



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF



No. 2199 Name Hayward Ball Corps 2

Questions to be put to the Recruit before Enlistment.

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

I, Hayward Ball 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.

Hayward Ball SIGNATURE OF RECRUIT.

8 Feb 27th 1916 Edward W. Ayle Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's

on this 27th day of February 1916

Signature of Attesting Officer Edward W. Ayle

†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.....1916 } 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 Hayward Ball
 Apparent age 19 years 6 months. Height 5 feet 4 1/4 inches
 Chest Measurement { Girth when fully expanded 36 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs. Mary Ball, Grand Falls
 | Relationship Mother

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from _____									
Joined at _____ on _____									
Total Service forfeited as above.....									
Total Service towards Engagement to _____ [date of discharge] _____ years _____ days									
" " " Pension " _____ [" "] _____ " _____ "									



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 2177 Name Hayward Ball Corps

Questions to be put to the Recruit before Enlistment.

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

I, Hayward Ball 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.

Hayward Ball SIGNATURE OF RECRUIT.

E. Feb. 27th 1916 Edward W. Pyle Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's

on this 27th day of February 1916

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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 6

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).....

2199

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Hayward Ball
 Apparent age 19 years 6 months. Height 5 feet 11/4 inches
 Chest Measurement { Girth when fully expanded 36 inches
 Range of expansion 3 inches
 Distinctive marks.....

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs. Harry Ball, Grand Falls
 | Relationship Mother

Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow.		(b) Place and date of marriage.	
(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 <u>29-2-16</u>									
Joined at <u>M. Denis</u> on <u>February 29th 16</u>									
Embarked <u>M. Denis S.L. Division for W. 24th</u> Embarked for <u>St. 5th Line Bn 28th</u>									
Wounded <u>9-10-17</u> admitted to <u>CCS. W. 24th</u> <u>9-10-17</u> . Invalid to <u>England 20-10-17</u> . Admitted									
<u>3rd Linc. Cav. 21-10-17</u> . Imputation <u>L. W. Wardsworth 21-10-17</u> . To <u>Brighton 20-2-18</u> . Forwarded to <u>5-3-18</u>									
to <u>3rd Linc. Cav. Wardsworth 2-3-18</u> . Transferred to <u>Brighton 4-3-18</u> . Admitted to <u>hospital 3-5-18</u>									
Sent to <u>Q. Coy. Winchester 22-5-18</u> . S. <u>Keenford</u> for discharge <u>20-5-18</u> . Arrived <u>W. 10-6-18</u>									
<u>Discharged medically unfit 9-7-18</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 9-7-18 (date of discharge) 2 years 132 days
 Pension [" "] " " " " " "

C.R. 2199

Extract from Nominal Roll of Mfls. Regt. Draft No. 28
from 2nd Bn. Depot, to 1st Bn. B.E.F. Embarked Belkestone,
5-8-17.

2199 Pte. H. Ball.

C.R. 2199

Extract from Casualties from Pay & Record Office, London.

Dated Feb. 27th 1918.

.....

Extension of Furlough.

Extension of furlough has been granted to 2199, Pte. H. Ball
to 5/3/18 with leave to remain in the London Area.

AUTHORITY:

LIEUT. ANDERSON.

C.R. 2199

Extract of Casualties from Pay & Record Office, London.

Dated Feb. 21st 1918.

.....

2199, Pte. H. Ball. discharged 3rd London General Hospl.
(pending admission to Pavilion Mil. Hospital, Brighton, for
fitting of an artificial limb) 20/2/18, is granted special
furlough to 26/2/18, subject to extension until vacancy occurs
for transfer to Brighton.

Authority:

3rd L.G.H. C.P.& O.i/o. R.

C.R. 2199

Extract from Daily Orders part II, from Unit The Royal
Wfld. Regy. St. John's, dated August 2, 1918.

#2199 Pte. H. Ball.

Having been found Medically Unfit is discharged from
July 9th, 1918.

C.R. 2199

Extract from list of men of the Royal Newfoundland Regiment
discharged on various dates.

2199 Pte. H. Ball,

Discharged 9 - 7 - 18, Medically unfit

C.R. 2199

Extract from Daily Orders par. 11 from Unit The Royal Welch
Regt. St. John's, dated June 17, 1918

#2199 Pte. H. Bakl.

Returned from overseas and reported by Headquarters
Desot 10-6-18

C.R. 2199

Extract of Casualty received from Pay & Record Office, London
dated June 3rd, 1918.

Due to embark 3055-18.

For discharge as physically unfit

2199 Pte. H. Ball

C.R. 2199

Extract from Daily Orders Part 2, By Lt. Col. R. A. Berners, D.S.O.
from Pay & Record Office, London, dated 24-5-18.

2199 Pte. H. Ball

Having reported back from the 1st Batt. is posted to "A" Company
from 22-5-18.

2199

Extract from Casualties received from Bondon, dated May 6, 1918

#2199 Pte. H. Ball.

was admitted to Queen Mary's Convalescent
Auxiliary Hospitals, Roehampton, S.W. on 3/5/18, to be
fitted with an artificial limb.

AUTHORITY:- Memo from Convalescent Hospital.

C.R. 2199

Extract of Casualty List received from Pay and Record Office
London Dated Mar. 5th 1918.

From 3rd. London General Hospital Wandsworth S.W., Transferred on
4th. March to The Pavilion Military Hospital, Brighton.

2199 Pte. H. Ball ✓

1st. Nfld. Regt. Auth. A.F. W. 3016.

C.R. 2199

Extract from Casualty List from Pay and Record Office, London,
dated 28th. Feby 1918.

Reference Casualty Report 347.

2199 PTE. H. BAIL

is ordered to report at the 3rd London General Hospital on Saturday
2/3/18.

Authority: 'Phone 3rd L.G.H. and Lieut. Anderson.

C.R. 4056

2199 PTE. HAYWARD BALL.

EXT.OF CASUALTY LIST RECEIVED OCT.24th 1917.
PREVIOUSLY REPORTED SEVERE SHELL WOUND LEFT
ELBOW, NOW REPORTED WANDSWORTH, AMPUTATION
LEFT ARM.

NEWFOUNDLAND POSTAL TELEGRAPHS.**Cable Connection with all the World****All Messages Sent are Subject to the Following Conditions:**

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

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

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

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

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

(NOT TRANSMITTED)

Signature of Sender _____ Address _____

Line Number	Rcd	By	Sent	by	Check

Dated **October 24, 1917.**To **Mrs. Harvey Ball,****Grand Falls.**

Record Office, London, today reports No. 2199,
Private Hayward Ball, has been admitted to Wandsworth,
amputation left arm.

R.A. SQUIRES**Colonial Secretary**

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

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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 October 20, 1917.

To Mrs. Harry Ball,
Grand Falls.

Regret to inform you that Record Office London, officially reports No. 2199, Private Hayward Ball, was at Seventh Canadian General Hospital, Etaples, October tenth, suffering from severe shell wound in the left elbow. Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

JOHN R. BENNETT
 R.A. SQUIRES
 Colonial Secretary.

FOR TYPEWRITER

2199 Pte. Hayward Ball.

Ext. of Casualty list received Oct 20, 1917.

Left Elbow, Severe. 7th Canadian General

Hospital, Etaples Oct 10, Shell Wounds.

C.R. 2199

Extract from Naval Roll Embarked St. John's for Overseas,
Mar. 23, 1916.

2199 Pte. H. Ball.

D
2199

ST JOHN'S, Nfld.,

August 2nd, 1918

To O.C.,
Royal Nfld. Regt.
Headquarters

SIR:

The undermentioned men have been discharged
on the dates given.

Kindly note and post in Daily Orders Part II

I have the honour to be,

Sir,

Your obedient servant

(sgnd) J.M.HOWLEY

Capt. & Paymaster etc.

528	Pte.	Moore, J.W.	July 9/18	Med. Unfit
568	"	Barron, T.F.	Do	Do
1420	"	Sheppard, L.	Do.	Do.
2199	"	Ball, H.	Do.	Do.
5222	"	Upward, W.	July 23	Do.
3897	"	Brushett, J.	Do.	Do.
2943	"	Filliar, C.	Do.	Do.
350	Sgt.	Luff, John	Do.	Do.
1083	Pte.	Power, P.J.	Do.	Do.
2053	"	Locke, S.	Do.	Do.
2264	"	Chafe, J.	July 26	Do.
2489	"	Mahon, J.	Do.	Do.
2742	"	Vaughan, H.	Do.	Do.
2500	"	Moss, E.	Do.	Do.
1754	"	Taylor, A.H.	Do.	Do.
1987	"	Brown, A.	Do.	Do.
3467	"	Juke, P.	Aug. 1	Do.

JUNE 25th, 1918.

From Asst-Adjutant.
Depot.

To Paymaster & Officer i/c Records,
Department of Militia.

#2199.Pte. H. Ball.

Above noted man was recommended Discharge-~~B~~ermanently Unfit
by Medical Board held June 25th, 1918. I am sending him herewith for your
attention and necessary action, please.

C.R. 2199

Hayward Ball was attested for General Service with
the NEWFOUNDLAND CONTINGENT on Frnauray 29th 1916
Regimental No. 2199 was alloted to Pte H?Ball

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th 1919

H. Ball

2199

P. t. R. Q.

Originals

This space to be left blank for the Chelsea Number.

Army Form B. 268



Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No.	2199	Army Rank	Private
Name	Ball. Hayward.		
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)			
Corps	ROYAL NEWFOUNDLAND REGIMENT.		
Battalion, Battery, Company, Depot, &c.			
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)			
Date of discharge			
Place of discharge			
1. Description at the time of discharge.			
Age	21	years	
		months	
Height	5	feet	4
		inches	
Chest measurement	girth when fully expanded		ins.
	range of expansion		ins.
Complexion	Fair		
Eyes	Blue		
Hair	Dark Brown		
Trade			
Intended place of residence (To be given as fully as practicable)	Grand Falls Newfoundland		
		Descriptive marks.	
		Amputation Left Arm	
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> COPY SENT TO O.C. H.Q. ST. JOHNS, N.F.L.D. N.F.P.38. No. 8514/64 DATED 30 MAY 1918 </div>			
(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)			
2. The above-named man is discharged in consequence of <u>Wounds received in action</u>			
(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)			
3. Military character:—			
4. Character awarded in accordance with King's Regulations:—			
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.			
Initials of Commanding Officer.			
Army Form B. 2068 has been issued to*			

To be filled in on the soldier quitting the Colours.

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

MEDICAL HISTORY

Surname Ball OF Christian Name Hayward

Table I.—GENERAL TABLE.

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY	
Examined	on <u>21</u> day of <u>February</u> 19 <u>16</u>	at <u>St. John's, Nfld.</u>	on _____ day of _____ 19 <u>11</u>	at _____
Declared Age	<u>19</u> years	days	_____ years	_____ days
Trade or Occupation				
Height	<u>5</u> feet	<u>4 1/4</u> inches	_____ inches	_____ inches
Weight	<u>123</u> lbs.		_____ lbs.	_____ lbs.
Chest Measurement	Girth when fully expanded... <u>36</u> inches		_____ inches	_____ inches
	Range of expansion... <u>3</u> inches		_____ inches	_____ inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm _____	_____	_____	_____
Number	_____	<u>1</u>	_____	_____
When Vaccinated	<u>12 yrs ago</u>			
Vision	R.E.—V= <u>6/6</u>	L.E.—V= <u>4/6</u>	R.E.—V=_____	L.E.—V=_____
	(a)		(a)	
(a) Marks indicating congenital peculiarities or previous disease				
(b) Slight defects but not sufficient to Cause Rejection	(b)		(b)	
Approved by (Signature)	<u>J.W. Burden</u>			
(Rank)	<u>Lieut.</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at _____	on _____ day of _____ 19 <u>11</u>	at _____	on _____ day of _____ 19 <u>11</u>
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment	<u>1st Nfld. Reg. 2199</u>			
Transferred to	<u>Newfoundland</u>			
Became non-effective by	on _____ day of _____ 19 <u>11</u>	on _____ day of _____ 19 <u>11</u>	on _____ day of _____ 19 <u>11</u>	on _____ day of _____ 19 <u>11</u>
(Signature)				
(Rank)				



COPY SENT TO:
O.C. H.Q.
ST. JOHNS, N.F.L.D.
N.F.P.38. No. 8514/64
DATED 30 MAY 1918



Nfld 8
U.K.

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of further 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				
4TH SCOTTISH GENL. HOSPITAL, GLASGOW	29	5	16	16	9	16	Displacement & laceration of right internal denj. lunar Cartilage	10	Cartilage removed on 16.6.16 - cartilage completely torn across and displaced. Wound healed primarily. On 9.7.16 joint locked again after setting. On 26.7.16 joint opened. Cartridge quantity of fluid in joint injected. Puscent material organized. Blood clot removed. Joint reduced. Opposing bony surfaces. Wound healed permanently.	Warrant Officer Andrew
London South Hospital Wandsworth	21	10	17	4	3	18	G.S.W. L arm - comp fracture radius & ulna	134	Amputation stump upper third of arm in Lance - Sloughing & discharge - some pieces of bone removed. Healed	Warrant Officer
General Hospital Pavilion, Brighton	4	3	18	3	5	18	Ampt. L. Arm.	60	Ampt. L. Arm - no operation in this Hosp.	Warrant Officer
QUEEN MARY'S CONVALESCENT HOSPITAL ROEHAMPTON	8	5	18	18	5	18	Amputation left arm	11	ARTIFICIAL LIMB PROVIDED.	Warrant Officer M. for Captain, Adjutant Queen Mary's Convalescent Hospital.

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.: Examination for Field or Foreign Service, Extension, Re-engagement, or prolongation of Service, Issue of Surgical appliances; Particulars of Dental Treatment, &c.

Date	Brief Details, and Signature
5.5.16.	1 st Inoculation J. M. M. J.

TABLE IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
St. John's, reefed.	23/3/16	9/4/16			

No 1987



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Hayward Ball, Regt. No. 2199,
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
60 Dollars and 00 Cents, per diem, from my Pay,

to, and for the benefit of the undermentioned Person ^{and} _{or} Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and} _{or} Persons
 concerned, viz.:

Allotment begins March 22nd/1916.

Identity Certificate	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>1930</u>	<u>Mother</u>	<u>Mrs Hayward Ball</u>	<u>Grand Falls</u>	<u>60</u>
			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.) R.P. Holloway
 for Chief
 Officer Commanding
H Company
March 22nd 1916

(Sig.) Hayward Ball
 (Rank) Private

would you kindly let me have
The ~~two~~ Pounds



with Ball.

599
26. 1. 18. 0 Royal Mail Ltd
Approved Capital Reg

No.

656

WESTERN UNION

ANGLO-AMERICAN



DIRECT UNITED STATES

CABLEGRAM

Prefix _____ Code _____		SENT		FOR STAMPS	
WORDS	CHARGE	At _____	To _____	By _____	THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.
13		VIA WESTERN UNION			

TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

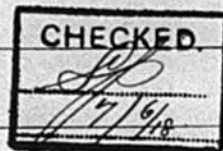
EFM

To *Ball.*
MRS HENRY BLAKE

GRAND FALLS (Newfoundland)

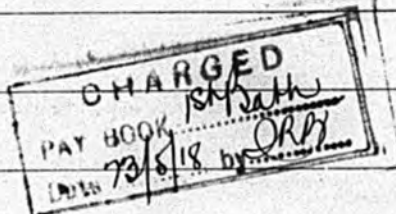
PLEASE CABLE FIVE POUNDS THROUGH MINISTER MILITIA

BALL



13 2 1/2
 26 6 1/2
 37 1/2
 7/8 1/2 ✓

Charge to 2199 Ball



AUTHORISED
NOT TO BE TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature _____

Address _____

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50, Victoria Square, N.1.

4495/1/B&A

CHIEF PAYMASTER & OFFICER I.C. RECORDS.
NEWFOUNDLAND CONTINGENT
58, VICTORIA STREET,
LONDON, S.W. 1.
ENGLAND.

Officer Commanding
Pavilion Gen^l Hosp.
Brighton,

21st March 8

2199, Private H. Ball,
Royal Newfoundland Regt.

With reference to the enclosed application from the above named Soldier: Owing to his account being £2:14:3 in Debt at 20/3/18, his request cannot be complied with, please.

Chief Paymaster & O.I/c ^{Major,} Records,

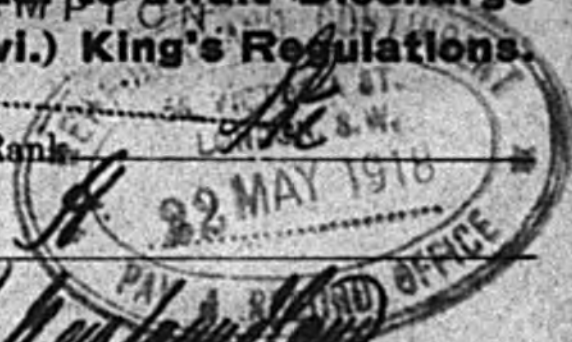
FM/S

3-5-16 ADMITTED TO
NOTIFICATION that a Soldier has been sent
Home from Hospital to await Discharge
under para. 392 (xvi.) King's Regulations.

Soldier's }
Regtl. No. }

2199
Dull

Rank



Name

(Surname first)

Corps or Regiment }
(also Unit if known) }

11/10
58 Victoria St

To Officer i/c of Records

do

Regimental Paymaster

The above-named man, who appeared before a Medical Board, and whose discharge as "no longer physically fit for war service" was approved by the President of the Board on the 17-5-18, has been sent to his home on warrant to await instructions as to his final discharge; he has been given £1 (one pound) advance and a suit of ~~clothing~~.

He proceeded on (date)

18-5-18

to (full address)

58 Victoria St.



Date

18-5-18

Place

A. C. Perry
C. CAPT. R.A.M.C.

{ Officer
Comm.

Hospital.

Three copies to be made; one copy sent to each Officer above-mentioned, and one copy filed in the Office.

3-5-18 ADMITTED TO
NOTIFICATION that a Soldier has been sent Home from Hospital to await Discharge under para. 392 (xvi.) King's Regulations.

Soldier's Regtl. No. } *2199*

Name _____
(Surname first)

Corps or Regiment }
(also Unit if known) }

To Officer i/c of Records _____

Regimental Paymaster _____

NEW ENGLAND CONTINGENT
VICTORIA ST. LONDON, S.W.
RECORDS OFFICE
58 Victoria St
do

The above-named man, who appeared before a Medical Board, and whose discharge as "no longer physically fit for war service" was approved by the President of the Board on the *17-5-18*, has been sent to his home on warrant to await instructions as to his final discharge; he has been given £1 (one pound) advance ~~and~~

He proceeded on (date) *18-5-18*
to (full address) *58 Victoria St*

THE KING GEORGE HOSPITAL
18-5-18
Place
THORNDON STREET

ackey { Officer
C.M.M.O. } Comm.
Hospital.

Three copies to be made; one copy sent to each Officer above-mentioned, and one copy filed in the Office.

8133/899/R.&C.

Forms
Q 348

CHIEF PAYMASTER & OFFICER IN CHARGE RECORDS.
NEWFOUNDLAND CONTINGENT
88, VICTORIA STREET,
LONDON, S.W. 1.
ENGLAND.

MEMORANDUM.

From: Officer Commanding,
2nd Bn. Royal Newfoundland Regt.
Hazeley Down Camp.

To: The Chief Paymaster,
Royal Newfoundland Regiment,
London, S.W.
ANSWER.

To: Officer Commanding,
2nd Bn. Royal Nfld Regt.,
Hazeley Down Camp,
Winchester, Hants.

Pay & Record Office,

23rd May, 1918

May 28th 1918.

2199, PTE. H. BALL.

This man, ex The King George Hospital 18/5/18, it is understood proceeded to you on 21/5/18. He is recommended for discharge under A.F. B.179, and is on the waiting list for the next repatriation draft. Ball, having little or no money, wished to wait at the Depot.

The enclosed charge (1845) together with Ball's Conduct

P.T.O.

This charge has now been disposed of, he being admonished A.F. B.121 herewith.

NEWFOUNDLAND CONTINGENT.
PAY & RECORD OFFICE.

4831

Rec'd 29 MAY 1918

COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

Ref. Nos. 001

AC [unclear]

BRANCH [unclear]

Comd. [unclear]

P & A. [unclear]

R. & C. [unclear]

B & E [unclear]

P.S. [unclear]

Sheet, are enclosed for necessary action and return to this Office as early as possible. All Ball's other documents are held at this Office, please, pending his repatriation.

Ball was previously out on furlough, pending admission to Roehampton for the adjustment of an artificial arm, and he was confronted with the charge then. He was informed he would have to meet it on discharge from hospital, please.



Major,
Chief Paymaster & O. i/c Records.

HA/JC

FOR USE IN THE CASE OF A SOLDIER SENT TO HIS HOME

From a Hospital or Unit as "Medically Unfit."

No. 2199, Rank 1/ Newfoundland (Regiment),
Pvt, Name Paul H.

has orders to proceed to his home:

(Address 58 Victoria St SW)

and there to await further instructions as to his discharge from the Service.



Place

Date

18/5/14

Officer Commanding.

R. A. M. G.

CAPT. R. A. M. G.

Here enter name of Hospital or Unit from which the Soldier proceeds.

8133/629/R.&C.

Officer Commanding,
2nd Bn. Royal Nfld Regt.,
Hazeley Down Camp,
Winchester, Hants.

Pay & Record Office,

23rd May, 8

2199, PTE. H. BALL.

This man, ex The King George
Hospital 18/5/18, it is under-
stood proceeded to you on 21/5/18.
He is recommended for discharge
under A.F. B.179, and is on the
waiting list for the next repat-
riation draft. Ball, having
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Major,
Chief Paymaster & O. i/c Records.

HA/JC

2199

of K.

R. L. L. 0
J. L. L. 0 11/7/18

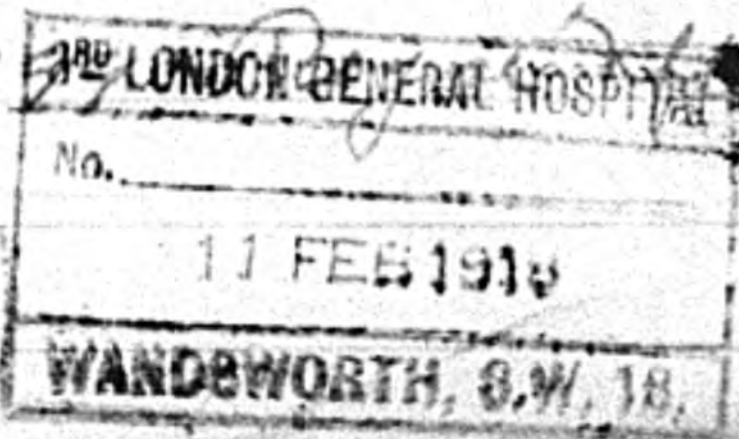
Newfoundland Pay Record

bear receipt No. 5653

would you kindly let me have
the sum of one Pound - 1/0 0

Oblige

Art H. Ball



for Regt

fact

Form 11.
No. 219

WESTERN UNION

ANGLO-AMERICAN DIRECT UNITED STATES CABLEGRAM



Prefix	Code	At	SENT	FOR STAMPS
WORDS	CHARGE	To	By	
15	2 1/2			
VIA WESTERN UNION				THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.

11/2/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To EFM MRS HENRY BALL

GRAND-FALLS (Newfoundland)

PLEASE CABLE THIRTYFIVE DOLLARS CARE BANK MONTREAL

LONDON

CHECKED
14/2/18

H BALL

15 ✓
2 1/2 ✓

30 ✓
1 1/2 ✓

31 1/2 ✓

CHARGED
PAY BOOK 18 Bath
Date 14/2/18 by DRB

Charge to
M. Ball
2199

Authorised.

NOT TO BE TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature _____ Address 58 Victoria St. S.W. 1.

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

LAST PAY CERTIFICATE

Office copy N.F.P./84

To be rendered for all ranks on discharge, transfer to other Units, or on return to Newfoundland in accordance with C.F./19, 23/5/17.

Regt No. 2199 Sea Pts. Name Bell, H Unit Royal Nfld. Regt. who was Repatriated
 to Newfoundland on 30 / 5 / 18 Authority STATEMENT OF ACCOUNT Cause Class "A"
 DR.

PERIOD: FROM	PARTICULARS	£			CR.		
		£	s	d	£	s	d
30/5/18 22/12/17	Balance Dr. from				Balance Cr. from		
	Allotment 160 days @ .60	96	00		Pay 21/12/17 days @ \$ 1.00		
	Cash Payments: .60			19 14 6	Field Allowance 160 days @ \$.10	160	00
	P & R. O.			17 6 0	Other Allowances	176	00
	Hospital Advances			2 9 0	Other Credits:		
	E.F.M's to Nfld.			5 10	Ration Allowance 18/5/18 - 21/5/18 4 days @ 2/1		
	Other Debits:						
	Total Debits			39 15 4	Total Credits		
	Balance due by Paymaster			15 3	Balance due to Paymaster	40	8 7

Handwritten initials and date: H.B. 30/5/18

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of

(Place) _____ (Date) 1918 O.C. " " Company.

Made up and checked in accordance with information received in the Pay & Record Office London to 29/5/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London, 29th May 1918 Chief Paymaster & Officer i/c Records.



BRITISH RED CROSS SOCIETY.

COUNTY OF SURREY BRANCH.

PRESIDENT: THE HON. MRS. CUBITT.

NORTH SURREY DIVISION.

ASSISTANT COUNTY DIRECTOR & VICE-PRESIDENT: MRS. LOCKE KING.

TELEPHONE NO. 523 WEYBRIDGE.

From

**BROOKLANDS MILITARY HOSPITAL,
WEYBRIDGE.**



2199 Pte Ball R.F.L.D.

has permission to
draw £3 from his pay
book. C. Mayne.

matron.

Recd No 4112 J.K. J.W.

19/12/14

£3.00



BRITISH RED CROSS SOCIETY.

COUNTY OF SURREY BRANCH.

PRESIDENT: THE HON. MRS. CUBITT.

NORTH SURREY DIVISION.

ASSISTANT COUNTY DIRECTOR & VICE-PRESIDENT: MRS. LOCKE KING.

TELEPHONE NO. 523 WEYBRIDGE.

From

**BROOKLANDS MILITARY HOSPITAL,
WEYBRIDGE.**

2199 Pte Ball

Has permission to
draw three pounds £3.
to buy some things he
requires Signed Mayne
Matron



O.K.

27/11/17

J.O.S.

No. 2199 Rank Sgt Name Ball, A.

Pay	F.A.	Wkg	Total	N.F.P. 73
100	10		110	
Less Allotment			60	
Net Rate			50	

DEBITS	Date	£	s	d	CREDITS	Period		Days	Rate	£	s	d			
						From	To								
Balance				13	6		7/7/17					18	5		
Acquittance Rolls				6	3	6	8/7/17	20/7/18	228	60	136	80	28	2	6
Hospital Advances				2	20										
A.B. 64 (1 day pay)	1/17			4	6										
P.&R.O. Payments				6	0	0									
<i>E. J. m. rfd</i>				3	1										
	20/7/18	5789	1	0	0										
	21/7/18	5797	1	0	0										
	22/7/18	5817	1	0	0										
	23/7/18	5826	1	0	0										
	24/7/18	5837	1	0	0										
	25/7/18	5838	1	0	0										
	26/7/18	5858	1	0	0										
	27/7/18	5871	1	0	0										
	28/7/18	5892	1	0	0										
	3/7/18	5893	1	0	0										
	2/7/18	5904	1	0	0										

11-4-4

Scrapped

29-10-11

17-9-0
13-6

18-2-1

18-6-7

22-7-18

[Signature]
20/7/18

29.6.7

Statement of Accounts

No. 2199 Rank Pvt or Name Ball H.

Company, etc. _____

From 22-12-17 to 18-5-18 (dates).

DEBITS				CREDITS			
Date				Date			
	Corp. Adv.	3	9 00	21-12-17	Balance	3	17 00
	R & R Pay.	15	0 00	Period 22-12-17 To			
				18-5-18. Pay &			
				Field allowance			
				less allow of 60 ⁰⁰ = 14 ⁰⁰			
				days @ 50 ⁰⁰ = \$74.00	15	4 15	
	Cash 7262 ¹⁴⁵ / ₁₀₀	1	00	Ration allowance			
	21 ⁵ / ₁₈ Receipts 7296	6	0	4 days @ 2/1	8	4 00	
				19 ⁵ / ₁₈			
				to 21 ⁵ / ₁₈ 3 days @ 50	6	2 00	
				to 51.50			
				6-2			
	Creditor Balance			Debtor Balance			
	Total £			Total £			

Station C. Co.
Date 18/5/18

Certified correct,

~~19-15-17~~
~~19-9-17~~
19-15-17

Paymaster.

Ward C Par: General Hospital. No. of Bed 127 Date 21/4/18.

Regl. No.	Rank and Name.	Corps.	Part to be X-Rayed.
<u>2199</u>	<u>Pte Ball</u>	<u>Newfoundland</u>	<u>Left arm.</u>

SHORT HISTORY OF CASE.
(To be completed by M.O. i/c case.)

Please X-ray
Left arm.
H.A. Woody M.D.

Signature of M.O. _____

Date _____

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

No. of Plate 4802.

? requesta

Signature of Radiographer Asst Lt

Date 21/4/18

original

applicon B'ton 2/1/18.

Army Form B. 179

12054.

Medical Report on an Invalid.

Site of Amputation

*Amputation left Arm June 2nd 1918
7 1/2" Stump.*

Station 3rd London General Hospital,
WANDSWORTH, S.W.
Date 19. 2. 18

- 1. Unit *1 R. Newfoundland*
- 2. Regimental No. *2199.*
- 3. Rank *Private*
- 4. Name *Ball. H.*
- 5. Age last birthday *21.*
- 6. Enlisted ^{on} *1916*
_{at} *Grand Falls Island.*

- 7. Former Trade or Occupation } *Lumberman*
- 7A. If with previous service in Army, state—
(a) Former Unit;
(b) Regimental No. ;
(c) Date of Discharge ;
(d) Cause of Discharge.



8. Disability in respect of which invaliding is Proposed

(Other disabilities should be reported upon in answer to question No. 19).

G. S. W. R. Forearm. (Amputation)

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to natural disease.

COPY SENT TO
O.C. H.Q.
ST. JOHNS, N.F.L.D.
N.F.S. 38, NO. 8514/64
DATED 30 MAY 1918

- 9. Date of origin of disability. *9 Oct 1917*
- 10. Place of origin of disability. *Belgium Poelcapelle*
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.
Admitted with Cpts. Fract. of Forearm. in C.E.F. Fragments of bone seen red and brach. arter. lacerated. Amputated through upper 1/3 of arm on Oct. 10-11-17. Developed gas gangrene. The stump healed up gradually. There is no pain generally speaking. Feet the horse undergoes being cold weaker.
- 12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
(a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3). *In action*
G. S. W.
not applicable
not applicable
(b) constitutional or hereditary, and not aggravated by service during the present war.
(c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

General condition is good. Stump is quite healed.

14. If the disability is an injury, was it caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

In action

15. Was a Court of Inquiry held on the injury?

- If so—(a) When?
- (b) Where?
- (c) Opinion?

16. Was an operation performed? If so, what?

6 mo. } Removal of Bone fragments
} of Amputation

17. If not, was an operation advised and declined?

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

Patient states that his teeth became bad while on service

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

20. Do you recommend—
(a) Discharge as permanently unfit, or
(b) Change to England?

Permanently unfit

V.D. Brock, C.S. Surg. 1st Lt. Lond. Gen. Hosp.
Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except †
3rd London General Hospital,
Station WANDSWORTH, S.W.

H. E. Dounce, M.D.

Officer in charge of Hospital.
Col. A.M.S.

Date 20/7/18

Comdg. 3rd. London Gen. Hospital.

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

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

Notes.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

(iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

1. (a.) State whether the disability is clearly attributable to—

- (i.) Service during the present war;
- (ii.) Climate;
- (iii.) Ordinary military service;

Yes

20.A. Is he fit for discharge from the Service as an out-patient and will he require out-patient treatment on discharge from Hospital?

causes, to what specific conditions do the Board attribute it?

8.3.18

22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which?

23. Is the disability permanent?

Yes

24. If not permanent, how soon do the Board recommend re-examination?

25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

Degrees of disablement should be expressed in the following percentages:— 100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.

100 % for 3/2 & 60 %

26. If an operation was advised and declined, was the refusal unreasonable?

✓

27. Do the Board recommend—

- (a) Discharge as permanently unfit,
- (b) Change to England?

Yes

28. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic training) is desirable in a—

- (a) Sanatorium;
- (b) Hospital;
- (c) Convalescent home;
- (d) Asylum; or
- (e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

limb files

29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended?

✓

30. Does the man require the constant attendance of another person?



Signatures:—

S. J. [Signature] London General Hospital, HANSDWORTH, S.W.

[Signature] President.
[Signature] Members.

Date 17 MAY 1918



Approved. *[Signature]* London General Hospital, HANSDWORTH, S.W.

[Signature] Administrative Medical Officer.

Date 17 MAY 1918

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(iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

1. (a.) State whether the disability is clearly attributable to—

(i.) Service during the present war;

(ii.) Climate;

(iii.) Ordinary military service;

(iv.) Lack of proper care on the part of the man, e.g., intemperance, neglect of hygiene, &c.; or

(v.) Whether it is constitutional or hereditary.

If none of the first three of these causes, to what specific conditions do you attribute it?

yes
S.S.W.

22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which?

23. Is the disability permanent?

yes

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- (e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

limb files

29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended?

30. Does the man require the constant attendance of another person?

Signatures:—

*London General Hospital,
 BUNDSWORTH, S.W.*

Benjamin Major President.
E. Parne Members.

Date 17 MAY 1918

Approved.
*London General Hospital,
 BUNDSWORTH, S.W.*

Benjamin
 Administrative Medical Officer.

Date 17 MAY 1918



No. _____
Regtl. No. 2199
Rank Private
Name Ball H
Regiment R. Rifl.
Date from 27-2 1916
to 3 PM 5-3 1916

To proceed to _____



Address whilst on furlough to which any
orders will be sent:

No. _____
Regtl. No. 2199
Rank Pvt
Name Bull. H.
Regiment R Wfld.
Date from 20-2-1918
to 3 PM 26-2-1918

To proceed to _____

NEWFOUNDLAND CONTINGENT
88, VICTORIA ST.,
LONDON, S.W.
Station _____
Date 20.2.18
PAY & RECORD OFFICE

Address _____ which any
orders will be sent:

NO EXTENSION OF THIS FURLOUGH IS PERMITTED.

N.B.—This Form is to be used for N.C.O.'s. and men granted furlough from Hospitals during the period of the War.

No. _____

Hospital at _____

If no rejoining notice or railway warrant is received, you should report in writing to the Officer Commanding your Regimental Depot at least **FOUR DAYS** before the termination of this Furlough.

FURLOUGH.

No. 2199 (Rank) Pls (Name) Pall H.

Unit ROYAL NEWFOUNDLAND REGIMENT.

has been granted a furlough from 20 - 2 - 18.

to take on 3 P.M. 26 - 2 - 18 and leave to proceed to

London and to report on latter

date at 88 Victoria St.

No advance made to him on any account without previous

reference to the Paymaster, **NEWFOUNDLAND CONTINGENT.**

(Station) _____ (Date) _____

J. A. Anderson
CHIEF PAYMASTER & OFFICER IN CHARGE
Hospital.



Notification by President of Medical Board of Approval of a Soldier's Discharge, under Para. 392 (xvi.) King's Regulations.

(To be completed and dispatched on the day on which the discharge is approved.)

To the Officer i/c Records Victoria Street,

The Soldier named below has appeared before an Army Medical Board at this station, and his discharge from the Service as "no longer physically fit for War Service" has this day been approved. (The discharge will be confirmed for a date ~~14~~ ²¹ days after the date on this notification—see A.C.I. ~~1023~~ of 1916.)

Soldier's surname Ball, Christian names ¹⁹¹² Hayward,
(in full)

Regt. No. and Rank 2199 P.W. Regt. or Corps 1/R. Newfoundland
(If T.F. this should be stated)

His address on discharge will be Grand Falls,
Newfoundland

This information is for the Central Army Pension Issue Office only.

The Soldier states that Dependants allowance is being issued in respect of him.

*Insert "separation," "dependants," "family," or "no," as the case may be. The space must not be left blank

Army Form D. 400A. and Army Form B. 179 for the above-named Soldier are forwarded herewith. also of B178



Station _____

Date 17 May 1918. President of Board (Approving Officer) *[Signature]*

A set of three forms will be made out for each Soldier whose discharge is approved, and will be dispatched to the officers severally indicated.

Attention is drawn to the fact that Forms A, B and C of each set are not in identical terms.

5304

QUEEN MARY'S CONVALESCENT AUXILIARY HOSPITALS,

ROEHAMPTON HOUSE,

ROEHAMPTON, S.W.

TO THE OFFICER IN CHARGE OF RECORDS.

58 Victoria St Westminster

I beg to inform you that the undermentioned men have been admitted as patients to this Hospital.

Regt. No.	Rank and Name.	Unit.	Date of Admission.
2199	<i>P Ball</i> W.	<i>1 Newfoundland</i>	<i>May 3</i>

After these men have been fitted with artificial limbs, they will appear before a final Invaliding Board for the purpose of discharge from the Service.

May 11. 1918.

W. H. Nielson Commandant.
Queen Mary's Convalescent Hospital.

J.K. L.O. O.K. Rochampton House
Rochampton
8/5/18 Recd No 17011 8/5/18

Dear Sir.

Would you please
oblige me with the sum
of £. 1.

Yours Sincerely
P. G. H. Ball 2199
Royal Newfoundland Regt



No Objection in this case. Since the
man has given me his assurance
that he particularly requires the cash
to purchase special articles of clothing

W. H. Nicholas Capt. for
Lt. Col. Commandant,
Queen Marys Convalescent Hospital.

Rochampton 8/5/18



2054. Descriptive Return of a Soldier discharged on account of Disability.

H. 5. 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 Commissioners of Chelsea Hospital.
 Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.1.

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

A Name in full Hayward Ball
 Regiment from which discharged 1 Royal Newfoundland
 Regimental Number 2199
 Where born (Parish, Town and County), and when Cambelton, Newfoundland
 Intended address Grand Falls, Newfoundland 3 Aug 1896

Height on discharge 5 Feet 4 Inches
 Colour of Hair on discharge Dark Brown Colour of Eyes Blue
 Descriptive marks Amputation Left Arm Complexion Fair
 Figure on discharge Normal
 Christian name of Father Harry
 Christian name of Mother Sarah
 Wife's Maiden name in full _____
 Date and Place of Marriage Single
 Christian names of Children _____
 Nature and locality of civil employment desired Undecided

COPY SENT TO
 O.C. H.Q.
 ST. JOHNS. N.F.L.D.
 N.F.P.38. No. 8514/64
 DATED 30 MAY 1918

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) Hayward Ball
 Station Rochampton S W (Rank) pte
 Date 4/5/18

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.

W. H. Nicholson Comd. for Medical Officer i/c
Lt. Col. Commanding Queen Marys Convalescent Hospital.
 Date 4 - MAY 1918



Regiment	Years	Days	All Service Abroad with Stations	Years	Days
			India		
			S. Africa		
Disallowed			
Service towards Pension			
Date inclusive to which pay has been issued	Sum due on account of advance of Pension }				
Sums due on account of public debts					

Rank on Discharge
 Character (as on Certificate of discharge)
 Where born, and on what date
 Date and Place of first Enlistment
 Trade on Enlistment
 Cause of Discharge
 Number of G.C. Badges
 Wounds, and Actions in which received

Medals

Other distinguishing marks

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.

Station _____ Officer in Charge
 Date _____ Records.

Ball, H

2189

Sept

COPY.

This space to be left blank for the Chelsea Number.

[Blank box for Chelsea Number]

Army Form B. 268.

Proceedings on Discharge



(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 2199 Army Rank Private

Name Ball Hayward
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps ROYAL NEWFOUNDLAND REGIMENT.

Battalion, Battery, Company, Depot, &c.
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge July 9th 1918

Place of discharge St. John's, Nfld.

1. Description at the time of discharge.

Age 21 <u>11</u> years <u>11</u> months	Descriptive marks. <u>Amputation Left Arm.</u>
Height <u>5</u> feet <u>4</u> inches	
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.	
Complexion <u>Fair</u>	
Eyes <u>Blue</u>	
Hair <u>Dark Brown</u>	
Trade _____	
Intended place of residence (To be given as fully as practicable) { <u>Grand Falls</u> <u>Newfoundland</u>	

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of Wounds received in action

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character:—

4. Character awarded in accordance with King's Regulations:—

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2068 has been issued to*

1
31
30
31
20
107

To be filled in on the soldier quitting the Colours.

Descriptive Return of a Soldier discharged on account of Disability.

12054
H5
Ampt
Lt
Am

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 Commissioners of Chelsea Hospital. Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.1.

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

A Name in full Hayward Ball
 Regiment from which discharged ROYAL NEWFOUNDLAND REGIMENT
 Regimental Number 2199
 Where born (Parish, Town and County), and when Cambelton Newfoundland 3rd Aug 1896
 Intended address Grand Falls Newfoundland

Height on discharge 5 Feet 4 Inches
 Colour of Hair on discharge Dark Brown Colour of Eyes Blue
 Descriptive marks Amputation Left Arm Complexion Fair
 Figure on discharge Normal
 Christian name of Father Samy
 Christian name of Mother Sarah
 Wife's Maiden name in full } Single
 Date and Place of Marriage }
 Christian names of Children }
 Nature and locality of civil employment desired Undecided



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) (Sgd) Hayward Ball
 Station Roehampton SW (Rank) Pte
 Date 4/5/18

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.

Queen Marys Convalescent Hospital (Sgd) W. Nicholson Lt Col Medical Officer i/c
 Station Roehampton Date 4 - May - 1918
Lt Col Commandant Hospital.

B Period of Service and in what Corps ...	Regiment	Years	Days	All Service Abroad with Stations	Years	Days
					India	
				S. Africa		
Disallowed ...						
Service towards Pension ...						
Date inclusive to which pay has been issued				Sum due on account of advance of Pension }		
Sums due on account of public debts ...						

Rank on Discharge
 Character (as on Certificate of discharge)
 Where born, and on what date
 Date and Place of first Enlistment
 Trade on Enlistment
 Cause of Discharge
 Number of G.C. Badges
 Wounds, and Actions in which received

Medals

Other distinguishing marks

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.

Station _____ Officer in Charge
 Date _____ Records.

Casualty Form—Active Service.

Regiment or Corps **ROYAL NEWFOUNDLAND REGIMENT.**

COPY.

Rank Plt Surname Ball Christian Name Hayward

Religion Meth Age on Enlistment 19 years 6 months

Enlisted (a) St Johns Terms of Service 3 yrs of War Service reckons from (a) 20 Feb 16

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

Extended { } Re-engaged { } Qualification (b)
or Corps Trade and rate 28 MAY 1918

Occupation Sgd. 1st Lieut.



Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
			Embarked <u>Weymouth</u>	<u>5/8/17</u>	
			Disembarked <u>Rouen</u>	<u>7/8/17</u>	
			<u>Joined Battalion</u>	<u>28/8/17</u>	<u>B213</u>
	<u>of Unit</u>	<u>Wounded in Action</u>		<u>9/10/17</u>	<u>B213 7/10/17</u>
<u>9/10/17</u>	<u>64 CCS</u>	<u>Ad SW Elbow</u>		<u>9/10/17</u>	<u>ED 1807</u>
	<u>Gen Secy. App</u>	<u>" do</u>	<u>Staples</u>	<u>11/10/17</u>	<u>HA 15077</u>
	<u>App "Ville de Leige"</u>	<u>Transferred to England</u>		<u>20/10/17</u>	<u>W 3083</u>
			<u>(Sgd) L. Harry 2nd Lt Major</u>		
			<u>of No. 1 Infy Bct</u>		
			<u>3rd Echelon</u>		

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) Signaller, Shoeing-Smith, &c. W. 8635--M2733 2000m 9/17 (35611) C. P. & S., Ltd., Form B./103 E/1807. P.T.O.



THE ROYAL NEWFOUNDLAND REGIMENT
HEADQUARTERS

1759

St. John's, Newfoundland,

JUNE 25th, 1918.

191

From Asst-Adjutant.
Depot.

To Paymaster & Officer i/c Records,
Department of Militia.

#2199.Pte. H. Ball.

Above noted man was recommended Discharge-~~Bermanently~~ Unfit
by Medical Board held June 25th, 1918. I am sending him herewith for your
attention and necessary action, please.

ORIGINAL

LAST PAY CERTIFICATE

N.F.P./94

To be rendered for all ranks on discharge, transfer to other Units, or on return to Newfoundland in accordance with C.F./19, 22/5/17.

Regtl No. 2199 Rank Pte. Name Ball, H Unit Royal Nfld. Regt. who was Repatriated
to Newfoundland on 30/5/18 Authority A. F. B. 179 Cause Class "A"

STATEMENT OF ACCOUNT

DR.

CR.

PERIOD: FROM 22/12/17 TO 30/5/18	PARTICULARS					PARTICULARS						
	£	s	d	£	s	d	£	s	d			
						Balance Cr. from 21/12/17			3	17	0	
	96	00		19	14	6	Pay 160 days @ \$ 1.00	160	00			
							Field Allow 160 days @ \$.10	16	00			
				17	6	0	Other Allowances days @ \$	176	00	36	3	3
				2	9	0	Other Credits:					
					5	10	Ration Allowance					
							18/5/18 - 21/5/18					
							4 days @ 2/1			8	4	
				39	15	4	Total Credits			40	8	7
					13	3	Balance due to Paymaster					
				40	8	7				40	8	7

CHECKED.
12/5/18

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of

191

(Place) _____ (Date) _____ O.C. " " Company.

Made up/checked in accordance with information received in the Pay & Record Office London to 29/5/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,
29th, May 1918

H. J. ...
Chief Paymaster & Officer i/c Records.

LAST PAY CERTIFICATE

DUPLICATE
MAIL COPY

N.F.P./94

To be rendered for all ranks on discharge, transfer to other Units, or on return to Newfoundland in accordance with C.S./19, 22/5/17.

Regtl No. 2199 Rank Pte. Name Ball, H Unit Royal Wfld. Regt. who was Repatriated
to Newfoundland on 30 5 18 Authority A.F.B. 179 Cause Class "A"

STATEMENT OF ACCOUNT

DR.

		PARTICULARS				£	¢	£	s	d	PARTICULARS				£	¢	£	s	d	
PERIOD: FROM <u>22/12/17</u> TO <u>30/5/18</u>		Balance Br. from										Balance Cr. from								
		Alotment	160	days @	1.00	19	14	6				Pay	160	days @	1.00	180	00	3	17	0
		Cash Payments:										Field Allow	160	days @	1.10	16	00			
		P. & R. O.				7	6	0				Other Allowes	days @	1.76	00	56	3	3		
		Hospital Advances				2	9	0				Other Credits:								
		R.F.M.'s to Wfld.				5	10					Ration Allowance								
		Other Debits:										18/5/18 - 21/5/18								
											4 days @ 2/1									
	Total Debits				39	15	4				Total Credits				40	8	7			
	Balance due by Paymaster				13	3					Balance due to Paymaster				40	8	7			

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of

(Place) _____ (Date) 191 O.C. " " Company.

Made and checked in accordance with information received in the Pay & Record Office London on 29 5 18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

29th, May 1918

[Signature]
Chief Paymaster & Officer i/c Records.

RECEIVED
20/5/18

March 25, 1919

#2199 Pte. Hayward Ball,
Circular Road,
Grand Falls.

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,

Raymaster & C. i/c Records Captain,

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

10419
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 question 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 *Hayward* 2. Surname *Ball*
3. Rank *Pvt* 4. Regt. No. *2199*
5. Address in full to which future payments of gratuity are to be forwarded *Circular Road
Grand Falls*
6. Date of enlistment in the Regiment *23 Febry 1916*
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 *not applicable*
9. Address in full of such dependent.....
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. *no. (in France)*
12. Give total length of time which you served on active service, whether in Nfld or Overseas. *2 years and 4 Months*

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

..... *only one*

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.....

..... *have received none*

15. Have you been issued with a War Service Badge?..... *Yes - 6/15*

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?..... *not appeal*

19. Are you now serving in the Regt.?..... *No* If not give:- (a) Date of discharge..... *July 11, 1918*

(b) Reason for discharge..... *Wounded and Arm Amputated*
4 inch Stump from shoulder

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.....

..... *Active Ser. 9 to Det. at Ypres where*
I lost my arm

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..... *not in rec. of any such treatment or pay*

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: *Howard Ball*
 Place of Residence: *Grand Falls*
 Declared before me at: *Grand Falls*
 This *22nd* day of *March* 19*19*

Wm. Scott, Jr.

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
.....	<i>5.00</i>	<i>3.50.00</i>
.....
.....
Certified Correct, ..			Paymaster,	

[Faint, illegible text]

[Faint, illegible text]

March 11, 1919

No. 2199, Hayward Ball,
GRAND FALLS.

With reference to your letter
of March 10th. I enclose form of claim for
War Service Gratuity.

Lieut.
For Paymaster



This Form is to be used in connection with Pamph. M. E. (1)
N.F. 1915

In the spaces below should be entered the findings in the routine of examination set forth in the appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of *Mayward Ball*

aged *19* conducted at *Grand Falls.*

Date: *Feb. 21. /16* Recruiting officer:

NO. OF TEST

FINDING *Recommended.*

- | | | |
|----|---|---|
| 1 | <i>No defect</i> | <input checked="" type="checkbox"/> |
| 2 | <i>"</i> | <input checked="" type="checkbox"/> |
| 3 | <i>"</i> | <input checked="" type="checkbox"/> |
| 4 | <i>"</i> | <input checked="" type="checkbox"/> |
| 5 | <i>"</i> | <input checked="" type="checkbox"/> |
| 6 | <i>"</i> | <input checked="" type="checkbox"/> |
| 7 | <i>"</i> | <input checked="" type="checkbox"/> |
| 8 | <i>"</i> | <input checked="" type="checkbox"/> |
| 9 | <i>"</i> | <input checked="" type="checkbox"/> <i>no</i> |
| 10 | <i>"</i> | <input checked="" type="checkbox"/> |
| 11 | <i>foreign service</i> | <input checked="" type="checkbox"/> |
| 12 | <i>feet flat. But used to walking and not painful</i> | |
| 13 | <i>getting both fixed. Both to be attended too.</i> | |
| 14 | <i>"</i> | <input checked="" type="checkbox"/> |
| 15 | <i>"</i> | <input checked="" type="checkbox"/> |
| 16 | <i>"</i> | <input checked="" type="checkbox"/> |
| 17 | <i>"</i> | <input checked="" type="checkbox"/> |
| 18 | <i>"</i> | <input checked="" type="checkbox"/> |
| 19 | <i>46 Both Eyes.</i> | <input checked="" type="checkbox"/> |
| 20 | <i>"</i> | <input checked="" type="checkbox"/> |
| 21 | <i>"</i> | <input checked="" type="checkbox"/> |
| 22 | <i>"</i> | <input checked="" type="checkbox"/> |
| 23 | <i>"</i> | <input checked="" type="checkbox"/> |
| 24 | <i>"</i> | <input checked="" type="checkbox"/> |
| 25 | <i>"</i> | <input checked="" type="checkbox"/> |
| 26 | <i>"</i> | <input checked="" type="checkbox"/> |
| 27 | <i>"</i> | <input checked="" type="checkbox"/> |
| 28 | <i>"</i> | <input checked="" type="checkbox"/> |
| 29 | <i>"</i> | <input checked="" type="checkbox"/> |
| 30 | <i>"</i> | <input checked="" type="checkbox"/> |
| 31 | <i>"</i> | <input checked="" type="checkbox"/> |
| 32 | <i>"</i> | <input checked="" type="checkbox"/> |

yes one scar left arm 12 years ago

5' 4 1/4 123 lbs

34 1/2 33-36

150

mother

no

Signature of Medical Examiner: *A. B. Chamberlain*

July 20th.1918.

Private H. Ball,
Grand Falls.

Dear Sir,-

I enclose herewith cheque for \$42.32,
being the amount due you to the date of discharge, also
a Certificate of Pay. I also enclose Certificate
of discharge, dated July 9th.1918, together with special
form, which kindly sign and return to this Office.

Yours faithfully,

Capt. & Paymaster

Encl. 4.

J/H

4344

Grand Falls

Mar 22nd 1919

Memo

To Militia Dept. St. John's

In July 1917 when discharged
I only had \$25⁰⁰ for clothes
+ since then this was raised
to \$60⁰⁰ + I claim the balance
\$35⁰⁰ on this matter.

To the paymaster

H. Edward Ball

W. Scott G.

April 4, 1919

#2199, Pte. H. Ball,
GRAND FALLS.



I enclose herewith cheque for
\$35.00 being balance of Clothing Allowance
due you.

Capt.
Paymaster.

LM-

Encl. 1

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

10.00

June 27th 1918

Received from the First Newfoundland Regiment
the sum of 10 Dollars.
on account of Pay. *FBH*
balance *H Ball*

Ch. No. <u>4907</u>	Initials <u>EW</u>
Pay Ledger <u>209</u>	Initials <u>FBH</u>
Gen. Ledger <u>W</u>	Initials <u>FBH</u>

Regtl. No. Rank

No. 2199

Rank

Plt

Name

A. Ball.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$15⁰⁰

J. B. Ball ; June 11th 1918

Received from the First Newfoundland Regiment
the sum of Fifteen _____ 00 Dollars.
balance on account of Pay.

H. Ball

Ch. No. <u>1500</u>	Initials <u>[Signature]</u>
Pay Ledger <u>[Signature]</u>	Initials <u>[Signature]</u>
Gen. Ledger <u>[Signature]</u>	Initials <u>[Signature]</u>

Regtl. No. _____ Rank _____

No. 2199 Rank Pte.

Name Rayward Ball

1918 - 1919

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$42.³²

July 11th 1918

Received from the First Newfoundland Regiment
the sum of Forty Two ³² Dollars.
on account
balance of Pay.

Ch. No. 114	Initials JN
Pay Ledger 162	Initials WJ
Gen. Ledger RP	Initials E

Regtl. No. Rank

C. J. H. E.

Hand Falls

No. 2199

Rank Pte

Name A. Ball

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 35⁰⁰/₁₀₀

Mar 29. 19 19

Received from the First Newfoundland Regiment
the sum of Thirty five _____ Dollars.
~~on account~~ of Pay. Clothing
balance

Ch. No. 14940	Initials. <i>Jew</i>
Pay Ledger ... 7	Initials. <i>Jew</i>
Gen. Ledger	Initials.

Regtl. No.

A. C. Rank

No. 2199

Rank

PL-

Name

Bell

Reg. No. 2199 Rank. Pvt. Name. Ball. A.

Attested..... Address.....

Allotment..... Allottee.....

Date of Allotment..... Returned from Overseas 10/6/18.....

Embarked for Overseas..... Cause.....

25th Rec. Discharges Per. unfit.

DISCHARGED—MEDICALLY UNFIT JUL 7 1918



2199 **Casualty Form - Active Service.**

Regiment or Corps *1st Newfoundland*
 Rank *Pte* Surname *Ball* Christian Name *Hayward*
 Religion *Method* Age on Enlistment *19* years *6* months.
 Enlisted (a) *St John's* Terms of Service (a) *Duration of War* Service reckons from (a) *29/3/16*
 Date of promotion to present rank Date of appointment to lance rank
 Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and Rate
 Signature of Officer: *J. Langford*

COPY SENT TO
 O.C. H.Q.
 ST. JOHNS, N.F.L.D.
 Date
 N.F.P.38, No. *8514/64*
 DATED **30 MAY 1918**

Report From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
		Embarked <i>Shamptons</i>	<i>5.8.17</i>	
		Disembarked <i>Rover</i>	<i>7.8.17</i>	
		Joined Battalion	<i>28 AUG 1917</i>	<i>0213</i>
<i>of Mus</i>	Wounded in Action		<i>9 OCT 1917</i>	<i>0213 12 OCT 1917</i>
<i>64 CCS</i>	<i>Ad SW Elbow</i>		<i>9-10-17</i>	<i>6.2.1807</i>
<i>7 Coas Sea Hq</i>	<i>do</i>	<i>Staples</i>	<i>11/10/17</i>	<i>NA 15077</i>
<i>of Mus</i>	Transferred to England		<i>20/10/17</i>	<i>711 3083</i>
		<i>S.I/c No 1</i>		<i>MAJOR</i>
				<i>Infantry Section</i>
				<i>G.H.O. 3rd Echelon</i>



(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, &c.

[P.T.O.]

COPY.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B 121.

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Forms
B. 121.
41.

Regiment of **ROYAL NEWFOUNDLAND REGIMENT.**

Number of Sheet 1
Signature of O. C. Company Capt W. Rendell
Comd'g Coy.

Regimental Number and Name		Enlistment		Trade
No. <u>7199</u>	<u>Ball St.</u>	Age on <u>19</u> years <u>6</u> months		<u>Lumberman</u>
Joined <u>1st Feb</u>	Date <u>29/4/16</u>	Place and Date of Enlistment <u>St Johns Mfd</u>		Religion <u>Methodist</u>
Joined <u>1st Feb</u>	Date <u>29/4/16</u>			Place of Birth <u>Grand Falls</u>
Joined _____	Date _____	Period of { with Colours <u>2 1/2</u> years.		
Joined _____	Date _____	{ with Reserve <u>3 1/2</u> years.		



Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Period of order dispensing with trial	By whom awarded	REMARKS
<u>Coy</u>	<u>15/2/16</u>	<u>Pte</u>	<u>1</u>	<u>Drunk in town about 9.50 pm</u>	<u>Documentary to Secine to bridge miles</u>	<u>Admonished</u>	<u>2/4/16</u>	<u>Lt Col Whitaker</u>	<u>CRD.</u>
<u>Coy</u>	<u>7/1/17</u>	<u>"</u>		<u>Absent from Ch. Parade</u>	<u>Sgt Morrissey</u>	<u>3 days CB</u>	<u>8/1/17</u>	<u>2nd Lt Dicks</u>	<u>Sy</u>
<u>"</u>	<u>16/1/17</u>	<u>"</u>		<u>Absent from till 10.18 pm</u>	<u>Sgt Leach</u>	<u>2 days CB</u>	<u>17/1/17</u>	<u>2nd Lt Dicks</u>	<u>Sy</u>
<u>"</u>	<u>2/2/17</u>	<u>"</u>	<u>2</u>	<u>Drunk on High Street about 9 pm</u>	<u>Pte Roberts</u>	<u>7 days CB</u>	<u>5/2/17</u>	<u>Lt Col Whitaker</u>	<u>CRD.</u>
<u>Coy</u>	<u>6/4/17</u>	<u>"</u>		<u>Absent from till 10.45 pm</u>	<u>Carbay RB</u>	<u>Fined 2/6</u>			
<u>"</u>	<u>16/4/17</u>	<u>"</u>		<u>Gambling in Barracks about 1.45 pm</u>	<u>Corp Silley</u>	<u>2 days CB</u>	<u>7/4/17</u>	<u>2nd Lt Dicks</u>	<u>Sy</u>
<u>"</u>	<u>17/4/17</u>	<u>"</u>			<u>Sgt Winsor</u>	<u>2 days CB</u>	<u>17/4/17</u>	<u>2nd Lt W. M. Green</u>	<u>W.S.</u>
<u>Racelouse</u>	<u>5/5/17</u>	<u>"</u>	<u>3</u>	<u>Drunk in High St about 8.45 pm</u>	<u>Cpl O'Reilly</u>	<u>7 days CB fined 5/-</u>	<u>8/5/17</u>	<u>Lt Col Whitaker</u>	<u>Lt.</u>
<u>"</u>	<u>23/5/17</u>	<u>"</u>		<u>Absent from 6.30 am parade to 8.35 am same date</u>	<u>Documentary</u>	<u>2 days CB</u>	<u>23/5/17</u>	<u>Lieut S Lane</u>	<u>Lt.</u>
<u>"</u>	<u>9/7/17</u>	<u>"</u>		<u>Absent from 6.30 am parade</u>	<u>Cpl Duder</u>	<u>forfeits 1 days pay</u>	<u>9/7/17</u>	<u>Capt A Rendell</u>	<u>CRD</u>
<u>"</u>	<u>17/7/17</u>	<u>"</u>		<u>Absent from 6.30 am parade</u>	<u>Sgt Morrissey</u>	<u>forfeits 1 days pay</u>	<u>17/7/17</u>	<u>Capt March</u>	<u>CRD</u>
<u>Coy</u>	<u>28/7/17</u>	<u>"</u>		<u>Absent from 6.30 am parade</u>	<u>Corp Hodge</u>	<u>3 days CB</u>	<u>28/7/17</u>	<u>Capt Rendell</u>	<u>forfeits 2 days pay</u>

To be carried over

Medically Unfit 9 7/8.

Army Form B. 121.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

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Forms
B. 121.
33.

Regiment of 21st Newfoundland Regiment

Number of Sheets 1

Signature of O. C. Company W. Handley
C. H. Coy

Regimental Number and Name		Enlistment		Trade		Good Conduct Badges, Service Pay or Proficiency Pay	
No.	<u>2199</u>	Age on	<u>19</u> years <u>6</u> months	<u>Lumberman</u>		<u>O.C. H.Q.</u>	
Joined <u>11th N.F.L.D.</u> Date <u>29.2.16</u>		Place and Date of Enlistment <u>St. John's Nfld.</u>		Religion		<u>ST. JOHNS, N.F.L.D.</u>	
Joined <u>de bot.</u> Date <u>Apr. 1916</u>		Period of { with Colours years. with Reserve years.		<u>Methodist</u>		<u>N.F.P.38. No. 8514/64</u>	
Joined _____ Date _____				<u>Grand Falls Nfld.</u>		<u>DATED 30 MAY 1918</u>	

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award of order of discharge with trial	By whom awarded	REMARKS
<u>Coy</u>	<u>15.12.16</u>	<u>Pte.</u>	<u>1</u>	<u>Drunk in town about 9.50 pm</u>	<u>Documentary</u> <u>L. Cpl. Treco</u> <u>Pls. Hudson</u> <u>Miles</u>	<u>Admonished</u>	<u>18.12.16</u>	<u>Lt. Col. Whitaker</u>	<u>CSA</u>
<u>Coy</u>	<u>7.1.17</u>	<u>Pte.</u>		<u>Absent from Ch. Parade</u>	<u>Sgt. L. Hennessey</u>	<u>3 days C.B.</u>	<u>8.1.17</u>	<u>2 Lt. Dicks</u>	<u>CSA</u>
<u>Coy</u>	<u>16.1.17</u>	<u>Pte.</u>		<u>Absent Tattoo till 10.15 pm</u>	<u>Sgt. L. Hennessey</u>	<u>2 days C.B.</u>	<u>17.1.17</u>	<u>2 Lt. Dicks</u>	<u>CSA</u>
<u>Coy</u>	<u>2.2.17</u>	<u>Pte.</u>	<u>2</u>	<u>Drunk on High Street about 9 pm</u>	<u>Pls. Roberts - R.P.</u> <u>" Carbay R.P.</u>	<u>7 days C.B.</u> <u>June 2/6</u>	<u>5.2.17</u>	<u>Lt. Col. Whitaker</u>	<u>CSA</u>
<u>Coy</u>	<u>6.4.17</u>	<u>Pte.</u>		<u>Absent from Tattoo till 10.15 pm</u>	<u>Capt. Tilley</u>	<u>2 days C.B.</u>	<u>7.4.17</u>	<u>2 Lt. Dicks</u>	<u>CSA</u>
<u>Alp</u>	<u>16.4.17</u>	<u>"</u>		<u>Publicly in Barracks about 11.15 pm</u>	<u>Pls. Winard</u> <u>C. O'Sullivan</u>	<u>2 days C.B.</u>	<u>17.4.17</u>	<u>2nd Lt. W.M. Green</u>	<u>CSA</u>
<u>Harbour</u>	<u>1/5/17</u>	<u>"</u>	<u>3</u>	<u>Drunk in High Street about 8.45 pm</u>	<u>Documentary</u>	<u>7 days C.B. fine 5/-</u>	<u>1/5/17</u>	<u>Lt. Col. Whitaker</u>	<u>CSA</u>
<u>"</u>	<u>25/5/17</u>	<u>"</u>		<u>Absent from 6.30 am parade to 8.35 am same date.</u>	<u>Cpl. Duder</u>	<u>2 days C.B.</u>	<u>25/5/17</u>	<u>Lt. L. Gane</u>	<u>CSA</u>
<u>"</u>	<u>7.7.17</u>	<u>"</u>		<u>Absent from 6.30 am parade</u>	<u>Serjt.</u> <u>Morrison</u>	<u>forfeits 1 day pay</u>	<u>7.7.17</u>	<u>Capt. Handley</u>	<u>CSA</u>
<u>"</u>	<u>7.7.17</u>	<u>"</u>		<u>Absent from 6.30 am parade</u> <u>To be carried over</u>	<u>Sgt. Morrison</u>	<u>forfeits 1 day pay</u>	<u>7.7.17</u>	<u>Capt. March</u>	<u>CSA</u>

Army Form B. 121.

Byr.	20.7.17	Pb.	Absent from 630 am parade	^{Brought forward} Cop Dodge	3 days CB.	20.7.17	Capt. Russell	forfeit's 1 day pay
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