



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5799 Name John Clark Evangelist

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. John Clark
- 2. What is your full Address? 2. Penguin Arm Bof. Idles
- 3. Are you a British Subject? 3. Yes
- 4. What is your age? 4. 27 Years Months
- 5. What is your Trade or Calling? 5. Engineer
- 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 Yes
- 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, John Clark 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.

John ClarkSIGNATURE OF RECRUIT.

R. PowerSignature of Witness.

John Clark OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, John Clark 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 the declaration and taken the oath before me at John's on this 16 day of July 1918

Signature of Attesting Officer Chadwick's Lieut

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the.....

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

Date.....191.....

Place..... } Approving Officer.

Wally H-

† 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

5799

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

Name John Clark
 Apparent age 22 years months. Height 5 feet 5 inches
 Chest Measurement { Girth when fully expanded 34 1/2 inches
 Range of expansion 3/4 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin William
Penguin Arm | Relationship Father,
Box Islands Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

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



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5799 Name John Clark Corps Evangelist.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---|
| 1. What is your name? | 1. <u>John Clark</u> |
| 2. What is your full Address? | 2. <u>Penguin Arm Bof Idles</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>27</u> Years Months |
| 5. What is your Trade or Calling? | 5. <u>Evangelist</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
..... } Corps <u>Yes</u> |
| 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, John Clark 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.
 SIGNATURE OF RECRUIT.
John Clark
R. A. Power Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, John Clark 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 16 day of July 1918
 Signature of Attesting Officer John's

†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.
W. H. H.

† 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)

16
31
30
31
30
138



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5799 Name John Clark Corp. Evangelist

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. John Clark
- 2. What is your full Address? 2. Penguin Arm Box 100
- 3. Are you a British Subject? 3. Yes
- 4. What is your age? 4. 27 Years Months
- 5. What is your Trade or Calling? 5. Evangelist
- 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 Corp. Yes
- 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, John Clark 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.

John Clark SIGNATURE OF RECRUIT.
R. T. Power Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, John Clark 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 10 day of July 1915

Signature of Attesting Officer John's

†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..... } St. John's

† 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 John Clark
 Apparent age 22 years 0 months. Height 5 feet 5 inches
 Chest Measurement { Girth when fully expanded 34 1/2 inches
 Range of expansion 3 1/2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin William
Penguin Arm | Relationship Father
B of Islands Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>16-7-18</u>									_____ _____ _____ _____ _____ _____ _____ _____ _____ _____
Joined at <u>St. John's</u> on <u>July 16-1918</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>30-11-1918</u> (date of discharge) <u>~</u> years <u>148</u> days									
" " Pensions " " " " " " " " " " " "									

Demobilization St. John's 30-11-1918

C.R. 5799

Extract from Daily Orders part 11, Depot St. John's dated Jan. 25th. 1919.

#5799 Pte³ J. Clarke.

Having been found medically unfit is discharged from Nov. 30, 1918.

C.R. 5799

Extract from Daily Orders para 11 Unit The Royal Rifles
Regt. St. John's, dated August 24th, 1918.

5799 Pte. Clarke,

Returned from leave and reported at Headquarters for duty
24-8-18.

C.R. 5799

Extract from Daily Orders Part 11 Unit The Royal ^{Nfld.}_H
Regt. St. John's, dated August 26, 1918.

5799 Pte. J. Clarke.

Admitted to Donovans Convalescent Hospital 25/8/18.

Extract from Daily Orders part 11, from Unit The Royal Nfld.
Regt. St. John's, dated July 17th, 1918.

#5799 Pte. John Clarke

Attested for General Service with the Royal Nfld. Regt.

16-7-18

C.R. 5799

Extract from Daily Orders, Part 11, Unit: The Royal Newfoundland
Regiment, dated October 16th 1918.

Hospital.

5799 Pte. J. Clarke.

Discharged from Denevans 14/10/18.

C.R. 5799

Extract from ~~221st~~ Medical Board Held on Saturday

Nov. 16th, 1918.

5799 Pte. J. Clarke,

Recommended Discharge-Permanentlt Unfit.

MM.

1
Clarke, John

5799

May Sept

April 28, 1919

#5799 Pte. John Clarke,

Penguin Arm,

Bay of Islands.

Dear Sir:-

Please find enclosed "Discharge Certificate

No. 2135."

Yours truly

Raymaster & Officer i/c Records Capt.



THE ROYAL NEWFOUNDLAND REGIMENT
DISCHARGE DEPOT

ST. JOHN'S, NEWFOUNDLAND,

-----April 24th/19-----

From Officer Commanding,
Discharge Depot.

To Paymaster & O. i/c Records,
Militia Dept.

#5799, Ex-Pte. John Clarke

Reference attached correspondence concerning
above noted man. This man appeared before the Standing
Medical Board on November 16th and was recommended for
discharge as Permanently unfit.

All the necessary papers ~~are~~ ^{were} forwarded to you on Nov. 18th 1918
please.

RHT/TJW

RHT
Captain,
O.C. Discharge Depot.



Civil Re-Establishment Committee

MILITIA BUILDING,
St. John's, Newfoundland.

HON. MR. JUSTICE KENT, CHAIRMAN.	I	R. B. JOB, ESQ., H. E. COWAN, ESQ.,	} VICE-CHAIRMEN.
SIR P. T. McGRATH, SIR M. P. CASHIN,	J. G. STONE, ESQ., DR. V. P. BURKE, REV. DR. L. CURTIS.	MAJOR MONTGOMERIE, MAJOR MACPHERSON, C.M.G.	
MAJOR PARSONS, M.C., MEDICAL OFFICER.		DR. W. W. BLACKALL, VOCATIONAL OFFICER & SECRETARY.	

5799

ADDRESS ALL COMMUNICATIONS TO
VOCATIONAL OFFICER,
MILITIA BUILDING, ST. JOHN'S.

April 23, 1919.

From:- Vocational Officer,
Department Soldier's Civil Re-Establishment,

To:- Paymaster & Officer i/c Records,
Department of Militia.

Herewith I send you a letter which I have received from Mr. John Clark together with a copy of my reply thereto, for your information and action please.

W. W. Blackall
Vocational Officer.

WWB:KMD

Discharged Nov 30/1918.

*O.C. Headquarters
for your attention, please
Mr Dowley Capt
O.C.R.*

Bay of Islands.

Penguin arm

Pikund
Dr. W. W. Blackall
by mail 30/19

Dear Sir it is a long time since I heard from you & its strang that my Ditch have not turned up yet after I received your letter I sent you a message to let you know I never got it yet so it is four months over due time & I am sure it should be here now so try & hunt it up for me
Yours truly

John Clark

April 23, 1919.

Mr. John Clark,
Penguin Arm,
Bay of Islands.

Dear Mr. Clarke,-

I am very sorry indeed to learn that you have not yet received your discharge papers etc. I am placing your letter in the hands of Captain Howley, who, I am sure, will investigate the matter for you.

Yours faithfully,

Vocational Officer.

WWB:KMD

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

MEDICAL HISTORY

Surname

Calake

OF

Christian Name

John

Table I.—GENERAL TABLE

Birthplace :—Parish

Penguin Cove, B. Co. Newfoundland.

	SPECIAL RESERVE		REGULAR ARMY	
Examined	on <i>16th</i> day of <i>July</i> 19 <i>16</i>	on day of 19 <i>1</i>	at <i>St. John's</i>	at
Declared Age	<i>22</i> years days	years days		
Trade or Occupation	<i>Fireman</i>			
Height	<i>5</i> feet <i>5</i> inches	feet inches		
Weight	<i>122</i> lbs.	lbs. ll. a.		
Chest Measurement	Girth when fully expanded	<i>34 1/2</i> inches	inches	inches
	Range of Expansion	<i>3</i> inches	inches	inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
		<i>1 Scar.</i>		
When Vaccinated	<i>3 months ago.</i>			
Vision	R.E.—V=	<i>46</i>	R.E.—V=	
	L.E.—V=	<i>6/100</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)				
(Rank)		Medical Officer		Medical Officer
Enlisted	at <i>St. John's</i>	at		
	on <i>16th</i> day of <i>July</i> 19 <i>16</i>	on day of 19 <i>1</i>		
Joined on Enlistment	Corps	Regtl. No.	Corps	Regtl. No.
	<i>Royal Wtd. Regiment.</i>	<i>5799.</i>		
Transferred to				
Became non-effective by	on day of 19 <i>1</i>	on day of 19 <i>1</i>		
(Signature)				
(Rank)				

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:

am going home & hope to continue my former work as motor-mechanic.

John Clark

Signature of Man.

*1948
22
9*


Reg. No. *5999*

W. McNeill

Signature of the Vocational Officer or his Representative.

Place *A. J. ...*

Date *Nov. 15* 191*8*



Department of Militia, Newfoundland

Medical Department

Medical Report on an Invalid

NOTES:—

- (a) This report is solely concerned with Pensions.
- (b) A single copy only is required.
- (c) "Aggravated" being now a technical term, carrying right to pension, discrimination in its use is essential.
- (d) Be as brief as possible compatible with lucidity.
- (e) Avoid dubiety—"perhaps" "possibly" "might" and the like.
- (f) Only sufficient clinical data need be given to establish the degree of disability and assist the Board in arriving at a decision.

STATEMENT OF CASE

Station **St. John's**

Date **Nov. 4th 18**

- | | |
|-----------------------------------|-------------------------------|
| 1. Unit <i>Royal Newfoundland</i> | 5. Age last birthday |
| 2. Regimental No. 5799 | 6. Enlisted on |
| 3. Rank Private | at |
| 4. Name CLARKE, J. | 7. Former trade or occupation |
| | 8. Disability |

MEASLES. COMPLICATED WITH PNEUMONIA.

9. History

During August 1918, whilst on home leave, developed measles, later developed pneumonia of left lung. On returning to St. John's, was sent to Convalescent Camp at Denovans, where he remained about seven weeks. Since development of pneumonia, coughs continuously and pain left side on deep breathing.

10. What is his present condition?

(This is the important question. Be brief—the clearer the case the less need be written. Read note f above.)

General condition fair. Somewhat anæmic. Has lost some weight. Complains of severe pain in left chest. Temp. 97. Pulse 108.

Respiratory System. Expansion normal. Breath sounds pleuritic in character. Vesical fremitus increased on right. On percussion, normal resonant note obtained.

Circulatory System. Heart rapid, cardiac impulse slightly diminished intensity. Sounds at apex sharp and snappy in character at base; Over aortic area clear and distinct; over pulmonic area marked roughening of sounds and presence of distinct murmur.

Urogenital and Digestive Systems. Normal.

11. Was sanatorium advised and refused?
operation

12. Do you recommend discharge as permanently unfit?

Yes

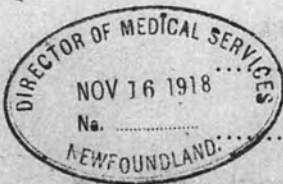
Signature J. B. O'REILLY, Capt.,

Rank or Qualification R. A. M. C.

Remarks if any by Officer i/c Hospital.

Place

Date



Signature

Rank

D. M. S. NEWFOUNDLAND.

Opinion of the Medical Board

In para. 13, the President should write "may" or "cannot" at x
Erase inapplicable words

13. For pension purposes, the disability x **cannot** be considered as aggravated by:—
due to
- (a) Service during this war. (b) Climate. (c) Ordinary Military Service
Remarks if any:—
14. Does the Board concur in preceding report? (see Sect. 10) If not give differing opinion and additional findings.

Yes

15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market?
- (b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a full livelihood in the general labor market lessened by that portion of his disability to or incurred during service?
- (State in percentage.)

Nil

Remarks if any:—

16. Is the disability permanent?
17. Has the disability been aggravated by (a) Intemperance (b) Misconduct
18. The refusal of operation is:— (a) Reasonable
sanatorium (b) Unreasonable

Remarks if any:—

19. If fit subject for Hospital do you recommend admittance to { General Hospital,
Naval and Military Con-
valescent Hospital,
Jensen Tuberculosis Camp.

20. We recommend discharge from the Army **Permanently Unfit.**
retention in

Remarks if any:—

N. S. FRASER

.....
President

J. S. TAIT

Signatures.....

L. PATERSON, Major.

St. John's

Place

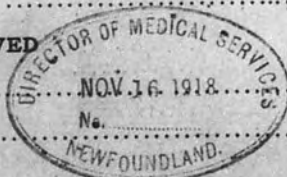
Nov. 16th '18.

Date

APPROVED

Station

Date



(Sig) CLUNY MACPHERSON, Major.

.....
Administrative Medical Officer

D. W. S. NEWFOUNDLAND.



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 *Clarke John*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *5799*
 Intended address *Bay of Islands*
 Height on discharge *5* Feet *5*
 Color of hair on discharge *Dark*
 Complexion *Fair*
 Color of eyes *Brown*
 Descriptive Marks
 Figure on discharge *medium*
 Christian name of Father *William*
 Christian name of Mother *Sarah*
 Wife's maiden name in full
 Date and place of marriage
 Christian names of children
 Place and date of soldier's birth. *Bonne Bay. Oct 8th 1895*
 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) *John Clarke*

(Rank) *PC*

Station *St Johns*

Date *4 Nov*

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.

Robert G. G. G.
 Medical Officer, Hospital
 Unit, or Command Depot

Station *St Johns*

Date *Nov 1/18*

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at Headquarters on July 16 1918

1. Name John Clarke Age (a) Declared 22

(b) Apparent

2. Do you know of anything wrong with you? Left leg was lame

What severe illnesses have you had? none

Eyes Brown
Complexion Dark
Markings Scars on left cheek

5799

3. Height 5ft 5 Weight 122

4. Eyesight (a) Left 4/24 (b) Right 4/6

5. Physical Defects (Examine after strenuous exercise) n

6. Examination of Lungs n

Measurement

(a) Expiration

31 1/2

(b) Inspiration

34 1/2

7. Examination of Heart n

8. Examination of Urine n

9. Examination of Mouth—(Defective Speech)

Teeth

Throat

Nose

Ears—(Otorrhea)

(Deafness)

n

10. Have you been successfully vaccinated, and when? Yes 3 months ago 1st time

11. Name and address of next of kin

Father William Penguin Ann
Bay of Islands
St. Lawrence
St. John's

REMARKS—

A 11

Medical Examiners.



The Royal Newfoundland Regiment

REPORT OF HEADQUARTERS TRAVELLING BOARD HELD ON SOLDIER ON REGIMENTAL STRENGTH

Depot: Headquarters, Royal Newfoundland Regiment

Date Nov 1st 1918

Regimental No. 5799

Name W. Clarke J.

Address _____

Disease or Disability measles + Pneumonia

Finding of last Standing Medical Board, _____

held on _____ 19 _____

Present Condition _____

Recommendation Standing Medical Board

Category _____

Part II, Orders
Gen'l Instrs
Newfound Regt

Members
of
Board

R. H. Lait Capt.
O. C. Depot

Watson
D. D. M. S.

Robbie Capt.
Reilly
M. O. Depot

To be Noted

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination held at Burling

1.—Name John James Clarke Age (a) Declared 22
(b) Apparent 22

2.—Do you know of anything wrong with you? No

What severe illness have you had?
None

3.—Height 5 ft. 6 3/4 Weight 115

4.—Eyesight (a) Left 4.6 (b) Right 6.6

5.—Physical Defects (Examine after strenuous exercise)
None

6.—Examination of Lungs
Measurement (a) Expiration 32 (b) Inspiration 34

7.—Examination of Heart Normal

8.—Examination of Urine Normal

9.—Examination of Mouth—(Defective Speech) Negative
Teeth 3 molars ~~are~~ missing
Throat Normal
Nose Normal
Ears—(Deafness, Otorrhea) Negative

10.—Have you been successfully vaccinated, and when? Yes last April

11.—Name and address of next of kin. Wm Clarke
Penguin Arm
Bay of Islands
Nfld.

REMARKS—

We consider this man { Fit
~~Temporarily unfit for Military Service~~
~~Permanently unfit for Military Service~~

(If unfit, Form M.S.B., 10 A, should be filled and attached).

Solicitor
General
Medical Examiner

F Fisher

John J. Clarke. Sent forward formally this 12th July and per-wer advised

h.M.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 77 ⁰⁰/₁₀₀

Apr 29 1919

Received from the First Newfoundland Regiment
the sum of Seventy Seven ⁰⁰/₁₀₀ Dollars.
~~on account~~ of Pay.
balance

Ch. No. 17162	Initials. C.W.
Pay Ledger 424	Initials. J.S.
Gen. Ledger	Initials.

Cheque mailed to Penguin Arm.
Bald.
Regtl. No. Rank May 5/19.

No. 5799

Rank

Pl

Name

J. Clarke

Left 5799

April 24th/19

From Officer Commanding,
Discharge Depot.

To Paymaster & O. i/c Records,
Militia Dept.

#5799, Ex-Pte. John Clarke

Reference attached correspondence concerning
above noted man. This man appeared before the Standing
Medical Board on November 16th and was recommended for
discharge as Permanently unfit.

All the necessary papers ^{were} forwarded to you, on Nov 18th 1918
please.

RHT/TJW

Captain,
O.C. Discharge Depot.

Form
C. 348
21

MEMORANDUM.

From

From

To

To

ANSWER.

191

191

See letter dated Jan. 21st, 1919, to Paymaster
in file of 4161 Pte. Anderson

NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No.

Sent by

Rec'd by

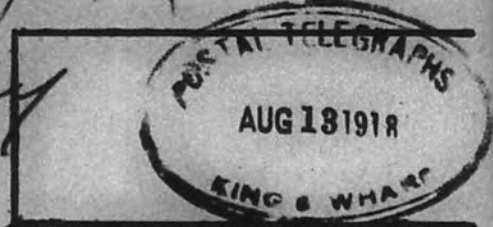
Check

No.

Place from

To

Curling
Capt J Grady



I am very sick with measles.

*5799 John James Clarke
penquin arm,*

F. Co

*Noted
Bulle*

[Signature]

Nov. 18th, 1918

From Officer Commanding
Depot

To Paymaster and Officer i/c Records,
Militia Department

5614 Pte. A. Whitehorn
5321 " T. Woodfine
5799 " J. Clarke

The marginally noted men have been recommended for discharge as permanently unfit by Medical Board held on Saturday, November 16th.

I am sending them herewith for your attention and necessary action, please. Their accounts on Company Pay Sheets have been squared up to and including 18-11-18, and they have credit balances and allotments as undernoted.

	<u>Cr. Bal.</u>	<u>Allotment</u>
5614 Whitehorn	\$121.50	None
5321 Woodfine	2.00	60¢
5799 Clarke	3.50	None

AG

Reg. No. 5799 Rank *Pfc* Name *Clarke John*
Attested *16-7-18* Address *Penguin Arm Bay I 2*
Allotment..... Allottee.....
Date of Allotment..... Returned from Overseas.....
Embarked for Overseas..... Cause.....

<i>18-7-18</i>	<i>Voacc</i>	
	<i>H.L. 29-7-18 to 8-8-18 held 24-8-18</i>	
<i>25-8-18</i>	<i>Admitted to Bonouans</i>	
<i>14-10-18</i>	<i>Discharged from Bonouans</i>	
<i>4-11-18</i>	<i>Headquarters Travelling Board Recommendation</i>	
	<i>S.M.B.</i>	
<i>16-11-18</i>	<i>Sec. Dis. Permanently-unfit</i>	
<i>30-11-18</i>	DISCHARGED - MEDICALLY UNFIT	<i>As is</i>