



# FIRST NEWFOUNDLAND REGIMENT.

## ATTESTATION OF

No. 1745 Name Jesse Chubbett Corps 1st Hfld Regt.

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

1. What is your name? ..... 1. Jesse Chubbett
2. What is your full Address? ..... 2. Family Sq, St. John's
3. Are you a British Subject? ..... 3. Yes
4. What is your Age? ..... 4. 23 Years 10 Months.
5. What is your Trade or Calling? ..... 5. Labourer
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, Jesse Chubbett, 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.

Jesse Chubbett  
SIGNATURE OF RECRUIT.

Aug 27<sup>th</sup> 1915 Henry Ferguson  
Signature of Witness.

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

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

### CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.  
The above questions were then read to the Recruit in my presence.  
I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me at \_\_\_\_\_  
on this 27 day of August 1915.  
Henry Ferguson  
Signature of the Attesting Officer.

### † 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, the 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) \_\_\_\_\_





# FIRST NEWFOUNDLAND REGIMENT.

## ATTESTATION OF

No. 1795 Name Jesse Christlitt Corps 1<sup>st</sup> Field Regt.

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

- |   |                                      |
|---|--------------------------------------|
| 1. What is your name? .....   | 1. <u>Jesse Christlitt</u>           |
| 2. What is your full Address?.....  | 2. <u>Trinity Bay, Conventish</u>    |
| 3. Are you a British Subject? .....   | 3. <u>Yes</u>                        |
| 4. What is your Age?.....   | 4. <u>22</u> Years <u>10</u> Months. |
| 5. What is your Trade or Calling?.....  | 5. <u>Labourer</u>                   |
| 6. Are you Married?.....  | 6. <u>No</u>                         |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? .....                            | 7. <u>No</u>                         |
| 8. Are you willing to be vaccinated or re-vaccinated? .....   | 8. <u>Yes</u>                        |
| 9. Are you willing to be enlisted for General Service? .....  | 9. <u>Yes</u>                        |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.....                                     | 10. { Name :<br>Corps :              |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted?..... | 11. <u>Yes</u>                       |

I, Jesse Christlitt, 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.

Jesse Christlitt  
SIGNATURE OF RECRUIT.

Aug 27<sup>th</sup> 1915 Henry Morgan  
Signature of Witness.

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

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

### CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me at St Johns on this 27 day of August 1915

Henry Morgan  
Signature of the Attesting Officer.

### † 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, the 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) \_\_\_\_\_



1795.

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Name Jesse Chislett

Apparent age 23 years \_\_\_\_\_ months. Height 5 feet 6 1/4 inches.

Chest measurement { Girth when fully expanded 36 inches.  
 Range of expansion 3 inches.

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

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin William Chislett.  
Trinity Bay Cavendish | Relationship Father

Particulars as to Marriage.

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

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

Particulars as to Children.

Christian Names.	Date and Place of Birth.

STATEMENT OF THE SERVICES.

Corps in which served	Rgt. or Depot.	Promotions, Reductions, Casualties, &c.	Army Rank.	Dates	Service not allowed 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 _____							
		<u>Discharged</u>		<u>16/12/11</u>			
Total Service forfeited as above ... ..							

Total Service towards Engagement to \_\_\_\_\_ (date of discharge) \_\_\_\_\_ years \_\_\_\_\_ days

" " " Pension " \_\_\_\_\_ ( " ) " \_\_\_\_\_



Regimental No 1795

Company "B"

<sup>50</sup>  
The  
1st NEWFOUNDLAND REGIMENT.

-----

I hereby enlist for service at home or abroad in the King's Forces under the following conditions,-

For the duration of the present war, or until my discharge.

Subject to the Army Act, the King's Regulations, and to such ordinances as may apply or may be made to apply to the British Regular Army.

Subject to the Newfoundland Volunteer Act, 3 George V., Chapter IV.

signed Lasse Christell

witness Merwin Thompson

Dated at Race Course, N.Y.  
June 19th 1916.

Christett, Jesse

1795

Sept

STATEMENT OF ACCOUNT

No. 1795

Name James Cheslett J

Date	Particulars	Ch.No.	Dr.	Cr.	Bal.
Nov 1	Balance due by P.M. £10 7-8			50 52	50 52
25	Pay to date			26 40	76 92
30	" " "			11 10	87 02
Dec 16	" " "			29 60	116 62
	Bonus			12 95	129 57
	Clothing			25 00	154 57
	Bal due by P.M. £4-8-3.				176 03
	Diff in money order 10/-			21 46	
				2 43	178 46
Nov 27	To Pay				158 46
Dec 4	" "	52	20 00		138 46
		58	20 00		
Nov 30	To allotment		18 00		120 46
Dec 18	To Pay				23 89
Oct 23	" "	72	97 57		2 43
June 5	" "	126	21 46		
		204	2 43		
			178 46	178 46	

Signed Alvany Edm.



STATEMENT OF ACCOUNT

No. 1795

Name Chuslett J

Date	Particulars	Ch.No.	Dr.	Cr.	Bal.
	Brought forward		178 46	178 46	<del>0</del>
	Mar Service Party			280 00	280 00
	4 mos @ 70 <sup>00</sup>				
Mar 1	20 Day	10521	70 00		210 00
Apr 1	" "	13478	70 00		140 00
May 1	" "	17558	70 00		70 00
June	" "	21292	57 05		12 95
	Bonus		12 95		<del>0</del>
			458 46	458 46	<del>7</del>

Signed Alvaamy S. M.

17  
1920

This space to be left blank for the Chelsea Number.



Army Form B. 268.



# Proceedings on Discharge.

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

No. <u>1795</u>	Army Rank <u>Private</u>
Name <u>Chislett Jesse</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
Corps <u>1<sup>st</sup> Newfoundland Regiment</u>	
Battalion, Battery, Company, Depot, &c. <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &amp;c., or to General Staff of the Army, it should be so stated.)</small>	
Date of discharge _____	
Place of discharge _____	

1.	Description at the time of discharge.	Descriptive marks.
Age	<u>5</u> years <u>6</u> months	
Height	<u>5</u> feet <u>6</u> inches	
Chest measurement	girth when fully expanded _____ ins.	
	range of expansion _____ ins.	
Complexion	_____	
Eyes	<u>Blue</u>	
Hair	<u>Dark brown</u>	
Trade	<u>Labourer</u>	
Intended place of residence	_____	
<small>(To be given as fully as practicable)</small>		

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

2. The above-named man is discharged in consequence of Tubercle of Lung. Caused by Strain & Exposure to Infection when on Active Service.

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character :—  
\_\_\_\_\_

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

To be filled in on the soldier quitting the Colours.

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067\* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to\*







# NEWFOUNDLAND POSTAL TELEGRAPHS

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

No. \_\_\_\_\_

Line No. \_\_\_\_\_ Sent by M Rec'd by Ma Check 9/-

Place from Cavendish via St. John's to 28. Green St

To The Hon J M Howells

M Johns

**JUN 28 1917**

Jesse Chislett at the  
 Present is home at Cavendish

William Chislett

1795

August 4th.1917.

Mr. Jesse Chislett,  
Cavendish, T. B.

Dear Sir:-

I,enclose herewith cheque for \$2.43,  
being the balance due you by the Paymaster at  
London.

1795  
Yours truly,

Lieut.  
Deputy Paymaster.

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... *Jesse* ..... 2. Surname... *Chislett* .....
3. Rank... *Private* ..... 4. Regtl. No... *1795* .....
5. Address in full to which future payments of gratuity are to be forwarded. *Jesse Chislett* *Cavendish* *Trinity Bay* .....
6. Date of enlistment in the Regiment... *Aug. 27<sup>th</sup> 1915* .....
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....  
*William Chislett* .....
8. Relationship of such dependents... *Father* .....
9. Address in full of such dependents... *William Chislett*  
*Cavendish* *Trinity Bay* .....
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?... *No* .....
11. Were you on active service only in Nfld, if so, give dates and particulars of such service... *No. in France,*  
*and Belgium* .....
12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *Total Aug. 27<sup>th</sup> 1915 to*  
*Dec. 16<sup>th</sup> 1916* ..... 1. <sup>3</sup> .....



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

*one*

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.

*Only Pension Allowance \$25.00 per month*

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

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

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *None*

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

(b) If so, was such reversion in consequence of Misconduct or inefficiency? *None*

19. Are you now serving in the Rest? *No* ... If not give: (a) Date of discharge *Dec. 14/16* (b) Reason for discharge *IPB*

*Tubercular of Physically unfit*  
*Somme, France*

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.

*Somme, France, from July 3<sup>rd</sup> to 29<sup>th</sup> 1916*  
*Front, Belgium, until September*

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. *Not now. But believe entitled to same*

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: *Jesse Chislett*  
 Place of Residence: *Lareandist 413*  
 Declared before me at: *Hearts Delight*  
 This *11<sup>th</sup>* day of *October* 19*20*.....

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

*J. E. Reid, Notary Public*



POST DISCHARGE PAY.				Net amount due
Date Paid	Amount Paid	War Service Pension		
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
Certified correct.				Registrar

LM/

October 22, 1920

Mr. Jesse Chislett  
Cavendish,  
T.B.

Dear Sir:

With reference to your application for War Service Gratuity, I enclose herewith four cheques, three for \$70.00 each and one for \$57.05 representing amount due you on account of same.

Yours truly,

Major  
Paymaster.

Enc.4



March 1st,

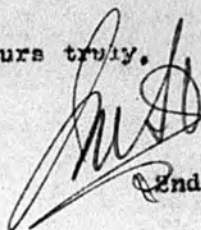
7

Pte. J. Chislett,  
Cavendish, T.B.

Dear Sir,-

I enclose herewith cheque for \$21.46, being an additional amount transferred from London to your credit. Kindly sign the attached voucher in the space provided for same, and return.

Yours truly,



End. Lieut. & D/Paymaster.

1795

1795

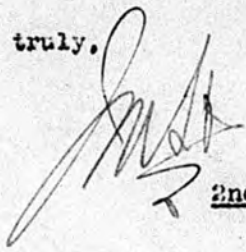
December 16th 6

Pte. Jesse Chislett,  
Cavendish, T.B.

Dear Sir:-

I enclose Certificate of discharge, dated December 16th  
1916. Cheque for balance due you will be mailed you in a day or  
two.

Yours truly,



2nd. Lieut. & D/Paymaster.

1795

December 20th 6.

Pte. Jesse Chislett,  
Cavendish, F.B.

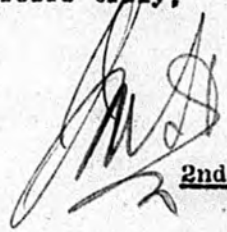
Dear Sir,-

Referring to my letter enclosing Discharge Certificate, I enclose herewith cheque for balance of pay due you as follows:-

Balance of pay	\$59.62
Bonus	12.95
Clothing	<u>25.</u>
	<u>97.57</u>

Please sign the attached voucher, and also the special form enclosed, and return to me.

Yours truly,



2nd. Lieut. & D/Paymaster.



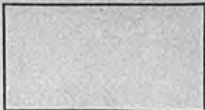


J. C. Bennett.

C.R.

1795

P.R.O.



## Proceedings on Discharge.

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

No.	1795	Army/Rank	Private
Name	Chislett, Jesse		
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)			
Corps	1 <sup>st</sup> Newfoundland Regiment		
Battalion, Battery, Company, Depot, &c.			
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)			
Date of discharge			
Place of discharge			
1. <u>Description at the time of discharge.</u>			
Age	_____ years	_____ months	Descriptive marks.
Height	5 feet	6 inches	
Chest measurement	girth when fully expanded _____ ins.		
	range of expansion _____ ins.		
Complexion	_____		
Eyes	Blue		
Hair	Dark Brown		
Trade	Labourer		
Intended place of residence	_____		
(To be given as fully as practicable)			
(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)			
2. The above-named man is discharged in consequence of <u>Tubercle of Lung</u>			
<u>Caused by Strain &amp; Exposure to Infection</u>			
<u>when on Active Service.</u>			
(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)			
To be filled in on the soldier quitting the Colours.	3. Military character:—		
	4. Character awarded in accordance with King's Regulations:—		
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.			
			Initials of Commanding Officer.
Army Form B. 2088 has been issued to*			





C13

**Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man fit for General Service.**

No. 1795

Rank Pte

Name (surname first) Chislett J

Regiment 1<sup>st</sup> Newfoundland

1. State what special qualifications you have for employment in civil life.

*Salmon fishing & cod fishing.*

2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed?

*Own master.*

3. What is the nature and locality of the employment you desire?

*Wish to go back to fishing when fit.*

4. What is the name of your Approved Society?

*No.*

5. Have you been employed whilst with the Colours? If so, in what capacity?

*No*

Date 14<sup>th</sup> Oct 1916

Signature Jasr Chislett

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 4 (ii), item 3, of Army Council Instruction No. .... of 1916.

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.



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

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

To the Officer i/c Records 58 Victoria St SW.

The Soldier named below has appeared before an Army Medical Board at this station, and his discharge from the Service as "no longer physically fit for War Service" has **this day** been approved. (The discharge will be confirmed for a date ~~N~~<sup>21</sup> days after the date on this notification—see A.C.I. 1623 of 1916.)

Soldier's surname Chislett, Christian names Jesse  
(in full)

Regt. No. and Rank 1795 Pte. Regt. or Corps 1<sup>st</sup> Newfoundland  
(If T.F. this should be stated)

His address on discharge will be Cavendish, Trinity Bay  
Newfoundland

The Soldier states that\* no allowance is being issued in respect of him.

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

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

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

Date 20/10/16

Sir Humphrey Meyer  
President of Board  
(Approving Officer).

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

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



C 13

Army Form D. 400A.

**Descriptive Return of a Soldier discharged on account of Disability.**

**INSTRUCTIONS.**—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Commissioners of Chelsea Hospital.

Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and the soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The Form will then be attached to the Proceedings of the man's Medical Board, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.

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

A Name in full Chislett James Jesse  
 Regiment from which discharged 1st Newfoundland  
 Regimental Number 1795  
 Intended address Carindish, Trinity Bay, Newfoundland  
 Height on discharge 5 Feet 6 Inches.  
 Colour of Hair on discharge dark brown Colour of Eyes Blue  
 Figure on discharge medium  
 Christian name of Father William  
 Christian name of Mother (decd) S Cintie  
 Wife's Maiden name in full \_\_\_\_\_  
 Date and Place of Marriage \_\_\_\_\_  
 Christian names of Children \_\_\_\_\_

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

(Soldier's Signature in full)

James Chislett

(Rank)

PT

Station

Wandsworth

Date

Oct 19/16

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.

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

B. C. Ham

Medical Officer i/c  
Hospital.

Station

Date

Oct 19/16

B Period of Service and in what Corps ...	Regiment	Years	Days	All Service Abroad with Stations	Years	Days
				India		
				S. Africa		
Disallowed ...						
Service towards Pension ...						
Date inclusive to which pay has been issued				Sum due on account	}	
Sums due on account of public debts ...				of advance of Pension	}	

Rank on Discharge  
 Character (as on Certificate of discharge)  
 Where born, and on what date  
 Date and Place of first Enlistment  
 Trade on Enlistment  
 Cause of Discharge  
 Number of G.C. Badges  
 Wounds, and Actions in which received

Medals

Other distinguishing marks

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.

Station

Officer in Charge

Date

Records.

[OVER.]



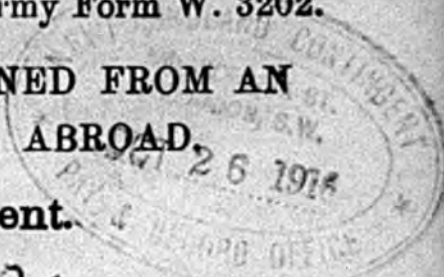


Admitted 24.9.16 Army Form W. 3202.

ONLY FOR USE IN THE CASE OF SOLDIERS RETURNED FROM AN EXPEDITIONARY FORCE, OR FROM GARRISONS ABROAD.

1<sup>st</sup> Infed Coy Regiment.

\*The Officer Commanding Infed Coy Coy  
The Officer in Charge of Records 58 Victoria St SW  
The Regimental Paymaster 58 Victoria St SW



With reference to No. 1795 Pte Whislett J.  
of the above Regiment, who appeared before a Medical Board and was approved by the D.D.M.S., London Command, on the 20 10 16 for discharge from the Service as permanently unfit, please note that this man has been ~~sent to his home or~~ <sup>transferred to address below</sup> ~~transferred to his home~~ with orders to await instructions as to his final discharge; he has been given ~~£1 (one pound) advance and a suit of plain clothes.~~

He proceeded to Pinecroft Sanatorium Wokingham  
on [date] Oct 25<sup>th</sup>

Norace Jagan Capt. R.A.M.C.(T.F.) Officer Commanding  
Registrar, R.A.M.C.T.  
3rd London General Hospital, Hospital.  
WANDSWORTH, S. W.

Place Wandsworth  
Date 25/10/16

\* In case of Territorial Force "Officer Commanding the Administrative Centre."  
Four copies to be made, and one copy sent to each Officer mentioned above, and one copy filed in the Office.





4723/94

Deputy Paymaster,  
St. John's,  
Newfoundland.

F.M/W.F. November 9th 6

25th November, '16.

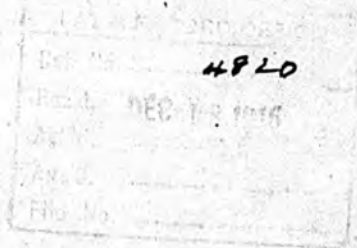
179E, Pts. J. CHISLETT.

Subsequent to the above soldier's departure for Newfoundland a Money Order for £4. 8. 7. was received here on his account. In order to avoid unnecessary delay in returning the Money Order to Newfoundland, payment was transferred to this Office by this soldier prior to his leaving London. Charges for transfer, 4d, have been paid to the G. P. O. and deducted. Kindly pay the amount of £4. 8. 3 to him and charge this Office, please.

Received and noted. As soon as this man applies, payment will be made him.

(Sd.) J.M. Howley,  
2/Lieut. & D/Paymaster.

Capt.  
Paymaster & O. 1/c Records.



November 2nd . . . . . 8 .

4593/13 .

Medical Superintendent,  
Pinewood Sanatorium,  
Wokingham,  
Berks.

F.M/W.F. .

1795, PTE. J. CHISLETT.

With reference to your letter of the 1st inst. Postal Money  
Order for six shillings, (6/-), is enclosed herewith.  
Kindly return the attached receipt form, please.

..... Dept.  
Paymaster & D. i/c Records.

4309/43

Deputy Paymaster,  
1st. Newfoundland Regiment,  
Headquarters,  
St. John's,  
Newfoundland.

FM/WF

10th May

7

1795, PTE. J. CHISLETT.

June 2nd 1917.

With reference to this  
office No. 4723/94, 9 & 25/11/16:  
Kindly note that this should read  
"Money Order for £4. 18. 7 .....  
".....Kindly pay 24.18. 3  
".....". Kindly pay this  
man the difference of 10/- and  
debit this office. It is observed  
that he was discharged in Newfoundland  
16/12/16, please.

Noted.

The necessary adjustment  
is being made.

(Sgd) J.M. Howley, Lieut.  
D/Paymaster.

Major,  
Paymaster & O i/c Records.

3458  
30/6/17.





**NEWFOUNDLAND CONTINGENT.**

**MEMORANDUM.**

No. 4309/43

**From**  
 PAY & RECORD OFFICE,  
 58, VICTORIA STREET,  
 LONDON, S.W.

**To**  
 Deputy Paymaster,  
 1st. Newfoundland Regiment,  
 Headquarters,  
 St. John's,  
 Newfoundland.

FM/WF 10th May 1917

**SUBJECT:**

1795, PTE. J. CHISLETT.

Reference Nos.

**REPLY**

Dated June 2nd. 1917 191

Please return **ORIGINAL** and retain **DUPLICATE.**

With reference to this office No. 4723/94, 9 & 25/11/16: Kindly note that this should read: "Money Order for £4. 18. 7 ..... ".....Kindly pay £4.18. 3 ".....". Kindly pay this man the difference of 10/- and debit this office. It is observed that he was discharged in Newfoundland 16/12/16, please.

*W. A. Munnell*  
 Major,  
 Paymaster & O i/c Records.

Noted.

The necessary adjustment is being made.

*W. Howley*  
 Lieut.  
 D/Paymaster

1ST N. W. CO. (A) 10 B. LONDON	
PAY & RECORD OFFICE	
Ref. No. ....	3458
Rec'd. ....	JUN 3. 0 1917
As'd. ....	
.....	
.....	

*D* *FB*



ON HIS MAJESTY'S SERVICE

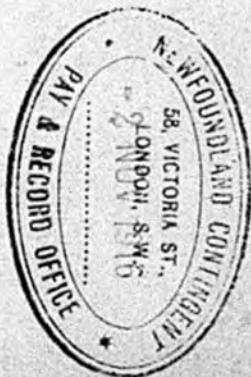
(Postage not to be Charged.)

Jesse Chislett  
Ward 6 13  
~~3rd General Hospital~~  
Wandsworth London SW



Money Order Business.

Pinewood Sanatorium Birmingham



No. 27—M.

Letter to be sent to Applicant when conditions named  
in Book of Rules are not fulfilled.

POST OFFICE, <sup>Am</sup>

23rd Oct 1916

Sir, I beg to acknowledge the receipt of your communication of the 11th inst enclosing a Money Order, and to inform you that I am unable to comply with your request, in consequence of the conditions, under which alone I am allowed to re-issue Orders, not being fulfilled in this case.

I have therefore forwarded your letter and Order, with a statement of the case, to the Comptroller of the Money Order Office, London who will communicate with you on the subject.

I am,

*Sir*

Your obedient Servant,

Jesse Chislett  
Ward 6 13  
3rd General Hospital  
Wandsworth SW

*Quibb*

Postmaster.

\* The Postmaster will here insert London, Edinburgh, or Dublin, according as the Order is issued in England, Scotland, or Ireland.

M.O.D.—No. 208.

Address any reply to—"The Controller, Money Order  
Department (G.P.O.), Manor Gardens, Holloway,  
London, N." quoting Registered No. **C15826**

Money Order Department (G.P.O.),  
Manor Gardens, Holloway,

London, N.

27-10-1916.

Sir,

WITH reference to your letter of  
the 11th inst, I have  
to forward herewith a form of application which

should be filled up and signed by you stating  
the name of the actual remitter

On the form being completed and returned to  
this Department, the matter will receive attention.

The order is not advised  
as having been taken  
out by Edith Jervis

I am, Sir,

Your obedient Servant,

Mr J. Cheslett F. WICKHAM,  
4000/2/15-[6630] 45533/SP4 5000 1/16v 11849 G & S Controller.



November 1st . . . . . 8.

4581/1 .

Controller,  
Money Order Department, G. P. O.,  
Manor Gardens,  
Holloway, N.

F.M/W.F. .

MONEY ORDER NO. 589, PAYABLE JESSE CHISLETT.

With reference to your letter No. G. 15826 of the 27th  
~~inst.~~<sup>11/10</sup> relating to the above Money Order, application for  
transfer of payment to the Paymaster Newfoundland Contingent  
is enclosed herewith. . . It may be explained that the  
above soldier is being repatriated to Newfoundland to-day  
and the amount of Money Order when received will be  
credited to his account, and notified to the Deputy  
Paymaster, at Headquarters, Newfoundland for payment to  
the above named soldier.

Your prompt attention in this matter will be much appreciated  
With regard to the last paragraph of your letter, Pte.  
Chislett states that he understands it was sent to him by  
his step-father, William Chislett.

..... Capt.  
Paymaster & O. i/c Records.

*RW S S Sicilian 1<sup>st</sup> 16*

*Chapman*

*A*

Army Form O. 1625.

**PAY LIST.** *October 28* to *November 24* 1916. Voucher No.

**NON-EFFECTIVE ACCOUNT.**

Regiment or corps *1<sup>st</sup> Newfoundland*  
 No. *1795* Rank *Private* Name *Jesse Chislett*  
 Died (a) at \_\_\_\_\_ on the \_\_\_\_\_ of \_\_\_\_\_ 191 \_\_\_\_  
 Deserted at *Repatriated* on the *1<sup>st</sup>* of *November* 191*6*

I Certify to the correctness of above in every particular.

\_\_\_\_\_  
{ Commanding Squadron, Troop,  
Battery or Company.

**STATEMENT OF ACCOUNT.**

[Form 1.]

Date	Dr.	£ s. d.			Cr.	£ s. d.		
		£	s.	d.		£	s.	d.
	Balance Dr. last month .....				Balance Cr. last month <i>27/10/16</i> .....	<i>9</i>	<i>7</i>	<i>5</i>
	Cash issues (Date of each issue to be stated)				Pay <i>5</i> days at <i>1.10</i> from <i>28/10</i> to <i>1/11/16</i> <i>- 7 5 56</i>	<i>1</i>	<i>2</i>	<i>7</i>
	Proficiency, Service or good conduct pay days at _____ from _____ to _____							
	Messing allowance _____ days at _____ from _____ to _____							
	Kit allowance .....							
	Amount produced by the sale of Effects from Form 2 .....							
	Amount of Savings Bank balance, including interest (if no balance, to be so stated)							
	Consolidated stoppage .....				Deferred Pay or Gratuity .....			
	<i>Allotment 5 Days</i> <i>C 60 = £3.00</i>			<i>12 4</i>				
	Balance due by the Paymaster	<i>10</i>	<i>7</i>	<i>8</i>	Balance due to the Paymaster .....			
		<i>£ 11</i>	<i>0</i>	<i>0</i>		<i>£ 11</i>	<i>0</i>	<i>0</i>

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ \_\_\_\_\_ is correctly chargeable against the Public (b).

Dated at \_\_\_\_\_

this \_\_\_\_\_

day of \_\_\_\_\_

191 \_\_\_\_

Paymaster.

- (a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B. 2090 or Army Form O. 1815.
- (b) Words in Italics to be struck out when there is no debtor balance.



C.R.

1795

**J. Chislett** was attested for General Service  
with the NEWFOUNDLAND REGIMENT on August 27th 1915  
Regimental No. 1795 was allotted to Pte **J. Chislett**

AUTHORITY:

Record Officer

Dept. of Militia, 1919.

March 25th. 1919.



C.R. 1795

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

1795 Pte. J. Chislett.

2506-16.

CR 1295  
Carrendish  
May the  
21

1918

Department  
of Militia  
St. Johns

Dear Sir

if you have a ket-  
Bag as you say the property  
beloging to my son Pte  
Jesse Chislett No 1795 you  
may kindly send it on  
to Carrendish As he is  
home with me all the  
time yours truly

William Chislett  
Carrendish  
T. Bay

C.R.

1795

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

#1795 Pte. Jesse Chislett, discharged Dec.16th 1916,  
Medically unfit.



C.R. 1795

Extract from **Holl of Officers, N. C. O's and**  
men Discharged from the **Royal Newfoundland**  
**Regiment.**

<u>Regtl #</u>	<u>Rank</u>	<u>Name</u>	<u>date</u>	<u>reason.</u>
1795	Pte	Jesse Chislett	16/12/16	Med.Unfit.

# NEWFOUNDLAND POSTAL TELEGRAPHS.



## Cable Connection with all the World

### All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission ; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender Geo M. Chislett Address \_\_\_\_\_

Line Number _____	Rcd _____	By <u>Geo M. Chislett</u>	Check _____
-------------------	-----------	---------------------------	-------------

Dated November 23, 1916..

To Mr. William Chislett,  
Cavendish.

Replying your letter thirteenth instant information has been received that No. 1795, Private Jesse Chislett, is proceeding to Newfoundland for discharge - no date given.

COLONIAL SECRETARY.

e 115

Wm. Chislett?

Nov. <sup>the</sup> 13

1916

J. R. Bennett. Col.  
Secty

Dear Sir  
would you kindly  
let me know if pte  
Jesse Chislett No 1795  
is on his way home  
to Nfld & what time  
he is expected in St-  
Johns.

and oblige yours

truly  
William Chislett  
Cavendish.

Trinity Bay

NEW



C.R. 1795

Extract of Casualties received from Pay & Record  
Office, London, dated November 3, 1916.

#1795 Pte. J. Chislett.

Repatriated direct from the Record Office,  
per S.S. Sicilian, 1/11/16.

C.R. 1795

Extract of Casualty List received from P.&.R.O.  
October 26th. 1916.

1795, Pte J. Chislett. ✓

Medical Superintendent THE PINWOOD SANATORIUM,  
Reports 25th October No. 1795, Pte Chislett was  
transferred to the Pinewood Sanatorium from the  
3rd London General Hospital.

Authority: Letter from Superintendent of Sanatorium.

C.R. 1795

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P. & R. O. Oct. 2nd. 1916.

1795, Pte J. Chislett. ✓

1 Newfoundland T.B.R. Lungo Eng. per HS Jan Breydel ex 13 Gen. H. 23 Sep 16



C.R. 1795

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

WARWICK RECORD OFFICE

No.H.A. 2734

16910	Pte.Beckett E.	6/O & B.L.I.	GSW.Cheek R.....	Dis.to Con.Dep.ex.12	gen.Hos.Rouen 22 Sept'16
17303	" Waterhouse J.	3/Worc.R.a SRCMU.	Influenza.....		do.
20197	Cpl.Notton A.	12/Glouc.R.	P.U.O.	Adm.12 Gen.H.Rouen	22 September 1916.
11134	Pte.Green S.	5/O & B.L.I.	GSW.Shldr.Acc.		do.
10320	" Bryant H.J.	6/ do.	Shell Shock		do.
21025	" Spurr A.	6/ do.	GSW.L.Hand		do.
*2187	Sgt.Lamb W.	1/R.War.R.	Abscess Groin		do.
17964	Pte.Harbage G.	16/ do.	GSW.R.Knee		do.
20739	" Weston W.	16/ do.	GSW.Legs Fr.L.		do.
28942	" Dean A.V.C.	1/Glouc.R.	Asthma		do.
19508	Sgt.Cotcher R.	13/ do.	Stricture		do.
21833	Pte.Sealey H.	8/R.Berks C.Coy.	Burns R.Leg Slt.....	Adm.22 Gen.H.Dannes	Camiers 21 Sept'16.
36723	" Adams J.	8/Roy Berks C.Coy.	Acc.Burn L.Leg Slt.		do.
36725	" Purchase A.	10/Glosters B.Co.	GSW.Cheek 11.1.Slt.		do.
24324	" Attwood T.	10/Gloucesters C.Coy.	Abscess Alveolar Process Slit.		do.
27900	" Field H.	12/Gloucesters A.Co.	(S)Shell Shock Slit.		do.
36549	" Bonel L.	10/Gloucesters A Coy.	GSW.R Face II.I. Slit.		do.
25012	" Eley W.	10/Gloucesters No.2 Coy.	I.C.T.L.Thigh Slit.		do.

TERRITORIAL FORCE WARWICK RECORD OFFICE

No.H.A. 2734.

1942	Pte.Stanmore E.	Q.O.O.H.	Syno.R.Knee	Adm.12 Gen.Hos.Rouen	22 September 1916.
4244	" Roach H.	2/4/Glouc.R.	Lumbago		do.
5076	" Baker C.	1/7th Worcesters	Rgt.Sprain Ankle L.	Trans.to 3 Con.Dep.Le Treport	ex.16 Gen.H 23 Sep'16

NEWFOUNDLAND CONTINGENT

No.H.A. 2734.

1793	Pte.Chislett J.	1/Newfoundland	Appendicitis Good...	Adm.15 Gen.H.Boulogne	22 September 1916.
------	-----------------	----------------	----------------------	-----------------------	--------------------



2922

C.R. 1795

Copy of Cablegram to Governor St. John's Nfld from P. & R. O. 26 Sep. 16.

1795, Chislelett. ✓

Wandsworth Tubercle Lung.



C.R. 1795

Extract of Casualty List received fro P. & R. O. Sep. 26th. 1916.

1795, Pte J. Chialett ✓

Admitted 3rd London Gen. Hos. 24/9/16 Tubercle of Lung.



115 ✓

COPY OF TELEGRAM.

Dated  
26th Sept., 1916.

To  
Mr. Wm. Chislett,  
Ovendish, T. B.

Regret to inform you that the Record Office,  
London, officially reports No. 1795 Private Jesse  
Chislett admitted Wandsworth Tubercle of Lung.

Upon receipt of further information I shall immedi-  
ately wire you and trust that the next report will  
be of his convalescence.

J. R. BENNETT,

Colonial Secretary.

C.R. 1795

Extract from Nominal Roll, entrained St. John's 27/10/15 for Overseas

---

#1795 Pte. J. Chisslett.

C.R. 1795

Extract from Casualties..... List. No.H.A. 2777.

1795 Pte. J. Chislett.

L/Nfld.R. T.B. R. Lung...To Eng. per H.S. 'Jan Breydel'ex 13  
Gen. Hos.23rd Sept'16.



C.R. 1795

Extract from Casualties received from Pay & record  
office London, 24-9-16.

Admitted to 3rd London General Hospital, Wandsworth.

1795 Pte. J. Chislett.

Tubercle of Lung.

F. J. MORRIS, K.C.  
CHAIRMAN.  
W. B. GRIEVE,  
SECRETARY.  
JAMES S. AYRE,  
ASST. SECTY.

A. B. A.

W.S.  
854

Recruiting Committee

C.R. 1795

26

St. John's, Newfoundland,

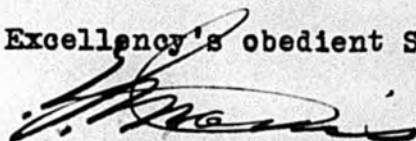
November 29th. 1916.

your Excellency:

I beg to acknowledge the receipt of your communication of yesterday's date in reference to (1) 537 Brett (of Fogo) and (2) 1795 Chislett (of Cavendish, T.B.). I will submit same at the regular weekly meeting of the Recruiting Committee.

I have the honour to be,

Your Excellency's obedient Servant,

  
Chairman Recruiting Committee.

His Excellency,

Sir W.E. Davidson, K.C.M.G.,  
Governor.

PERSONAL EFFECTS.

Rept. No. 1795, CHISLETT, JESSE

---

1 Kit Bag.

---

Address: Cavendish, T.B.

---

Received the above mentioned  
effects.

Signed.....





C.R. 1795

DEPARTMENT OF MILITIA

ST. JOHN'S Jan. 24th. 19 18  
NEWFOUNDLAND

Mr. Jesse Chislett,  
Cavendish,  
T.B.

Dear Sir:

I am forwarding you by express a Kit Bag recently received from London, containing effects belonging to you, and also enclose statement of same.

Please return this statement to me with the receipt appended duly signed.

Yours truly,

C.R. 1795

Extract from Nominal Roll of Mfld. Regt. Draft No. 2  
Embarked Southampton, 25-6-16 . From 2nd Bn. Depot  
to 1st Bn., B.E.F.

1795 Pte. J.Chislett.

Army Form B. 103.

Casualty Form—Active Service.

1176

Regiment or Corps 2/1 Nfld Regt. Regimental Number 1795

Rank Pvt. Surname Chislett Christian Name Grace

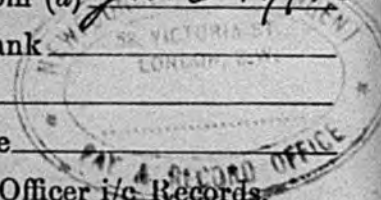
Religion Methodist Age on Enlistment 22 years 10 months.

Enlisted (a) Aug 27/15 Terms of Service (a) Duration Service reckons from (a) June 19/16

Date of promotion to present rank \_\_\_\_\_ Date of appointment to lance rank \_\_\_\_\_

Extended { \_\_\_\_\_ } Re-engaged { June 19/16 } Qualification (b) \_\_\_\_\_  
or Corps Trade and Rate \_\_\_\_\_

Signature of Officer i/c Records.



Date	Report From whom received	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
		Embarked	<u>Southampton</u>	<u>25.6.16</u>	
		Disembarked...	<u>Ramsey</u>	<u>26.6.16</u>	
		Joined Battalion	<u>12 JUL 1916</u>		
	<u>Spencer Breydell</u>	<u>Invalided to Eng &amp; T.B.</u>	<u>13 Leuchars</u> <u>Boulaysse</u>	<u>23.9.16</u>	<u>W 3083</u>
			<u>Fred Smith</u> <u>mason</u>		

FOR O.I/c INFANTRY RECORDS  
G.H.Q., 3<sup>rd</sup> ECHELON.

(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, Shoening-smith, & Co.



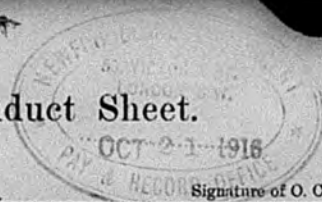
# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.  
(6-6) W5017/2124 1000m 6/15ss 93 58

Forms  
B. 121.  
39.

Regiment of 1<sup>st</sup> Newfoundland



Number of Sheet 21

Signature of O. C. Company J. J. Jones

Regimental Number and Name		Enlistment	Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<u>1795 J. Whislett</u>	Age on <u>22</u> years <u>10</u> months	<u>Labourer</u>	
Joined _____ Date _____	Place and Date of Enlistment <u>S. John's Aug. 27. 1915</u>	Period of { with Colours <u>1 1/2</u> years. { with Reserve <u>3 1/2</u> years.	Religion <u>Methodist</u>	
Joined _____ Date _____			Place of Birth <u>Levenshew</u>	
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>Medically Unfit</u>	<u>16<sup>12</sup> 16</u>				

To be carried over

ARMY FORM B. 121.

SECOND BOARD

NEWFOUNDLAND.

REPORT OF MEDICAL BOARD

ON SOLDIER OR NAVAL RESERVIST RETURNED  
FROM OVERSEAS

Station ST. JOHN'S NFLD.

Date ~~JUNE 12th.~~ 1917.

No. 1795

Age 22 Height 5'6"

Rank PRIVATE

Complexion

Name CHISLETT, J.

Eyes BLUE Hair DK. BROWN

Unit 1ST NFLD.

Address CAVENDISH, T.B.

Former Trade FISHING

Enlisted at ST. JOHN'S NFLD.

on AUGUST 27th., 1916.

Disease or disability TUBERCLE OF LUNG (T. B.)

Present condition *Temperature normal, Pulse 64.  
slight cough, some night sweats - fainting in flesh  
chest conditions improving*

Estimated disability *20%*

Recommendation of Medical Board *Discharge.*

*(Ran away from "Jensen Camp" May 21st, 1917.)  
Recommend his return to "Jensen Camp"*

Class

Members of Board

*L. Paterson Major*

*Windsor Tait*

*John E. Duncan*

Approving Medical Officer.

*Clayton Macpherson  
Major*



NEWFOUNDLAND.

REPORT OF MEDICAL BOARD  
ON SOLDIER OR NAVAL RESERVIST RETURNED  
FROM OVERSEAS

Station ST. JOHN'S NFLD. Date SEPTEMBER 29th., 1917.  
No. 1795 Age 22 Height 5'6"  
Rank PRIVATE Complexion  
Name CHISLETT, J. Eyes BLUE Hair DARK BROWN  
Unit 1ST NEWFOUNDLAND  
Address CAVENDISH, T. B. Former Trade FISHING  
Enlisted at ST. JOHN'S NFLD. on AUGUST 27th., 1916.

Disease or disability TUBERCLE OF LUNG (T.B.)

Present condition *Not working since last report. Been feeling better but no breath. Cough better. Spits occasionally. Weight 123 lbs. Temp 98.4 - pulse 84. Not looking so well as at last report. Right apex in front and at spine of scapula posteriorly shows bronchial breathing with increased vocal resonance, no accompaniments.*

Estimated disability

Recommendation of Medical Board *Enter Jansen Camp.*

Class

Members of Board

*W. H. Chase  
Wendell J. Jait  
Clay Macpherson, Major.*

Approving Medical Officer.

*Clay Macpherson, Major.*





## NEWFOUNDLAND.

## REPORT OF MEDICAL BOARD

ON SOLDIER OR NAVAL RESERVIST RETURNED  
FROM OVERSEAS

Station ST. JOHN'S NFLD. Date DECEMBER 7th., 1917  
 No. 1795 Age 22 Height 5'6"  
 Rank PRIVATE Complexion  
 Name CHISLETT, J. Eyes BLUE Hair DARK BROWN  
 Unit 1ST NEWFOUNDLAND  
 Address CAVENDISH, T. B. Former Trade FISHING  
 Enlisted at ST. JOHN'S NFLD. on AUGUST 27th., 1916  
 Disease or disability TUBERCLE OF LUNG (T.B.)

Present condition *Temp 98.4 pulse 108 weight 136 lbs in  
 boots & pants. No accompaniments in lungs. No cough  
 lately & no sputum*

Estimated disability

*To continue treatment at home  
 Total for six months*

Recommendation of Medical Board

*To continue treatment at home  
 Confer discharge*

Class

Members of Board

*J. H. ...  
 J. ...  
 L. Paterson, major*

Approving Medical Officer.

*Cluny Macpherson, Major*



## Report of Medical Board.

Station St. John's, Nfld. Date MAY 20th., 1919.  
 No. and Rank 1795 - PRIVATE Age 24 Height 5' 6"  
 Name CHISLETT J. Complexion  
 Unit Royal Newfoundland Eyes BLUE Hair DARK BROWN  
 Address CAVENDISH, T. B.  
 Former Trade FISHING  
 Enlisted at ST. JOHN'S On 27/8/16 (The Board will please note how the soldier's appearance corresponds with above description).  
 Disease or Disability Original TUBERCLE OF LUNG

Subsequent

Present Condition (Compare with previous Board)

Weight 125 lbs. pulse not much cough or phlegm  
 Bronchial breathing right apex. No accompaniment.  
 General condition poor.

THE ENTIRE DISABILITY: To what extent is his capacity lessened at present for earning a livelihood in the general labour market? *60%*

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? *60%*

Recommendation of Medical Board *Six months*

Members of Board

*H. H. ...*  
*mapr*

*H. H. ...*  
*J. ...*  
*J. ...*

Approving Medical Officer.



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

# MEDICAL HISTORY

OF

Surname *Crislett*

Christian Name *Jesse*



Table 1.—GENERAL TABLE.

Birthplace:—Parish..... County *N. Hants*

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined .....	on <i>27</i> day of <i>Aug</i> 191 <i>5</i>	on	day of	191
	at <i>St Johns N. Hants</i>		at	
Declared Age.....	<i>23</i> years	days	years	days
Trade or Occupation.....	<i>Labourer.</i>			
Height .....	<i>5</i> feet	<i>6 1/2</i> inches	feet	inches
Weight .....		<i>125</i> lbs.		lbs.
Chest Measurement {	Girth when fully expanded...	<i>36</i> inches		inches
	Range of expansion..	<i>3</i> inches		inches
Physical Development.....				
Vaccination Marks {	Arm .....			
	Number .....	<i>1</i>		
When Vaccinated .....				
Vision .....	R. E.—V==	<i>6/9</i>	R. E.—V==	
	L. E.—V==	<i>6/6</i>	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 Peters on</i>			
(Rank)	<i>Capt</i>			
	<i>St Johns</i> Medical Officer.			Medical Officer.
Enlisted .....	at		at	
	on <i>27</i> day of <i>Aug</i> 191 <i>5</i>	on	day of	191
Joined on Enlistment .....	Corps.	Regtl. No.	Corps.	Regtl. No.
	<i>1<sup>st</sup> N. Hants Regt</i>	<i>1795.</i>		
Transferred to..				
Became non-effective by.				
	on	day of	191	on
(Signature)				
(Rank)				



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

Date	Brief Details, and Signature
12.10.15	1 <sup>st</sup> Inoculation
19. 11. 15	Vacc: R.P. Graham Lt. BAMB.
23. 10. 15	2 <sup>nd</sup> Inoculation
17. 6. 16	Fit for Foreign Service H.F.W.

TABLE IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation.	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
St Johns Field					

*Temporary.*



ARMY FORM B. 178.

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Whislett Christian Name James Jesse G.S.H.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish \_\_\_\_\_ County \_\_\_\_\_

Examined ... { on \_\_\_\_\_ day of \_\_\_\_\_ 191 .  
at \_\_\_\_\_

Declared Age ... years \_\_\_\_\_ days.

Trade or Occupation ... \_\_\_\_\_

Height ... feet \_\_\_\_\_ inches.

Weight ... lbs. \_\_\_\_\_

Chest Measurement { Girth when fully Expanded \_\_\_\_\_ inches.  
Range of Expansion \_\_\_\_\_ inches.

Physical Development ... \_\_\_\_\_

Vaccination Marks { Arm ... Right \_\_\_\_\_ Left \_\_\_\_\_  
Number \_\_\_\_\_

When Vaccinated ... \_\_\_\_\_

Vision ... { R.E.—V= \_\_\_\_\_  
L.E.—V= \_\_\_\_\_

(a) Marks indicating congenital peculiarities or previous disease ... { (a) \_\_\_\_\_  
\_\_\_\_\_

(b) Slight defects but not sufficient to cause rejection ... { (b) \_\_\_\_\_  
\_\_\_\_\_

Approved by (Signature) \_\_\_\_\_  
(Rank) \_\_\_\_\_

Medical Officer.

Enlisted ... { at \_\_\_\_\_  
on \_\_\_\_\_ day of \_\_\_\_\_ 191 .

Corps.	Regtl. No.
<i>1st Newfoundland</i>	<i>1795</i>

Became non-effective by ...  
on \_\_\_\_\_ day of \_\_\_\_\_ 191 .

(Signature) \_\_\_\_\_  
(Rank) \_\_\_\_\_







*Original*



# Medical Report on an Invalid

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

Date October 14<sup>th</sup> 1916

1. Unit 1<sup>st</sup> Newfoundland  
2. Regimental No. 1795  
3. Rank Pte  
4. Name Chislett J.

5. Age last birthday 22  
6. Enlisted { on 27<sup>th</sup> Aug 1915.  
                  { at St John's.  
7. Former Trade or Occupation { Fishing

## 8. Disability.

Injury of lung (713)

## 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. 22.5.16

10. Place of origin of disability. Bombay

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. Mother & one sister died of phthisis. Shaving

Spain came on the way out to Bombay for appendicitis  
trouble. There was no physical signs in chest, but R.S. were  
found in sputum. admits he had been cough  
for previous history of chest disease.

*J.M.S.*

12. (a) Give your opinion as to the causation of the disability.

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 8).

Appendicitis by active service.





## 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 Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them 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 attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1918).

(iv.) In answering question 20 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.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

*Active service*

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

*Shrapnel & 1/4 over shrapnel*

21. Has the disability been aggravated by

(a) Intemperance?

*No*

(b) Misconduct?

*No*

(c) Any of the conditions mentioned in question 20, and if so, which?

*No*

22. Is the disability permanent?

23. If not permanent, what is its probable minimum duration?

*Twelve months*

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

*Not at present*

In defining the extent of his inability to earn a livelihood, estimate it at  $\frac{1}{2}$ ,  $\frac{1}{3}$ ,  $\frac{1}{4}$ , or total incapacity.

24A. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?

*—*

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

*—*

26. Do the Board recommend

(a) Discharge as permanently unfit, or

*Yes*

(b) Change to England?

Signatures:—

*Sukhraj Singh Raju* President.  
*J. J. Mitchell* (Capt. R.A.M.C.)  
*A. B. Howard* Es. Members.

3rd London General Hospital,

Station WANDSWORTH, S.W.

Date 20<sup>th</sup> October 1916

Approved

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

Date 20<sup>th</sup> October 1916

*Sukhraj Singh Raju* et al.  
 Administrative Medical Officer.

(On leaving Corps or Station where invalided.)

Transfer { Date \_\_\_\_\_  
Station \_\_\_\_\_ } Name of { Conveyance \_\_\_\_\_  
or { Date \_\_\_\_\_  
Embarkation { Port \_\_\_\_\_ } Vessel \_\_\_\_\_  
Officer in }  
medical charge }

Brief remarks on case during transit, and state on transfer for final disposal.

Re-transferred { Date \_\_\_\_\_  
Hospital or } \_\_\_\_\_ Officer in medical charge.  
Station }

(At Station or Hospital where finally disposed of.)

Station and Hospital } \_\_\_\_\_  
Arrived from \_\_\_\_\_ Date \_\_\_\_\_

If admitted	If under treatment		Disease	How finally disposed of	Date of Discharge, &c.
	Date	From			

Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

Date of final Medical Board, or decision } \_\_\_\_\_  
Administrative Medical Officer.

58 Helena St SW

Army Form B. 179.

MEDICAL REPORT ON AN  
INVALID.

Station 1st New Hampshire  
Corps \_\_\_\_\_  
Regimental No. 1795  
Rank Plt  
Name Charles P. Tubbs  
Disability Tubercle of Lung  
Date 20/10/16 (R.R.)

Hospital or Station transferred to for final disposal \_\_\_\_\_  
Date of final disposal \_\_\_\_\_  
How finally disposed of \_\_\_\_\_

The original Report is invariably to accompany the discharge documents of Invalids.  
Wt. W.8330/2774. 900M 9-15 M&C.L.D.  
Form B. 179. 34



## MEDICAL CASE SHEET

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year 1916.	1795,	Pte.	CHISLETT,	Jesse,
	Unit.	Age.	Service.	
	1st. Newfoundland.	22	13/12.	France 3/12
Station and Date PINWOOD SANATORIUM WOKINGHAM 25-10-16.	Disease <i>Pulmonary Tuberculosis.</i>			
	Admitted from 3rd. London General Hospital, Wandsworth.			
	Went sick in France 14-9-16. Cough, weakness + pain in chest.			
	No history of any Tubercular disease before enlistment.			
	General condition fair.			
	Loss of weight. Cough & sputum containing T. B. Signs of peribronchial disease in both lungs, spreading into upper lobes.			
1-11-16.	Transferred to 58 Victoria Street for repatriation.			



\*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.





# Medical Report on an Invalid.

Station 3<sup>rd</sup> London General Hospital, Wandsworth SW.  
Date October 1<sup>st</sup> 1916

- 1. Unit 1<sup>st</sup> Newfoundland
- 2. Regimental No. 1795
- 3. Rank Private
- 4. Name Christie J
- 5. Age last birthday 22
- 6. Enlisted { on 27 August 1916  
at St John's Newfoundland
- 7. Former Trade { Fishing  
or Occupation {

## 8. Disability.

Tubercle of Lung (TB)

### 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. 22. 9. 16
- 10. Place of origin of disability. Boulogne
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. Mothers & one sister died of phthisis  
Shivering pain came on & he was sent to Boulogne for appendicitis trouble. There was no physical signs in chest, but T. B. was found in sputum. Admitted here September 24<sup>th</sup> 1916

- 12. (a) Give your opinion as to the causation of the disability.
- (b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3).

Aggravated by Active Service

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.*

*Occasional evening rise of temp  
irritable cough, Sweats at night. Lung flesh  
At side some impairment of percussion note.  
Tubercle bacilli was found in sputum*

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. Do you recommend

- (a) Discharge as permanently unfit,
- (b) <sup>or</sup> Change to England?

*Yes*  
*W. Child Cap. A.M.C.D.*

Officer in medical charge of case.

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

*except?*  
*London General Hospital*  
Station *Wandsworth Rd. S.W.*

*Alfred Pearce Gould*

Officer in charge of Hospital

Date *20 October 1916*

*Commanding Surgeon*  
*L. Dr. A.M.C.D.*  
*London General Hospital*

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

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

Opinion of the Medical Board.

Ques.—(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 Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them 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 attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1913).

(iv.) In answering question 20 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.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

*Active Service*

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

*Strain & Exposure to Infection*

21. Has the disability been aggravated by

(a) Intemperance?

*No*  
*No*

(b) Misconduct?

22. Is the disability permanent?

*No*

23. If not permanent, what is its probable minimum duration?

*Twelve Months*

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

*Total at present*

In defining the extent of his inability to earn a livelihood, estimate it at  $\frac{1}{2}$ ,  $\frac{1}{3}$ ,  $\frac{1}{4}$ , or total incapacity.

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

*Yes*

*Confirmed Nov 29. 1916*  
*R. W. Strain Pres*  
*H. C. Brown Mgr*  
*J. L. Clark Secy*

26. Do the Board recommend

(a) Discharge as permanently unfit,

or

(b) Change to England?

Signatures:—

*32 London General Hospital*  
Station *Wandsworth S.W.*  
Date *20 October 1916*

*Sidney Martin Major R.A.M.C.D. President.*  
*J. Wetherup Capt. R.A.M.C.D. Members.*  
*H. P. D. Howard C.S.*

Approved.  
Headquarters London District  
Date *20 October 1916*  
*St John*  
*30. 11. 16*

*Sidney Martin Major R.A.M.C.D.*  
Administrative Medical Officer

*Cluny Macpherson, Major*  
*R.M.S.*



(On leaving Corps or Station where invalidated.)

Transfer { Date \_\_\_\_\_  
 Station \_\_\_\_\_ }      Name of { Conveyance \_\_\_\_\_  
 or { \_\_\_\_\_ }      Vessel \_\_\_\_\_  
 Embark- { Date \_\_\_\_\_ }      Officer in  
 ation { Port \_\_\_\_\_ }      medical charge \_\_\_\_\_

Brief remarks on case during transit, and state on transfer for final disposal.

Re-transferred { Date \_\_\_\_\_  
 Hospital or } \_\_\_\_\_  
 Station }      Officer in medical charge.

(At Station or Hospital where finally disposed of.)

Station and Hospital } \_\_\_\_\_  
 Arrived from \_\_\_\_\_ Date \_\_\_\_\_

If admitted	If under treatment		Disease	How finally disposed of	Date of Discharge, &c.
	Date	From			

Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

Date of final Medical Board, or decision } \_\_\_\_\_

Administrative Medical Officer.

Army Form B. 179.

MEDICAL REPORT ON AN  
 INVALID.

Station *Regt*  
 Corps *1st Maryland*  
 Regimental No. *1790*  
 Rank *Sergeant*  
 Name *Chillett J. J.*  
 Disability *Subvent of eye*  
 Date *20 October 1916*

Hospital or Station }  
 transferred to for }  
 final disposal }  
 Date of final }  
 disposal }  
 How finally }  
 disposed of }

The original Report is invariably to accompany the discharge documents of Invalids.  
 (27) (88579) W. 1898 470M 5-15 W B & L  
 Form B. 179.  
 34

DECEMBER 10TH., 1921.

B. P. C. No. 198

FORM FOR HISTORY AND MEDICAL RE-EXAMINATIONS OF PENSIONERS

THE BOARD OF PENSION COMMISSIONERS FOR NEWFOUNDLAND.

TO MEDICAL EXAMINER:

ST. JOHN'S, Newfoundland.

Medical Report required; review date:—

Date Nov. 16, 1920.

AS SOON AS POSSIBLE

The Secretary, Board of Pension  
Commissioners for Newfoundland.

Per.....

Regimental No. 1795

Rank PRIVATE

Name

JESSE CHISLETT

ADDRESS: CAVENDISH, TRINITY BAY.

Unit

ROYAL NEWFOUNDLAND REGIMENT

DESCRIPTION OF PENSIONER:

Apparent Age 24 YEARS

Height 5' 6"

Colour of Eyes BLUE

Complexion FAIR

Colour of Hair

DARK BROWN

Weight

Marks of Identification:

NOVEMBER 29TH., 1916:

OCCASIONAL EVENING RISE OF TEMPERATURE. IRRITABLE COUGH. SWEATS AT NIGHT. LOSING FLESH. RIGHT SIDE SOME IMPAIRMENT OF PERCUSSION. TUBERCLE BACILLI WAS FOUND IN SPUTUM.

JUNE 12TH., 1917:

TEMPERATURE NORMAL. PULSE 64. SLIGHT COUGH. SOME NIGHT SWEATS. GAINING DN FLESH. CHEST CONDITION IMPROVING.

SEPTEMBER 29TH., 1917:

FEELING BETTER BUT NO BREATH. COUGH BETTER. SWEATS OCCASIONALLY. WEIGHT 123 LBS. TEMPERATURE 98.4. PULSE 64. NOT LOOKING AS WELL AS AT LAST REPORT. RIGHT APEX IN FRONT AND AT SPINE OF SCAPULA POSTERICRLY SHOWS BRONCHIAL BREATHING WITH INCREASED VOCAL RESONANCE. NO ACCOMPANIMENT

DECEMBER 7TH., 1917:

TEMPERATURE 98.4. PULSE 106. WEIGHT 136 LBS. IN BOOTS AND PANTS. NO ACCOMPANIMENTS IN LUNGS. NO COUGH LATELY AND NO SPUTUM.

JUNE 11TH., 1918:

TEMPERATURE 98. PULSE 76. COUGHS WITH SLIGHT EXPECTORATION IN MORNINGS. BREATH SOUNDS 'COGGED' AT LEFT APEX AND TO SECOND INTER-SPACE. OTHERWISE LUNG CONDITION PRACTICALLY THE SAME AS NOTED SEPT. 29TH., 1917. ROUGH A. S. MURMUR AT APEX. COMPLAINS OF BREATHLESSNESS ON EXERTION, OTHERWISE FEELS FIT. WEIGHT 130 LBS.

MAY 20TH., 1919:

WEIGHT 125 LBS. PULSE 72. NOT MUCH COUGH OR PHEGEM. BRONCHIAL BREATHING RIGHT APEX. NO ACCOMPANIMENTS. GENERAL CONDITION POOR.

B. P. C. Form 98  
5 M 8-12-19

FORM FOR HISTORY AND MEDICAL EXAMINATIONS OF PENSIONERS  
DECEMBER 30TH., 1919:

RIGHT LUNG INCREASED VOCAL RESONANCE. V. R. TO LEVEL OF FOURTH RIB.  
AND LEFT LUNG. SEVERE SUPRASPINOUS FOSSA POST. COGGED RESPIRATION TO  
3RD INTERSPACE. HEART: NO PRESENT INDICATION OF VALVULAR TROUBLE  
PULSE 78. TEMPERATURE 98. COUGH SAME AS LAST REPORT. WEIGHT 126 LBS.

JUNE 14TH., 1920:

INCREASED V. R. AND V. F. RIGHT LUNG ANTERIORLY. SUPRASPINOUS FOSSA  
POSTERIORLY. TEMPERATURE 98.4. Cough LESSENERD SINCE LAST REPDR.  
SLIGHT PLEURITIC FRICTION LEFT SIDE 6TH TO 8TH RIBS. WEIGHT 125 LBS.

Disability for which pension has been awarded:—

TUBERCLE OF LUNG



## MEDICAL REPORT.

(1) Are you satisfied that the man presenting himself for examination is the pensioner named and described on page 1?

YES

(2) Give a definite detailed description of the present condition.

**INCREASED V. R. AND V. F. RIGHT LUNG ANTERIORLY, MOSTLY SUBCLAVICULAR.  
INCREASED V. R. SUPRA-SPINOUS FOSSA. TEMPERATURE 98.6. WEIGHT 130 LBS.**

Special Questions:—

This is to certify that I have read, or have heard read, the above description of my disabling condition, that I find it to be correctly and satisfactorily stated, and have not withheld any information concerning any disability resulting from service. I also wish to state that my complaints are:—  
(If there are no complaints, it will be so stated.)

Signature  
of Witness.....

Pensioner's signature... (SGD) JESSE CHISLETT

3 (a) PENSIONABLE DISABILITY—(Here state the nature of the disability which has been contracted, or aggravated, while on Active Service.)

**PHTHISIS PULMONALIS**

(b) NON-PENSIONABLE DISABILITY—(Here state the nature of the disability which has not been contracted, or aggravated, while on Active Service.)

4 (a) To what extent, if any, have the disabilities diminished or increased since last examination?

**UNALTERED**

(b) If increased or undiminished, is increase or failure to diminish due to intemperance, improper conduct or neglect to exercise reasonable care required by the nature of the disabling condition?

5 Will disabilities materially increase or diminish? **REMAIN AS AT PRESENT**

6 Are the disabilities permanent?

7 (a) Is pensioner wearing an artificial appliance for disability due to or aggravated by service?

(b) Should he continue to do so?

(c) If so, is any alteration in the form of the present appliance recommended?

(d) If any appliance is necessary?

8 (a) Would treatment reduce the pensioner's disability, or increase his comfort? **NO**

(b) Nature of treatment advised

(c) Is pensioner willing to accept treatment advised?

(d) If not, is his refusal reasonable?

REFUSAL OF TREATMENT:—This is to certify that I thoroughly understand the nature of the treatment advised and refuse to accept the same for the following reasons:

(To be completed when treatment advised has been refused.)

.....

The foregoing report submitted by Pensioner's signature

**(SGD) A. R. ANDERSON, M. D.**

Signature Medical Examiner.

Place **HEART'S CONTENT**

Date **15/12/20**

Members  
(of a Board)

The answers to the following questions are to be filled in by the representative of the District Office of the Board of Pension Commissioners.

(In cases in which medical re-examination is being made by a medical practitioner in accordance with the second to last paragraph of page 1 hereof the medical practitioner will fill in such answers).

9 (a) Has pensioner married since last medical re-examination? **NO**

9 (b) If so, is he receiving the additional allowance for a wife? **NO**

10 (a) Has a child been born to pensioner since last medical re-examination? **NO**

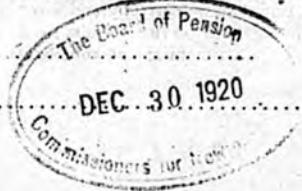
10 (b) If, so, is he receiving the additional allowance for a child? **NO**

11 If pensioner was married, has his wife died since last medical re-examination? **NO, JUST PREVIOUS**  
(State date of death.)

12 Have any of pensioner's children died since last medical re-examination? **NO, JUST PREVIOUS**  
(State date of death and names of children who have died.)

**TOTAL DISABILITY: 50%  
AGGRAVATION: 30%**

**(SGD) W. R. PARSONS**



Place

Date

Head of District Office,  
(or Medical Practitioner.)

Fold Here

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**ON HIS MAJESTY'S SERVICE**

To the Officer in Charge of Records,

***Royal Nfld. Regt.***

***Dept. of Militia,***

***ST. JOHN'S, Nfld.***

---

Fold Here



SEP 16 1921

1921.

The accompanying **Victory Medal** and/or **British War Medal**

is/are forwarded herewith to

Jesse Chislett

in respect of his service as No. 1795 Rank Pte.

Name J. Chislett

Royal Nfld. Regt.  
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received

~~Received~~ Received  
Thomas

Signature

Jesse Chislett

Date

sep Th 20 1921

Address

Jesse Chislett  
Lawrence

Trinity Bay [P.T.O.]

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

**MEDICAL HISTORY**  
OF

Surname Chislett Christian Name James

Table I.—GENERAL TABLE.

Birthplace:—Parish		County	
Examined ... ..	on	day of	191
	at		
Declared age ... ..		years	days
Trade or occupation ... ..			
Height ... ..		feet	inches
Weight ... ..			lbs.
Chest Measurement { Girth when fully expanded Range of expansion ... ..			inches
			inches
Physical development ... ..			
Vaccination marks { Arm ... .. Number ... ..	Right	Left	
When vaccinated ... ..			
Vision ... ..		R.E. - V =	R.E. - V =
		L.E. - V =	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)		Medical Officer.	
(Rank)		Medical Officer.	
Enlisted ... ..	at		
	on	day of	191
Joined on enlistment ... ..		Corps	Regtl. No.
		<u>Newfield Regt</u>	<u>1795</u>
Transferred to ... ..			
Became non-effective by ... ..			
	on	day of	191
(Signature)		(Rank)	

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

Name of Hospital	Admitted to hospital			Discharged from hospital			Disease	Number of days in hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3rd London General Hospital Wandsworth S.W.	24	9	16				Tubercle of Lung		<p>Board held. Su Overleaf                      Disability. Tubercle of Lung. Cough                      sweats at night, losing flesh.                      Cause. Tubercle bacilli found in sputum                      strain &amp; exposure to infection                      on Active Service                      Total. Inability to earn a livelihood                      at present.</p>	<p>Sgt                      H. J. Pagan. Capt. Adm. S.                      3rd London General Hospital,                      Wandsworth S.W.</p>
Admitted from. 3rd London General Hospital Wandsworth. Vinson's Sanatorium 23 10 16 1 11 16 Wokingham Berks							Pulmonary Tuberculosis		<p>Went sick in France 14 9.16. Cough, weakness                      pains in chest. No history of any Tubercular                      disease before enlistment. Genl. Condition fair                      Loss of weight. Cough &amp; sputum containing                      T.B. signs of Peribronchial disease in both                      Lungs spreading into upper lobes.                      1.11.16 Transferred to 58 Victoria St for Repatriation</p>	



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

Date	Brief details, and signature
	<p>Board held 20.10.16            Found Permanently unfit            Board. Approved 20.10.16</p> <p>Sgt. N. Pagan, Cap. A. G. H. C. P.            3rd London General Hospital            Wandsworth S.D.</p>

**Table IV.**—SERVICE TABLE

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

DEPARTMENT OF VETERANS AFFAIRS  
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

NEED

DEATH NOTIFICATION  
AVIS DE DÉCÈS

TO:  
À:

DATE ..... May 7, 1973 .....

NAME Service No. CPC No.  
NOM BHISLETT, Jesse Matricule No. 1795 WWL CCP No. 260852

WVA No.  
AAC No. ....

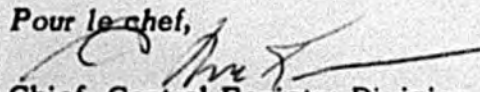
Information Received from:

Information reçue de: ..... S.P.M.E. NF. Dist. .....

Date of Death  
Date du Décès ..... April 20, 1973 .....

Place  
Endroit ..... Not Stated .....

Distribution: WSR-DASG  
VI - ASS  
DO - BD  
HO - BC

Pour le chef,  
  
for Chief, Central Registry Division.  
Dépôt central des dossiers.