



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 2578 Name Martin F. Chafe. Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>Martin F. Chafe.</u> |
| 2. What is your full Address? | 2. <u>110. Barges Rd</u> |
| | <u>St. John's.</u> |
| 3. Are you a British Subject? | 3. <u>Yes.</u> |
| 4. What is your age? | 4. <u>35</u> Years <u>6</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Teamster.</u> |
| 6. Are you Married? | 6. <u>Yes.</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No.</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes.</u> |
| 9. 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
Corps <u>1st</u> |
| 11. Are you willing to serve upon the conditions as embodied in the regulations for the duration of the war to be signed by you if you are accepted? | 11. <u>Yes.</u> |

FOR THE DURATION OF THE WAR
FOR THE DURATION OF THE WAR

I, Martin F. Chafe.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.

5. Apr. 1916

.....M. F. Chafe......SIGNATURE OF RECRUIT.

.....A. D. Whitebridge.....Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Martin F. Chafe.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...24...day of...Apr......1916

Signature of Attesting OfficerA. D. Whitebridge.....

†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.....

Place.....} Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Martin Chafe
Apparent age 35 years 6 months. Height 5 feet 3 1/2 inches
Chest Measurement { Girth when fully expanded 36 1/2 inches
Range of expansion 2 inches
Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs. Martin Chafe
110 Barnes Road | Relationship Wife
St. John's
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)
<u>Ellen Gollway</u> <u>Widow</u>	<u>St. John's</u> <u>1906</u>	<u>110 Barnes Rd</u> <u>St. John's</u>	

Particulars as to Children

Christian Names	Date and Place of Birth
<u>Philip</u> <u>Cyril</u> <u>Patrick</u>	<u>June 1909</u> <u>June 1911</u> <u>Mar. 1914</u>

STATEMENT OF THE SERVICES

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

FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 2578 Name Martin F. Chafe Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|---|---|
| <p>1. What is your name?</p> <p>2. What is your full Address?</p> <p>3. Are you a British Subject?</p> <p>4. What is your age?</p> <p>5. What is your Trade or Calling?</p> <p>6. Are you Married?</p> <p>7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which?</p> <p>8. Are you willing to be vaccinated or re-vaccinated?</p> <p>9. Are you willing to be enlisted for General Service?</p> <p>10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?....</p> <p>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?</p> | <p>1. <u>Martin F. Chafe</u></p> <p>2. <u>110 Barnes Rd</u>
<u>St. John's</u></p> <p>3. <u>Yes</u></p> <p>4. <u>35</u> Years <u>6</u> Months</p> <p>5. <u>Teamster</u></p> <p>6. <u>Yes</u></p> <p>7. <u>No</u></p> <p>8. <u>Yes</u></p> <p>9. <u>Yes</u></p> <p>10. { Name</p> <p style="margin-left: 20px;">Corps</p> <p>11. <u>Yes</u></p> |
|---|---|

I, Martin F. Chafe, 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.

S. Ap. 16

M. F. ChafeSIGNATURE OF RECRUIT.

H. O. WhitebridgeSignature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Martin F. Chafe, 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 16 day of Apr 1916.

Signature of Attesting Officer H. O. Whitebridge

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

2578

Name Martin Chapin
Apparent age 35 years 6 months. Height 5 feet 3 1/2 inches
Chest Measurement { Girth when fully expanded 36 1/2 inches
Range of expansion 2 inches
Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs. Martin Chapin
110 Barnes Road | Relationship wife.
St. John's

Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.			
(a) <u>Ellen Holloway</u> <u>widow</u>		(b) <u>St. John's</u> <u>1906</u>	(c) <u>110 Barnes Rd</u> <u>St. John's</u>
(d) Initials of Officer verifying entry.			

Particulars as to Children

Christian Names	Date and Place of Birth
<u>Philip</u>	<u>June 1909</u>
<u>Lybil</u>	<u>June 1914</u>
<u>Frank</u>	<u>Nov. 1914</u>

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>22-4-16</u>									
Joined at <u>St John's</u> on <u>April 22nd 16</u>									
<u>Discharged April 29/19</u>									
<u>Embarked St John's S.P. Militia for C.C. 19/16</u>									
<u>Joined 10th Batta 14/16</u>									
<u>Admitted 88 St. John's 31/17</u>									
<u>Admitted City Corp 9/17</u>									
<u>Admitted 26th St. John's 12/17</u>									
<u>Discharged to harbor 4/17</u>									
<u>Joined here depot Queen 7/17</u>									
<u>Admitted 28/17</u>									
<u>Admitted 88 St. John's 26/17</u>									
<u>Transferred to base 29/17</u>									
<u>Admitted 56 St. John's 29/17</u>									
<u>Admitted 130 Queen 1/18</u>									
<u>Rejoined unit 18-5-18</u>									
<u>Lance Capt. 5/18</u>									
<u>Admitted 3 Batta 4/18</u>									
<u>Rejoined depot 16/18</u>									
<u>Transferred to 2nd Batta 20/18</u>									
<u>Admitted 3 Batta 28/18</u>									
<u>Transferred to 1st Batta 14/18</u>									
<u>Admitted 12 Batta 22/18</u>									
<u>Reported for duty 24-2-19</u>									
<u>Admitted 12 Batta 12-12-18</u>									
<u>Reported for duty 24-2-19</u>									
<u>Demobilization St John's 29-4-1919</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>29-4-19</u> (date of discharge)					<u>3</u> years	<u>8</u> days			
Pension									



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 Master Martin Chafe
aged 35 conducted at C. D. B.

Date: Apr 22/14 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 yes scars 2 yrs ago
- 34 5-3/4
- 35 116
- 36 34 1/2 36 1/2
- 37 #450
- 38 wife Mrs Martin Chafe 110 Barnes St
- 39 wife 3 children

2578

Signature of Medical Examiner: William Roberts

REG'LT No. 2578

RANK

L/Cpl.

H. Q. No.

SOLDIER'S NAME Chafe Martin

DATE PENSION COMMENCES 1-7-19

PENSIONER'S NAME Chafe Martin

WIFE'S NAME Mrs. Martin Chafe

CHILDREN'S NAMES

1. Philip expires 17-6-25

2. Cyril " 24-6-27

3. Patrick " 3-3-30

BLOCK No.

	ANNUAL RATE	PERIOD	MONTHLY RATE	EXPIRES	AMT. PAYABLE	AUTHORIZED AMOUNT	BY
	\$211.20	6	\$17.60	30-10-19	\$70.40	\$70.40	
	105.60	6	8.80	30-11-20	52.80	52.80	
	\$ Nil		Nil				

DEBITS

CREDIT

TOTAL PAYMENTS	DATE	PERIOD	DED.	ABSTRACT	CHEQUE		TOTAL AMOUNT PAID	AUTHORIZED AMOUNT	BALANCE DUE
					SERIES	No. MONTHLY PAYMENT			
	JUL 1	JUL			14.39	38.00	38.00 s	105.60 -	67.60 Cr
38.00	AUG 1				26.06	7.60	45.60 s	105.60 -	60.00 Cr
45.60	SEP 1	SEP			31.26	17.60	63.20 s	105.60 -	42.40 Cr
63.20	OCT 1	OCT			46.62	17.60	80.80 s	105.60 -	24.80 Cr
	NOV 1	NOV			74.76	8.80	8.80 s	52.80 -	44.00 Cr
8.80	DEC 1	DEC			78.45	8.80	17.60 s	52.80 -	35.20 Cr
17.60	JAN 1	JAN			95.25	8.80	26.40 s	52.80 -	26.40 Cr
26.40	FEB 1	FEB			110.85	8.80	35.20 s	52.80 -	17.60 Cr
35.20	MAR 1	MAR			126.03	8.80	44.00 s	52.80 -	8.80 Cr
44.00	APR 1	APR			141.52	8.80	52.80 s	52.80 -	.00 Cr

July 24/191

1583

Martin Chafe, Esq.,
110 Barnes Road,
City.

Dear Sir:-

I beg to advise you that claim for allowance for your wife and children, has been considered by the Board, and it has been agreed to pay you at the rate of \$2.00 each per month for your children, and \$1.60 per month for your wife, from April 30th.,

I herewith enclose cheque for \$38.00 being balance due you to July 31st.

Yours faithfully,

Asst. Secy.

TMH/CC

7. No. 1583.

Chafe Martin

Pelusion @ 880 from 1.120 to 30.420
10% Increase

35 20

35 20

3 52

3 52

THE BOARD OF PENSION COMMISSIONERS
FOR NEWFOUNDLAND.

Pension No. 1583.....

Regt. No. 2578 Rank L/Cpl. Name Martin Chafe

Corps served with ROYAL NEWFOUNDLAND REGIMENT

Regt. Rank held when disability was incurred _____

Date of Medical Board MAY 4 1920

Pensions ~~and~~ Disability nil

Pension Granted:-
\$ Nil per month for _____ months

Additional Allowance for wife:-
\$ Nil per month for _____ mos.

Additional Allice. for Children
_____ children @ \$ _____ per month ea.

or Gratuity Granted:-
\$ _____ payable in _____ equal monthly instalments

Total monthly payments \$ _____ Total authorized amt. _____

Granted to:-

Name Martin Chafe
Address 110 Barnes Rd

Date case disposed of _____

Approved by:-
Members of Board.

[Signature] Chairman
[Signature]

*Noted
man
[Signature]
[Signature]
[Signature]*

Remarks:-
Name of Wife _____

Particulars of children
Name Date of Birth Name Date of Birth

Certified Correct _____

Report of Medical Board

Station	St. John's, Nfld.	Date	MAY 4TH., 1920.
No. and Rank	2578 L/CPL.	Age	42
Name	CHAPE, MARTIN	Height	
Unit	Royal Newfoundland	Complexion	
Address	110, BARNES ROAD	Eyes	
Former Trade		Hair	
Enlisted at	ST. JOHN'S On 2/4/16	(The Board will please note how the soldier's appearance corresponds with above description).	
Disease or Disability	Original	<u>FRACTURE RIGHT TIBIA</u>	

Subsequent

Present Condition (Compare with previous Board)

Free movement - no disability now.

THE ENTIRE DISABILITY: To what extent is his capacity lessened at present for earning a livelihood in the general labour market?

but

PENSIONABLE DISABILITY: To what extent is his capacity at present for earning a full livelihood in the general labour market lessened by that proportion of his disability due to or incurred during service?

but

Recommendation of Medical Board

Members of Board

Clay Macpherson
 Lt-Col.

[Signature]
[Signature]
[Signature]

Approving Medical Officer.



THE BOARD OF PENSION COMMISSIONERS
FOR NEWFOUNDLAND.

Pension No. 1583

Regt. No. 2578 Rank 2nd Lt Name Martin Chafe

Corps served with ROYAL NEWFOUNDLAND REGIMENT

Regt. Rank held when disability was incurred _____

Date of Medical Board 24/1/19

Pensionable Disability 10% for 6

Pension Granted: - 5.00 per month for 6 months

Additional Allowance for wife: - 50¢ per month for 6 mos.

Additional Allee. for Children 3 children @ 1.00 per month ea.

or Gratuity Granted: - 80 payable in _____ equal monthly instalments

Total monthly payments 80 Total authorized amt. 52.80

Granted to: -

Name Martin Chafe
Address 110 Barnes Rd

Date case disposed of _____

Approved by: -
Members of Board
[Signature] Chairman
[Signature]
[Signature]

Remarks: -
Name of Wife Mrs Martin Chafe

Particulars of children

Name	Date of Birth	Name	Date of Birth
<u>Philip</u>	<u>17/6/09</u>	<u>expires</u>	<u>17/6/25</u>
<u>Lynel</u>	<u>24/6/11</u>	<u>"</u>	<u>24/6/27</u>
<u>Patrick</u>	<u>15/3/14</u>	<u>"</u>	<u>15/3/30</u>

Certified Correct [Signature]

1583

S E C O N D B O A R D

Form Z179 N.M.D.

Report of Medical Board.

Station **St. John's, Nfld.** Date **OCTOBER 24th., 1919.**
 No. and Rank **2578 L/CPL.** Age **41** Height
 Name **CHAPE MARTIN** Complexion
 Unit **Royal, Newfoundland** Eyes Hair
 Address **110 BARNES ROAD**

Former Trade

Enlisted at **ST. JOHN'S** On **2/4/16** (The Board will please note how the soldier's appearance corresponds with above description).

Disease or Disability Original **FRACTURE TIBIA (RIGHT)**

Subsequent

Present Condition (Compare with previous Board)

*apart from
injury date from last August
Good movement now.*

THE ENTIRE DISABILITY : To what extent is his capacity lessened at present for earning a livelihood in the general labour market ?

10%

PENSIONABLE DISABILITY : To what extent is his capacity at present for earning a full livelihood in the general labour market lessened by that proportion of his disability due to or incurred during service ?

10% of months

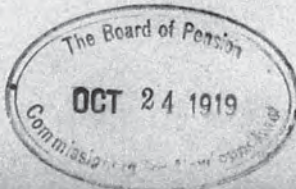
Recommendation of Medical Board

Members of Board

*Amey Macpherson,
M.C.*

*J. B. King, Capt.
J. Peterson, M.D.*

Approving Medical Officer.



THE BOARD OF PENSION COMMISSIONERS
FOR NEWFOUNDLAND.

Pension No. 1583

Regt No. 2578 Rank Lt Col Name Martin Chafe
Corps served with ROYAL NEWFOUNDLAND REGIMENT
Pension Granted \$ 10⁰⁰ per month for 6 months.

ADDITIONAL ALLOWANCE FOR WIFE.

To be paid \$ 1⁶⁰ per month for 6 months.

ADDITIONAL ALLOWANCE FOR CHILDREN

3 Children @ \$ 2⁰⁰ per month for each for 6 months.

Date case disposed of JUL 15 1919

Approved by: -

Members of Board:

[Signature]

[Signature]

*Noted:
[Signature]*

Remarks:

Married 1 - 29th June 1906.

THE BOARD OF PENSION COMMISSIONERS
FOR THE FOUNDLAND.

FORM TO BE FILLED IN BY DISABLED PENSIONER IN ORDER
TO RECEIVE ALLOWANCE FOR CHILDREN

2578
(regimental Number)
..... *Martin Chape*
(Full name)
..... *Royal W. Rex*
(Ship or Unit)

..... *A. Cope*
(Rank or Rank)

hereby declare as follows:-

1. That I am married, and my wife is alive.
(Attach marriage certificate) (If not married write the words "Not married" on the next line)

2. And that the following are the true particulars of my living children, boys under sixteen and girls under seventeen years. (Attach Birth Certificates)

Names of Children	Sex	Dates of Birth	Place of Residence	By whom Maintained
<i>Philip</i>	<i>male</i>	<i>17/6/1909</i>		
<i>Cyril</i>	<i>"</i>	<i>24/6/1911</i>		
<i>Patrick</i>	<i>"</i>	<i>15/3/1914</i>		

(Note: If you have no children write the words "No Children" across the above space)

..... *Martin Chape*
Signature of Pensioner.

This is to certify that the foregoing declaration and signature were made by the above named pensioner in my presence this day of 19....., and I believe him to be the person he represents himself to be, and that his children above named are alive.

..... *A. Cope* Signature
..... Rank or Position

N.B.--It will be necessary for this form to be signed before a Magistrate, Notary Public, Justice of the Peace, or other person authorized to administer an oath.

June 1906
21/7/19

THE BOARD OF PENSION COMMISSIONERS
FOR NEWFOUNDLAND.

Pension No. 1583

Regtl. No. 2578 Rank Private Name Martin Chafe

Corps served with ROYAL NEWFOUNDLAND REGIMENT

Date of Medical Board 7-1-19.

Pensionable disability 20% for 6 months

Pension granted:

\$ 10⁰⁰ per month for 6 months

or Gratuity granted:

\$ _____ payable in _____ equal monthly insts.

Granted to:

Name Martin Chafe

Address 110 Barnes Rd

Handwritten initials/signature

Date case disposed of APR 28 1919

Approved by:

Members of Board

[Signature] Chairman
[Signature]
[Signature]

Remarks:

Handwritten initials/signature

Medical Report on an Invalid.Station HAZLEY DOWN CAMPDate DECEMBER 21st., 19181. Unit **ROYAL NEWFOUNDLAND**2. Regimental No. **2578**3. Rank **L/CPL.**4. Name **CHAVE, MARTIN**5. Age last birthday **41**6. Enlisted { on **APRIL 2nd., 1916**
at **ST. JOHN'S**7. Former Trade } **TRANSFER**
or Occupation }

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

(a) Former Unit;

(b) Regimental No.;

(c) Date of Discharge;

(d) Cause of Discharge.

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

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

9. Date of origin of disability.

10. Place of origin of disability.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. **HE STATES: WHILST RUBBISH IN FRANCE ON A LIMBER DONKEYS BOLTED? HE WAS THROWN TO THE GROUND. THE BACK WHEEL OF THE CART GOING OVER RIGHT ANKLE FRACTURING TIBIA**

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

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

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

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

13. What is his present condition?

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

A SCAR ABOUT ONE INCH LONG OVER EXTERNAL MALLEOLUS. FLEXION AND EXTENSION GOOD. COMPLAINS OF PAIN ABOUT TWO INCHES ABOVE TIP OF INTERNAL MALLEOLUS. UNABLE TO WALK ANY DISTANCE

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

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

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

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

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

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

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

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

20. Do you recommend—

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

REPATRIATION

(SGD) J. B. O'BRIEN, CAPT. R.A.M.C.

Officer in medical charge of case.

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

Station _____

Officer in charge of Hospital.

Date _____

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

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

Opinion of the Medical Board.

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

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

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

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

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

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

(i.) Service during the present war; **YES**

(ii.) Climate;

(iii.) Ordinary military service;

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

(v.) Whether it is constitutional or hereditary. **NO**

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

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

23. Is the disability permanent?

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

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

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

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

27. Do the Board recommend—

(a) Discharge as permanently unfit, or **YES**

(b) Change to England?

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

(a) Sanatorium;

(b) Hospital;

(c) Convalescent home;

(d) Asylum; or

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

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

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

Signatures:—

(SGD) H. S. FRASER President.

Station **ST. JOHN'S**

J. SINCLAIR TAIT

Date **JAN. 7th., 1919**

L. PATERSON, Major

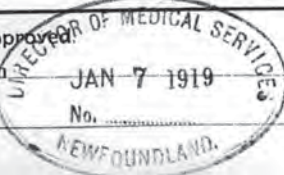
} Members.

Approved

Station **JAN 7 1919**

(SGD) CLUNY MACPHERSON, MAJOR
Administrative Medical Officer.

Date No. _____



The Royal Newfoundland Regiment

C O P Y

PROCEEDINGS ON DISCHARGE

1. No. 2578 Rank L / C. Name Chafe, M.
 Intended place of residence 110 Barnes Rd.

2. Occupation Teamster
 Classification of soldier B. Medical Category E.

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

Eligible for War Service

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

Place APR 15 1919 (sgnd) C. C. Duley, Capt.
 Date for 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 APR 15 1919 (sgnd) M. Chafe
 Signature of soldier
 " A. M. Clouston, Lt.
 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 APR 15 1919 (sgnd) M. Chafe
 Signature of soldier
 " James Newman, Sgt.
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 22-4-16 No of days on Military
 Discharged from service 15-4-19 plus 14 days. Service 1103

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 APR 15 1919 (sgnd) R. H. [Signature]
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place
 Date Officer i/c Records
 The Royal Newfoundland Regiment

C.R. 2578

Extract from Nominal Roll of Mfld. Regt. Draft No. 11 from
2nd Bn. Depot, to 1st Bn. B.E.F. Embarked Southampton
3-10-16.

2578 Pte. M. Chafe.

C.R. 2578

Extract from Daily Orders part II

Depot St. John's dated Mar. 6th., 1919.

Attached to Depot for duty from 24-2-19.

#2578 L/C. M. Chafe.

C.R. 2578

Extract from Daily Orders part 11, Depot St. John's dated Dec. 23rd. 1918

2578 A/Sgt. M. Chafe

Reverts to Lance Corporal 22-12-18.

C.R. 2578

Extract from Daily Orders part 11, Depot St. John's
dated December 23rd., 1918.

The u/m returned from Overseas and reported at Depot 21-12-18.

#2578 L/c M. Chafe.

C.R. 2578

Extract from Daily Orders part 11, Depot St. John's dated Dec. 23rd. 1918.

#2578 ~~1st~~ L/C. M. Chafe.

be acting Sanitary Sergeant from 12-12-18.

C.R. 2578

Extract from Nominal Roll of Repatriation draft No. 79 per S.E. CORSEICAN
which embarked at Folbury Docks 12/12/18.

from 2nd. Battalion of the Royal Newfoundland Regiment.

#2578 L/C. M. Chafe.

C.R. 2578
- -

Aug. 23rd, 18

Dear Mrs. Chafe :-

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

your husband, No. 2578, L/Corpl. Martin F. Chafe is at Wandsworth suffering from injury right foot, accidental

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

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

Yours faithfully,

Minister of Militia.

Mrs. Martha Chafe

110 Barnes Rd.

C.R. 2578

SICK AND WOUNDED N.C.O.'S AND MEN OF THE EXPEDITIONARY FORCE - FRANCE.

ARMY VETERINARY CORPS.

LIST No. H.A. 27695.

4781 Sgt. Turner, A. AVC. att. RFA. 87. Bde. P.U.O. Sgt. . . . Adm: 8. Can; Gen: H. Boulogne 16th. Aug '18.

NEWFOUNDLAND CONTINGENT.

LIST No. H.A. 27695.

2549 L/C. Chafe, M. 1/- R. Newf. R. Accd. Inj. R. Foot. Sk. Mild. Adm: 8. Can; Gen: H. Boulogne 16th. Aug '18.



838/1

C. 2.—Casualties.

1645

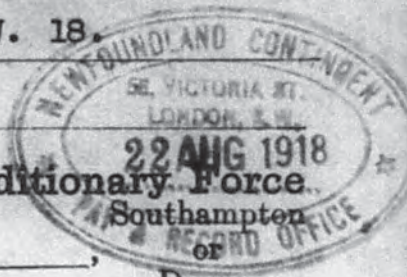
C.R. 2578
Army Form W. 3026.

3rd LONDON GENERAL HOSPITAL, at WANDSWORTH, S.W. 18.

Affiliated to _____

NOMINAL ~~Roll~~ of Sick and Wounded from the * FRANCE Expeditionary Force.

admitted on 20/8/18 from Hospital Ship _____, Southampton or Dover.



* Here insert which Expeditionary Force.

NOTE.—These rolls should be forwarded direct to the War Office, Alexandra House, Kingsway, W.C., *not later than the day after admission*; envelopes to be marked C. 2, Casualties; rolls are not to be telegraphed in advance.

Regtl. No.	Rank	Name (Surname first)	Corps	Disease or Injury (State whether sick or wounded, and whether slight, severe or dangerous)
2578	L/C.	Chafe, M.	R. Nfld R.	Injury R. Foot (acc.)
		(Sgd) E. H. BINGLEY, Capt. R.A.M.C.T., Registrar.		

C.R. 2578

Extract from Telegram received from London, dated
August 22, 1918.

At Wandsworth, Injury right foot accidental
#2578 L/Corpl. Chafe ~~at Royal Victoria Hospital, Netley.~~

C.R. 2578

Exttact from Daily Orders Part 11 Unit The Royal Mfld.Regt.,
17/8-18.

2578 E/Cpl. Chafe M.

To England (s) 20/8/18.

W. J. C.R. 2578

NEWFOUNDLAND CONTINGENT

I.

COPY.

From: Chief Paymaster & Officer i/c Records,
Newfoundland Contingent,
London, S.W. 1.

To: Officer Commanding,
1st Bn., R. Newfoundland Regt.,
B. E. F.

Pay & Record Office,
22nd June 1918.
No. 9942/300/R.&.C.

2578 L/C. M.F. CHAFE.

I am instructed by the Department of Militia to ask you to advise the above-named N.C.O. to write to his wife, please, as she has not heard from him for so long.

(Sgd) H. A. ANDERSON, for Major,
Chief Paymaster & O. i/c Records.

II.

From: O.C. 1st Bn., R. Nfld Regt.

To: Chief Paymaster & O. i/c Records.

In. Ref. No. 5913.

2578 L/C. M. F. Chafe states that he has written several times, and will write again immediately.

Orderly Room,
1st Battn.,
28/6/18.

(Sgd) A. E. BERNARD, Major,
Comdg 1st Bn. R. Newfoundland Regt.

C.R. 2578

June 19, 19.

Mrs. Martha Chafe,
110 Barnes' Road.

Dear Mrs. Chafe,

In answer to our inquiries as to the whereabouts of your husband, #2578 L/Cpl. M. Chafe, we are informed by the Record Office, London, that he is with the 1st Battalion in France.

With regard to his neglect in writing you, I may say that he has been instructed to write at the earliest opportunity, and I trust that in the near future you will hear from him.

Yours faithfully,

C.C.B.

Captain,

for Chief Staff Officer.

C.R. 2578

Extract from Telegram received from London, dated
June 18, 1918.

In answer to your telegram June 16th L/Cpl. #2578
Chafe in France.

C.R. 2578

Extract from Code Telegram forwarded to Synopsiall,
London, dated June 18th, 1918.

In answer your telegram June 16th:-

#2578 L/Cpl. Chafe in France.

C.R. 2578

Extract from Telegram despatched to Synoptical, London,
dated June 15th, 1918.

Inform whereabouts 2578 Pte. Chafe not writing
wife please take necessary steps.

C.H.

2578

Extract from Daily Orders part 11, from Unit The Royal
In the field.
Hfld. Regt. S.S. Salmis, dated 1-6-18.

#2578 Pte. M. Chafe.

Appointed Lance Corporal 5-5-18

C.R. 1578

Extract from Casualties received from the P. & R. O. London
dated May 5th 1918.

#2578 Pte. M. Chafe.

To be lance/Cpl. from this date.

C.R. 2578

Extract from list of wounded and sick N.C.O's and men of the
Expeditionary Force, France dated Mar.9th 1918. List.No.H.A.
20300

2578 Pte.Chafe, F.

ICT Elbow.....Dis.to Base Dep.Rouen per A.T. 33 ex 14 Con
Dep.1 Mar.18.

C.R. 2578

Extract of Casualties received from Pa & Record
Office, London, dated January 10, 1918.

#2578 Pte. M. Chafe. ✓

ICT. Right Elbow.

Admitted 14th Con. Dep. Trouville ex 6th Con. Dep
January 2, 1918.

C.R. 2578

SICK AND WOUNDED N:C:O's AND MEN OF THE EXPEDITIONARY FORCE - FRANCEARTILLERY - ROYAL HORSE & ROYAL FIELD

No.H.A.17938

190008	Dvr Morris G.	RFA 29 DAC	? Dysentery	Mild	Adm 7 Gen H.St Omer	27 Dec'17
656122	Sgt Innes J.R.	" D/168 Bde	P.U.O.	Mild	Adm 53 Gen H.Boulogne	29 Dec'17
		Army FA				
245348	Gnr Stanton J.	" D/52 Bde	Gassed(Mustard)	Mild	Adm 53 Gen H.Boulogne	29 Dec'17
		Army P.A.				
202993	Dvr Willden A.	" 158 Bde H.Q.	P.U.O.	Mild	Adm 53 Gen H.Boulogne	29 Dec'17
		Army FA				
701684	Dvr Riley H.	" B/330 Bde	GSW Leg L.(c.f) &		Adm 53 Gen H.Boulogne	29 Dec'17
			Leg R.	Sev		
851225	Gnr Pragnell S.	" A/47 Bde	P.U.O.	Mild	Adm 53 Gen H.Boulogne	29 Dec'17
173902	Gnr Laycock H.	" C/242 Bde	Nephritis	Acute	Adm 53 Gen H.Boulogne	29 Dec'17
		Army FA		Sev		
640815	Gnr Hooton W.	" B/285 Bde	Colitis	Mild	Adm 53 Gen H.Boulogne	29 Dec'17
L/19435	Sgt Simpson D.	" A/161 Bde	Gassed	Sev	Adm 53 Gen H.Boulogne	29 Dec'17
86290	Dvr Gore H.	" (AFA)465/65 Bd.	ICT Legs	Mild	Adm 56 Gen H.Etaples	29 Dec'17
213270	Gnr Jones S.A.	" D/64 A.Bde.	Neurasthenia	"	Adm 56 Gen H.Etaples	29 Dec'17
8026	Bdr Gibbons A.	" C/156 Bde	do.	"	Adm 56 Gen H.Etaples	29 Dec'17
29097	Dvr Duffy T.	" 70/34 Bde	do.	"	Adm 56 Gen H.Etaples	29 Dec'17
24913	Gnr Hodge G.A.	" (AFA)B/64 Bde	Shell Shock	Wd.	Adm 56 Gen H.Etaples	29 Dec'17
				Mild		
970386	Sgt Eastop W.G.	" C/156 Bde	Debility	Sev	Adm 56 Gen H.Etaples	29 Dec'17
204839	Dvr Bishop W.	" B/159 Bde	V:D:H:	"	Adm 56 Gen H.Etaples	29 Dec'17
7070	Cpl Oliphant C.	" 159 Bde H.Q.	Myalgia	"	Adm 56 Gen H.Etaples	29 Dec'17
190589	Gnr Pilkington J.	" C/79 Bde att	P.U.O.	"	Adm 56 Gen H.Etaples	29 Dec'17
		17 Sig.Sch.				

NEWFOUNDLAND EXPEDITIONARY FORCE

No.H.A.17938

2578	Pte Chafe M.	1/Newfoundland	ICT Elbow	Mild	Adm 56 Gen H.Etaples	29 Dec'17
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SOUTH AFRICAN RECORD OFFICE

No.H.A.17938

10498	Pte Pautz W.A.	3/S A Inf.	PUO (Trench Fever)	Sev.	Adm 56 Gen H.Etaples	29 Dec'17
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C.R. 2578

Extra:

Extract from War Office List. No. H.A. 18159.

#2578 PTE. M. CHAFE.

ADM. 14 CON. DEP. TROUVILLE EX 6 CON. DEP. 2 JAN. 1918.

10T. ELBOW R.

BC.

C.R.

2578

Extract of Casualty received from Pay & Record
Office, London, dated January 2, 1918.

#2578 Pte. M. Chafe. ✓

ICT. L. Elbow mild.

Admitted New Zealand Stationary Hospital, Waiques
December 26, 1917.

C.R. 2578

Extract from Casualties List No. 17852

2578 Pte. Chafe, M.

ICT L Elbow Mild, Adm. New-Zea. Sty. H. Wisques. 26th Dec!17

110

Nov. 21st, 1917

Mrs. L. Chafe,
110 Barnes Road,
CITY.

Dear Mrs. Chafe:- 2578 Pto. H.F. Chafe

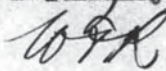
The following message has been received
to the enquiry made to the Pay & Record Office, London
with reference to the possibility of furlough being granted
to your husband:-

"With reference to application for furlough
to Newfoundland, only men who are being
discharged can be repatriated under
"present conditions".

I regret that furlough cannot be obtained.

I am,

Yours faithfully,



Major, C.S.O.

R: 2578

Extract from Nominal Roll Embarked St. John's for Overseas,
per S.S. "Sicilian" July 19, 1916.

2578 Chafe M.F. Pte.

C.R. 2578

Martin F. Chafe was attested for General Service with
the NEWFOUNDLAND CONTINGENT on April 22nd 1916
Regimental No. 2578 was allotted to Pte Martin F. Chafe.

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th 1919

M. L. Chap.

C.R.

2578

P. R. O.

WILL.Name M. F. ShafeRegtl. No. 2578 Rank 1st Lt.

Regiment

Date of:—

Receipt

23⁸/₁₈

Transfer

31/4/17Final disposal and
to whom sent ...

Medical Report on an Invalid.

Station HogshykeDate 10-12-18

1. Unit Regal N.F.S.B.
2. Regimental No. 2578
3. Rank S. Sgt.
4. Name Chas Martin
5. Age last birthday 41
6. Enlisted { on 22 April 1916
at St Johns
7. Former Trade } Seaman
or Occupation }
- 7A. If with previous service in Army, state—
(a) Former Unit;
(b) Regimental No.;
(c) Date of Discharge;
(d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

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

Fracture Right TibiaStatement of Case.

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

9. Date of origin of disability.

10. Place of origin of disability.

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

He states whilst collecting rubbish in France on a limber sentry's holdid was thrown to the ground back wheel of cart going over right and the Fracturing Tibia

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

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

Opinion of the Medical Board.

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

- (ii.) Expressions such as "may," "might," "probably," &c., should be avoided.
- (iii.) The rates of pension vary directly according to whether the disability is, (a) caused or aggravated by service in the present war, (b) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.
- (iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.
- (v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

1. (a.) State whether the disability is clearly attributable to—
 - (i.) Service during the present war;
 - (ii.) Climate;
 - (iii.) Ordinary military service;
 - (iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or
 - (v.) Whether it is constitutional or hereditary.
- (b.) If due to one of the first three of these causes, to what specific conditions do the Board attribute it?
22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which?
23. Is the disability permanent?
24. If not permanent, how soon do the Board recommend re-examination?
25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.
26. If an operation was advised and declined, was the refusal unreasonable?
27. Do the Board recommend—
 - (a) Discharge as permanently unfit, or
 - (b) Change to England?
28. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic training) is desirable in a—
 - (a) Sanatorium;
 - (b) Hospital;
 - (c) Convalescent home;
 - (d) Asylum; or
 - (e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.
29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended?
30. Does the man require the constant attendance of another person?

Signatures :— _____ President.

 _____ } Members.

 Approved.
 Station _____
 Date _____
 Administrative Medical Officer.

13. What is his present condition?

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

*scar about, in leg was entered
 malleolus flexion in extension
 good compliance of hair about six
 above tip of internal malleolus
 unable to walk for any
 distance*

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

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

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

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

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

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

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

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

20. Do you recommend—
 (a) Discharge as permanently unfit, or
 (b) Change to England?

Repatriation
Bo Riley Capt Raml

 Officer in medical charge of chse.

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

Station _____
 _____ Officer in charge of Hospital.
 Date _____

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

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

FORM K

Nº 2470



3 1ST. NEWFOUNDLAND REGIMENT 2

ALLOTMENTS

I, Martin H. Chafe, Regl. No. 878

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and 90 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and} _{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and} _{or} Persons concerned, viz.:

Allotment begins July 1st 1916

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
2456	Wife	Mrs. Miller Chafe	110 Bazaar St. John's	90
		Commanding Officer		
Total Allotment, \$				

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.) Chas. A. Aye Capt.
 Officer Commanding
St. John's Company
June 19 1916

(Sig.) Martin H. Chafe
 (Rank) Plt



December, 14th. 1917.

Chief Paymaster,
London.

Sir,

I credit you, through reciprocal account with
16s. 6d. to be paid to number 8578 Pte. Martin Chafe.
(sixteen shillings & five pence)
I have the honour to be,

Sir,

Your obedient servant,

A handwritten signature in cursive script, appearing to read "W. Howley".

Capt. & Paymaster.

No. 2578 Rank Plt Name Chafe M.

Pay	R.A. Wkg	Total
100	10	110
Less: Allowment		90
Net Rate		20

M.P./35.

DEBITS	Date	£	s	d	CREDITS	Period		Days	Rate	£	s	d
						From	To					
Balance	9/6/17	1	7	9 ^{1/2}	Balance							
Acquittance Rolls		6	15	8	Pay @ Net Rate	9/6/17	20/1/17	160	20	32	00	6 11 6 ✓
Hospital Advances		2	7	8 ^{1/2}	Ration Allowance							1 4 6 ✓
A.B. 34 (65 hrs)				6 9 ^{1/2}	14 days @ 1/9							
6/16 Ppt. of Kit AR 64												
P. & R.O. Payments												
10-11-10 Cash No 4486		1	4	6		25/11	4/12	14	20	2	80	11 6 ✓
12-2-4 ✓												
3-14-10 ✓												

8-76 ✓

CHECKED.
[Signature]
 20 1 17

NEWFOUNDLAND CONTINGENT

N.F.P. 11

No 10177

From: Paymaster & Officer i/c Records.

To: Officer Commanding,
/1 Newfoundland Regiment.

Owing to compulsory stoppage: *3 days Pay.*
under authority of *Overseer of Pay from*
Acq Rolls.
the account of No. *4578 P. H. J. Chase*
shows a debit balance at date *5/9/17* of £ 1:15:3, and there may be
other debits per Acquittance Rolls or otherwise, not yet received
at this Office.

Since the stoppage of payment of his Allotment of *90* cents
per diem in favour of *Mr. Ella Chase 110 Bermuda Rd. St. John's*
may form an undue hardship; may I be informed if it is practicable
to recover the amount by either of the following means:-

- (1) Reduction of issues of pay?
- (2) Direct recovery in cash?
- or
- (3) Stoppage of payment of Allotment?

Pay & Record Office,
58, Victoria Street,
London, S.W.

Oct 3rd 1917.

[Signature] Capt.,
Paymaster & O. i/c Records.

From: Officer Commanding,
/1 Newfoundland Regiment.

To: Paymaster & Officer i/c Records.

It is ordered that the debt stated be recovered by _____

O.C., /1 Newfoundland Regiment.

Statement of Accounts

No. 2576 Rank Private OF Name Lehaye R.F.

Company, etc. _____

From 9/6/17 to 20/8/17 (dates).

DEBITS				CREDITS				
Date				Date		£	s	d
8/6/17	Balance	1	7	9	9/4/17 <u>Pay</u> to 20/8/17 73 days @ 1-10	16	10	0 ✓
9/6/17 to 20/8/17	Allot @ 9 octo per diem 73 days	13	10	0				✓
	Acq. Rolls India	2	11	4				✓
	Creditor Balance				Debtor Balance			19 10 ✓
	Total £	17	9	1	Total £	17	9	10 ✓

Station London
Date Sept 14/17

Certified correct,

R. H. ...
14/9/17

Paymaster.

No. 10177



NEWFOUNDLAND CONTINGENT

Officer Commanding,
1/1st Newfoundland Regt.,

B. E. J.
France.

Owing to ~~compulsory stoppage~~: Overissues of Pay. per
Acquittance Rolls. (Not paid for issues 10 per day)
under authority of _____
the account of No. 2571 Pte. N. J. Chaff
(see last accy. paid paid)
shows a debit balance at 579/17 of £ 1-15-3 and there
may be other debits per Acquittance Rolls or otherwise, not yet
received at this Office.

Since the stoppage of payment of his allotment of 90 cts.
per diem in favour of Mrs Ellen Chaff, 110 Barnes Rd, St John's Nfld.
may form an undue hardship; may I be informed if it is practic-
able to recover the amount by either of the following means:-

- (1) Reductions of issues of pay?
- (2) Direct recovery in cash?
- (3) Stoppage of payment of allotment?

Pay & Record Office,
58, Victoria Street,
London, S.W., 1.
Col. J. H. A. [Signature] Major,
Paymaster & Officer i/c Records.
Oct 2 1917

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

It is ordered that the debt stated be recovered by

reductions of issues of pay. being paid
5/24 instead of 10/24 on pay days.

A. L. Hadow. Lt Col
O.C., /1 Newfoundland Regt.

W. H. [Signature]
Oct 15th 1917

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

This FORM to be COMPLETED and RETURNED to:



Statement of Accounts

No. 2578 Rank Private OF Name Chafe N. J.

Company, etc. _____

From 9⁶/₁₁ to 5⁹/₁₁ (dates).

DEBITS				CREDITS			
Date				Date			
<u>8⁶/₁₁</u>	Balance	1	7	<u>9⁶/₁₁</u>	Pay. 39 days @ 1/10	20	2
				<u>to</u>	= \$97.90		4 ✓
<u>9⁶/₁₁</u>	Allotment	16	9	<u>5⁹/₁₁</u>			
<u>to</u>	19 days @ 90% = \$30.10		2				
<u>5⁹/₁₁</u>	Acquittance Rolls	4	0				
			8				
Creditor Balance				Debtor Balance			
Total £				Total £			
21				21			
17				17			
7 ✓				7 ✓			

CHECKED.
C. R.
3/10/17

Station Loran
Date 3/1/17

Certified correct, J. H. Anderson
Paymaster.
CHIEF PAYMASTER & OFFICER IN CHARGE RECORDS

Forms
C. 348
1660

MEMORANDUM.

CHIEF PAYMASTER & OFFICER I/C RECORDS.
NEWFOUNDLAND CONTINGENT,
58, VICTORIA STREET,
LONDON, S.W. 1.
ENGLAND.

CHIEF PAYMASTER & OFFICER I/C RECORDS.
NEWFOUNDLAND CONTINGENT,
58, VICTORIA STREET,
LONDON, S.W. 1.
ENGLAND.

From *CC 12 B*

To Officer Commanding,
Royal Newfoundland Regt.
B. E. F.

ANSWER.

Pay & Record Office,

B. E. F.
May 5th 1918.

3rd April 1918

2578, Pte. M. Chafe,

With reference to the following letter (421) from the Hon. the Minister of Militia received 11/1/18:-

"I credit you through reciprocal account with 16s 5d to be paid to 2578 Pte. Martin Chafe (sixteen shillings and five pence)"

this amount has been placed to the credit of this Soldier's account, pending your instructions. *please.*

R. A. Dunwell
Major,
Chief paymaster & O. i/c Records.

FM/S

A 029535

No 29/c

This Soldier wishes this amount to be returned to his credit please.

NEWFOUNDLAND CONTINGENT,
PAY & RECORD OFFICE,
11th May 1918
LIEUT. COL.
COMMANDING 1st BR. ROYAL NEWFOUNDLAND REGIMENT.

NEWFOUNDLAND CONTINGENT, PAY & RECORD OFFICE,	
Rec'd 11 MAY 1918	
ACK'd Ans'd	
Ref. Nos. UU1	
Blvd. CH	
Comd.	
P & A. ✓	
R & O.	
B & E.	
P.S.	

Let Fanning

Send memo to $\frac{5712}{165}$

notifying him that
this remittance has been
placed to the credit of
his soldier's a/c.

See to Base Depot Raven
1/3/18 probably with unit
now In 3/4/18

STAMP
NOT
REQUIRED

1.1.18
14 C.D



No. 515/1

NEWFOUNDLAND CONTINGENT

From: Chief Paymaster & O. i/c Records,
Newfoundland Contingent,
58, Victoria Street,
London, S.W. 1.

TO: Officer Commanding,
6th Con. Depot,

✓ 6 Staples.

12th January 1918

15 January 1918

Subject: 2578, Pte. M. Chafe

ANSWER

With reference to the following letter telegram (421) from the Hon the Minister of Militia, received 11/1 /18

This man was transferred to N° 14 Convalescent Depot on 11/1/18.

I cr, you through reciprocal account with 18s 5d to be paid to 2578 Pte Martin Chafe, sixteen shillings and five pence.

Kindly advise whether this amount should be remitted to you for payment to this Soldier, retained to credit of his account, or otherwise dealt with.

H. J. Anderson
Chief Paymaster & O. i/c Records.

Staples
15.1.18
L. B. D. Howell
25.1.18
28.1.18

LT. COL. R.A.M.F.
CONVALESCENT DEPOT

Paymaster + O/C Record
London

Ref. to N.F.P/79's records from
you being X was gift from
Dominion Tne Brigade - The following
are returned for reasons opposite

No 2272 Plc. J. GEZEKIEL - sent to Base being
under age 12-12/17

No 2779 Plc. P. SOMERTON - Died of Wounds
4/12/17

No 2773 Plc. W. REES - Wounded
Dec. 1917

No 1700 Plc. N. YETMAN Wounded
Dec. 1917

No 919 Plc. D. J. FURLONG. Wounded
Died. Dec 4-1917

NEWFOUNDLAND CONTINGENT, PAY & RECORD OFFICE.	
Ref. Nos. IN	8146
Rec'd	25 DEC 1917
Ack'd	Ans'd
Ref. Nos. OUT	
ACTED UPON	
BRANCH	DATE
Comd.	COMMS. 1ST NEWFOUNDLAND REGT.
P.S.A.	
R & C.	
E & E.	
P.S.	

C. Dicks
Lieut
Q. A. D.
M.P. & P.

1007
21/12/17

LIEUT. COL

2793 Ph W. Rus
Tooting Military Hosp.

1700 Ph. W. Yetman
11th Convalescent Depot,
Bunby.

Still at Hospital
opposite
2/1/18
1/2/18
9 1 18
14.1.18
17.1.18
21.1.18

~~919 Ph. L. J. Furlong.
3rd Australian Gen Hosp.
Dead abbotts~~

Still at
Hospital
2/1/18
1/2/18
9 1 18
14.1.18
17.1.18
21.1.18
24.1.18
25.1.18
25.1.18

Some letters
attached
Gold per by
C. J. P.

FOR THE DIRECTOR OF THE

9942/300/R.&C.

Officer Commanding,
1st Bn. Royal Nfld Regt.,
B. E. F.

Pay & Record Office,

22nd June, 8

2578 L.CPL. M.F. CHAFE.

I am instructed by the
Department of Militia to ask you
to advise the above-named N.C.O.
to write to his wife, please, as
she has not heard from him for
so long!

Major,
Chief Paymaster & O. i/c Records.

HA/JC

Replet from Cooper
No. 5434 JTB

9942/300/R. & C.

Forms
C 348
1660

Copy to Major 27/18

MEMORANDUM.
CHIEF PAYMASTER & OFFICER I/C. RECORDS
NEWFOUNDLAND CONTINGENT

From
58, VICTORIA STREET,
LONDON, S.W. 1.
ENGLAND.

From *O.C. 1st Bn Royal
Newfoundland Regt.*

To
Officer Commanding,
1st Bn. Royal Nfld Regt.,
B. E. F.

To
CHIEF PAYMASTER & OFFICER I/C. RECORDS.
NEWFOUNDLAND CONTINGENT,
58, VICTORIA STREET,
LONDON, S.W. 1.
ANSWER ENGLAND.

Pay & Record Office,

22nd June, 1918

191

2578 L. CPL. M.F. CHAFE.

2578 L/c M.F. CHAFE

I am instructed by the
Department of Militia to ask you
to advise the above-named N.C.O.
to write to his wife, please, as
she has not heard from him for
so long!

*The above states that he
has written several times
and will write again
immediately.*

J. S. Anderson
Major,
Chief Paymaster & O. i/c Records.

NEWFOUNDLAND CONTINGENT,
PAY & RECORDS OFFICE
COMMANDING 1st Bn. ROYAL NEWFOUNDLAND REGIMENT

Rec'd
Ack'd
Ref. Nos. 101
JUL 1918

HA/JC



P.S.

LAST PAY CERTIFICATE

OFFICE COPY

N.F.P./94.

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

Regtl No. 2579 Rank L/Cpl. Name Chafe H. F. Unit Royal Mfd. Regt. who was repatriated
to Newfoundland on 12/12/18 Authority Draft No. 79 Cause _____

DR. STATEMENT OF ACCOUNT CR.

PERIOD: From 14/11/18 To 20/12/18

PARTICULARS						PARTICULARS							
		£	s	d			£	s	d				
Balance Dr. from 13/11/18				1	11	0	Balance Cr. from						
Allotment 37 days @ 90		35	50	6	16	10	Pay 37 days @ \$1.05		36	85			
Cash Payments:						Field Allowance 37 days @ \$.10		3	70				
N.F.P/54										8	14	10	
Depot 29/11/18								42	55				
" 6/12/18						Other Allowances days @ \$							
" 22/11/18													
Other Debits						Other Credits:							
B.Damages													
Mis.Stoppages													
Total Debits						Total Credits							
Balance due by Paymaster						Balance due to Paymaster							
				9	18	9					8	14	10
				9	18	9					1	3	11
				9	18	9					9	18	9

*W. J. P. 65 308/9
Sent to H. Z. St. John's
7/1/19*

CHECKED.
E.H.
2-1-19

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

(Place) _____ (Date) 191
Made up/Checked in accordance with information received in the Pay & Record Office _____ O.C. " " Company.
and is therefore subject to amendment if and as may be found necessary. London to 2/1/19

Pay & Record Office, London, 191
Jan 2 8
Chief Paymaster & O. i/c Records.

515/i

6th Con. Depot,
Etaples.

12th January 8

2578, Pte. M. Chafe

letter
----- 421

LI 1 18

I cr, you through reciprocal account
with 18s 5d to be paid to 2578 Pte
Martin Chafe. (Eighteen shillings
and five pence.)



98

DEPARTMENT OF MILITIA

ADDRESS REPLY TO
DEPARTMENT OF MILITIA
AND QUOTE NO.

ST. JOHN'S, NEWFOUNDLAND.

December, 14th, 1917.

Chief Paymaster,
London.

Sir,

I credit you, through reciprocal account with
16s. 6d. to be paid to number 2578 Pte. Martin Chafe.
(sixteen shillings of five pence)

I have the honour to be,

Sir,

Your obedient servant,

[Signature]
Capt. & Paymaster.

J. H. Hook

Staples

*H. K. 18.
6 Convalescent Depot
Staples 1.1.18.*

NEWFOUNDLAND
PAYMASTER
✓ 421
11 JAN 1918
515/1
<i>[Signature]</i>

515/1

Chafe, M.

2578

Ray D. Chafe

April 29, 1919

#2578 L/Cpl. Martin Chafe,
#110 Barnes Road,
Witby.

Dear Sir:-

Please find enclosed "Discharge Certificate
No. 2116."

Yours truly

Paymaster & O. i/c Records Captain,

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 take up work with byget
son. Leander

M. Chafe
Signature of Man.

Reg. No. 2578

L. Murphy, Capt.
Signature of the Vocational Officer or his Representative.

Place Dept. Shilina

Date April 15, 1919

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

MEDICAL HISTORY

OF

Surname Chafe Christian Name Martin

Table I.—GENERAL TABLE.

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY	
	Right	Left	Right	Left
Examined	on 22 day of April 1916		on _____ day of _____ 191	
	at St Johns Nfld.		at _____	
Declared Age	35 years 6 days		years _____ days _____	
Trade or Occupation	Teamster			
Height	5 feet 3 1/2 inches		_____ feet _____ inches	
Weight	116 lbs.		_____ lbs.	
Chest Measurement	Girth when fully expanded... 36 1/2 inches		_____ inches	
	Range of expansion... 2 inches		_____ inches	
Physical Development				
Vaccination Marks	Number... 2			
	When Vaccinated... 20 years ago			
Vision	R.F.—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)	<i>Samuel Paterson</i>			
(Rank)	Major Medical Officer.		Medical Officer.	
Enlisted	at St Johns on 22 day of April 1916		at _____ on _____ day of _____ 191	
Joined on Enlistment	Corps. <i>(M/Regt.)</i>	Regtl. No. <i>2577</i>	Corps. _____	Regtl. No. _____
Transferred to	<i>Royal Newfoundland</i>			
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 further use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3rd London Regt. Gp. Wandsworth.	20	8	18	4	11	18	Fracture Tibia R. (accidental)	46	accident in France 16. 8. 18.	W. S. S. S. S. Capt Ramos.

LAST PAY CERTIFICATE

ORIGINAL

N.F.P./94.

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

Regtl No. 2578 Rank L/Cpl. Name Chafe M. F. Unit Royal Nfd. Regt. who was repatriated
to Newfoundland on 12/12/18 Authority Draft No.79 Cause _____

STATEMENT OF ACCOUNT

DR.		STATEMENT OF ACCOUNT					CR.							
PARTICULARS		£	s	d	PARTICULARS									
PERIOD: FROM 14/11/18 TO 20/12/18	Balance Dr. from 13/11/18			1	11	0	Balance Cr. from							
	Allotment 37 days @ 90	33	30	6	16	10	Pay 37 days @ £1.05	38	85					
	Cash Payments:						Field Allow 37 days @ £.10	3	70					
	N.F.P/54				3	6				42	55	8	14	10
	Depot 29/11/18				5	0	Other Allowances days @ £							
	" 6/12/18				5	0	Other Credits:							
	" 22/11/18				5	0								
	Other Debits				9	6								
	B.Damages					6								
	Mis.Stoppages				2	5								
Total Debits				9	18	9	Total Credits				8	14	10	
Balance due by Paymaster							Balance due to Paymaster				1	3	11	
				9	18	9					9	18	9	

CHECKED
E.H.

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

191

(Place)

(Date)

Made up/Checked in accordance with information received in the Pay & Record Office, London to 27/1/19 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

Jan 2 1918

O.C. " " Company.

London to 27/1/19

A.D. Munnell
Chief Paymaster & O. i/c Records.



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 *Martin L Chafe*
 Regiment from which discharged *Royal Newfoundland*
 Regimental number *2578*
 Intended address *110 Barnes Road, City*
 Height on discharge *5 Feet 4*
 Color of hair on discharge *Light Brown*
 Complexion *Fair*
 Color of eyes *Blue*
 Descriptive Marks *Scar Right Ankle*
 Figure on discharge *medium*
 Christian name of Father *Philip*
 Christian name of Mother *Jane*
 Wife's maiden name in full *Ellen Solway*
 Date and place of marriage *S + Johns, June 28th, 1906*
 Christian names of children *Philip, Cyril, Patrick*
 Place and date of soldier's birth *S + Johns, May 15th, 1879*
 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)

Martin L Chafe

Lance Sgt.

(Rank)

Station

ST. JOHN'S.

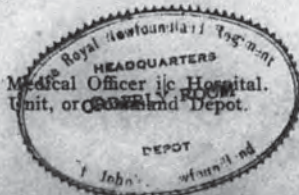
Date

15-4-19

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.

Station

Date



The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 2378 Rank Platoon Leader Name Chapman
 Date of Enlistment 22.11.16 Address A Johns District A Johns
 Occupation Teamster Classification for Discharge B Medical Category 10
 Recommendation S.M.B. Permanently unfit Disability Rating 20%
 Passed to Demobilization Officer with following documents:—

N.F. P 391.1	B 268	B 121	2	N.F. Med	D.F. 1	
B 178	W 3494	B 122	1	Board 1st	" 2	
B 178a	D 400A	B 1915		do 2nd	" 3	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 15/4/19

A. Johns Capt.
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment

I am not in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action.

Date 15-4-19

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable £60.00

(b) Clothing Supplied All the clothing

Date 15-4-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. _____ to his home
 at _____ and Release Certificate No. 2141 issued

Date 15-4-19

J.A. Snowling
 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 29-4-19

Date 15-4-19

W. H. S. Capt.
 Depot Paymaster.

Discharge approved for 15-4-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med	D.F. 1	<i>Form 2</i>
B 178	W 3494	B 122	Board 1st	" 2	
R 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 16-4-19

J.A. Snowling
 Demobilization Officer.

APPROVED.

Documents as above referred to are eligible for War Service Gratuity
 Officer i/c Records.
 Board of Pension Commissioners.

with following additional documents.

ELIGIBLE FOR POST DISCHARGE PAY

APR 15 1919

Date

R.H. Sait Capt.
 O. C. Discharge Depot.

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

Date

Medical Report on an Invalid.

Station Agley, Iowa Camp
 Date Dec. 11th 1918.

1. Unit Royal Newfoundland Former Trade or Occupation Steamer.
 2. Regimental No. 2578.
 3. Rank Pte. Lk.
 4. Name CHAFFÉ.
 5. Age last birthday 41 yrs.
 6. Enlisted { on 27th April 1916.
 at St John's

- 7A. If with previous service in Army, state—
 (a) Former Unit;
 (b) Regimental No.;
 (c) Date of Discharge;
 (d) Cause of Discharge. } 2. a

8. Disability in respect of which invaliding is Proposed.

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

Fractured Tibia (Right)

Statement of Case.

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

9. Date of origin of disability.
 10. Place of origin of disability.
 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.
 12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

He states whilst rubbish in France, on a timber Donkeys bolter, he was thrown to the ground, the back wheel of the cart going over Right ankle fracturing Tibia.

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

A scar about 1 inch long over external malleolus. Flexion and extension good. Complain of pain about 2 inches above tip of internal malleolus. Unable to walk for any distance.

13. What is his present condition?
 Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.
14. If the disability is an injury, was it caused—
 (a) In action?
 (b) On field service?
 (c) On duty?
 (d) Off duty?

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

16. Was an operation performed? If so, what?
17. If not, was an operation advised and declined?

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

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

20. Do you recommend—
 (a) Discharge as permanently unfit, or
 (b) Change to England?

Rehabilitation

W. R. Kelly Capt. R.A.M.C.
 Officer in medical charge of case.

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

Station _____

Officer in charge of Hospital.

Date _____

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

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

Opinion of the Medical Board.

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

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

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

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

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

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

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

Yes

No

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

Accidental while on duty—

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

23. Is the disability permanent?

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

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

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

20%

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

27. Do the Board recommend—

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

Yes

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

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

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

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

Signatures:—

[Signature] President.

Station *[Signature]*

[Signature] } Members.
[Signature]

Date *Jan 7 1919*

Approved.

[Signature] Administrative Medical Officer. Major

Station

Date



No. 2578 Name *Chase, M. F.* Sqn., Batty., }
or Company }

Corps *N. F. L. D.*

Date of enlistment }

G.C. Badges }

Service or Proficiency Pay }

Date of last entry in Company Conduct Sheet }

No. and date of last drunk }

Period not reckoning towards freedom from extra fine }

Sheet No.

Signature O.C. Company, etc. }

Character

Temporary

[Signature]

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

[Handwritten initials]

Army Form B. 122

✓
2578. Lickthafe

aged 4 1/2 yrs.

25 months service in
France.

Returned from 3rd L.S.H.
A category. Would he

not be included in
repatriation draft

please, on account of
age and family reasons
wife 3 children.

Wick
—
C. Wick.

To Ad. Could you
approach the Colonel
in favour of this man.
Please.

Wick
—

M.O. - $\frac{2}{2}$

This man

may be included

in draft, through
C.O.'s permission.

J. Seymour *Rumb*

ADJUTANT 2ND BN. ROYAL NEWFOUNDLAND REGT.

11/11/18.

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..... *Martin*..... 2. Surname..... *Chaple*.....

3. Rank..... *LC*..... 4. Regtl. No..... *2578*.....

5. Address in full to which future payments of gratuity are to be forwarded..... *110 Barnes Rd. St. John's*.....

6. Date of enlistment in the Regiment..... *Apr. 22/16*.....

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

8. Relationship of such dependents..... *Ellen Chaple*
wife.....

9. Address in full of such dependents..... *110 Barnes Rd, St. John's*.....

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

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

12. Give total length of time which you served on active service whether in Nfld. or Overseas..... *From Apr. 22/16 to*
Apr. 16/19 date of temporary discharge.....

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.

*Clothing allowance & back pay \$79. —
Board allowance 4.40*

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?

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

Apr. 16/19. (b) Temporary 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.

*France & Belgium - From Sept 1916 to Aug. 1918
Ypres, Monchy, Paschendale, Comenieres,*

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:

Martin Chape

Place of Residence:

110 Barnes Rd, St John's

Declared before me at:

St. John's, Nfld

This

16th

day of

April

1919

John McCarty

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

POST DISCHARGE PAY.					Net amount
Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.		due
.....	<i>6mes.</i>	<i>600 00</i>
.....
.....
Certified correct.				Registrar	<i>J</i>

FORM K

N^o 2470



1ST. NEWFOUNDLAND REGIMENT 21.

ALLOTMENTS

I, Martin F. Chafe, Regl. No. 2578

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and 90 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons concerned, viz.:

Allotment begins July 1st 1916

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
2456	wife	Miller Chafe	100 Barnes St. St John's	90
Total Allotment, \$				

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.) Chas. H. Cope Capt.
 Officer Commanding
A Company
St John's
June 19 1916

(Sig.) Martin F. Chafe
 (Rank) PLC

St Johns July 8

Capt Houley

Please find Enclosed
two Ellen Chace wife of

H. Capt. M. G. Chace
my private money and
oblidge
M. G. Chace.

2578

Received of
Capt. M. G. Chace
the sum of \$100.00
July 8 1864

July 21 / 19

Meat Department

Would you please
bring to Mr. Allen Chafe
wife of Mr. F. Chafe my
money and oblige

Mr. F. Chafe

2578



FEB 28 1919

ST. JOHN'S,

Royal Newfoundland Regiment.

Billeting Account,

To *M^{rs}. M. Chape*

Billeting Soldiers as undermentioned

from *Feb 27th /19* to *Feb 28th /19*

<i>2578. L/C. M. Chape</i>	<i>7</i>	<i>20</i>

Certified correct for \$ *7.20*

R.J. Joseph H. Newfunt
Billeting Officer.

LAST PAY CERTIFICATE

DUPLICATE
MAIL COPY.

N.F.P./94.

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

Regtl No. 2578 Rank L/Cpl. Name Chafe H. F. Unit Royal Nfd. Regt. who was repatriated
to Newfoundland on 12/12/18 Authority Draft No. 79 Cause _____

STATEMENT OF ACCOUNT

DR.	PARTICULARS	\$			£			PARTICULARS	\$			£			CR.		
		d	s	d	s	d	s		d	s	d						
PERIOD: FROM 14/11/18 TO 20/12/18	Balance Dr. from 15/11/18				1	11	0	Balance Cr. From									
	Allotment 37 days @ 90	35	30		6	16	10	Pay 37 days @ \$1.05	38	85							
	Cash Payments:							Field Allow 37 days @ \$10	3	70							
	N.F.P/54					3	6					42	55		8	14	10
	Depot 29/11/18					5	0	Other Allowes days @ \$									
	" 6/12/18					5	0										
	" 22/11/18					5	0	Other Credits:									
	Other Debits					9	6										
	B.Damages						6										
	Mis.Stoppages					2	5										
Total Debits					9	18	9	Total Credits							8	14	10
Balance due by Paymaster							Balance due to Paymaster							1	3	11	
					9	18	9								9	18	9

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

191

(Place)

(Date)

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

Pay & Record Office, London,

191

Chief Paymaster & O. i/c Records.

Jan 2

8

CHECKED

ST. JOHN'S, Apr 16 / 19

Royal Newfoundland Regiment.

Billeting Account,

To L/C. M. Chape

Billeting Soldiers as undermentioned

from Apr 11th / 19 to Apr 15th / 19

2578. L/C. M. Chape ~~A. C. R.~~ 40

M. Chape B. M. 16384 Cur.

Certified correct for \$

REGIMENT	
NO.	
NAME	
REG. NO.	
COMP.	
DATE	
BY	
FOR	

RJ

Amel Corston
for Billeting Officer.

Reg. No. *2578* Rank *Le.* Name *Chap. W. F.*
Attested Address *110 Barnes Road*
Allotment Allottee
Date of Allotment Returned from Overseas *21-12-18*
Embarked for Overseas Cause *Discharge*

S.M.B. 9-1-19
Recommended Dis. as Permanently unfit.

9-1-19 PASSED TO DEMOBILIZATION OFFICER

24.2.19 Attached to depot for baty

15.4.19 DISCHARGE APPROVED ON DEMOBILISATION.

Army Form B. 103. ^b

Casualty Form—Active Service.

Regimental Number **C.R. 2578**

Rank ^{Adj. Rte} ~~Rte~~ Surname **Lehane** Christian Name **M.S.** ¹⁵⁶⁷

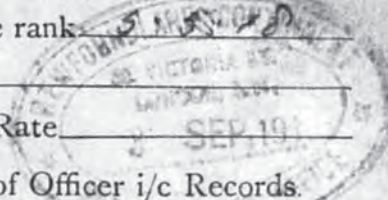
Regiment or Corps **Newfoundland** Religion **R.C.** Age on Enlistment **35** years **6** months.

Enlisted (a) **Apr 22nd 16** Terms of Service (a) **Duration from** Service reckons from (a) _____

Date of promotion to present rank _____ Date of appointment to lance rank **5 MAR 17**

Extended { _____ } Re-engaged { _____ } Qualification (b) _____
or Corps Trade and Rate _____

Signature of Officer i/c Records.



Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked ... Southampton	3.10.16		
		Disembarked ... Rouen	4.10.16		
		Joined Battalion	14 OCT 1916		
			WITH PART 25. I-17		
2.6.17	88 F.A.	Ad. Imp'dys & trans	b.R.S.	31.5.17	C.D. 5607
22.6.17	6 Stat. Hosp	Ad. do	Trevent	9.6.17	HA 10468
26.6.17	25 S. Hosp	Ad. do	Hardelot	13.6.17	HA 10545
30.6.17	29 P.B.S.	Joined Base Depot	Rouen	7.7.17	Nom Roll
8.9.17	O.C. Unit	Joined Battalion	28 AUG 1917		B 213
29.12.17	- - -	To Hosp		26.12.17	B 213
29.12.17	88 F.A.	Ad: S.C.T. Elbow L		26.12.17	E.A. 52192
	N.S.N.		Maignes		HA 17852
29.12.17	56 F.A.		Estaple	29.12.17	HA 17932

M.S.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) Signaller, Shoing-Smith, &c. [P.T.O.]

2578 ~~to~~ M. F. Chafe.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
	6 Jan. 18	Ad. J.C.T. Elkins R	Wales	1-1-18	HA 18119
	14 " "		Troyville	2-1-18	19159
	5" 18	Jacques Boredepot	Kaewen	2-3-18	Loe
20/5/18	of unit	App. 2/cpl.	Fices	5/5/18	B 213
13-6-18	" "	Went Unit	"	13-6-18	Paul
18 ⁸ / ₁₈	O.C.	Adm. hosp.		16-8-18	B 213
28 ⁸ / ₁₈	3 Can. G.H.	Adm. ^{acc} ~ Inf R. foot. & k. mild	Boulogne ✓	16-8-18	HA 27495
20 ⁸ / ₁₈	3 Can. G.H.	Invalided W.M. per "Pictor de Conuack" (Accid injury R-foot)	~ ✓	20-8-18	A.F.W. 3083
	30/8/18		Whelan		Leaf
			O. H. No. 1		Infantry Section
					S.H.A. 3rd Echelon

[Handwritten signature]

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.
[66d] W5017/2124 1000m 6/15m 93 56

Forms
B. 121.
29.

Regiment of 1st Newfoundland

Number of Sheet One

Signature of O. C. Company W. Rendell

Major

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<u>3578 Chafe M. F.</u>	Age on <u>35</u> years <u>6</u> months	<u>St. John's</u>	<u>Steamster</u>	
Joined	Date	Place and Date of Enlistment		Religion	
Joined	Date	<u>Apr. 1916</u>		<u>C. of S. R.C.</u>	
Joined	Date	Period of	with Colours <u>3</u> years.	Place of Birth	
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
				<u>Demobilized 29/19</u>					

To be carried over

Army Form B. 121.

Squadron, Troop, Battery and Company Conduct Sheet.


Temporary
 Army Form B. 121.
 Number of Sheet 1
[Signature]

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.
 [688] W5017/2124 1000m 6/15ss 53 56

Forms
 B. 121.
 20.

Regiment of _____

Signature of O. C. Company _____

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<u>2578</u>	Age on _____ years _____ months	<u>St Johns</u>		
Joined _____ Date _____		Place and Date of Enlistment _____		Religion	
Joined _____ Date _____		Period of { with Colours _____ years. { with Reserve _____ years.		Place of Birth	
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	
HAZELEY DOWN CAMP	13-11-19	2/4pl		Absent without leave from 13-11-19 until 14-11-19 1600 18 hrs.	Gd White	Reprimanded	16-11-19	Lt Col A. J. Barton	50. 2 1/2 days pay	
				To be carried over						

Army Form B. 121.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 2578 Rank Pvt. Name M. Chape
 Intended place of residence 110 Bannis Rd

2. Occupation Teamster
 Classification of soldier B. Medical Category 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
 Date APR. 15. 1919 M. Chape
 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 and date St John's
16-4-19 M. Chape
 Signature of soldier
A. Melouston Lt.
 Signature of witness

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 and Date St John's 15th 1919
St John's M. Chape
 Signature of soldier
James O. Newman
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 22. 4. 16. No of days on Military
 Discharged from service 15 - - 4 - 19 plus 14 days Service 1706
1703

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
 Date ARR 15 1919 R. H. [unclear] Capt.
 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, Nfld M. Bowley Capt.
 Date April 29/1919
 Officer i/c Records
 The Royal Newfoundland Regiment

A.F.B. 2079/2116

C.R. 2578

Extract from Orders by Major G.T. Mathias, D.S.O.
Commanding 1st Battn. Royal Mfld. Regt. 16-8-18

The u/m is admitted to hospital this day.

2578 L/Cpl. M. Chafe.

C.R. 2578

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, April 21st, 1919.

The discharge of the undernoted on demobilization
has been APPROVED by O.C. Discharge Depot from noted dates

2578 L/C. Martin Chafe

15-4-19.

C.R. 2578

Extract from Daily Orders part II
Unit St. John's dated May 2nd. 1919.

The discharge of the undernoted on
demobilization has been CONFIRMED by
Officer i/c Records on 29-4-19.

#2578 L/C. Martin Chafe.

C.R. 2578

Extract from Medical Board held Jan. 8th, 1919.

2578 L/C. M. Chafe.

Recommended discharge as permanently unfit.

C.R. 2578

Extract of Casualties from Pay & Record Office London, dated Nov.
5/11/18.

#2578 L/C. M. Chafe.

Was discharged from 3rd London General Hospital on 4/11/18 and granted furlough to 13/11/18. Fit for Duty. 1,

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

The Royal Newfoundland Regiment

D 2576

DEMOBILIZATION OF

Reg. No. *2578* Rank *Platoon Leader* Name *Charles M. Johns*
 Date of Enlistment *22.11.16* Address *St Johns* District *St Johns*
 Occupation *Steamer* Classification for Discharge *B* Medical Category *5*
 Recommendation S.M.B. *Permanently unfit* Disability Rating *20%*
 Passed to Demobilization Officer with following documents:—

N.F. P 3691.1	B 268.	B 121.	2	N.F. Med.	D.F. 1.	
B 178.	W 3494.	B 122.	1	Board 1st.	" 2.	
B 178a.	1. D 400A.	B 1915.		do 2nd.	" 3.	<i>5</i>
B 179.	2. 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 *15.4.19*

W. M. Johns Capt.
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment

I am *not* in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action.

Date *15-4-19*
10-1-19

A. Johns
Adj. Quar. Master Capt.

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable *£6.00*

(b) Clothing Supplied *AMC Louster*

Date *15-4-19*

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. _____ to his home at _____ and Release Certificate No. 2141 issued

Date 15-4-19 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 29-4-19

Date 15-4-19 Wiley Capt.
Depot Paymaster.

Discharge approved for 15-4-19

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
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 16-4-19 Demobilization Officer.

APPROVED.

Documents as above forwarded to -
Officer in Records.
Board of Pension Commissioners.

Eligible for War Service Gratuity

with following additional documents.

~~ELIGIBLE for POST DISCHARGE PAY~~

Date APR 15 1919

R.H. [Signature]
O. C. Discharge Depot.

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

Date 23/4/19

A.H. [Signature]
for Officer in Records.