



4 | THE ROYAL NEWFOUNDLAND REGIMENT |

ATTESTATION OF

No. 4500 Name Thomas Cyril G. Barnes Corps A/E

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Cyril G Barnes
2. What is your full Address? 2. 40 park
3. Are you a British Subject? 3. yes
4. What is your age? 4. 18 Years Months
5. What is your Trade or Calling? 5. Teacher
6. Are you Married? 6. no
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7. no
8. Are you willing to be vaccinated or re-vaccinated? 8. yes
9. Are you willing to be enlisted for General Service?.. 9. yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? 10. (Name) (Corps)
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? 11. yes

I, Cyril G Barnes 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.

Cyril G Barnes SIGNATURE OF RECRUIT.
J. J. Gray Signature of Witness.

19-4-15

I, Cyril G Barnes DO OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at on this 19 day of April 1918

Signature of Attesting Officer J. J. Gray Capt - A/E

†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 April 19 1918 Place St Johns Approving Officer J. J. Gray Capt - A/E

† 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)

Reg. No. A500 Rank Pvt. Name Barnes, G.
Attested 19.4.18 Address Topprail
Allotment 60 Allotee Mrs Wm Barnes (Mother)
Date of Allotment _____ Returned from Overseas _____
Embarked for Overseas JUN 11 1918 Cause _____

Wacc 234
18

2nd Ind. 17-5-18

returned for leave 20-4-18

C.R. 4500

extract from daily orders Part II Royal Newfoundland Regt.
Depot St. John's dated Aug. 7th 1919.

4500

The discharge of the undernoted on demobilization has been
CONTINUED by officer i/c records from noted date
1-8-19.

4500, Sgt. C. Barnes.

C.R. 4500

Extract from Daily Orders part II, unit the Royal Newfoundland
Regiment dated July 21st. 1919

The discharge of the undernoted on demobilisation has been
APPROVED by G. O. Discharge Dept on noted date.

4500 Sergt. C. Barnes.

18-7-19.

C.R. 4500

Extract from Daily Orders Part II Unit The Royal Field Artillery
St. John's, July 3rd 1919.

4500 Sergt. C. Barnes.

Reported at Headquarters 1-7-19 on "Cassanite" which sailed
Glasgow 24th June, 1919.

C.R. 4500

Extract from Orders by Lt. Col. B.J. Barton, D.S.O.
COMMANDING 2ND BATTALION ROYAL NEWFOUNDLAND REGIMENT.
22/4/19.

The undermentioned W.C.O. is confirmed in rank as from
22/4/19.

4500, L/C. (A/Cpl.) C.G. Barnes as Corporal.

C.P. 4506

Extract from Daily Orders Part 11, from Unit The Royal Newfoundland Regiment, St. John's, dated June 14th 1918.

4500 L/C C. Barnes

Embarked for Overseas with draft 11-6-18.

C.R. 4500

Extract from Daily Orders part 11, from Unit the Wfld.
Regiment, St. John's, dated April 20, 1918.

#4500 Pte. C. Barnes.

Attested for General Service with the Royal Wfld.
Regiment, from 19/4/18. ~~22/20/18~~

C. S. Barnes

C.R. 4500

1190

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | | |
| (ii.) Previous active service | | |
| (iii.) Climate in pre-war service | | |
| (iv.) Ordinary military service before the war | | |
| (v.) Serious negligence or misconduct on the man's part. | } | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, etc., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

He complains of no disability

16. Was an operation performed? If so, when and what was its nature?
17. If not, was an operation advised and declined?
18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

Repatriation

20. Do you recommend—
- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

W.E. Procter. Capt. R.A.M.C.

Station *Hazley, Devon*

Date *10/4/19*

Medical Officer in charge of case.

* 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

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

Sir:-

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

Commencing on the 1st July 1918.

Regtl. No.	Rank	Name	Amount	Signature
45 ⁰⁰	D/C.	Barnes C.	\$350	E Barnes

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

E Barnes

Date July 1/18

6/1
No. 19041/2118

065514
42
NEWFOUNDLAND CONTINGENT



N.F.P./79.

From: .

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

To:

Officer Commanding,
2/Bn Royal Nfld. Regt.
Winchester.

21st November 1918

Nov. 27th 1918

Subject: 4500, A/Cpl.C.G.Barnes,

With reference to the following telegram (10022) from the Hon. Minister of Militia, received

Pay to 4500 Barnes £10:0:0

Draft £10:0:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

A. D. Munnell Maj.
Chief Paymaster & O. i/c Records.

Receipt hereunder:

Okent
LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commdg. Batt'n,
Royal Newfoundland Regiment.

Received the sum of 10.0.0

£ ten pounds. on account of
cable remittance from Newfoundland.

E G Barnes.

No. 4500 Rank ap/pt

Witness E. de la Roche

No. 21652/2530/P&A.

N.F.P./79.

NEWFOUNDLAND CONTINGENT

From:

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

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

31st December 1918.

Subject: 4500, a/Cpl. C.R. Barnes,

With reference to the following
telegram (11186) from the Hon.
Minister of Militia, received

"Pay to 4500 Barnes, £15.0.0.

Draft £15.0.0. is enclosed
for payment to this Soldier.
Kindly obtain his receipt
hereon.

A.C. Maxwell Maj.
Chief Paymaster & O. i/c Records.

C

Jan 3rd 1919
Receipt hereunder.

J. Reynolds Lt Col
LIEUT. COLONEL.
Officer Commanding,
2nd Bn. ROYAL NEWFOUNDLAND REGT.

Received the sum of £15.0.0

Fifteen Pounds on account of
cable remittance from Newfoundland.

C. Barnes

No. 4500 Rank Cpl.

Witness A. J. Mercer, Cpl

No. 6784/1094

N.F.P. 179.

NEWFOUNDLAND CONTINGENT

From:

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

To:

Officer Commanding,
2nd Batta. Ryd. Nfld. Regiment
Winchester.

6th May 1919

May 8th 1919

Subject: 4500 a/Cpl. C.W. Barnes

With reference to the following telegram (165) from the Hon. Minister of Militia, received.

4500 Barnes C.W.
£5. 2. 9.

Draft £5. 2. 9. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

H.A. Minors

Chief Paymaster & O. i/c Records.

Receipt hereunder.

I hereby receive for
**LIEUT. COLONEL,
COMMANDING 2ND BATT. ROYAL NEWFOUNDLAND REGT.
Officer Comdg. 2nd Batt'n
Royal Newfoundland Regiment**

Received the sum of £5. 2. 9.

Five pounds two shillings on account of cable remittance from Newfoundland.

C. Barnes.

No. 4500 Rank l/cpl.

Geo Perry.

Barnes, C

4500

Ray Sept.

Augs 1st 1919.

#4500, Sgt. C. Barnes.

Topsail

Dear Sir:

Enclosed please find Discharge Certificate # 3453.

Yours truly,

Capt. & Paymaster.

RS).

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4500 Rank. Serjt Name. Barnes C
 Intended place of residence. Dopson
 2. Occupation Teacher
 Classification of soldier. E Medical Category. A.I.

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 JUL 18 1919

Mrs H.
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place, ST. JOHN'S

Date JUL 18 1919

C Barnes
 Signature of soldier
W J Beaton
 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, ST. JOHN'S

Date JUL 17 1919

C Barnes
 Signature of soldier
W J Beaton
 Signature of witness

12
30
31
31
1
105

STATEMENT OF SERVICE

7. Enlisted for service. 19-4-18 No. of days on Military
JUL 18 1919 Service. 470
 Discharged from service. Plus 14 days

APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S

Date JUL 18 1919

D R Coope 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

Date August 1/1919

M Bowley Capt
 Officer in Charge
 The Royal Newfoundland Regiment

CAF 209 91 2453

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 18.7.19

Regimental No. 4500

Name Barnes C. S.

Address Sopral

Present Medical Category Aj

Recommended for: (a) Immediate discharge
(b) ~~Standing~~ Medical Board

Members of Board

V. R. Cooper Capt
O. C. Discharge Depot.

H. Anderson
Senior Medical Officer

Geo. Burden
M. O. Depot

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 150 Rank Pvt Name Barnes C
 Date of Enlistment 19.4.18 Address Spain District Roman
 Occupation Teacher Classification for Discharge 6 Medical Category A-1
 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.....		" 6.....
B 179c.....	B 120.....	M 93.....		

Date July 27/19 O. C. Discharge Depot. 1 Mess St

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

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

C Barnes

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 *Amblash*

Date 17-7-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. A2449 to his home
 at Popsail and Release Certificate No. 3690 issued.

Date 18-7-19

[Signature]
 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 1-8-19

Date 18-7-19

[Signature]
 Depot Paymaster.

Discharge approved for 18-7-19

Forwarded with following documents to O.C Discharge Depot.

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

[Signature]
 L. R. COOPER

Date 18-7-19

[Signature]
 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 JUL 18 1919

L. R. COOPER, CAPT,

O. C. Discharge Depot.

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

Date

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.

C. Barra

Signature of Man.

M. Blonstein

Signature of the Vocational Officer or his Representative.

Reg. No. 4500

Place

ST. JOHN'S.

Date

18-7-19

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

MEDICAL HISTORY

Surname Barnes OF Christian Name Cyril F.

Table I.—GENERAL TABLE.

Birthplace:—Parish Dopsail County Nfld

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	19 th	April	1918	1918
at	<u>Dopsail</u>			
Declaral Age	18	years		days
Trade or Occupation	<u>Seaman</u>			
Height	5	feet	7 $\frac{3}{4}$	inches
Weight			142	lbs.
Chest Measurement	Girth when fully expanded		36 $\frac{1}{2}$	inches
	Range of Expansion		4 $\frac{1}{2}$	inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	/		/	
When Vaccinated				
Vision	R.E.—V	<u>6/6</u>	R.E.—V	
	L.E.—V	<u>6/6</u>	L.E.—V	
(a) Marks indicating congenital peculiarities or previous disease				
(b) Slight defects but not sufficient to cause rejection				
Approved by (Signature)	<u>L. Amund Paterson</u>			
(Rank)				
Enlisted	at	<u>Dopsail</u>	at	
	on	19 th	day of	April
Joined on Enlistment	Corps.	<u>The Royal</u>	Regtl. No.	<u>4500</u>
		<u>Nfld Regt</u>		
Transferred to				
Became non-effective by	on	day of	191	on
[Signature]				
[Rank]				



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 Office 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 *Lieut Gordon Barnes*

Regiment from which discharged **Royal Newfoundland**

Regimental number *4500*

Intended address *Lopsail.*

Height on discharge *5* Feet *8*

Color of hair on discharge *Dark Brown*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks

Figure on discharge *medium*

Christian name of Father *William*

Christian name of Mother *Emma*

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth *Lopsail. July 31st, 1898*

Nature and locality of civil employment required

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

(Soldier's signature in full) *Lieut Gordon Barnes*

Sgt
(Rank)

Station **ST. JOHN'S.**

Date *17-7-19*

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 of Hospital.
Unit, or Command Depot.

Station

Date

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.
In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. *Royal Newfoundland* } Former Trade or Occupation } *Teacher*
2. Regtl. No. *4540* 3. Rank. *Corporal* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Barnes* } (a) Former Regts. or Corps ;
(Surname) *20* } with Regtl. Nos.
- (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....
in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge ;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When (d) Particulars of Pension or Gratuity
(b) Where (if any)
(c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 a (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here.
(Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
11. Date of origin of disability. *nil*
12. Place of origin of disability. *nil*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | ✓ | |
| (ii.) Previous active service.. .. . | | |
| (iii.) Climate in pre-war service | | |
| (iv.) Ordinary military service before the war | ✓ | |
| (v.) Serious negligence or misconduct on the man's part. } | | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, etc., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

He complains of no Disability

16. Was an operation performed? If so, when and what was its nature?
17. If not, was an operation advised and declined?
18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

Repatriation

20. Do you recommend—
- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

W.E. Proctor. Capt. Rame

Station *Hazeley, Devon...*

Medical Officer in charge of case.

Date *10/4/19*

* 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



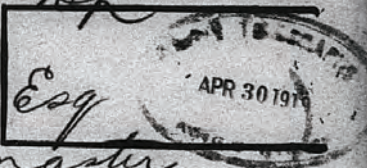
NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. _____ Sent by _____ Rec'd by _____ Check _____ No. _____

Place from ⁷⁰ _____

To ^{10x} Lapsail 30
H. M. Maddeck Esq
Lieut for Paymaster
Militia Dept



Please cable twenty
 five dollars 4500 Barnes
 hazelcamp remitting
 Operator.

May 8, 1919

Miss Florence Miller,
Operator,
TOPSAIL.

Dear Madam:

I beg to acknowledge receipt
of your letter of May 5th. enclosing \$51.00, and
as requested I have cabled £5.2.9 to 4500, Barnes
being the equivalent of \$25.00, and £5.2.9 to
Roache, being the equivalent of \$25.00

Yours truly,

Lieut.
For Paymaster.

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 & RECORDS OFFICE, ST. JOHN'S.

- Christian name *Byrd G.* 2. Surname *Barnes*
3. Rank *Sergeant* 4. Regt. No. *4500*
5. Address in full to which future payments of gratuity are to be forwarded, *Topsail, C. B.*
6. Date of enlistment in the Regiment *Apr 19/18*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
8. Relationship of such dependents.....
9. Address in full of such dependents.....
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....
11. Were you on active service only in Mfld. If so, give dates and particulars of such service..... *Overseas*
12. Give total length of time which you served on active service, whether in Mfld. or Overseas..... *From Apr. 19/18 to July 18/19* 1 1/2

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.

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 Regt.? If not give - (a) Date of discharge. (b) Reason for discharge.

July 18/19
Temporary

No.

Demobilized

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.

Capt G. B. Bames

Signature of Applicant:

Place of Residence:

Declared before me at:

This

19th

day of

*Postail C. B.
St. John, Nfld*

July 19th 1919

John P. Corthy

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

POST DISCHARGE PAY.				Net amount
Date paid	paid	paid	War Service	(us)
	Soldier.	Dependent.	Gratuity.	
.....
.....
.....
.....
Certified correct.				Registrar

OK

Topsail,

September 4, 1919.

Hon. A. E. Hickman,
Minister of Militia,
CITY.

Dear Sir:

As I intend leaving Newfoundland for Canada in a few days' time, I hereby make application for the remaining amount of gratuity money due me. I should be much obliged if you would give this matter your early consideration as I wish to leave for ~~Canada~~ very shortly and should like, if possible, to receive any money due me before leaving.

Thanking you in anticipation, I am,

Yours truly,

O.K.

\$148⁰⁰

Eyrie B. Barnes.

Ex Sgt. #4500

ST. JOHN'S, July 18th /19

Royal Newfoundland Regiment.

Billeting Account,

To Sgt. C. Barnes

Billeting Soldiers as undermentioned

from July 1st /19 to July 18th /19

4500 Sgt. C. Barnes 18 80

ACCOUNT	<u>Bm</u>
DN. NO.	<u>3335</u>
IND. LEDGER	INITIALS
PAY LEDGER	INITIALS
SEN. LEDGER	INITIALS

Certified correct for \$ 18 80

M. D. [Signature]
A. J. [Signature] *Billeting Officer.*
C. Barnes.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 140⁰⁰

Sept 9th 1919

Received from the First Newfoundland Regiment
the sum of One Hundred and Forty Dollars.

~~an account~~
balance of Pay. W.S.Y.

C B Ames
4300
Rank Sgt.

Ch. No. 7258	Initials. E.W.
Pay Ledger 76	Initials. E.W.
Gen. Ledger.....	Initials.....

[Handwritten signature]

No. 4500

Rank

Serjt.

Name

Cyril G. Barnes

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Number of Sheets one

Regiment of Royal Newfoundland

Signature of O. C. Company A. James Hunt

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay 10.6.18 Promoted Lance Corporal. 23.9.18 Acting Corporal. Confirmed Corporal. 22.4.19 1st Lieut. 19-5-19
No.	4500 4500 <u>C. G. Barnes.</u>	Age on	18 years — months	Teacher	
Joined		Date	Place and Date of Enlistment	Religion	
Joined		Date	19.4.18	CP.	
Joined		Date	Period of } with Colours 105 years. with Reserve 365 years.	Place of Birth	
Joined		Date		St. John's	

Place	Date of Offence	Rank	Cases of Drunkenness.	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<p style="font-size: 2em; font-family: cursive;">Demobilized St. John's, 1819</p>					

To be carried over

Army Form B. 121.

14500
Demobilization Form

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 450 Rank Sgt Name Baines C
 Date of Enlistment 19. 11. 18 Address Lepail District Armad
 Occupation Leader Classification for Discharge 6 Medical Category A1
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. F36	B 268	B 121	N.F. Med.	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date July 17/19 O. C. Discharge Depot # Mrs. H.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

C Baines

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 Amelob...

Date 18-7-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. B2449 to his home at Poplar and Release Certificate No. 3690 issued.

Date 18-7-19

Ch. Blount
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 18-7-19

Date 18-7-19

W. H. M. H.
Depot Paymaster.

Discharge approved for 18-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1	
B 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	<i>L. F. M. B.</i>
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 18-7-19

Ch. Blount
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 JUL 18 1919

L. R. COOPER, CAPT.

O. C. Discharge Depot.

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

Date Aug 11 19

W. H. M. H.

Reg. No. *4500* Rank *Sgt.* Name *Barnes, C.*

Attested Address *Top sail*

Allotment..... Allottee ..

Date of Allotment..... Returned from Overseas *JUL 1 1919*

Returned on S S *Cassandra* Cause *Discharge*

187 19
187 19

PASSED TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED ON DEMOBILISATION.