



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 2166 Name Charles Cole Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| 1. What is your name? | 1. <u>Charles Cole</u> |
| 2. What is your full Address? | 2. <u>Grand Falls</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>18</u> Years |
| 5. What is your Trade or Calling? | 5. <u>Mason's Helper</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. <u>None</u>
Corps |
| 11. Are you willing to serve upon the conditions as embodied in the full of service to be signed by you if you are accepted? | 11. <u>Yes</u> |

FOR THE QUESTION OF THE WAGES

I, Charles Cole 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.

Charles P. Jones SIGNATURE OF RECRUIT.

8 Feb 22nd 1916 Arnold P. Ayce Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Charles Cole 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. Thomas on this 25th day of February 1916.

Signature of Attesting Officer Arnold P. Ayce

†CERTIFICATE OF APPROVING OFFICER.

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

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

Date 191

Place } Approving Officer.

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

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

C.R. 2166

Draft 11
Extract from Nominal Roll of RFLD. Regt. Light 11
from 2nd Bn. Depot, to 1st Bn. B.S.F. Embarked Southampton,
5.10.16.

2166 Pte. C. Coles.

C.R. 2766

Chas. Coles was attested for General Service with
the NEWFOUNDLAND CONTINGENT on February 23rd 1916
Regimental No. 2156 was allotted to Pte Chas Coles

AUTHORITY:

Regimental Ledger;

Dept. of Militia;

March 25th 1919

C.R. 2166

Extract from Medical Bill submitted St. John's for Overseas,
per A. . "Hilites" July 19, 1916.

2166 Pte. Coles C.

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 Telegraphs 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 _____

Address _____

Line
Number _____

Rcd _____

By _____

Sent _____

by _____

Check _____

Dated

April 21, 1917.

To

Mrs. Annie Coles,

~~Grand Falls,~~

Happy Adventure S.S.

Regret to inform you that Record Office,
London, officially reports No. 2166, Private
Charles Coles, has been admitted to Wandsworth
suffering from gunshot wounds in the right leg
and right arm.

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

J. R. BENNETT,

Colonial Secretary.

FOR TYPEWRITER

NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line 15 Sent by [Signature] Rec'd by _____ Check 40 No. W Sm

Place from Happy Adventure

To Via Salvage

No 2166 pke Chas Cole

E.F.M.

Wandsworth Hospital
London of ColSec

APR 07 1886

Your message recd thinking
you ^{always} momentarily praying for your
recovery in your suffering
lean upon the strong arm
of God I commend you to his
tender care ^{will} immediately inform
me when ^{improved} you improve
Walter sends sympathy with
mother's love - Mrs. Annie Cole

NEWFOUNDLAND POSTAL TELEGRAPHS.



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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

Address

Line
Number

Rate

Check

Dated

April 27, 1917.

To

Synoptical,

London.

EM for twentyone sixsix Cole - Message received thinking you always praying recovery in suffering lean upon strong am God. I commend you His tender care. Wire immediately when improved. Walter sends sympathy with mothers love - Mrs. Annie Cole.

COLONIAL SECRETARY.

C.R. 2166

Extract of Casualties received from Pay & Record Office,
London, dated May 14, 1917.

#2166 Pte. C. Coles.

Wounded 14-4-17. R/b OC 14 GH Wimoreux.

180

15



NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 28 Sent by H D Rec'd by _____ Check'd 14 W S

Place from Happy Adventure Via Salvage

No 2166 To Dr. Charles Coles

Third London General Hospital

Wandsworth - S.W. Ward 18 London

Cp Col Secty -
St Johns.

SEP 8 1917

EFM

Have not heard from you
for three months anxious
know how you are reply

Mother.

x Anxious

FOUNDLAND POSTAL TELEGRAPHS.**Cable Connection with all the World****All Messages Sent are Subject to the Following Conditions:**

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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

Address

Line Number	Rcd	By	Sent	by	Check

Dated

10th September, 1917.

To

SYNOPTICAL,

LONDON.

E.F.M. Following for 2166 Coles Have not heard from you
for three months anxious know how you are reply. Mother.

COLONIAL SECRETARY.

C.R. 2166

Extract from Daily Orders Part II Unit The Royal Nfld.
Regt., Nov. 19th, 1917.

2166 Pte. C. Coles.

Returned from Overseas and attached to Headquarters with
effect from Nov. 17th, 1917.

C.R. 2166

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

2166 Pte. C. Coles

Discharged Dec. 7th 1917, Medically unfit

C.R. 2166

Extract from Roll of Officers H.C.O.'s & Men DISCHARGED from
The Royal Wfld.Regt.

Regtl. No.	Rank.	Name.	Date.	Reason.
2166.	Pte.	Coles C.	Dec.4th,1917.	Med.Unfit.

No. of Paper 1162PERSONAL EFFECTS.Name Coles No. 1166Rank Pvt Regiment THE ROYAL NEWFOUNDLAND REGT.

Article	Where stored	Notified by
<u>Kit Bag.</u>		
	Final disposal	
		Shipped from Depot.

Remarks: - Repatriated.Next of kin: - Mother
Mrs Annie ColesGrandfather

C.R. 2166

June 26, 1918.

Mrs. Annie Coles,
Happy Adventure, T.B.

Dear Mrs. Coles:-

I am writing to inform you that I am forwarding by "Express" one Kit Bag, which belongs to your son #2166 Pte. Charles Coles of The Royal Newfoundland Regiment.

Enclosed you will find receipt, will you kindly sign same and return at your earliest convenience.

Yours faithfully,

Lieut.
for Lieut.Col.C.S.O.

Enc'l 1.

C

PERSONAL EFFECTS

Received from Militia Department

One Kit Bag #2166 Pte. Charles Coles.

Signed *Chas Ammie Coles* X

Date *July 20th*
1918.

6 Cases.

C.R.

will

P. & R. O.



Proceedings on Discharge.

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

No. 2166 Army Rank Plt
 Name Chas Charles
 (The name must agree strictly with that on enlistment, unless changed subsequently by authority.)
 Corps 1st 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. Description at the time of discharge.

Age 19 years _____ months
 Height _____ feet 6 1/2 inches
 Chest measurement { girth when fully expanded _____ ins.
 range of expansion _____ ins.
 Complexion Dark
 Eyes Grey
 Hair Dark
 Trade Blacksmith
 Intended place of residence Willys Avenue
 (To be given as fully as practicable) St. John's, N.F.L.D.
Newfoundland

Descriptive marks.

Two wounds & left finger
R. Hand

ST. JOHN'S
 O.C. H.Q. 3
 ST. JOHNS, N.F.L.D.
 N.F.P.38, No. 11724/130
 DATED 6 - NOV 1917

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of those who 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 Shot wounds

(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.

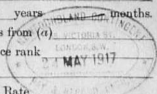
Army Form B. 2068 has been issued to*

Casualty Form—Active Service.

Regiment or Corps 1st Newfoundland

1579

Rank Rt Surname Boles Christian Name Chas.
 Religion C. of E. Age on Enlistment 18 years
 Enlisted (a) Feb. 23rd 1916 Terms of Service (a) Duration of war Service reckons from (a)
 Date of promotion to present rank _____ Date of appointment to lance rank _____
 Extended { _____ } Re-engaged { _____ } Qualification (b) _____
 or Corps Trade and Rate _____
 Signature of Officer i/c Records.



Date	From whom received	Report	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 30, or other official documents
		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 30, or in other official documents. The authority to be quoted in each case.			
		Embarked ...	<u>Newfoundland</u>	<u>3.0.16</u>	
		Disembarked...	<u>Revised</u>	<u>4.0.16</u>	
		Joined Battalion		<u>14 DEC 1916</u>	
				<u>WILL BATT 23.1.17</u>	
	<u>53 FA</u>	<u>Admitted D.O.M.</u>	<u>France</u>	<u>29/1/17</u>	<u>ED 176</u>
	<u>D^o</u>	<u>Discharged to Duty</u>	<u>Unit</u>	<u>7/2/17</u>	<u>ED 175</u>
<u>30.4.17</u>	<u>19 G.I.S.</u>	<u>Ad. G.I.W.R. Legation</u>	<u>France</u>	<u>15.4.17</u>	<u>G.I. 3422.</u>
<u>28.4.17</u>	<u>14 Genl. Hosp.</u>	<u>Ad. G.I.W.R. Legation</u>	<u>Wimereux</u>	<u>16.4.17</u>	<u>MA 8613.</u>
	<u>"Jon Braydel"</u>	<u>Invalided to England</u>		<u>14.4.17</u>	<u>W 3083.</u>

(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, Shoeing-smith, &c.

Original

Medical Report on an Invalid.

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

Date 28 OCT 1917



1. Unit 1st Newfoundland
 2. Regimental No. 2166
 3. Rank PL
 4. Name Boles, C.
 5. Age last birthday 19
 6. Enlisted { on 21.1.16
 at St. Johns

7. Former Trade or Occupation } Bricklayer
 7A. If with previous service in Army, state—

- (a) Former Unit;
- (b) Regimental No.;
- (c) Date of Discharge;
- (d) Cause of Discharge.

COPY SENT TO
 O.C. H.Q.
 ST. JOHNS, N.F.L.D.
 N.F.P.38, No. 1172/130
 DATED 6-NOV-1917

8. Disability in respect of which invaliding is Proposed.

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

G.S.W R^l elbow joint fract (comminuted) cartilages of humerus
Defracting L shoulder R leg slight
R hip slight

Statement of Case.

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

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

14.4.17

France

Treated at 3rd General Hosp Roulogne then here where sequestromy on inner side of elbow was performed. Xray = big loose fragments in joint.
Treated in Robert Jones Splint.

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

Active Service G.S.W.

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.

General condition good. Wounds soundly healed but there is an unhealthy scar on inner side of R^l elbow with complete ankylosis of R^l elbow joint & all movements.

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

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

Yes
Yes
Yes

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?

Vide II

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

✓

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

✓

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

✓

20. Do you recommend—

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

Yes

g.c. Hall
Capt. Red

25.10.17

Officer in medical charge of case.

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

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

H. E. Domett
Officer in charge of Hospital.

Date 29 OCT 1917

Lt. Col. R. A. H. T.
Comdg. 3rd. London Gen. 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

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

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

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

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

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

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

(i.) Service during the present war;

(ii.) Climate;

(iii.) Ordinary military service;

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

(v.) Whether it is constitutional or hereditary.

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

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

23. Is the disability permanent?

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

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

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

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

27. Do the Board recommend—

(a) Discharge as permanently unfit, or

(b) Change to England?

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

(a) Sanatorium;

(b) Hospital;

(c) Convalescent home;

(d) Asylum; or

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

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

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

Yes

✓

No

No

G.S.W.

✓

Yes

✓

100 %

vide "

Yes

| No

No

No

Signatures:—

Station

29.X.17

W.S. Wynter Major

President.

R.P. Howard C.S.

Members.

Date

Approved

Station

29.X.17

W.S. Wynter Major

Administrative Medical Officer.

Date

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

1st Impd (Regiment).

No 2166, Rank Pte, Name Coles G.

is discharged from Hospital with orders to proceed to ~~home~~

(~~home~~ 58 Victoria St.
S.W)

and there await further instructions as to his discharge from the Service.

Officer Commanding,

Place Wandsworth H. Tagan

Capt. R.A.M.C. Hospital

Date 2/11/17

Registrar, R.A.M.C.T.
3rd London General Hospital,
WANDSWORTH, S. W.



No. _____
Regt. No. 2164
Rank Private
Name Charles G.
Regiment _____
Date from Feb 11 - 1917
^{10 days} to D. P. 1917
To proceed to Lawrence

If _____ Hospital
Station _____

Date Feb 11 - 17

Address where to forward to which any
orders will be sent

16 Newmarket
Fuller

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. 178^a to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.



MEDICAL HISTORY OF

Surname

Coles

Christian Name

Charles

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—

(b) Slight defects but not sufficient to cause rejection—

Approved by

Rank

Medical Officer.

TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date Brief Details and Signature

29.10.17 Board held
Permanently unfit
Wandsworth
for 1/2
London General Hospital,
WANDSWORTH, S.W.

COPY SENT TO
C.O. H.Q.
ST. JOHNS, N.F.I.D.
N.F.P.38. No. *11111*
DATED 6-NOV-1917

TABLE IV.—Service Table.

Enlisted { at
on day of 191...

Joined on enlistment Corps Regtl. No.

Transferred to

Became non-effective by

on day of 191...

(Signature)

(Rank)

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

TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number 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.	4	7					"G. SW R" elbow joint R Leg R hip		Board held - see overleaf Disability - "G SW R" elbow joint, fixed (paralytic) condyloid of humerus. Report of L shoulder R leg slight R hip slight. Complete ankylosis of R elbow joint movements. Cause - G.S.W. in Active Service. Total - Disability to earn a livelihood 100%.	S.W. Draxley Sick Room 3rd London General Hospital, WANDSWORTH, S.W.

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 _____

5th Victoria St.

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 ²¹ days after the date on this notification, see A.C.I. 1623 of 1916.)

Soldier's surname *Bales.*, Christian names *Chas.*
(in full)

Regt. No. and Rank *2166. Pte* Regt. or Corps *1st N. F. L. D.*
(If T.F. this should be stated.)

His address on discharge will be *Happy Adventure,*
Barravista Bay, NFD

This information is for the Central Army Pension Issue Office only.

The Soldier states that _____ 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 _____

29-10-17.

Walter Major

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.

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 in Charge of 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 Boles Charles
Regiment from which discharged 1st Regt
Regimental Number 2166
Where born (Parish, Town and County), and when Bethwold Great Falls
Intended address Happy Adventure, Banaristia Bay 11/2/1919
Height on discharge 5 Feet 6 1/2 Inches
Colour of Hair on discharge Fair **Colour of Eyes** Grey
Descriptive marks 10 wounds & 4 fingers **Complexion** Dark
Figure on discharge Medium
Christian name of Father John
Christian name of Mother Annie
Wife's Maiden name in full _____
Date and Place of Marriage _____
Christian names of Children _____
Nature and locality of civil employment desired Paper hanger

COPY SENT TO
 O.C. H.Q.
 ST. JOHNS, N.F.L.D.
 N.F.P.38. No. 1174/1917
 DATED 6 - NOV. 1917

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) Charles Boles (Rank) Pte

Station Wandsworth Date 25-10-17

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. G.C. Hall Capt 10th Oct 1917 3rd London General Hospital, Wandsworth, S.W.
 Date 25.10.17

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 } of advance of pension }					
Sums due on account of public debts ...						

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

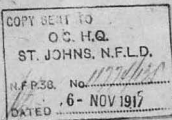
I certify that the above details of service and other particulars are, to the best of my knowledge, correct.

Station _____ Officer in Charge _____
 Date _____ Records. _____

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. 2166Rank Lt.Name (surname first) Solis, CharlesRegiment 1st Newfoundland

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

Bucklayers.

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?

Anglo. R.F.L. Development Co. Bucklayers,
1 year.

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

Paper Making ~~Handy occupation~~ Grand Falls
New Brunswick

4. What is the name of your Approved Society?

None

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

NoDate Oct 25/17Signature Charles Solis

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 or reclassification in a category from which men are being transferred to Class P. or P.(T.) of the Reserve 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. 3 (ii), item 3, of Army Council Instruction No. 1912, of 1915.

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.

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

MEDICAL HISTORY

Surname Boles Christian Name Charles

Table I.—GENERAL TABLE.

	SPECIAL RESERVE.		REGULAR ARMY	
	Right	Left	Right	Left
Birthplace:—Parish			County	
Examined	on <u>18</u> day of <u>February</u> 191 <u>6</u> at <u>Stychnia Hfld.</u>		on	day of 191
Declared Age	<u>18</u> years		days	years days
Trade or Occupation				
Height	<u>5</u> feet <u>6</u> inches		feet	inches
Weight	<u>112</u> lbs.			lbs.
Chest Measurement	Girth when fully expanded... <u>35$\frac{3}{4}$</u> inches			inches
	Range of expansion... <u>3$\frac{3}{4}$</u> inches			inches
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V= <u>6/6</u>		R.E.—V=	
	L.E.—V= <u>6/6</u>		L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to Cause Rejection	(b)		(b)	
Approved by (Signature)	<u>Lamont Paterson</u>			
(Rank)	Capt. Medical Officer.			Medical Officer.
Enlisted	at <u>St. John's</u> on <u>18</u> day of <u>July</u> 191 <u>6</u>		at	day of 191
Joined on Enlistment	Corps.	<u>15th Hfld. Regt.</u>	Corps.	
	Regtl. No.	<u>5266</u>	Regtl. No.	
Transferred to	<u>2166</u>			
Became non-effective by				
(Signature)	on day of 191		on	day of 191
(Rank)				

No. 2166 Rank Plt Name Colts L.

Pay	F.A.	Wkr	Total
100	10		110
Less: Allotment			60
Net Rate			50

H.R.P./35.

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£ s d		
						From	To					
<i>8.4m 24D.</i>												
Balance		2	8	1/2	Balance	1/6/17				16	6	11 1/2 ✓
Acquittance Rolls					Pay @ Net Rate	9/4/17	2/11/17	147	50	73	50	15 2 0 ✓
Hospital Advances		4	6	6	Ration allow			4	2			8 0 ✓
A.B. 34					4 days @ 2/-							31-17-0 ✓
P. & R.O. Payments		3	0	0								
					25-9-10							
<i>9-24</i>												
Cheque No. 6975	2 11/17	15	0	0	25-9-10							
Cheque No. 6990	5 11/17	10	0	0								

Plt

2nd, May

7

4023/1

2186, Pte. C. Coles,
1st. Newfoundland Regiment,
3rd. London General Hospital,
Wandsworth, S. W. (18)

HA/WF

MESSAGE FROM NEWFOUNDLAND.

The following message has been received from the Colonial Secretary of Newfoundland,-
"For twenty one sixty six Cole message received thinking
"you always praying recovery in suffering lean upon
"strong arm of God I commend you his tender care wire.
"immediately when improved Walter sends sympathy with
"Mother's love Mrs. Annie Cole".
Reply, at the rate of 2^d. per word, may be transmitted, through this office, and charged to your a/c.

2/Lieut.
Paymaster & C. i/c Records

CABLEGRAM

No.



ETM 231. Date, _____
 No. of Message _____

2 MAY 1917

The following CABLEGRAM received, at _____ M. "Via Commercial Cables,"

From *Pj St Johns* No. of Words, *42*

To *ETM Synoptical London*

For. twentyone sixty six cable message received thinking you always praying recovery or suffering lean upon strong arm god. Commend you his tender care wise immediately when improved. Walter sends sympathy with mother's love. Mrs. Annie Cole

4-70-1- bal. Secy 2166 McChes

ESTIMATED CABLE MESSAGE	2125
RECEIVED	MAY 2 1917
No. of Words _____ Date _____ File No. _____	

No Inquiry respecting this Message can be attended to without the production of a receipt from the Company's Offices, and not by direct application to the Sender.

Brackley Military
Hospital
Weybridge.

12-9-17.

To the Staff Paymaster
Sir

Kindly forward a remittance for £ 2-0-0
from my account, and Oblige.
Would you

(2166)

Yours Obediently,
C. Gales (Pte)

Signed.

NO. 12-9-17.

M.R.
£ 2.0.0
M.A.H.

Brackley Military Hospital,
Weybridge.

K. Greer.
(Major)

1ST N. W. B. ISLAND REGIMENT	
PAY & RECORD OFFICE	
Ref. No.	5207
Rec'd.	SEP 12 1917
Ack'd.	✓
Ans'd.	9/12/17, 14/9/17
File No.	

9472/1

14th, September

Brackley Military

Weybridge, Surrey.

2166

Pte.

G. Coles

2. 0. 0.

CABLEGRAM No. _____

No. of Message _____

Date _____

MOTELBUNG Street Avenue, W 9

2.00

14 SEP 1917

The following CABLEGRAM received, at _____

M. "Via Commercial Cables."

JW 1 STJOHNS NF 24

EFM SYNOPTICAL LONDON.

FOLLOWING FOR 2166 COLES HAVE NOT HEARD FROM YOU FOR THREE
MONTHS ANXIOUS KNOW HOW YOU ARE REPLY MOTHER

COL SECY

9495/2

2166 Coles
3rd 92

121 N WINDLAND RD NEW YORK	
PAY RECORD OFFICE	
Ref. No.	5212
Rec'd.	SEP 14 1917
Acc'd.	✓
Ans'd.	✓
File No.	

XIXE/

PAYMASTER & OFFICER IN RECORDS,
NEWFOUNDLAND CONTINGENT,
58 VICTORIA STREET,
LONDON, S.W. 1.
ENGLAND.

14th September, 7

2166, Pte. C. Coles, 1st Nfld Regt.,
3rd London General Hospital, Wandsworth, S.W. 18.

Transmission of Cable.

The following cablegram was received to-day from
the Hon. the Colonial Secretary of Newfoundland.

"Following for 2166 Coles have not heard from
"you for three months anxious know how you are
"reply Mother-"

If you wish to reply to the above by telegraph you
may do so through this Office. It would be charged
to your account at the rate of 2¹/₂d. per word.

Major,
Chief Paymaster & Officer i/c Records.

Weybridge 410.

Brackley Military Hospital,
Weybridge.

Sep. 19. 1917

Re Callaghan to.

2166 Pl. C. Coles 1st. Ryfd Regt.

now in this hospital, - he

wishes to send a reply to
his mother.

Mrs Joseph Elliott

Happy Adventure

Bona via Bay

5373

SEP 20 1917

627/874

2017

"Progressing satisfactorily.
written regularly"

Please charge to his account -
K. Heer.

Maria.

XXXX/

MEMORANDUM.

PAYMASTER & OFFICER I/C RECORDS,
 NEWFOUNDLAND CONTINGENT 14th September, 1917
 88, VICTORIA STREET,
 LONDON, S.W. 1.
 ENGLAND.

From

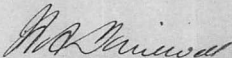
To 2166, Pte. C. Coles, 1st Nfld Regt.,
 3rd London General Hospital, Wandsworth, S.W. 18.

Transmission of Cable.

The following cablegram was received to-day from the Hon. the Colonial Secretary of Newfoundland.

"Following for 2166 Coles have not heard from
 "you for three months anxious know how you are
 "reply Mother-"

If you wish to reply to the above by telegraph you may do so through this Office. It would be charged to your account at the rate of 2½d. per word.



Major,

Chief Paymaster & Officer i/c Records.

*Mr. Joseph Elliott,
 Happy Adventure
 Bonavista Bay,
 Nfld.*

**Notification that a Soldier has been sent Home from
Hospital to await Discharge under para. 392
(xvi.) King's Regulations. Admitted 20.4.17.**

Soldier's
Regtl. No. 2166 Rank Plt Name Coles, E.



Corps or Regiment (also Unit if known) 1st Lt. N. 7. L. D.

To OFFICER in charge of RECORDS 58, Victoria St. S.W.
REGIMENTAL PAYMASTER 58, Victoria St. S.W.

The above-named man, who appeared before a Medical Board, and whose discharge as "no longer physically fit for war service," was approved by the President of the Board on the 29.10.17. ^{His address below} has been sent to his home on warrant to await instructions as to his final discharge; he has been given £1 (one pound) advance and a suit of plain clothes.

He proceeded on (date) November 2nd 1917
to (full address) 58, Victoria St. S.W.

Place Wandsworth Officer Comm.

Date 2.11.17. Sturmer Capt Hospital

Three copies to be made; one copy sent to each Officer mentioned above, and one copy filed in the Office Registrar, R.A.M.C.I.

From, O. C.,
3rd. London General Hospital.

To, The O. C.,
Records, 58 Victoria St.



In accordance with instructions contained in A. C. I. No. 2069 of 1916, I beg to report that:-

No. 2166 Mr G. Coles — 1/2 pcd.

will shortly be brought before a Medical Board and will probably be discharged from the Army or re-classified.

Duplicate documents will not be required, please.

A. Sagan

Capt. R.A.M.C. (C)

Registrar, R.A.M.C.T.
3rd London General Hospital,
WANDSWORTH, S. W.

Coles, b

2166

Hay & Sept.

COPY.

This space to be left blank for the Colours Number.

[Blank box for Colours Number]

Proceedings on Discharge



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

No. <u>2166</u>	Army Rank <u>Plt.</u>
Name <u>Cotes Charles</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
Corps <u>1st 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, &c., or to General Staff of the Army, it should be so stated.)</small>	
Date of discharge <u>December 4th 1917</u>	
Place of discharge <u>St. John's, Nfld.</u>	
1. Description at the time of discharge.	
Age <u>19</u> years <u>9</u> months	Descriptive marks. <u>Two wounds & left finger</u> <u>L. Hand</u>
Height <u>5</u> feet <u>6 1/2</u> inches	
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.	
Complexion <u>Dark</u>	
Eyes <u>Grey</u>	
Hair <u>Dark</u>	
Trade <u>Tricklayer</u>	
Intended place of residence <u>St. John's, Newfoundland</u>	
(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.)</small>	
2. The above-named man is discharged in consequence of <u>Gunshot wounds</u>	
<small>(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.)</small>	
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. 2067 has been issued to*	

To be filled in on the soldier quitting the Colours.

* Strike out if not applicable.

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class _____

6. Campaigns, Medals and Decorations

Certificate of education

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

(Place) _____

(Date) _____ Commanding _____ Batta. _____ Regiment.

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) St John's Rd Charles Koles (Signature of Soldier.)

(Date) 4/12/17 C. H. C. M. C. 2nd (Signature of Witness.)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. *Additional certificate in the case of a soldier who takes his discharge at his own request.*

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier.)

10. *Statement of service.*

Service towards engagement to _____ (the date to which the record of service is completed) _____ years - _____ days.

Further service " " _____ (the date of confirmation of discharge) " " _____

Total " " _____

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for _____ (date)

(Place) _____

(Date) _____ Signature _____

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

No Reservations!

Schaefer Leoles

C. C. H. C. D. M. S.

March 1st 1919.

2166. Charles Colan.

This man is not on weekly pay roll, he is a student under the Civil Re-establishment Committee.

April 30th, 18

Charles. Coles, Esq.,
Grand Falls.

Dear Sir:-

Referring to your recent letter
I beg to state, that I have not any badges on
hand at the present time, but that a shipment
is on the way from England, and as soon as I
receive it I will have one engraved and forwarded
to you.

Yours faithfully,

Capt. Paymaster.

Statement of Accounts

No. 2166 Rank Private OF Name Colles G.
 Company, etc. Repatriated per A.P. Cleworth
 From 9/17 to 6/17 (dates).

DEBITS				CREDITS			
Date				Date			
	Period 9 ⁶ / ₁₇ - 6 ¹¹ / ₁₇			Balance period Ending 8 ⁶ / ₁₇	16	6	11 ¹ / ₂
	Allotment			Period 9 ⁶ / ₁₇ - 6 ¹¹ / ₁₇			
	151 days @ 60 ^p per day = £90.60.	18	12 4.	Pay			
	E.I. Message to R.F.D.		2 8 ¹ / ₂ .	151 days @ #100 per day - #15.00	31	0	6 ¹ / ₂
	Hospital advances	4	13 6.	Field Allowance			
	R.R.O. Payments	27	0 0.	151 days @ 10 ^p per day - #15.10.	3	2	0 ¹ / ₂
				Ration Allowance			
				2/11/17 - 6/11/17			
				5 days @ 2/-		10	0.
	Creditor Balance		11 0	Debtor Balance			
	Total £		50 19 6 ¹ / ₂	Total £			50 19 6 ¹ / ₂

checked
 This account is in accordance with information received at the Pay & Record Office to / / and is therefore subject to amendment if, and as may be found necessary.

CHECKED

11978

Station



Date

Certified correct,

NEWFOUNDLAND CONTINGENT

CHIEF PAYMASTER

No. 246 and Private ...
 Company, or ...
 Date ...

DATE	DESCRIPTION	AMOUNT	CHECK NO.	DATE	DESCRIPTION	AMOUNT	CHECK NO.
	<u>Board Pay - 67</u>				<u>...</u>		
	<u>...</u>				<u>...</u>		
	<u>...</u>	18	11		<u>...</u>		
	<u>...</u>	2	12		<u>...</u>		
	<u>...</u>	2	13		<u>...</u>		
	<u>...</u>	27	14		<u>...</u>		

This account is ^{checked} in accordance with information received at the Pay & Record Office to / / and is therefore subject to amendment if, and as may be found necessary.

...

...



...
 ...

Statement of Accounts

DUPLICATE
 M. J. ...
 ...

on 20th Nov 1962 per SS
 Company Reparations per SS
 From 9/29 to 6/29

Date	Description	Debit	Credit
	Balance forward		10.00
	10 days @ \$1.00 per day	10.00	
	E. J. Messer to		2.50
	Hospital Advance	4.46	
	B.R.O. Payment	27.00	
	Field Allowance		3.00
	Station Allowance		5.00

This account is ^{checked} in accordance with information received at the Pay & Record Office to / / and is therefore subject to amendment if, and as may be found necessary.



Cashier Balance 11.00 Debit Balance
 Total 50.19 Total 50.19

Certified correct 11/29/62
 [Signature]

COPY.

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only.
 Army Form B. 178^a to be used for Special Reserve recruits
 and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Coles Christian Name Charles

5 - NOV 1917

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

Joined on Enlistment ...	Corps. <u>1st Newfoundland</u>	Regt. No. <u>2166.</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 case 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	20	4	17				W. P. W. L. Elbow joint of leg of Hip.		Broad teeth — see one leaf Disability — W. P. W. L. Elbow joint (amputated) crests of humeral. Supporting of humeral R leg slight. L Hip slight. Complete ankylosis of R. Elbow joint movements Cause — P. W. on Active Service Total — Ability to earn a livelihood, 100%.	J. H. Buckley Capt. R.A.M.C. 3rd London General Hospital Wandsworth S.A.

Despatching
Office
Stamp.



Arrival
Office
Stamp.

No. 41

From

Milburn Sept

Registered Letter Addressed —

Mrs Agnes Cole

Post Saunders

Received by

A. J. M.

December 4th. 1917.

No. No. 2166, Private Class, Coler.

The Officer Commanding,
Headquarters.

Sir,-

The marginally noted man has been
discharged December 4th. 1917. Medically Un-
fit.

Kindly note and post in Daily Orders,
Part II.

I have the honor to be,

Sir,

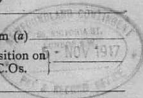
Your obedient servant,

Captain A. F. Ymster A.
Officer i/c Records.

COPY

Casualty Form Active Service.

Regiment or Corps 1st Newfoundland
 Regimental No. 2166 Rank Pte. Name Coles Chal.
 Enlisted (a) 23.12.16 Terms of Service (a) Duration of War Service reckons from (a) _____
 Date of promotion to present rank _____ Date of appointment to lance rank _____ Numerical position on roll of N.C.Os. _____
 Extended _____ Re-engaged _____ Qualification (b) _____



Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 211, Army Form A. 36, or in other official documents. The authority to be referred to in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Enlisted <u>Stampten</u>		<u>3.10.16</u>	
		<u>Re-enlisted <u>London</u></u>		<u>4.10.16</u>	
		<u>Joined <u>Battalion</u></u>		<u>14.10.16</u>	
		<u>With <u>do</u></u>		<u>23.11.17</u>	
	<u>S33A</u>	<u>Adm. <u>S.A.H.</u></u>	<u>France</u>	<u>29.11.17</u>	<u>R.D. 176</u>
	<u>do</u>	<u>Wichter to duty</u>	<u>Unit</u>	<u>7.2.17</u>	<u>175</u>
<u>30.4.17</u>	<u>19 C.C.S.</u>	<u>Ad. <u>P.W. & Leg. & Arm.</u></u>	<u>France</u>	<u>15.4.17</u>	<u>R.D. 3422</u>
<u>28.4.17</u>	<u>14 G.H.</u>	<u>"</u>	<u>Wimereux</u>	<u>16.4.17</u>	<u>R.A. 8613</u>
	<u>"Jan. 1918"</u>	<u>Went to <u>England</u></u>		<u>19.4.17</u>	<u>W 3083</u>
		<u>Sgt. <u>S. Doherty</u></u>			
		<u>of the <u>No. 100</u></u>			
		<u>of the <u>section</u></u>			

(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) e.g., Signaller, Shoehing Smith, etc., etc., also special qualifications in technical Corps duties.



Descriptive Return of a Soldier Discharged on Account of Disability

INSTRUCTIONS—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station," and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the Office Records together with the remainder of the man's documents.

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

Name in full *Charles Charles*

Regiment from which discharged *1st. Newfoundland*

Regimental number *266*

Intended address *Happy Adventure B. B.*

Height on discharge *5* Feet *7 3/4* in

Color of hair on discharge *Dark Brown*

Complexion *Fair*

Color of eye *Blue*

Descriptive Marks *none*

Figure on discharge *medium*

Christian name of Father *deceased*

Christian name of Mother *Annie Elliott*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth. *Batwood n d Bay Oct 17 1898*

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)

Charles Charles

Station

St Johns

Date

Nov 21/17

Rt (Rank)

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.

W. W. Garden

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

Station

St Johns

Date

Nov. 20/17

Medical Report on an Invalid.

CERTIFIED TRUE COPY

Station General Hospital
Wandsworth Dr.

Date 28.10.17

1. Unit 1 Newfoundland
2. Regimental No. 2166
3. Rank Platoon
4. Name Colt. C.
5. Age last birthday 19

7. Former Trade or Occupation Aviation
7a. If with previous service in Army, state—
(a) Former Unit;
(b) Regimental No.;
(c) Date of Discharge;
(d) Cause of Discharge

6. Enlisted on 21.1.16
at St John's



8. Disability in respect of which invaliding is Proposed.

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

R.S.W. of Elbow joint: fract (comminuted) cont of humerus
Porphyritic Splend. A. Leg slight
" Hip slight

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.

14.4.17

10. Place of origin of disability.

France

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

Treated at 7th General Hospital
Boalogue, then here where sequestrations on inner
side of elbow was performed. X-ray - big loose
fragments in joint.
Treated in Robert Jones Splint

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

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

Active Service R.S.W.?

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.

General condition good. Wound's
surgically healed, but there is an
unhealthy scar on inner side of R.
elbow with complete ankylosis of R. elbow joint
& all movements.

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

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

} Lt.

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?

None

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

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

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

20. Do you recommend—

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

J.L.

J. G. Hall, Capt. M.D.

25.10.17

Officer in medical charge of case.

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

London General Hospital
Station Beaulieu

A. L. Bruce, M.D.
Officer in charge of Hospital.

Date

29.10.17

Comd. 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.

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

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

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

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

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

1. (a.) State whether the disability is clearly attributable to—
 - (i.) Service during the present war; *Yes.*
 - (ii.) Climate; *—*
 - (iii.) Ordinary military service; *—*
 - (iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or *No.*
 - (v.) Whether it is constitutional or hereditary. *No.*
- (b.) If due to one of the first three of these causes, to what specific conditions do the Board attribute it? *P. A. W.*
22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which? *Yes.*
23. Is the disability permanent? *Yes.*
24. If not permanent, how soon do the Board recommend re-examination? *—*
25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present? *100%.*
Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.
26. If an operation was advised and declined, was the refusal unreasonable? *vide "*
27. Do the Board recommend—
 - (a) Discharge as permanently unfit, or *Yes.*
 - (b) ~~Change to England~~
28. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic training) is desirable in a—
 - (a) Sanatorium;
 - (b) Hospital;
 - (c) Convalescent home;
 - (d) Asylum; or
 - (e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended. *No.*
29. With reference to Army Council Instruction No. 114 of 1917, is any surgical appliance recommended? *No.*
30. Does the man require the constant attendance of another person? *No.*

London Gunners Hospital
 Station *Woodward Rd.*

Date *29.10.17*

Approved

Station *D. C.*

Date *—*

W. E. H. Major President.
H. B. Howard C.S. Members.
W. E. H. Major Administrative Medical Officer.

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 in Charge, 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.

5 - NOV 1917

A Name in full John Charles Apple
Regiment from which discharged
Regimental Number 2166
Where born (Parish, Town and County), and when Stroom, Grand Falls, 17.2.99.
Intended address Happy Adventure, Broomfield Bay, Apple
Height on discharge 5 Feet 6 1/2 Inches
Colour of Hair on discharge Fair **Colour of Eyes** Grey
Descriptive marks 10 wounds & C. finger, R. Hand **Complexion** Fresh
Figure on discharge Medium
Christian name of Father John
Christian name of Mother Annie
Wife's Maiden name in full
Date and Place of Marriage
Christian names of Children
Nature and locality of civil employment desired Super-Marketing

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 Charles Apple

Station Wandsworth **(Rank)** Sgt
Date 25.10.17

I certify that the above-named soldier signed the foregoing declaration in my presence, and that the above description and details are, to the best of my knowledge, correct.

Station Wandsworth SW **Date** 25.10.17
London General Hospital R. C. Hall, Off. Sgt. **Medical Officer in Charge**
London General Hospital.

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.

COPY

(1374.) Wt. 550/8361. 200m. 9/18. P.P.Lad.

Army Form W. 249.

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. 2166

Rank Private

Name (surname first) Cole Charles

Regiment 1st Newfoundland



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

Bricklayer

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?

Anglo Newfoundland Development Co.
Bricklayer 1 year

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

Paper Making, Grand Falls

4. What is the name of your Approved Society?

None

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

No.

Date 25.10.17

Signature Charles Cole

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.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claim War Service Gratuity under Order-in-Council dated January 26th. 1919.

A complete reply must be given to every question in this Declaration. There must be no blanks and no inks, if any question are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

Christian name *Shark*..... 2. Surname *Bole*.....
3. Rank *Private*..... 4. Regt. No. *2186*.....

5. Address in full to which future payments of gratuity are to be forwarded.....
Harry Adventure - Bonaville Bay

6. Date of enlistment in the Regiment..... *February 20 1916*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
not applicable

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

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

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

11. Were you on active service only in field. If so, give dates, and particulars of such service.....
not applicable

12. Give total length of time which you served on active service, whether in field or Overseas.....
one year and 285 days

✓
4

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

no

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.....

86.00

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.....

no

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

no

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

Not applicable

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

no

See 4th 1917
for certain service
Para. 14th 1917

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.....

French - April 14th 1917

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.....

Yes

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:

Charles Gals

Place of Residence:

Field Hall Cavendish Square

Declared before me at:

St John's

This

3rd

day of

March

19*19*

Robert A. Gals

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

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
24.12.18.	100.10		4.00	280.00
			Less PDP	100.10
				179.90
Certified Correct.			Paymaster.	

January 5th 1920.

Asst. Director for N.S. & P.E.I.,
Department of S.C.P.R.,
Spring Garden Road,
HALIFAX, N.S.

#2166. PTE. CHAS. COLES.

Dear Sir:

With reference to Application Form
of the above named man, all Pay and Allowances
have been paid, please.

Yours truly,

Lieut.
For Paymaster

RS/.

January 28, 1920

Dept. of Soldiers' Civil Establishment
Malifax, E.C.

Attention of J. R. Mulhall

Dear Sir:

#2166, Rte. Chas. Coles

With reference to your letter of recent date, DSCR (B) P-362, I beg to inform you that all pay and allowances, including War Service Gratuity has been paid in full to the above mentioned soldier.

Yours truly,

Lieut.
for Paymaster

To The Paymaster,
1st Newfoundland Regiment,
St. John's, Nfld.

Halifax, N.S., Dec. 30th, 1919. 191

MARK YOUR REPLY:

For attention of

For attention of J.P. Mulhall
DSCR "B" C-826.

Your file

File

SUBJECT #2166 Ex.Pte. Coles, Chas. - 1st Nfld. Regt.

S.C.R. 123-500M. 8-10.

NOTE:—Each letter shall treat with one subject only which shall be indicated in space provided. File No. shown on letter, to which your reply refers, must be quoted.

8297

May we now be favored with a reply to this office letter of the 9th instant, requesting Statement of Account relative to the above noted man, who was discharged from His Majesty's Forces at St. John's Newfoundland on Dec. 4th, 1917.

J.P. Mulhall

For Asst. Director for N.S. & P.E.I.,
Dept. of S.C.R.

JPM/SP.

*All Pay Labor Paid
Including Wages*

"Nurses' Home", Corner Jubilee Rd. & Summer St.,
Halifax, N.S., Jan. 13th, 1920

To The Paymaster,
1st Newfoundland Regiment,
St. John's, Nfld.

191

MARK YOUR REPLY:

For attention of

For attention of

M.R. Scott.

Your file

File


DSCR "B" C-926

SUBJECT #2166 Ex.Pte. Coles, Chas.
1st Nfld. Regt.

S.C.R. 123-500M. 5.12.

NOTE:—Each letter shall treat with one subject only which shall be indicated in space provided. File No. shown on letter, to which your reply refers, must be quoted.

May I invite your attention to this office letter dated Dec. 30th, 1919. It would be appreciated very much by this office if we could now receive a reply, please.


For Asst. Director for N.S. & P.E.I.,
Dept. of S.C.R.

MRS/SP.

Halifax, N.S. January 15th, 1920.

191

To **The Paymaster,
1st. Newfoundland Regiment,
Dept. of Militia & Defence,
ST. JOHN'S, Newfld.**

MARK YOUR REPLY:

For attention of

For attention of

M. R. SCOTT.

Your file

Mr. Crawford.

File

DECR "B" C-826

SUBJECT

2166 Ex Pte. COLES, Chas.

S.C.R. 113-500m. 8-13

NOTE:—Each letter shall treat with one subject only which shall be indicated in space provided. File No. shown on letter, to which your reply refers, must be quoted.

With reference to yours of January 5th in answer to ours requesting Statement of Account, yours of the 5th does not include any information which we have not already got, as we know that the marginally named was discharged from the Militia & Defence and was no doubt paid in full, but what we want and what our request asked for, was - vis:- (a) Rate of Pay per diem with the Militia and Defence. (b) Separation Allowance if any, with Statement of Separation Allowance if any, while with the Militia & Defence. (c) Statement of Assigned Pay if any, while with the Militia & Defence.

This information is requested in order that this man will receive Pay and Allowances entitled him, as received while with your Department and it will be appreciated very greatly if this would be considered as URGENT.

M.R. Scott
for Asst. Director for N.S. & P.E.I.
DEPARTMENT OF S.C.R.

MRS/EMP.

Capt. J. M. Howley
 Colonial Building
 St. John's

Dear Sir:

when I left St. John's
 I did not have any Discharge
 Badge, I had my discharge
 papers.

So will you please send
 me a discharge badge by
 return mail I want it to
 wear on my civilian suit.

My number is 2166
 and oblige

Yours truly

P. Charles Cole

Grand Falls

April 22nd / 11

H.F.P./54

No.416

From Pay & Record Office, London

To Minister of Militia, St. John's, Nfld.

#2166 Pte.C.Coles

Overcredited Ration Allowance as per Claim 171. 1/3.

St. John's
Newfoundland

2166

I Charles Cole of Happy adventure
in the Election District of St. John's make
oath and say.
That I lost my discharge Badge on
or about the 8th day of March A.D. 1919, on
my way to or from the General Hospital
& that I have done my best to find
the same.

Sworn before us at
St. John's Newfoundland
the 8th day of April
A.D. 1919

D. J. Kent
Commissioner S. C.

Charles Cole

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$15⁰⁰/₁₀₀

Nov. 19th 1917

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

C. Coles

Ch. No. 1366	Initials. E.W.
Pay Ledger 42	Initials. [Signature]
Gen. Ledger [Signature]	Initials. J.N.

Regtl. No. 266

Rank R

[Signature]

No. 2166

Rank Pte

Name C. Coles

Nov. 4th, 19

Capt. Howley,
O. i/c Records.

Please pay to Mr. Charles Coles, ex-private No 2166, the
sum of eleven dollars and ~~sixty~~^{twenty} cents on account of passage from
Grand Falls to St. John's and charge the same to transportation.
\$11.20

W. W. Michell
Vocational Officer

W. W. Michell

Employ. Grant.

ACCOUNT	<i>4995</i>	<i>E. W.</i>
CH. NO.		
T. D. NO.		
PAY LEGEND		
DATE LEGEND		

Charles Coles



This Form is to be used in connection with Pamph.

In the spaces below should be entered the findings in the routine of examination set forth in the appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of *Charles Coles*
aged *19* conducted at *Grand Falls*
Date: *Feb 18/16* Recruiting officer:

NO. OF TEST

FINDING *Recommended.*

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13
- 14
- 15
- 16
- 17
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- 26
- 27
- 28
- 29
- 30
- 31
- 32
- 33
- 34
- 35
- 36
- 37
- 38
- 39

no defect.

2166

18 yrs. age - foreign service
no defect

OK. 200 lbs. - very slight. Has never had any
OK. neutral rigurgitation - not serious muscular degeneration
no defect
1/2 both

no.
5' 6" " "
120 lbs — 112 lbs now OK. 200 lbs
34" 32-35 3/4
4.75 per day
mother

Signature of Medical Examiner: *A. B. Chamberlain*
W. L. Linden

ST. JOHN'S
30
MAY 1921

Fold Here

ON HIS MAJESTY'S SERVICE



To the Officer in Charge of Records,

Royal Nfld. Regt.,

Dept. of Militia,

St. John's, Nfld.

Fold Here

June 30th., 1921 1919.

The accompanying King's Certificate, on his discharge,
(No. 784), is forwarded herewith to

Private Charles Coles

in respect of his service as No. 2166 Rank Pvt.

Name Chas. Coles Corp Royal Nfld. Regt.

Receipt of the same should be acknowledged hereon.

Received 16-9-21

Signature Charles Coles

Date 18-9-21

Address Campbell St 4200

Halifax N.S.
Canada R.T.O.



AIR MAIL

Fold Here

ON HIS MAJESTY'S SERVICE



To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S, Nfld.

SEP 16 1921

1921.

The accompanying Victory Medal and/or British War Medal
is/are forwarded herewith to

Charles Coles

in respect of his service as No. 2166 Rank Pte.

Name G. Coles Royal Nfld. Regt.
Nfld. Forestry Corps

Receipt of the same should be acknowledged hereon.

Received 12-10-21

Signature Charles Coles

Date 12-10-21

Address Camp No 1 Hospital
Halifax N.S.
Canada

[P.T.O.]

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. Forms
B. 121.
B.
(1941) W5017/2124 1000m 6/15m 25 6/9

Regiment of 1st Newfoundland

Number of Pages 1

Signature of O. C. Company W. Henderson
Major

Regimental Number and Name <u>No. 2166 Coles</u> <u>Plat.</u>		Enlistment Age on <u>18</u> years - months		Trade <u>Mason</u>	Good Conduct Badges, Service Pay or Proficiency Pay
Joined _____ Date _____		Place and Date of Enlistment <u>St. John's</u> <u>Feb 20/16</u>		Religion <u>CofE.</u>	
Joined _____ Date _____		Period of { with Colours _____ years. with Reserve _____ years.		Place of Birth <u>Grand Falls</u>	
Joined _____ Date _____					

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order discharging with trial	By whom awarded	REMARKS
				<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> COPY SENT TO O.C. HQ ST. JOHN'S, N.F.L.D. N.F.P.38. No. <u>1774/120</u> DATED <u>6 NOV 1917</u> </div>					

To be carried over

Army Form B. 121.

Veterans
AffairsAffaires des
anciens combattants

WWI NFLD

DEATH NOTIFICATION — AVIS DE DÉCÈS

FILE NO — DOSSIER N°

0399915

NAME — NOM

Coley, Charles A

SERVICE NO — MATRICULE

2166

DATE OF DEATH — DATE DU DÉCÈS

25-8-79

CPC NO — CCP N°

2601961

WVA — AAC N°

PLACE OF DEATH — ENDROIT DU DÉCÈS

V.G. Hospital, Halifax, N.S.

INFORMATION RECEIVED FROM — INFORMATION RECUE DE

DVA-93

L.W.

11-1-80

FOR RECORDS MANAGER — POUR LE GESTIONNAIRE DE DOSSIERS

DATE