

# Newfoundland Forestry Companies

## ATTESTATION OF

No. 8384 Name Owen Brown Corps

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

- |  |  |
|--|--|
| 1. What is your name? .....  | 1. <u>Owen Brown</u> .....               |
| 2. What is your full Address? .....  | 2. <u>Post Station</u> .....             |
|  | <u>S. Bay</u> .....                      |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u> .....                      |
| 4. What is your age? .....   | 4. <u>29</u> Years <u>3</u> Months ..... |
| 5. What is your Trade or Calling? .....  | 5. <u>Lumberman &amp; Cook</u> .....     |
| 6. Are you Married? .....  | 6. <u>Yes</u> .....                      |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? .....                       | 7. <u>No</u> .....                       |
| 8. Are you willing to be vaccinated or re-vaccinated? .....  | 8. <u>Yes</u> .....                      |
| 9. What is your Religion? .....  | 9. <u>C. of E.</u> .....                 |
| 10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies? ..... | 10. <u>Yes</u> .....                     |

Name .....  
Corps .....

I, Owen Brown ..... do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

Owen Brown ..... SIGNATURE OF RECRUIT.  
James S. Doughty ..... Signature of Witness.

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

I, Owen Brown ..... do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully 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.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at Grand Falls

on this 13<sup>th</sup> day of October ..... 1917  
Signature of Attesting Officer A. J. Fitzgerald

### † CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the: .....

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

Date Oct 19/17 ..... 1917  
Place Post St. John's ..... Approving Officer. J. J. Doughty

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.

‡ Here insert the "Corps" for which the Recruit has been enlisted.

\* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows: vis:—(Name) ..... re-enlisted in the (Regiment) ..... on the (Date) .....

DESCRIPTIVE REPORT ON ENLISTMENT

2362

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

Name Owen Brown  
 Parent age 29 years 3 months. Height 5 feet 7 inches  
 Chest Measurement { Girth when fully expanded 38 inches  
 Range of expansion 2 inches  
 Distinctive marks Eyes Blue Hair Dark Complexion Fair

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Ethel Mauid Brown  
Port Rexton | Relationship wife  
S. Bay 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.

|   |   |                                     |                 |
|---|---|-------------------------------------|-----------------|
| <u>Ethel M. Pierce</u><br><u>Spinster</u> | <u>Port Rexton</u><br><u>Feb 15<sup>th</sup> 1911</u> | <u>Port Rexton</u><br><u>S. Bay</u> | <u>J. G. W.</u> |
|---|---|-------------------------------------|-----------------|

Particulars as to Children

| Christian Names  |               | Date and Place of Birth                            |
|------------------|---------------|--|
| <u>Yvondolin</u> | <u>Female</u> | <u>Aug 8<sup>th</sup> 1914</u> <u>Grantford</u>    |
| <u>Vivient</u>   | <u>Male</u>   | <u>Jan 26<sup>th</sup> 1917</u> <u>Port Rexton</u> |

STATEMENT OF THE SERVICES

| Corps in which served                                | Rgt. or Depot | Promotion, Reductions, Casualties, &c. | Army Rank | Dates | Service not allowed to reckon for fixing the rate of pension |      | Service in Reserve not allowed to reckon towards G. C. Pay |      | Signature of Officers certifying correctness of entries |
|--|---------------|--|-----------|-------|--|------|--|------|---|
|  |               |  |           |       | Years  | Days | Years  | Days |   |
| Service towards limited engagement reckons from      |               |  |           |       |  |      |  |      |   |
| Joined at  |               |  |           |       |  |      |  |      |   |
| <u>Discharged</u> <u>S. Bay</u> <u>Oct. 29/1918.</u> |               |  |           |       |  |      |  |      |   |
| Total Service forfeited as above.....                |               |  |           |       |  |      |  |      |   |

Total Service towards Engagement to \_\_\_\_\_ [date of discharge] \_\_\_\_\_ years \_\_\_\_\_ day  
 " " Pensions " [ " " ] " "





# Newfoundland Forestry Companies

## ATTESTATION OF

No. 8384. Name Owen Brown Corps

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

- |  |  |
|--|--|
| 1. What is your name? .....  | 1. <u>Owen Brown</u> .....               |
| 2. What is your full Address? .....  | 2. <u>Port. Reaction</u> .....           |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u> .....                      |
| 4. What is your age? .....   | 4. <u>29</u> Years <u>3</u> Months ..... |
| 5. What is your Trade or Calling? .....  | 5. <u>Lumberman &amp; Cook</u> .....     |
| 6. Are you Married? .....  | 6. <u>Yes</u> .....                      |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? .....                       | 7. <u>No</u> .....                       |
| 8. Are you willing to be vaccinated or re-vaccinated? .....  | 8. <u>Yes</u> .....                      |
| 9. What is your Religion? .....  | 9. <u>E of E</u> .....                   |
| 10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies? ..... | 10. <u>Yes</u> .....                     |
- Name .....  
Corps .....

I, Owen Brown do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

Owen Brown SIGNATURE OF RECRUIT.  
James S. [Signature] Signature of Witness.

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

I, Owen Brown do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully 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.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at .....

on this 13<sup>th</sup> day of October 1917

Signature of Attesting Officer [Signature]

### † CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the .....

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

Date 13<sup>th</sup> Oct 1917 Place Port Reaction } Approving Officer. [Signature]

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.  
‡ Here insert the "Corps" for which the Recruit has been enlisted.

\* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz:—(Name).....re-enlisted in the (Regiment).....on the (Date).....

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Oscar Brown

Apparent age 29 years 3 months. Height 5 feet 7 inches

Chest Measurement { Girth when fully expanded 38 inches  
 Range of expansion 2 inches

Distinctive marks Eyes Blue Hair Dark Complexion Fair

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Ethel Maud Brown

Post Roxton | Relationship Wife

8 Bay Particulars as to Marriage

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

|  |   |  |                     |
|--|---|--|---------------------|
| (a) <u>Ethel Maud Brown</u><br><u>Spinster</u> | (b) <u>Post Roxton</u><br><u>Feb 15<sup>th</sup> 1911</u> | (c) <u>Post Roxton</u><br><u>8 Bay</u> | (d) <u>J. J. W.</u> |
|--|---|--|---------------------|

## Particulars as to Children

| Christian Names   | Sex           | Date and Place of Birth                     |
|-------------------|---------------|---|
| <u>Yvondoline</u> | <u>Female</u> | <u>Aug 8<sup>th</sup> 1914 Grand Falls</u>  |
| <u>Muriel</u>     | <u>Female</u> | <u>Jan 26<sup>th</sup> 1917 Post Roxton</u> |

## STATEMENT OF THE SERVICES

| Corps in which served                                 | Rgt. or Depot | Promotion, Reductions, Casualties, &c. | Army Rank | Dates | Service not allowed to reckon for fixing the rate of pension |      | Service in Reserve not allowed to reckon towards G. C. Pay |      | Signature of Officers certifying correctness of entries |
|---|---------------|--|-----------|-------|--|------|--|------|---|
|   |               |  |           |       | Years  | Days | Years  | Days |   |
| Service towards limited engagement reckons from _____ |               |  |           |       |  |      |  |      |   |
| Joined at _____ on _____                              |               |  |           |       |  |      |  |      |   |
|   |               |  |           |       |  |      |  |      |   |
|   |               |  |           |       |  |      |  |      |   |
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|   |               |  |           |       |  |      |  |      |   |
|   |               |  |           |       |  |      |  |      |   |
| Total Service forfeited as above.....                 |               |  |           |       |  |      |  |      |   |

Total Service towards Engagement to \_\_\_\_\_ [date of discharge] \_\_\_\_\_ years \_\_\_\_\_ day

" " Pensions " [ " " ] " " "



ENTERED  
 PAY LEDGERS  
 NUM. ROLL  
 PLOT INDEX  
 REGISTER  
 EXAMINED



# Newfoundland Forestry Companies.

## ALLOTMENTS

I, Owen Brown, Regl. No. 8384

hereby agree, until further notification by me, and in similar official form to make an Allotment of \_\_\_\_\_ Dollars and eighty 80<sup>c</sup> Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup>/<sub>or</sub> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup>/<sub>or</sub> Persons concerned, viz.:

Allotment begins OCT 13/17

| Identity Certificate No. | Whether Wife, Child, other Relative or Friend | NAME (in full) | ADDRESS             | AMOUNT (each person) |
|--------------------------|---|----------------|---------------------|----------------------|
| 301                      | Wife  | Ethel M. Brown | PORT REXTON<br>J.B. |                      |
|                          |   |                |                     |                      |
|                          |   |                |                     |                      |
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|                          |   |                |                     |                      |
|                          |   |                |                     |                      |
|                          |   |                |                     |                      |
| Total Allotment, \$      |   |                |                     | <u>80</u>            |

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

(Sig.) J. J. Almond  
 Officer Commanding  
B Company

(Sig.) Owen Brown  
 (Rank) pl

St John  
OCT 19 1917

C.R. 8384

Extract from Daily Orders part II. (Forestry)  
Depot St. John's dated 22-12-17.

The u/m embarked for Overseas on S.S. FLORINA.  
on Dec. 11th. 1917.

#8384 Pte. C. Brown



C.R. 8384

Extract from Daily Orders, Foresters, By Major. M. S. Sullivan  
15/8-18.

#8384 Pte. O. Brown.

The above men having proce dedeto Winchester are struck of the  
Strength from this date.

C.R.

~~M 29-11~~

8384

Dec. 10th. 1917.

Mrs Owen Brown,  
Port Rexton,  
Trinity Bay.

Dear Mrs Bhow:-

"8384, Pte Owen Brown

I am instructed to reply to your letter of 8th. Dec., concerning separation allowance, on account of the above mentioned soldier.

I have to inform you that this payment, was suspended temporarily, on account of the necessity for a slight revision of the regulations.

Your check was forwarded Saturday, and will no doubt be received by this time.

I am yours faithfully,



Major, C.S.O.



C.R. 8384

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

THE FOLLOWING MAN RETURNED FROM OVERSEAS AND REPORTED AT  
DEPOT. OCTOBER 12th, 1918.

8384 Pte. O. Brown.

C.R. 8384


Extract from Report of Medical Board Held on Tuesday Oct. 15th  
1918.

8384 Pts. Brown O.

Recommended Discharge- Permanently Unfit.



C. R. ~~Post~~  
Post-Office  
Trinity Bay  
Dec. 8<sup>th</sup>

L. P.   
DEC 11

Dear Sir, you will please excuse my writing  
you but I wish to able you about a something I cant  
understand. I received my Husbands pay today  
24.00. But my husband enlisted for the Forestry  
Private Owen Brown. I both him & myself understood  
that the wife & children would receive 20.00 separate  
allowance, besides the Husbands pay. Will my  
husband have been gone 1 1/2 months & I get none yet-  
I received \$24.00 today, I cant live on that. I  
got two little children to feed & clothe and myself  
rent to pay & coals to buy I cant do it on that  
my husband will have to see us provided for before  
he goes or leave it & come home & try to earn  
something to feed his children. Something must  
be done or I will stop him untill I get some  
satisfaction. A married man cant leave his  
children & wife to live on 24.00 a month- put it  
to your own case & you will see Sir. If I am not  
writing to the right person. will you be good  
enough to put this before the proper person &  
ask them to please send the rights of everything  
to me. Hoping you will let me know as soon  
as possible.  
Yours Truly  
Mrs Owen Brown

C.R. 8384

Extract from Telegram despatched to Synoptical, London  
dated May 21, 1918

Pay to as follows:-

#8384 Pte. Brown

81.

C.R. 8384

May 29th 1918.

Mrs. Owen Brown,  
Port Rexton, T.B.

Dear Mrs. Brown,

I beg to acknowledge receipt of your letter of the 24th inst., and in reply I may say that all men of the Forestry Companies are enlisted for the duration of the war, you are mistaken in thinking that your husband enlisted for six months only, he offered his services and was accepted for the duration of the war. The only Foresters who have returned up to the present, are men who have unfit and who are sent home for discharge; it is not true that Foresters are being sent to France for the Regiment, one or two Foresters have been transferred to the Regiment, but this was entirely at their own request.

While it is appreciated that your ill-health makes it desirable that your husband should be at home, still having enlisted, and now being in Scotland where he is rendering valuable service to the Empire, he cannot be returned, except he is sent home for discharge.

Yours faithfully,

C.C.B.

Captain,

for Chief Staff Officer.

C.R. 8384

Extract from Daily Orders Part 11 Unit The Royal Nfld.  
Regt., St. John's, Nov. 21<sup>st</sup>, 1918.

8384 Pte. Owen Brown,

Having been found Med. unfit is discharged from 29-10-18.

III



C.R. 8384

Extract from Daily Orders Part II Newfoundland Forestry  
Companies Dated Oct. 20th 1917.

.....

Attested Oct. 13th posted to E. Coy. and assigned number  
as shown.

8384, Pte. O. Brown.

Reported at Headquarters on Oct. 19th 1917.

C.R. 8384  
Port-Rex Wn  
Trinity Bay  
May 24

U. F. Rensell, Dealer

ANSWERED

Dear Sir, (Will you please be kind enough  
to inform me of what time the 17 Foresters will be  
home from Scotland that went across last week  
My husband Pte. Owen Brown have been  
gone eight (8) months now. He enlisted for six  
months & now we hear that they are not-allowed  
to come home until after the War is over &  
that some of the Foresters are being sent across  
to France. I have been very poorly the last  
two months & that is poor news for me to hear  
that they are stopped from coming home.

If I were well I would it tryable so much  
I could be satisfied for him to stay longer.  
But will you please be so kind as to  
write me & tell me if its true or not &

What time they will be home again  
I am so anxious to hear that I will be  
more than grateful to you.

Yours to Oblige

Mr Owen Brown  
Port-Rex Wn

C.R. 8384

Extract from telegram from Liverpool,  
London dated September 17th 1916.

8384 Brown.

The above mentioned ~~order~~ by Government  
Transport September 1916, at London arriving  
at Montreal.  
Being sent home for DISCUSSION.

C.R. 8384

Extract from Draft of Newfoundland Forestry Company embarked N. S. F.M.  
1917. December 11th 1917. "B.B."

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#8384 Pte. O. Brown,



ers necessary in connection with Forestry companies.

D.

Octo November 1, 1917.

Sir:-

No. 8384 Pte. Owen Brown has just been in to see me, with reference to moving his family, and I have told him that we cannot do anything in this matter. He informs me that you mentioned this matter to him, and you told him that perhaps we might be able to do something. I think it is most unfortunate that any suggestion of this nature should have been made to the man.

This man informs me that he was working with the A.N.D. Co., and in consequence of enlisting in the Forestry Companies, has had to vacate his house and move his family from Grand Falls, as the company cannot guarantee to keep their homes there. He tells me that he had enlisted before he knew this, and that there were thirty or forty men, who were willing to go, but who backed out, when they knew that they would have to leave their homes and move their families. If this is the case, the action of the A. N. D. Co., in this matter, does not seem to be one that will help recruiting in the Forestry Companies, and as Mr. Beaton is the prime mover in the matter, it seems to me that it might be done better. I shall be glad if you will go into the matter with Mr. Scott. Kindly also be careful to state none other than the terms of enlistment. While, no doubt, you have done this, yet the men come in here with the impression that something further is going to be done for them. The Government has gone as far as it consid-

2.

and if men cannot be procured under these conditions, no extra inducements must be offered which will leave a doubt in the minds of the men as to their positions.

I have the honour to be,

Sir,

Your obedient servant,

Major.

District Officer Commanding.

Newfoundland.

H. F. Fitzgerald Esq.,  
Grand Falls.

|              |
|--------------|
| ENTERED      |
| PAY LEDGERS  |
| NUM. ROLL    |
| ALLOT. INDEX |
| REGISTER     |
| EXAMINED     |



No. 377

# Newfoundland Forestry Companies.

## ALLOTMENTS

I, Owen Brown, Regl. No. 9384

hereby agree, until further notification by me, and in similar official form to make an Allotment of                      Dollars and eighty 70<sup>c</sup> Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup> or Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> or Persons concerned, viz.:

Allotment begins Oct 13/17

| Identity Certificate No. | Whether Wife, Child, other Relative or Friend | NAME (in full) | ADDRESS             | AMOUNT (each person) |
|--------------------------|---|----------------|---------------------|----------------------|
| 301                      | Wife  | Ethel M. Brown | Port Rexton<br>Y.B. |                      |
|                          |   |                |                     |                      |
|                          |   |                |                     |                      |
|                          |   |                |                     |                      |
|                          |   |                |                     |                      |
|                          |   |                |                     |                      |
|                          |   |                |                     |                      |
|                          |   |                |                     |                      |
|                          |   |                |                     |                      |
|                          |   |                |                     |                      |
| Total Allotment, \$      |   |                |                     | 80                   |

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

(Sig.) J. J. [Signature]  
 Officer Commanding  
B Company  
St John's  
Oct 19 1917

(Sig.) Owen Brown  
 (Rank) pl



LAST PAY CERTIFICATE

N.F.F. 102

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

Regt No. 8394 Rank Private Name Brown O Unit A Coy Royal W.I.D. who was Repatriated to Newfoundland on 11 Authority \_\_\_\_\_ Cause \_\_\_\_\_

STATEMENT OF ACCOUNT

| DR.                             |                              | PARTICULARS |     |    |    |   | PARTICULARS                   |        |         |    |    | CR. |   |  |
|---------------------------------|------------------------------|-------------|-----|----|----|---|-------------------------------|--------|---------|----|----|-----|---|--|
|                                 |                              | £           | £   | £  | s  | d |                               |        | £       | £  | £  | s   | d |  |
| PERIOD: From 31.8.18 to 24.9.18 | Balance Dr. from             |             |     | 1  | 9  | 1 | Balance Cr. from              |        |         |    |    |     |   |  |
|                                 | Allotment 21 days @ 80       | 116         | 80  | 13 | 9  | 1 | Pay 21 days @ \$ 1.00         | 121    | 80      |    |    |     |   |  |
|                                 | Cash Payments:               |             |     |    | 10 |   | Field Allow 21 days @ \$ 1.50 | 12     | 10      |    |    |     |   |  |
|                                 | 1st Paymen 16/9/18           |             |     |    | 5  |   | Other Allowes days @ \$       |        |         | 14 | 14 | 11  |   |  |
|                                 | 2nd " 13/9/18                |             |     |    | 1  | 9 | Other Credits:                |        |         |    |    |     |   |  |
|                                 | 3rd " 20/9/18                |             |     |    |    |   | COPIES SENT                   |        |         |    |    |     |   |  |
|                                 | Other Debits:                |             |     |    |    |   | TO                            | 15369/ |         |    |    |     |   |  |
|                                 | A Coy 30/8/18                |             |     |    |    |   | M. of M.                      | 157    | 24/9/18 |    |    |     |   |  |
|                                 | overcredited 1 day @ \$ 1.10 |             |     |    |    |   | D.C. 1st. Bd.                 |        |         |    |    |     |   |  |
|                                 | less 1 day allotment .80     |             |     |    |    |   | 2nd. Bd.                      |        |         |    |    |     |   |  |
| .30                             |                              |             | 160 |    | 1  | 3 |                               |        |         |    |    |     |   |  |
| Total Debits                    |                              |             |     | 14 | 16 | 2 | Total Credits                 |        |         | 14 | 14 | 11  |   |  |
| Balance due by Paymaster        |                              |             |     |    | 16 | 2 | Balance due to Paymaster      |        |         |    | 1  | 3   |   |  |
|                                 |                              |             |     | 14 | 16 | 2 |                               |        |         | 14 | 16 | 2   |   |  |
|                                 |                              |             |     | 14 | 16 | 4 |                               |        |         | 14 | 16 | 4   |   |  |

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

Wm. Chester

(Place) St John's

(Date) 1918

Wm. Chester  
O.C. " " Company.

Made up/checked in accordance with information received in the Pay & Record Office \_\_\_\_\_ to \_\_\_\_\_

and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,



LAST PAY CERTIFICATE

LAST PAY CERTIFICATE

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

Regtl No. 8384 Rank Pte Name Blomax, O. Unit 1st Trench Company who was  
 to \_\_\_\_\_ on 1/1 Authority to \_\_\_\_\_ Cause 1/1 Authority to \_\_\_\_\_



STATEMENT OF ACCOUNT

STATEMENT OF ACCOUNT

| DR. | PARTICULARS                    |    |    |   |    | £  | s | d | To | PARTICULARS                   |    |    |   |    | £  | s | d | From |
|-----|--------------------------------|----|----|---|----|----|---|---|----|-------------------------------|----|----|---|----|----|---|---|------|
|     |                                |    |    |   |    |    |   |   |    |                               |    |    |   |    |    |   |   |      |
|     | Balance Dr. from               |    |    |   |    |    |   |   |    | Balance Cr. from              |    |    |   |    |    |   |   |      |
|     | Allotment 13 days @ 80         | 10 | 40 | 2 | 2  | 9  |   |   |    | Pay 13 days @ 80              | 13 | 00 |   |    |    |   |   |      |
|     | Cash Payments: $\frac{14}{18}$ |    |    |   | 14 | 10 |   |   |    | Field Allowance 13 days @ 100 | 1  | 30 | 2 | 18 | 9  |   |   |      |
|     | Other Debits:                  |    |    |   |    |    |   |   |    | Other Allowance days @ 80     |    |    |   |    |    |   |   |      |
|     | Total Debits                   |    |    |   | 2  | 18 | 9 |   |    | Total Credits                 |    |    |   | 2  | 18 | 9 |   |      |
|     | Balance due by Paymaster       | 10 | 40 |   | 2  | 18 | 9 |   |    | Balance due to Paymaster      | 14 | 30 |   | 2  | 18 | 9 |   |      |
|     |                                |    |    |   | 2  | 18 | 9 |   |    |                               |    |    |   | 2  | 18 | 9 |   |      |

PERIOD: FROM 3/1/18 TO 10/8/18

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

6 Coy. period 3/1/18 to 30/8/18  
 Kenneth 7/10, Scotland Aug 16<sup>th</sup> 1918  
 (Place) (Date)

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

*J. R. Gooden* Capt  
 (Place) (Date) Company.

Chief Paymaster & Officer i/c Records.

✓  
E

LAST PAY CERTIFICATE

N.F.F./94

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

Regtl No. 8384 Rank Pte Name Brown O. Unit "A" C. R. M. Co. R. who was Repatriated  
to Newfoundland on 1/1 Authority \_\_\_\_\_ Cause \_\_\_\_\_

STATEMENT OF ACCOUNT

| DR.                               | PARTICULARS                    |  |  |  |  | £  | s  | d                        | PARTICULARS                               |  |  |  |  | £  | s  | d  | CR. |
|-----------------------------------|--------------------------------|--|--|--|--|----|----|--------------------------|---|--|--|--|--|----|----|----|-----|
|                                   |                                |  |  |  |  |    |    |                          |   |  |  |  |  |    |    |    |     |
| PERIOD: From Di. 8-18 to 20-9-18. | Balance Dr. from               |  |  |  |  |    |    |                          | Balance Cr. from                          |  |  |  |  |    |    |    |     |
|                                   | Allotment 21 days @ 80¢        |  |  |  |  | 16 | 80 |                          | Pay 21 days @ \$ 1 <sup>00</sup>          |  |  |  |  | 21 | 00 |    |     |
|                                   | Cash Payments:                 |  |  |  |  |    |    |                          | Field Allow 21 days @ \$ 10 <sup>00</sup> |  |  |  |  | 21 | 00 |    |     |
|                                   | 1 <sup>st</sup> Payment 6/9/18 |  |  |  |  |    |    | 9                        | Other Allowances days @ \$                |  |  |  |  |    |    |    |     |
|                                   | 2 <sup>nd</sup> do 13/9/18     |  |  |  |  |    |    | 10                       | Other Credits:                            |  |  |  |  |    |    |    |     |
|                                   | 3 <sup>rd</sup> do 2/9/18      |  |  |  |  |    |    | 5                        |   |  |  |  |  |    |    |    |     |
|                                   | Other Debits:                  |  |  |  |  |    |    |                          |   |  |  |  |  |    |    |    |     |
|                                   | Acq. 20/9/18                   |  |  |  |  |    |    |                          |   |  |  |  |  |    |    |    |     |
|                                   | Remains, dep pay \$ 1-10       |  |  |  |  |    |    | 1                        |   |  |  |  |  |    |    |    |     |
|                                   | Less 1-10-18                   |  |  |  |  |    |    | 10                       |   |  |  |  |  |    |    |    |     |
| Total Debits                      |                                |  |  |  |  |    | 14 | Total Credits            |   |  |  |  |  |    | 4  | 14 | 11  |
| Balance due by Paymaster          |                                |  |  |  |  |    |    | Balance due to Paymaster |   |  |  |  |  |    |    |    | 3   |
|                                   |                                |  |  |  |  |    | 14 |                          |   |  |  |  |  |    | 4  | 16 | 2   |

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

W. J. Hughes (Signature)  
(Place) \_\_\_\_\_ (Date) 1918

Made up/checked in accordance with information received in the Pay & Record Office \_\_\_\_\_ O.C. "A" Company.  
and is therefore subject to amendment if and as may be found necessary. \_\_\_\_\_ to \_\_\_\_\_

Pay & Record Office, London,

No. 8102/167

038626

NEWFOUNDLAND N.F.P./79.

NEWFOUNDLAND CONTINGENT

From:

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

To: Officer Commanding,  
Newfoundland For. Corps,  
Dunkeld.

20 MAY 1918

23rd May 1918

May 27 1918

Subject: 8384, Pte. O. Broen,

With reference to the following telegram ( 4843 ) from the Hon. Minister of Militia, received

Pay to 8384 Broen £1:0:0

Receipt hereunder.

M. Sullivan Major  
O.C. NEWFOUNDLAND FOR. CORPS  
Officer Commdg. Forward Coy  
Royal Newfoundland Regiment

Draft £ 1:0:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Received the sum of one  
Pound on account of  
cable remittance from Newfoundland.

Chief Paymaster & O. i/c Records.

No. 8554 Rank PT  
Broen

# LAST PAY CERTIFICATE

 DUPLICATE  
 MAIL ROOM

N.F.P./94

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

 Regt No. 8584 Rank Pte Name Brown, O. Unit "A" Coy. R. N.F.L.D. who was Repatriated  
 to Newfoundland on / / Authority \_\_\_\_\_ Cause \_\_\_\_\_

## STATEMENT OF ACCOUNT

DR.

CR.

| PARTICULARS                 |  |  |  | £  | s  | d  | PARTICULARS                   |  |  |  | £  | s  | d  |
|-----------------------------|--|--|--|----|----|----|-------------------------------|--|--|--|----|----|----|
| Balance Br. from            |  |  |  |    |    | 9  | Balance Cr. from              |  |  |  |    |    |    |
| Allotment 21 days @ .80     |  |  |  | 16 | 80 | 3  | Pay days @ \$                 |  |  |  |    |    |    |
| Cash Payments:              |  |  |  |    |    |    | Field Alice 21 days @ \$ 1.00 |  |  |  | 21 | 00 |    |
| 1st Payments 8/9/18         |  |  |  |    |    | 10 | Other Allces days @ \$        |  |  |  | 25 | 10 | 4  |
| 2nd " 15/9/18               |  |  |  |    |    | 5  | Other Credits:                |  |  |  |    |    |    |
| 3rd Debits 30/9/18          |  |  |  |    |    | 1  | Total Credits                 |  |  |  | 4  | 14 | 11 |
| "A" Coy 30/8/18             |  |  |  |    |    |    | Balance due to Paymaster      |  |  |  |    |    | 3  |
| Overcredited 2 dys Pay 1.10 |  |  |  |    |    |    | Total Debits                  |  |  |  |    |    |    |
| Less 1 dys Allotment .80    |  |  |  |    |    |    | Balance due by Paymaster      |  |  |  |    |    | 2  |
| Total Credits               |  |  |  |    |    | 4  | Total Debits                  |  |  |  |    |    | 4  |
| Balance due by Paymaster    |  |  |  |    |    | 4  | Balance due to Paymaster      |  |  |  |    |    | 1  |
|                             |  |  |  |    |    |    |                               |  |  |  |    |    |    |
|                             |  |  |  |    |    | 4  |                               |  |  |  |    |    | 4  |
|                             |  |  |  |    |    | 16 |                               |  |  |  |    |    | 16 |
|                             |  |  |  |    |    | 2  |                               |  |  |  |    |    | 2  |

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

Winchester 191  
 (Place) September 20th (Date) 1918

M&J. Nugent ( 2/Lieut )

Made and checked in accordance with information received in the Pay &amp; Record Office \_\_\_\_\_ to \_\_\_\_\_ and is therefore subject to amendment if and as may be found necessary.

Pay &amp; Record Office, London,

Chief Paymaster &amp; Officer i/c Records.



Port-Rexlon  
Trinity Day

3912

Feb. 5<sup>th</sup>

To The Minister of Militia St. Johns

Hon. Sir, Please pardon  
my writing you. I saw by the last-  
weeks papers that the Returned  
Soldiers are getting paid \$60.00 for  
clothes, & those that were paid of  
25.00 would receive the Balance  
due in March. Well Sir I would  
like to know if this includes the  
Forestry Men. I served over  
a year in Scotland in the Forestry  
Company & came home on the  
12<sup>th</sup> of Oct. last & was honourably  
discharged on account of my  
Eyes. Which I am afraid will never  
get any better now. I received \$25.00  
for a suit of clothes when I was  
discharged & I am receiving a  
Pension of \$16.00 per month per

the end of April coming,  
after that I got to be examined  
by doctors before receiving any  
more. I must say that I should  
think that the Foresters ought  
to get the same as soldiers &  
sailors as we done what we  
could for our country as well as  
the fighting force, I was all  
needed to keep things going.  
I left a delicate wife & two  
small children to go & do my  
share & now I can't work for  
them the same as I could before  
I went overseas on account of  
my eyes. I hope & trust that  
the same will be done for the  
Foresters as the others as most  
of us were married men & you

III

Knowing 25-00 is not sufficient  
for a civil suit these days.  
Another thing I know my  
money had to go to provide food  
for family & fuel as far as  
it would go.

I hope you will please answer  
this & I trust the answer will  
be satisfactory.

I remain

Yours respectfully  
(Et Ple) Owen Brown  
Port-Ricton

Clotting allow  
to  
Feb 21/19

March 8, 1919

No. 8384, Pte. O'Brien,  
GRAND FALLS.

*A. C. R.*

Dear Sir:

I enclose cheque for \$35.00  
being amount due you for Clothing Allowance

Yours truly,

Capt.  
Paymaster.

LM/

Enc. 1-



Grand Falls Feb 9<sup>th</sup>

4038

Capt Howley.

Dear Sir I received on the  
8<sup>th</sup> of November the sum  
of \$12.50 for a suit of clothes of  
cloths with my discharge of the  
soldiers who have been discharged  
hence are getting more I would  
like to know if I cant get  
the same as them as I have  
a family to keep & am in  
need of it as well as they.  
will you kindly ~~advise~~ by  
letting me know ~~the~~ result  
I remain yours very truly  
E.C. Private O Brown

No 8384  
Grand Falls N.Y.

Nov. 21st, 18.

Pte. Owen Brown,  
Point Rexton, T.B.

Dear Sir,-

I enclose herewith cheque for \$34.70, being the balance of pay due you at date of discharge, also certificate of pay.

I also enclose Certificate of Discharge, dated Oct. 29th, 1918, together with special form which kindly sign and return to this office.

Yours truly,

Paymaster & O.i/c <sup>Capt.</sup> Records.



*Forestry*

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER

\$ 35<sup>00</sup>/<sub>100</sub>

*Feb 21* 19 *14*

Received from the *First Newfoundland Regiment*  
the sum of *Thirty five* Dollars.  
on account of Pay. *Clothing*  
balance

|                          |                        |
|--------------------------|------------------------|
| Ch. No. <i>563</i>       | Initials... <i>ECW</i> |
| Pay Ledger... <i>313</i> | Initials... <i>ECW</i> |
| Gen. Ledger.....         | Initials.....          |

Regtl. No. *A.C.P.* Rank .....



No. 8384

Rank

Pl-

Name

Brown O

Newfoundland Society  
**DEPARTMENT OF MILITIA.**  
**REGIMENTAL PAY BRANCH.**

**PAY VOUCHER.**

\$ 34<sup>70</sup>-

Nov 11<sup>th</sup> 1918

Received from the First Newfoundland Regiment  
the sum of thirty four  $\frac{70}{100}$  Dollars.  
~~on account~~  
balance of Pay.

|                |               |
|----------------|---------------|
| Ch. No. 151    | Initials E.W. |
| Pay Ledger 313 | Initials W.M. |
| Gen. Ledger    | Initials      |

Regtl. No. Rank

No. 8384

Rank

PL

Name

Brown, O

---

Forester

1918-1919

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 15<sup>00</sup> / -

Oct 12<sup>th</sup> 1918

Received from the First Newfoundland Regiment  
the sum of fifteen <sup>00</sup>/<sub>xx</sub> Dollars.  
on account of Pay.  
balance

~~Gwen Brown~~

|                        |                            |
|------------------------|----------------------------|
| Ch. No. ... 112 ...    | Initials ... <i>kw</i> ... |
| Pay Ledger ... 313 ... | Initials ... <i>wn</i> ... |
| Gen. Ledger ...        | Initials ...               |

Regtl. No. .... Rank .....

702



No. 8384

Rank PL

Name

Brown O.

*Duplicates*

Medical Report on an Invalid.

Station Kenmore, Perthshire

Date 13-8-18.

- 1. Unit **NEWFOUNDLAND FORESTRY. COYS<sup>7</sup>.** Former Trade } *Paper Finisher*  
or Occupation }
- 2. Regimental No. **8384**
- 3. Rank **Plt**
- 4. Name **BROWN. OWEN.**
- 5. Age last birthday **30yrs**
- 6. Enlisted { on **13-10-17.**  
at **H. John. N.F.L.D.**

- 7A. If with previous service in Army, state—
  - (a) Former Unit;
  - (b) Regimental No.;
  - (c) Date of Discharge;
  - (d) Cause of Discharge.
- } **N.A.**

**8. Disability in respect of which invaliding is Proposed.**  
*(Other disabilities should be reported upon in answer to question No. 19).*

**DEFECTIVE VISION.**



Statement of Case.

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

9. Date of origin of disability. **1913.**

10. Place of origin of disability. **N.F.L.D.**

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

*He states that after typhoid fever in 1913 his eyesight became bad and since joining has got worse and that he cannot now recognise a man now five yards off. and even when doing duty as mess orderly continually make mistakes owing to difficulty in seeing*

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
- (b) constitutional or hereditary, and not aggravated by service during the present war.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

*(A) aggravated by ordinary military service which involved more strain on his eyesight than if he had been working at home amid familiar surroundings*  
*(B) Constitutional but aggravated as stated above*  
*(C) NO.*



He is well nourished and strong. Heart and lungs normal. He complains of frequent micturition  
"Ophthalmic Report (Centre No 23 Dundee)" states  
Feb 26/18 R.V.  $\frac{60}{80}$  Vision not improved by glasses  
L.V.  $\frac{80}{80}$

13. What is his present condition?  
Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

Optic discs pale. No evidence of old optic neuritis. States eyes have been bad for past five years. He says his vision is much ~~improved~~ worse than when he joined

14. If the disability is an injury, was it caused—  
(a) In action?  
(b) On field service?  
(c) On duty?  
(d) Off duty?

} N.A.

15. Was a Court of Inquiry held on the injury?  
If so—(a) When?  
(b) Where?  
(c) Opinion?

} N.A.

16. Was an operation performed? If so, what? N.A.

17. If not, was an operation advised and declined? N.A.

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? N.A.

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war. Frequent micturition

20. Do you recommend—  
(a) Discharge as permanently unfit, ~~or~~ for further military service of any kind.  
(b) ~~Change to England?~~

J. Stammers Capt R.A.M.C.  
Officer in medical charge of case.

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

Station \_\_\_\_\_ Officer in charge of Hospital.  
Date \_\_\_\_\_

\*Loss of teeth on or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.  
† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

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

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is, (a) caused or aggravated by service in the present war, (b) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

(iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

21. (a.) State whether the disability is clearly attributable to—

Very deaf as well as blind

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

no but probably increased by strain of service

yes

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

22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which?

yes

23. Is the disability permanent?

24. If not permanent, how soon do the Board recommend re-examination?

25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

60% last months 40% due to military service

Degrees of disablement should be expressed in the following percentages:— 100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.

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

27. Do the Board recommend—

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

yes

28. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic training) is desirable in a—

- (a) Sanatorium;
- (b) Hospital;
- (c) Convalescent home;
- (d) Asylum; or
- (e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

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

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

Station \_\_\_\_\_  
Date \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
President.  
Members.

Approved \_\_\_\_\_  
Station \_\_\_\_\_  
Date \_\_\_\_\_



\_\_\_\_\_  
Administrative Medical Officer  
D. M. S. NEWFOUNDLAND.



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

# MEDICAL HISTORY

2362

Surname Brown OF Christian Name Owen

Table I.—GENERAL TABLE.

Birthplace:—Parish Salmag B.B County Wfld

|   | SPECIAL RESERVE.          |                  | REGULAR ARMY. |                  |
|---|---------------------------|------------------|---------------|------------------|
|   | on                        | at               | on            | at               |
| Examined  | 13 day of Oct 1917        | Grana Falls      |               |                  |
| Declared Age  | 29 years 3 months         |                  |               |                  |
| Trade or Occupation   | Lumberman & cook          |                  |               |                  |
| Height  | 5 feet 7 inches           |                  |               |                  |
| Weight  | 143 lbs.                  |                  |               |                  |
| Chest Measurement   | Girth when fully expanded | inches           |               |                  |
|   | Range of Expansion        | inches           |               |                  |
| Physical Development  |                           |                  |               |                  |
| Vaccination Marks   | Arm                       |                  |               |                  |
|   | Number                    |                  |               |                  |
| When Vaccinated   |                           |                  |               |                  |
| Vision  | R.E.—V=                   |                  | R.E.—V=       |                  |
|   | L.E.—V=                   |                  | L.E.—V=       |                  |
| (a) Marks indicating congenital peculiarities or previous disease | (a)                       |                  | (a)           |                  |
| (b) Slight defects but not sufficient to cause rejection          | (b)                       |                  | (b)           |                  |
| Approved by (Signature)   | <u>Lammie Paterson</u>    |                  |               |                  |
| (Rank)  | Major                     |                  |               |                  |
|   |                           | Medical Officer. |               | Medical Officer. |
| Enlisted  |                           |                  |               |                  |
| Joined on Enlistment  |                           |                  |               |                  |
| Transferred to  |                           |                  |               |                  |
| Became non-effective by   |                           |                  |               |                  |
| (Signature)   |                           |                  |               |                  |
| (Rank)  |                           |                  |               |                  |

| COPIES SENT  |           |             |
|--------------|-----------|-------------|
| To           | For       | DATE        |
| M. or M.     | 15292/100 | 23 SEP 1917 |
| O.C. 1st Lt. |           |             |
| 2nd Lt.      |           |             |
|              |           |             |
|              |           |             |



Original

# Medical Report on an Invalid.

Station Hummere, Perthshire

Date 13-8-18.

- 1. Unit **NEWFOUNDLAND FORESTRY. GOYS.**
- 2. Regimental No. **838A.**
- 3. Rank **Pte**
- 4. Name **BROWN. OWEN.**
- 5. Age last birthday **30 yrs**
- 6. Enlisted { on **13-10-17.**  
at **St. John's Newfoundland.**
- 7. Former Trade or Occupation } **Paper Finisher.**
- 7A. If with previous service in Army, state—
  - (a) Former Unit;
  - (b) Regimental No.;
  - (c) Date of Discharge;
  - (d) Cause of Discharge.

} **N.A.**

## 8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 9)

**DEFECTIVE**

| COPIES SENT   |     | DATE        |
|---------------|-----|-------------|
| To            | No. | 23 SEP 1918 |
| M. O. I. O.   | 1   |             |
| O.C. 1st. BN. | 2   |             |
| " 2nd. BN.    |     |             |

### Statement of Case.

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

- 9. Date of origin of disability. **1913.**
- 10. Place of origin of disability. **NFLD.**

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

*He states that, after typhoid fever in 1913, his eyesight became bad, & since joining it has got worse & that he cannot now see recognize a man five yards off & even when doing duty as mess orderly continually makes mistakes owing to difficulty in seeing.*

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
- (b) constitutional or hereditary, and not aggravated by service during the present war.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

- (A) ~~is~~ Aggravated by ordinary military service which involved more strain on his eyesight than if he had been working at home amidst familiar surroundings.
- (B) Constitutional, but aggravated as stated above.
- (C) no.



He is well nourished & strong. Heart & lungs normal. He complains of frequent micturition.  
 "Ophthalmic Report. (Centre No 23 Dundee) states Feb 26/18. R.V.  $\frac{1}{6}$ . Vision not improved by glasses L.V.  $\frac{1}{6}$ .  
 Optic discs pale. No evidence of old optic neuritis states eyes have been bad for past 5 years."  
 He says his vision is much worse than when he joined.

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

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

- (a) In action?
  - (b) On field service?
  - (c) On duty?
  - (d) Off duty?
- } N.A.

15. Was a Court of Inquiry held on the injury?

- If so—(a) When?
- (b) Where?
  - (c) Opinion?
- } N.A.

16. Was an operation performed? If so, what? N.A.

17. If not, was an operation advised and declined? N.A.

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? N.A.

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war. Frequent micturition

20. Do you recommend—  
 (a) Discharge as permanently unfit, or for further military service of any kind  
 (b) ~~Change to England†~~

A. J. Farwell    Capt R.A.M.C.  
 Officer in medical charge of case.

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

Station \_\_\_\_\_ Officer in charge of Hospital.  
 Date \_\_\_\_\_

\*Loss of teeth on or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.  
 † Delete this word if no exceptions are to be made.



COPY.

To be used for recruits enlisting direct into the Regular Army only.  
 Army Form B. 178 to be used for Special Reserve recruits  
 and Special Reservists enlisting into the Regular Army.

**MEDICAL HISTORY of**

Surname Brown Christian Name Owen

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Salvage B. Co. County Wfld.

Examined ... { on 13<sup>th</sup> day of Oct. 1917  
 at Grand Falls

Declared Age ... 29 years 3 mos. days

Trade or Occupation ... Lumberman & Cook

Height ... 5 feet, 7 inches.

Weight ... 143 lbs.

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

Physical Development ...

Vaccination Marks { Arm ... Right Left  
 Number

When Vaccinated ...

Vision ... { R.E.—V=  
 L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease ...

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

Approved by (Signature) Ed. Lamont Paterson  
 (Rank) Major Medical Officer.



Enlisted ... at ...  
 on ... day of ... 1917

| Corps.                             | Regtl. No.  |
|------------------------------------|-------------|
| <u>Newfoundland Forestry Corps</u> | <u>8384</u> |
|                                    |             |
|                                    |             |

Transferred to ...

Became non-effective by ...  
 on ... day of ... 1917

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



Medical Report on an Invalid.Station Kenmore - PerthshireDate 13/8/181. Unit Nfld. Forestry Co.2. Regimental No. 83843. Rank Private4. Name BROWN, OWEN5. Age last birthday 306. Enlisted { on 13/10/17  
at St. John'7. Former Trade } Paper Finisher  
or Occupation }

7A. If with previous service in Army, state—

(a) Former Unit;

(b) Regimental No.;

(c) Date of Discharge;

(d) Cause of Discharge.

**8. Disability in respect of which invaliding is Proposed.***(Other disabilities should be reported upon in answer to question No. 19).***DEFECTIVE VISION**Statement of Case.

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

9. Date of origin of disability. 191310. Place of origin of disability. Nfld.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

He states that after typhoid fever in 1913 his eyesight became bad and since joining has got worse and that he cannot now recognize a man now five yards off and even when doing duty as mess orderly continually makes mistakes owing to difficulty in seeing

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

(a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).

Aggravated by ordinary military service which involved more strain on his eyesight than if he had been working at home amid familiar surroundings

(b) constitutional or hereditary, and not aggravated by service during the present war.

Constitutional but aggravated as stated above

(c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &amp;c.

No

13. What is his present condition?

*Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.*

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

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

15. Was a Court of Inquiry held on the injury?

- If so—
- (a) When?
  - (b) Where?
  - (c) Opinion?

16. Was an operation performed? If so, what?

17. If not, was an operation advised and declined?

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly\* attributable to active service?

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

He is well nourished and strong. Heart and lungs normal. He complains of frequent micturition. Ophthalmic Report (Centre No. 23 Dundee) states: Feb. 26th., 1918. R.V. 6/60, L.V. 6/60. Vision not improved by glasses. Optic disc pale. No evidence of old optic neuritis. States eyes have been bad for past five years. He says his vision is much worse than when he joined.

**Frequent micturition**

20. Do you recommend—

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

**For further military service of any kind**

**(Sgd) S. D. FAIRWEATHER, Capt. R. A. M. C.**

Officer in medical charge of case.

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

Station \_\_\_\_\_

Officer in charge of Hospital.

Date \_\_\_\_\_

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

† Delete this word if no exceptions are to be made.



Opinion of the Medical Board.

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

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) *The rates of pension vary directly according to whether the disability is, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

(iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

1. (a.) State whether the disability is clearly attributable to—

Very deaf as well as blind

(i.) Service during the present war;

(ii.) Climate;

(iii.) Ordinary military service;

No but probably increased by strain of service

(iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or

(v.) Whether it is constitutional or hereditary.

Yes

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

22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which?

23. Is the disability permanent?

Yes

24. If not permanent, how soon do the Board recommend re-examination?

25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

*Degrees of disablement should be expressed in the following percentages:— 100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.*

60% for 6 months

40% due to Military Service

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

27. Do the Board recommend—

(a) Discharge as permanently unfit, or

(b) Change to England?

Yes

28. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic training) is desirable in a—

(a) Sanatorium;

(b) Hospital;

(c) Convalescent home;

(d) Asylum; or

(e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended?

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

Signatures:—

(Sgd) N. S. FRASER

President.

Station St. John's, Nfld.,

J. SINCLAIR TAIT

Date Oct. 15th., 1918

L. PATERSON, Major

Members.

Approved

Station

Date



*Cluny Macpherson*

Administrative Medical Officer.

D. M. S. NEWFOUNDLAND.

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

JAN 3 1922 1921.

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

Owen Brown

in respect of his service as No. 8384 Rank Pte.

Name O. Brown ~~Royal Wtd. Regt.~~  
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received The Medal received.

Signature Owen Brown

Date Jan 20<sup>th</sup> 1922

Address Port-Rexham - Trinity Bay







## Descriptive Return of a Soldier discharged on account of Disability.

**INSTRUCTIONS.**—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Commissioners of Chelsea 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 examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station," and "Date" should be in his own handwriting.

The Form will then be attached to the Proceedings of the man's Medical Board, to be completed by the Officer i/o 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, Chelsea, London, S.W.

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

**A** Name in full *Brown Owen*  
 Regiment from which discharged *Newfoundland Forestry Corps.*  
 Regimental Number *8384*  
 Where born (Parish, Town and County), and when *Salvage, Bonaville Bay, nfld.*  
 Intended address *Port Rexton, Trinity Bay*

Height on discharge *5* Feet *8* Inches  
 Colour of Hair on discharge *dk. Brown* Colour of Eyes *Blue*  
 Descriptive marks *none* Complexion *Pale*  
 Figure on discharge *well built*  
 Christian name of Father *John*  
 Christian name of Mother *Mary*  
 Wife's Maiden name in full *Esther Finney*  
 Date and Place of Marriage *15.1.13 Port Rexton*  
 Christian names of Children *Ewendolyn & Vincent*  
 Nature and locality of civil employment desired *Paper Finisher Grand Falls*

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

(Soldier's Signature in full) *Sgt. Owen Brown*

(Rank) *Pte*

Station *Keenmore Perth*

Date *13.8.18*

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

*Sgt. J.D. Fairweather* Medical Officer i/c  
*Capt. Rame* Hospital.

Station *Keenmore Perth*

Date

| B Period of Service and in what Corps ...   | Regiment | Years | Days | All Service Abroad with Stations                | Years | Days |
|---|----------|-------|------|---|-------|------|
|   |          |       |      |   | India |      |
|   |          |       |      | S. Africa                                       |       |      |
| Disallowed ... ..                           |          |       |      |   |       |      |
| Service towards Pension ... ..              |          |       |      |   |       |      |
| Date inclusive to which pay has been issued |          |       |      | Sum due on account }<br>of advance of pension } |       |      |
| Sums due on account of public debts ...     |          |       |      |   |       |      |

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

Date \_\_\_\_\_

Records.

# Proceedings on Discharge.

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

| No. <u>8384</u>  | Army Rank <u>Private</u>              |                    |  |  |    |     |      |          |                |                    |               |  |  |          |  |  |  |  |  |
|--|---------------------------------------|--------------------|--|--|----|-----|------|----------|----------------|--------------------|---------------|--|--|----------|--|--|--|--|--|
| Name <u>Brown Owen</u><br><small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>   |                                       |                    |  |  |    |     |      |          |                |                    |               |  |  |          |  |  |  |  |  |
| Corps <u>Newfoundland Forestry</u>   |                                       |                    |  |  |    |     |      |          |                |                    |               |  |  |          |  |  |  |  |  |
| Battalion, Battery, Company, Depot, &c.<br><small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &amp;c., or to General Staff of the Army, it should be so stated.)</small>   |                                       |                    |  |  |    |     |      |          |                |                    |               |  |  |          |  |  |  |  |  |
| Date of discharge _____  |                                       |                    |  |  |    |     |      |          |                |                    |               |  |  |          |  |  |  |  |  |
| Place of discharge _____   |                                       |                    |  |  |    |     |      |          |                |                    |               |  |  |          |  |  |  |  |  |
| 1. <span style="float: right;"><i>Description at the time of discharge.</i></span>   |                                       |                    |  |  |    |     |      |          |                |                    |               |  |  |          |  |  |  |  |  |
| Age <u>29</u> years <u>3</u> months<br>Height <u>5-</u> feet <u>8</u> inches<br>Chest measurement { girth when fully expanded _____ ins.<br>range of expansion _____ ins.<br>Complexion <u>Pale</u><br>Eyes <u>Blue</u><br>Hair <u>Light Brown</u><br>Trade <u>Lumberman &amp; Cook</u><br>Intended place of residence <u>Port Rexton</u><br>(To be given as fully as practicable) <u>Trinity Bay</u><br><u>Newfoundland</u>                       | Descriptive marks.<br><br><u>None</u> |                    |  |  |    |     |      |          |                |                    |               |  |  |          |  |  |  |  |  |
| <table border="1" style="margin-left: auto; border-collapse: collapse;"> <thead> <tr> <th colspan="3">COPIES SENT</th> </tr> <tr> <th>To</th> <th>No.</th> <th>DATE</th> </tr> </thead> <tbody> <tr> <td>M. of M.</td> <td><u>1377/19</u></td> <td><u>23 SEP 1918</u></td> </tr> <tr> <td>O.C. 1st. Bn.</td> <td></td> <td></td> </tr> <tr> <td>2nd. Bn.</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table> |                                       | COPIES SENT        |  |  | To | No. | DATE | M. of M. | <u>1377/19</u> | <u>23 SEP 1918</u> | O.C. 1st. Bn. |  |  | 2nd. Bn. |  |  |  |  |  |
| COPIES SENT  |                                       |                    |  |  |    |     |      |          |                |                    |               |  |  |          |  |  |  |  |  |
| To   | No.                                   | DATE               |  |  |    |     |      |          |                |                    |               |  |  |          |  |  |  |  |  |
| M. of M.   | <u>1377/19</u>                        | <u>23 SEP 1918</u> |  |  |    |     |      |          |                |                    |               |  |  |          |  |  |  |  |  |
| O.C. 1st. Bn.  |                                       |                    |  |  |    |     |      |          |                |                    |               |  |  |          |  |  |  |  |  |
| 2nd. Bn.   |                                       |                    |  |  |    |     |      |          |                |                    |               |  |  |          |  |  |  |  |  |
|  |                                       |                    |  |  |    |     |      |          |                |                    |               |  |  |          |  |  |  |  |  |
| 2. The above-named man is discharged in consequence of _____   |                                       |                    |  |  |    |     |      |          |                |                    |               |  |  |          |  |  |  |  |  |
| <small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small>  |                                       |                    |  |  |    |     |      |          |                |                    |               |  |  |          |  |  |  |  |  |
| 3. Military character :— _____   |                                       |                    |  |  |    |     |      |          |                |                    |               |  |  |          |  |  |  |  |  |
| 4. Character awarded in accordance with King's Regulations :— _____  |                                       |                    |  |  |    |     |      |          |                |                    |               |  |  |          |  |  |  |  |  |
| Certified 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.  |                                       |                    |  |  |    |     |      |          |                |                    |               |  |  |          |  |  |  |  |  |
| _____<br>Initials of Commanding Officer.   |                                       |                    |  |  |    |     |      |          |                |                    |               |  |  |          |  |  |  |  |  |
| Army Form B. 2088 has been issued to* _____  |                                       |                    |  |  |    |     |      |          |                |                    |               |  |  |          |  |  |  |  |  |

To be filled in on the soldier quitting the Colours.

\* Strike out if not applicable.

March 21, 1919

#8384 Pte. Owen Brown,  
Port Rexton. T.B.

Dear Sir:-

Referring to your application  
I enclose cheque for Fifty five dollars and  
ten cents (\$55.10), being amount due you on  
account of "War Service Gratuity."

Yours truly,

Paymaster & Officer i/c Records <sup>Captain,</sup>

Enc<sup>d</sup> 1.



DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

597  
Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th.1919.

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

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

Christian name *Owen*..... 2. Surname *Brown*.....

3. Rank *Private*..... 4. Regt. No. *8384*.....

5. Address in full to which future payments of gratuity are to ~~fax~~ be forwarded. *Port Rexton, Trinity Bay*.....

6. Date of enlistment in the Regiment. *Oct. 13<sup>th</sup> 1917*.....

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

*Ethel Brown*.....

8. Relationship of such dependents. *Wife*.....

9. Address in full of such dependent. *Port Rexton, Trinity Bay*.....

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *Not applicable.*

11. Were you on active service only in Nfld. If so, give dates, and particulars of such service.....

*Not applicable*.....

12. Give total length of time which you served on active service, whether in Nfld, or Overseas. *From Oct. 13<sup>th</sup> 1917 to Oct. 31<sup>st</sup> 1918.*

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

*Not applicable*

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

*Have received monthly pension of £ 20 since discharge and £ 60 clothes money. Former paid by Pension Board. Latter " " Dept of Militia*

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

16. Have you, during the present war, served in the Imperial Forces? *No.*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *Not applicable*

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *No.*

(b). If so, was such reversion in consequence of misconduct or inefficiency? *Not applicable.*

19. Are you now serving in the Regt.? *No.* If not give:- (a) Date of discharge *Oct 31<sup>st</sup> 1918.* (b) Reason for discharge.....

*Defective sight*

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service. *No.*

21. (a) Are you receiving treatment from the Civil Re-Establishment Com.? *No*

(b). If so, are you in receipt of full pay and allowances from that Committee..... *not applicable*

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

Signature of Applicant: Owen Brown

Place of Residence: Grand Falls

Declared before me at:  
This 15 day of March 1919

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

| POST DISCHARGE PAY. |                 |                   |                         |                   |
|---------------------|-----------------|-------------------|-------------------------|-------------------|
| Date paid           | Paid<br>Soldier | Paid<br>Dependent | War Service<br>Gratuity | Net amount<br>due |
| .....               | .....           | .....             | 1.00                    | 100.00            |
| .....               | .....           | .....             | .....                   | .....             |
| .....               | .....           | .....             | .....                   | .....             |
| Certified Correct.  |                 |                   | Paymaster.              |                   |



**Descriptive Return of a Soldier discharged on account of Disability.**

**INSTRUCTIONS.**—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Commissioners of Chelsea 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 examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The Form will then be attached to the Proceedings of the man's Medical Board, to be completed by the Officer i/c Records when received, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.1.

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

**A Name in full** *Brown. Owen*  
 Regiment from which discharged *Newfoundland. Infantry B Coy*  
 Regimental Number *8384*  
 Where born (Parish, Town and County), and when *Salvage. Bonarista Bay. N.F.L.D.*  
 Intended address *Port. Ripton Trinity Bay. N.F.L.D.*

Height on discharge *5 Feet 8* Inches  
 Colour of Hair on discharge *Light Brown*. Colour of Eyes *Blue*  
 Descriptive marks *none*. Complexion *Pale*.

Figure on discharge *Well built*  
 Christian name of Father *John*  
 Christian name of Mother *Mary*  
 Wife's Maiden name in full *Ethel Pirey*  
 Date and Place of Marriage *15-1-1913. Port Ripton. N.F.L.D.*  
 Christian names of Children *Samuel, Vincent*  
 Nature and locality of civil employment desired *(PFC) Paper Finisher. Grand Falls. N.F.L.D.*

| COPIES SENT  |             |                    |
|--------------|-------------|--------------------|
| To           | No.         | DATE               |
| M. of M.     | <i>1329</i> | <i>23 SEP 1918</i> |
| O.C. 1ST BN. |             |                    |
| 2ND BN.      |             |                    |

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

(Soldier's Signature in full)

*Owen Brown*  
 (Rank) *Pvt*  
 Date *13-8-18*

Station *Kenmore. Perthshire*

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

*S. Fairweather*  
 Capt RA MC

Medical Officer i/c *unit*  
 Hospital

Station *Kenmore. Perthshire*

Date *13-8-18*

| B Period of Service and in what Corps ...   | Regiment | Years | Days | All Service Abroad with Stations           | Years | Days |
|---|----------|-------|------|--|-------|------|
|   |          |       |      |  | India |      |
|   |          |       |      | S. Africa                                  |       |      |
| Disallowed ...                              |          |       |      |  |       |      |
| Service towards Pension ...                 |          |       |      |  |       |      |
| Date inclusive to which pay has been issued |          |       |      | Sum due on account of advance of Pension } |       |      |
| Sums due on account of public debts ...     |          |       |      |  |       |      |

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

Date \_\_\_\_\_

Records.



Depot 8384

October 16th. 1918

From Assistant Adjutant  
Headquarters

To Paymaster & Officer i/c Records.  
Militia Dept.

8384, Pte. Brown, O.  
8393, Pte. Ferrell, J.  
8448, Pte. Buckley, J.

The marginally noted men have been recommended for discharge as permanently unfit by Medical Board, held on Tuesday, October 15th. I am sending them herewith for your attention, and necessary action, please.

CCD/WFC

November 15th, 1918

The O.C.

Newfoundland Forestry Companies.

Depot.

Sir,-

I have the honour to inform you that the under-mentioned men have been discharged on the dates given.

Kindly note and post in Daily Orders Part II

I have etc.

(SIGNED) J.M.HOWLEY

Captain.  
Paymaster & Co. i/o Records.

J/H

|          |         |                  |                 |           |
|----------|---------|------------------|-----------------|-----------|
| No 8384  | Private | Brown, Owen      | Oct. 29th, 1918 | Med Unfit |
| No. 8458 | "       | Felley, Alphasus | Oct. 30th, 1918 | do        |
| No. 8439 | "       | Ralph. L.        | Nov. 1st, 1918  | do        |
| No. 8479 | "       | Martin, Andrew   | Nov. 7th, 1918  | do        |