



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 5333

Name

George Edgewood Meth

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

- |  |                                    |
|--|------------------------------------|
| 1. What is your name? .....  | 1. <u>George Edgewood Meth</u>     |
| 2. What is your full Address? .....  | 2. <u>Wedge Pt Cove</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>Fisherman</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 .....<br>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, George Edgewood Meth, 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.

George Edgewood Meth SIGNATURE OF RECRUIT.  
W. R. [unclear] Signature of Witness.

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

I, George Edgewood Meth, 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 answered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at Wedge Pt Cove on this 22 day of May 1918.

Signature of Attesting Officer W. R. [unclear] Lieut.

### CERTIFICATE OF APPROVING OFFICER.

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

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

Date May 22 1918  
 Place Wedge Pt Cove } Approving Officer.  
W. R. [unclear]

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

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

# DESCRIPTIVE REPORT ON ENLISTMENT

5333

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

Name George Edgcombe  
 Apparent age 21 year          months. Height 5 feet 5 1/2 inches  
 Chest Measurement { Girth when fully expanded 37 inches  
 Range of expansion 4 inches  
 Distinctive marks         

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Walter Edgcombe  
Oakfield Cove | Relationship Brother  
C. B. Particulars as to Marriage

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

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

## Particulars as to Children

Christian Names	Date and Place of Birth

## STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards which engagement reckons from <u>23-5-18</u>									
Joined at <u>M. S. Sars</u> on <u>May 23-1918</u>									
<u>Discharged August 13/1919</u>									
<u>Embarked M. S. Sars S. I. Colchester to Halifax N.S. 22-7-18.</u>									
<u>Wife for demobilization 24-6-1919</u>									
<u>Arrived Newfoundland 1-7-1919</u>									
<u>Demobilization Halifax 3-8-1919</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>3-8-1919</u> (date of discharge)									
Pensions " " " " " " " " " " " "									

1 years 73 days

C.R. 5333

Extract from Daily Orders Part II Royal Newfoundland Regt.  
Depot St. John's dated Aug. 11th 1919.

The discharge of the undernoted on demobilization has been  
CONFIRMED by officer i/c Records from noted date  
3-8-19.

5333, Pte. G. Edgecombe.

BLANDFORD

C.R. 5333

Extract from Daily Orders part II, Unit the Royal  
Newfoundland Regiment dated July 21st. 1919.

The discharge of the undernoted on demobilization has  
been APPROVED by O. C. Doschage Depot on 20-7-19.

5333 Pte. G. Edgecombe.

C.R. 5333

Extract from Daily Orders for 5th Div. The Royal Nfld.

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

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

5333 Pte. E. Edgecombe.

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

Extract from Daily Orders for 5th Div. The Royal Nfld.  
Regt. St. John's, July 3rd, 1919.

C.R. 5333

Extract from Daily Orders by Major H.S. Sullivan,  
Commanding Newfoundland Forestry Companies, 6-9-18.

6-12-18

The underectioned having reported for duty from  
the 2nd Bn. Royal Nfld. Regt. is attached to the strength  
for rations, from this date to "B" Company.

5333 Pte. G. Edgecombe.

C.R. 5333

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

#5333 Pte. George Edgcombe.

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

C.R. 5333

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

The following man embarked for overseas on H.M.S.  
"Columbella" July 22, 1918

#5333 Pte. George Edgcombe.



H. Edgercomb

C.R. 5333

1890





No. 18523/2049

N.F.P./79.

From: NEWFOUNDLAND CONTINGENT

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

Officer Commanding,  
2/Bn Royal Nfld. Regt.  
Winchester.

16th November 1918

Subject: 5333, Pte. G. Edgecombe, D

With reference to the following telegram (9818 ) from the Hon. Minister of Militia, received

Pay to 5333 Edgecombe £3:2:0

Draft £ 3:2:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

*M. Hunt* *Offit*

Chief Paymaster & O. i/c Records.

Nov. 18th 1918

Receipt hereunder

*Ok*  
LIEUT. COLONEL,  
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.  
Officer Commdg. 2nd Batt'n  
Royal Newfoundland Regiment

Received the sum of Three pounds two shillings on account of cable remittance from Newfoundland.

G. L. Edgecombe

No. 5333 Rank Pte.

Witness: *P. L. Carter, Pte.*

No. 2761/366.

N.F.P./79.

069387

27 FEB 1919

FROM: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,  
2nd/Bn. Ryl Nfld Regt.  
Winchester.

17th February 1919

Feb 22<sup>nd</sup> 1919

5333. Edgecombe Pte. G

With reference to the following telegram from the Minister of Militia / / ( 31. )

"Pay to-5333. Edgecombe. G

£5.3.0.

Cheque £ 5.3.0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

*A. S. Munroe Maj.*

Chief Paymaster & O. i/c Records.

Receipt hereunder.

*J. J. Barrin*

LEUT. COLONEL  
OFFICER COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

Received the sum of Five pounds

£5-3-0 three shillings in respect of

telegraphic remittance from the Minister of Militia.

*G. Edgecomb*

No. 5333 Rank Pte

Witness *P. H. Munroe Lieut*

No. 4856/711

N.F.F./79.

From. NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding.  
2/Bn. Royal Newfoundland Regt.,  
Hazeley Down Camp,  
Winchester.

27th March 1919

Apr. 4<sup>th</sup> 1919

5333 Pte. Edgecombe G.

Receipt hereunder.

With reference to the following telegram from the Minister of Militia / / ( 99 )

*L. C. Karnt* LIEUT. COLONEL,  
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.  
Officer Commandg. 2 Batt'n.

"Pay to- 5333 Edgecombe  
£5. 3. 0.

Received the sum of £5.3.0  
*Five pounds three* in respect of  
telegraphic remittance from the  
Minister of Militia.

Cheque £5. 3. 0. is enclosed.  
for payment to this Soldier.  
Kindly obtain his receipt  
hereon.

*G. Edgecombe* <sup>his work</sup> a G.W.P.  
No. 5333 Rank PLS

*A. J. ...*  
Chief Paymaster & O. i/c Records.

Witness *Geo Perry*

No. 8457/1587

C

100167

N.F.P. No.

From: NEWFOUNDLAND CONTINGENT

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

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

JUN 1919

11th June 1919

June 15<sup>th</sup> 1919

5333, Pte. G. Edgecombe

Receipt hereunder.

With reference to the following telegram from the Minister of Militia / / 19 ( 225 ):

*S. J. Bastin*

LIEUT. COLONEL.

COMMANDING 2<sup>ND</sup> BN. ROYAL NEWFOUNDLAND REGT.

"Pay to-

5333 Edgecombe £7:4:0

Received the sum of £.7.4.0

Cheque £ 7:4:0 is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

Seven Pounds four Shillings in respect of telegraphic remittance from the Minister of Militia.

G. Edgecombe x (H. W.)

Chief Paymaster & O. i/c Records.

No. 5333 Rank Pte.

Witness: H. White

Edgecombe, G.

5353

Ray Sept.



August 4th 1919.

#5333, Pte. G. Edgewcombe.

Ochre Pit Cove.

Dear Sir:

Enclosed please find Discharge Certificate # 3480.

Yours truly,

Capt. & Quymaster

R3/

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 333 Rank Pte Name Edgcombe G  
 Intended place of residence Behn Port Looe

2. Occupation Fisherman  
 Classification of soldier A Medical Category AI

3. The above named man is discharged in consequence of

**DEMOBILIZATION**  
**Eligible for War Service Gratuity**

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

Place, ST. JOHN'S

[Signature]  
 Commanding Discharge Depot  
 The Royal Newfoundland Regiment

Date JUL 18 1919

## CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place, ST. JOHN'S

Geo. Edgcombe  
 Signature of soldier  
[Signature]  
 Signature of witness

Date JUL 18 1919

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

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

Place, ST. JOHN'S

Geo. Edgcombe  
 Signature of soldier  
[Signature]  
 Signature of witness

Date JUL 17 1919

## STATEMENT OF SERVICE

7. Enlisted for service 23-5-18 No. of days on Military  
 Discharged from service JUL 20 1919 Plus 14 days Service 438

## APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S

[Signature]  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment

Date JUL 20 1919

## CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place, ST. JOHN'S

[Signature]  
 Officer in Charge of Records  
 The Royal Newfoundland Regiment

Date August 23/1919

ARB 2179 / 2480

10  
20  
31  
3

# The Royal Newfoundland Regiment

Class for Demobilization:—

*A*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

*18.7.19*

Regimental No. *5333*

Name

*Edgecombe S. H.*

Address

*Ulma Pit Cove B. S. N.*

Present Medical Category

*A-1*

Recommended for:—

(a) Immediate discharge

(b) ~~Standing Medical Board~~

Members of Board

*A. R. Lodge Capt.*  
O. C. Discharge Depot.

*R. Paterson*  
Senior Medical Officer

*Geo. Borden*  
M. O. Depot

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 5323 Rank RPL Name Edmund B  
 Date of Enlistment 23.5.18 Address Del. P. Co. District B. A. 7  
 Occupation Footman Classification for Discharge 2 Medical Category A. 3  
 Recommendation S.M.B. .... Disability Rating .....  
 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.....		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.....			" 6.....	
B 179c.....	B 120.....	M 93.....				

Date July 1919 ..... O. C. Discharge Depot St. John's

### PARTICULARS FOR DEMOBILIZATION

#### i. Civil Re-Establishment.

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

*W. J. ...*  
*Genl Edgworth*  
*mark*

Particulars passed to Vocational Officer for information and action.

Date.....

#### a. Clothing.

Certified that Clothing Regulations have been complied with—

(a) Clothing Allowance payable #600 .....

(b) Clothing Supplied all .....

Date 18-7-19 .....

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. B2466 to his home at ..... and Release Certificate No. 3692 issued.

Date 18-7-19 ..... Ambleton  
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 3-8-19

Date 18-7-19 ..... #111111  
Depot Paymaster.

Discharge approved for 20-7-19 .....

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med	D.F. 1
E 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 18-7-19 ..... Ambleton  
Demobilization Officer.

APPROVED.

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

with following additional documents.

**Eligible for War Service Gratuity**

Date JUL 20 1919 ..... L. R. COOPER, CAPT.  
O. C. Discharge Depot.

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

## Civil Re-establishment Committee



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

To resume former Occupation.

Edgecombe. Is

Signature of Man.

*[Handwritten Signature]*

Reg. No. 5333

Signature of the Vocational Officer or his Representative.

Place

Date

18 7-19

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

# MEDICAL HISTORY

Surname Edgecombe OF Christian Name George Weldon

Table I.—GENERAL TABLE.

Birthplace:—Parish St. John's County Nfld

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	33	May 1918		191
	at	St. John's	at	
Declared Age	21	years		days
Trade or Occupation	Fisherman			
Height	5	feet 8 1/2 inches		
Weight		140 lbs.		
Chest Measurement	Girth when fully expanded	37 inches		
	Range of Expansion	4 inches		
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	1 Scar			
When Vaccinated	7/12/20			
Vision	R.E.—V=	69	R.E.—V=	
	L.E.—V=	69	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	Lammert Peterson			
(Rank)	Major			
	Medical Officer.			Medical Officer.
Enlisted	at	St. John's	at	
	on	23 day of May 1918	on	day of 191
		Corps.		Corps.
		Regtl. No.		Regtl. No.
Joined on Enlistment	The Royal 1333			
	Nfld Regt.			
Transferred to				
Became non-effective by				
(Signature)	on	day of 191	on	day of 191
(Rank)				







## 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 *Edgcomb, George Weldon*

Regiment from which discharged *Royal Newfoundland*

Regimental number *5338.*

Intended address *Beche Pit Cove Bay de Verde*

Height on discharge *5 Feet 5/4*

Color of hair on discharge *Black*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks *—*

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 *Beche Pit Cove 23-5-1897*

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)

*George W. Edgcomb*  
Rank *Private* (Rank)

Station **ST. JOHN'S.**

Date

*17-7-19*  
*Witness J. Edwards*

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.

Date

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

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

1. Unit and Corps. *Royal West Kent* 7. Former Trade or Occupation } *Teatime*
2. Regtl. No. *1333* 3. Rank. *plc* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Edgecombe* *George W.* (a) Former Regts. or Corps with Regtl. Nos.  
(Surname) (Christian Names)
5. Age last birthday. *31*
6. Posted for duty on..... at.....  
in category (or grade).....
8. If the disability is an injury it was caused  
(a) in action (b) on field service  
(c) on duty (d) off duty? (b) Date of Discharge;  
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—  
(a) When (d) Particulars of Pension or Gratuity  
(b) Where (if any)  
(c) Opinion of Court

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

### Statement of Case.

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

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

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

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

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

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

*The complain of his disability*

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

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

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

*Repatriation*

*W. Procunier, Capt. R.A.M.C.*

Station *Angely, India*

Date *9/1/19*

Medical Officer in charge of case.

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

Specimen

Defect in products  
not improved. Please.  
Rec. L. H. B. Co. - Bn.

W. H. B.

NO. & RANK <i>5333 Pte.</i>				DATE OF EXAM: <i>4-10-18</i>	
NAME <i>Edgcombe G.W.</i>				DATE OF ISSUE: <i>11-10-18</i>	
CORPS <i>R. Field Art.</i>				OPHTH. CENTRE: <i>71</i>	
VISION W/OUT GLS	SPH.	CYL	AXIS STANDARD NOTATION	VISION WITH GLS	FRAME No: (OR MEASUREMENTS)
<i>60</i>	<i>-6.00</i>	<i>-</i>	<i>-</i>	<i>60</i>	
<i>60</i>	<i>-6.00</i>	<i>-</i>	<i>-</i>	<i>60</i>	
SIGNATURE OF M.O. <i>R. Lockhart</i>				OPTICIAN'S INITIALS <i>W.C.</i>	

" OPHTHALMIC DEPARTMENT "

Military Hospital,  
Winchester.

*4-10-18*

To :-

Medical Officer i/c.

*R. F. N. L. D.*

*5333 Pte. ~~Smith~~ R. Edgcombe G.W.*

Please cause this man to attend here in six days' time (Sunday excepted) for spectacle fitting. He should bring with him Army Book 64 and Medical History Sheet for the necessary entries to be made therein.

*Pres for Pay  
Book please*

*R. Lockhart*  
*Edgcombe*  
Ophthalmic Surgeon.

August 9th 1919.

Mr. G. Edgcombe,  
Oohre Pit Cove. C.B.

Dear Sir:

Referring to your application, I enclose  
cheque for seventy dollars (\$70.00) being amount  
of first payment due you on account of war ser-  
vice gratuity.

Yours truly,

Capt. Paymaster.

RS/.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th. 1919.

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

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

- Christian name..... *A* ..... 2. Surname..... *Cajicombe* .....
3. Rank..... *Pte* ..... 4. Regtl. No..... *S. 333* .....
5. Address in full to which future payments of gratuity are to be forwarded..... *Beche Pit Cove, CB* .....
- .....
6. Date of enlistment in the Regiment..... *May 2/18* .....
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge..... *No* .....
8. Relationship of such dependents..... *✓* .....
9. Address in full of such dependents..... *✓* .....
- .....
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *✓* .....
11. Were you on active service only in Hfld. If so, give dates and particulars of such service..... *✓* .....
- .....
12. Give total length of time which you served on active service, whether in Hfld. or Overseas..... *Fourteen months* .....
- ..... 1.  $\frac{3}{4}$  .....

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.

.....

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

..... no .....

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

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

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

..... no .....

19. Are you now serving in the R.C.A.F.? If not give? - (a) Date of discharge July 3/19 (b) Reason for discharge Demob

.....  
20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service.

..... England .....

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

.....  
And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under Oath.



Signature of Applicant: *W. E. DeLoombe*  
 Place of Residence: *Delmar Por Conn. B.N.V.*  
 Declared before me at: *St Johns*  
 This *18* day of *July* 19...*19*....

Signature of Barrister of the *John McCarthy*  
 Supreme Court, Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of affidavits.

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



ST. JOHN'S,

JUL 18 1919

# Royal Newfoundland Regiment.

Billeting Account,

To Pte G Edgcombe

Billeting Soldiers as undermentioned

from

July 1/19 to July 16/19

5333 Pte G Edgcombe 16.60

ACCOUNT	<u>B + m</u>
CH. NO.	<u>3323</u>
IND. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

Certified correct for \$ 16.60

A. M. Bloush

Billeting Officer.

G. S. Edgcombe (S.G.P.)

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

OCT 15 1921

1921.

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

George Edgecombe

in respect of his service as No. 5333 Rank Pte.

Name G. Edgecombe Royal Nfld. Regt.

Receipt of the same should be acknowledged hereon.

Received October 20<sup>th</sup> 1921.

Signature George Edgecombe

Date October 29<sup>th</sup>

Address Deane Pit Lane.

[P.T.O.]

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39.

Regiment of Royal Newfoundland Number of Sheet 011  
Signature of O. C. Company C. B. Dricks Lieut

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay		
No.	<u>5333</u>	Age on	<u>21</u> years	<u>Probleman</u>			
	<u>Edgecombe Rd</u>	months		<u>Method</u>			
Joined	Date	Place and Date of Enlistment	<u>St John's</u>	Religion			
Joined	Date		<u>23 5 18</u>	<u>Method</u>			
Joined	Date	Period of	} with Colours <u>1 1/2</u> years.	Place of Birth	<u>St John's</u>		
Joined	Date						

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<u>Demobilized</u>	<u>St John's</u>	<u>3 5/19</u>			

To be carried over.

Δ-1333

Demobilization Form

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 5333 Rank Plk Name Edgewood B  
 Date of Enlistment 23 5 18 Address Ochre Plk Ave District B.A.7  
 Occupation Fisherman Classification for Discharge E Medical Category AI  
 Recommendation S.M.B. \_\_\_\_\_ Disability Rating \_\_\_\_\_  
 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		Board 1st	" 2	
B 178a	1 D 400A	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	B 103	ME 2			" 6	
B 179c	B 120	M 93				

Date July 17/19 1 Mins. H.  
 O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am \_\_\_\_\_ in a position to resume civilian occupation.  
Edgewood B  
mark  
W. J. ...

Particulars passed to Vocational Officer for information and action.

Date \_\_\_\_\_

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable. #6000
- (b) Clothing Supplied Chubbuck

Date 18-7-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 82466 to his home at Oshe Fort Ave and Release Certificate No. 3692 issued.

Date 18-7-19 *[Signature]*  
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 3-8-19

Date 18-7-19 *[Signature]*  
Depot Paymaster.

Discharge approved for 20-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P136	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 18-7-19 *[Signature]*  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

**Eligible for War Service Gratuity**

Date JUL 20 1919 *[Signature]*  
**L. R. COOPER, CAPT.**  
O. C. Discharge Depot.

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

Date Aug 11 19 *[Signature]*



Reg. No. *A333* Rank *PL* Name *Edgewood, Geo.*  
Attested ..... Address *Ochs 1st Co. Cal.*  
Allotment ..... Allottee ..  
Date of Allotment ..... Returned from Overseas *JUL 1 1919*  
Returned on S.S. *Cassandra* Cause *Sickness*

*18 7 19*  
*20 7 19*

**PASSED TO DEMOBILIZATION OFFICER**  
**NOT TO BE RE-CLASSIFIED**

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

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

1. Unit and Corps..... *Royal Newfoundland* } Former Trade } *Luberman*  
 2. Regtl. No. *4333* 3. Rank..... *Plt* } or Occupation }  
 4. Name..... *Edgcombe Geo. W.* } 7a. If the soldier claims previous service in }  
 (Surname) (Christian Names) } Army, he should state—  
 (a) Former Regts. or Corps ; }  
 with Regtl. Nos. }  
 5. Age last birthday... *21*.....  
 6. Posted for duty on..... at.....  
 in category (or grade).....  
 8. If the disability is an injury was it caused  
 (a) in action (b) on field service  
 (c) on duty (d) off duty ? (b) Date of Discharge ;  
 (c) Cause of Discharge.  
 9. If a Court of Inquiry was held on an injury state :—  
 (a) When (d) Particulars of Pension or Gratuity  
 (b) Where (if any)  
 (c) Opinion of Court

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

### Statement of Case.

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

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

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

*nil*  
*nil*  
*nil*

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

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

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

*No Complaint of no Disability*

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

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

*Repatriation*

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

*W. R. Pennington, Capt. R. A. ...*

Station *Ragley Down*

Date *8/4/19*

Medical Officer in charge of case.

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