



FIRST NEWFOUNDLAND REGIMENT

4158

ATTESTATION OF

No. 4158 Name Richard Costello Corps R.B.

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Richard Costello
2. What is your full Address? } 2. 14 1/2 Wickford St. St. Johns
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 18 Years Months
5. What is your Trade or Calling? 5. Sailor
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 FOR THE DURATION OF THE WAR
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?..... } 10. { Name
Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? } 11. Yes

I, Richard Costello 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.

Richard Costello SIGNATURE OF RECRUIT.
R. J. [Signature] Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Richard Costello 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 day of 1915

Signature of Attesting Officer [Signature]

†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 May 25th 1915
Place St. Johns } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name: Richards, Costello
Apparent age: 15 years, 1 month
Height: 5 feet, 5 inches
Chest Measurement: Girth when fully expanded 34 inches, Range of expansion 4 inches

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin: James Costello, 10 1/2 Wickford St. D. Jones, Relationship: Father, Particulars as to Marriage

Table with 4 columns: (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.

Particulars as to Children

Table with 2 columns: Christian Names, Date and Place of Birth

STATEMENT OF THE SERVICES

Table with columns: 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 (Years, Days), Service in Reserve not allowed to reckon towards G. C. Pay (Years, Days), Signature of Officers certifying correctness of entries. Includes handwritten entries for enlistment in 1917 and discharge in 1919.

Total Service forfeited as above.....

Total Service towards Engagement to: 23-12-19 [date of discharge] 2 years 28 days
Pensions: []

No. 4158 Name *R. Cosullo*

Sqn., Batty.,
or Company

D Corps *21st Royal Wfld*

Date of
enlistment

26/11/17

G.C.
Badges

Service or
Proficiency Pay

Date of last entry in
Company Conduct Sheet

No. and date
of last drunk

Period not reckoning towards
freedom from extra fine

Sheet No.

Signature O.C.
Company, etc.

[Signature]

Character

Fair

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
<i>B</i>	<i>24/5/18</i>	<i>Pvt.</i>		<i>Smoking contrary to orders during air mail</i>	<i>Lt. Chase</i>	<i>4 days C.C.</i>	<i>25/5/18</i>	<i>M. Burke</i>	<i>M.B.</i>

Army Form B. 122

P.V.O.

C.R. 4158

Extract from Daily Orders Part 11 Unit The Royal ^Wfld. Regt.,
St. John's, Nov. 13th, 1919.

4158 Pte. R. Costello

Retd. from Overseas & Reported to Depot 7-11-19.

C.R. 4158

Extract of Daily Orders Part II ~~Report Six Months~~ Royal
Newfoundland Regiment St. John's dated Dec. 15th 1919.

Discharge approved on Demobilization

The discharge of the undetnoted has been approved by O.C. Discharge
Depot from noted date.

4158 Pte. R. Costello

9-12-19

C.R. # ~~4~~ 4158

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.

St. John's, 6-1-20.

The Discharge of the U/m on Demobilization has been CONFIRMED
by Officer i/c Records.

4158 Pte. R. Costello

23-12-19.

C.R. 4158

Extract from Nominal Roll of Repatriation Draft #94
per S.S. "Baltic," Liverpool to Halifax 12/8/19

Due to sail 13-8-19.

From Depot.

4158 Pte. R. Costello.

C.R. 4158

Extract from Orders by T.G. Mathias, D.S.O. Commanding 1st Batt
Royal NZFd. Regt. 3/7/18.

The following arrived yesterday and is posted to A. Co.

4158 Pte. R. Costello.

C.R. 4158

Extract from Daily Orders Part 11 Unit the Royal Nfld. Regt.
St. John's Nov. 13th, 1919.

4158, Pte. R. Costello

Ret'd from Overseas and reported to Depot 7-11-19.



CR 4158
CANADIAN PACIFIC R'Y. CO.'S TELEGRAPH
TELEGRAM

FORM T. D. 2B

CABLE CONNECTIONS TO ALL PARTS OF THE WORLD

J. McMILLAN, Manager Telegraphs, Montreal.

Sent No.	Sent By	Rec'd By	Time Sent	Time Filed	Check

Send the following Message, subject to the terms printed on the back hereof which are hereby agreed to:

CONFIRMATION

HALIFAX, N.S., NOV. 13th. 1919.

O.C. TROOPS,
ST. JOHN. N.F.L.D.

305 REFERENCE YOUR WIRE TENTH INSTANT FOUR ONE FIVE EIGHT
PTE. COSTELLO ROYAL NEWFOUNDLAND REGIMENT ADMITTED TO
HOSPITAL TWENTY ONE EIGHT NINETEEN DISCHARGED FOUR ELEVEN
NINETEEN

WMG

D R O

H. Logan
LIEUT.
DISTRICT RECORD OFFICER M.D.6.



CANADIAN PACIFIC R.Y. CO.'S TELEGRAPH TELEGRAM

M T. D. 2B

CABLE CONNECTIONS TO ALL PARTS OF THE WORLD

J. McMILLAN, Manager Telegraphs, Montreal

Sent No.	Sent By	Rec'd By	Time Sent	Time Filed	Check
					59-6-1344 =

Send the following Message, subject to the terms printed on the back hereof which are hereby agreed to:

M. D. NO. 6

Halifax, N.S. Aug. 30th, 1919.

**To- Minister of Militia,
St. Johns, Newfoundland.**

**552. Four one five eight Pte. R. Costello admitted to
Rockhead Hospital, Halifax.**

Confirmation.

**Brig-General,
Commanding Mil. Dist. No. 6.**

G.O.C.

C.R. 4158

Anglo-American Telegraph Company

LIMITED.
ESTABLISHED 1866.

EIGHT TRANS-ATLANTIC CABLES

AUTOMATIC DUPLEX SYSTEM.

CLASS OF SERVICE DESIRED	
Fast Day Message	
Day Letter	
Night Letter	
Patrons should mark an X opposite the class of service desired; OTHERWISE THE TELEGRAM WILL BE TRANSMITTED AS A FAST DAY MESSAGE.	

Important Messages should be repeated—		Attention is called to the Importance of legible writing.	
CHECK	TELEPHONE 378 FOR MESSENGER.	TIME	
		Received	Sent

SEND the following telegram subject to the terms }
 on back hereof which are hereby agreed to. Date **Aug. 29th, 1919.** 191

To **Headquarters Military District, No. 6, Halifax.**

Please inform hospital 4158 Pte. Rq Costello admitted.

A. E. Hickman,
 Minister of Militia.

C.R. 4158

AUGUST 23rd 1919.

Mrs. Jos. Costello,
14 $\frac{1}{2}$ Wickford Street.

Dear Madam:

I am directed to advise you that word has been received from the Officer in charge "Baltic" draft that your son, #4158 Pte. J. Costello, has entered Hospital in Halifax, N.S. Nature of illness not stated.

Upon receipt of further particulars we shall again communicate with you.

Yours faithfully,

CC.B

Captain,
Military Secretary.

August 25
1919

R

C.R. 4158

Major Rendell

Dear Sir

could you please tell
me the name of the
Haasfille my son
Principe R. Costello
hoping as I would
like to telegraph to
him to find out his
regiments

I remain yours
truly Mrs Costello

NEWFOUNDLAND POSTAL TELEGRAPHS.**Cable Connection with all the World****C.R. 4158****All Messages Sent are Subject to the Following Conditions:**

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

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

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

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

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

(NOT TRANSMITTED)Signature of Sender GRAVES. Address PORT AUX BASQUES.

Line Number	Recd	By	Sent	by	Check

Dated August 23rd 1919.

To Minister of Militia,
St. John's,

1562, ex. Pte. J. Walsh with
draft 4158, Pte. R. Costello
went to Hospital at Halifax.

GRAVES.

FOR TYPEWRITER

See 1562 for Orig.

C.R. 4158

21/Aug/19

Rec'd from Lt. Guerin.
Documents of ~~458~~ 4158.
Pte. Costello R.
on admission to
strap.

M. Bestay Capt. Comd.
Pr. S. M. O.
S. Ballie

R

C.R.

4158

Extract from telegram received from Synoptical, London
Aug. 15th, 1919.

With reference to my telegram Aug. 13th 4158 Costello
was absent from Cassandra June 24th. Refer to 2/Lieut. ^Batson.

C.R. 4158

1919
Extract from List of Soldiers embarked August 13th/for
Halifax.

4158, rte. Richard Costello.

C.R. 4158

August 1st 1919.

Mrs. Jos. Costello,
14¹/₂, Wickford Street,
City.

Dear Madam:

I beg to inform you that we have been informed by the Pay & Record Office, London, that your son #4158, Pte. Rd. Costello will be repatriated "BAL TIC" sailing date not stated.

Yours sincerely,

CASUALTY OFFICER.

C.R. 4158

Extract from Daily Orders War Office, Unit 9th Royal Nfld.
Regt. St. John's, July 3rd, 1919.

4158 Pte. R. Costello.

Reported at Headquarters 1-7-19 on "Gassandra" which
sailed Glasgow June 24th, 1919.

Extract from Daily Orders War Office, Unit 9th Royal Nfld.
Regt. St. John's, July 3rd, 1919.

C.R. 4158

Extract from telegram received from Synoptical, London

Aug. 13th, 1919.

The following have embarked Liverpool. Aug. 13th to Halifax

4158 Costello.

C.R. 4158

Extract from casualties from Pay & Record Office, London
dated 3-7-19.

4158, Pte. R. Costello.

been absent

having ~~been absent~~ from Repatriation Draft per S.S. Cassandra
sailing 24-6-19, reported at the Pay & Record Office.
26-6-19, and was granted furlough from 26-6-19 to 30-6-19
to report to O.C. K.R.R. Depot Winchester, on latter date
for rations and administration, pending repatriation.

Authority:

Chief Staff Officer (London).

C.R. 4158

Extract from Telegram from ^{C.R.} ~~syn.~~ to ~~W.L.~~ dated June
25th 1919.

With reference to my telegram June 21st. "Zanzibar"
sailed in the evening of June 24th. Delete

#4158 Costello.

C.R. 415'8

Extract from Orders, by Lt. Col., B.J. Barton, D.S.O., Commanding
2nd Bn. Royal Nfld. Regt. dated 6/12/18.

A R R I V A L S.

The following having reported back from the 1st Bn. is taken
on the strength and posted to "H" Company from 4.12.18:

4158 Pte. Costello

C.R. 4158

**Extract from Casualties received from Pay & Record
Office, London, Nov. 25th, 1918.**

4158 Pte. R. Costello.

Ex Mile End Military Hospital 25-11-18, is granted furlough
to 4-12-18 Fit for Ill Employment.

C.R. 4158

Nov. 20th 18.

Mrs. James Costello,

14 $\frac{1}{2}$ Wickford Street.

Dear Mrs. Costello,

In answer to our inquiries as to the whereabouts and condition of your son, #4158 Pte. Richard Costello, we are informed by the Record Office, London, that he is now at Mile End Military Hospital, London, and that he has been progressing favourably since Nov. 18th.

Upon receipt of any further information, we shall again communicate with you.

Yours faithfully,

C.C.B

Captain,
Military Secretary.

C.R. 4158

Extract from Telegram from Synoptical, dated Nov. 20th., 1918

With reference your telegram Nov. 16th..

#4158 COSTELLO.

MILD END MILITARY HOSPITAL LONDON PROGRESSING FAVOURBLY
NOV. 18th.,

C.R. 415-8

Extract from telegram to Synoptical, London, from
Military, St. John's, dated November 16th. 1916.

Inform whereabouts and condition of:

4158 Costello.

C.R. 4158

Extract from War Office List No. G. 1733 dated 1. 11. 18.

4158 Pte. R. Costello.

WOUNDED 14. 10. 18.

BC.

C.R. 4158

Oct 22nd 18

Dear

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

No. 4158, Private Richard Costello at Mile End Military Hospital, London suffering from G.S.W., left wrist.
I trust that later reports will bring news of his convalescence.

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

Yours faithfully,

Mr. Jas Costello
14 $\frac{1}{2}$ Wickford Street

Minister of Militia.

C.R. 4158

Extract from Nominal roll of sick and
Wounded from France admitted Mile end
Military Hospital Banerft Road E.I.
admitted on 18/10/18.

4158 PTE. R. A. COSTELLO.

G.S.W. L. WRIST.

C.R. 4158

Extract from War Office List. No. E.A. 5041.

ADMITTED & APPE. GEN. R. FOULOGNE 15th OCT. 1915.

4158 Pte. R. Costello.

G.S.W., WRIST L. MILD.

BC.

C.R. 4158

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

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

ANGLO-AMERICAN TELEGRAPH COMPANY, LIMITED

CONNECTING WITH
THE WESTERN UNION TELEGRAPH COMPANY

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

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

Z201/30K JK 15

HALIFAX NS AUG 30TH

MINISTER OF MILITIA

STJOHNS NFLD

552 FOUR ONE FIVE EIGHT PTE R COSTELLO ADMITTED TO ROCKHEAD HOSPITAL

HALIFAX

G O C



100

C.R. 4158

Extract from telegram from Mil. to Syn. dated January 23rd., 1918.

Inform 4158 Costello father
died January 17th., mother
well.

Abstract from Nominal Roll from 2nd Battalion to B. L. F.'s
embarked at Southampton 22/7/10

C.R. 4158

#4158 Pte. Costello, R.

C.R. 4158

Extract from Medical Roll Craft. "H" Company embarked
S.S. "Floresol" Jan. 20th, 1918.

4158 Pte. Costello R.

475'8.

C.R.

Extract from Daily Orders Part 11 Unit The Royal
Nfld. Regt., St. John's, Nov.27th, 1917.

4158 Pte. R. Costello.

Attested for General Service with the Nfld. Regt. with effect
from Nov.26th, 1917.

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

Not in man roll
MEDICAL HISTORY *Depot 4158.*

Surname *C. O'Brien* Christian Name *Richard*

Table I.—GENERAL TABLE.

Birthplace:—Parish *St John* County *Nfld.*

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	at	on	at
Examined	<i>26th</i> day of <i>Nov</i> 1917	<i>St John</i>	day of	191
Declared Age	18 years	— days	years	days
Trade or Occupation	<i>Clk.</i>			
Height	5 feet	5 inches	feet	inches
Weight		119 lbs.		lbs.
Chest Measurement	Girth when fully expanded	34 inches		inches
	Range of Expansion	4 inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm			
Number				
When Vaccinated				
Vision	R.E.—V= <i>6/10</i>		R.E.—V=	
	L.E.—V= <i>6/10</i>		L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<i>L. Amund Peterson</i>			
(Rank)	<i>major</i>			
	Medical Officer.			Medical Officer.
Enlisted	at <i>St John Nfld.</i>		at	
	on <i>26th</i> day of <i>Nov</i> 1917		on	day of 191
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment	<i>1st Nfld.</i>	<i>4158</i>		
Transferred to	<i>Regt</i>			
	ROYAL NEWFOUNDLAND REGIMENT			
Became non-effective by	on	day of 191	on	day of 191
[Signature]				
[Rank]				

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In case of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
MILE END MILITARY HOSPITAL BANCROFT ROAD — LONDON, E. —	18	10	18	25	11	18	G.P.W. Wrist	38	Female - a small swelling	J. M. J. [Signature]

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of 1st Newfoundland.

Number of Sgt Ann.
Signature of O. C. Company W. J. [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>4158</u> <u>Cootell</u> <u>R.</u>	Age on <u>18</u> years - months		<u>Clerk</u>	
Joined Date		Place and Date of Enlistment } <u>St. John's</u> <u>26-11-17</u>		Religion	
Joined Date				<u>R.C.</u>	
Joined Date		Period of } with Colours years. with Reserve years.		Place of Birth	
Joined Date					

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<u>Hazley down camp.</u>	<u>28.3.18</u>	<u>Pte.</u>		<u>Destroying Government Property</u> <u>absent of rank</u> <u>march</u>	<u>Cospl.</u> <u>Christian</u>	<u>Ray for damage</u>	<u>2.4.18</u>	<u>Mt. L.A. Edens.</u>	<u>[Signature]</u>
<u>"</u>	<u>2.5.18</u>	<u>"</u>			<u>Ye Wilson</u>	<u>2 days' C.D.</u>	<u>7.5.18</u>	<u>Mt. Edens</u>	<u>[Signature]</u>

To be carried over

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P. or P. (T), of the Reserve.

In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. *Royal Artillery Regt.*
2. Regtl. No. *11128* 3. Rank. *Pte*
4. Name *Costello*
(Surname) (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....
in category (or grade).....
7. Former Trade or Occupation }
7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regtl. Nos.
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—
(a) When (d) Particulars of Pension or Gratuity (if any)
(b) Where
(c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 b (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
GSW Capt Brest
11. Date of origin of disability.
12. Place of origin of disability.
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.
Recover A only

Casualty Form—Active Service.

Regiment or Corps Royal Newfoundland
 Rank Private Surname Coskillo Christian Name Richard
 Religion C Age on Enlistment 18 years 17 months
 Enlisted (a) 26. 11. 17 Terms of Service (a) Duration Service reckons from 26. 11. 17
 Date of promotion to present rank Date of appointment to lance rank 26. 11. 17
 Extended (.....) Re-engaged (.....) Qualification (b) 18 NOV 1918
 Occupation Clerk or Corps Trade and rate 2nd Lt Signature of Officer [Signature]



Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A. 36, or other official documents.
		<u>A I</u> <u>16. 1. 18</u> <u>Joined</u>	<u>Embarked</u> <u>Southampton</u>	<u>15. 7. 18</u>	
	<u>D. I. O. D.</u>	<u>Wounded in Action</u>	<u>Disembarked</u> <u>Rouen</u>	<u>16. 7. 18</u> <u>27. 7. 18</u>	
	<u>Edw. C. C.</u> <u>20 Jan 18</u> <u>[Signature]</u>	<u>Wounded in Action</u> <u>14-10-18</u>			<u>14/10/18</u> <u>15/10/18</u> <u>18/10/18</u>
			<u>Caen</u>		<u>Ed 2291</u> <u>Ed 30441</u> <u>Ed 3083</u>
			<u>For Officer</u>		
			<u>2nd Echelon</u>		

(a) In the case of a man who has re-engaged or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeburyness.
 W 5548 512231 20-000 3/17 (5/6/11) C. P. & S. Ltd., Form D/103 E/1087. P.T.O.
 NEXT OF KIN: James Coskillo 14 1/2 Westford St. St. John's N.F.

R. Costello

C.R. 4158

P. R. O.

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.
In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. *Royal Newfoundland* } Former Trade }
or Occupation }
2. Regtl. No. *HSS.* 3. Rank. *Pte* 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regtl. Nos.
4. Name *COSTELLO* }
(Surname) (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....
in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—
(a) When (d) Particulars of Pension or Gratuity (if any)
(b) Where
(c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

- R.S.W. left Breast Wrist*
11. Date of origin of disability.
12. Place of origin of disability.
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *Recovered.*

NO. 6 DISTRICT DEPOT.

74-C-1351.,

Halifax, N.S., Nov. 4th, 1919. ^{12.11.19.} WWP

To:-

The Minister,
Militia & Defence,
St. John's, Newfoundland,

#4158, Pte. R. Costello.

Attached herewith documents
in connection with the marginally noted
man, who left this Depot this date to re-
port to you for his Discharge. This man
has been attached to us here for treatment,
and his treatment is now finished.

Kindly acknowledge receipt
of documents, please.

Reg.

FA/

Geo. J. Shaw
CAPTAIN,
O.C. CASUALTY COMPANY & HOSPITAL SECTION,
NO. 6 DISTRICT DEPOT.

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 4158 Rank Pfc Surname Costello - Richard
(Given name in full)

Unit or Corps 6th SS Birthplace Newfoundland

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

1. GENERAL DESCRIPTION:

Physique good Weight 120 lbs. Height 5 ft. 8 in. Colour of Eyes Blue
 Nutrition good
 Pulse 72
 Condition of arteries good
 Vision Rt. normal left normal
 Hearing (conversational voice) Rt 16 ft.
 Left 16 ft.

Identification marks, scars, or deformities!
 (Give cause and date of origin.)
nil

Opinion as to general health and physical condition good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System no Genito Urinary System yes Cardio-Vascular System no
 Special Senses no Integumentary System no Respiratory System no
 Disturbance of mentality no Muscular System no Digestive System no
 Osseous and Joint System no Any other general condition no

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

Gonorrhoea with left Ep. orchitis.
Gonorrhoea recovered.
Ep. orchitis - slight thickening of
epididymis. no pain nor tenderness
on pressure

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at (Overseas)

Date Signed M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at *Halifax, N.S.* (Canada)

Date *Nov. 2/19* Signed *G. L. Smith* M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature *P. Castillo*

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

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

Sir:-
Please charge the amounts set opposite my name to my account and
pay it to the N.W.S.A. "Prisoners of War Fund" in quarterly instalments
for the period of one year.
Commencing on 1st July 1918.

Regtl. No.	Rank.	Name	Amount	Signature.
4158	P.O.	Castello R	\$2 50	

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

Date

28-6-18

R. Castello

N.F.P./88.

N E W F O U N D L A N D C O N T I N G E N T

TELEGRAM ~~1000000000~~/extract from MINISTER OF MILITIA.

No. _____ Dated 26/ 7/19 (28~~9~~), received 26/ 7/19

Decoded by J.S. _____ Checked by A.S.H. _____

Branch Records _____ Acted upon (Initial) _____

Acknowledged per No. _____ Dated / / _____

Please inform-whereabouts of-probable date of-
4158-Costello-

N.F.P./88

NEWFOUNDLAND CONTINGENT

TELEGRAM ~~XXXXXXXXXX~~/extract from MINISTER OF MILITIA.

No. _____ Dated 26/ 7/19 (28~~9~~), received 26/ 7/19

Decoded by J.E. Checked by A.S.H.

Branch Records Acted upon (Initial) _____

Acknowledged per No. _____ Dated / /

Please inform-whereabouts of-probable date of-
4158-Costello-

G.P. & O. i/c Records,
Newfoundland Contingent.

Officer Commanding,
2nd Bn.,
R. Newfoundland Regt.,
Winchester.

Pay & Record Office.

25th January, 8.

4158 PTE. R. COSTELLO.

The following is an
extract of telegram dated
23/1/19 (827) from the
Minister of Militia:

"Please inform- 4158-
"Costello- Father- died-
"July 17th- Mother- well"

Presumably the date is
intended to be January 17th.

For necessary action,
please.

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

NEWFOUNDLAND CONTINGENT

ENTERED
PAY BOOKS <i>200</i>
N.F.P. <i>80</i>
NUM. ROLL <i>80</i>
ALLOT. INDEX <i>W.M.</i>
REGISTER <i>W.M.</i>
EXAMINED

CANCELLATION OF ALLOTMENT

1. I, (No) 4158 (Rank) Pte. (Name) Costello R.

hereby apply for cancellation of Allotment made by me on N.F.P./11

No. 4523 dated 1/1/18. in favour of

Mother Mrs M. Costello 144 Wickford St. St. John's
for \$ 50 cts per diem.

Such cancellation to take effect on the 30th day of June 1919

2. I agree to accept all risks and consequences of this application failing to reach Headquarters, St. John's, in time to become operative at above-nominated cancelling date, and that in the event of such non-delivery, and thereby the Allotment continuing to be paid to the Allottee, I also agree to such further stoppage in the Pay Books as may be necessary, or otherwise to refund such overpaid amount or amounts.

Dated at P.O. Office
June 28th 1919

R. Costello
Allotter.

Approved and Witnessed:
NEWFOUNDLAND CONTINGENT.
R. R. [Signature]
CHIEF PAYMASTER & OFFICER IN CHARGE

N.B. - To be made out TRIPPLICATE and delivered to the Pay & Record Office not later than the date of cancellation, in accordance with P. & R.O. C.L./10, 9/12/16.

No. 2508/1612

From: NEWFOUNDLAND CONTINGENT

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

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

N.F.P. 190.

11th June 1919

4158, Pte. R. Costello

With reference to the following telegram from the Minister of Militia / / 19 (227):

"Pay to-

4158 Costello £5:0:0

Cheque £ 5:0:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

A. A. Minahan
Chief Paymaster & O. i/c Records.

June 16th 1919.

Receipt hereunder.

J. J. Batten LIEUT. COLONEL.
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commandg. 2 Batt'n.

Received the sum of £.5.0.0.

Five Pounds. in respect of telegraphic remittance from the Minister of Militia.

R. Costello
No. 4158 Rank Pte.

Witness: H. White

No. 138 Date _____

23 NOV 1918

191

(1) To the Officer i/c Records, _____

58 Victoria St

_____ (Station).

(2) The Officer Commanding, _____

_____ (Station).

(3) The Paymaster, _____

_____ (Station).

Regimental No. H 158

Rank and Name Pte Castello R.A.

Regiment or Corps 1 Bn Newfoundlands Coy

has been granted a furlough from Adm. 18-10-18

His address while
on leave will be:

will be discharged
to report to you

25 NOV 1918

I consider he
is fit for:

- (a) Duty Class III Employment.
(b) Light Duty, and likely to be fit for Service Overseas within three months.
(c) Light Duty, and not likely to be fit for Service Overseas within three months or requiring special medical treatment.
(d) Service at home, but unlikely ever to be fit for Service Overseas.

* Strike out that
which is inapplicable.

No. Officer in charge _____

Hospital,

MAJOR R.A.M.O.

REGISTRAR FOR _____ (Station).

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office. In the case of men of the Royal Engineers two copies of A.F.W. 3016 will be sent to the Officer in charge R.E. Records and one to the Paymaster, instead of one copy to the Officer i/c Records, the Paymaster, and O.C. shown in the Schedule.

NEWFOUNDLAND CONTINGENT

From:

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

To:

Officer Commanding,
2/Bn. Royal Nfld. Regt.,
Hazeley Down Camp,
Winchester.

10th January, 1919

Mar 10 1919

Subject: 4158, Pte. R. Costello,

Receipt hereunder.

With reference to the following telegram (254) from the Hon. Minister of Militia, received

"Pay to 4158, Pte. Costello, £3.0.0.

Draft £3:0:0. is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

R. Costello
LIEUT. COLONEL,
Officer Commanding 2nd Bn. Royal Newfoundland Regt.

Received the sum of _____

Three Pounds. on account of cable remittance from Newfoundland.

R. Costello

A. C. Minnie
Chief Paymaster & O. i/c Records.

No. 4158 Rank Pte

Witness *A. C. Minnie*

101721 R.&.C. ^{Forms} _{C. 348} ₆₃

MEMORANDUM.

From C.P. & O. i/c Records,
Newfoundland Contingent.

From Officer Commanding,
2nd Bn. Royal Newfoundland R.
Hazeley Down Camp.

To Officer Commanding,
2nd Bn.,
R. Newfoundland Regt.,
Winchester.

To The Chief Paymaster,
Royal Newfoundland Regiment,
ANSWER London, S.W.

Pay & Record Office.

NEWFOUNDLAND CONTINGENT
PAY & RECORD OFFICE

25th January, 1918.

28 JAN 1919
Jan. 27th 1919.

4158 PTE. R. COSTELLO.

The following is an
extract of telegram dated
23/1/19 (827) from the
Minister of Militia:

"Please inform- 4158-
"Costello- Father- died-
"July 17th- Mother- well"

This message has been
conveyed to Pte. Costello.

Presumably the date is
intended to be January 17th.

For necessary action,
please.

[Handwritten signature] for Major,

LIEUT. COLONEL

Chief Paymaster & O. i/c Records **COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.**

MESSAGE FORM. Series No. of Message _____

In. CALL <input checked="" type="checkbox"/>	Reed.	At _____ By _____	Army Form C 2128 (pads of 100). Date Stamp.
	Out <input checked="" type="checkbox"/>	Sent	

PREAMBLE

M.M. Offices	} Delivery _____ v

PREFIX

Words

TO |
X NEWFOUND
X HAZELEY CAMP

FROM & place	Originator's Number	Day of Month	In reply to Number
	365	19/5/19	

PLEASE	SEND	ESCORT	TO
TOWER	BRIDGE	POLICE	COURT
LONDON	FOR	R 4158	COSTELLO
ABSENTEE			COSTELLO
			SYNOPTICAL

TIME OF ORIGIN	TIME OF HANDING IN (For Signal use only).
----------------	--

Originator's Signature
(Not Telegraphed)

TEMPORARY SHEET
CASUALTY FORM.

UNIT..... Royal Newfoundland

NO. 4158 RANK..... Sgt NAME..... Costello T R

T. O. S. Halifax depot clearing services command as from 13 8 19
and admitted to hospital 21 8 19 part II order no 236

Dated 24 8 19

Discharged from hospital.....

and S. O. S. Halifax depot clearing services command DD#6
as from 26 8 19 part II order 238 dated 26 8 19

[Signature]
ADJUTANT GENERAL
HALIFAX DEPOT
CLEARING SERVICE COMMAND

FORM K

No 4523



1 1ST. NEWFOUNDLAND REGIMENT 1.

ALLOTMENTS

I, R. Costello

Regl. No. 4168

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

Allotment begins Jan'y 1 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>3437</u>	<u>Mother</u>	<u>Mr Jas. Henry Costello</u>	<u>14 1/2 Wickford St. Johns</u>	<u>50</u>
Total Allotment, \$				<u>50</u>

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, countersigned by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

Sig.) M. W. H. [Signature]
Officer Commanding
[Signature] Company

(S) R. Costello
(Rank) PL

St. John
Dec 24 1917 191

Nº 4523



1st. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, R. Costello, Regl. No. 1110-8

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

Allotment begins January 1 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3237	Wife	Miss Jas. Henry Costello	14 1/2 Princeps St. John's	50
			Total Allotment, \$	50

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, countersigned by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

Sig.) [Signature]
Officer Commanding
Company
E. John
Dec. 26 1917
191

(S) R. Costello
(Rank) Plt

Costello, R

4158

May Sept.

Dec. 29, 1919

#4158 Pte. Richard Costello,
#14 Wickfrd St.,
City

Dear Sir:-

Please find enclosed Discharge Certificate #3888

Yours truly

Major

Paymaster.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4158 Rank. Private Name. Costello Richard
 Intended place of residence. 14 Wickford Street St Johns
 2. Occupation Clerk
 Classification of soldier. E Medical Category. AI

3. The above named man is discharged in consequence of

DEMOBILIZATION
Eligible for War Service Gratuity

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

Place, ST. JOHN'S

Date 9-12-1919

R. A. Edwards
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place, ST. JOHN'S

Date 9-12-1919

R. Costello
 Signature of soldier

R. A. Edwards
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place, ST. JOHN'S

Date 9-12-1919

R. Costello
 Signature of soldier

R. A. Edwards
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service. 26-11-1917
 Discharged from service. 9-12-1919 Plus 14 days

No. of days on Military Service. 757

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.

Place, ST. JOHN'S

Date 9-12-1919

R. A. Edwards
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

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

Place, ST. JOHN'S

Date

.....
 Officer i/c Records
 The Royal Newfoundland Regiment

The Royal Newfoundland Regiment

Class for Demobilization:—

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date _____

Regimental No. 4158

Name Costello, R

Address 14 Wickford Street
St. John's

Present Medical Category A7

Recommended for: (a) Immediate discharge _____

(b) ~~Standing Medical Board~~ _____

Members of Board

O. C. Discharge Depot.

Senior Medical Officer

M. O. Depot

252

Civil Re-establishment Committee



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

To take Commercial Course.

P. C. Smith

Signature of Man.

Reg. No.

4158

B. Hunter

Signature of the Vocational Officer or his Representative.

Place

Date

St Johns N.Y.

9, 12, 1919

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 1158 Rank Plt Name Bozello, Richard
 Date of Enlistment 26 11 1917 Address 4 Wickford St. District S. Johns
 Occupation Labr. Classification for Discharge F Medical Category A.1
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	3
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B 179c	B 120	M 93			

Date 9 12 1919

R. H. Edwards
O. C. Discharge Depot

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

Mr. Bozello

Particulars passed to Vocational Officer for information and action.

Date 9 12 1919

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$ 60 00 / 100

(b) Clothing Supplied _____

Date 9 12 1919

R. H. Edwards
O. C. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 38 to his home at H. Johns and Release Certificate No. 3881 issued.

Date 9-12-1919 R. Edwards
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 23-12-1919

Date 9-12-1919 R. Edwards
Depot Paymaster.

Discharge approved for 9-12-1919

Forwarded with following documents to O.C Discharge Depot.

N.F. P136	B 268	B 121	N.F. Med.	D.F. 1	1 form B
F 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B 179c	B 120	M 93			

Date 9-12-1919 R. Edwards
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-
Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date 9-12-1919 R. Edwards
O. C. Discharge Depot.

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



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 *Richard Costello*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4158*

Intended address *14 Wickford Street, St Johns*

Height on discharge *5 Feet 7in*

Color of hair on discharge *Light Brown*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *Medium*

Figure on discharge

Christian name of Father

Christian name of Mother *Mary*

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth *St Johns, 21-12-1901*

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) *Richard Costello* *Alc.*
(Rank)

Station *ST. JOHN'S.* Date *10-11-1919*

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

Medical Officer in Hospital,
Unit, or Command Depot.





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..... *S. Town*
 Date..... *Nov 15 1913*

1. Unit *Royal Newfoundland*
 2. Regimental No. *4156*
 3. Rank *Pte.*
 4. Name *COSTELLO R.*
 5. Age last birthday *19 yrs.*
 6. Enlisted on *Nov. 17*
 at *S. Town*
 7. Former trade or occupation *Druggist*

8. Disability

hie

9. History *He is later he was quite fit when he joined
 wounded T&T Milled wrist June 14 at 914 - he
 to Army Amb. with T&T*

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).

Acid. - *acidic* *fluid* *but* *rapid*
124 - *Consider* *f* *Acidosis*
sign.

Lung. - *Breath* *variable* *throughout*
for *24* *hr*

Jejuna *swelled* *&* *tender* - *found* *in* *duodenum*, *no* *lesions*
Lgs *sped.* *ok.* *lith* *in* *abd.*

Anemia. - *Leuc* *present* *in* *good* *condition* - *the*
carbon *hydrate* *&* *water* *left* *side*.

11. Was ^{sanatorium} advised and refused?
operation

12. Do you recommend discharge as permanently unfit?

discharge

Signature

Rank or Qualification

Remarks if any by Officer in Charge Hospital.

Place

Signature

Date

Rank

Anglo-American Telegraph Company

LIMITED.

ESTABLISHED 1865.

TELEGRAMS TAKEN BY THIS COMPANY ARE SUBJECT TO THE FOLLOWING TERMS:
 The number of a telegram is retained in a REGISTER, and the telegraph office is held responsible for the delivery of the message.
 The telegraph office is not responsible for the delivery of the message to the recipient, but only for the transmission of the message to the office of the recipient.
 The telegraph office is not responsible for the delivery of the message to the recipient, but only for the transmission of the message to the office of the recipient.
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AUTOMATIC DUPLEX SYSTEM

Important Messages should be repeated

Attention is called to the Importance of legible writing.

CHECK

Chapman

TELEPHONE 378 FOR MESSENGER.

Received _____
 Sent _____

SEND the following telegram subject to the terms on back hereof which are hereby agreed to.

Date **November 10 1919** 191

To **The Headquarters, Military District No. 6, St. Louis, Mo., U.S.A.**

TERMS OF SERVICE

Special Terms Applying to Night Letters.
 In furtherance of the service to the public, the Company has established a special rate for night letters. This rate is in addition to the regular rate for the transmission of the message. The rate for night letters is not applicable to messages transmitted during the day. The rate for night letters is not applicable to messages transmitted during the day.

Special Terms Applying to Hospital Letters.
 In furtherance of the service to the public, the Company has established a special rate for hospital letters. This rate is in addition to the regular rate for the transmission of the message. The rate for hospital letters is not applicable to messages transmitted during the day. The rate for hospital letters is not applicable to messages transmitted during the day.

Advice by Telegraph when 4188 Costello Royal Newfoundland Regiment was admitted and discharged from Hospital

Code language is not permitted to be used in telegrams. The use of code language is not permitted to be used in telegrams. The use of code language is not permitted to be used in telegrams. The use of code language is not permitted to be used in telegrams.

Code language is not permitted to be used in telegrams. The use of code language is not permitted to be used in telegrams. The use of code language is not permitted to be used in telegrams. The use of code language is not permitted to be used in telegrams.

CLASS OF SERVICE DESIRED	
F at Day Message	_____
Day Letter	_____
Night Letter	_____
Patrons should mark an X opposite the class of service desired; OTHERWISE THE TELEGRAM WILL BE TRANSMITTED AS A FAST DAY MESSAGE.	

9474

Dear Sir

Writing in favour of
my Mother for her Separation
allowance well as ye say I am the
bearer because I was of Military age
well considering that part of it
neither one of us were forced to go my
Brother that did was a little over
sixteen when he joined and he
neednt have joined until he was
of Military age and I could have
claimed exemption under B,
being the sole support on account
of my father being a chronic
invalid so mother said if it was
possible one of us may go so my
self and my Brother considered
which one of us would go so he
said he go and take his age
and pass alright and let me stay
home to look after my father and
mother and two young sisters
one consumpled and the other
going to school and also a younger
Brother that was just beginning to
work so if I had have gone

Instead of my brother then my
mother was entitled to it if there
is anything on this that ye want
to certify you can look up Doctor
Gait Medical Certificate or my
mothers Claims Papers and also I
claimed exemption under B, having
a Brother gone

I remain
writing for my Mother
Mary Costello X

M.
For recommendation R

SEPARATION ALLOWANCE.

Claimant. *Costello, Mary (mother, widow)*

On account of *Richard Costello* No. *4158* Rank *Cpl*

Decision..... *Refused*

*Recommended
Refused in view of statement by other
son that he was sole support*

*W. J. Readell Lt. Col.
W. J. Howley Capt.*

Date. *9/5/19*

Instructions.....

Allotment of *50^{cs}* per day payable to *Mary Costello*
his *mother* from *1/1/18* to *rate current*
Discontinued on account of

..... *W. J. Howley*

4241

ROYAL NEWFOUNDLAND REGIMENT.

MOTHER

NOTICE.

(Separation Allowance Branch)

THIS STATUTORY DECLARATION is to be filled in correctly in every detail, and a complete reply must be given to each question.

Each statement is considered as being made on Oath, and the form is to be signed before a Barrister, the Supreme Court, Secondary Magistrate, Notary Public or Justice of the Peace and returned to:

"The Paymaster"
Separation Allowance Branch,
St. John's, Nfld.

Handwritten notes:
50¢ per
commencing
1/18/19
J.P.

1. Name in full of soldier. Rank. Reg't. or Unit. Regt. No.

Richard Costello. Pte. R.N. Reg. 4458.

2. Age of soldier. Married or Single.

18 years. Single

3. Name in full of mother. Age. Occupation. Permanent Address.

Mary Costello 50, — 14 1/2 Westford St.

4. Give name of your husband. Age. Occupation Where Employed.

James Costello. Dead.

5. If your husband is not supporting you state the reason.

(Blank line)

6. If your husband is a chronic invalid and totally incapacitated, state nature of malady. (A Medical Certificate must be enclosed with this document stating from what date husband has been totally incapacitated, and for how long incapacity is likely to continue.)

(Blank line)

7. If you are a widow, state date and place of death of your husband.

Jan 17/19 at St. Johns.

8. Have you married again since death of above mentioned husband?

No.

9. Names of your other children. Address in full. Age. Occupation Married or Single.

*John Costello. 14 1/2 Westford St. 27. Engineer Single
Joseph Costello. " " 16. (about) " "
Margaret Costello. " " 13. (at school) " "
Victoria Costello. " " 11. Schoolgirl " "*

10. State amount earned by (a) Yourself Nothing
 (b) Your husband.
-
11. State amount and source of any other income. Nothing
-
12. State value of real property belonging to you and your husband. Nothing
-
13. State value of personal property belonging to you and your husband. Nothing
-
14. If husband is dead state value of real and personal property left by him. No value.
-
15. Actual amount contributed by soldier during the year prior to enlistment. \$8⁰⁰/₇₄ weekly
-
16. Was this amount contributed weekly or monthly. Weekly
-
17. Did this amount include payment of son's board, etc. Yes.
-
18. State your son's trade or occupation prior to enlistment. Shop hand,
-
19. State amount of his wages per week. \$8⁰⁰/₇₄ per week
-
20. State name and address of his last employer. McNeil & Co, Druggist
-
21. State amount of monthly support from son since enlistment. \$15⁰⁰/₇₄
-
22. State amount of allotment received by you from son since enlistment. \$15⁰⁰/₇₄
-
23. State from what date did you receive allotment? Feb. 7/18
-
24. Actual amount contributed by Other children Weekly Monthly.
Other children - nothing \$10⁰⁰/₇₄
-
25. Are any of these children in the employ of you or your husband?
McNeil & Co, Druggist. No.

26. If not receiving support from other children, state cause. Explain Fully.

Not young,

27. With whom are you residing at present?

Live with my children 14 1/2 Wickford St.

28. Have you made a previous claim for Separation Allowance. If not, why? Give particulars.

No

29. Are you already in receipt of Separation Allowance from any source? If so, how much?

No.

30. Are you already in receipt of any payment from any Patriotic Fund? If so, how much.

No.

31. Was the soldier at the time of his enlistment an employee of the Nfld. Government.

No.

32. In what capacity and in what place?

33. Is he in receipt of a salary as such while serving in the Royal Newfoundland Regiment? If so, how much.

No.

I herewith make this solemn Declaration conscientiously believing the same to be true, and knowing it to be of the same force and effect as if made under oath and in virtue of the Evidence Act.

Signature of Applicant.....

Mary Costello

Place of Residence.....

14 1/2 Wickford St. St. John's

Declared and subscribed before me at.....

St. John's Nfld.

this.....

13th

day of.....

March 1919

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

John McCarthy

This application must be signed by two responsible parties one of whom must be a Clergyman, the other a representative of your local Patriotic Fund Committee, certifying that to the best of their knowledge after careful investigation the above statements are correct and the soldier first above mentioned is the sole support of the applicant.

Signature of Clergyman.....

J. J. O'Sullivan S.S. St. John's

Signature of member of the Patriotic Fund Committee.

Thomas J. O'Sullivan
John Costello

5011

23 Patrick St.

St. John's

May 14th 1915.

I hereby certify that
James Costello. aet. 60 yrs.

died on 17th Jan. 1915. of
Pulmonary Tuberculosis after
an illness of 2 years duration.

His widow has five children
living. The eldest a son, aet. 21
is a teamster & when working
allows his mother \$10⁰⁰ per week.

The next son, ^{at home} aet. 16 yrs. not
earning any regular wages.

A son is in the Regt. & is in
England. He was wounded last
October.

There are two daughters -
one in the Tuberculosis Sanitarium

May 28, 1919

Mrs. Mary Costello,
#14 $\frac{1}{2}$ Wickford St.,
City.

Dear Madam-

Referring to your application for Separation Allowance, I beg to state that same cannot be granted to you, because you have two other single sons, both of whom are earning, and in view of this, your son Richard cannot be considered to be your sole support.

Yours truly

Captain,
Paymaster & O.i/c Records

MEDICAL CERTIFICATE.

For Information of Separation Allowance Department.

1. Name and regimental number of soldier in respect of whom Separation Allowance is claimed } 4158
Richard Costello
2. Name and age of said soldier's father or other relative } Father deceased (James)
Mary Costello. 50 yrs.
3. Is said father or other relative invalid and totally incapacitated. } chronic
Mother - widow
Father died Jan 17-1919.
Was total invalid for 2 years before.
4. Of what nature is disability ? } Father had Pulmonary T.B.
5. From what date has this total incapacity been existent ? } Jan 1917
6. How long is total incapacity likely to continue and what will be the effect on earning power. } -
7. If not totally incapacitated by what per cent in your opinion is capacity for work reduced and from what date. } -
8. Are you the regular attending physician ? } yes.
9. Relationship to soldier of applicant ? } mother.

correct.

I certify that the above statements are

.....*St. Johns W.C.*.....Place,

.....*Jan 31 1920*.....Date.

.....*Richard Costello*.....
Physician.

Feb. 21, 1920

Mr. John Costello,
#14 $\frac{1}{2}$ Wickford St.,
City

Dear Sir:-

I am in receipt of your letter regard-
-ing Separation Allowance to be granted to your mother,
and I beg to inform you that your letter confirms the
decision of the Board of Review, regarding your
mother's claim, and that is the son who enlisted
was not the sole support.

Yours truly,

Major

Paymaster.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 193 ⁵⁴

Dec 9 1919

Received from the First Newfoundland Regiment
the sum of one hundred & ninety three ⁵⁴ Dollars.

on account
balance of Pay.

P. Castillo

Ch. No.	21634	Initials.	JW
Pay Ledger	256	Initials.	WR
Gen. Ledger		Initials	

Regtl. No. _____

Rank _____

No. 4158

Rank

Pt

Name

R Costello

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 66 ⁵⁰/₁₀₀

Apr 1 19 20

Received from the First Newfoundland Regiment
the sum of Sixty Six Dollars.

~~an account~~
balance of Pay. W. H. E.

M. Costello

Ch. No. <u>33792</u>	Initials <u>W. H. E.</u>
Pay Ledger <u>342</u>	Initials <u>W. H. E.</u>
Gen. Ledger.....	Initials.....

Regtl. No. Rank

A. C. R.

No. 4158

Rank

Pt

Name

R Costello



DEPARTMENT OF MILITIA

ST. JOHN'S, NEWFOUNDLAND

BVM	
GN. NO.	21635
IMP. LEGAL	DATE REC.
PAY LEGAL	INITIALS
CON. LEGAL	ISS. PT. NO.

Dec. 9th, 1919.

Received from the Department of Militia the sum of four Dollars
and Fort Cents (\$4.40) for Subsistence Allowance of Pte. R. Costello
from 5th Dec. to 9th.

sig. _____

R. Costello

4158 H. R. Costello

Discharged approved
for 9-12-1919.

Board bill to be paid to that date
R. Edward

July 31st 1920

Major Howley
O. I. C. Records

Please pay to R. Costello 4158
the sum of six dollars
in payment of allowance for three days to date
and charge same to Civil Re-establishment Committee

\$6.00

Pension Nil

J.P.B.

Costello

NO.	27635	INITIALS	<i>Costello</i>
NAME		INITIALS	
PAY LEV. NO.		INITIALS	
DATE		INITIALS	

Vocational Officer

R. Costello

June 28 1920

Major Howley
O. O. C. Records

Please pay to R. Costello 4158
the sum of sixty dollars
in payment of P. & A. BONUS
and charge same to Civil Re-establishment Committee

\$60.00

Pension

Nil

J. C. Brown McCall

Vocational Officer

R. Costello

ACCOUNT	
CHK. NO.	40027
INT. LEDGER	
PAY LEDGER	
GEN LEDGER	

The Royal Newfoundland Regiment

4158

Reg. No. 4158 Rank Plt. Name Costello, Richard
 Date of Enlistment 26-11-1917 Address 14 Wickford St District St John's
 Occupation clerk Classification for Discharge F Medical Category A1
 Recommendation S.M.B. _____ Disability Rating _____
 Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1	1
B 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	3
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B 179c	B 120	M 93			

Date

9-12-1919

O. C. Discharge Depot

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

M Costello

Particulars passed to Vocational Officer for information and action

Date

9-12-1919

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable

\$ 60⁰⁰/₁₀₀

(b) Clothing Supplied

Date

9-12-1919

O. C. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 3881 to his home at 15th St and Release Certificate No. 3881 issued.

Date 9-12-1919

A. Edwards
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 23-12-1919

Date 9-12-1919

A. Edwards
Depot Paymaster.

Discharge approved for 9-12-1919

Forwarded with following documents to O.C Discharge Depot.

N.F. P136	B 268	B 121	N.F. Med	D.F. 1	1 Town B
F 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B 179c	B 120	M 93			

Date 9-12-1919

A. Edwards
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date 9-12-1919

A. Edwards
O. C. Discharge Depot.

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

Date Dec 11/19

A. Edwards
James

The Royal Newfoundland Regiment

CIVILIAN RE-ESTABLISHMENT ON DEMOBILIZATION

No. 4154 Rank Private Name Costello Richard
 Former Occupation Clerk Address 14 1/2 Wickford St District St John's N.A.
 Class F Medical Category A1 Disability Rating —

O.C. Discharge Depot.

Above noted man states he has no employment in prospect on his discharge. His personal wish is to obtain a position as Commercial Counselor. His case has therefore been referred this day to the Vocational Officer for action and his discharge is therefore held in abeyance.

Date 9-12-19

To be forwarded Orderly Room in Duplicate.

R. Edwards
Demobilization Officer

The Royal Newfoundland Regiment.

DEMOBILIZATION.

CIVILIAN CLOTHING GUARANTEE

I, No. 4158, Rank Private, Name Richard Costello

hereby undertake to supply myself with civilian clothing, consisting of one suit of clothes, one cap, one tie, one collar, one overcoat, within 14 days from date, in consideration of being issued with clothing allowance to the amount of \$ 60 ⁰⁰/₁₀₀.

Date 9-12-1919

St John's Nfld.

R. Costello
Signature of Soldier.

P. Stewart
Signature of Witness.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4154 Rank Pte Name Leslie Richard
 Date of Enlistment 26-11-1917 Address 14 Wickford St. District A. 1.
 Occupation Black Classification for Discharge F Medical Category A. 1.
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. P 36.....	B 268.....	B 121.....	N.F. Med.....	D.F. 1.....	1
B 178.....	W 3494.....	B 122.....	Board 1st.....	" 2.....	
B 178a.....	D 400A.....	B 1915.....	do 2nd.....	" 3.....	3
B 179.....	D 400B.....	Form L.....	do 3rd.....	" 4.....	
B 179a.....	D 400C.....	Form K.....	do 4th.....	" 5.....	
B 179b.....	B 103.....	ME 2.....		" 6.....	
B 179c.....	B 120.....	M 93.....			

Date 9-12-1919 O. C. Discharge Depot J. H. Edwards

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

M. Lesittle

Particulars passed to Vocational Officer for information and action.

Date 9-12-1919 J. H. Edwards

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$ 60 00 / 100

(b) Clothing Supplied _____

Date 9-12-1919 O i/c. Re-clothing. J. H. Edwards

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 38 to his home at St Johns and Release Certificate No. 3881 issued.

Date

9-12-1919

R Edwards
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 23-12-1919

Date

9-12-1919

R Edwards
Depot Paymaster.

Discharge approved for

9-12-1919

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med	D.F. 1	1 form B
F 178	W 3494	B 122	Board 1st	" 2	1
F 178a	D 400A	B 1915	do 2nd	" 3	2
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B 179c	B 120	M 93			

Date

9-12-1919

R Edwards
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date

9-12-1919

R Edwards
O. C. Discharge Depot.

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

Date

Confidential Information

For the use of the Civil Re-establishment Committee.

Report No.	Class	No. of C.R.C. File	No. of H. Q. File
Name <u>Richard Costello</u> No. <u>4158</u> Rank <u>1st Lt</u> <u>R. N. R.</u> or Regiment			
Home Address <u>1-4 1/2 Weyford St</u>		City Address <u>St Johns</u>	
Age <u>19</u>	Height <u>5 ft 7 ins</u>	Complexion <u>fair</u>	Eyes <u>Blue</u> Hair <u>Brown</u> Character <u>Francis</u>
Date of enlistment <u>26-11-1917</u>	Where enlisted <u>St Johns</u>	Where seen service <u>France</u>	
Ship returned by <u>Rallye</u>	Date of return <u>7-11-1919</u>	How Long <u>2 years</u>	
Birthplace <u>St Johns</u>	Date of discharge <u>9-17-1919</u>	Religion <u>R.C.</u>	
Name and address next of kin <u>Harry Costello, Father</u>			
Cause of disability <u>Amputation</u>			
Condition which prevents the soldier from earning a full livelihood			

Degree of incapacity (Please state in fractions) Eng. Board..... Newfoundland Board.....

Probable duration of incapacity.....

Is final disability likely to prevent return to previous occupation?.....

Recommendation of Newfoundland Board.....

Members of Board.....

INFORMATION TO BE FURNISHED BY SAILOR OR SOLDIER.

DEPENDENTS	NAME	AGE	WHERE-IF EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1					
2					
3					
4					
5					

Occupation prior to enlistment..... Clerk

Regular trade or profession.....

Average earnings previous to enlistment \$700.00 Any other income.....

Name and address of last employer St Johns

If in receipt of sick benefits or other insurance—name of society..... Amt. per mo \$.....

At what age left school? 14 What grade, standard, &c., was he in? 6 Standard

Has he had any further education since leaving school, if so what?.....

Whether given Vocational Training while in Hospital in England. If so, what subjects?.....

If unable to follow previous occupation, name preference.....

References.....

Witness R McQuaid I declare that the above statement is correct.

Date 9-12-1919 Signature R Costello

Recommendation by Interviewer as to classes likely to be of use, and general remarks:

PENSION—Class..... Amount per month, \$..... Period granted for..... Dating from.....

First Payment date.....