



# Newfoundland Forestry Companies

## ATTESTATION OF

No. 112 Name Harry Bailey Corps .....

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

- 1. What is your name? ..... 1. Harry Bailey
- 2. What is your full Address? ..... 2. George B. ...  
Trinity Bay
- 3. Are you a British Subject? ..... 3. yes
- 4. What is your age? ..... 4. 29 Years 11 Months
- 5. What is your Trade or Calling? ..... 5. Lumberman
- 6. Are you Married? ..... 6. no
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,\* which? } 7. no
- 8. Are you willing to be vaccinated or re-vaccinated? ..... 8. yes
- 9. What is your Religion? ..... 9. meth
- 10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies? ..... 10. yes { Name .....  
Corps .....

I, Harry Bailey ..... do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

Harry Bailey ..... SIGNATURE OF RECRUIT.  
Frank B. Payne ..... Signature of Witness.

E- 5/5/17

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

I, Harry Bailey ..... do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully serve His Majesty, His Heirs and Successors, in the United Kingdom, according to the conditions of my service.

### CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.  
The above questions were then read to the Recruit in my presence.  
I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at Trinity Bay on this 5<sup>th</sup> day of May ..... 1917  
Signature of Attesting Officer H. J. Fitzgerald, Com.

### †CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the .....  
If enlisted by special authority, such will be attached to the original attestation.  
Date ..... 191 ..... } Approving Officer.  
Place .....

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.  
‡ Here insert the "Corps" for which the Recruit has been enlisted.

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

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Harry Bailey  
 Apparent age 20 years 11 months. Height 5 feet 3 1/2 inches

Chest Measurement { Girth when fully expanded 32 inches  
 Range of expansion 1 1/2 inches

Distinctive marks None - Hair, brown - Eyes, brown  
Complexion - dark

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Robert Bailey  
George Brook | Relationship Father  
Trinity Bay Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.  
 (c) Present address. (d) Initials of Officer verifying entry.

(a)	(b)	(c)	(d)

### Particulars as to Children

Christian Names	Date and Place of Birth

## STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from _____									
Joined at _____ on _____									
<u>Discharged April 24/1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to \_\_\_\_\_ [date of discharge] \_\_\_\_\_ years \_\_\_\_\_ days  
 " Pensions " [ " " ] " " " " " " " " " " " "

Bailey, H

8112

Hay Sept.



51514

# The Royal Newfoundland Regiment

## DEMOLIBIZATION OF

Reg. No. 8112 Rank Pl Name Bailey Harry  
 Date of Enlistment 3-5-17 Address George Park District St. John's  
 Occupation Labourer Classification for Discharge By Medical Category B.V.  
 Recommendation S.M.B. .... Disability Rating .....

Passed to Demobilization Officer with following documents:—

N.F. P 36	B 268	B 121	/	N.F. Med	D.F. 1	/
B 178	W 3494	B 122		Board 1st	" 2	
B 178a	/ D 400A	/ B 1915		do 2nd	" 3	Cur
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>OK 1</u>	" 6	
B 179c	B 120	M 93				

Date 8-14-19

H. News H.  
O. C. Discharge Depot.

## PARTICULARS FOR DEMOLIBIZATION

## 1. Civil Re-Establishment.

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

H. Bailey

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 Amblewston

Date 8-14-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R 1257* to his home at *George Brown* and Release Certificate No. *2658* issued.

Date *8-2-19*

*J.A. Snowling*  
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to *24-4-19*

Date *8-4-19*

*H. H. H.*  
Depot Paymaster.

Discharge approved for *10-4-19*

Forwarded with following documents to O.C Discharge Depot.

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

Date *9-4-19*

*J.A. Snowling*  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

APR 10 1919

Date

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

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

Date

COPY

# The Royal Newfoundland Regiment

Class for Demobilization:—  
E

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date ..... 8-4-19 .....

Regimental No. .... 8112 .....

Name ..... Harry Bailey .....

Address .....

Present Medical Category..... B11 .....

Recommended for:— { (a) Immediate discharge .....

(b) Standing Medical Board .....

*R. H. Jait G.P.S.*

O.C. Discharge Depot.

Members of Board {

(sgnd) L. Paterson .....

Senior Medical Officer

" F. W. Burden .....

M. O. Depot

Military Service: 720 days

COPY

# The Royal Newfoundland Regiment

Class for Demobilization:—

E

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date ..... 8-4-19 .....

Regimental No. .... 8112 .....

Name ..... Harry Bailey .....

Address .....

Present Medical Category ..... B11 .....

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

Members of Board

(sgnd) L. Paterson .....  
Senior Medical Officer

" F. W. Burden .....  
M. O. Depot

Military Service: 720 days



C.R. 8112

Extract from Daily Orders part II, Depot St. John's dated 11-2-19.

The undermentioned returned from Overseas and reported at Depot 7-2-19.

#8112 Pte. Henry Bailey.

# The Royal Newfoundland Regiment

## DEMobilIZATION OF

Reg. No. 7112 Rank Pvt. Name Bailey, Henry  
 Date of Enlistment 3-5-17 Address George St. St. John's District St. John's  
 Occupation Handyman Classification for Discharge F 1 Medical Category B 11  
 Recommendation S.M.B. \_\_\_\_\_ Disability Rating \_\_\_\_\_

Passed to Demobilization Officer with following documents:—

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

Date 8-11-19

H. Mans Lt.  
O. C. Discharge Depot.

### PARTICULARS FOR DEMobilIZATION

#### 1. Civil Re-Establishment.

I am                      in a position to resume civilian occupation.

H. Bailey

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~~ Ambleton Lt.

Date 8-11-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 12,227 to his home at George Town and Release Certificate No. 2057 issued.

Date 8-4-19

J.A. Snowling  
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 24-4-19

Date 8-4-19

H.M. H.  
Depot Paymaster.

Discharge approved for 10-4-19

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

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1	
F 178	W 3494	B 122	Board 1st	" 2	
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 9-4-19

J.A. Snowling  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date APR 10 1919

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

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

Date 16/4/19

J.A. Snowling  
for Officer i/c Records

Nº 43



# Newfoundland Forestry Companies.

## ALLOTMENTS

I, Harry Bailey, Regl. No. 112  
 hereby agree, until further notification by me, and in similar official form to make an Allotment of  
         Dollars and Sixty Cents, per diem, from my Pay,  
 to, and for the benefit of the undermentioned Person <sup>and</sup> <sub>or</sub> Persons, such payment to be made on proof  
 of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> <sub>or</sub> Persons  
 concerned, viz.:

Allotment begins May 5/17.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
82	Mother	Mrs. Robert Bailey	George's Brook N.B.	
			Total Allotment, \$	

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

(Sig.) W.P. Sweeney  
 Officer Commanding a Company  
St. John's  
May 5th. 1917.

(Sig.) Harry Bailey  
 (Rank) Pte.

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 8112 Rank Pte Name Bailey Harry  
 Intended place of residence Georges Brook

2. Occupation Lumberman  
 Classification of soldier E Medical Category B.II

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

Eligible for War Service Gratuity

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

Place ST. JOHN'S  
 Date APR 8 1919 *Jr* 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  
APR 8 1919 *A Bailey*  
 Signature of soldier  
*J. A. Snow*  
 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  
8-4-19 *A. Bailey*  
 Signature of soldier  
*W. J. Eaton* *Ramus*  
 Signature of witness

### STATEMENT OF SERVICE

7. Enlisted for service 5.5.17 No of days on Military  
 Discharged from service 10.4.19 Plus 14 days Service 720

### APPROVAL OF DISCHARGE

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

Place ST. JOHN'S  
APR 10 1919 *R. H. Sant Capt*  
 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 *M. Bowley Capt*  
 Date April 24/1919 Officer i/c Records  
 The Royal Newfoundland Regiment

*CAF B. 3079/3072*

Captain J. W. Howley  
Paymaster Militia Bldg

Dear Sir

Please pay to Mrs  
Harry Bailey the sum of  
Seventy dollars as war service  
gratuity was discharged April  
Seventh

yours sincerely

8112 Pte Harry Bailey  
N. F. L. Forestry Companies



April 24, 1919

#8112 Pte. Harry Bailey,

George's Brook T.B.

Dear Sir:-

Please find enclosed "Discharge Certificate  
No. 2072."

Yours truly

Captain,  
Paymaster & O. i/ c Records

# The Royal Newfoundland Regiment

Class for Demobilization:—

*R. J.*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date ..... *8. 11. 19* .....

Regimental No. .... *8112* .....

Name ..... *Harry Bailey* .....

Address .....

Present Medical Category..... *B ii* .....

Recommended for:— { (a) Immediate discharge .....

(b) ~~Standing Medical Board~~ .....

Members of Board {

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

*J. Paterson*  
.....  
Senior Medical Officer

*S. W. Burden*  
.....  
M. O. Depot



# Civil Re-establishment Committee



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

*To resume former Occupation  
(Fishing)*

*H Bailey*

Signature of Man.

Reg. No.

*8112*

*J. A. Snow*

Signature of the Vocational Officer or his Representative.

Place

**ST. JOHN'S**

Date

**APR 8 1919**

191

N<sup>o</sup> 43



# Newfoundland Forestry Companies.

## ALLOTMENTS

I, Harry Bailey, Regl. No. 8112

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

Allotment begins May 5/17.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>82</u>	<u>Mother</u>	<u>Mrs. Robert Bailey</u>	<u>George's Brook I.B.</u>	
Total Allotment, \$				

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

(Sig.) M. Sweeney

Officer Commanding  
a Company

(Sig.) Harry Bailey

(Rank) Pl.

St. John's  
May 5th. 1917.



## Descriptive Return of a Soldier Discharged on Account of Disability.

**INSTRUCTIONS**—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. i/c Records together with the remainder of the man's documents.

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

Name in full *Harry Bailey*

Regiment from which discharged *Royal Newfoundland*

Regimental number *8112*

Intended address *Georges Brook. Lunenburg.*

Height on discharge *5 Feet 8*

Color of hair on discharge *Black*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks *scar left foot.*

Figure on discharge *medium*

Christian name of Father *Robert*

Christian name of Mother *Lydia*

Wife's maiden name in full \_\_\_\_\_

Date and place of marriage \_\_\_\_\_

Christian names of children \_\_\_\_\_

Place and date of soldier's birth *Georges Brook. June 24<sup>th</sup> 1897*

Nature and locality of civil employment required \_\_\_\_\_

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full) *Harry Bailey*

*Pte*  
(Rank)

Station *S. J. Johns*

Date *7-11-19*

I certify that the above named soldier signed the foregoing declaration in my presence, and that the above description and details are, to the best of my knowledge correct.

Medical Officer i/c Hospital.  
Unit, or Command Depot *St. John's, Newfoundland*



Station

Date

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

# MEDICAL HISTORY

OF

Surname Bailey Christian Name Harry.

Table I.—GENERAL TABLE.

Birthplace:—Parish Georges Brook, S. B. County \_\_\_\_\_

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined ....	on <u>5<sup>th</sup></u> day of <u>May</u> 191 <u>7</u> .		on _____ day of _____ 191 _____	
	at <u>Grand Falls.</u>		at _____	
Declared Age ...	<u>20</u> years <u>11 mos</u> days		years _____ days _____	
Trade or Occupation ...	<u>lumberman.</u>		_____	
Height ...	<u>5</u> feet <u>5 1/2</u> inches		feet _____ inches _____	
Weight ...	<u>114</u> lbs.		lbs. _____	
Chest Measurement {	Girth when fully expanded.... <u>32.</u> inches		inches _____	
	Range of Expansion... _____ inches		inches _____	
Physical Development ...				
Vaccination Marks {	Arm ...		Right	Left
	Number ...			
When Vaccinated ...				
Vision ...	R.E.—V=		R.E.—V=	
	L.E.—V=		L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
	(b) <u>Bad teeth.</u>		(b)	
Approved by (Signature)	<u>L. Amundson</u>			
(Rank)	<u>major</u>			
	Medical Officer.		Medical Officer.	
Enlisted ...	at <u>Grand Falls.</u>		at _____	
	on <u>5<sup>th</sup></u> day of <u>May</u> 191 <u>7</u>		on _____ day of _____ 191 _____	
Joined on Enlistment ...	Corps. <u>nfd</u>	Regtl. No. _____	Corps. _____	Regtl. No. _____
Transferred to ..	<u>Foresty's.</u> <u>8112.</u>			
Became non-effective by ...	on _____ day of _____ 191 _____		on _____ day of _____ 191 _____	
(Signature)				
(Rank)				



N<sup>o</sup> 43

ENTERED  
PAY LEDGERS  
NUM. ROLL  
ALLOT. INDEX  
REGISTER  
EXAMINED



**Newfoundland Forestry Companies.**

**ALLOTMENTS**

I, Harry Bailey, Regl. No. 8112  
 hereby agree, until further notification by me, and in similar official form to make an Allotment of  
 \_\_\_\_\_ Dollars and Sixty Cents, per diem, from my Pay,  
 to, and for the benefit of the undermentioned Person <sup>and</sup> or Persons, such payment to be made on proof  
 of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> or Persons  
 concerned, viz.:

Allotment begins May 5/17.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
82	Mother	Mrs. Robert Bailey	George's Brook P.B.	60
			Total Allotment, \$	

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

(Sig.) M. Sweeney

Officer Commanding  
a Company

St. John's  
May 8th. 1917

(Sig.) Harry Bailey

(Rank) Pte.

April 26, 1919

#8112 Pto. Harry Bailey,

George's Brook, T.B.

Dear Sir :-

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

Yours truly

Captain,  
Paymaster & O.I/c Records

1286

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 *Harry* 2. Surname *Bailey*

3. Rank *Pte* 4. Regtl. No. *8112*

5. Address in full to which future payments of gratuity are to be forwarded *George Brook S. B.*

6. Date of enlistment in the Regiment *May 4/17*

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

8. Relationship of such dependents *No*

9. Address in full of such dependents *No*

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *No*

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

12. Give total length of time which you served on active service, whether in Hfld. or Overseas *From May 4/17 to*

*Apl. 8/19 date of temporary discharge*



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

*No*

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.

*Nothing allowance back pay 107.90  
Board allowance 64.20*

15. Have you been issued with a War Service Badge?

*No*

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

*No*

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

*No*

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?

*No*

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

19. Are you now serving in the Res? If not give - (a) date of discharge (b) Reason for discharge.

*No*

*Apr 8/19  
Temporary*

*Demobilization*

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

*No*

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.

*No*

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

Signature of Applicant:

*H. Bailey*

Place of Residence:

*George Brook, T.B.*

Declared before me at:

*N. Jhuia, Nfld*

This

*9th*

day of

*April 1919*

*John M. Cashey*

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

POST DISCHARGE PAY.

Date paid - Paid Soldier. Paid Dependent.

War Service Gratuity.

Net amount due

.....  
.....  
.....

*4 mes -*

*280.00*

Certified correct.

Registrar

*[Signature]*

**The Royal Nfld. Regiment**

**DEMOBILIZATION**

No. *8112* Rank *Pvt*

Name *Darby Harry*

Warned for demobilization on

APR 8 - 1919

April 2nd., 1934.


Memo for Hon. J.C. Puddester:  
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Re:- 8112, Harry Bailey:  
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The above noted man enlisted with the Newfoundland Forestry Corps on March 15th., 1917. He was discharged on April 24th., 1919. There is no mention of any illness during his Service which would cause any disability.

It is noted, on his enlistment, that he was suffering from 'bad teeth'. His first application for pension was made in April 1928, and he was informed that his application was made at too late a date to receive favourable consideration as according to The War Pensions' Act, any application for pension must be made before July 1925, unless there is a record in the man's Service files of any injury or disease that would cause a disability for which pension is claimed. In such an event, the application can be considered at any time but it does not necessarily follow that a pension will be awarded, unless a distinct disability results from such injury or disease.

Mr. Bailey was advised to this effect on May 9th., 1928. His case has been brought to the attention of the Board on several occasions since but every time the former decision has been confirmed.

  
SECRETARY.

CCO/BT:

Harry Bailey, of George's Brook, Smith Sound, Randen:

Served two years with the Forestry, during which time he complained of his back.

After coming home was sent to the General Hospital and fitted with a Plaster of Paris jacket.

Was apparently discharged without physical examination.

At present unable to do physical work owing to spinal trouble.

Dr. Gross considers he should receive a pension.

*Sensory  
Antony back  
+ Bill*