



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4926 Name William John Britch Corps Sea

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Wm J Britch
2. What is your full Address? 2. St Anthony
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 20 Years 6 Months
5. What is your Trade or Calling? 5. Fisherman
6. Are you Married? 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. No
8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
9. Are you willing to be enlisted for General Service? 9. Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? 10. Name
Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? 11. Yes

I, Wm John Britch 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.

A William John Britch SIGNATURE OF RECRUIT.

James C. Turner Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Wm John Britch 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 on this 6 day of May 1915.

Signature of Attesting Officer James Britch

†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 6 1915

Place St John } 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 Wm Jno Cutler
Apparent age 21 years 6 months. Height 5 feet 5 inches
Chest Measurement { Girth when fully expanded 36 1/2 inches
Range of expansion 4 inches
Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin W Jno Cutler
St Anthony | Relationship Father
Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or L'epot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Re-serve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from _____									
Joined at _____ on _____									
Total Service forfeited as above.....									

Total Service towards Engagement to _____ [date of discharge] _____ years _____ days
" " Pensions " _____ [" "] _____ " _____ "

5837 P



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4926 Name Wm J. Catch Corps Sea

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Wm J. Catch
2. What is your full Address? 2. A. Cattermole
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 20 Years 6 Months
5. What is your Trade or Calling? 5. Fisherman
6. Are you Married? 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7. No
8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
9. Are you willing to be enlisted for General Service?.. 9. Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?..... 10.) Name.....)
) Corp's.....)
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, Wm John Catch 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.

A William John Catch SIGNATURE OF RECRUIT.

William C. Turner Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Wm John Catch 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 A. Cattermole

on this 6 day of May 1915

Signature of Attesting Officer Wm J. Catch

†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 6 1915 } Approving Officer.

Place A. Cattermole }

† 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).....

OF
DESCRIPTIVE REPORT ON ENLISTMENT

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

5822 P

Name Wm James Cuten
 Apparent age 21 years 6 months. Height 5 feet 5 inches
 Chest Measurement { Girth when fully expanded 36 1/2 inches
 Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin W. James Cuten
St Anthony | Relationship Father
 Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or L'epot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>6-5-18</u>									
Joined <u>W. James</u> on <u>May 6-1918</u>									
Discharged <u>Sept 1919</u>									
<u>Embarked St John S.S. Columella to Halifax</u> <u>11-20-18</u>									
<u>Embarked for St. J. 23-11-18.</u>									
<u>Disembarked France 28-11-18.</u>									
<u>Joined British in the field 5-1-19</u>									
<u>Admitted to 1st Hosp Royal Infantry 18-19</u>									
<u>From priv to Lt. 1-3-1919</u>									
<u>Admitted 3rd L.I. Band with Promotion 3-19</u>									
<u>to be a private for demobilization 22-19</u>									
<u>Period of appeal class 1-6-1919</u>									
<u>Embarked for Halifax 12-19</u>									
<u>Demobilization 1-7-19</u>									
Total Service forfeited as above. <u>Demobilization 1-7-19</u>									
Total Service towards Engagement to <u>11-7-1919</u> (date of discharge) <u>1</u> years <u>60</u> days									
Pensions _____									

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

MEDICAL HISTORY

Surname Britch

OF
Christian Name Wm J.

Table I.—GENERAL TABLE.

Birthplace:—Parish St Anthony, Nfld. County Nfld.

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	on <u>6th</u> day of <u>May</u> 191 <u>8</u>	at <u>St John's, Nfld.</u>	on	day of 191
Declared Age	<u>21</u> ^{<u>6</u>} / _{<u>12</u>} years	<u>—</u> days	years	days
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet	<u>5</u> inches	feet	inches
Weight	<u>130</u> lbs.			lbs
Chest Measure-ment	Girth when fully expanded... <u>36 1/2</u> inches			inches
	Range of Expansion... <u>4</u> inches			inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	<u>/</u>	<u>/</u>		
When Vaccinated				
Vision	R.E.—V= <u>6/10</u>	L.E.—V= <u>6/10</u>	R.E.—V=	L.E.—V=
	(a)		(a)	
(a) Marks indicating congenital peculiarities or previous disease				
(b) Slight defects but not sufficient to cause rejection				
Approved by (Signature)	<u>J. J. Patterson</u>			
(Rank)	<u>Major</u>			
Enlisted	at <u>St John's, Nfld.</u>	at		
	on <u>6th</u> day of <u>May</u> 191 <u>8</u>	on	day of	191
Joined on Enlistment	Corps.	Regtl. No.	Corps	Regtl. No.
	<u>The Royal Nfld. Regt.</u>	<u>4926</u>		
Transferred to	ROYAL NEWFOUNDLAND REGIMENT.			
Became non-effective by	on	day of	on	day of
(Signature)		191		191
(Rank)				

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

MEDICAL HISTORY

Surname Critch OF Christian Name Wm J.

Table I.—GENERAL TABLE.

Birthplace:—Parish St Anthony, Nfld. County Nfld.

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	on <u>6th</u> day of <u>May</u> 191 <u>8</u>	at <u>St John's, Nfld.</u>	on	day of 191
Declared Age	<u>21 1/2</u> years	<u>—</u> days	years	days
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet	<u>5</u> inches	feet	inches
Weight		<u>130</u> lbs.		lbs
Chest Measurement	Girth when fully expanded... <u>36 1/2</u> inches		inches	
	Range of Expansion... <u>4</u> inches		inches	
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	<u>/</u>	<u>/</u>		
When Vaccinated				
Vision	R.E.—V= <u>6/10</u>	L.E.—V= <u>6/10</u>	R.E.—V=	L.E.—V=
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>James Patterson</u>			
(Rank)	<u>2nd Lt</u> Medical Officer.		Medical Officer.	
Enlisted	at <u>St John's, Nfld.</u>	on <u>6th</u> day of <u>May</u> 191 <u>8</u>	at	day of 191
Joined on Enlistment	Corps.	Regtl. No.	Corps	Regtl. No.
	<u>The Royal Nfld Regt.</u>	<u>4926</u>		
Transferred to	<u>ROYAL NEWFOUNDLAND REGIMENT.</u>			
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 hospitals 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				
3 rd LONDON GENERAL HOSPITAL WANDSWORTH.	3	3	19	3	4	19	Bronchitis	31	Reported sick in France. now no physical signs.	H. Brown Capt.

C.R. 4926

Extract of War Office List No. H.A. 35116 from Pay
& Record Office, London, dated Feb. 28th/19.

Admitted to 6 General Hospital Rouen, Feb. 18th/19.

INFLUENZA SEVERE.

#4926 Pte. W.Critch.

C.R. 4926

Extract from telegram from -ya. to Mil. dated March 5th., 1919.

Wandsworth Bronchitis: 4926 Critch.

C.R.

4926

Extract from Daily Orders Part 21 Unit The Royal WFLA.
Regt. "In the Field" 31-3-19.

4926 Pte. W.J. Critch

Invalided to U.K. 1-3-19 sick.

C.R. 4926

Extract from Nominal Roll received from Pay and Record Office
London, of Draft No. 56 from the 2nd., Battalion, Winchester
to the 1st., Battalion E. S. F., Embarked Southampton 23/11/18..

#4926 Pte. W. J. Critch.

C.R. 4926

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Reg St. John's, dated July 25, 1918.

The following man embarked for overseas on H.M.S.
"Columbella" July 22, 1918

#4926 Pte. William Critch.

C.R. 4926

Extract from Nominal Roll of casualties received from
Pay & Record Office, London, admitted to Wandsworth
Hospital 3/3/19 with Bronchitis.

#4926 Pte. W. CRITCH.

C.R. 4926

Extract of Casualties from Pay & Record Office, LONDON.

Dated April 5th/19.

The undermentioned man was ~~granted~~ discharged from 3rd London General Hospital, on 3/4/19 and was granted furlough from that date to 12/4/19.

Classified I Duty.

#4926, Pte. W. Critch.

Authority:

A.F.W. 3016, from O.C. 3rd London General Hospital.

C.R. 4926

Extract from Daily Orders Part 11 Depot, St. John's,

Date 9-6-19.

4926 Pte. Wm. Critch

Reported at Headquarters 1-6-19. NZ "Corsican"
which sailed Liverpool May 22/1919.

C.R. 4926

Extract from Daily Orders Part II Unit The Royal WFLA.
Regt. Depot St. John's, June 13th, 1919.

The discharge of the undermentioned on demobilization has
been ~~and~~ APPROVED by C.C. Discharge Depot, with effect
from 20-6-19.

4926 Pts. Wm. Critch.

C.R. 4926

Extract from Daily Orders Part II Royal Newfoundland Regt.
Depot St. John's dated 8-7-19.

The discharge of the undernoted on ~~assumed~~ demobilisation
has been CONFIRMED by officer i/o records from 4-7-19.

4926, Pte. Wm. Critch.

NEWFOUNDLAND POSTAL TELEGRAPHS.

Counter No. _____



Cable Connection with all the World

CR 4926

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 _____ Address Dept of Militia.

Line Number	Red	By	Sent	by	Check

Dated Mar 6th 1919

To William Critch, St. Anthony

Regret to inform you that Record Office, London, officially reports No. 4926, Private William Critch at 3rd. London General Hospital Wandsworth suffering from bronchitis

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

J.R Bennett

Chge Dept of Militia.

Minister of Militia.

FOR TYPEWRITER

C.R. 4926

March 20th, 1919

Mr. Williem Critch
St. Anthony

Dear Sir:-

I beg to inform you that additional information has to-day been received from the Visiting Committee of the Newfoundland War Contingent Association concerning the condition of No. 4926, Private Wm. John Critch, to the effect that he is now progressing favourably

Yours faithfully

Lient. Col

Chief Staff Officer.

Extract from Daily Orders part 11, from Unit The Royal
Rifles Regt. St. John's, dated May 7, 1918.

#4926 Pte. W. Critch.

Attended for General Service with the Royal Rifles Regt.
from 6.5.18

C.R. 4926

Extract from Daily Orders part II, Depot Winchester by Lieut.
Col. B.J. Braton, D.S.O., Officer Commanding 2nd. Battalion
dated 12-4-19.

The undernoted having reported back from the 1st. Battalion
is taken on the strength and posted to "A" Co., from 12-4-19.

12-4-19

#4926 Pte. W. Critch.

W Litch

CR 4926

~~P. 10~~

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (vi.) or (vii.), 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 Air Force Land 7. Former Trade or Occupation } Fitterman
2. Regt. No. 4926 3. Rank. Pvt. 7a. If the soldier claims previous service in Army, he should state—
4. Name Smith Wing (a) Former Regts. or Corps; with Regt. Nos.
- (Surname) (Christian Names)
5. Age last birthday. 27
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 a (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."
11. Date of origin of disability. July
12. Place of origin of disability. India
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. ...

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war ✓
 - (ii.) Previous active service.. . . . ✓
 - (iii.) Climate in pre-war service ✓
 - (iv.) Ordinary military service before the war ✓
 - (v.) Serious negligence or misconduct on the man's part. } ✓
- 14 (a). If, not due to any of these causes, to what specific condition do you attribute it? } ✓

In all cases such as facial injuries, eye, ear, nose and throat, disability, etc., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

to compliance of no disability

16. Was an operation performed? If so, when and what was its nature?
17. If not, was an operation advised and declined?
18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

Rehabilitation

20. Do you recommend—
- (a) Discharge as permanently unfit?
 - (b) Change to United Kingdom?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

W. P. Proctor
W. P. Proctor
 Medical Officer in charge of case.

Station *Hazley, Down*

Date *23/4/19*

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

10/3/19

To Chief Paymaster of
R.A.F. Dept files for
H 926) Pte W Litch
Sum of one Pound and
from acc of

O.K. 1-0-0 W Litch
M.R. 10/3/19 One Pound.

Receipt No. 1602

affixed
John
Capt



To Chief Paymaster.

Royal Newfoundland Regt.



Please pay to bearer the sum
of £2.

4926
OK £1-0-0
12/3/19 with found appended
R. 1629
Fitzner Gr.

St. Critchfield

3rd LONDON GENERAL HOSPITAL.
12 MAR 1919
MANDSWORTH, S.W. 18.

No. 4926 Rank Pte Name British War.

Pay	A. Wks	Total	N.F.
100	10	170	
Less Allotment		50	
Net Rate		60	

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£	s	d		
		From	To	From		To								
Balance					Balance					3	0	2		
Acquittance Rolls		4	13	6	Pay @ Net Rate	2/1/19	7/4/19	104	60	62	40	12	16	5
Hospital Advances					R. A.	3/4/19	12/4/19	10	2/1			1	0	10
A.B. 64.														
P. & R.O. Payments		7	0	0										
Cash R. 1904	3/4/19	5	3	0	for bal.									
					£ 5-3-11									

NEWFOUNDLAND CONTINGENT
 BAYNE'S BILL No.
 11-18-6
 C.M.
 8/2/19

101125
 No. of Quarters

Furlough pass

PHONE 4-600 NORTH

Midland..

Grand....

Hotel.....

London...

forwarded to
Queens Hotel

on 4/4/19

Dear

Enclosed you will

NEW HAVEN AND CONTINENT
PAY & RECEIPT OFFICE

Encl. No. 2607

Rec'd - 4 APR 1919

Ack'd

Dep. Nos. 00

Find the Pass of
4926 - W.

Crutch. He left

it by mistake at the
Pay Office. He was

supposed to report
again at Hospital

and PTH. Squire's
undertook to deliver

it to him. Unfortunately
he did not turn up at
and we went to St.

Panacas Station to

see if we could find
him there but no success.
From There we telephoned
to the Pay office for
a advice but got no
satisfaction so we
are now returning it to
you and it will be more
convenient to restore it
to him from there.

Sincerely Yours
4080 Pte C. Carter

Pte. G. Quinn

3rd London General Hospital
March 20th 1919

From a/c. a/c.
Private to Britch 4926
R.N.F.L.D.

The sum of one pound

Signature

3 RD LC	HOSPITAL
No. _____	
R. 0 MAR 1919	
WANDE	W. 18

Alfred
W. 18

U.K. f 1-0-0
M.R. 20/3/19
Receipt No 1749

L & a

To Chief paymaster
of Royal Artillery Regt.
Please pay to bearer
the sum of £1.00 and
deduct from account.



~~H. Birch~~

OK #1
13/3/19
Receipt



22a

14/3/19

To: Chief Paymaster of
Royal Regiment - Please
Pay to W Critch
the Sum of one pound
one pence
and deduct
from acc

W Critch
14/3/19



W Critch
OK £1-0-0 WA
14/3/19
R 1660

29/3/19

To Chief. P. W. R. CRIPPER

Please Pay Dear Sir

the sum of one pound
and deduct from accounts
to W. Birch no 4926.

Approved

[Signature]

29 MAR 1919
No. 29 MAR 1919

29/3/19
Receipt. 1866
27a

25/3/19

~~Chief Magistrate of
Royal W. Regmt.~~

~~Please pay to bearer.
(4926) Ste W. Catch
the sum of one pound.
and interest. per account
J. P. Catch.~~

approved
Christmas

880 LCID
No. 2573/19
WANTED
MAY 18 1899
MAY 18 1899
MAY 18 1899

Mr. J. P. Catch
1809
10-0-0
25/3/19
1809

Critch, D^e

4926

Ray sept

July 4, 1919

#4926 Pte. William J. Critch.

St. Anthony.

Dear Sir:-

Please find enclosed Discharge

Certificate No. 2606.

Yours truly

Captain
Paymaster & C. i /o Records.

The Royal Mfld. Regiment

DEMOBILIZATION

No. 4926 Rank

Name *Couch W*

Warned for demobilization on

JUN 6 1919



NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 90 Sent by _____ Rec'd by _____ Check 15/-

Place from Springdale 30



4926

To Ray of Keecard
Hylo Regt

Please send war service
money of pte John
Critch here instead
of St. Anthony.

Wm William I. Critch

NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 1500 Sent by Springdale 2 Paid by 10pds. CheckPlease from Min of militia
To Min of militia

No money received two months
account private John Litch advise

Wm. Litch.

#4926

P. K. Anthony

July 5, 1919

#1926 Pto. Willie Critch,

St. Anthony.

Dear Sir:-

Referring to your application I enclose
cheque for seventy dollars (\$70.00), being amount
of first payment due you on account of the War
Service Gratuity.

Yours truly

Captain
Paymaster & C. i. c Records.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

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

Christian name *William* 2. Surname *Critch*

3. Rank *Cpl.* 4. Reg't. No. *14926*

5. Address in full to which future payments of gratuity are to be forwarded..... *St. Anthony, District of St. Basile*

6. Date of enlistment in the Regiment..... *May 6/18*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued immediately prior to your discharge..... *No*

8. Relationship of such dependents..... *—*

9. Address in full of such dependents..... *—*

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

11. Were you on active service only in Nfld. If so, give dates and particulars of such service..... *Overseas*

12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *From May 6/18 to June 6/19*

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

No.

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

Clothing allowance and backpay 85.69

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

No

16. Have you, during the present war, served in the Imperial Forces?

No

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.

No

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

No

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

19. Are you now leaving in the Regt. *No* If not give:- (a) Date of discharge *June 6/19* (b) Reason for discharge

Temporary

Demobilization

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.

France, Belgium + Germany - from Jan. 1918 to March 2/19

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.

No

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: *W. Carrol*
 Place of Residence: *St. Anthony, St. Barb*
 Declared before me at: *St. John, Nfld*
 This *6th* day of *June* 19*19*

John M. Coghlan
 Signature of Barrister of the
 Supreme Court, Notary Public, Justice of the
 Peace, or Commissioner of affidavits.

POST DISCHARGE PAY.				Net amount due
Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	
.....
.....
.....
Certified correct.				Paymaster



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

William Britch

Regiment from which discharged

Royal Newfoundland

Regimental number

4926

Intended address

St Anthony

Height on discharge

5. 6.

Feet

Color of hair on discharge

Black

Complexion

Fair

Color of eyes

Brown

Descriptive Marks

Figure on discharge

Medium

Christian name of Father

William

Christian name of Mother

Fannie

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth

*St Anthony
Newfoundland**4th November 1896*

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)

*W. Britch**W*

(Rank)

Station

ST. JOHN'S.

Date

4-6-99

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

Station

Date



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 resume former Occupation

Signature of Man.

Reg. No.

W. B. Stet

Signature of the Vocational Officer or his Representative.

Place

St Johns

Date

6-6-19

191

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4926 Rank Pt Name Critch Wm J
 Date of Enlistment 6-5-18 Address St Anthony District St. Bon's
 Occupation Fisherman Classification for Discharge E 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
B 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 5-6-19 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation. W. Critch

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable. \$60.00

(b) Clothing Supplied Attest Const Lt

Date 6-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 71, 1480 to his home at St Anthony and Release Certificate No. 2367 issued.

Date 6-6-19

J.A. Snow Capt
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 4-7-19

Date 6-6-19

J.W. [Signature]
Depot Paymaster.

Discharge approved for 20-6-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1	1
E 178	W 3494	B 122	Board 1st	" 2	2 Form: B.
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 6-6-19

J.A. Snow Capt
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
R.H. Sait Capt.

Date JUN 20 1919

O. C. Discharge Depot.

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

Date

The Royal Newfoundland Regiment

Class for Demobilization:—

1
4

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *4-5-79*

Regimental No. *4926...*

Name *Critch* *Wm J.*

Address *St. Anthony*

Present Medical Category *A1*

Recommended for:— { (a) Immediate discharge
(b) ~~Standing Medical Board~~

Members of Board {

R.H. Lait
.....

O.C. Discharge Depot.

L. Paterson
.....

Senior Medical Officer

Geo. Burden
.....

M.O. Depot

Receipt for Army Book 64

No. *4926* NAME. *Britch*

To Certify that I have received the AB 64 of the above
named soldier.

Name. *W. J. Britch*

Date. *August 2*

Place. *St. Anthony*

N.B. For completion and return to the Department of Militia
Insert in corner of envelope "AB 64"



Casualty Form - Active Service.

Regiment or Corps *R. Newfoundland*
 Rank *Pte* Surname *Britch* Christian Name *Wm J.*
 Religion *S. Army* Age on Enlistment *21* years
 Enlisted (a) *6/5/18* Terms of Service (a) *Duration* Service reckons from *6 months*
 Date of promotion to present rank Date of appointment to lance rate
 Extended [] Re-engaged [] Qualification (b)
 Occupation *Fisherman* or Corps Trade and Rate
 Signature of Officer. *W. J. ...*



Report		Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
			Embarked ...		
			Disembarked... <i>28 NOV 1918</i>		
			Joined Batt. <i>5</i>	<i>JAN 1919</i>	
	<i>6 Gen. Adv. 'The sev.</i>			<i>18/19</i>	<i>H43516</i>
	<i>Ex 6 Gen. to England</i>			<i>11/3/19</i>	<i>W3083</i>
	<i>by "Boorkha"</i>				
			<i>Capt. J. ...</i>		
			<i>1st Lt. ...</i>		

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered in the column "Remarks".
 (b) Signaller, Shoeing-Smith, &c. (17591.) W.C. W 1887-P 1194. 1,000,000. 6/18. D & S. Form B/103. (E. 1256.)

Neck of Skin: Father: *Britch Williams*; *St. Anthony*; *N.F.S.D.*

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121.
39.Number of Sheet One

Regiment of

Royal Newfoundland

Signature of O. C. Company

Lt James

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	
No.		Age on	years	months		
<u>4926</u>	<u>Arthur W. Jones</u>	<u>21</u>			<u>Fisherman</u>	
Joined	Date	Place and Date of Enlistment			Religion	
Joined	Date	<u>6.5.18</u>			<u>S. A.</u>	
Joined	Date	Period of } with Colours / 60 years. with Reserve / 365 years.			Place of Birth	
Joined	Date				<u>St Aubrey</u>	

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>Demobilized</u>	<u>St John's</u>	<u>4</u>	<u>7</u>		<u>19</u>

To be carried over

Army Form B. 121.

Demobilisation Form 2.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4926 Rank Plt Name Butch W

Intended place of residence St Anthony

2. Occupation Fisherman

Classification of soldier E Medical Category A 2

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 for H. M. H.

Date JUN 6 1919 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 and date ST. JOHN'S W. Butch

JUN 6 1919 Signature of soldier
W. Butch
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 and Date ST. JOHN'S W. Butch

JUN 6 1919 Signature of soldier
James O'Rourke
Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 6-5-18 No of days on Military

Discharged from service 1906-19 Feb 14 days Service 425

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S R. H. Sait Capt

Date JUN 20 1919 Officer Commanding Discharge Depot
The Royal Newfoundland Regiment.

Date

CONFIRMATION OF DISCHARGE

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

Place A. Jones, Mica A. Bowley Capt

Date July 4/1919 Officer in Charge
The Royal Newfoundland Regiment

A 713 20 19/2606

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (vi), 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 be considered 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 Horse Artillery* Former Trade or Occupation } *fisherman*
2. Regt. No. *4926* 3. Rank..... *plte.* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Critch*..... *William J.* (a) Former Regts. or Corps; with Regt. Nos.
- (Surname) (Christian Name)
5. Age last birthday..... *22*
6. Posted for duty on..... at..... in category (or grade).....
7. 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
- (b) Where
- (c) Opinion of Court
- (d) Particulars of Pension or Gratuity (if any)

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 a (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 general 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."

11. Date of origin of disability. *Feb*
12. Place of origin of disability. *nt*
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. *nt*

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war
- (ii.) Previous active service.
- (iii.) Climate in pre-war service
- (iv.) Ordinary military service before the war
- (v.) Serious negligence or misconduct on the man's part.
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, etc., a specialist's report is to be attached with radiographs where possible and in cases of amputation the exact position should be stated.

15. What is his present condition?

(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

The Complaint of the disability

16. Was an operation performed? If so, when and what was its nature?
17. If not, was an operation advised and declined?
18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

Repatriation

20. Do you recommend—

- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

W. P. Proenier - Capt RMC

Station *Hazley Barr*

Medical Officer in charge of case.

Date *26/4/19*

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

24926

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 11926 Rank Pr Name Capt. Wm J. Barke
 Date of Enlistment 6-5-18 Address St Anthony District St. Barbe
 Occupation Butlerman Classification for Discharge E 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 5-6-19 for W. Barke O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am.....in a position to resume civilian occupation. W. Barke

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable. \$60.00
- (b) Clothing Supplied W. Barke Lt

Date 6-6-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *P. 1480* to his home at *St Anthony* and Release Certificate No. *2367* issued.

Date *6-6-19* *J.A. Snow Capt*
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 *4-7-19*

Date *1-6-19* *J.H. Winstall*
Depot Paymaster.

Discharge approved for *20-6-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med	D.F. 1
B 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		

Form B

Date *6-6-19* *J.A. Snow Capt*
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

R.H. Jait Capt

Date *JUN 20 1919* O. C. Discharge Depot.

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

Date *June 11 1919* *James*

Reg. No. *4926* Rank *Pfc* Name *Critch Wm J*
Attested Address *St Anthony*
Allotment Allottee
Date of Allotment Returned from Overseas *29-5-19*
Returned on S.S. *Corsican* Cause *Discharge*

5-6-19 PASSED TO DEMOBILIZATION OFFICER
20-6-19 ~~DISCHARGE~~ APPROVED ON DEMOBILIZATION.