.....on the (Date)



## FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

	Questions to be put to the Recruit before Enlistment.
ı.	What is your name? I. John Stoblum
	(2. Lukles
2	Wrat is your full Address?
3.	Are you a British Subject? 3
4.	What is your age? 4
5-	What is your Trade or Calling? 5 Jushesman
6.	Are you Married? 6
7	Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which?
8.	Are you willing to be vaccinated or re-vac- cinated?
9	Are you willing to be enlisted for General Ser- vice?
	Did you receive a Notice, and do you under- stand its meaning, and who gave it to you?
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?
	E. May St. Mark Marshall Signature of Witness.
bo	I
	CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.
he	The Recruit above named was cautioned by me that if he made any false answer to any of the above question 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.
	replied to, and the said recruit has made and signed the declaration and taken the oath before me at st. John
	this. Indiay of Inay 1916 Stenature of Attesting Officer . HOuthfilday . gall
on	PRODUCTION OF THE PRODUCTION O
on	*CERTIFICATE OF APPROVING OFFICER.
on	†CERTIFICATE OF APPROVING OFFICER.  I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the re
	I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the re
	I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the re
qu	I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the re ired forms appear to have been complied with. I accordingly approve, and appoint him to the:
qu Da	I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the reired forms appear to have been complied with. I accordingly approve, and appoint him to the:

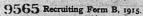
viz:—(Name).....re-enlisted in the (Regiment).....

## DESCRIPTIVE REPORT ON ENLISTMENET

Applicable to all ranks. To correspond with entries on the Medical History Sheet. Dollin Height 6 feet 7 inches 26 years / months. 3 ) inches Girth when fully expanded..... Chest Measurement Range of expansion 21 inches Distinctive marks INFORMATION SUPPLIED BY RECRUIT Name and Address of next of kin Ins Francis Dollin Relationship Father Particulars as to Marriage

(a) Christian and Jurname 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. 1 (6) (d) Particulars as to Children Christian Names Date and Place of Birth STATEMENT OF THE SERVICES Service not al-lowed to reckon for fixing the rate of pension Signature of Officers certi-fying correctness of entries Corps in Rgt. or which served Depot Promotion, Reductions, Army Rank Casualties, &c. Dates Years Days Vears Days Service towards limited engagement reckons from\_ Joined at\_ Total Service forfeited as above..... Total Service towards Engagement to\_ [date of discharge]





## FIRST NEWFOUNDLAND REGIMENT

# No. 2692 Name John Dolling Corne

Company Company
Questions to be put to the Recruit before Enlistment.
I. What is your name? I. John distinct
2. Wrat is your full Address?
3. Are you a British Subject? 3. Ale
4. What is your age?
5. What is your Trade or Calling? 5. Jisherman
6. Are you Married? 6. 20
7. Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so.* which?
8. Are you willing to be vaccinated or re-vaccinated?
9. Are you willing to be enlisted for General Ser- your year.
10. Did you receive a Notice, and do you under-stand its meaning, and who gave it to you?
11. Are you willing to serve upon the conditions as embodied in the roll of service } 11
E. May St. Signature of RECRUIT.  Marchael Signature of Witness.  Oath to be taken by recruit on attestation.
OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.  I. John do make cath, 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 M. Johnson
on this. I maday of Inary
†CERTIFICATE OF APPROVING OFFICER.
I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the re-
quired 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
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

viz:—(Name)......on the (Date)

## DESCRIPTIVE REPORT ON ENLISTMENET Applicable to all ranks. To correspond with entries on the Medical History Sheet.

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	ı age		No. of Contract						CCL		шене
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	(a)		nt address. (a	d) Initials of C	fficer verif		ntry.	1		(d)	
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Corps in ich served	Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service r lowed to for fixin rate of pe	not al- reckon ig the ension	Service serve not ed to rec wards G.		fying	correctnes	rs certi-
ich served	Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service r lowed to for fixin rate of pe	not al- reckon ig the ension	Service serve not ed to rec wards G.		fying	correctnes	rs certiss of
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ich served	Depot limited	Promotion, Reductions, Casualties, &c.	Army Rank  May  Lear  Stacks  28 18.	Dates	Service r lowed to for fixin rate of pe	not al- reckon ig the ension	Years  Years		fying	correctnes	rs certisis of
ich served	Depot limited	Promotion, Reductions, Casualties, &c.	Army Rank  May  Lear  Stacks  28 18.	Dates	Service r lowed to for fixin rate of pe	not al- reckon ig the ension	Years  Years		fying	correctnes	ko-
vice toward at	Depot	Promotion, Reductions, Casualties, &c.	Armir Rank  m. A. ay  Line 18  18 18.  10 12-18	Dates	Service r lowed to for fixin rate of pe	not al- reckon ig the ension	Years  Years		fying	correctnes	rs certi-



## 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.

Signature of Medical Examiner:....

William Roberto

1 Doblin 2692 ALRO

John Dobbin

was attested for General Service with

the NEWFOUNDLAND CONTINGENT on May 1st 1916

Regimental No. 2692 was alloted to Pte

John Dobbin

AUTHORITY:

Record Ledger;

Dept. of Militia,

March 25th 1919

## ORIGINAL

#### NEWFOUNDLAND CONTINGENT.

#### LAST PAY CERTIFICATE.

#### ALLOTMENT & SEPARATION ALLOWANCE.

PAYABLE ON ACCOUNT OF:-

2692. Pte. J. Dobbin.

TO:- Mrs. A. Dobbin. Wife.

LAST ADDRESS:-

115, George Street, Ayr, N.B.

Allotment Sep. Allce. 820.00

per day month.

Paid in full up to and including 20/12/18

Office out Major.
Chief Paymaster &.O. I/c Records.

PAY & RECORD OFFICE, 58, VICTORIA STREET, LONDON, S.W.1.

20th. December, 1918.

TO	1.9.	DATE
M. of M.	21352/20/70.20	114.18
O.C. 18T. BN.	1 1	' '
., 2nd. Bn.		

A. J. 8/82 "Newfoundland Contingent Separation Allowance Regimental no and I lank
Name
Unit 2692 Private John Dolbin 2/1. t. h. t. S. D. Regt. Newton Park School Unit

2 Full Name of Defendent agnes Green Campbell 3 Address
Shave for male previous claim for Separation
of allowance? If so Statis particulars
Separation allowance being paid on four
or account to anyon in Afth or elecutive ? 115 George St. dyr. Tathen so parday wielke maried 6 Date of Marriage 1. January 1918 name address of Jos last Confloses John Sparks Colinet She Amount of Jour salary immediately orling the grant of Jour salary portion being paid of Jour somplofet luring Jour absence 500 Dollars a year 10 If paid, what is the amount for month Many of 6 orloss 11 prior to enlessment in the Afla Contingent if that he above is a true land of angular of menorthy

Signalize of Officer forwarding this application I certify that the above is a true Will of Newfoundland Pegli Dali Dec 27 # 117 Corbhilates LT-COL.,

When completed, this form should be returned to Lt.-Col. J. OBED SMITH, Commissioner of Emigration for Canada, 11-12. Charing Cross, London, S.W.

## APPLICATION FOR OCEAN PASSAGE TICKET.

1	<b>y</b>		Surname	Dobtin		
Na	me in fi	ıll (Mrs. or Miss)_	Mrs de	mes Dollin	Age 24	
Pre	esent Add	dress //5 Jeo	rye the	t dyr,		
Na	mes and	ages of all going	with you (excep	t yourself)		
1	v	ddress in Cahada da leave Cahada and	0	nover There	e before	
L		or dependant of	<b>.</b>	the Candian Ex	peditionary Force	e, state
Ì	The s	2		011	oundland K	legt
		ldier's dependant, v	what is the urg	gent reason for ye	our desired return	n on a
Yo	ur destin	ation in Canada	Tieles &	H Manis	Bay N. F.	£9)
		and address of rel lationship My	ative or friend	in Canada to wh	nom you are proc	eeding,
		do you wish to trav	7	Restrance of		
		of the date on which This only applies to t			-	ırchase
If	necessar	y, could you leave fo	or Canada on 24	hours' notice by to	legiam?yes	
		gements have you	7 9	A DE S	Int affle	A fr
	Office, 59	pply to "The Sec ria Street, London, Victoria Street, Lo	ondon S.W.1	a resident of C	anada, to the "F	assport
	No Gov	hold an ocean ticket, issued our passage ticket, as no ordi cernment or Department can UNDERSTOOD THAT O	accept responsibility of RDINARY OCEAN	or safety of passengers or b RATES WILL BE CH.	baggage. ARGED UNLESS OTH	
STA	ATED IN M	Signature	Mrs A	Dollin	MAY BE CARRIED.	
		(NOT	E.—All below this	to be left blank.)		
x.	Accepted.	ŔE	MARKS		Class.	P

A

C

M.D.

NEWTOUNDEANS CONTINSENT. Dec. 6. 418, 115 George St. agr. I melose of forms ugned together with photos for passports please do not write to dyradies as I am taking my Wife to London on bunday night and will call at pay Office on Monday for further particulars Pour Pot John Doblin

	1	7	mess.			IN CONTINGE	Army Form C. 2 (in Pads of 100)
		e Instructions	Words	Charge.	This me	sage is on alc of:	Beed. at
			At To	lent		Service Service	From_
	(		Ву	02	(Signature	of "Franking Officer"	") Ву
TO -	MRS		1773	NES	100	BBIN	AYR
*	r's Number.		Day of 1		In repl	y to Number.	AAA
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VICTO	RIA	STREE		LOND	ON MC	3.P.M.	WEDNESDAY TO
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The a	toops may be j	forwarded us no			Z)	PASCAN AP DARGAN GARA	rised to telegraph in his nar

## NEWFOUNDLAND CONTINGENT

### CANCELLATION of ALLOTMENT.

1. I, (NO) 2692 (Hank) Pto (Name; Dobbin, J.
hereby apply for cancellation of Allotment made by me on N.F.P/11
No. 235 Sdated July 21/16 in favour of
Traucho Dobbin
for 8 cts 5'0 per diem
Such cancellation to take effect on the3/ ef. day of
January 1918.
2. I agree to accopt all risks and consequences of this applica-
tion failing to reach Headquarters, St. John's, in time to become
operative at above nominated cancelling date; and that in the
event of such non-delivery, and thereby the allotment continuing
to be paid to the Allottee, I also agree to such further stoppage
in the Pay Books as may be nocessary, or otherwise to refund such overpaid amount or amounts. Confirming Cable 16 261 2/2/2.
noted
Dated at ghroke.
Jenton Park School 18 3 hay
Qyr.
Jan 9 (1) 1918
$\mathcal{O}_{\mathcal{A}}^{kio}$
Alletton
mail toor.
Approved and Witnessed: Luctures & Cole.
- S. Tuesco yla. NONED
O.C. "3" Company.
15/2/18 "Ody

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

No. 4.197

# NEWFOUL AND CONTINGENT

	ALLOTI	MENT	
T. (No.) 2602	(Rank) Rts.	(Name) Sobbin	Q
		ation by me, and in re	equired form,
		_ dollars and60	
1		he benefit of the unde	
		ts to be made on proof	f of identity
of the Person	and/or Persons concer	ned, viz:-	
Whether Wife Child, other Relative or Friend	NAME (In Full.)	ADDRESS	AMOUNT (Each Person)
ereife (	Rones G. Dobbin	115 George Dt.	. 60
			60
147,529	Miller of Control	State of the state	
This Allotment	t to take effect from	and including Leky	1. 1918
NOTE: - This Fo	orm must be completed	and signed by the Solng his Company, and fo	dier, counter- rwarded to the
	210 .0	Roted Biroke 1/1 8 2 mel. 1/18 2 day.	
(Sig.)	Officer Commanding "Ompany."	- Mis Ais	
Dated at		(Sig.)	blei.
heuton Par	School segr.	[ mark	llottor.
	au g = 1918	Wetness & P. O.K.	
		07.00	

PAYMASTER & OFFICER I/C RECORDS, NEWFOUNDLAND CONTINGENT, BS. VICTORIA STREET, LONDON, S.W. 1. ENGLAND.

Officer Commanding, 2/1st Newfoundland Regt.

Ayr. N. B.

Pay & Record Office, 12th January 8

#### 2692, Pte. J. Dobbin.

With reference to the above Soldier's claim for Separation Allowance.

Kindly note that the Original Marriage Certificate is required in support of the claim.

Certificate of Marriage Notice as forwarded is insufficient. please.

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

No.	34	78,
-----	----	-----

#### NEWFOUNDLAND CONTINGENT

N:F.P./55.

Chief Paymaster & Officer i/c Records.

	Pay & Re	cord Office	53. VICTO	R ST
	58,	Victoria Str	et. Invoor	. S.W.
- M. A OX AA.		London, S.W.	1. 01	AKRTONE
To: Mrs. agnes Dobbin		7 1	* \	HEALT.
To: Mrs. agnes Dobbin		Mari	hist.	1917
115 Teorge St.			The same of the sa	and area may be a property
NA				
	01			~
. Weference	Deparation	m allowice	26025	Dollar
Herewith Certificates of 7	Variase	and Mar	inne	
Herewith Certificates of M. Notice, do requeste	d	· · · · · · · · · · · · · · · · · · ·	The state of the s	·
Diana salmania				
Please acknowledge receipt her	eon.			
(Sign) In of the				

m and including ed and Signed by the Soldier, counterng his Company, and forwarded to the R.O. C.L. 10 9/12/18.

20 the adjutant Troville St., Contun, St., Certified Correct So. M. Gueson St. To O.B. 2" Ray. Marriage Certificate
required.



FROM

Mex. Begg & C.

PARTNERS: JOHN PATERSON.
ALEX. PATERSON.

TELEGRAMS: BEGG, AYR.
TELEPHONE: Nº 456.

Ayr Tweed Mills

Ayr

21st December 1917.

The bearer Agnew Campbell has been in our employment for the past 6 years and we have always found her honest and trustworthy and attentive to her work.

Alex Degg O

a. 3. 8. /84 Ro. Jeanformaland Contingent Deparation alconomie To be liked in the case of mone requesting permission to marry. To the officer bounding of, of Demfoundland Righ. Dis, I have the honor to request remission to many and your recommendation for the issue of Separation allowance to my intended augistended wife's rame is Agnes G. lampbell address 115 George St. Ayr. Occupation Tweed Darner Name and address of parents or guardian Jeorge Campbell 113 Jeorge st ayr I attack herewith certificate as to my intended wife's character I am not in receipt of a salary from the newfoundland government in addition to my military pay. MARRIAGE CERTIFICATE Jun O helient Servant Witness RETURNED 28/2/18 John & John & John & Pot.

Rette no 2692 Rank. Pot.

Shereby approve of the marriage of the above rained soldier, and recommend that separation allowance be created to his wife. that separation allowance be granted to his wife. I have personally investigated the above application and our satisfied as to the intended wife's good character and counder her warry to receive the benefits of separation allowomer. The saddier has assigned at least 20% of his pay in favor of the above mentioned lady. Certified copy Extract from Park II Orders ho 352 Dated 7/1/18 The marginally named is granted permission to many with effect Jan. 1 1918. (autt \_\_\_\_ The mitten evidence upon which my decision in based is enslaved for your disposal together mitte the naminge cutificate. Signature authoritation LT. COL. Rank

Nated see Topleshoring Indian M.F.L.D. Rigt.,
Sounds.

This document must be signed personally by the Officer bounding the Mich. Form which accompany the abo

# LAST PAY CERTIFICA OFFICE COPY. N.F.P./94

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Extenst from Bully Orders part II. Depot St. John's dated Jan. 51/1919.

The Dischargement the undernoted on demobilisation have been constants by Officer i/o Records. 30-l-lie

#2692 Pte. John Bobbin.

Extract from Daily Orders part 11, Depot Sr. J hm's dated Jan. 20th. 1919.

The discharge of the undernoted on demobilization have been APPROVED by 0. C. Discharge depot on 16-1-19.

2692 Pte. John Dobbin.

Extract from Medical Board held on Thursday afterneon January 9th, 1919.

2692 Pte, J. Dobbin. J.

Recommended Discharge as Permanently Unfit.

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

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

#2692 Pte. PJ. Dobbin.

Extract from Nominel Roll of repatriation draft No. 79 of the Reefoundland Forestry Corps, embarked at Tilbury Docks, 12/18/18.

Wife of #2692 Pte. J. Dobbin.

Artract from Path Nominal Roll of repatriation draft No. 79, per S. S. CORSICAN, which ambarked at Tilbury Docks 12/12/18 from the 2nd., Battalion of the Newfoundland Regiment.

#2692 Pte. J Dobbin.

Extract from Schedule Separation Allowence, psychlo in U.K. from P.R.O.Landon.

#2692 Pte.J.Dobbin.

Larrice. 1-1-18

. C.R. 1692

Extract from Nominal Roll Embarked St. John's for Overseas, per S.S."SICILIAN" July 19,1916.

2692 Pte. Dobbin J.

Pay Days

January 30th. 1919

#2692 Pte. John Dobbin,

Harry Core,

Dt. George's Dist.

Dear Sir: -

Please find enclosed "Doscharge

Certificate No. 781."

Yours faithfully,

Captain,

## The Royal Newfoundland Regiment

2/22 DEMOBILIZATION OF Allies Life
Reg. No. 2692 Ramik Ste Name Dobbin John
Date of Enlistment 29 4.16 Address Coloret District Clacentia
Occupation Staherman Classification for Discharge
Recommendation S.M.B. permanently unfit : Disability Rating
Passed to Demobilization Officer with following documents:—
N.F. P 36.4.4   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
B 179 D 400B Form L do 3rd
B 179a D 400C Form K do 4th " 5 "
B 179b B 103 ME 2
B 179c B 120 M 93
MALLY P.N.
Date
Date. O. g. Discharge Depot.
PARTICULARS FOR DEMOBILIZATION
PARTICULARS FOR DEMOBILIZATION
PARTICULARS FOR DEMOBILIZATION  1. Civil Re-Establishment.
I. Civil Re-Establishment.
I. Civil Re-Establishment.
1. Civil Re-Establishment.
I. Civil Re-Establishment.
I. Civil Re-Establishment.
I amin a position to resume civilian occupation.  The Dollinx  mark.
I amin a position to resume civilian occupation.  John Dolbin x  Mark.
r. Civil Re-Establishment.  I am
r. Civil Re-Establishment.  I am
z. Civil Re-Establishment.  I am
z. Civil Re-Establishment.  I am
r. Civil Re-Establishment.  I am
2. Clothing.  Cartified that Clothing Regulations have been complied with:  (a) Clothing Allowance payable Allowance pay

3. Transportation and Release Certificate.  The above named has been provided with Travellin	n n n i
at and Release Certific	cate No issued.
Date . J. (. J	Demobilization Officer
4. Pay and Allowances.	Execution of the second
The herein named soldier's accounts have been cor	rectly balanced and all matters in connection
therewith settled. He has received pay and allowance	s to30 - 1 - 19
Date	Monthly Capi- Depot Paymaster.
Discharge approved for. 16.1.19	
Forwarded with following documents to O.C Dischar	ge Depot.
	- (3117 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
N.F. P/36 B 268. B 121. N.F. M E 178. W 3494. B 122. Board 1	1 / may the
B 178a. / D 400A	1   A   1
B 179. D 400B. Form L. do 3	
	th
B 179b B 103 ME 2	
B 179c B 120 M 93	
Date	Demobilization Officer.
APPROVED.	andreagradical and a second second
Documents as above forwarded to:	
Officer i c Records. Board of Pension Commissioners.	
with following additional documents.  ELIGIBLE for FECT B	SOHARGE PAY
JAN 1 6 1919	Rest. Sait Call
Date	O. C. Discharge Depot.
Received the above noted documents from O. C. Discharge Dep	
	balana xantara
Date	Y
Date	

	T. 1			STA	ATEM	ENT (	OF ACCOUNT				
Balance Dr. i Allotment / i Cash Payments  Country  Count	days @ 60 C	<i>§</i>	40	2 / 2		d 11 0 0 . 1 6 5 .	PARTICULARS  Balance Cr. from Pay /9 days @ \$ /	\$ 19 1 20 9	90 90 50	£	5/9
Total Debits Balance due b	<b>y</b> Paymaster		-	6	4	11	Total Credits Balance due to Paymaster			6	4

July 19,1919

#2692 Pte.John Dobbin, Tickles, Via Whitbourne, St.Mary's Bay.

Dear Sir:-

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

Yours truly

Captain & Paymaster.

#### DEPAREMENT OF MINITIA.

WAR SERVICE GRADULTY.

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 mestion in this Declaration where must be no blomes and no debhos, if any quentions are not applicable, the words TROM APPLICABLE; next be written out. On completion this Declaration is to be returned to MME OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S. Christian name .... John ... . . 2 . Summerce . . . 5. Address in full to which future payments of gratuity are to be Tickles. Than Whithourne. 7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge..... 8. Relationship of such dependents ..... 9. Address in full of such dependents .... Hekkes 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, IT so, give dates and 12. Give total length of time which you served on active service, whether in liftd.or oversees. . Iwo. years . 2.75 days . on ..... ingland

13. Have you had more than one enlistment? If so, give particulars
of discherge and re-enlistments, and under what regimental numbers.
No. only one enlistment.
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. Na.
Have allegay ledelyed and by whom polarity
no n
15. Have you been issued with a War Service Badge?
16. Have you, during the present war, served in the I perial Dorces
17.Are you entitled to receive, or have you received any Greatuity
in the nature of Pest Discharge Pay from the Imperial Forces? If
so, state mount received, or to which you are entitled
18. Did you revert Overseas to a rank lower than the substantive
rank hold by you on your arrival in England? not. appliable
(b) If so, was such reversion in consequence of Misconduct or
inefficiency? not. appliable
19. Are you now serving in the Regt.? No If not give? - (1) date
of discharge. January Il. 191(b) Reason for discharge. Medically lings
and in consequence of Demobligation
<i>V y v</i>
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. Mo.
21.(a) Are you receiving treatment from the Wivil Re-Establishment
Com.(b) If so are you in receipt of full pay and allowances from
that Committee
And I : she this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if

-3-

Signature of Applicant:

Place of Residence:

John Dobbin Jickles. St. Many's Bay.

Declared before me at:

This

day of July

19*I9*.....

Signature of Barrister of the Supreme Court, Stipendiary Magistrate; Notary Public, Hustice of the Peace, or Commissioner of effidevits.

Da te	DISCHARGE PAY. Paid Paid Soldier. Dependent	War Service Gratuity.	Net amount due
			······································
		::	
	Cortified correct.	•••••••	Paymaster

N.F.P./94.

Chief Paymaster & O. i/c Records.

	PARTICULARS	1 7			HFC002,HWHY	Septimization (	OF ACCOUNT					CR
The state of	Balance Dr. from	1 9	78	£	8	d	PARTICULARS	\$	1	1 £	8	d
	Allotment 19 days @ 60¢	11	40	5	6	11	Balance Cr. from Pay 19 days @ \$1.00 Field Allce 19 days @ \$.10	19	90			
	lst Pay 2nd " Casual Pay			1 2	0 16 0	0 1 0	Other Allces 19 days @ \$ 50\$	9	90 50		19	0
	Other Debits						Other Credits:			-		
	Barrack Damages Misc. Stoppages				1	6 5	State States					
-												
	Total Debits	-		6	4	11	Total Credits			6	4	11
	Balance due by Paymaster						Balance due to Paymaster				•	
				6	4	11				6	4	11
n	"F" Coy.	tatem	ent	of A	ccou	int a	nd find it to be a correct extract	from	the	Pay	lood	k of

. 3

DUPLICATE!

LAST PAY CERTIFICATE | COPY. N.F.P./94.

DR.				ST	ATEM	ENT C	OF ACCOUNT					0.1
	PARTICULARS	3	ø	£	В	ď	PARTICULARS	1 8	1.6	ı £	8	CI
23/11/18 <sup>To</sup> 11/12/18	Balance Dr. from Allotment 19 days @ 60¢ Cash Payments:  lst Pay 2nd " Casual Pay Other Debits  Barrack Damages Misc. Stoppages		40	1 2	6 0 16 0	0 1 0 0	Balance Cr. from Pay 19 days @ \$1.00 Field Allce19 days @ \$.10  Other Allces 19 days @ \$ 50¢  Other Credits:	19 1 20 9	90 90 50		5 19	
IVD: From	Total Debits Balance due by Paymaster			6	4	11	Total Credits Ealance due to Paymaster			6	4	11

# Dublicate Original

### NEWFOUNDLAND CONTINGENT

#### CANCELLATION of ALLOTMENT.

- Lo Latini i
1. I, (NO) 2692 (Hank) Pto (Name; Dabbin, J.
hereby apply for cancellation of Allotment made by me on N.F.P/1
No. 2358 dated (/.//. a././
Trans Sabhin
for \$ cts \$\langle 0 per diem
Such cancellation to take effect on the day of
Laurary 1918.
2. I agree to accopt all risks and consequences of this applica-
tion failing to reach Headquarters, St. John's, in time to become
operative at above nominated cancelling date; and that in the
event of such non-delivery, and thereby the allotment continuing
to be paid to the Allottee, I also agree to such further stoppage
in the Pay Books as may be necessary, or otherwise to refund such
Overnaid amount on amount-
Confirming leable 10.26, 2/2/18.
Dated at Pated
enton Park School, ayr. 1/1/56. 2001
<u></u>
10/ - Jan. 9 = 191 8
Mallottor.
Approved and Withoursel.
100 f
T. Justice alle
O.C. " Company. WINC
15.10 "
Tale / 3/2//8 Cos

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



#### CANCELLATION of ALLOTMENT.

ONE CONTROL OF THE PROPERTY.								
1. I, (NO) 2692 (Hank) Ptc. (Neme) Daddin J.								
hereby apply for cancellation of Allotment made by me on N.F.P/11								
No. 235 8 dated July 21/16 in favour of								
Francis Dobbin								
for \$ _ cts 50 per diem								
Such cancellation to take effect on the day of								
2. I agree to accopt all risks and consequences of this applica-								
tion failing to reach Headquarters, St. John's, in time to become								
operative at above nominated cancelling date; and that in the								
event of such non-delivery, and thereby the allotment continuing								
to be paid to the Allottee, I also agree to such further stoppage								
in the Pay Books as may be nocessary, or otherwise to refund such								
overpaid amount or amounts.								
le infirming leable No. 26, 2/2/18.								
Dated at , Roled								
Tentor Park School, Me 2 me.								
. Cyr. 1836								
Jan 9 1918								
Oke Oxal								
na Allottor.								
main unitues								
Approved and Witnessed:								
6. Tuesce ifte. NOME								
O.C. " Company. With.								
15/1/0 "								

To be made out in  $\frac{TRIPLICATE}{t}$  and delivered at the Pay & Record Office not later than date of cancellation, in accordance with P.& R.O. C.L./10, 9/12/16.

gashiers July 17. 1919 Capt M. Howley Dear Ling I never gat my money there must be a mistake made as all the real of the boys got theirs direceived my discharge certificate yours truly pte & Doblin morphis per



PAYABLE ON ACCOUNT OF:-

2692. Pte. J. Dobbin.

To:- Mrs. A. Dobbin. Wife.

LAST ADDRESS:-

115, George Street,
Ayr, N.B.

Allotment Sep. Allce.

820.00

per day month.

SEPARATION ALLOWANCE.

Paid in full up to and including 20/12/18

0 % P.

Modificated Plagor.
Chief Paymaster &.O. I/c Records.

PAY & RECORD OFFICE, 58, VICTORIA STREET, LONDON, S.W.1.

20th. December, 1918.

# DUPLICATE. ORIGINALTINGENT.

#### LAST PAY CERTIFICATE.

#### ALLOTMENT & SEPARATION ALLOWANCE.

PAYABLE ON ACCOUNT OF:-

2692. Pte. J. Dobbin.

TO:-

Mrs. A. Dobbin. Wife.

LAST ADDRESS:-

115, George Street, Ayr, N.B.

Allotment Sep. Allce. 820.00

per day month.

Paid in full up to and including 20/12/18

Of Mucasil Naj.
Major.
Chief Paymaster &.O. I/c Records.

PAY & RECORD OFFICE, 58, VICTORIA STREET, LONDON, S.W.1.

20th. December, 1918.

REET: No Set Start of 30 fil 9
3.
Molet & Deschart of

#### N. F. R. /84

Bo. 4

From Pay & Record Office London To Minister of Militia, St. John's, Hfld.

#2692 Pte J.Dobbin

Ration Allowance credited in S/Rm. Pay Book but not on N.F.P./94 10s.5d.

morale to the Tiles It. Manys Bay Johns but I never received any thing so I did not know what was rosony : so would you lease write and Dear dir let me know what about it I take the aberty of writing and Chlige to you it is about the gratuity Mrs. a. Dobbin which all the descharged soldiers hekles Via Whithoume and their wither are getting. I am St. Mary's Bay an ex soldiers wife, and lame across 9.4.190 here with my husband on the P.S. enclosed is release certificate 21th of decembers and he was diswith my husbands name and number in case you would want it. charged on January 30 and we have never received any of the money yet and I know a lot of men around who get it regular every month. the last pay I got was at the Pay Office in London and the Pay Officer told me there I would get the next one in It,

#### The Royal Newfoundland Regiment

	RELEASE CERTIFICATE No 7.74
Re	Address & a rie of Cl- Marg Dist
	This certifies that in consequence of demoblization discharge has
	been approved for four 16 7919
	Regular Discharge Certificate will be mailed by Officer i c Records 28 days from date of approval.

The wearing of uniform is prohibited after discharge is confirmed

except with permission of competent authority.

Nº 2358



	Allotment begins	July	1 -10	710	MOUNT
Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (In fall)	Adı		person)
51	Larly	had France	Soldin		5
	1	1000 V Carre	Dicke	2 2	
	10-		Sucre	es R	-
			Mar	ys Day	_
				/ //	
	*				
	1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1				
					-1-
				Total Allotment, \$	

May 26,1920

J.Dobbin. Harry Cove. St.George's.

2692

Dear Sir:

I enclose cheque for \$2.53, representing balance found due you, on the closing of the books of the London Pay & Record Office.

Yours truly,

Ma jor Paymast er

Enc.

To be used only for Special Reserve Recruits, and for Special Reservists enlisted ar Army.

MEDICAL HISTORY

Surname

Dobbin

Christian Name

goh

9565

#### Table I.—GENERAL TABLE.

Birthplace:—Parish		Coun	ty	
	SPECIAL	RESERVE.	REGUL	AR ARMY
	on 2.9 day of	april 1916	on day of	191
Examined	at oft. 9	1		
Declared Age	1	o mo	at	
		rs / days	years	days
-Trade or Occupation	Fis	herman	7.25	
Height	5 feet	7 inches	feet	inches
Weight	<u></u>	4 7 lbs.		lbs.
Chest Girth when fully expanded		37 inches		inches
ment (Range of expansion		2 ½ inches		inches
Physical Development				•
(Arm	Right	Left	Right	Left
Vaccination Marks Number				
When the state of				
When Vaccinated	DF V- //	I was the transfer	R.E.—V—	
Vision	R.EV= 6/	7 1 12	L.E.—V=	
-	6/(a)	5		
(a) Marks indicating congenital peculi-	(4)		(a)	
arities or previous disease				
· ·		*		
	(b)	•	(b)	
(b) Slight defects but not sufficient to Cause Rejection	19 - V. F	7 T. W. W.		·- ***
				•
Approved by (Signature)	9	01		Art Services
(Rank)	Xamons	aferson.		
*	majn	Medical Officer.		Medical Officer.
	at B- FOR	20	at .	
Enlisted	on 24 day of	Sport 1916	on day of	191
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment	at nella Rea	2692		
	The state of the s	2072		
Transferred to	×			
		32.05		
Became non-effective by,				
	on day of	191	on day of	191
(Signature)				
(Rank)				[P.T.O.
				GOS/MESSAGRICUM TERMINORS AND PROPERTY OF A CONTROL OF A CONTRACT OF A C

Admitted to Discharged from										
Name of Hospital	2000	Hospit	d to tal Year	A DOUGHE	Hospita	100000000000000000000000000000000000000	Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of further use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfer, de., will be given in the special apphilis case sheets.	Signature of Medical Officer
	Day	monti	iear	Day	Month		Anietten Luca			
land Home	ALC: C.S.					16		37	for he sumplities magnitudes to the times	Mung
3.50.5m	200	L	12	14	11	11	BO. ausellering - lower	Contract of the Contract of th	N. G. a. A.T. Person last	6 27-
			"[			'/'	Exherinties - following		Vego Shi anantitus. Pain wo and helors knew When he wach our 17 Pain type at night mother	Truestro Touline
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									Transport of the second of the	
\$ ** # 15 · ·										
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							•		* 1980 A 1980	
			•							
										[P.T.O.]

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.: Examination for Field or Foreign Service, Extension, Re-engagement, or prolongation of Service; Issue of Surgical appliances; Particulars of Dental Treatment, &c.

2 00000000	
Date	Brief Details, and Signature
1/7/16	Al Suculation Lo
4. 4.	1 2 Va pro WIP SS Sicilian July
4.9.16	Successful Jacoballo 1 700 Seulat Sealured Completed It Has. 3" Inoculation Para J.
7-00-16	
eter nul va	Boarded at Hazely Som Coupe Marked BI Categor
	lour hance
	me Cabi Rame.
30 NOV 1918	HAZELEY BOWN BAMP. Reconners Refatication
295	MOYAL NEWFOUNDLAND RED.
	It is hereby certified that this soldier
	has been before the Standing Medical  Board, and has been classified as
CITE OF CHARACTER	for discharge on in modulate
Description of the second of t	tion. Medical curk gophy  Aletani Adjutant  Date of SMB.  Discharge Discharge Depositioned
	TARIE IV SERVICE TABLE

	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
		igian Tuen esta. Ne			- 19 <del>19</del> 0	
•						
				1	No.	79.93
				- An		
				*		
	$\overline{}$					
	. <del> </del>		4			77 6483
						1 (4)

Army Form B. 179.

	Medical Report on a	in lavalid.
	Station_	Hazeley Nouva any
		028/11/18.
1	1. Unit Royal Rewfoundanis.	Former Trade \ or Occupation \
2.	2. Regimental No. 2 192.	
3.	3. Rank DOBBIN -J	If with previous service in Army, state—  (a) Former Unit;
4.	4. Name	(b) Regimental No.;
5.	5. Age last birthday	(c) Date of Discharge;
	( on	(d) Cause of Discharge.
6.	6. Enlisted $\begin{cases} \mathbf{on} \\ \mathbf{at} \end{cases}$	
	8. Disability in respect of which is	nvaliding is Proposed
	(Other disabilities should be reported upon in	
	Beri Bers	1.
	Statement of Case.	
	Note.—The answers to the following questions are to be fil case. In answering them he will carefully discriminate between the ma in his military and medical documents. He will also carefully distingu	n's unsupported statements and evidence recorded
9.	9. Date of origin of disability.	
10.	10. Place of origin of disability.	
	De sto	tes that he had
11.	11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the Control of the Control o	Bani ladare
	on the Medical History Sheet bearing on the case.	The state of the s
e	enlistment in ap	r 1916. This NOTE
6	out arew in no	v. 19,6, necessitation
1	hospital treat	trient on discha
~	from Lospital	he has been
1	in en playme	to Comban
12.	12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—	t Company.
	(a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed	ravated militar
	tion to which it is attributed should be stated, see Notes on page 3).	ice land itions
	(b) constitutional or hereditary, and not aggravated by service during the present war.	
	(c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.	

The Condition shows great improvement 13. What is his present condition?

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

- 14. If the disability is an injury, was it
  - (a) In action?
  - (b) On field service?
  - (c) On duty?
  - (d) Off duty?
- 15. Was a Court of Inquiry held on the injury?

If so-(a) When?

- (b) Where?
- (c) Opinion?
- 16. Was an operation performed? If so, what?
- 17. If not, was an operation advised and declined?
- In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly\* attributable to active service?
- 19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present

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

Repatriation ROYAL NEWFOUNDLAND REG. 1 Officer in medical charge of case.

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

Station		
Ctation	T1	Officer in change of Hamilton
Data		Officer in charge of Hospita

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

† Delete this word if no exceptions are to be made

Notes.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Minister of Pensions should be in possession of

the most reliable information to enable him to decide upon the man's claim to pension.

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

(iii) The rates of pension vary directly according to whether the disability is, (i) caused or aggravated by service in the present var, (i) due to cause not connected with present var, vis. (i) carlier active service, (i) climatic diseases in pre-var, vervice, (i) ordinary military services before the var. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

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

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

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

(i.) Service during the present war:

(ii.) Climate;

(iii.) Ordinary military service;

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

hereditary.

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

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

23. Is the disability permanent?

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

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

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

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

27. Do the Board recommend-

(a) Discharge as permanently unfit, or

(b) Change to England? 28. If discharge is recommended it should be stated whether further medical treatment (including orthopædic training) is desirable in a-

(a) Sanatorium:

(b) Hospital;

(e) Convalescent home;

(d) Asylum: or

Station

Date

Station

Date.

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

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

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

President. Members.

Administrative Medical Officer.

TOR OF MEDICAL Approv JAN 9 1919 Demobilization Form 2.

# The Royal Newfoundland Regiment

	PROCEEDINGS ON DISCHARGE
1.	No. 26.92: Rank Pt.: Name Dobbin John: Intended place of residence Horry Covi of Gunglo Dist
2.	Occupation ————————————————————————————————————
3.	The above named man is discharged in consequence of.  ELIGIBLE for FOST DISCHARGE PAY
4.	His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.  PlaceJAN-14-1919
_	Date
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
6.	CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER  I hereby certify that I am in a position to resume civilian occupation immediately on discharge.  Place and Date 4-1-9.  Signature of soldier  Signature of witness
	STATEMENT OF SERVICE
7.	Enlisted for service 2.9-4-16  No of days on Military Discharged from service 16-1-19 Plus 14 days.  Service 10.0 9 days
8.	APPROVAL OF DISCHARGE  The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i c Records, The Royal Newfoundland Regiment, twenty-eight days from date.  ST. JOIEN'S.  Officer Commanding Discharge Depot The Royal Newfoundland Regiment.  Date
	The discharge of above mentioned soldier is hereby confirmed.  Place 19 1000. 1965  Place 10 1000. Officer ic Revords  The Royal Newfoundland Regiment

181/9/10 S B DO 179/

#### Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Number of Sheet Fersat 1st hew forms land. W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. B. 121. Regiment of Signature of O. C. Company Culseru 888] W5017/2124 1000m 6/15ss 93 5G Good Conduct Badges, Service Pay or Proficiency Pay Regimental Number and Name Enlistment Fisherman Age on 26 years / months Place and Date of Enlistment) Trohus. Religion (with Colours 7 3 05 years. Date Period of Bate of award or of order dispensing with trial Cases of Drunk-Names of Date of REMARKS By whom awarded OFFENCE Punishment awarded Place Rank Witnesses Offence absent 6,30 & g a.m parade loft bomor a days 6.8 9.9.10 20 1. Tarner To be carried over

Nº 2358





1st. NEWFOUNDLAND REGIMENT

	Whether Wife, Child, other Relative of Friend	NAME (in full)		ADDRESS	AMOUNT
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#### ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S, Nfld.

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The accompanying Victory Medal and/or British War Medal

#### Medical Report on an Invalid.

Station Hayely Down Comp Date I April 18

1. Unit Toyal henformaland

- 2. Regimental No. 2692
- 3. Rank
- 4. Name DOBBIN, J
- 5. Age last birthday
- 6. Enlisted  $\begin{cases} on \\ at \end{cases}$

- 7. Former Trade or Occupation
- 7a. If with previous service in Army, state-
  - (a) Former Unit;
  - (b) Regimental No.;
  - (c) Date of Discharge;
  - (d) Cause of Discharge.
- 8. Disability in respect of which invaliding is Proposed.

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

Den- Dui

#### Statement of Case.

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

- 9. Date of origin of disability.
- 10. Place of origin of disability.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing before enlartment in apr. 1916 on the case.

This broke out one in Prov. 1916. Precentating Hospital treating. Un associately from Hospital below from in Employment Coy. Do anded & force 1918

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

aggravated by military service

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His condition has slow great confrovement.

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13. What is his present condition?

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

- 14. If the disability is an injury, was it caused—
  - (a) In action?
  - (b) On field service?
  - (c) On duty?
  - (d) Off duty?
- 15. Was a Court of Inquiry held on the injury?

If so-(a) When?

- (b) Where?
- (c) Opinion?
- 16. Was an operation performed? If so, what?
- 17. If not, was an operation advised and declined?
- 18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly\* attributable to active service?
- 19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

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

MAN CHANGE NEWFOUNDLAND RES.

Officer in medical charge of case.

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

Station\_\_\_\_

Officer in charge of Hospital.

Date\_\_\_\_

<sup>\*</sup>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.

12692

Demobilization

# The Royal Newfoundland Regiment

DEMOBILIZATION OF												
Reg. No2	69	2. Rank	0.	te	• • • • •	Name	Do.	blu	n. Ke	the	۸	
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Date of Enlistment 39 45 16 Address lewloret Destrict Lacentra												
	Occupation TashermanClassification for Discharge								••••			
Recommenda	tion	S.M.B. Ser	nan	rently. ung	W.	Disability Ra	ting .	•••••	ruc	٠		••••
Passed to Demobilization Officer with following documents:-												
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1. Civil Re-E	stabl	ishment.										
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Date	••••		•				••••					••••
2. Clothing.						1.1					100	
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Date ! H		-19	••	U				Ó i c	Re-clotl	hing.		

3: Transportation and Release Certificate.  The above named has been provided with Travelling Warrant No to his home
at
Date 14-1-19 Demobilization Office S
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 30 - 1 - 19
Date 14-1-19 MS Aley Capt Depot Paymaster
Discharge approved for. 16.1-19
Forwarded with following documents to O.C Discharge Depot.
N.F. P[38/4]. /.   B 268   B 121   D.F. 1
F 178 W 3494 B 122 Board 1st " 2
B 178a D 400A B 1915 do 2nd " 3
B 179. D 400B. Form L. do 3rd. " 4
B 179a D 400C Form K do 4th " 5
B 179c B 120 M 93
Date 17:1:19: Combilization Officer.
APPROVED.
Documents as above forwarded to:—
Officer ile Records. Board of Pension Commissioners.
with following additional documents.
ELIGIBLE for FOST DISCHARGE PAY
JAN 18 1919  R. H. Jait Capl.  O. C. Discharge Depot.
Received the above noted documents from O. C. Discharge Depot.
1 To Theed
Date Jany 1/919 Sout Kerora



#### 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 Regiment from which discharged Royal Newfoundland Regimental number Intended address Height on discharge Color of hair on discharge Complexion Color of eyes Descriptive Marks Figure on discharge Christian name of Father 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 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) Station I certify that the above named soldier signed the foregoing declaration in my the same above description and details are, to the best of my knowledge correct. HEADQUARTERS ORDERLY ROCH Officer ic Hespital Medic

Station

Date

t. John's.

### 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 wok at Tisking

John X John at Ronne Signature of Man.

grature of the Vocational Officer of his Representative

Place St- Johnis nfld.
Date 14/19. 191

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Reg. No. 26 92. Rank He Name Softhin Attested Address Like Is	reft
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Date of Allotment	?
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9-1-19 Rec Discharge as Permanently uny	
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11 - 19, DISCHARGE APPROVED ON DEMODILISATION.	