

### FIRST NEWFOUNDLAND REGIMENT 4275

# ATTESTATION OF

	Questions to be put to the Recruit before Enlistment.
1.	What is your name? 1. Other Pashof
	2 Hollus Jul-
2.	What is your full Address?
3.	Are you a British Subject? 3
4.	What is your age?
5.	What is your Trade or Calling? 5.
6.	Are you Married? 6
7.	Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which? 7
8.	Are you willing to be vaccinated or re-vac-
9.	Are you willing to be enlisted for General Ser-
	Did you receive a Notice, and do you under- stand its meaning, and who gave it to you?} 10.
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?
mac	by me to the above questions are true, and that I am willing to fulfil the engagements made.  Allan Richard SIGNATURE OF RECRUIT.  The state of Witness.
bou	OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.  do make oath, that I will be faithful and true allegiance to His Majesty King George the Flith, His Heirs and Successors, and that I will, as in duty and, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against memies, according to the conditions of my service.
	CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.
he '	The Recruit above named was cautioned by me that if he made any false answer to any of the above questions 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
	eplied to, and the said recruit has made and signed the declaration and taken the oath before me at
on 1	Signature of Attesting Officer States Vice
	†CERTIFICATE OF APPROVING OFFICER.
	I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the re-
quir	ed 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.
Dat	X
	Approving Officer
Pla	

# DESCRIPTIVE REPORT ON ENLISTMENT Applicable to all ranks. To correspond with entries on the Medical History Sheet.

			Bush									
pparen	it age	21	years	1 . mor	iths.	He	eight.		5	feet	10	inches
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	(a)			(b)		(0)					(d)	. 4
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rvice town in a large of the la	Depot ards limite	casual dengagother with the state of the sta	Reductions, ties, &c.	Army Rank  Decer  Ly 10  Ran  Ran  Ron  Long  Done  Long  Done  Company  Co	Dates  12.17  Les Ho  Les Jan  a present	Service I lowed to I for fix lo rate of private of priv	not al- reckon ig the generation by	Service i erve not de to reci vards G. Years		tying to the second	correcti	20-3-

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt. St. John's, July 14th, 1919.

The discharge of the undernoted on demobilization has been CONFIRMED by Officer i/c Records from 10-7-19.

4275 Pte. Allan Bishop.

Extract from Dadly Orders Part 11 Unit The Royal Efid. Regt. Depot St. John's, June 28th, 1919

The discharge of the undernoted on demobilisation has been APPROVED by O.G. Discharge Repot with effect from 26-6-19.

4275 Pte. A.Bishop.

Extract from Paint Orders Part II Depot. St. John's, Date June 18th 1919.

4275, Pte. A. Bishop.

Reported at Headquarters 1/6/19. \*\* "Corsican" which sailed Liverpool May 22/1919.

Extrast from Fominal Roll from 1st. Battalion Royal Newfoundland Regiment dated 30-4-19.

The undermentioned of the 1st.Battalion left Rouen Camps \$2/4/19, subarked at Havre 22/4/19, disembarked at Southampton 23/4/19 and reached Hazeley Down Camp 23/4/19.

#4275mPte. A. Bishop.

G.R. 4275

Extrast from War Office List No. H.A. 36012.

Dis. to Duty ex 6 Gen. H. Rouen April 1919.

4275 pte. A. Bishop.

BRONCHITIS.

Extract from War Office List No. H.A. 35905.

4275 Pte. A. Bishap.

Admitted 6 Gen. H. Mouen 11th. April 1919.

#### Extract of Daily Orders Part II Royal Newfoundland Regiment, in France dated 15/3/19.

In arrest awaiting trial/4/2/19. Tried by F.G.W.M. 26/2/19 and sentenced to be reduced to the ranks for:-Without reasonable excuse allowing to escape 1140, Pte J. Brown, a prisoner committed to his charge.

#4275, Cpl. A. Bishop.

The above Court-Martial, confirmed by Base-Commandant, Rouen.

Brirect from Reminal Rell od draft Ro. 56 from the End., Battalien to the 1st., Battalien , Wild., R. B.E.F., Battalien as/11/18.

#4275 Pte. A. Bishop.

Extract from Daily Orders By Lt. Col. B.J. Barton, D.S.O. Commanding 2nd Bn. Royal "fld. Regt. 25-11-18.

The following N.O.O's to relinquish Acting Rank of ergeant and comfirmed to rank of Corporal.

4275 A/Cpl. A. Bishop.

Satroct from Reminel Soll of Sref Ro. 56 from the End., Bottalien to the let., Battalian , Mills, S. B. 5.7\*.

Battar of conthaupton 68/11/10.

#4275 Cpl. A. Bishop.

4275'

C., .

Extract from Daily Orders By Lt. Col. B.J. Barton, D.S.O. Commanding 2nd Battn. Royal Nffd. Regt., 8-11-18.

LING SHOWNING

The follweing to be acting Sergeant as from 8-11-18.

4275 Cpl. A. Bishop.

- H276

Extract from Daily Orders Part 11 By Lt. Col. Barton, D.S.O. Commanding 2nd Bn. Royal Nfld. Rget.dated: -8-18.

#### TTHE FOLLOWING TO BE ACTING CORPORAL

4275 L/C. Bishep, A.

Extract of Daily Orders part 11, from Unit The Royal Newfoundland Regiment, St. John's, March 21,1918.

#4275 Pte. A. Bishop.

Promoted to be Lance Corporal with effect from 20/3/18.

Extract from Nominal Roal Embarked St. John's for Overseas, Mar. 28, 1918.

4275 L/C. Bishop A.

C.RI 4275

January 7, 1918.

Madam: -

#### #4275 Pte. A. Bishop.

I have the honour to acknowledge your communication of December 29th in connection with above mentioned solder. This man being of the proper age and now sworn into the King's Service cannot be released. I am informed howevers that he has made an allotment of 60 cents per day to you which will be paid monthly from the Pay Office, and has also made an application for separation allowance.

With reference to your statement about his heart, he has been examined by two dectors, who both declare him fit for service.

I have the honour to be.

Madam,

Your obedient servant,

Major.

for District Officer Commanding.

with.

Newfoundland.

Mrs. Elizabeth Ann, Bishop, Coley's Pt., Bay Roberts.



# ROYAL NEWFOUNDLAND REGIMENT HEADQUARTERS

ST. JOHN'S. NEWFOUNDLAND.

January 4th. 1918

From Adjutant, Depot.

To District Officer Commanding, Dept. of Militia.

#### Re 4275 Pte. A. Bishop.

Above mentioned man has been re-examined by Dr. Burden and Major Paterson and I annex herewith their report.

Effective from Feb. 1st. 1918 Bishop has made an allotment to his mother of sixty cents per day and has made application for Separation Allowance to be paid her.

Depot, First Newfour Lind 19

St. John s, fild.

Agutant De report. Note Statement re heat remper

· Coly.Com Blay Melo How To Bennith TTENTION bear Sir Some years ago I had my elder sine here by Stalling from aloft in board a sole in Bay Pubul and during the par summer my Husband while coming from the townty with a load of wire feel from his load and was bringh Tome a corpse, and more my younger surs to whom I in my declining days has Mend This service for the Army I did not there anything about his divily the like wishi a missage came to me in their night

to That April He is not were having had hear troube for some year, or I come as a great strock to me in my old days, if something cans be some done in bying to stuf him it will be the means of ending my days some Stran is whome he considering are the houble I have had the part clown year. I would ask you it you plean Sis to give the Thing your deeper thrugh and by you very come mes sport with their ly any man as I am a four Widow with m om to look too for sufpers-

in my old days Trusting Sis that I am how asking be much of you and that you will are every means in your power to Their Shine back is my Learner Sprayer Es lease Sis lesme Know as soon as Sposites as I am vey anxious. Of our vey links Ave Blizabeth Anne Bestrup In Beach Bond 1 Morly ChiCol The your man name lan with you about to Allan Bidly befork bulisher the won Sohne keathing 11/5

Extract of Daily Orde s part 11. from Unit Royal 4/1st Newfoundland Regiment, Headquarters. dated December 29,1917.

#4275 Pte. A. Bishop.

Attested for General Service with the 1st Newfoundland Regiment with effect from 28/12/17.

a. Bishop 4275 P. +1. 6

Nº 4571



### 1ST. NEWFOUNDLAND REGIMENT /

ALLOTMENTS

ife, Child, lative or nd NAME (in full) ADDRESS AMOUN		nether Wife, Child, other Relative or Friend	Identity Certificate No.
a Eleantete lister Stain H	Élia	nother	80
Bay Rolels	7		
· ·		¥	
			/N / N
Total Allotment, \$			* .

-This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvia.), 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., o	or P. (T), of the Reserve.
1. Unit and Corps Royal Newfoundland	7. Former Trade } Leacher-
2. Regtl. No. 4276 3. Rank. The	7a. If the soldier claims previous service i Army, he should state—

(Christian Names)

5. Age last birthday ... 22.

6. Posted for duty on 28. 12.17. at &1. Jahren in category (or grade)

8. If the disability is an injury was it caused

- (a) in action
- (b) on field service
- (c) on duty

4. Name

- (d) off duty?
- 9. If a Court of Inquiry was held on an injury state :-
  - (a) When
  - (b) Where
  - (c) Opinion of Court

- - (a) Former Regts. or Corps; with Regtl. Nos.

- (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. 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.

14. Sta	ate whether the disabilities are	(a) attributable to	(b) aggravated by
	(i.) Service during the present war	4	
	(ii.) Previous active service	4	
(	(iii.) Climate in pre-war service	1.24	
9918	(iv.) Ordinary military service before the war	A	a Ralawille 1
9 Y 20 25	(v.) Serious negligence or misconduct on the man's part.	1	
14 (a).	. If not due to any of these causes, to what specific condition do you attribute it?	} ~ ~	
such 15. William 1	hat 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.)	decup	en jus iestej
	as an operation performed? If so, when and what was its nature?	m	Shirt of Marie
17. If	not, was an operation advised and declined?		Not be seen a street of
	a 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 treat- ment was unobtainable?	na Na	Samuel Commence of the Commenc
	ve 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?		
	Figure 1 a printer a design to the containing of	0	
		R	
90 - De	o you recommend—	Repetricules	•
20. 20	(a) Discharge as permanently unfit?	1 mate	-n .
	(b) Change to United Kingdom?		The wenn
N	Tote—(b) is only applicable to soldiers invalided at Foreign Stations.	W. Y	1 000
Station	Hugley D. Camp	Medical Officer in	Capt William Charge of case.
Date .	29.41.19		~
	Loss of teeth on or immediately after active service, she	ould be attributed thereto, u	nless there is evidence that

outation of pos ald be st TO,- The Chief Paymaster,
Royal Newfoundland Regiment,
58 Victoria Street,
London, S.T.

Sir:-

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

Commencing on 1st July 1918.

Regtl. No.	Rank,	Name	Amount	Signature.
4275	Signe	Dishop. a.	\$2.5	7

Jata Jame 20ths

I have the honour to be; sir,.
Your obedient servant.

A Bhas

Place	Date of offence	Rank	Cases of Drunken- ness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
Full	7/1/19	CARRE		Med of Cardyon 9/-	Syl Carta	ad Pay	14/1/19	Fajo Derar	Company of
to UK	1/1/9	Cul.				for same			
Liel				Villand res sonable sours allowing to		Li. Shotsem	20/2/19		
- Inchi			200	escare No 1140 Ob & Rowin a suidoner		Findly quely.	17		BF
				contracted to his plange		Redified 41th	-		
						Cold la Base			
	0181520	IOV.				Commandet			
			o moun						

Bishop, A

THEFT

Alay Last.

July .,1919

#4275 Pte. Allan Bishop,

Colay (s Point, C.B.

Dear Sira-

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 Granity.

Yours truly

Captain,

#### DEPARTMENT OF HITTELL.

WAR SERVICE GR. TUITY.

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.

dated January Rout. 1919.
A complete reply must be given to every question in this Declaration There and be no blanks and no deblos, If my questions are not applicable, the words "NOT APPALABLE" nest be written out.
On completion this Declaration as to be returned to was orgical 1/6
RECORDS, PAY & RECORD OFFICE, ST JOHN'S.
charaction north Allan 2 Samone P. 6 wh. P.
3. Ronk Parate 4. B. 312 . Bo. 4.2. 7.9
5. Address in full to which future parents of gratuaty are to be
forwarded. Coly's Bay Roberto
Bay Both
6, Date of enlistment in the Regiment. Den 38 1917
7. Hare of dependent, if any, to wher Separation Allowers is being
issued, or was being issued, inmodiately prior to your discharge
8. Rolationship of such dependents In the
8. Rolationship of such deportants
9. Address in full of such dependents boley & Peint
***************************************
ic. is said dependent, now, or was avid dependent at my tire in receipt
of Seguration Allowance on accounts of apolitar soldiers
11. More you on active dervice only in lift II so, give dates and
pexticulars of such service
is dive total length of time which you served on active service,
whother in 1 fl d. or or rocus And years. Sin months . / yr, land
· · · · · · · · · · · · · · · · · · ·

13. Have you had more than one emlistment? If so, give particulars
of discharge and re-enlistments, and under what regimental numbers.
14. Have you already received any payment of Post Discharge pay or
War Service Gretuity? If so, state emount you end your dependents
have already received and by whom paid
15. Have you been issued with a War Service Bedge?
16. Have you, during the present war, served in the I: period Borces
17. Are you entitled to receive, or have you received mny 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
renk held by you on your arrival in England?
(b) If so, was such reversion in consequence of Misconduct or
inefficiency? Losing Prosoner under Change
19. Are you now serving in the Rest.?. Ro. If not give? - (c) date
of discharge 76/6/19 (b) Reason for discharge . Demakluget
20. Did you at any time serve at the front in an actual theatre of
War? If so give particulars of places, and dates of such service
no.
21.(c) Are you receiving treatment from the Wivil Re-Establishment
Com.(b) If so are you in receipt of full pay and allowances from
The state of the s
3、新新药品:黄芩环药薯,再选择证法。2.4.3.6.10.10.10.10.10.10.10.10.10.10.10.10.10.
And I roke this soloun decleration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under Oath.

Signature of Applicant: Allan Brown Coly's P. Place of Residence: Declared before me at: day of June 2yth 19.4. This Signature of Barrister of the Supreme Court, Stipendiary Magistrate Matery Public, Bustice of the Peace, or Commissioner of effidevits POST D'SCHARGE PAY. Date paid Paid Paid War Service Net amount due Soldier. Dagendon v. Cortified correct. Faymester

July 10,1919

#4275 Pte.allen Bishop, Coley's Point.C.B.

Dear Sir:-

Bo.2900.

Please find enclosed Discharge Certificate

Yours truly

Paymaster & Officer i/o Records

## The Royal Newfoundland Regiment

#### PROCEEDINGS ON DISCHARGE

1	No. #273 Rank Planted Name Brotop CC
2	Occupation Teacles  Classification of soldier E Medical Category #
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 matter brought before me, in accordance with Regulations.  Place, ST. JOHN'S  Date JUN 25. 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  JUN 2 4 1919  Date  Signature of soldies  Signature of witness
	CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER
6.	I hereby certify that I am in a position to resume civilian occupation immediately on discharge.  Place, ST. JOHN'S  Signature of soldier  Signature of witness  Signature of witness
7.	Enlisted for service. 26-6-19. Plus 14 days  STATEMENT OF SERVICE  No. of days on Military Discharged from service. 26-6-19. Plus 14 days
	APPROVAL OF DISCHARGE
8.	The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer ile Records, The Royal Newfoundland Regiment, twenty-eight days from date.  Place, ST. JOHN'S  Officer Commanding Discharge Deport The Royal Newfoundland Regiment
	CONFIRMATION OF DISCHAPGE
9.	The discharge of above mentioned soldier is hereby confirmed.  Place, ST JOHN'S  Date Mary 10/19/19  The Royal Newfoundland Regiment
	Q413 2019/2900

# The Koyal Pewfoundland Kegiment

Class for Demobil-
ization:—
-E

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

Discharge Depot: Headquarters The Royal Ne	
	Date 24-6-19
Regimental No	
Name Janahan Addan	Rank
Address - Late 1 2 2	<del></del>
- Y / ·	
Present Medical Category 4	
	(a) Immediate discharge
	O.C. Discharge Depot.
Members of Board	Senior Medical Officer
	Swerden

## The Royal Pewfoundland Regiment

DEMOBILIZATION OF

Reg. No. 42 Porank Name Buship U
Date of Enlistment 28 12 17 Address Colege A District A Court
Occupation Daeley Classification for Discharge J. H. Medical Category H.
Recommendation S. M. B. Disability Rating
Passed to Demobilization Officer with following documents:—
N.F. P 36
B 178 W 3494 B 122 Board 1st " 2
B 178a D 400A B 1915 do 2nd " 3 3
B 17# D 400B Form L do 3rd " 4
B 179a do 4th "5
B 179b B 103
Date
PARTICULARS FOR DEMOBILIZATION
PARTICULARS FOR DEMOBILIZATION  1. Civil Re-Establishment.
101
Civil Re-Establishment.     I am
Civil Re-Establishment.
Civil Re-Establishment.     I am
Civil Re-Establishment.     I am
1. Civil Re-Establishment.  I am
1. Civil Re-Establishment.  I am in a position to resume civilian occupation.  Particulars passed to Vocational Officer for information and action.  Date
1. Civil Re-Establishment.  I am in a position to resume civilian occupation.  Particulars passed to Vocational Officer for information and action.  Date
1. Civil Re-Establishment.  I am
1. Civil Re-Establishment.  I am
1. Civil Re-Establishment.  I am

3. Transportation and Release Certificate.  The above named has been provided with Travelling Warrants No. R.1950 to his honest and Release Certificate No. R.1950 to his honest and Release Certificate No. R.1950 to his honest new results and Release Certificate No. R.1950 to his honest new results and Release Certificate No. R.1950 to his honest new results and Release Certificate.
Date
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
Date
Discharged approved for
N.F. P 36
B 178 W 3494 B 122
B 178a 1 D 400A 1 B 1915 1 do 2nd " 3 2 Town B.
B 179 D 400 B Form L do 3rd " 4
B 179h
B179e
Date 25-6-19 A Thew before
APPROVED.
Documents as above forwarded to:—
Officer ile Records,
Board of Pension Commissioners.
with following additional documents.
Eligible for War Service Gratuity
Date JUN 26 1919 - H. Jail MAJOR O. C, Discharge Depot.
Received the above noted documents from O. C. Discharge Depot.
. 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

Allan Psishon ignature of Man.

Signature of the Vocational Officer or his Representative.

Place

ST. JOHN'S.

Date 95 - 6-19

191

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

MEDICAL HISTORY

Surname

Christian Nane Allan

Birthplace:—Parish 600	Table I.—GE	NERAL TABLE	211	
		RESERVE.	REGULA	R ARMY.
Examined	on 28 Th day	COLUMN TO SERVICE AND A SERVIC		y of 191
Declared Age	2 / year		year	s days
Trade or Occupation	~	aches		
Height	o feet	/O inches	feet	t inches
Weight		145 lbs.		lbs.
Chest Measure-ment Range of Expansion		37 inches		inches
Physical Development			Sanda Land	
Vaccination Marks Arm	Right	Left 42s	Right	Left
When Vaccinated				
Vision \{	B.EV=		R.EV= L.EV=	40-2
(a) Marks indicating congenital peculi- arities or previous disease	(a)		(a)	
(b) Slight defects by that sufficient to cause rejection	(b)	<i>i</i>	(6)	
Approved by (Signature)	Lamont	Patersen		
		Medical Officer.		Medical Officer.
Enlisted	at M. Is	1:	at	
Emisica	on 28th day	of Dec 1917	on day	r of 191
f	Согра.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment	Rome			
Transferred to	Influ Reg!	N373		
Became non-effective by				
	on day	of 191	on day	of 191
[Signature]				
[Rank]		SELECTION OF SELECTION		Bearing only

Table II.—Only for admission to hospital or to the sick list in

							Table 11.—Only for admissi	on to nospita	ii or to the sick ast in
Name of Hospital -	Admitted to Hospital  Day Month Year		SEASON INCOMES AND ADDRESS ASSOCIATION OF THE PARTY ASSOCIATION OF		Transportation.	Disease	Number Days in Hospital	Remarks bearing on the case syphilis, admissions and restricted of treatment of	
SILITARY HOSPITA		JUN			Month 7	Year (%	Influenza	5	Recovery.
PAZELEY DOWN.	)			t					
						•	** :		
			N.P.						
121 14 12 14 12 16 1	i,		(S) (2 (C)						

tal or to the sick list in case of Warrant Officers treated in quarters.

Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In case of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.

Recovery Discharged to duty

Signature of Medical Officer

65 Alivean Cap RATING

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		1
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39-12-17	as.	H			
2.1.18	TA 15	SP			
12-1-18	3	R			- 48
	,				
	. •	W/gr	It is hereby cers has been b fore a Board and has	4 200111111 3	I dien!
			tion. Medical cu		bitisa- Liji
			Date of T.M.B.	Discharge	SH
				7	Minumitand
		Hard			

### .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
	24(1)				
				SO DEFINE	no and the
	distance of				

The Koval Mild. Regiment

DEMOBILIZATION

No.471 Rank Name Bushof X

Warned for demobilization on

JUN 25 1919

Nors.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvia.), 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.

			of 1.(1), of the Reserve	
1. Unit	and Corps. Royal.	newfound land	of 7. Former Trade } Heacher.	
2. Regtl	. No. 4. 4. 7. 0 3. Rank.	1 te	7a. If the soldier claims previous service Army, he should state—	in
4. Name	(Surname)	(Christian Names)	(a) Former Regts. or Corps; with Regtl. Nos.	
5. Age 1	ast birthday . X. X.	1 0401.		
6. Poste	ed for duty on . 8./.13/.	17 St John		

- - (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
  - (b) Where
  - (c) Opinion of Court

(d) Particulars of Pension or Gratuity (if any)

Norz.—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.

Nors.—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.
- 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.

ما من من

	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		
	d in	(v.) Serious negligence or misconduct on the man's part.	} <b>!</b>	
	14	(a). If not due to any of these causes, to whe specific condition do you attribute it?	nat} ~~	
at, te, be ith hsole; of the	15:	What is his present condition?  (A note should be made as to Weight in all cawhen it is likely to afford evidence of the pagress of the disability.)		eino Ana tiliz
	16.	Was an operation performed? If so, when and we was its nature?	nat ne	
	17.	If not, was an operation advised and declined?	ha	
* 11 C 1 CO		*In the case of loss or decay of teeth,—Is the loss teeth the result of wounds, injury or dised directly attributable to active service or throuservice under such conditions that dental trement was unobtainable?	ase ha	
	19.	. Give particulars of any other disabilities existing, be not in themselves sufficient to cause invalidition in themselves sufficient to cause invalidition that whether or not they are attributable to have been aggravated by service during the present, and if so, to what or by what specific military conditions?	ng. or ent	
	20.	. Do you recommend—	Repatr	ration
		(a) Discharge as permanently unfit?  (b) Change to United Kingdom?  Note—(b) is only applicable to soldiers invalided Foreign Stations.	1 at Trocume	- Coht Ran
		ation Hazely down	Medical Officer in	charge of case,
	Da	ate 29-4-19.		

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

	Rank.	Surname	giment or Corps Kujal 7	istian Name	ala	d.
(1)	Religion.	CE		stment 2/	vears	/ month
	Enlisted Date of	(a)25/12/12.	Terms of Service (a) Duration	Service reckon pointment to lar	s from (a)	28/19/17
	Extended	[······	Re-engaged .	ualification (b) Corps Trade a	nd rate	nature of Office
		Report	Record of promotions, reductions, transfers, casualties, &c., during active setvice, as reported on Army Form B 218, Army Form A. 38, or in other official documents.	Place of Casualty	Date of	Remarks
	Date	From whom received	The authority to be quoted in each case.	i face of Casualty	Casualty	B. 213, Army Form A.3 or other official documents.
			Embarked	n o nov	and co.	
			Disembarked Joined Batt	20 NOV 1	918 LJAN19	19
			14			
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Reduced to the names for whethout reasonable excuse allowing to except a			
			presoner Committed to his charge		26/2/19.	
ρ.			arrived mns	V. T. S.	25/4/19	
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	,		for, or calisted into Section D, Army Reserve, particulars of such			



# Descriptive Return of a Soldier Discharged on Account of Disability

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

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

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

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

Name in full
Regiment from which discharged Royal Dewfoundland
Regimental number 42 75 1. Have
Intended address Coles out
Height on discharge 5 Feet 10
Color of hair on discharge
Complexion
Color of eyes Bleur
Descriptive Marks
Figure on discharge
Christian name of Father
Christian name of Mother Egaleth
Wife's maiden name in full
Date and place of marriage
Christian names of children
Place and date of soldier's birth Burnt / had 22-10-189
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) Allaw Push

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

Medical Officer i|o Hospital. Unit, or Command Depot.

23-6-19

(Rank)

Station

Coler's Doint-Pray Pobulo. Dec 19 10/19. To J. M. Howly (paymester)
Milited Building

Steam (Riv : - July ) any Cheque for my part of my con's (War gratuil- for my part of morember last (Ble Atlen Briship 4275. Army) Will you please look this maller up I and bet me Know ij Cheque has bleen mailed on mot? ofons sensited Bishop Elingalettes a Prichopo Robert & Brinds Pray Roberts. P.S. Addus 28/10/19

5.	,
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# SEPARATION ALLOWANCE. A. 1st NEWFOUNDLAND REGIMENT.

1.	Name of Soldier in Full (Surname first) Ruship allan
2.	Rank and Regimental Number
3.	Date of Enlistment 21-12-17
4.	Full Name of Wife Widowed Mother Elizabeth (Lamb) Reship
5.	Address Guardian Colleg's Point Bay Polistic L. Bay.
6.	State ages of Children: Girls under 17
7.	With whom do your Children reside?
8.	Amount of Allotment 9. Name of Allottee
10.	Amount of Allotment 9. Name of Allottee Ligation Cashop Address Coley's Comb Day Ritath L. Day.

11.	From what date is Allotment effective? 22/2/19/19/18
12.	Date of Marriage
13.	Date Marriage Certificate examined by Paymaster
14.	Date Birth Certificates (in case of guardian) examined by Paymaster
15.	If soldier is sole support, does Statutory Declaration accompany this application?
16.	Have you made a previous claim for Separation Allowance? Give particulars
17.	Is Separation Allowance being paid on your account to any person?
18.	Were you at the time of enlistment an employee of the Newfoundland Government? In what capacity, and in what place?
19.	Will you be in receipt of a salary as such, while serving? If so paid, how much per month?
20.	Name of Corps prior to enlistment in the Nfld. Regt
	Allan Psisher
	Signature of Officer forwarding this application.
Uni	Depot, First Newfoun and Regiment,
Dat	st. John's, Nfld.

### FIRST NEWFOUNDLAND REGIMENT. Separation Allowance Branch.

Notice. THIS STATUTORY DECLARATION is to be filled in correctly in

every detail, and a complete reply must be given to each question. Each statement is considered as being made on Oath and the form is to be signed before a Barrister of the Supreme Court, Stipana-iary Magistrate, Notary Public or Justice of the Peace, and returned to,-PAYMASTE paration Allowance Branch, St. John's, Nfld. Name in full of Saldier Reg't. or Unit. Reg't. No. allan/2 ight 4275 Age of Soldier Married or Single. Sugla Name in full Other Occupation Permanent Address. Age of Soldier. House Keeper Roleys Point 6 luabet Give name of your Occupation band. Age Where Employed. James Bio Deed Lidder If your husband is not supporting you state the reason. If your husband is a chronic invalid and totally incapacitated state nature of malady (Amedical certificate must be enclosed with this document, stating from what date husband has been totally incapacitated and for how long incapacity is likely to continue). Could 7., If you are a widow, state date and place of above death of your husband. Widow Have you married again since death no of above mentioned husband?

9. Names of your other Address in Age Full Children.

base Bustill

Occupation.

Married or Single.

10.	State amount earned by (20 yourself (a) nothing (b).
11.	State amount and Source of any nothing
12.	State value of Real Property belonging to you and your husband? Our little home stand
13.	State value of personal property belonging to you and your husband.
14.	If husband is dead state value of Real and Personal Property left worth not more than \$4000 by him?
15.	Actual amount contributed by soldier during the year prior to nothing enlistment.
16.	Was this amount contributed weekly or monthly?
17.	son's Board etc.?
18.	State your son's trade or occupation prior to enlaitment.
19.	State amount of his wages per week.
20.	State name and address of his last employer. At Beachael
21.	State amount of support monthly from son since enlistment.
22.	State amount of support Allotment received by you from son monthly. assuracy to number of Name of Marie mint
23	From what date did, you receive May allotment.
24.	other children. Weekly Monthly.
25.	Are any of these children in the employ of you or husband.
26.	If not receiving support from other children state cause. Explain fully. only what down for from the trace.
27.	With whom are you residing at present? by mpset
28.	Have you made a previous claim for Separation Allowance? If not, why?  Give particulars.
29.	Are you already in receipt of Separation Allowance from any source? If so, how much?.  No thuse

30. ·	Are you in receipt of any payment from any Patrictic Fund? if s, how much?
4	Was the soldier at the time of his enlistment School Leacher an employee of the Newfoundland Government? School Leacher
<b>32.</b>	In what capacity and in what place? Loo Ball anne
33.	Is he in receipt of a salary as such while serving in the 1st.Nfld.Regt.? If so, how much? I do not know that
and e Signa Place Declathis Signa Court	I herewith make this solemn declaration conscientiously ving the same to be true and knowing it to be of the same force ffect as if made under Oath and in virtue of the Evidence Act.  ture of Applicant.  College Stornt Bay Robert of Residence  red and subscribed before me at.  28 day of Constant 1918  ture of Barrister of the Supreme) Sol Divisell  Stippendiary Magistrate, Notary  or Justice of the Peace.
of your	This application must be signed by two responsible es one of whom must be a Clergyman, the other a representative ur local Patriotic Fund Committee, certifying that to the best eir knowledge after careful investigation, the above statements orrect, and the above soldier, first mentioned, is the sole supof the applicant.
Signa	ture of Clergyman
F	ture of Member of Patriotic and Committee.
ar	Anth

Major Howley O. I. C. Records

Please pay to A. Bishop, 4275 the sum of three dollars and fifty cents in payment of books required for his study and charge same to Civil Re-establishment Committee

\$3.50

1.000	7 M. sen
21129=10	Vocational officer
May Colored Interes	
	A. Position

Major Howley, O. I. C. Pay and Records.

Please pay to A. Bishop 4275 the sum of twenty dollars in payment of allowance for month ending September 30, in connection with re-education.

\$20.00 Pengion

The state of the s	www.lehell.
	Vocational Officer.
CH 110 11962 113 Eu	1 A Bishop
IND. LEGG DAIT ALE	7. 10
GEN LATTE - MITTER	

Major Howley O. I. C. Pay and Records

Please pay to Mr. Allan Bishop the sum of ten dollars towards kit (as per minute of meeting May 14th) and charge the same to the Civil Re-establishment.

\$10.00

7. C. R.

Vocational Officer

ABOQUNT CREATING SHE NO 380 /Y ILITIALS
IBM LEDGER 1 III 3 1 III 3 1 III 3 1 III 4 3 III 4 III 4 3 I

Allan Buting

Nº 4571



## 1st. NEWFOUNDLAND REGIMENT

## ALLOTMENTS

to, and f	or the benefit of t	Dollars andhe undermentioned Person	similar official form to make an  Cents, per diem,  and or Persons, such payment to be n	from my Pay, nade on proof
concerne		luction of the relative I	dentity Certificates by the Person	n and Persons
Identity Certificate No.	Whether Wife, Child, other Relative or Friend	Name (in fall)	Address	AMOUNT (each person)
12/	Figure 1	Ecquera Sist	A Burn 3/	60
			**************************************	
			Total Allotment, S	
8	igned by the Office	r Commanding Company and	nanding Company, signed by the Voluhanded to the Paymaster as authority  (S)	

ST. JOHN'S, JUN 25 1919

## Royal Newfoundland Regiment.

Billeting Acc	ount, To	the a	. 18.	shope
Billeting Soldiers		ned to Jeme 2	6 tt /19	1
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Certified correct	1 9 5	" I way a		
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### ON HIS MAJESTY'S SERVICE

Laboration of the state of the

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S, Nfld.



Fold Here

Signature

Date\_\_

Address

.O.T.W.

	DOT	
	DCT 15	1921.
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The accompanying British War Medal
is/are forwarded herewith to
2019833 Allan Bishop Nov Mo
in respect of his service as No. 4275 Rank A/Sgt.
Name A. Bishop Royal Nild. Regt.
Receipt of the same should be acknowledged hereon.
Received Bailing Was Medel
Signature Allan Biship
Date 400 27 th /21
Address Greens fond
[Р.т.о.]

Receipt for Army Book 64

No....4375. Name. Bishop. a.

To Certify that I have received the AB 64 of the above

Name Allan P3 wh

Date 19/7/20.

maned soldier.

H.B. For completion and return to the Department of Militia insert in corner of envelope "AB 64" Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Regiment of Royal 1444 Reg! Signature of O. C. Company Mitaley V. Trade

Coches

Good Conduct Badges, Service pay or proficiency pay

20-3-18

Religion

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2-5-18 Regimental Number and Name Place and Date | Al. Ishing of Enlistment | 39-12-17 Joined Date Joined Date Joined Date OFFENCE Cases of Drunk Names of Witnesses Date of Offence Punishment awarded By whom awarded REMARKS Pince Demolilyed of Johns, 10 29 To be carried over

# The Koyal Pewfoundland Kegiment

DEMOBILIZATION OF
Reg. No 21776 Rank Mr. Name Bushop Wy
Date of Enlistment 28 13 17 Address College The District At Conne
Occupation Dacle . Classification for Discharge Medical Category Medical Category
Recommendation S. M. B. Disability Rating
Passed to Demobilization Officer with following documents:—
N.F. P 36
PARTICULARS FOR DEMOBILIZATION
1. Civil Re-Establishment.
I am in a position to resume civilian occupation.  Particulars passed to Vocational Officer for information and action.
2. Clothing.
Certified that Clothing Regulations have been complied with:
(a) Clothing Allowance payable 4.00.
Date 25 - ( - 14. Oilc. Re-clothing 9180

3, Transportation and Release Certificate.	
	d with Travelling Warrants No. 1143 Cto his hom
at 13 de la contra dela contra de la contra de la contra de la contra de la contra dela contra de la contra de la contra de la contra de la contra dela contra de la contra del la cont	sase Certificate No. 30/9
Date 25-6-169 NOI	
500	Demobilization Officer
A. Pay and Allowances.	Onicos Ful thean
	s have been correctly balanced and all matters in con
nection therewith settled. He has rec	
Date	Depot Paymaster.
Diel .	96-6-10
Discharge approved for	
· · · · · · · · · · · · · · · · · · ·	C.O. Discharge Depot.
N.F. P 36 B 268 B 121	N.F. Med D.F. 1
B 178	
	do 3rd 4 2 1rum B
B 179a J. D 400C Form K	
B 179b B 103 ME 2	
B179c   B 120   M 93	
Date 15-6-19	VA man bafot
	O. C. Discharge Depot.
APPROVED.	For any content and description of the content of t
Documents as above forwarded to:	
Officer ile Records.	
Board of Pension Commi with following additional documents.	issioners. Traitolatealtha tearniagh faoi aimeann sailineán le chailteann.
	ole for War Service Gratuity
	of the stat service diameter
Date JUN 26 1919	Prestication
populied with:	cond evalt annihative I you O. C. Discharge Depot.
Received the above noted documents from O.	The factor of the state of the
A /	mercen m
Date July 9/19	Worth Common
Jane J. Jane J	f

Reg. No.	MAT. Rank Col. Name Bullato . Vo.	
Attested	Address Pluj Kourso	
Allotment.	Allottee .	.0
Date of All Returned o	n S.S. Consular Cause Andrey 6	<u>'</u> ).
24-619	PASSED TO DEMOBILIZATION OFFICER DISCHARGE APPROVED ON DEMOBILISATION.	
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