1175 J. J. Aspell,  
116 John St.  
Halifax N.S.

ment, for my course I was granted the handsome sum of £500 a month for a married man, that may be alright for a single person and Sir I was let to believe that Nfld was going to pay the same scale as Canada but that is far from it. I understand the position you people are placed in, it's an utter impossibility to trace each and every individual case out that comes before you but a case like mine that is clear should be traced out as soon as possible for all concerned.

I would be only to glad to enclose two dollars for my membership fee but my circumstances won't allow me, as I am out of work. And first of all would like to see what the Association is going to do for

Halifax, N.S., June 16-20  
DSCR "B" A-303

TO:-

The Secretary,  
Board of Pension Commissioners,  
St. Johns, Nfld.  
1175 ex Pte. Aspell, John Thomas

Attached please find D.S.C.R. Form  
58 relative to the marginally noted man. May  
we be informed as to the amount of Pension this  
man is receiving.  
Discharged from His Majesty's Forces on:-

March 1919 St. Johns, Nfld.

*S. J. [Signature]*  
For- Asst. Director for N.S. & P.E.I.,  
Dept. of S.C.R.

DEPARTMENT OF SOLDIERS' CIVIL RE-ESTABLISHMENT

"B" Unit

File SCR. A-303 Date June 16-20

To the Secretary,  
Board of Pension Commissioners,  
Ottawa, Ont.

No. 1175 Ex Rank Private

Name Aspell John Thomas C.E.F. Unit 1st. Div. Nfld.

1. The marginally named ex-Private  
was taken on strength of the Dept. of Soldiers' Civil Re-Establishment as an in-patient, (our ~~patients~~ ~~check~~)  
on 12-5-20  
(Date)

and was admitted to Camp Hill  
reporting ~~the~~ <sup>daily</sup> ~~weekly~~ for treatment.

2. Such treatment will ~~not~~ prevent ~~him~~ <sup>him</sup> ~~her~~ from continuing or obtaining employment.

3. ~~He~~ <sup>She</sup> has been placed on full Pay and Allowances with this Commission as from date 12-5-20

4. ~~His~~ <sup>Her</sup> Pension number is Not known

5. ~~He~~ <sup>She</sup> was Overseas ~~travel~~

6. ~~His~~ <sup>Her</sup> present address is Camp Hill Hspl.

7. ~~His~~ <sup>Her</sup> home address is 202 North St. Halifax, N.S.

8. Name and address of next of kin Brother, Mr. Gerald Aspell, St. Johns, Nfld.

*S. B. Prude*  
Assistant Director for N.S. & P.E.I. Unit, Dept. S. C. R.

(Note.—It is essential that words not applicable be struck out.)

This form to be made in quadruplicate, one copy to be forwarded to the Chief Inspector at Ottawa, one copy to Head Office, B. P. C., one copy to Local Office B. P. C. and one copy to be retained for man's file.

THE BOARD OF PENSION COMMISSIONERS FOR CANADA

MEMORANDUM

To Secretary, B.P.C. Newfoundland.

Halifax, N.S. January 3rd, 1924.

From Halifax D.O.B.P.C.

*Pen No*  
1386

B.P.C. 200953.

ASPELL, John Thomas  
#1175.Pte.

1. Replying to your letter of Dec.15th. The m/n has informed this office that as yet he has not received any pension monies, which it would appear is due him.
2. It would be appreciated if we could have your further remarks on this case please

*J. A. [Signature]*  
Manager, Halifax, D.O.  
B.P.C.

3/10.

|                  | Date   | Initials     |
|------------------|--------|--------------|
| Received.....    | 7-1-21 | <i>EBS</i>   |
| Referred to..... | "      | <i>Janey</i> |
| Answered.....    |        |              |

DEPARTMENT OF SOLDIERS' CIVIL RE-ESTABLISHMENT

..... ~~22~~ ..... Unit

File SCR A-305 ..... Date Sept. 15-20 .....

To the Chief Inspector,  
DRAW. 206 S.C.R.

No. 1175 ..... Ex. Rank Private .....

Name Aspell, J. F. ..... C.E.F. Unit 1st Div. Hfid. Regt. .....

1. The marginally named ex Private .....  
 completed <sup>his</sup> ~~her~~ treatment, and was released from <sup>his</sup> ~~her~~ engagement with the Department  
 of Soldiers' Civil Re-Establishment on..... September 15-20 .....

(Date)

2. Signed ~~waivers~~ (Part E./Form 39) ~~refusing further treatment~~, and was allowed to leave  
 the..... Camp Hill .....  
 Hospital on..... September 15-20 .....

(Date)

3. His address is..... 202 North St. Halifax, N.S. .....

4. He ~~She~~ was given transportation from.....  
~~XXXX~~ ..... to.....

Warrant No.....

5. The ~~subject's complaints are set forth on the back~~

NOTE.—This form to be made out in triplicate; original forwarded to Chief Inspector, duplicate  
 to district office, B. P. C., triplicate placed in man's file in local Unit Office.

*Christ*

for- Assistant Director for N.S. & P.E.I. ..... Unit.

(NOTE.—Strike out words not applicable).



Dec. 15th/30

The Secretary,  
Board of Pension Commissioners for Canada,  
Halifax District Office,  
Halifax, N. S.

1173 John T. Aspell.

Dear Sir:-

I have the honour to report that the case of the above mentioned man was considered by the Board of Pension Commissioners, and it was decided that a pension of 30% be awarded him, as the disability was considered as aggravated by service and not due to.

Yours faithfully,

Captain.  
For Secretary.

LBD.

Halifax N.S.  
November 27<sup>th</sup>/1920

1386  
Major Parsons  
Board of Pensioners.

Dear Sir:

I am writing to you in regard of my pension. As I have been notified by the pension Board of Halifax, that I came under a pension since March 1920, and of which I haven't received a cent up to date.

Hoping to hear something about it at your earliest convenience.

Your Obedient Servant  
1175 Ex Pte J. J. Aspell  
46 John Street Halifax N.S.



THE BOARD OF  
PENSION COMMISSIONERS  
FOR CANADA



IN REPLY REFER TO

No. \_\_\_\_\_

Room 405, Dennis Bldg.,  
P.O. Box 99

DISTRICT OFFICE,

Halifax, N. S. Dec. 5th, 19 19

Secretary,  
Board of Pension Commissioners  
for Newfoundland, St. John's, Nfld.

#1175, Pte. John Thomas Aspell

Sir,-

1. I have the honour to enclose herewith copy of a letter forwarded you on November 20th.
2. Some information in connection with this case will be appreciated.



Your obedient servant,

*J. Machay Cartley*

For the Board of Pension  
Commissioners for Canada.  
Halifax District Office.

1-22

ENCL.

|  | Date     | Initials |
|--|----------|----------|
|  | 16.12.19 | WHD      |
|  |          | WHD      |
|  | 5/1/20   | WHD      |

THE BOARD OF  
PENSION COMMISSIONERS  
FOR CANADA



IN REPLY REFER TO

No. \_\_\_\_\_

Room 405, Dennis Bldg.,  
P.O. Box 99

DISTRICT OFFICE,

Halifax, N. S. Dec. 5th, 19 19

Secretary,  
Board of Pension Commissioners  
for Newfoundland, St. John's, Nfld.

#1175, Etc. John Thomas Aspell

Sir,-

I. I have the honour to enclose  
herewith copy of a letter forwarded you  
on November 20th.

2. Some information in connection  
with this case will be appreciated.



Your obedient servant,

*J. Mackay Cartwright*

For the Board of Pension  
Commissioners for Canada.  
Halifax District Office.

RECEIVED

1-22

ENCL.

|  | Date     | Initials |
|--|----------|----------|
|  | 16.12.19 | WTRD     |
|  |          | MBOK     |
|  | 5/11/20  | JMOR     |

THE BOARD OF  
PENSION COMMISSIONERS  
FOR CANADA



IN REPLY REFER TO

No. \_\_\_\_\_

Room 405, Dennis Bldg.,  
P. O. Box 99

(COPY)

HALIFAX DISTRICT OFFICE,

Halifax, N. S. Nov. 20th, 1919

Secretary,  
Board of Pension Commissioners  
for Newfoundland, St. John's, Nfld.

#1175, Pte. John Thomas Aspell

Sir,-

1. I have the honour to state that the marginally named called at this Office and produced his discharge, which reads as follows:-

"He is discharged in consequence of demobilization and medically unfit for general service, after serving four years and twenty-seven days."

2. Mr. Aspell states that he was invalidated home with interic fever.

3. His present address is,- 202 North Street, Halifax, N. S.

4. It will be appreciated if you will give this your usual prompt attention, and inform this Office what action you wish taken.

Your obedient servant,

*True*

For the Board of Pension  
Commissioners for Canada.  
Halifax District Office.

THE BOARD OF  
PENSION COMMISSIONERS  
FOR CANADA



Room 303, Roy Bldg.,  
P.O. Box 99

IN REPLY REFER TO

| No. | Date   | Initials |
|-----|--------|----------|
|     | 6.2.20 | W.S.P.   |
|     |        | J.M.R.   |
|     |        | J.H. 10  |
|     |        | J.M.R.   |

HALIFAX DISTRICT OFFICE

January 20th, 1920

Secretary,  
Board of Pension Commissioners  
for Newfoundland, St. John's, Nfld.

#1175. John T. Aspell

Sir,-

1. I have the honour to acknowledge receipt of your letter of January 5th.
2. You will note that this Office communication of November 20th requests in Paragraph 4 that you inform the writer what action you wish taken.
3. The man merely called and stated that he wished his case brought to your attention.
4. If it is your desire to have a medical examination carried out, will you kindly inform this Office if you are yet using N.M.D. Form 98, and if not, along what lines you wish this man to be examined.
5. As soon as information is received, we will be pleased to co-operate to the best of our ability.

Your obedient servant,

J. Mackay Lamb

For the Board of Pension  
Commissioners for Canada.  
Halifax District Office.

May 15, 1920.

Asst. Medical Director,  
Dept. Soldier's Civil Re-Establishment,  
Halifax.

1175 Pte. John Aspell.  
-----

Dear Sir:-

The above noted man is reported to be under your care.  
Kindly let me know the circumstances? and if his disability  
is due to service?

Yours faithfully,

Secretary.

WH /GEC.

## DEPARTMENT OF SOLDIERS' CIVIL RE-ESTABLISHMENT.

## MEDICAL HISTORY SHEET.

(To be used for all cases under observation or treatment by the Dept. S. C. R.)

Station. **Camp Hill Hospital.**Date admitted **10-5-20.** 19.....Name **Aspell, J.T.**Home Address **202 North St., Halifax, N.S.**Former Reg. No. **1175** Age **25** Weight **140** Occupation **Shoe cutter.**Diagnosis **Rheumatic fever.**Complication **Valvular disease of heart.**Result **Improved.**Physician in Charge **G.B.Kennedy.**Family History **Negative.**Previous Illness **Rheumatic fever Dec. 1915.  
Also enteric fever Egypt Feb 1916.**Present Illness **May 1920. admitted with rheumatic fever.**

## PHYSICAL EXAMINATION

Under following headings:—

- |                 |                    |               |              |
|-----------------|--------------------|---------------|--------------|
| (a) Circulatory | (b) Respiratory    | (c) Digestive | (d) Muscular |
| (e) Osseous     | (f) Genito-Urinary | (g) Nervous   | (h) Special  |

**Mitral Heart disease. also suspicious of early aortic.**  
**After fever subsided treated by Physio therapy for arthritic  
 manifestations which are now very slight, but heart  
 disability remains.**

sgd **G.B.Kennedy.**



## DEPARTMENT OF SOLDIERS' CIVIL RE-ESTABLISHMENT.

## MEDICAL HISTORY SHEET.

(To be used for all cases under observation or treatment by the Dept. S. C. R.)

Station. **Camp Hill Hospital.**Date admitted. **10-5-20.** 19.....Name **Aspell, J.T.**Home Address **202 North St., Halifax, N.S.**Former Reg. No. **1175** Age **25** Weight **140** Occupation **Shoe cutter.**Diagnosis **Rheumatic fever.**Complication **Valvular disease of heart.**Result **Improved.**Physician in Charge **G.B.Kennedy.**Family History **Negative.**Previous Illness **Rheumatic fever Dec. 1915.  
Also enteric fever Egypt Feb 1916.**Present Illness **May 1920. admitted with rheumatic fever.**

## PHYSICAL EXAMINATION

Under following headings:—

- |                 |                    |               |              |
|-----------------|--------------------|---------------|--------------|
| (a) Circulatory | (b) Respiratory    | (c) Digestive | (d) Muscular |
| (e) Osseous     | (f) Genito-Urinary | (g) Nervous   | (h) Special  |

**Mitral Heart disease, also suspicious of early aortic.****After fever subsided treated by Physio therapy for arthritic manifestations which are now very slight, but heart disability remains.****sgd G.B.Kennedy.**



DEPARTMENT OF SOLDIERS-CIVIL RE-ESTABLISHMENT

Halifax, N.S., Sept. 15-20  
DSCR "B" A-303

To:- The Secretary,  
Board of Pension Commissioners,  
St. Johns, Nfld.

1175 ex Pte. Aspell, J.T.

Enclosed please find the undermentioned documents relative to the marginally noted man who was struck off the strength of this Department on Sept. 15-20 having completed his course of treatment.

S.C.R. Form 67.....2  
S.C.R. Form 76.....2  
S.C.R. Form 14.....2



For-Assistant Director for N.S. & P.E.I.,  
Dept. of S.C.R.





1386

Sept. 24/20.

Assistant Medical Director,  
Dept. S.C.R.  
Halifax, N.S.

Ref: #1176, Ex-Pte. Aspell, J.T.

Dear Sir:-

I have to acknowledge form #76 completed, regarding the above noted. It is noted that he is being treated for Rheumatic Fever, and stated that he had Rheumatic Fever in 1915, we have no evidence that he suffered from this while in the Army. He was sent back from Gallipoli with Enteric Fever in December and was in Hospital for some eight months following that, with Debility.

I would be glad if you would give us further information concerning his recent illness, whether in your opinion, it might be said to be due to, or aggravated by service.

Yours faithfully,

Secretary.

WHP/CEC

Pr 1386

Oct. 5. 1920.

The Asst. Medical Director,  
for N.S. and P.S.I.,  
Depart. of S.C.R.,  
Halifax.

1175 Ex-Pte. John T. Aspell

For attention of Dr. L.S. Walker

Dear Sir:-

I have to thank you for your communication of  
September 30th. concerning the above noted man.

Yours faithfully,

Secretary.

WHP/BT

THE BOARD OF  
PENSION COMMISSIONERS  
FOR CANADA



IN REPLY REFER TO

NO. B.P.C. 54-1-1.

*Ottawa* October 25th 19 20.

1386

The Secretary,  
Board of Pension Commissioners for Newfoundland,  
St. John's Newfoundland.

Re: #1175 Pte. John Thomas Aspell,  
46 John St. Halifax, N.S.....

Sir:-

Attached hereto please find copy  
of a communication received from the Halifax  
District Office of this Commission which is  
self explanatory.

For your information, please.

Yours truly,

Secretary.  
Board of Pension Commissioners  
for Canada.

Per *J.C.M.*

CB.9/33.



COPY.

To Secretary, B.P.C.

From Halifax District Office.

Halifax, N.S. Oct. 15th 1920.

John Thomas Aspell,  
#1175 Pte.  
46 John St. Halifax, N.S.

1. The m/n Newfoundland Pensioner has informed this office that he has not as yet heard anything about pension.
2. Completed B.P.C. 98 was forwarded Head Office, March 1st.
3. This man's correct address is as quoted in the margin.
4. Your remarks would be appreciated, please.

(SGD) J.W.C. Rose.

Manager, Halifax, D.O.

B.P.C.





T H I R D   B O A R D .

Form Z179 N. M. D.

## Report of Medical Board.

|                                    |                                       |
|------------------------------------|---------------------------------------|
| Station    St. John's, Nfld        | Date    MARCH 4TH. 1919.              |
| No. and Rank    1175 PTE.          | Age    21                      Height |
| Name            ASPELL    JOHN     | Complexion                            |
| Unit            Royal Newfoundland | Eyes                          Hair    |
| Address                            |                                       |

Former Trade

Enlisted at    ST. JOHN'S On 21/6/16.                      (The Board will please note how the soldier's appearance corresponds with above description.)

Disease or Disability    Original    DEBILITY FOLLOWING ENTERIC.

Subsequent

Present Condition (Compare with previous Board)

**PULSE 88 GENERAL CONDITION GOOD. NOTHING IN CHEST & NO DIARRHOEA.**

**THE ENTIRE DISABILITY:** To what extent is his capacity lessened at present for earning a livelihood in the general labour market?

**LESS THAN 5%.**

**PENSIONABLE DISABILITY:** To what extent is his capacity at present for earning a full livelihood in the general labour market lessened by that proportion of his disability due to or incurred during service?

Recommendation of Medical Board    **LESS THAN 5%.**

Members of Board

N.S. FRASER.....

(SGD) CLUNY MACPHERSON..... MAJOR.

J.S. TAIT.....

L. PATERSON..... MAJOR.

Approving Medical Officer.



# The Royal Newfoundland Regiment

## COPY

### PROCEEDINGS ON DISCHARGE

1. No. ...1175... Rank Pta.....Name ...J.F. Aspell.....

Intended place of residence... 59 Springdale St.....

2. Occupation ...Shoe Cutter.....

Classification of soldier ..... B..... Medical Category ... F.....

3. The above named man is discharged in consequence of..... **DEMOBILIZATION**.....

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

Place **ST. JOHN'S**.....

Date ... **March 5th, 1919**.....

*Whaley Capt*  
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**..... (sgd) J.F. Aspell.....  
Signature of soldier

..... **5-3-19**..... " C.B. Dicks Capt.....  
Signature of witness

#### CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date **ST. JOHN'S**..... (sgd) J.F. Aspell.....  
Signature of soldier

..... **5-3-19**..... " W.J. Eaton RQMS.....  
Signature of witness

#### STATEMENT OF SERVICE

7. Enlisted for service ... **22-2-15**..... No of days on Military

Discharged from service... **5-3-19 plus 14 days**..... Service ... **1487**.....

#### APPROVAL OF DISCHARGE

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

Place **ST. JOHN'S**.....

Date ... **March 5th, 1919**.....

*R.H. Dait Capt*  
Officer Commanding Discharge Depot  
The Royal Newfoundland Regiment

#### CONFIRMATION OF DISCHARGE

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

Place .....

Date .....

Officer in Charge Records  
The Royal Newfoundland Regiment

To The Secretary,  
Board of Pension Commissioners  
St. John's, Nfld.

Halifax, July 5th, 1920 191

MARK YOUR REPLY:

For attention of *W.H. Parsons*  
Your file

For attention of C.B. Elliot  
File DSCR "B" A-303

SUBJECT #1175 Ex.Pte. Aspell, J.T.

S.C.R. 123-602M. 2.A.

NOTE:—Each letter shall treat with one subject only which shall be indicated in space provided. File No. shown on letter, to which your reply refers, must be quoted.



May we be favored with a reply to our letter of the 16th ultimo, wherein we requested advice as to the amount of Pension the marginally noted man is receiving.

Kindly endeavor to have the enclosed S.C.R. Form 269 completed and return to this office at your earliest convenience, please.

For Assistant Director,  
For N.S. & P.E.I., Dept. of S.C.R.

*W.H. Parsons*  
*have for 269*  
*Completed by [signature]*  
/SP.

THE BOARD OF  
PENSION COMMISSIONERS  
FOR NEWFOUNDLAND

HON. J. A. CLIFT, K. C., C. B. E.,  
MAJOR W. H. PARSONS, M. C.,  
R. A. M. C.



In reply refer to

No. ....

St. John's,

They have acknowledged receipt of  
two x rays tubes, on behalf of the General  
Hospital, to whom there are given in  
loan.

Aug 18/20.

Maurice Apell



July 12, 1920.

The Secretary,  
The Board of Pension Commissioners for Canada,  
Ottawa, Canada.

Ref:- 1175 J.T. Aspell.  
-----

Sir:-

I have the honour to acknowledge receipt of your letter regarding the marginally noted man.

In reply I would say that this man did serve with the Newfoundland Regiment and was discharged with a gratuity of less than 20%, following rheumatism incurred on active service.

Recently we have had several communications with the Soldier's Civil Re-Establishment Committee in Halifax regarding this man, and they have in their possession all medical papers relating to his case, and as it is understood he would receive pay and allowances whilst on their strength provided his present condition is due to his disability incurred on service.

From your present report it would appear that this man is now suffering from Pulmonary Tuberculosis, of which there is no record in his previous medical reports with us, or medical documents from the time of his enlistment to his discharge, all of which have been forwarded to the Department of Soldier's Civil Re-Establishment, Halifax.

Trusting this information will prove satisfactory.

I have the honour to be,  
Sir,  
Your Obedient Servant,

Actg. Secy .

JBO'R/GEC.

THE BOARD OF  
PENSION COMMISSIONERS  
FOR CANADA



IN REPLY REFER TO  
NO. BFC. 200953.

**FILE**

Ottawa July 3, 1920.

The Secretary,  
Board of Pension Commissioners for Newfoundland,  
St. John's, Nfld.

Re:#1175, J.T. Aspell,

Sir:-

I have the honour to attach, herewith, medical report on the marginally named Ex-Soldier, who appears to have served in the Newfoundland Forces, during the Past War.

2. Will you kindly ascertain, if this man actually served in your Forces and advise this Office accordingly.

Your obedient servant,

Secretary.  
For the Board of Pension  
Commissioners for Canada.

|           | Date    | Initials |
|-----------|---------|----------|
|           | 10/7/20 | Max      |
| REFFERRED |         |          |
| ANSWERED  | 10/7/20 | Max      |

CB39/8.  
Encls. 1.

Per.....



## Commissioners for Canada

FOR MEDICAL RE-EXAMINATION

B.P.C. 111.

A definite description of the man appearing before me for re-examination:

Regimental No. 1173 Rank Pte. Unit ---  
 Name J. T. Aspell, Date of Discharge 19-3-19.  
 Place of Discharge St. John's, Nfld.,  
 Age 24 Height --- Build --- Weight --- lbs.  
 Complexion --- Colour of eyes --- of hair ---  
 Marks of Identification ---  
 Nature of employment, former Shoe Cutter.  
 present stevadore.

1. The man who appeared for examination, whom I have described above, I am satisfied is the man of the same name who is described in the previous documents on this file. **Yes.**
2. The following is a definite, detailed description of the present disabling condition: (If there is a new disabling condition not heretofore described, it is essential that a complete history of its origin be given, and if attributed to Service, the reasons for this opinion should be definitely stated.)

3 HERBERT N.S. SANATORIUM REPORT. KENTVILLE, N.S. 2-7-20.SYMPTOMS:

Strength.....fairly good.  
 Weight.....good  
 Appetite.....good  
 Fever.....0  
 Hmpt.....0  
 Cough.....none for the last week.  
 Expect.....0  
 Night sweats.....0  
 Sh. of Breath.....slight plus  
 Pleurisy.....0

PHYSICAL FINDINGS:

**Right:** Slight dullness to 2nd rib and 6th V.S.  
 Breathing slightly diminished over front and back,  
 V.R. slight plus over front and back.  
 On cough no rales, front and back.

**Left:** Slight dullness to 3rd rib and 6th V.S.  
 Breathing diminished at apex, markedly diminished  
 at base front and back.  
 V.R. normal over front and back.  
 On cough, no rales, front and back.

FLUOROSCOPIC EXAM:

Root shadows thickened. Ascending trunks thickened,  
 more marked on left than right.  
 Linear markings accentuated slightly more on left than  
 right. Fair movement of diaphragms.  
 Right diaphragm flattened on inner  $\frac{1}{2}$   
 Movement of left diaphragm slightly retarded.

DIAGNOSIS:

An old Clinically Inactive Basal Pleurisy (left)

ADVICE: No treatment necessary.

Examined by: (Sgd.) R.J. Collins,  
 T.M. Sieniewicz. Medical Superintendent.

This is to certify that I have read or have heard read the description  
 of my disabling condition, that there are no other disabling conditions  
 stated, and I have not withheld any information concerning them.

*J. T. Aspell*  
 Pensioner's Signature

3. (a) To what extent, if any, have the disabilities

No change (states)

(b) If increased or undiminished, is increase or failure to diminish due to interference with conduct, or neglect to exercise reasonable care required by the nature of the disabling condition?

No.

4. Will disabilities materially increase or diminish? May diminish

5. Are the disabilities permanent? To some extent.

6. (a) Is pensioner wearing an artificial appliance for disability due to or aggravated by Service?

No.

(b) Should he continue to do so? N.A.

(c) If so, is any alteration in the form of the present appliance recommended? N.A.

NOTE: If any appliance is required and has not been previously supplied, special I.S.C. Form 154 should be completed as directed.

The information supplied by answers to question 6 must be forwarded by Head of District Office to the nearest unit of the Department of Soldiers' Civil Re-Establishment.

7. (a) Would treatment reduce the pensioner's disability, or increase his comfort? No.

(b) Nature of treatment advised N.A.

(c) Does pensioner refuse treatment advised? N.A. and if so, is this unreasonable? N.A.

REFUSAL OF TREATMENT: This is to certify that I thoroughly understand the nature of the  
(To be completed when treatment advised has been refused)

treatment advised, and refuse to accept the same for the following reasons:

Pensioner's signature

The foregoing report submitted by:

Place Halifa x N.S.

Date April 26th, 1920.

Signature

J. Rankie M.D.  
Medical Examiner.

July 3/20

Asst. Medical Director  
for N.S. and P.E.I.,  
Depart. Soldiers Civil Re-establishment,  
Halifax.

For attention:-S.L. Walker.

1175 J.T. Aspell  
-----

Dear Sir:-

I beg to acknowledge receipt of your D.S.C.R. Form 58, relative to the case of the above noted man.

I beg to refer you to the copies of letters enclosed; one, dated March 27/20, sent to the Secy. of the B.P.C. Ottawa, another dated May 29/20, sent to the Chief Inspector, D.S.C.R. Ottawa, and also, one dated June 14/20 sent to the Asst. Director for N.S. & P.E.I., D.S.C.R. Halifax, for attention of S.L. Walker.

I would further state that when this man was demobilized in St. John's, Ffld, his disability was less than 5%, and we are therefor not paying him any Pension.

Yours faithfully,

  
Asst. Secy.

WVW/BT

May 29th/30

The Chief Inspector,  
Dept. Soldiers' Civil Re-Establishment,  
Ottawa.

1175 J. T. Aspell, Mfld. Regiment.

Dear Sir:-

Enclosed please find Medical documents relating to  
the above mentioned man as requested in yours of May 31st.

Kindly note that this man was discharged with less  
than 5% on March 4th 1919.

Yours faithfully,

Actg. Secretary.

LBD.

March 27th/20

The Secretary,  
The Board of Pension Commissioners for Canada,  
Ottawa.

Dear Sir:-

I beg to acknowledge receipt of your communication of  
March 6th re the above mentioned man.

Enclosed please find detailed précis of this man's case  
from the time of his enlistment to the time of his discharge,  
and we would be glad if you would consider the case and let us  
know whether you think this case due to or aggravated by  
service.

Yours faithfully,

Captain.  
For Secretary.

JBO'R/LBD.

JK

June 14, 1920.

Attention of:- S.L. WALKER.

Asst. Medical Director for N.S.&P.E.I.  
Dept. of Soldier's Civil Re-Establishment,  
Halifax.

#1175 Ex-Pte. J.F. Aspell.

Dear Sir:-

Replying to your letter of June 1st., regarding the above noted man. I beg to state that all Medical papers in our possession, regarding his case, were recently forwarded to you, and if you think that his present condition is now due to the disability he incurred whilst on service, he should be placed on pay and allowances from the date of his admission to Hospital.

Yours faithfully,

Actg. Secy.



To Board of Pension Commissioners,  
St. John's, Nfld.

Halifax, N. S., June 1, 1920.

For attention of

For attention of Dr. S. L. Walker.

Your file

File

DSCR "B" -A-303.

SUBJECT #1175 Ex-Pte. J. T. ASPELL.

**FILE**

S.C.R. 122-1,000,000-11-19.

NOTE:—Each letter shall treat with one subject only which shall be indicated in space provided. File No. shown on letter, to which your reply refers, must be quoted.

Replying to yours of May 15th  
I beg to advise that this office is in receipt  
of the following report from the Medical Super-  
intendent of Camp Hill Hospital, re marginally  
named, admitted 12-5-20:-

"Diagnosis - Rheumatic Fever.  
Fit for discharge in a  
month. (Sgd.) S.R. Johnston, M.D."

He states that he had similar attacks  
in 1915 while in Service. I would be glad if you  
would confirm this in order that we may know whether  
he is entitled to Pay and Allowances.

I would be glad if you would consider  
this matter urgent.

*S. L. Walker*

SLW/K.

*J. B. O'R*

Assistant Medical Director,  
For N.S. & P.E.I., Dept. S.C.R.

|          | Date    | Initials   |
|----------|---------|------------|
| RECEIVED |         |            |
|          |         |            |
|          | 12/4/20 | <i>WOK</i> |



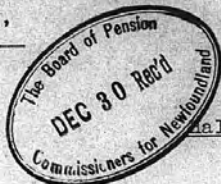
THE BOARD OF  
PENSION COMMISSIONERS  
FOR CANADA



IN REPLY REFER TO

No. \_\_\_\_\_

Room 405, Dennis Bldg.,  
P. O. Box 99



DISTRICT OFFICE,

Halifax, N.S. Dec. 20th, 19 19

Secretary,  
Board of Pension Commissioners  
for Newfoundland, St. John's, Nfld.

#1175, Pte. John Thomas Aspell

|            | Date      | Initials |
|------------|-----------|----------|
| SEARCHED   | 3. 1. 20. | WTR      |
| INDEXED    | a         | WTR      |
| SERIALIZED |           |          |
| FILED      |           |          |

Sir,-

1. I have the honour to request  
a reply to this Office communication of  
December 5th, please.

Your obedient servant,

For the Board of Pension  
Commissioners for Canada,  
Halifax District Office.

1-22

Jany. 5th/19

The Secretary,  
The Board of Pension Commissioners,  
Halifax District Office,  
Halifax, N. S.

1175 Ex-Pte. John Thos. Aspell.

Sir:-

I have the honour to acknowledge receipt of your communication of Dec. 30th relative to the above mentioned man.

In reply I beg to state that on Dec. 17th we wrote you with reference to this man, also forwarded copy of his Medical documents.

Trusting that same has reached you by now.

I have the honour to be,  
Sir,  
Your obedient servant,

Captain.  
For Secretary.

LBD.

Dec. 17th/19

The Board of Pension Commissioners for Canada,  
Halifax District Office,  
Halifax, N. S.

1175 John Thos. Aspell.

Dear Sir:-

In reply to your communication of Dec. 5th regarding the above mentioned man.

I beg to state that this man was boarded at St. John's in Jan'y. 1917 for debility following Enteric Fever and recommended for light duty. He was again re-boarded on Nov. 10th/17 and awarded 40% disability and discharged as permanently unfit but was later re-attested, and finally boarded out of the Army March 4th/19 with the following report:- Pulse 88. General condition good. Nothing in chest and no diarrhoea. Less than 5% which is a gratuity.

A copy of his Medical documents is attached for your information.

Yours faithfully,

Captain.  
For Secretary.

JBO<sup>a</sup>R/LBD.

THE BOARD OF  
PENSION COMMISSIONERS  
FOR CANADA



IN REPLY REFER TO

No. \_\_\_\_\_

Room 303, Roy Bldg.,  
P. O. Box 99

HALIFAX DISTRICT OFFICE.

January 13th, 1920

Secretary,  
Board of Pension Commissioners  
for Newfoundland, St. John's, Nfld.

#1175. John T. Aspell

Sir, -

1. I have the honour to refer to your letter of December 17th, 1919, in regard to the marginally named.
2. If it is your desire to have this man boarded, it would be appreciated if you would forward Form N.M.D. 98, when action will be immediately taken.



Your obedient servant,

*W. J. Mackay*  
For the Board of Pension  
Commissioners for Canada.  
Halifax District Office.

1-22

Jan'y. 27th/20

The Secretary,  
The Board of Pension Commissioners for Canada,  
Halifax District Office  
Room 303 Roy Bldg.,  
Halifax, N. S.

1175 John T. Appell.

Sir:-

I have the honour to enclose herewith N.H.D. Form 98  
as requested in yours of Jan'y. 13th to be completed with  
regard to the above mentioned man.

Your obedient servant,

Captain.  
For Secretary.

JBO\*R/LBD.



February 9th, 1920.,

Board of Pension Commissioners for Canada.  
Halifax District Office.  
Room 305, Roy Building.  
Halifax. N. S.

1185. J. T. ASPELL.  
-----

Dear Sir:-

I have the honour to acknowledge receipt of your letter January 20th, regarding the marginally noted man, and beg to state that we will be glad if you will let us have a report on his condition, and whether you consider his present condition due to service.

I might say that owing to the prevailing weather conditions, the mails have been more or less delayed to some extent, and this is why we have not replied to this matter before.

Yours faithfully,

*J. B. C. P.*

FOR BOARD OF PENSION  
COMMISSIONERS FOR Nfld.

JBO'R/AS.



DEPARTMENT OF

EBD:FP

SOLDIERS' CIVIL RE-ESTABLISHMENT

*J. L. G. = pl*  
*21258. 64/17*

IN YOUR REPLY REFER TO FILE NO.

Ottawa, May 21, 1920

#1175, Pte. J.T. Aspell,  
Newfoundland Regiment.  
-----

Dear Sir;-

Will you please forward to this office at your earliest convenience copies of all available Medical Documents in connection with the Service and Discharge of the marginally noted ex-member of the Newfoundland Regiment.

Yours truly,

*S. M. Dand*

For Chief Inspector.

The Secretary,  
Board of Pension Commissioners,  
St. Johns,  
Newfoundland.

*Joakley*  
33 81



THE BOARD OF PENSION COMMISSIONERS FOR CANADA

**MEMORANDUM**

To The Secretary, B.P.C. Newfoundland.

Ottawa, March 6th, 1920.

From Board of Pension Commissioners  
for Canada.

#1175, Pte. J.T. Aspell

B.P.C. 54-1-1.  
Newfoundland Pensioner.

1. Please find enclosed N.M.D. Form 98, in the case of the marginally named.
2. Trusting same will be found in order.

E.G. Ahern.  
Secretary.

CB1/8.

*F. Anglin*  
Per. \_\_\_\_\_

THE BOARD OF PENSION COMMISSIONERS FOR CANADA

MEMORANDUM

To The Secretary B.P.C., Ottawa, Ont.  
From Halifax District Office.

Halifax, N.S., March 1, 1920

Pte. 1175 John Thomas Aspell

B.P.C.# Nil  
Nfld.Pensioner

1. Herewith N.M.D. Form 98 in the case of the marginally named Newfoundland pensioner.

*T. J. Mackay*  
~~Manager  
Halifax D.O., B.P.C.~~

BOARD OF PENSION COMMISSIONERS  
B.P.C. No. 54-1-1  
MAR 5 1920  
Refer to CB1  
Replied by \_\_\_\_\_

5:13  
Enc.

A-15

TO THE MEDICAL BOARD OF MEDICAL EXAMINERS

1000-20-5-19

N.M.D. Form 98.

# The Board of Pension Commissioners for Newfoundland

In replying please mention Date and

No. ....

All communications should be addressed to the  
DIRECTOR OF MEDICAL SERVICES,  
DEPARTMENT OF MILITIA, NFLD.

St. John's, Newfoundland.

To:—

From:—The Board of Pension Commissioners for Newfoundland,  
St. John's, Newfoundland.

Sir:—

The Board of Pension Commissioners requiring a report on the Pensioner named in the margin, kindly notify him to appear before you AS SOON AS POSSIBLE.

You will find a form on which to record your examinations on pages 2 and 3.

Pensioner will be notified to appear before you on whatever date you will find convenient.

If another Registered Medical Practitioner is in your neighbourhood, or likely to be there during the week, it is preferable that you should both examine the Pensioner at the same time, and both sign report.

The form when fully completed, signed and dated, is to be returned by the president of the Board of Medical Examiners to the undersigned.

If the pensioner neglects to present himself for examination within a reasonable period, you will please telegraph the fact to the undersigned.

If it is necessary for the pensioner to travel, in order to present himself for examination, bills for Transport should be certified by you and forwarded to the undersigned.

The fee laid down by the Board of Pension Commissioners for such examination is ~~One dollar (\$1.00)~~ for each Doctor for each examination.

**(\$3.00)**

I have the honour to be,

Sir,

Your obedient servant,

**THE SECRETARY**

**BOARD OF PENSION COMMISSIONERS FOR NFLD.**

**DIRECTOR OF MEDICAL SERVICES**

Name

Address

TO THE MEDICAL BOARD, OR MEDICAL EXAMINER

The Board of Pension Commissioners for Newfoundland requires a report on the present condition of the pensioner named on page one of this form.

The object of the report is to enable the Board to decide the question of continuance of pension.

The identity of the pensioner should be established, to prevent personation; for that purpose the description of the pensioner follows:

(If incomplete or imperfect, amplification or correction is required)

DESCRIPTION OF PENSIONER:—

Apparent age..... *24* ..... Height... *5' 8"* ..... Colour of Eyes... *Gray* ..  
Complexion..... *Ruddy* ..... Marks of Identification  
..... *Scar rd. leg, near ankle* .....

A description of the disabling condition of the pensioner, as given by the Board of Medical Officers held on *21-2-20* ..... and other necessary information, follows:—

Condition of Pensioner:—

~~Spitting.....plus  
Cough.....plus  
Night sweats.....0  
Haemoptysis.....0  
Appetite.....0  
Dyspnoea.....plus  
Pains in chest, left nipple area and left base.  
Weight, slight loss  
Examination:— Poor colour, rather poor nutrition.  
Chest; expansion poor, palpation negative. Percussion, shows slight impairment to 2 rib and 2nd V.S. right and 3rd rib and 4th V.S. left and a contracted Kronig's band on left.  
Expiration is prolonged and fairly numerous crepitations heard over left upper back.  
Opinion: Active pulmonary tuberculosis. Sanatorium treatment advised~~

(Sgd.) M.J. Cerney, M.D.

Signature (or mark) of the pensioner, for identification only, to be procured at the time of examination, and placed on page 4.

N.B.—The description of the pensioner should record all marks or peculiarities by which he may be identified.

The description of the condition of the pensioner, history, &c., as given above contains the essential information available to assist the Medical Board in making its report.

The whole purpose of the Medical Report on page 3 is to give an accurate description of the condition of the pensioner.

**PENSIONERS MUST NOT BE INFORMED OF THE EXTENT AT WHICH THEIR  
DISABILITY IS ESTIMATED**

MEDICAL REPORT

(An answer to each of these questions is desired; they are not to be altered. If further space is required for the answers, please use page 4.)

- (1) Are you satisfied that the man presenting himself for examination is the pensioner named on page 1, and described on page 2? **Yes.**
- (2) Give a DEFINITE DETAILED DESCRIPTION of the PRESENT STATE of the DISABLING CONDITION, stating time and cause of any appreciable change in the extent of the DISABILITY. If there is a new disabling condition not described on page 2, it is essential that a complete history of its origin be given, and if attributed to service, the reasons for this opinion should be definitely stated.

(Each disabling condition should be separately and conjointly estimated.)

Spitting.....plus  
 Cough.....plus  
 Night sweats.....0  
 Haemoptysis.....0  
 Appetite.....0  
 Dyspnoea.....plus  
 Pains in chest, left nipple area and left base.  
 Weight, slight loss.

Examination:

Poor colour, rather poor nutrition.  
 Chest; expansion poor, palpation negative. Percussion, shows slight impairment to 2nd Rib and 2nd V.S. right and 3rd Rib and 4th V.S. left and a contracted Kronig's band on left. Expiration is prolonged and fairly numerous crepitations heard over left upper back.

Opinion: Active pulmonary tuberculosis. Sanatorium treatment advised.

(Sgd.). M. J. Carney. M.D.

- (3) To what extent, if any, has disability diminished or increased since last examination? If increased, is increase due to intemperance or improper conduct?  
 ..... At present is 100% .....
- (4) Will it materially increase or diminish? **May diminish** .....
- (5) Is the disability permanent? ..... **Not necessarily** .....
- (6) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labour market?

(Extent should be stated in percentages)

..... 100% .....

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

(State in percentage.)

..... **Unable to state** .....

- (8) Would treatment reduce the pensioner's disability or increase his comfort?  
 ..... **Yes** .....
- (9) If so, is pensioner willing to accept such treatment, and when? ... **Yes** .....

(Recommendations regarding nature, etc., of treatment may be made on page 4.)

Place **Halifax, N.S.** .....

*M. J. Carney* President

Date **Feby. 21st. 1920.** .....

..... Members



Pensioner's Signature *J. F. Aspell* .....

Signature of Witness .....

CONTINUATION

(1) Are you satisfied that the pensioner is the person named on the certificate? *Yes*

(2) Give a DEFINITE DETAILED DESCRIPTION of the PRESENT STATE of the DISEASING CONDITION and the extent of the DISABILITY. (If the condition has been described in any previous certificate, the history of it in other certificates should be given and it should be stated whether the condition is permanent or temporary.)

(3) Describe the nature of the disability and the extent of the disability.

(4) Describe the nature of the disability and the extent of the disability.

(5) Describe the nature of the disability and the extent of the disability.

(6) Describe the nature of the disability and the extent of the disability.

(7) Describe the nature of the disability and the extent of the disability.

(8) Describe the nature of the disability and the extent of the disability.

(9) Describe the nature of the disability and the extent of the disability.

(10) Describe the nature of the disability and the extent of the disability.

(11) Describe the nature of the disability and the extent of the disability.

The answers to the following questions are to be filled in by the medical examiner.

8 (a) Has the pensioner married since last medical re-examination? *yes* .....

8 (b) If so, is he receiving the additional allowance? *no* .....

9 (a) Has a child been born to pensioner since last medical re-examination? *no* .....

9 (b) If so, is he receiving the additional allowance? *no* .....

10 If pensioner was married, has his wife died since last medical re-examination? *no* .....

11 Have any of pensioner's children died since last medical re-examination? *no* .....

Place .....

Date .....

*J. W. [Signature]*  
Medical Examiner.

Date .....

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

# MEDICAL HISTORY

OF

Surname Aspell Christian Name John

Table 1.—GENERAL TABLE.

Birthplace:—Parish St John's County \_\_\_\_\_

|                                                                   | SPECIAL RESERVE.             |                       | REGULAR ARMY. |                  |
|-------------------------------------------------------------------|------------------------------|-----------------------|---------------|------------------|
|                                                                   | on                           | day of                | on            | day of           |
| Examined                                                          | on                           | 5 day of 6            | 1915          | day of 191       |
|                                                                   | at                           | St John's             | at            |                  |
| Declared Age                                                      |                              | 19 years              | days          | years days       |
| Trade or Occupation                                               |                              | Labourer              |               |                  |
| Height                                                            |                              | 5 feet 6              | feet          | inches           |
| Weight                                                            |                              | 122 lbs.              |               | lbs.             |
| Chest Measurement                                                 | Girth when fully expanded... | 31 1/2 inches         |               | inches           |
|                                                                   |                              | Range of expansion... | 34 inches     | inches           |
|                                                                   |                              |                       |               |                  |
| Physical Development                                              |                              |                       |               |                  |
| Vaccination Marks                                                 | Right                        | Left                  | Right         | Left             |
|                                                                   | Arm                          |                       |               |                  |
|                                                                   | Number                       |                       |               |                  |
| When Vaccinated                                                   |                              |                       |               |                  |
| Vision                                                            | R. E.—V=                     | 1914                  | R. E.—V=      |                  |
|                                                                   | L. E.—V=                     |                       | 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)                                           | <u>W. Patterson</u>          |                       |               |                  |
| (Rank)                                                            | Capt                         |                       |               |                  |
|                                                                   |                              | Medical Officer.      |               | Medical Officer. |
| Enlisted                                                          | at                           | St John's             | at            |                  |
|                                                                   | on                           | 21 day of Feb         | 1915          | on day of 191    |
|                                                                   |                              | Corps.                | Regtl. No.    |                  |
| Joined on Enlistment                                              |                              | 1504                  | 1175          |                  |
| Transferred to                                                    |                              |                       |               |                  |
| Became non-effective by                                           |                              |                       |               |                  |
|                                                                   | on                           | day of                | 191           | on day of 191    |
| (Signature)                                                       |                              |                       |               |                  |
| (Rank)                                                            |                              |                       |               |                  |



Table II.—Only for admissions to hospital or to the sick list in the 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, &c., will be given in the special syphilis case sheet. | Signature of Medical Officer       |
|--------------------------------------------------------|----------------------|-------|------|--------------------------|-------|------|-------------------|-------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
|                                                        | Day                  | Month | Year | Day                      | Month | Year |                   |                         |                                                                                                                                                                                                                                                                                                                                       |                                    |
| 3 <sup>RD</sup> LONDON GENERAL HOSPITAL<br>WANDSWORTH. | 4                    | 4     | 16   | 13                       | 4     | 16   | Syphilitic fever. | 10                      | 5 <sup>th</sup> Feb — admitted to 21 <sup>st</sup> San St. Hospital<br>Cause, <u>Rickettsia</u> service ( <u>Algeria</u> )<br>No. <u>1000</u> . Invalued from <u>Syphilitic fever</u> .<br><u>Month</u> transferred to <u>Clyde</u> .                                                                                                 | J. K. Stewart<br>Capt. R. A. M. D. |



## 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 go away*

*Wm J. S. Appell*  
Signature of Min.

Reg. No. *1175*

*Wm J. S. Appell*

Signature of the Vocational Officer or his Representative.

Place

*St Johnis*

Date

*6/3/19*

191

1175 Rte. John Aspell

Age 31

Laborer

1st Board. January 9, 1917.

Debility following enteric.  
Had enteric at Gallipola, February 1916. . 8 months  
in Hospital. Present condition, normal, except that  
he is a bit run down.

Fit for light duty.

2nd Board. November 9, 1917.

Been on light duty since last report. Diarrhoea  
now better. Complaining of weakness. Pulse 100.

Discharged as permanently unfit. 40%

3rd Board. March 4, 1919.

Pulse 68. General condition good. Nothing  
in chest and no Diarrhoea.

Less than 5%



## 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

Date

*H. John Wf.*  
*Jan 9. 1917*

- |                                  |                                                |
|----------------------------------|------------------------------------------------|
| 1. Unit <i>1st. Newfoundland</i> | 5. Age last birthday. <i>71</i>                |
| 2. Regimental No. <i>1175</i>    | 6. Enlisted on <i>21 June 1915.</i>            |
| 3. Rank. <i>Pte.</i>             | at <i>H. John Wf.</i>                          |
| 4. Name. <i>Copest John.</i>     | 7. Former trade or occupation <i>Labourer.</i> |
| 8. Disability                    |                                                |

*Debility following Entero.*

9. History *Had Entero at Gallipoli. Feb 1916. Illness in Hospital.*

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.)

Normal except that he is a bit run down

11. Was sanatorium advised and refused?  
operation

12. Do you recommend discharge as permanently unfit?

No

Signature

*T. O. Borden*

Rank or Qualification

*Lieut*

Remarks if any by Officer of 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. *X*
- (b) Climate.
- (c) ~~Ordinary Military Service~~

Remarks if any:—

14. At present his capacity for earning a full livelihood in the general labour market is lessened by:—  
(Here the president should write in Total, 3-4, 1-2, or 1-4).

Remarks if any:— ✓

15. The refusal of operation sanatorium is:—

- (a) Reasonable.
- (b) Unreasonable.

Remarks if any:— ✓

16. We recommend discharge from retention in the Army *fit for light duty*

Remarks if any:—

Signatures.

*R. L. Hester*

President

*L. H. Peterson, Major*

*James W. Scott*

Place *St. John's*

Date *Jan 17 1917*

APPROVED

Station

Date



*Chas. Macpherson*  
Administrative Medical Officer. Major



**NEWFOUNDLAND.**  
**REPORT OF MEDICAL BOARD**  
**ON SOLDIER OR NAVAL RESERVIST RETURNED**  
**FROM OVERSEAS**

Station ST. JOHN'S NFLD. Date NOVEMBER 9<sup>th</sup>., 1917.  
 No. 1175 Age 21 Height  
 Rank PRIVATE Complexion  
 Name ASPELL, JOHN Eyes Hair  
 Unit 1ST NEWFOUNDLAND  
 Address Former Trade  
 Enlisted at ST. JOHN'S NFLD. on JUNE 21<sup>st</sup>., 1915

Disease or disability DEBILITY FOLLOWING ENTERIC

Present condition *Been on light duty since last report.  
 Discharge now better. Complaining of weakness.  
 Pals 100*

Estimated disability 40 %

Recommendation of Medical Board *permanent  
 discharge as medically unfit*

Class

Members of Board

*H. A. ...  
 J. Sinclair ...  
 L. B. ...*



Approving Medical Officer.

*Cluny Macpherson, Major*

THIRD BOARD

Form 2179 N. M. D.

Report of Medical Board.

Station St. John's, Nfld Date MARCH 4th., 1919.  
 No. and Rank 1175 - PRIVATE Age 21 Height  
 Name ASPELL JOHN Complexion  
 Unit Royal Newfoundland Eyes Hair  
 Address

Former Trade

Enlisted at ST. JOHN'S On 21/6/15

(The Board will please note how the soldier's appearance corresponds with above description.)

Disease or Disability Original DEBILITY FOLLOWING ENTERIC

Subsequent

Present Condition (Compare with previous Board)

*Subs 88. General condition good. Nothing in Chest & no diarrhoea*

*1919*

THE ENTIRE DISABILITY: To what extent is his capacity lessened at present for earning a livelihood in the general labour market?

*less than 5%*

PENSIONABLE DISABILITY: To what extent is his capacity at present for earning a full livelihood in the general labour market lessened by that proportion of his disability due to or incurred during service?

*less than 5%*

Recommendation of Medical Board

Members of Board

*Clayton Macpherson*  
*Major*

*[Signature]*  
*[Signature]*  
*[Signature]*

Approving Medical Officer.





Casualty Form—Active Service.

Regiment or Corps Newfoundland

Regimental No. C.R. 1145 Rank Pte Name Aspell, J. J.

Enlisted (a) 21-2-15 Terms of Service (a) one year. Service reckons from (a) From Enlistment

Date of promotion to } Date of appointment } Numerical position on }  
 present rank } to higher rank } roll of N.C.Os. }

Extended \_\_\_\_\_ Re-engaged Aug 14/15 Qualification (b) \_\_\_\_\_



| Report |                    | Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 86, or in other official documents. The authority is to be quoted in each case. | Place | Date | Remarks taken from Army Form B. 213, Army Form A. 86, or other official documents. |
|--------|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------|------------------------------------------------------------------------------------|
| Date   | From whom received |                                                                                                                                                                                                                     |       |      |                                                                                    |

|           |                         |                                 |                          |                |              |
|-----------|-------------------------|---------------------------------|--------------------------|----------------|--------------|
|           |                         | Embarked St. John's, Nfld.      |                          | 30/4/15.       |              |
|           |                         | Disembarked Alexandria          |                          | 1/9/15.        |              |
|           |                         | Embarked Eschschallipoli        |                          | 13/9/15.       |              |
| 22/12/15. | 24 C.O.S.               | Admitted, Rheumatism            | H.S. "Folkstone"         | 5/12/15.       | C 5124.      |
| 12/2/16.  | 21st. Genl. Alexandria. | do                              | 21st. Genl. Hosp., Alex. | 5/2/16.        | R 1806.      |
|           |                         | <i>of Antwerp Invalidee Bay</i> | <i>of Antwerp</i>        | <i>23/3/16</i> | <i>B980.</i> |

*Aspell* Captain for 12.000.  
 Officer i/c Signals Infantry Section,  
 2nd Coy. 1st. Bn. 1st. Div.

*Int. 1/15/16.*

(5) 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.  
 (6) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. (P.T.O.)