

FIRST NEWFOUNDLAND REGIMENT

C. 78.

ATTESTATION OF

No. 3224

Name Samuel Bawe

Corps

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Samuel Bawe
2. What is your full Address? 2. 170 Water St. East
St. John's.
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 22 Years 3 Months
5. What is your Trade or Calling? 5. Seaman
6. Are you Married? 6. Yes
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 THE DURATION OF THE WAR
Corps } Yes
11. Are you willing to serve upon the conditions as embodied in the roll ^{of} Service } II. Yes
to be signed by you if you are accepted?

I, Samuel Bawe do solemnly declare that the above answers made by me to the above questions are true, and that I am able to fulfil the engagements made.

6 Nov 10th/16. Samuel Bawe SIGNATURE OF RECRUIT.
Charles Aye Signature of Witness.

Samuel Bawe OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Samuel Bawe 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 determined 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 10th day of November 1916.

Signature of Attesting Officer Charles Aye Capt

† CERTIFICATE OF APPROVING OFFICER.

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

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

Date 191

Place } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Samuel Bawe
 Apparent age 22 years 3 months. Height 5 feet 7 1/2 inches
 Chest Measurement { Girth when fully expanded 42 inches
 Range of expansion 7 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Samuel Bawe, 170 Water St West
St. John's | 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 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 _____ | | | | | | | | | <div style="text-align: right; margin-bottom: 10px;"> </div> |
| Joined at _____ on _____ | | | | | | | | | |
| | | | | | | | | | |
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| | | | | | | | | | |
| Total Service forfeited as above..... | | | | | | | | | |
| Total Service towards Engagement to _____ (date of discharge) _____ years _____ days | | | | | | | | | |
| Pensions " _____ [" "] _____ " _____ | | | | | | | | | |

FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

C. of B.

No. 3224

Name Samuel Bawe

Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>Samuel Bawe</u> |
| 2. What is your full Address? | 2. <u>170 Water St. East</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>3</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Sailor</u> |
| 6. Are you Married? | 6. <u>Yes</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 <u>Yes</u> |
| 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, Samuel Bawe 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.

6. Nov. 10th/16. Samuel Bawe SIGNATURE OF RECRUIT.
Chas. A. Cope Signature of Witness.

Samuel Bawe OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Samuel Bawe 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 satisfactorily 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 10th day of November 1916.

Signature of Attesting Officer Chas. A. Cope

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: vis:—(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 Samuel Basse
 Apparent age 22 years 3 months. Height 5 feet 7 1/2 inches
 Chest Measurement { Girth when fully expanded 42 inches
 Range of expansion 7 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Samuel Basse, 170 Water St West
St Johns | 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 Depot | Promotion, Reductions, Casualties, &c. | Army Rank | Dates | Service not allowed to reckon for fixing the rate of pension | | Service 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>10-11-16</u> | | | | | | | | | |
| Joined at <u>St Johns</u> , on <u>November 10th 18¹⁶</u> | | | | | | | | | |
| Discharged by <u>3/11/19</u> | | | | | | | | | |
| <p><u>Company St Johns St. John's for 21.1.17</u> <u>Company</u> <u>for 22.9.17</u> <u>joined unit in the field 12.10.17</u> <u>Wounded 13-4-18</u> <u>Admitted 22nd Gen Hosp St Johns</u> <u>Wounded 18</u> <u>Admitted to Hospital 14-4-18</u> <u>Admitted 3rd 5th Woodworth</u> <u>Wounded 14-4-18</u> <u>Portsmouth then sent to</u> <u>Went to 11th Coy 12-7-18</u> <u>Wounded 12-12-18</u> <u>Admitted 21</u></p> | | | | | | | | | |
| Demobilization <u>St Johns 3-2-1919</u> | | | | | | | | | |
| Total Service forfeited as above..... | | | | | | | | | |

Total service towards Engagement to 13-2-1919 (date of discharge) 2 years 86 days

Pensions _____

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

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

Examination of Samuel Daise
 aged 20 conducted at C. S. B. Am.
 Date: Nov. 9 / 16 Recruiting Officer:

| NO OF TEST | FINDING |
|------------|---|
| 1 | No |
| 2 | No |
| 3 | No |
| 4 | No |
| 5 | No |
| 6 | No |
| 7 | No |
| 8 | yes |
| 9 | yes |
| 10 | No |
| 11 | ~ |
| 12 | ~ |
| 13 | teeth deficient |
| 14 | ~ |
| 15 | ~ |
| 16 | ~ |
| 17 | ~ |
| 18 | ~ |
| 19 | 6 18 left 6 24 right. |
| 20 | ~ |
| 21 | ~ |
| 22 | ~ |
| 23 | ~ |
| 24 | ~ |
| 25 | ~ |
| 26 | feet slightly flat, not being equal |
| 27 | ~ |
| 28 | ~ |
| 29 | ~ |
| 30 | ~ |
| 31 | ~ |
| 32 | ~ |
| 33 | yes 10 years ago 1 scar left. |
| 34 | 52 7/8" |
| 35 | 135 1/2" |
| 36 | 35" - 42" |
| 37 | 45° Pr mt. |
| 38 | father Samuel Daise 170 Water St (West) |
| 39 | |

Report on
 3224

Handwritten notes:
 Hi.
 Gammie's order.

Signature of Medical Examiner: Geo Bensen

Capt Jm. Howley
Pay & Reward Office
St. John's.

Please pay the Magistrate's Court,
per Sted Const. Olyphant, the sum of
One thousand Dollars (\$1000⁰⁰), and
deduct same from any amount that
may be due me at your office.

St. John's, March 13, 1919

Samuel ^{to} ~~the~~ Court
max

No. 3224

Witness:

(just returned
from England)

W. H. H. H.

W. G. Rendell.
Report of Military

C.R. 3244
Feb ²⁶ / 15 / 21 / 19 / K20

Dear Sir

I am now in Request
of asking you to send me
down my Ribbons and also
send me down my Separation
Form I have 2 and a half
years of separation allowance
to come to me I have written
5 or 6 letters to you and
I havent got any answer
to either of them yet
neither have I got any
separation Allowance form
either I want a separation
form as soon as I can get

it I have a father and mother
Depending on me my father
has been laid up this five
years and they old woman
is forty or fifty years
of age and she cannot
work if you want to
know were she lives I will
tell you she lives at 2
Dadied Lane and is it
improbable that I cannot
get a separation form to
get some money for them
as soon as you get this
letter write and let me
know

and then I will be
able to tell them

from your letters

3224 Private Samuel Daw

P.O.B. 12,04.

East End,

S.A. Beck

Has been
claimed please
P

it has been paid
from date of enlistment
P/S

wife

W. G. Rondell
Military Department
East End
City

R

W. G. Rendall
Military Depo
St. John's
C.R. 3224

Nov 25/11/1911

My Dear Sir

Just a few
lines in requit of asking
you if you would try
and try to get a few
months taken off my
time the person that
was sent here with
me and who was sent
to the asylum for
been out of his mind
and has got his
release and is now
home having a
good time for him

(2)

-self, and here I am
down here spending my
12 months for the sake
of the man that is
now spending a good
thing for himself. I wish
you would try and
get a few months
off my time I have
4 months more to do
I have an old mother
and an old father
Depending on me my
father and mother are
Depending on me ever
since I came here
and long before it

(3)

So Sir I would like
for you to do your
Best for me I will
be more than thankful
to you for it. If
you can get me
out write and let
me know for I will
patiently wait for
your answer to this
letter I havent any
thing else at present
So I will close by
wishing you Good Bye

I remain Yours Truly
Capt 322 Samuel Law

CR 3224

Extract from Daily Orders Part II Royal Newfoundland
Regiment, dated October 20th 1919. Depot St. John's.

The discharge of the undernoted on demobilisation
has been CONFIRMED by Officer i/c Records from
noted date 3-2-19.

3224, Sgt. S. Dawe.

C.R. 3224

Extract from Medical Board held Jan. 14th, 1919.

5224 Pte. S. Dawe.

Recommended Discharge as Permanently Unfit

C.R. 3224

Extract from Daily Orders part 11, Depot St. John's
dated January 23rd., 1918.

The discharge of the undernoted on demobilisation have
been approved by C. C. Discharge Depot from noted dates:

#3224 Pte. S. Dawe $\frac{3}{4}$

20-1-19.

f

Do

C.R.3224

Extract from Daily Orders part 11, Depot St. John's dated Dec/ 23rd.1918.

The u/m returned from Overseas and reported at Depot 21-12-18.

#3224 Pte. S. Dawe.

C.R. 3224

Extract from Nominal Roll of repatriation draft No. 79 from
the 2nd., Battalion of the Royal Newfoundland Regiment
per S. S. CORRIGAN , which embarked at Tilbury Docks
12/12/18.

#3224 Pte. S. Dawe.

C.R. 8224

Extract of Daily Orders by Major E.S. Sullivan,
Commanding Newfoundland Forestry Companies.

25-11-38

The following man who was attached temporarily to the
2nd Batta. Royal Nfld. Regt. is struck off the strength
from this date.

3224 Pte. S. Dawe.

LAST PAY CERTIFICATE

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, 28/5/17.

Regtl No. 3224, Rank Pte. Name Dave S. Unit ROYAL NEWFOUNDLAND REGT. who was repatriated to Newfoundland on 11/2/15. Authority _____ Cause _____

DR. STATEMENT OF ACCOUNT

| PARTICULARS | £ s d | | | | PARTICULARS | £ s d | | | |
|-----------------------------|-------|----|---|----|---|-------|----|----|----|
| | £ | s | d | | | £ | s | d | |
| Balance Dr. from | | | | | Balance Cr. from | | | | |
| Allotment 19 days @ 6s 0d | 7 | 60 | | | Pay 19 days @ \$ 100 | 19 | 00 | | |
| Cash Payments: | 3 | 40 | | | Field Allow 19 days @ \$ $\frac{10}{100}$ | | 1 | 90 | |
| 14 Pen. | 11 | 00 | 2 | 5 | 2 | 20 | 90 | 4 | 5 |
| 22d " | | | | 15 | 0 | | | | |
| Other Debits: | | | | 1 | 3 | 10 | | | |
| B. Damages | | | | | | | | | |
| Misc. Supp. | | | | | 6 | | | | |
| | | | | 1 | 5 | | | | |
| Total Debits | | | | 4 | 5 | 11 | | | |
| Balance due by Paymaster: " | | | | | Total Credits | | | | 4 |
| | | | | | Balance due to Paymaster | | | | 5 |
| | | | | | | | | | 11 |

PERIOD: From 23/11/15. To 20/12/15.

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

HAZEL DOWN CAMP. Dec 11th 1918.

(Place)

(Date)

J. J. [Signature]
O.C. "F." Company.

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

Pay & Record Office, London,

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Chief Paymaster & Officer i/c Records.

C.R. 3224

Extract from Telegram from Synoptical, London dated Sept. 10th 1918.

With reference my telegram Sept. 9th., 3224 Dawe can only reduce to 50s as sepeation allowance being paid to wife Louisa Dawe.

C.R. 3224

Extract from Telegram from Synoptical, London dated Sept. 9th 1918.

3224 Dawe, applies for reduction of allotment to 40¢ per day,

C.R. 3224

Extract from Telegram despatched to Synoptical, London,
dated July 30, 1918.

Please advise 3224 Dawe father dangerously ill family
want message from him have not heard for months.

C.R. 3224

Extract from Daily Orders by Lt.Col.B.J.Barton,D.S.O.
Commanding 2nd Bn.Royal Wfld.Regt. 13-7-18

The following having report & back from the 1st Bn.,
is posted to "H" Company from 12-7-18

#3224 Pte. B.Dawe.

1462 N



NEWFOUNDLAND CONTINGENT

CASUALTIES

C.R. 3224

Reference Casualty Report 1440 of 8/7/18.

3224 PTE. S. DAVE was granted furlough to Tattoo

19/7/18. Fit for I, Duty.

Authority:- Memo from Hospital.

C.R. 3224

Extract of Casualties from Pay and Record Office London dated
8th. July 1918.

3224 PTE. S. DAWK,

will be discharged from Convalescent Hospital, Eastbourne, on
10/7/18; fit for 1 Duty.

Authority: A.Fs. W.3016 from Hospital.

C.R. 3224

Extract from Casualties received from Pay and Record Office
London, dated 17th June 1918.

5224 Pte. S. Dawe.

f
was transferred from the 3rd. London General Hospital and admitted to
Eastbourne Convalescent Hospital on 14/6/18.

976



EXPEDITIONARY FORCE - FRANCE.

Extract from No.H.A.(Col)804.

O/C. 22 GEN. H. DANES CAMERS reports:-

Adm.12th April,1918.

3224 Pte. Dawe,5. 1/Newfoundlands. GSM,I.Hand Wild.

C.R. 3224

Extract from Casualties received from Pay & Record
Office, London, dated May End, 1918.

#3224 Pte. S. Dawe.

Wounded 13th, April 1918.

8

C.R. 3224



NEWFOUNDLAND CONTINGENT

From: Chief Paymaster & O. i/c Records,
Newfoundland Contingent, London, S.W. 1.

12421/1239/R&C.

To: O.C., 2nd Bn., R. Nfld Regt., Winchester.

3224 PTE. S. DAWE.

The following telegraphic communication dated 30/7/18 (6890) has been received from the Hon. Minister of Militia.

"Please advise- 3224- Dawe- father- dangerously ill- family-
"want- message- from him- have not- heard- for- months-"

Will you convey above message to Pte. Dawe, please?

P.&R.Office,
31/7/18.

(Sd) H. A. TIMEWELL, Major,
Chief Paymaster & O. i/c Records.

To: O.C., 2nd Bn., R. Nfld Regt.

13999/1419/R&C.

The reply to this Office No. 12421/1239/R.&C., 31/7/18, on the subject of 3224 Pte. S. Dawe, not having been received, you are requested to expedite the same, and to state on the reverse when it may be expected.

(Sd) H.A. TIMEWELL, Major, etc.

31/8/18.

To: Chief Paymaster & O. i/c Records.

Reference reverse. Herewith.

(Sd) B. J. BARTON, Lt.-Col.,
Comdg 2/Bn., R.Nfld R., H.D.Camp.

3/9/18.

To: O.C., 2nd Bn., R. Nfld Regt.

15598/1628/R&C.

With further reference to this Office No. 12421/1239/R.&C. 31/7/18 and reminder 13999/1419 31/8/18 to which you replied 3/9/18 stating you were enclosing information asked for, this latter was not received, please.

(Sd) H. A. TIMEWELL, Major. Etc.

26/9/18.

To: Chief Paymaster & O. i/c Records.

Kindly forward copy of your 12421/1239/R.&C., dated 31/7/18.

(Sd) B. J. BARTON, Lt.-Col.,
Comdg 2/Bn. R.Nfld R., H.D.Camp.

3/10/18.

To: O.C., 2nd Bn., R. Nfld Regt.

16032.

Herewith copy of 12421/1239/R.&C. as requested.

4/10/18.

(Sd) H. A. TIMEWELL, Major. Etc.

To: Chief Paymaster & O. i/c Records.

This man (3224, Dawe) has promised to write his parents.

(Sd) B. J. BARTON, Lt.-Col.,
Comdg 2/Bn. R.Nfld R., H.D.Camp.

8/10/18.

Amended statement
LAST PAY CERTIFICATE ORIGINAL.

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. 3224 Rank Private Name Dawe S. Unit Royal Mfld. Regt. who was Repatriated to Newfoundland on 12/12/18 Authority _____ Cause _____

DB.

STATEMENT OF ACCOUNT

| PARTICULARS | £ | | | s | | | PARTICULARS | £ | | | s | | | CR. |
|--|---|----|---|----|----|---|-------------------------------|----|----|---|----|----|--|-----|
| | £ | s | d | £ | s | d | | £ | s | d | | | | |
| Balance Dr. from | | | | | | | Balance Cr. from | | | | | | | |
| Allotment 19 days @ 50¢. x | 9 | 50 | 1 | 19 | 1 | | Pay 19 days @ \$1.00 | 19 | 00 | | | | | |
| Cash Payments: | | | | | | | Field Allow 19 days @ \$1.10¢ | 1 | 90 | | | | | |
| 1st Pay | | | | | 15 | 0 | | 20 | 90 | 4 | 5 | 11 | | |
| 2nd Pay | | | 1 | 3 | 10 | | Other Allowes days @ \$ | | | | | | | |
| Other Debits | | | | | | | Other Credits: | | | | | | | |
| Barrack Damages | | | | | | 6 | | | | | | | | |
| Misc. Stoppages | | | | | 1 | 5 | | | | | | | | |
| Observation F Coy 25/10/18 dr. \$3.40 | 3 | 40 | | 14 | 0 | | | | | | | | | |
| Observation F Coy 22/11/18 dr. \$2.80 | 2 | 80 | | 11 | 8 | | | | | | | | | |
| Total Debits | | | | 5 | 5 | 4 | Total Credits | | | 4 | 5 | 11 | | |
| Balance due by Paymaster | | | | | | | Balance due to Paymaster | | | | 19 | 5 | | |
| | | | | 5 | 5 | 4 | | | | 5 | 5 | 4 | | |

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

Hazeley Down Camp. December 11th 1918

(Place)

(Date)

J. NUNNS Captain

Made up/Checked in accordance with information received in the Pay & Record Office London to 19/12/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

Dec. 19th. 1918.

OK Wm
J. N. Nunn
 Chief Paymaster & O. i/c Records.

CH. D.
 S.P.
 24/12/18

PERIOD: FROM 23/11/18 TO 11/12/18

LAST PAY CERTIFICATE

DUPLICATE
MAIL COPY

N.F.P./84.

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. 322 Rank Private Name Days E. Unit Royal Wfld Bn Days who was Repatriated
to Newfoundland on 18 12 18 Authority _____ Cause _____

DR. STATEMENT OF ACCOUNT

| | PARTICULARS | | | | | | PARTICULARS | | | | | CR. | |
|--|-------------|----|---|----|----|-------------------------------|--------------------------|----|---|---|----|-----|----|
| | \$ | ¢ | £ | s | d | | \$ | ¢ | £ | s | d | | |
| Balance Dr. from | | | | | | Balance Cr. from | | | | | | | |
| Allotment 19 days @ 50¢ | 9 | 50 | 1 | 19 | 1 | Pay 19 days @ \$ 1.00 | 19 | 00 | | | | | |
| Cash Payments: | | | | | | Field Allow 19 days @ \$.10¢ | 1 | 90 | | | | | |
| 1st Pay | | | | 15 | 0 | Other Allowes days @ \$ | 20 | 90 | 4 | 5 | 11 | | |
| 2nd Pay | | | 1 | 5 | 10 | Other Credits: | | | | | | | |
| Other Debits | | | | | | | | | | | | | |
| Barrack Damages | | | | | 8 | | | | | | | | |
| Misc. Stoppages | | | | 1 | 5 | | | | | | | | |
| Observation F Coy 25/10/18 dr. \$5.40 | 5 | 40 | | 14 | 0 | | | | | | | | |
| Observation F Coy 22/11/18 dr. \$2.80 | 2 | 80 | | 11 | 6 | | | | | | | | |
| Total Debits | | | | 5 | 5 | 4 | Total Credits | | | | 4 | 5 | 11 |
| Balance due by Paymaster | | | | | | | Balance due to Paymaster | | | | | 19 | 50 |
| | | | | 5 | 5 | 4 | | | | | 5 | 5 | 4 |

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

Hazelton Camp. December 11th 1918
(Place) (Date)

Made up/checked in accordance with information received in the Pay & Record Office Hazelton to 19/12/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,
Dec. 19th 1918

J. HUNN Captain
Chief Paymaster & O. i/c Records.

Checked
E.P.
24/12/18
PERIOD: From 11/12/18 to 25/11/18



DEPARTMENT OF MILITIA

ST. JOHN'S April 17, 1918
NEWFOUNDLAND

Dear Mr. Dawe:-

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

No. 3224, Private Samuel Dawe is at Wandsworth suffering from G.S.W. right hand.

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,

J. R. Bennett

Samuel Dawe, Esq.,

Actg. Minister of Militia.

170 Water St., West,

C I T Y

April 17, 18

Dear Mr. Dawe:-

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

No. 3224, Private Samuel Dawe is at Wandsworth suffering from G.S.W. right hand.

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

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Yours faithfully,

J. R. Bennett

Actg. Minister of Militia.

Samuel Dawe, Esq.,

170 Water St., West,

C I T Y

C. 2.—Casualties.

704
COLONIAL CONTINGENTS ONLY.

3rd London General HOSPITAL, at Wandsworth.

Affiliated to

NOMINAL ROLL of Sick and Wounded from the * France Expeditionary Force
 admitted on 14/4/18 from Hospital Ship Stad. Antwerp. disembarked at
 * Here insert which Expeditionary Force.

NOTE.—Two copies of these Rolls to be forwarded, not later than the day after admission:

(i) One copy direct to the War Office, Alexandra House, Kingsway, W.C.2.

(ii) The other direct to the O. I. C. of Records of the Colonial Contingents concerned.

* The nature of the casualty is required for telegraphing details overseas. If the details given are insufficient, reference back to the hospital for further information is rendered necessary. The following instructions should therefore be carefully followed in all Colonial cases:

(a) In the case of sickness, the nature and degree should be stated, e.g., enteric, slight.

(b) In the case of wounds, the nature of the wound, the part of the body affected, and the severity of the injury should be stated, e.g., gunshot, skull, severe.

If a limb has been amputated the fact should be recorded.

Admissions to the outlying sections of the hospital should be shown separately. If the distance of these sections should render it impossible to forward the rolls the day after the admissions, the sections should be instructed to send lists (on these Army Forms) direct to the War Office, and to the Colonial Contingent Record Office concerned.

| Regtl. No. | Rank | Name (Surname first) | Corps (Battn. numbers to be shown, also full title of Colonial Unit) | Casualty * (See note in large type above) |
|------------|------|---|---|--|
| 3224 | Pte. | Dawe, S. | R. Wfld R. | G.S.W. R. Hand |
| | | (Sgd) H. Fagan, Capt. R.A.M.C.T., Registrar. | | |

C.R. 3224

Extract from Nominal Roll of Draft No. 50 50 Other Ranks
from 2/1st Battalion Newfoundland Regiment to Barry
N. B., to 1/1st. Battalion Newfoundland Regiment B.E. F.
Embarked Southampton 22nd. September 1917.

3224. Pte. S. Dawe
~~1st. Bn. 2nd. Div.~~

BC.

COPY

No. 9134

C.R. 3224

N.F.C./24.

No. _____

NEWFOUNDLAND CONTINGENT

Officer Commanding,
2/1st Newfoundland Regt.,

Barry.

Owing to compulsory stoppage: Awarded 168 hrs. detention, forfeits 3 days pay
Awarded 168 hrs. detention, fined 10/-, forfeits 3 days pay by R.W.
" 96 " F.P. No. 2, forfeits 4 days pay by R.W.

under authority of D.Os. Nos. 153, 191, 172 and 165.

the account of No. 3224, Private Dawe, S.

shows a debit balance at 3/8 /17 of £ 8 : 1 : 10 and there
may be other debits per Acquittance Rolls or otherwise, not yet
received at this Office.

Since the stoppage of payment of his allotment of .70 cts.
per diem in favour of Wife - Mrs. Louise Dawe
may form an undue hardship; may I be informed if it is practic-
able to recover the amount by either of the following means:-

- (1) Reductions of issues of pay?
- (2) Direct recovery in cash?
- (3) Stoppage of payment of allotment?

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

Major,
Paymaster & Officer i/c Records,

6th Sept. 1917

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

It is ordered that the debt stated be recovered by
Stoppage of payment of allotment.

Orderly Room,

(Sd.) C. W. Whitaker, Lt.-Col.

2/1 Newfoundland Regt.

O.C., 2/1 Newfoundland Regt.

Paymaster & Officer i/c Records, Newfoundland Contingent, 58, Victoria Street, London, S.W. 1.
This form to be COMPLETED and RETURNED to:

C.R. 3224

Extract from Nominal Roll Draft embarked St. John's per
S.S. "GRAMPIAN" 31/3/17 sailed Halifax 16/4/17.

3224 Pte. S. Dawe.

C.R. 3224

Extract from Daily Orders Part II Unit the Royal
Hfld. Regt., St. John's, Nov. 16th, 1916.

3224 Pte. S. Dawe.

Attached to the Strength from.

10-11-16.


44 A

Feb. 13

2

Monkey Case

1 Suit Underwear }
1 Top Hat }
1 Pair Boots }
1 " Socks }
1 Great Coat }
for 5224 Mr. Daws. J.



S. D. D. W. W.

C.R. 3224

~~PRO~~

8

Medical Report on an Invalid.

Station Hazeley Down CampDate 25/11/18

1. Unit Royal Newfoundland Regt 7. Former Trade
or Occupation }
2. Regimental No. 5224
3. Rank
4. Name DAWE
5. Age last birthday
6. Enlisted { on
at
- 7A. If with previous service in Army, state—
(a) Former Unit;
(b) Regimental No.;
(c) Date of Discharge;
(d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

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

G. S. W. At HandStatement 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. Armentiers
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.
Amputated middle + terminal
Phalanges index finger, right,
W andsworth. Varicose veins slight.
- Wounded at Jun 15/18. 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). Wounded on active service
- (b) constitutional or hereditary, and not aggravated by service during the present war. na
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c. na
(V.D. & cured)

*Amputation of portion under
finger interferes with holding rifle
Wight Active service*

13. What is his present condition?
Wight 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?

Repatriation (2)

M. A. C. Brown

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.

No. 3068



41st. NEWFOUNDLAND REGIMENT 15

ALLOTMENTS

I, Samuel Daws, Regl. No. 3224

hereby agree, until further notification by me, and in similar official form to make an Allotment of _____ Dollars and Twenty Seven^{~~Twenty~~} Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person 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

February 1st 1917.

| Identity Certificate No. | Whether Wife, Child, other Relative or Friend | NAME (in full) | ADDRESS | AMOUNT (each person) |
|--------------------------|---|-----------------|---------------------------------|----------------------|
| 3369 | Wife | Mrs Louisa Daws | 70, Georges St. St. John's N.F. | 70¢ |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 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.) G. Hicks
 Officer Commanding
 Company

(Sig.) Samuel X. Daws
 Rank Private

St. John's
Jan 31st 1917

Witness
Mark H. H. H. H.
A. R. C. Sgt.



41ST. NEWFOUNDLAND REGIMENT 15

ALLOTMENTS

I, Samuel Dawe, Regl. No. 3224

hereby agree, until further notification by me, and in similar official form to make an Allotment of _____ Dollars and Eighty Seven ^{Hubchen} Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{or} Person, 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 February 1st 1917.

| Identity Certificate No. | Whether Wife, Child, other Relative or Friend | NAME (in full) | ADDRESS | AMOUNT (each person) |
|--------------------------|---|-----------------|------------------------------|----------------------|
| 3362 | wife | Mrs Louise Dawe | 70 George St St John N.F. | 70 ^t |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | 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) G. Hiels
Hubchen
Officer Commanding
Company
St John
Jan 31 1917

(Sig) Samuel Dawe
Hubchen
(Rank) PLA

A R C G A

No. 3224 Rank Pte Name F. Dawe

| | | | | |
|----------------|------|-----|-------|-------------|
| Pay | F.A. | Wkr | Total | N.P. P.C.S. |
| 100 | 10 | | 110 | |
| Less Allotment | | | 70 | |
| Net Rate | | | 40 | <i>HRV</i> |

| DEBITS | Date | £ s d | | | CREDITS | Period | | Days | Rate | £ s d | | | | | |
|-------------------|----------|-------|----|----|------------------------|----------|----|------|------|-------|----|----|----|----|----|
| | | £ | s | d | | From | To | | | £ | s | d | | | |
| Balance | 21/12/17 | 6 | 13 | 6 | Balance | | | | | | | | | | |
| Acquittance Rolls | | 6 | 19 | 12 | Pay @ Net Rate | 22/12/17 | 10 | 1/2 | 201 | 40 | 80 | 40 | 16 | 10 | 5 |
| Hospital Advances | | 2 | 15 | 15 | <i>P.A. 10d @ 2/11</i> | | | | | | | | 1 | 0 | 10 |
| A.B. G4. | | | | | | | | | | | | | | | |
| P.A.R.C. Payments | | 3 | 15 | 0 | | | | | | | | | | | |
| <i>Forfd Pay</i> | | | | 4 | | | | | | | | | | | |
| <i>Cash 80 80</i> | 10 7/18 | 2 | 10 | 0 | | | | | | | | | | | |

17.11.50

~~20.4~~
20.6.8
20.8.3

2.17.0

X

12421/1239/R.&C.

(1)

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

Pay & Record Office.

31st July, 8.

3224 PTE. S. DAWE.

The following telegraphic
communication dated 30/7/18
(6890) has been received from
the Hon. Minister of Militia

"Please advise- 3224- Dawe-
"father- dangerously ill-
"family- want- message- from
"him- have not- heard- for-
"months-"

Will you convey above
message to Pte. Dawe, please?

| | |
|--|----------------|
| NEWFOUNDLAND CONTINGENT, PAY & RECORD OFFICE. | |
| Rec'd Nos 194 | 867+ |
| Rec'd 9 | OCT 1918 |
| Ack'd | Aus'd |
| Ref. Nos. 191 | |
| The Chief Paymaster, Royal Newfoundland Regt. London, S.W. | |
| BRANCH | |
| Comd | Oct. 8th 1918. |
| P & A. | |
| R. & C. | |
| G & E. | |
| P. S. | |

(1)

This man has promised
to write his parents.

J. J. Burton LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

Major,

Chief Paymaster & O.i/c Records.

Copies to M of M 16/19

15999/1019

12421/1259/R.A.C.
CHIEF PAYMASTER & OFFICER I/C RECORDS,
85, VICTORIA STREET,
LONDON, S.W.1
ENGLAND.

O.C., 2nd Bn.,
R. Newfoundland Regt.

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

C. Paymaster & O.i/c R.,
Newfoundland Contgt.

Pay & Record Office,

October 8th 1918.

31st July, 8

3224 PTE. S. DAWE.

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communication dated 30/7/18
(8890) has been received from
the Hon. Minister of Militia:

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"family- want- message- from
"him- have not- heard- for-
"months-"

(Sd) B.J. BARTON, Lt. Col.
Comdg 2nd Bn.,
R. Newfoundland Regt.

Will you convey above
message to Pte. Dawe, please?

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

(In. Ref. No. 8674)

HB/JC

19421/1239/R.&C.

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

Pay & Record Office.

31st July, 8.

3224 PTE. S. DAWE.

The following telegraphic communication dated 30/7/18 (6890) has been received from the Hon. Minister of Militia:

"Please advise- 3224- Dawe-
"father- dangerously ill-
"family- want- message- from
"him- have not- heard- for-
"months-"

Will you convey above message to Pte. Dawe, please?

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

O.C., 2nd Bn.,
R. Newfoundland Regt.

O:Paymaster & O.i/c R.,
Newfoundland Contgt.

October 8th 1918.

This man has promised
to write his parents.

(Sd) B.J.BARTON, Lt.Col.

Comdg 2nd Bn.,
R. Newfoundland Regt.

(In. Ref. No. 8674)

In subsequent correspondence
please quote the following
number:-

Army Form C. 347-1.

139997/1419/R.G.M.

REMINDER.

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

Newfoundland Contingent.

To O.C., 2nd Bn.,

R. Newfoundland Regt.,
Winchester.

31st August, 1918.

The reply to this Office No.

12421/1239/R.&C., 31/7/18 on the

subject of 3224 Pte. S. Dawe - -

- - - - -

- - - - -

- - - - -

not having been received, you are requested
to expedite the same, and to state on the
reverse when it may be expected.

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

From: O.C. 2/Bn., R. Nfld Regt.,

To: Chief Paymaster, R. Nfld Regt.

Sept. 3rd, 1918.

Reference reverse.

Herewith.

(Sd) B. J. BARTON.

Lt.-Col.,
Comdg 2nd Bn.,
R. Newfoundland Regt.

Hazeley Down Camp,
Winchester,
Sept. 3rd, 1918.

(In. Ref. No. 7815)

13999/1419/R&CM

O.P. & O.1/c Records,
Newfoundland Contingent.

O.C., 2nd Bn.,
R. Newfoundland Regt.,
Winchester.

31st August, 8

this Office No.

12421/1239/R.&C., 31/7/18 on the
subject of 3224 Pte. S. Dawe - -

- - - - -
- - - - -
- - - - -

Major,
Chief Paymaster & O. 1/c Records.

1298/1626/R & C

MEMORANDUM.

From C.P.&O.i/c Records
Nfld.Contingent,
58,Victoria St.,S.W.

To Officer Commanding
2nd.Bn.R.Nfld.Regt.
Hazeley Down Camp,
Winchester.

Date 26th.Sept 1918

3224 PTE.S.DAWE.

With further reference to this Office No.12421/
1239/R.&C. 31/7/18 and reminder 13999/1419 31/8/18
to which you replied 3/9/18 stating you were en-
closing information asked for, this letter was
not received please.

R. S. Dawe
Chief Paymaster & O.i/c Records.

HA/MB.

(5)

The Chief Paymaster,
Royal Newfoundland Regiment,
Bandon, S.W.

Kindly forward copy of your 12421/1239/
R. & C. dated 31-7-18,

Hazeley Down Camp,
Winchester,
Oct. 3rd 1918.

| | |
|--|-----------|
| NEWFOUNDLAND CONTINGENT, PAY & RECORD OFFICE. | |
| Det. Nos. 161 | 8536 |
| Rec'd By | 10.1.1918 |
| Ack'd | AMH |
| Det. Nos. 161 | 16032 |
| LIEUT. COLONEL. | |
| PREPARED | BY |
| Checked | |
| P & A. | |
| R & C. | |
| R & E. | |

N. Barton
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REG'T. ON

16032

Min. 3.

To O.C. 2nd Bn.

Herewith copy of 12421/1239/R. & C.
as requested.

A. M. Maxwell
Chief Paymaster & O. i/c Records.
Pay & Record Office,
4/10/18.

(6)

1559B/1826/R.&.C.

C.P.&.O.i/c Records
Nfld.Contingent,
58,Victoria St.,S.W.

26th.Sept 8

Officer Commanding
2nd.Bn.R.Nfld.Regt.
Hazeley Down Camp,
Winchester

3224 PTE.S.DAWE.

With further beference to this Office No.12421
1259/R.&.C. 31/7/18 and reminder 13999/1419 31/8/
to which you replied 3/9/18 stating you were en-
closing information asked for, this latter was
not received please.

Chief Paymaster & O.i/c Records.

HA/MB.

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

Kindly forward copy of your
12421/1239/R.&C. dated 31/7/18.

Hazeley Down Camp,
Winchester.
Oct 3rd 1918.

(Sgd) B. J. BARTON, Lt.Col.
Comdg. 2nd Bn. R. Nfld Regt.

8536

4/10/18

16032

Min. 3.

To O.C. 2nd Bn.

Herewith copy of 12421/1239/R.&C.
as requested.

Chief Paymaster & O. i/c Records,
Pay & Record Office,
4/10/18.

Summerdown Camp
Eastbourne

June 22/18

The Paymaster
Army Pay Record Office

Sir:-

Please have my
allotment changed from
seventy cpts to forty cents
a day and oblige

PAY & REC

Ref. nos. 1

Lead 24 JUN 1918

101

Ref. nos. 001

25890
Yours truly
S. Dawe

No 3224

1. A.C.D.

Comd.

P.E.

H.A.G.

P.S.V.

P.V.

8



To Mr. R. L. D. [unclear] (5 shillings)
38 [unclear] st

Please send to No 3224 [unclear]

I have the sum of one pound
on any account
be [unclear]



app [unclear]
sc [unclear]
app [unclear]

Mr J. Down

Ref no 7133

Sorry.

Your name is cut-

on this slip.

D. Pooler

Admitted 14. 4. 18.

Only for use with Men returned from an Expeditionary Force or Garrisons Abroad.



No. _____ Date 14-6-18

(1) To the Officer i/c Records, 58 Victoria (Station)

(2) The Officer Commanding, R. Inqd. (Station)

Hayleydown Winchester (Station)

(3) The Paymaster, 58 Victoria St (Station)

Regimental No. 3224 (Station)

Rank and Name Plt Lance S.

Regiment or Corps Roy Inqd-

has been granted a furlough from transferred on 14-6-18 to

Sumnerdown Conv. Hospital

His address when on leave will be: Eastbourne.

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

* Strike out that which is inapplicable.

Officer in charge G. C. Hall Capt Registrar, R.A.M.C.F. Hospital, 5rd London General Hospital, WANDSWORTH, S.W. (Station)

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

To Paymaster
1st Lt Newfoundland Regt
58 Victoria St

Please remit to the Bearer
No 3224 the sum of £1 (one pound)
on account of any balance that
may be due to me

17th April.

Approved
J. P. [Signature]

~~£1.0.0~~
£1.0.0
J.P.P. 18/4/18
6670
Receipt No. [Signature]

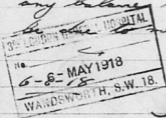
BRANCH
LONDON GENERAL HOSPITAL
No. 17 APR 1918
WANDSWORTH S.W. 18.



To Paymaster

1st Newfoundland Regt
58 Victoria St

Please remit to Pte Dawe
No 3224 the sum of £1
(one pound) on account of
any balance that may



Approved
J. S. Hall
Capt. R. Hall

£1.00
6/18 Receipt No. 6966



400
O.K. W. C. ...
J. C.

66

ORIGINAL

| |
|--------------------------|
| ENTERED. |
| PAY LEDGERS <i>1/17</i> |
| NUM. BOK. <i>1/17</i> |
| ALLOT. INDEX <i>1/17</i> |
| REGISTER <i>1/17</i> |
| EXAMINED |

NEWFOUNDLAND CONTINGENT

CANCELLATION OF ALLOTMENT

1. I, (No) 3224 (Rank) Pte. (Name) S. Davis
 hereby apply for cancellation of Allotment made by me on N.F.P./11
 No. 3068 dated February 1/17 in favour of
Wife ~~mother~~ Mrs. L. Blawie.
 for \$ 70 cts per diem.

Such cancellation to take effect on the thirtieth day of
September 1918

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

Dated at HAZELEY DOWN CAMP.
SEP 2 1918 191

his
P + Davis
Sto

Approved and Witnessed:
[Signature]

Mark Allotter
James
[Signature]
 COPIES SENT
 14936/152
 850

O.C. " " Company "H" Coy.

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

NEWFOUNDRINGENT

no. 4

ALLOTMENT

| |
|---------------|
| ENTERED |
| PAY LEDGERS |
| NUM. ROLL |
| ALLOT. INDEB. |
| REGISTERED |
| EXAMINED |

I, (No.) 3224 (Rank) Plt (Name) L. Daws
 hereby agree, until further notification by me, and in required Form,
 to make an Allotment of forty 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 Relatives or Friend. | NAME (In Full) | ADDRESS | AMOUNT (Each Person) \$ |
|--|-------------------|---------------------------|----------------------------------|
| Mother wife | Mrs. L. Daws | 70 George St St Johns. | 10 50 |
| | | | 50 |

This Allotment to take effect from and including 05th 1918 to 1918

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

(Sig.) [Signature]
 Officer Commanding, No. 14926/132 Co. C Company, 14926/132
 Dated 2nd BATT, ROYAL NEWFOUNDLAND INFANTRY
HAZELEY DOWN CAMP.
SEP 2 1918 191

CO. COMMANDING, NO. 14926/132
 (Sig.) [Signature]
 Max Allotter

No. 11705

N.F.P./98.

NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
2nd Lt Royal Mfg Coy
Trinidad

19-7-1918

1918

ALLOTMENT

No. 3224 P. A. Dawe

With reference to the enclosed application for cancellation of Allotment of the above-named, *22/16/18 (58%)*, kindly ascertain and advise:-

1. Whether the Allotment is payable to a dependent as a sole or contributory means of support?
2. Whether Separation Allowance (in addition to Allotment) is being paid to any person in Newfoundland or elsewhere on his behalf, and if so, to whom?
3. The reason for cancellation.

Should the Soldier's reply to "2" be in the affirmative he should be informed that Allotment may not be cancelled without reference to the Minister of Militia in Newfoundland, to whom reason for cancellation will require to be submitted.

[Signature]
Major,

Chief Paymaster & O. 1/c Records.

Spec. Vice
1. 1. 1. 1.

17 Payable to dependent (wife) as a contributory means of support

127 Understand his wife residing in St Johns that P. A. Dawe has a separation allowance but no allotment has been made her.

137 To avoid wiring for part of allotment accumulating in bank at St Johns.

NEWFOUNDLAND CONTINGENT

From:

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

To: Officer Commanding,

Summerdown Camp.,Eastbourne.13th, July 1918191ALLOTMENT

No. 3224, Pte. S. Dawe,
Royal Newfoundland Regt.
with reference to the enclosed
application for cancellation of
Allotment of the above-named,
22/6/18 (5670), kindly ascertain
and advise:-

1. Whether the Allotment is payable to a dependent as a sole or contributory means of support?
2. Whether Separation Allowance (in addition to Allotment) is being paid to any person in Newfoundland or elsewhere on his behalf, and if so, to whom?
3. The reason for cancellation.

Should the Soldier's reply to "2" be in the affirmative he should be informed that Allotment may not be cancelled without reference to the Minister of Militia in Newfoundland, to whom reason for cancellation will require to be submitted.

F. H. M. ...
Major,

Chief Paymaster & O. 1/c Records.

The Chief Paymaster,
Newfoundland Contgt.,
58, Victoria St.,
S.W..1.

Reference reverse. This man
proceeded ~~on~~ 10. 7. 18 to report to the *Scars Office on discharge from T*
please.

[Handwritten signature]

Eastbourne,
17. 7. 1918.

Colonel, RAMC.
Cmtd. Convalescent
Hospital.



L.O.C. 2 B.
19/7/18.

elo

| | |
|--|-------------------------------------|
| NEWFOUNDLAND CONTINGENT, PAY & RECORD OFFICE. | |
| REG. NO. | <i>D 6462</i> |
| ISSUED | <i>17</i> |
| DATE | <i>19/7/18</i> |
| LET. NOS. | <i>oe 2/</i> |
| ISS. | |
| COM. | |
| P.E. | <input checked="" type="checkbox"/> |
| R.E. | |
| R.E. | |
| R.E. | |

8

No. 9134

H.M.S. 1917

NEWFOUNDLAND CONTINGENT

No. _____

Officer Commanding,
2/1st Newfoundland Regt.,
Bany



Owing to compulsory stoppage: *Account 168 hrs detention, 1/2 pmt 2 Dny Pay (D.O. 107.266)*
Account - - - - - detention, 1/2 pmt 7th Oct 1917 (D.O. 112. 277-17)
Account 96 - F.P. Hod, 1/2 pmt 4 Dny Pay by R.W. (D.O. 112. 127-17)

under authority of as above

the account of No. 3224 Pwark David S.

shows a debit balance at 3/8/17 of £ 8-1-10 and there may be other debits per Acquittance Rolls or otherwise, not yet received at this Office.

Since the stoppage of payment of his allotment of 7p cts. per diem in favour of Wife, Mrs Lewis David

may form an undue hardship; may I be informed if it is practicable to recover the amount by either of the following means:-

- (1) Reductions of issues of pay?
- (2) Direct recovery in cash?
- (3) Stoppage of payment of allotment?

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

A.C. Munn Major
Paymaster & Officer i/c Records.

Sept 6 1917

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

It is ordered that the debt stated be recovered by

stoppage of payment of allotment.



A.C. Munn
O.C., 2/1 Newfoundland Regt.

THIS FORM to be COMPLETED and RETURNED to: Paymaster & Officer i/c Records, Newfoundland Contingent, 58, Victoria Street, London, S.W. 1.

Paymaster

Please make
1st payment W. S. G. to
Mrs Dawe in accordance
with letter of May 4th
from 3224 Dawe, and
future payments as they
become due.

Please notify him
that his request will be
carried out.

W. F. Rudder
Lieut. Col.
C.D.

H.M. Penitentiary
city month 11 19

Genl. - Col
W. F. Rendell. R.N.R.
city

Dear Sir

I beg to ask if you would kindly
give my mother a note to
Capt Hawley requesting him
to pay over to my mother
the money which is at the office
belonging to me the amt is
(B2 50⁰⁰) If it is possible to
pay her the total amount
at once I would be greatly
pleas'd should you
be unable to have her get
the total amount at once
will you kindly endeavor
to have her get as much
as possible

I wrote Capt Hawley over
I sent my mother an order
and the indurms in that
Capt Hawley as one of
the officials gave her to
understand that the
money had been sent

down here ~~and~~

On May 1st the money however
has not reached here.

And this is why I am sending
you to you

I have been cornered here
for 12 months & only one month
as there is no other way I have
as yet served

my parents are both old people
& one of my teachers is unable

to get. Prof. being sick and
unable to leave his bed and
my mother being ~~unable~~ is

unable to work I am the only
one they have and I am

here and unable to do any thing
for them they are in need of
the money I feel sure that you

will do your best in the matter
my teachers address is
Mr Samuel Davis Jr
2 Dudley Lane City

Appl Samuel Davis, Pte 3224
Rogers Street Rest

Pauteentony
May 1st 1919

Hon J.R. Bennett
Member of Militia
Sir

Please pay my Mother Mrs Dawe
40 forty Dollars per Month out of
my monthly Allowance and pension
Money.

Yours Truly
No 3224 Samuel ^{Jr} Dawe
Mark

Michael Manning

witness

P. O. Box 1204 City

April 20th 1919

Captain J. M. Hawley
Paymaster R. N. R.
Military Bldg
City
4714

Sir:

I beg to ask if you would
kindly send down the
money which is to be
paid to me by the Military
Board. When it comes
down due.

which will be the first
day of each month

The amount is seventy
dollars per month
please don't pay it
to anyone else. Only send
it to me. I enclose an
order to that effect
Kindly let me have an
answer by return of post

4

letting me know your
decision
in the matter
Thanking you in
advance

I am

Yours faithfully
Samuel Dewey Pk 3224

address

3224
Private
Samuel Dewey R. N. R.
P. O. Box 1204
city

enc

P. O. Box 1204

St John's. n. h. e. l.
April 21st 1919

70
Capt. J. M. Howley
paymaster

Royal n. h. e. l. Regiment
militia Dept St John's. n. h. e. l.

Please send to me the undersigned at the above mentioned address the money which will be due me by the militia Board which amounts to seven ty Dollars (\$70⁰⁰/₁₀₀) per month and payment of which will come due on the first day of each month. Please don't pay it - Danyone else, but direct to the undersigned

Sgt. Samuel Dams Private of the R n R.
no 3224.

Dawe, Saul.

3224

Hay Sept.

General Hospital

June 10th
1864

Capt Howley

Dear Sir

would you please
give my mother half
my ~~mother's~~ money I
am after sending up
two notes and you refused
to give it to her would
you please give it to
her because she is in
need of it

I remain yours truly

of
10/10
private Samuel Dyer

3224

A Conway

Shea Ward

No 9 bed

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

MEDICAL HISTORY

Surname Sawc of Christian Name Samuel

Table I.—GENERAL TABLE.



| Birthplace:—Parish | | County | |
|---|---|------------|------------------|
| SPECIAL RESERVE. | | | |
| Examined | on 9 th day of Nov 1916 | on | day of 191 |
| | at St John's R.F. | at | |
| Declared Age | 22 years 3 mon days | years | days |
| Trade or Occupation | Sailor | | |
| Height | 5 feet 7 1/2 inches | feet | inches |
| Weight | 135 1/2 lbs. | lbs. | lbs. |
| Chest Measurement | Grith when fully expanded ... 42 inches | inches | inches |
| | Range of Expansion .. 7 inches | inches | inches |
| Physical Development | | | |
| Vaccination Marks | Right | Left | |
| | | 1 Scar | |
| When Vaccinated | Ten years ago 1906 | | |
| Vision | R.E.—V= 6/24 | R.E.—V= | |
| | L.E.—V= 6/18 | 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) | Laminant Paterson | | |
| (Rank) | Major | | |
| | Medical Officer. | | Medical Officer. |
| Enlisted | at St John's R.F. | at | |
| | on 10 day of Nov 1916 | on | day of 191 |
| Joined on Enlistment | 175 th R.F. | Regtl. No. | Corps. |
| | Regiment 3224 | | |
| Transferred to | Royal Newfoundland | | |
| Became non-effective by | on | day of | 191 |
| (Signature) | | on | day of 191 |
| (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, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet. | Signature of Medical Officer |
|-------------------|----------------------|----------|-----------|--------------------------|----------|-----------|-------------------------------|-------------------------|--|--|
| | Day | Month | Year | Day | Month | Year | | | | |
| <i>Albany</i> | <i>13</i> | <i>7</i> | <i>18</i> | <i>23</i> | <i>7</i> | <i>18</i> | <i>444</i> <i>Postitus</i> | <i>11</i> | <i>Hydrazyl Penicillin 1,000,000. Film to repeat visit.</i> | <i>Stephen G. Munnick</i> <i>Capt Ramer</i> |

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 work as Sailor

Mark *with J. J. Sinclair*
E. J. Dawe
Mark

Signature of Man.

Reg. No. 3224

W. D. Kirk
Capt.

Signature of the Vocational Officer or his Representative.

Place *St. John's*

Date *25/1/19*

191

Medical Report on an Invalid.

Station

Hazeley Down Camp

Date

29/1/18

1. Unit *Royal Newfoundland* (Former Trade }
or Occupation }
2. Regimental No. *32 R L*
3. Rank *Pte*
4. Name *DAWE.*
5. Age last birthday
6. Enlisted { on
at

7. If with previous service in Army, state--

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

8. Disability in respect of which invaliding is Proposed.

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

*G. S. W. Rt. Hand.*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.

Armentiers.

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

Amputated middle & terminal phalanges index finger Rt. hand & with varicose veins Slight

Discharged Jan 15/18 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.

Wounded on Active Service

N.A.

V. O. G. (curd)

13. What is his present condition?

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

Amputation of portion
index finger. interferes
with holding rifle.
unfit Active Service

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?

Repatriation (2)

M.R. 1
A. G. P. 100.

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

Opinion of the Medical Board

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

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

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

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

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

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

(i) Service during the present war; *Yes*

(ii) Climate;

(iii) Ordinary military service;

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

(v) Whether it is constitutional or hereditary.

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

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

23. Is the disability permanent?

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

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

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

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

27. Do the Board recommend—

(a) Discharge as permanently unfit, or

(b) Change to England? *Yes*

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

(a) Sanatorium;

(b) Hospital;

(c) Convalescent home;

(d) Asylum; or

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

29. With reference to Army Council Instruction No. 1275 of 1917, is any surgical appliance recommended?

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

Signatures:—

Station *St John's*

Date *14/19*

Approved

Station

Date

A.H. Macgregor President.

Archibald
W. Patterson Members.

Ann Macpherson Administrative Medical Officer.



No. 3724 Name Dawe Samuel Sqn., Batty., or Company 1st Corps 1st Newfoundland Date of enlistment 10/11/16 G.C. Badges 1 Service or Proficiency Pay In default
 Date of last entry in Company Conduct Sheet 28/5/17 No. and date of last drunk No 5 29/2/17 Period not reckoning towards freedom from extra fine Sheet No. 2 Signature S.C. Company, etc. [Signature] Character [Signature]

| Place | Date of offence | Rank | Case of Drunkenness | Offence | Names of Witnesses | Punishment awarded | Date of award or of order dispensing with trial | By whom awarded | Remarks |
|-----------------|-----------------|------------|---------------------|---|---------------------|-------------------------------|---|-------------------------|------------|
| <u>Garrison</u> | <u>29-9-17</u> | <u>Rtc</u> | <u>-</u> | <u>Being deficient of 1 Knife Longsword Buss Tin & cover of putties</u> | <u>McKeighly</u> | <u>Det of 1 day - Pay</u> | <u>29-9-17</u> | <u>Lt Col Elyon</u> | <u>REO</u> |
| <u>Field</u> | <u>23-2-18</u> | | | <u>Absent from 7 am Parade</u> | <u>Kept Davis</u> | <u>7 days C.B.</u> | <u>23-2-18</u> | <u>Capt Holey</u> | <u>1st</u> |
| <u>Field</u> | <u>28-2-18</u> | <u>Rtc</u> | | <u>Loss of Kit. Entrenching Tool Helme & Water bottle</u> | <u>Sgt Ludstone</u> | <u>Pay for 10 days 5-3-18</u> | | <u>Capt Holey</u> | <u>RSE</u> |
| | <u>3-4-18</u> | <u>"</u> | | <u>Loss of Iron Rations</u> | <u>Sgt Mulliken</u> | <u>1 day Pay 4-4-18</u> | | <u>Lt Col Woodroffe</u> | <u>RSE</u> |
| | | | | | | | | | |
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Army Form B. 139

[Handwritten signature]
14-5-18

Army Form B. 103.

Regimental Number. 3224

Casualty Form - Active Service.

Regiment or Corps. 1st Newfoundland
 Rank. Pte Surname Dawe Christian Name Samuel
 Religion C of E Age on Enlistment 22 years 3 months
 Enlisted (a) 10-11-16 Terms of Service (a) Duration Service reckons from 10-11-16
 Date of promotion to present rank. Date of appointment to lance 10-11-16
 Extended () Re-engaged () Qualification (b) 1st Lt
 Occupation Sailor 1st Lt Captain



| Report | | Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B.211, 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.211, Army Form A.36, or other official documents |
|-----------------|--------------------|--|-------------------------------------|------------------|---|
| Date | From whom received | | | | |
| | | | Embarked <u>Shampton</u> | <u>22 9/17</u> | |
| | | | Disembarked... <u>Rouen</u> | <u>27 9/17</u> | |
| | | | Joined Battalion <u>12 Oct 1917</u> | | |
| <u>22/11/17</u> | <u>377A</u> | <u>as 'Scabers' Trans</u> | <u>JUL CLS</u> | <u>24/11/17</u> | <u>Edwards</u> |
| | <u>Follow</u> | <u>was sent</u> | <u>Midfield</u> | <u>20/11/17</u> | <u>B213 9/2/17</u> |
| | <u>897A</u> | <u>as 'Scabers' Trans</u> | <u>WCKL</u> | <u>24-1-18</u> | <u>Edwards</u> |
| | | <u>to duty</u> | | <u>27-1-18</u> | <u>Edwards</u> |
| | | <u>Wounded in Action</u> | | <u>13/4/18</u> | <u>B213 14/4/18</u> |
| | <u>22 2nd</u> | <u>as 'Scabers' Trans</u> | | <u>14/4/18</u> | <u>W 3034 14/4/18</u> |
| | <u>Wounded</u> | <u>Transferred to England</u> | | <u>14/4/18</u> | <u>W 3083</u> |
| | | <u>117 Filgate</u> | <u>Capt</u> | | <u>MAJOR</u> |
| | | | <u>Infantry Section</u> | | |

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shipping-Smith, &c.

G.S.O. W. 13465/11477 2,400,000 1/17 M.A. & W. Ltd. Forms B.103/4 (E. 856)

P.T.O.

No 3819


 3 1st. NEWFOUNDLAND REGIMENT 16.

ALLOTMENTS

 I, Samuel Dawe., Regt. No 3224.

 hereby agree, until further notification by me, and in similar official form to make an Allotment of
50 Dollars and 00 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
 concerned, viz:

Allotment begins

Dec 1/16.

| Identity Certificate No. | Whether Wife, Child, other Relative or Friend | NAME (in full) | ADDRESS | AMOUNT (each person) |
|---------------------------|---|----------------------------|-------------------------|----------------------|
| 3137 | Mother | Mrs Samuel (Clara) Dawe | Howarth St West. 89. | 50 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| <i>Replaced by no add</i> | | | | |
| Total Allotment, \$ | | | | 0 |

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

(Sig.)

Charles Cape Capt.

 Officer Commanding
 Company

John D. [Signature]
War 2/16

(Sig.)

 This
Samuel X Dawe
 here.

(Rank)

16
Indy [Signature]

W. H. H.
6428

Casimir Hawley
Paymaster
Military Department
Sept. 115/8/1911

My Dear Sir

I now take my pen in hand to write to about my money. I am in request of asking you to you through the Books and what is coming to me I have been waiting for it to come to me this long time now I also want to Get a separation form I have 2 years and a half of separation ~~from~~ ~~allowance~~ to Get I would like to Get it send down to me send it to P. O. B. 120 44 and I want it to before I Get out I want it very bad. I am going out of this on the 19 of February. 1920, and I want some money to take with me for I havent a sent to my home down here to take with me

(2)

I have now five months and
one week more to serve
then I will want my
money I hope you wont
forget to send me
down that Separation
Form for I want to fill
it out I want to get
it as soon as possible
I may be getting out before
my time is up I hope
you dont forget to
send it down I want
an answer to this letter as
soon as possible I havent
yet much to tell you
at present So I will close
my short letter By wishing
you Good Bye From

Yours Truly Servant

3224 Private Samuel Howe.

Address
P. O. B. 120 4
Forest Road
East End.

Capt Hawley
Military Department

H. M. Penitentiary
Forest Road
East End
City

Sept ²⁴ 29 / 9 / 1911

Dear Sir

I am now in request of asking you. Why if you did not give me any answer to my letter I wrote you about 14 or 15 days ago I wrote to you about my Grant Duty money also about my separation form to be billed out for 2 and a 1/2 years separation money. Look a here Captain I want to get that money as soon as possible also that form to be made out for my separation money I hope I wont have to send another letter besides this one to you about my money or any thing else. So I hope you wont forget to answer this one.

(2)

I havent a got a very much to tell you at present. Only to send me down my money as soon as you can or as soon as possible. If you dont it wont be long before I will write to your Betters and then see if I cant get it down or send down here to me I want to get that money by the end of next week if I dont get it by then I will know the reason why. So I think you know now what to do if you dont send it well you know what will come next. So I will close my short letter by wishing you Good-Bye from

Yours Truly
Samuel Law

Ex private 3244

DEPARTMENT OF MILITARY

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.

1. Christian name *Samuel* 2. Surname *Dawson*
3. Rank *Private* 4. Regtl. No. *3224*
5. Address in full to which future payments of gratuity are to be forwarded..... *2 Stagerly Lane*
6. Date of enlistment in the Regiment..... *January 11, 1916*
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 dependent.....
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 Dawson*
11, 1916 to January 1919

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 \$60
Also 30*

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..... (b) Reason for discharge.....

No
January 4, 1919. (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 from Oct 9, 1917 to April 10, 1918. Documented

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.....

and I make this solemn declaration, conscientiously believing it to be true, and knowing what it is of the same force and effect as if made under oath.

Signature of Applicant: *his Samuel Dowe*
 Place of Residence: *2 Haggerty Lane*
 Declared before me at: *N. John's, U.S.A.*
 This *28th* day of *Feb* 19*19*

Signature of Barrister of the
 Supreme Court, Stipendiary Magistrate,
 Notary Public, Justice of the Peace,
 or Commissioner of affidavits. *John McCarthy J.P.*

POST DISCHARGE PAY.

| Date paid | Paid Soldier | Paid Dependent | War Service Gratuity | Net amount due |
|-----------|--------------|----------------|----------------------|----------------|
| | | | <i>5 62 05</i> | <i>350 00</i> |
| | | | | |
| | | | | |

Certified Correct.

Pymaster.

St. John's,
Sept 29th, 1919.

560
30

168, 0.0

Captain J. M. Hopley,
Military Department:

Please pay my mother, Mrs. Clara Daws,
the sum of \$20⁰⁰ (Twenty Dollars) on ac-
count of money now due me at the Depart-
ment, she being now badly in need of the same.

Witness: (32211) Samuel Daws -
Albert Parsons
Supt. H.M.D. *on/wr*
marks



41ST. NEWFOUNDLAND REGIMENT 15

ALLOTMENTS

I, Samuel Daws, Regl. No. 3224

hereby agree, until further notification by me, and in similar official form to make an Allotment of _____ Dollars and Seventy Cents ^{Pence}, per diem, from my Pay, to, and for the benefit of the undermentioned Person 7 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 February 1st 1917.

| Identity Certificate No. | Whether Wife, Child, other Relative or Friend | NAME (in full) | ADDRESS | AMOUNT (each person) |
|--------------------------|---|-----------------|------------------------------|----------------------|
| 336 | Wife | Mrs Louise Daws | 70 Grosvenor St. John's N.F. | 70¢ |
| | | | | |
| | | | | |
| | | | | |
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| | | | | |
| | | | | |
| | | | | |
| Total Allotment, \$ | | | | |

Replacing to
3819

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.)

W. H. Hick
Officer Commanding

Company

(Sig.)

(Rank)

Samuel Daws
Rank PFC
Wife Louise Daws
6 R Co

St John's
Jan 31st 1917

No. 3819



3 1st. NEWFOUNDLAND REGIMENT 16.

ALLOTMENTS

I, Samuel Dawe, Regl. No. 3224.

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

Allotment begins Dec 1/16

| Identity Certificate No. | Whether Wife, Child, other Relative or Friend | NAME (in full) | ADDRESS | AMOUNT (each person) |
|--------------------------|---|----------------------------|----------------------------|----------------------|
| 3137 | Mother | Mrs Samuel (Clara) Dawe | 170 Water St West - 89. | 50 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | Total Allotment, \$ | 50 |

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

(Sig.) Charles R. Aye Capt.
 Officer Commanding
D Company
J. J. Hus
W. A. R. A.
 1916

This
 (Sig.) Samuel X Dawe
 (Rank) 16 mark
Edmund

LAST PAY CERTIFICATE

OFFICE 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. 3224 Rank Plt. Name Dave S. Unit ROYAL NEWFOUNDLAND REGT who was repatriated to Newfoundland on 11/2/18 Authority _____ Cause _____

DR.

STATEMENT OF ACCOUNT

| PARTICULARS | | £ s d | | | | PARTICULARS | | CR. | | | |
|---|--|---------------|-----|----|----|-------------|--|-----|----|-----|----|
| Balance Dr. from | | 19 | 50 | 11 | 19 | 1 | Balance Cr. from | | | | |
| Allotment 19 days @ <u>600</u> | | 7 | 600 | | | | Pay 19 days @ \$ <u>100</u> | 119 | 00 | | |
| Cash Payments: | | 3 | 00 | | | | Field Allow 19 days @ \$ <u>10/100</u> | 11 | 90 | | |
| <u>1st Pay</u> | | 11 | | 2 | 00 | | Other Allowes days @ \$ | | | 4 | 5 |
| <u>2nd</u> | | | | 1 | 3 | 10 | Other Credits: | | | | |
| Other Debits: | | | | | | | | | | | |
| <u>B. Damages.</u> | | | | | | 6 | | | | | |
| <u>Miss. Stopp.</u> | | | | | | 5 | | | | | |
| <u>Stewation F. Coy 25.10.18</u> | | | | | | | | | | | |
| <u>PTAS. 40</u> | | 3 | 40 | | 14 | 0 | | | | | |
| <u>Stewation F. Coy R.L. 11. 15. 18 R.L. 20</u> | | 12 | 50 | | 11 | 6 | | | | | |
| Total Debits | | | | 15 | 5 | 4 | Total Credits | | | 144 | 5 |
| Balance due by Paymaster | | | | | | | Balance due to Paymaster | | | 1 | 19 |
| | | | | 15 | 5 | 4 | | | | 15 | 5 |

PERIOD: FROM 23/11/16 TO 20/12/18

CHECKED
S.T.
24/12/18

Copy sent Troop in 21353/12
R.A. 25-12-18

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

(Place) HAZELEY DOWN CAMP (Date) Dec 1918

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

Pay & Record Office, London, _____ to _____
O.C. "3rd Company."
Chief Paymaster & Officer i/c Records.

Orderly Room.

Dear Miss Way, Look ~~to~~ up,

Will you please

change the address of the
allottee of Pk Samuel Daws
No. 3224 from 170 Water St.

~~to~~ ~~the~~ 192. Water St. West.

I understand from the
lady who brought the enclosed
note, that that is what the
said note means.

Yours respectfully,

David S. Knight

November 21st 1916
No-197 Water St West,

Sir

I respectfully beg leave
to ask you to clear my
money with Clara Dawe
the sum of fifty cts a day

George W. Parthy Inger

Samuel Dawe

Yours truly,
S. Dawe

October 28, 1919

Pte. S. Dawe,
E.M. Penitentiary,
City

Dear Sir:

I enclose cheque for \$1.00
balance of War Service Gratuity due you.

Yours truly,

Major
Paymaster

LM-
Enc.

H.M. Penitentiary

6269

H. F. Rendall.
Chief of Staff.
Milita. Department
Oct 13/10/09

My Dear Sir

I am now in request
of asking you for to see about
my money. I have written three
letters to captain Howley about
it and he didnt ~~se~~ send me
any answer to either of them.
So now I am writing to you
to see if you can do any thing
with it. I ~~fo~~ have been here
Ever sience the 19 of March 1919
I would like for you to see
in to they matter I would like
for you to recon up my account
and send it in care of Mr. parlons.

for me and I will get it
all right. I would like for
you to send it to me as soon as
you can for my time is getting
short I will be going out of
this in three or four months time
So if you please Sir I would
like for you to make up
my account and send it
as soon as possible.

answer as soon as possible

I am

I remain yours truly

Servant

Ex private. Sam. Shaw.

(Po) 32.24.

St. John's,

DEC 27 1918

Royal Newfoundland Regiment.

Billeting Account,

To Mt. S. Dawe
George Street

Billeting Soldiers as undermentioned

from Dec 21st /18 to Dec 27th /18

3224 - Mt. S. Dawe 57 20

| | | | |
|------------|-------------|----------|-----------|
| ACCOUNT | <u>138m</u> | INITIALS | |
| CHK NO | <u>7569</u> | INITIALS | <u>EW</u> |
| OLD LEDGER | | INITIALS | |
| PAY LEDGER | | INITIALS | |
| CHK LEDGER | <u>7</u> | INITIALS | |

Certified correct for \$

Leah W. Snow

P.M.

3024 Dawe

Please make first payment

P.D. Pay.

22/11/19

W.F.R.

Frederick Dawe

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 16 ⁶⁴/₁₀₀

July 8 19 19

Received from the First Newfoundland Regiment
the sum of Sixteen ⁶⁴/₁₀₀ Dollars.
~~on account~~ of Pay. W.S.S.
balance

Wm B. J. Dawe
ser
mess

| | |
|------------------|--------------------------|
| Ch. No. 2531 | Initials.. <u>W.S.S.</u> |
| Pay Ledger. 388 | Initials.. <u>W.S.S.</u> |
| Gen. Ledger..... | Initials..... |

Regtl. No. 1

Rank

Wm B. J. Dawe
Wm B. J. Dawe

No. 3227 Rank Pt

Name J. S. Dawe

James S. Dawe

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 15⁶⁴

Sep 30 1919

Received from the First Newfoundland Regiment
the sum of Fifteen 64/100 Dollars.
~~amount~~ of Pay. W. S. L.

Mrs Clara J. Dawe.

| | |
|--------------------------|------------------------|
| Ch. No. <u>11929</u> | Initials... <u>CBA</u> |
| Pay Ledger... <u>388</u> | Initials... <u>W</u> |
| Gen. Ledger..... | Initials..... |

Regtl. No. 3224 Rank Dawe

Witness C. B. Hefferton

No. 3224

Rank

Pt.

Name

S Dawe

M Clara Jane Dawe

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 1⁰⁰

Oct 20 19 19

Received from the First Newfoundland Regiment
the sum of ONE Dollars.
~~account~~ of Pay. W.L.G.
balance

| | | | |
|-------------|-------|-----------|-----|
| Ch. No. | 16109 | Initials. | Jed |
| Pay Ledger | 388 | Initials. | Wn |
| Gen. Ledger | | Initials. | |

Regtl. No.

[Handwritten signature]

No. 3224

Rank

Pf.

Name

S. Dawe

Go W. Dawson

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 70⁰⁰ -

May 6th 1919

Received from the First Newfoundland Regiment
the sum of Seventy Dollars.
on account of Pay W.S.L.Y. her
balance Mrs Clara Dawe
mark

| | |
|----------------|----------------|
| Ch. No. 19291 | Initials. C.W. |
| Pay Ledger 388 | Initials. C.W. |
| Gen. Ledger | Initials. |

Recd. No. 8
Wit. E. Welch

No. 3224

Rank

Pte

Name

a. Dawe

msi C. Dawe

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 33⁰⁰/_x

January 22 1919

Received from the First Newfoundland Regiment
the sum of Thirty Three ⁰⁰/_x Dollars.
~~amount~~ of Pay. P.O.P.
balance

his
S. J. Dault
mark

Regtl. No. 3224 Rank Plt.

Fred. B. Jones

| | |
|------------------|------------------|
| Ch. No. 8686 | Initials. J.H. |
| Pay Ledger. 472 | Initials. A.M.L. |
| Gen. Ledger..... | Initials..... |

No. 3224

Rank

Pl

Name

Dave S

Reg. No. 522 ✓ Rank *PLC* Name *Lawrence S.*
Attested Address *17. Oak St. W.*
Allotment Allottee
Date of Allotment Returned from Overseas *21-12-18*
Embarked for Overseas Cause *Discharge*

| | |
|----------------|--|
| <i>14-1-19</i> | <i>Rec Dis Permanently Unfit</i> |
| <i>20-1-19</i> | PASSED TO DEMOBILIZATION OF |
| <i>20-1-19</i> | DISCHARGE APPROVED ON DEMOBILIZATION. |

ON HIS MAJESTY'S SERVICE.

Dept of Militia

Pt. John

C.S.O.F. (Plaque Section),

Royal Arsenal,

London, S.E. 18



MEMO

22

3224

950113

To ensure that as far as may be possible none of the next of kin of those who have fallen in the War shall fail to receive the Memorial Plaque, it is requested that on receipt of the enclosed Plaque this card be signed at the bottom and posted. No stamp is required.

[Handwritten flourish]

Mrs James King

K. 1683.

WINDMILL
SHEPHERD
S. EAS
9

(N) 4/21-1900] W3180/RO6318 Gcm 1/22 (O.P. 17) 3567 G & S 198

Receipt for Army Book 64

No. 3224 Name. Paul (F) (S)

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

Date September 29, 1920

Place. W.D. Deady's Lane, St. John's.

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

Name. Lamiré ^{his} Paul _{mark.}

5 1/2

W

8

C.R. 3224

RECEIPT.

FOR ISSUE OF RIBBON OF VICTORY MEDAL/1914-1919.

I certify that I have received an issue of 2 inches
of Ribbon of British Victory Medal-1914-1919. & General Service
Ribbon

NO. 3224... NAME. Samuel. Davis.

DATE. March 4 1915

PLACE. 2. Dadies Lane

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B, 121.

Forms
B 121
20.

Number of Sheets 1
Signature of O. C. Company Chas. Aye Capt

Regiment of 1st Newfoundland

| Regimental Number and Name | |
|----------------------------|----------------------|
| No. | <u>3224 Bawe. S.</u> |
| Joined | Date |
| Joined | Date |
| Joined | Date |
| Joined | Date |

| Enlistment | | Trade |
|------------------------------|---|----------------|
| Age on | <u>22 years 3 months</u> | <u>Sailor</u> |
| Place and Date of Enlistment | <u>St. John's, N.F.</u> | Religion |
| | <u>10.4.16</u> | <u>P.O.B.</u> |
| Period of | with Colours <u>2 3/4</u> years. with Reserve <u> </u> years. | Place of Birth |
| | | |

| |
|---|
| Good Conduct Badges, Service pay or proficiency pay |
|---|

| 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 |
|-------------------------------------|-----------------|------|--|--|---|---------------------------|---|-----------------------------|-----------------------------------|
| St. John's. | 22-11-16 | Pte. | | Failing to comply with orders. | <u>2/ Lt. V. Blunt</u> | <u>3 days C.B.</u> | <u>27/1/16</u> | <u>G.Y. Garty Major</u> | |
| St. John's. | 24/11/16 | " | | Breaking out of Barracks. whistled & defaulted & remaining absent until apprehended by Regt. Police at 11:30 pm 25-11-16 | <u>1 Lt. Mews</u> <u>Pte. Burge. R.P.</u> | <u>96 hrs S.H.L.</u> | <u>27/1/16</u> | <u>G.Y. Garty Major</u> | <u>Forfeit 2 days pay by R.W.</u> |
| | | | <u>1 Drunken</u> <u>II Receiving arrest.</u> | | | | | | |
| St. John's | 4.12.16 | Pte | | Absent from 9 a.m. to 9 a.m. on 5.12.16. | <u>Lt. G. Fraw</u> | <u>5 days C.B.</u> | <u>6/12/16</u> | <u>Thomas R. Ure. Capt.</u> | <u>Forfeit 3 days pay R.W.</u> |
| St. John's, N.F. 8.12.16 | | Pte. | | Absent without leave from 9 a.m. etc. until apprehended by Regt. Police at 11:30 pm 8.12.16 | <u>Lt. G. Fraw</u> <u>Acting Capt.</u> <u>Pte. Manning R.P.</u> | <u>96 hours detention</u> | <u>11/1/16</u> | <u>Chas. Aye Capt.</u> | <u>Forfeit 4 days pay R.W.</u> |
| | | | <u>2 Drunken</u> <u>III Receiving arrest.</u> | | | | | | |
| To be carried over | | | | | | | | | |
| <u>Demobilized St. John's, 3/19</u> | | | | | | | | | |

Army Form B, 121

Brought Forward

| | | | | | | | | |
|------------------|----------|-----|---|--|---|-----------|--------------------|--------------------------|
| St. John's Regt. | 24.12.16 | Pte | 1. Insolence to N.C.O. in charge of guard 2. Disruption of guard | L. E. News | 96 hrs Detain | 28.12.16 | G. T. Carty Major | |
| Windsor | 8.2.17 | Pte | Not out of bed @ 7.15 AM | Sgt. Newman | 3 days CB | 8.2.17 | Major Montgomery | |
| Apr. | 14.5.17 | Pte | Absent at Tattoo Race Cact. under 12 pm 21.5.17 | Cpl. Marshall | Admonished | 21.5.17 | Capt. J. E. J. Dix | Forfeit 3 days pay. R.W. |
| Apr | 2-vi-17 | 3 | 1. Drunk 2. Creating a disturbance in Group 8. at 11 pm. 3. Resisting arrest | Cpl. Dunphy Lt. Walsh RSP Cpl. Brian | 96 hrs. actn. Fined 7/6 | 4. vi. 17 | Major Rendall | |
| Apr | 19.6.17 | | Absent from tattoo until 10.00 PM 21.6.17 | Capt. Walsh | | | | |
| | 21.6.17 | | Irregular conduct. Opening kit bag of Lt. Brennan | Lt. Brennan | 16 hrs detention | 22.6.17 | Major Rendall | Forfeit 3 days pay. R.W. |
| | 30.6.17 | | Absent from 8.15 am until arriving Regimental Office at 8.00 pm Starting a falsehood to an N.C.O. | Capt. Reilly Capt. Jackson | Johns R.P. No 2 | 2.7 | Lt Col. Whitaker | Forfeit 3 days pay. R.W. |
| Barry | 8/7/17 | | 1. Absent from Tattoo 4.15 to 5.15 2. Hesitating to obey orders | Capt. Stratton Sgt. Bidama | 168 hrs detention Fined 10 shillings | 12/7/17 | Lt Col. Whitaker | Forfeit 3 days pay. R.W. |
| Barry | | | 3. Drunk and causing disturbance | Sgt. Murray | | | | |

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. F. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.
 [1902] W2017/2124 10000s 6/110s 52 56

Forms
B. 121.
B.

Regiment of _____

Number of Sheet 2nd
 Signature of O. C. Company W. G. Hunt

| | | | | | |
|----------------------------|----------------|---|---------------------------------|-----------------|---|
| Regimental Number and Name | | Enlistment | | Trade | Good Conduct Badges, Service Pay or Proficiency Pay |
| No. | <u>Dawn S.</u> | Age on | <u>22</u> years <u>3</u> months | <u>Sailor</u> | |
| <u>3224</u> | | Place and Date of Enlistment | | Religion | |
| Joined _____ Date _____ | | | | <u>C. of E.</u> | |
| Joined _____ Date _____ | | Period of { with Colours years. with Reserve years. | | Place of Birth | |
| Joined _____ Date _____ | | | | | |

| Place | Date of Offence | Rank | Cases of Drunkenness | OFFENCE | Names of Witnesses | Punishment awarded | Date of award or of order dispensing with it | By whom awarded | REMARKS |
|--------------|-----------------|-------------|----------------------|---|---|--|--|---|---|
| <u>Barry</u> | <u>21-7-17</u> | <u>Pvt.</u> | | <u>Absent from Duty 21st until 2 a.m. 24-7-17</u> | <u>Sgt. Hall</u> | | | | <u>Forfeit 4 days pay by R. W. G.S.</u> |
| <u>Barry</u> | <u>29/7/17</u> | . | <u>5</u> | <u>Breaking camp after tattoo & Drunkenly resisting arrest</u> | <u>Sgt. Smith</u> <u>Sgt. O'Reilly</u> <u>Pvt. Evans</u> <u>Sgt. Bever</u> | <u>96 hrs F.P. 2</u> <u>168 hrs Detention</u> <u>Penal 7 & 6d.</u> | <u>24/7/17</u> | <u>Lt. Col. Whitaker</u> <u>Major Roundell</u> | <u>Forfeit 1 day pay by R. W. G.S.</u> |
| <u>Barry</u> | <u>13-8-17</u> | " | | <u>Breaking camp whilst under violation at 9.30am</u> | <u>Sgt. Murray</u> | | | | <u>Deprived of 1 day pay</u> |
| | | | | <u>Absent from camp from 9.30am 13th until arrested by police at 4 P.M. 14-8-17</u> | <u>Lt. Col. Roberts</u> | <u>96 hrs F.P. 2.</u> | <u>16-8-17</u> | <u>Lt. Col. Whitaker</u> | <u>Forfeit 1 day pay by R. W. G.S.</u> |
| <u>Barry</u> | <u>21-8-17</u> | - | | <u>Reporting sick without a cause</u> | <u>Sgt. Green</u> | <u>7 days C.P.</u> | <u>22/8</u> | <u>Lt. Col. Whitaker</u> | <u>Deprived 5 days pay</u> |
| <u>Barry</u> | <u>28-8-17</u> | - | | <u>Absent without leave from recall 28th until apprehended by police at 7.30pm 1-9-17</u> | <u>Sgt. Bishop</u> <u>(Documentary)</u> <u>Pvt. Evans</u> | <u>Admonished</u> | <u>3/9</u> | <u>Lt. Col. Whitaker</u> | <u>Forfeit 5 days pay by R. W. G.S.</u> |
| | | | | <u>To be carried over</u> | | | | | |

Army Form B. 121

Brought forward

Bunny 11/11. P.C.

~~about 10.15 am. 1st Lt. [unclear] [unclear]
from [unclear] [unclear] [unclear] [unclear] [unclear] [unclear]
approached by police [unclear]
at 7.30 am/11/11~~

~~11/11 Lt. Col. [unclear] 2 p.m. [unclear]
[unclear] [unclear]~~

Hazley Down 19.8.18 P.C.

Absent from 10.45 am.
Parade

Lt. Butler at days C.B. 20.2.18 Capt. Whitty M.C.

February 7th., 1919

#3224 Pte. Samuel Dawe,

#170 Water St West.

City.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 886."

Yours truly,

Captain,
Paymaster & O.i/c Records

Enc'l 1.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 322 Rank SS Name Samuel Dawe
 Date of Enlistment 9. 11. 14 Address St. Johns District St. Johns
 Occupation Sailor Classification for Discharge B Medical Category F
 Recommendation S.M.B. Permanently Unable Disability Rating Less than 70%

Passed to Demobilization Officer with following documents:—

| | | | | | | | | | | |
|-----------|---|--------|---|---------|---|------------|--|---------|---|--|
| N.F. P/36 | / | B 268 | | B 121 | 2 | N.F. Med. | | D.F. 1. | | |
| B 178 | / | W 3494 | | B 122 | / | Board 1st. | | " 2. | | |
| B 178a | / | D 400A | / | 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 92 | | | | | | |

Date 20-1-19

W. H. C. Capt.
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action.

Samuel Dawe ^{His} Mark
Wife Caton RPM

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$6.00
 (b) Clothing Supplied Self & Family

Date 20-1-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. ml to his home
 at St John and Release Certificate No. 870 issued

Date 20-1-19

Chadwick 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 3-2-19

Date 20-1-19

Wobley Capt
 Depot Paymaster.

Discharge approved for 20.1.19

Forwarded with following documents to O.C Discharge Depot.

| | | | | | |
|-----------|--------|--------|-----------|--------|-----------------|
| N.F. P/24 | B 268 | B 121 | R.F. Med. | D.F. 1 | |
| F 178 | W 3494 | B 122 | Board 1st | " 2 | 1 <u>John D</u> |
| F 178a | D 400A | B 1915 | do 2nd | " 3 | 2 |
| B 179 | D 400B | Form L | do 3rd | " 4 | |
| B 179a | D 400C | Form K | do 4th | " 5 | |
| B 179b | B 103 | ME 2 | | " 6 | |
| B 179c | B 120 | M 93 | | | |

Date 21.1.19

Chadwick Capt
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer in Records.
 Board of Pension Commissioners.

with following additional documents.

ELIGIBLE for POST DISCHARGE PAY

JAN 20 1919

Date

R.H. [Signature]
 O. C. Discharge Depot.

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

Date

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 3224 Rank Private Name Flower, Saul
 Intended place of residence St. John's

2. Occupation Sailor
 Classification of soldier B Medical Category E

3. The above named man is discharged in consequence of DEMobilIZATION
ELIGIBLE for POST DISCHARGE PAY

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

Place JAN 20 1919
 Date JAN 20 1919 *W. H. Cress*
 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
20-1-19

Samuel x Flower
 Signature of soldier
W. H. Cress
 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
20-1-19

Saul Flower
 Signature of soldier
W. H. Cress
 Signature of witness

STATEMENT OF SERVICE

Enlisted for service 9-11-16 No of days on Military Service 797 2/3 days
 Discharged from service 20-1-19 Plus 14 days

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
JAN 20 1919

R. H. Cress
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

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

Place St. John's, Nfld.
February 5/1919

W. H. Cress
 Officer in Charge
 The Royal Newfoundland Regiment

22 B 2079/1886

The Royal Newfoundland Regiment

3224

DEMobilIZATION OF

Reg. No. 3224 Rank Private Name Samuel Dawe
 Date of Enlistment 9-11-16 Address St Johns District St Johns
 Occupation Sailor Classification for Discharge B Medical Category F
 Recommendation S.M.B. Permanently Unfit Disability Rating Less than 20%

Passed to Demobilization Officer with following documents:—

| | | | | | | | | | | |
|-----------|---|--------|---|--------|---|-----------|--|--------|---|--|
| N.F. P/36 | 1 | B 268 | | B 121 | 2 | N.F. Med. | | D.F. 1 | | |
| B 178 | 1 | W 2494 | | B 122 | 1 | 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 | 1 | ME 2 | | | | " 6 | | |
| B 179c | | B 120 | | M 93 | | | | | | |

Date 20-1-19

W. J. G. Galt
O. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

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

Samuel Dawe ^{tho} ^{Mark}
Wt. Officer G.P.M.S.

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
W. J. G. Galt
- (b) Clothing Supplied.....

Date 20-1-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *Nil* to his home
 at *H. John* and Release Certificate No. *872* issued.

Date *20-1-19* *CBDicks 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 *3-2-19*

Date *20-1-19-* *W. H. Capl.*
 Depot Paymaster.

Discharge approved for *20.1.19*
 Forwarded with following documents to O.C Discharge Depot.

| | | | | |
|------------|---------|---------|------------|---------|
| N.F. P. 38 | B 268. | B 121. | N.F. Med. | D.F. 1. |
| F 178. | W 3494. | B 122. | Board 1st. | " 2. |
| B 178a. | D 400A. | B 1215. | do 2nd. | " 3. |
| H 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 *21. 1. 19* *CBDicks Capt.*
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:-
 Officer in Records.
 Board of Pension Commissioners.
 with following additional documents.

ELIGIBLE for POST DISCHARGE PAY

Date *JAN 20 1919* *R.H. Sait Capt.*
 O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.
 Date *Jan 22/19* *W. H. Capl.*



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 *Samuel Dave*
 Regiment from which discharged *Royal Newfoundland*
 Regimental number *32 24*
 Intended address *ST Johns*
 Height on discharge *5* Feet *6*
 Color of hair on discharge *light*
 Complexion *fair*
 Color of eyes *Blue*
 Descriptive Marks *wound right hand*
 Figure on discharge *medium*
 Christian name of Father *Samuel*
 Christian name of Mother
 Wife's maiden name in full *Louisa*
 Date and place of marriage *ST Johns 19 17*
 Christian names of children *William & Nellie*
 Place and date of soldier's birth *1896 ST Johns*
 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) *Samuel Dave* *W. Anderson*
 (Rank) *Pte*

Station *ST Johns*

Date *8-1-19*

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.

The Royal Newfoundland Regiment

COPY

PROCEEDINGS ON DISCHARGE

1. No. 3224 Rank Private Name Dawe, Samuel
 Intended place of residence St. John's
2. Occupation Sailor
 Classification of soldier B Medical Category E
3. The above named man is discharged in consequence of DEMOBILIZATION
ELIGIBLE for POST DISCHARGE PAY
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 (sgnd) C. C. Duley, Capt.
 Date Jan. 20, 1919 for 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 his (sgnd) Samuel X Dawe
 Signature of soldier
20-1-19 " G. B. Dicks, Capt.
 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 his (sgnd) Samuel X Dawe
 Signature of soldier
20-1-19 " W. J. Eaton R.O.M.S.
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 9-11-16 No of days on Military
 Discharged from service 20-1-19 plus 14 days Service 797

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.
 Place ST. JOHN'S (sgnd) R. H. Tait, Capt.
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date Jan. 20, 1919

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place Officer i/c Records
 Date The Royal Newfoundland Regiment

Medical Report on an Invalid.Station Hansley Down Camp.Date 28/11/18.

- | | |
|------------------------------------|--|
| 1. Unit Royal Newfoundland. | 7. Former Trade } or Occupation } |
| 2. Regimental No. 3224 | 7A. If with previous service in Army, state— |
| 3. Rank Pte. | (a) Former Unit; |
| 4. Name Dave. | (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).***G.S.W. RIGHT HAND.**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. **ARGENTINES**
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. **Amputated middle & terminal Phalanges Index finger Right. Wandsworth Varicose veins slight. Boarded 21 Jan. 1918.**

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). **Wounded on Active Service.**
- (b) constitutional or hereditary, and not aggravated by service during the present war. **N.A.**
- (c) attributable to or aggravated by want of proper care on the man's part, e.g. intemperance, neglect, &c. **V.D.C. Cured.**

13. What is his present condition? **Amputation portion index finger interferes with holding rifle unfit for ~~France~~ Active Service.**
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?

Repatriation (2).

J. ST. P. KNIGHT, N.F.L.D. REG'T Capt.

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.

Opinion of the Medical Board.

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

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

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

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

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease. **Has lost terminal Phalanx of Index finger. Varicose veins over calf of leg.**

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

(i.) Service during the present war; **Yes.**

(ii.) Climate;

(iii.) Ordinary military service;

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

(v.) Whether it is constitutional or hereditary.

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

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

23. Is the disability permanent?

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

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

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

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

27. Do the Board recommend—

(a) Discharge as permanently unfit, or

(b) Change to England? **Yes.**

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

(a) Sanatorium;

(b) Hospital;

(c) Convalescent home;

(d) Asylum; or

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

29. With reference to Army Council Instruction No. 1275 of 1917, is any surgical appliance recommended?

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

Signatures:—

H.S. FRASER.

President.

Station **ST. JOHN'S.**

ARCH. TAIT.

L. PATERSON. MAJOR.

Members.

Date **Jan 14th, 1919.**

Approved **JAN 14 1919**

(Sgd.) **CLUNY MACPHERSON. MAJOR**

Administrative Medical Officer.

Date **LEWIS TOWNLAND**

Medical Report on an Invalid.

Station Hassley Down Camp.

Date 28/11/18.

- | | |
|---|--|
| 1. Unit Royal Newfoundland. | 7. Former Trade } or Occupation } |
| 2. Regimental No. 3224 | 7A. If with previous service in Army, state— |
| 3. Rank Pte. | (a) Former Unit; |
| 4. Name Daws. | (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).

G.S.W. RIGHT HAND.

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. **ARMENTIERS**
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. **Amputated middle & terminal Phalanges Index finger Right, Wandsworth Varicose veins slight. Boarded B1 Jan. 1918.**

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).

Wounded on Active Service.

(b) constitutional or hereditary, and not aggravated by service during the present war.

N.A.

(c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, etc.

V.D.G. Cured.

13. What is his present condition? **Reputation portion index finger interferes with holding rifle unfit for Service. Active Service.**

Weight should be given in all cases where 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?

Repatriation (2).

J. ST. P. KNIGHT, M.D., HONORARY Capt.

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.

Opinion of the Medical Board.

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

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

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

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

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

**Has lost terminal Phalanx of Index finger.
Varicose veins over calf of leg.**

21. (a.) State whether the disability is clearly attributable to—
(i.) Service during the present war; **Yes.**

(ii.) Climate;

(iii.) Ordinary military service;

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

(v.) Whether it is constitutional or hereditary.

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

G.S.N.

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

23. Is the disability permanent?

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

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

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

Less than 20%.

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

27. Do the Board recommend—

(a) Discharge as permanently unfit, or

(b) Change to England?

Yes.

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

(a) Sanatorium;

(b) Hospital;

(c) Convalescent home;

(d) Asylum; or

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

29. With reference to Army Council Instruction No. 1275 of 1917, is any surgical appliance recommended?

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

Signatures:—

N. S. FRASER. _____ President.

Station **ST. JOHN'S.**

ARCH. TAIT.

Date

JAN 14 1919

L. PATRICKSON. MAJOR.

Members.

Approved

JAN 14 1919

Station

By

(Sgt.) CLYDE MACPHERSON. MAJOR

Administrative Medical Officer.

Date

NEWFOUNDLAND.

C.R. 3224

Feb. 27th. 1920

No. 3224 Private Dawe
C/o H.M. Penitentiary

Dear Sir:-

In reply to your letter of Feb. 15th
I have to state that Separation Allowance on your
account has been paid for the full term of your enlistment,
and no balance remains to be paid on this account.

I have given orders that your service ribands
should be forwarded to you.

Yours faithfully,

Lieut.-Col.,

Chief Staff Officer.

Samuel Dawe

67 Coronation St

N^o 3224

St Shields

Newfoundland Reg.

England

2P-10-36

To the Secretaries,

Dear Sir,

I am applying
to you for a copy of my discharge
papers among from the day I joined
all the day it was discharged.

I am in need of these papers
very badly, and they are good for me
as a passport on this side.

I am going to
hospital with a broken arm this
afternoon, it would be very much
obliged if you could let me
have a copy at your early convenience
I am

Yours faithfully
Samuel Dawe.

