# 8151-7161

Deceased L8-53

BOYAL WENT OUNDLANDREET:

LICE



## FIRST NEWFOUNDLAND REGIMENT

### ATTESTATION OF

No.	Questions to be put to the Recruit before Enlistment.  What is your name?  What is your full Address?  What is your age?  What is your Trade or Calling?  Are you age?  Are you warried?  Are you warried?  Are you willing to be raccinated or re-vac- cinated?  Are you willing to be vaccinated or re-vac- stand its meaning and who gave it to you?  Are you willing to be enlisted for General Ser- vice?  Are you willing to be enlisted for General Ser- vice?  Are you willing to serve upon the conditions as em bodied in the roll of service }  Are you willing to serve upon the conditions as em bodied in the roll of service }  I. Hadden by me to the above questions are trive, and that I am willing to godifi the engagements made.  OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.  I. Additional Service of the conditions of my service.  OATH TO BE TAKEN BY RECRUIT ON ATTESTING OFFICER.  The Recruit above named was cautioned by me that if he made any false answer to any of the above question 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 enter replied to, and the said recruit has made and signed the declaration and taken the oath before me at this and any of the said recruit has made and signed the declaration and taken the oath before me at the said recruit has made and signed the declaration and taken the oath before me at the said recruit has made and signed the declaration and taken the oath before me at the said recruit has made and signed the declaration and taken the oath before me at the said recruit has made and signed the declaration and taken the oath before me at the said recruit has made and signed the declaration and taken the oath before me at the said recruit has made and signed the declaration and taken the oath before me at the said recruit has made and signed the declaration and taken the oath before me at the said recruit has made
	Questions to be put to the Recruit before Enlistment.
I.	
2.	
3.	
.4.	What is your age? 4
5.	What is your Trade or Calling? 5. Laboures
6.	Are you Married? 6. Ho
7.	Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which?
8.	
9.	Are you willing to be enlisted for General Ser-
10.	Did you receive a Notice, and do you under-
11.	Are you willing to serve upon the conditions as embodied in the roll of semerce } , ,
mac · _	Richard Brandlesignature of RECRUIT.
- 4	OF THE PROPERTY OF PROPERTY ON APPROXIMATION
bou	do make oath, that I will be faithful and true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty and, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against
	CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.
he	The Recruit above named was cautioned by me that if he made any false answer to any of the above questions would be liable to be punished as provided in the Army Act.
as I	eplied to, and the said recruit has made and signed the declaration and taken the oath before me at
on	
	Signature of Attesting Officer
	†CERTIFICATE OF APPROVING OFFICER.
	I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the re-
qui	red forms appear to have been compiled with. I accordingly approve, and appoint him to the ‡
	If enlisted by special authority, such will be attached to the original attestation.
Dat	e
Pla	1e
	† 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.

## DESCRIPTIVE REPORT ON ENLISTMENET Applicable to all ranks. To correspond with entries on the Medical History Sheet. Name Richard Bigil Height 5 feet 9 inches Apparent age years months. Girth when fully expanded 35 /2 inches Chest Measurement Distinctive marks. INFORMATION SUPPLIED BY RECRUIT Name and Address of next of kin Three Smary Congret, 12 /2 Compact St. Relationship Zottes 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. Particulars as to Children Christian Names Date and Place of Birth STATEMENT OF THE SERVICES

Corps in hich served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	lowed to for fixing rate of p	ng the	serve not ed to rec wards G	kon to-	Signature of Officers certifying correctness of
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## FIRST NEWFOUNDLAND REGIMENT

#### ATTESTATION OF

No. 2217 Name Turking Propil Corps	
Questions to be put to the Recruit before Enlistment.	
I. What is your name? I. Richard Bragil	
(2 12/2 Prospect \$	<del>/</del> :
2. Wrat is your full Address?	••••
G	
3. Are you a British Subject?	
4. What is your age?	
5. What is your Trade or Calling? 5. Labourer	
6. Are you Married? 6	
7. Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which? 7.	
8. Are you willing to be vaccinated or re-vac- cinated?	
9. Are you willing to be enlisted for General Ser-	••••
Io. Did you receive a Notice, and do you under-stand its meaning, and who gave it to you?	
stand its meaning, and who gave it to you? 10	
II. Are you willing to serve upon the conditions as embodied in the roll of service)	
II. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted?	
E. march 2 1916 Canald 13 Example Signature of Witness.  OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.	
I	l and duty gainst
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 ques he would be liable to be punished as provided in the Army Act.	tions
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 en	
as replied to, and the said recruit has made and signed the declaration and taken the oath before me at	79
on this. 4. day of March 1916 Quald W: age	
Signature of Attesting Officer	••••
†CERTIFICATE OF APPROVING OFFICER.	100
I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the	e re-
quired forms appear to have been complied with. I accordingly approve, and appoint him to the ‡	100
If enlisted by special authority, such will be attached to the original attestation.	
Date	Officer.
Place	
† The signature of the Approving Officer is to be affixed in the presence of the Recruit.  ‡ Here insert the "Corps" for which the Recruit has been enlisted.	
* If so, Recruit is to be asked the particulars of his former service, and to produce if possible his Cartific	cate o
* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certification and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as fact—(Name)on the	ollo

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

Name Yan Land	B-5:0	54	A. D. Li			
Apparent age 20					feet 9 in	ches
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(a) Christian and Surname	of Woman to whom marrie (c) Present address. (	d. and whether s	pinster or wido icer verifying e	w. (b) Place a ntry.	nd date of marriage.	
(a)	(6)	Act Description	(e)	an on the	Sull la case STA	
	Particul	ars as to Ch	ildren		Call Tolk sea	
Christian Names				Date and Pla	ce of Birth	
क्षा अपूर्व तक राजार जोड जोडा जन्म	STATEMENT	OF THE	SERVIĆ	ES .		
Corps in which served Rgt. or Promotion, Casual	Reductions, ties, &c. Army Rank	Dates	Service not al- lowed to reckon for fixing the rate of pension Years Days	Service in Reserve not allowed to reckon towards G. C. Pay  Years Days	Signature of Officers of fying correctness entries	erti- of
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reader to Foresty low Total Service forfeited as	Discharge	hedies	lly ll	1 2.	2-18.	3 to 10 to 1
Total Service towards Engagement to	2-2-1918 Soust by	Idate of dischar	gel yes	78	2 355	

17th May, 1917.

Dear Madam.

In reply to a cablegram which I addressed to the Record Office, London, asking for news as to the condition of No. 2217, Private Richard Brazil, I am to-day informed that he is progressing favourably.

Yours faithfully,

Colonial Secretary.

RODFERENT LINED

MADE PROSA

Mrs. Emma Brazil, 6 Kullock Street.

## TRANSLATION OF MESSAGE SENT TO SYNOPTICAL, May 14, 1917.

What is address of, report by telegraph present condition of 879 Adams, 2828 Boyes, 1329 Redmond, 2260 Maher, 859 Spencer, 286 Walsh, 2401 Kean.
What is address of 1349 Cummins, 1146 Brien. Report by telegraph present condition of 2659 Kean, 2673 Martin, 138 Thompson, 2503 Bussey, 2977 Hodder. Helatives anxious for news of 113 Hickey, 2226 Watts, 2217 Brazil, 1754 Taylor, 2749 Manning. Telegraph whereabouts of 1243 Simms, 1685 Murrin, 687 Manning. Telegraph particulars injuries sustained by 2254 Pye.

Col. Sec.

April 21, 1917.

Bear Madam.

gregret to have to inform you that a report has this day been received from the Record Office of the First New-foundland Regiment, Landon, to the effect that

No. 2217, Private Richard Brazil, has been admitted to Wandsworth suffering from gunshot wound in the head.

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

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

Gours faithfully,

Colonial Secretary.

in 2217 Rank Pho Name Bragil R: F.A. WER TOLA Less Allotment Reriod From To DEBITS Date £ CREDITS Days Rat 3 8 Balance Balance. Acquittance Rolls Pay @ Het Rate Hospital Advances A.B. 34 P.& R.O. Payments Cheque 6444

(9 38 41) W 11751-6539/1 75,000(6) 10/15 H W V(M 679) Army Form W. 3201. ONLY FOR USE IN THE CASE OF SOLDIERS RETURNED FROM AN EXPEDITIONARY FORCE, OR FROM GARRISONS ABROAD. (Regiment). No. 2217, Rank Ple , Name further instructions as SUB LONDON GENERAL HISPI WANDSWORTH 3rd London General Hospital, WANDSWORTH, S. W.

almetted 20:4.17. Army Form W. 3202. Notification that a Soldier has been Hospital to await Discharge 55undel para.

2 SAUG 1947

(xvi.) King's Regulations.

Rank Ple

Corps or Regiment (also Unit if known) 121- hfld.

Soldier's

Regtl. No. 22

A STATE OF THE STA
To Officer in charge of RECORDS 5 & Victoria St. 8W
To Officer in charge of Records 58 Victoria St. 8W.  REGIMENTAL PARMATER 58 Victoria St. 8W.
The above-paned man, who appeared before a Medical Board, and
whose discharge as "no longer physically fit for war service," was
approved by the President of the Board on the 13/5/17
approved by the President of the Board on the /3/5//) has been sent to his home on warrant to await instructions as to his final
discharge he has been given £1 (one pound) advance and a suit of
plain elethes.
He proceeded on (date) august 27 1917
to (full address) 5 8 Victoria St SN.
Place and shrowth G C Half Megistrar, R.A. Migger Comm. Date 27- Aug. 1917 WANDSWORTH, S.M. Hospital.
Date 27 (1917 WANDSWORTH, SAIL Hospital.
Three copies to be made; one copy sent to each Officer mentioned above, and one copy filed in the Office.
(7 17 35) W9706M1007 300,000 11/16 HWV(M1187) Forms/W3202/3

C.R. 2217

Extract from Howinel Roll of Hills. Regt. Draft Ho.ll from And Bu. Depot, to let Mn. H.H.P. Embarked Southempton, 5.10-16.

2217 Pte. R. Brazil.

The O.C.,

Royal Newfoundland Regt.,

Headquarters.

Sir,-

The undermentioned men have been dischar-

ged on the dates given.

Kindly note and Post in Daily Orders, Part

11.

I have the honour to be,

Sir

Your obedient Servantm

Signed. J.M. Howley.

Capt. & Paymaster &

Officer i/c Records.

JH/.

No.1232 Private. Spearns, John. Feb. 1st. 1918. Med. Unfit. C. 427 Private. Hordssey, Mchl. Feb. 1st. 1918. Hed. Unfit. No. 388 Private. Rees, Gec. W. Feb. 1st. 1918. Hed. Unfit. No.2665 Private. Brablury, John. Feb. 1st. 1918. Med. Unfit. No.2217 Private. Brazil, Richard. Feb. 2nd. 1918. Hed. Unfit. No.1887 Private. Bishop, Samuel, Feb. 2nd. 1918. Hed. Unfit. No.1609 Private, Walsh, Richard, Feb. 2nd. 1918. Hed. Unfit. No.2410.Privatr. Sears, James. Feb. 2nd. 1918. Hed. Unfit. No.1412 Private, Hurrin, Walter, Feb. 4th. 1918. Hed. Unfit.

DEPARTMENT OF MILITIA

P. O. BOX No 1242

TELEPHONE No. 361

CABLES AND TELEGRAMS TO "PAYDEPT."
ST. JOHN'S, NEWFOUNDLAND

ALL COMMUNICATIONS TO BE ADDRESSED TO THE PAYMASTER

#### PAY DEPARTMENT

ST. JOHN'S, NEWFOUNDLAND.

October 27th.1917. 191

#### Re No. 2217 Pte. R. Braziml.

The 0. C.,

Headquarters.

Sir,-

The marginally noted man has been squared up to and including October 24th. and has a credit balance of \$10.80. He has an allotment current of 80% per day.

I have the honor to be,

Sir.

Your ofedient servant,

Captain & Paymaster.

JH/.

nord

## C.R. 2217

Richard Brail was attested for General Service with the NEWFOUNDIAND RECIMENT ON March 2nd 1916 Regimental No. 2217 was alloted to Ptet R.Brazil

AUTHOR ITY:

Record Ledger;

Dept. of Militia.

March 25th 1919

2217 Brazile Sent to Med orph B 368 B 198 A D 400 A 3494 103 122 Sta Honol

P. 4.9. 19

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NEWPOUNDLAND CONTINGEN

A STATE OF THE PAYMASTER A OFFICE HITTON

## 1ST NEWFOUNDLAND REGIMENT 15 CFD 19

Statement of Account of No. 2217 Pte Bran

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## 1ST NEWFOUNDLAND REGIMENT. 13 SEP 1917

Statement of Account of No. 2217 Pt Brazie

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Brail, & Aay Depl

NEWFOUNDLAND CONTINGENT (Substituting A.F. J. 1825). N.F.P./36. STATEMENT of ACCOUNT of No. 2217, Brazil, Pta. R. Embarked per S.S. From 0/8/17 To 13/9/17 (Dates inclusive). From Liverpool Date 13/9/17 Classification (See Procedure). Draft No. 48 DR. Pay PARTICULARS Rate Days Book PARTICULARS Date Book Date Date Days Col. Col. Forfeited Pay Pay 1.00 97 Allotments Field Allowance .80 97 77 60 10 Other 11/12 Total Stoppages 4/5 Total @ 4.86 2/3 106 70 21 18 62 15 18 11 Fines 13 Balance Credit Last Period 6 12 2 Clothing & Necessaries OTHER CREDITS: Arms & Accoutrements Ration Allce, 27 8 17 5/9/17 Barrack Damages 17 Hospital Stoppages advances = 10 lays A Miscellaneous Stoppages Casual Payments per P & R. O. This account is in 19 accordance with information 1st Payment received at the Pay & Record Office to/4/9/1/ and is 2nd therefore subject to amend-3rd ment if, and as may be found Final " necessary. Balance Debit Last Period Floy Due by Paymaster Balance Due to Paymaster CERTIFIED CORRECT.

DUPLICATE MAIL COPY

Posted \*\* O SEP 1917

Posted \*\* O SEP 1917

MEWFOUNDLAN MESSANT.

J. W. Marshallan

Company of Comp

October 27th.1917.

#### Me No. 2217 .Pte. R. Braziml.

The O. C.

Headquarters.

Sir,-

The marginally noted man has been squared up to and including October 24th, and has a credit balance of \$10.80. He has an allotment current of 80% per day.

I have the honor to be,

Sir,

Your obedient servant,

Captain & Paymaster.

NEWFOUNDLAND CONTINGENT (Substituting A.F. J. 1625). N.F.P. /36. STATEMENT of ACCOUNT of No. 2217, Brazil, Pte. R. Embarked per S.S. Company. From 9/8/17 To 13/9/17 (Dates inclusive). From Liverpool Date 13/9/17 Classification (See Procedure). A Draft No. 48 DR. CR. PARTICULARS . Rate Days Date Book PARTICULARS Bate Days 3 Date Book Col. Col. 9.00 97 Forfeited Pay Pay 97 00 Allotments .80 97 Field Allowance .10 Other 10 106 70 21 18 6등 15 18 11 Total @ 4,86 2/3 11/12 Total Stoppages 13 Fines Balance Credit Last Period 12 2 Clothing & Necessaries 14 OTHER CREDITS: 15 Arms & Accoutrements Ration Allce, 27/8/17- 5/9 /17 Barrack Damages Hospital Stoppages advances 2 18 6 = 10 lays @ 2/ 17 17a Miscellaneous Stoppages 19 Casual Payments per P & R. O. This account is in 1st Payment accordance with information received at the Pay & Record 21 2nd Office to /4/9//7 and is 3rd therefore subject to amendment if, and as may be found Final necessary. Balance Debit Last Period 7. Coy Due by Paymaster Balance Due to Paymaster

& RECORD

CERTIFIED CORRECT

Nº 2549



Identity	Allotment begins.  Whether Wife, Child, other Relative of	July NAME OF THE	12/10	7/6	AMO	DUNT
Certificate No.	Worth.	Mrs Souma	Braille	Millock St	(each	Person)
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					-	
		•				
					-	-
					-	
				Total Allotment, \$	1000	6 SEC. 89



## . ROYAL NEWFOUNDLAND REGIMENT HEADQUARTERS

ST. JOHN'S. NEWFOUNDLAND.

January 3rd. 1918.

From Adjutant, Depot.

To Paymaster and Officer i/c Records, Dept. of Militia.

#### Re 2217 Pte. R. Brazil.

Above mentioned man was recommended for discharge as permanently unfit by Medical Board held on 1/10/17.

He has since been employed at recruiting and is now finished these duties. I am sending him herewith for your attention and necessary action, please. His account has been squared up to and including Danuary 3rd. 1918. He has an allotment current of 80cts. per day.

Depot, First Newfoundland Regiment,

St. John's, Nfld.

## 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:

I bould prope to be traced as a clark-

V. R. Brozill Signature of Man.

Reg. No. 2217

Signature of the Vocational Officer or his Representative.

Place Pr. Na.

Date 24.19 1918

N.F.P./54

No.417.

From Pay & Record Office, Lenden.

To Minister of Militia, St. John's, Nfld.

#2217 Pte.R.Brazil

Overcredited Ration Allowence as per Claim 156 2s.6d.

Nº 1043



1, Achaird Brayill , Regl. No. 22/7
hereby agree, until further notification by me, and in similar official form to make an Allotment of

Dollars and Louis 60 Cents, per diem, from my Pay,

# Newfoundland Forestry Companies ALLOTMENTS

No.	Whether Wife, Child, other Relative or Friend	N A	ME (In Full)	ADDRESS	AMC (each	DUNT person
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Nº 1043



# Newfoundland Forestry Companies ALLOTMENTS

hereby agree, until further notification by Ne, and in similar official form to make an Allotment of

Dollars and A Cents, per diem, from my Pay

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (In Full)	ADDRESS	AMOUNT (each person
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NOTE.	countersigned by	ce completed by the Officer Conthe Officer Commanding Company d payments on application.	Total Allotment, \$ mmanding Company, signed by the and handed to the Paymaster as	ne Voluntee a authority
(Sig.)	Ma	cer Commanding (Ra	s) Richard Bre	zill

No.....



## Ist NEWFOUNDLAND REGIMENT

#### VOUCHER

İn Ac	ct. w	rith #	2217 Pt	e.Richard Brazil		icher No eque No	
Reg'l	Alc	No.	Na	me	C.B.	Folio N	0
Date		Req'n No.	Invoice No.	Particulars.		A	Amoun .
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;	Rei	ceibe	<b>d</b> from	the 1st. NEWFOUNDLAND F	ptember REGIME		
Pi	ftee	n					Dollar
and				Cents in	Payment	as above	e stated
	S	eptem	ber	1917.	2	•	
\$ <u>15.</u>	00			[Sig.] R. 1	Dra	nee	

## DEPARTMENT OF MILITIA. REGIMENTAL PAY BRANCH.

DAY VOLICHED

\$ 10920	Och 3 # 1917
Received from the	First Newfoundland Regiment
the sum of In	- Go Dollars.
on account of Pay.	R. Brazill
Ch. No. 1.8.7. Initial CO	Regil, No 2217 Rank
Ch. No. 1.8.7. Initial CD  Pay Leigent Grant Initial CO  Gen. Ledge St Initial f. C	
Gen. Ledge 1084 Initials ()	2 / 2

No. 2217 Rank Mtc. Name R. Brazil

## DEPARTMENT OF MILITIA.

REGIMENTAL PAY BRANCH.

#### PAY VOUCHER.

84.04	Oct 15#1917
Received from	the First Newfoundland Regiment
the sum of Four	Zoo Dollars.
on account of Pay. to 15/1	A. Brazill
Ch. No. 35 Initials Colo	Regul. No. 2217 - Rank Pte
Pay Ledger	·

No. 2217 Rank

Please pay to Mr. R. Brazill, No 2217 the sum of nine dollars and thirty three cents in payment of allowance for week ended this date in connection with re-education.

\$9.33

10.00 Pension

Wooding Officer.

R. Brazill,

Please pay to Mr. R. Brazil No. 2217. the sum of nine dollars and thirty three cents. in payment of allowance for week ended this date in connection with re-education.

\$9.33.

Pension \$10.00 Allowance 9.33 Vocational Officer

R. Brazier

MAY 17 1919

Capt. Howley, O. I. C. Records.

Please pay to Mr. R. Brazill, No 2217 the sum of nine dollars and thirty three cents in payment of allowance for week ended this date in connection with re-education.

\$9.33

Pension \$10

Vocational Officer.

R. Brazile.

Please pay to R. Brazill, No 2217 the sum of nine dollars and thirty three cents in payment of allowance for week ended this date in connection with re-education.

\$9.33

Pension \$10

Low Madell.
Vocational Officer

R. Brazill.

Please pay to R. Brazill, No 2217 the sum of nine dollars and thirty three cents in payment of allowance for week ended this date in connection with re-education.

\$9.33

Pension \$10

oskehell.

#### JUN 28 1919

Capt. Howley, O. I. C. Records.

Please pay to R. Brazil 2217
the sum of fifteen dollars and eighty six cents
in payment of allowance for week ended this date
in connection with re-education.

\$15.86

Pension \$10.00 Allowance 11.66 Dependent 4.20 Vocational Officer

R. Brazile,

JUN 21 1919

Capt. Howley, O. I. C. Records.

Please pay to R. Brazill, 2215. the sum of fifteen dollars and eighty six cents. in payment of allowance for week ended this date in connection with re-education.

\$15.86

Pension \$10.00 Allowance 11.66 Dependent 4.20 Vocational Officer.

R. Brazies

Please pay to R. Brazill, Rh 2217 the sum of nine dollars and thirty three cents in payment of allowance for week ended this date in connection with re-education.

Pension \$10

\$9.33

Vocational Officer.

R Brazill,

Please pay to R. Brazill, No 2217 the sum onine dollars and thirty three cents in payment of allowance for week ended this date in connection with re-education.

\$9.33

Pension \$10

Vocational Officer

R. Brazile,

#### April 19th, 1919

Capt. Howley, O. I. C. Records.

Please pay to Mr. R. Brazill, No 2217 the sum of nine dollars and thirty three cents in payment of allowance for week ended this date in connection with re-education.

\$9.33

Pension \$10 Allowance 50

Total

brokell. Vocational Officer

R Brazile,

April 5th, 1919.

Capt. Howley, O. I. C. Records.

Please pay to 2217, Mr. R. Brazill the sum of nine dollars and thirty three cents in payment of allowance for week ended this date in connection with re-education.

\$9.33

Pension \$10. Allowance 40.

> 50 Total

To Blechell.

Vocational Officer

R Brazill.

Please pay to Mr. R. Brazill, No 2217 the sum of nine dollars and thirty three cents in payment of allowance for week ended this date in connection with re-education.

\$9.33

Pension \$10 Allowance 40

Total 50

Vocational Officer

ational Officer

R Brazies

Please pay to Mr. R. Bresill, No 2217 the sum of nine dollars and thirty three cents in payment of allowance for week ended this date in connection with re-education.

\$9.33

Pension \$10

Vocational Officer.

R. Brazill,

Fold Here

#### ON HIS MAJESTY'S SERVICE

Dept. of Militia,

St. John's, Nfld.

Fold Here



W10050/P2108 500m 3/19 C. & Co. S.W. E 4632 Army Form W3553.

[P.T.O.

#### June 30th., 1921,919.

The	accompanying Kin	g's Certificate, on his discharge,
(No	804	), is forwarded herewith to
Priv	rate Richard	Brazill
in respect	of his service as N	lo. 2217 Rank Pvte.
Name	Richard Brazi	Corps Royal Nfld. Re
-		ould be acknowledged hereon.
Received	hov: 21	3-,19.2.1
Signature	R. Bra	ziee Hy
Date		
Address 4	41-Charl	eton et

Fold Here

#### ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

Fold Here

Bath

Address

### The accompanying Victory Medal and/or British War Medal

is/are forwa	rded herewith	to		
-	Richard B	razil		
in respect of	f his service as	No. 2217	Rank Pte.	
Name	R. Brazil		Royal Nfld. Reg	t
			owledged hereon	
	R. B.		* v	
Date <u>Se</u>	pt. 27-	1921		
Address <u>#</u>	1- Cha	elton s	st.	

#### RECEIPT.

### FOR ISSUE OF RIBAND OF VICTORY MEDAL/1914-1919.

I cortify tent I have received an issue of 2 inches of Riband of Buitish Victory Medal-1914-1919.

NO. 2.2.17. NAME R. Brazill

DATE fan . le. 1920 PEACE Dt. Johnis. No. ..... 2217. Name. Brazil. R. ....

To Certify that I have received the AB 64 of the above named soldier.

Name R. Brazill.

Date July 10, 1920.
Place la mullock st. Lity.

M.B. For completion and return to the Department of Militia Insert in corner of envelope "AB 64"

## Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 2217. Army Rank JM	named on page 4 should be enclosed.)
Name_Brazill Kick	changed subsequently by authority.)
Corps 1 Hewfoundend Jegin	rent
Battalion, Battery, Company, Depôt, &c (If attached to the Regular Establishment of the Special Reserve or Pern Staff of the Army, it should be	nanent Staff of the Territosial Force, &c., or to General
Date of discharge	O.S. H.Q.
Place of discharge	ST. JOHNS, N.F.L.D.
Age years months Height feet finches Chest girth when fully expanded ins. measure range of expansion ins. Complexion for the final f	of Wound received
/8. Military character :—	a daw of the feter to be quoted.)
4. Character awarded in accordance with King's Regulat	ions:—
4. Character awarded in accordance with King's Regulation of the page of the p	
E Certified that the above is an accurate copy of the character given D. 489 was awarded in	by me on Army Form B. 2067* and that Army Form this case.
	Initials of Commanding Officer.
Army Form B. 2088 has been issued to*	en sekrelje i siloni se registranje i sekrelje i sekrelje i sekrelje i sekrelje i sekrelje i sekrelje i sekrel Sekrelje i sekrelje i



## Newfoundland Forestry Companies

ATTESTATION OF

Vo. 9317 Name archard Porgellorps demonstrated
Questions to be put to the Recruit before Enlistment.
I. What is your name? I
2. What is your full Address?
3. Are you a British Subject? 3
5. What is your Trade or Calling? 5
6. Are you Married?
7. Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which?
8. Are you willing to be vaccinated or re-vac-
9. What is your Religion? 9. Goff.
10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies?
made by me to the above questions are the, and that I am willing to fulfil the engagements made.  Brandle Signature of RECRUIT.  G. H. Klein Capt. Signature of Witness.
OATH TO BE TAKEN BY RECRUIT ON ATTESTATON.  I
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 regret has made and signed the declaration and taken the cath before me at the said regret has made and signed the declaration and taken the cath before me at the said regret has made and signed the declaration and taken the cath before me at the said regret has made and signed the declaration and taken the cath before me at the said regret has been duly entered as replied to a said regret has replied to a said regret has been duly entered as replied t
on this day of
Signature of Attesting Officer
†CERTIFICATE OF APPROVING OFFICER.
I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the re-
quired 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
Place
† The signature of the Approxing Officer is to be affixed in the presence of the Recruit. ‡ Here insert the "Corps" for which the Recruit has been enlisted.

### DESCRIPTIVE REPORT ON ENLISTMENT

	Applicable to all ran	ks. To corres	pond with entr	es on the	Medie	al Histo	ry Shee	<b>1.</b>
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# Newfoundland Forestry Companies

Questions to be put to the Recruit before Enlistment.  I. What is your name?  I. Carbard British Subject?  2. What is your full Address?  3. Are you a British Subject?  3. What is your rade or Calling?  5. What is your Trade or Calling?  6. Are you Married?  6. Are you were served in any Branch of His Ma jesty's Forces, naval or military, if so,* which?  8. Are you willing to be vaccinated or re-vaccinated?  9. What is your Religion?  10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies?  1. Carbard British Majesty King George the fifth, His Heirs and Successors, and that I will be faithful and bear true allegiance to His Majesty King George the fifth, His Heirs and Successors, and that I will be faithful and bear true allegiance to His Majesty King George the fifth, His Heirs and Successors, and that I will be faithful and bear true allegiance to His Majesty King George the fifth, His Heirs and Successors, and that I will be faithful and bear true allegiance to His Majesty King George the fifth, His Heirs and Successors, and that I will be faithful and bear true allegiance to His Majesty King George the fifth, His Heirs and Successors, and that I will be faithful and bear true allegiance to His Majesty King George the fifth, His Heirs and Successors, and that I will be faithful and bear true allegiance to His Majesty King George the fifth, His Heirs and Successors, and that I will be faithful and bear true allegiance to His Majesty King George the fifth, His Heirs and Successors, and that I will be faithful and bear true allegiance to His Majesty King George the fifth, His Heirs and Successors, and that I will be faithful and bear true allegiance to His Majesty King George the fifth, His Heirs and Successors, and that I will be faithful and bear true allegiance to His Majesty King George the fifth, His Heirs and Successors, and that I will be faithful and bear true allegiance to His Majesty King George the fifth, His Heirs and Successors, and tha
2. What is your full Address?  3. Are you a British Subject?  4. What is your age?  5. What is your Trade or Calling?  6. Are you Married?  7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which?  8. Are you willing to be vaccinated or re-vaccinated?  9. What is your Religion?  9. What is your Religion?  10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies?  11. Cachelle Grant
3. Are you a British Subject?  4. What is your age?  5. What is your Trade or Calling?  6. Are you Married?  6. Are you were served in any Branch of His Majesty's Forces, naval or military, if so,* which?  7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which?  8. Are you willing to be vaccinated or re-vaccinated?  9. What is your Religion?  9. What is your Religion?  9. What is your Religion?  10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies?  11. Cache Married?  12. Cache Married?  13. Years  Nonths  7. Married?  9. What is your Religion?  10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies?  13. Name  14. Name  15. Corps  16. Are you willing to serve upon the conditions as a embodied in this roll of service as applied to Forestry Companies?  16. Are you willing to serve upon the conditions as a embodied in this roll of service as applied to Forestry Companies?  16. Are you willing to serve upon the conditions as a embodied in the above answers made by me to the above questions as a embodied in the Army Act.  17. Cache Married?  18. Are you willing to serve upon the conditions as a embodied in the Army Act.  18. Are you willing to serve upon the conditions as a embodied in the Army Act.  18. Are you willing to serve upon the conditions as a embodied in the Army Act.  18. Are you willing to serve served in any Branch of His Majesty King George the fifth, His Heirs and Successors, and 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, honesty and faithfully serve His Majesty, His Heirs and Successors, in the United Kingdom, according to the conditions of my service.  18. Cache Married Army Army Army Army Army Army Army Army
4. What is your age?  5. What is your Trade or Calling?  6. Are you Married?  6. Are you warried?  7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which?  8. Are you willing to be vaccinated or re-vaccinated?  9. What is your Religion?  10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies?  1. Cach and a solution of the service as applied to Forestry Companies?  1. Cach and a solution of the service as applied to Forestry Companies?  1. Cach and a solution of the shore questions are the, and that I am willing to failfil the engagements made.  1. Cach and a solution of the solution of the shore of the stith, His Heirs and Successors, and that I will be faithful and bear true allegiance to His Majesty King George the stith, His Heirs and Successors, and that I will as in duty bound, honestly and faithfully serve His Majesty, His Heirs and Successors, in the United Kingdom, 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.
5. What is your Trade or Calling?  6. Are you warried?  7. Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which?  8. Are you willing to be vaccinated or re-vaccinated?  9. What is your Religion?  10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies?  1. Cacheer States and that I am willing to fulfil the engagements made.  1. Cacheer States St
6. Are you warried? 6. Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which? 7. Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which? 8. Are you willing to be vaccinated or re-vaccinated? 9. What is your Religion? 9. What is your Religion? 10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies? 11. Cache Warrier and the service as applied to Forestry Companies? 12. Corps  13. Corps  14. Corps  15. Corps  16. Corps  17. Corps  18. Corps  19. Corps  19. Corps  19. Corps  19. Corps  10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies?  10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies?  10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Corps  10. Are you willing to serve upon the conditions as a supplied to Forestry Corps  10. Are you willing to serve upon the conditions of my service.  11. Cache Warrier and that I am willing to fulfill the engagements made.  12. Corps  13. Corps  14. Corps  15. Corps  16. Corps  17. Corps  18. Mame  28. Corps  29. Name  20. Mame  20.
7. Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which? 7
gesty's Forces, naval or military, if so,* which?  8. Are you willing to be vaccinated or re-vaccinated?  9. What is your Religion?  10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies?  10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies?  10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies?  10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies?  11. Are willing to fulfil the engagements made.  12. Are you willing to serve upon the conditions as possible to the fifth, His Heirs and Successors, and that I will be faithful 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 serve His Majesty, His Heirs and Successors, in the United Kingdom, according to the conditions of my service.  12. CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.  13. 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.
9. What is your Religion?  10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies?  1. Cach Wall Grand Corps  2. Cach Wall Grand Corps  3. Cach Wall Grand Corps  4. Cach Wall Grand Corps  5. Cach Wall Grand Corps  6. Cach Wall Grand Corps  6
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as embodied in this roll of service as applied to 10. Corps  I. Cuch wall and the above questions are the above answers made by me to the above questions are the above questions and that I am willing to fulfil the engagements made.  Signature of Witness.  OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.  I. Above the above the above the above the above questions 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.
made by me to the above questions are the, and that I am willing to fulfil the engagements made.
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 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
on this. 1.6day of Aller of Attesting Officer
†CERTIFICATE OF APPROVING OFFICER.
I certify that this Attestation of the above-named Recruit is correct and properly filled up, and that the re-
quired 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
Place
† 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.

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

Name	au	hurd Gr	arie	٥					
Apparent	age	years	U mont	hs.	He	ig <b>h</b> t.		<b>∫</b> _f	eet 9 inches
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' Corps in which served	Rgt. or Depot			7.1	-		-	in Re- t allow- kon to- C. Pay	Signature of Officers certi- fying correctness of entries
- 4			Army Rank	7.1	Service lowed to for fixi rate of p	not al- reckon ng the pension	Service serve no ed to re- wards G	_	Signature of Officers certifying correctness of entries
- 4		Promotion, Reductions, Casualties, &c.	Army Rank	7.1	Service lowed to for fixi rate of p	not al- reckon ng the pension	Service serve no ed to re- wards G	_	Signature of Officers certifying correctness of entries
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# Newfoundland Forestry Companies

ATTESTATION OF

	Questions to be put to the Recruit before Enlistment.
1. Wha	t is your name?
2. Wha	t is your full Address?
	)
	you a British Subject?
	t is your age?
	t is your Trade or Calling? 5
6. Are y	ou Married? 6
7. Have jesty	you ever served in any Branch of His Ma s Forces, naval or military, if so,* which?
8. Are cinate	you willing to be vaccinated or re-vac-
9. What	is your Religion?
as en	you willing to serve upon the conditions hoddied in this roll of service as applied to try Companies?
16-4	1-18 Kulhard Brazill SIGNATURE OF RECRUIT
oouna, nor	OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.  do make oath, that I will be faithful and allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty seatly and faithfully serve His Majesty, His Heirs and Successors, in the United Kingdom, according to the commy service.
The l	CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER. Recruit above named was cautioned by me that if he made any false answer to any of the above questions
ne would	be liable to be punished as provided in the Army Act.
	above questions were then read to the Recruit in my presence. e taken care that he understands each question, and that his answer to each question has been duly, entered
as replied	to and the said pormit has made and signed the production and taken the eath before me at
	Signature of Attesting Officer
	†CERTIFICATE OF APPROVING OFFICER.
	tify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the re-
	rms appear to have been complied with. I accordingly approve, and appoint him to the:
	191 Malamopunt
	Approving Office

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name	pric	hard Gr	azil	٥			
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Chest Mo		(Range of expa			inches	3lu	feet 9 inches
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			Particul	ars as to Ch	ildren		
	Chri	stian Names				Date and	Place of Birth
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		forfeited as above		100 100 000 000 000 000 000 000 000 000			
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Army Form B. 103.		Regimen	ar Number	2217,
	Casualty Form Active		U.M.	1546
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Rank 96 Surname			ichai	
Religion	Age on Enlis		_years	months.
	Terms of Service (a) Quation fue		- Ullu-	LAND CONTINGE
Date of promotion to present		pointment to lanc	1127	VICTORIA ST.
$\text{Extended} \left\{ \begin{array}{c}$	Re-engaged	diffication (b)	1 241	MAY 1917
	( ) or (	Corps Trade and	Sales Home	
	A CANADA CONTRACTOR OF THE STATE OF THE STAT	Signatur	e of Officer	i/c Records.
COPY SENT TO Report	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official
ST JOHNS, N.F.L.D.	B. 213; Army Form A. 36, or in other official documents, The authority to be quoted in each case.	1	Casuarty	or other official documents
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DATED 12 SEP 1917	Joined D. ++-lion	14 OCT 1916		
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<u> </u>		21 10 1/6, 1	Reg. Infantry G.H.Q., 3rd	Section
	υ	Language		-curion
(a) In the case of a man who has re-en	gaged for, or enlisted into Section D, Army Reserve, par	rticulars of such re-engage	ement or enlistm	ent will be entered.

<sup>(</sup>b) Signaller, Shoeing-smith, &c. (4 27 29) W 15012-5156 100,000 12/15 H W V(P 1977) [P.T.O.

Forms/B, 103/3

Enlisted (a) 3.10 Date of promotion present rank	Terms of Service (upration to appoint to lance rar	ment)	Service reckons f	rom (a)
Report  Date From whom received	Re-engaged  Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 1818, Army Form A. 88, or in other official documents. The authority tophe quoted in each case.	Qualification (		official documents.
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# The Royal Newfoundland Regiment

DEMOBILIZATION OF
Reg. No 2247 Rank Ptz Name Brogil - Richard
Date of Enlistment, May 18 Address Black - District Manager
Date of Enlistment. 16.4.18
Recommendation S.M.B
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 3 " 6 T
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
Molly Caps.
Date. 17.12.1.8. O. C. Discharge Depot.
FARTICULARS FOR DEMOBILIZATION
JAMOVM TAXTICULARS FOR DEMOBILIZATION
I. Civil Re-Establishment.
I amin a position to resume civilian occupation.
01 6 4 1 1 1 1 1
Inofore to aller och of for a wice of
Deer the forstronal officer and he informed me he would
Deen the Verticulary of the Board.  A platticular's passed to Vocational Officer for information and action. R Brazil
officer for information and action,
Date. 2.0. 12.18. Ostilolif
2. Clothing.
Certified that Clothing Regulations have been complied with:-
(a) Clothing Allowance payable A. Co. 7
(b) Clothing Supplied Ja Left of Insurface
Date. 2.0 12 1. Z Oilc. Re-clothing

3. Transportation and Release Certificate.
The above named has been provided with Travelling Warrant No
at
Day 20-12-19 Costilo Coff
Demobilization Officer
4. Pay and Allowances.
The herein named soldier's accounts have been correctly balanced and all matters in connection
therewith settled. He has received pay and allowances to 18-1-19
Date N-12-18 Alshey Cafor.
Depot Paymester.
9, 12, 18
Forwarded with following documents to O.C Discharge Depot.
N.F. P 36 B 268 B 121 N.F. Med D.F. 1
E 178 W 3494 B 122 Board 1st " 2 John L
B 178a J. 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
B 179c
Date 21.12.18. Cold
Date Demobilization Officer.
APPROVED.
Documents as above forwarded to:—  Officer ilc Records.
Board of Pension Commissioners.
with following additional documents. BOOT DISCHARGET DAY
ELICIBLE for POST DISCHARGE PAY
DEC 21 1918 Rt + Carl
Date O. C. Discharge Depot.
O. O. Distinger 2-p-1
Received the above noted documents from O. C. Discharge Depot.
Dec 28/1918
Date

[OVER

## 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 inability, is to be submitted for the consideration of the Commissioners of Chelses Hospital.

Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a medical Board, and the soldier should be given a full opportunity of camining it, as, if starded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station," and "Date" should be in his own handwriting.

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 Moicial Board, to be completed by the Officer its Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chales, Tondon, SW

Name in	a occurring in one describeron amount	quent to the date of	admission t	to pension	should be noted in red in	k.	
	full B	mill Ri	har	d		LAAUG	1912
Regimer	nt from which discharged	In Lewy	bun	dla	nd W	& RECORD	OFFICE
Regimer	ntal Number 2 21 7 porn (Parish, Town and Cou	/	11	1	· 1 8	Hed	4/2,
Where h	orn (Parish, Town and Cou	nty), and when	Na	ravo	ur gran,		//
ntende	d address 6 mu	llock f	trees	l'ad	1. Johns	Efte	1
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Colour c	of Hair on discharge dans	2/mm /		Colour	of Eyes		
Descript	tive marks for on he	ad.		Compl	exion 7-6-1	clear	)
Figure c	on discharge medu	im					
	n name of Father 9	chn:					
Christia	n name of Mother	Emma.					
Wife's M	faiden name in full						
	d Place of Marriage		1		Min War 1 14 15		
						1	10.6
Nature	n names of Children and locality of civil employs	ment desired	when	pis	enough to	go o	0.1
		- /	1.	win	is as a m		
I de	clare that I am the soldier refer	red to above, and	that all t	the part	iculars contained in the	above St	атешен
re, to to	e best of my knowledge, correctly Signature in full) Rich	· Beari	el	-	1		1
	wansworth	0		(k)	rivate		
station.	til all the share named to	Idian signed the	foregoing	e ///	tion in my Ardence, an	d that th	ne above
T co	rtify that the above-named so	ldier signed the	foregoing	declara	tion in my presence, an	that the	ne above
T co	rtify that the above-named so on and details are, to the best	ldier signed the sof my knowledge,	foregoing	declara	tion in my presence, an	Medical (	fficer i/c
T co	rtify that the above-named so		foregoing	déclara	tion in my presence, an	Medical (	ne above Officer i/c Hospital.
T co	rtify that the above-named so on and details are, to the best	Hospital,	foregoing	declara  C  Date	fion in my presence, and will have the form of the for	Medical (	)fficer i/c Hospital.
I co description	rtify that the above-named so on and details are, to the best of 3rd London General i	Hospital,	foregoing	déclara	tion in my presence, an	Medical (	fficer i/c
I co description Station	rtify that the above-named so on and details are, to the best of 3rd London General i	Hospital, S.W.	foregoing correct.	déclara C Date	fion in my presence, and will have the form of the for	Medical (	)fficer i/c Hospital.
I co description Station	artify that the above-named so on and details are, to the best of 3rd London General i WANDSWORTH,	Hospital, S.W.	foregoing correct.	déclara C Date	All Service Abroad with Statio	Medical (	)fficer i/c Hospital.
I co description Station	rtify that the above-named so on and details are, to the best of a second or	Hospital, S.W.	foregoing correct.	déclara C Date	All Service Abroad with Statio	Medical (	)fficer i/c Hospital.
I co description Station	rtify that the above-named so on and details are, to the best of WANDSWORTH,  f Service and in what Corps  COPY SENT TO	Hospital, S.W.	foregoing correct.	déclara C Date	All Service Abroad with Statio	Medical (	)fficer i/c Hospital.
I condescription	3rd London General WANDSWORTH,  Service and in what Corps  COPY SENT TO,  O C. H.Q.  ST. JOHNS, N.F.L	Hospital, S.W.	foregoing correct.	déclara C Date	All Service Abroad with Statio	Medical (	)fficer i/c Hospital.
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I condescription  Station  Period of  Disallow  Service t  Dateinel  Sums du	ard London General WANDSWORTH,  Service and in what Corps  COPY SENT TO,  O 2. H.Q.  ST. JOHNS, N.F.L.  COWARDS Dension 12 SEP 191  DATED  Unsigned to which pay base entered to eon account of public debts	Hospital, S.W. Regiment	foregoing correct.	Date Days Sum du	All Service Abread with Statio India S. Africa	Medical (	)fficer i/c Hospital.
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Rank on Discharge
Character (as on Certificate of discharge)
Where born, and on what date
Date and Place of first Enlistment
Trade on Enlistment
Cause of Discharge
Number of G.C. Badges
Wounds, and Actions in which received

Medals

Other distinguishing marks

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.			
Station	Officer in Charge		
	Records.		
Date · · · · · · · · · · · · · · · · ·			

Informati	ón to be	obtained fr	om a Soldie	r (Regular o	r Territori	ial) whom
it is p	roposed	to dischar	ge or to tr	ansfer to th	e Reserve	Section
W or	W(T) in	substitution	i for a man	fit for Gene	eral Servi	COS, VICTORIA ST.
					1*	AAUG 1917
No.	917			Rank f	himale	& RECORD OFFICE

Name (surname first) Brazill. Richard Regiment 1 St. N. F. L. D.

1. State what special qualifications you have for employment in civil life.

general Labour

O C. H.Q.
ST. JOHNS, N.F.L.D. N.F.P.38. No. 1422/11 DATED 12 SEP 1917

State the name and address of your last, or any other employer before enlistment,

2. State the name and address of your last, or any other emeret., the nature of employment and how long you were employed?

Therefore Lot & St. Johns NFLD general Latour

Three (3) Years

3. What is the nature and locality of the employment you desire?

General Labour N.F.L.D

What is the name of your Approved Society?

Have you been employed whilst with the Colours? If so, in what capacity?

Date 9/8/17

Signature R. Brajel

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

Medical Report on an Invalid.

3rd London General Nospitaly
Station WANDSWORTH S. W. A RECORD OF

120 aux 1

1st hewfore alland

2. Regimental No. 2217

Brazill R 4. Name

5. Age last birthday 21.

on 14 March 1916 It John's.

7. Former Trade General Latiner

8. Disability.

( State Verten of Cran un fri hacher of skall & Ar.

Statement of Case

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsubported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

- 9. Date of origin of disability.
- 10. Place of origin of disability.
- Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

14.4.17 trance

Skull nous rendered him ancourcions for some time hat he halked back to drening taken. only table of skull affects to have been scorped mbasished. her dear as to Aropital but thinks Bouly Sequether of the remond

COPY SENT TO O.C. H.Q. ST. JOHNS, N.F.L.D. 12 SEP 1917

- (a) Give your opinion as to the causation of the disability.
  - (b) If you consider it to have been caused by active service, climate, or erdinary military service, explain the specific conditions to which you attribute it (See notes on page 2).

action Tenne S. S. W

18. What is his present condition?	mudio countly healed he
Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.	requires protestion. Below mental parties & be un . Readeches few . Was
the progress of the disability.	aguin point
his p	mental pouttees & or un
han	Destaches few . Was
Cehe	16 miles : the ocean star ocean with on there will be the ocean with the ocean ocean with the ocean oc
. Ne i	4 my on Mosping
by hed	ils.
	Committee of the Commit
Subject to the second s	
14. If the disability is an injury, was it caused	O VVII O O
(a) In action?	A CONTRACTOR OF THE PARTY OF TH
(b) On field service?	Yes
(c) On duty ?	Vie
(d) Off duty?	V Yes
	and the manager of the agency of the second contract of the second c
15. Was a Court of Inquiry held on the injury?	
11 11 11	
If so—(a) When?	· · · · · · · · · · · · · · · · · · ·
(b) Where?	
(c) Opinion ?	
16. Was an operation performed If so,	Vide 11
what?	1000 11
17. If not, was an operation advised and	
declined?	
18. In case of loss or decay of teeth. Is the	
18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly attributable	
to active service ?	
19. Do you recommend	The first warmer as the first
(a) Discharge as permanently unfit,	1 11.18
(b) Charge to England?	Remote compt
	G C Ray, &
	Capi
M-8	Officer in medical charge of case.
	accuracy of this report, and concur therewith,
TVANDSWODEN SW	WC (Sauce XN) 61
WANDSWORTH	18 & Services
Station	
Station	Officer in charge of Hospital. A.M. C.  Comdg. 3rd. London Gen. Hospital cause.  cause.  Comordinate is evidence that it is due to some cause.

### Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are tobe carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Commissioners of Cheisea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

- (ii.) Expressions such as "may," "might," "probably," &c., should be avoided.
- (iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (a) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1168, Pay Warrant, 1918).
- (iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.
- (v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

100

- (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.
  - (b) If due to one of these causes, to what specific conditions do the Board attribute it?

active horice Sps.

21. Has the disability been aggravated by

- (a) Intemperance?
- (b) Misconduct?

(c) Any of the conditions mentioned in question 20, and if so, which?

22. Is the disability permanent?

- 23. If not permanent, what is its probable minimum duration?
- To be stated in months.
- 24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?
- In defining the extent of his inability to earn a livelihood, estimate it at \(\frac{1}{2}, \frac{1}{2}, \fra
- 24A. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?

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

26. Do the Board recommend

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

Signatures:-

3rd London General Hospital. SMATINDSWORTH, S.W.

Approved.

Statishd London General Hospital.

WANDSWORTH, S.W.

end laft Manig

i Ru 07 Administrative Medical Officer.

23a.Is he fit for discharge

from the service as an out-patient? and will be require out-patient treatment on dis-charge from Hospital?

## (On leaving Corps or Station where invalided.) Conveyance Transfer Station of Embark- Date Officer in ation |Port medical charge Brief remarks on case during transit, and state on transfer for final disposal. Date Re-transferred spital or Officer in medical charge. (At Station or Hospital where finally disposed of.) Station and Hospital Arrived from Date If under If admitted How finally Date of treatment Disease disposed of Discharge, &c. Date To From Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in. Date of final Medical Board, or decision Administrative Medical Officer.

Army Form B. 179.

MEDICAL REPORT ON AN, NVALID.

Station
Corps

/\*\* Nfed
Corps

/\*\* Nfed
Regimental No.

22 //
Rank

Name

Rank

Name

Corps

Rank

Name

About of Station

transferred to fer
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Descriptive Return of a	0 11: - 1			Army Fo	иш D.	
	Solaier al	schar	ged o	on account of D	isabi	lity.
INSTRUCTIONS.—This form is to be conditioned disability. And be submitted for the consideration	mpleted in the ca	se of every	discharga Hospita	ged soldier whose claim to pe	nsion, on	account of
DESCRICTIONS.—This form is to be on the condition of a second condition of the consideration of the consideration of the condition of the cond	pital at which the of examining it,	man is att	ending a ed a per	t the time of his examination sion, his subsequent identifica	by a Med tion deper	ical Board, nds on his
control of this declaration. The "Rank," "Station form will then be attached to the Processing Form will then be attached to the Processing Form will then be attached to the Processing Form will be attached	edings of the ma	ould be in hi	Board, t	ndwriting.	r i/o Rec	ords when
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Name in full	en, we the date of	Vial.	o penaic	58	, VICTORIA	
Regiment from which discharged	Mustan	Pelan	X	· ( ( )	LONDON, 8.	·w. )
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Christian names of Children	11	hen fin	ens	rugh to go to	you	Co.
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I declare that I am the seruler referre	d to aboye, and	that all	he part	iculars contained in the	bove St	atement
are, to the best of my knowledge, correct.	of Mayor		-	!		
(Soldier's Signature in full)	100	(Ran	k) H			
Station Wacesworth	LW.	Dat	e //.	8.17.		
I certify that the above-named sold description and details are, to the best of	ier signed the	foregoing	declara	tion in my presence, and	that th	
3rd land to fame of the	my And wickey					ie above
	Mubitel		9/	Hall Capt la	eglcal O	fficer i/c
of the second	Musital		H	Hally Capt for	eglcal O	
Station Wanslworth	Sul	r X	Date	Hall Capt SA	eglcal O F	fficer i/c Jospital
	Regiment	Years	Date	Hall Ciph Sign	eglcal O F	fficer i/c
Station Wanshorth Period of Service and in what Corps	Aufilial Sub Regiment	r X	1 4 1	Hall Capt SA	eglcal O F	fficer i/c Jospital
	Regiment	r X	1 4 1	Hall Ciph Sign	eglcal O F	fficer i/c Jospital
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Period of Service and in what Corps  Disallowed  Service towards Pension  Dateinclusive to which pay has been issued Sums due on account of public debts  Rank on Discharge Character (as on Certificate of discharge towards pension) and on what date Date and Place of first Enlistment Trade on Enlistment Cause of Discharge		Years	Days  Sum du  of adva	Hall Cife for All Scribes Africa	eglcal O F	fficer i/c Jospital
Period of Service and in what Corps  Disallowed  Service towards Pension  Dateinclusivetowhichpay hasbeen issued Sums due on account of public debts  Rank on Discharge Character (as on Certificate of discharwhere born, and on what date Date and Place of first Enlistment Trade on Enlistment Cause of Discharge Number of G.C. Badges	rge)	Years	Days  Sum du  of adva	Hall Cife for All Scribes Africa	eglcal O F	fficer i/c Jospital
Period of Service and in what Corps  Disallowed  Service towards Pension  Dateinclusive to which pay has been issued Sums due on account of public debts  Rank on Discharge Character (as on Certificate of discharge towards pension) and on what date Date and Place of first Enlistment Trade on Enlistment Cause of Discharge	rge)	Years	Days  Sum du  of adva	Hall Cife for All Scribes Africa	eglcal O F	fficer i/c Jospital
Period of Service and in what Corps  Disallowed  Service towards Pension  Dateinclusivetowhichpay hasbeen issued Sums due on account of public debts  Rank on Discharge Character (as on Certificate of discharwhere born, and on what date Date and Place of first Enlistment Trade on Enlistment Cause of Discharge Number of G.C. Badges	rge)	Years	Days  Sum du  of adva	Hall Cife for All Scribes Africa	eglcal O F	fficer i/c Jospital

I certify that the above details of service and other particulars are, to the best of my knowledge, correct. Officer in Charge Station\_ Records. Date\_ [OVER

Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man fit for General Service. CONTI

Name (surname first) Brazill Gickerd
Regiment / Mewfoundhard

1. State what special qualifications you have for employment in civil life;

General Labor

2. Staje the name and address of your last, or any other employer before enlistment, etc., the name of employment and how long you were employed?

Meneral Labour Labour (3) years

3. What is the nature and locality of the employment you desire?

General Labour CA. I.

4. What is the name of your Approved Society?

5. Have you been employed whilst with the Colours? It so, in what capacity?

Date 9.8.17

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

Domo	hiller	Hon	Form.	9	

## The Royal Dewfoundland Regiment

Anested PROCEEDINGS C	ON DISCHARGE
(1 olar	vame Michael Bragel
Intended place of residence. & Multi-	
C .	Medical Category
. The above named man is discharged in consequence of.	DEMOBILIZATION.
ELICIBLE for POS	T DISCHARGE PAY
. His accounts are correctly balanced and I have impart accordance with Regulations.	ially inquired into all matters brought before me, in
Place	Comanding Discharge Depot The Royal Newfoundland Regiment
CERTIFICATE TO BE SIGNED	BY SOLDIER ON DISCHARGE
. I hereby acknowledge that I have received all my pay just demands up to the present date, and hereby releas of all financial responsibility in my connection.	and allowances (including clothing allowance) and all the the Discharge Depot, Royal Newfoundland Regiment,
Place and date . St Johns	R. Brauel Signature of soldier
Wre21-1918	Signature of witness
CIVILIAN RE-ESTABLISHMENT CERTII	
I hereby certify that I am in a position to resume civil	ian occupation immediately on discharge.
Place and Date	Signature of soldier
Dec 18 - 1918	Signature of witness
STATEMENT	OF SERVICE
Enlisted for service 16: 4: 18 kl	No of days on Military
	Service Service
APPROVAL OF	DISCHARGE by approved to be confirmed by the Officer i c Records,
The Royal Newfoundland Regiment, twenty-eight day	ys from date.
Place ST. JOHN'S.	Officer Commanding Discharge Depot The Royal Newfoundland Regiment.
DEC 21 1918	M.H.
CONFIRMATION	OF DISCHARGE
The discharge of above mentioned soldier is hereby	confirmed. M. Howley last.
Place Day and 1811010	Officer i c Records
Date A. Mariana	The Royal Newfoundland Regiment

Medical Report on an andland 5. Age last birthday 7. Former Trade { Several Jahouse ! rapul 8. Disability. lester of Statement of Case Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease. 14.4.17. 9. Date of origin of disability. France 10. Place of origin of disability. 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing skull wound rendered him. unconscious for some time, but he walked back to aressing thation

butes table of skull appears to have been scorped out.

Not clear as to Rospital had thinks Dralogue.

Sequestrum of home removed

12. (a) Give your opinion as to the causation of the disability.

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3). Setire Service

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability. Wounds soundly healed but seas requires protection. Believes his mental faculties to be unimpaired Readaches Sus. Was at Ester 6 weeks. The is given on stooping + has occasional herdaches. 14. If the disability is an injury, was it (a) In action ? (b) On field service ! (c) On duty ? (d) Off duty ? 15. Was a Court of Inquiry held on the If so-(a) When ? (b) Where ? (c) Opinion P 16. Was an operation performed? 17. If not, was an operation advised and declined? 18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly attributable to active service? 19. Do you recommend (a) Discharge as permanently unfit, Termanently. Unfit (b) or (b) or to England? A have satisfied myself of the general accuracy of this report, and concur therewith,

13. What is his present condition?

Opinion of the Medical Board. Norse.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension. (ii.) Expressions such as "may," "might," "probably," &c., should be avoided. (iii) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1913). (iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life. (v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease. Active Lervice (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii) ordinary military service. (b) If due to one of these causes, to what specific conditions do the Board attribute it? 21. Has the disability been aggravated by (a) Intemperance ? / (b) Misconduct P. 23a. Is he fit for discharge from the Service as an out-patient? and will he require out-patient treatment on discharge from Hospital? at present In defining the extent of his inability to earn a livelihood, estimate it at \(\frac{1}{2}, \frac{1}{2}, \fra 25. If an operation was advised and declined, was the refusal unreasonable?

Members

Administrative Medical Officer.

26. Do the Board recommend

(b) Change to England?

(a) Discharge as permanently unfit,

Signatures:

•	Opinion of the Medical Board.
	Norss.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, see event of the man being invalided, it is essential that the Commissioners of Chelses Hospital should be in essention of the most reliable information to enable them to decide upon the man's claim to pension.  (ii.) Expressions such as "may," "might," "probably," &c., should be avoided.  (iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, limate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to rentiate between them (see Articles 1169 and 1163, Pay Warrant, 1913).
mili	<ul> <li>(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from tary conditions and disease to which the soldier would have been equally liable in civil life.</li> <li>(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates re there is a special liability to contract the disease.</li> </ul>
20.	(a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii) ordinary military service.
	(b) If due to one of these causes, to what specific conditions do the Board attribute it?
21.	Has the disability been aggravated by
	(a) Intemperance? W
	(b) Misconduct?
1	Is the disability permanent?
	If not permanent, what is its probable minimum duration?
•	se stated in months.
	To what extent is his capacity for earning a full livelihood in the general labour market lessened at of the present?
In	defining the extent of his inability to earn a livelihood, estimate it at \$\frac{1}{4}, \frac{1}{4}, \frac{1}
25.	If an operation was advised and declined, Ville 16. was the refusal unreasonable?
26.	Do the Board recommend
	(a) Discharge as permanently unfit, or
	(b) Change to England?
Lou	signatures: - If fixey Martin May hat President.
Sta Da	tion Wandforth SW. Members.
	lands the first of the state of
1	Approved Jospital Lidney Martin My Kot M.C.J., Wander Manning Martin May Market Martin Martin May Market Ma
Da	19 Suguet 19.7.

(On leaving Corps or Station where invalided.) Conveyance\_ Transfer Name of Embark-Officer in ation medical charge Port Date Re-transferred Hospital or Officer in medical charge. (At Station or Hospital where finally disposed of.) Station and) Hospital Arrived from Date If under If admitted treatment How finally Date of Disease disposed of Discharge, &c. To Date From Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in. Date of final Medical ) Board, or decision } Administrative Medical Officer. MEDICAL REPORT (xa) (88579) Wt. 1836 475M 5-15 W B & L io nocon

## NEWFOUNDLAND.

## REPORT OF MEDICAL BOARD

#### ON SOLDIER OR NAVAL RESERVIST RETURNED FROM OVERSEAS

Station ST. JOHN'S NFLD.

Date OCTOBER 1st., 1917.

No.

2217

21 Height 5'9" Age

Fank

PRIVATE

Complexion FRESH(CLEAR)

1 ame

BRAZIL, RICHARD

Eyes GREY Hair DArk HROWN

1ST NEWFOUNDLAND

Address 6 MULLOCK STREET

Former Trade GENERAL LABOURER

Enlisted at ST. JOHN'S NFLD. on MARCH 1st., 1916

Disease or disability GSW VERTEA OF CRAMIUM. FRACTURE OF SKULL

binder 2 mehes square with loss of outer table of shall ho imperspent of mental faculties, ho parshais Shall headelle at times

Estimated disability

20%

Recommendation of Medical Board

Descharge as permanents unfit

Class

Members of Board

Approving Medical Office

Chiny Marpherson, Migin

Querill.

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

# MEDICAL HISTORY

					market and	4
	Table I.	-GENER	AL TABLI	E.		S. Comment
Birthplace: -Parish 81	phone		Coun	ty &	la	
	SPI	ECIAL RESI	ERVE.	1	DECULAR	narr
	on 16	day of C	اندو	d	REGULAR	
Examined	1/h	0	191		day of	191
	at M	Lan	=	at		
Declared Age	1 2,3	years	day	8	years	days
Trade or Occupation	1 %	abour	en			
Height	1	feet	9 inche	s	feet	inches
Weight			120 lbs			lbs.
Chest (Girth when fully expanded			inche	s		inches
Measure- ment Rauge of Expansion			inche	s		inches
Dissipal Paral						inches
Physical Development	Right		Left			
Vaccination Marks Arm			IXIL	- K	ight	Left ,
( Number						
When Vaccinated				1		
Vision	R.EV=			R. E V=		
	L.EV=			L.EV=		
				-		
(a) Marks indicating congenital peculi-	(a)			(a)		
arities or previous disease				Marie V		
	(4)	p		(b)		
(b) Slight defects but not sufficient to cause rejection						
( Approved by (Signature)	0	.0				
Manage and American Street Control of Contro	dami	Mat	com	ļ		
. (Rank)		mayor				
		~ .	Medical Officer.			Medical Officer.
Enlisted	at M	gran	- Hid	at		
	on 16	day of	pul 191	on	day of	191
Joined on Enlistment	Corps.		Regtl. No.	Cor	rps	Regtl. No.
	Ayeu Pire	and .				
	Confor	- 1	21/			
Transferred to						
1247	94					1
Became non-effective by			1			
	on	day of	191	on ·	day of	10.
[Signature]					day of	191
ID-12	•	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	12 1	25-24-7	1,000	
[Rank]	(C		4	Carriedo.		

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.

TOWN TO JUST A STATE OF THE PARTY OF THE PAR		exercise company consistence of the second
Date		Brief Details, and Signature
	70 . 4 . 4 . 4 . 4 . 4 . 4 . 4 . 4 . 4 .	
any 1916	Tace 10	
		*
\		It is hereby certified that this soldier has been before a Travelling Medical Board and has been classified as
		tion. Medical category
•		Date of TM.B. Probage Populities and

### 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
	1. 7.				
				. ,	
	1				N. N.
•					
and the past of the same					

Army Form B. 178.

Army Form B. 178' to be used for Special Re and Special Reservists enlisting into the MEDICAL HISTORY Christian Name TABLE I.-GENERAL TABLE Birthplace ... Parish Examined ... years days. Declared Age Trade or Occupation inches. feet Height lbs. Weight Girth inches. Chest Measurement inches. Range of Expansion Physical Development ... Left Right Vaccination Marks Number When Vaccinated R.E.-V Vision (a) Marks indicating congenital peculiarities or previous disease (b) (b) Slight defects but not sufficient to cause rejection ... Approved by (Signature) (Rank) Medical Officer. Enlisted 191 Regtl. No. Joined on Enlistment Transferred to Became non-effective by 191 day of on (Signature) (Rank)

To be used for recruits enlisting direct into the Regular, Army

Table III.—Boards; Courts of Inquiry, 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
1.7.16	Tink her culction, by
10.7.16 22.9.16	and do to now o
22.9.16	3rd de Tam d All. d.
	and the second
	necessful Vaccination PM.
29.9.16 2	lit for Breign Service Bld.
29.9.10	in gor a programme of warming

#### 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
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				ent entre	
		100		i'	
			State of the Patrick State of		

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

### MEDICAL HISTORY

or Christian Name

### Table I.—GENERAL TABLE.

		County	NOT BY YOR ON THE BOWN IN THE TRAVELOW STREET STREET	AND DESCRIPTION OF STREET OF STREET
	SPECIAL :	RESERVE.	REGULA	B ARMY.
Examined	on day of	191	on day of	191
Declared age	years	days	years	days
Height	feet	inches	feet	inches
Weight		lbs.		lbs.
Chest Girth when fully expanded  Measure. Range of expansion	5	inches		inches
Physical development	Right	Left	Right	Left
Vaccination marks Arm		• 18		Delt
When vaccinated				
Yision {	R.E.—V.= L.E.—V.=		R.E.—V.= L.E.—V.=	
(a) Marks indicating congenital peculiarities or previous disease	(4)		(4)	
(b) Slight defects but not sufficient to cause rejection	.(6)		(6)	
Approved by (Signature)				
(Rank)		Medical Officer.		Medical Officer.
Enlisted	at .		at	
	on day of Corps	Regtl. No.	on day of	191
Joined on enlistment	Alex	2217	Corps	Regtl. No.
Transferred to				
Became non-effective by				
(Signature)	on day of	191	on day of	191
(Rank)			<u> </u>	

-	Post			1	Shear	2010000	II.—Only for admissions to	100000000000000000000000000000000000000		
Name of hospital		Mont	d to al Year	47.03	hospits Month		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 syphilia admissions and readmissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, irradiary, dot, will be given in the special pythile case had particulars of treatment out of hospital, irradiary, dot, will be given in the special pythile case had been also also also also also also also also	Signature of Medical Officer
M. A.M.	PRINCIPLY.			1				1		
Tourse Sweet SW.	20	4	7	-			ISW! Nextex of Level		Greeklity - See overleef. Suchlity - It W North of cranium I med of Skull	,
	a								Suchity - See overless of cranium and of Shall Suchity - If Wester of cranium and of Shall the state of State of Cause - Se State on Action Service What - brability to earn a limited of present of	of Mingley Colle
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	•						A			
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							1. 1822 - 1. 1823 - 1. 182		. •	
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							•			

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, &c.; Examination 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
13. 8.17.	Goard held Termanently Mufit Board - Speroved 1987
	for OC. French Sure Surent Sur.

#### 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	
				4		
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					1000	
·						
		- /				

To be used only for Special Reserve Recruits, and for Special Reserve Regular Army.

MEDICAL HISTORY

Surname

Christian Name

10 SEP 1917

Table I.—GENERAL TABLE.

Birthplace:—Parish		Cour	nty	
	SPECIAL		REGULA	R ARMY
Examined	on 29 day of 7	February 1916	on day of	191
Declared Age	20 year	rs days		days
Trade or Occupation	5 feet	0	OPY SENT TO	inches
Height Weight	U feet	1202 lbs.	ST. JOHNS, N	
Chest Measure-ment Range of expansion		35½ inches	N.F.038. No.	1917 inches
Physical Development	D. III	1 0		
Vaccination Marks Arm Number	Right	Left	Right	Left
When Vaccinated				
	R.E.—V= 6/6		R.E.—V=	
Vision }	L.EV= 6/6		L.EV=	*
	(a)		(a)	
(a) Marks indicating congenital peculi- arities or previous disease			(M)	55. No. 11 (10 10 10 10 10 10 10 10 10 10 10 10 10 1
· v	(6)		(6)	81 AGA SS "
(b) Slight defects but not sufficient to Cause Rejection			PAY	# RECORD CIFICE
Approved by (Signature)	Vamont	Paterson		
(Rank)	Cap	. Medical Officer		Medical Officer.
Enlisted	at Book	7.100	at	
	on day of	Regtl. No.	On day of	Regti. No.
Joined on Enlistment	1st fld Reg.	2219		
Transferred to	Keinfour	dland	,	
Became non-effective by				
	on day o	ıf 191	on day	of . 191
(Signature)				
(Rank)	1 ,			[P.T.O.

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.: Examination for Field or Foreign Service, Extension, Re-engagement, or prolongation of Service; Issue of Surgical appliances; Particulars of Dental Treatment, &c.

Date	Brief Details, and Signature
1/2/16 0/3/16. 0.8.16	Successful Vaccination (N. FW)
9.9.16	Til for Foreign service It. 4.W.
	×

#### 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
,						
					2	
		. 10				
				Carrier Services		

ARMY FORM B. 178.

1 4 AUG 1917

To be used to for recruits entitling direct into the Regular Army and () for men of the Territorial Force when they are admitted to Hospital Force when they are admitted to Hospital Force Army Form B. 178 to be used for Special Reserve redruits and special Reserve redruits and special Reserve redruits and special reserve.

## MEDICAL HISTORY of

Surname Oraz	ell.	Christian Nam	e	under	RECOR
1	TABLE I.	-GENERAL T	ABLE.		
Birthplace Parish		Co	unty		
	(on	day of	1.000		_191
Examined	at				
Declared Age	,	years		days.	
Trade or occupation	-				
Height		feet_		inches.	
Weight				lbs.	
Chest Girth when fully Expanded			1	inches.	
Measurement Range of Expansion				inches.	
Physical Development					
Vaccination Arm		Right		Left	
Marks (Number					1
When Vaccinated	(R.E.—V=		COPY SEN	C. H.Q.	
Vision	L.EV=		07/10	HNS. N.F.L.D.	+
(a) Marks indicating con-	(a)		1111	(HI) HA	-
genital peculiarities or	{		N.F.P.38.	12 SEP 1917	-
previous disease	(		BATED	12 30	
(b) Slight defects but not sufficient to cause rejec- tion	{(b)	- L			
Approved by (Signature)					
(Rank)		-1.1.4			
(2111111)				Medical C	fficer
	(at				
Enlisted	on	day of			191
	(	Corps.		Regtl, No.	
Joined on Enlistment	1/h	entrund	land	2217	
	1			/ / /	
Fransferred to					
Became non-effective by					•
	on ·	day of			191
(Clay to A	JII				
(Signature)			- 1 - 2 C-018		
(Rank)		Co., Ltd. Form			P.T.O

Table II.—Only for Admissions to Hospital or to the Sick Liet in the Admission of the Admission to Hospital or to the Sick Liet in the Admission to Hospital or to the Admission to Hospital or to the Sick Liet in the Admission to Hospital or to the Sick Liet in the Admission to Hospital or to the Hospital

Name of Hospital	400000000	A CONTRACTOR	Hospital		ged from spital	ad of left in mor was	Number	Sick List in the case of Warrant Officers treated in quar Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of	State Canadaga:
	Day	Mont	Year	Day M	onth Year	ICITY Disease	Number of days Disease 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 case of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment-out-of-hospital, transfers, de., will be given in the special syphilis case sheet.		Signature of Medical Officer
London General Hospite ANDSWORTH, S.W.	1,20	4	17			G.S.W. Vertex of		0	
			′ •			cranium trud: of skul	0		<b>*</b>
· fr						- Trues, of study			BOLDER G. Territoria
								Traduce of skull.	*
								to thomas wear a protection cap.	
								Grady on Horping voucarimal	
		. 0						readairs.	
			1					Course 4. FW on active Levice.	
						7		the state of the s	e., , , , , , , , , , , , , , , , , , ,
								as preuns.	Harryler-capt Rau
								proc.	3rd London General Hosp WANDSWORTH, S.W.
							.		WANDSWORTH, S.W
	-					1			
									· · · · · · · · · · · · · · · · · · ·
								Control of the Contro	
									<u> </u>
						i 1 1	$\longrightarrow$		
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		+	-						
		-			++				
	-		+						
								The British was the second of	Carrier parameter 5
						1000			

Table III.—Boards; Courts of Inquiry, 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			. в	rief details,	and Signature	Service of the servic		91500 (915)
13/8/17	Boo	and.	held			and the second	s forms	
1//	Four	rd -	Per	rna	nent	ly Mn	il	•
	Boar	d -	ap	priv	ed	13/8/17		
	100000000000000000000000000000000000000							
	7	NH	ryles	Cap	Ram	er	4	
	Ja	o-c -ora	WANDS	WORTH	Ram Hospita H, S.W.	•		
					1.			
		James (A)			* 1			
	1.5		•					
	100	17						
						V		
	SA.	-						
			•					
	-	1				_ ` ~		
							Edition 1	

#### Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure of disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation
			-,		
		\ \ \			
		1			

Place	Date of offence	Rank Dre	oes of maken Offence	Names of Witnesses	Ponishment awarded	Date of award or of order dispensed with trial	By whom awarded	Remarks
In the field 511116 16	16	Deficient stooped Sheet	Self Acc	Pay to some	10.3-14	Steel Forter	Robertion Port	
			COPY SENT TO O.C. H.Q.		4		•	- P
			ST. JOHNS. N.F.L.D.		And the second		6.1	
		11 1960 196 2 1969 197	N. F.P.30. No. Managed Managed			58 ( -8.3		The second
			DATED 12 SEP 1917					. B

CR 2217

Extract from Nominal Roll Embarked St. John's, for Overseas, per S.S. Sicilian, July 19,1916

2217 Pte. R. Brazil.

Demobilization im 8

O i|c. Re-clothing.

## The Royal Newfoundland Regimen Reg. No. 22/7 Rank P/2 Date of Enlistment 16.4.18 Address Address Address Mulchock Recommendation S.M.B. . . . . . Disability Rating . . . Passed to Demobilization Officer with following documents:-B 268..... B 121...... N.F. Med..... 178a / D 400A .... B 1915 do 2nd Willey Capt, Date. 17.12.18 1. Civil Re-Establishment. in a position to resume civilian occupation. I propose to atten ochool for a time. Then seen the Victional officer and he informed me he would Particulars passed to Vocational Officer for information and action R Brazill 20. 12.18. assilo Cat 2. Clothing. Certified that Clothing Regulations have been complied with:-(a) Clothing Allowance payable . . . . (b) Glothing Supplied .

Date. 2.0 - 12 - 18

3. Transportation and Release Certificate.
The abord-named has been provided with Travelling Warrant No
00.1 00
Date 20 - 12 - 19 Combilization 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
Date 11-12-18 Manual Cafe() Depot Paymenter.
Discharge approved for 21. /2. /8
Forwarded with following documents to O.C Discharge Depot.
N.F. P 36. B 268 B 121 N.F. Med D.F. 1 5 178 W 3494 B 122 Board 1st " 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
R 178a V . J. D 400A B 1915 do 2nd " 3
B 179 D 400B Form L do 3rd " 4
B 179a D 400C Form K do 4th
B 1796. B 120. ME 2
B 119C.
Date 21: 12:18: La
APPROVED. W
Documents as above forwarded to:—
Officer i c Records. Board of Pension Commissioners.
with following additional documents.
ELIGIBLE for POST DISCHARGE PAY
Date DEC \$1 1918 RX at Cark.
O. C. Discharge Depot.
Received the above noted documents from O. C. Discharge Depot
De adres Mistowley Capt
Date 26.28/1918 Dyck.

Extract of Community List received from Pano, London Dated April 39th.

The followinf r/b 0.C. Unit as "Wounded" 14.4.17. Report dated 15.4.2 Ro provious reports.

2217 Pte. R. Brazil

lat. Nfld .Rogt.

C.R.2217

Extract from Daily Orders Part 11 Unit The Royal Hfld. Regt., St. John's, Oct. 24th, 1917.

The following man proceeded on Special Duty(Recruiting)

2217 Pte. Brazil.

Burges on Oct. 25th, 1917.

C.R. 2217

Antrest from Daily Orders part 11 Unit the Hoyal Hill. Rogt., St. John's, Ropt. 28th, 1918.

The following can returned from Overseen and magnifical is attached to He4's from Cout. Soth, 1919.

2217 Pte. R. Brazil.

Extract of Daily Orders part 11, from Unit The Royal Newfoundland Regiment, 4th Battalion. dated February 6th,1918.

#2217 Pte. R. Brazil.

Having been found Medically Unfit is discharged with effect from 2/2/18.

C.R. 2217

Extract from Daily Orders Part 11 Depot. St. John's Sept. 3rd 1918.

#2217 PTE. M. J. BRAZIL.

Proceeded on Rhecial Duty at Cape Race 6/8/18

C.R. 2217

Extract from Daily Orders part 11, Depot St. John's dated Dec. 27th. 1918

The undernoted discharge on demobilization have been approved by 0.0 discharge depot from noted date. 21-12-18. Ethnolog the retrempth of the depot and to majorned to discharge depot, pending confirmation by 0.0013-2-1/2 Records.

# 2217 2ts. 31, 321sil.

Extract from Daily Orders Part 11 Unit TheRoyal Nfld. Regt. St. John's Oct.21st 1918.

2217 Pte. Brazil.

Returned from Duty and reported at Depot 18-10-18.

C.R. 2217

PORESTRY COMPANY.

Extract from Daily Orders part II, Depot St. Johnss dated Jan. 24th., 1919.

The Discharge on demobilization has been CONFIRMEND by Officer i/ Chagge of Records on.

#2217 Pte. Rd. Brazil.

18-1-19.

Extract from Roll of Officers N.C.O's and Men of the Royal Hild. Rogt.

Regtl.Ho.

2217

Ronk

Home

Date

Reason.

Med.Unfit, Feb.2,1918. Brazil R. Pte.

Extract from Boily Oriers part 11, from Unit the Spirit Expfoundland Forestry Companion. St. John's, Setod April 17/18.

#2217 Pte. R. Brazil.

Attested for service with Forestry Companies from 16/4/18.

Extract from Daily Orders part 11,2rom Unit The Hfld. Forestry Companies, St. John's, dated May 30th, 91918

#2217 Pte. B. Brazil.

Employed as Cock from 8.5.18

Reg. No. 2217	Rank Oh Name Brazil Po	hue
Allotment	AlloteeReturned from Overseas28-9-	
· Embarked for Overseas_	Cause	
rocee	To discharge 1-10-17.	- <b>MU</b> IY
Still Sent 1	Haymas to for Stds peral.	
	4	

To:- Major Howley, O. I. C. Pay and Records.

From: - Vpcational Officer.

2217 R. Brazill.

The above named man has completed his course with the Civil Re-establishment Committee.

Major V. O.

Nº 1043



, Regl. Nog 2 / 7

# Newfoundland Forestry Companies ALLOTMENTS

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (In Full)	ADDRESS	AMOUN (each perso
0H3	Another	Errma Bro	gill 6 Mulloch st john	<b>E1</b>
		•	stylin	<b>-</b>
i.				
NOTE.	countersigned by	be completed by the Officer Conthe Officer Commanding Compand payments on application.	Total Allotment, \$ mmanding Company, signed by th y and handed to the Paymaster as	e Volunte authority
-	11/	/ / /		-/-

Nº 2549





I, hereby a	Prick ogree, until fur	ALLOTMEN  ALLOTMEN  Constitution by me, and in sign  Constitution	, Regl. No	o. 2 2 17 Allotment of
to, and i of iden	or the benefit tity of, and	of the undermentioned Person and or production of the relative Identi	Persons, such payment to be r	nade on proof
	Whether Wife, C	// //	Address	AMOUNT (each person)
537	north.	Mrs Emma Breit	26 Millock St	80
		0		
			-	
				-
			1	
			Total Allotment,	s .
	signed by the	be completed by the Officer Commandi Officer Commanding Company and hand nts on application.		

Officer Commanding Acompany

sig. Richard Brazill

#### (Separation Allowance Branch.)

THE STATUTORY DECLARATION is to be filled in correctly in every detail, and a complete reply, must be given to each question.

Bach statement is considered as being made on Oath and the form is to be stand before a Barrister of the Supreme Court, Stipend in the legislature of Notary Public or Justice of the Peace, and returned to the Peace, an

form is to be signed before a Barrister of the Supreme Court, Stipend-THE PAYMASTER Separation Appowance Branch, St. John's Nild. Name in full of Soldier. Regit. or Unit Regit. No. Rank Richard agustes Brazil Privale N.7. 221 2" mage of Soldier Married or Single. 24 7 Eass is Name in full of Mother Age Occupation Permanent Address. Emma House mother 6 mulls 4. Give mame of your husband % if your hasband is not supporting you state the reason. 6. If your husband is a chronic invalid and totally incapacitated state nature of malady (A medical perifyidate must be unclosed which this accument stating from what date husband has been totally incapacitated and for how long incapacity is literate continued. incapacity is likely to continue) to If you are a widow, state date and place. A widow of death of your husband. Husband frozen 4 death in Great realise - Director 1913 8. Have you married again since death no of above mentioned husband? 9. Names of your other Address in Age. Occupation Married or Children Full. Single. occament Stilla Brazil club 6 mullock of Sugl

Skella Brazil 6 mullock & To celegund Marche Brazil " 16 Do us work Horne Brazil (marred) Amelody of Ar not work. Eliza Brazil (marred) Amelody of

A ST

10.	State smount earned by \$2 yourself (a) about 1.00 per with
	Stella Eases 5.00 a week but the works me rece
LL	State amount and source of any A smed aux from Serling other income.
Le.	State value of Real Property belonging to you and your husband. Two fishers,
13.,	State value of personal property belonging to you and your husband. About 75.00
14.	If husband is dead state value of Real and personal Property left by him. Left nestung
1.3.	Actual amount contributed by soldier during the year prior abl 10.00 fur with to enlistment.
16.	Was this amount contributed weekly or monthly. Weekly
17.	Did this amount include payment of son's Board etc. /20
.8.	State your son's trade or occupation prior to enlistment.
9,	State amount of his wages per week, \$10.00
20.	State name and address of his last employer. Sinfuril Ibacco 60 00
21.	State amount of support monthly \$\text{124.80 munk}\$
e <b>x.</b>	State amount of Allotment re- ceived by you from son monthly.
3.	From what date did you receive Allotment?  July 19 16  Actual amount contributed by Weekly Monthly.
24.	Actual amount contributed by Weekly Monthly.  other children  Su alor n lop 1 page
6.	Are any of these children in the employ of you or husband?
<u>6</u> .	If not receiving support from other children state cause, Explain fully.
Æ.	With whom are you residing at present. Kerking my our limes
88.	Have you made a previous claim for Separation Allowance,? If not, Why? Ro. Wid w. kumd abb
29.	Are you already in receipt of Separation Allowance from any Rourse? If so, how much?

	from any Patriotic Fund? If so, How much.
31.	Was the Soldier at time of his enlistment an employee of the Newfoundland Government. Lo
32.	in what capacity and in what place.
33.	is he in receipt of a selery es much while serving in the 1st. Nfld. Regt. If so, how much?.
-ly	I herewith make this solemn declaration conscientions believing the same to be true and knowing it to be of the same force effect as if made under gath and in vistue of the Evidence Act.
Sign	nature of Applicant. Ages. Europe & Bragel.
Pla	ce of Residence . C. Mullick Il
Dec	lared and subscribed before me at Mohing New forundland
thi	not Nove !
Cou	nature of Barrister of the Supreme tt, Stipendiary Magistrate, Notary lic or Justice of the Peace.
	Notary Pable
	must a state of the state of th
know	This application must be signed by two responsible ties one of whom must be a Clergyman, the other a representative of r local Patrictic Fund Committee, certifying that to the best of their wiedge after careful investigation, the above statements are correct, the above Soldier, first mentioned, is the sole support of the licemb.
Blgr	nature of Olergyman Adjufan, Rubo & Hemes blue
Sign	nature of Member of Patriotic
a	Aproved Dec. 1/1917

Srd. London General Hospital AUG - 8 151/ Wandsworth, S.W. (18)

COUNDLAND REC

From, 0. 0. 3rd. London General Hospital.

Records, 58 Willmall fw.

In accordance with instructions contained in A. C. I. No. 2069 of 1916. I beg to report that !-1st Efed.

No. 2217 Pli 18 Brazil

will shortly be brought before a Medical Board and will probably be discharged) or re-classified.

Duplicate documents will not be required please.

H. Jagan Capl. RA.METT

from the army)

#### DEPARTMENT OF MILITIA.

#### WAR SERVICE GRATUITY.

St. John's Newfoundland.

Declaration required of Officers and non of the Royal Pourfoundland Regiment, who claims War Service Gratuity under Order-in-Council deted Jenuery 20th. 1919.

A complete reply must be given to every question in this Declaration There must be no blanks and no debhos. 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

On completion this Declaration is to be returned to The Officer 1/C
RESOURDS, PAY & RECORD OFFICE ST. JOHN'S.  Christian April 2, Surneye 227
Christian notes
0.11
5. Address in full to which future payments of protuity ore to the
forwarded 6 Mullock Sh. Mylokus
March 2B6
6. Date of enlistment in the Regiment. March 2016
7. Name of dependent, if any, to whom Separation Allowance is being
issued, or was being issued, imediately prior to your preharge
Singua Itazil
a Deletionship of such dependents
9. Address in full of such dependents. 6. Junellock 9.
a contract of the contract of
10.1s said dependent, now, or was said dependent at my tire in rescript
of Soperation Allowence on account of another soldior?
11. Were you on cotive corvice only in Hild I so, live dates and perticulars of such service.
particulars of such service
An of the which well control on setting service
12. Give total length of time which you solved on scrive service, the whether in lift d. or oversees. The March Hills
to fauns 18: 1919.
13/16 1/1/8/1/9
73/18/11/

13. Mave you had more than one enlistment? If so, give particulars
of discharge and re-enlistments and under that refinented numbers.
·······
14. Have you already received any payment of Post Discharge pay or
War Service Gratuity? If so, state amount you and your dependents
have a gready secrived and by when paid.
15 Have you been issued with a War Service Badge? . Hes.
16. Have you, during the present wer, served in the I period Borces
17. Are you entitled to receive, or have you received may Gratuity
in the nature of Post Discharge Pay from the Imperial Forces? If
so, state mount received, or to which you are entitled
***************************************
18. Did you revert Overseas to a rank lower than the substantive
renk held by you on your arrivel in Encloud?
(b) If so, was such reversion in consequence of Misconduct or
inefficiency?
19. Are you now serving in the Root ? It not give? - (.) date
of discharge fam. 1.8/19.(b) Renson of discharge
New Migation
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
monchy -
21.(a) Are you receiving treatment from the givil Re-Establishment
Con.(b) If so ere you in receipt of full may and alloweness from
that Cormittee
And I also this solumn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if raide under Orth.

Signature of Applicant:
Place of Residence:
Declared before me at:

Signature of Berrister of the
Suprane Court, Strondiany Hardis

This

POST DISCHARGE PAY.
Dete paid Paid Poid Soldier. Dependent

Cortified correct.

R. Brayell

Mar Service of the Graduity

War Service Graduity

Cortified correct.

Post Discharge PAY.

Dete paid Paid Poid Soldier. Dependent

Cortified correct.

Post Discharge PAY.

Dete paid Paid Poid Soldier. Dependent

Cortified correct.

Post Discharge PAY.

Dete paid Paid Poid Soldier. Dependent

Cortified correct.

Post Discharge PAY.

Dete paid Paid Poid Soldier. Dependent

Cortified correct.





## This Form is to be used in connection with Pamph. M. E. (1)

In the spaces below should be entered the findings in the routine of examination set forth in the appendix.

Care should be exercised that each finding be entered after the number below which corresponds to the

- Ind	proef of that test:
Examin	nation of Richard Bazil
aged	20 gs. conducted at C.L.B.
Date:	7-11-297/6 Recruiting officer:
NO. OF TEST	FINDING
. 1	no
2	$\sim$
3	m '
4	· · · · · · · · · · · · · · · · · · ·
5	\mathrea{\sigma} \tag{\tau}
6	W 0912
7	2217
- 8.	l Eyes
9	20
10	$\lambda$
11 .	
12	$\sim$
13	2 tell to be taken out - OK. Levis.
14	n
15	n
16	2
17	n
18	\ \
19	5/6 both eyes
20	$\sim$ $\sim$ $\sim$
21	$\boldsymbol{\gamma}$
22	$[oldsymbol{\wedge}, \ldots]$
23	$\sim$
24	
25	~
26	~
27	~
28	
29	
30	~
31	~
32	
33	yes ( scar 3 ys ago .
34	yes locar 3 ye ago
35	1204
36	32-351
37	18 in wich 2
	1, 2, 0, 0, 0

Signature of Medical Examiner:

38

MoBurden

Form N. F. 1915 This Form is to be used in connection with Pamph. In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test. Examination of aged conducted at Recruiting Officer: Date: NO OF **FINDING** TEST No Mes yes 21. \* Boon phymus n n n n n n n h n × 35 Prospect Ste Signature of Medical Examiner:



1773

Chali

This Form is to be used in connection with Pamph.  $\frac{M. E. (1)}{N. F. 1915}$ 

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Commission of the Commission o	f that test.	
Examir	nation of Richard	Margel
aged	20 yrs.	conducted at CdB armoury
Date:	14/5/15	Recruiting Officer:
NO OF		FINDING
	70.4	
1 2	no no	
3	no	<u> </u>
4	no	2 1
5	no	
6	no.	
7	Nes	
8	luo.	
9	no	
10	M	
11	N	
12	N	
13	N	
14	11	
15	Ń	
16	1	
17	th	
18	1	
19	Ν .	
√ 20	N	
21	N	
22	N	
23	N	
24	H.	
25	~	Pon Ungan.
26	~	0_11
27	g/	
28	- N	
29	N	
30	N	
31	ν.	
32	W. Carry	
33	One scan you on	
34	5'8:"	
35	115 U.	
△ 36	di ii	
37	#8 to pr week	n 8 a
38	morker	Mrs Emma Brazil 12 2 prospect St.
39		A . /-

Signature of Medical Examiner:...



## This Form is to be used in connection with Pamph. M. E. (1)

It came below should be entered the findings in the routine of examination set forth in the appendix. Care to be exercised that each finding be entered after the number below which corresponds to the number of that test.

Exami	nation of (2155) Wichard Brazille
aged	conducted at
Date:	24 Oug Recruiting officer:
NO. OF TEST	FINDING
1.	
2	No.
3	No.
4	no no
5	$-\eta_0$
6	70
7	Yes
8	The state of the s
9	M :
10	
11	
12	·
13	
14	
15 16	
17	
18	
- 19	The state of the s
20	
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Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

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## Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

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## Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Regiment of 1st Newfoundland W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. [6:8] W5017/2124 1000m 6/15ss 93 56 E.121. Signature of O. C. Company College Regimental Number and Name Enlistment Good Conduct Badges, Service Pay or Proficiency Pay Place and Date Johns Date Joined Joined Period of Joined Date Cases of Drunk Date of Names of Date of award or of order dispensing with trial Place Rank OFFENCE Punishment awarded By whom awarded REMARKS Offence Witnesses COPY SE IT TO O : H.Q. ST JOHNS, N.F.L.D. To be carried over



## Proceedings on Discharge



When forwarded for confirmation the documents named on page 4 should be enclosed.)

When forwarded for confirmation the documents hamed on page I should be						
No. 2217 Army Rank Trivate						
Name Grazill Lichard (The name must aggre strictly with that on enlistment, unless changed subsequently by authority.)						
corps 1 Mentounalend fegiment.						
Battalion, Battery, company, Deyôt, &c						
Date of discharge Levrypany 2 rd 1918						
Place of discharge Styolics. Nged						
1. Description at the time of discharge.						
Age						
(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharge by superior authority, the No. and date of the letter to be quoted.)						
8. Military character:						
4. Character awarded in accordance with King's Regulations:—						
- continue						
8 s s s s s s s s s s s s s s s s s s s						
Recrified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.						
Initials of Commanding Officer.						
Army Form B. 2088 has been issued to*						

He is in possession of the following nu is a N.C.O. and enlisted prior to 1st	mber of G.C. badges (if the n	nan	
is a N.C.O. and enlisted prior to 1st have been entitled to had he not bee	July, 1881, the number he wo en promoted should be stated).	mld	•
Is it probable that he will be entitled before the confirmation of these proces	to another good conduct baceedings?	dge	· ·
Classification for service, or proficiency pa	ıy	Class	
6. Campaigns, Medals and			
Decorations			
Certificate of education		The State of the State of Stat	
7. His accounts are correctly balanced, a	and I have impartially inqu	nired into all matters l	brought before me
in accordance with Regulations.			
(Place)			
(Date)	Commanding	Battn	Regiment.
8. Certificate to	o be signed by the soldier on a	discharge	
(Place) Ahnis Alako (Date) Alako (When a soldier is absent through illness or any oth manuscript copy should be sent for the man to sign, as  9. Additional certificate in the case I hereby declare that I do of my own free	se of a soldier who takes his d	Ore Mile (Sign forward these proceedings to d here.) discharge at his own requ from His Majesty's Serv	est.
10.	Statement of service.		
	date to which the record of serv.		rearsdays.
		Total	n n
11.	Confirmation of discharge.		
The discharge of the above-named man is hereby	y confirmed for	(date)	
(Place)			
(Date)	. Bignature_		
Commanding officers (or the Paymas pension, either on account of service or disabia memorandum for his guidance on Army Royal Hospital Chelsea, a descriptive return o	ter if at Netley) will issue to ility, is to be brought under Form D. 401, and will at the f the man on Army Form D.	o every discharged soldie the consideration of the he same time transmit (	r whose claim to Chelsea Board, to the Secretary,

#### RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

NO Reservations!-R. Braziee

Clas C. Ore SM.