



# FIRST NEWFOUNDLAND REGIMENT.

## ATTESTATION OF



No. 1854 Name Joseph Boyd Corps 1st

### Questions to be put to the Recruit before Enlistment

1. What is your name? ..... 1. Joseph Boyd
2. What is your full Address? ..... { 2. St. John's
3. Are you a British Subject? ..... 3. Yes
4. What is your Age? ..... 4. 28 Years ..... Months.
5. What is your Trade or Calling? ..... 5. None
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, Joseph Boyd 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.

Joseph Boyd SIGNATURE OF RECRUIT.  
Joseph Boyd Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Joseph Boyd 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 \_\_\_\_\_ 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 13 Aug 1917 Place St. John's } 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) \_\_\_\_\_

# DESCRIPTIVE REPORT ON ENLISTMENT.

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

Name Joseph F. Boyd  
 Apparent age 18 years \_\_\_\_\_ months. Height 5 feet 3 1/2 inches.  
 Chest measurement { Girth when fully expanded 36 inches.  
 { Range of expansion 4 inches.  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin William Boyd, St. Anthony Salvador  
 | Relationship Father

### Particulars as to Marriage.

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

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

### Particulars as to Children.

Christian Names.	Date and Place of Birth.

## STATEMENT OF THE SERVICES.

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





# DESCRIPTIVE REPORT ON ENLISTMENT.

1854.

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

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Chest measurement { Girth when fully expanded 36 inches.  
Range of expansion 4 inches.

Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin William Boyd St Anthony Labrador | Relationship Father

### Particulars as to Marriage.

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

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

### Particulars as to Children.

Christian Names.	Date and Place of Birth.

## STATEMENT OF THE SERVICES.

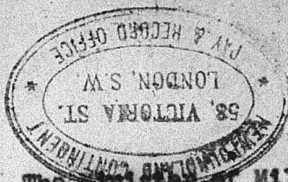
Corps in which served	Rgt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank.	Dates	Service not allowed to reckon for fixing the rate of pension	Service in Reserve not allowed to reckon towards G. C. Pay	Signature of Officers certifying correctness of entries
					years   days	years   days	
Service towards limited engagement reckons from <u>28-9-15</u>							
Joined at <u>St. John's</u> on <u>September 28/15</u>							
<u>Discharged May 17/1919</u>							
<u>Embarked at St John's train to Quebec 27-10-15</u>							
<u>Joined Battalion in the field 29-10-15</u>							
<u>Involved in Campaign 24-11-17</u>							
<u>then attached to 5-4-18</u>							
<u>Admitted 10th Bn 20-5-18</u>							
<u>Embarked 9-9-18</u>							
<u>Depot 12/11/18</u>							
<u>Command depot 20-11-18</u>							
<u>to Newfoundland 30-1-19</u>							
<u>Embarked for St John's 5-7-17</u>							
<u>Admitted 37th Bn 21-11-17</u>							
<u>Embarked 25-11-17</u>							
<u>Embarked 13-5-18</u>							
<u>Embarked 26-8-18</u>							
<u>Embarked 10-11-18</u>							
<u>Embarked 14-2-18</u>							
<u>Embarked 13-5-18</u>							
<u>Embarked 20-12-18</u>							
<u>Embarked 12-18</u>							
<u>Embarked 2-2-19</u>							
<u>Demobilization St John's 17-5-19</u>							
Total Service forfeited as above ... ..							
Total Service towards Engagement to <u>17-5-19</u> (date of discharge) <u>3</u> years <u>232</u> days							
" " " Pension " " " " " " " "							



DUPLICATE  
MAIL COPY  
Posted..... MAR 1940

ENCLOSURE

1985/59/P.&.A



The Hon. The ~~Minister~~ of Militia,  
St. John's,  
NEWFOUNDLAND.

WF/PK.

17th February 9.

C.R 1854

1854, PTE. BOYD.  
ROYAL NEWFOUNDLAND REGT.

Exchange of telegrams  
confirmed:-

(1)  
Received 4/12/18 (9545):  
"Synoptical, London."  
"Pay to 1854 Boyd £10."  
"MILITARY.

(2)  
Received 5/12/18 (10,511):  
"Synoptical, London."  
"Reference my telegram  
"Nov. 4th-should be read-  
"1854-Boyd-three pounds-  
"can you adjust-or recover-  
"if paid-fullstop."  
"MILITARY.

(3)  
Despatched 22/1/19. (37)  
"Military, St. John's."  
"Reference your telegram  
"5th December-1854-Boyd-  
"Officer Commanding-unble  
"to recover-overpayment-  
"fullstop."  
"SYNOPTICAL.

Copy of memoranda exchanged  
with Officer Commanding, 2nd.  
Batt. is enclosed for information,  
and any further action that may be  
necessary, please.

*not aud.*

*[Signature]*  
Capt.  
Asst. Paymaster.  
For Chief Paymaster & O./c. Recds.

21730/2548/P&A

Forms  
C. 348  
62

ENCLOSURE  
MAIL COPY  
Posted  
From Officer Commanding,

MEMORANDUM.

From G.P. & O.1/c.Records.  
58, Victoria Street.  
LONDON. S.W.

2nd. Bn. R.Nfld.Regt.  
Hazeley Down Camp.

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

To Chief Paymaster.  
Royal Newfoundland Regt.  
LONDON S.W.  
ANSWER.

Pay & Record Office.

~~31st December~~ 1918.

15th Jan. 1919.

1854 PTE BOYD.  
ROYAL NEWFOUNDLAND REGT.

With reference to the following telegram from the Minister of Militia 5/12/18, (10,511)

It is regretted that it is impracticable to recover this amount as the mas has spent the £7:0:0: in good faith.

"Reference my telegram  
"Nov. 4th-should be read-  
"1854-Boyd-three-pounds-  
"can you adjust-or recover-  
"if paid-fullstop.

He has an allotment of 70 cents and to recover £7 would leave him without pay for a considerable period.

Military"

Postal Draft £10:0:0: was paid Pte. Boyd whilst on furlough 6/11/18. Will you kindly take the necessary steps to recover overpayment of £7:0:0: and remit that amount to this office, please.

(Signed) J.W.Marsh, Major  
for  
Lieut. Col. Commanding 2nd.  
Batt. Royal Newfoundland Regt.

(Signed) H.A.Timewell Major.  
Chief Paymaster & O.1/c.Records.



21730/2548/P&A

Forms  
C. 348  
63

MEMORANDUM.

From C.P. & O.i/c.Records.  
58, Victoria Street.  
LONDON. S.W.

From Officer Commanding,  
2nd. Bn. R.Nfld.Regt.  
Hazeley Down Camp.

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

To Chief Paymaster.  
Royal Newfoundland Regt.  
LONDON, S.W.  
ANSWER.

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31st December 1918.

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kindly take the necessary steps  
to recover overpayment of  
£7:0:0: and remit that amount  
to this office, please.

(Signed) H.A.Timewell Major.  
Chief Paymaster & O.i/c.Records.

15th Jan. 1919.

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is impracticable to recover  
this amount as the mas has  
spent the £7:0:0: in good  
faith.

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70 cents and to recover £7  
would leave him without pay  
for a considerable period.

(Signed) J.W.Marsh, Major,  
for  
Lieut. Col. Commanding 2nd.  
Batt. Royal Newfoundland Regt.

C.R.

1854

Extract from General Order of the Royal Navy. Boat  
Embarked at S. Cavalon, Jan. 30, 1854.

1854 Boyde



C.R. 1854

Extract from Daily Orders Part II Unit The Royal Rifle.  
Regt. St. John's, 11-2-19.

The Undernoted Returned from Overseas and Reported at  
Depot. 7-2-19.

Repatrolled on A.E. F172.

1854 Pte. Jos. Boyd.

C.R. 1854

Extract from Daily Orders part II, Depot Winchester  
dated 20-12-18 by Lieut. Col. H.J. Barton, D.S.O. Officer  
Commanding 2nd. Battalion.

The undernoted having reported back from the 1st. Battalion  
is taken on the strength and posted to "H" Co. from 18-12-18.

#1854 Pte. J. Boyd.



C.R. 1854

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

1854 Pte. J.F. Boyd.

C.R. 1854

Joseph F.Boyd                      was attested for General  
Service with the NEWFOUNDLAND REGIMENT ON September 28th 1915  
Regimental No.     1854              was allotted to Ptes Jos. F.Boyd

AUTHORITY:

Record Ledger;

Dept. of Militia.

March 25th 1919

C.R. 1854

Extract from Daily Orders part II Depot St. John's dated  
May 5th 1919.

The discharge of the undernoted on demobilization has  
been APPROVED by O. C. Discharge Depot on 2-5-19.

#1854 Pte. J. Boyd.



C.R. 1854

Extract from Orders by Lt. Col. T.G. Mathias, D.S.O.  
Commanding 1st Batta. R. Field. Regt. 21-8-19.

The u/m has been evacuated and is struck off the strength

1854 Pte. J. Boyd.

R. 1854

Extract from Orders by Lt. Col. T.G. Mathias, D.S.O.  
Commanding 1st Battn. Royal Nfld. Regt. 2608/18.

The u/m is admitted to hospital.

1854 Pte. J. Boyd.

C.R. 1854

Extract from Daily Orders Part II Royal Newfoundland  
Regiment, dated October 20th 1919. Depot St. John's.

The discharge of the undernoted on demobilization has  
been CONFIRMED by Officer i/c Records from noted date  
17-5-19.

1854, ~~Sgt.~~ J. Boyd.



C.R. 185-4

Extract from Casualties received from Pay & Record  
Office, London, /6 Dec. 1918.

The undermentioned man ex Southern Command Depot has been  
granted furlough from 18-12-18 to 19-12-18, to report  
to 2nd Battn. on latter date.

1854 Pte. A. Boyd.

C.R. 18574

Extract from telegram to Synoptical London, Dec.4th  
1918.

My telegram Nov.4th should <sup>be</sup> read 1854 Boyd  
philomoth can you adjust or recover if paid (stop)

C.R. 1854

Extract from Casualties from Pay and Record Office, London, dated  
/4th. November 1918.

1854 Pte. J. Boyd

was transferred from the 2nd Battn. , Winchester, to Southern Command  
Depot, Perham Down Camp, on 13/11/18.

Authority: 2/Bn. reply to P.&R.O. No. 17989/1959. U



C.R. 1854

Extract from CASUALTIES from Pay and Record Office, dated  
1st Nov. 1918.

1854 Pte. J. Boyd

ex South African Hospital, Richmond Park, 1/11/18. Fit for 11  
Command Depot.

Authority: Memo from Hospital.

C.R. Counter 1854

# NEWFOUNDLAND 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 **Dept of Militia.**

Line Number _____	Rcd _____ By _____	Sent _____ by _____	Check _____
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**Sept 12th, 1918**

*Dated*

**William Boyd, St. Anthony, St. Barbe**

*To*

Regret to inform you that Record Office, London, officially reports **No. 1854, Private Joseph F. Boyd at South African Hospital, Richmond, England suffering from acute appendicitis severe.**

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

**J.R. Bennett**

Minister of Militia.

**FOR TYPEWRITER**

C.R.

1854

extract from Telegram from Synéptical, London dated September 11th 1918.

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SOUTH AFRICAN HOSPITAL, RICHMOND ACUTE APPENDICITIS SEVERE <sup>1854</sup>~~TIDE~~ BOYD.

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**(NOT TRANSMITTED)**

Signature of Sender \_\_\_\_\_ Address **Dept of Militia.**

Line Number	Rcd	By	Sent	by	Check

Dated **Sept. 3rd, 1918**

To **William Boyd, St. Anthony, St. Barbe**

~~Request~~ to inform you that Record Office, London, officially reports **No. 1854, Private Joseph F. Boyd** removed from seriously ill list August 29th

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

**J.R. Bennett**

Minister of Militia.

C.R. 1856

Extract of Cablegram received from Synoptical London,

Dated Sept. 8-18.

Wandsworth Removed from seriously ill list Aug. 29th, 1854  
Boyd.

C.R. 1854

*despatched to*  
Extract of Cablegram ~~received from~~ Synoptical London,  
dated 2-9-18.

Inform condition 1854 Boyd.

4581  
1854

WOUNDED & SICK N.C.O.'s. & MEN OF THE EXPEDITIONARY FORCE - FRANCE.

PROGRESS REPORTS RECEIVED BY POST. IN CERTAIN CASES THE SAME INFORMATION OR A LATER REPORT MAY ALREADY HAVE BEEN RECEIVED BY TELEGRAM AND COMMUNICATED TO RECORD OFFICES. CARE SHOULD BE TAKEN TO CHECK THIS BEFORE NOTIFICATION.

NO. 1. RECORD OFFICE - P R E S T O N .

LIST NO. H.W. 2250.

16246 Pte. Potts J. 1/5 Borders. GSW.Face.....Ser.111(improving)in 1 S.A.Gen.H.Abbeville w/e  
26 Aug.18.  
250950 Pte. Bolton P, 1/6 Manch.R. GSW.Head.....Ser.111(no change)in 1 S.A.Gen.H.Abbeville w/e  
26 Aug.18.  
255992 Pte. Olerenshaw W. 15/Lanc.Fus. GSW.thigh L...Ser.111(no change)in 1 S.A.Gen.H.Abbeville w/e  
26 Aug.18.  
307190 Pte. Jump T. 16/ -do- GSW.thigh,Jaw.Ser.111(no change)in 1 S.A.Gen.H.Abbeville w/e  
26 Aug.18.  
28695 Pte. Robinson J. 1/5 Borders. GSW.Back.....Ser.111(no change)in 1 S.A.Gen.H.Abbeville w/e  
26 Aug.18.  
52844 Pte. Faragher R.H. 1/7 Lanc.Fus. GSW.thigh....Dang.111(no change)in 1 S.A.Gen.H.Abbeville w/e  
26 Aug.18.

NO. TWO RECORD OFFICE - P R E S T O N .

LIST NO. H.W. 2250.

263017 CSM. Crook A. 1/K.L'pool.R. GSW.thigh.....Ser.111(no change)in 1 S.A.Gen.H.Abbeville w/e  
26 Aug.18.

NEW ZEALAND - EXPEDITIONARY FORCE.

LIST NO. H.W. 2250.

65397 Pte. Hills A.W. 1/N.Z.Bde. GSW.Back.....Ser.111(improving) in 1 S.A.Gen.H.Abbeville w/e  
26 Aug.18.  
2/2446 Cpl. Irvine D.T.A. N.Z.Fld.Art.9/2. GSW.Leg L.amp.Ser.111(no change)in 1 S.A.Gen.H. Abbeville w/e  
26 Aug.18.  
34644 Sjt. Dawson H. 2/N.Z.Ent.Batt. GSW.Leg R.amp.Ser.111(no change) in 1 S.A.Gen.H.Abbeville w/e  
26 Aug.18.

NEWFOUNDLAND CONTINGENT.

LIST NO. H.W. 2250.

1854 Pte. Boyd J. 1/R Newfoundland Appendectomy..Ser.111 (no change) in 1 S.A.Gen.H.Abbeville w/e  
26 Aug.18.



1693



C.R. 1854



# NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 19

Sent by

Rec'd by

Class

No.

*MS*  
*Anthony 30* *Call*

Place from

To

*Men of militia*



Please Enquire about  
no. 1854 Pte J. Boyd  
South african General  
Hospital.  
W F Boyd

C.R. 1854

SICK AND WOUNDED N.C.O's AND MEN OF THE EXPEDITIONARY FORCE - FRANCE.

NEWFOUNDLAND EXPEDITIONARY FORCE  
30 AUG 1918  
RECORD OFFICE  
HOUNSLOW

No. 1. RECORD OFFICE - HOUNSLOW.

LIST No. H.A. 27936.

208079 Pte. Laming, R. E.	2/4- Queens	Pharyngitis.	Dis: to Duty ex N.Z. Sty. H. B.E.F. France	21st August '18.
79008 " Siddle, T. W.	24- Q.R.W. Surreys	R. Ing. Hernia	Adm: New Zealand Sty. H. B.E.F. France	22nd August '18.
134 " Key, C.	17- Middx att R.A. Sect. A.H.T.D.	Diarrhoea.	Adm: 1 S. African Gen. H. Abbeville	20th August '18.

No. TWO- RECORD OFFICE - HOUNSLOW.

LIST No. H.A. 27936.

200179 Pte. Skinner, G.	1/4- R. Sussex att 2- A. T.M. School	Boils Multiple	Adm: New Zealand Sty. H. B.E.F. France	21st August '18.
910 " Caesar, J.	8- R. Sussex	Diarrhoea.	Dis: to Base ex 1 S. African Gen. H. Abbeville	20th Aug '18.

WINCHESTER - RECORD OFFICE.

LIST No. H.A. 27936.

97939 Pte. Cook, E.	80- Lond. Rif. att 184. Labour Co.	? Enteric Fever	Adm: New Zealand Sty. H. B.E.F. France	21st August '18.
285182 " Abberly, H.	1/8- Londons att Signals G.H.Q.	Diarrhoea rectal Haemorrhage	Adm: 1 S. African Gen. H. Abbeville	20th August '18.

ARMY VETERINARY CORPS.

LIST No. H.A. 27936.

26298 Pte. Stacey, T.	A.V.C. 23 Vet. H.	? Diphtheria Mild	Adm: New Zealand Sty. H. B.E.F. France	22nd August '18.
T2SR/02642 Dvr. Collum, G.	ASC. att AVC 5 Vet. Hos.	I.C.T. Hand R.	Adm: 1 S. African Gen. H. Abbeville	20th August '18.
8875 Pte. Freeman, J.	AVC. 5 Vet. Hos.	Cut face eye R.	Adm: 1 S. African Gen. H. Abbeville	20th August '18.
20391 " Pearmain, W.	AVC. do.	Intestinal Obstruction	<u>DIED</u> in 1 S. African Gen. H. Abbeville	20th August '18.

NEWFOUNDLAND EXPEDITIONARY FORCE.

LIST No. H.A. 27936.

1864 Pte. Boyd, J.	1- R. Newfoundland Regt	Appendicitis.	Adm: 1 S. African Gen. H. Abbeville	20th August '18.
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1680

PROGRESS REPORTS.

C.R. 1854

NO.P. 136137. (CONTD)

O.C. No.1 S. AFR. GEN.H. ABBEVILLE telegraphs 29 August 18.

1854	Ptc. Boyd J.	1/Newfoundland	
19/1892	Ptc. Wilshire H.	19/N.Fus.	
179604	Gnr. James S.	BGA. 258 Sge.	
925	Cpl. Gater R.W.	9/R.Fus.	
325903	Ptc. Chandler F.W.	1/1 Cam.S.R.	
348749	Dvr. Joyce L.H.	Can.Fld.Art.	
330655	Ptc. Anderson A.	5/6 R.Scots.	
R/1367	A/B. Immins S.J.	RND. Hawke	- GSW Eye Chin.
14186	Ptc. Riley J.	24/Lab.Cps.	- GSW Mult.

NO LONGER SERIOUSLY ILL.

-do-

-do-

-do-

-do-

-do-

-do-

DANGEROUSLY ILL.

-do-

C.R. <sup>1854</sup> Quarter No.

# NEWFOUNDLAND 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 Dept of Militia

Line Number	Rcd	By	Sent	by	Check

Dated **Aug. 24th, 1918**

To **William Boyd, St. Anthony**

Regret to inform you that Record Office, London, officially reports **No. 1854, Private Joseph Boyd at No. 1 South African General Hospital Aug. 21st 1918** appendectomy

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

**J. R. BENNETT**

Minister of Militia.

**FOR TYPEWRITER**



C.R. 1854

Extract from <sup>th</sup> telegram received from London, dated  
August 23, 1918.

No. 1. South African General Hospital, August 21st.  
seriously ill, Appendectomy 1854 Boyd.

C.R. 1854

Extract from Casualties received from P.&.R.Office, London,  
Aug 23rd, 1918.

G.C. 1854. 1st South African General Hospital, Abbeville, telegraph  
21-8-18,

1854 Pte. Boyd,

Seriously ill, appendectomy.

Authority: Telegram from G.S. Cas., 23/8/18

C.R. 1854

Extract from Nominal Roll of Draft to B.E.F. embarked  
Southampton 10-5-1A.

8

#1854 Pte. J.F. Boyd.

C.R. 1854

Extract from Casualty received from the Pay & Record Office,  
London, dated February 14, 1918.

#1854 Pte. J. Boyd.

ex 4th London General Hospital, 14/2/18 is granted furlough  
to 23/2/18 and is ordered to report at Command Depot,  
Ripon on expiry.



C.R. 1854

Extract from Casualties Repatriation Draft No. 57

1854 Pte. J. Boyd.

ex 4th London General Hospital 14/2/18 is granted furlough to 23/2/18, and is ordered to report at Command Depot, Ripon on expiry.

Authority A.F.B. 256 from Hospital.

C.R. 1854

Extract from Telegram from ~~Byh.~~ to Military dated Jan. 22/1918.

With reference your telegram Dec. 5th.,  
1854 Boyd O. C. unable to recover  
over payment stop.

C.R. 1854

Extract from Daily Orders, Part 11, UWI: The Royal Field. R. Sgt.,  
dated 29th. Dec. 1917.

STRONG.

1854 Pte. J. Boyd.

Invalided to U.K. 24/11/17. W.Sed.

C.R.

1854

Extract of Casualty received from Pay & Record office,  
London, date 2 December 4, 1917.

#1854 Pte. J. Boyd. ✓

Forwarded 20/11/17.



C.R. 1854

Extract from War Office List No. G. 1400  
dated 4/12/17.

---

#1854 Pte. J. Boyd.

WOUNDED

20/11/17.

BC.

C.R. 1834

NO. 1854 PTE. JOSEPH BOYD.

EXTRACT OF CASUALTY LIST RECEIVED FROM THE PAW AND RECORD  
OFFICE LONDON DATED NOVEMBER 27th, 1917.

*Right Foot.*  
"AT 4TH LONDON GENERAL HOSPITAL GUNSHOT WOUND ~~LEFT WRIST~~  
SLIGHT."

# NEWFOUNDLAND POSTAL TELEGRAPHS.



## Cable Connection with all the World

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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 air 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, or through 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

November 27, 1917.

To

Mr. William Boyd,

St. Anthony,  
Regret to inform you that Record Office,

London, officially reports No. 1854, Private

Joseph F. Boyd, has been admitted to the Fourth

London General Hospital, suffering from slight

gunshot wound in the right foot.

Upon receipt of further information I shall immedi-

ately wire you and trust that next report will be

of his convalescence.

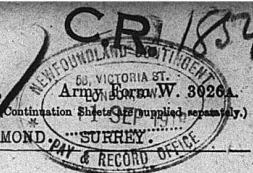
J/11/1917 R.A. SQUIRES

Colonial Secretary.

FOR TYPEWRITER

1745  
C. 2.—Casualties.

COLONIAL CONTINGENTS ONLY.



SOUTH AFRICAN HOSPITAL, at RICHMOND.

Affiliated to

NOMINAL ROLL of Sick and Wounded from the \* French Expeditionary Force

admitted on 9/9/18

from Hospital Ship Princess Elizabeth, disembarked at

\* Here insert which Expeditionary Force.

Dover.

NOTE.—Two copies of these Rolls to be forwarded, not later than the day after admission :

- (i) One copy direct to the War Office, **FINSBURY COURT, FINSBURY PAVEMENT, E.C.2.**
- (ii) The other direct to the O. I/c of Records of the Colonial Contingent concerned.

\* The nature of the casualty is required for telegraphing details overseas. If the details given are insufficient, reference back to the hospital for further information is rendered necessary. The following instructions should therefore be carefully followed in all Colonial cases :

- (a) In the case of sickness, the nature and degree should be stated, e.g., enteric, slight.
- (b) In the case of wounds, the nature of the wound, the part of the body affected, and the severity of the injury should be stated, e.g., gunshot, skull, severe.

If a limb has been amputated the fact should be recorded.

Admissions to the outlying sections of the hospital should be shown separately. If the distance of these sections should render it impossible to forward the rolls the day after the admissions, the sections should be instructed to send lists (on these Army Forms) direct to the War Office, and to the Colonial Contingent Record Office concerned.

Regtl. No.	Rank	Name (Surname first)	Corps (Battn. numbers to be shown, also full title of Colonial Unit)	Casualty * (See note in large type above).
1854	Pte.	Boyd, Joseph.	R. Nfld R.	Acute Appendicitis severe
		(Sgd) E. N. THORNTON, Lt.-Col., S.A.M.C., O.C., Sth African Hospital, Richmond.		





DEPARTMENT OF MILITIA

ST. JOHN'S, NEWFOUNDLAND

March 1st. 1919

From : The Paymaster & O i/c Records

To: The Officer Commanding,  
Royal Mfld. Regiment,  
Discharge Depot.

Re #1854, Pte. Jos. F. Boyd

The above man's allotment of 40¢ per day  
in favour of his mother, Mrs. William Boyd, has  
been cancelled from and including Feb. 1/19

*J. H. Hassick*

Lieut.

For Paymaster & O i/c Records.

*6.*

TELEPHONE 230.

ACCOUNTS COLLECTED QUARTERLY.

P. O. BOX 122.

302 WATER STREET,

St. John's, Newfoundland, *Nov 28* 1919

*M. M<sup>o</sup>. J. F. Boyd.*

In account with *Charles Ellis,*

ENGLISH AND AMERICAN HIGH-CLASS TAILORING.

*To Cash*  
*No 1854 J. F. Boyd*

*60.00*

*W. C.*

*To Payment*  
*Please pay this bill and charge to my a/c.*

*6*



*Recd Payment*  
*Charles Ellis*

February 27th. 1919.

From Officer Commanding.  
Depot.

To Paymaster & Officer I/C Records  
Militia Department.

1854 Private Joseph F Boyd.

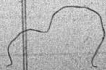
Above noted man has made application to have his allotment of 40¢ per day in favour of his mother (Mrs. Wm. Boyd) cancelled from and including February 1st 1919.

Will you please carry out and advise.

J. Boyd.

1854

P.R. 10





No. 4964/83/P&A

~~NEWFOUNDLAND CONTINGENT~~

ENCLOSURE

N.F.P/55.

To: The Hon. the Minister of Militia,

Posted.....

Pay & Record Office,  
58, Grosvenor Street,  
London, S.W.,

St. John's,

27th March

1919.

Newfoundland.

Reference: Last Pay Certificate .Repatriation Draft 81.  
Amended

Herewith Last Pay Certificate relating to 1854 Pte. J.F.Boyd  
of the above named draft.

Please acknowledge receipt hereon.

(Sig.) \_\_\_\_\_

(Date) \_\_\_\_\_

*J.F.M. Callan*  
Chief Paymaster & O. i/c Records.

AMENDED STATEMENT OF ACCOUNT TO ONE NOTIFIED PER N.F.P/94A, SERIAL NO. 57.

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. 1854 Rank \_\_\_\_\_ Name Boyd, F.F. Unit R. Newfoundland Rgt. who was repatriated  
 on 30/1/19 Pte. Boyd, F.F. Authorised Draft 81. Cause \_\_\_\_\_  
 to Newfoundland

STATEMENT OF ACCOUNT

PARTICULARS		£	s	d	PARTICULARS		£	s	d		
Balance Dr. from					Balance Cr. from						
Allotment 42 days @ 30 p.	12 60	2	11	9	Pay 42 days @ \$ 1.00	42 00	3	12	9		
Cash Payments:					Field Allow 42 days @ \$ 0.10 1/2	4 28					
Depot " 1st Batt. V.12.		3	0	0	Other Allowes days @ \$	46 20	9	9	10		
" " 2042.			10	0	R. Allow: V.11.		1	5	0		
" " 27/12/18.			10	0	Other Credits:						
" " 3/1/19.			10	0							
Other Debits: 10/1/19.			10	0							
" 17/1/19.			10	0							
B.D. 6d. Miss Stopp 2/5d.			2	11							
Total Debits			8	4	8	Total Credits			14	7	7
Balance due by Paymaster			6	2	11	Balance due to Paymaster			14	7	7
			14	7	7				14	7	7

TO: 31/1/19  
 PERIOD: FROM 21/12/18

CHECKED.  
*AmW.*

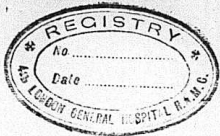
I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of

(Place) \_\_\_\_\_ (Date) 191

Made up and checked in accordance with information received in the Pay & Record Office O.C. " " Company. London to 31 1/ 19. and is therefore subject to amendment if and as may be found necessary.  
 Pay & Record Office, London, S.W. 1.  
 Chief Paymaster & O. i/c Records.

191  
 March 20th. 9.





No 4854 Pte J Boyd

Newfoundland Regt.

Wardell Military Hospital

Hammore

Middlesex



No. \_\_\_\_\_

N.F.P./45.

NEWFOUNDLAND CONTINGENT

To: Chief Paymaster & Officer i/c Records,  
Newfoundland Contingent, 381  
58, Victoria Street,  
London, S.W. (1).



Please remit to \_\_\_\_\_

the sum of five pounds \_\_\_\_\_ shillings, on  
account of any balance that may be due to me.

(£ 5-0-0). Regtl. No. 1854 Rank Private

Name Boyle Joseph

OK  
£5-0-0  
14/1/18

**APPROVED.**

Officer i/c.,  
Mr. Shurlatt  
Hospital.

Dated at Wardle Mill Hospital

9/1/18 1918

MAJOR, R.A.M.C. (T.)  
Registrar, 4th London General Hospital.



723/1

Wardell Military  
Hammore, Middlesex.

14th January 8

Joseph Boyde

1854

Pte.

5:0:0

*(Handwritten mark: a curved line with a diagonal slash through it)*

ORIGINAL

N.F./12.



NEWFOUNDLAND CONTINGENT

CANCELLATION OF ALLOTMENT

I, (No.) 1854 (Rank) Private (Name) Boyd Joseph  
 hereby apply for cancellation of Allotment made by me on  
 N.F. 1500 dated 1st October 1915 in favour  
 of Mr W. F. Boyd, St. Anthony for \$ — cts 50  
 per diem. Such cancellation to take place on the  
28 day of February 1917

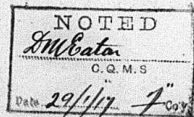
I agree to accept all risks and consequences of this application failing to reach headquarters, St. John's, by mail in time to become operative at above nominated cancelling date; and that in the event of such non-delivery by mail, and thereby the Allotment continuing to be paid to the Allottee, I also agree to such further stoppage as may be thereby necessary being made against me in the Pay Books, or otherwise to refund such overdrawn amount or amounts.

Dated at Qx  
January 29th 1917

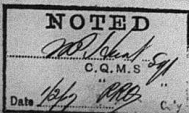
Joseph Boyd  
 Allotter.

Approved and Witnessed,

C. S. Dicks  
 O.C. "2" Company.



To be made out in TRIPPLICATE and sent to the Paymaster & Officer in Charge of Records, who will forward Original to Headquarters by first mail, Duplicate by the following, and retain Triplicate.



13-12-17

4th London Gen. Hospital

7. R. P. Ward.

Denmark Hill

London. S. E. 5

ok E. M.

4719

To the Paymaster  
Sir

Will you oblige me with the  
sum of £3. (three Pounds) on my account  
yours faithfully  
Boyd. J.

No. 1854.



W. H. Bullen 27/12/17

off  
2/11.  
Recpt no 4719







No. 4046

ORIGINAL



NEWFOUNDLAND CONTINGENT

ALLOTMENT

I, (No.) 1854 (Rank) Private (Name) Boyd Joseph  
 hereby agree, until further notification by me, and in required form,  
 to make an allotment of — dollars and 30 cents  
 per diem, from my pay, to and for the benefit of the undermentioned  
 Person and/or Persons. Such payments to be made on proof of identity  
 of the Person and/or Persons concerned, viz:-

Whether Wife Child, other Relative or Friend	NAME (In Full.)	ADDRESS	Amount (Each Person)	
			£	¢
Relative	William T. Boyd	St Anthony		30¢
	William Tom #1500	—		30¢

This allotment to take effect from and including 1<sup>st</sup> March 1917

Note:- This form must be completed and signed by the Soldier, counter-  
 signed by the Officer Commanding his Company, and forwarded to the  
 Paymaster in accordance with P.&R.O. C/L. 10, 9/12/13.

(Sig.)

C. B. Dicks  
 Officer Commanding  
 "F." Company.

Dated at

Que  
January 29 1917

(Sig.)

Joseph Boyd  
 Allotter.

NOTED

C. Q. M. S.

NOTED

D. M. Eaton  
 C. Q. M. S.

Date 29/1/17

No. \_\_\_\_\_  
Regtl. No. 1854  
Rank Private  
Name Boyd  
Regiment R. Rifle  
Date from 14 - 2 - 1918  
to 23 - 2 - 1918

To proceed to \_\_\_\_\_

**NEWFOUNDLAND CONTINGENT**  
Station Hospitals  
58, VICTORIA ST.,  
LONDON, S.W.  
Date 14 2 18  
**PAY & RECORDS OFFICE**

Address John R. Farrow to which any  
orders will be sent:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

0/c  
Newfoundland Regt  
58 Victoria St

To be Discharged from Hospital to-morrow.

SW

Unit.	Squadron, battery, or company.	Regtl. No.	Rank and Name.	
Newfoundland Regt	C	1854	Pte	Boyd Joseph

admitted to this Hospital from France on 25/11/17 ~~when~~  
~~he~~ he is classified under A.C.S. 1910/1916  
 II Command Report returned to you for disposal  
 please



fulfill to  
23/1/18

J. J. Shaw  
CAPTAIN, R.A.M.C. (T.),  
Registrar, 4th London General Hospital.

sz11/3

Wardell  
Stanmore

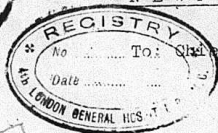
9th February 8

Joseph Boyd

1854 Pte

5:0:0

## NEWFOUNDLAND CONTINGENT



To: Chief Paymaster & Officer i/c Records,  
Newfoundland Contingent,  
58, Victoria Street,  
London, S.W. 1.

Please remit to

Pte J Boyd 1854  
Wardell Hospital Stannure

the sum of Five pounds — s. (£ 5-0-0)

on account of any balance that may be due to me.

Regtl. No. 1854 Rank Pte

Name Joseph Boyd

Approved \_\_\_\_\_  
Officer I/C.,

\_\_\_\_\_ Hospital.

Dated at

Wardell Hospital

Feb 5<sup>th</sup> 1918

APPROVED.

M. Shon  
CAPTAIN, R.A.M.C. (T.),  
Registrar, 4th London General Hospital.

2/11/3

OP £5-0-0  
AW. 8-2-18



No. 4838/41

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



*ny boy n/w*

N.F.P./70.

Ripon.

Subject: 28th March 1918

Subject: 1854, Pte. J. F. Boyd,

With reference to the following telegram (2885) from the Hon. Minister of Militia, received 28 / 3 / 18

pay to 1854, Boyd, £10:0:0

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

Chief Paymaster & O. i/c Records.

4 - 4 - 1918  
*[Signature]*

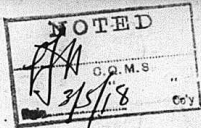
Receipt hereunder.

*W. Rossie*  
Officer Comdg. 7 *Cap*  
~~1st Newfoundland Regiment~~ *NCO*

received the sum of \_\_\_\_\_

£ 10 = 0 = 0 on account of cable remittance from Newfoundland.

J. Boyd  
No. 1854 Rank Te



To Paymaster  
P. G. A. C. Victoria, Lt.

No. 13022 Mr. Boyd Sr. is on draft leave can you  
arrange to pay him any credit due;  
He has a Debit bal of £4-2-11 here please

File 1854 Boyd  
J. H. Cunningham  
Coy

O.C. "H" COY.  
2ND BATTN. ROYAL NEWFOUNDLAND REGT.

Forms  
O. 348  
1689

MEMORANDUM

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

From *Adjutant*  
*South Africa Hospital Richmond Park*

From

To *Regimental Paymaster*  
*Newfoundland Regt*  
*58 Victoria St. London*  
*SW1*

To **Officer Commanding,**  
**South African Hospital,**  
**Richmond Park,**  
**ANSWERREY.**

14682

*11 Sept 19* 191

Pay & Record Office,  
12th, September 1918

*AB 64 Newcastle.*

Received, please.

*1854 St Boyd St*  
*Newfoundland Regt*

Major,  
Chief Paymaster & O i/c Records.

*Sgt. ? Major S.P.M.C.*

F..

*Adjutant South Africa Hospital*  
*Richmond Park*

*No 8062*  
*M15*

15871/1.

Oct. 2nd.

8

Mrs. Whelan,

Bingham House,

Petersham Road, Richmond.

5.0.0.

1854, Pte. J.F. Boyd, 1st. Royal Newfoundland

Regiment.

15870/1.

1854, Pte. J.F. Boyd,

Royal Newfoundland Regiment,

Red Cross Hospital, The Green,  
Richmond.

26 9 18 8359 ✓

5.0.0.

Mrs. Whelan, Bingham House, Petersham Road, Richmond.





15542/1/P&A

CHIEF PAYMASTER & OFFICER IN CHARGE  
NEWFOUNDLAND COMBING CENT.  
53, VICTORIA STREET,  
LONDON, S.W. 1  
ENGLAND.

Commandant,  
Red Cross Hosp.,  
The Green,  
Richmond.

FM/WF

Pay & Record Office,

26th, September '81

1854, PTE. J. F. BOYD,  
ROYAL NEWFOUNDLAND REGT.

The attached application  
26/9/18 (8359) from the above  
named Soldier is forwarded for  
your endorsement and return  
to this office, please.

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

Officer i/c Records  
Royal Newfoundland Contingent.  
London. S.W. 1

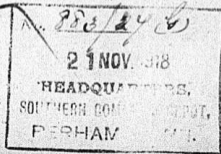
1854 Pte Boyd. J. 1st R. Newfoundland Regt.

Kindly forward to me, as early as possible, A.F.W 3016 of the  
arm man who joined this Depot on 13/11/18.

PERHAM DOWN,  
ANDOVER,

HANTS

2/11/18



NEWFOUNDLAND CONTINGENT,  
PAY & RECORD OFFICE

REC'D 23 NOV 1918  
Ref. Nos. 001

BRANCH

Contingent

P & A

R & C

B & E

P.S.

*John*

for. O.C. Southern Command Depot.

Lieut. & Asst. Adjt.

No. 17980/2

N.F.P./80.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,  
South African Hospital,  
Richmond,

6th November 1918

191

Subject: 1854, Pte. J. F. Boyd

ANSWER.

With reference to the following telegram (9545) from the Hon. Minister of Militia, received

Pay to 1854 Boyd £10:0:0

Kindly advise whether this amount should be remitted to you for payment to this Soldier, retained to credit of his account, or otherwise dealt with.

Chief Paymaster & O. i/c Records.

*Paid by Postal  
Draft 065052  
6/11/18  
Noted. Gandy. P.  
[Signature]*

1780/2

South African Hospital,  
Richmond,

6th November 8

1854, Pte. J. F. Boyd

9545

Pay to 1854 Boyd £10:0:0



17989/1959/R.&.O.  
Forma  
1918  
1960

MEMORANDUM.

C.P. & O. i/c Records,  
Newfoundland Contingent.

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

To Officer Commanding,  
2nd Bn.,  
R. Newfoundland Regt.,  
Winchester.

To The Chief Paymaster,  
Royal Newfoundland Regt.  
London, S.W.

ANSWER.

Pay & Record Office.

6th November, 1918.

Nov. 13th 1918.

1854 PTE. J. BOYD.

Owing to the fact that  
Hospital advice did not reach  
this Office until after this  
man proceeded on furlough,  
he was ordered to report to  
your station on expiry of  
furlough on 10/11/18, instead  
of to Southern Command Depot.

This man was sent to the  
Southern Command Depot, Perham  
Down Camp, to-day.

Will you, therefore, please  
transfer him to the Command  
Depot for further treatment?

NEWFOUNDLAND CONTINGENT, PAY & RECORD OFFICE.
Ref. Nos. IN 9978
Rec'd 14 NOV 1918
ck'd Ans
Ref. Nos. 04

*R. J. Munro* Major,

*R. J. Munro*

Chief Paymaster & O. i/c Records.

LIEUT. COLONEL.  
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

HA/NV

*Kamaety Extracted*  
*Sh.*

BRANCH	
Send	
P & A.	
R. & C.	
B. & E.	
P. S.	

17989/1959/R.&.O.

Copy to Cms. Depot  
6/11/18

C.P. & O. i/c Records  
Newfoundland Contingent.

Officer Commanding,  
2nd Bn.,  
R. Newfoundland Regt.,  
Winchester.

Pay & Record Office.

6th November, 1918

1854 PTE. J. BOYD.

Owing to the fact that Hospital advice did not reach this Office until after this man proceeded on furlough, he was ordered to report to your station on expiry of furlough on 10/11/18, instead of to Southern Command Depot.

Will you, therefore, please transfer him to the Command Depot for further treatment?

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

HA/NV

Entered in  
6/11/18

10 Jan 1919.

Miss Grace Hally,  
43 Hopskill Rd.

NEWFOUNDLAND CONTINGENT,  
PAY & REQUISITION OFFICE,  
St. John's, N.W.

NO. 13 JAN 1919

Let. Nos. 001

Yours  
Hazel Comp

Dear Sir,

I should be very much  
obliged if you could give me  
the address of Pte. [Name] [Rank]  
Reg. No 1854 1st Y. B. Co. L.I.C. as  
I have not heard from him  
for some weeks past and  
am anxious concerning him.  
Trusting you will reply  
by return.

I am  
Yours sincerely  
Grace Hally

Sept 26<sup>th</sup> 1918. H. B. Hopkins Rd.  
St. Asgore, N. N.

NEWFOUNDLAND CONTINGENT, PAY & RECORD OFFICE.	
Ref. Nos. II	2375
Rec'd	27 SEP 1918
Ack'd	
Ref. Nos. VII	

In South African Hop  
Richard Jurey  
suffering from acute  
Appendicitis

Dear Sir

AL	
BRANCH	
Comd.	
R. & C.	2/9/18
B. & E.	
P.S.	

Request me taking  
Robert writing for  
concerning of friend  
J. J. Boyd 154. Fife-  
at 3. C. L. D. Page  
5 D. E. J. France.

of whom I have not heard  
of since Jan 1918.

I have written his U/C.  
and received an answer stating  
he was evacuated to Cessabitch  
Clearing Station but no further  
news of him and also

2.  
instructing me to write you.

What all possible please  
supply me with desired  
information and if possible  
his address

And if you will  
I beg

Yours very sincerely  
Miss Grace Haller

---



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

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

1. Unit and Corps. *Royal Newfoundland* 7. Former Trade }  
or Occupation }
2. Regtl. No. *1854* 3. Rank. *Plt* 7a. If the soldier claims previous service in Army, he should state—  
(a) Former Regts. or Corps; with Regtl. Nos.
4. Name *Boyd E J*  
(Surname) (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....  
in category (or grade).....
8. If the disability is an injury was it caused  
(a) in action (b) on field service  
(c) on duty (d) off duty? (b) Date of Discharge;  
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—  
(a) When (d) Particulars of Pension or Gratuity (if any)  
(b) Where  
(c) Opinion of Court

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

### Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability. *9. 9. 18.*
12. Place of origin of disability. *France*

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. *On 9. 9. 18 developed acute appendicitis place in Hosp. and operation performed, appendix removed and ordinary tube left in, developed general peritonitis remained in Hosp. in France about four weeks then removed South African Hosp. Richmond discharged from there 10<sup>th</sup> Nov 18*

14. State whether the disabilities are
- (i) Service during the present war .. .. . *No*
  - (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? } *N.A.*

In all cases such as facial injuries, eye, ear, nose and throat, disability, etc., a specialist's report is to be attached with radiographs where possible and in cases of serious injury the exact location should be indicated.

15. What is his present condition? *Large operation vol. over meburney (A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)* *point, does not give pain in pressure. General condition good. Also over 100 lbs. and operation near about size of 50 but fine result of drainage tube. Complaints of no pain*

16. Was an operation performed? If so, when and what was its nature? *Yes. appendicitis*
17. If not, was an operation advised and declined? *N.A.*
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? *N.A.*
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? *N.A.*

20. Do you recommend— *Repetition*
- (a) Discharge as permanently unfit?
  - (b) Change to United Kingdom?
- Note—(b) is only applicable to soldiers invalided at Foreign Stations. *make 1/1*

Station *Agony Down Camp* Medical Officer in charge of case.

Date *2-1-19*

\* 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

**OPINION OF THE MEDICAL BOARD.**

NOTES.—(1) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(i) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases 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.

21. Give diagnosis and particulars of:—
- (a) Any disability claimed or discovered.
  - (b) The present condition thereof.

22. State whether the disabilities are:—
- |   | (a) Attributable to | (b) Aggravated by |
|---|---------------------|-------------------|
| (i) Service during the present war .. .. .                              | .....               | .....             |
| (ii) Previous active service .. .. .                                    | .....               | .....             |
| (iii) Climate in pre-war service .. .. .                                | .....               | .....             |
| (iv) Ordinary military service before the war .. .. .                   | .....               | .....             |
| (v) Serious negligence or misconduct on the part of the soldier .. .. . | .....               | .....             |
- Give details:

- 22 (a). If not due to any of these causes, to what specific condition do the Board attribute it? .. .. .

23. Is the disability in a final stationary condition? If not
- (a) How long is the present degree of disability likely to last?
  - (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

*Pay*

# WESTERN UNION

ANGLO-AMERICAN  DIRECT UNITED STATES  
CABLEGRAM

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

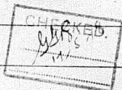
25/1/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To EPM MRS BOYD

STANTHONY (Newfoundland)

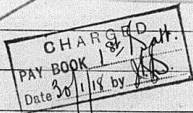
MONEY NOT RECEIVED MAKE ENQUIRIES

BOYD



*10 1/2*  
*20 5*  
*25*  
*2/18*

*Charge to J. Boyd.*  
*1854*



Authorised.

NOT TO BE  
TELEGRAPHED.

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

Signature \_\_\_\_\_ Address 58 Victoria St. S.W. 1.

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

No: 1854 Rank Pte Name Boyd J. J. No. \_\_\_\_\_

Pay	F.A.	Wks	Total	N.F.
100	10		110	
Less Allotment			30	
Net Rate			80	

DEBITS	Date	£	s	d	CREDITS	Period		Days	Rate	£	s	d	CR
						From	To						
Balance				21	Balance		21 <sup>12</sup> / <sub>17</sub>						9 10 4
Acquittance Rolls					Pay @ Net Rate	22 <sup>12</sup> / <sub>17</sub>	14 <sup>2</sup> / <sub>11</sub>	53	80	4400	9	0	10
Hospital Advances				17 6	Hospital Advances								1 0 0
A.B. 64.					Ratio allow.								
P.&R.O. Payments				10 0 0	10 days w/								9 11 2
					P.&R.O. Payments								
					8-17-7								
Cheque 7559	14/7/18	8		10 0									

10-19-7

JAB  
14/7/18

ACKT dated	/ /	No. IN
Received	/ /	
REPLY dated	/ /	
Received	/ /	
IASI Ref No.		
NEXT " "		

1985/59/P.&A

The Hon. The Minister of Militia,  
St. John's,  
NEWFOUNDLAND.

WF/PK. 17th February 9.

1854, PTE. BOYD.  
ROYAL NEWFOUNDLAND REGT.

Exchange of telegrams  
confirmed:-

(1)  
Received 4/12/18 (9545):  
"Synoptical London.  
"Pay to 1854 Boyd £10.  
"MILITARY.

(2)  
Received 5/12/18 (10,511):  
"Synoptical London.  
"Reference my telegram  
"Nov. 4th-should be read-  
"1854-Boyd-three pounds-  
"can you adjust-or recover-  
"if paid-fullstop.  
"MILITARY.

(3)  
Despatched 22/1/19. (37)  
"Military, St. John's.  
"Reference your telegram  
"5th December-1854-Boyd-  
"Officer Commanding-unble  
"to recover-overpayment-  
"fullstop.  
"SYNOPTICAL.

Copy of memoranda exchanged  
with Officer Commanding, 2nd.  
Batt. is enclosed for information,  
and any further action that may be  
necessary, please.

Capt.  
Asst. Paymaster.  
For Chief Paymaster & C.i/c. Recds.



EXTRACT OF TELEGRAM.

"Despatched 22/1/19, (37):

"Military. St. John's.

"Reference your telegram 5th December-1854-Boyd-Officer Commanding-  
"Unable to-recover-overpayment-fullstop.-

SYNOPTICAL.

21730/2548/P

Forms

345

63

MEMORANDUM.

CHIEF PAYMASTER & OFFICER I/C. RECORDS.

From **NEWFOUNDLAND CONTINGENT**

53, VICTORIA STREET,  
LONDON, S.W. 1.  
ENGLAND.

To **Officer Commanding,**

2/Bn. Royal Nfld. Regt.,

Hazeley Down Camp,  
Winchester.

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

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

ANSWER.

FM/NM.

Pay & Record Office.

31st December 1918

Jan. 15th 1919.

1854, PTE. BOYD.  
ROYAL NEWFOUNDLAND REGT.  
-----

It is regretted that it is impracticable to recover this amount as the man has spent the £7 in good faith.

He has an allotment of 70 cents and to recover this £7 would leave him without pay for a considerable period.

With reference to the following telegram from the Minister of Militia 5/12/18, (10,511):-

- "Reference my telegram Nov.
- "4th-should be read- 1854-
- "Boyd- three pounds- can you
- "adjust- or recover- if paid-
- "fullstop.

Military."

Postal Draft £10.0.0. was paid Pte. Boyd whilst on furlough 8/11/18. Will you kindly take the necessary steps to recover overpayment of £7.0.0., and remit that amount to this Office, please.

NEWFOUNDLAND CONTINGENT,  
PAY & RECORD OFFICE.

105 11 534

18 JAN 1919

*J. W. March*  
for

LIEUT. COLONEL,

COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

*H. A. Munnell*  
Major,  
Chief Paymaster & O. i/c Recds.

*[Signature]*

# CANADIAN PACIFIC-ALLAN LINES.

THE CANADIAN PACIFIC OCEAN SERVICES LTD.,

Managers and Agents

To be surrendered when embarking on

Steamship Corsica Date 30/1/1919  
No. 1854 Rank Pt.  
Name Boyd  
Res. Unit Royal Navy Orig. Unit I.S.  
Sign here \_\_\_\_\_

This Card must be given up when going on board ship.



Boyd. J

1854

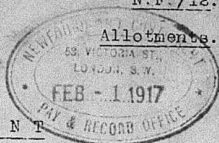
Sept



COPY

COPY

N.F. / 12.



NEWFOUNDLAND CONTINGENT

CANCELLATION OF ALLOTMENT

I, (No.) 1834 (Rank) Private (Name) Boyd Joseph  
 hereby apply for cancellation of Allotment made by me on  
 N.F. 1500 dated 1st October 1915 in favour  
 of M<sup>r</sup>. W. F. Boyd for \$ — cts 50  
 per diem. Such cancellation to take place on the  
28 day of February 1917

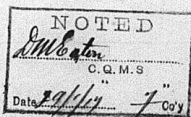
I agree to accept all risks and consequences of this application,  
 failing to reach headquarters, St. John's, by mail in time to become  
 operative at above nominated cancelling date; and that in the event  
 of such non-delivery by mail, and thereby the Allotment continuing to  
 be paid to the Allottee, I also agree to such further stoppage as may  
 be thereby necessary being made against me in the Pay Books, or other-  
 wise to refund such overdrawn amount or amounts.

Dated at Que  
January 29<sup>th</sup> 1917

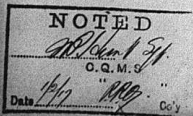
Joseph Boyd  
 Allotter.

Approved and Witnessed,

Joseph J. Boyd  
 O.C. "F." Company.



To be made out in TRIPLICATE and sent to the Paymaster & Officer  
 in Charge of Records, who will forward Original to Headquarters by  
 first mail, Duplicate by the following, and retain Triplicate.



DUPLICATE  
ORIGINAL



NEWFOUNDLAND CONTINGENT

CANCELLATION OF ALLOTMENT

I, (No.) 1854 (Rank) Private (Name) Boyd Joseph  
hereby apply for cancellation of Allotment made by me on  
N.F. 1500 dated 1<sup>st</sup> October 1915 in favour  
of Mr W. J. Boyd, St. Anthony. for \$ — cts 50  
per diem. Such cancellation to take place on the  
28<sup>th</sup> day of February 1917

I agree to accept all risks and consequences of this application failing to reach Headquarters, St. John's, by mail in time to become operative at above nominated cancelling date; and that in the event of such non-delivery by mail, and thereby the Allotment continuing to be paid to the Allottee, I also agree to such further stoppage as may be thereby necessary being made against me in the Pay Books, or otherwise to refund such overdrawn amount or amounts.

Dated at Ays  
January 29<sup>th</sup> 1917

Joseph Boyd  
Allotter.

Approved and Witnessed,  
C. B. Dicks  
O.C. "F." Company.

NOTED  
D. M. Cato  
C. Q. M. S.  
Date 29/1/17 7 Co'y

To be made out in TRIPLICATE and sent to the Paymaster & Officer in Charge of Records, who will forward Original to Headquarters by first mail, Duplicate by the following, and retain Triplicate.

NOTED  
[Signature]  
C. Q. M. S.  
Date 1/2/17 184 Co'y



May 17th, 1919

#1854 Pte. Joseph Boyd,  
St. Anthony.

Dear Sir:-  
Please find enclosed "Discharge Certificate  
No. 2219."

Yours truly

Captain,  
Paymaster & C. i/c Records

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 1854 Rank Private Name Boyd J  
 Intended place of residence St Anthony
2. Occupation Fisherman  
 Classification of soldier E Medical Category AI
3. The above named man is discharged in consequence of DEMOBILIZATION.

### Eligible for War Service Gratuity

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.
- Place ST. JOHN'S .....  
 Date MAY 1 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 and date ST. JOHN'S .....  
MAY 1 1919 .....  
 Signature of soldier  
 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 ST. JOHN'S .....  
1-5-19 .....  
 Signature of soldier  
 Signature of witness

### STATEMENT OF SERVICE

7. Enlisted for service 28-9-15 ..... No of days on Military  
 Discharged from service 3-5-19 Plus 14 days Service 1328

### APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge of Records, The Royal Newfoundland Regiment, twenty-eight days from date.
- Place ST. JOHN'S .....  
 Date MAY 3 1919 .....  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment.

### CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
- Place St Johns Nfld .....  
 Date May 17/1919 .....  
 Officer in Charge of Records  
 The Royal Newfoundland Regiment

3  
31  
30  
31  
31  
38  
31  
30  
17  
32

A-10-2079/22, 19

PILLEYS ISLAND

JUNE 4, 1919

To Paymaster, Militia Department

Please send month pay to Pilleys Island

#3803 of Robatton

and 1854 J. Boyd.



# The Royal Newfoundland Regiment

Class for Demobilization:—

*96*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

*30.4.19*

Regimental No.

*1854*

Name

*Joseph Boyd Lt*

Address

*St Anthony*

Present Medical Category

*A1*

Recommended for:—

(a) Immediate discharge

(b) Standing Medical Board

Members of Board

*R.H. Lat Cape*  
O.C. Discharge Depot.

*J. L. ...*  
Senior Medical Officer

*Geo. Burden*  
M.B. Depot



# The Royal Newfoundland Regiment

## DEMOLIBIZATION OF

Reg. No. 54 Rank Private Name Boyd Joseph  
 Date of Enlistment 28-9-15 Address St. Anthony District Barb  
 Occupation Tradesman Classification for Discharge F Medical Category F.1  
 Recommendation S.M.B. \_\_\_\_\_ Disability Rating \_\_\_\_\_

Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B-120	M 93		

Date Jan-19

O. C. Discharge Depot.

### PARTICULARS FOR DEMOLIBIZATION

1. Civil Re-Establishment.

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

*Boyd J*

Particulars passed to Vocational Officer for information and action.

Date \_\_\_\_\_

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$65.00

(b) Clothing Supplied At Millerton St

Date 1-5-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 652 to his home  
at St Aubrey and Release Certificate No. 2197 issued.

Date 1-5-19

J.A. Crawford  
Demobilisation 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 11-11-19

Date 1-5-19

H.M. [Signature]  
Depot Paymaster.

Discharge approved for 3-5-19

Forwarded with following documents to O.C Discharge Depot.

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

Date 2-5-19

J.A. Crawford  
Demobilisation Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date MAY 3 1919

R.H. [Signature]  
O. C. Discharge Depot.

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

Date .....

## Civil Re-establishment Committee



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

To resume former occupation  
Fishing

Boyd Joseph  
Signature of Man.

Reg. No.

1854

J. A. L...  
Signature of the Vocational Officer or his Representative.

Place

ST. JOHN'S.

Date

May 11 1919

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## 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

Boyd, Joseph.

Regiment from which discharged

Royal Newfoundland

Regimental number

1054

Intended address

St Anthony

Height on discharge

5 Feet 8

Color of hair on discharge

Black

Complexion

Fair

Color of eyes

Blue

Descriptive Marks

Scar on Foot etc.

Figure on discharge

No

Christian name of Father

William

Christian name of Mother

Mary

Wife's maiden name in full

[Redacted]

Date and place of marriage

[Redacted]

Christian names of children

[Redacted]

Place and date of soldier's birth

St Anthony, November 1<sup>st</sup> 1899.

Nature and locality of civil employment required

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

(Soldier's signature in full)

Boyd, Joseph

(Rank)

Station

St Anthony

Date 30-4-19.

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

Station

Date

Medical Officer of Hospital,  
Unit, or Command Depot

ORDERLY ROOM

DEPOT

St. John's, Newfoundland



**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 of health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve. In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

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

1. Unit and Corps..... *Royal Newfoundland Pte.* }  
 Farmer Trade }  
 or Occupation }
2. Regtl. No. *1854* 3. Rank..... 7a. If the soldier claims previous service in Army, he should state—  
 (a) Former Regts. or Corps; with Regtl. Nos.
4. Name ..... *B. V. D. J.*  
 (Surnames) (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....  
 in category (or grade).....
8. If the disability is an injury was it caused  
 (a) in action (b) on field service  
 (c) on duty (d) off duty? (b) Date of Discharge;  
 (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—  
 (a) When (d) Particulars of Pension or Gratuity (if any)  
 (b) Where  
 (c) Opinion of Court

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

### Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability. *9-9-18*
12. Place of origin of disability. *France*
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.

*appendicitis*

*In 9-9-18 developed acute appendicitis, placed in hosp. and operation performed, appendix removed and drainage tube left in. Developed general peritonitis and remained in hosp. in France about four weeks, then removed to South African Hosp. Richmond and discharged from there Nov. 1st '18*

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? } M. A.

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? *Large operation, w/d. over McBurney's point, does not give pain on pressure. General condition good. Also over suprathelic area operation near about size of 50 cent piece result of drainage tube. Complains of no pain.*
- (A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)
16. Was an operation performed? If so, when and what was its nature? *Yes. Appendicitis.*
17. If not, was an operation advised and declined? *M. A.*
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? *M. A.*
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? *M. A.*

20. Do you recommend— *Repatriation*
- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?
- Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Station *Hazeley Down Camp*

Date *8-1-19*

Medical Officer in charge of case.

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



No.

102

10 29

191

To

Guatemala

Please deliver to bearer

1850 P. J. Boyd

1 Suit Underwear

2 top Shirts

2 1/2 Coats

1 1/2 Boots

And charge to account of





**Casualty Form—Active Service.**

Regiment or Corps. 1<sup>st</sup> Newfoundland

Rank Pte. Surname Boyd Christian Name Joseph

Religion C. of E. Age on Enlistment 18 years — months.

Enlisted (a) St. Johns Terms of Service (a) duration of war Service reckons from (a) 28/9/15

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

Extended { — } Re-engaged { — } Qualification (b) —

or Corps Trade and Rate —

*Handwritten signature*

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 <u>Hampton</u>	<u>5 8 17</u>	
			Disembarked... <u>Rouen</u>	<u>7 8 17</u>	
			Joined Battalion <u>20 AUG 1917</u>		<u>B 213</u>
<u>28 17</u>	<u>29 9 B.S.</u>	<u>Awarded 28 days P.P.I. Rouen</u>	<u>19 8 17</u>		<u>O 1810 39 c</u>
<u>20 NOV 1917</u>	<u>D.C.</u>	<u>WOUNDED IN ACTION</u>	<u>20 NOV 1917</u>		<u>A.F.B. 213.</u>
<u>22/1/17</u>	<u>39 7 A</u>	<u>in Newfound 2 foot band</u>	<u>C.C.S.</u>	<u>22/1/17</u>	<u>EO 3027</u>
	<u>5 Gen. Hq.</u>	<u>Do</u>	<u>Rouen</u>	<u>22/1/17</u>	<u>A.A. 16639</u>
	<u>Handwritten note</u>	<u>Transferred to England</u>		<u>24/1/17</u>	<u>W 3083</u>
			<u>J. Henry</u>	<u>24/1/17</u>	
			<u>O. i/c No. 1</u>		<u>Infantry Section</u>
					<u>G.H.Q. 3rd Echelon</u>



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.





Temporary

MEDICAL HISTORY of

Surname Boyd (75) Christian Names G

TABLE I.—General Table.

Birthplace { Parish \_\_\_\_\_  
County \_\_\_\_\_

Examined { on \_\_\_\_\_ day of \_\_\_\_\_ 191 ,  
at \_\_\_\_\_

Declared Age \_\_\_\_\_ years \_\_\_\_\_ days.

Trade or Occupation \_\_\_\_\_

Height \_\_\_\_\_ feet \_\_\_\_\_ inches. Weight \_\_\_\_\_ lbs.

Colour of Hair \_\_\_\_\_ Complexion \_\_\_\_\_

„ Eyes \_\_\_\_\_

Chest Measurement { Girth when fully expanded \_\_\_\_\_ inches.  
Range of expansion \_\_\_\_\_ inches.

Physical Development \_\_\_\_\_

Vaccination Marks { Arm, RIGHT | LEFT  
Number \_\_\_\_\_ | \_\_\_\_\_

When Vaccinated \_\_\_\_\_

Vision { R.E.—V— \_\_\_\_\_ With Glasses { R. \_\_\_\_\_  
L.E.—V— \_\_\_\_\_ L. \_\_\_\_\_

Identification Marks, such as Tattoo, Moles, Scars, etc :—  
\_\_\_\_\_  
\_\_\_\_\_

Defects or Ailments :—  
\_\_\_\_\_  
\_\_\_\_\_

Examined and found—

Fit for Grade { I.  
II.  
III.  
IV.

(Strike out those which do not apply.)

Signature \_\_\_\_\_  
Chairman of Medical Board.

Re-examined for posting at \_\_\_\_\_

On \_\_\_\_\_ day of \_\_\_\_\_ 191

Enlisted { at \_\_\_\_\_  
on \_\_\_\_\_ day of \_\_\_\_\_ 191

Joined on enlistment	Corps	Regtl. No.
	<u>Newfoundland</u>	<u>R 7101</u>
Transferred to		

TABLE III.—Boards, Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service; Extension, Re-engagement, or Prolongation of Service, Issue of Surgical Appliances, Particulars of Dental Treatment, etc.

Date	Brief details and Signature
	<b>COMMAND DEPT.</b> <b>SUTTON COLDFIELD</b>
	<u>22.11.18.</u>
	<b>PLACED IN CAT. A 2</b> <b>BY S.M.C.</b> <u>M. J. J. J.</u>
	<b>CAPT. R. A. J.</b>
	<u>R. 7. 19</u> <u>Recd from Rep. of the</u>
	<u>Cap. J. J. J.</u>

Special Remarks :  
\_\_\_\_\_  
\_\_\_\_\_

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

Became non-effective by \_\_\_\_\_  
on \_\_\_\_\_ day of \_\_\_\_\_ 191

(Signature) \_\_\_\_\_

(Rank) \_\_\_\_\_



Medical Case Sheet. 1854. Pte Royd. J. / Roy. Newfoundland Regt.  
Age. 19. Serv: 3 yrs.

9.9.18

S.A. Mil:  
Hospital:  
Richmond.

Acute Appendicitis.

Op: Removal appendix & drainage.

Acute Appendicitis & general peritonitis

Op: 20.8.18. Appendix removed. retro caecal. drainage  
above pubis.

10.9.18

At S.A.M.H. Suprapubic wd healed. large granulating  
area over In: B. incision. Euseb.

General condition good.

Transfer R. R. C. H.

1.11.18.

Discharged to Records.

(sd.) A. S. Wilson. Capt.

E. N. Thornton



LIEUT. COL. S.A.M.H.  
O.C. SOUTH AFRICAN HOSPITAL, RICHMOND PARK.

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178<sup>A</sup> to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY OF

Surname Boya Christian Name J.

**TABLE I.—General Table.**

Birthplace { Parish .....  
County .....

Examined { on ..... day of ..... 191  
at .....

Declared Age ..... years ..... days.

Trade or Occupation .....

Height ..... feet ..... inches

Weight ..... lbs.

Chest Measurement { Girth when fully Expanded ..... inches  
Range of Expansion ..... inches

Physical Development .....

Vaccination Marks { Arm ..... RIGHT | LEFT  
Number .....

When Vaccinated .....

Vision { R.E.—V= .....  
L.E.—V= .....

(a) Marks indicating congenital peculiarities or previous disease—

(b) Slight defects but not sufficient to cause rejection—

Approved by .....  
Rank .....  
Medical Officer.

Enlisted { at .....  
on ..... day of ..... 191

Joined on enlistment { Corps 1st Newfoundlands Regl. No. 1854

Transferred to {

Became non-effective by .....  
on ..... day of ..... 191

(Signature) .....

(Rank) .....

**TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.**

Date	Brief Details and Signature
5-4-18	Category A 2578 DISE 1 Lt Col. R.A.M.C. D.P.R. C. P.R.
	COMMAND DEPOT, SUTTON COLDFIELD, 22. 11. 18
11-12-18	PLA. AT. A. 3 BY S.M.G. J.P.T. R.A.M.C.

**TABLE IV.—Service Table.**

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

TABLE II.—Only for admissions 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 of 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				
	26	2	18	5	4	18	YSD R	40	Category A III	<i>[Signature]</i> 1st Col. P. A. M. O.
<b>MEDICAL OFFICER</b> <i>Ripon</i> African Military Richmond Park	9	9	18	21	SEP	1918	<i>front</i> SIB. 2 Acute Appendicitis	13	<i>incision of granulation; Saperstein Shield lamp K R C 1/2</i>	<i>[Signature]</i>
RED + HP. RICHMOND	21	9	18	1	11	18	—	41	<i>Discharges Class 2</i>	<i>[Signature]</i>
COMMAND DEPOT SUTTON COLDFIE	22	11	18	13	12	18		21	<i>To Unit. A3</i>	<i>[Signature]</i> CAPT. R. A. M. O.



Paymaster


Please pay to Lieut. Col.  
W. F. Rendell the sum of Seventy  
dollars from my War Service  
Gratuity.

Joseph. Boyd

1854

Private

S. John's Wld  
1<sup>st</sup> May 1919



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

# MEDICAL HISTORY

Surname B. Boyd

Christian Name J



Table 1.—GENERAL TABLE.

Birthplace:—Parish..... County Nfld.

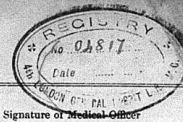
	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>24</u> day of <u>Sept</u> 191 <u>5</u>		on _____ day of _____ 191 <u>5</u>	
	at <u>St John's Nfld</u>		at _____	
Declared Age...	<u>16</u> years		_____ years	_____ days
Trade or Occupation....	<u>Fisherman</u>		_____	_____
Height	<u>5</u> feet	<u>3 1/2</u> inches	_____ feet	_____ inches
Weight	_____	<u>120</u> lbs.	_____ lbs.	_____ lbs.
Chest Measurement {	Girth when fully expanded... <u>36</u> inches		_____ inches	
	Range of expansion... <u>4</u> inches		_____ inches	
Physical Development...	_____		_____	
Vaccination Marks {	Arm		Arm	
	Number		Number	
When Vaccinated	_____		_____	
Vision	R.E.—V= <u>4/9</u>	_____	R.E.—V= _____	_____
	L.E.—V= <u>4/9</u>	_____	L.E.—V= _____	_____
(a) Marks indicating congenital peculiarities or previous disease	(a) _____		(a) _____	
(b) Slight defects but not sufficient to Cause Rejection	(b) _____		(b) _____	
Approved by (Signature)	<u>J. Burden</u>		_____	
(Rank)	<u>Lieut</u>		_____	
Enlisted	at <u>St John's Nfld</u>		at _____	
	on <u>28</u> day of <u>Sept</u> 191 <u>5</u>		on _____ day of _____ 191 <u>5</u>	
Joined on Enlistment	Corps. <u>1<sup>st</sup> Nfld Regt</u>	Regtl. No. <u>1854</u>	Corps. _____	Regtl. No. _____
Transferred to...	NEWFOUNDLAND		_____	
Became non-effective by	_____		_____	
	on _____ day of _____ 191 <u>5</u>		on _____ day of _____ 191 <u>5</u>	
(Signature)	_____		_____	
(Rank)	_____		_____	



21/11/18

26/1/19

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 R.A.M.C. (T) DENMARK HILL, SE 5	25	11	17	14	2	18	G.S. Wa. Foot	81	Slight superficial wound. - sole of R. Foot. Slight discharge - no bone injury. Pain in foot and stiffness. Massage. Cond. satisfactory. Discharged at 58 Victoria Street	<i>R. Sherrin</i> SHERRIN, 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. 10. 15	1 <sup>st</sup> Inoculation
19. 11. 15	Pass. R.P. Graham. Lt. Rank
9. 12. 15	TV <sup>nd</sup> R.P. Graham Lt. Rank

**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 W. I. Id.					

✓  
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 20th, 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... *Joseph* ..... 2. Surname... *Byrd* .....
3. Rank... *Private* ..... 4. Regtl. No. *1854* .....
5. Address in full to which future payments of gratuity are to be forwarded... *St. Anthony* .....
6. Date of enlistment in the Regiment... *September 1915* .....
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge...  
*not applicable* .....
8. Relationship of such dependents... *not applicable* .....
9. Address in full of such dependents... *not applicable* .....
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? .....
11. Were you on active service only in Nfld. If so, give dates and particulars of such service... *not applicable* .....
12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *Three Years and five months* ..... 12 .....



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

*not applicable*

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.

*no*

15. Have you been issued with a War Service Badge?

*no*

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

*no*

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

*not*

*Applicable*

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

*no*

(b) If so, was such reversion in consequence of misconduct or inefficiency?

*not applicable*

19. Are you now serving in the Regt.? If not give - (a) date of discharge (b) Reason for discharge.

*no*

*May 1st 1919*

*Demobilized*

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

*Flanders Flanders Belgium*

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

*A: no - B: no*

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

Signature of Applicant: *Joseph Boyd*  
 Place of Residence: *St Anthony*  
 Declared before me at: *St John's*  
 This *1<sup>st</sup>* day of *May* 191*8*

*Robert also,*

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

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
			<i>6 mes</i>	<i>420<sup>00</sup></i>

Certified Correct.

Paymaster. *[Signature]*



Magistrate's Office.

St ANTHONY

Aug 12. 1918

191

*Referred*

To Paymaster separation allowance board

St Johns

Dear sir I enclose herewith

claim for allowance for William T Boyd of this place  
it has been signed by the C. E. clergymen and by the local member  
of the patriotic society

Mr Boyd is a man that has known better days and has the sympathy  
of all in this place and I would therefore plead that all  
possible would be done for him

Yours truly

*W. J. P.*  
J.P.

August 9, 1918.

To whom it may concern.

William Boyd of St. Anthony aged 56 years  
is one invalid from Chronic Beri. Inj. and  
is incurable.

Charles J. Curtis M.D.  
St. Anthony.

ROYAL HE FOUNTAINED REGIMENT  
(Separation Allowance Branch)

(B. 1111)

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, Stipendiary Magistrate, Notary Public or Justice of the Peace and returned to:-

THE BARRISTER,  
Separation Allowance Branch,  
St. John's Bldg.

1.	Name in full of soldier	Rank.	Regt. or Unit	Regt. No.
	<i>Private Joseph F Boyd</i>		<i>M.F. Regiment</i>	<i>18514</i>
2.	Age of soldier		Married or Single.	
	<i>21</i>		<i>Single</i>	
3.	Name in full of father of soldier.	Age.	Occupation	Permanent Address.
	<i>Wm J Boyd</i>	<i>56</i>	<i>Fishermen</i>	<i>St Anthony</i>
4.	If you are a chronic invalid and totally incapacitated, state nature of malady (Medical Certificate must be enclosed with this document, stating from what date applicant has been totally incapacitated, and for how long incapacity is likely to continue.)			
	<i>unable to work past two years</i>			
5.	Names of your other children.	Addresses in full.	Occupation	Married or single.
	<i>Oramel Boyd age 15</i>			
	<i>Wm J Boyd</i>	<i>St Anthony</i>	<i>Fishermen</i>	<i>Married</i>
6.	State amount earned by yourself per month.			
	<i>Nil</i>			
7.	State date and place of death of your wife.			
	<i>Wife living</i>			
8.	State amount and source of any other income.			
	<i>Nil</i>			
9.	What is the value of your real property.			
	<i>about 500 dollars (house)</i>			

*Noted & reduced from 50¢ to 30¢ per week from Feb 28, 1917*



10. State actual amount contributed by soldier during year prior to enlistment.

*all his earnings*

11. Was this amount contributed weekly or monthly.

12. Did this amount include payment of son's board etc.

*yes*

13. State your son's trade or occupation prior to enlistment

*Fishing*

14. State amount of his wages per week.

15. State name and address of his last employer.

16. State amount of support monthly from son since enlistment.

*9.00 per month*

17. State amount of "assigned Pay" received by you from son monthly.

*9.00*

18. From what date have you received "Assigned Pay".

*October 1915*

19. Actual amount contributed by other children. Weekly Monthly.

*Nil*

20. If not receiving support from other children, state cause. Answer fully.

21. Are any of these children in your employ.

*Not earning enough to help*

22. Have you made a previous claim for Separation Allowance? If not, why. Give particulars.

*did not wish to do so till discharge*

23. What is the value of your personal property?

*Nil*

24. With whom do you reside at present?

*in my own house*

Are you already in receipt of Separation Allowance from any source. If so, how much?

*Nil*

Are you in receipt of assistance from any Patriotic Fund. If so, how much?

*Nil*

Was the soldier at the time of enlistment an employee of the Mfld. Government.

*No*

In what capacity and in what place.

Is he in receipt of a salary as such while serving in the 1st. Mfld. Regt. If so, how much?

*No*

I herewith make this solemn declaration conscientiously believing the same to be true; and knowing it to be of the same force and effect as if made under Oath, and in virtue of the Evidence Act.

Signature of Applicant..... *William J Bayl* .....

Place of residence..... *St Anthony* .....

Declared and subscribed before me at..... *St Anthony* .....

this..... *Tenth* ..... day of..... *August* ..... 19*18* .....

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary, Public or Justice of the Peace..... *Frank Simms* .....

*JP*

This application must be signed by two responsible parties one of whom must be a clergyman, the other a representative of your local Patriotic Fund Committee, certifying that to the best of their knowledge after careful investigation, the above statements are correct, and the soldier first mentioned above is the sole support of the applicant.

Signature of clergyman..... *Rev W. Walter Perkins* .....

Signature of member of Patriotic Fund Committee..... *Frederick W. Oleshead* .....



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Joseph Boyd, Regl. No. 1854

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and fifty Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person and or Persons, such payment to be made on proof of Identity of, and production of the relative Identity Certificates by the Person and or Persons concerned, viz.: Allotment commences Oct 30th 1915

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
1690	Father	William Boyd	St. Anthony	50
Total Allotment, \$				

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, countersigned by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

(Sig.) [Signature]
Officer Commanding
Company
Oct 23rd 1915

(Sig.) Joseph Boyd
(Rank) Private



**THE ROYAL NEWFOUNDLAND REGIMENT**  
HEADQUARTERS

*St. John's, Newfoundland,*

February 27th. 1919. 191

From Officer Commanding.  
Depot.

To Paymaster & Officer I/C Records  
Militia Department.

1854 Private Joseph F Boyd.

Above noted man has made application to have his allotment of 40¢ per day in favour of his mother (Mrs. Wm. Boyd) cancelled from and including February 1st 1919.

Will you please carry out and advise.

*OK*

*H. M. [unclear] Lt*

*Noted  
[Signature]*

1854 Boyer cables \$10      Nov. 4  
shown read      \$ 3  
difference of \$7.      29. 20.  
to be deducted from his post discharge<sup>Pay.</sup>

WT





1925

Magistrate's Office,

St Anthony July 6, 1918

191

1854

To the Pensions & Disabilities Board

Gentlemen

I wish to make claim  
in behalf of William T. Boyd of this place for a separation  
allowance as I understand that an allowance of twenty dollars per  
Month is paid those whose only support is gone to the war Mr Boyd's  
only means of support is his Son Joseph at Present serving in France  
with the Royal N.F. Regiment and he is sick and not able to work  
to earn anything for the support of his family

so I think it is only Justice that an allowance  
should be made for him

*Mark Simms*

Yours very truly

J.P.

*Joseph Boyd*

1854  
July, 20th., 1918.

Mr. Noah Simms,  
St. Anthony.

Dear Sir:-

Referring to your letter of July, 6th.,  
on behalf of William T. Boyd of St. Anthony, I enclose  
Form of application for Separation Allowance.

Kindly have Mr. Boyd fill out and re-  
turn to this Office, on receipt of which his claim will  
be considered.

Yours faithfully,

Capt. & Paymaster.

His Majesty's Govt. 2<sup>o</sup>

To William Squires, Phillip Island

To 42 days board & lodging at \$1.50 per day

For  
The G.F. Bayle No. 1854 N. F. L. Regt.  
Total \$63.00

Certified Correct & for sixty three  
dollars

Wm. Wells  
Superintendent

N. 13.

This amount will include  
my salary & your ind. When  
he hope to join the Proc. for  
for St. Anthony.

Phillip Island,  
June 19<sup>th</sup> 1919

O.K. for \$63.  
W. S. Squires

1587	Ed.
2487	INITIALS
	INITIALS
	INITIALS

5, July 1919

Mr. William Squires,  
Pitley's Island.

Dear Sir:

I enclose herewith cheque  
for \$53.00, amount due you for board & lodgings  
supplied Pte. G.F. Bayde, No. 1854.

Yours truly,

Capt.  
Paymaster.

ST. JOHN'S, FEB 28 1919

# Royal Newfoundland Regiment.

Billeting Account,

To M<sup>rs</sup> J. Rogers  
12. George Street

Billeting Soldiers as undermentioned

from Feb 21<sup>st</sup> /19 to Feb 28<sup>th</sup> /19

<u>1854 - No. J. Boyd</u>	<u>7</u>	<u>20</u>
---------------------------	----------	-----------

Certified correct for \$ 7. 20

N.J. Joseph D. Howse  
Billeting Officer.



Reg. No. *1454* Rank *Alte* Name *Boyd J.*  
Attested ..... Address *St. Anthony St. B.*  
Allotment ..... Allottee .....  
Date of Allotment ..... Returned from Overseas *7-2-19.*  
Returned on S.S. *Cossican* Cause *Discharge*

*1.5.19*

PASSED TO DEMOBILIZATION OFFIC.

*3.5.19*

DISCHARGE APPROVED ON DEMOBILISATION.

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 1854 Rank Private Name Boyd, Joseph  
 Date of Enlistment 28 9 15 Address 111 King St. N. Bk. District St. John's  
 Occupation Electrician Classification for Discharge 1 Medical Category FT  
 Recommendation S.M.B. 1 Disability Rating 1  
 Passed to Demobilization Officer with following documents:—

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
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 Jan 19

*J. H. Mans. Lt.*  
 O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

*Boyd J*

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable 46.00
- (b) Clothing Supplied 0

*Chiltonston Lt*

Date 1-5-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 654 to his home at St. Anthony and Release Certificate No. 2197 issued.

Date 1-5-19

J.A. Crawford  
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 17-5-19

Date 1-5-19

J.A. Crawford  
Depot Paymaster.

Discharge approved for 3-5-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	2	B 268	B 121	1	N.F. Med.	D.F. 1	1
F 178		W 3494	B 122		Board 1st	" 2	1
B 178a		D 400A	B 1915		do 2nd	" 3	1
B 179	1	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 2-5-19

J.A. Crawford  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date MAY 3 1919

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

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

Date 7/2/19

W. H. G. Smit  
for officer in charge

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Number of Sheet 135

W. P. Griffin & Sons Ltd., Printers, Old Bailey, E.C. 4.  
Forms B. 121.  
(504) W3017/2/24 10000 67500 56 29.

Regiment of 1<sup>st</sup> Newfoundland

Signature of O. C. Company [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<u>J. F. Boyd</u>	Age on	<u>18</u> years <u>0</u> months	<u>Fisherman</u>	
Joined	<u>24/11/16</u>	Date	<u>28.9.15</u>	Religion	
Joined	<u>24/11</u>	Date	<u>28.9.15</u>	<u>C of E.</u>	
Joined		Date		Place of Birth	
Joined		Date		Period of	
			(with Colours) <u>3 2/3</u> years.	(with Reserve) <u>3 1/2</u> years.	<u>St Anthony</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>Apr</u>	<u>24/3/17</u>	<u>No.</u>	<u>1</u>	<u>Drunk in town at 9.45 pm</u>	<u>Sgt Gosse</u> <u>Sgt Windsor</u>	<u>Admonished</u>	<u>26.3.17</u>	<u>Lt Col Whitaker</u>	<u>AD</u>
	<u>6.7.17</u>			<u>absent from parade</u>	<u>Sgt</u> <u>McCarthy</u>	<u>10 days pay</u>	<u>6.7.17</u>	<u>Capt H. Brundell</u>	<u>OCN</u>
<u>Sutton Coldfield</u>	<u>30/18</u>			<u>Breaking out of Camp of no tattoo &amp; remaining absent until apprehended by M. F. P. in Baldmore Rd about 2.30 same date</u>	<u>Sgt Bottomley</u> <u>" Turvill "</u> <u>Cpl Powell</u>	<u>8 days CB</u>	<u>2/18</u>	<u>Major Hunt</u>	<u>OCN</u>
				<u>Not being in possession of his Identity Card</u>	<u>Sgt Martin</u>				
				<u>Demobilized 7/5/19</u>					
				To be carried over					

Army Form B. 121.

7/7/16

Cables and Telegrams :  
"SYNOPTICAL," London.

Telephone :  
VICTORIA 4923 & 4.

Communications to be addressed to the  
CHIEF PAYMASTER & OFFICER, I.C. RECORDS.

ENCLOSURE

N. F. P/88A.

**DUPLICATE.**

# NEWFOUNDLAND CONTINGENT.

## MEMORANDUM.

No. 1985/59/P.S.A.

C.R. 1854

From

PAY AND RECORD OFFICE.

58, VICTORIA STREET.

LONDON, S.W.1.

To

The Hon. The Minister of Militia,  
St. John's,  
NEWFOUNDLAND.

WF/FK.

17th February 1919.

**SUBJECT:**

1854, PTE. BOYD.  
ROYAL NEWFOUNDLAND REGT.

Reference Nos.

**REPLY**

Dated December 10th. 1919 191

Please return ORIGINAL and retain DUPLICATE.

Exchange of telegrams

confirmed:-

(1)

Received 4/12/18 (9545):  
ESynoptical, London.

"Pay to 1854 Boyd £10.  
"MILITARY.

(2)

Received 5/12/18 (10,511):  
"Synoptical, London.

"Reference my telegram  
"Nov. 4th-should be read-  
"1854-Boyd-three pounds-  
"can you adjust-or recover-  
"if paid-fullstop.  
"MILITARY.

(3)

Despatched 22/1/19. (37)  
"Military, St. John's.

"Reference your telegram  
"5th December-1854-Boyd-  
"Officer Commanding-unble  
"to recover-overpayment-  
"fullstop.  
"SYNOPTICAL.

Copy of memoranda exchanged

with Officer Commanding, 2nd.  
Batt. is enclosed for information,  
and any further action that may be  
necessary, please.

Noted, please.

Lt. Col.  
G.S.O

for Minister of Militia.

Capt.  
Asst. Paymaster.

For Chief Paymaster & O.I/c.Recds.