



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4995 Name Edwards ~~Corps~~ R.C.

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. Edward Cashin
- 2. What is your full Address? 2. St. Georges
NSB
- 3. Are you a British Subject? 3. yes
- 4. What is your age? 4. 20 years 0 Months
- 5. What is your Trade or Calling? 5. Electrician
- 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, Edward Cashin 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.

Edward Cashin SIGNATURE OF RECRUIT.

James Pittman Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Edward Cashin 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 given as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. Georges on this 11 day of May 1915

Signature of Attesting Officer C. B. Dicks 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 complied with. I accordingly approve, and appoint him to the
If enlisted by special authority, such will be attached to the original attestation.

Date.....191..... } 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

4992

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

Name Ed Cashin
 Apparent age 20 years months. Height 5 feet 8 inches
 Chest Measurement { Girth when fully expanded 36 inches
 Range of expansion 3 1/2 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin St Georges Francis Cashin
 | 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 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 engagement reckons from <u>11-5-18</u>									
Joined at <u>St Georges</u> on <u>Nov 11th 1918</u>									
<u>Discharged July 18, 1919</u>									
<u>Embarked St Georges train to Halifax NS</u>									
<u>to Newfoundland for demobilization</u>									
<u>Arrived Newfoundland</u>									
<u>Demobilization St Georges</u>									
<u>18-7-1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 18-7-1919 [date of discharge] 1 years 69 days
 " " Pensions " " " " " " " " " " " "

C.R. 4995

Extract from Daily Orders Part II Unit The Royal Wfld.
Regt. St. John's, July 25/19.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/o Records from 25/22-19-7-19.

4995 Pte. Edward Cashin.

C.R. 4995'

extract from Daily Orders Part 12 Unit The Royal Rifles.
Regt. St. John's. July 28th, 1919.

The discharge of the undernoted on demobilisation has been
APPROVED by C.C. Discharge Depot with effect from 2-7-19.


4995 Pte. E. Cashin.

BLANDFORD ROAD

C.R. 4995

Extract from Daily Orders Part 11 Depot, St. John's,
Date June 18th 1919.

4995, Pte. E. Cashin.

Reported at Headquarters  1/6/19.
which sailed Liverpool May 22/1919.

RE "Corsican"

C.R. 4995-

Extract from Daily Orders Part 11. from Unit The Royal Wfld.
Regiment, St. John's. dated June 14th 1918.

4995 Pte E. Cashin

Embarked for Overseas with draft 11-6-18.

Extract from Daily Orders part 11, from Unit The Royal
Hfld. Regt. St. John's, dated May 15, 1918.

#4995 Pte. E.C. Cashin.

Attested for General Service with the Royal Hfld. Regt.
from 11.5.18

E. Caskin

C.R. 4995

1870

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 Newfoundlands* 7. Former Trade or Occupation } *Electrician*
2. Regtl. No. *4995* 3. Rank. *Pvt* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Cashin* *Edward* (a) Former Regts. or Corps; with Regtl. Nos.
- (Surname) *21* (Christian Names)
5. Age last birthday.....
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 (if any)
- (b) Where (c) Opinion of Court

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, 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.)

No Complaint of the 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. Provenza *Cap* *Rome*

Medical Officer in charge of case.

Station *Hazelton*

Date *9/14/19*

* 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

1697/245/P&A

b
NEWFOUNDLAND CONTINGENT

From:

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

To:

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



28th January, 1919

Subject: 4995, Pte. E. Cashin,

With reference to the following telegram (8379) from the Hon. Minister of Militia, received

"pay to 4995, Cashin, £2:13:0."

Draft £ 2:13:0. is enclosed for payment to this soldier.

Kindly obtain his receipt hereon.

A. D. Mansell Maj.
Chief Paymaster & O. 1/c Records.

Jan 31 / 1919

Receipt hereunder.

Kerr LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Comdng. 2nd Batt'n,
Royal Newfoundland Regiment.

Received the sum of £ 2. 13. 0

Two Pounds Thirteen Shillings on account of cable remittance from Newfoundland.

Edward Cashin

No. 4995 Rank Pte

Witness Epl. R. J. Mercer

NEWFOUNDLAND CONTINGENT

From:

To:

To:- The Chief Paymaster,
Royal Newfoundland Regiment,
58 Victoria Street,
London, S.W.

Sir:-

Please charge the amount set opposite my name to my account and pay it to the N.W.C.A. "Prisoners of War Fund" in quarterly instalments for the period of the year.

Commencing on the 1st July 1918.

Regtl. No.	Rank	Name	Amount	Signature
4995	Pte	Cashier C	\$250	<i>E. Cashier</i>

I have the honour to be, Sir,
Your obedient servant.

Date

July 1/18

E. Cashier

Cashin, C

4995

Hay & Sept.

July 21, 1919

#4995 Pte. Edward Gashin,
St. George's.

Dear Sir:-

Please find enclosed Discharge Certificate #3115.

Yours truly

Captain & Paymaster.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4995 Rank 1st Lt. Name Cashin, Edward
 Intended place of residence St. Georges
 2. Occupation Electrician
 Classification of soldier E Medical Category A F

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 JUN 30 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 JUN 30 1919
 Signature of soldier Edward Cashin
 Signature of witness Arthur Sturton

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am ^{not} in a position to resume civilian occupation immediately on discharge.
 Place, ST. JOHN'S
 Date 30-6-19
 Signature of soldier Edward Cashin
 Signature of witness James Sheueman

STATEMENT OF SERVICE

7. Enlisted for service 11-5-18 No. of days on Military
 Discharged from service 2-7-19 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 Records, The Royal Newfoundland Regiment, twenty-eight days from date.
 Place, ST. JOHN'S
 Date 30th 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 July 18 1919
 Officer in Charge Records
 The Royal Newfoundland Regiment

A FB 2079/3115

The Royal Newfoundland Regiment

Class for Demobilization:

E.C.

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

30.6.19

Regimental No *4995*

Name *Cashin* *Edward* Rank

Address *St Georges*

Present Medical Category

A1

Recommended for: (a) Immediate discharge

(b) Standard Medical Board

Members of Board

R.H. Lat
O.C. Discharge Depot.

H. Paterson
Senior Medical Officer

J.W. Burden
M. O. Depot

1000 21
The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. *1995* Rank *Cpl* Name *Cashin Edward*
 Date of Enlistment *11-2-18* Address *St George* District *St George*
 Occupation *Electrician* Classification for Discharge *4* Medical Category *A1*
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. 136	B 268	B 121	N.F. Med	D.F. 1	1
B 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	3
B 178b	D 400B	Form L	do 3rd	" 4	
B 178c	D 400C	Form K	do 4th	" 5	
B 179b	B 104	ME 2		" 6	1
B 179c	B 120	M 93			

Date *30-6-19* O. C. Discharge Depot. *Miss H.*

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Edward Cashin

Particulars passed to Vocational Officer for information and action.

Date *30-6-19* *J.A. [Signature]*

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable *\$60.00*

(b) Clothing Supplied _____

Date *30-6-19*

[Signature]
 O ic. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. R2009 to his home at St Georges and Release Certificate No. 3083 issued.

Date 30-6-19

J.A. Knowlton
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 16-7-19

Date 30-6-19

H. Newsitt
Depot Paymaster.

Discharged approved for 2-7-19

Forwarded with following documents to O.C. Discharge Depot.

N.F. P136	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
B179c	B 120	M 93		

2 Form B

Date 30-6-19

J.A. Knowlton
O.C. Discharge Depot.

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 4 1919

R.H. Sait MAJOR

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 work.

Edward Boehl
Signature of Man.

Reg. No. 4995

Samuel C. ...
Signature of the Vocational Officer or his Representative.

Place

San Francisco

Date

June 30

1919

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

MEDICAL HISTORY

OF

Surname Chikin


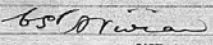
Christian Name Edward

Table I.—GENERAL TABLE.

Birthplace:—Parish St Georges County Nfld

	SPECIAL RESERVE		REGULAR ARMY	
	Right	Left	Right	Left
Examined	on <u>11</u> day of <u>May</u> 191 <u>8</u> at <u>S. Johns</u>		on _____ day of _____ 191____ at _____	
Declared Age	<u>50</u> years _____ days		_____ years _____ days	
Trade or Occupation	<u>Electrician</u>		_____	
Height	<u>5</u> feet <u>8</u> inches		_____ feet _____ inches	
Weight	<u>143</u> lbs.		_____ lbs.	
Chest Measurement	Girth when fully expanded... <u>36</u> inches		_____ inches	
	Range of Expansion... <u>3 1/2</u> inches		_____ inches	
Physical Development				
Vaccination Marks	Arm _____		Arm _____	
	Number... <u>3 scars</u>		Number... _____	
When Vaccinated	<u>10/11/16</u>		_____	
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)	<u>L. M. Peterson</u>		_____	
(Rank)	_____ Medical Officer.		_____ Medical Officer.	
Enlisted	at <u>S. Johns</u> on <u>11</u> day of <u>May</u> 191 <u>8</u>		at _____ on _____ day of _____ 191____	
Joined on Enlistment	Corps. _____		Corps _____	
	Regtl. No. <u>The Royal 4995</u>		Regtl. No. _____	
Transferred to	<u>Nfld Regt</u>		_____	
Became non-effective by	on _____ day of _____ 191____		on _____ day of _____ 191____	
(Signature)	_____		_____	
(Rank)	_____		_____	

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 case of syphilis, admissions and re-admissions to hospitals will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
	10	1	1923	1		19	Gonorrhoea (Venereal Angina)	13	Recovery. Discharged to duty.	 CAPT. R. A. M. O.



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 Office 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 *Edward Coshin*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4995*

Intended address *St Georges*

Height on discharge *5* Feet *8*

Color of hair on discharge *Light Brown*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks _____

Figure on discharge *medium*

Christian name of Father *Francis*

Christian name of Mother *Annie*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *Sandy Point. October 31st, 1897*

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) *Edward Coshin* *Pte*
(Rank)

Station *St Johns* Date *27.6.19*

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.

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 302 (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 Newfoundland*
2. Regtl. No. *499.51* 3. Rank... *plc*
4. Name *Cashin* *Edward*
(Surname) (Christian Names)
5. Age last birthday... *21*
7. Former Trade or Occupation } *Electrician*
- 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regtl. Nos.
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 (if any)
(b) Where
(c) Opinion of Court

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? }

He complains of no disability

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.)

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 ?

Repatriation

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. Provenier. G. J. R. R. R.

Station *Hazley Down*

Date *9/4/19*

Medical Officer in charge of case.

* 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

RECEIVED
12 JAN. 1919
COUNTY LAB.

Outfit Number. *4495*

Result of the examination of the specimen of *swab* taken from

Reg. No. *4495* Rank *Pfc* Name *Custace Edward*

Corps *R. Mld.*

Result *Vincent's Angina Found*

.....

Jan 12 191*8*

R. A. Lyster

Specialist Sanitary Officer.

TO BE LEFT BLANK.



DEPARTMENT OF MILITIA.
WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claim 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.

1. Christian name... *Edward*... *Cashin*.....
2. Rank... *Plt.*..... *4995*.....
3. Address in full to which future payments of gratuity are to be forwarded... *Edward Cashin St George*.....
4. Date of enlistment in the Regiment... *11 May 1915*.....
5. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge... *200*.....
6. Relationship of such dependents... ..
7. Address in full of such dependents... ..
8. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?... *no*.....
9. Were you on active service only in Hfld. If so, give dates and particulars of such service... *England*.....
10. Give total length of time which you served on active service, whether in Hfld. or Overseas... *714 days*.....

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. (b) Reason for discharge.

June 30th 1918

Death

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service.

no

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (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: *Edward Cashin*
 Place of Residence: *St Louis*
 Declared before me at: *St Johns*
 This *2nd* day of *July* 19*19*....

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

W. J. Jones

POST DISCHARGE PAY.			War Service Gratuity.	Net amount due
Date paid	Paid Soldier.	Paid Dependent.		
.....
.....
.....
Certified correct.			Paymaster	

[Faint, illegible text and markings, possibly bleed-through from the reverse side of the page]

P.M.

4995 Cashier

Please pay 1st pay. W. S. G.

W. S. G.

3/7/19

F. C. R.

July 3, 1919

Ptc. E. Cashin,
St. George's,
Nfld.

J. C. R.

Dear Sir:

I enclose herewith cheque
for \$70.00 being amount due you as first
payment of War Service Gratuity.

Yours truly,

Capt.
Paymaster.

CLASS OF SERVICE	SYMBOL
Day Message	
Day Letter	Blue
Night Message	Nite
Night Letter	N L

If none of these three symbols appears after the check (number of words) this is a day message. Otherwise its character is indicated by the symbol appearing after the check.

ANGLO-AMERICAN TELEGRAPH COMPANY, LIMITED

CONNECTING WITH
THE WESTERN UNION TELEGRAPH COMPANY

CLASS OF SERVICE	SYMBOL
Day Message	
Day Letter	Blue
Night Message	Nite
Night Letter	N L

If none of these three symbols appears after the check (number of words) this is a day message. Otherwise its character is indicated by the symbol appearing after the check.

F32/24

34NL

NIGHT LETTER

HALIFAX NS 23

GRATUITY PAYMASTER MILITIA BLDG

PLEASE SEND IMMEDIATELY IF AT ALL POSSIBLE MY GRATUITY MONEY WHICH WILL
BE DUE ME IN OCTOBER AS I NEED IT BADLY NOW

PT EDWARD CASHIN NO 4995

21 MORRIS ST HALIFAX NS

SAVING NO.
SEP 24 1919

J.C.B.
Ch. mailed to Sgt George's
Sep 22 *[Signature]*

19

Sept. 25, 1919

Ex Pte. Edward Cashin,
21, Morris Street,
Halifax.
U.S.

A. C. R.

Dear Sir:

With reference to your telegram of Sept. 24th. I enclose herewith a cheque for \$70.00, being balance of War Service Gratuity due you. Other cheques have been mailed to St. George's, Nfld.

Yours truly,

Major
Paymaster.

YM/
Enc. 1

ST. JOHN'S, June 30th /19

Royal Newfoundland Regiment.

Billeting Account,

To Pte. E. Cashin

Billeting Soldiers as undermentioned

from June 3rd /19 to June 28th /19

4995 - Pte. E. Cashin 26.00

ACCOUNT <u>of 37m</u>	
CH NO <u>25747</u>	DATE <u>28/6/19</u>
IND. FUND	INITIALS
PAY L. QUANT. <u>00</u>	REMARKS
GEN. LEDG.	TOTAL

Certified correct for \$ 26.00

A.J.

Edmond Cashin
Billeting Officer.

E. Cashin

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 70⁰⁰/₁₀₀

July 3 1919

Received from the First Newfoundland Regiment
the sum of Seventy Dollars.
on account of Pay. W. S. Sely
~~Balance~~

Ch. No. 2092	Initials... East
Pay Ledger... 467	Initials... WR
Gen. Ledger.....	Initials.....

Regtl. No. Rank

[Handwritten signature]

No. 4995

Rank

Pt.

Name

E. Cashin

Send to St. George's

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 70⁰⁰

Sept 25 1919

Received from the First Newfoundland Regiment
the sum of Seventy Dollars.
on account of Pay. W.S.P.
balance

Ch. No. <u>11537</u>	Initials <u>Lee</u>
Pay Ledger <u>46713</u>	Initials <u>CBH</u>
Gen. Ledger	Initials

Regtl. No. 7. C. 8 Rank

noted ✓

No. 4995

Rank

Pte

Name

Edward Cashin

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.Number of Sheets *5/2*Regiment of *Royal Newfoundland*Signature of O. C. Company *C. S. Dicks Lieut*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>4995 Cashin Edward</i>	Age on	<i>20</i> years <i>0</i> months	<i>Electrician</i>	
Joined	Date	Place and Date of Enlistment	<i>St John's 11.5.18</i>	Religion <i>R.C.</i>	
Joined	Date	Period of	with Colours <i>69</i> years. with Reserve <i>36</i> years.	Place of Birth <i>St George's</i>	
Joined	Date				
Joined	Date				

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 18/7/19.</i>					

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 4995 Rank Plt. Name Cashin, Edward
 Date of Enlistment 11-2-18 Address St. George's District St. George's
 Occupation Electrician Classification for Discharge A Medical Category A-1
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. 1736	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 30-6-19 R. O. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Edward Cashin

Particulars passed to Vocational Officer for information and action.

Date 30-6-19

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable £6.0.00

(b) Clothing Supplied _____

Date 30-6-19

O. J. C. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 172004 to his home at St Georges and Release Certificate No. 3083 issued.

Date 30-6-19

J.A. Linnell
Demotion Officer

Demotion Officer

4. Pay and Allowances.

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

Date 30-6-19

Depot Paymaster.

Discharge approved for

2-7-19

Forwarded with following documents to O.C. Discharge Depot.

W.P. P/36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board Ist.	" 2
B 178a	D 400A	B 1915	do 2nd.	" 3
B 177	D 400B	Form L.	do 3rd.	" 4
B 178a	D 400C	Form K.	do 4th.	" 5
B 179b	B 103	ME 2.		
B179c	B 120	M 93.		

Date 30-6-19

J.A. Linnell
O.C. Discharge Depot.

O.C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

JUL 4 1919

Date

R.H. Linnell

O. C. Discharge Depot.

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

Date July 18 1919

J.A. Linnell
for Records

Reg. No. 4995 Rank Pte Name Washin Edward

Attested Address A. George

Allotment Allottee

Date of A' Returned from Overseas 29-5-19

Returned on S.S. Cassican Cause Discharge

30.6.19

2.7.19

FORWARDED TO DEMOBILIZATION OFFICER

PLEASE APPROVED ON 11/10/19

December 20th., 1937

#4995, Edward Cashin
Royal Newfoundland Regiment.

THIS IS TO CERTIFY that the above noted man
enlisted in the Royal Newfoundland Regiment on
May 11th., 1918 and was discharged July 18th., 1919,
having served 1 year and 69 days.

J. A. McGrath,
Clerk, War Pensions.

JAM/SM