



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3878 Name James Delaney Corps R.I.

3878

Questions to be put to the Recruit before Enlistment.

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

I, James Delaney 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.

725/6-17

James Delaney SIGNATURE OF RECRUIT.
Brandon Smith Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St Johns

on this 25 day of June 1915
Signature of Attesting Officer [Signature]

†CERTIFICATE OF APPROVING OFFICER

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

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

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

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name James Delaney
 Apparent age 20 years 8 months. Height 5 feet 8 inches
 Chest Measurement { Girth when fully expanded 36 inches
 Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin William Delaney
Blacemore | 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 <u>25-6-17</u>									
Joined at <u>John's</u> on <u>June 25-17</u>									
<div style="font-size: 2em; font-weight: bold; opacity: 0.5;">Discharged August 6 1919</div>									
Embarked <u>11-12-17</u> Embarked <u>10-10-18</u> Disembarked <u>4-18</u>									
Joined <u>19-10-18</u> Admitted to <u>1st</u> Hosp <u>5-2-19</u> Sent to <u>1st</u> <u>1-7-19</u>									
Left for demobilization <u>24-6-19</u> Arrived <u>1-7-19</u>									
Demobilization <u>John's</u> <u>6-8-19</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 6-8-19 [date of discharge] 2 years 43 days
 Pensions [" "] [" "] [" "]

C.R. 38⁷98

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.,
By T.G. Mathias, D.S.O. Commanding 1st Bn. 6-11-18.

The u/m N.C.O. proceeded on Gas Course. 4-11-18.

3898 Cpl. J. Delaney.

7

D. Coy.

C.R. 3848

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.
St. John's, Aug. 15th, 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from 6-8-19.

3878 Sgt. J. Delaney.

C.R. 5878

Extract from Daily Orders Part 11 Unit The Royal Newfoundland Regt.
St. John's, July 14th, 1919.

The discharge of the Undernoted on demobilisation has been
APPROVED by O.C. Discharge Depot with effect from 23-4-19.

3878 Sgt. J. Delaney

C.R. 3878

Extract from Daily Orders Part VI Unit The Royal Field. Regt.
St. John's, July 3rd, 1919.

3878 S gt. J. Delaney.

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

C.R. 3878

Extract from Daily Orders by Lt.Col. B.J. Barton, D.S.O.
Commanding 2nd Bn. Royal Nfld, Regt. 2-6-19.

The following having reported from the 1st Bn. is taken on the
strength and posted to "C" Company as from 1-6-19 $\frac{1}{2}$

3878 Sgt. J. Delaney.

C.R. 3878

Extract from War Office List No. H.A. 36288.

DIS. TO CAMP. ADJT. BRUYERS CAMP EX I STY H. 7th, May 1919.

#3878 Sergt. J. Delaney.

V.D.G.,

C.R. 3878

Extract from War Office List No. H. A. 35447

Admitted 1 Sty. Hospital Rouen 13th. March 1919.

3878 Sergt. J. Delaney.

V.D.G.

C.R. 3878

Extract from Casualties..... List No.H.A. 35367

35367

3878 Sgt. J. Delaney

Adm. 6 General Hospital Mar.5th,1919. Spn. Ankle Sev

C.R. 3878

Extract of War Office List, No. H.A. 35367.

March 4th/19.

ADMITTED 6th General Hospital Rouen, March 5th/19.

3878 Sgt. J. Delaney.

Sprained Ankle Severe.

C.R. 3878

Extract of DAILY ORDERS PART II ROYAL NEWFOUNDLAND REGIMENT
IN FRANCE DATED 31/1/19.

CONFIRMED TO RANK AND APPOINTED TO A/CQMS.

#3878 A/Sgt. J. Delaney.

17/1/19.

C.R. 3878

Extract of DAILY ORDERS, PART. 11, ROYAL NEWFOUNDLAND REGIMENT,
in France, Jan. 16th 1919.

#3878 Cpl. J. Delaney.

Appointed Acting Sergeant. 3/1/19.

C.R. 3878

Extract from Daily Orders by. LT.COL. B.J. BARTON, commanding
2nd Battalion Royal Nfld.Regt., 1-10-18.

3878 A/Sgt J. Delaney

Reverts to Cpl. from 1-10-18.

MM.

C.R. 3878

Extract from Daily Orders by LT.COL. B.J. BARTON, commanding
2nd Battalion Royal Nfld.Regt., 1-10-18.

3878 A/Sgt J. Pelaney

Reverts to Cpl. from 1-10-18.

MM.

C.R. 3878

Extract from Nominal Roll of Draft No. 53 of 51 Other
ranks from 2nd., Bn. Newfoundland Regiment to 1st.,
Bn, Royal Newfoundland Regiment to B.E.F.,
conducting Officer 2/Lieut. W.G.Munn, / 1/10/18.

3878 Opl. J. Delaney.

BC.

C.R. 3878

Extract from Orders by Lt. Col. B. J. BARRON.
COMMANDING 2nd. Bn. of the Royal Newfoundland
Regiment.

A draft of 21 Other ranks will be held in readiness
to join the 1st. Battalion of the Regiment. Those
who have not already had leave will proceed on
Draft leave from 2. p. m. 25th. inst to Midnight
27th. inst., 27/9/18.

Sgt.
3878 ~~Sgt.~~ Delaney.

C.R. 3878

Extract from Daily Orders by Lt. Col. B. J. Barton, D.S.O.
Commanding 2nd Bn. Royal Field Regt. dated 1-7-181

The undermentioned to be Acting Sergeant.

~~#200~~ #3878 a/Cpl. J. Delaney.

R. 3878

Extract from Nominal Roll of Draft No. 55 from 2nd Bn.
R. Mfld. Regt. to 1st Bns B.M.F. embarked Southampton
1-10-18.

3878 Cpl. J. Delaney.

C.R. 3878

Extract from Sanctions Nominal Roll, embarked St. John's for Overseas
December 11th 1917.

#3878 L/C J. DELANEY

C.R. 3878

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt., Nov. 30th, 1917.

3878 B/Cpl. J. Delaney.

To be A/Cpl. from Dec. 1st. 1917.

C.R. 3878

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt., St. John's, Nov. 1st, 1917.

3878 Pte. J. Delaney.

To Be Lance Corporal with effect from Nov. 1st, 1917.

C.R. 3878

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, June 25th, 1917.

3878 Pte. J. Delaney.

Attested this day posted to F. Coy, and assigned numbers
as shown.

J Delaney

C.R. 3875

1890

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

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

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

1. Unit and Corps. *Royal Newfoundland* Former Trade or Occupation }
 2. Regtl. No. *3875* 3. Rank. *1st Sergt* 7a. If the soldier claims previous service in Army, he should state—
 4. Name *Delaney* (Surname) *J* (Christian Names) (a) Former Regts. or Corps; with Regtl. Nos.
 5. Age last birthday. *23*
 6. Posted for duty on *June 26/17* at *St Johns* in category (or grade).....
 8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty? (b) Date of Discharge;
 (c) Cause of Discharge.
 9. If a Court of Inquiry was held on an injury state:—
 (a) When (d) Particulars of Pension or Gratuity (if any)
 (b) Where
 (c) Opinion of Court

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

Statement of Case.

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

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

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

na.
 na.
 na.
 U.O. 9 cases
 na.

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

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

He complains of no disability.

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

na.
 na.
 na.
 na.

20. Do you recommend—
- (a) Discharge as permanently unfit?
 - (b) Change to United Kingdom?
- Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Repatriation

Station Hampley D. Camp

Date 14/1/14

W. E. Proccurier Capt. R.M.C.
 Medical Officer in charge of case.

* 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.

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

Sir:-

Please charge the amounts set opposite my name to my account and pay it to the N.W.C.A. "Prisoners of War Fund" in quarterly instalments for the period of one year.

Commencing on the 1st July 1918.

Regtl. No.	Rank	Name	Amount	Signature
3878	Serg	Trelawny J.	£5.00	J. J. Delaney

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

Date _____

J. J. Delaney

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, 26/5/17.

Regtl No 3887 Rank Sgt Name Parkes J. Unit Royal Rifle Regt who was Transferred
to Infantry School on 4/10/18 Authority _____ Cause _____

DR. STATEMENT OF ACCOUNT

PERIOD:	PARTICULARS	£					PARTICULARS	£				
		£	s	d	£	s		d	£	s	d	
FROM <u>27/9/18</u> TO <u>25/10/18</u>	Balance Dr. from						Balance Cr. from					
	Allotment — days @ —						Pay <u>25</u> days @ \$ <u>1.35</u>					
	Cash Payments:						Field Allowance <u>25</u> days @ \$ <u>1.15</u>					
	<u>27/10/18 Casual</u>											
	Other Debits:						Other Allowances days @ \$					
							Other Credits:					
	Total Debits					200	Total Credits					8127
	Balance due by Paymaster					6127	Balance due to Paymaster					—
						8127						8127

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

S. J. Campbell
(Place) Infantry School (Date) 4/10/18

N. M. Emma
O.C. "C" 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.

Pay & Record Office, London,

Chief Paymaster & Officer 1/c Records:

N. M. Emma
12-12-18

No. 2488/91

From: NEW FOUNDLAND

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

CHIEF PAYMASTER & OFFICER I/C RECORDS.
NEWFOUNDLAND CONTINGENT,
58, VICTORIA STREET,
LONDON S.W. 1.
1st/Bn. Ryl Nfld Regt
ENGLAND.

B.E.F.

13th February 1919

27-2-1919

Sgt
3878 SERGT. Delaney J.

With reference to the following telegram from the Minister of Militia, / / (17.)

"Pay to- 3878 Delaney

£10.3.6.

Kindly advise whether this remittance should be

- (1) forwarded to you for payment to this Soldier;
- (2) retained to credit of his account; or
- (3) otherwise dealt with.

[Signature]
Chief Paymaster & O.I/c Records

[Handwritten initials]

3878 Sgt Delaney

This W.C.O. wishes this amount retained to the credit of his account please

T.G. Healter LIEUT. COL.
COMMANDING 1st Bn. ROYAL NEWFOUNDLAND REGIMENT.

NEWFOUNDLAND CONTINGENT
58, VICTORIA ST.
LONDON, S.W. 1
57 MAR 1919
PAY & RECORD OFFICE

Delaney, J.

3878

Hay Sept.

August 6th 1919.

#3878, Sgt. J. Delaney.

Placentia.

Dear Sir:

Enclosed please find Discharge Certificate
3485.

Yours truly.

Capt. & C. i/c. Records.

RS).

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 3878 Rank Sgt Name Delaney J
 Intended place of residence Placentia

2. Occupation Papermaker
 Classification of soldier E Medical Category AI

3. The above named man is discharged in consequence of

DEMOBILIZATION Eligible for War Service Gratuity

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

Place, ST. JOHN'S

Date 6/16/19 700

J. M. H.
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place, ST. JOHN'S

Date JUL 9 1919

J. Delaney
 Signature of soldier

J. M. H.
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place, ST. JOHN'S

Date JUL 9 - 1919

J. Delaney
 Signature of soldier

W. P. Eaton
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 25-6-17 No. of days on Military
 Discharged from service 23-7-19 Plus 14 days Service 773

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

Date JUL 23 1919

N. R. Cooper
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

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

Place, ST. JOHN'S

Date August 6/1919

M. Howley
 Officer in Charge
 The Royal Newfoundland Regiment

C 713 20 79/5456

The Royal Newfoundland Regiment

Class for Demobilization:—

60

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

8.7.19

Regimental No. *3878*.....

Name

Baloney James

Address

Placentia

Present Medical Category.....

Ai

Recommended for:— { (a) Immediate discharge

(b) ~~Standing Medical Board~~

Members of Board {

R.H. East Major
O.C. Discharge Depot.

Spencer
Senior Medical Officer

W. Gordon
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION

Reg. No. 3898 Rank Sgt Name Delaney J
 Date of Enlistment 25/1/17 Address Placentia District Placentia
 Occupation Papermaker Classification for Discharge 16 Medical Category A I
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. F36	B 268	B 121	N.F. Med.	D.F. 1.
B 178	W 3494	B 122	Board 1st	" 2.
B 178a	D 400A	B 1915	do 2nd	" 3.
B 179	D 400B	Form L	do 3rd	" 4.
B 179a	D 400C	Form K	do 4th	" 5.
B 179b	B 103	ME 2		" 6.
B 179c	B 120	M 93		

Date 8.7.19 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am working in a position to resume civilian occupation.

John Delaney

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied

Chubb

Date 9-7-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. **P.2290**... to his home at **placentia**... and Release Certificate No. **3354**... issued.

Date **9-7-19**.....

J.A. Lawrence
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to **8-7-19**

Date **9-7-19**.....

J. Mink H
Depot Paymaster.

Discharge approved for.....

23-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. Pj36	B 268	B 121	/	N.F. Med	D.F. 1	/
F 178	W 3494	B 122	/	Board 1st	" 2	/
R 178a	D 400A	B 1915	/	do 2nd	" 3	/
B 179	D 400B	Form L	/	do 3rd	" 4	/
B 179a	D 400C	Form K	/	do 4th	" 5	/
B 179b	B 103	ME 2	/		" 6	/
B 179c	B 120	M 93	/			/

6 Form B

Date **9-7-19**.....

J.A. Lawrence
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date **JUL 23 1919**.....

K.R. Cooper Capt
O. C. Discharge Depot

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

Date

Civil Re-establishment Committee



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

To resume former Occupation.

Jacques

Signature of Man.

Reg. No. 3878

J. A. Snowcroft

Signature of the Vocational Officer or his Representative.

Place

St. Johns

Date

9-7-78

191

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

MEDICAL HISTORY

OF

Surname Delaney Christian Name James

Table I.—GENERAL TABLE.

Birthplace:—Parish Plantain County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>25</u> day of <u>June</u> 191 <u>7</u>		on _____ day of _____ 191 <u>1</u>	
	at <u>Headquarters</u>		at _____	
Declared Age	<u>20</u> years <u>8</u> days		_____ years _____ days	
Trade or Occupation	<u>Paper Maker</u>		_____	
Height	<u>5</u> feet <u>8</u> inches		_____ feet _____ inches	
Weight	<u>127</u> lbs.		_____ lbs.	
Chest Measurement {	Chest (Girth when fully expanded)		_____ inches	
	Range of Expansion		_____ inches	
Physical Development	_____		_____	
Vaccination Marks {	Right		Right	
	Left		Left	
When Vaccinated	_____		_____	
Vision	R.E.—V= <u>4/6</u>		R.E.—V=_____	
	L.E.—V= <u>4/4</u>		L.E.—V=_____	
(a) Marks indicating congenital peculiarities or previous disease	(a) _____		(a) _____	
(b) Slight defects but not sufficient to cause rejection	(b) _____		(b) _____	
Approved by (Signature)	<u>Lamon & Parsons</u>		_____	
(Rank)	<u>major</u>		_____	
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St. John's</u>		at _____	
	on <u>25</u> day of <u>June</u> 191 <u>7</u>		on _____ day of _____ 191 <u>1</u>	
	Corps. _____		Corps. _____	
	Regtl. No. _____		Regtl. No. _____	
Joined on Enlistment	<u>1st</u> <u>722</u> <u>3878</u>		_____	
Transferred to	_____		_____	
Became non-effective by	on _____ day of _____ 191 <u>1</u>		on _____ day of _____ 191 <u>1</u>	
(Signature)	_____		_____	
(Rank)	_____		_____	

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

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

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

1. Unit and Corps. *1. Royal West Kent Rifles.* Former Trade or Occupation } *Papermaker*
2. Regt. No. *2878* Rank. *Serjt* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Delaney* (Surname) *J* (Christian Names) (a) Former Regts. or Corps; with Regt. Nos.
5. Age last birthday. *28*
6. Posted for duty on *June 25/17* at *H. Johns* in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—
(a) When (d) Particulars of Pension or Gratuity (if any)
(b) Where
(c) Opinion of Court

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

Statement of Case.

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

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

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war
- (ii.) Previous active service
- (iii.) Climate in pre-war service
- (iv.) Ordinary military service before the war
- (v.) Serious negligence or misconduct on the man's part. } *Na*

14 (a). If not due to any of these causes, to what specific condition do you attribute it? } *Na*

15. What is his present condition ?

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

He. Complains of no disability

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

16. Was an operation performed? If so, when and what was its nature? *Na*

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

18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable? *Na*

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to, or have been aggravated by service during the present war, and if so, to what or by what specific military conditions? *Na*

20. Do you recommend—

(a) Discharge as permanently unfit?

(b) Change to United Kingdom?

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

Retraction

W. Proctor - Capt/RMC

Station *Highley Camp*

Medical Officer in charge of case.

Date *14/6/19*

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



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 *James. DeLaney*
 Regiment from which discharged *Royal Newfoundland*
 Regimental number *3878*
 Intended address *Placentia*
 Height on discharge *5 Feet 8*
 Color of hair on discharge *Light*
 Complexion *Fair*
 Color of eyes *Blue*
 Descriptive Marks —
 Figure on discharge *medium*
 Christian name of Father *William*
 Christian name of Mother *Mary. Ann*
 Wife's maiden name in full —
 Date and place of marriage —
 Christian names of children —
 Place and date of soldier's birth *Placentia 29-11-age 22-1897*
 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)

James DeLaney

(Rank) *Sgt*

Station

St. Johns

Date

July 4-7-19

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.

Station

Date

August 15, 1919

Mr. James Delaney.
Placentia.

Dear Sir:-

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

Yours truly.

Captain & Paymaster.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

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

- Christian name..... *James* 2. Surname..... *McLaney*
3. Rank..... *Sergeant* 4. Regtl. No..... *3878*
5. Address in full to which future payments of gratuity are to be forwarded..... *Wm W McLaney
Placentia*
6. Date of enlistment in the Regiment..... *25-6-17*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
Not applicable
8. Relationship of such dependents..... *Not applicable*
9. Address in full of such dependents..... *Not applicable*
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 Hfld. If so, give dates and particulars of such service..... *Not applicable*
12. Give total length of time which you served on active service, whether in Hfld. or Overseas..... *2 yrs one month*

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. *Not applicable*

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? *Not applicable*

19. Are you now serving in the Regt.? *No* If not give? - (a) Date of discharge... *9-7-19* (b) Reason for discharge... *Demob.*

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. *Flanders* *October 1918*

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee. *No*

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

Signature of Applicant:

James J. DeLoach
J. Placetta

Place of Residence:

Declared before me at:

St. John's

This

10th

day of

May

19*49*.....

W. R. Warren

Signature of Barrister of the
Supreme Court, Stipendiary Magis-
trate, Notary Public, Justice of the
Peace, or Commissioner of affidavits.

Notary Public

POST DISCHARGE PAY.

Date paid

Paid

Paid

Soldier. Dependent.

War Service
Gratuity.

Net amount
due

.....
.....
.....

Certified correct.

Registrar

3878

12 exploits Lane
Grand Falls
Oct 15th 1916

Dear Sir

As we are leaving
Grand Falls I thought
it best to let you know
that the address for the
future will be

Mrs Jas P Delaney
Trenton

Pictou County
Nova Scotia

Address corrected,
Trenton,

Pictou County
Nova Scotia

Casualty Form Active Service.

Regiment or Corps **2nd Bat. Royal Newfoundlands**

Rank **Private** Surname **Delaney** Christian Name **James**

Religion **R.C.** Age on Enlistment **20** years **8** months

Enlisted (a) **25.6.17** Terms of Service (b) **Duration** Service reckons from (a)

Date of promotion to present rank **17.1.19** Date of appointment to lance rank **25.6.17**

Extended Re-engaged Qualification (b) **1.1.17**
or Corps Trade and rate

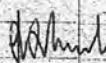
Occupation **Shoemaker** Signature of Officer **J. M. Eivers**

Report		Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B 215, 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 215, Army Form A 36, or other official documents.
Date	From whom received				
				1 OCT 18	
				Embarked	
				Disembarked	
		<i>James sent</i>		4 OCT 18	
				19-18	
1/12/17	of Camp				
17/18	of Reg				
1/10/18	Reverts to Capt.				
7.1.19	O.C. Unit	App'd Acting Sergeant	Field	2.1.19	B 212 Pass 7/5
		Returned to rank	app'd a/crms		B 213 21/1/19
		Reverts to Sgt.			21/1/19
	6 Gen Hosp.	Adm. Sgr. Aunle Ser.		5/3/19	Hq. 388 Coy
		Reverts to Cap. retains a/csgt			B 213 29-3-19

(a) In the case of a man who has re-engaged for, or enlisted into Section 1, Military Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signature, Signature Smith, &

Next of Kin: Father, Delaney Wm. Flaccante

Date	Report From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.219, 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.219, Army Form A. 36, or other official documents.
18.5.19	Waty Hospital. Adm: VDC.			13.3.19	623.
	6th Rec Co London.	IP discharged 14 th Feb 7 th 19. (5.5 days)	Tones	7.8.19	HA 35447
		Arrived Gen Base Depot.		1-6-19	memo
		to M. K. for release			Tones
	28/4/19		 Captain for O. I/c. M. I. Sub Section. Record Office, British Troops in France & Flanders.		
	Jm!				

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 3578 Rank Sgt Name Delaney J
 Date of Enlistment 25/1/17 Address Placentia District Placentia
 Occupation Papermaker Classification for Discharge 16 Medical Category A I
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P36	B 268	B 121	<input checked="" type="checkbox"/>	N.F. Med.	D.F. 1	<input checked="" type="checkbox"/>
B 178	W 3494	B 122	<input checked="" type="checkbox"/>	Board 1st	" 2	
B 178a	D 400A	B 191E	<input checked="" type="checkbox"/>	do 2nd	" 3	<u>3</u>
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 8-7-19 O. C. Discharge Depot H. Muns H.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am ✓ in a position to resume civilian occupation.

John Delaney

~~101673 017752 1077 16~~ Please refer to Occupational Director for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$60.00
- (b) Clothing Supplied ✓

Date 9-7-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R2290 to his home,
at placentia and Release Certificate No. 3354 issued.

Date 9-7-19 *J. A. Humeoff*
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 110.25

Date 9-7-19 *J. A. Humeoff*
Depot Paymaster.

Discharge approved for 23-7-19

Forwarded with following documents to O.C. Discharge Depot.

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

Date 9-7-19 *J. A. Humeoff*
Demobilization Officer.

APPROVED.

Documents as above forwarded to—

Officer in Records,
Board of Pension Commissioners.

with following additional documents. **Eligible for War Service Gratuity**

Date JUL 20 1919 *H. R. Cooke*
for O. C. Discharge Depot.

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

Date July 20 1919

Reg. No. *3478* Rank *Sgt* Name *Blaney James*
Attested Address *Placencia*
Allotment Allottee ..
Date of Allotment Returned from Overseas *JUL 1 1919*
Returned on S S *Cassandra* Cause *Discharge*

9-7-19 PASSED TO DEMOBILIZATION OFFICER
23 7 19 DISCHARGE APPROVED ON DEMOBILIZATION