

Process No.

717

717

**ROYAL NEWFOUNDLAND REGT.**

*Deceased 14-11-53*

**1914-1918**



# First Newfoundland Regiment



## ATTESTATION PAPER

Regimental No. 7 717

Name in full Michael Driscoll Age 30.

Address JOTS COVE HILL

Married  Single  Height 5 ft. 5 in. Weight 131.

Color Dark Hair Light Brown Eyes Blue.

Other distinguishing marks Small cut on middle finger of L. hand.

Nearest relative John Driscoll (Father)

Address JOTS COVE HILL

Dependents Fishermen

Occupation Fishermen Present Wage 250<sup>00</sup> year

Previous service \_\_\_\_\_

Decorations \_\_\_\_\_

General Remarks \_\_\_\_\_

Date of Enlistment 15<sup>th</sup> Dec.

I, Michael Driscoll

do sincerely promise and swear that I will be faithful and bear true allegiance to His Majesty, and that I will faithfully serve His Majesty in any place where I may be needed (or in the Colony of Newfoundland, as the case may be), against all His enemies and opposers whatsoever, according to the condition of my service.

Michael Driscoll

Declared before me this 15<sup>th</sup> day of Dec. 1914

Subaltern

*Michael Driscoll  
Attest for  
witness*







1246

Mr. Cook.

Dear Sir

My Husbands

Reg. Number is 8213. Hope you  
will try & do your best for me as  
I am awfully bad in need;

Yours truly

Mary Taylor.

439 Water-Street

Wife here to send  
the medicine to  
Dear Sir's Alice  
dear Sir's  
Wife

Mary Taylor

8213

W. C. Oak

Miltia Rd.  
Water St

July 11/21

Dear Sir

I am writing you this letter  
to ask you if you would kindly  
oblige me by looking into my  
case concerning my Pension I was  
getting a pension in June 4 years  
ago & since that I have not Rec  
any Pension at all & I am in very  
bad condition indeed I have three  
children one 7 years & one 4 & one 1 1/2  
I am living at my mother while I am  
here in St John my Home is in Booth  
St I am in very Bad State now

Answer  
S. J. Resam  
Your Obedient  
Servant

Mrs Mary Taylor

439 Water St  
West

M. L. Jones  
Keypour

Home address  
Mrs Mary Taylor  
Room 11  
Hall Bldg

for my Husband is all the blame &  
he is not drawing any wages at all  
for he say that his wounds are  
against him. He is wounded in the  
Shoulder & left Hand so he cant  
do heavy work. I would also like  
too no why my first child did not  
Rec her Pension right along for she  
only got 4 dollars & then I got nothing  
after I would be much obliged  
too you Sir. W. L. Oake if you  
would kindly oblige me by letting  
me know as soon as possible as I  
am very much in need of have got  
all my certificates if they are needed  
so I will await of kindly



July 8th 1924.

Mrs. Mary Taylor,  
439 Water Street W.,  
City, Bay.

Dear Madam:-

We are in receipt of your letter of the  
4th inst. regarding the matter of a pension.

Will you kindly advise us what your husband's  
regimental number is, so that we can look up your  
case and advise you further.

Yours very truly,

Secretary.

EHD.

THE BOARD OF PENSION COMMISSIONERS  
FOR NEWFOUNDLAND.

Pension No. 1245

Regtl. No. 717 Rank Pte. Name Michael O'Driscoll

Corps served with ROYAL NEWFOUNDLAND REGIMENT

Date of Medical Board Jan 5th 1919

Pensionable disability Less than 20 <sup>for</sup> 90 <sub>months</sub>

Pension granted: \_\_\_\_\_  
\$ \_\_\_\_\_ per month for \_\_\_\_\_ months

or Gratuity granted: \_\_\_\_\_  
\$ 75 payable in three equal monthly insts.

Granted to:  
Name Michael O'Driscoll  
Address Poss Cove

Date case disposed of JAN 27 1919

Approved by:  
Members of Board  
\_\_\_\_\_ Chairman  
\_\_\_\_\_ Secy  
\_\_\_\_\_ Wm. P. P. S.

Remarks:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Medical Report on an Invalid.

Station HASKELY DOWN CAMPDate NOVEMBER 22nd., 1918

1. Unit **ROYAL NEWFOUNDLAND**  
 2. Regimental No. **717**  
 3. Rank **PRIVATE**  
 4. Name **O'BRISCOLL MICHAEL**  
 5. Age last birthday  
 6. Enlisted  $\left\{ \begin{array}{l} \text{on} \\ \text{at} \end{array} \right.$

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).

**SUN SHOT WOUND THIGH. PERFORATING**

#### 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 on the case.

**CATARRAH AND JAUNDICE IN GALLIPOLI AND SLIGHT WOUND IN LEFT LEG JULY 1916. BARKED S1 IN JUNE 1918. DUE TO INABILITY TO CARRY OUT ROUTE MARCH WITH BACK**

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

(a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).

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

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

**WOUNDED ON ACTIVE SERVICE**

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 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?

**THROUGH AND THROUGH WOUND RIGHT THIGH.  
NO BONE OR NERVE INJURY**

**REPATRIATION (3)**

**(sgd) J. STP. KNIGHT, CAPT. ROYAL NFLD. REGT.**

Officer in medical charge of case.

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

Station \_\_\_\_\_ Officer in charge of Hospital.

Date \_\_\_\_\_

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

† Delete this word if no exceptions are to be made.

### Opinion of the Medical Board.

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

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

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

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

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

1. (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 20, or nil.*

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 orthopaedic training) is desirable in a—

- (a) Sanatorium;
- (b) Hospital;
- (c) Convalescent home;
- (d) Asylum; or
- (e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended?

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

**WOUND IN RIGHT THIGH OCTOBER 1917  
TWO SCARS HEALED. HAS FULL MOVEMENT  
IN KNEE. WOUNDED BELOW KNEE (LEFT)  
YES JULY 1st., 1916. FRACTURING BONE.  
SWIFTLY HEALED WITH GOOD MOTION**

**G. S. W.**

**LESS THAN 20%**

**YES**

Signatures:—

Station **ST. JOHN'S**

Date **JAN. 15th., 1919**

Approved

Station \_\_\_\_\_

Date \_\_\_\_\_

**(sgd) W. S. FRASER**

President.

**E. S. TAIT**

**L. PATERSON. MAJOR**

Members.

**(sgd) CLUNY MACPHERSON. MAJOR**

Administrative Medical Officer.



# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 717 Rank ..... Pte Name Michael O'Driscoll  
 Intended place of residence. Tors Cove, Ferryland Dist
2. Occupation Fisherman  
 Classification of soldier B Medical Category E
3. The above named man is discharged in consequence of Demobilization  
Eligible for Post Discharge Pay
4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.
- Place ..... (SGD) C. C. DULEY, CAPT  
 Date Jan 22 1919 Commanding Discharge Depot  
 The Royal Newfoundland Regiment

### CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.
- Place and date St. John's (SGD) M. DRISCOLL  
 Signature of soldier  
22-1-19 (SGD) C. B. DICKS, CAPT  
 Signature of witness

### CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.
- Place and Date Jan 21 1919 (SGD) M. DRISCOLL  
 Signature of soldier  
St. John's J. DAYMOND, SGT (SGD)  
 Signature of witness

### STATEMENT OF SERVICE

7. Enlisted for service 10-22-14 No of days on Military  
 Discharged from service 22-1-19 plus 14 days Service 1519

### APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.
- Place St. John's (SGD) C. C. DULEY, CAPT  
 for Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment.  
 Date 22-1-19

### CONFIRMATION OF DISCHARGE

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

1245

April 1/19.

Mr. Wm. J. O'Driscoll,  
Tor's Cove.

Dear Sir:

I am in receipt of your communication of March 15th., to the Minister of Militia, which has been passed to us.

The Medical Board which examined <sup>you</sup> ~~you~~ on your discharge estimated ~~your~~ <sup>your</sup> disability, if this has increased since his discharge, and he can furnish a Medical Certificate to that effect, we will take the matter up at the Medical Board.

Yours faithfully,

Secy.,  
Board of Pension Commissioners  
for Newfoundland.

WHF/GC

## Medical Report on an Invalid.

1245

Station HAZELEY DOWN CAMPDate NOVEMBER 28th., 1918

- |                      |                           |  |
|----------------------|---------------------------|--|
| 1. Unit              | <b>ROYAL NEWFOUNDLAND</b> | 7. Former Trade }<br>or Occupation }         |
| 2. Regimental No.    | <b>717</b>                | 7A. If with previous service in Army, state— |
| 3. Rank              | <b>PRIVATE</b>            | (a) Former Unit;                             |
| 4. Name              | <b>O'DRISCOLL MICHAEL</b> | (b) Regimental No.;                          |
| 5. Age last birthday |                           | (c) Date of Discharge;                       |
| 6. Enlisted          | { on<br>at                | (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).***GUN SHOT WOUND THIGH. PERFORATING**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 on the case.
- CATARRH AND JAUNDICE IN GALLIPOLI AND SLIGHT WOUND IN LEFT LEG JULY 1916. BARKED B1 IN JUNE 1918. DUE TO INABILITY TO CARRY OUT ROUTE MARCH WITH BACK**
12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
- (b) constitutional or hereditary, and not aggravated by service during the present war.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.
- WOUNDED ON ACTIVE SERVICE**

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 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?

**WOUND AND THROUGH WOUND RIGHT THIGH.  
NO BONE OR NERVE INJURY**

**REPATRIATION (3)**

**(Sgd) J. STP. KNIGHT, CAPT. ROYAL Nfld. REGT.**

Officer in medical charge of case.

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

Station \_\_\_\_\_ Officer in charge of Hospital.

Date \_\_\_\_\_

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

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

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

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

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

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

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

1. (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 20, or nil.

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 orthopaedic training) is desirable in a—

- (a) Sanatorium;
- (b) Hospital;
- (c) Convalescent home;
- (d) Asylum; or
- (e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended?

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

**WOUND IN RIGHT THIGH OCTOBER 1917  
THE SCARS HEALED. HAS FULL MOVEMENT  
IN KNEE. WOUNDED BELOW KNEE (LEFT)  
THE JULY 1st., 1918. FRACTURING BONE.  
SOONER HEALED WITH GOOD RESULT**

**G.S.W.**

**LESS THAN 30%**

**YES**

Signatures:—

Station **ST. JOHN'S**

Date **JAN. 15th., 1919**

Approved

Station \_\_\_\_\_

Date \_\_\_\_\_

**(Sgd) W. S. FRASER**

**W. S. TAIT**

**L. PATTERSON, MAJOR**

**(Sgd) CLYDE WILKINSON, MAJOR**

Administrative Medical Officer.

President.

Members.





M. Driscoll

217

P. + P. 10

Medical Report on an Invalid.

Station Hazley Down Camp  
 Date 28/11/18

- |  |  |
|--|--|
| 1. Unit <u>Royal Newfoundland Regt</u> | 7. Former Trade }<br>or Occupation }         |
| 2. Regimental No. <u>717</u>           | 7A. If with previous service in Army, state— |
| 3. Rank <u>Plt</u>                     | (a) Former Unit;                             |
| 4. Name <u>DRISCOLL.</u>               | (b) Regimental No.;                          |
| 5. Age last birthday                   | (c) Date of Discharge;                       |
| 6. Enlisted { on                       | (d) Cause of Discharge.                      |
| at                                     |  |

8. Disability in respect of which invaliding is Proposed.

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

*G. S. W. thigh perforating.*

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 on the case.
- Cataract & jaundice in Gallipoli + slight wound left leg July 1<sup>st</sup> 1915*  
*Marked G.I. in Jan 1918.*  
*due to inability to carry on route marches & work*
12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3). *wounded on active service*
- (b) constitutional or hereditary, and not aggravated by service during the present war. *no*
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c. *no.*

*Brought through wound at thigh no bone or nerve injury*

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 caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

15. Was a Court of Inquiry held on the injury?

- If so—(a) When?  
(b) Where?  
(c) Opinion?

16. Was an operation performed? If so, what?

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

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly\* attributable to active service?

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

20. Do you recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

*Repatriation (3)*  
*M. J. C. [Signature]*

ROYAL NEWFOUNDLAND REG.

Officer in medical charge of case.

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

Station \_\_\_\_\_

Officer in charge of Hospital.

Date \_\_\_\_\_

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

† Delete this word if no exceptions are to be made.

### Opinion of the Medical Board.

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

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

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

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

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

1. (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 20, or nil.*

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 orthopedic training) is desirable in a—

- (a) Sanatorium;
- (b) Hospital;
- (c) Convalescent home;
- (d) Asylum; or
- (e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended?

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

Signatures:—

Station \_\_\_\_\_

Date \_\_\_\_\_

Approved.

Station \_\_\_\_\_

Date \_\_\_\_\_

\_\_\_\_\_  
President.

\_\_\_\_\_  
Members.

Administrative Medical Officer.



No. \_\_\_\_\_

Date \_\_\_\_\_ 191

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

London (Station.)

(2) The Officer Commanding,

Newfoundland Cont<sup>94</sup>

Army (Station.)

(3) The Paymaster,

\_\_\_\_\_

\_\_\_\_\_ (Station.)

6 Regimental No. 717

Rank and Name A. J. Spiscoll M

Regiment or Corps 1<sup>st</sup> Newfoundland Regt

has been granted a furlough from 18 Jan to 27 Jan 1916

His address while on leave will be :-

Union Jack Club  
London

I consider he is fit for\*  ~~Duty.~~  Light duty. Class B

\_\_\_\_\_  
A. Stephens

Officer in charge ~~REGISTRY OFFICER I/C ROYAL VICTORIA~~ Hospital,

Army (Station.)

\* Strike out that which is inapplicable.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office.

Admitted 6.7.16

Army Form W. 3016.

No. \_\_\_\_\_

Date Aug 1<sup>st</sup> 1916

(1) To the Officer i/c Records,

58 Victoria St  
AW (Station.)

(2) The Officer Commanding,

Newfoundland Contingent  
Aug - (Station.)

(3) The Paymaster,

58 Victoria St  
SW (Station.)

Regimental No. 717.

Rank and Name Pte. Driscoll M-

Regiment or Corps Newfoundland Contingent

has been granted a furlough from Aug 1<sup>st</sup> to Aug 10

His address while on leave will be :-

58 Victoria St - SW.

This man has been furnished with a warrant to Victoria and given an advance of £1 (one pound)

I consider he is fit for ~~Light~~ <sup>and likely to be fit for service overseas</sup> duty within 3 months.

Horace Jagan Capt R.A.M.C.(F)

Officer in charge Registrar, R.A.M.C.T. Hospital,  
3rd London General Hospital,  
WANDSWORTH, S. W. (Station.)

\* Strike out that which is inapplicable.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office.



LAST PAY CERTIFICATE

**OFFICE COPY** N.P./94

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 26/5/17.

Regt. No. 717, Rank Pte. Name Driscoll. Unit ROYAL NEWFOUNDLAND REGT. who was repatriated to Newfoundland on 11/12/18. Authority \_\_\_\_\_ Cause \_\_\_\_\_

DR. CR.  
**STATEMENT OF ACCOUNT**

	PARTICULARS	£	s	d	PARTICULARS	£	s	d		
PERIOD: From 23/11/18. To 30/12/18.	Balance Dr. from				Balance Cr. from					
	Allotment 19 days @ 60¢.	111	40	12	6	11				
	Cash Payments:				Pay 19 days @ \$ 1.00	119	00			
	18 <sup>th</sup> Pay.				Field Allce 19 days @ \$ <sup>10</sup> / <sub>100</sub>	1	19	0		
	22 <sup>nd</sup> "			1	4	7				
	Other Debits:				Other Allces days @ \$					
	B. Damages				6					
	Miss Stopp.			1	5					
	Total Debits			14	5	11				
	Balance due by Paymaster							14	5	
			14	5	11					
					Total Credits			14	5	
					Balance due to Paymaster				14	5
								14	5	11

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

F. G.  
HAZELEY DOWN CAMP.  
(Place) Dec 11<sup>th</sup> 1918.  
(Date)

*[Signature]*  
O.C. "5" Company.  
to 11

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

Pay & Record Office, London,

Chief Paymaster & Officer i/c Records.

No. 13227/4

From:

Chief Paymaster & O. 1/c Records,  
Newfoundland Contingent,  
53, Abchurch Lane, Street,  
London, S.W. 1.

NEWFOUNDLAND CONTINGENT

To:

Officer Commanding,  
Northern Command Depot,  
Ripon.

N.F.P./79

4th December 1917

Subject: 717, Pte. Ml. Driscoll,

With reference to the following telegram (7307) from the Hon. Minister of Militia, received 30/11/17

"Pay 717, Pte. Ml. Driscoll  
"£8:0:0

Draft £8:0:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

*A. A. Munnell*  
Chief Paymaster & O. 1/c Records.

Receipt hereunder.

*J. Quarton*  
Officer Comdg. *W. S. Batten*  
1st Newfoundland Regiment  
*Northern Command Depot*

Received the sum of £8 on account of

cable remittance from Newfoundland.

*M. Driscoll*

No. 717 Rank Pte

NOTE: Receipt is not required.



No. 10305/1003

NEWFOUNDLAND CONTINGENT

N.F.P. /70.

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

To: Officer Commanding,  
2<sup>nd</sup> Bn Royal Nfld. Regt.  
Winchester.

Subject: 28th June 1918

Subject: 717, Pte. M. O'Driscoll

With reference to the following telegram (5822) from the Hon. Minister of Militia, received

pay to 717 Driscoll £10:0:0

Draft £ 10:0:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

*F. W. MacLure*  
Chief Paymaster & O. i/c Records.

*July 1<sup>st</sup>* 1918

Received hereon  
*Chambers*  
COMMANDING 2<sup>ND</sup> BN. ROYAL NEWFOUNDLAND REGT.  
Officer Comdg. 2<sup>nd</sup> Bn  
1st Newfoundland Regiment

Received the sum of £10  
Pounds, on account of  
cable remittance from Newfoundland.

M. Driscoll  
No. 717 Rank Pte

December 14<sup>th</sup> 1919

to Paymaster 1st Nfld reg

Dear Sir  
Will you please send the sum of  
ten four pound and ten shillings

£ 4 10 to  
Mrs Margaret Driscoll Tor's Cove  
please attend to it as soon  
as possible and oblige  
yours truly

Rt Michael Driscoll

No 717 1st Nfld reg

C Com

Address M Driscoll  
No 717 E. Cove 1st. W. F. Ld  
No 7 B ward  
R. V. Hospital  
Nitty Hunt

---

Mrs Margaret Driscoll  
Lors Cove  
Ferryland Dist  
W. F. L. d

181 W. WASHINGTON RESIDENT	
PAY & RECORD OFFICE	
Ref. No.	1900
Rec'd.	DEC 25 1915
Acc'd.	
Ans'd.	DEC 25 1915
File No.	

---

my pay book was sent  
in a short time ago  
M. D.

R. V. Hoop  
Kittery

Dec 22 ~~1915~~

Paymaster 1st N F ld regt

Dear Sir

I wrote to you a short time ago to  
make about sending money home.

I expect my letter went astray as  
I have not heard from you since

I want four pound ten shilling  
£4 S 10 to Mrs Margaret Driscoll  
Lor's Cove Ferryland Dist  
N. F. I. S.

And please let me know  
when you attend  
to it

and oblige  
yours truly

1ST NEWFOUNDLAND REGIMENT	
PAY & RECORD OFFICE	
Ref. No.	1584.
Rec'd.	DEC 23 1915
Ask'd.	DEC 25 1915
File No.	

Michael Driscoll  
No 117. 1st N Fl d regt  
No 1 B ward  
R. V. H  
Vethery

25, December, 5.

2340/1.

From: Paymaster & Officer i/c Records,  
Newfoundland Contingent.

To: No.717 Pte. Michael Driscoll,  
No.7B Ward,  
Royal Victoria Hospital,  
Netley, Hants.

Referring to your letter dated 14/12/15 received today, and another 22/12/15 received 23/12/15; request has been cabled to Headquarters, St. John's, Newfoundland, to pay to Mrs. Margaret Driscoll, Tors Cove, £22.00, which is charged to your account.

A 22<sup>00</sup>

Chg. g/l

Capt.

Paymaster & O. i/c Records.

Form P/K.

1ST NEWFOUNDLAND REGIMENT.

Statement of Account of No. *717 Private W. Duvicall*

*3<sup>rd</sup> Coy.* Company. From *15/4/16* to *18/8*

(both days inclusive)

Date	Pay Book Col. No.	Particulars	No. of days.	@ per day.	Dr.		Cr.		Dr.			Cr.		
					\$	c.	\$	c.	£	s.	d.	£	s.	d.
		<b>Cr.</b>												
1		Pay ... ..	<i>118</i>	<i>1</i>			<i>118</i>	<i>-</i>	<i>1</i>					
2		Field Allowance ... ..	<i>118</i>	<i>10</i>			<i>11</i>	<i>80</i>						
3		Other Allowances ... ..												
4		Total Pay & Allowances ...					<i>£129</i>	<i>80</i>						
5		Converted into Sterling @ \$4.86 $\frac{1}{2}$										<i>26</i>	<i>13</i>	<i>5</i>
6		Balance from previous Pay Book										<i>2</i>	<i>4</i>	<i>0</i>
7		Total Credits (in £ s. d.) ...										<i>£28</i>	<i>17</i>	<i>5</i>
		<b>Dr.</b>												
8		Forfeited Pay ... ..												
9		Allotments ... ..	<i>118</i>	<i>60</i>	<i>70</i>	<i>80</i>								
10														
11		Total Stoppages (in \$ c.) ...				<i>70</i>	<i>80</i>							
12		Converted into Sterling @ \$4.86 $\frac{1}{2}$								<i>14</i>	<i>10</i>	<i>11</i>	<i>2</i>	
13		Fines ... ..												
14		Clothing and Necessaries ... ..												
15		Arms and Accoutrements ... ..												
16														
17														
18		Total Stoppages (in £ s. d.) ...												
19		<i>10</i> Flages Equal Payments ... ..					<i>7</i>	<i>2</i>						
20		<i>15</i> do 1st Payment ... ..					<i>10</i>	<i>6</i>						
21		<i>15</i> do 2nd "Adonis" ... ..					<i>10</i>	<i>6</i>						
22		<i>20</i> do 2nd "Est. St. John" ... ..					<i>1</i>	<i>10</i>	<i>0</i>					
23		Pay "Holland" office Total Cash Payments ... ..					<i>11</i>	<i>10</i>	<i>0</i>					
24		Balance from previous Pay Book ... ..								<i>15</i>	<i>10</i>	<i>0</i>		
25		Total Stoppages & Cash Payments ... ..								<i>30</i>	<i>0</i>	<i>11</i>	<i>2</i>	
26		Final Cash Payment ... ..												
27		Balance (debit) ... ..												<i>13</i>
28		" (credit) ... ..												<i>6</i>

*3/4/16*  
*8/4/16*  
*9/5/16*  
*31/5/16*  
*20/6*  
*1/8/16*  
*1/8*

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

*A. P. Beckwith*  
*1916*

£ *30* *0* *11* *2*    *30* *0* *11* *2*

No. 717 Rank Pte Name Driscoll M.

Pay	F.A.	Weg	Total
100	10		110
Less Allotment			60
Net Rate			50

DEBITS	Date	£	s	d	CREDITS	Period		Days	Rate	£	s	d	£	s	d	
						From	To									
Balance	6/7/17		4	0	Balance		<del>6/7/17</del>									
Acquittance rolls		5	8	6	Pay @ Net Rate	7/7/17	24/11/17	139	50	69	50	14	5	7		✓
Hospital Advances		1	10	6	Ration allowances							1	0	0		✓
A.B. <sup>34</sup> 2 dys pay			9	0	10 dys @ 2/-											✓
P. & R.O. Payments				5	(7-13-2)											
Block & notes																
22/11/17 Cheque No (7077)		7	10	0												
7-12-5																

CHECKED.  


M. Driscoll



717. Pte M. Dissell

8<sup>th</sup> 10/10  
50

£ 1-10.0 / Hapbit  
4.2 1 Do  
2.5.10! AcyMaes

Balance. 14/4 =  
From 15/4 - 1/8/16 = 159  
@ 60 = \$65.40

2-4-01

13-8.91

\$4.0.01

£ 15-12.91  
4-0-01  
11-12-9

MWA.

per R O Aug 1/10 11/10/10

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

Army Form W. 3016.  
(In Books of 200.)

No. \_\_\_\_\_ Date 2 Nov 1917 Admitted  
12/10/17  
(1) To the Officer i/c Records, 58 Victoria St  
SW (Station).  
(2) The Officer Commanding, Infld Battalion  
Bakery Barracks (Station).  
(3) The Paymaster, 58 Victoria St  
SW (Station).

Regimental No. 717  
Rank and Name Pte Driscoll M.  
Regiment or Corps 1st Infld  
has been granted a furlough from transferred on 2 Nov. to  
His address while on leave will be: V. A. D. Hospital  
Ashford Kent

I consider he is fit for  
\* Strike out that which is inapplicable.  
i. Duty.  
ii. Command Depot.  
iii. Employment.

Officer in charge Capt G C Hall  
Registrar, R.A.M.C.P. Hospital,  
3rd London General Hospital (Station).

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

Driscoll, M

717

Gay Sept.

February 2k., 1919

#717 Pte. Michael Driscoll

Tors Cove,

Ferryland Dist.

Dear Sir:-

Please find enclosed "Discharge  
Certificate No. 825."

Yours truly,

Paymaster & <sup>2</sup> i/c Records <sup>1</sup> Captain.

Enc'l 1.

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 717 Rank Pte Name Michael Driscoll  
 Intended place of residence Yor Cove Ferryland West  
 2. Occupation fisherman  
 Classification of soldier B Medical Category F

3. The above named man is discharged in consequence of **DEMOBILIZATION.**

**ELIGIBLE FOR FOOT DISCHARGE PAY**

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

Place .....  
 Date JAN 22 1919 Attkley Capt.  
 Commanding Discharge Depot  
 The Royal Newfoundland Regiment

## CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date St. John's 22-1-19 M. Driscoll  
 Signature of soldier  
Attkley Capt.  
 Signature of witness

## CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date Jan 21 1919 St. John's M. Driscoll  
 Signature of soldier  
Attkley Capt.  
 Signature of witness

## STATEMENT OF SERVICE

7. Enlisted for service 10. 13. 14 No of days on Military  
 Discharged from service 22. 1. 19 plus 14 days Service 1519 days

## APPROVAL OF DISCHARGE

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

Place ST. JOHN'S 14 Attkley Capt.  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment.  
 Date JAN 20 1919

## CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place St. John's, Nfld. M. Bowley, Capt.  
 Officer i/c Records  
 The Royal Newfoundland Regiment  
 Date February 5/1919

20791875

17  
31  
5  
53

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

40  
 Reg. No. 717 Rank P.K.C. Name Dunscore Michael  
 Date of Enlistment 10.12.14 Address Lons Ave District St. John's  
 Occupation Fisherman Classification for Discharge B Medical Category E  
 Recommendation S.M.B. Partly unfit Disability Rating Less than 20%  
 Passed to Demobilization Officer with following documents:—

N.F. <u>R394</u>	1	B 268		B 121	1	N.F. Med.		D.F. 1	
B 178	1	W 3494		B 122		Board 1st		" 2	
B 178a	1	D 400A	1	B 1915		do 2nd		" 3	3
B 179	2	D 400B		Form L		do 3rd		" 4	
B 179a		D 400C		Form K		do 4th		" 5	
B 179b		B 103	2	ME 2				" 6	
B 179c		B 120		M 93					

Date 20.1.19 ..... Michael Dunscore Capt.  
 O. C. Discharge Depot

### PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Michael Dunscore

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable #600
- (b) Clothing Supplied Joseph A Snowling

Date 2.1.19.....

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 570 to his home at Love Lane and Release Certificate No. 913 issued.

Date 22.1.19 ..... P. B. Dickins 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 5-2-19

Date 22-1-19 ..... W. H. M. Capt.  
Depot Paymaster.

Discharge approved for 22.1.19  
Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1	
F 178	W 3494	B 122	Board 1st	" 2	1
B 178a	D 400A	B 1915	do 2nd	" 3	2
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B 179c	B 120	M 93			

Date 22.1.19 ..... P. B. Dickins Capt.  
Demobilization Officer.

APPROVED.

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

with following additional documents.

**ELIGIBLE for POST DISCHARGE PAY**

JAN 22 1919

Date ..... R. H. M. Capt.  
O. C. Discharge Depot.

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

Date .....

To be used only for Special Reserve Recruits, and for Special Reservists entering Regular Army.



# MEDICAL HISTORY

Surname Discoll OF Christian Name Michael

Table 1.—GENERAL TABLE.

Birth place:—Parish \_\_\_\_\_ County \_\_\_\_\_

	SPECIAL RESERVE.		REGULAR ARMY.	
	on _____ day of _____ 191	at _____	on _____ day of _____ 191	at _____
Examined	on <u>18th</u> day of <u>Dec</u> 191	at <u>St. Johns</u>	on _____ day of _____ 191	at _____
Declared Age	<u>30</u> years	_____ days	_____ years	_____ days
Trade or Occupation	<u>Fisherman</u>		_____	_____
Height	<u>5</u> feet	<u>5</u> inches	_____ feet	_____ inches
Weight	_____	<u>131</u> lbs.	_____	_____ lbs.
Chest Measurement	Girth when fully expanded	<u>36</u> inches	_____	_____ inches
	Range of expansion	<u>33</u> inches	_____	_____ inches
Physical Development	_____	_____	_____	_____
Vaccination Marks	Right	Left	Right	Left
	Arm _____	_____	_____	_____
Number	_____	_____	_____	_____
When Vaccinated	<u>Never.</u>		_____	_____
Vision	R.E.—V=	<u>20/30</u>	R.E.—V=	_____
	L.E.—V=	<u>6/6</u>	L.E.—V=	_____
(a) Marks indicating congenital peculiarities or previous disease	<u>N.</u>		(a)	_____
(b) Slight defects but not sufficient to Cause Rejection	_____		(b)	_____
Approved by (Signature)	<u>Clay Macpherson</u>		_____	_____
(Rank)	<u>Capt</u>		_____	_____
	Medical Officer.		_____	Medical Officer.
Enlisted	at <u>St. Johns</u>	at _____	_____	_____
	on <u>15th</u> day of <u>Dec.</u> 191	on _____ day of _____ 191	_____	_____
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment	<u>1st New Zealand Regt.</u>	<u>717</u>	_____	_____
Transferred to	<u>New Zealand</u>		_____	_____
Became non-effective by	_____	_____	_____	_____
	on _____ day of _____ 191	on _____ day of _____ 191	_____	_____
(Signature)	_____	_____	_____	_____
(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, admission and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
8 <sup>th</sup> LONDON GENERAL HOSPITAL WANDSWORTH.	6	7	16	1	8	16	J. S. W. left leg. T.R. 1 night.	27	New lacer. J. S. W. left leg. No injury to bone or nerve.	<del>J. S. W.</del> Capt. M. H. M. T. E. Colville

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

Date	Brief Details, and Signature
J. V	
24.4.15 15.8.15	Yac. Fit for Foreign Service
2 DEC 1918	HAZELEY DOWN CAMP. <i>Recommends Repatriation</i>
	<i>MAJ</i> <i>C. J. H. HAZELEY</i> ROYAL NEWFOUNDLAND REG.
	<p><i>It is hereby certified that this soldier has been before the Standing Medical Board and has been classified as <u>B</u> for discharge on Demobilisation. Medical category <u>E</u></i></p> <p><i>15.1.19</i> Date of S.M.B.</p> <p><i>H. Bailey</i> Captain Assistant Adjutant Discharge List—Newfoundland</p>

TABLE 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
<i>St. Johns</i>	<i>Dec. 15/15</i>	<i>Feb. 5/15</i>			
<i>Troopship "Dominion"</i>	<i>Feb. 5/15</i>	<i>" 16/15"</i>			
<i>Edinburgh Castle</i>	<i>" 16/15</i>				

## Civil Re-establishment Committee



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

*To work as Fisherman.*

*A Driscoll*

Signature of Man.

Reg. No. *717*

*C. B. Wick*

Signature of the Vocational Officer or his Representative.

Place

*St. John's*

Date

*21/1/19.*

191

Medical Report on an Invalid.

Station Hazley Down Camp  
 Date Nov 28th 1918.

1. Unit Royal Newfoundland Farmer Trade }  
 2. Regimental No. 77. or Occupation }  
 3. Rank Pte  
 4. Name DRISCOLL  
 5. Age last birthday  
 6. Enlisted { on  
 at

- 7A. If with previous service in Army, state—  
 (a) Former Unit;  
 (b) Regimental No.;  
 (c) Date of Discharge;  
 (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

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

G. S. W. thigh perforating

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 on the case.

Cattarrh & Jaundice in Gallipoli, and slight wound in Lt. leg. July 1916.  
Wounded Bt in June 1918.  
attributable to carry out route marches & pack

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

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

Wounded on Active Service.

no.

no.

*Through and through  
wound Rt thigh, no bone  
or nerve injury*

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 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?

*Repetition (3).*

*Mr. A. Brown*

ROYAL NEWFOUNDLAND REG.  
Officer in medical charge of case.

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

Station \_\_\_\_\_

Date \_\_\_\_\_

\_\_\_\_\_  
Officer in charge of Hospital.

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

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

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

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

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

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

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

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

- (i.) Service during the present war;  
(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?

*Wound in right thigh Oct 1917  
2 scars healed. Has full movement  
by knee. Grounded below knee (left)  
July 1. 1916. Fracturing bone. Amputated  
Healed with good motion.*

*G.S.W.*

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

23. Is the disability permanent?

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

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

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

*less than 20%*

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

27. Do the Board recommend—

- (a) Discharge as permanently unfit, or  
(b) Change to England?

*Yes*

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

- (a) Sanatorium;  
(b) Hospital;  
(c) Convalescent home;  
(d) Asylum; or  
(e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

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

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

Station \_\_\_\_\_  
Date \_\_\_\_\_  
Signatures:—

Station \_\_\_\_\_

Date \_\_\_\_\_

Station \_\_\_\_\_

Date \_\_\_\_\_



*H. S. ...*  
\_\_\_\_\_  
President.

*W. ...*  
*H. ...*  
\_\_\_\_\_  
Members.

*Clay ...*  
\_\_\_\_\_  
Administrative Medical Officer, Major



## 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 *Driscoll Michael*

Regiment from which discharged *Royal Newfoundland*

Regimental number *117*

Intended address *Sore Cove Ferryland*

Height on discharge *5* Feet

Color of hair on discharge *Brown*

Complexion *Light*

Color of eyes *Grey*

Descriptive Marks *—*

Figure on discharge *—*

Christian name of Father *—*

Christian name of Mother *Margaret*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Sore Cove 17-11-1867*

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

*Michael Driscoll*

(Rank)

Date

*7-1-19*

I certify that the above named soldier signed the foregoing declaration in my presence, and that the above description and details are, to the best of my knowledge correct.

Medical Officer i/c Hospital.  
Unit, or Command Depot.

Station

Date

LAST PAY CERTIFICATE

N.F.P./94

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 26/5/17.

Regtl No. 717, Rank Pte. Name Driscoll M Unit ROYAL NEWFOUNDLAND REGT. who was repatriated to Newfoundland on 11/12/18. Authority \_\_\_\_\_ Cause \_\_\_\_\_ Authority \_\_\_\_\_

DR.

STATEMENT OF ACCOUNT

STATEMENT OF ACCOUNT

PERIOD:	PARTICULARS	£ s d				PARTICULARS	£ s d								
		£	s	d	CR.		£	s	d						
From 23/11/18 To 20/12/18.	Balance Dr. from					Balance Cr. from									
	Allotment 19 days @ 60¢	11	40	2	6	Pay 19 days @ \$ 1.00	19	00							
	Cash Payments:					Field Allowance 19 days @ \$ 10/100	1	90							
	1st pay				12	6									
	2nd do.			1	4	7	Other Allowances days @ \$	20	90	4	5	11			
	Other Debits:					Other Credits:									
	B D ager														
	mess stopp														
	Total Debits			4	5	11	Total Credits			4	5	11			
	Balance due by Paymaster						Balance due to Paymaster								

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

(Place) HAZELEY DOWN CAMP. (Date) Dec 11<sup>th</sup> 1918.

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

Chief Paymaster & Officer i/c Records.

**Casualty Form—Active Service.**

Regiment or Corps Newfoundland

Regimental No. 717 Rank Pte Name M. Driscoll

Enlisted (a) 15/12/14 Terms of Service (a) one year Service reckons from (a) \_\_\_\_\_

Date of promotion to } \_\_\_\_\_ Date of appointment } \_\_\_\_\_ Numerical position on }  
 present rank } to lance rank } roll of N.C.Os. }

Extended \_\_\_\_\_ Re-engaged 15/8/15 Qualification (b) \_\_\_\_\_

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked St. John's, NFLD.		3/2/15.	
		Disembarked Alexandria		1/9/15.	
		Embarked for Gallipoli		13/9/15.	
13/11/15.	24 C.C.S.	Transferred Jaundice	H.S. "Dover Castle"	12/11/15.	C 4724.
11/12/15.	"Dover Castle"	"	"Kildonan Castle"	12/11/15.	B 717
	"Kildonan Castle"	Invalidated to England & Admitted	Royal Victoria Hosp., Netley	27/11/15.	H 3530. 9

*[Signature]*  
 Captain  
 for Major,  
 Officer i/c Records 11 & 12 Dists.,  
 3rd. Echelon, Base, Egypt.



(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered. (P.T.O.)  
 (b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.



## Casualty Form—Active Service.

238

Regiment or Corps 1st NewfoundlandRegimental No. 717 Rank Pte Name M. AriscollEnlisted (a) 15-12-14 Terms of Service (a) Duration Service reckons from (a) 15-12-14Date of promotion } \_\_\_\_\_ Date of appointment } \_\_\_\_\_ Numerical position on } \_\_\_\_\_  
to present rank } to lance rank } roll of N.C.Os. }

Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) \_\_\_\_\_

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embark'd Southampton		28.2.16	
		Disembark'd ROUEN		30.3.16	
	<u>07 Feb</u>	<u>ad. Gsworhey</u>	<u>Guava</u>	<u>1.7.16</u>	<u>E.D. 11968</u>
	<u>24 Sept</u>	<u>ad Gsworhey</u>	<u>Staples</u>	<u>2.7.16</u>	<u>A.A. 529</u>
	<u>Hospital Ship</u>	<u>Transferred to England</u>		<u>5.7.16</u>	<u>W3083</u> <u>Archer</u> CAPTAIN. FOR THE INFANTRY RECORDS G.H.Q. 3RD ECHELON.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

To be used for recruits enlisting direct into the Regular Army only.  
Army Form B. 178<sup>A</sup> to be used for Special Reserve recruits and  
Special Reservists enlisting into the Regular Army.

# MEDICAL HISTORY of *M.*

*T25*

Surname *Driscoll* Christian Name \_\_\_\_\_

## TABLE I.—GENERAL TABLE.

Birthplace ... Parish \_\_\_\_\_ County \_\_\_\_\_

Examined ... { on \_\_\_\_\_ day of \_\_\_\_\_ 191 .  
at \_\_\_\_\_

Declared Age ... years \_\_\_\_\_ days.

Trade or Occupation ... \_\_\_\_\_

Height ... feet, \_\_\_\_\_ inches.

Weight ... lbs. \_\_\_\_\_

Chest Measurement { Girth when fully Expanded. \_\_\_\_\_ inches.  
Range of Expansion \_\_\_\_\_ inches.

Physical Development ... \_\_\_\_\_

Vaccination Marks { Arm ... \_\_\_\_\_ Right \_\_\_\_\_ Left \_\_\_\_\_  
Number \_\_\_\_\_

When Vaccinated ... \_\_\_\_\_

Vision ... { R.E.—V= \_\_\_\_\_  
L.E.—V= \_\_\_\_\_

(a) Marks indicating congenital peculiarities or previous disease ... { (a) \_\_\_\_\_  
\_\_\_\_\_

(b) Slight defects but not sufficient to cause rejection ... { (b) \_\_\_\_\_  
\_\_\_\_\_

Approved by (Signature) \_\_\_\_\_  
(Rank) \_\_\_\_\_ Medical Officer.

Enlisted ... { at \_\_\_\_\_  
on \_\_\_\_\_ day of \_\_\_\_\_ 191 .

Corps.	Regtl. No.
<i>Newfoundland</i>	<i>717</i>
<i>Rat.</i>	

Transferred to ... \_\_\_\_\_

Became non-effective by \_\_\_\_\_  
on \_\_\_\_\_ day of \_\_\_\_\_ 191 .

(Signature) *M.*  
(Rank) \_\_\_\_\_

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number of 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 must be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer.
	Day	Month	Year	Day	Month	Year				
<i>Nelley</i>	<i>27</i>	<i>11</i>	<i>15</i>	<i>18</i>	<i>1</i>	<i>16</i>	<i>Catastrophic jaundice</i>	<i>53</i>	<i>At Suvla Bay complained of pains over liver, had vomiting, white stools and heavy urine. After 3 weeks was sent to Nelley. He was improved steadily. Recommended for discharge (h) on 10 days furlough</i>	<i>J. A. M. C. M. C.</i> <i>14-1-16</i>
<b>3<sup>rd</sup> LONDON GENERAL HOSPITAL WANDSWORTH.</b>	<i>6</i>	<i>7</i>	<i>16</i>	<i>1</i>	<i>8</i>	<i>16</i>	<i>S.I.W. left by 18.1.16</i>	<i>27</i>	<i>From France. Wound healed. for discharge.</i>	<i>J. H. M. C. M. C.</i> <i>14-1-16</i>
<b>3<sup>rd</sup> LONDON GENERAL HOSPITAL WANDSWORTH.</b>	<i>12</i>	<i>10</i>	<i>17</i>	<i>-2</i>	<i>NOV</i>	<i>1917</i>	<i>G.S.W. R. thigh perforating</i>	<i>21</i>	<i>Wounded in France 9.10.17 no news or bone injury.</i>	<i>G. C. Hall</i> <i>Capt. med</i>
<i>Ashford V.A.D.</i>	<i>2</i>	<i>11</i>	<i>17</i>	<i>21</i>	<i>11</i>	<i>17</i>	<i>do</i>	<i>19</i>	<i>Do V.A.D. hosp Ashford To Shorncliffe</i>	<i>E. C. Hall</i> <i>AM B. M. C.</i>
<i>Military Hospital, Shorncliffe.</i>	<i>21</i>	<i>11</i>	<i>17</i>	<i>21</i>	<i>11</i>	<i>17</i>	<i>do</i>	<i>x</i>	<i>To 10 days Clean etc</i>	<i>E. C. Hall</i> <i>AM B. M. C.</i>
<i>R. G. Depot Ripon</i>	<i>1</i>	<i>12</i>	<i>17</i>	<i>22</i>	<i>1</i>	<i>18</i>	<i>do</i>	<i>53</i>	<i>Lat. A III</i>	<i>E. C. Hall</i> <i>AM B. M. C.</i>



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 question are not applicable, the words "NOT APPLICABLE" must be written out.

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

Christian name..... *Michael* ..... 2. Surname..... *Onsiver* .....

3. Rank..... *Private* ..... 4. Regtl. No. .... *717* .....

5. Address in full to which future payments of gratuity are to ~~be~~ be forwarded.....  
*Lors Cove*

..... *St. John's* .....

6. Date of enlistment in the Regiment..... *Dec. 15<sup>th</sup> 1914* .....

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..... *not applicable* .....

9. Address in full of such dependent..... *not applicable* .....

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *not applicable*

11. Were you on active service only in Nfld. If so, give dates, and particulars of such service..... *No. I went overseas 1915 and*

..... *returned here Dec. 1918* .....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *four years 53 days* .....

13. Have you had more than one enlistment? If so, give particulars of discharge and re-enlistments, and under what regimental numbers.....

ho

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.....

ho

15. Have you been issued with a War Service Badge?.....

ho

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

ho

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.....

ho

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

ho

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

not applicable

19. Are you now serving in the Regt.? ..... If not give:-(a) Date of discharge.....

ho

Feb. 22<sup>nd</sup> 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.....

Gallipoli 1915 France 1916 + 1917

ho

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.....

not applicable

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: *A. Driscoll*  
 Place of Residence: *Long Grove*  
 Declared before me at: *St. John's*  
 This *31<sup>st</sup>* day of *March* 19*18*

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

POST DISCHARGE PAY.			War Service Gratuity	Net amount due
Date paid	Paid Soldier	Paid Dependent		
.....	.....	.....	<i>6 mos.</i>	<i>420.00</i>
.....	.....	.....	.....	.....
Certified Correct.			Paymaster.	

## Casualty Form—Active Service.

Regiment or Corps NewfoundlandRegimental No. 717 Rank Pte Name M. DriscollEnlisted (a) 15/12/14 Terms of Service (a) One year Service reckons from (a) \_\_\_\_\_Date of promotion to } \_\_\_\_\_ Date of appointment } \_\_\_\_\_ Numerical position on }  
present rank } to lance rank } roll of N.C.Os. }Extended \_\_\_\_\_ Re-engaged 15/8/15. Qualification (b) \_\_\_\_\_

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked St. John's, Nfld		3/2/15	
		Disembarked Alexandria		1/9/15	
		Embarked for Gallipoli		13/9/15	
13/11/15	24 G.C.S.	Transferred Jaundice	H.S. "Dover Castle"	12/11/15	C 4724
11/12/15	"Dover Castle"	"	"Kildonan Castle"	12/11/15	B 717
	"Kildonan Castle"	Invalided to England & Admitted	Royal Victoria Hosp. Netley	27/11/15	H 3530



(sgd) W. L. S. Jackson  
 Captain  
 for Major  
 Officer i/c records 11 & 12 Dists.,  
 3rd Echelon, Base, Egypt.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) e.g., Signaller, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.



ORIGINAL.

LAST PAY CERTIFICATE

LAST PAY P. 9A RT I E

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 28/5/17.

Regtl No. 717. Rank Pte. Name Driscoll. Regtl No Unit ROYAL NEWFOUNDLAND REGT Saw who was repatriated Unit to Newfoundland on 11/12/18. Authority to Cause Authority

STATEMENT OF ACCOUNT

STATEMENT OF ACCOUNT

DR.

CR.

Table with columns: PARTICULARS, £ s d, PARTICULARS, £ s d. Rows include: Balance Dr. from, Allotment 19 days @ 60¢, Cash Payments (1st pay, 2nd do.), Other Debits (B. Dangan, Miss Stopp), Total Debits, Balance due by Paymaster. Credit side includes: Balance Cr. from, Pay 14 days @ \$1.00, Field Alice 14 days @ \$10/100, Other Allices, Other Credits, Total Credits, Balance due to Paymaster.

8/12/18 to 31/11/18

CHECKED. S.P. 18/12/18

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

HAZELE DOWN CAMP. Dec 11th 1918. Made up/Checked in accordance with information received in the Pay & Record Office London on 19/10/18 in the Pay and is therefore subject to amendment if and as may be found necessary subject to amendment if and as may be found necessary. Chief Paymaster & Officer i/c Records.



January 7th, 6.

Mrs. Margaret Driscoll,  
Tor's Cove.

Dear Madam,-

I enclose cheque for \$ 22.00 an amount which we  
have been requested by the Paymaster at London to pay you,  
on account of NO. 717 Pte. Driscoll.

Yours truly,



Deputy Paymaster.



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

June 18th., 1921. 1917.

The accompanying King's Certificate, on his discharge,

(No. 286), is forwarded herewith to


Private Michael Driscoll

in respect of his service as No. 717 Rank Pvts.

Name Michael Driscoll Corps Royal Nfld. Regt.

Receipt of the same should be acknowledged hereon.

Received King's Certificate

Signature M. C. Driscoll 

Date Sept 20th

Address Lors Cove

1891

The accompanying Victoria Medal under British War Medal

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

REGIMENT

1891

Address

1891

Aug. 25 1921.

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

Pte. Driscoll (Michael)

in respect of his service as No. 717 Rank Pte.

Name Mcl. Driscoll Royal Nfld. Regt.  
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received M. C. Driscoll

Signature M. C. Driscoll

Date Sept 20<sup>th</sup>

Address Lors Cove

[P.T.O.]



Receipt for Army Book 64

No. .... 717 .... Name. *Driscoll* .....

To Certify that I have received the <sup>31</sup>AB 64 of the above  
named soldier.

Name *Michael Driscoll* .....

Date *Aug 2 1964* .....

Place *Gross Point* .....

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

RECEIPT.

C.R. 717

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.

NO. *717* ..... NAME. *At Driscoll* .....

DATE. *1* .....

PLACE *Lons Cove* .....

RECEIPT.

C.R.

717

I hereby certify that I have received the 1914-1915

STAR.

No 717 Name A. Driscoll

Witness A Driscoll

Date December 10th 19

Place Lo's Cove

m. B.

C.R. 717

RECEIPT FOR ISSUE OF  
RIBAND OF 1914-15 Star.

---

I certify that I have received an issue  
of 3 inches of Riband of 1914-15 Star.

Name *W. Driscoll*.....

Date *27/3/19*.....

Place *St John's*.....

Please sign, and return to Dept. of MILITI A.

CIRCULAR LETTER

St. John's,

March 15th 1919.

Riband of 1914-15 Star.

Please complete the following claim and return it to this Department. If possible, call at Room No. 3 for your issue.

*W. J. Readell*

Lieut. Colonel.

Chief Staff Officer.

CLAIM FOR ISSUE OF RIBAND

of 1914-15 STAR.

Department of Militia,

St. John's.

I hereby make claim for issue of Riband of 1914-15 Star.

I certify that I am entitled to this issue,

having served on\* *Gallipoli*  
from ~~Aug~~ *Sept 1914* 1915 to *Nov 27* 1915.

(Date).....(NO) *717*..(Rank) *Lt.* (Name) *W. J. Readell*  
(Place) *St. John's*.....

\*Fill in theatre of War where you served in Gallipoli, Mudros, Lemnos, or Western Egyptian Frontier.

C.R. 717

Extract from Daily Orders part II, Depot St. John's dated Feb. 7/1919 .

The discharge of the undernoted on demobilization have been CONFIRMED  
by Officer i/c Records on 5-2-19.

#717 Pte. Ml. Driscoll.

C.R. 717

Extract from Daily Orders part II,  
Depot St. John's dated Jan. 24th., 1919.

The discharge of the undernoted on  
Demobilization have been APPROVED on  
demobilization on 22-1-19.

717 Pte. ~~J. Driscoll~~

M. Driscoll.

C.R. 717

Extract from Medical Board held Jan. 15th 1919.

717 Pte. M. O'Driscoll.

Recommended discharge as permanently Unfit.



C.R. 717

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

---

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

~~#111~~<sup>717</sup> Pte. M. Driscoll.

BC.

C.R. 717

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

---

717  
#780 Pte. M. Driscoll.

# NEWFOUNDLAND POSTAL TELEGRAPHS.



## Cable Connection with all the World

### All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

**(NOT TRANSMITTED)**

Signature of Sender \_\_\_\_\_ Address \_\_\_\_\_

Line Number	Rcd	By	Sent	by	Check

Dated October 15, 1917.

To Mr. John O'Driscoll,  
Tor's Cove.

Regret to inform you that Record Office  
London, officially reports **No. 717, Private**  
**Michael O'Driscoll, is at Wandsworth suffering gunshot**  
**wound in the thigh.**

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

~~JOHN R. BENNETT~~, R.A. SQUIRES  
Colonial Secretary.

**FOR TYPEWRITER**

C.R.

717

Extract from Daily Orders Part 11 Unit The Royal Wfld.  
Regt. Station G.H.Q. 3rd Echelon 27/10/17.

Invalided to England.

717 Pte. M. Driscoll

11-10-17.

C.R. 717

Extract of Nominal Roll Draft (All Ranks) to 1st  
Bn. B.E.F. Embarked Folkestone 8

717 Pte. M. Driscoll.

5-8-17.

C.R. 717

Extract of Casualties received from Pay & Record Office  
London, dated August 2<sup>nd</sup> 1916.

#717 Pte.M. Driscoll. ✓

Discharged from Hospital, granted furlough from 1/8/16.  
to 10/8/16. Fit for Light Duty and likely to be fit for  
service overseas within 3 months.

C.R. 717

Ex tract of Casualties received from Pay & Record Office,  
London, dated July 31, 1916.

(extract from Army Form B 213, from O.C. 1st. Wfld. Regt.  
dated 11/7/16.)

#717 Pte. M. Driscoll. ✓

Wounded in Action 1/7/16.

# NEWFOUNDLAND POSTAL TELEGRAPHS.



## Cable Connection with all the World

### All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission ; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

**(NOT TRANSMITTED)**

Signature of Sender \_\_\_\_\_ Address \_\_\_\_\_

Line Number	Rcd	By	Sent	by	Check

Dated 10th July, 1916.

To Mr. John Driscoll,  
Tor's Cove Hill.

Regret to inform you No. 717 Private Michael Driscoll reported  
Wandsworth Hospital wounded Left Leg.

J.R.BENNETT,  
Colonial Secretary.



C.R. 717

Extract of Casualties received from Pay & Record Office,  
London, dated July 8, 1916.

#717 Pte. M. Driscoll. ✓

Gunshot wound Left Leg.

Admitted Sri London General Hospital, Wandsworth, S.W.,  
July 6th, 1916.

C.R. 111

Extract of Casualties received from Pay & Record  
Office, London. dated July 8, 1916.

#717 Pte. M. Driscoll. ✓

Gunshot wound left leg slight.

Admitted 24th General Hospital, Etaples, 2nd July, 1916.

C.R. 717

Extract from War Office List No. H.A. 529

#717 Pte. M. Driscoll

*S.S.W. Leg. Sgt*

ADMITTED 24th., Gen. Hospital 2nd., July 1916.

C.R. 717

Extract from Nominal Roll 3rd Draft to D.H.F. arrived  
29. A.B.D. 30-3-16 Joined Battalion 15-4-16.

#717 Pte.M.Driscoll.

C.R. 717

Extract of Nominal Roll Draft ( All Ranks) to 1st Bn.,  
B.E.F. Embarked Southampton. 28-3-16.

717 Pte. M. Driscoll.

FEB 18 1916

Dear Sir,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 717, Private Michael Driscoll, who was reported at Netley on November 27th suffering from jaundice, was fit for light duty Class B, and granted furlough on January 18th. This information has been received by mail.

Yours faithfully,

Colonial Secretary.

Mr. Jos. Driscoll,  
Ters Cove Hill.

C.R. 717

Extract of Casualty List received from Pay and Record Office London

Dated Jan. 28th. 1916.

The following Man has reported his arrival from the 1st. Battn., and  
is attached to "E" Company.

717 Pte. M. Driscoll ✓

1st. Newfoundland Regiment.

C.R. 717

Copy of Telegram from Capt. Finewell to Governor  
dated December 26, 1915.

In accordance with request made by No. 717  
Driscoll pay to Margaret Driscoll, Tor's Cove,  
Twenty two dollars.



C.R. 717

Copy of Cablegram to Governor St. John's Nfld.  
from P. & R. O. 4th. December 1915.

717, Driscoll. ✓

Admitted Hosp. November 27th. Netley, Jaundice.

✓  
D (10)

COPY OF TELEGRAM.

Dated

December 4, 1915.

Mr. John Driscoll,  
Tors Cove Hill.

Regret to inform you that the Record Office,  
London, officially reports No. 717, Private Michael Driscoll,  
was admitted to Hospital, Netley, England, on November  
twentyseven with Jaundice.

Upon receipt of further information I shall immedi-  
ately wire you and trust that the next report will  
be of his convalescence.

J. R. BENNETT,

Colonial Secretary.

C.R. 717

Extract of Casualty received from Pay & Record Office,  
London, dated Dec. 2nd. 1915.

717 Pte. M. Driscoll

N. Y. D.

Adm. Royal Victoria H. Netley 27. Nov. 1916.

C.R. 512

Extract of Sick and Wounded N.C.Os. and Men of the **Mediterranean**  
**Expeditionary Force**-----List No: H. 3550

717 Pte. M. Driscoll

1st. Nfld. Regt....Jaundice Sev....Adm. 54 C.C.S. Sulva 12th. November '15.  
Trans. ex 54 C.C.S. Sulva, 12th. November 1915.

C.R. 717

Extract from Nominal Roll Co. 1st. Bn. Nfld. Regt.

Embarked, at Devenport for Active Service 20-8-15

Disembarked Alexandria, 31-8-15, Proceeded to Abbassia,  
Cairo, same date, Embarked ~~for~~ Alexandria for Gallipoli  
13-9-15.

717 Pte. M. Driscoll.

CR 717

Extract from Nominal Roll Embarked St. John's, Per S.S.  
" Dominion" "C" Company Feb. 2, 1915.

717 Pte. Driscoll M.

C.R. 717

Michael Driscoll. was attested for General Service  
with the NEWFOUNDLAND REGIMENT on ..... Dec 15th/14..

Regimental No. 717. was allotted to Pte Michael Driscoll.

AUTHORITY:

Record Officer

Dept. of Militia,

March 25th. 1919.

**Casualty Form—Active Service.**



Regiment or Corps *Newfoundland*  
 Rank *Pte* Surname *Miscove* Christian Name *Michael*  
 Religion *R.C.* Age on Enlistment *30* years *—* months  
 Enlisted (a) *15/12/14* Terms of Service (a) *Duration War* Service reckons from (a) *—*  
 Date of promotion to present rank *—* Date of appointment to lance rank *—*  
 Extended { *—* } Re-engaged { *—* } Qualification (b) *—*  
 or Corps Trade and Rate *—*  
 Occupation *Fisherman* Signature of Officer *Thuracness Thom*

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
			Embarked <i>Shampton</i>	<i>5.8.17</i>	
			Disembarked... <i>Lower</i>	<i>7.8.17</i>	
			Joined Battalion	<i>28 AUG 1917</i>	<i>B 213</i>
	<i>of C Unit</i>	<i>Wounded in Action</i>		<i>9 OCT 1917</i>	<i>B 213 12 OCT 1917</i>
<i>9-10-17</i>	<i>894p</i>	<i>Ad. Chaplain High train</i>	<i>Clydes</i>	<i>9-10-17</i>	<i>651433</i>
	<i>"Hospital ship"</i>	<i>Invalided to England</i>	<i>56 Leestp</i>	<i>11/10/17</i>	<i>W 3083</i>
		<i>G.S.W.R. High.</i>	<i>Etaples</i>		
			<i>J. Healey</i>		
					<i>2nd Lt</i>
					<i>MAJ</i>
					<i>Infantry Section</i>
					<i>G.H.Q. 3rd Echelon</i>

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) Signaller, Shoeing-Smith, &c.  
 (6228) W. 13863/51477 2,400,000 1/17 McA & W Ltd Forms B.103/4 (E. 886) **(P.T.O.)**





# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 717 Rank PLC Name Driscoll Michael  
 Date of Enlistment 10.12.14 Address Low Cove District Newfoundland  
 Occupation Fisherman Classification for Discharge B Medical Category E  
 Recommendation S.M.B. Benefit profit Disability Rating Less than 20%  
 Passed to Demobilization Officer with following documents:—

N.F. P 32.94	1	B 268	1	B 121	1	N.F. Med	D.F. 1	
B 178	1	W 3494		B 122		Board 1st	" 2	
B 178a	1	D 400A	1	B 1915		do 2nd	" 3	3
B 179	2	D 400B		Form L		do 3rd	" 4	
B 179a		D 400C		Form K		do 4th	" 5	
B 179b		B 103	2	ME 2			" 6	
B 179c		B 120		M 93				

Date 20.1.19 Monney Capt  
 O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

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

Driscoll

Particulars passed to Vocational Officer for information and action.

Date.....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$6.00

(b) Clothing Supplied Joseph A Snow

Date 21-1-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 570 to his home at Low Carr and Release Certificate No. 913 issued.

Date 22.1.19 C. Dicks 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 5-2-19

Date 22-1-19 W. M. M. Capt.  
Depot Paymaster.

Discharge approved for 22.1.19

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	1	B 268	B 121	1	N.F. Med.	D.F. 1	
B 178	1	W 3494	B 122		Board 1st.	" 2	1
B 178a	1	D 400A	B 1915		do 2nd.	" 3	2
B 179	1	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 22.1.19 C. Dicks Capt.  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—  
Officer in Charge Records.  
Board of Pension Commissioners.

with following additional documents.

**ELIGIBLE for POST DISCHARGE PAY**

JAN 22 1919

Date ..... R. H. ... Capt.  
O. C. Discharge Depot.

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

Date Jan 25 1919 L. S. ...