



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 2667 Name John Archibald Crane Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>John Archibald Crane</u> |
| 2. What is your full Address? | 2. <u>S. G. Barrington street</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>24</u> Years <u>1</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Church</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... | 10. { Name Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes</u> |

FOR THE DURATION OF THE WAR

I, John Archibald Crane 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.

E. May 1st John Archibald Crane SIGNATURE OF RECRUIT.
Hayward Marshall Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.
The above questions were then read to the Recruit in my presence.
I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 1st day of May 1914
Signature of Attesting Officer NO. 100

† CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the.....
If enlisted by special authority, such will be attached to the original attestation.

Date.....191..... } Approving Officer.
Place.....

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

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

FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 2667 Name John Archibald Crane Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>John Archibald Crane</u> |
| 2. What is your full Address? | 2. <u>26. Bannerman st.</u> <u>St. John's</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>27</u> Years <u>11</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Electrician</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... } | 10. { Name |
| | Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes</u> |

I John Archibald Crane 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.

E. May 1st John Archibald Crane SIGNATURE OF RECRUIT.
Hayward Marshall Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.
The above questions were then read to the Recruit in my presence.
I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 1st day of May 1916
Signature of Attesting Officer H. O. ...

†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 compiled with. I accordingly approve, and appoint him to the ...
If enlisted by special authority, such will be attached to the original attestation.
Date.....191.....
Place..... } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name John Archibald Crane
 Apparent age 24 years 11 months. Height 5 feet 8 inches
 Chest Measurement { Girth when fully expanded 35½ inches
 Range of expansion 2½ inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Archibald Crane
26 Bannerman Street | Relationship Father
St John's Particulars as to Marriage

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

| (a) | (b) | (c) | (d) |
|-----|-----|-----|-----|
| | | | |

Particulars as to Children

| Christian Names | Date and Place of Birth |
|-----------------|-------------------------|
| | |

STATEMENT OF THE SERVICES

| Corps in which served | Rgt. or Depot | Promotion, Reductions, Casualties, &c. | Army Rank | Dates | Service not allowed to reckon for fixing the rate of pension | | Service in Reserve not allowed to reckon towards G. C. Pay | | Signature of Officers certifying correctness of entries |
|--|---------------|--|-----------|---------------|--|------|--|------|---|
| | | | | | Years | Days | Years | Days | |
| Service towards limited engagement reckons from _____ | | | | | | | | | |
| Joined at _____ on _____ | | | | | | | | | |
| <u>Discharged</u> | | <u>St John's</u> | | <u>4/4/17</u> | | | | | |
| Total Service forfeited as above..... | | | | | | | | | |
| Total Service towards Engagement to _____ [date of discharge] _____ years _____ days | | | | | | | | | |
| " " " Pension " _____ [" "] _____ " _____ " | | | | | | | | | |



This Form is to be used in connection with Pamph. M. E. (1)
N. F. 1915

If 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 *John Archibald Crane*
aged *74* conducted at *Ches*
Date: *Mar 20/16* Recruiting Officer:

NO OF TEST FINDING

- 1 *No*
- 2 *No*
- 3 *No*
- 4 *No*
- 5 *No*
- 6 *No*
- 7 *Yes*
- 8 *Yes*
- 9 *No*
- 10 *N*
- 11 *N*
- 12 *N*
- 13 *N*
- 14 *N*
- 15 *N*
- 16 *No*
- 17 *No*
- 18 *No*
- 19 *6/6 Boob*
- 20 *N*
- 21 *N*
- 22 *N*
- 23 *N*
- 24 *N*
- 25 *N*
- 26 *N*
- 27 *N*
- 28 *N*
- 29 *N*
- 30 *N*
- 31 *N*
- 32 *N*
- 33 *No*
- 34 *5'8"*
- 35 *132 lbs*
- 36 *33/5 1/2*
- 37 *1650 - 4/4*
- 38 *parents*
- 39 *parents*

Report on
1 dr.

2667

Mr Arch. Crane. 76 Bauernmarkt.

Signature of Medical Examiner: *William Holst*

Fit

C.R. 2667

Extract from Daily Orders part II, Depot
St. John's PROMOTIONS from June- 9th. 116

To be Lance Corporal.

2667

~~2552~~ Pte. J. Crane

C.R. 2667

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

2667 Pte. John A. Crane discharged Apr. 4th 1917, Medically
unfit

2667

C.R.

Extract from Daily Orders Part 11 Unit The Royal
Nfld. Regt., St. John's, March 14/17.

2667 L/Upl. Crane.

Attached to the Strength from March 14/17.

CR 2667

Extract from roll of Officers

N. C. O's and men DISCHARGED

from the Royal Newfoundland Regiment

| Regtl. # | rank | name | date | reason. |
|-----------------|-------------|-------------|-------------|----------------|
| 2667 | Pte. | CRANE JOHN | 4/3/17 | MED. UNFIT |

CR 2667

Extract from ~~XXXXXXXXXXXX~~ Telegram received from
London, dated February 19, 1917.

Scandinavian:

for repatriation
#B2667 Crane.

CR. 2667

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

2667L/Cpl. Crane J.

C.R. 2667

Extract of Depot Daily Orders part 11, dated
june 9th, 1916.

#2667 Pte. J. Crane.

To be Lance Corporal.

C.R. 2667

John A. Crane was attested for General
Service with the NEWFOUNDLAND REGIMENT ON **May 1st 1916**
Regimental No. **2667** was allotted to Ptes. **J.A. Crane**

AUTHORITY:

Record Ledger,

Dept. of Militia.

March 25th 1919

J. R. Corane.

C.R. 2667

P&Co

23

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

MEDICAL HISTORY

OF

Surname Crane Christian Name John Archibald

Table I.—GENERAL TABLE.

| Birthplace:—Parish | | County | |
|---|--|------------------|------------------|
| | | SPECIAL RESERVE. | REGULAR ARMY |
| Examined | on 24 day of April 1916 | on | day of 191 |
| | at St Johns | at | |
| Declared Age | 24 years 11 days | | years days |
| Trade or Occupation | clerk | | |
| Height | 5 feet 8 inches | | feet inches |
| Weight | 132 lbs. | | lbs. |
| Chest Measurement | Girth when fully expanded... 35 1/2 inches | | inches |
| | Range of expansion... 2 1/2 inches | | inches |
| Physical Development | | | |
| Vaccination Marks | Right | Left | Right |
| | Left | | Left |
| When Vaccinated | | | |
| Vision | R.E.—V= 6/6 | | R.E.—V= |
| | L.E.—V= 6/6 | | L.E.—V= |
| (a) Marks indicating congenital peculiarities or previous disease | (a) | | (a) |
| (b) Slight defects but not sufficient to Cause Rejection | (b) | | (b) |
| Approved by (Signature) | <i>Samuel Paterson</i> | | |
| (Rank) | Major Medical Officer. | | Medical Officer. |
| Enlisted | at St Johns | at | |
| | on 24 day of April 1916 | on | day of 191 |
| Joined on Enlistment | Corps. | Regtl. No. | Corps. |
| | 1st nfld Reg. | 2667 | |
| Transferred to | | | |
| Became non-effective by | | | |
| (Signature) | on day of 191 | on | day of 191 |
| (Rank) | | | |

COPY SENT TO
O.C. H.Q.
ST. JOHNS, N.F.L.D.
No. 1464/7
DATED FEB 16 1917



list in case of Warrant Officers treated in quarters.

on the cause, nature or treatment of the case likely to be of interest or of further use. In cases of
ns and re-admissions to hospital will be shown. The subsequent progress, including particulars
tment out of hospital, transfers, &c., will be given in the special syphilis case sheet.

Signature of Medical Officer

J. F. Lumball
Malton

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 2669 Lance Corp. J.A. Crane

(Substituting A.F. 1325). N.F.P/Ka

'C' Company. From 20-1-17 To 16-2-17 (Dates inclusive)

Embarked per S.S. Scandinavian

From Liverpool Date 16/2/17

DR. Classification (See procedure)

Draft No. 28 CR.

| Date | Pay Book Col. | Particulars | Rate | Dys | \$ | ¢ | £ | s | d | Date | Pay Book Col. | Particulars | Rate | Dys | \$ | ¢ | £ | s | d |
|-------|---------------|---------------------------|------|-----|------|---|---|----|------|------|---------------|--------------------------|------|-----|------|---|---|----|---|
| | 8 | Forfeited Pay | | | | | | | | | 1 | Pay | 100 | 28 | 2800 | | | | |
| | 9 | Allotments | 60 | 28 | 1680 | | | | | | 2 | Field Allowances | 10 | | 280 | | | | |
| | 10 | | | | | | | | | | 3 | Other Allowances | | | | | | | |
| 11/12 | | Total Stoppages | | | 1680 | | 3 | 90 | 1 | 4/5 | | Total | | | 3220 | | 6 | 12 | 4 |
| | 13 | Fines | | | | | | | | | 6a | | | | | | | | |
| | 14 | Clothing & Necessaries | | | | | | | | | | | | | | | | | |
| | 15 | Arms & Accoutrements | | | | | | | | | | | | | | | | | |
| | 16 | Barrack Damages | | | | | | | 6 | | | | | | | | | | |
| | 17 | Hospital Stoppages | | | | | | | | | | | | | | | | | |
| | 17a | Miscellaneous Stoppages | | | | | | | 18 | | | | | | | | | | |
| | 19 | Casual Payments | | | | | | | | | | | | | | | | | |
| | 20 | 1st Payment | | | | | | | 12 | | | | | | | | | | |
| | 21 | 2nd " | | | | | | | 12 | | | | | | | | | | |
| | 22 | 3rd " | | | | | | | 12 | | | | | | | | | | |
| | 23 | Final " | | | | | | | 152 | | | | | | | | | | |
| | 24 | Balance Debit Last Period | | | | | | | | | | | | | | | | | |
| | 28 | " Due by Paymaster | | | | | | | | | 27 | Balance Due to Paymaster | | | | | | | |
| | | | | | | | | | 6124 | | | | | | | | | | |

Newton Park School, Ayr.
February 15th 1917

CERTIFIED CORRECT.

G.F. Garland 2nd Lieut
 O.C. "C" Company.

CHECKED.
[Signature]
[Signature]

2/1st NEWFOUNDLAND REGIMENT.

L/corp. Crane. J. A.

No. 2667 is unlikely to be fit for Service with the

Expeditionary Force for *Six* months, on account of

Fracture Left Leg.

I recommend that he be posted to the Depôt at St. John's,
Newfoundland.

W. A. M. O.

Capt. R.A.M.C.

M.O.,

I/C. 2/1st Newfoundland Regt.

1/2
4. 2. 17.

A.Y.R.

FORM K

No 2600



3 1st. NEWFOUNDLAND REGIMENT 6

ALLOTMENTS

I, Mr. A. Crane, Regl. No. 2667

hereby agree, until further notification by me, and in similar official form to make an Allotment of
 Dollars and 60 Cents, per diem, from my Pay,
to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof
of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons
concerned, viz :

Allotment begins July 1st

| Identity Certificate No. | Whether Wife, Child, other Relative or Friend | NAME (in full) | ADDRESS | AMOUNT (each person) |
|--------------------------|---|---------------------------|-------------------------------------|----------------------|
| 286 | Mother | <u>Mrs Julia A. Craun</u> | <u>1/2 Barristerman St St Johns</u> | <u>60</u> |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total Allotment, \$ | | | | |

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

(Sig.) Charl. Ance Capt.

Officer Commanding
St Johns B. Company

July 6th 1916

(Sig.) J.A. Crane

(Rank) Lieut. Col.

Crane J. A.

2667

Ray Dept

STATEMENT OF ACCOUNT

No. 2667

Name Gerane J. A. Sp

56/1

| Date | Particulars | Ch.No. | Dr. | Cr. | Bal. |
|--------|--|--------|--------|--------|--------|
| Feb 28 | By Pay 12 days @ 1 ¹⁵ / ₂₄ | | | 13 80 | 13 80 |
| Mar 13 | " " 13 " @ 1 ¹⁵ / ₂₄ | | | 14 95 | 28 75 |
| 31 | " " 18 " @ 1 ⁹⁰ / ₂₄ | | | 34 20 | 62 95 |
| Apr 11 | " " 11 " @ 1 ⁹⁰ / ₂₄ | | | 7 60 | 70 55 |
| | Bonus | | | | |
| | Clothing | | | 13 30 | 83 85 |
| | | | | 25 00 | 108 85 |
| Mar 16 | To Pay | | | | |
| 22 | " " | 142 | 15 00 | | 93 85 |
| 31 | Allotment 43 days @ 60 | 144 | 38 30 | | 55 55 |
| | | | 25 80 | | |
| Apr 5 | To Pay | | | | 29 75 |
| | | 160 | 29 75 | | |
| | P. D. Pay. 91 days @ 1 ¹⁵ / ₂₄ to allowance | | | 104 65 | 104 65 |
| | | | | 20 00 | 124 65 |
| Dec 16 | To Pay | | | | |
| | Bonus | 6978 | 87 45 | | 37 20 |
| Feb 5 | To Pay | | 13 20 | | 24 00 |
| | | | 20 00 | | 4 00 |
| | | | 229 50 | 233 50 | 4 00 |

Signed A. Hoany ADM

13
1
1929

LAST PAY CERTIFICATE

**DUPLICATE
MAIL COPY** N.F.P./94

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

Regt No. 2765 Rank Pte. Name Beane E Unit 2nd Bn. R. Newfoundland who was Repatriated to Newfoundland on 20/7/18 Authority D O³ Cause

Posted.....

STATEMENT OF ACCOUNT

| | PARTICULARS | | | | | | PARTICULARS | | | | | |
|--------------------------------|-------------------------------------|---|---|-----|----|---|--------------------------------------|---|---|-----|----|----|
| PERIOD: From 9.6.18 To 20.7.18 | £ | s | d | £ | s | d | £ | s | d | £ | s | d |
| | Balance Dr. from <i>pe Pay Book</i> | | | 2 | 0 | 5 | Balance Cr. from <i>Re. Pay Book</i> | | | 1 | 15 | 4 |
| | Allotment 42 days @ 60¢ | | | 125 | 20 | 5 | Pay 42 days @ \$ 1.00 | | | 42 | 00 | |
| | Cash Payments: | | | | | | Field Allow 42 days @ \$.10¢ | | | 4 | 20 | |
| | | | | | | | | | | 46 | 20 | |
| | | | | | | | Other Allowances days @ \$ | | | 1 | 9 | 10 |
| | | | | | | | Other Credits: | | | | | |
| | Other Debits: | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | <i>Barracks Damages</i> | | | | | | | | | | | |
| | <i>Misc. Exp.</i> | | | | | | | | | | | |
| | Total Debits | | | | | | Total Credits | | | | | |
| | Balance due by Paymaster | | | 1 | 18 | 3 | Balance due to Paymaster | | | | | |
| | | | | 10 | 5 | 2 | | | | 110 | 5 | 2 |

CHECKED
CS
1918

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

Harleywood Camp Winchester 1918
(Place) *20/7/18* (Date)

Edw. Robt. J. Whitty Capt.
O.C. Company.

Made up/Checked in accordance with information received in the Pay & Record Office to 27 JUL 1918 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,
27 JUL 1918 191

A. S. Minns Maj.
Chief Paymaster & Officer i/c Records.



Proceedings on Discharge.

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

| | |
|---|--|
| No. <u>2667</u> | Army Rank <u>Lance Corporal</u> |
| Name <u>John Archibald Brane</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small> | |
| Corps <u>First 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>April 4th 1917</u> | |
| Place of discharge <u>St John's Nfld.</u> | |
| 1. Description at the time of discharge. | |
| Age <u>24</u> years <u>10</u> months Height <u>5</u> feet <u>8</u> inches Chest measure- ment { girth when fully expanded _____ ins. { range of expansion _____ ins. Complexion <u>fair</u> Eyes <u>blue</u> Hair <u>light brown</u> Trade <u>clerk</u> | Descriptive marks. |
| Intended place of residence { _____ (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>being no longer physically fit for war service</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. | |

To be filled in on the soldier quitting the Colours.

Army Form B. 2068 has been issued to*

* Strike out if not applicable.

St John's
April 23rd 1917

Lieut. J. M. Howley

Dear Sir.

Would you kindly let me know if I am getting any Pension from the 1st Regt Regiment. I signed a Pension paper on April 4th 1917 but have not received any money yet. I understand from the boys that got their discharges when I got mine that they have received their Pension Money.

If you would kindly let me know if I am getting any Pension you will greatly oblige yours Sincerely

Wm J. A. Lewis
26 Bannerman St
City

Certificate to be signed by the Soldier on date of 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.

Place 1. Sandover Road, Kaitumaee Sig. of Soldier ^{his} Andrew ~~Leane~~ _{Heath}

Date Oct. 23, 1918 Sig. of Witness Dr. A. O. Ke

April 9th. 1917

The Adjutant,
First Newfoundland Regiment,
Ayr, Scotland.

Dear Sir:-

re L/C John A. Crane, No. 2667

I have been directed to write you asking that you be good enough to let me have further particulars of the circumstances under which this man's disability arose. It appears from his Medical Report (A.F.B. 179) that he was attacked by three men of the Regiment. Is there anything on record to show that this attack was in any way provoked by Crane himself?

If such is the case, he would naturally, not be entitled to consideration by this Board, and it is with the desire to have full information in the matter that I am writing.

Yours truly,

Secretary

NEWFOUNDLAND.

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

Station ST. JOHN'S NFLD. Date SEPTEMBER 22nd., 1917.
 No. 2667 Age 25 Height 5'8"
 Rank LANCE CORPORAL Complexion FAIR
 Name CRANE, JOHN A. Eyes BLUE Hair LIGHT BROWN
 Unit 1ST NEWFOUNDLAND
 Address 26 BANNERMAN STREET Former Trade CLERK
 Enlisted at ST. JOHN'S NFLD. on APRIL 24th., 1916
 Disease or disability SIMPLE FRACTURE LEFT FEMUR

Present condition *Working at knowledge store since May 15th
 \$55⁰⁰ a month.
 Can move to right angle Walks well with very
 little limp.*

Estimated disability

less than 20%

Recommendation of Medical Board

Class

Members of Board

*W. H. ...
 J. Sinclair, Dat
 Army Macpherson, Major*

Approving Medical Officer.

Army Macpherson, Major.



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

MEDICAL HISTORY

OF Christian Name

Surname

Crane

John Archibald



Table I.—GENERAL TABLE.

| Birthplace:—Parish | | County | | | |
|---|---------------------------|---|---------------------|---------------|------------------|
| | | SPECIAL RESERVE. | | REGULAR ARMY. | |
| Examined | ... | on <i>24</i> day of <i>April</i> 191 <i>6</i> | at <i>St John's</i> | on | day of 191 |
| Declared age | ... | <i>24</i> years <i>11</i> days | | years | days |
| Trade or occupation | ... | <i>Clerk</i> | | | |
| Height | ... | <i>5</i> feet <i>8</i> inches | | feet | inches |
| Weight | ... | <i>132</i> lbs. | | | lbs. |
| Chest Measurement | Girth when fully expanded | <i>35 1/2</i> inches | | | inches |
| | Range of expansion | <i>2 1/2</i> inches | | | inches |
| Physical development | ... | | | | |
| Vaccination marks | Arm ... | | | | |
| | Number | | | | |
| When vaccinated | ... | | | | |
| Vision | ... | R.E.—V. = <i>6/6</i> | | R.E.—V. = | |
| | ... | L.E.—V. = <i>6/6</i> | | L.E.—V. = | |
| (a) Marks indicating congenital peculiarities or previous disease | | (a) | | (a) | |
| (b) Slight defects but not sufficient to cause rejection | | (b) | | (b) | |
| Approved by (Signature) | | <i>Sydney Montagu Paterson</i> | | | |
| (Rank) | | <i>716/67</i> | Medical Officer. | | Medical Officer. |
| Enlisted | ... | at <i>St John's</i> | | at | |
| | ... | on <i>24</i> day of <i>April</i> 191 <i>6</i> | | on | day of 191 |
| Joined on enlistment | ... | Corps | Regtl. No. | Corps | Regtl. No. |
| | ... | <i>P.N.F. Regt</i> | <i>2667</i> | | |
| Transferred to | ... | | | | |
| Became non-effective by | ... | | | | |
| | | on | day of 191 | on | day of 191 |
| (Signature) | | | | | |
| (Rank) | | | | | |

Table II.—Only for admissions to hospital or to the

| Name of hospital | Admitted to hospital | | | Discharged from hospital | | | Disease | Number of days in hospital | Remarks to syphilis, ad |
|------------------|----------------------|-------|------|--------------------------|-------|------|-----------------------------|----------------------------|-------------------------|
| | Day | Month | Year | Day | Month | Year | | | |
| Carrick House | | | | | | | | | |
| Red X Hospital | 7 | 9 | 16 | 23 | 11 | 16 | Simple fracture, left femur | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

Check list in the case of Warrant Officers treated in quarters.

Reporting on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of dismissions 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

Sgd
J. N. Turnbull
Major

St Johns
April 15th 1917

Hon. P. J. Mc Grath

Dear Sir

having returned from the 1st Newfoundland Regiment and have got my discharge through having a broken leg. I would like to know what the Pension Board intends to do.

I am unable to do any work that I was doing before I enlisted. So I am asking you knowing you are President of the Pension Committee to kindly let me know what the Pension Board intends doing for me. Hoping I am not putting you to any great trouble and hoping for a reply at an early date.

I am Yours Sincerely

John A. Crane
26 Dannerman Street
City



Medical Report on an Invalid.

7

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 *H. Johns*
 Date *Nov. 16/17*

1. Unit *1st. Newfoundland* 5. Age last birthday. *25*
 2. Regimental No. *2667* 6. Enlisted on *24 April 1916*
 3. Rank. *Lance Corp.* at *H. Johns*
 4. Name. *Ernie John Archibald* Former trade or occupation *black*

8. Disability

Simple fracture left femur.

9. History *This man was attacked by 3 men of 7th Coy. at 11.15 in August 1916. and leg broken. was in Hosp. 12 weeks. went after discharge from Hosp. fell broke leg again. in same place. was in Hosp. 7 weeks after this last fall.*

10. What is his present condition?

*True joint Quite stiff. Restored limbs
leg seems to be abt short. Saw 07/26*

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

11. Was sanatorium advised and refused?
operation

12. Do you recommend discharge as permanently unfit?

Signature

W. B. ...

Rank or Qualification

Leit

Remarks if any by Officer i/c Hospital.

Place

Signature

Date

Rank

Opinion of the Medical Board.

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

13. For pension purposes, the disability x *may* be considered as aggravated by:—
due to
- (a) ~~Service during this war.~~
 - (b) ~~Climate.~~
 - (c) Ordinary Military Service

Remarks if any:— *Left knee stiff, allowing only slight motion. The femur is stunted but much thickened. Can walk with a stiff knee*

14. At present his capacity for earning a full livelihood in the general labor market is lessened by:—
(Here the president should write in Total, 4-5, 3-5, 2-5, 1-5).

Remarks if any:— *40% out months*

15. Is the disability permanent?

No

16. Has the disability been aggravated by

- (a) Intemperance.
- (b) Misconduct.

17. The refusal of operation sanatorium is:—

- (a) Reasonable.
- (b) Unreasonable.

Remarks if any:—

18. We recommend discharge from ~~retention~~ the Army

Remarks if any:—

Signatures.

R. S. Fraser President
J. Burden
Pro. Major Paterson

Place

Date

Sp. Hqs.
Mar 21st 1917

APPROVED

Station

Date



Clay Macpherson
Administrative Medical Officer. *major*

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.

Place St John's John A. Brown (Sig. of Soldier).

Date April 5/17 Chas. O'Keefe (Sig. of Witness).

NEWFOUNDLAND.

CLAIM FOR PENSION

PENSION No. _____

EUROPEAN WAR.

NOTICE:—This Certificate is to be completed and returned IMMEDIATELY you receive it or payment of your pension will be delayed.

Name in full I hereby solemnly declare that my name is John A. Crane and that I was

Fill in rank and force a (rank) Lance Capt (1st. Nfld. Reg.) in 1st Newfoundlander Bn (R. C. R.) and that I am entitled to a Pension from the Colony of Newfoundland

Fill in place giving full postal address I am residing at (Street and number) 26 Bannerman St. Town of St John's Nfld. and request my next pension cheque be sent to this address.

John A. Crane SIGNATURE or mark of Pensioner.

Witness Chas. C. Ope

It is only during the months January and July that the following certificate MUST be completed.

This is to certify that the foregoing declaration and signature (or mark) were made by the above named pensioner in my presence this _____ day of _____ 19____, and I believe him to be the person he represents himself to be

To be signed by a Police, Magistrate or Notary Public, or Justice of the Peace, or Clergyman,

Signature.

Rank or position.

Postal Address.

Add any Remarks _____

\$ _____



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 *Private John Archibald*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *2667*
 Intended address *26 Bannerman St.*

Height on discharge *5* Feet *8*
 Color of hair on discharge *Light Brown*
 Complexion *Fair*
 Color of eyes *Blue*

Figure on discharge *Medium*
 Christian name of Father *Archibald*
 Christian name of Mother *Julia Ann*
 Wife's maiden name in full *-*
 Date and place of marriage *-*
 Christian names of children *-*

Place and date of soldier's birth. *Upper Island Cove. Com. Bay. 19 May. 1892*
 Nature and locality of civil employment required

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

(Soldier's signature in full) *John Archibald Craue*

(Rank) *Lt/Cpl*

Station *St Johns* Date *March 16/17*

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.

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

Station *St. Johns* Date *Mar. 16/17*

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 2669. Loane Corp. fa. Loane

(Substituting A.F.O. 1325) N.E.P/Ka

Company. From 20-1-17 To 16-2-17 (Dates inclusive)

Embarked per S.S. Scandinavia

From Liverpool Date 16/1/17

DR. Classification (See procedure)

Draft No. 28 CR.

| Date | Pay Book Col. | Particulars | Rate | Dys | £ | £ | £ | s | d | Date | Pay Book Col. | Particulars | Rate | Dys | £ | £ | £ | s | d | |
|-------|---------------|---------------------------------------|-----------|------------|-----------|-----------|-----------|----------|-----------|-----------|---------------|--------------------------|------|-----|-----|-----------|-----------|----------|-----------|----------|
| | 8 | Forfeited Pay | | | | | | | | | 1 | Pay | 10s | 128 | 129 | 40 | | | | |
| | 9 | Allotments <u>60</u> | <u>60</u> | <u>128</u> | <u>16</u> | <u>80</u> | | | | | 2 | Field Allowances | 10 | | | | | | | |
| | 10 | | | | | | | | | | 3 | Other Allowances | | | | | | | | |
| 11/12 | | Total Stoppages | | | <u>16</u> | <u>80</u> | <u>13</u> | <u>9</u> | <u>0</u> | 4/5 | Total ? | \$4.86 | 2/3 | | | <u>32</u> | <u>20</u> | <u>6</u> | <u>12</u> | <u>4</u> |
| 13 | | Fines | | | | | | | | 6a | | | | | | | | | | |
| 14 | | Clothing & Necessaries | | | | | | | | | | | | | | | | | | |
| 15 | | Arms & Accoutrements | | | | | | | | | | | | | | | | | | |
| 16 | | Barrack Damages | | | | | | | <u>6</u> | | | | | | | | | | | |
| 17 | | Hospital Stoppages | | | | | | | | | | | | | | | | | | |
| 17a | | Miscellaneous Stoppages <u>14y 5s</u> | | | | | | | <u>18</u> | | | | | | | | | | | |
| 19 | | Casual Payments | | | | | | | | | | | | | | | | | | |
| 20 | | 1st Payment - | | | | | | | <u>12</u> | | | | | | | | | | | |
| 21 | | 2nd " | | | | | | | <u>12</u> | | | | | | | | | | | |
| 22 | | 3rd " | | | | | | | <u>12</u> | | | | | | | | | | | |
| 23 | | Final " | | | | | | | <u>1</u> | <u>5</u> | <u>2</u> | | | | | | | | | |
| 24 | | Balance Debit Last Period | | | | | | | | | | | | | | | | | | |
| 28 | | " Due by Paymaster | | | | | | | <u>6</u> | <u>12</u> | <u>4</u> | | | | | | | | | |
| | | | | | | | | | | | 27 | Balance Due to Paymaster | | | | | | | | |

This account is in accordance with information received at the Pay & Record Office to 16/2/17 and is therefore subject to amendment if, and as may be found necessary.

£ 612 4

Newton Park School. Cyr.
February 15th 1917.

CERTIFIED CORRECT.

CHECKED.
W.P. [Signature]
[Signature]

W.F. Garland 2nd Lieut
O.C. " Company.

Certified True Copy
W. J. M. G.
 Capt. R.A.M.C.

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 Crane Christian Name John Archibald

TABLE I.—GENERAL TABLE.

Birthplace ... Parish _____ County _____

Examined... (on 24 day of April 1916
 at St. John's)

Declared Age ... 24 years 11 days.

Trade or occupation ... Clerk

Height ... 5 feet 8 inches.

Weight ... 132 lbs.

Chest Measurement { Girth when fully Expanded 35 1/2 inches.
 Range of Expansion 2 1/2 inches.

Physical Development ... _____

Vaccination { Arm ... Right _____ Left _____
 Marks { Number ... _____

When Vaccinated ... _____

Vision ... { R.E.—V= 6/16
 L.E.—V= 6/16

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

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

Approved by (Signature) Lionel Paterson
 (Rank) Major Medical Officer.

Enlisted ... { at St. John's
 on 24 day of April 1916.

| Corps. | Re. No. |
|------------------------|-------------|
| <u>1 K. Field Regt</u> | <u>2669</u> |
| | |
| | |

Became non-effective by _____
 on _____ day of _____ 1916.

(Signature) _____
 (Rank) _____

Table II. Summary of Hospital Admissions, Discharges, and Deaths of Warrant Officers in the Army, 1917-1918.

List in the case of Warrant Officers treated in quarters.

marks 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

J.B. Turnbull
Matron

2/1st NEWFOUNDLAND REGIMENT.

L/cpl Crane J. A.

No. *2667* is unlikely to be fit for Service with the

Expeditionary Force for *six* months, on account of

Fracture Left Leg

I recommend that he be posted to the Depôt at St. John's,
Newfoundland.

[Signature]
M.O.,
Capt. R.A.M.C.

I/C. 2/1st Newfoundland Regt.

1
2
4.2.17

AYR.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th. 1919.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any 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... *John Archibald* 2. Surname... *Craze Craze*

3. Rank... *Lt/Cpl* 4. Regtl. No. *2667*

5. Address in full to which future payments of gratuity are to ~~for~~ be forwarded... *John Archibald Craze*

..... *26 Baumerwan St. St. Johns*

6. Date of enlistment in the Regiment... *May 1st 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?..... *Not Applicable*

11. Were you on active service only in Nfld. 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 Nfld, or Overseas..... *339 days*

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

Not Applicable

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. *Received 91 days pay at \$1.15 per day \$104.65 \$87.15 of this was paid by the Militia office Dec. 17th 1918*

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. *Not Applicable*

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.? *No*..... If not give:- (a) Date of discharge, *April 4th 1917*..... (b) Reason for discharge, *Being no longer Physically fit for war service owing to injuries received while overseas*

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.....

Not Applicable

21. (a) Are you receiving treatment from the Civil Re-Establishment Com.

(b) If so, are you in receipt of full pay and allowances from that Committee.....

Not Applicable

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:

John Archibald Craue

Place of Residence:

26 Bannerman St. St. Johns

Declared before me at:

St. Johns, Nfld

This

3rd

day of

March 1919

John M. Carthy

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 |
|-----------|--------------|----------------|----------------------|----------------|
| | | | | |
| | | | <i>Nil</i> | |
| | | | | |

Certified Correct.

Paymaster.

No.



1st NEWFOUNDLAND REGIMENT

VOUCHER

In Acct. with #2667 L/Cpl. J.A. Crane Voucher No. 29079.
Cheque No. 29079.

Reg'l A/c No. Name C.B. Folio No.

Table with columns: Date, Reg'n No., Invoice No., Particulars, Amount. Includes entries for 'Bonus 1 week' and 'Civilian clothes'.

CERTIFICATION

Dissect Sheet No.

Recap. Sheet No. 335.

Signature of Paymaster

PAYMASTER

Checked by

RECEIPT

March 22nd, 1917.

Received from the 1st. NEWFOUNDLAND REGIMENT the sum of Thirty Eight Dollars

and Thirty Cents in Payment as above stated.

March 22nd 1917.

\$ 38.30

[Sig.] J.A. Crane

Squadron, Troop, Battery and Company Conduct Sheet.


Army Form B, 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. Forms
[588] W5017/2124 1000m 6/15ss 03 56 B. 121.
29.

Number of Sheet First
Signature of O. C. Company Arthur

Regiment of 1st Newfoundland

| Regimental Number and Name | | Enlistment | Trade | Good Conduct Badges, Service Pay or Proficiency Pay |
|----------------------------|---------------|---|---------------------|---|
| No. | <u>2667</u> | Age on <u>24</u> years <u>11</u> months | <u>Bank</u> | <u>Appointed L/C. 26/16</u> |
| Name <u>Greene J</u> | | Place and Date of Enlistment | Religion | |
| Joined | <u>Depot</u> | <u>St John's</u> <u>May 1 1916</u> | <u>of England</u> | |
| Joined | <u>5/9/16</u> | Period of | Place of Birth | |
| Joined | | with Colours <u>349</u> years | <u>Newfoundland</u> | |
| Joined | | with Reserve _____ years | | |



COPIES SENT TO
O.C. H.Q.
ST. JOHNS, N.F.L.D.

By whom awarded [Signature]
DATED FEB 16 1917

| Place | Date of Offence | Rank | Cases of Drunkenness | OFFENCE | Names of Witnesses | Punishment awarded | Date of award of credit (dependent with trial) | REMARKS |
|-------|-----------------|------|----------------------|------------------------|--------------------|--------------------|--|---------|
| | | | | <u>Medically Unfit</u> | <u>4</u> | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

To be carried over

Army Form B, 121.

Gauthier true copy

W. P. Griffin & Sons Ltd., Printers, Old Bailey, E.C.
 [886] W/017/2/21 1000m 6/1855 93 56

*Squad B Coy
 2nd Newfoundland Regiment
 NEWFOUNDLAND REGIMENT*

Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Number of Sheet *1*

Regiment of *2nd Newfoundland*

Signature of O. C. Company *[Signature]*

| | | | | | |
|--|--|--|---|-------------------------------|---|
| Regimental Number and Name <i>7661</i> | | Enlistment | | Trade <i>Clerk</i> | Good Conduct Badges, Service Pay or Proficiency Pay <i>Appointed Pl Corp. 8/6/16</i> |
| Age on <i>24</i> years " <i>0</i> " months | | Place and Date of Enlistment <i>Sigsbee 2/24/16</i> | | Religion <i>NS England</i> | |
| Joined <i>Depot</i> Date <i>5/9/16</i> | Period of with Colours _____ years. | | Place of Birth <i>Sigsbee, Nfld.</i> | | |
| Joined _____ Date _____ | with Reserve _____ years. | | | | |

| 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 |
|-------|-----------------|------|----------------------|---------|--------------------|--------------------|---|-----------------|---------|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

To be carried over

Army Form B. 121.

Squadron, Troop, Battery and Company Conduct Sheet.


Army Form B. 121.

W. P. Griffin & Sons Ltd., Printers, Old Bailey, E.C.
 (1052) W1936/1499 600m 6/1626 93 56

Forms
 B. 121.
 40.

Regiment of Newfoundland

Number of Sheet 1
 Signature of O. C. Company Sgt. W. P. [unclear]

| Regimental Number and Name | | Enlistment | | Trade | Good Conduct Badges, Service Pay or Proficiency Pay |
|----------------------------|-----------|------------------------------|-------|----------------|--|
| No. | Name | Age on | years | months | |
| 2667 | Grane, J. | 24 | 11 | 11 | appointed L/C. 8/6/16  |
| Joined | Date | Place and Date of Enlistment | | Religion | |
| Joined | Date | | | | |
| Joined | Date | Period of | | 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 |
|-------|-----------------|------|----------------------|---------|--------------------|--------------------|---|-----------------|---------|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

To be carried over

Army Form B. 121.

DEPARTMENT OF VETERANS AFFAIRS
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS
DEATH NOTIFICATION
AVIS DE DÉCÈS

TO:
À:

DATE August 19, 1977

NAME
NOM

Crane, John Archibald

Service No. 2667
Matricule No Royal Nfld Regt

CPC No.
CCP No

261231

WVA No.
AAC No

Information Received from:
Information reçue de:

C.P.C.

ST

Date of Death
Date du Décès

29-6-77

Place
Endroit

n/s

Distribution: WSR-DASG

VI - ASS
DO - BD
HO - BC

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