

B. A. R. 1769

1769

ROYAL NEW FOUNDLAND REGT.

1914-1918

Described 22-4-52

(B. A. R.)

*27-10-54
AS*



FIRST NEWFOUNDLAND REGIMENT.

ATTESTATION OF

No. 1769 Name Delas Bird Corps _____

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Delas Bird
2. What is your full Address? 2. Cartwright
Labrador
3. Are you a British Subject? 3. yes
4. What is your Age? 4. 37 Years Months.
5. What is your Trade or Calling? 5. labourer
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, Delas Bird 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.

6 Aug. 11/15 Montgomerie SIGNATURE OF RECRUIT.
Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Delas Bird 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 _____ day of August 191

Signature of the 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 : _____
If enlisted by special authority, such will be attached to the original attestation.

Date _____ 191 _____
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, the 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) _____

Regimental Number 1769

Company 2d

THE
8
1ST NEWFOUNDLAND REGIMENT.

I hereby enlist for service at home or abroad in the King's Forces under the following conditions:

For the duration of the present war, or until my discharge.

Subject to the Army Act, the King's Regulations, and to such ordinances as may apply or may be made to apply to the British Regular Army.

Subject to the Newfoundland Volunteer Act, 5. George V., Chapter IV.

Signed Silas Bird

Witness H. H. Rowell

Dated at Cyr.
May 21st
H. H. Rowell 1916

Medical Report on an Invalid.

Station HAZELEY DOWN CAMP WINCHESTER

Date NOVEMBER 27th., 1918

- | | |
|--|--|
| <p>1. Unit ROYAL NEWFOUNDLAND</p> <p>2. Regimental No. 1769</p> <p>3. Rank PRIVATE</p> <p>4. Name BIRD, SILAS</p> <p>5. Age last birthday 35</p> <p>6. Enlisted { on AUGUST 11th., 1915
at ST. JOHN'S NPLD.</p> | <p>7. Former Trade } LABOURER
or Occupation }</p> <p>7A. If with previous service in Army, state—</p> <p>(a) Former Unit;</p> <p>(b) Regimental No.;</p> <p>(c) Date of Discharge;</p> <p>(d) Cause of Discharge.</p> |
|--|--|

8. Disability in respect of which invaliding is Proposed.

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

GUN SHOT WOUND LEFT HAND

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 venereal disease.

9. Date of origin of disability. **APRIL 12th., 1918**
10. Place of origin of disability. **BELGIUM**
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.
- HE STATES THAT HE WAS STRUCK IN THE LEFT HAND WITH A RIFLE BULLET WHICH PASSED THROUGH MIDDLE JOINT OF SECOND FINGER. HE WAS IN THE 4TH LONDON GENERAL 41 DAYS AND DISCHARGED FROM THERE TO COMMAND DEPOT**
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). **WOUNDED ON ACTIVE SERVICE**
- (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.

MIDDLE FINGER OF LEFT HAND IS STIFF ALSO COMPLICATED WITH SHRAPNEL WOUND AT BASE OF FEMORAL PHALANX OFF SOME DIGIT RECEIVED ON THE 9TH OCTOBER 1917 THE TWO WOUNDS PREVENTING OF CLOSING THE FIST. THUS UNABLE TO HOLD AND EFFECTIVELY USE A RIFLE

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

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

WOUNDED ON ACTIVE SERVICE

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?

YES. REMOVAL OF F. B.

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?

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.

G. S. W. CHEST (SUPERFICIAL)

20. Do you recommend—

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

DISCHARGE AS PERMANENTLY UNFIT FOR ACTIVE SERVICE

(SGD) J. STP. KNIGHT, CAPT. ROYAL Nfld. REGT

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, *except* †

Station _____

Officer in charge of Hospital.

Date _____

*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 invalidated, 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.

21. (a.) State whether the disability is clearly attributable to—
 (i.) Service during the present war ;
 (ii.) Climate ;
 (iii.) Ordinary military service ;
 (iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c. ; or
 (v.) Whether it is constitutional or hereditary.

HAS WEAK GRASP

YES

- (b.) If due to one of the first three of these causes, to what specific conditions do the Board attribute it?

G. 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?

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.

60% for 3 MONTHS

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

27. Do the Board recommend—

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

YES

28. If discharge is recommended it should be stated whether further medical treatment (including orthopedic 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.

REQUIRES FURTHER TREATMENT. CONDITION IMPROVING UP TO TIME OF COMING HOME

29. With reference to Army Council Instruction No. 1275 of 1917, is any surgical appliance recommended?

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

Signatures :—

(SGD) F. S. FRASER

President.

Station **ST. JOHN'S**

J. S. TAIT

Date **JAN. 8TH., 1919**

L. PATERSON, MAJOR

Members.

Approved.

(SGD) CLYNY MACPHERSON, Major

Administrative Medical Officer.

Station

Date



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

MEDICAL HISTORY

Surname Wind OF Christian Name Silas

Table 1.—GENERAL TABLE.

Birthplace:—Parish County Nfld

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>10</u> day of <u>Aug</u> 191 <u>5</u>	on	on	on
at	at <u>St John Nfld</u>		at	at
Declared Age	<u>32</u> years		years	days
Trade or Occupation	<u>Labourer.</u>		years	days
Height	<u>5</u> feet	<u>6</u> inches	feet	inches
Weight	<u>122</u> lbs.		lbs.	lbs.
Chest Measurement {	Girth when fully expanded... <u>35</u> inches		inches	inches
	Range of expansion... <u>4</u> inches		inches	inches
Physical Development				
Vaccination Marks {	Arm			
	Number			
When Vaccinated	<u>120</u>			
Vision	R.E.—V== <u>6/6</u>	R.E.—V==	R.E.—V==	R.E.—V==
	L.E.—V== <u>6/6</u>	L.E.—V==	L.E.—V==	L.E.—V==
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	(a)
(b) Slight defects but not sufficient to Cause Rejection	(b)		(b)	(b)
Approved by (Signature)	<u>Amir & Petersen</u>			
(Rank)	<u>Capt.</u>			
	Medical Officer.			Medical Officer.
Enlisted	at <u>St John</u>	at	at	at
	on <u>11</u> day of <u>Aug</u> 191 <u>5</u>	on	on	on
Joined on Enlistment	Corps. <u>1st Nfld Regt</u>	Regtl. No. <u>1769</u>	Corps.	Regtl. No.
Transferred to	ROYAL NEWFOUNDLAND REGIMENT.			
Became non-effective by	on	on	on	on
(Signature)	day of	day of	day of	day of
(Rank)	191	191	191	191



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 future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
4th London General Hospital, St. Mark's College, King's Road, CHELSEA, S.W.	16	12	16	10	1	17	Pleuro-Chest. Lumbago.	26	healed on admission massage	W. Benson
4th London Gen Hsp St. James Infirmary, Batham, S.W. 12 Sectional	16	1	18	24	5	18	Pleuro-Tuberc. (L. middle)	41	Healed. No emphysema. 2d. Recurred. Discharged 11 38 Victoria Street.	W. Macconnie CAPTAIN, R.A.M.C. (T.), Registrar, 4th London General Hospital.

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.: Examinations 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
12.16.15	1st Inoculation
19.11.15	Vacc. R.P. Graham. Leham
23.16.15	2nd Inoculation
Perham Down 25/6/16	Dentally fit.
	W. Fleming
	St. Dental Officer
27 Nov. 1518	Banded Huxley Down Corp. named E. C. C. (acting as M. C. C.). Saw Dept. Ans. (acting as M. C. C.). M. C. C. Approved & signed.
<p>It is hereby certified that this soldier has been before the Standing Medical Board and has been classified as <u>fit</u> for service in the <u>Infantry</u> branch of the <u>Army</u>. <u>W. Fleming</u> District M.O.</p>	
<p>COMMAND DEPOT, <u>Perham Down</u> Arrived <u>5 6 18</u> Discharged Category</p>	

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. Johns N. L. G.					

MEDICAL REPORT ON AN INVALID.

NOTE.—This Form is only applicable to men discharged from Hospitals; and when filled in is to be attached to A.F. 3972A and forwarded to the CONTROLLER, MINISTRY OF PENSIONS, BURTON COURT, KING'S ROAD, LONDON, S.W. 3.

Name..... Bird Sebas Regt. No. 1769 Rank Pl's Unit and Corps Royal Artillery
(Surname) (Christian Names)

<p>1. State the nature of the disability or disabilities from which this man is suffering.. ..</p>	<p><i>G.S.W. Hand Middle Chest</i></p>
<p>2. What is the present condition of such disability or disabilities?</p>	
<p>3. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic treatment) is desirable in a :— (a) Sanatorium or other institution for tuberculosis (b) Hospital, and if so, what class? (c) Convalescent Home (d) Asylum, or (e) Other institution (f) Is out-patient hospital treatment or treatment at home recommended. If so, which?</p>	<p>NOTE.—Treatment shall only be recommended for the disability for which the man was discharged from the Navy or Army or Air Force during the present war. Provided that if the invaliding disability has been held to be due to or aggravated by service in the present war, treatment may be recommended for an incapacity medically certified as in consequence of that disability.</p>
<p>4. With reference to Army Council Instructions, is any surgical appliance recommended? ..</p>	
<p>5. Is the invalid willing to accept the offer of treatment or not? If not, state the reason given for the refusal, and say whether you consider the refusal reasonable</p>	

Signature President.
 Station Hazley Down
 Date 11-11-18 } Members.

Approved.
 Station
 Date

.....
 Officer in charge, Central Hospital.

STATEMENT BY A SOLDIER CONCERNING HIS OWN CASE.

NOTE.—This Form is to be filled in by every soldier prior to the compilation of Army Form B 179A, whether a patient in hospital or not, and attached thereto. The questions are to be answered in the soldier's own words, and the Form is to be signed by him and the signature witnessed. In the event of the soldier being unable to write he should affix his mark, such act being witnessed.

Regimental No. *1.169*.....Rank. *Pvt*.....Name... *Bird Silas*.....
(Surname) (Christian Names)Unit and Corps } *Regal. V. S. B*

Note.—Before answering the questions below, the soldier is to note that

- (a) The statements made by him will be checked by official records.
(b) In answering Question 2 any special matters which in his opinion caused any unfitness from which he may be suffering or which aggravated it should be clearly stated.

If the soldier is unable to read, the above notes are to be read to him by an officer.

1. (a) In what countries have you served during this war, and for what periods?

Eng. France Belgium

(b) In what capacity?

Infantry

2. If you are suffering from any disease, wound, or injury, state what it is, the date upon which it started, and what, in your opinion, was the cause of it.

(If more space is required a sheet of foolscap should be used, and firmly attached to this form.)

g. s. w Hand left and chest which I used in action which have made me unfit and cannot do very hard work

3. Give the names of any hospitals where you have been treated for the above disease, wound or injury during the present war.

Rouen Hoop 60 days
2nd London 30 =
4th London 50 =

4. Did you suffer from the disease or injury mentioned in above answer to Question 2 or anything like it, before joining the Army? If so, give details and dates.

no

5. Give the names (and addresses if you know them) of any hospitals you were in or doctors who attended you before you joined the Army.

no

6. Give the name of your National Health Approved Society, and (if possible) your Membership Number.

7. What is the name and address of your last employer before joining the Army?

8. (a) What was your occupation before joining the Army?

(b) What was your trade before joining the Army?

(To be checked by A.F.B.64 or A.F.B.103.)

Labourer

L. P.

The above statement has been read over to me; I agree to it, and have nothing further to add.

Station *Hazleydown*

Signed (Soldier) *Silas Bird*

Date *14-11-18*

Signed *R. J. Woods*

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. *R. Rifles Regt.* 7. Former Trade or Occupation } *Labourer*
2. Regtl. No. *1769* 3. Rank. *Pte.* 7a. If the soldier claims previous service in Army, he should state—
4. Name *BIRD* *Silas* (a) Former Regts. or Corps; with Regtl. Nos. *No.*
(Surname) (Christian Names)
5. Age last birthday. *35 yrs.*
6. Posted for duty on. *11/8/15* at. *St Johns*
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 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."

G. S. W. left hand

11. Date of origin of disability. *12 April 1918.*
12. Place of origin of disability. *Belgium*
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.

He states that he was struck in the left hand with a rifle bullet which passed through the middle joint of second finger. He was in Lt Lanson Gen. 41 days and discharged from there for ~~capt~~ command Depot.

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war *Yes*
 - (ii.) Previous active service.. *No*
 - (iii.) Climate in pre-war service .. *No*
 - (iv.) Ordinary military service before the war *No*
 - (v.) Serious negligence or misconduct on the man's part. } *No*
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } *Na.*

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? *Middle finger of left hand is stiff*
(A note should be made as to Weight in all cases also complicated with when it is likely to afford evidence of the progress of the disability.) *Shrapnel wound at base of proximal phalanx of same digit received on 9th Oct. 1917. The two wounds preventing closing of fist thus unable to hold and effectively use rifle.*

16. Was an operation performed? If so, when and what was its nature? *Yes. Removal of F. b.*
17. If not, was an operation advised and declined? *Na.*
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? *Na.*
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? *G.S.W. chest superficial*

20. Do you recommend— *Discharge as permanently unfit for active Service.*

(a) Discharge as permanently unfit? *for active Service.*

(b) Change to United Kingdom? *Na.*

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

W. C. ...

Station *Medical Officer in charge of case.*

Date

* 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 medically boarded before Discharge or Transfer to the Reserve.

INSTRUCTIONS.—Parts A. and D. of this Army Form are to be completed for every soldier prior to his being medically boarded with a view to discharge or transfer to Class W., W.(T), P., or P.(T), of the Reserve, as follows:—

(a) By the O.C. unit prior to the soldier being sent to the Discharge Centre.

(b) By the Officer i/c Central Hospital, when the soldier is a patient in hospital, prior to his being brought before an Invaliding Board.

It is most important that all particulars should be correctly filled in, and that the soldier should be given a full opportunity of examining the Army Form before he signs the Certificate below, as, if awarded a pension, his subsequent identification may depend on the correctness of these entries. The "rank," "station," and "date" following the soldier's signature are to be in his own handwriting.

This Army Form is to be forwarded with the proceedings of the Medical Board to the Officer i/c Records, and Parts B. and C. completed by that officer before forwarding the Form with the remainder of the soldier's documents, to the Controller, Ministry of Pensions, Burton Court, King's Road, London, S.W. 2.

PART A. Soldier's Name Bird, Silas
(Surname) (Christian names in full)

A. Unit from which discharged Royal N.F.L.B.

Regimental Number 1769 Rank on discharge P/Plt Age on discharge 35

Married, widower with children, or single single

Occupation before enlistment labourer

Special qualifications (if any) for }
employment in civil life }

Nature and locality of employment desired

Full postal address to which }
proceeding on discharge } Cartwright Sabados N.F.L.B.

Name of Approved Society (if any)

PART B. Period of service, and in what Corps

Regiment	Years	Days	All service abroad, with Stations	Years	Days
<u>Royal N.F.L.B.</u>	<u>3</u>	<u>90</u>	<u>India</u> <u>South Africa</u> <u>France</u> <u>Belgium</u> <u>Eng.</u>	<u>3</u>	<u>4</u>
Disallowed					
Service towards pension					

PART C. Number of G.C. badges medals

Wounds and actions in which received g. sw. Hand left chest.

PART D. Where born (parish, town and county) and date Cartwright Sabados 12 April 1883

Colour of hair on discharge Black Colour of eyes Brown Complexion Fair

Christian name of father John

Christian name of mother Anna

NOTE.—Army Forms D. 400 and W. 3463A and B are issued in sets in pad form for use with carbon paper in cases where the soldier is a patient in hospital. Army Forms D. 400 and W. 3463A are similarly issued in sets for use in cases where the soldier is not a patient in hospital. The Statements on Parts A. and D. of Army Form D. 400 and on Part A. of Army Forms W. 3463A and B are to be completed by the Officer i/c hospital before a soldier is brought before an Invaliding Board. The Statements on Parts A. and D. of Army Form D. 400 and on Part A. of Army Form W. 3463A are to be completed by the O.C. unit before the despatch of a soldier to the Discharge Centre.

[P.T.O.]

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children and dates of birth _____

Date and place of 1st enlistment St Johns at 7 St. 10 Aug 1915

Figure on discharge _____

Descriptive and other distinguishing marks _____

I certify that I am the soldier referred to and that all the particulars contained in Parts A. and D. above are, to the best of my knowledge, correct.

(Signature in full) Burd Silas

Station Hazleydown

Rank PLS

Date 14-11-18

I certify that the above-named soldier signed the foregoing declaration in my presence.

(Rank)

O.C. unit or Officer i/c Hospital.

THE CONTROLLER,

MINISTRY OF PENSIONS,

BURTON COURT,

KING'S ROAD,

LONDON, S.W.3.

The soldier named overleaf was

Discharged under para. _____ King's Regulations

or

Transferred to Class * _____ of the Reserve.

Strike out
whichever
inapplicable.

Military character _____

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

Officer i/c Records.

Station _____

Date _____ 191 _____

* Insert P., or P.(T).

**Report to the Local Committees of the War Pensions Committee
on Soldiers Discharged.**

- (a) From Central Hospitals or Discharge Centres, as no longer physically fit for war service, under para. 392 (xvi.), King's Regulations.
- (b) From Discharge Centres, as surplus to military requirements (having suffered impairment since entry into the Service) under para. 392 (xvi.a), King's Regulations.

To be sent by the Officer i/c Records, within 24 hours of the receipt of the soldier's discharge documents, to the Local Committee of the Area, in which the man intends to reside.

PART Soldier's Name Bird, Silas (Surname) (Christian names in full)

A. Unit from which discharged Royal W.F.S.L.

Regimental Number 1469 Rank on discharge S.Lt Age on discharge 35

Married, widower with children, or single single

Occupation before enlistment Labourer

Special qualifications (if any) for employment in civil life } _____

Nature and locality of employment desired _____

Full postal address to which proceeding on discharge } Bartwright Sabados W.F.S.L.

Name of Approved Society (if any) _____

PART Nature of medical unfitness L.S.W Hand Chest

B. Service with Colours 3 years 90 days, of which 3 years 7 days were served abroad during the present war.

Military character good

Anything against the soldier to render his recommendation undesirable no

Date of discharge 14-11-18 1918

Station Hazleydown

Date 14-11-18 Officer i/c Records _____

To be completed by the Officer i/c Records.

NOTE 1.—Part B. of this Army Form and Army Form W. 3463B can be completed at the same time by the use of carbon paper.
NOTE 2.—Part A of this Army Form is to be completed by the O.C. unit in all cases of soldiers sent to a Discharge Centre with a view to discharge or transfer to the Reserve, as it will not be known until a soldier is medically boarded whether he may not be discharged under Para. 392 (xvi.) or (xvi.a), King's Regulations.

1 Newfoundland Contingent. "C".

No. 1769. Pte Bird, S.

Admitted to Hospital 16-12-16 suffering from

Phenalin

To report to O.C. H/Q 68, Victoria Street, S.W.



In London.

Baker

Major & Registrar
2nd London General Hospital

dis for buty

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 Fus Regt
2. Regtl. No. 1769 3. Rank... Plt.
4. Name BIRD Silas
(Surname) (Christian Names)
5. Age last birthday... 35
6. Posted for duty on... 11 Aug 1918 at... S. Johns
 in category (or grade).....
7. Former Trade or Occupation } Sabrier
- 7a. If the soldier claims previous service in Army, he should state—
 (a) Former Regts. or Corps ; with Regtl. Nos. na.
8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty ?
9. If a Court of Inquiry was held on an injury state :—
 (a) When
 (b) Where
 (c) Opinion of Court
 (b) Date of Discharge ;
 (c) Cause of Discharge.
 (d) Particulars of Pension or Gratuity (if any)

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 Apr 1918.
12. Place of origin of disability. Belgium.
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.
He states that he was struck in the left hand & a rifle bullet, which passed through the middle joint of 2nd finger. He was in 4th Army General Hospital 44 days and discharged from there for employment command depot.

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | Yes | |
| (ii.) Previous active service | No | |
| (iii.) Climate in pre-war service | No | |
| (iv.) Ordinary military service before the war | No | |
| (v.) Serious negligence or misconduct on the man's part. } | No | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } No.

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.)
 Middle finger left hand is stiff also complicated with rheumatism. Wound at base of femoral phalanx of the digit received on 9th Oct. 1917. The two wounds severely crippling: Thus unable to hold and effectively use rifle.

16. Was an operation performed? If so, when and what was its nature? Yes. Removal of F.b.
17. If not, was an operation advised and declined? No.
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? No.
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? Saw Chest (no medicine)

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.

Director is permanently unfit for active service
 M.M.C.
 Capt. H. H. H. H.

Medical Officer in charge of case.

Station

Date

* 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

Notification to the O.C. Discharge Centre, that a Soldier is sent to a Discharge Centre with a view to Discharge, or Transfer to the Reserve whether in Substitution or otherwise.

NOTE.—Army Forms W. 3961A, B and C are issued in sets of three and so arranged that they can be completed at the same time by the use of carbon paper for despatch by the O.C. unit to the Officers severally indicated.

The O.C. unit is to fill in the address of each Officer, to whom the Army Forms are sent, in the spaces provided below.

O.C. Discharge Centre, <i>Hazleydown Winchester</i>	A.F. W. 3961B has been sent to The Officer i/c Records, <i>58 Victoria London</i>	A.F. W. 3961C has been sent to The Regimental Paymaster, <i>58 Victoria London</i>
--	---	--

Authority has been given for the undermentioned soldier to be sent to the Discharge Centre for:— *repatriation*

- (a) Discharge as no longer physically fit for war service
- (b) Discharge as surplus to military requirements
- (c) Discharge as*
- (d) Transfer to the Reserve
- (e) † Claims repatriation to *U.S.A.*

Strike out whichever inapplicable. In certain circumstances the War Office authorises a soldier's transfer to Class W., or W. (T), of the Reserve only. In cases where the soldier is being sent to the Discharge Centre under such conditions the words "Class W., or W. (T), only" are to be inserted at (d).

- (i) Where enlisted *U.S.A.* (Country) *St Johns N.Y.* (Place)
- (ii) Date of arrival in United Kingdom _____
- (iii) Port of arrival _____
- (iv) Ship on which arrived _____
- (v) Name of Shipping Line or Agent _____

(vi) Names and addresses of two references who can verify the above particulars

No. *1769* Rank *Pvt.*
 Name *Burd Selas* (Surname) (Christian names in full)
 Unit and Corps *Royal N. F.L.C.*
 Authority *B. 179 d. B. C.*

Army Forms B. 179A and B, B. 103, B. 178, D. 400 together with W. 3463A, B. 120, B. 122 and W. 3068, or temporary documents, for the above-mentioned soldier are forwarded herewith.

Station *Hazleydown*
 Date *14-11-15* 191*5* O.C. _____

* Insert cause other than under (a) or (b) above.

NOTE 1.—† If the soldier claims to be repatriated abroad, and is prepared to embark at the first available opportunity, the O.C. unit is to complete such of the particulars as the soldier can furnish before transmitting the Army Forms.

In such a case the Officer i/c Records is instructed on Army Form W. 3961B to investigate the claim and notify the O.C. Discharge Centre by wire whether the claim has or has not been substantiated. In the event of the above notification not having been received from the Officer i/c Records the O.C. Discharge Centre is to refer to that Officer before approving the soldier's discharge.

Notification to the Officer i/c Records, that a Soldier is sent to a Discharge Centre with a view to Discharge, or Transfer to the Reserve whether in Substitution or otherwise.

NOTE.—On receipt of this notification the Officer i/c Records to ensure that he has all the documents of the soldier that should be in his possession, or prepare temporary documents in the event of loss of the originals.

Army Form W. 3961c has been sent to the Regimental Paymaster with instructions for that Officer to return it to the Officer i/c Records after having filed in the particulars of the names and dates of birth of the soldier's children, or particulars of dependants, for whom separation or dependants' allowance is being paid, on receipt of which it is to be attached to the soldier's documents. In the event of the soldier's discharge documents being forwarded to the Controller, Ministry of Pensions, Army Form W. 3961c is to accompany them whenever possible; the despatch of the documents is not, however, to be delayed for this purpose. If Army Form W. 3961c has not been received by the Officer i/c Records from the Regimental Paymaster in time for transmission with the discharge documents, it is to be forwarded to the Controller, Ministry of Pensions, as soon as received.

A.F. W. 3961A has been sent to O.C. Discharge Centre, <i>Hazleydown</i> <i>Wandsworth</i>	The Officer i/c Records, <i>57 Victoria</i> <i>London</i>	A.F. W. 3961c has been sent to The Regimental Paymaster, <i>38 Richmond</i> <i>London</i>
--	---	--

Authority has been given for the undermentioned soldier to be sent to the Discharge Centre for:—

- (a) Discharge as no longer physically fit for war service
- (b) Discharge as surplus to military requirements
- (c) Discharge as* _____
- (d) Transfer to the Reserve
- (e) † Claims repatriation to _____

Strike out whichever inapplicable.
In certain circumstances the War Office authorises a soldier's transfer to Class W., or W. (T), of the Reserve only. In cases where the soldier is being sent to the Discharge Centre under such conditions the words "Class W., or W. (T), only" are to be inserted at (d).

(Country) _____ (Place) _____

- (i) Where enlisted _____
- (ii) Date of arrival in United Kingdom _____
- (iii) Port of arrival _____
- (iv) Ship on which arrived _____
- (v) Name of Shipping Line or Agent _____
- (vi) Names and addresses of two references who can verify the above particulars

No. 1769 Rank Pte
 Name Burd Lewis
 (Surname) (Christian names in full)
 Unit and Corps Royal A. F. L. C.
 Authority B. 179 U. B. C.
 Station Hazleydown
 Date 14-11-19 191 O.C. _____

* Insert cause other than under (a) or (b) above.

NOTE.—† If the soldier claims to be repatriated abroad and is prepared to embark at the first available opportunity, the O.C. unit has been instructed to complete such of the particulars as the soldier can furnish before despatching the Army Forms.

In such a case the soldier's claim is to be verified forthwith, and the O.C. Discharge Centre notified by wire whether it has been substantiated or not.

PART II

Notification to the Regimental Paymaster that a Soldier is sent to a Discharge Centre with a view to Discharge, or Transfer to the Reserve whether in Substitution or otherwise.

NOTE.—This notification is sent in order that the Officer i/c Records, at the time the soldier's documents reach him from the Discharge Centre, may be in possession of particulars of the soldier's children or dependants in respect of whom separation or dependants' allowance is being paid.

The particulars of the children are required by the Ministry of Pensions at the time of assessing the soldier's pension, and it is important that this Army Form should be returned to the Officer i/c Records in time for it to be despatched to the Controller, Ministry of Pensions, with the soldier's documents.

To enable the Ministry of Pensions to make the assessment before the termination of the period covered by the temporary pension allowance and thereby avoid hardship to the soldier, it is essential that there shall be no delay in completing and forwarding this Army Form to the Officer i/c Records.

PART I.

A.F. W. 3961A has been sent to O.C. Discharge Centre,	A.F. W. 3961B has been sent to The Officer i/c Records,	The Regimental Paymaster,
--	--	---------------------------

Authority has been given for the undermentioned soldier to be sent to the Discharge Centre for:—

- (a) Discharge as no longer physically fit for war service
 - (b) Discharge as surplus to military requirements
 - (c) Discharge as* _____
 - (d) Transfer to the Reserve
 - (e) Claims repatriation to _____
- Strike out whichever inapplicable.
In certain circumstances the War Office authorises a soldier's transfer to Class W., or W. (T), of the Reserve only. In cases where the soldier is being sent to the Discharge Centre under such conditions the words "Class W., or W. (T), only" are to be inserted at (d).
- (i) Where enlisted _____ (Country) _____ (Place)
- (ii) Date of arrival in United Kingdom _____
- (iii) Port of arrival _____
- (iv) Ship on which arrived _____
- (v) Name of Shipping Line or Agent _____

(vi) Names and addresses of two references who can verify the above particulars

_____	_____
_____	_____

No. _____ Rank _____

Name _____ (Surname) _____ (Christian names in full)

Unit and Corps _____

Authority _____

Army Form O. 1809E for the soldier is forwarded herewith.

Part II. of this Army Form is to be completed by you, or if necessary by the Secretary T.F. Association, and forwarded without delay to the Officer i/c Records, Station _____

Date _____ 191__ O.C. _____

NOTE.—In cases where a soldier claims to be repatriated and is prepared to embark at the first available opportunity the O.C. unit has been instructed to complete these particulars as far as possible before despatching the Army Forms.

In such a case the Officer i/c Records has been instructed to verify the claim and notify the O.C. Discharge Centre whether it has been substantiated or not.

PART II.

Notification to the Regimental Paymaster that a Soldier is sent to a Discharge Centre with a view to Discharge, or Transfer to the Reserve whether in Substitution or otherwise.

The soldier named in Part I of this Army Form is: (a) Married for a Widower

The following are the particulars in order of date of birth of children in respect of whom separation allowance is being paid at the date of this notification.

NOTE - If the surname of any of the children is not the same as that of the soldier the name is to be inserted after the Christian name.

Table with columns: Christian Names (in full), Sex, Dates of Birth. Includes handwritten entries for children's names and birth dates.

(b) Unmarried or a widower with the following dependants for whom an allowance is being paid: (i) Unmarried and without dependants (ii) The address of his family or dependants is Carlomag Sabra...

Station: _____ Regiments Paymaster or Secretary T.F. Association. Date: 191...

PART III.

The Secretary T.F. Association. Station: _____ Date: 191...

You are requested to complete the particulars in Part II. above and forward the Army Form immediately to the Officer i/c Records. Station: _____ Date: 191...

ST. JOHN'S, May 16th /19

Royal Newfoundland Regiment.

Billeting Account,

To Mr. S. Bird

Billeting Soldiers as undermentioned

from May 9th /19 to May 16th /19

1769 - Mr. S. Bird 7 20

ACCOUNT NO.	<u>B. M.</u>
NO.	<u>20503</u>
PAY LEDGER	INITIALS
GEN LEDGER	<u>7.</u> <u>LS</u>

Certified correct for \$
7.
paid

McClouston
For. Billeting Officer.

S. Bird R.V.
May 17 /19.

LAST PAY CERTIFICATE

LAST P. AN.F.P./94 R.P. 1

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 26/5/17.

Regtl No. 1769 Rank Pte Name Burd S. Unit ROYAL NEWFOUNDLAND REGT who was repatriated
to Newfoundland on 11/12/18 Authority _____ Cause _____

STATEMENT OF ACCOUNT

STATEMENT OF ACCOUNT

DR.

PERIOD:	PARTICULARS	£ s d					PARTICULARS	£ s d				
		£	s	d	£	s		d				
From 23/11/18 To 20/12/18	Balance Dr. from						Balance Cr. from					
	Allotment 19 days @ 60¢	11	40	2	6	11	Pay 19 days @ \$ 1.00	19	00			
	Cash Payments:						Field Allow 19 days @ \$ $\frac{10}{100}$	1	90			
	18 Pay				13	6	Other Allowes days @ \$	20	90	4	5	11
	22 "			1	3	7	Other Credits:					
	Other Debits:						Total Credits			4	5	11
	B. Damages					6	Balance due to Paymaster					
	Mis. Stopp.				1	5						
	Total Debits			4	5	11						
	Balance due by Paymaster											

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

7th Co.
HAZELEY DOWN CAMP (Place) Dec 11th 1918 (Date)

[Signature]
DAO.C. "A" Company. (Place)

Made up/Checked in accordance with information received in the Pay & Record Office with informants received in the _____ and is therefore subject to amendment if and as may be found necessary. subject to amendment if and as may be found necessary.
Pay & Record Office, London, Pay & Record Office, London.

Chief Paymaster & Officer i/c Records.

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.L./19, 28/5/17.

Regtl No. 1769 Rank Plt Name Bird S. Unit ROYAL NEWFOUNDLAND REGT who was repatriated
 to Newfoundland on 11/12/18 Authority _____ Cause _____

STATEMENT OF ACCOUNT

DR.	PARTICULARS	£ s d					PARTICULARS	£ s d					CR.
		£	s	d	£	s		d	£	s	d		
PERIOD: From 23/11/18 To 20/12/18	Balance Dr. from						Balance Cr. from						
	Allotment 19 days @ 60 ^c	11	40	2	6	11	Pay 19 days @ \$ 1 ⁰⁰	19	00				
	Cash Payments:						Field Allowance 19 days @ \$ ¹⁰ / ₁₀₀	1	90				
	18 th Pay				13	6	Other Allowances days @ \$	20	90	4	5	11	
	20 th "			1	3	7	Other Credits:						
	Other Debits:						Total Credits			4	5	11	
	B. Damages					6	Balance due to Paymaster						
	Mis. Stopp.				1	5							
	Total Debits			4	5	11							
	Balance due by Paymaster												

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of _____
 (Place) Hazeley Down Camp (Date) Dec 11th 1918

Made up/Checked in accordance with information received in the Pay & Record Office _____
 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

Pay & Record Office, London.

Chief Paymaster & Officer i/c Records.

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.

S. Bird

Signature of Man.

Reg. No. *1769*

J. H. Shaw Capt

Signature of the Vocational Officer or his Representative.

Place

St Johns

Date

16-6-79

191

July 14, 1919

#1769 Pte. Silas Bird,

Sartwright,
Labrador.

Dear Sir:-

Please find enclosed Discharge Certificate #3000.

Yours truly

Raymaster & O.I/c Records
Captain.

July 16, 1919

#1769 Pte. Silas Bird,
Cartwright,
Lebr dot.

Dear Sir:-

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

Yours truly,

Captain,
Paymaster & O.i/c Records.

C.R.

1769

Extract of Casualties received from Pay & Record
Office, London, dated October 30, 1916.

#1769 Pte. S. Bird. ✓

Wounded 12/10/16 and reported by O.C. Bn, 14/10/16.

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..... *Silas* 2. Surname..... *Bird*

3. Rank..... *Pte* 4. Regt. No..... *1769*

5. Address in full to which future payments of gratuity are to be forwarded..... *Cartwright, Labrador*

6. Date of enlistment in the Regiment..... *Aug. 7/15*

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

8. Relationship of such dependents.....

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

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

11. Were you on active service only in Nfld. or *overseas* and particulars of such service.....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *From Aug. 7/15 to*

June 16/19 1. ³/₄

S. Bird

Signature of Applicant:

Place of Residence:

Declared before me at:

This

*Barthright Labrador,
St. John's, Nfld.
17th day of Aug 1919.
John M. Cooney*

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 due
Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	
.....
.....
.....
Certified correct.				Paymaster

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.L./19, 28/5/17.

Regtl No. 1769, Rank Pte. Name Bird, S. Unit ROYAL NEWFOUNDLAND REGT. who was repatriated
to Newfoundland on 11/12/18 Authority _____ Cause _____

STATEMENT OF ACCOUNT

DR.

CR.

PERIOD: From 23/11/18 To 20/12/18.

PARTICULARS					\$	£	£	s	d	PARTICULARS					\$	£	£	s	d	
Balance Dr. from										Balance Cr. from										
Allotment 19 days @ 60¢					111	40	12	6	11	Pay 19 days @ \$ 1.00					119	00				
Cash Payments:										Field Allow 19 days @ \$ 1.00					119	00				
1st Pay								18	6	Other Allowes days @ \$					120	90	14	5	11.	
2nd "							1	3	7	Other Credits:										
Other Debits:										Copy sent to of to 21303/210										
B. Damages									6	P.A. 24/12-18.										
Miss Stopp.							1	5		Total Credits:								14	5	11
Total Debits							14	5	11	Balance due to Paymaster								14	5	11
Balance due by Paymaster							14	5	11											

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

F.C.
HAZELEY DOWN CAMP. Dec. 11th 1918.
(Place) (Date)

J. V. ...
O.C. "F" Company.

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

Pay & Record Office, London,

Chief Paymaster & Officer i/c Records.

Reply → 28th, 8. 6.30pm.

Private Party
8 Newark Street.
Ayr.

Private Bird not reported Casually
Synoptical.

8507/1

1769, Pte. S. Bird,

9, Main Street,

Prestwick, Ayr, N.B.

30th May

8

Remittance from Newfoundland.

Postal Draft for £10:0:0 in respect of remittance from
Newfoundland, forwarded at request of Minister of Militia.

4811

No. 1769. Rank Pte Name Bird S.

Pay	F.A.	kg	Total
100	10		110
Less: Allotment			60
Net Rate			50

DEBITS	Date	£	s	d	CREDITS	Period		Days	Rate	£	s	d					
						From	To										
<i>P.M.A.</i>				4	2	✓											
Balance					Balance		8/6/17					6	6	3	✓		
Acquittance rolls		7	14	0	✓	Pay @ net Rate	9/6/17	19 1/2	223	50	111	50	22	19	3	✓	
Hospital Advances																	
A.B. 34 (80 fms)		2	18	8	✓	Ration allowance								1	4	6	✓
P. & R.O. Payments						14 days @ 1/9											
							18 1/2	30 1/2	13	53		6	50	1	6	9	✓
Cash 5275	17 1/2	5	0	0	✓	(14-12-2)											
45-16-10						2-2											
						1-8-11 ✓											
<i>H.C.</i>																	
Cheque 7442				14	10	0											
30-6-10 Cash 5468	30 1/2	1	8	0	0												

H.C.

~~309~~
31-15-9

No. _____

NEWFOUNDLAND CONTINGENT

N.F.P./55.

To: _____

1769 P. S. Bird

London

Pay & Record Office,
58, Victoria Street,
London, S.W. 1,

Jan 30th 1918

Herewith _____

Postal draft value £10:0:0 being remittance from
Minister of Militia, St John's Nfld.

Please acknowledge receipt hereon.

(Sig.) 1769 P. S. Bird

(Date) _____

Jan 30th 1918

F. H. Marshall
Chief Paymaster & Officer in Charge Records.

NEWFOUNDLAND CONTINGENT

N.F.F./100

CIVIL EMPLOYMENT FORM

To be completed and signed by the Soldier and countersigned by the Officer Commanding his Company, and forwarded in DUPLICATE to the Pay & Record Office, 58, Victoria Street, London, S.W.1.

Regtl No. 1769. Rank Pte.
Surname Bird Christian Names Silas

1. What was your regular occupation previous to enlistment? Labourer.

2. Are you able to resume the same occupation? No.

3. Will your former occupation be open to you when you have received your discharge? Yes.

4. If you do not think so, state fully reasons why.

5. If your former occupation is no longer available, what form of employment do you now seek? ?

6. If a new form of employment is rendered necessary by disability caused by Military Service, what training do you consider requisite?

J. V. ...
Signature of O.C. "F." Company.

S. Bird
Signature of Soldier.

Dated at

Hayley Down Camp
Winnipeg
Dec 6th 1918

1918

C.R. 1769

Silas Bird

was attested for General Service

with the NEWFOUNDLAND REGIMENT on August 11th 1915

Regimental No. 1769 was allotted to Pte S. Bird

AUTHORITY:

Record Officer

Dept. of Militia,

March 25th, 1919.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 1769 Rank Pte Name Bird J
 Date of Enlistment 10.8.15 Address bartwright District Labrador
 Occupation Labourer Classification for Discharge B Medical Category C
 Recommendation S.M.B. Permitly profit Disability Rating 60% 3 mo.
 Passed to Demobilization Officer with following documents:—

N.F. P 36 <u>94</u>	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 11.1.19 O.C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

J Bird

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 Adm Colvin Lt

Date 16-6-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. to his home at Birmingham and Release Certificate No. 2824 issued.

Date 16-6-19 J. H. Snow 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 14-7

Date 11-1-19 Depot Paymaster J. H. Snow

Discharge approved for 30-6-19

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
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 16-6-19 J. H. Snow Demobilization Officer

APPROVED.

Documents as above forwarded to:—
 Officer i/c Records.
 Board of Pension Commissioners.
 with following additional documents.

ELIGIBLE for POST DISCHARGE PAY

Date JUN 30 1919

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

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

Date June 30/19

J. H. Snow



DEPARTMENT OF MILITIA

ADDRESS REPLY TO
DEPARTMENT OF MILITIA
AND QUOTE NO.

ST. JOHN'S, NEWFOUNDLAND,

January 18th., 1919.

From:- D. M. S.
To:- O. C. Depot.

1769, Pte. Bird, Silas.

on strength X.F.

The marginally noted man had better be kept on the Strength for the present as he requires further treatment.

He will report for Massage Monday, Wednesday and Friday evenings at this office.

Cluny Macpherson

Major, D. M. S.

CM-AMB.

R.S.M.

39 Freshwater Rd.

to report Monday -

Reg. No. *1769* Rank *Pte* Name *Bras. J*
Attested Address *Cartwright Lab*
Allotment..... Allottee
Date of Allotment..... Returned from Overseas *21-12-18*
Embarked for Overseas Cause *Discharge*

8.1.19 Rec. Discharge permthly unfit - Further Treatment

11-7-19 PASSED TO DEMOBILIZATION OFF.

30.6.19 DISCHARGE APPROVED ON DEMOBILIZATION.

ORIGINAL

LAST PAY CERTIFICATE

LAST P.A.N.F.P./94 R.T.I.F

To be rendered for all ranks on discharge, transfer to other units; or on returns to Newfoundland in accordance with C.L./19, 28/5/17.

Regtl No. 1769 Rank Pte. Name Bird S. Regtl No Unit ROYAL NEWFOUNDLAND REGT New who was repatriated Authority to Newfoundland on 11/12/18.

STATEMENT OF ACCOUNT

STATEMENT OF ACCOUNT CR.

Table with columns for PARTICULARS, \$, £, s, d. Rows include Balance Dr. from, Allotment 19 days @ 60¢, Cash Payments (18 pay, 2nd), Other Debits (B. Damages, Mis. Stopp), Total Debits, Balance due by Paymaster. Credit side includes Balance Cr. from, Pay 14 days @ \$1.00, Field Allowance 19 days @ \$1.00, Other Allowances, Other Credits, Total Credits, Balance due to Paymaster.

PERIOD: From 23/11/18 To 11/12/18

S.P. 18/10/18

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

To HAZELEY DOWN CAMP. Dec 11th 1918.

(Place) J. W. ... Company.

(Place) Checked in accordance with information received in the Pay & Record Office ... and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

Pay & Record Office, London,

Chief Paymaster & Officer i/c Records.

Dec. 19th 1918.

C.R. 1769

Extract from Nominal Roll of MFLA, Regt. Draft No. 22
Proceeded Overseas 24-3-17. Embarked Southampton, 25-3-17.

1769 Pte. S. Bird.

C.R.

1769

Extract from Daily Orders Part 11 Unit The Newfoundland
Regt. Station 3rd Echelon, B.E.F. 30/12-16.

1769 Pte. S. Bird

To England 14/12-16 per H.S. Western Australia.

C.R. 1769

Extract from Daily Orders Part II Royal Newfoundland Regiment
Depot St. John's dated 17-7-19.

~~Extract from~~

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from noted date
14-7-19.

1769, Pte. Silas Bird.

C.R. 1769

Extract from Nominal Roll of RFLM. Regt, Draft
No. 6. from 2nd Bn., Depot, to 1st Bn., B.S.F.
Embarked Southampton, 14-8-16.

1769 Pte. S. Bird.

C.R. 1769

Extract from Daily Orders Part 11 Unit The Royal Nfld.

Regt. St. John's, June 19th, 1919.

The discharge of the undernoted on demobilization has been
APPROVED by O.C. Discharge Depot with effect from ~~29-6-19~~.

30-6-19

1769 Pte. Silas Bird.

C.R. 1769

Extract from Medical Board held Wednesday Jan.
8th, 1919.

1769 Pte. S. Bird.

Recommended discharge as Permanently Unfit.
REQUIRES FURTHER TREATMENT.

C.R. 1769

Extract from Daily Orders part 11, Depot St. John's dated Dec. 23rd. 1918.

The u/s returned from Overseas and reported at Depot 21-12-18.

#1769 Pte. S . Bird.

C.R. 1769

Extract from Nominal Roll of repatriation draft No. 79 per S.S. CORSIAN
which embarked at Milbury Docks 18/18/18
from the 8nd., Battalion of the Newfoundland Regiment.

#1769 Pte. S. Bird.

CR 1769

Extractf from Daily Orders, Part 11, UNIT: The Royal Newfoundland
Regiment, by Lt. Col. B.J. Barton, D.S.O., Commanding 2nd Bn.,
Royal Newfoundland Regiment, dated 8/7/18.

The undermentioned having reported back from the 1st Battalion,
are posted to "H" Company:-

1769 Pte. S. Bird.

C.R. 1769

Extract of Telegram to Synoptical London dated May 27th 1918.

Pay as follows:-

1769 Bird

Royal Nfld. Regt..... 10 pounds.

C.R. 1769

Extract of Casualty received from Pay and record Office, London
dated 6th. May 1918.

1769 Pte. S. Bird.

Wounded 13/4/18.

Auth: O.C. Unit 22/4/18.

C.R. 1769

c April 19, 18

Dear Mr. Bird:-

I regret to have to inform you that a report has this day been received from the Record Office of the Royal Newfoundland Regiment, London, to the effect that No. 1769, **Silas Bird**, Private, St. James Infirmary Balham shell wound left finger

I trust that later reports will bring news of his convalescence.

Any further information received at this Office as to his condition will be at once notified to you.

Yours faithfully,



Acting Minister of Militia.

Mr. John Bird,
Cartwright, Lab

October 23, 1917.

Dear Sir,

I regret to have to inform you that a report has this day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that

No. 1769, Private Silas Bird, was at the 2nd Casualty Clearing Station, LeTreport, on October 10th, suffering from a severe gunshot wound in the left hand.

I trust that later reports will bring news of his convalescence.

Any further information received at this Office as to his condition will be at once notified to you.

Yours faithfully,

Colonial Secretary.

Mr. John Bird,
Cartwright,
Labrador.

1769 PTE.SILAS BIRD. ✓

C.R. 3853

EXT.OF CASUALTY LIST RECEIVED OCT.23rd 1917.

2nd.CASUALTY CLEARING STATION.LetREPORT OCT.10th

G.S.W.LEFT HAND SEVERE.

September 7, 1917.

Dear Sir,

I regret to have to inform you that a report has this day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 1769, Private Silas Bird, was wounded on the 23rd August.

I trust that later reports will bring news of his convalescence.

Any further information received at this Office as to his condition will be at once notified to you.

Yours faithfully,

Colonial Secretary.

Mr. John Bird,
Cartwright,
Labrador.

C.R. 3629

1769 Pte. Silas Bird.

Ext. of Casualty list received Sept 7th., 1917.

Wounded August 23rd.

SICK AND WOUNDED N.C.Os AND MEN OF THE EXPEDITIONARY FORCE - FRANCE.HOURSLOW RECORD OFFICER:LIST NO.H.A.5146.

55491 Pte. Cheverton, E.A.	20/R.Fus.	Impetigo Sev.....	Adm.5	Gen.H.Rouen, 14th Dec.16.
59552 Pte. McNamara, W.	35/R.Fus.	MYD S.Slt.....	Adm.5	Gen.H.Rouen, 14th Dec.16.
21569 L/C. Duffield, R.	10/R.W.Surr.R.	Scabies.....	Trans.to 2 Con.Dep.Rouen ex 5 Gen.H.	14th Dec.16.
2440 Pte. Baker, G.	2/R.Suss.R.	Conjunctivitis.....	To Eng.per Amb.Train ex 5 Gen.H.	14th Dec.16.
15932 Pte. Summers, C.	1/lx.R.	Inf.Conn.Tissue.....	To Eng.per HS. "Western Australia" ex 5 Gen.H.	14th Dec.16.
2527 Pte. Lee, G.	7/R.W.Kent R.	GW.VIII(4)IX(I)	-do-	
		XI Knee.		
7852 Pte. Wilsher, A.	7/R.Fus.	GI.IV.(I).....	To Eng.per HS. "Western Australia" ex 5 Gen.H.	14th Dec.16.
5376 L/C. Ball, S.	1/R.W.Surr.R.	Trench Foot Sev.....	Adm.5	Gen.H.Rouen, 15th Dec.16.
5492 Pte. Hiett, C.	1/R.W.Surr.R.	Trench Feet Sev.	-do-	
21874 Cpl. Graham, A.	1/ -do-	Trench Feet Sev.	-do-	
37014 Cpl. Oakes, L.W.	1/R.W.Surr.R.	Trench Feet Sev.	-do-	
7555 L/C. Cousins, J.	1/R.W.Surr.R.	Trench Feet Sev.	-do-	
57147 Pte. Pearce, J.	1/ -do-	-do-	-do-	
5429 Cpl. Burch, E.	1/ -do-	-do-	-do-	
10647 Pte. Chenenry, F.C.	1/ -do-	-do-	Slt.	-do-
24436 Cpl. Morgan, J.	1/ -do-	-do-	Sev.	-do-
24476 L/C. Lerrison, G.N.	1/ -do-	-do-	-do-	-do-
21886 Pte. Hyder, J.	1/ -do-	-do-	-do-	-do-
4121 Pte. Herby, G.	1/ -do-	-do-	-do-	-do-
10506 Pte. Pannell, C.	1/ -do-	-do-	-do-	-do-
10850 Pte. Shortell, E.	1/ -do-	Inf.Conn.Tissue.....	Trans.to 2 Con.Dep.Rouen, ex 5 Gen.H.	15th Dec.16.

NEWFOUNDLAND CONTINGENT.LIST NO.H.A.5146.

1769 Pte. Bird, S. 1/Newfoundlands. GW.IV(I)..... To Eng.per HS. "Western Australia" ex 5 Gen.H. 14th Dec.16.

FOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

The 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

December 19, 1916.

To

Mr. John Bird,

Regret to inform you that Record Office,
Cartwright.

London, officially reports

No. 1769, Private Silas

Bird, is at Second London General Hospital, Chelsea,
suffering from lumbago severe.

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

J. R. BENNETT,

Colonial Secretary.

C.R. 1769

Extract of Casualty List received from P. & R.O. Dec. 18th 1916.

1769 Pte S. Bird.

Admitted 2nd London General Hospital Chelsea S.W..16/12/16.

Lumbago Severe.

C.R. 1769

Copy of Cablegram to Governor St. John's Nfld. Dated 18/12/16.

1769 Pte Bird.

2nd London General Hospital, Chelsea, Lumbago Severe.

C.R. 1769

Extract from Casualties from London District, #0007 dated

27-10-16.

1769 Pte. S. Bird.

WOUNDED 12-10-16.

AUTHORITY O. C. NO. 14-10-16 P. R. HIL.

BC.

C.R. 1769

Extract of Casualties received from Pay & Record Office,
London, dated October 24, 1916.

The

#1769 Pte. S. Bird.

Gunshot wound IV (1)

Admitted 5th General Hospital, Rouen, 14th October 1916.

C.R. 1769

Extract of casualties received from Pay & Record Office,
London, dated October 24, 1916.

The following Casualty in the 1st. Field. Regt. with the
British Expeditionary Force is reported under various date:

#1769 Pte. S. ^{Bird}~~Baird~~.

Wounded.

✓

COPY OF TELEGRAM.

Dated
M 24th October, 1916.

Mr. John Bird,
Cartwright, Labrador.

Regret to inform you that the Record Office,
No. 1769 Private Silas Bird
London, officially reports
**at Fifth General Hospital Rouen October fourteenth Gunshot
Wound Chest.**

Upon receipt of further information I shall immediately wire you and trust that the next report will be of his convalescence.

J. R. BENNETT,

Colonial Secretary.

C.R. 1769

Extract from Casualties received from P.&.R. Office London,
Oct. 24. 1916.

5th General Hospital Rouen, Gunshot wound Chest:

1769 Bird.

C.R. 1769

Extract from Nominal Roll of Draft which embarked for
B.E.F. on or about the 20 June 1916.

#1769 Pte.S.Bird.

C.R. 1769

Extract from Nominal Roll, entrained St. John's 27/10/15 for Oversees

#1769 Pte. S. Bird.

NOV 8
8-AM
1951

51
MAY
NOV 8
60

NOV 8 1951
ST. JOHN'S Nfld.

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

ST. JOHN'S Nfld.

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld

Fold Here

10-9

SEP 11 1921

1921.

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

Silas Bird

in respect of his service as No. 1769 Rank Pte.

Name S. Bird Royal Nfld. Regt.
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received The Victory Medal & British War Medal.

Signature Silas Bird.

Date October 15th 1921

Address Cartwright- Labrador.

[P.T.O.]

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

Handwritten signature

RECEIVED
21
277

ST. JOHN'S
ALB
21

June 27th., 1921. 1919.

The accompanying King's Certificate, on his discharge,

(No. 654), is forwarded herewith to

Private Silas Bird

in respect of his service as No. 1769 Rank Pvte.

Name Silas Bird Corps Royal Nfld. Regt

Receipt of the same should be acknowledged hereon.

Received King's Certificate

Signature Silas Bird *[Signature]*

Date 26 July 1921

Address Cartwright Labrador

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 1769 Rank Plt Name Burd J
 Date of Enlistment 10.8.15 Address St. John's District St. John's
 Occupation Labourer Classification for Discharge B Medical Category 6
 Recommendation S.M.B. Assembly unfit Disability Rating 60% 3 mo.

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 11/19 W. J. Burdley Capt.
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment not
 I am.....in a position, to resume civilian occupation.
J. Burd
 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~~.....Alto Colchester Lt
 Date.....16-6-19
 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 2824 to his home at Barnstaple and Release Certificate No. issued.

Date 16-6-19

J. H. Snowless
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 14-7-19

Date 16-6-19

J. H. Snowless
Depot Paymaster.

Discharge approved for 30-6-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36 <u>944/11</u>	B 268	B 121	N.F. Med.	D.F. 1
E 178	W 3494	B 122	Board 1st	" 2
R 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 16-6-19

J. H. Snowless
Demobilization Officer.

APPROVED.

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

with following additional documents.

ELIGIBLE for POST DISCHARGE PAY

JUN 30 1919

Date

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

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

Date

Army Form B. 103, OCCUPATION CARDS DISPATCHED *14/6/18* Regimental Number *1769*
Casualty Form - Active Service.



Regiment or Corps *1st Newfoundland*
 Rank *Private* Surname *David* Christian Name *William*
 Religion *Church of England* Age on Enlistment *23* Years *11* months
 Enlisted (a) *H. Johns* Terms of Service (a) *duration of war* Service reckons from (a) *Aug. 11/1915*
 Date of promotion to present rank Date of appointment to lance rank
 Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and Rate
 Occupation *Labourer 2 (Fisherman) S* Signature of Officer

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 <i>Shampton</i>	<i>25.3.17</i>	
			Disembarked... <i>Rouen</i>	<i>26.3.17</i>	
			Joined Battalion	<i>18 APR 1917</i>	<i>B 213</i>
<i>26.8.17</i>	<i>O.C. Unit</i>	<i>Wounded in Action</i>	<i>Belgium</i>	<i>23 AUG 1917</i>	<i>B 213</i>
<i>4.9.17</i>	<i>Do</i>	<i>Ad. Hosp Liek</i>		<i>23.8.17</i>	<i>B 213</i>
<i>25.8.17</i>	<i>130 F.A.</i>	<i>Ad. P.U.O. Trans.</i>	<i>14.6.R.S.</i>	<i>23.8.17</i>	<i>E.D. 9643</i>
<i>1.9.17</i>	<i>14.6.R.S.</i>	<i>Discharged to Unit</i>		<i>28.8.17</i>	<i>E.D. 440</i>
	<i>O.C. Unit</i>	<i>Wounded in Action</i>		<i>9 OCT 1917</i>	<i>B 213 12 OCT 1917</i>
<i>9-10-17</i>	<i>897A</i>	<i>ad G. SW left hand thumb</i>	<i>by Col S.</i>	<i>9-10-17</i>	<i>E.D. 1933</i>
	<i>2 Camp St</i>	<i>Do</i>	<i>Le Havre</i>	<i>10/10/17</i>	<i>A.A. 15079</i>
	<i>5 Grand St</i>	<i>Do</i>	<i>Do</i>	<i>30/10/17</i>	<i>A.A. 15788</i>
<i>18/11/17</i>	<i>21 Grand St</i>	<i>Joined Base Depot</i>	<i>Rouen</i>	<i>18/11/17</i>	<i>Rou</i>

W.I.C. Bn 30.12.17

(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.

1769 W. S. Bird

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				
<i>13/4/18</i>	<i>27/4/18</i>	<i>Wounded in action</i>		<i>13/4/18</i>	<i>B 213</i>
	<i>24 Gen 18/18</i>	<i>Ad Grosjean</i>	<i>Etampes</i>	<i>14/4/18</i>	<i>HA 22005</i>
		<i>Transferred to England</i>		<i>16/4/18</i>	<i>W 3083</i>
		<i>n.7 Filgate</i>	<i>MAJOR</i>		
			<i>Industry Section</i>		
			<i>G.H.Q., 3rd Division</i>		
		<i>Joined.</i>		<i>25.3.18.</i>	
		<i>Posted. 2nd Newfoundland</i>	<i>Winchester</i>		
		<i>Category A III</i>		<i>67.8.</i>	

No. 1 Wing Southern Command Depot
Perham Down nr. Andover HANTS.

No. 1 Wing Southern Command Depot
Perham Down nr. Andover Hants.

W. J. Jones *2/12/18*

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 1769 Rank Plc Name Silas Bird
 Intended place of residence Cartwright Lab

2. Occupation Fisherman
 Classification of soldier B Medical Category E

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

 **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 JUN. 16. 1919
 [Signature]
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date 16-6-19 S. Bird
 Signature of soldier
ST. JOHN'S. [Signature]
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date 16-6-19 S. Bird
 Signature of soldier
ST. JOHN'S. [Signature]
 Signature of witness S.P.

STATEMENT OF SERVICE

7. Enlisted for service 10-8-15 No of days on Military
 Discharged from service 30-6-19 plus 14 days Service 1435

APPROVAL OF DISCHARGE

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

Place [Signature]
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date JUN. 30. 1919

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place [Signature] [Signature]
 Officer i/c Records
 The Royal Newfoundland Regiment
 Date July 14/1919

2137079/3000

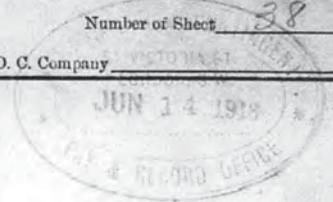
Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.
Forms B. 121. 39.
(6-6) W5017/2124 1000m 6/15ss 93 56

Regiment of 1st Newfoundland

Number of Sheet 38
Signature of O. C. Company _____



Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay		
No.	<u>1769 Silas Bird</u>	Age on	<u>32 years 3 months</u>	<u>Labourer</u>			
Joined _____	Date _____	Place and Date of Enlistment	<u>St John's Aug. 11. 1915</u>	Religion			
Joined _____	Date _____	Period of	{ with Colours <u>3 3/8</u> years. { with Reserve <u>3 6/8</u> years.	Place of Birth			
Joined _____	Date _____			<u>St John's</u>			

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
<u>Camp -</u>	<u>10-6-16</u>	<u>Act.</u>		<u>Absent from Draft parade at 7 PM</u>	<u>Supt. L. Lilly</u>	<u>7 days CB</u>		<u>Act. -</u>	
<u>Racecourse.</u>	<u>20-2-17</u>	"		<u>Dismounting guard with dirty Rifle.</u>	<u>Sgt. M. Noonan</u>	<u>1 days CB</u> <u>Extra Guard.</u>	<u>10-6-16</u> <u>21-2-17</u>	<u>Whitaker.</u> <u>R. W. Bartlett Lt.</u>	<u>Thru</u> <u>g.c.</u>
				<u>Demobilized 14th 19</u>					

To be carried over