



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 5334 Name Chealey Dick Comp 10<sup>th</sup> Buffs

### Questions to be put to the Recruit before Enlistment.

1. What is your name? ..... 1. Chealey Dick
2. What is your full Address? ..... 2. St. Stephen's St.
3. Are you a British Subject? ..... 3. Yes.
4. What is your age? ..... 4. 26 Years 8 Months
5. What is your Trade or Calling? ..... 5. fisherman
6. Are you Married? ..... 6. No.
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,\* which? ..... 7. No.
8. Are you willing to be vaccinated or re-vaccinated? ..... 8. Yes.
9. Are you willing to be enlisted for General Service? ..... 9. Yes.
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? ..... 10. Name .....  
Corps .....
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... 11. Yes.

I, Chealey Dick 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.

Chealey Dick SIGNATURE OF RECRUIT.  
W. Chealey Dick Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Chealey Dick 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 fully entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. Stephen's St. on this 23<sup>rd</sup> day of May, 1918.  
Signature of Attesting Officer C. S. Dick Lieut

### †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, viz:—(Name) ..... re-enlisted in the (Regiment) ..... on the (Date) .....

# DESCRIPTIVE REPORT ON ENLISTMENT

5334

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

Name Charles Deas

Apparent age no years ..... months. Height 5 feet 10 inches

Chest Measurement { Girth when fully expanded 38 inches  
 Range of expansion 4 inches

Distinctive marks .....

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs. Deas  
Dr. Deas, P.A. | Relationship father

### Particulars as to Marriage

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

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

### Particulars as to Children

Christian Names	Date and Place of Birth

## STATEMENT OF THE SERVICES

Corps in which served	Rgt. or L'epot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards last engagement reckons from <u>23-5-18</u>									
Joined at <u>St John's</u> on <u>May 23-1918</u>									
<u>Discharged August 11-1919</u>									
<u>Embarked St John's S.S. Red Bank to Halifax Oct 22-1-18</u>									
<u>1. Rtd for demobilization 24-6-1919</u>									
<u>Arrived Halifax 1-7-1919</u>									
<u>Demobilization St John's 4-8-1919</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>4-8-1919</u> [date of discharge] <u>1</u> years <u>74</u> days									
Pensions " " " " " " " " " " " "									

C.R. 5334.

Extract from Daily Orders Part II Royal Newfoundland Regiment.  
Depot St. John's dated Aug. 8th 1919.

The discharge of the undernoted on demobilization has been  
CONFIRMED by Officer i/c Records from noted date 4-8-19.

5334, Pte. C. Dicks.

C.R. 5334

Extract from Daily Orders Part 11 Unit The Royal Nfld.  
Regt. St. John's, July 10th, 1919.

The discharge of the following on demobilization has been APPROVED by O. C? Discharge Depot, with effect from 19-7-19.

5334 Pte. C. Dicks.



C.R. 5334

Extract from Daily Orders Regt. St. John's, The Royal Wfld.

Regt. St. John's, July 3rd, 1919.

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

5334 Pte. C. Dicks.

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

Extract from Daily Orders Regt. St. John's, The Royal Wfld.  
Regt. St. John's, July 3rd, 1919.

C.R. 5334

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

#5334 Pte. Chesley Dicks.

Attested for General Service with the Royal Nfld.  
Regt. from 23.5.18

C. Dicks

C.R. 5334

1890



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Chesley Dicks, Regl. No. 5334  
 hereby agree, until further notification by me, and in similar official form to make an Allotment of  
 Dollars and Sixty Cents, per diem, from my Pay,  
 to, and for the benefit of the undermentioned Person <sup>and</sup>/<sub>or</sub> Persons, such payment to be made on proof  
 of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup>/<sub>or</sub> Persons  
 concerned, viz.:

Allotment begins 1-8-18

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
6546	Mother	Mrs Thomas (Magdalen) Dicks	Ht. Rupert St	60.
Total Allotment, \$				<u>60</u>

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.) W. Summers  
 Officer Commanding  
St John's B Company  
July 17 1918

(Sig.) Chesley Dicks  
 (Rank) Private

No. 4622/678

*864940*

N.F.P./79.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,  
2/Bn. Royal Newfoundland Regiment,  
Hazelley Down Camp,  
Winchester.

24th March 1919

*March 25th* 1919

5334 Pte. Dicks C.

With reference to the following telegram from the Minister of Militia / / ( 89 )

Receipt hereunder: *[Signature]* LIEUT. COLONEL,  
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

"Pay to- 5334 Dicks  
£5. 0. 0.

Officer Commdg. *2nd* Batt'n.  
*R. Dicks*

Received the sum of *Five Pounds*  
in respect of

Cheque £ 5. 0. 0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

telegraphic remittance from the Minister of Militia.

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

*L. Dicks*  
No. 5134 Rank Private

Witness *[Signature]*



No. 20/10

N.F.P. /79.

NEWFOUNDLAND CONTINGENT

From:

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

Officer Commanding,  
2nd. Bn. N. Newfoundland "egt.,  
Hazeley Down Camp,  
Winchester

2nd. January, 1919

Jan 4 1919

Subject: 5334 Pte. C. Dicks.

With reference to the following telegram (11365) from the Hon. Minister of Militia, received

Pay to 5334 Dicks - £7:0:0

Draft £7:0:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

*H. D. Munnell Maj.*  
Chief Paymaster & O. i/c Records.

B

Receipt hereunder.

*A. Seymour* for  
Officer Commdg. LIEUT. COLONEL.  
Batt. ROYAL NEWFOUNDLAND REGT.  
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

Received the sum of Seven  
Pounds on account of  
cable remittance from Newfoundland.

Charles Dicks  
No. 5334 Rank Private

*G. R. Kemeley*

Dicks, C

5334

May & Sept.

August 11, 1919

Mr. Chesley Dicks,  
Harbor Buffett, P.B.

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 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... *Chesley* ..... 2. Service No. .... *None*  
3. Rank... *Pte* ..... 4. Regt. No. .... *5334*  
5. Address in full to which future payments of gratuity are to be forwarded... *Arthur Buffet Pte* .....  
6. Date of enlistment in the Regiment... *Nov 22/18* .....  
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge... *no* .....  
8. Relationship of such dependants... */* .....  
9. Address in full of such dependants... */* .....  
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 Mfld. If so, give dates and particulars of such service... *Overseas* .....  
12. Give total length of time which you served on active service, whether in Mfld. or Overseas... *Fourteen months* .....  
1.3



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?

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

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.

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

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

*no*

19. Are you now serving in the Regt.? If not give:- (a) Date of discharge. *July 31/19* (b) Reason for discharge.

*no*

*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.

*England*

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 that it is of the same force and effect as if made under Oath.



Signature of Applicant: *Charles Dick*  
 Place of Residence: *Harbor Baffett P.R.*  
 Declared before me at: *St Johns*  
 This *7* day of *July* 19*15*....

*John M. Carthy*

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

POST DISCHARGE PAY.

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

August 4th 1919.

#5334 Pte. C. Dicks.

Hr. Bulfeet. P. B.

Dear sir:

Enclosed please find Discharge Certificate  
number 3357.

Yours truly,

W. J. "Capt." Paymaster.

RS).

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 5334 Rank Plt. Name Thos C  
 Intended place of residence St. Buffitt  
 2. Occupation Plumber  
 Classification of soldier R 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 JUL 7 1919

J. H. Smith  
 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 7 1919

G. Fisher  
 Signature of soldier

W. J. Sealoy Esq.  
 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 7-7-19

Charles Fisher  
 Signature of soldier

W. J. Sealoy Esq.  
 Signature of witness

### STATEMENT OF SERVICE

7. Enlisted for service 23-5-18 No. of days on Military  
 Discharged from service 21-7-19 Plus 14 days Service 439

### APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S

Date JUL 21 1919

N. R. Coope Capt  
 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 4/1919

M. Rowley Capt  
 Officer in Charge Records  
 The Royal Newfoundland Regiment

MSB 2079/5557

9  
30  
31  
4  
74

# The Royal Newfoundland Regiment

Class for Demobilization:—

*96*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 11.7.19

Regimental No. 5334

Name Sikes Charles Rank Plt

Address St. Bonifacius

Present Medical Category A-1

Recommended for:— (a) Immediate discharge \_\_\_\_\_  
(b) Standard Medical Board \_\_\_\_\_

Members of Board

Ret Lt Majr  
O.C. Discharge Depot.

L. Paterson  
Senior Medical Officer

See Burden  
M. O. Depot



# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 533A Rank Plt Name Dicks, C  
 Date of Enlistment 23.5.18 Address St. Buffets District St. John's  
 Occupation Fisherman Classification for Discharge 16 Medical Category 2  
 Recommendation S. M. B. ..... Disability Rating .....  
 Passed to Demobilization Officer with following documents:—

N. F. 136	B 268	B 121	1	N. F. Med	D. F. 1	1
B 178	W 3494	B 122		Board 1st	" 2	
B 178a	1 D 400A	1 B 1915	1	do 2nd	" 3	3
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	1 D 400C	Form K		do 4th	" 5	
B 179b	B 103	ME 2		" 6		
B 179c	B 120	M 93				

Date 4-7-19 .....

H. M. H.  
 O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

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

Charles Dicks

Particulars passed to Vocational Officer for information and action.

Date .....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$100 by John Blomster

(b) Clothing Supplied .....

Date 7-7-19 .....

O i/c. Re-clothing



**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrants No. <sup>192220</sup> to his home at A. S. Buffett and Release Certificate No. 3247 issued.

Date 7-7-19

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 8/19

Date 7-7-19

J. A. Snowball  
Depot Paymaster.

Discharged approved for 21-7-19

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

N. F. P136	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 7-7-19

J. A. 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 JUL 21 1919

J. R. Coole  
for 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.

*Charles Dickson*

Signature of Man.

Reg. No. 5334

*J. H. Snow*

Signature of the Vocational Officer or his Representative.

Place

*St. Johns*

Date

7-7-19.

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

# MEDICAL HISTORY

Surname Dicks OF Christian Name Lehseley

Table I.—GENERAL TABLE.

Birthplace:—Parish Hr. Buxton, P.B. County Nfld.

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	23 <sup>rd</sup>	May	1918	191
Declared Age	26	years		days
Trade or Occupation	fisherman			
Height	5	feet	10	inches
Weight	147	lbs.		
Chest Measure-ment	38			
	4			
Physical Development	Right	Left	Right	Left
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V=	6/24 6/18	R.E.—V=	
	L.E.—V=		L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Samuel Paterson</u>			
(Rank)	Medical Officer.			Medical Officer.
Enlisted	at	<u>Sigonis</u>	at	
	on	23 <sup>rd</sup> day of <u>May</u>	on	day of 191
Joined on Enlistment	Corps.	<u>Royal Nfld. Regiment.</u>	Regtl. No.	<u>5334</u>
Transferred to				
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				









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

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

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

*No complaints of no recalcitrance*

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.

*Retardation*

Station .. *Haydock*

Date .. *15-4-49*

*W.E. Procuire*  
 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



## 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 Office 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 *Cherley Dicks*

Regiment from which discharged *Royal Newfoundland*

Regimental number *5334*

Intended address *Mr Buffett. P.B.*

Height on discharge *5* Feet *10*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *—*

Figure on discharge *medium*

Christian name of Father *Thomas*

Christian name of Mother *Maggie*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Mr Buffett. April 22<sup>nd</sup>. 1892*

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) *Cherley Dicks*

*Pte*  
(Rank)

Station *S + J. L. L. L.*

Date *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.

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39.

Regiment of

*67 Royal Newfoundland*  
Signature of O. C. Company *C. B. Dickshiel*

Number of Sheet *1*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay				
No.		Age on	months						
<i>5334</i>	<i>Dicks, Chester</i>	<i>26</i>		<i>Fisherman</i>					
Joined	Date	Place and Date of Enlistment		Religion					
Joined	Date	<i>St. John's</i>		<i>Copr.</i>					
Joined	Date	Period of	with Colours	Place of Birth					
Joined	Date		with Reserve	<i>Harlow Buffett</i>					
Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<i>402nd Coy</i>	<i>3-10-18</i>	<i>Pte</i>		<i>reported dirty on parade</i>	<i>S. S. M. Pagan Sgt. Cox</i>	<i>2 days C.B.</i>	<i>3-10-18</i>	<i>Capt Pappin</i>	<i>W.P.</i>
				<i>Demobilized St John's</i>	<i>H 19</i>				

To be ca. ried over.

Army Form B. 121.

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 Wflds*.....
- 2. Regtl. No. *5334* 3. Rank.....
- 4. Name *Becks*..... *Chesley*  
(Surname) (Christian Name)
- 5. Age last birthday *27*.....
- 6. Posted for duty on..... at.....  
in category (or grade).....
- 7. Former Trade or Occupation } *Fisherman*
- 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.
- 12. Place of origin of disability. *mil*
- 13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.



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

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

*See complaint of no disability*

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.)*

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 invaded at Foreign Stations.

*Repatriation*

*W. Proenier Capt Rasmé*

Station *Mazeley Down*

Medical Officer in charge of case.

Date *1/4/19*

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



DS334

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 533A Rank Alie Name Dicks, C  
 Date of Enlistment 23.5.18 Address No. Buffetts District Placentia  
 Occupation Fisherman Classification for Discharge 16 Medical Category AI  
 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 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 4.7.19 .....  
 O. C. Discharge Depot. [Signature]

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

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

Charles Dicks

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 approx
- (b) ~~Clothing Supplied~~ [Signature]

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

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R2220 to his home at Mr. Buffett and Release Certificate No. 3247 issued.

Date 7-7-19 J.A. Snow Capt  
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 1-5-19

Date 7-7-19 J.A. Snow Capt  
Depot Paymaster.

Discharge approved for 21-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P136	B 268	B 121	/	N.F. Med.	D.F. 1.	/
B 178	W 3494	B 122		Board 1st.	" 2.	1
B 178a	/ D 400A	/ B 1015	/	do 2nd.	" 3.	2 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.	
B 179c	B 120	M 93				

Date 7-7-19 J.A. Snow Capt  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

- Officer i/c Records.
- Board of Pension Commissioners.

with following additional documents.

**Eligible for War Service Gratuity**

Date JUL 21 1919 W.R. Cooper Capt  
for O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.  
Date July 21/19

Reg. No. *5334* Rank *Plt* Name *Sicks, Chas.*  
Attested ..... Address *H. Buffett.*  
Allotment..... Allottee ..  
Date of Allotment..... Returned from Overseas *JUL 1 1919*  
Returned on S S *Cassandra* Cause *Discharge*

*7 7 19*  
*21 7 19*

**PASSED TO DEMOBILIZATION OFFICER**

**DISCHARGE APPROVED ON DEMOBILISATION.**