



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 2510 Name Daniel Eastman Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---------------------------------------|
| 1. What is your name? | 1. <u>Daniel Eastman</u> |
| 2. What is your full Address? | 2. <u>Janbo</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>21</u> Years <u>0</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Lumberman</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... | 10. <u>None</u> Name
<u></u> Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes</u> |

FOR THE DURATION OF THE WAR

I, Daniel Eastman do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

2 Apr 13/16 Daniel Eastman SIGNATURE OF RECRUIT.
R. Dunstbridge Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 14 day of Apr 1916

Signature of Attesting Officer R. Dunstbridge 2nd Lieut.

†CERTIFICATE OF APPROVING OFFICER.

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

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

Date.....1916 } Approving Officer.
Place.....

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

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



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 9510 Name Daniel Eastman Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>Daniel Eastman</u> |
| 2. What is your full Address? | 2. <u>Jambo</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>21</u> Years <u>0</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Lumberman</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?..... | 10. { Name |
| | Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes</u> |

I, Daniel Eastman do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

2 Apr 13/16 Daniel Eastman SIGNATURE OF RECRUIT.

..... H. D. Bridges Signature of Witness.

Daniel Eastman OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at on this day of 1916

Signature of Attesting Officer

†CERTIFICATE OF APPROVING OFFICER.

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

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

Date 1916

Place

..... } Approving Officer.

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

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



This Form is to be used in connection with Pamph. M. E. (1)
N. F. 1915

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of Daniel Eastman

aged 21

conducted at Co. 2/B

Date: Apr 13/16

Recruiting Officer:

NO OF TEST

FINDING

- 1 No
- 2 No
- 3 No
- 4 No
- 5 No
- 6 No
- 7 yes.
- 8 yes.
- 9 No
- 10 No
- 11 No
- 12 No
- 13 No
- 14 No
- 15 No
- 16 No
- 17 No
- 18 No
- 19 6/6 Best
- 20 No
- 21 No
- 22 No
- 23 No
- 24 No
- 25 No
- 26 No
- 27 No
- 28 No
- 29 No
- 30 No
- 31 No
- 32 No
- 33 No
- 34 5-4-4
- 35 115-4
- 36 500 ^{22 32/34} 4 ears
- 37 uncle - Edward Eastman Sanbo B.B.
- 38 none
- 39 none

25/10

Tit

Signature of Medical Examiner:

William J. Roberts

C.R. 2510

Extract of DAILY ORDERS PART II ROYAL NEWFOUNDLAND REGIMENT
IN FRANCE DATED 21/11/18.

TO ENGLAND.

#2510 Pte. D. Eastman.

25/10/18.

C.R. 2510

Extract from Daily Orders part II, Depot
St. John's dated May 6th., 1919.

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

2510 Pte. Daniel Eastman.

C.R. 2510

Extract from Casualties received from Pay & Records
Office, London, Mar.7th,1919

The u/m man, ex 3rd L.G.H. was granted extension
of leave to noon 7-3-19 to report to Depot 2/Bn. for
repatriation

2510 Pte. D.Eastman

C.R. 2510

Extract from Casualties received from Pay & Records
Office, London, Mar. 7th, 1919

The u/m man, ex 3rd L.G.H. was granted extension
of leave to noon 7-3-19 to report to Depot 2/Bn. for
repatriation

2510 Pte. D. Eastman



2510

Extract from Despatch Roll of Field. Regt. (Draft No. 12)
From 2nd Bn. Depot, to 1st Bn. B.C.F. Embarked Southampton
11-10-16.

2510 Pte. D. Eastman.

C.R. 2510

Extract of Casualties from Pay & Record Office, London.

Dated March 14th/19.

The undermentioned ex 3rd London G. Hospital S.W. , 4/3/19 reported at the Pay & Record Office, and was granted furlough to 6/3/19. He is marked as unfit for further ~~at~~ service and is ~~at~~ to be repatriated forthwith to Newfoundland.

#2510, Pte. D. Eastman.

AUTHORITY:

A. fs. ~~W.3201~~ W.3201, from 3rd L.G.H.

C.R. 2510

Extract from Daily Orders part II, Depot St. John's dated April 23, 1919

The discharge of the undernoted on demobilization has been APPROVED
by O. C. Discharge Depot on 21-4-19.

#2510 Pte. Danl. Eastman.

C.R. 7510

Extract of Preliminary Report of a Medical Board held on
Thursday Afternoon April 10th/19. The following was the
finding.

Recommended discharge from the Army.

2510, Pte. D. Eastman.

C.R. 2510

Extract of Orders by Lt. Col. B.J. Barton, D.S.O.
Commanding 2nd Battalion Royal Newfoundland Regiment.
8/3/19.

The Following having reported back from the 1st Battn.
is taken on the strength and posted to "H" Company.

#2510 Pte. Eastman.

7/3/19.

C.R. 2510

Extract from Daily Orders Part 11 Unit The Royal
WFLA. Regt. St. John's, Mar. 25th, 1919

The following Officers, Non-Commissioned Officers,
Men returned from Overseas and reported at Depot
on 24-3-19.

2510 Pte. D. Eastmen.

C.R. 7510

Extract of Telegram from Syn/, London, to
Military.

March 15th/19.

Following has embarked "Baltic" Liverpool
for Halifax.

March 18th.

Following may require special treatment.

G.S.W. Thigh Old Fracture

#2510 Eastman.

C.R. 75 10

Extract of telegram from Syn., London, to
Military dated March 15th/19.

Following has embarked "Baltic" Liverpool
for Halifax.

March 12th.

under A. F.B. 179.

#2510 Eastman.

C.R. 2570

Extract from Telegram ~~XXXX~~ ^{to} Synoptical, London dated Nov. 30/1918.

~~22.~~
70

ALLOTMENT OF 2510 EASTMAN DISCONTINUED OCTOBER
31st. BOTH PARENTS DEAD.

C.R. 2510

Nov. 6th, 18.

Mr. Edward Eastman,
Gambo, B.B.

Dear Sir:-

I beg to inform you that additional information has to-day been received by this Department through the Visiting Committee of the Newfoundland War Contingent Association, to the effect that No. 2510, Daniel *Eastman*, is now progressing favourably.

Yours faithfully,

Lieut. Col.,
Chief Staff Officer.

C.R. 2510

Extract from War Office List No. G. 1733. dated 1. 11. 19

#2510 Pte. D. Eastman.

Wounded 10. 11. 18.

NO.

Counter No. 2510

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 Dept of Militia.

Line Number	Recd	By	Sent	by	Check

Oct. 29th, 1918

Dated

To

Edward Eastman, Gambo B.B.

beg
Request to inform you that Record Office, London,
officially reports No. 2510, Private Daniel Eastman
not at 3rd London General Hospital, Wandsworth

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

J.R. Bennett

Minister of Militia.

Chge Dpt of Militia-TYPEWRITER

C.R. 2510

Extract from Nominal Roll of Sick and Wounded from the France
Expeditionary Force to the 3rd., London General Hospital on
25/10/18.

#2510 Pte. D. Eastman.

G.S.W. LEG FRACTURED.

NEWFOUNDLAND POSTAL TELEGRAPHS.

Counter No. _____

C.R. 2510



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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 Dept. _____

Line Number	Rcd	By	Sent	by	Check
	Oct 23rd, 1918				

Dated

To **Edward Eastman, Gambo, B.B.**

Regret to inform you that Record Office, London,
officially reports **No. 2510, Private Daniel
Eastman at 7th Stationary Hospital Boulogne Oct 15th
suffering from G.S.W. leg fractured fibula**

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

J.R. Bennett

Chge Dep t of Militia

Minister of Militia.

FOR TYPEWRITER



C.R. 2510

SICK AND WOUNDED N.C.O's and MEN OF THE EXPEDITIONARY FORCE - FRANCE

NO. 1 RECORD OFFICE **EXETER**

LIST NO. H.A. 30335

27486 Pte Lane A.
71181 Pte Neall H.
205090 W/C Smith H.P.

14 Hants.
1 D.O.L.I.5 Div.
15 Hants R.

Dis.to Duty 15 Con.Dep.Class B.11 ex 15 Con.Dep.Trouville 15 October/18
Dis.to Base Dep.Havre Class A ex 15 Con.Dep.Trouville 16 October/18.
GSW Arm L.Sev. . . . Adm.7 Sty.H.Boulogne 15 October/18.



NO. TWO RECORD OFFICE **WARLEY**

LIST NO. H.A. 30335

45521 Pte Dunn W.

1 Bedfords

Dis.to Base Dep.Havre Class A ex 15 Con.Dep.Trouville 16 October/18.

2028

MILITARY POLICE

LIST NO. H.A. 30335

47722 Pte Pike W.H.

MGC att MFP

1CT L.Axilla . . .

Dis.to Duty ex 7 Sty.H.Boulogne 15 October/18.

NEWFOUNDLAND CONTINGENT

LIST NO. H.A. 30335

2510 Pte Eastman D.

1 R.Newfoundlands GSW Leg Frac.Fid. .Adm.7 Sty.H.Boulogne 15 October/18.



CR 2510

Extract from Nominal Roll B.E.F. Embarked "Southampton"

6-4-18-~~18~~

2510 Pte, Eastman, D.

C.R. 2510

Extract from Casualties received from P. & R. Office London,
Mar. 9th, 1918.

At. Wandsworth.

2510 Eastman.

Gunshot wound left Arm.

C.R. 2510

Extract of casualties received from pay & Record
Office, London, dated January 7th 1918.

O.C. Military 4th London General Hospital, S.E.5.
reports:-

#2510 Pte. D. Sadman.

Furlough from 8/1/18 to 17/1/18. Fit for 11 Command Depot.

C.R. 2510

Extract from Daily Orders Part 11, UNIT: The Royal Newfoundland
Regiment, dated 29th. Dec. 1917.

STRENGTH.

2510 Pte. D. Eastman

Invalided to the U.K. 24.11.17. Wded.

C.R. 2570

Extract of Casualty received from Pa & Record
Office, London, dated December 4, 1917.

#2510 Pte. D. Eastman. ✓

Wounded 20/11/17.

WFOUNDLAND 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.

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

(NOT TRANSMITTED)

Signature of Sender

Daniel Eastman
For J. E. Squires

Address

Line Number	Rcd	By	Sent	by	Check

Dated November 27, 1917.

To Mr. Edward Eastman,

Gambo.

Regret to inform you that Record Office,

London, officially reports No. 2510, Private Daniel Eastman, has been admitted to the Fourth London General Hospital, suffering from slight gunshot wound in the left arm.

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

J. E. SQUIRES, R.A. SQUIRES

Colonial Secretary.

C.R. 2510

NO. 2510 PRIVATE DANIEL EASTMAN.

EXTRACT OF CASUALTY LIST RECEIVED FROM THE PAY AND RECORD
OFFICE LONDON DATED NOVEMBER 27th, 1917.

"AT 4TH LONDON GENERAL HOSPITAL G.S.W. LEFT ARM SLIGHT."

✓

C.R. 2510

Extract from Nominal Roll of Draft No.24; from 2/1st Newfoundland Regiment
Newton on Apr to 1/1st Newfoundland Regiment B.E.F. 1/6/17.

2510 Pte.D.Eastman.

MP.

C.R. 2510

NEWFOUNDLAND CONTINGENT.

THE FOLLOWING man has been transferred from the third London Military Hospital, Wandsworth, to the Holborn Military Hospital Mitchman, 22/3/17

2510 Pte D. Eastman.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

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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 March, 1917.

To

Mr. Ed. Eastman,

Gambo.

Regret to inform you that Record Office,

London, officially reports No. 2510 Private Daniel

Eastman admitted Wandsworth Gunshot Wound Left Arm.

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

J. R. BENNETT,

Colonial Secretary.

FOR TYPEWRITER

C.R. 2510

Extract from General Roll embarked St. John's for overseas,
per S.S. "Sicilian" July 19, 1916.

2510 Pte. Eastman D.

C.R. 2510

Daniel Eastman was attested for General Service with
the NEWFOUNDLAND CONTINGENT on April 13th 1916
Regimental No. 2510 was allotted to Pte D. Eastman.

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th 1919

N. Cassman.

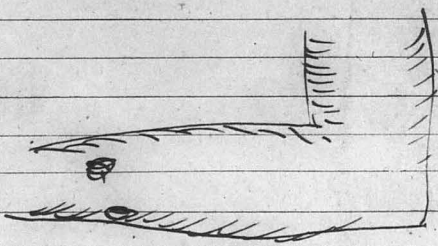
C.R. 2510

Per O

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	2510	Pte	Eastman	David
Year	Unit.	Age.	Service.	
	1 st Newfoundland Regt	22		

Station and Date. Disease Left Arm E.S.W.



E.S.W. left ulna wound done
Clean, No anaesthesia
No ulna nerve trouble.
Oedema of hand, axillary pain
Clonus moderate,
for X-ray. No

29. XI. 17 / For Aux Hosp. recd. W. Randall

AUXILIARY HOSPITAL
AT Calcutta
FROM Dec. 7 1917

29-12-17 Manage. greatly improved

9/1/18 Victoria Street. It is days have rec'd
Dr. [Signature] Major, R.A.M.O. (T.)
Registrar
4th London General Hosp.

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.
 In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

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

1. Unit and Corps... 1. R. Newfoundland.....
2. Regtl. No. 2510 3. Rank... Pte.....
4. Name Eastman Dan.....
(Surname) (Christian Names)
5. Age last birthday... 23.....
6. Posted for duty on... April 16... at... St. Johns...
 in category (or grade)... A1.....
7. Former Trade or Occupation } Lumberman
 7a. If the soldier claims previous service in Army, he should state—
 (a) Former Regts. or Corps ; with Regtl. Nos.
8. If the disability is an injury was it caused
 (a) in action Yes (b) on field service Yes
 (c) on duty Yes (d) off duty ?
9. If a Court of Inquiry was held on an injury state :—
 (a) When
 (b) Where
 (c) Opinion of Court
- (b) Date of Discharge ;
 (c) Cause of Discharge.
 (d) Particulars of Pension or Gratuity (if any)

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

Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

G.S.W. Left leg. Fractd Tibia

11. Date of origin of disability. Oct 14/18
12. Place of origin of disability. France

13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

Was advancing to attack when hit by machine gun bullet has been in Hospital since then

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war **Yes**
- (ii.) Previous active service
- (iii.) Climate in pre-war service **No**
- (iv.) Ordinary military service before the war
- (v.) Serious negligence or misconduct on the man's part. }
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } **U.S.W.**

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

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

There are large operation scars on lower part of left tibia. The leg is swollen and there is only limited movements of the ankle joint.

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

Sequestrotony

Not applicable.

G.S.W. Left forearm and an No disability

20. Do you recommend—

(a) Discharge as permanently unfit?

Discharge as Permanently Unfit.

(b) Change to United Kingdom?

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

Sgd. Thos. B. Darlyon Capt.

Station

Medical Officer in charge of case.

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

OPINION OF THE MEDICAL BOARD.

NOTES.—(1) Clear and definite answers are to be filled in by the Board, as, in the event of a 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.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases 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.

21. Give diagnosis and particulars of:—

- (a) Any disability claimed or discovered.
 (b) The present condition thereof.

*Old G. S. Fract: Tibia & Fibula
 from Union: nearly an inch
 shortening. Inadequacy of knee
 & ankle joint. Stationary*

22. State whether the disabilities are:—

- (i) Service during the present war
 (ii) Previous active service.. ..
 (iii) Climate in pre-war service
 (iv) Ordinary military service before the war
 (v) Serious negligence or misconduct on the part of the soldier

(a) Attributable to

(b) Aggravated by

Yes

Give details:

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

23. Is the disability in a final stationary condition? If not

Yes
1

- (a) How long is the present degree of disability likely to last?
 (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

20%

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

vide 16

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

Yes

Opinion of Military Member in case of disagreement.

OR

- (b) In what other grade do the Board place him?
 (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalidated at a foreign station)?

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

✓

28. Is treatment being recommended on Army Form B. 179c?

no

29. Does the soldier require:—

- (a) An attendant for his journey home?
 (b) Transport from railway station to his home?
 (c) The constant attendance of another person in his own home?

no

Signatures:—

Station *H. Andrews* S^r *Frank Batten* } President or Chairman.
W. B. Stewart } Members.
 Date *1-3-19*

Discharge Approved under Para. 392 (xvi) King's Regulations.

Station *H. Andrews* *W. B. Stewart* } Only applicable in cases of Patients in Hospitals.
 Date *3-3-19* } Officer in charge, Central Hospital.

OR
 Discharge Approved under Para. 392 () King's Regulations. or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station

O.C. Discharge Centre.

Date

NEWFOUNDLAND CONTINGENT

N.F.P/33.

Temporary A/c.

Regtl No 2210 *Bank*

Name Eastman

Pte
Eastman

Pay	F. Allow	Working	Total
1-	10		110
Less Allotment			✓ 50
Net Rate			✓ 60

Date	DEBITS			e	s	d	CREDITS		
	e	s	d				e	s	d
1917									
	Balance			1	1		Balance		22/12/16
	<u>P.M. ADVANCES:</u>								6 11 9
	A.B. 64			1	1	6	<u>Pay @ Net Rate:</u>		
	Acquittance Rolls			1	4	5	22/12/16 to 14/4/17 = 113 days		
	Hospital Advances			1	1	0	60 = 6	16780	113 18 7 1/2
	<u>STOPPAGES:</u>						18/4/17 to 24/4/17 = 10 days		
	hospital_dys =						3% =	Ration Allow	1 0 0
	Forfeited Pay_dys =						1/1 to 1/1 = days		
	Miscellaneous								
	Cables								
	<u>P. & R.O. PAYMENTS:</u>								
	Sundry Bills			6	13	11			
	Cash			14	10	0			121 10 4 1/2

C.A.
14/4/17

FIELD MEDICAL CARD.

A.T. Serum
Dose and date

} 1st

750 units
cc

2nd

FIELD AMBULANCE NOTES.

Morphia
Dose and time

}

Date of wound or
onset of illness

}

20/11/17

6 R Harris Capt
Rear Coy

Religion

C.E.

No.

2570

Rank

Pvt

Name

EASTMAN, D.

Unit

1st NEWF.

29 Dec

Battle Casualty

Accidentally Wounded.

"Sick"

(Strike out description which does not apply)

No. of F.A.

Date of admission

F.A. diagnosis



J.S.W. FORE ARM. L

Additional F.A. Notes to be written on back of card.

C.C.S. diagnosis (if altered from above)

Base Hospital diagnosis (alterations or additional)

Date of entry and medical unit admitting must be recorded immediately on admission. Brief clinical notes to be added later and signed by M.O.

No. of C.C.S.

5 C.C.S.

Date of entry

21-11-14

T & T wound & drainage
not redressed. 23. Rem to
U.S.A.

No. of Hospital

108 H.

Date of entry

22-11-17.

T & T left free
Tray. no osseous lesion detected
no FB detected

R. Wilson

This F.M. Card must not be destroyed, and it must be transmitted with the patient if he is evacuated to U.K. Temperature charts or additional clinical notes may be sent with it, either in the same or in another envelope attached to the patient.

Ward H 1 No 109 Hospital. Date 22-11-17

Regl. No.	Rank and Name	Corps	Part to be X-Rayed
2570.	W. Eastman D	1 No. Quarter	Left forearm

SHORT HISTORY OF CASE.
(To be completed by M.O. i/c case.)

Isphuley.

REPORT ON RESULT OF X-RAY EXAMINATION.
(To be completed by Radiographer.)

No. of Plates 425 1026
 No. of views Two views
 No. of body Two views

Signature of M.O. M. Sclips

Signature of Radiographer [Signature]

Date 22-11-17

Date 22/11 [Signature]

To the Chief Paymaster
Royal Newfoundland Regt

Please pay bearer the sum of
one pound (£1) and charge same
to his account

2510. Pte D Eastman

one pound approved

Filmas Coy
R.A.M.C.

15/2/19

ok £ 1-0-0
AW 15-2-19

Receipt
No 1319



2/P&A.

SUSPENSE

OFFICER IN CHARGE RECORDS
NEWFOUNDLAND CONTINGENT
65, WINDMILL STREET,
LONDON, S.W. 1
ENGLAND.

Officer Commanding,
3rd London General Hosp.,
Wandsworth, S.W. 18.

Pay & Record Office.

22nd November, 1918

2510, PTE. D. EASTMAN.
ROYAL NEWFOUNDLAND REGIMENT.

With reference to the following telegram from the Hon. the Minister of Militia, 20/11/18, (10,008),-

- "Allotment of pay- 2510-
- "Eastman- D- discontinued-
- "October 31st- both- parents-
- "dead."

Military.

Kindly ascertain Pte. D. Eastman's wishes in this matter to enable me to reply, please.

Major,
Chief Paymaster & O i/c Records.

FM/NA.

To,
Chief Paymaster,
Newfoundland Regt. 101170
29/11/18.

Ref. Min. 1.
Pte. Eastman wishes to cancel all allotment, and the amount in question should be credited to his pay account please.

(sd) ? Capt.
R.A.M.C.
3rd London Gen. Hospital.

10317
20/11/18

2255/16/P&A

SUSPENSE | CLEARED

C.P.&O.1/c Records
Newfoundland Contingent,
58, Victoria Street, London, S.W.1.

Officer Commanding,
3rd. London General Hospital,
Wandsworth, S.W.18.

WF/MN

7th. February, 9

this office No.19724

relating to N.F's.P.12. not having been
received you are requested to complete
attached N.F's.P/12 and forward to this
Office as soon as possible, please.

Ths

Admitted 25. 10 18 Army Form W. 3202.
(In books of 100.)

NOTIFICATION that a Soldier has been sent Home from Hospital to await Discharge under para. 392 (xvi.) King's Regulations.

Soldier's } 2510 Rank Plt
Regtl. No. }
Name Coastman D.
(Surname first)
Corps or Regiment } R. Regt. W. Leinster
(also Unit if known) }
To Officer i/c of Records 58 Victoria St
Regimental Paymaster 58 Victoria St

The above-named man, who appeared before a Medical Board, and whose discharge as "no longer physically fit for war service" was approved by the President of the Board on the 1-3-19, has been sent to the address below on warrant to await instructions as to his final discharge; he has been given £1 (one pound) advance and a suit of plain clothes.

He proceeded on (date) 4-3-19
to (full address) 58 Victoria St
L.W.

Date 4-3-19 J. Tilman Coy
Registrar, R.A.M.C. Officer
Place Wandsworth London General Hospital, Comm.
WANDSWORTH, Hospital.

Three copies to be made; one copy sent to each Officer above-mentioned, and one copy filed in the Office.

No.

Regtl. No. 2510

Rank Pvt.

Name Eastman D.

Regiment 1st N.F.

Date from 8/1/1918

to 18/1/1918

To proceed to

Scotland

I/c 4th L.H. Hospital

Station LONDON

Date 7/1/18

Address whilst on furlough to which any orders will be sent.

G. M. G. A.

10th Enochⁿ

Glasgow

ORIGINAL

NEWFOUNDLAND CONTINGENT

ENTERED	12
PAY LEDGERS	
ROLL	
ALLOT. INDEX	
REGISTER	
EXAMINED	

CANCELLATION OF ALLOTMENT

I, (No) 2510 (Rank) Plt (Name) Eastman D.

hereby apply for cancellation of Allotment made by me on N.F.P./11

No. 2289 dated July 21st 1916 in favour of

Edw. Eastman Gambo

for \$ — cts 50 per diem.

Such cancellation to take effect on the Thirtieth day of October 1918

2. I agree to accept all risks and consequences of this application 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 overpaid amount or amounts.

BRITISH HOME AND HOSPITAL FOR INCURABLES,
STREATHAM, S.W. 16.

Dated at MILITARY AUXILIARY HOSPITAL

21st 12 1919

COPIES SENT		
TO	No	DATE
M. OF M.	<u>3649/56</u>	<u>5/3/19</u>
O.C. 1ST. BN.		
" 2ND. BN.		
Eastman D		
Allottee.		

Approved and Witnessed:

Edgar Sweeney
Secretary

O.C. " " Company
BRITISH HOME AND HOSPITAL FOR INCURABLES,
STREATHAM, S.W. 16.

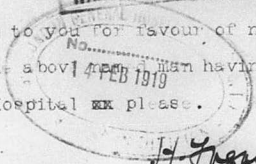
N.B. - To be made out TRIPLICATE and delivered to the Pay & Record Office not later than the date of cancellation, in accordance with P. & R.O. C.L./10, 9/12/16.

855

The Commandant,
Home for Incurables,
Crown Lane,
Streatham.

3 RD LONDON GENERAL HOSPITAL
No. _____
10 FEB 1919
WANDBURTH, S.W. 18.

Passed to you for favour of necessary
 action and return, the above named man having been
 transferred to your Hospital ~~xxx~~ please.



J. J. Jones

BRITISH HOME AND HOSPITAL FOR INCURABLES,
STREATHAM, S.W. 18.
MILITARY AUXILIARY HOSPITAL,

A/Major R.E.A.:M:C:(T) (for
O.C. 3rd London General Hospital.

Returned herewith
E. J. Jones

O.C.

Pay and Records, NEWFOUNDLAND COMMANDANT,
Newfoundland Contingent, P.O. OFFICE,
58, Victoria Street, ST. JOHN'S.

1464

3RD LONDON GENERAL HOSPITAL	
No.	
14 FEB 1919	
WANDSWORTH, S.W. 18.	

7 15 FEB 1919

Reference attached, please find forms,
~~which~~ filled in and returned herewith please.

H. Fagan

A/Major R.A.M.C.(T) for
O.C. 3rd London General Hospital.

Comm	
Regt	
R.&C.	
B&E	
P.S.	

[Signature]

Dr. Cameron

ENCLOSURE

In subsequent correspondence
please quote the following
number:-

Army Form C. 347-1.

2255/16/P&A REMINDER.

From C.P.&O.1/c Records
Newfoundland Contingent,
58, Victoria Street, London, S.W.1.

To Officer Commanding,
3rd. London General Hospital,
Wandsworth, S.W.18.

WF/MN

7th. February, 1919.

The reply to this office No.19724
relating to N.F's.P.12. not having been
received you are requested to complete
attached N.F's.P/12 and forward to this
Office as soon as possible, please.

~~not having been received, you are requested~~
~~to expedite the same, and to state on the~~
~~reverse when it may be expected.~~

[Signature]

CHIEF PATMASTER & OFFICER IN CHARGE

No. 2510 Rank Pte Name Eastman S.

Pay	F.A.	Wkg	Total	N.F.P.
100	70		170	
Less Allotment				
Net Rate			110	

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£ s d				
						From	To							
Balance					Balance		20/2/8				15	6	9	
Acquittance Rolls					Pay @ Net Rate	21/2/8	4/3/9	74	110	81	40			
Hospital Advances		1	0	0	Other Allowances					25	00			
A.B. 64.					R.A.	4/3/9	4/4/9	3	4/1	106	40	21	17	3
P.&.R.O. Payments		1	0	0								6	3	
					for total							£ 37	10	3
					£ 35 10 3									
					Cash Cheque 117204 3/9									

£ 2-0-0

W.S.
4/3/19

Cash Cheque 117204 3/9 35 10 0

Eastman D.

2570

Ray Dept
—

5

May 5th., 1919

#2510 Pte. Daniel Muston,

Gambia.

Dear Sir:-

Please find enclosed "Discharge Certificate
No. 2168."

Yours truly

Captain,
Paymaster & O.A/c Records

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 2510 Rank Private Name Eastman, Daniel
 Intended place of residence St. John's
 2. Occupation Publican
 Classification of soldier B Medical Category F
 3. The above named man is discharged in consequence of DEMOBILIZATION

Eligible for War Service Gratuity

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.
 Place ST. JOHN'S
 Date APR 19 1919
J. H. Mous
 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
APR 19 1919
Daniel Eastman
 Signature of soldier
J. A. Brown
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.
 Place and Date ST. JOHN'S
19-4-19
Daniel Eastman
 Signature of soldier
H. B. Brown
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 13-4-16 No of days on Military
 Discharged from service 21-4-19 14 days Service 1178 days

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge, The Royal Newfoundland Regiment, twenty-eight days from date.
 Place ST. JOHN'S
APR 21 1919
R. H. Lait
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place St. John's
May 5/1919
A. H. Rowley
 Officer in Charge
 The Royal Newfoundland Regiment

C. 276. 2079/2168

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 2510 Rank Pte Name Eastman Donald
 Date of Enlistment 13-7-16 Address St. John's District St. John's
 Occupation Lumberman Classification for Discharge DD Medical Category E
 Recommendation S.M.B. permanent disability Disability Rating 30% 6 months
 Passed to Demobilization Officer with following documents:—

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

Date 14-4-19

[Signature]
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

D. Eastman

Particulars passed to Vocational Officer for information and action.

Date 14-4-19

Arthur Louis Curtis

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable

(b) Clothing Supplied

Arthur Louis Curtis

Date

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *2169* to his home at *Barrow* and Release Certificate No. *2169* issued.

Date *19-4-19*

J.A. Snowling
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 *5-4-19*

Date *19-4-19*

J.A. Snowling
Depot Paymaster.

Discharge approved for *21-4-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med.	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 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date *19-4-19*

J.A. Snowling
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date *5* *APR 21 1919*

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

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

Date

Report of Medical Board.

Station St. John's, Nfld Date 10th April 1919
 No. and Rank 2510 Private Age 24 yrs Height 5 ft 5
 Name Eastman Dan Complexion Fair
 Unit Royal Newfoundland Eyes Blue Hair Brn w/ r.
 Address Sambro
 Former Trade Lumberman
 Enlisted at St John On 13th April 1916 (The Board will please note how the soldier's appearance corresponds with above description.)
 Disease or Disability Original

Subsequent

Present Condition (Compare with previous Board)

A through & through wound left by (couple inches above ankle point). Healed considerable swelling near the wound. Fair motion in ankle, feels dead along outer side of foot. Cannot walk without a stick - much shortening

THE ENTIRE DISABILITY: To what extent is his capacity lessened at present for earning a livelihood in the general labour market? 30%

PENSIONABLE DISABILITY: To what extent is his capacity at present for earning a full livelihood in the general labour market lessened by that proportion of his disability due to or incurred during service? 30% last months

Recommendation of Medical Board

Discharge permanently Members of Board

Amplified
 C. M. Macpherson
 Major

W. G. H. Cass
 Medical Officer
 W. G. H. Cass

Approving Medical Officer.



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 attend school

D. Eastman

Signature of Man.

B. H. Utter

Signature of the Vocational Officer or his Representative.

Reg. No. 2510

Place

St Johns

Date

Apr 1945 191 9

The Royal Newfoundland Regiment

Class for Demobilization:—

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

Regimental No.

2510

Name

Daniel Eastman

Address

St. John's

Present Medical Category

F

Recommended for:— { (a) ~~Immediate discharge~~

(b) Standing Medical Board

Members of Board

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

J.P. ...
Senior Medical Officer

G.W. Burden
M. O. Depot

5

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

MEDICAL HISTORY

Surname Eastman Christian Name Samuel



Table I.—GENERAL TABLE.

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY	
Examined	on <u>13</u> day of <u>April</u> 191 <u>6</u>	at <u>St. John's</u>	on _____ day of _____ 191 <u>6</u>	at _____
Declared Age	<u>31</u> years	days	<u>8</u> years	days
Trade or Occupation	<u>Lumberman</u>			
Height	<u>5'</u> feet <u>4 1/2</u> inches		_____ feet _____ inches	
Weight	<u>115 1/2</u> lbs.		_____ lbs.	
Chest Measurement	Girth when fully expanded... <u>54</u> inches		_____ inches	
	Range of expansion... <u>2</u> inches		_____ inches	
Physical Development				



Vaccination Marks	Right		Left	
	Arm	Number	Arm	Number
When Vaccinated				

Vision	R.E.—V= <u>6/6</u>	L.E.—V= <u>6/6</u>	R.E.—V=	L.E.—V=
--------	--------------------	--------------------	---------	---------

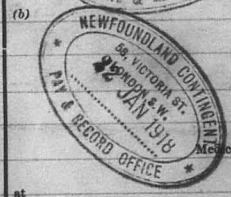
(a) Marks indicating congenital peculiarities or previous disease



(b) Slight defects but not sufficient to Cause Rejection

Approved by (Signature)

Samuel Eastman
Major Medical Officer.



Enlisted	on <u>13</u> day of <u>April</u> 191 <u>6</u>	at <u>St. John's</u>	on _____ day of _____ 191 <u>6</u>	at _____
	Corps.	Regtl. No.	Corps.	Regtl. No.

Joined on Enlistment	<u>1st New York Reg 2510</u>			
Transferred to				

Became non-effective by	on _____ day of _____ 191 <u>6</u>	at _____	on _____ day of _____ 191 <u>6</u>	at _____
(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 further use. In case of syphilis, admissions 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 th LONDON GENERAL HOSPITAL WANDSWORTH.	27	3	19	22	MAR	1917	G.S.W. VIII. L. arm.	15	Wounded in France 2/3/17. On duty purveyor's room at back of L. arm. Transferred to Holborn Mil Hospital Mitcham	W. H. Mayley Capt R.A.M.C.
HOLBORN MILITARY HOSPITAL WESTERN ROAD, MITCHAM.	22	3	17	14	4	17	S.S.W. VII. L. Arm Shiplt	23	Admitted Convalescent. Discharged Cured.	Edwin Osborn.
HOLBORN MILITARY HOSPITAL WESTERN ROAD, MITCHAM.	25	11	14	7	1	18	G.S.W. Leg L. Arm.	43	Progress. Greatly improved. II 10 days leave. Trans. to 58 Victoria St.	W. H. Mayley for Major, R.A.M.C. (T.) Registrar, 4th London General Hospital
No. 6 Depot Ripon	19	1	18	16	2	18	W. H. L. arm.	30	Bat A3 Road killed on service Disability: S.S.W. L. leg. Fract. Tibia & Fibula Hardly an inch of shortening, movements of knee & ankle good. Cause - S.S.W. on Active Service. Disablement - 20%.	W. H. Mayley for Major, R.A.M.C. (T.) Registrar, 4th London General Hospital M.O. 10 Northern Command Lt. Col. R.A.M.C. W. H. Mayley Capt R.A.M.C. 4th London General Hospital WANDSWORTH, S.W.

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.

Date	Brief Details, and Signature
11/7/16	1 st Inoculation LP
21. 7. 16	F.A.B. pro to H.P. S.S. Sicilian H.H.W.
16-8-16	Incess ² vaccination H.H.W.
4. 7. 16	Dental treatment completed H.H.W.
7-10-16.	3 rd Inoculation Para 5. H.H.W.
6 10-16.	Fit. for foreign service. H. F. W.
16-2-18	Bat Aviii <i>[Signature]</i>
of 3-18	T.M.S. D.P.K. Lt. Col. R.A.M.C. 2 Capt. Rome. <i>[Signature]</i> Northern Command
1-3-19	Board held. Discharge as permanently unfit. <i>[Signature]</i> Capt. Rome London General Hospital WANDSWORTH, S.W.

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
<p style="text-align: center;">It is hereby certified that this service has been before the Standing Medical Board and has been classified as <u>B</u> for discharge on Demobilisation. Medical category <u>1</u></p> <p style="text-align: center;">10. 11. 19 Date of S.M.B. <i>[Signature]</i> Discharge Department</p>					

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.
In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

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

1. Unit and Corps *1 Ray. New Zealand and Royal* Former Trade } *Lumber Man.*
or Occupation
2. Regtl. No. *2510* 3. Rank. *Pte* 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regtl. Nos. —
4. Name *Coatman* *Dan*
(Surname) (Christian Names)
5. Age last birthday. *23*
6. Posted for duty on *Apr. 1916* at *St. Johns*
in category (or grade) *A.I.*
8. If the disability is an injury was it caused
(a) in action *yes* (b) on field service *yes*
(c) on duty *yes* (d) off duty? — (b) Date of Discharge; —
(c) Cause of Discharge. —
9. If a Court of Inquiry was held on an injury state:—
(a) When — (b) Where — (c) Opinion of Court —
(d) Particulars of Pension or Gratuity (if any) —

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

Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here.
(Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability. *20/11/18*
12. Place of origin of disability. *France*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

*Mr. advancing to attend
when hit by M.G. bullet
has been in hospital since
then*

14. State whether the disabilities are

(a) attributable to

(b) aggravated by

- (i.) Service during the present war
- (ii.) Previous active service
- (iii.) Climate in pre-war service
- (iv.) Ordinary military service before the war
- (v.) Serious negligence or misconduct on the man's part. }

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

g. s. w

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

15. What is his present condition?

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

There are large granular scars on lower part of left tibia. The leg is swollen and there is no limited movement of the ankle joint.

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

Requiresotomy

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

not applicable

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

gsw left maxilla. There is no disability

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

Discharged as P.M.

20. Do you recommend—

(a) Discharge as permanently unfit?

(b) Change to United Kingdom?

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

Thos B. Carlson Esq
Medical Officer in charge of case.

Station

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

OPINION OF THE MEDICAL BOARD.

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a 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.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) *The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases 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.*

21. Give diagnosis and particulars of:—

- (a) Any disability claimed or discovered.
- (b) The present condition thereof.

Old G.S.M. Fracture Tibia & Fibula: firm union: nearly an inch shortening: movements of knee & ankle good. Stationary

22. State whether the disabilities are:—

- (i) Service during the present war
- (ii) Previous active service.. .. .
- (iii) Climate in pre-war service
- (iv) Ordinary military service before the war
- (v) Serious negligence or misconduct on the part of the soldier

(a) Attributable to

(b) Aggravated by

.....	<i>Yes</i>
.....	
.....	
.....	
.....	

Give details:

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

.....

Yes

23. Is the disability in a final stationary condition? If not

- (a) How long is the present degree of disability likely to last?
- (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

20%

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

vide 16

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?
- OR
- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Yes

Opinion of Military Member in case of disagreement.

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

28. Is treatment being recommended on Army Form B. 179c?

No

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

No

Signatures:—

Hannah Bales President or Chairman.

Station *Wandsworth*

R. J. Howard

Date *1-3-19*

Members.

Discharge Approved under Para. 392 (xvi) King's Regulations.

Station *Wandsworth*

H. B. Somerton

Date *1-3-19*

Officer in charge, Central Hospital.

Only applicable in cases of Patients in Hospitals.

OR

Discharge Approved under Para. 392 () King's Regulations. or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station

O.C. Discharge Centre.

Date

STATEMENT BY A SOLDIER CONCERNING HIS OWN CASE.

NOTE.—This Form is to be filled in by every soldier prior to the compilation of Army Form B 179a, whether a patient in hospital or not, and attached thereto. The questions are to be answered in the soldier's own words, and the Form is to be signed by him and the signature witnessed. In the event of the soldier being unable to write he should affix his mark, such act being witnessed.

Regimental No. 2570

Rank Pfc

Name. Eastman Dan
(Surname) (Christian Names)

Unit and Corps } 1 R Sqds Reg L.

Note.—Before answering the questions below, the soldier is to note that

- (a) The statements made by him will be checked by official records.
- (b) In answering Question 2 any special matters which in his opinion caused any unfitness from which he may be suffering or which aggravated it should be clearly stated.

If the soldier is unable to read, the above notes are to be read to him by an officer.

<p>1. (a) In what countries have you served during this war, and for what periods?</p> <p>(b) In what capacity?</p>	<p><u>France + Belgium 18 Months</u></p> <p><u>Infantryman</u></p>
<p>2. If you are suffering from any disease, wound, or injury, state what it is, the date upon which it started, and what, in your opinion, was the cause of it.</p> <p>(If more space is required a sheet of foolcap should be used, and firmly attached to this form.)</p>	<p><u>Fractured Leg.</u></p> <p><u>Oct 14th 1918.</u></p> <p><u>Machine Gun Bullets.</u></p>

3. Give the names of any hospitals where you have been treated for the above disease, wound or injury during the present war.

7th Stationary Boulogne.
3rd London Gen Hospital

4. Did you suffer from the disease or injury mentioned in above answer to Question 2, or anything like it, before joining the Army? If so, give details and dates.

✓

5. Give the names (and addresses if you know them) of any hospitals you were in or doctors who attended you before you joined the Army.

✓

6. Give the name of your National Health Approved Society, and (if possible) your Membership Number.

✓

7. What is the name and address of your last employer before joining the Army?

W H Dvorstky
A H D Co
Grand Falls
Newfoundland

8. (a) What was your occupation before joining the Army?

Lumberman

(b) What was your trade before joining the Army?

(To be checked by A.F.B.64 or A.F.B.103.)

The above statement has been read over to me; I agree to it, and have nothing further to add.

Station 3rd Lon Gen Hosp..... Signed (Soldier) D. Eastman.....

Date 20 Feb 1919..... Signed G.H. Rendell.....

3183. Wt. 14780/13.0. 800,000/17. 8/18. S.O.F.R.D.

Witness

MEDICAL REPORT ON AN INVALID.

NOTE.—This Form is only applicable to men discharged from Hospitals; and when filled in is to be attached to A.F. 3972A and forwarded to the CONTROLLER, MINISTRY OF PENSIONS, BERTON COURT, KING'S ROAD, LONDON, S.W. 3.

Name Eastman Lee Regt. No. 210 Rank Plt. Unit and Corps R.P.F.C.
(Surname) (Christian Name)

1. State the nature of the disability or disabilities from which this man is suffering.

Old G.S.W. Fracture Tibia & Fibula,
1 inch shortening

2. What is the present condition of such disability or disabilities?

Stationary & permanent

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

NOTE.—Treatment shall only be recommended for the disability for which the man was discharged from the Navy or Army or Air Force during the present war. Provided that if the remaining disability has been held to be due to or aggravated by service in the present war, treatment may be recommended for an incapacity medically certified as in consequence of that disability.

- (a) Sanatorium or other institution for tuberculosis
(b) Hospital, and if so, what class?
(c) Convalescent Home
(d) Asylum, or
(e) Other institution
(f) Is out-patient hospital treatment or treatment at home recommended. If so, which?

No

4. With reference to Army Council Instructions, is any surgical appliance recommended?

No

5. Is the invalid willing to accept the offer of treatment or not? If not, state the reason given for the refusal, and say whether you consider the refusal reasonable

—

Signature

Handwritten Signature President.

Station

Wandsworth

R.P.F.C.

Members.

Date

1-3-19

Approved.

3RD LONDON GENERAL HOSPITAL

Station

WANDSWORTH.

Handwritten Signature

Officer in charge, Casual Hospital

Date

2ND LONDON GENERAL HOSPITAL
WANDSWORTH. 3-3-19

THE SECRETARY,
WAR PENSIONS LOCAL COMMITTEE,

.....

.....

Will you be good enough to make arrangements to provide the treatment recommended on the other side.

(Signed).....
For D.M.S.

Date

LOCAL COMMITTEE NOTES.

(1) Arranged for patient to enter Hospital on
the for treatment.

(2) Pension Issue Office notified of suspension of pension.
(Initials) (Date)

.....

(3) Report received from Hospital of discharge of patient and result of treatment.

(4) Pension Issue Office notified of resumption of pension.
(Initials) (Date)

THE CONTROLLER,
Ministry of Pensions,
Burton Court,
King's Road,
S.W. 3.

The Hospital report on the treatment of this man is sent herewith for filing with this form with the man's discharge documents.

Signed.....
Clerk or Secretary.

.....
War Pensions Local Committee.

Date



Descriptive Return of a Soldier Discharged on Account of Disability.

INSTRUCTIONS—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification, depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. i c Records together with the remainder of the man's documents.

Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

Name in full

Donald Eastman

Regiment from which discharged

Royal Newfoundland

Regimental number

25-10

Intended address

St John's

Height on discharge

5 Feet 6 1/2.

Color of hair on discharge

Black.

Complexion

Fair

Color of eyes

Grey.

Descriptive Marks

1 scar left Leg.

Figure on discharge

Medium

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

Gambu, 7th April, 1895

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)

*Eastman**Pte.*

(Rank)

Station

St John's

Date

7-4-19

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

Station

Date



Casualty Form Active Service.

Regiment or Corps 1st Newfoundland
 Rank Pte Surname Eastman Christian Name Daniel
 Religion C of S. Age on Enlistment 21 years months.
 Enlisted (a) at John's Terms of Service (a) Duration of War Service reckons from (a) 13/4/16
 Date of promotion to present rank Date of appointment to lance rank
 Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and Rate
James Lewis Signature of Officer.



Report from whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 26, 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. 26, or other official documents
		Embarked <u>St. Chetone</u>	<u>2.6.17</u>	
		Disembarked <u>Boulogne</u>	<u>2.6.17</u>	
		Joined Battalion	<u>19 JUN 1917</u>	<u>B 213</u>
<u>26 NOV 1917</u>	<u>C.C.</u> <u>WOUNDED IN ACTION</u>		<u>20 NOV 1917</u>	<u>A.F.B. 213.</u>
<u>21/1/17</u>	<u>3772</u> <u>to</u> <u>Newfoundland</u>	<u>5 Cct</u>	<u>4/1/17</u>	<u>60 3827</u>
<u>10 Gen Hq</u>	<u>"</u>	<u>Home</u>	<u>21/4/17</u>	<u>4216636</u>
<u>James Eastman</u>	<u>Transferred to England</u>		<u>24-1-17</u>	<u>W 3083</u>
		<u>J. Hoang</u>	<u>27/1/17</u>	
		<u>O. i/c No. 1</u>		
		<u>Infantry Section</u>		
		<u>G.H.Q.. 2nd Echelon</u>		

(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, Shipping Smith, &c.

Casualty Form—Active Service.

Regimental Number 2510

Regiment or Corps 21 Newfoundland Regt. 1856
 Rank Pvt. Surname Eastman Christian Name Daniel
 Religion CofE. Age on Enlistment 21 years — months.
 Enlisted (a) 13/4/17 Terms of Service (a) War Service reckons from (a) _____
 Date of promotion to present rank _____ Date of appointment to lance rank _____
 Extended { _____ } Re-engaged { MAR 22 1917 } Qualification (b) _____
 or Corps Trade and Rate _____
 Signature of Officer i/c Records _____

Report		Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B. 218, 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. 218, Army Form A. 36, or other official documents
Date	From whom received				
			Embarked Southampton		11 OCT 1916
			Disembarked ROUEN		12 OCT 1916
			Joined Battalion		22 OCT 1916
			With BATT	28. I. IV	
<u>5/3/17.</u>	<u>B.C. Unit</u>	<u>Wounded in Action</u>	<u>France</u>	<u>3/3/17</u>	<u>B213</u>
	<u>2 1/2 Lon C.C.S.</u>	<u>Adm. Gen. S. Arm.</u>	<u>France</u>	<u>3/3/17</u>	<u>EO 889</u>
	<u>"Grantully Rd."</u>	<u>Invalided to England</u>		<u>6.3.17</u>	<u>W3083</u>
		<u>in g. S. Hosp., Rouen</u>			
			<u>M. Brindell</u>		CAPTAIN.
			for Officer i/c No. 1 Regular Infantry Section General Headquarters, 2nd Echelon		

(a) In the case of a man who has re-engaged for, or called into Section D, Army Reserve, particulars of such re-engagement or callistment will be entered.
 (b) Signaller, Shoeing Smith, &c.

[P.T.O.]

The Royal Nfld. Regiment

DEMOBILIZATION

No. 2510 Rank Pl

Name L. Eastman

Warned for demobilization on

APR 14 1919

DUPLICATE
MAIL COPY

N.F.P./12.

NEWFOUNDLAND CONTINGENT

Posted.....

CANCELLATION OF ALLOTMENT

1. I, (No) 2510 (Rank) Pte (Name) Eastman D.

hereby apply for cancellation of Allotment made by me on N.F.P./11

No. 2289 dated July 21st 1916 in favour of

Ed. Eastman Gambo

for \$ — cts 50 per diem.

Such cancellation to take effect on the Thirly first day of Oct 1919

2. I agree to accept all risks and consequences of this application 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 overpaid amount or amounts.

BRITISH HOME AND HOSPITAL FOR INCURABLES,
STREATHAM, S.W.10.

Dated at MILITARY AUXILIARY HOSPITAL,

21st 12 1919

Eastman D

Allotter.

Approved and Witnessed:

Edgar Beaman
D.C. " " Company Reservist

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

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 20th, 1919.

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

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

Christian name *Ramuel* 2. Surname *Eastman*

3. Rank *Private* 4. Regtl. No. *2575*

5. Address in full to which future payments of gratuity are to be forwarded. *58 New Gower St.*

6. Date of enlistment in the Regiment. *S. John's*
12 April 1916

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

not applicable

8. Relationship of such dependents.

9. Address in full of such dependents. *Not applicable*

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

11. Were you on active service only in Hfld, if so, give dates and particulars of such service.

M. France

12. Give total length of time which you served on active service, whether in Hfld. or Overseas. *3 years*

..... 13.

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

No

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.

No

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

no

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

No

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.....

No

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

no

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

not applicable

19. Are you now serving in the Regt.?..... Is not give? - (a) Date of discharge..... (b) Reason for discharge.....

21 April 1919

no

Wounds - West over

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.....

France 16/11/16 to 14 Oct 1918

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee.....

not no how much

Signature of Applicant: *Eastman Dean*
 Place of Residence: *58 Mayflower St. S. Memphis*
 Declared before me at: *S. Memphis*
 This *13th* day of *May* 191*9*.....

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

W. H. Ginn
Notary

POST DISCHARGE PAY.

Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	Net amount due
.....	<i>6 mes</i>	<i>420.00</i>
.....
.....
Certified correct.			Registrar	<i>W</i>

Jack Coel

Nov 15-15/1900

3212

To the Department of Militia
Gentlemen

I Beg to inform
you that No. 2510

Daniel Eastman.

Parents all Died in
the Spanish Flu the
Day is Money Came
& I am the only
Child he can face
or when he return
home the Post master
Send me is money
The only thing I can
do is keep it for

him until he
returns back
to your care
address is money
to me.

Samuel Eastman
Dark Cove
Gambro

I am in debt

3 Parents died
in two days
Husband wife child

he was my Brother

At will you
please give me
no. 2510 address as
I want to write
him

Ly

#2510 Daniel Eastman

allot discontinued

31/10/18.

Wired London.
20/11/18

Nov. 28th., 18

Mr. Samuel Eastman,
Dark Cove,
Gambo.

Dear Sir:-

With reference to your letter of November 15th., I beg to state that I have cabled to the Chief Paymaster at London, asking him to ascertain the wishes of No. 2510 Pte. Daniel Eastman, regarding payment of his allotment.

If you will address letters to:

#2510 Pte. Daniel Eastman, C
C/o Pay & Record Office,
58 Victoria Street,
London, S.W. (1).

they will be forwarded to him where ever he may be.

Yours faithfully,

CAPTAIN & PAYMASTER.

May 17th, 1919

Capt. Howley,
O. I. C. Records.

Please pay to Mr. D. Eastman, No 2510, the sum of five dollars and sixty eight cents in payment of balance of allowance for week ended this date in connection with re-education.

\$5.68

B.R.S.

ACCOUNT	
CH. NO.	20500
IND. LEDGER	
PAY LEDGER	
GEN. LEDGER	

Lee

W. J. Taylor
W. W. Michell
Vocational Officer

Eastman D

Eastman, D., No 2510

Pension \$15: dates from May 6
Paid at \$11.66 rate for 1 week
Correct rate \$8.17
Overpaid \$2.49
Balance due to May. 17th, \$5.68

O.K.
G.W.H.

April 26th, 1919

Capt. Howley,
O. I. C. Records.

Please pay to **Mr. D. Eastman, No 2510**
the sum of **eleven dollars and sixty six cents**
in payment of allowance for week ended this date
in connection with re-education.

J. C. S.

\$11.66

Pension

ACCOUNT	<i>C. R. S.</i>
CHK. NO.	<i>17154</i>
INITIALS	<i>ew</i>
IND. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

W. W. Nicholl,
Vocational Officer.

D. Eastman

MAY 3 1919

Capt. Howley,
O. I. C. Records.

Please pay to **Mr. D. Eastman, No 2510**
the sum of **eleven dollars and sixty six cents**
in payment of allowance for week ended this date
in connection with re-education.

\$11.66

Pension N11

W. W. Mitchell.
Vocational Officer.

D. Eastman

MAY 10 1919

Capt. Howley,
O. I. C. Records.

Please pay to Mr. D. Eastman No. 2510
the sum of Eleven dollars and sixty six cents
in payment of allowance for week ended this date
in connection with re-education.

\$11.66

Allowance \$11.66

W. H. Mitchell
Vocational Officer

D Eastman

Capt. Howley,
O: I. C. Records.

Please pay to D. Eastman, No 2510
the sum of ~~eight dollars and seventeen cents~~
in payment of allowance for week ended this date
in connection with re-education.

\$8.17

Pension \$15

W. T. Kell
Vocational Officer

Dan Eastman

MAY 31 1919

Capt. Howley,
O. I. C. Records.

Please pay to D. Eastman, No 2510
the sum of eight dollars and seventeen cents
in payment of allowance for week ended this date
in connection with re-education.

\$8.17

Pension \$15

W. Stechell.
Vocational Officer

D. Eastman

ST. JOHN'S, Apr 16th /19

Royal Newfoundland Regiment.

Billeting Account,

To W. D. Eastman

Billeting Soldiers as undermentioned

from Mar 24th /19 to Apr 16th /19

2510. W. D. Eastman 24 90

ACCOUNT	<u>B. M.</u>
CH. NO.	<u>16383</u>
INITIALS	<u>W. D.</u>
IND. STAMPS	_____
PAY STAMPS	_____
CH. LEAF	_____

Certified correct for \$ 24. 90

W. D. Eastman
Billeting Officer.

ST. JOHN'S, Apr 19 /19

Royal Newfoundland Regiment.

Billeting Account,

To Pte. D. Eastman

Billeting Soldiers as undermentioned

from Apr 16th /19 to Apr 21st /19

2510. Pte. D. Eastman 5 50

B. & M. E. W.
16582

J. C. R.

Certified correct for \$ 5.00

Abel Blouston

R. J. Eastman Billeting Officer.

JUN 14 1919

Capt. Howley,
O. I. C. Records.

Please pay to D. Eastman, No 2510
the sum of **eight dollars and seventeen cents**
in payment of allowance for week ended this date
in connection with re-education.

\$8.17

Pension \$15

D. Eastman

B. W. Nicholl
Vocational Officer

JUN 7 1919

Capt. Howley,
O. I. C. Records.

Please pay to D. Eastman, No 2510
the sum of ~~eight dollars and seventeen cents~~
in payment of allowance for week ended this date
in connection with re-education.

\$8.17

Pension \$15

D. Eastman.

B. W. Bell.
Vocational Officer.

JUN 21 1919

Capt. Howley,
O. I. C. Records.

Please pay to D. Eastman, 2510.
the sum of ten dollars and fifty cents.
in payment of allowance for week ended this date
in connection with re-education.

\$10.50

Pension \$15.00
Allowance 10.50

W. D. Nicholls
Vocational Officer.

D. Eastman

JUN 28 1919

Capt. Howley,
O. I. C. Records.

Please pay to D. Eastman 2510
the sum of ten dollars and fifty cents.
in payment of allowance for week ended this date
in connection with re-education.

Pension \$15.00
Allowance 10.50

G. W. Mitchell
Vocational Officer.

D. Eastman

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. F. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.
 (1941) W/5017/2134 1000m 6/15m 53 5/6

Forms
B. 121
2a

Number of Sheet First

Regiment of 1st Newfoundland

Signature of O. C. Company Allderman
Cpt.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<u>Eastman, D.</u>	Age on	<u>21</u> years - months	<u>Labourer</u>	
Joined		Place and Date of Enlistment	<u>St. John's</u> <u>Apr. 13. 16</u>	Religion	
Joined		Period of	<u>3</u> years (with Colours <u>23</u> years. with Reserve <u>36</u> years.)	<u>C. of E.</u>	
Joined		Place of Birth			<u>Newfoundland</u>

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<u>Avon</u>	<u>11.5.17.</u>	<u>Pte.</u>		<u>absent from Talk Roll call until 11.05 pm. 11.5.17.</u>	<u>Cpl. McPart.</u>	<u>4 days C.B.</u>	<u>12.5.17</u>	<u>Lt. S. Game</u>	<u>1st.</u>
<u>Ripon</u>	<u>18.1.18</u>	<u>Pte</u>		<u>Overstaying his sick leave from Talkon to 9.15 pm 19.1.18 (2 days)</u>	<u>W. Allen Cpl. OC</u>	<u>2 days S.C.B.</u>	<u>19.1.18</u>	<u>Major W. Allen</u>	<u>His 2 days pay by Pte. Allen</u>
<u>Highland Camp</u>	<u>6-4-18</u>	<u>"</u>		<u>Overstaying pass from midnight 2-4-18 until 8 P.M. 5-4-18</u>	<u>Sgt. Collins</u>	<u>30 days pay</u>	<u>6-4-18</u>	<u>Lt. Col. Barnes D.S.O.</u>	<u>30 days pay by Pte. Allen</u>
				<u>Demobilized 5/19</u>					

No. 7 COY. NORTHERN COMMAND DEPOT, RIPON, 20 FEB 1918

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

D 7510

DEMobilIZATION OF

Reg. No. *2510* Rank *Pte* Name *Eastman Daniel*
 Date of Enlistment *13-4-16* Address *St. John's* District *St. John's*
 Occupation *Lumberman* Classification for Discharge *10* Medical Category *5*
 Recommendation S.M.B. *permanent disability* Disability Rating *30% 6 months*
 Passed to Demobilization Officer with following documents:—

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

Date *14-4-19*

Jr O. C. Discharge Depot. *H. Mous. St.*

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am *not* in a position to resume civilian occupation.

D. Eastman

Particulars passed to Vocational Officer for information and action.

Date *14-4-19*

Attest: Louis Antier

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable

(b) Clothing Supplied

Attest: Louis Antier

Date

O i/c, Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *5169* to his home at *Clare* and Release Certificate No. *5169* issued.

Date *19-4-19*

J.A. Snowling
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 *5-11-19*

Date *14-11-19*

J.A. Snowling
Depot Paymaster.

Discharge approved for *21-9-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
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 *19-4-19*

J.A. Snowling
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

APR 21 1919

Date

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

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

Date *April 26/19*

J.A. Snowling
for O.C. Records

The Royal Newfoundland Regiment

CIVILIAN RE-ESTABLISHMENT ON DEMOBILIZATION

No. 2510 Rank Pte Name Eastman TJ
 Former Occupation Lumberman Address Gambo District Inverness
 Class B Medical Category E Disability Rating 30% 3mb

O.C. Discharge Depot.

Above noted man states he has no employment in prospect on his discharge. His personal wish is to obtain a position as Student. His case has therefore been referred this day to the Vocational Officer for action, and his discharge is therefore held in abeyance.

Date 14-4-19

Officer in Charge
 Demobilization Officer

To be forwarded Orderly Room in Duplicate.

Reg. No. 2510 Rank *ptw.* Name *Eastman, Dan*

Attested Address *Gambro.*

Allotment Allottee

Date of Allotment Returned from Overseas *24-5-19*

Returned on S.S. *Train* Cause *Discharge*

10.4.19. Rec. his. from the Army

APR 14 1919 ISSUED TO DEMOBILIZATION OFFICER

21.4.19. DISCHARGE APPROVED ON DEMOBILISATION.

DEPARTMENT OF VETERANS AFFAIRS
War Service Records

To Copy for H.O. FILE

Attention of

NAME EASTMAN, Daniel.

JUN 18 1962	
Referred to	_____
Checked to	_____
SERVICE	2510 WW1
NUMBER	ROY. Nfld. REGT. W.V.A. No. 49796

Ottawa Ont

Date June 15/62

G.P.C. No. 260107

NAVY

ARMY

X

R.C.A.F.

The DEPARTMENT has received information from

S.P.M.E. P.O. Box E. 5368 St. John's Nfld. June 12/62

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death June 8/62
Cause of Death _____
Place of Death General Hospital.

Name and Address of next of kin (if known) _____

Copies to: W.S.R.
V. I.
~~NAVY~~
~~ARMY~~
H.O.

} Destroy form if advice of death already received.

for
Chief, Central Registry

m j w y e l l

Department of Veterans Affairs

Ottawa 4,

19

TO Supervisor,
War Service Records, Ottawa.

Mark Your Reply:

For attention of

For attention of

SUBJECT

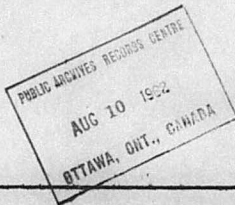
File No.

(1)

The Department is authorized to place a memorial on the grave of the above named. Therefore, will you kindly insert the particulars requested on this form and return it to this office.

Departmental Secretary.

- NFAD*
- (1) Service number *2510*
 - (2) Surname *EASTMAN*
 - (3) Christian names *Samuel*
 - (4) Date of Birth *7 Apr - 1895*
 - (5) Religion *Cofe*
 - (6) Unit of enlistment *Royal Nfld Regt*
 - (6a) Highest corres. rank *Pte*
 - (7) Units overseas *Royal Nfld Regt*
 - (7a) Highest corres. ranks *Pte*
 - (8) Rank on day of discharge *Pte*
 - (8a) Corresp. unit *-*
 - (9) Military honours *nd*



(2)

Departmental Secretary,
OTTAWA.

The particulars have been added to this form and it is returned as requested.

Date

for Supervisor, War Service Records.