



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 4530 Name James Butler Corps RC

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

- |  |                                 |
|--|---------------------------------|
| 1. What is your name? .....  | 1. <u>Butler James</u>          |
| 2. What is your full Address? .....  | 2. <u>St. John's</u>            |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u>                   |
| 4. What is your age? .....   | 4. <u>18</u> Years ..... Months |
| 5. What is your Trade or Calling? .....  | 5. <u>Tradesman</u>             |
| 6. Are you Married? .....  | 6. <u>No</u>                    |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? .....                             | 7. <u>No</u>                    |
| 8. Are you willing to be vaccinated or re-vaccinated? .....  | 8. <u>Yes</u>                   |
| 9. Are you willing to be enlisted for General Service? .....   | 9. <u>Yes</u>                   |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? .....                                     | 10. Name .....<br>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. <u>Yes</u>                  |

I, James Butler 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.

James Butler SIGNATURE OF RECRUIT.  
[Signature] Signature of Witness.

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

I, James Butler 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 27 day of April 1915.  
Signature of Attesting Officer [Signature]

### † CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the [Post].  
If enlisted by special authority, such will be attached to the original attestation.  
Date April 27 1915  
Place St. John's } Approving Officer.

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

\* If so, 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 complete with entries on the Medical History Sheet.

Name Jan 18

Apparent age 18 years 34 months Height 5 feet 6 inches

Chest Measurement { Girth when fully expanded 3 inches  
Range of expansion \_\_\_\_\_ inches

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

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin \_\_\_\_\_ | Relationship \_\_\_\_\_

### 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

“ “ Pensions “ \_\_\_\_\_ [ “ “ ] \_\_\_\_\_ “ \_\_\_\_\_



# 4/ THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 4530 Name James Butler Corps RC

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

1. What is your name? ..... 1. Butler James
2. What is your full Address? ..... 2. St Johns
3. Are you a British Subject? ..... 3. Yes
4. What is your age? ..... 4. 18 Years ..... Months
5. What is your Trade or Calling? ..... 5. Fisherman
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

James Butler 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.

James Butler SIGNATURE OF RECRUIT.

J. Kaynes Signature of Witness.

James Butler WITH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, James Butler 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 Johns on this 27 day of April 1918

Signature of Attesting Officer Wm Churchill

**†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 April 27 1918 .....  
Place St Johns ..... } 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 James Butler  
 Apparent age 18 years          months. Height 5 feet 6 inches  
 Chest Measurement { Girth when fully expanded 34 inches  
                                 Range of expansion 3 inches  
 Distinctive marks         

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Annie Butler  
Str Yemassee | Relationship mother

### 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 L'epot	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 <u>22-4-18</u>									Signature of Officers certifying correctness of entries
Joined at <u>St. Marks</u> on <u>April 22-1918</u>									
<u>Discharged. St. Marks Jan. 15-1919</u>									
<u>Admitted Barracks Galley U.S.A. 2-8-18</u>									
<u>Admitted Barracks Hospital 2-12-18</u>									
<u>Discharged do do 10-12-18</u>									
<u>Demobilization St. Marks 15-1-1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 15-1-1919 [date of discharge]          years 269 days  
 Pensions " " " " " " " " " " " "

C.R. 4630

Extract of Daily Orders Part II, dated Jan. 16th 1919,  
Depot St. John's.

The discharge of the undernoted on demobilization has been  
confirmed by Officer i/c Records on 15-1-19

4530 Pte. J. Butler

C.R. 4530

Extract from Daily Orders part 11, Depot St. John's  
dated December 18th., 1918.

4530 Pte. Jas. Butler.

The a/m dischargee demobilization have been approved by D. C  
discharge depot from noted date. ~~That~~ He is removed from Depot  
strength and transferred to discharge depot pending confirmation  
by Officer i/c Records.

18-12-18.

C.R. 4530

Extract from Daily Orders Part 11 Unit The Royal Rifles.  
Regt. St. John's, Dec. 11th, 1918.

4530 Pte. J. Butler.

Discharge from Barracks Hospital 10-12-18.

C.R. 4530

Extract from Daily Orders part 11, Depot. St. John's dated Dec. 4th., E

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4530 Pte. J. Butler

Admitted Barracks Hospital 2-12-18.



C.R. 4530

Extract from Daily Orders part 11, from Unit The Royal Wfld.  
Regt. St. John's, dated April 23, 1918.

#4530 Pte. James Butler.

Attested for General Service with the Royal Wfld. Regt. from  
22/4/18 *W. J. [unclear]*

C.R.

~~4530~~  
4530

Extract from Daily Orders Part II Unit The Royal WFLA.  
Regt., St. John's, Dec. 16th, 1918.

4550 Pte. J. Butler.

Discharged from Isolation agllery 13-12-18 forfeiture  
of 50¢ per day caese from that date.

Butler, James

4530

Ray sept.

**FORM I**

To be used by the Quartermaster's Department for replacement issues of lost articles, and to accompany monthly Pay Lists.



**1ST NEWFOUNDLAND REGIMENT**

No. 83

**KIT AND EQUIPMENT ISSUES ON PAYMENT.**

Name J Butler

Regimental No. 4530

Charged per Pay List for month of October

C Company

Item No.	Articles	Quantity	Price		Item No.	Articles	Quantity	Price	
			\$	c				\$	c
1	Braces . . . . . Pairs				26	Knife . . . . . Clasp			
2	Boots . . . . . "				27	Mug . . . . . "			
3	Boot Laces . . . . . "				28	Plate . . . . . "			
4	Brush . . . . . Hair				29	Spoon . . . . . "			
5	Brush . . . . . Tooth				30	Bandolier . . . . . "			
6	Brush . . . . . Clothes				31	Belt . . . . . "			
7	Blankets . . . . . "				32	Haversack . . . . . "			
8	Cap . . . . . Service			50	33	Identification Badge . . . . . "			
9	Cap . . . . . Sleeping				34	Pull-through . . . . . "			
10	Cholera Belt . . . . . "				35	Rifle . . . . . "			
11	Drawers . . . . . Pairs				36	Side Arms . . . . . "			
12	Great Coat . . . . . "				37	Water Bottle . . . . . "			
13	Hat or Helmet . . . . . "				38	Trenching Tools . . . . . "			
14	Housewife . . . . . "				39	Dubbin . . . . . "			
15	Kit Bag . . . . . "				40	Vaseline . . . . . "			
16	Mittens . . . . . Pair				41	Cardigan Jacket . . . . . "			
17	Puttees . . . . . Pair				42	Shoulder Badges . . . . . "			
18	Shirts . . . . . "				43	Cap Badges . . . . . "			
19	Socks . . . . . Pairs				44	Regm'al Buttons . (large)			
20	Tunic . . . . . "				45	Regm'al Buttons . (small)			
21	Trousers . . . . . "				46				
22	Towels . . . . . "				47				
23	Undervests . . . . . "				48				
24	Fork . . . . . "				49				
25	Knife . . . . . Food				50				

I hereby acknowledge to have received the above named articles as charged, and agree to the amount of one Dollars fifty cents being deducted from my pay.

Signed J Butler

Issued above

Oct 15th 1918

W. J. Ross  
for Quartermaster.

Entered { Stock Bk. folio No. . . . .  
" Recap. " " . . . . .  
Ledger " " . . . . .

January 15th., 1919

#4530 Pte. James Butler,  
Harbor Grace,

Dear Sir:-

Please find enclosed "Discharge  
Certificate No. ~~457~~"

Yours faithfully,

Captain,  
Paymaster & O.i/cRecords.

Etc'l l.

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 4530 Rank Pl. Name James Butler

Intended place of residence. St. John's

2. Occupation Fisher man

Classification of soldier A. Medical Category 477

3. The above named man is discharged in consequence of..... **DEMOBILIZATION.**

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 DEC. 15 1918 ..... W. H. Cart  
Comanding Discharge Depot  
The Royal Newfoundland Regiment

## CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place and date St. John's ..... James Butler .....  
16. 12. 18. .....  
Signature of soldier  
W. H. Cart .....  
Signature of witness

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

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place and Date Dec. 16<sup>th</sup> 1918 ..... James Butler .....  
St. John's ..... W. H. Cart .....  
Signature of soldier  
Signature of witness

## STATEMENT OF SERVICE

7. Enlisted for service 22. 4. 18. ..... No of days on Military  
Discharged from service 18. 12. 18. plus 28 days. ..... Service 269 Days

## APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.

Place ST. JOHN'S. ..... W. H. Cart .....  
Officer Commanding Discharge Depot  
The Royal Newfoundland Regiment.  
Date DEC 18 1918 .....

## CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place St. John's ..... W. H. Cart .....  
January 15/1919 .....  
Officer i/c Records  
The Royal Newfoundland Regiment

9  
20  
21  
21  
21  
21  
21  
21  
15  
19

W. H. Cart 1079/487

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 4530 Rank. P/16 Name Buller James  
 Date of Enlistment 22.4.18 Address H. Grace District H. Grace  
 Occupation Speshman Classification for Discharge A Medical Category A  
 Recommendation S.M.B. .... Disability Rating .....

Passed to Demobilization Officer with following documents:—

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

Date 16.12.18

Walter Cash  
O/C Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

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

*James Buller*

Particulars passed to Vocational Officer for information and action.

Date .....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable

(b) Clothing Supplied

*Joseph A. Snowling*

Date 16-12-18

O. i/c. Re-clothing.

**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrant No. *R 298* to his home at *St Grace* and Release Certificate No. *384* issued.

Date *16-12-18* *OB Dicko Capt*  
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 *15-1-19*

Date *16-12-18* *Wesley Capt.*  
Depot Paymaster.

Discharge approved for *18. 12. 18*

Forwarded with following documents to O.C Discharge Depot.

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

Date *17. 12. 18* *OB Dicko Capt*  
Demobilization Officer.

**APPROVED.**

Documents as above forwarded to:—

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

Date *DEC 18 1918* *RH Last Capt*  
O. C. Discharge Depot.

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

Date *Dec 18/1918*



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

# MEDICAL HISTORY

Surname Butler OF Christian Name James

Table I.—GENERAL TABLE.

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

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>27</u> day of <u>Apr</u> 191 <u>8</u> at <u>St. John's</u>		on _____ day of _____ 191_____ at _____	
Declared Age	<u>18</u> years _____ days		years _____ days	
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet <u>6</u> inches		feet _____ inches	
Weight	<u>118</u> lbs.		lbs. _____	
Chest Measurement	Girth when fully expanded... <u>34</u> inches		_____ inches	
	Range of Expansion... <u>4</u> inches		_____ inches	
Physical Development				
Vaccination Marks	Arms			
	Number			
When Vaccinated				
Vision	R. E.—V= <u>6/6</u>		R. E.—V=	
	L. E.—V= <u>6/6</u>		L. E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)				
(Rank)				
Enlisted	at <u>St. John's</u> Medical Officer.		at _____ Medical Officer.	
	on <u>27</u> day of <u>Apr</u> 191 <u>8</u>		on _____ day of _____ 191_____	
Joined on Enlistment	Corps	<u>The Royal Newfoundland</u>	Corps.	
	Regtl. No.	<u>4530</u>	Regtl. No.	
Transferred to				
Became non-effective by				
[Signature]	on _____ day of _____ 191_____		on _____ day of _____ 191_____	
[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 *James Butler*  
 Regiment from which discharged *1st. Newfoundland*  
 Regimental number *4530*  
 Intended address *St. John's*  
 Height on discharge \_\_\_\_\_ Feet \_\_\_\_\_  
 Color of hair on discharge *Dark*  
 Complexion *Dark*  
 Color of eyes *Blue*  
 Descriptive Marks \_\_\_\_\_  
 Figure on discharge *Fair*  
 Christian name of Father *William*  
 Christian name of Mother *Annie*  
 Wife's maiden name in full *Swales*  
 Date and place of marriage \_\_\_\_\_  
 Christian names of children \_\_\_\_\_  
 Place and date of soldier's birth. *St. John's 13<sup>th</sup> August 1900*  
 Nature and locality of civil employment required *Fishing*

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) *James Butler* (Rank) *Plc*

Station *Plc* Date *Dec 18 1918*

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.



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

Station \_\_\_\_\_ 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 work as Shipwright*

*James Butler*

Signature of Man.

*C. B. Dicks Acpt*

Signature of the Vocational Officer or his Representative.

Reg. No. *4530*

Place

*St Johns N. F. L. D*

Date

*15/12/18.*

191

6

*H. Grace*

Demobilization Form 1

# The Royal Newfoundland Regiment

Class for Demobilization:—  
*A*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date ..... *14. 7. 18* .....

Regimental No. *4530* .....

Name ..... *Ranker James* .....

Address ..... *H: Grace* .....

Present Medical Category ..... *A.ii* .....

Recommended for:— { (a) Immediate discharge .....  
(b) ~~Standing Medical Board~~ .....

Members of Board { *R.H. Lat* Capt  
O.C. Discharge Depot.  
*V. Paterson*  
Senior Medical Officer  
*S.W. Burden*  
M. O. Depot

FORM K

Nº 4197



**1ST. NEWFOUNDLAND REGIMENT**

**ALLOTMENTS**

I, James Butler, Regl. No. 4530

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

Allotment begins 1st June 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3964	Mother	Mrs Mrs (Annie) Butler	Her Grace	
Total Allotment, £				60 <sup>c</sup>

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

Sig.) G. James  
 Officer Commanding

(S) James Butler  
 (Rank) Pte

John  
 May 17 1918



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 *James Butler*

aged *18 yrs.* conducted at

Date: *Apr. 22, 1918* Recruiting Officer:

NO OF TEST

FINDING

- 1 *no*
- 2 *no*
- 3 *no*
- 4 *no*
- 5 *no*
- 6 *no*
- 7 *yes*
- 8 *yes*
- 9 *no*
- 10 *n*
- 11 *n*
- 12 *n*
- 13 *n*
- 14 *n*
- 15 *n*
- 16 *n*
- 17 *n*
- 18 *n*
- 19 *6/6 both*
- 20 *n*
- 21 *n*
- 22 *n*
- 23 *n*
- 24 *n*
- 25 *n*
- 26 *n*
- 27 *n*
- 28 *n*
- 29 *n*
- 30 *n*
- 31 *n*
- 32 *n*
- 33 *no*
- 34 *5-16"*
- 35 *118 lbs*
- 36 *30-34*
- 37 *n*
- 38 *Mother*
- 39 *no other*

*44-30*

*4530*

*Annie Butler A. Crase*

*W. Burden*

Signature of Medical Examiner: .....

March 26, 1919

#4530 Pte. James Butler,  
Harvey St.  
Br. Grace.

Dear Sir:- Referring to your application for War Service  
Gratuity, I beg to state that you are not entitled to same,  
as you have not served in the Royal Newfoundland Regiment  
for Twelve months (12), and you have not served Overseas.

Yours truly,

Paymaster & O.i/c Records  
Captain,



DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

*20*

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... *James* ..... 2. Surname... *Butler* .....

3. Rank... *Private* ..... 4. Regtl. No. ... *4530* .....

5. Address in full to which future payments of gratuity are to be forwarded... *James Butler,* .....

..... *Harvey Street, Harbour Grace* .....

6. Date of enlistment in the Regiment... *22nd of July, 1918* .....

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

*No separation allotment issued in my case* .....

8. Relationship of such dependents... *Not applicable* .....

9. Address in full of such dependent... *Not applicable* .....

.....

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *Yes* .....

*My mother has received and is now receiving \$20 a month from the Patriotic Fund* .....

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

*Served in Newfoundland only, at Headquarters, from 22nd July to 15th January, 1919 - 269 days* .....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas.....

*296 Days* .....

*Written in receipt of my father John Butler (R.M.R.) deceased*

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

*Enlisted once only..... 4539*

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.....

*Received no payment of Post Discharge Pay.....*

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?.....

*Not applicable.....*

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

*Not applicable.....*

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

*No.....*

*Demobilization.....*

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; did not go to the front.....*

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

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

*No; paid off Nov. 15, 1919.....*

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: *James Butler*

Place of Residence: *Leadbriar*

Declared before me at: *Leadbriar*

This *18<sup>th</sup>* day of *March* 19*19*

*William A. Oke*  
~~Signature of Barrister of the~~  
Supreme Court, Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of affidavits.

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	.....	.....	<i>Nil</i>	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

Certified Correct.

Paymaster.



No 4197



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, James Butler, Regl. No. 4530  
 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 <sup>and</sup>/<sub>or</sub> Persons, such payment to be made on proof  
 of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup>/<sub>or</sub> Persons  
 concerned, viz.:

Allotment begins 1st June 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>3964</u>	<u>mother</u>	<u>Mrs Mrs</u> <u>(Annie) Butler</u>	<u>Her Grace</u>	
Total Allotment, \$				<u>60<sup>s</sup></u>

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.) [Signature]  
 Officer Commanding  
[Signature] Company  
May 17 1918

(Sig.) James Butler  
 (Rank) Plt

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39-

Number of Sheets One

Regiment of Royal Newfoundland

Signature of O. C. Company J. James

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>Butler Jas</u>	Age on	years	months	
Joined		Date			
Joined		Date			
Joined		Date			
Joined		Date			
		Place and Date of Enlistment	Trade		
		Period of	Religion		
		with Colours	Place of Birth		
		with Reserve	with Reserve		

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<i>Demobilized St. John's, 15 '19</i>					

To be carried over

4530

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 4530 Rank Plt Name Buller James  
 Date of Enlistment 22.4.18 Address H. Grace District H. Grace  
 Occupation fisherman Classification for Discharge A Medical Category A5  
 Recommendation S.M.B. .... Disability Rating .....

Passed to Demobilization Officer with following documents:—

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

Date 16.12.18 W. H. C. Cash  
 O.C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment 2

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

*James Buller*

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable 8/5/00
- (b) ~~Clothing~~ Supplied Joseph A. Snowling

Date 16-12-18 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 298 to his home at H. Grace and Release Certificate No. 384 issued.

Date 16-12-18

Q. B. Dicks  
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 15-1-19

Date 16-12-18

W. Hawley  
Depot Paymaster.

Discharge approved for 18. 12. 18.

Forwarded with following documents to O.C Discharge Depot.

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

Date 17. 12. 18.

Q. B. Dicks  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer in Charge Records.  
Board of Pension Commissioners.

with following additional documents.

Date DEC 18 1918

R. H. Last  
O. C. Discharge Depot.

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

Date Dec. 18/1918

W. Hawley  
O. C. R.



Reg. No. N 530 Rank Pvt Name Butler Jas  
 Attested 22.4.18 Address Haulolgrace  
 Allotment 60 Allotee Mrs Tom (Annie) Butler  
 Date of Allotment \_\_\_\_\_ Returned from Overseas \_\_\_\_\_  
 Embarked for Overseas \_\_\_\_\_ Cause \_\_\_\_\_

	Vacc 23 <sup>4</sup> / <sub>8</sub> 1st 5 <sup>5</sup> / <sub>8</sub> 2 <sup>nd</sup> 10 <sup>5</sup> / <sub>8</sub> 3 <sup>rd</sup> 17-5-18
2-9-18	Adm - To Gallery v. P. 9. for put's 50¢ per day
2-12-18	adm to Barrack's Shop.
10-12-18	Discharged from Barracks Shop.
16-12-18	<p style="text-align: center;"><b>PASSED TO DEMOBILIZATION OFFICER</b>  <b>DISCHARGE APPROVED ON DEMOBILISATION.</b></p>
18-12-18	