

# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 5630 Name Samuel Burton Meth

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

1. What is your name? ..... Samuel Burton
2. What is your full Address? ..... } La Seie
3. Are you a British Subject? ..... } Yes
4. What is your age? ..... } 26 Years ..... Months
5. What is your Trade or Calling? ..... } Fisherman
6. Are you Married? ..... } no
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,\* which? } no
8. Are you willing to be vaccinated or re-vaccinated? ..... } 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, Samuel Burton ..... 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.

Samuel Burton ..... SIGNATURE OF RECRUIT.  
P. E. Power ..... Signature of Witness.

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

I, Samuel Burton ..... 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 John's on this 7 day of June 1918

Signature of Attesting Officer .. C. B. Dickson Lieut.

### †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 compiled with. I accordingly approve, and appoint him to the: .....

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

Date ..... 191 .....  
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 5630

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

Name Samuel Burton  
 Apparent age 26 years 0 months. Height 5 feet 5 1/2 inches  
 Chest Measurement { Girth when fully expanded 35 1/2 inches  
 Range of expansion 3 1/2 inches  
 Distinctive marks \_\_\_\_\_

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Moses Burton  
Lucie | Relationship Father

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	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 enlistment engagement reckons from <u>July 6-18</u>									
Joined at <u>M. H. S.</u> on <u>June 7<sup>th</sup> 18</u>									
<u>Discharged August 11 1919</u>									
<u>Embarked M. H. S. S. S. to Malaga N.S. 22-7-18</u>									
<u>To Liverpool about for demobilization 24-6-1919</u>									
<u>Arrived Liverpool 2-7-1919</u>									
<u>Demobilization M. H. S. 5-8-1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 5-8-1919 (date of discharge) 1 years 60 days  
 " " Pensions " [ " " ] " " "

C.R. 5630

extract from daily orders part II Royal Newfoundland Regt.  
Depot St. John's dated Aug. 14th 1919.

The discharge of the undersigned on demobilization has been  
CONFIRMED by officer i/c records from 5-8-19.

5630, Pte. S. Burton.



C.R. 5630

Extract from Daily Orders Part II Unit The Royal HM.  
Regt. St. John's, July 18th, 1919.

The discharge of the undersigned on demobilisation has been  
APPROVED by C.O. Discharge Depot with effect from 22-7-19.

5630 Pte. S. Burton.

C.R. 5630

Extract from Daily Orders Battalion Unit The Royal Nfld.  
Regt. St. John's, July 3rd, 1919.

5630 Pte. S. Burton.

1-7-19

Reported at Headquarters ~~5630 Pte. S. Burton~~ of "Wassandra" which  
sailed Glasgow June 24th, 1919.

C.R. 5630

Extract from Orders by Lieut. Col., B. J. BARTH, Commanding  
Squad, Battalions of the Newfoundland Regiment dated  
Nov. 18th., 1918.

The undermentioned will proceed to join the Newfoundland  
the Newfoundland Forestry Company, on Monday 18th November  
1918.

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#5630 Pte. D. Ghaney.

BC.



C.R. 5630

Extract from Daily Orders part 11, from Unit The Royal  
Hfld. Regt. St. John's, dated July 25, 1918.

The following men embarked for overseas on H.M.S.  
"Columbells" July 22, 1918.

#5630 Pte. Samuel Burton.

C.R. 5630

Extract from Daily Orders Part 2, from Unit, The Royal  
Mfld Regiment, dated June 8th 1918. St. John's.

5630, Pte. S. Burton.

Attested for General Service with the Royal Mfld. Regt.  
from 7/6/18.



Burton, S.

C.R. 5630

P. & R. Co.

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

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

1. Unit and Corps... *Royal Artillery* 7. Former Trade or Occupation } *Fisherman*  
 2. Regtl. No. *5630* 3. Rank... *Pls* 7a. If the soldier claims previous service in Army, he should state—  
 4. Name *Burton, Samuel* (a) Former Regts. or Corps ;  
 (Surname) (Christian Names) with Regtl. Nos.  
 5. Age last birthday. *24*  
 6. Posted for duty on..... at.....  
 in category (or grade).....  
 8. If the disability is an injury was it caused  
 (a) in action (b) on field service  
 (c) on duty (d) off duty ? (b) Date of Discharge ;  
 (c) Cause of Discharge.  
 9. If a Court of Inquiry was held on an injury state :—  
 (a) When (d) Particulars of Pension or Gratuity  
 (b) Where (if any)  
 (c) Opinion of Court

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

### Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here.  
 (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."  
 11. Date of origin of disability.  
 12. Place of origin of disability. *nil*  
 13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *'*  
*'*

14. State whether the disabilities are

(a) attributable to

(b) aggravated by

- (i.) Service during the present war .. .. . ✓ .. .. .
- (ii.) Previous active service.. .. . ✓ .. .. .
- (iii.) Climate in pre-war service .. .. . ✓ .. .. .
- (iv.) Ordinary military service before the war .. .. . ✓ .. .. .
- (v.) Serious negligence or misconduct on the } .. .. .  
man's part. }

14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, etc., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?

(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

*The complainant of no disability*

16. Was an operation performed? If so, when and what was its nature?

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

18. \*In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

20. Do you recommend—

(a) Discharge as permanently unfit?

(b) Change to United Kingdom?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

*Repatriation*

*W.E. Procmier Capt R.A.M.C.*  
Medical Officer in charge of case.

Station *Hardy House*

Date *28-3-19*

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





No. 18535/2027

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,  
2/Bn Royal Nfld. Regt.  
Winchester.

661599

16th November 1918

Subject: 5630, Pte. S. Burton B

With reference to the following telegram ( 9819 ) from the Hon. Minister of Militia, received

Pay to 5630 Burton £4:2:0

Draft £ 4:2:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

*M.P. Hunt*

for Chief Paymaster & O. i/c Records.

November 20 1918

Receipt hereunder

*Chau* LIEUT. COLONEL,  
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.  
Officer Commdg. Batt'n  
Royal Newfoundland Regiment

Received the sum of four  
Pounds 2/- on account of  
cable remittance from Newfoundland.

S Burton

No. 5630 Rank Pte

2930 Pte Stein

No. 8198/1556

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,  
2nd Batt. Ryl. Nfd. Regiment  
Winchester. Hants.

31st May 1919

5630 Pte. S. Burton

With reference to the following telegram from the Minister of Militia / / 19 ( 210 ):

"Pay to- 5630 S. Burton  
£5. 3. 0.

Cheque £ 3. 0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

*R. R. Hampson*  
for Chief Paymaster & O. i/c Records.

June 3<sup>rd</sup> 1919.

Receipt hereunder.

*P. Kamm* <sup>Capt</sup> *✓*  
LIEUT. COLONEL,  
OFFICER COMMANDING 2ND BATT. RYL. NFD. REGT.

*R. N. R.*

Received the sum of Five pounds  
Three Shillings in respect of telegraphic remittance from the Minister of Militia.

S. Burton  
No 5630 Rank Private  
Witness: W. Barnes



No. 2489/390.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding.

2nd/Bn. ERyl Nfld Regt.

Winchester

15th February 1919

February 17th 1919

5630. Pte Burton S. B

Receipt hereunder.

With reference to the follow-  
ing telegram from the Minister of  
Militia / / ( 17.)

*of pay made here*  
for LIEUT. COLONEL.

"Pay to- 5630. Burton.

OFFICER COMMANDING 2ND BR. ROYAL NEWFOUNDLAND REGT.

£5.3.0.

Cheque £ 5-3-0. is enclosed.  
for payment to this Soldier.  
Kindly obtain his receipt  
hereon.

Received the sum of *Five pounds*  
*Three Shillings* in respect of  
telegraphic remittance from the  
Minister of Militia.

Chief Paymaster & O. i/c Records.

*P. Burton*  
No. 5630 Bank *of* *M. Rockett*



*10067423*  
*14/21/19*

No. 18339/1999

N.F.P./79.

From:

NEWFOUNDLAND CONTINGENT

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

To:

Officer Commanding,  
2/Bn Royal Nfld. Regt.  
Winchester.

13th November 1918

November 16 1918

Subject: 5630, Pte. S. Burton

With reference to the following telegram (9654) from the Hon. Minister of Militia, received

Pay to 5630 Burton £2:1:0

Draft £ 2:1:0 is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

*L. H. Marshall*  
Chief Paymaster & O. i/c Records.

Receipt hereunder.

*Exam*  
LIEUT. COLONEL,  
COMMANDING 2ND BN ROYAL NEWFOUNDLAND REGT.  
Royal Newfoundland Regiment.

Received the sum of two  
pounds 1/- on account of  
cable remittance from Newfoundland.

S. Burton  
No. 5630 Rank Pte

Witness 2930 Pte S Stein

No. 21573/2474/P&A

*21573/2474*  
*ob 4/8*

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,  
E/Bn. Royal Nfld. Regt.,  
Hazeley Down Camp,  
Winchester.

30th December, 1918

2 - 1 - 1919

Subject: 5630, Pte. S. Burton.

With reference to the following telegram (11141) from the Hon. Minister of Militia, received

"Pay to 5630, Burton, £4.2.0.

Draft £ 4.2.0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

*H. A. Munnell Maj.*  
Chief Paymaster & O. i/c Records.

*B*

Receipt hereunder.

*[Signature]*  
**LIEUT. COLONEL,**  
**COMMANDING 2nd BR. ROYAL NEWFOUNDLAND REGT.**  
Royal Newfoundland Regiment.

Received the sum of Four Pounds  
Two shillings on account of cable remittance from Newfoundland.

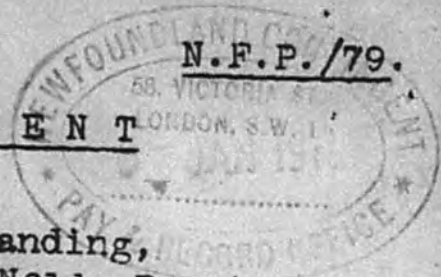
S. Burton  
No. 5630 Rank Pte

Witness A. Munnell



No 21624/2507 P.&.A

*Robert 5507*



NEWFOUNDLAND CONTINGENT

From:

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

To:

Officer Commanding,  
2/Bn. Royal Nfld. Reg t,  
Hazeley Down Camp,  
Winchester.

30th December, 191 8

2 - 1 - 191 9

Subject: 5630 Pte. S. Burton,

With reference to the following telegram (11296) from the Hon. Minister of Militia, received

"Pay to 5630 Burton, £1.0.0.

Draft £ 1.0.0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

*A. H. Marshall*  
Chief Paymaster & O. i/c Records.

Receipt hereunder.

*Robert*  
LIEUT. COLONEL.  
OFFICER COMMANDING  
2ND BN. ROYAL NEWFOUNDLAND REGT.  
Royal Newfoundland Regiment.

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

S Burton  
No. 5630 Rank Pte  
Witness A Maunders

NO. \_\_\_\_\_

N.F.P./79.

102/26/P&A

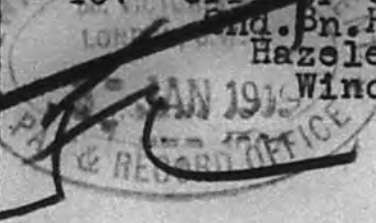
NEWFOUNDLAND CONTINGENT

From:

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

To: Officer Commanding,  
2nd. Bn. R. Newfoundland Regiment,  
Hazeley Down Camp,  
Winchester.

102476  
066527



2nd. January, 1919

Subject: 5630 Pte. S. Burton

With reference to the following telegram (19&20) from the Hon. Minister of Militia, received

Pay to 5630 Burton - £8:4:0

Draft £8:4:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

*A. J. Maunders*  
Chief Paymaster & O. i/c Records.

6-1-1919

Receipt hereunder.

*J. Seymour*  
LIEUT. COLONEL,  
Officer Commanding  
2nd Bn. R. Newfoundland Regiment

Received the sum of Eight  
Pounds four shillings on account of  
cable remittance from Newfoundland.

S. Burton  
No. 5630 Rank Pte

*A. Maunders*

102/26/P&A

Officer Commanding,  
2nd. Bn. R. Newfoundland Regiment.  
Hazeley Down Camp,  
Winchester.

2nd. January, 9

5630 Pte. S. Burton

19&20

Pay to 5630 Burton - £8:4:0

8:4:0

*J & a*



No 5765/838

N.F.F./79.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,  
2nd Batt. Ryl. Nfld. Regt.  
Winchester.

11th April 1919

April 24th 1919

5630 Pte Burton S.

With reference to the following telegram from the Minister of Militia / / ( 130

Receipt hereunder of payment for  
LIEUT. COLONEL,  
OFFICER COMMANDING 2ND BR. ROYAL NEWFOUNDLAND REGT.  
A.R.R.

"Pay to-5630 Burton S.  
£5. 3. 0.

Received the sum of Five pounds  
Three Shillings in respect of  
telegraphic remittance from the  
Minister of Militia.

Cheque £ 5. 3. 0 is enclosed.  
for payment to this Soldier.  
Kindly obtain his receipt  
hereon.

P. Burton  
No. 5630 Rank Private  
Witness B. Shave

A. J. [Signature]  
Chief Paymaster & O. i/c Records.

Burton, S

5630

Ray Leph

August 11th 1919.

Mr. S. Burton.

LaSche.

Dear Sir:

Referring to your application, I enclose  
cheque for seventy dollars (\$70.00) being amount  
of first payment due you on account of war Service  
Gratuity.

Yours truly,

Capt. &

Paymaster.

RS/.



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 questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C

RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

Christian name, *Samuel* 2. Surname, *Durston*

3. Rank, *Pte* 4. Regt. No. *5630*

5. Address in full to which future payments of gratuity are to be forwarded, *La Scie, St. J.B.*

6. Date of enlistment in the Regiment, *June 7/18*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge, *No*

8. Relationship of such dependents, *No*

9. Address in full of such dependents, *No*

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 Hfd. If so, give dates and particulars of such service, *Ireland only*

12. Give total length of time which you served on active service, whether in Hfd. or Overseas, *6 yrs*

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

..... *No* .....

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

..... *No* .....

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

..... *No* .....

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

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

..... *No* .....

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?

..... *No* .....

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

..... *No* ..... (a) *August 5/1918* (b) Reason for discharge. *Dismissed from camp*

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 England only* .....

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

..... *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.

*S Burton*

Signature of Applicant:

Place of Residence:

*La Scie St. B.*

Declared before me at:

*St Johns*

This

*8th* day of *July*

19*.19...*

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

*John A. Carthe*

POST DISCHARGE PAY.

Date paid	Paid	Paid	War Service	Net amount
	Soldier.	Dependent.	Gratuity.	due

.....

.....

.....

.....

.....

Certified correct.

Paymaster



August 5th 1919.

#5630, Pte. S. Burton,  
LaSalle.

Dear Sir:

Enclosed please find Discharge Certificate  
# 2239.3392.

Yours truly,

Capt. & Paymaster  
Officer i/c Records.

RS/.

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 5630 Rank Pvt Name Burton S  
 Intended place of residence La Scie

2. Occupation Fisherman  
 Classification of soldier E Medical Category A1

3. The above named man is discharged in consequence of  
**DEMOBILIZATION**  
**Eligible for War Service Gratuity**

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.  
 Place, ST. JOHN'S  
 Date JUL 8 1919  
 Commanding Discharge Depot  
 The Royal Newfoundland Regiment

### CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.  
 Place, ST. JOHN'S  
 Date JUL 8 - 1919  
 Signature of soldier S. Burton  
 Signature of witness James O. Newman

### CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.  
 Place, ST. JOHN'S  
 Date JUL 8 - 1919  
 Signature of soldier S. Burton  
 Signature of witness James O. Newman

### STATEMENT OF SERVICE

7. Enlisted for service 31-5-18 No. of days on Military  
 Discharged from service 22-7-19 Plus 14 days Service 432

### APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge, The Royal Newfoundland Regiment, twenty-eight days from date.  
 Place, ST. JOHN'S  
 Date JUL 22 1919  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment

### CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.  
 Place, ST. JOHN'S  
 Date August 5/1919  
 Officer in Charge  
 The Royal Newfoundland Regiment

AWB 2679/3392

24  
31  
5  
60

# The Royal Newfoundland Regiment

Class for Demobilization: 96

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 7.7.19

Regimental No 5638

Name Burton Samuel

Rank Pfc

Address La Scie St. Marks

Present Medical Category A 1

Recommended for:—

(a) Immediate discharge

(b) ~~Standard Medical Board~~

Members of Board

R.H. Lant Major  
O.C. Discharge Depot.

Paterson  
Senior Medical Officer

Swinden  
M.O. Depot.



# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 5630 Rank Private Name Burston J  
 Date of Enlistment 3-10-18 Address La Plue District Parish  
 Occupation Fisherman Classification for Discharge 1 Medical Category 1  
 Recommendation S.M.B. .... Disability Rating .....

Passed to Demobilization Officer with following documents:—

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

Date 7-7-19 .....

O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

**1. Civil Re-Establishment.**

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

Particulars passed to Vocational Officer for information and action.

Date.....

**2. Clothing.**

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$6.00 .....

(b) ~~Clothing~~ Supplied all clothing .....

Date 8-7-19 .....

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 9847 to his home at La Sore and Release Certificate No. 3312 issued.

Date 8-7-19 J.A. Snow  
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 5-8-19

Date 8-7-19 J. W. Stewart  
Depot Paymaster.

Discharge approved for 22-7-19

Forwarded with following documents to O.C Discharge Depot.

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

2 Form B

Date 8-7-19 J.A. Snow  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

**JUL 22 1919**

Date ..... H.R. Cooper Capt  
O. C. Discharge Depot.

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

Date .....

## Civil Re-establishment Committee



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

To resume former Occupation.

*S Burton*

Signature of Man.

Reg. No. *1630*

*J. J. Shawcroft*

Signature of the Vocational Officer or his Representative.

Place *At Johns.*

Date *8-7-19.* 191



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

# MEDICAL HISTORY

Surname Burton

OF  
Christian Name Samuel

Table I.—GENERAL TABLE.

Birthplace:—Parish St. John's County Mea.

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	31 <sup>st</sup>	May		191
	at	St. John's	at	
Declared Age...	26	years		days
Trade or Occupation	Fisherman			
Height	5	feet	5 1/4	inches
Weight	126	lbs.		lbs.
Chest Measure- ment	Girth when fully expanded...		35 1/2	inches
	Range of Expansion..		3 1/2	inches
Physical Development...				
Vaccination Marks	Right	Left	Right	Left
	/			
When Vaccinated				
Vision	R.E.—V=	6/6	R.E.—V=	
	L.E.—V=	6/6	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>Samuel Peterson</u>			
(Rank)	Major		Medical Officer.	
Enlisted	at	St. John's	at	
	on	31 <sup>st</sup> day of May	on	day of 191
Joined on Enlistment...	Corps.	Royal Mea.	Corps	
	Regtl. No.	1630	Regtl. No.	
Transferred to..	Required.			
Became non-effective by	on	day of	on	day of
(Signature)				
(Rank)				





# Descriptive Return of a Soldier Discharged on Account of Disability

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

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

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

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

Name in full *Burton, Samuel*

Regiment from which discharged *Royal Newfoundland*

Regimental number *5630*

Intended address *La Vie St Barbe*

Height on discharge *5 Feet 6*

Color of hair on discharge *Dark Brown*

Complexion *Dark*

Color of eyes *Brown*

Descriptive Marks \_\_\_\_\_

Figure on discharge *Medium*

Christian name of Father *James*

Christian name of Mother *Elizabeth*

Wife's maiden name in full \_\_\_\_\_

Date and place of marriage \_\_\_\_\_

Christian names of children \_\_\_\_\_

Place and date of soldier's birth *La Vie 14-9-1894*

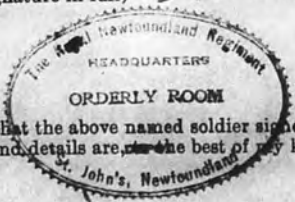
Nature and locality of civil employment required \_\_\_\_\_

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

(Soldier's signature in full) *Samuel Burton* *AB*  
(Rank)

Station *HEADQUARTERS ORDERLY ROOM* Date *JUL 4 1919*

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



Medical Officer i/c Hospital. Unit, or Command Depot.

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



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

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

1. Unit and Corps. *Royal N.F.L.P.* 7. Former Trade or Occupation } *Fishman*
2. Regtl. No. *5630* 3. Rank. *Pvt.* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Burton Samuel* (a) Former Regts. or Corps ; with Regtl. Nos.
- (Surname) (Christian Names)
5. Age last birthday. *24*
6. Posted for duty on..... at..... in category (or grade).....
8. If the disability is an injury was it caused  
 (a) in action (b) on field service  
 (c) on duty (d) off duty ?
9. If a Court of Inquiry was held on an injury state :—  
 (a) When (b) Date of Discharge ;  
 (b) Where (c) Cause of Discharge.  
 (c) Opinion of Court (d) Particulars of Pension or Gratuity (if any)

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

### Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
11. Date of origin of disability. *nil*
12. Place of origin of disability. *nil*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

14. State whether the disabilities are
- |  | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war .. .. .                        | ✓                   |                   |
| (ii.) Previous active service.. .. .                               | ✓                   |                   |
| (iii.) Climate in pre-war service .. .. .                          | ✓                   |                   |
| (iv.) Ordinary military service before the war .. .. .             | ✓                   |                   |
| (v.) Serious negligence or misconduct on the man's part. } .. .. . | ✓                   |                   |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } ✓

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?  
*(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)*

*No complaints of no usability.*

16. Was an operation performed? If so, when and what was its nature?
17. If not, was an operation advised and declined?
18. \*In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

*Refuted*

20. Do you recommend—
- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

*W.E. Proenier. Capt R.A.M.C.*  
 Medical Officer in charge of case.

Station *Haydock*

Date *1-4-19*

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





# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39.

Regiment of

Royal Newfoundland

Signature of O. C. Company

Number of Sheet

One

C. B. Drake / int.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	5630	Age on	26	Fisherman	
Samuel Beaton		months		Religion	
Place and Date of Enlistment	St. John's	with Colours	1-6-18	Methodist	
Joined	Date	with Reserve	1/60 years	Place of Birth	
Joined	Date	with Reserve	3/36 years	Case, F. Baine.	
Joined	Date				

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
Hayley Lane Camp 27/10/18 P.M.				Dirty on Parade	Sgt. H. Taggart Sgt. Cox.	2 days C.B.	4/10/18	Capt Piffy	H.S.K.
				Demobilized	St John's		5/19		

To be carried over.

Army Form B. 121.

1630

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 5630 Rank Pltr Name Burton J

Date of Enlistment 31-5-18 Address Lady Lane District St. Boniface

Occupation Truckman Classification for Discharge F1 Medical Category A1

Recommendation S.M.B. .... Disability Rating .....

Passed to Demobilization Officer with following documents:—

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

Date 7-7-19

Mews H  
O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date .....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable. \$60.00
- (b) ~~Clothing~~ Supplied None

Date 8-7-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 9847 to his home at La Saie and Release Certificate No. 3312 issued.

Date 8-7-19

*J.A. Llewellyn*  
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 5-8-19

Date 8-7-19

*J. M. Stewart*  
Depot Paymaster.

Discharge approved for 22-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1
F 178	W 3494	B 122	Board 1st	" 2
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B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 8-7-19

*J.A. Llewellyn*  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—  
Officer i/c Records.  
Board of Pension Commissioners.  
with following additional documents.

Eligible for War Service Gratuity

Date JUL 22 1919

*H.R. Cooper Capt*  
for O. C. Discharge Depot.

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

Date July 22 1919

*[Signature]*



Reg. No. *5630* Rank *PL* Name *Bartholomew*  
Attested ..... Address *La Vie*  
Allotment ..... Allottee .....  
Date of Allotment ..... Returned from Overseas *Jul 1 1919*  
Returned on S.S. *Cassara* Cause *Warrant*

*84 19*  
*22-7 19*

**PASSED TO DEMOBILIZATION OFFICER**

**DISCHARGE APPROVED ON DEMOBILISATION.**