



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3632 Name Thomas Deseremy Corps R. C.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>Thomas Deseremy</u> |
| 2. What is your full Address? | 2. <u>Avondale</u> |
| | <u>C. B.</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>18</u> Years <u>9</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Operator</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, Thomas Deseremydo 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.

9. 19-4-17
Thomas DeseremySIGNATURE OF RECRUIT.
E. M. LongblowSignature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St John's on this 19th day of April1917

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.....1917 } 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 Thomas Devereux
 Apparent age 18 years 9 months. Height 5 feet 7 1/2 inches
 Chest Measurement { Girth when fully expanded 37 1/2 inches
 Range of expansion 3 1/2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Michael Devereux
Avondale C.B. | 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 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>19-4-17</u>									<u>Leam. Sept. 13¹⁰ 18</u>
Joined at <u>St. Ann's</u> on <u>April 19¹⁷</u>									
<u>Embarked St. Ann's St. Kozel to Halifax N.S. 19¹⁷</u>									
<u>Embarked for St. L. 3-4-18</u>									
<u>Transferred from St. L. to Winchester 19-1-19</u>									
<u>to Southampton for demobilization</u>									
<u>Southampton 1-6-1919</u>									
<u>Demobilization St. Ann's 9-7-1919</u>									

Total Service forfeited as above.....

Total Service towards Engagement to 9-7-19 [date of discharge] 2 years 82 days
 " " " Pensions " " " " " " " " " " " "

C.R. 3632

Extract from Daily Orders Part II Unit Royal Newfoundland
Regiment Depot St. John's, dated 12-7-19.

The discharge of the undernoted on demobilization has
been CONFIRMED by Officer i/c Records from noted date
⁹
22-7-19.

3632, Pte. T. Devereaux.

REID NEWFOUNDLAND COMPANY.

RAILWAY AND STEAMSHIP LINES.

.....STATION,

.....191

Stambo
Oct 11 1919

Minister of Militia
St. John's

3632

Dear Sir:-

Would be very glad
if you would kindly send me
a war service ribbon.

I served overseas from April
1917 until June, 1919.

I Remain
Yours Truly

3632 Lfc Thomas F. Deneau
c/o R. N. Co
Stambo

Riband posted
13/10/19

From

Bps Falls

Received

To

Lt Col Rendell

Delivered

OFFICE STAMP.

14/8/19

Militia Dept
St John's.

Dear Sir :

Have written you three times
re my gratuity pay, but have no answer
up to the present. I was discharged July 9th
and think it is time to get my first months
pay, and I am in need of same now.
Please forward as soon as possible
and oblige

Yours Truly
(E+)

3632 L/c Thomas Sergeant
c/o A.M. Co Bishop's Falls

OFFICE STAMP.

From

Received

To

(2)

Delivered

My home address is Aroudale Cou. Bay
but am working at Bishop's Falls
and please send cheque here

and oblige

Yours Truly

(Ex) 3632 L/c Thomas Berneaux
c/o R. H. Co
Bishop's Falls

C.R. 3632

Sept. 5th, 1919

No. 3632 L/C. Thomas Devereaux

C/o R.N. Company

Bishop's Falls

Dear Sir:-

Reference yours of 14/8 19. I might state that the Paymaster of this Dept. has been instructed to take the necessary steps regarding the matter of your War Service Gratuity,

Yours faithfully,

Lieut. Col.,

Chief Staff Officer

C.R. 3632

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, June 27th, 1919.

The discharge of the undernoted on demobilisation has been
APPROVED by O.C. Discharge Depot with effect from 25-6-19.

3632 Pte. T. Devereaux.

C.R. 3632

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

Date June 18th 1919.

3632, L/C. P. Devereaux.

Reported at Headquarters 1/6/19. BX "Corsican"

which sailed Liverpool May 22/1919.

C.R. 3632

August 22nd 1919.

Capt. Howley,

Paymaster.

I am attaching a letter herewith
from Ex.L/C. T. Devereaux of Bishop's Falls,
for your information, please.

Lt. Col.

Chief Staff Officer.

C.R. 3632

Extract from Nominal Roll of the Royal Mfld. Regt.,
24-1-19.

The undermentioned who was transferred from B.E.F.
to 2nd Bn., Winchester 19-1-19, awaiting repatriation.

3632 L/C. T. Devereaux.

C.R. 3632

Extract of DAILY ORDERS PART II ROYAL NEWFOUNDLAND REGIMENT
DATED IN FRANCE DATED.20 /11/18.

Appointed L/Cpl.

#3632 Pte. T. Deveraux.


13/10/18.

NEWFOUNDLAND CONTINGENT.

C.R. 3632

Extract of Nominal Roll of Draft No. 41, 10 Other Ranks, (Signallors)
from 2nd. Battalion, Royal Newfoundland Regt., Hazeley Down Camp,
Winchester, to 1st. Battalion, Royal Newfoundland Regiment, B. S. F.
Embarked Southampton, 3rd. April, 1918.

3632 Pte. T. Devereaux.



C.R. 3632

Extract from Nominal Roll, embarked St. John's for Overseas 19-5-17

#3632 Pte. T. Devereaux.

3632

C.R.

Extract from Daily Orders Part 11 Unit The Royal
Nfld. Regt., St. John's, Apl. 19th, 1917.

3632 Pte. T. Devereaux.

Attached to the strength from April 19th, 1917.

T. U. Deveraux.

C.R. 3632

~~PKD~~

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 Artillery*
2. Regtl. No. *2632* 3. Rank. *Sgt.*
4. Name *Liverant* *Ellis*
(Surname) (Christian Names)
5. Age last birthday *20*
6. Posted for duty on..... at.....
 in category (or grade).....
7. Former Trade or Occupation }
 7a. If the soldier claims previous service in Army, he should state—
 (a) Former Regts. or Corps ; with Regtl. Nos.
 (b) Date of Discharge ;
 (c) Cause of Discharge.
 (d) Particulars of Pension or Gratuity (if any)
8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty ?
9. If a Court of Inquiry was held on an injury state :—
 (a) When
 (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 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. } | ✓ | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } ✓

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

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

No 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?

Repatriation

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

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

W.S. Procuier *Capl Name*
 Medical Officer in charge of case.

Station *Hazley House*
 Date *16. 1. 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



This Form is to be used in connection with Pamph. M. E. (1)
N. F. 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 Thomas Devereaux
aged 18 conducted at Adgers
Date: 19/4/17 Recruiting Officer:

NO OF TEST FINDING

- 1 no
- 2 no
- 3 no
- 4 no
- 5 no
- 6 no
- 7 yes
- 8 yes
- 9 no - no
- 10 ~
- 11 ~
- 12 ~
- 13 ~
- 14 ~
- 15 ~
- 16 ~
- 17 ~
- 18 ~
- 19 6/6 bottles
- 20 ~
- 21 ~
- 22 ~
- 23 ~
- 24 ~
- 25 ~
- 26 ~
- 27 ~
- 28 ~
- 29 ~
- 30 ~
- 31 ~
- 32 ~
- 33 no.
- 34 5ft 7 1/2"
- 35 145 lbs.
- 36 34-27 1/2
- 37 \$30 per month
- 38 father. Michael. Avondale
- 39 no

Handwritten scribble
B 6 3 2

Handwritten initials

Signature of Medical Examiner:

J. W. Burden

No 5645/815

N.F.F. /79.

From. NEWFOUNDLAND CONTINGENT

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

To: ~~Officer~~ ^{1st Lt} Commanding.
2nd Batt. Ryl. Nfld. Regt.
Winchester.

9th April 1919

3632. L/Cpl. Devereaux T.

With reference to the follow-
ing telegram from the Minister of
Militia / / (126)

"Pay to- 3632 Devereaux T.
£4. 0. 0.

Cheque £4. 0. 0. is enclosed.
for payment to this Soldier.
Kindly obtain his receipt
hereon.

A. A. [Signature]
Chief Paymaster & O. i/c Records.

10/4/ 1919

Receipt hereunder.

[Signature] **LIEUT. COLONEL,**
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commandg. Batt'n.

Received the sum of Four

£4.0.0 in respect of
telegraphic remittance from the
Minister of Militia.

J. Devereaux
No. 3632 Rank Private

Witness [Signature]

No. 3632 Rank Pte Name Leveaux P

Pay 100 10 110
 60
 50

DEBITS	Date	£	s	d	CREDITS	Period		Disc	Rate	Total
						From	To			
Balance					Balance 20/12/18					14 7 2 ✓
Acquittance Rolls					Pay @ Net Rate	20/12/18	24/1/19	35	50	17 50 2 ✓
Hospital Advances										17 19 1 ✓
A.B. 64 195 marks			5	38						
P. & R.O. Payments			5	00						
Depot			5	00	Contract 2-15-5					
Cash 866			2	190						

£15-3-8

[Handwritten initials]

Devereaux, T.

3637

Pay kept.

July 9, 1919

#3632 Ptel Thomas Devereaux,
Avondale, C.B.

Dear Sir :-

Please find enclosed Discharge Certificate

#2859

Yours truly

Captain
Raymaster & O.I/c Records

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 3632 Rank Pte. Name Sewersmy ✓
 Intended place of residence Avondale, H. Mon.
2. Occupation Operator
 Classification of soldier F Medical Category F I
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 JUN 24 1919
 Date ST. JOHN'S for H. M. S. Grant
 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 JUN 24 1919
ST. JOHN'S F. Demeroux
 Signature of soldier
Arthur Houston
 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 JUN 24 1919
Thomas Demeroux
 Signature of soldier
J. W. Chancey
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 19-4-17 No of days on Military
 Discharged from service 25-6-19 Service 812
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 R. H. Sait Major
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date JUN 25 1919

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
- Place St. John's W. Howley Capt
 Officer in Charge
 The Royal Newfoundland Regiment
 Date July 9 1919

a 7 B 2079 / 2809



DEPARTMENT OF MILITIA


ST. JOHN'S, NEWFOUNDLAND

August 22nd 1919.

WHEN REPLYING
QUOTE No. 3632

Capt. Howley,
Paymaster.

I am attaching a letter herewith
from Ex.L/C. T. Devereaux of Bishop's Falls,
for your information, please.



W. J. Rendell

Lt. Col.

Chief Staff Officer.

Bishops Falls, ¹⁸⁷1879
Aug 9

Lt Col Rendell
Militia Dept
St Johns.

Sir:-

Reg to inform you that
I arrived from overseas on S. S. Corsican
June 1st and received my discharge
July 9th. Up to the present have
received no gratuity pay. please
forward my two months pay.
at your earliest convenience
to address shown below.

Yours Truly
Ex L/c J. Derwent
c/o R. H. Co
Bishops Falls

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

MEDICAL HISTORY

Surname Devereaux OF Christian Name Thomas

Table I.—GENERAL TABLE.

Birthplace:—Parish Avondale County C. O.

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>19th</u> day of <u>April</u> 1917		on	day of 191
	at <u>Headquarters</u>		at	
Declared Age	<u>18</u> years <u>9</u> months <u>days</u>		years	days
Trade or Occupation	<u>Operator</u>			
Height	<u>5</u> feet <u>7 1/2</u> inches		feet	inches
Weight	<u>145</u> lbs.		lbs.	lbs.
Chest Measurement	Grith when fully expanded ... <u>37 1/2</u> inches			inches
	Range of Expansion ... <u>3 1/2</u> inches			inches
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.F.—V	<u>6/6</u>	R.E.—V	
	L.E.—V	<u>6/6</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>W.S. Proemier</u>			
(Rank)	<u>Lieut.</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St Johns</u>		at	
	on <u>19th</u> day of <u>April</u> 1917		on	day of 191
Joined on Enlistment	Corps.		Corps.	
	Regtl. No.		Regtl. No.	
	<u>St Johns 3632</u>			
Transferred to				
Became non-effective by				
(Signature)	on	day of 191	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				
Hazelby Down	28	1	19	19	2	19	Lobar pneumonia	22	Chest now free from physical signs. Temp has been normal for 16 days & pt has gained strength rapidly	E. S. [Signature] CAPT., R.A.M.C.

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 Artillery*
2. Regtl. No. *3632* 3. Rank *R/corp.*
4. Name *Deveraux Thomas*
(Surname) (Christian Names)
5. Age last birthday *20*
6. Posted for duty on..... at.....
in category (or grade).....
7. Former Trade or Occupation }
7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps ;
with Regtl. Nos.
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
(b) Where (if any)
(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 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: } | ✓ | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } ✓

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

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

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?

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

W. E. Proctor, Capt. R.A.M.S.

Medical Officer in charge of case.

Station *Harrogate*

Date *26-3-19*

* 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

✓
100/30

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.

1. Christian name *Thomas Francis D. Dorman*

2. Rank *Lieut. Capt.* 4. Regtl. No. *2632*

3. Address in full to which future payments of gratuity are to be forwarded. *Thomas D. Dorman*

C.P. N. Co. Bishop's Falls

6. Date of enlistment in the Regiment. *April 19th 1917*

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

Mrs. Michael Dorman

8. Relationship of such dependents. *Mother*

9. Address in full of such dependents.

Mrs. Michael Dorman, Ardendale

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.

Served in England from June 10th 1917 till March 31st 1918
in France from April 1st 1918 till Jan. 20th 1919

12. Give total length of time which you served on active service, whether in Hfld. or Overseas. *27 Months*

2 months in Hfld., 25 months Overseas

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.

No.

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.? *No*. If not give - (a) date of discharge *July 9th 1919*. (b) Reason for discharge *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.

Yes... Armentieres... April 1918... and... Gallipoli... Sept. 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: *Thomas J. Devereaux.*

Place of Residence: *Bishop's Falls*

Declared before me at: *Bishop's Falls*

This *27th* day of *August* 19*49*.....

E R Colbourne J P
Signature of Barrister of the
Supreme Court, Stipendiary Magis-
trate, Notary Public, Justice of the
Peace, or Commissioner of affidavits.

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

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 20th. 1919.

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

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

Christian name. *Thomas*..... 2. Surname. *L. Dorevaux*.....

3. Rank. *Lance Corporal*..... 4. Regt. No. *3.6.22*.....

5. Address in full to which future payments of gratuity are to be forwarded. *Thomas L. Dorevaux*.....

..... *St. John's*..... *Con. Bay*.....

6. Date of enlistment in the Regiment. *April 19th 1917*.....

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. *None*.....

8. Relationship of such dependents.

9. Address in full of such dependents.

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

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

from June 12. 17. till April 1. 18, and served in
France from April 1. 18 till January 15. 1919.

12. Give total length of time which you served on active service,

whether in Nfld. or Overseas. *2. 6 1/4 months*.....

..... *2 months in Nfld. and 2 1/4 months overseas*

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.

No.

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? *Yes*... If not give:- (a) Date of discharge..... (b) Reason for discharge.....

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. *Yes*

From Sept. 28th 1918 till Nov. 11th 1918 at J. France

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: *Thomas Linnaux*
 Place of Residence: *Arundale Lon Bay.*
 Declared before me at: *St Johns*
 This *26th* day of *June* 19.*19...*

Signature of Berrister of the
 Supreme Court, Stipendiary Magistrate,
 Notary Public, Justice of the Peace,
 or Commissioner of affidavits.

Wm James Esq

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

Wooddale
To the Paymaster June 25th
1917
First - Med. Regiment -
St. John's

Dear Sir

My son Thomas
Devereaux No 3632 who
enlisted on April 19th and
went overseas in May
told me he left me
sixty cents a day. Will
you please let me know
when this money will be
paid me.

and oblige

Mrs Michael Devereaux

Atk
June 14 1917
(Mother)
66 payday

From

Gambo

Received

To

Paymaster

Delivered

OFFICE STAMP.

16-11-19

7527 Militia Dept
St Johns.

L/S.

Have not yet received
my cheque for October.
Pls have same sent along
soon as possible
and oblige

Yours Truly

(3632) Cte J. F. Donnell
Agent R. N. Co.

M. Nov 15/19

REID, NEWFOUNDLAND COMPANY.
RAILWAY AND STEAMSHIP LINES.

Sambo Station,
Mar 15 1920

Minister of Militia
St Johns.

Dear Sir :-

I beg to
Inform you that I
3632 Pte T. F. Desmeaux,
have lost my discharge
Certificate. I was discharged
from R. N. F. L. A. Regiment
in July. please advise.

Yours truly
3632 Pte T. F. Desmeaux
Sambo

5797

Froudale
Wfld
July 18th / 19.

Minister of Militia
St Johns.

Dear Sir:-

I Received
my discharge July 9th. But
I did not receive any gratuity
money yet. I am in need of
it now and would like to
get it as soon as possible.

Will you please advice how
much I am to get and when
I will get the first pay.

~~Wfld~~
I remain
Yours truly
Thos W. Berreault

3632

(E)

June 29th.1917.

Mrs Michael Doveveaux,

Abondale.

Dear Sir:-

Referring to your letter of June 25th., I beg to state that your son has declared an allotment of sixty cents per day in your favor, commencing the first of June, and first cheque will be mailed on the 7th. of July.

Yours tru ly,

Lieut.
Deputy Paymaster.

5979

Bishop's Falls ¹⁰⁰
Aug 6 ¹⁸/19

Minister of Militia
St Johns.

Dear Sir :- I
Have received no
Gratuity money since being discharged
I am entitled to five months pay
and would be glad if you would
send me my first cheque, as
I am in need of same.
I am now working with the
R.N. Co at Bps Falls, and you
can forward same here.

Hoping to hear from you soon
and that you will forward cheque
here. I Remain
Yours Truly
3632 L/c Thomas J. O'Brien
c/o R.N. Co Bishop's Falls

RECEIPT FOR A SOLDIER'S DOCUMENTS

HEADQUARTERS NEWFOUNDLAND REGIMENT

Co. Garrison's Bn

Please receive documents as indicated below

No. RANK AND NAME

3137. H. Lawrence ?

N. F. P. 436	Non-effective account.	Medical history sheet.	Mtd. medical history sheet	Medical report on an invalid.	Proceedings on discharge.	Civil life qualification.	Descriptive return.	Active service casualty form.	Regimental conduct sheet	Company conduct sheet	Field conduct sheet	Report of Newfoundland Medical Boards				Attestation paper	Identity certifi- cates	Allotment papers	A. P. W. 3463	Headquarters Travelling Board	Proceedings on discharge	
		B. 178	B. 178a	B. 179	B. 268	W. 3404	D. 400A	B. 103	B. 120	B. 121	B. 122	1st. Board	2nd Board	3rd Board	4th Board	Board	B. 1915	Form L	Form K		D. F. 2	D. F. 1

Received above noted documents,

Dated _____ 19 _____

Signature of Officer forwarding documents:

Date 4.7. 1919

The Royal Newfoundland Regiment

Class for Demobilization: E

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 24.6.19

Regimental No 5632

Name Desmond Thomas

Rank Pte

Address St. John's

Present Medical Category A1

Recommended for:—

(a) Immediate discharge

(b) ~~Standard Medical Board~~

Members of Board

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

H. H. H. H.
Senior Medical Officer

S.W. Burden
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 3632 Rank Pr Name Leverance J
 Date of Enlistment 19-11-17 Address Avondale District H. W. M. G.
 Occupation Operator Classification for Discharge F1 Medical Category A1
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N. F. P/36	B 268	B 121	N. F. Med	D. F. 1
B 178	W 3404	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2	" 6	
B 179c	B 120	M 93		

Date 24-6-19 O. C. Discharge Depot. H. W. M. G.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Thomas Leverance

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 Amberstone

Date _____

O i.c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 19.1923 to his home at Concordale, N2 main and Release Certificate No. 2994 issued.

Date 24-6-19

J.A. Snowball
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

Date 24-6-19

9-7-19
J. H. [unclear]
Depot Paymaster.

Discharged approved for

25-6-19

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

N.F. P36	B 268	B 121	N. F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B179c	B 120	M 93		

2 Form B

Date 24-6-19

J.A. Snowball
O. C. Discharge Depot.

APPROVED.

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

with following additional documents

Eligible for War Service Gratuity

JUN 25 1919

Date

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

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

Date



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 *Thomas Beverand*

Regiment from which discharged *Royal Newfoundland*

Regimental number *3632*

Intended address *Avondale*

Height on discharge *5* Feet *7*

Color of hair on discharge *Black*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks —

Figure on discharge *Medium*

Christian name of Father *Michael*

Christian name of Mother —

Wife's maiden name in full —

Date and place of marriage —

Christian names of children —

Place and date of soldier's birth *Avondale, 15th July, 1889*

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) *Thomas Beverand*

Plt.
(Rank)

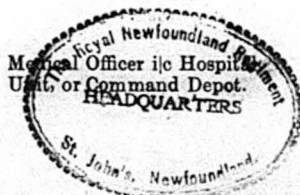
Station *St John's*

Date *24.6.19*

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.

Station

Date



Civil Re-establishment Committee



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

To resume former occupation.

Thomas Derieux

Signature of Man.

Reg. No. 3632

J. A. Snowball

Signature of the Vocational Officer or his Representative.

Place

ST. JOHN'S.

Date

24-6-19

191

The Royal Newfoundland Regiment

Class for Demobilization:—

E

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 24-6-19

Regimental No 3632

Name Devereaux, Thos.

Rank Pte

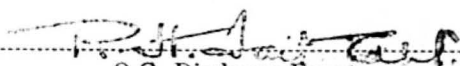
Address Avondale

Present Medical Category A1

Recommended for:— (a) Immediate discharge

(b) ~~Standard Medical Board~~

Members of Board


O.C. Discharge Depot.

(sgnd) L. Paterson

Senior Medical Officer

" F. W. Burden

M. O. Depot

Military Service: 812 days

ST. JOHN'S, JUN 24 1919

Royal Newfoundland Regiment.

Billeting Account,

To PTI J. Leveray

Billeting Soldiers as undermentioned

from June 1/19 to June 25/19

3632 PTI J. Leveray 25. 00

ACCOUNT	<u>B. M.</u>
CH. NO.	<u>24865</u>
IND. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

Certified correct for \$ 25.00

[Signature]

Billeting Officer.

J. Leveray

let's?
c

C.R.

RECEIPT FOR ISSUE OF
RIBAND OF BRITISH WAR MEDAL 1914-1919

I certify that I have received a issue of $\frac{3}{4}$ inches
of Riband of British War Medal-1914-1919.

NAME..... *J. J. Dismant*

(Date)..... *Oct 15th 1919*

(Place)..... *Dumbe*

RECEIPT.

C.R. 3632

FOR ISSUE OF RIBAND OF VICTORY MEDAL 1914-1919

I certify that I have received an issue of 2 inches
of Riband of Victory Medal 1914-1919.

3632 J. F. Newman

DATE Feb 1st 1920
PLACE Gumbo

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

Fold Here



Aug. 23rd 1921.

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

Lance Corpl. Thos. Devereaux

in respect of his service as No. 3632 Rank L/Cpl.

Name T. Devereaux Royal Nfld. Regt.
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received

As above.

Signature

Thomas Devereaux

Date

September 11 1921

Address

Stouffville

Receipt for Army Book 64

No. *3632* ... Name .. *Demerand*

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

Name .. *J. F. Demerand*

Date .. *July 24th / 30*

Place .. *Gaule*

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

W

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of 1st Newfoundland

Number of Sheet First
Signature of O. C. Company Jack R. Updegraff

Regimental Number and Name	
No.	<u>3632. Neweux Thomas</u>
Joined	Date
Joined	Date
Joined	Date
Joined	Date

Enlistment	
Age on	<u>18 years 9 months</u>
Place and Date of Enlistment	<u>St. John's 19.4.17</u>
Period of	with Colours <u>8 1/2 years.</u>
	with Reserve <u>2 3/5 years.</u>

Trade	<u>Operator</u>
Religion	<u>R. C.</u>
Place of Birth	

Good Conduct Badges, Service pay or proficiency pay

Appointed. N/C



Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<u>Barr</u>	<u>14/9/17</u>	<u>Pte.</u>		<u>Absent from leading parade at 5.30 P.M.</u>	<u>Sgt. Keane</u>	<u>2 days C.B.</u>		<u>Capt. Robertson</u>	<u>etc</u>
<u>Marine School</u>	<u>20/10/17</u>	<u>"</u>		<u>Absent from tattoo 20/10/17 to 11.15 pm (same date)</u>	<u>Sgt. Keane</u>	<u>4 days C.B.</u>		<u>Capt. Robertson</u>	
<u>50.</u>	<u>27/12/17</u>	<u>-</u>		<u>Deficient of swagging</u>	<u>Sgt. Howker</u>	<u>pay for same</u>	<u>25/12/17</u>	<u>2nd Lt. A. S. Newman</u>	<u>why</u>
<u>Hazley Down Camp</u>	<u>27/1/18</u>	<u>.</u>		<u>Irregular conduct after lights out</u>	<u>Sgt. Howker</u>	<u>4 days C.B.</u>	<u>25/1/18</u>	<u>Lieut. S. Emerson</u>	<u>why</u>
				<u>insubordination to an N. C. O.</u>	<u>Sgt. White</u>	<u>4 days C.B.</u>			<u>why</u>
				<u>Demobilized St. John's, 9 7/19</u>					

2 B

To be carried over

Army Form B. 121.

13632

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 3632 Rank Plt. Name Leverance J
 Date of Enlistment 19-11-17 Address Avondale District St. John's
 Occupation Operator Classification for Discharge F1 Medical Category A1
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N. P. 1736	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 178	D 400B	Form L	do 3rd	" 4
B 178a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 2-11-19 J. M. News Pr.
 O. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Thomas J. Leverance

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 _____

Ch. M. Blouin Pr.

Date _____ O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. B.1923 to his home
 at Avondale and Release Certificate No. 2994 issued.

Date 24-6-19

J. H. Snowball
 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

Date 24-1-19

9-7-19
J. H. Snowball
 Depot Paymaster.

Discharge approved for 25-6-19
 Forwarded with following documents to O.C. Discharge Depot.

N.F. P 36	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	Form B
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	
B179c	B 120	M 93			

Date 14-6-19

J. H. Snowball
 O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
 Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date

JUN 25 1919

R. H. Jait MAJOR
 O. C. Discharge Depot.

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

Date

July 1/19

J. H. Snowball
J. H. Snowball