

E. Crooke

653

P.R. 10



No. _____

Date May 30th 1916

(1) To the Officer i/o Records,

58 Victoria St-
SW. (Station.)

(2) The Officer Commanding,

Newfoundland Contingent
Ays. (Station.)

(3) The Paymaster,

58 Victoria St-
SW. (Station.)

Regimental No. 653.

Rank and Name Pte. Cooke T.

Regiment or Corps 1st Newfoundlands.

has been granted a furlough from May 30th to June 8th

His address while on leave will be:—

58 Victoria St. S.W.

This man has been furnished with a Warrant 5 Victoria
and given an advance of £ 1. (one pound)
I consider he is fit for ^{Duty} ~~overseas~~ ^{Home} ~~service~~ ^{at home}
overseas but fit for service at home.

Officer in charge A. Hope Gosse Capt. R.A.M.C.T.
3rd London General Hospital,
WANDSWORTH, S.W. (Station.)

* Strike out that which is inapplicable.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office.

27 Elba St Apr
Jan 31 1914

This is to Certify

That Margaret Thomson
has been in my employment for the
last two years

During which time
we found her honest obedient
& obliging, she also performed
her duties to my satisfaction

I can well recommend her
to anyone requiring her Service

Mrs Mc Cheskey

COPY

H.F.P/L. Allotments.

HEADQUARTERS CONTINGENT.

CANCELLATION OF ALLOTMENTS.

NEWSPRINT
80, VICTORIA ST.
LONDON, S.W.
SEP 26 1916
P. & G. OFFICE

I, (No) 653 (Rank) P² (Name) T. J. Croke

heroby apply for cancellation of Allotment made by me on

H.F.K. No 653 dated January 23/15 in favor

of Edward Croke - St. John's WFLD for 1 - sts 60

per diem. Such cancellation to take place from (inclusive)

the 2nd day of Sept. October 1916

I agree to accept all risks and consequences of this application failing to reach Headquarters St. John's by mail in time to become operative at above mentioned cancelling date and that in the event of such non-delivery by mail and thereby the allotment continuing to be paid to the Allottee I also agree to such further stoppages as may be thereby necessary being made against me in the pay books or otherwise to refund the overdraw amount or amounts.

Dated Aug 18.

19. 6. 1916

T. Croke

Allotter

Approved and Witnessed.

W. P. [Signature]

O.C. " F " Company

Attention is drawn to the fact that Allotments are payable by Headquarters by calendar month and therefore reasonable time must be allowed for the delivery of this request at St. John's in order to become operative.

To be made out in triplicate and sent to Paymaster & Officer i/c Records, who will forward Original by first mail, duplicate by the following and retain triplicate.

NOTED
A. Martin
C. Q. M. S.
Date 20/9/16
Co'y

NOTED
J. H. Bennett
C. Q. M. S.
Date Sept 19/16
Co'y

ORIGINAL N.F.S./L. Allotments, Contingent
NEWFOUNDLAND CONTINGENT



CANCELLATION OF ALLOTMENTS.

I, (No) 653 (Rank) P^{2c} (Name) T. J. Croke

hereby apply for cancellation of Allotment made by me on
N.F.S. No 653 dated January 23/15 in favor
of Edward Croke - 2nd Lieut - R.F.D. for £ 60
per diem. Such cancellation to take place from (inclusive)
the 29th day of Sept. October 1916
30

I agree to accept all risks and consequences of this application
failing to reach Headquarters St. John's by mail in time to become operative
at above mentioned cancelling date and that in the event of such non-delivery
by mail and thereby the allotment continuing to be paid to the Allottee I
also agree to such further stoppages as may be thereby necessary being made
against me in the pay books or otherwise to refund the overdraw amount or
amounts.

Dated Aug - 1916
19-9-1916

T. Croke
Allotter

Approved and Witnessed.
W. B. [Signature]
O.C. "F" Company

Attention is drawn to the fact that Allotments are payable by
Headquarters by calendar month and therefore reasonable time must be
allowed for the delivery of this request at St. John's in order to
become operative.

To be made out in triplicate and sent to Paymaster & Officer
i/c Records, who will forward Original by first mail, duplicate by the
following and retain triplicate.

NOTED
A. Maskin
C.Q.M.S.
Date 29/9/16 Coy

NOTED
J. H. Bevinster
C.Q.M.S.
Date 29/9/16 Coy

3921/386

O. G.,

2/1st. Newfoundland Regt.

Newton-on-Ayr.

F.M/W.F. September 21st 6.

22/9/16.

ALLOTMENTS.

Cancellation Forms relating to
Allotments of:-

653, Pte. T. J. Croke,

958, " R. Saunders

are returned for signature of
C. Q. M. S., "F" Company, please.

Capt.
Paymaster & O 1/c Records.

*Herewith signature
of Cpl. M. S. & P. C.*

*(Sd) Clark Capt
etc.*

3546

23/9/16.

No: 3484

NEWFOUNDLAND CONTINGENT

N.F.P. /55.



Pay & Record Office,
58, Victoria Street,
London, S.W. 1,

To:

Mrs. M. Crooke

24 Russell St.

Ayr. W.B.

March 1st 1918

Reference

Separation Allowance 653 Pte Crooke

Herewith

Marriage and Registrar's certificates, as
requested.

Please acknowledge receipt hereon.

(Sig.) M^{rs} M. Crooke.

(Date) 7th / 3 / 18

A. A. Munro Maj.

Chief Paymaster & Officer i/c Records.

Adjutant
of 11th Regt.

Certified

correct.

G. J. Hesse of the

Co. F. Coy

4/12/17.

ENTER
PAY LEDGER
NEWARK
F

Mr W. E. Crooke.
6/0 Day.
No 60 St Cross Road
Winchester

653 J. E. Crooke.

Dear Sir

would you please send my
money from this month to my new address
and oblige

Yours
Mr. W. E. Crooke.

✓ 8705

Noted Records Ledger Jh
" Nom Roll. . . .

~~Noted~~
The

Asst

6536rotee

NEWFOUNDLAND CONTINGENT. PAY & RECORD OFFICE.	
Ref. Nos. IN	3495
Rec'd	17 APR 1918
Ack'd	Ans'd 6704/1/1/5/18
Ref. Nos. OUT	
ACTED UPON	
EMAL CH	
Comd	
P & C	
R & C	29.4.18 Asst
B & E	
P.S.	

10th/4/18

[Handwritten signature]

M. E.

No 7 Croke

No 10 Edwards

No 3 Postgate Lane

Winchester

Dear Sir,

Please send my next months money to address above, as this months money went to my address in I day. I will be very much obliged if you send it to my new address.

6704/1

A not oblige

Yours
M. E. Croke

[Large handwritten signature]

17/4/18. W. M. M.

ack PC

Marini

653

563

28th/3/18

M^{rs}. M. E. Crobe

Dear Sir.

I beg to inform you
that I have changed my
address from
84 Russell St

Ayr.

To 3 Westgate Lane
Winchester

And oblige

M^{rs} Crobe.

RECORDED & CONTINGENT,
PAY & RECORD OFFICE.

✓ 2915

29 MAR 1918

Rec'd

Ack'd

Ref. Nos: UUT

Ans'd 5060/1/3/4/18

ours

FORWARDED UPON BY

29/3/18

WRCM

R & G

B & E

P.S.

Passed to Record

ack PC

AM

Medical Report on an Invalid.

Station Hazeley Down Camp
 Date 28/11/18

1. Unit Royal Newfoundland 7. Former Trade }
 or Occupation }
2. Regimental No. 653 7A. If with previous service in Army, state—
3. Rank StE (a) Former Unit;
4. Name CROAKE (b) Regimental No.;
5. Age last birthday (c) Date of Discharge;
6. Enlisted { on (d) Cause of Discharge.
 at

8. Disability in respect of which invaliding is Proposed.

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

None

Statement of Case.

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

9. Date of origin of disability.
10. Place of origin of disability. Dardanelles.
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.
Boarded 1511 June 1918 HAZELEY DOWN CAMP.

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

attributed to active service

COPIES SENT		
To	No.	DATE
M. OF M.	<u>534/88</u>	<u>7.4.19</u>
O.C. 1ST. BN.		
" 2ND. BN.		

13. What is his present condition?

*Left leg toe amputated terminal
Right second toe amputated
Left foot slightly flat.*

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

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

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

15. Was a Court of Inquiry held on the injury?

- If so—(a) When?
(b) Where?
(c) Opinion?

16. Was an operation performed? If so, what?

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

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

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

20. Do you recommend—
(a) Discharge as permanently unfit, or
(b) Change to England?

*Amputation (2)
M.R.M.
A.C.*

ROYAL NEWFOUNDLAND REG

Officer in medical charge of case.

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

Station _____

Officer in charge of Hospital.

Date _____

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

† Delete this word if no exceptions are to be made.

NEWFOUNDLAND CONTINGENTSEPARATION ALLOWANCETo be Used in the Case of Men Already MarriedThe Officer Commanding Lieut. Col. Whitaker,

I have the honour to request permission to my past marriage,
and your recommendation for the issue of Separation Allowance to
my wife, Mrs J. J. Croke.

of Apr.to whom I was married on 19th February 1917 at Apr.

My wife's maiden name was Margaret, E. Thomas
Address at time of marriage 72 Russell St Occupation Tailor

Name and address of parents or
guardian at time of marriage M^r Dwyer

I attach hereby my marriage certificate, together with the
necessary certificate as to my wife's character and general
worthiness

from M^r and M^{rs} M^{rs} Cleary Publicans

I am not in receipt of a salary from the Newfoundland
Government in addition to my Military Pay.

I have the honour to be, Sir,
Your obedient Servant,

MARRIAGE CERTIFICATE

RETURNED 28/2/18

Thomas J. Croke
Regtl No 653 Rank Private

I hereby approve of the marriage of the above named Soldier,
and recommend that separation allowance be granted to his wife.

I have personally investigated the above application and am
satisfied as to the wife's good character and consider her
worthy to receive the benefits of Separation Allowance.

The Soldier has assigned at least 50% of his pay in favour
of his wife.

*CERTIFIED COPY OF PT. II ORDERS No. 332 Dated 19th Dec. 1917PERMISSION TO MARRY653 Pte. T.Croke.The marginally named is granted permission
to marry with effect 15th Feb. 1917

*(Auth.)

The written evidence upon which my decision is based is
enclosed for your disposal together with the marriage certificate.

Signature A. Whitaker

Rank _____

Dated Dec. 18th 1917

Commanding _____

This document must be signed personally by the Officer Commanding
the Unit. Soldier's application must accompany this form.

No. 4227

N.F.P./11

NEWFOUNDLAND CONTINGENT

ALLOTMENT

I, (No.) 653 (Rank) Pte. (Name) Brook, J.
 hereby agree, until further notification by me, and in required form,
 to make an allotment of _____ dollars and 50 cents
 per diem, from my pay, to and for the benefit of the undermentioned
 Person and/or Persons. Such payments to be made on proof of identity
 of the Person and/or Persons concerned, viz:-

Whether Wife Child, other Relative or Friend	NAME (In Full.)	ADDRESS	AMOUNT (Each Person)	
			\$	c
wife	Margaret Elvira Brook	84 Russell St. Ayr.		50
				50

This Allotment to take effect from and including Jan. 1st 1918

NOTE:- This Form must be completed and signed by the Soldier, counter-
 signed by the Officer Commanding his Company, and forwarded to the
 Paymaster in accordance with P. & R.O. C.L./10, 9/12/16.

(Sig.) C. Hunter J.R.
 Officer Commanding
 "2" Company.

Dated at

Newton Park School, Ayr.
Dec. 12th 1917

Noted
W. B. R. M. C.
1/1/18

(Sig.) J. Brook
 Allotter.



Mrs Margaret Eliza
~~Edwards~~
Cooke



Mrs Margaret Eliza
~~Ed. C. C. C.~~

NEWFOUNDLAND CONTINGENT

APPLICATION FOR OVERSEAS TRANSPORT

1. Name in full

Surname

CROKE

Christian Names

Margaret Eliza

2. Postal and Telegraphic Address.

60 St Cross RoadWinchester

3. Names and ages of all travelling with you except yourself.

Patricia Kate Croke3 months

4. Your last address in Newfoundland

5. When did you leave Newfoundland, and for what reason did you come here?

6. If Relation or Dependent of a Member of the Newfoundland Contingent state relationship, Regtl No., and Rank.

AuslandNo 653 Private

7. Your Destination in Newfoundland.

St John's

8. What arrangements have you made for Passport.

9. Can you leave for Newfoundland on 24 hours notice by telegram?

Yes.

10. No Government or Department can accept responsibility for safety of passengers or baggage, but it is understood that the usual ocean passengers' baggage may be carried.

Date

27/3/19

Signature

M^{rs} Margaret E. Croke

THIS FORM TO BE COMPLETED AND RETURNED TO:

Chief Paymaster & Officer i/c Records,
Newfoundland Contingent,
58, Victoria Street, London, S.W. 1.

60 St Cross Rd.

Winchester

16/1/19.

653 Pte J. Croke

Dear Sir,

I am forwarding my passports on
as my husband has got permission not to
go with this draft owing to my health
as I am not fit to travel.

My husband officer send word to tell
me to send the passports on.

I am your

M^{rs} M. E. Croke.

NEWFOUNDLAND CONTINGENT, PAY & RECORDS OFFICE.	
Ref Nos	631
Date	19 JAN 1919
[Large handwritten signature]	
END	
COPIES	
RECORDED	
INDEXED	
FILED	

U

Crooke T.

653

Ray Dept

May 16, 1919

#653 Pte. Thomas J. Croke,
#56 Baron St.,
City.

Dear Sir:-

Please find enclosed "Discharge Certificate
No. 2202."

Yours truly

Captain,
Paymaster & Officer i/c Records

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 653 Rank Pvt Name Croke Thomas
 Intended place of residence 36 Banon St. St John

2. Occupation Labourer
 Classification of soldier B Medical Category F

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 J. Must
 Date APR. 22 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 T. Croke
 Signature of soldier
 Date APR 22 1919 Alfred Louston
 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 T. Croke
 Signature of soldier
 Date 24 4-19 James Omeisner
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 7-12-14 No of days on Military
 Discharged from service 22-5-19 for 14 days Service 1622.....

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S R.H. Lait
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date MAY 2 1919

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place St John's R. Bowley
 Date May 16/1919
 Office in Charge Records
 The Royal Newfoundland Regiment

H.B. 2079/2202

17
31
28
31
30
16
18 3

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 653 Rank Plt Name Leslie Thomas
 Date of Enlistment 7.12.14 Address 36 Bedford St. District St. John's
 Occupation Laborer Classification for Discharge B Medical Category E
 Recommendation S.M.B. Remain in Regt Disability Rating 15%
 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 24.4.19O. C. Discharge Depot. H. M. H.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am now in a position to resume civilian occupation. J. J. Crooke

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 Chiltonston St

Date 24-4-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. _____ to his home
 at Stghins and Release Certificate No. 2182 issued.

Date 24-4-19

J.A. Crawford
 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 11-5-19

Date 24-4-19

J.A. Crawford
 Depot Paymaster.

Discharge approved for 2-5-19

Forwarded with following documents to O.C Discharge Depot.

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

Date 25-4-19

J.A. Crawford
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
 Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratitude

Date MAY 2 1919

R.H. Sait Capt.
 O. C. Discharge Depot.

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

Date

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

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

ANGLO-AMERICAN TELEGRAPH COMPANY, LIMITED

CONNECTING WITH
THE WESTERN UNION TELEGRAPH COMPANY

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

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

MF 2 TORSCOVE 10PD

PAYMASTER PAY AND RECORD OFFICE

WATER ST

PLEASE GIVE MY WIFE MY MONTHS MONEY DUE / SEPT 17TH

553 T J CROKE

MS
Call

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
Labourer

W. C. Cooke
Signature of Man.

Reg. No. *653*

J. J. Brown
Signature of the Vocational Officer or his Representative.

ST. JOHN'S.

Place

Date

APR 24 1919

191

The Royal Newfoundland Regiment

Class for Demobilization:—

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

Regimental No. 653.....

Name C. A. [unclear] J. [unclear].....

Address

Present Medical Category F.....

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

Members of Board { R. H. [unclear] Capt
O.C. Discharge Depot.
[unclear]
Senior Medical Officer
[unclear]
~~M. O. Depot~~

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

MEDICAL HISTORY

Surname Croke OF Christian Name Thomas

Table 1.—GENERAL TABLE.

Birthplace:—Parish..... County.....

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	at	on	at
Examined	7 th day of Dec 1911	St John's	day of	191
Declared Age.....	20 years	days	years	days
Trade or Occupation.....	Labourer.			
Height	5 feet	5 inches	feet	inches
Weight		125 lbs.		lbs.
Chest Measurement {	Girth when fully expanded...	34 1/2 inches		inches
	Range of expansion..	3 1/2 inches		inches
Physical Development.....				
Vaccination Marks {	Right	Left	Right	Left.
	Arm			
Number				
When Vaccinated	1906.			
Vision	R. E.—V=		R. E.—V=	
	L. E.—V=		L. E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	N		(a)	
(b) Slight defects, but not sufficient to Cause Rejection			(b)	
Approved by (Signature)	Cluny Macpherson			
(Rank)	Capt.			
	Medical Officer.			Medical Officer.
Enlisted	at	St. John's	at	
	on	15 th day of Dec 1911	on	day of 191
Joined on Enlistment	Corps.	15 th Regt. R. I.	Corps.	Regtl. No.
		653		
Transferred to..				
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 cases of syphilis, admission and readmissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
8 th LONDON GENERAL HOSPITAL WANDSWORTH.	3	1	16	30	5	16	Feet. Ulc.	149	<p>Caused Active service (Amdanville).</p> <p>Wartime. Decisions of Venereal & Rabies of this & second class, with reputation of being. Underlain by acute. Left with one joint embolized at mid-thigh of pelvis.</p> <p>Joint bone removed. Sent to Essex.</p>	<p>H. M. D. [Signature]</p> <p>Capt. R. H. M. T.</p>

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.: Examinations for Discharge, Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.

Date	Brief Details, and Signature
	I. V.
23.4.15 15.8.15	Vac. for Foreign Service
27 JUN 1918	Boarded at Hazelley Down Camp. Marked BII Category
30 NOV 1918	W. P. P. Major Rank
HAZELEY DOWN CAMP.	<p>Recommended Repatriation MOR 1/10 Capt ROYAL NEWFOUNDLAND REG. MOR 1/10 Capt Rank C.</p>
	<p>It is hereby certified that this soldier has been before the Standing Medical Board and has been classified as <u>B</u> for discharge on Demobilisation. Medical category <u>5</u></p> <p>22.4.19 Date of S.M.B.</p> <p>H. W. J. H. Assistant Adjutant General Discharge List—Newfoundland</p>

TABLE IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
St. Johns	Dec. 1/15	Feb. 7/15			
S. S. "Dominion"	Feb. 5/15	" 16/15			
Edinburgh Castle	" 16/15				



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 *Croke, Thomas*

Regiment from which discharged *Royal Newfoundland*

Regimental number *653*

Intended address *36 Barron St. City*

Height on discharge *5 Feet 5*

Color of hair on discharge *Light*

Complexion *Fresh*

Color of eyes *Blue*

Descriptive Marks *Big Toe off left foot.*

Figure on discharge *medium*

Christian name of Father *Edward*

Christian name of Mother *-*

Wife's maiden name in full *Maggie Thompson*

Date and place of marriage *19th Jan 1917* *Ayr, Scotland*

Christian names of children *Sabrina*

Place and date of soldier's birth *St. Johns, 14th May 1894*

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) *T. J. Croke*

Station *St. Johns*

Date *22 April 1919*

PS (Rank)

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

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

Station *St. Johns*

Date *22nd April 1919*

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. *Thomas* 2. Surname. *Crooke*

3. Rank. *Ox* 4. Regtl. No. *653*

5. Address in full to which future payments of gratuity are to be forwarded. *35 Barron St. St. John's*

6. Date of enlistment in the Regiment. *Dec. 31/14*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. *Margaret Crooke*

8. Relationship of such dependants. *wife*

9. Address in full of such dependants. *35 Barron St. St. John's Nfld.*

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *no*

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 Dec. 31/14 to*

Apr. 25/19 date of temporary discharge

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 + back pay 80.45

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 serving in the Regt.? If not give - (a) Date of discharge

No

(b) Reason for discharge

Nov 25/19
Temporary

Dem. Prolongation

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.

9 all p. to - Sept 19/18 - to Dec 5/15

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 Com.?

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:

Place of Residence:

Declared before me at:

This

26th

day of

Y J Crooke
35 Barron St. N. John's
N. John's, Nfld

1949

April

John M. Cahey

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 Paid

Soldier. Dependent

War Service
Gratuity.

Net amount

due

6 mos

600 00

Certified correct.

Registrar

[Signature]

369. A

19-4-19

A. Schmitt

Leipz.

1 Suit Underwear For 653 H. Kroker
1 pair Boots
2 pair Socks
1 pair Shirt

1666



No. _____

Date May 30th. 1916.

(1) To the Officer i/c Records,

58, Victoria Street,

S. W. (Station).

(2) The Officer Commanding,

Newfoundland Contingent

Ayr. (Station).

(3) The Paymaster,

58, Victoria Street,

S. W. (Station).

Regimental No. 653

Rank and Name Pte. Groke T.

Regiment or Corps 1st. Newfoundlands

has been granted a furlough from May 30th. to June 8th.

His address while on leave will be:—

58, Victoria St., S. W.

This man has been furnished with a Warrant to Victoria and given an advance of £1. (one pound).

I consider he is fit for ^{Duty} ~~Light duty~~ permanently unfit for service overseas but fit for service at home.

(Signed) A. Hope Gosse, Capt. R.A.M.C.T.

Officer in charge Registrar, Hospital,
3rd. London General Hospital.
Wandsworth, S.W. (Station).

* Strike out that which is inapplicable.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the Office.

65
Mr J. Cobbe
C/o Mr. M. Keepe
For care of Mrs

Dear Sir,
Please.

send on Mr Cobbe's ^{particular} money
off 35 Barron's St. St John's
to address given above
And oblige yours
Mrs J. Cobbe.

Department of Veterans Affairs

Ottawa 4,

19

TO Supervisor,
War Service Records, Ottawa.

Mark Your Reply:

For attention of

For attention of

SUBJECT

File No.

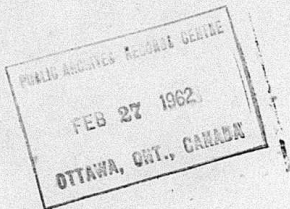
(1)

The Department is authorized to place a memorial on the grave of the above named. Therefore, will you kindly insert the particulars requested on this form and return it to this office.

NFLD.

Departmental Secretary.

- (1) Service number *653*
- (2) Surname *CROKE.*
- (3) Christian names *Thomas Joseph*
- (4) Date of Birth *17 May - 1894*
- (5) Religion *R.C.*
- (6) Unit of enlistment *Royal Nfld Regt.*
- (6a) Highest corresp. rank *Pte*
- (7) Units overseas *Royal Nfld Regt*
- (7a) Highest corresp. ranks *Pte*
- (8) Rank on day of discharge *Pte*
- (8a) Corresp. unit _____
- (9) Military honours *Nil*



(2)

Departmental Secretary,
OTTAWA.

The particulars have been added to this form and it is returned as requested.

Date

for Supervisor, War Service Records.

484466

Dept. of Veterans Affairs
DEPARTMENT OF VETERANS AFFAIRS

FFB - 2 1962

Referred to

Changed to

Ottawa Ont

Date ~~JAN~~ Feb 1/62

To ● Copy for H.O. FILE

Attention of

NAME CROKE, Thomas Joseph.

SERVICE 653 ROY.NFLD. C.P.C. No 260452
NUMBER REGT. WW-1 W.V.A. No. 218760

NAVY
ARMY X
R.C.A.F.

The DEPARTMENT has received information from

S.T.M.O. TEL MEMO Montreal, P.Q. Jan 30/62

(State authority and source of information of death)

regarding the death of the above mentioned veteran.


Particulars are as follows:

Date of Death..... Jan 30/62
Cause of Death.....
Place of Death..... Ste. Anne's Hospital.....

Name and Address of next of kin (if known).....

Copies to: W.S.R.
V. I.
~~RAY~~
EG
HO.

} Destroy form if advice of death already received.


for
Chief, Central Registry

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.,

Dept. of Militia,

St. John's, Nfld.

Fold Here



June 18th., 1921. 1917.

The accompanying King's Certificate, on his discharge,

(No. 259), is forwarded herewith to

Private Thomas J. Croke

in respect of his service as No. 653 Rank Pvte.

Name Thos. J. Croke Corps Royal Nfld. Regt.

Receipt of the same should be acknowledged hereon.

Received

June 20th 1921

Signature

M^{rs} M. E. Croke.

Date

June 20th 1921

MJ

Address

Tors Cove, Ferry land District

Casualty Form - Active Service.



Regiment or Corps Newfoundland

Regimental No. 653 Rank Pte Name Thos Broke

Enlisted (a) 15/12/15 Terms of Service (a) one year Service reckons from (a) _____

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N.C.Os. }

Extended _____ Re-engaged 15/8/15 Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 88, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Entered St. John's, Nfld.		3/2/15.	
		Entered Alexandria		1/9/15.	
		Entered Gallipoli		13/9/15.	
22/12/15.	26 C.C.S.	Admitted, Frostbite	26th. C.C.S.	1/12/15.	C 5110.
do	18th. Sat.	do	16th. State	5/12/15.	C 5126.
	Mudros.		Hosp., Mudros.		
22/1/16	Agatama	Involved in England	Agatama	26/1/15	B 887

[Signature]
 Captain
 For Major,
 Officer i/c Records 11 & 12 Dists.,
 3rd. Echelon, C.M.C., M.E.F.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. (P.T.O.)

OCT 21 1921 1921.

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

Thomas J. Croke

in respect of his service as No. 653 Rank Pte.

Name T.J. Croke Royal Nfld. Regt.
Med. Recy. Corps.

Receipt of the same should be acknowledged hereon.

Received Oct. 22nd 1921

Signature T. J. Croke

Date Oct. 22. 1921

Address 65 Fawcett St

Receipt for Army Book 64

No. 68-3 Name Croke

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

Name Thomas Croke

Date 19th / 7 / 1920

Place Torbay

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

H.

C.R. 653

Extract from Daily Orders Part II Royal Newfoundland Regiment
Dated May 20th 1919 depot St. John's.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from noted date

~~5/10/19.~~ 16-5-19

653, Pte. Thos. Croke.

C.R. 653

Extract from Daily Orders part II, Depot
St. John's dated May 2nd. , 1919.

The discharge of the undernoted on demobilization
has been APPROVED by C. C. Discharge Depot on
2-5-19.

#653 Pte. Thos. Groke.

CR 653

CIRCULAR LETTER

St. John's,

March 15th 1919.

Riband of 1914-15 Star.

Please complete the following claim and return it to this Department. If possible, call at Room No. 3 for your issue.

W. J. Readell
Lieut. Colonel.

Chief Staff Officer.

CLAIM FOR ISSUE OF RIBAND
of 1914-15 STAR.

Department of Militia,
St. John's.

I hereby make claim for issue of Riband of 1914-15 Star.

I certify that I am entitled to this issue, having served on*

from 1915 to 1915.

(Date).....(NO).....(Rank).....(Name).....

(Place).....

*Fill in theatre of War where you served in Gallipoli, Mudros, Lemnos, or Western Egyptian Frontier.

RECEIPT.

C.R. 653

I hereby certify that I have received the 1914-1915

STAR.

No 653 Name Thomas J. Probe

Witness Thomas J. Probe

Date Feb. 26th 1920

Place Toncove

m. P.

C.R. 653

Extract from Telegram from Syn, to MIL. Dated April 4th. 1919.

Following have embarked at LIVERPOOL April 2nd, Scandinavian
to St. John N. B. in charge of 2/Lieut. Western.

#Wife & Child of 653 Croke.

C.R. 653

Extract of Preliminary Report of a Medical Board held on Tuesday
Afternoon April 22nd. The following was the finding.

.....

Recommended Discharge from the Army.

653, Pte. T. Croke.

C.R. 653

Extract from Daily Orders part II, Depot St. John's dated April 19, 1919

The u/n returned from Overseas and reported at Depot 17, 4, 19.

#653 PTE. T. CROKE.

C.R. 653

Extract from Schedule Separation Allowance, payable
in U.K. from P.R.O. London.

#653 Pte. T. Croke.

Married 9-11-17

June 21, 1916.

Dear Sir,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that

No. 653, Private T. J. Croke, who was previously reported at the Third London General Hospital, Wandsworth, January 5th, suffering from the effects of frostbite, is permanently unfit for service overseas but fit for service at home. He was granted furlough May 30th.

This information has been received by mail.

Yours faithfully,

Colonial Secretary.

Mr. Ed. Croke,
16 Hagerty St.

Extract of Casualty List received from P&R.O. London Dated Jan. 30th. 1916

653 Pte. C. Coke

1st. Nfld. Regt. Frostbite Trans. to Base per H.S. Aquitania ex 16 S.H.
Mudros 26th. Dec. 1915.

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P.&R.O.
January 11th 1916.

653, Pte C, Croke.

1 Newfoundland R. Frost Bite Adm. 16 SH Mudros 5 Dec. 1915.

NEWFOUNDLAND CONTINGENT.

Extract of Casualty List received from P.&.R.O.
January 5th 1916.

653, Pte. T. Croke.

Adm. 3rd London General Hospital Wandsworth 3rd January 1916
1 Newfoundland Frost Bite.

C.R.

653 ✓

Copy of Cablegram to Governor St. John's Nfld.

from P. & R. O. 5/1/16,

653, Pte Croke. ✓

Admitted Wandsworth, Frostbite.

(37)

January 5, 1916.

Dear Sir,

I regret to have to inform you that a report has this day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that ~~No. 653, Private Thomas J. Croke, was admitted to the Third London General Hospital, Wandsworth, suffering from frost bite.~~

653

I trust that later reports will bring news of his convalescence.

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

Yours faithfully,

Colonial Secretary.

Mr. Ed. Croke,
16 Hagerty St.

Extract from Nominal Roll Co.1st. Bn. Nfld. Regt.

Embarked, at Devonport for Active Service 20-8-15

Disembarked Alexandria, 51-8-15, Proceeded to Abbassia,
Cairo, same date, Embarked ~~for~~ Alexandria for Gallipoli
13-9-15.

653 Pte. T. Croke.

C.R.
C.R. 653

C.R. 653

Extract of Nominal Roll Embarked St. John's per U.S. "Dominion"
"C" Company Feb. 2nd, 1915.

653 Pte. Croke Thos.

C.R. 653

Thos. J. Croke
was attested for General Service
with the NEWFOUNDLAND REGIMENT on ... Dec. 15th, 1914
Regimental No. 653 was allotted to Pte. ~~John J. O'Brien~~
THOS. J. CROKE

AUTHORITY:

Record Officer

Dept. of Militia,

March 25th, 1919.

The Royal Newfoundland Regiment

653

DEMOLITION OF

Reg. No. 653 Rank PLC Name Cooke, Thomas
 Date of Enlistment 7.12.14 Address 36 Barron St District St John's
 Occupation Laborer Classification for Discharge B Medical Category E
 Recommendation S.M.B. Permanently unfit Disability Rating 15%
 Passed to Demobilization Officer with following documents:—

N.F. Pj36	B 268	B 121	1	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122		Board 1st	" 2	
B 178a	1. D 400A	1. B 1915		do 2nd	" 3	3
B 179	2. 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 24.4.19

O. C. Discharge Depot.

PARTICULARS FOR DEMOLITION

1. Civil Re-Establishment.

I am in in a position to resume civilian occupation.

Y J Cooke

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$6.00
 (b) ~~Clothing~~ Supplied Chas. Houston

Date 24-4-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. _____ to his home at Styria and Release Certificate No. 2182 issued.

Date 24-4-19 J.A. Lawrence
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 11-5-19

Date 14-4-19 H. H. H.
Depot Paymaster.

Discharge approved for 2-5-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1
F 178	W 3494	B 122	Board 1st	" 2
F 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 25-4-19 J.A. Lawrence
Demobilization Officer.

APPROVED.

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

with following additional documents.

Eligible for War Service Gratuity

Date MAY 2 1919 R.H. [Signature]
O. C. Discharge Depot.

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

Date may 5 1919 James [Signature]
Joseph [Signature]

