



FIRST NEWFOUNDLAND REGIMENT

Walt

ATTESTATION OF

No. *2931* Name *Walter John Boursey* Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--------------------------------------|
| 1. What is your name? | 1. <i>Walter John Boursey</i> |
| 2. What is your full Address? | 2. <i>101 Bannockburn St. John's</i> |
| 3. Are you a British Subject? | 3. <i>Yes</i> |
| 4. What is your age? | 4. <i>18</i> Years <i>4</i> Months |
| 5. What is your Trade or Calling? | 5. <i>Self</i> |
| 6. Are you Married? | 6. <i>Yes</i> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <i>No</i> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <i>Yes</i> |
| 9. Are you willing to be enlisted for General Service? | 9. <i>Yes</i> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?..... | 10. <i>Yes</i> |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <i>Yes</i> |

FOR THE DURATION OF THE WAR

I, *Walter Boursey* 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.

Walter Boursey SIGNATURE OF RECRUIT.
Walter Boursey Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, *Walter Boursey* do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

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

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

on this..... day of..... 1911
 Signature of Attesting Officer *Walter Boursey*

†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..... 1911 } Approving 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 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 Walter John Boussey
 Apparent age 18 years 4 months. Height 5 feet 9 inches
 Chest Measurement { Girth when fully expanded 38 inches
 Range of expansion 3 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mr. Wm. Boussey, 22 Broadway
 Relationship Wife

Particulars as to Marriage

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	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 _____									
Total Service forfeited as above.....									
Total Service towards Engagement to _____ [date of discharge] _____ years _____ days									
" " " Pension - " [" "] " " "									

2931



FIRST NEWFOUNDLAND REGIMENT *Walt*

ATTESTATION OF

No. 2931 Name Walter John Boursey, Corps

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Walter John Boursey
2. What is your full Address? 2. 101 Barnes Road
St. John's
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 18 Years 4 Months
5. What is your Trade or Calling? 5. Clerk
6. Are you Married? 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. No
8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
9. Are you willing to be enlisted for General Service? 9. Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? 10. { Name
Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? 11. Yes

I, Walter John Boursey 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.

Walter John Boursey SIGNATURE OF RECRUIT.
Chas. H. Aye Signature of Witness.

I, Walter John Boursey do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

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

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

on this 2nd day of July 1916.
Signature of Attesting Officer Chas. H. Aye

†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 1916
Place } Approving Officer.

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

* If so, 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 Walter James Bourne

Apparent age 18 years 4 months. Height 5 feet 4 inches

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

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs. Mary Bourne, 101 Hammond St., Boston, Mass. | Relationship Wife

Particulars as to Marriage

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	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>St. Louis</u> on <u>July 3rd 1916</u>					
				<u>Discharged - St. Louis June 25/1918</u>					
				<u>Embarked at St. Louis S.S. Dublin for U.K. 28th</u>					
				<u>Embarked for B.S. 30th</u>					
				<u>Joined unit 12-12-16 Wounded 16-3-17 Admitted 11th Stry. Hosp. Queen. 23rd Wellington 19-3-17</u>					
				<u>Invalidee to England 17-4-17 Admitted 13th Stry. Hosp. Queen. 17-4-17</u>					
				<u>then report A.M.D. for discharge 22-5-18 to temporary law for discharge 22-5-18</u>					
				<u>Arrives here for discharge 1-6-18.</u>					
				<u>Discharged actually 11th 1-6-18</u>					
Total Service forfeited as above.....									
Total Service towards Engagement to <u>25-6-18</u> (date of discharge) <u>1</u> years <u>358</u> days									
Pension									

C.R.

2931

Walter J. ~~Burse~~ was attested for General service
with the NEWFOUNDLAND REGIMENT on . July 3rd 1916 ..
Regimental No 2931 was allotted to Pte. W.J. Bursey

AUTHORITY:

Record Ledger,

Dept. of MILITIA,

March 25th. 1919.

C.R. 2931

Extract from Nominal Roll of Nfld. Regt. Draft No.14.
from 2nd Bn. Depot, to 1st Bn. B.E.F. Embarked South-
ampton, 30-11-16.

2931 Pte. W. Bursey.

C.R. 2931

Extract from list of men of the Royal Newfoundland Regiment
discharged on various dates.

2931 Pte. W. Bursey,

Discharged 25 @ 6 - 18, Medically unfit

C.R. 2931

Extract from Daily Orders part 11, from Unit The Royal
Wild Regt. St. John's, dated June 20, 1918.

#2931 Pte. W. Bursey.

Having been found medically unfit is discharged 24-6-18

C.R. 2931

Extract of Preliminary Report from The Director of Medical Services to O.C. Depot dated June 12th. 1918.

At a Medical Board held on Tuesday June 11th. the following was a finding:

2931 Pte. W. Bursey

Royal Nfld. Regt.....Recommended for Discharge-----Permanently Unfit.

C.R. 2931

Extract from Daily Orders part 11, from Unit The Royal
Mfld. Regt. St. John's, dated June 5th, 1918.

The following men ~~reported~~ returned from Overseas
and reported to Depot from 1.6.18

#2931 Pte. W. Burse.

7

C.R. 2931

Extract of Letter to His Excellency Sir C.Alexander Harris, K.C.M.G. &
C.B., C.V.O., Governor, dated May 25th. 1918.

The following embarked at Liverpool on May 22nd. for Halifax.

~~BEING SENT~~ HOME FOR DISCHARGE.

2931 Pte. Bursey.

Royal Nfld. Regt.

C.R. 2931

Extract of Telegram to Military St. John's from London dated May 23rd. 1918.

Embarked at Liverpool May 22nd. by Government transport to Halifax. In answer to your telegram May 9th:

SENT HOME FOR DISCHARGE.

2931 Bursey.

C.R. 2931

Extract from Casualties received from Pay & Record Office,
London,

#2931 Pte. W. Bursey.

Ex King George Hospital 11/5/18 is granted furlough to
10 a.m. 20/5/18 with orders to report at the Pay & Record
Office on the latter date for disposal.

AUTHORITY:- for discharge A.F.W.3201.

6. X 2931, PTE. BURSEY, W., was admitted to the Queen Mary's Convalescent Aux. Hospitals, Roehampton, S.W., on the 12/4/18. He is to be fitted with an artificial limb.

R.C.R. 2931

Authorities:-

1. (a) 'Phone from 3rd L.G.H.
(b) N.W.C.A.
- 2 to 5. Telegrams from W.O. C.2.Cas. 15/4/18.
6. Memo from Convalescent Hospital.

C.R. 2921

Extract of Casualties received from Pay & Record Office,
London, dated March 6th, 1918.

O.C. 3rd London General Hospital, S.W. 18 Reports 5/3/18.

#2931 Pte. W. Bursey. ✓

Trans. to Pavilion Military Hospital, Brighton 5/3/18.

7

C.R. 2931

Extract from CASUALTIES from P.&R.O., London, dated 6 March 1918.

O.C., 3rd London General Hospital, S.W. 18, reports, 5/3/18,
Trans. to Pavilion Mil. Hosp., Brighton, 5/3/18,

2931 Pte. W. Bursey.

Authority: A.Fs. W. 3016 from 3rd L.G.H.

BLANDFORD BC

STANTON QUAY

M

April 19, 1917.

Dear Madam,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 2931, Private Walter J. Bursey, who was previously reported as suffering from gunshot wounds in the left forearm, fracture of ulna, left leg, Rouen, March 5th, has been admitted Wandsworth suffering from gunshot wound left radius; amputation left leg.

Yours faithfully,

Colonial Secretary.

Mrs. Mary Bursey,
101 Barnes Rd.

C.R. 2931

Extract from Casualties received from P.&R. Office London.

March. 22, 1917.

Wandsworth.

2931 Bursey

Removed from seriously ill list.

M

March 22, 1917.

Dear Madam,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 2931, Private Walter J. Bursey, who was previously reported dangerously ill, Rouen, March 5th, suffering from gunshot wounds left forearm, etc., has been removed from seriously ill list.

Yours faithfully,

Colonial Secretary.

Mrs. Mary Bursey,
101 Barnes Rd.

C.R. 2931

Extract from Casualties Received from P.&.R. Office, London,
March 17th, 1917.

2931 Bursey.

Dangerously ill, Roush, March 5th.

March 17, 1917.

Dear Madam,

I regret to have to inform you that a report has this day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 2931, Private Walter J. Bursey, was dangerously ill at Rouen on March 5th.

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

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

Yours faithfully,

Mrs. Mary Bursey,
101 Barnes Rd.

Colonial Secretary.

G.

8th March, 1917.

Dear Madam,

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

No. 2931, Private Walter J. Bursley, was at 11th Stationary Hospital, Rouen, March 5th, Dangerously Ill, suffering from Gunshot Wound in Left Fore Arm, fracture Ulna and Left Leg.

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

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

Yours faithfully,

**Mrs. Mary Bursley,
101 Barnes Road.**

Colonial Secretary.

C.R. 2931

Extract from Casualties received from P.S.R. Office, London,
Mar. 7, 1917.

2931 Bursey.

Dangerouslt ill 11th Stationary Hospital, Rouen, Mar. 5th
Gunshot wound left forearm, fracture ulna and left leg.

C.R. ~~2928~~
2931

Extract from Nominal Roll Draft (All Ranks) to 1st
Bn. B.E.F. Embarked Southampton.

2931

~~2928~~ Pte. W. Bursey

30-11-16.

C.R. 1931

Extract from Nominal Roll Embarked St. John's for Overseas,
28/8/16.

2951 Pte. W. Burseyq

W Eury

C.R.

2931

~~AKO~~

LAST PAY CERTIFICATE

N.F.P./94

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

Regt No. 293 Rank Plt Name Bursey W. Unit Royal Newfoundland Regt who was Repatriated to Newfoundland on 22/5/18 Authority A 413, 99 Cause Class A

STATEMENT OF ACCOUNT

DR.

		PARTICULARS				PARTICULARS				CR.				
		£	s	d					£	s	d			
TO	Balance Dr: from				Balance Cr. from	21	12	17						
	Allotment 152 days @ 60c	91	20	18	14	9			152	00	18	11	4	
	Cash Payments: <u>RTRD.</u>			30	5	0			15	20				
	<u>Hospital Advances</u>			3	19	6			167	20	34	7	1	
	Other Debits:													
						Other Allowances days @ 1/2								
PERIOD: FROM					Other Credits:									
					<u>Ration allowance</u>									
					24-4-18 to 27-7-18									
					11-5-18 to 22-5-18								7	0
					12 days @ 2/1								1	5
						Total Credits							54	10
	Total Debits			52	19	3								
	Balance due by Paymaster			1	11	2								
				54	10	5						54	10	5

[Handwritten signature]
21/5/18

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

(Place) _____ (Date) 1918 O.C. " _____ " Company.

[Handwritten signature]
London to 21/5/18

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

Pay & Record Office, London,

1918

Chief Paymaster & Officer i/c Records.

FOR USE IN THE CASE OF A SOLDIER SENT TO HIS HOME

From a Hospital or Unit as "Medically Unfit."

No. 2931, Rank Plt, Name Gursey W., 1st Newfoundland (Regiment).

has orders to proceed to his home:

(Address

58 Victoria St & W



and there to await further instructions as to his discharge from the Service.

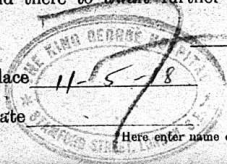
Officer Commanding.

Place

11-5-18

Date

W. Gursey



Here enter name of Hospital or Unit from which the Soldier proceeds.

CAPT. A. H. O.

10 days 20/5/18

POST OFFICE TELEGRAPHS.

NEWFOUNDLAND GOVERNMENT
 PAY & RECORDS
 18 MAY 1881
 459

If the Receiver of an Inland Telegram doubts its accuracy, he may have it repeated on payment of half the amount paid for its transmission, and a fraction of 1d. less than 1/2d. being reckoned as 1/4d.; and if it be found that there was any error, the amount paid for repetition will be returned. Special conditions are applicable to the repetition of Foreign Telegrams.

Original and Service Instructions
~~Bridge a~~
 ACTED UPON
 DATE

Charges }
 to pay } s. d.



Handed } 17/11
 in at }
 Received }
 here at } 2/57

Royal Newfoundland Pay
 And Record Office
 58 Victoria St Ldn

Will report at 3 pm on
 Tuesday
 7, 2931 Pte W. Bussey

"A" Form.
MESSAGES AND SIGNALS.

Army Form C.2121
(in pads of 100).
No. of Message _____

Prefix Code m.	Words	Charge	<i>This message is on a/o of:</i>	Recd. at m.
Office of Origin and Service Instructions.	Sent	 Service.	Date
.....	At..... m.		From
.....	To..... m.		(Signature of "Franking Officer.")	By
.....	By.....			

TO	2951	PTE.	W.	BURSEY
	ROYAL	NEWFOUNDLAND	REGT.	CARE
	BROOKLANDS MILITARY HOSPITAL WEYBRIDGE.			

Sender's Number.	Day of Month.	In reply to Number.
* 137	17/5/18	AAA

IF	YOU	WISH	RETURN	
NEWFOUNDLAND		WEDNESDAY	NEXT	REPORT
THIS	OFFICE	3 p.m.	TUESDAY	21/5/18
telegraph	REPLY		SINOPTICAL.	

From	Place	Time

The above may be forwarded as now corrected. **(Z)**

.....
Censor. Signature of Addressor or person authorised to telegraph in his name.

LAST PAY CERTIFICATE

N.F.P./94

To be rendered for all ranks on discharge, transfer to other Units, or on return to Newfoundland in accordance with C.F. /19, 22/5/17.

Regt No. 2951 Rank Pte Name W. Bursley Unit Royal Nfld. Regt. who was Repatriated
to Newfoundland on 22/5/18 Authority A. F. B. 179 Cause Class A.

STATEMENT OF ACCOUNT

	PARTICULARS	£	s	d	PARTICULARS	£	s	d
	Balance Dr. from				Balance Cr. from <u>21/12/17</u>			
	Allotment <u>152</u> days @ <u>.60</u>	<u>91</u>	<u>20</u>		Pay <u>152</u> days @ <u>1.00</u>	<u>152</u>	<u>00</u>	
	Cash Payments: P. & R. O.		<u>30</u>	<u>5</u> <u>0</u>	Field Allow <u>152</u> days @ <u>10</u>	<u>15</u>	<u>20</u>	
	Hospital Advances		<u>3</u>	<u>19</u> <u>6</u>	Other Allowes days @ <u>10</u>	<u>167</u>	<u>20</u>	
	Other Debits:				Other Credits:			
					<u>Ration Allowance.</u>			
					<u>24/4/18-27/4/18, 4 days 1/9</u>			<u>7</u> <u>0</u>
					<u>11/5/18-22/5/18, 12 " 2/1</u>			<u>1</u> <u>5</u> <u>0</u>
	Total Debits		<u>52</u>	<u>19</u> <u>3</u>	Total Credits		<u>54</u>	<u>10</u> <u>5</u>
	Balance due by Paymaster		<u>1</u>	<u>11</u> <u>2</u>	Balance due to Paymaster		<u>54</u>	<u>10</u> <u>5</u>
			<u>54</u>	<u>10</u> <u>5</u>			<u>54</u>	<u>10</u> <u>5</u>

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

(Place) _____ (Date) 1918

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

O.C. " _____ " Company,
London, S.W. to 21/5/18

Pay & Record Office, London,

21-5- 1918

Chief Paymaster & Officer i/c Records.

5054/3

Pavilion Military
Brighton

3rd April

8

W. Bursey

2931

Pte

3:0:0

7959

IO1
IO2
IO3
IO4
IO5
IO6
IO7
IO8
IO9
IO10
IO11
IO12
IO13
IO14

OK
£ 3.0.0 2/4/18
GRB

W.O. Letter 27/Gen.No./478



Regimental Paymaster,

68 Victoria St London S.W.

Please forward the sum of £. 3 s. - d. - on account of pay due to No. 2931 Rank. Pte.

Name W. Bursey to Pavilion Military Hospital Brighton section 73. Ward 8.
Pte. R. N. F. L. D.

Signed W. Bursey

Countersigned GRB



Th O.C., Pavilion General Hospital, BRIGHTON.

No. _____ Date 5/3/18 Admitted 17/4/17

(1) To the Officer i/c Records, 58 Victoria St SW _____ (Station).

(2) The Officer Commanding, Royal Army Medical Corps _____ (Station).

(3) The Paymaster, 58 Victoria St SW _____ (Station).

Regimental No. 2931

Rank and Name Pte Pursey W.

Regiment or Corps 1st Royal

has been granted a furlough from transferred on 5/3/18 to

His address while on leave will be: The Pavilion military Hospital Brighton

I consider he is fit for*
• Strike out that which is inapplicable.
~~i. Duty.~~
~~ii. Command Depot.~~
~~iii. Employment.~~

Officer in charge Hogan Cpl
Registrar, R.A.M.C.F.
3rd London General Hospital, WANDSWORTH, S.W. Hospital, _____ (Station).

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office. In the case of men of the Royal Flying Corps, Royal Engineers and Army Ordnance Corps two copies of A.F.W. 3016 will be sent to the Officer in charge Records concerned and one to the Paymaster, instead of one copy to the Officer i/c Records, the Paymaster, and O.C. shown in the Schedule.

Brooklands

2931 Pt. W. Bursley has permission
to draw £ 3 (Three pounds)

OK

£ 3.0.0

JRB

4/3/18

Receipt no. 5915

Agd



Th

No. _____

N.F.P./45.

NEWFOUNDLAND CONTINGENT

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

*Ok £3
Av. 11/10/17*

Please remit to

*Brooklands Hospital
Weybridge*

the sum of £ 3 pounds _____ shillings, on
account of any balance that may be due to me.

10551/30,

Regtl. No. 2931 Rank O/C.

Name W. J. Murray

Approved *Murray*
Officer i/c.,

Dated at

Oct 10/1917
Brooklands

1917.

Hospital.



10551/36

12th, October

Brooklands Military

Weybridge, Surrey.

2931

Pte

W. J. Bursey

3. 0. 0.

J

THE BRITISH RED CROSS SOCIETY
AND
THE ORDER OF ST. JOHN.



C. Sgt Maj. Drumphy
has permission to draw
£3 - Three pounds from his
pay book.

also to draw £2 two
pounds for pte Burrey
2931 h 7 2 d

W
H
W
M
Chayer
Walter
Recd no 5307

Brooklands Millit Hosp
 BRANCH
 Pay *Weybridge*
 ACTED UPON *Surrey*
 BY
 18. 2. 18.

Dear Sir.

would you
 kindly let me have
 the sum of £.3. of
 my account. and
 oblige yours.

Sincerely,

2937 Pt. W. Burrey

NEWFOUNDLAND REG. GENL.
 P. RECORD OFFICE
 Ref. No. *1731*
 Recd. *Dr Brooklands*
 Ack'd.
 Am'd.
 Date

Weybridge
Weybridge
A. Reed

OK
 £3.0.0
 19/2/18
 Receipt No. 5767



No. 2931 Rank Plt Name W. Pursey

Pay	F.A.	Wkr	Total	N. H. 8. 1933
100	10		110	
Less Allotment			60	R.R.
Net Rate			50	

DEBITS	Date	£ s d		CREDITS	Period		Days	Rate	£ s d		
					From	To					
Balance				Balance		21 ¹ / ₇			18	11	4 ¹ / ₂
Acquittance Rolls				Pay @ Net Rate	22 ¹ / ₇	11 ¹ / ₈	141	50	14	9	9 ¹ / ₂
Hospital Advances		2	18								
A.B. 64.											
P.&.R.O. Payments		20	11	10 day Ration						17	6 ¹ / ₂
R.A. 853				Accum C 1/9						7	0 ¹ / ₂
				R.A. 853							
Receipt No 7087	11/5/18	10	15								

33-18-7
 7-0
 34-5-7¹/₂

23-9-6¹/₂
 7-0
 25-16-6¹/₂

~~10-2-1~~
 10-16-1¹/₂

E. R.
 11/5/18

2931 St. W. Burrey.

Dandsworth

Ward B.3.

Nov 3rd 11-19

Dear Sir.

Would you kindly oblige Mr. Jay letting me know the balance on my account.

Yours Sincerely
O. W. Burrey.

1ST N ^o	ISLAND REGIMENT
P ^o	POST OFFICE
P ^o	✓ 6512
	- 5 NOV 1917
J.	<i>[Signature]</i>
3 rd	<i>[Signature]</i>
File No.	<i>[Signature]</i>

BRANCH
<i>Bay</i>
ACTED UPON
BY <i>F.H.M.</i>
DATE <i>6/11/17</i>

No. 7931 Rank *1st Lt* Name *Bursey W.*

Pay	MA.	REG	Total
<i>100</i>	<i>10</i>		<i>110</i>
Less Allotment			<i>60</i>
Net Rate			<i>50</i>

W. Bursey

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£ s d			
						From	To						
Balance													
Acquittance Rollis					Balance						<i>18</i>	<i>11</i>	<i>4</i>
Hospital Advances		<i>2</i>	<i>19</i>	<i>6</i>	Pay @ Net Rate	<i>22</i> ^{<i>7</i>} / _{<i>7</i>}	<i>24</i> ^{<i>4</i>} / _{<i>8</i>}	<i>124</i>	<i>50</i>	<i>6200</i>	<i>12</i>	<i>14</i>	<i>9</i>
A.B. 34					Ration Allow.								
P. & R.O. Payments		<i>11</i>	<i>0</i>	<i>0V</i>	<i>24-4-18 to 27-4-18</i>								
					<i>4 days @ .19</i>							<i>7</i>	<i>0</i>
	<i>13-19-6</i>												
		<i>8</i>	<i>10</i>	<i>0</i>									
					<i>17.13.7</i>								

Receipts 7733 ³⁴/₁₁

31-13-1

W.C. 24-4-18

OK
£3-0-0
WHA

6299/24

Brooklands Military Hospital
Weybridge
Surrey.

June 26 - 17

Sir
Would you be kind enough to
forward me the sum of three pounds £3
of my pay & oblige yours
faithfully

Be Walter Burrey No 2931
1/4th Chesham Road Regt

Sanctioned by
Signed *Chapman*
Wattm.



BROOKLANDS MILITARY HOSPITAL	
PAY & RECORD OFFICE	
Ref. No.	2379
Rec'd.	JUN 27 1917
Acc'd.	
Ans'd.	28-6-17 (6324/25)
File No.	

6324/25.

28th June,

Brooklands Military
Weybridge, Surrey.

2931

Pte.

W. Bursey. 1st Nfld Rgt.

3: 0: 0.

Answered
sent Jones
2/29/17

Brooklands Military
Hospital

Weybridge

Surrey

Aug 25th/17

Dear Sir.

Just a line to ask you
if there is any possibility of getting
a small sum of my money. Now
that I am up and going around
on crutches I would very much like
to have some extra cash. And I
would be very thankful if you
would be so kind as to let
me have some. Please let me
know.

Yours Sincerely

Pte. W. Bursary Rgt No 2931

No. _____

N.F.P./45.

NEWFOUNDLAND CONTINGENT

6072/32.

ask.
L3.
R.R.
25/8/17.

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

Please remit to

W. J. Burray.

the sum of £ 3. pounds _____ shillings, on
account of any balance that may be due to me.



Regtl. No. 2931 Rank Plt

Name W. J. Burray

Approved [Signature]

Officer i/c.,

Medical i/c. Brooklands Hospital.

#048

Dated at

Brooklands

Aug 22nd 1917.

6072/32 25/8/17

8872/32

25th, August

Brooklands Military

Weybridge, Surrey.

2931

Pte

W. J. Burrey

3. 0. 0.

both
left arms.

Claret to the front
and 1" below shoulder straps.

Answer JDS
6/9/17

Brooklands Military
Hospital

Weybridge

Servant

Sept 2nd /17

Dear Sir.

I receive your Reply
a week ago. and I thank you
very much for so kindly sending
me these forms. I filled one
out the same day and the
Matron signed it for me. and
sent it up. I got the money a
few days ago O.K.

By the way please let me know
the correct way of wearing the
Colours.

Yours Sincerely

Dr. Berridge No 2931

1ST N. F. L. D. REGIMENT
PAY & RECORD OFFICE

Ref. No. *V 121*

Rec'd. *23 NOV 1917*

Ack'd. *[Signature]*

Ans'd. *[Signature]*

Dear *Sir.*

File No.

BRANCH *3rd*

ACT UPON *By*

BY *[Signature]*

DATE *20/11/17*

*London Gen Hospital
Ward. B. 3.
Wandsworth.
Nov 19/17*

*Will you kindly oblige
me with £. 2. of my account.*

OK A.C.

£2-0-0 23/11/17.

*Approved by
M. Schwartz
C. S.*

yours sincerely.

*2931 M. W. Burrey.
1/1st N. F. L. D. Regt
Wandsworth.*

129/6/141

12796/141

24th, November

3rd. London General

Wandsworth, S. W. (18).

2951 Pte. W. Bursay

£2. 0. 0.



3 1ST. NEWFOUNDLAND REGIMENT 2

ALLOTMENTS

I Walter Bursey, Regl. No. 7931
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
Dollars and Sixty Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons
 concerned, viz.:

Allotment begins August 1st 1916

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
2741	Mother	Mrs Mary Bursey	101 Borne Rd.	60
		Commencing		
		19/16		
Total Allotment, \$				

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

(Sig.) Charles A. O'Connell
 Officer Commanding
Company
28
July 28 1916

(Sig.) Walter Bursey
 (Rank) 7^c

Bursey, D

2931

Ray sept

COPY.

This space to be left blank for the Chelsea Number.

[Blank box for Chelsea Number]

Proceedings on Discharge.



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

No.	<u>2931</u>	Army Rank	<u>Private</u>	
Name	<u>Bursey Walter John</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>			
Corps	<u>ROYAL NEWFOUNDLAND REGIMENT.</u>			
Battalion, Battery, Company, Depot, &c.	<u>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)</u>			
Date of discharge	<u>June 25th 1918</u>			
Place of discharge	<u>St. John's. Nfld.</u>			
1.	Description at the time of discharge.			
Age	<u>21</u> years <u>3</u> months	Descriptive marks.		
Height	<u>5</u> feet <u>4</u> inches	<u>Amputation Left Leg (above knee)</u> <u>Fractured Forearm Left</u> <u>2 Scars Right Arm</u> <u>Scars on Back & Abdomen</u>		
Chest measurement	girth when fully expanded _____ ins. range of expansion _____ ins.			
Complexion	<u>Fresh</u>			
Eyes	<u>Brown</u>			
Hair	<u>Brown</u>			
Trade	_____			
Intended place of residence (To be given as fully as practicable)	<u>10 Ganges Road, St. John's, Newfoundland</u>			
<small>(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)</small>				
2.	The above-named man is discharged in consequence of <u>Wounds received in Action</u>			
<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>				
To be filled in on the soldier quitting the Colours.	3.	Military character: - <u>Very good</u>		
	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.				
			Initials of Commanding Officer.	
Army Form B. 2068 has been issued to*				

5. He is in possession of the following number of G.G. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class _____

6. Campaigns, Medals and Decorations

Certificate of education

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place) _____

(Date) _____ Commanding _____ Battrn. _____ Regiment.

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) Holms Rd. W. Bursey (Signature of Soldier)

(Date) June 25th 1918 Albert S. Smith (Signature of Witness)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. *Additional certificate in the case of a soldier who takes his discharge at his own request.*

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier)

10. *Statement of service.*

Service towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service " " _____ (the date of confirmation of discharge) " " "

Total " " "

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for _____ (date)

(Place) _____

Signature _____

(Date) _____

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

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.)

— Nil —

COPY!

Descriptive Return of a Soldier discharged on account of Disability.

13472
H5
Left

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.

This 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 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.1.

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

A Name in full Walter Bursley
Regiment from which discharged ROYAL NEWFOUNDLAND REGIMENT.
Regimental Number 1931
Where born (Parish, Town and County), and when St Johns Newfoundland
Intended address 101 Bayside Road Newfoundland

27th March 1897

Height on discharge 5 Feet 4 Inches
Colour of Hair on discharge Brown Colour of Eyes Brown
Descriptive marks Amputation left leg (above knee) Complexion Fresh
Figure on discharge Normal
Christian name of Father dead
Christian name of Mother Mary
Wife's Maiden name in full }
Date and Place of Marriage } Single
Christian names of Children } 2 Sons Pt Arm
Scars on Back
Abdomen
Nature and locality of civil employment desired undecided



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) Walter Bursley

Station Roehampton SW (Rank) Private
Date 18/4/18.

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.

Station Queen Mary's Conv. Hospital Walter Nicholson Capt Jnr Medical Officer i/c
Queen Mary's Conv. Hospl. 4 Col Commandant
Date 18-4-18

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.

LAST PAY CERTIFICATE

ORIGINAL

N.F.P./94

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

Regtl No. 2931 Rank Pte Name W. Bursey Unit Royal Wfld. Regt. who was Repatriated
to Newfoundland on 22/5/18 Authority A. F. B. 179 Cause Class A.

DR.

STATEMENT OF ACCOUNT

	PARTICULARS			£ s d			PARTICULARS			£ s d			CR.
PERIOD: From 22/12/17 to 22/5/18	Balance Dr. from				Balance Cr. from 21/12/17								
	Allotment 152 days @ .60	91	20		Pay 152 days @ \$ 1.00				152	00			
	Cash Payments: P. & R. O.				Field Allowance 152 days @ \$.10				15	20			
	Hospital Advances				Other Allowances days @ \$				167	20			
	Other Debits:				Other Credits:								
					Ration Allowance.								
					24/4/18-27/4/18, 4 days 1/9								7 0
					11/5/18-22/5/18, 12 " 2/1							1	5 0
	Total Debits				Total Credits								
	Balance due by Paymaster				Balance due to Paymaster							54	10 5
											54	10 5	

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

191

(Place)

(Date)

O.C. " " Company.

Made up/Checked in accordance with information received in the Pay & Record Office London, S.W. to 21/5/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

21-5- 1918

A. J. Munnell Maj.
Chief Paymaster & Officer i/c Records.

COPY.

Army Form B. 103.

Regimental Number 2931

Casualty Form—Active Service.

ROYAL NEWFOUNDLAND REGIMENT.

Regiment or Corps ROYAL NEWFOUNDLAND REGIMENT.
 Rank Plt Surname Burse Christian Name W. John
 Religion Methodist Age on Enlistment 18 years 4 months
 Enlisted (a) St. Johns Terms of Service (a) Duration Service reckons from (a) 3/7/16
 Date of promotion to present rank Date of appointment to lance rank
 Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and rate
 Occupation Signature of Officer



Report	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
From whom received		Embarked <u>Shanilton</u>	<u>30/1/16</u>	
		Disembarked <u>Rouen</u>	<u>11/2/16</u>	
<u>Unit</u>	<u>Joined Battalion</u>	<u>France</u>	<u>12/2/16</u>	<u>B213</u>
	<u>With Battalion</u>		<u>23/1/17</u>	
<u>Plt Unit</u>	<u>Wounded in Action</u>	<u>France</u>	<u>1/3/17</u>	<u>B213</u>
<u>11 Sts Hoop</u>	<u>Adm Dangerously Ill</u>	<u>Rouen</u>	<u>5/3/17</u>	<u>Memo 1/01520)</u>
<u>68th</u>	<u>Trans & Wds Severe</u>	<u>London CCS</u>	<u>1/3/17</u>	<u>ExD 881</u>
<u>11 Sts Hoop</u>	<u>Ad do Sang ill</u>	<u>Rouen</u>	<u>5/3/17</u>	<u>Memo 1/0521</u>
<u>"Warilda"</u>	<u>Invalided to England</u>		<u>17/4/17</u>	<u>W 9883</u>
	<u>(sgd) E. Tooline</u>	<u>London</u>		
	<u>9/6 Plt, Reg Imp Sect</u>			
	<u>Col'd 3rd Echelon</u>			

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, &c. W. 8635—M2733 2000m 9/17 (55611). C. P. & S., Ltd., Form B.103/103/11807. P.T.O.

LAST PAY CERTIFICATE

**DUPLICATE
MAIL COPY**

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.F./19, 22/5/17.

Regtl No. 2951 Rank Pte Name W. Bursey Royal Nfld. Regt. 152
 to Newfoundland on 22 5 18 Unit A. F. B. 179 who was Repatriated
 Authority A. F. B. 179 Cause CITER A.

DR. STATEMENT OF ACCOUNT

	PARTICULARS	£	s	d	PARTICULARS	£	s	d	CR.
	Balance Dr. from				Balance Cr. from <u>21/12/17</u>				£18 all 4
	Allotment <u>152</u> days @ <u>.60</u>	91	20	18 14 9	Pay <u>152</u> days @ <u>1.00</u>	152	00		
	Cash Payments: P. & R. O.			30 5 0	Field Allow <u>152</u> days @ <u>10</u>	15	20		
	Hospital Advances			5 19 6	Other Allowes days @ <u>10</u>	187	20		34 7 1
	Other Debits:				Other Credits:				
					Ration Allowance.				
					<u>24/4/18-27/4/18, 4 days 1/9</u>				7 0
					<u>11/5/18-22/5/18, 12 " 2/1</u>				1 5 0
	Total Debits			52 19 5	Total Credits				54 10 5
	Balance due by Paymaster			1 11 2	Balance due to Paymaster				54 19 5
				54 10 5					

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

(Place) _____ (Date) 1918

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

Pay & Record Office, London,

O.C. " _____ " Company
London, S.W. to 27 5 18

Chief Paymaster & Officer i/c Records.

21-5- 1918

CHECKED
 JKH
 2/5/18
 PERIOD: FROM 22/12/17 TO 22/5/18

Aug 5/18
Petty Harbour

Dear sir

This allotment
as been made out for
the July 1st but the
card as been mislaid
so see that it
must be this time

~~from~~ from pte A Pursey
on guard at Petty Hr.

Archie Pursey & Elmary Verge
married June 2nd 1918.

Marriage cert. presented, Aug. 5th 1918

[Signature]

Soldier on
whose account claim
made from Army June 20, 1918
FIRST NEWFOUNDLAND REGIMENT.

MOTHER

(Separation Allowance Branch.)

THIS STATUTORY DECLARATION is to be filled in correctly in
detail and a complete reply, must be given to each question.
Each statement is considered as being made on Oath and the
Form is to be signed before a Barrister of the Supreme Court, Stipendiary
Magistrate, Notary Public or Justice of the Peace, and returned
to.

THE PAYMASTER
Separation Allowance Branch,
St. John's Nfld.

1. Name in full of Soldier. Rank Reg't. or Unit Reg't. No.

Walter John Bursay Pte. 1st Nfld Regiment 2931

2. Age of Soldier

19 years

Married or Single.

Single

3. Name in full of Mother Age Occupation Permanent Address.

Mary Bursay 50 101 Barnes Road

4. Give name of your husband. Age Occupation Where employed.

John Bursay 64

5. If your husband is not supporting you state the reason.

6. If your husband is a chronic invalid and totally incapacitated state nature of malady. A medical certificate must be enclosed with this document stating from what date husband has been totally incapacitated and for how long incapacity is likely to continue.

7. If you are a widow, state date and place of death of your husband.

Died January 8th 1908 at 101 Barnes Road

8. Have you married again since death of above mentioned husband?

NO

9. Names of your other Children Address in Full. Age. Occupation Married or Single.

Frederick A Bursay 101 Barnes Rd 24 years Printer

10. State amount earned by (a) yourself (b) Your husband

none

11. State amount and source of any other income.

12. State value of Real Property belonging to you and your husband.

13. State value of personal property belonging to you and your husband.

14. If husband is dead state value of Real and personal Property left by him.

none

15. Actual amount contributed by soldier during the year prior to enlistment.

Four Dollars per week (or \$200 per year)

16. Was this amount contributed weekly or monthly.

weekly

17. Did this amount include payment of son's Board etc.

yes

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

By Goods, Clerk

19. State amount of his wages per week.

Five fifty cents per week

20. State name and address of his last employer.

Son John Anderson

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

All bank & pay for to M.M.

22. State amount of Allotment received by you from son monthly.

Eighteen Dollars

23. From what date did you receive Allotment?

September 1916

24. Actual amount contributed by other children . Weekly

\$7.00

25. Are any of these children in the employ of you or husband?

26. If not receiving support from other children state cause, Explain fully.

27. With whom are you residing at present.

Son

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

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

no

30. Are you in receipt of any payment from any Patriotic Fund? If so, How much.

no

31. Was the Soldier at time of his enlistment an employee of the Newfoundland Government.

no

32. In what capacity and in what place.

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

no

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

Signature of Applicant..... *May S. Bursley*

Place of Residence *101 Barnes Road*

Declared and subscribed before me at..... *St. John's Nfld.*

this *Fourth* day of..... *February*.....1918

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

Geo. J. Bond
Not. Minister

Chas. Edmund
Notary Public
and Barrister

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

Signature of Clergyman *Geo. J. Bond Not. Minister*

Signature of Member of Patriotic Fund Committee. *[Signature]*

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any 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 *Walter*..... 2. Surname *Burse*.....

3. Rank *Pvt.*..... 4. Regt. No. *2937*.....

5. Address in full to which future payments of gratuity are to be forwarded *101 Bannis Road City*.....

6. Date of enlistment in the Regiment *July 3rd 1916*.....

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. *There has been nothing granted or yet allotment is...*

8. Relationship of such dependents *Mother Mrs. Mary Burse*.....

9. Address in full of such dependent *Mrs. Mary Burse 101 Bannis Road*.....

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *No*.....

11. Were you on active service only in Nfld. If so, give dates and particulars of such service. *No I was Overseas*.....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas *Overseas 1 year and 358 days*.....

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

No "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.....

Yes. The sum of Eighty Six Dollars ⁴⁰/₁₀₀ Paid to Me by J.M. Hawley.....

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

Yes.....

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

No.....

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

"Not applicable".....

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

No.....

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

"Not applicable".....

19. Are you now serving in the Regt.?..... If not give:- (a) Date of discharge.....

Jan. 25th 1919. (b) Reason for discharge.....

on account of wounds received in action......

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.....

Yes in ^{France} 1916 - 1917......

21. (a) Are you receiving treatment from the Civil Re-Establishment Committee?.....

No.....

(b). If so, are you in receipt of full pay and allowances from that Committee?.....

No.....

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

Signature of Applicant: *Walter Bursky*

Place of Residence: *101 Barnis Road*

Declared before me at:

This *1st* day of *March* 19*49*

Walter Bursky
Walter Bursky

Signature of Barrister of the
Supreme Court Stipendiary Magis-
trate *Walter Bursky*, Justice of the
Peace and Commissioner of affidavits.

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	<i>460.00</i>	<i>280.00</i>
.....
.....
Certified Correct,			Paymaster.	

Signature of Applicant: _____

Place of Residence: _____

Declared before me at: _____

This _____ day of _____ 19____

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....
.....
.....
Certified Correct,			Paymaster.	

Signature of Applicant: _____

Place of Residence: _____

Declared before me at: _____



This Form is to be used in connection with Pamph. 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.

Examination of *Walter Bury*
aged *18* conducted at *C L B*
Date: *May 29/16* Recruiting Officer:

NO OF TEST	FINDING
1	<i>no</i>
2	<i>no</i>
3	<i>no</i>
4	<i>no</i>
5	<i>no</i>
6	<i>no</i>
7	<i>yes</i>
8	<i>yes</i>
9	<i>no</i> ← <i>no</i>
10	<i>E</i>
11	<i>E</i>
12	<i>E</i>
13	<i>E</i>
14	<i>E</i>
15	<i>E</i>
16	<i>E</i>
17	<i>E</i>
18	<i>E</i>
19	<i>6/9 Both</i>
20	<i>E</i>
21	<i>T</i>
22	<i>T</i>
23	<i>E</i>
24	<i>E</i>
25	<i>T</i>
26	<i>T</i>
27	<i>T</i>
28	<i>T</i>
29	<i>T</i>
30	<i>T</i>
31	<i>T</i>
32	<i>E</i>
33	<i>yes 10 years ago 1 left arm</i>
34	<i>5-4</i>
35	<i>153</i>
36	<i>25/35</i>
37	<i>£ 35-00 per month</i>
38	<i>Mother Mrs. John Bury 11 Barnes Rd - City</i>
39	<i>none</i>

Walter Bury
29/31

JW

Signature of Medical Examiner: *JW Borden*

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 63²⁷

June 25th 1918

Received from the First Newfoundland Regiment
the sum of Sixty three Dollars.
on account of Pay.
balance

J.P.H. W. Bursey

Ch. No. <u>8071</u>	Initials <u>EW</u>
<u>218</u> Pay Ledger <u>RA</u>	Initials <u>EW</u>
Gen. Ledger <u>RA</u>	Initials <u>EW</u>

Regtl. No. Rank

No. 2931

Rank. Pte

Name W. Bursey

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 15⁰⁰

June 4 1918

Received from the First Newfoundland Regiment
the sum of Fifteen Dollars.
on account of Pay.
balance

Pt. W. Bussay

Regtl. No. 2931 Rank -

Ch. No. <u>1780</u>	Initials <u>ew</u>
Pay Ledger <u>[Signature]</u>	Initials <u>[Signature]</u>
Gen. Ledger <u>[Signature]</u>	Initials <u>[Signature]</u>

[Signature]

No. 2931 Rank Pte.

Name H. Bussey

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 35⁰⁰/_x

Mar, 19 19

Received from the First Newfoundland Regiment
the sum of Thirty five ⁰⁰ Dollars.
~~on account~~ of Pay. Clothing
balance

Ch. No. 12041	Initials. E.W.
Pay Ledger 28	Initials. E.W.
Gen. Ledger.....	Initials.....

Regtl. No. 2931 Rank P. Pet
W. J. Bossy

No. 2931

Rank

Plt

Name

Bursey W J

5. P. A. S. T. 20. 1921

1921

F

ON HIS

MAILED
07 5 31 PM
1921

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S, Nfld.

SEP 16 1921

1921.

The accompanying Victory Medal and/or British War Medal

Bursey

respect of his service as No. **2931** Rank **Pte**

me **W.J. Bursey** Royal Nfld. Regt.
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received

Tuesday

Signature

W.J. Bursey

Date

20/9/21

Address

*101 Barnes Rd. or c/o John
Anderson City*

[P.T.O.]

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

The Royal Nfld Regt.,

Dept of Militia,

St. John's Nfld.

Fold Here



July 5th. 1921 1919.

The accompanying King's Certificate, on his discharge,

(No. 1043), is forwarded herewith to

Walter J. Bursey,

in respect of his service as No. 2931 Rank Pvte,

Name W. J. Bursey Corps Royal Nfld Regt.

Receipt of the same should be acknowledged hereon.

Received 23/7/21

Signature 2931 Walter J. Bursey *WJ*

Date 31/7/21

Address 101 Barnes Rd.

D 2931.

St John's, Nfld.,

June 26th, 1918

O.C.
Royal Nfld. Regt.
Headqtrs.

Sir;-

The undermentioned man has been discharged on the date given.

Kindly note and post in D.O. Pt. II.

I have the honour etc.

(sgnd) J.M.HOWLEY

Capt. etc.

2931 Pte. W. Burse

June 25th, 1917

Med, Unfit

Reg. No. 2931 Rank Pvt Name Bursey W.

Attested..... Address 101 Barron St

Allotment..... Allottee

Date of Allotment..... Returned from Overseas 1-6-18

Embarked for Overseas..... Cause.....

11/6/19
126-18

see discharge PM
sent pay to allow
Discharged 24th 1/18 DoD 115

Originals

This space to be left blank for the Chelsea Number.

[Blank box for Chelsea Number]

Proceedings on Discharge



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

No. 2931 Army Rank Private

Name Bursey Walter
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps ROYAL NEWFOUNDLAND REGIMENT.

Battalion, Battery, Company, Depot, &c.
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge _____

Place of discharge _____

1. Description at the time of discharge.

Age <u>19</u> years _____ months	Descriptive marks. <u>Amputation Left Leg (above knee)</u> <u>Fractured Forearm Left</u> <u>2 scars Right Arm</u> <u>Scars on Back & Abdomen</u>
Height <u>5</u> feet <u>4</u> inches	
Chest measure { girth when fully expanded _____ ins. range of expansion _____ ins.	
Complexion <u>Fresh</u>	
Eyes <u>Brown</u>	
Hair <u>Brown</u>	
Trade _____	
Intended place of residence { <u>101 Barnes Road</u> <u>St Johns</u> <u>Newfoundland</u>	

(The measurements and description should be carefully taken on the day the man is sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of Wounded received in Action.

COPY SENT TO
O.C. H.Q.
ST. JOHNS, N.F.L.D.
RECEIVED
NO. 21 MAY 1918
DATED

(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.)

3. Military character:—

4. Character awarded in accordance with King's Regulations:—

To be filled in on the soldier quitting the Colours.

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.

Initials of Commanding Officer. _____

Army Form B. 2068 has been issued to*

* Strike out if not applicable.

[OVER.]

Original of Amputation, Amputation left High 2 1/2 in. 1888
Station Applied 113472

29/1/18

Army Form B. 179.



Medical Report on an Invalid.

Station 3rd London General Hospital, WANDSWORTH, S.W.

Date 1/12/17

- 1. Unit 1st Newfoundland
- 2. Regimental No. 2931.
- 3. Rank Private.
- 4. Name Burrey, W.
- 5. Age last birthday 19.
- 6. Enlisted on 3rd July 1916.
at St. Johni

- 7. Former Trade } Draper.
or Occupation }
- 7A. If with previous service in Army, state—

- (a) Former Unit;
- (b) Regimental No.;
- (c) Date of Discharge;
- (d) Cause of Discharge.

COPY SENT TO
 O.C. H.Q.
 ST. JOHNS, N.F.L.D.
 No. 8007/56
 21 MAY 1918

8. Disability in respect of which invaliding is Proposed.

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

S.S.W. L. Leg & L. Forearm
(Amputation left High)

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. March 1st 1917
- 10. Place of origin of disability. Comble
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.
Patient was wounded in L. Forearm & Leg while in support trenches. Taken to 11th Stab. Hosp. Kriem when amputation was performed above L. Knee for gas gangrene. Admitted here on 17. April 1917. Wounds are healed there was a fracture of L. Ulna.
- 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).
Active Service S.S.W.
 - (b) constitutional or hereditary, and not aggravated by service during the present war.
 - (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

13. What is his present condition?

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

Wounds are quite healed. Slight weakness of L. elbow. Amputation stump is sound.

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

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

*Yes
Yes
Yes
Yes*

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

No

If so—(a) When?

(b) Where?

(c) Opinion?

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

Yes. Amputation of Leg

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.

20. Do you recommend—

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

Yes

M. Schwartz C.S.

Officer in medical charge of case.

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

~~except~~

3rd London General Hospital,
Station, WANDSWORTH, S.W.

H. E. Prince Foster

Officer in charge of Hospital.

Lt. Col. R.A.M.C.T.

Date 2/15/17

Comdg. 3rd. London Gen. Hospital.

*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.

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.

Wounds are quite healed. Slight weakness of L. elbow. Amputation stump is sound

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

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

*Yes
Yes
Yes*

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

No

If so—(a) When?

(b) Where?

(c) Opinion?

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

Yes. Amputation of Leg

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.

20. Do you recommend—

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

Yes

M. Schwartz C.S.

Officer in medical charge of case.

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

~~except~~

3rd London General Hospital,
Station WANDSWORTH, S.W.

H. E. D. Porter

Officer in charge of Hospital.

Lt. Col. R.A.M.C.T.

Date

2/12/17

Comdg. 3rd. London Gen. Hospital,

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

Opinion of the Medical Board.

Notes.—(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—

(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.

(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 ?

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.

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 ?

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 ?

Yr.

E.S.W. (2)

✓

Yr

100 for $\frac{2}{12}$ and then 70%

✓

Yr

*}
}*

limit fitted

Station London General Hospital,
Date 10 MAY 1918,

Station WANDSWORTH HOSPITAL,
Date 10 MAY 1918

Jenkins Major President.
H. M. ... C. M. O. Members.

Jenkins Administrative Medical Officer.



Opinion of the Medical Board.

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

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

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

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

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

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

(i.) Service during the present war;

(ii.) Climate;

(iii.) Ordinary military service;

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

(v.) Whether it is constitutional or hereditary.

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

Yes.

E.S. - W. (2)

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

✓

23. **Is he fit for discharge from the service as an out-patient, and will he require out-patient treatment on discharge from Hospital?**

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.

100 for 2/12 and then 10%

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.

3

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

None fitted

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

Station 2nd London General Hospital, Wandsworth, S.W.

Date 1 MAY 1918,

Station 2nd London General Hospital, Wandsworth, S.W.

Date 1 MAY 1918



J. Perkins Major President.

H. M. ... C. M. O. Members.



J. Perkins Administrative Medical Officer.

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

MEDICAL HISTORY

Surname Bursey OF Christian Name Laete

Table 1.—GENERAL TABLE.

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on 30 th day of May 1916 at St John's		on _____ day of _____ 191	
Declared Age	18 years 4 mos 66		_____ years _____ days	
Trade or Occupation	Black			
Height	5 feet 4 inches		_____ inches	
Weight	133 lbs		_____ lbs.	
Chest Measurement	Girth when fully expanded... 38 inches		_____ inches	
	Range of expansion... 8 inches		_____ inches	
Physical Development				
Vaccination Marks	Arm _____		Arm _____	
	Number _____		Number _____	
When Vaccinated	10 years ago			
Vision	R.E.—V= 6/9		R.E.—V= _____	
	L.E.—V= 6/9		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>Lemont Paterson</u>			
(Rank)	Major			
	Medical Officer.		Medical Officer.	
Enlisted	at St John's on 30 day of May 1916		at _____ day of _____ 191	
Joined on Enlistment	100th Field Regiment Newfoundland		Corps. _____ Regtl. No. _____	
Transferred to	Newfoundland		Corps. _____ Regtl. No. _____	
Became non-effective by				
(Signature)				
(Rank)				



COPY SENT TO
O.C. H.Q.
ST. JOHNS, N.F.L.D.
P.38. No. 8007/56
DATED 21 MAY 1918

Table II.—Only for admission to hospital or to the sick list in case of Warrant officers treated in quarters.


Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3 London General Hosp. Handsworth	17	4	17	5	3	18	P.S.W. Left leg amput. above knee & arm with fracture of hum.	372	wound in France & amputation of L. leg. knee for gangrene.	Surmously Capt. RAMCO
General Hospital Pavilion, Brighton.	5	3	18	12	4	18	Amput. L. Thigh	38.	Amput L. Thigh - Wd in France 1/3/17 (Shell) causing comp. hic below knee - treated at GH same day & piece of shell removed from leg - Amput. 5/3/17.	J. H. C. Cunn
	12	4	18	11	5	18	Amputation left leg	30	ARTIFICIAL LIMB PROVIDED.	J. H. C. Cunn Q.M. for Captain, Adjutant Queen Mary's Convalescent Hospital.

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

Date	Brief Details, and Signature	
28-7-16	1st Inoculation	T.P. 20
3-8-16	2 nd	20
18-8-16	3 rd	20.
31-8-16	Vacc	20
13-11-16.	Fit. for Foreign service. <i>T.P.</i>	
22.11.16	Dental Treatment Complete.	

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

ward 8

Ward B. Sect. Hospital. P. M.
 No. of Bed 72 Date March 5th 1918

Regl. No.	Rank and Name.	Corps.	Part to be X-Rayed.
<u>2931</u>	<u>Pte. Pursey, W.</u>	<u>1st Newfoundland</u>	

SHORT HISTORY OF CASE.
 (To be completed by M.O. i/c case.)

Left leg

REPORT ON RESULT OF X-RAY EXAMINATION.
 (To be completed by Radiographer.)

No. of Plate 4587

new bone

Signature of M.O. C.H. Dae

Signature of Radiographer C. H. Dae

Date _____

Date 7/3/18

Ward A B London General Hospital. Date 18/4/17
No. of Bed 4

Regt. No.	Rank and Name	Corps	Part to be X-Rayed
<u>2931</u>	<u>Pte Pursey.</u>	<u>1st - H. F. L. D.</u>	

SHORT HISTORY OF CASE.
(To be completed by M.O. i/c case.)

*Left arm
Stretcher.
M.O. Break
Date 18/4/17*

REPORT ON RESULT OF X-RAY EXAMINATION.
(To be completed by Radiographer.)

No. of Plate 26597
J A v B
Una fractured

14. Shows Straps
collar +
2 sequester...

Lawson

Signature of Radiographer _____
Date _____

Notification by President of Medical Board of Approval of a Soldier's Discharge, under Para. 392 (xvi.) King's Regulations.

(To be completed and dispatched on the day on which the discharge is approved.)

To the Officer i/c Records 58 Victoria Street, S.W.

The Soldier named below has appeared before an Army Medical Board at this station, and his discharge from the Service as "no longer physically fit for War Service" has this day been approved. (The discharge will be confirmed for a date 14 days after the date on this notification—see A.C.I. 4623 of 1916.)

Soldier's surname Bursey, Christian names Walter¹⁹¹²
(in full)

Regt. No. and Rank 2931 Pte Regt. or Corps 1 Newfoundland
(If T.F. this should be stated)

His address on discharge will be 101 Barnes Road, St. John's,
Newfoundland.

This information is for the Central Army Pension Issue Office only.

The Soldier states that* Dependants allowance is being issued in respect of him.

*Insert "separation," "dependants," "family," or "no," as the case may be. The space must not be left blank

Army Form D. 400A and Army Form B. 179 for the above-named Soldier are forwarded herewith.



Station _____

Date 10 May 1918.

W. J. G. Smith
President of Board
(Approving Officer)

A set of three forms will be made out for each Soldier whose discharge is approved, and will be dispatched to the officers severally indicated.

Attention is drawn to the fact that Forms A, B and C of each set are not in identical terms.

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.
 This 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 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.1.
 Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

13472
 H5
 Ref: 100

Dep

A Name in full Walter Burssey
Regiment from which discharged 1. Newfoundland
Regimental Number 2931
Where born (Parish, Town and County), and when St John's Newfoundland.
Intended address 101 Barnes Road, St John's Newfoundland. 27th March 1897
Height on discharge 6 Feet 4 Inches
Colour of Hair on discharge Brown **Colour of Eyes** Brown
Descriptive marks Amputation Rft. leg. (above knee) **Complexion** Flesh
Figure on discharge Normal.
Christian name of Father decard. **Christian name of Mother** Mary.
Wife's Maiden name in full 2 sons Rft arm. Scars on Back.
Date and Place of Marriage } Single. " " Adman.
Christian names of Children }
Nature and locality of civil employment desired undecided

COPY SENT TO
 O.C. H.Q.
 ST. JOHNS, N.F.L.D.
 P. 38. No. 222756
 DATED 21 MAY 1918

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) Walter Burssey
 Station Richampton S.W. (Rank) Private
 Date 18/4/18

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.

H. A. [Signature] Lt. Col. Commandant.
 Queen Mary's Convalescent Hospital.
 Date 18 APR 1918



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.

NOTIFICATION that a Soldier has been sent Home from Hospital to await discharge under para. 392 (xvi.) King's Regulations.

12.4.18

Soldier's } 2931 Rank _____
Regtl. No. }

Name _____
(Surname first)

Corps or Regiment }
(also Unit if known) } *1st New Zealand Exp. Coy*

To Officer i/c of Records _____
38 Victoria St

Regimental Paymaster _____
do



The above-named 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 10.5.18, 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 ~~has been sent to his home~~

He proceeded on (date) 11.5.18
to (full address) 38 Victoria St SW

Date _____
Place 11-5-18

[Signature] Officer Comm.
Hospital.

Three copies to be made; one copy sent to each Officer above-mentioned, and one copy filed in the Office.

ADMITTED (In books of 100.)

12-4-18 Queen Mary's Hospital
NOTIFICATION that a Soldier has been sent Home from Hospital to await Discharge under para. 392 (xvi.) King's Regulations.

Soldier's } 2931. Rank *Sgt*
 Regtl. No. }

Name *Barey, D.*
 (Surname first)

Corps or Regiment } *11 Newfoundland*
 (also Unit if known) } *58 Victoria Sq*

To Officer i/c of Records _____

Regimental Paymaster *do*

The above-named 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 10-5-18, 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 credit of~~

He proceeded on (date) *11-5-18*

to (full address) *58 Victoria Sq SW*

Date _____ *de Lury* { Officer

Comm.

Place _____ *CAPT. R. A. M.* Hospital.

Three copies to be made; one copy sent to each Officer above-mentioned, and one copy filed in the Office.

5103

QUEEN MARY'S CONVALESCENT AUXILIARY HOSPITALS,

ROEHAMPTON HOUSE,

ROEHAMPTON, S.W.

TO THE OFFICER IN CHARGE OF RECORDS.

*Newfoundland contingent**58 Victoria St Westminster*

I beg to inform you that the undermentioned men have been admitted as patients

to this Hospital.

Regt. No.	Rank and Name.	Unit.	Date of Admission.
2931	<i>B Bursley W</i>	<i>Newfoundland</i>	<i>Apr 12</i>

After these men have been fitted with artificial limbs, they will appear before a final Invaliding Board for the purpose of discharge from the Service.

Apr 13 1918.

W. H. Nichol ^{*Capt*} Commandant.
Queen Mary's Convalescent Hospital.

DEPARTMENT OF VETERANS AFFAIRS

To ● Copy for H.O. FILE

Attention of

NAME BURSEY, Walter John.

Dept. of Veterans Affairs
War Service Records

NOV 19 1963

Received at
SERVICE 2931 ROY.
NUMBER NFLD, REGT, WWI
Charged to _____

Ottawa Ont
Date Nov 18/63

C.P.C. No. 260150
W.V.A. No.

NAVY
ARMY X
R.C.A.F.

The DEPARTMENT has received information from

S.P.M.E. St. John's Newfoundland, Nov 12/63

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death Nov 9/63
Cause of Death _____
Place of Death St. John's Nfld.

Name and Address of next of kin (if known) _____

Copies to: W.S.R.
V. I.
~~P.H.~~
~~D.O.~~
H.O.

} Destroy form if advice of death already received.

L.M. Mehan

for
Chief, Central Registry