



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4938 Name Matthew Pissaw Corps R.C.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---|
| 1. What is your name? | 1. <u>Matthew Pissaw</u> |
| 2. What is your full Address? | 2. <u>Three Acit. Cove</u>
<u>Port au Port</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>18</u> Years <u>0</u> Months |
| 5. What is your Trade or Calling? | 5. <u>fisherman</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, Matthew Pissaw 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.

Matthew Pissaw SIGNATURE OF RECRUIT.

J. W. Pittman Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Matthew Pissaw 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 Port au Port on this 6 day of May 1918

J. James
Signature of Attesting Officer

†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 rank of Private.

If enlisted by special authority, such will be attached to the original attestation.

Date.....1918

Place.....

} Approving Officer.

† 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. 4938 Rank Pvt Name Beason M.
Attested 6-May 1918 Address Three Lock Cove P.O.
Allotment 7005 Allottee Mrs. Susanna Beason (Mother)
Date of Allotment 1/7/18 Returned from Overseas _____
Embarked for Overseas JUL 22 1918 Cause _____

10/16 Vacc. 1-Dec 10⁵ 18 and Dec 20-5-18
S.L. 28-5-18, R.L. 10/9/18

C.R. 4938

Extract from ~~xx~~ Daily orders Part II Royal Newfoundland Regt.
Depot St. John's dated Aug. 8th 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from noted date 4-8-19.

4938, Pte. M. Beasau.

C.R. 4938

Extract from Daily Orders Part II Royal Newfoundland
Regiment Depot Sg. John's dated July 11th 1919.

The discharge of the undernoted on demobilisation
has been APPROVED by C.O. Discharge Depot with
effect from 21-7-19.

4938, Pte. M. Beasau.

C.R. 4938

Extract from Daily Orders Regimental Unit The Royal Field.
Regt. St. John's, July 3rd, 1919.

4938 Pte. M. Beazen^{an}.

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

C.R. 4938

Extract from Casualties received from P.&P.R. Office London,
Aug. 20th, 1918.

The undermentioned man was admitted to Central Hospital, Chatam
(from Major Garty's Draft from Nfld.) and Discharged from Hospital
on 19-8-18, reported this office same date and was sent direct
to Depot, Winchester.

4938 Pte. Beasau.M.

Authority:-

Officer i/c. Records Nfld. Regt.

C.R. 4938

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. St. John's, dated July 25, 1918.

The following man embarked for overseas on H.M.S.
"Columbella" July 22, 1918.

#4938 Pte. Matthew Beasau.

Extract from Daily Order part 11, from Unit The Royal
Newfoundland Regiment, St. John's, dated May 7, 1918

#4938 Pte. M. Beésau.

Attested for General Service with the Royal Newfoundland Regt.
from 6.5.18

H. Deason

C.R. 4938

~~Handwritten scribble~~

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 Newfound Land* } Former Trade or Occupation } *Labourer*
2. Regt. No. *4935* 3. Rank. *Plt* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Pearson* } *Matthew* } (a) Former Regts. or Corps; with Regt. Nos.
- (Surname) (Christian Names)
5. Age last birthday *18*
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;
9. If a Court of Inquiry was held on an injury state:— (c) Cause of Discharge.
- (a) When (d) Particulars of Pension or Gratuity (if any)
- (b) Where
- (c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (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.
12. Place of origin of disability.
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
Nil
Nil

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | 1 | |
| (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, &c., 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.)

No complaints 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?

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.

Repatriation

W. E. Prosser *Capt. Rame*

Medical Officer in charge of case.

Station *Hazleyburn*.....

Date *8.14.19*.....

* 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

No. 4714/691

N.F.P./79.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
2/Bn. Royal Newfoundland Regt.,
Hazeléy Down Camp,
Winchester.

25th March 1919

March 31st 1919

4938 Pte. Beasau M.

Receipt hereunder.

With reference to the following
telegram from the Minister of
Militia / / (93)

P. Seaman LIEUT. COLONEL,
OFFICER COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

"Pay to- 4938 Beasau
£7. 4. 0.

Received the sum of £7.4.0

Seven pound four in respect of
telegraphic remittance from the
Minister of militia.

Cheque £7. 4. 0. is enclosed.
for payment to this Soldier.
Kindly obtain his receipt
hereon.

M. Beasau ^{his bank} Quit

Chief Paymaster & O. i/c Records.

No. 4938 Rank Pte.

Witness Geo. Perry Esq.

Nb. 18612/2058

065467
1/30



From: NEWFOUNDLAND CONTINGENT

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.

18th November 1918

November 20 1918

Subject: 4938, Pte. M. Beason,

Receipt hereunder.
Cham
LIEUT. COLONEL.
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
BATTAL II,
Royal Newfoundland Regiment.

With reference to the following telegram (8894) from the Hon. Minister of Militia, received

Pay to 4938 Beason £3:2:0

Received the sum of three
pounds 2/- on account of
cable remittance from Newfoundland.

Draft £3:2:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

A. A. Minnie Maj.
Chief Paymaster & O. i/c Records.

(his)
Mr + Beason
(mark)
No. 4938 Rank Pte
Witness 2930 Pte Stein

No. 4161/622

N.F.P./79.

FROM NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
2/Bn. Royal Newfoundland Regt.
Winchester,

14th. March 1919

March 16th 1919

4938 Pte. Beasau M.

Receipt hereunder.

With reference to the following
telegram from the Minister of
Militia / / (77)

[Signature]
LIEUT. COLONEL.
OFFICER COMMANDING
2ND BN. ROYAL NEWFOUNDLAND REGT.

"Pay to- 4938 Beasau,
£6. 3. 0.

Received the sum of £6. 3. 0.

Cheque £6. 3. 0 is enclosed.
for payment to this Soldier.
Kindly obtain his receipt
hereon.

Six pounds three in respect of
telegraphic remittance from the
Minister of Militia.

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

M. Beasau
No. 4938 Rank Pte.

Witness George Perry Esq

Bearau, L

4938

Hay sept

August 4th 1919.

4428.

#4958, Pte.M. Beason,
Three Hook Cove, P.A.U.P.

Dear Sir:

Enclosed please find Discharge Certificate
3319.

Yours truly,

Capt. Symaster.

RS/.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4938 Rank Pte Name Beason ^{1^m}
 Intended place of residence Three Rock Cove

2. Occupation Insurrection
 Classification of soldier E Medical Category AI

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 7 1919
 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 7 1919
 Signature of soldier M. Beason
 Signature of witness W. J. Keator

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 7-7-19
 Signature of soldier Matthew Beason
 Signature of witness W. J. Keator

STATEMENT OF SERVICE

7. Enlisted for service 6-5-18 No. of days on Military
 Discharged from service 21-7-19 Plus 14 days Service 456

APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S
 Date JUL 21 1919
 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 4/1919
 Officer in Charge Records
 The Royal Newfoundland Regiment

207 B 20 7913319

76
20
31
4
91

The Royal Newfoundland Regiment

Class for Demobilization: —

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 11.7.19

Regimental No 4938

Name Heason Maddux Rank Pte

Address Three Rock Cove

Present Medical Category A 1

Recommended for: — { (a) Immediate discharge _____
(b) Standard Medical Board _____

Members of Board {

R.H. Lait Major
O.C. Discharge Depot.

Ratson
Senior Medical Officer

B.W. Borden
M. O. Depot

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 958 Rank Plt Name Beason M
 Date of Enlistment 6-5-18 Address Three Rock Cove District St. George
 Occupation Fisherman Classification for Discharge E1 Medical Category A5
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N. F. 136	B 268	B 121	N. F. Med	D. F. 1	1
B 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	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 4-7-19 O. C. Discharge Depot. [Signature]

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Matthew ^{his} Beason
Mark
W. H. Galton

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable #65

(b) Clothing Supplied [Signature]

Date 7-7-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. B2217 to his home at Three Royal Cove and Release Certificate No. 3273 issued.

Date 7-7-19

J.A. Shaw
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 4-8-19

Date 7-7-19

H. News H.
Depot Paymaster.

Discharged approved for 21-7-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. P136	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 400H	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B179c	B 120	M 93		

2 Form B

Date 7-7-19

J.A. Shaw
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUL 21 1919

J.R. Cooper Capt
for 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.

Reason M.

Signature of Man.

Reg. No. 4938

J. H. Shawlapt
Signature of the Vocational Officer or his Representative.

Place

Al-Johus

Date

7-7-19.

191

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

MEDICAL HISTORY

Surname Bearan

Christian Name Matthew

Table I.—GENERAL TABLE.

Birthplace:—Parish Three Rocks Port au Port County Nfld.

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	day of	191
Examined	at	<u>6th</u> day of <u>May</u> 191 <u>8</u>	at	
Declared Age		<u>18</u> years		
Trade or Occupation		<u>Fisherman</u>		
Height		<u>5</u> feet <u>4 1/2</u> inches		
Weight		<u>125</u> lbs.		
Chest Measurement	Girth when fully expanded	<u>34</u> inches		
		Range of Expansion	<u>3</u> inches	
Physical Development	Right	Left	Right	Left
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V=	<u>6/30</u>	R.E.—V=	
	L.E.—V=	<u>6/12</u>	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Samuel Peterson</u>			
(Rank)	<u>Major</u> Medical Officer.			Medical Officer.
Enlisted	at	<u>St. John's Nfld.</u>	at	
	on	<u>6th</u> day of <u>May</u> 191 <u>8</u>	on	day of 191
	Corps.		Corps	Regtl. No.
Joined on Enlistment		<u>The Royal Nfld. Regt.</u> <u>4938</u>		
Transferred to				
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				

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. During on the case, nature or treatment of the case likely to be of interest or of future use. In case of syphilis, admissions and re-admissions to hospitals will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
Port Pitt Chatham	8	8	18	19	8	18	Wounds	11	No complications	C. C. Kent CAPT. R.A.M.C.
Hugeley Down	28	2	19	4	3	19	Boil Lt. Thigh	4	Do duty.	6540111111 CAPT. R.A.M.C.

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 Hampshire* } Former Trade } *Fisherman*
or Occupation }
2. Regtl. No. *4935* 3. Rank. *Pte* 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps ; with Regtl. Nos.
4. Name *Beason Matthew*
(Surname) (Christian Names)
5. Age last birthday. *18*
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 (if any)
(b) Where
(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 general 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, &c., 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.)

No complaint 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 ?

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.

Repatriation

W. E. Proctor - Capt RAME

Medical Officer in charge of case.

Station *Hazebrouck*

Date *1.11.19*

* 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



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

Bearan, Matthew

Regiment from which discharged

Royal Newfoundland

Regimental number

1938

Intended address

Three Rock Cove

Height on discharge

5 Feet *8"*

Color of hair on discharge

Light Brown

Complexion

Ruddy

Color of eyes

Brown

Descriptive Marks

—

Figure on discharge

medium

Christian name of Father

Edward

Christian name of Mother

Susanna

Wife's maiden name in full

—

Date and place of marriage

—

Christian names of children

—

Place and date of soldier's birth

Three Rock Cove 23.10. 1899

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)

Matthew Bearan

(Rank)

Private

Station

St John's

Date

21.7.19

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

Deussen

Defect Main. 670.

Turned in by the City Office.

A24.

Rec. Lumber & Fuel Co.

W. K. S.

Captain.

August 11th 1919.

Mr. M. Beasaw,
Three Rock, P. au Port.

Dear Sir:

Referring to your application, I enclose cheque
for seventy dollars (\$70.00) being amount of first
payment due you on account of war service Gratuity.

Yours truly,

Capt. &
Paymaster.

RS/.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

A complete reply must be given to every question in this Declaration There must be no blanks and no dashes; if any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

- Christian name..... M 2. Surname..... Bessan
3. Rank..... Pte 4. Regt. No..... 4938
5. Address in full to which future payments of gratuity are to be forwarded..... Three Rock, Port au Port
6. Date of enlistment in the Regiment..... May 6/18
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
..... No
8. Relationship of such dependents..... —
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?..... No
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..... Fourteen months
- 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?

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

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

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

(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. *Jul 21/19* (b) Reason for discharge.

no

Demobilization

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

England

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

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

(Witness) *D*

Signature of Applicant:

W. H. Bessan

Place of Residence:

Here Rock Co. Paria Port

Declared before me at:

John's

This

7

day of

July

19*18*.....

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

John M. Cartney

POST DISCHARGE PAY.

Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	Net amount due
.....
.....
.....

Certified correct.

Register

The Department of Militia:

The sum of *Twenty Dollars* / *20.00/100* Dollars is due

Mr. for *Transportation*

Reg. No. *4938* Rank. *Pfc* Name *Bealaw M. 3 Rock Cove*
H. Young

from *Stephenville X* to *Three-Rock-Cove*

ACCOUNT	
CH. NO	<i>9289</i>
IND. LEDGER	
PAY LEDGER	
GEN. LEDGER	
	<i>4-2-19</i>

Ed. Council for \$ 20.00/100

A. Snow Captain
Demobilization Officer
W.D.R.


Clam Bank Cove
Three Rock Cove
14-7-19.

Mrs. J. H. Snow.

Dear Sir

I am writing to tell you that
I had twenty dollars ^{\$20.00} expenses.
before I got home. I had 60 miles
to go after I left the train. please
send money as soon as you get
this letter.

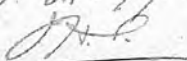
Yours truly,

No 493
Matthew ~~Reagan~~ 

3 Rock Cove

St. John's office, Newfoundland

July 21-19



Sept. 30, 1919

Pte. Matthew Beasaw,
3 Beck Cove,
Hfid.

Dear Sir:

J. C. R.

I enclose cheque for \$20.00
amount of refund due you on account of trans-
portation to your home.

Yours truly,

Major
Paymaster.

IM/
Enc. 1

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S, Nfld.

Fold Here

OCT 15

1921.

The accompanying ~~Victory Medal and/or~~ British War Medal
is/are forwarded herewith to

Matthew Beaseu

in respect of his service as No. 4938 Rank Pte.

Name M. Beaseu Royal Nfld. Regt.
~~Middlesex Regiment~~

Receipt of the same should be acknowledged hereon.

Received Nov. 20th 1921 -

Signature Matthew Beaseu.

Date Dec 5th 1921 -

Address Port-au-Port Three-Rock-Cove,
Newfoundland
[P.T.O.]

C.R. 4938

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

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

Name. *Matthew. Besaw*

Date. *March 16/20*
Place. *Three Rook. Lane.*

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of *Royal Newfoundland*

Number of Sheet *1*

Signature of O. C. Company *G. James*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	
No.	<i>4938</i>	Age on	<i>18</i> years	<i>12</i> months	<i>Justice</i>	
Joined	Date	Place and Date of Enlistment	<i>St John's</i>	Religion	<i>R.C.</i>	
Joined	Date					
Joined	Date	Period of	with Colours	with Reserve	Place of Birth	
Joined	Date					
			<i>91</i> years.	<i>36</i> years.	<i>Three Rocks Cove, Port au Port</i>	

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
				<i>Demobilized</i>	<i>St John's</i>	<i>4</i>	<i>19</i>		

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4958 Rank Plt Name Beason, M.
 Date of Enlistment 6-5-18 Address Three Oaks Ave. District St. George's
 Occupation Fisherman Classification for Discharge E Medical Category H
 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 4-7-19 O. C. Discharge Depot [Signature]

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Matthew ^{his} Beason
Mark
Lat W. H. Eaton

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable #65.00
 (b) Clothing Supplied [Signature]

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

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 82217 to his home at Shree River to G. and Release Certificate No. 3273 issued

Date 7-7-19

J.A. Sawle
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 4-8-19

Date 7-7-19

H. M. M. #1
Depot Paymaster.

Discharge approved for 21-7-19

Forwarded with following documents to O.C Discharge Depot.

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

Date 7-7-19

J.A. Sawle
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUL 21 1919

W. R. Cooke Capt.
O. C. Discharge Depot

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

Date July 28 1919

[Signature]

Reg. No. 4938 Rank *Plt* Name *Beason* *4*

Attested Address *Three Rock Ave*

Allotment..... Allottee ..

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

Returned on S S. *Cassandra* Cause *Discharge*

4.4.19
21.4.19

PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILISATION.

4938

Three K. Cove
Jan. 18/20.

The Military Department C.R. 4938
St. John's.

Dear Sir:—

Having not received
my army ribbon yet, I am writing
to ask you about same.
Would like to know the
reason why.

Yours truly
Matthew Besant
Three K. Cove
Mfld.

Entitled to G. S. Ribband only

G. S. Ribband sent out 2/3/20

K.P.

K.P.