



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 3940 Name Erastus Elliott Corps C of S.

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

- |  |  |
|--|--|
| 1. What is your name? .....  | 1. <u>Erastus Elliott</u> .....            |
| 2. What is your full Address? .....  | 2. <u>Locks Cove</u> .....                 |
| 3. Are you a British Subject? .....  | 3. <u>yes</u> .....                        |
| 4. What is your age? .....   | 4. <u>19</u> Years — <u>—</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 .....                           |
|  | { 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> .....                       |

THE DURATION OF THE WAR

I, Erastus Elliott 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.

Erastus Elliott ..... SIGNATURE OF RECRUIT.  
Brendan Bennett ..... Signature of Witness.

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

I, Erastus Elliott 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 Locks Cove on this 28 day of August 1917.  
Erastus Elliott 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 ..... 1917 } 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) .....

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Ernesto Elliott  
 Apparent age 18 years — months. Height 5 feet 6 inches  
 Chest Measurement { Girth when fully expanded 36 1/2 inches  
 Range of expansion 4 1/2 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Benjamin Elliott  
Locks Cove, Blue Bay | Relationship Father  
 Particulars as to Marriage

(b) Christian and Surname of Woman to whom married, and whether spinster or widow. (d) Place and date of marriage.  
 (c) Present address. (a) 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 limited engagement reckons from _____									
Joined at _____ on _____									
Total Service forfeited as above.....									
Total Service towards Engagement to _____ [date of discharge] _____ years _____ days									
" " Pensions " _____ [ " " ] _____ " _____ "									

3940

# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 3940 Name Erastus Elliott Corps C of I

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

- |  |                                 |
|--|---------------------------------|
| 1. What is your name? .....  | 1. <u>Erastus Elliott</u> ..... |
| 2. What is your full Address? .....  | 2. <u>Locks Cove</u> .....      |
| 3. Are you a British Subject? .....  | 3. <u>yes</u> .....             |
| 4. What is your age? .....   | 4. <u>18</u> Years .....        |
| 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 .....                |
| 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? ..... | { Corps .....                   |
|  | { II. <u>yes</u> .....          |

I, Erastus Elliott 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.

Erastus Elliott SIGNATURE OF RECRUIT.

g. 29-8-17

Brendan Sinnott Signature of Witness.

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

I, Erastus Elliott 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 28 day of August 1917

Signature of Attesting Officer Wm. H. R.

### † 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 ..... 191 .....

Place ..... } Approving Officer.

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

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

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Erastus Elliott  
 Apparent age 18 years — months. Height 5 feet 6 inches  
 Chest Measurement { Girth when fully expanded 34 1/2 inches  
 Range of expansion 4 1/2 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Benjamin Elliott  
Sacks Cove Bare Bay | Relationship Father

### Particulars as to Marriage

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

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

### Particulars as to Children

Christian Names	Date and Place of Birth

## STATEMENT OF THE SERVICES

Corps in which served	Rgt. or 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 limited engagement reckons from <u>28-8-17</u>									Lance <u>Sept 8-12-17</u>
Joined at <u>St John's</u> on <u>August 28-17</u>									
		<u>Discharged. St John's Jan 13/1919</u>							
		<u>Embarked St John's N.S. Nov 12-17</u>							<u>Embarked for R.C.A. 2-7-18</u>
		<u>Disembarked France 5-7-18. Joined 150th in the field 6-7-18. Admitted 44 Co. 150th 17-10-18. Admitted 2nd Gen. St. John's 20-10-18. Transferred to Egypt 5-11-18. Admitted 3rd Lt. N.S. 5-11-18. Posted to Newcastle 10-12-18.</u>							
		<u>100 lbs for demobilization 12-12-18. Arrived Newfoundland 21-12-18.</u>							
		<u>Demobilization St John's</u>							<u>13-1-19</u>
Total Service forfeited as above.....									

Total Service towards Engagement to 13-1-19 (date of discharge) 1 years 139 days  
 " " Pensions " " " " " " " " " " " "

44 Livingstone Rd.

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

# MEDICAL HISTORY

OF

Surname Wright

Christian Name Erastus

Table I.—GENERAL TABLE.

Birthplace:—Parish Slave Bay County St Georges.



	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>28</u> day of <u>Aug</u> 191 <u>7</u> at <u>Headquarters</u>		on _____ day of _____ 191____ at _____	
Declared Age	<u>18</u> years — days		years	days
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet <u>6</u> inches		feet	inches
Weight	<u>116</u> lbs.		lbs.	lbs.
Chest Measurement	Girth when fully expanded... <u>34 1/2</u> inches			inches
	Range of Expansion... <u>4 1/2</u> inches			inches
Physical Development				
Vaccination Marks	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)		(a)	
(a) Marks indicating congenital peculiarities or previous disease				
(b) Slight defects but not sufficient to cause rejection				
Approved by (Signature)	<u>Lammie Paterson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St Johns</u> on _____ day of _____ 191____		at _____ on _____ day of _____ 191____	
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment				
Transferred to	<u>1st G.D. Coy. Fd. D. 3940</u>			
	<u>ROYAL NEWFOUNDLAND REGIMENT.</u>			
Became non-effective by	on _____ day of _____ 191____		on _____ day of _____ 191____	
(Signature)				
(Rank)				

Table II.—Only for admission to hospital or to the sick list in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In case of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
	1	3	18	26	MAR	1918	Measles	25	Recovered. Discharged to duty	H. E. Lawrence Capt. R.A.M.C.
3 LONDON GENERAL HOSPITAL WANDSWORTH.	5	11	18	7	12	18	Influenza.	32	Reported sick at Pres. 17.10.18. No acute symptoms when admitted here. Slight cough.	S. H. M. M. G. Cap. R.A.M.C.







C.R. 3940

Extract of Daily Orders Part II, Depot, St. John's dated  
Jan. 14th 1919.

~~The~~ Discharge confirmed on demobilization.

The discharge of the undernoted on demobilization has been  
confirmed by the Officer i/c Records on noted date.

3940 Pte. Erastus Elliott.

Discharged 13-1-19

C.R. 3940

Extract of Daily Orders Part II, dated Jan. 3rd 1919.

The undernoted man's discharge on Demobilization has been approved by O.C. Discharge Depot on noted dates. He is removed from Depot Strength and transferred to Discharge Depot pending confirmation by Officer i/s Records.

3940 Pte. E. Elliott.

Discharged 30-12-18

C.R. 3940

Extract from Medical Board held on Thursday December 25th,  
1918.

3940 Pte. Elliott, E.

Recommended Discharge as Permanently Unfit.

C.R. 3940

Extract from Medical Board held on Thursday December 26th,  
1918.

3940 Pte. Elliott, E.

Recommended Discharge as Permanently Unfit.

C.R. 3940

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

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

#3940 L/C. E. Elliott.

C.R. 3940

Extract from Nominal Roll discharged from 3rd L.G.H. on  
7-12-18 and sent to 2nd Batta. Winchester for immediate  
repatriation in accordance with arrangements made by  
Major Finewell. 17 Dec. 1918.

3940 B/6pl. E. Elliott.

C.R. 3940

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

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#3940 L/C. E. Elliott.

C.R. 3940

Extract from Daily Orders part II, Depot Winchester by Lieut  
Col., B. J. BARTON, D. S. O. Officer Commanding 2nd., Battalion  
of the Royal Newfoundland Regiment. 10-12-18

The undermentioned having reported back from the 1st., Battalion  
is taken on the strength and posted to "H" Company. DEC-27

3940 L/C. E. Elliott.



C.R. 3940

Extract from Telegram from Synoptical, dated Nov. 20th., 19-18

43940 ELLIOTT.

IN ANSWER YOUR TELEGRAM NOV. 19th., /18  
PROGRESSING FAVOURABLY.

BC.

C.R. 394<sup>o</sup>

Nov. 21st. 18

Mr. Benj. G. Elliott,  
Lock's Cove, Hare Bay,  
St. Barbe.

Dear Sir:-

I beg to inform you that additional information has been received to-day by this department through the Visiting Committee of the Newfoundland War Contingent Association, ~~in~~ the effect that your son, No. 3940, I/Cpl. Erastus Elliott, is now progressing favourably.

Yours faithfully,

Lieut. Col.,  
Chief Staff Officer.

C.R. 3940

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

---

TO ENGLAND.

#3940 L/C. E. Elliott.

5/11/18.

C.R. 3940

Form No. 15

# NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 26 Sent by \_\_\_\_\_ Rec'd by \_\_\_\_\_ Check 15/- No. \_\_\_\_\_

Place from \_\_\_\_\_

Rawlins Cross  
NOV 18 1914

To \_\_\_\_\_

*W. G. Bennett  
St. John's Nfld*



Will you please inform  
me how my son is  
Erastus Elliott No 3940  
Anxious to know.

Mrs Ben Elliott  
Locks Cove Harb Bay St Barbe

Co. No. 3940

# 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	Red	By	Sent	by	Check
-------------	-----	----	------	----	-------

Dated

Nov. 8th, 1918

To

Mr. Benjamin Elliott, Lock's ~~Head~~ Bay St. Barbe

Regret to inform you that Record Office, London, officially reports No. 3940, L/Corpl. Erastus Elliott, at 3rd London General Hospital Wandsworth suffering from influenza.

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

J. R Bennett

Chgo Dept of Militia.

Minister of Militia.

FOR TYPEWRITER

C.R. 3940

EXTRACT FROM TELEGRAM FROM SYNOPTICAL LONDON DATED NOV. 7th., 1918.

WAMDSWORTH INFLUENZA L/CPL. 5940 ELLIOTT.

C.R. 3940

Extract from Nominal Roll of Sick and Wounded from the France  
Expeditionary Force to the 3rd., L.G.H. Hospital, admitted 5-11-18

#3940 L/C. E. Elliott.

INFLUENZA.

C.R. 3940

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

MACHINE GUN CORPS.

LIST NO. H.A. 30547.



ADMITTED 6 STY. H. PREVENT 17 OCT. 1918.

133966 Pte. Johnson A. .... 17/MGC Bn. .... NYD, N. Mild.

DIS EX 6 STY. H. PREVENT 17 OCT. 18.

9049 Pte. Barclay G. .... 2/Bn. MGC. .... Dental.

ADMITTED 2 CAN. STY. H. OUTREAU 20 OCT. 18.

162997 Pte. Ward T. H. .... 62 Bn. MG. ex 84 Trn. Res. Bn. ... Influenza Sev.

94490 Pte. Wilson C. .... 30/Bn. MG. .... Myalgia Sev.

156048 Pte. Wilson W. T. .... 104/Bn. MGC. .... Scald Buttock L. Sev.

94246 L/C. Brooke R. S. .... 30/Bn. MGC. .... Laryngitis Sev.

123748 Pte. Joy B. .... 30/-do- .... Myalgia Sev.

162406 Pte. Lucas A. C. .... 36/Bn. MGC. x 3/Lond. .... Paratitis Sev.

65457 Pte. Abbott H. W. .... 51/MGC. x 6/KRRC. .... Abscess Leg R. Sev.

ROYAL AIR FORCE.

LIST NO. H.A. 30547.

DIS TO UNIT HERTFORD B. H. HARRIS 7 OCT. 18.

47891 Pte. Smith W. .... RAF. Paris Detach. .... Boils Mild.

ADMITTED HERTFORD B. H. PARIS 18 OCT. 1918.

16561 1/AM. Green ..... RAF. 3/ASD. .... Influenza Mild.

218251 1/AM. Leader J. .... R.F. Paris Dt. .... -do-

NEWFOUNDLAND CONTINGENT.

LIST NO. H.A. 30547.

ADM. 2 CAN. STY. H. OUTREAU 20 OCT. 18.

3940 L/C. Elliott E. .... 1/R. Newflnd ..... Diarrhoea Sev.

2080



C.R. 3940

Extract from ~~Substitution~~ Nominal Roll, embarked St. John's for Overseas  
December 11th 1917.

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#3940 L/C E. ELLIOTT.

C.P. 3940

Extract ~~Statement~~ of Nominal Roll to B.M.F. embarked  
Folkestone 2-7-18

# 3940 L/Cpl. E. Elliott.

3940

C.P.

Extract from Daily Orders Part 11 Unit The Royal

Mfld. Regt., St. John's, Dec. 8th, 1917.

3940 Pte. E. Elliott.

To be L/Corpl. from Dec. 8th, 1917.

C.R. 3940

Extract from Daily Orders Part 11 Unit The Royal Nfld.  
Regt., St. John's, Sept. 4th, 1917.

3940 Pte. G. Elliott.

Attested Aug. 28th, Correction Part 11 Orders dated  
Aug. 28th.

E. Elliott

3940.

~~P. + P. U~~

E. Elliott

3940.

~~P. + P. U~~

TO, - The Chief Paymaster,  
Royal Newfoundland Regiment,  
5A Victoria Street,  
London, S.W.

Sir:-

Please charge the amounts set opposite my name to my account and pay it to the N.W.S.A. "Prisoners of War Fund" in quarterly instalments for the period of one year,

Commencing on the 1st July 1918.

Regtl. No.	Rank	Name	Amount	Signature:
3940	L/c	Elliott E.	£2 50	

I have the honour to be, Sir,  
~~Yours faithfully,~~  
Your obedient servant,

*E Elliott*

Date

*28-6-18*

19863/127

Red Cross  
Esher.

5th December 8

3940

L/Cpl.

E. Elliott

1:0:0

*cheque no 11154*

*Date 5-12-18*

*P.P.*



O.K. f 1-0-0 M.R. 4/12/18

Red + Hospital  
10462  
Surrey

DEC 1

The Chief Paymaster  
M.R. & Record Off.  
58 Victoria St  
London

19863/127  
5-12-18

3-12-18

Please pay to ~~#~~ 3940. ~~Def~~ Clerk  
the sum of £1 (one pound) and deduct  
same from account

Approved H. Talbot

19863/127

pd.

TELEPHONE:  
BATTERSEA 3035.

THIRD LONDON GENERAL HOSPITAL,  
WANDSWORTH, S.W. 18.

To chief paymaster  
of Royal Army Medical Corps  
pay to ~~AKC~~ regt

# 3940 L/C C Elliott

the sum of (one pound)

and request

15 NOV 1918

WANDSWORTH, S.W. 18.

from account

15/11/18

S. [Signature]

Subscribed by Capt R. R. [Signature] O.R. £1-0-0

m R. 15/11/18

Receipt No

220

9769  
15/11/18

No. 3940 Rank Pvt. Name E. Elliott

Pay	F.A.	Wkg	Total	N.E.P/33
105	10		115	CH
Less Allotment			60	
Net Rate			55	

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£ s d		
						From	To					
Balance					Balance		5/7/18					1 8 10
Acquittance Rolls		4	0	8	Pay @ Net Rate	6/7/18	9/12/18	157	55	86	35	17 14 10
Hospital Advances		1	7	0								
A.B. 64.												
P:&R.O. Payments		4	0	0								
<i>Other Stoppages</i>				4	<del>£ 9.15.8</del>							
Cash	1025/3	9	12	8								

£ 19-3-8 ✓

CH  
9-12-18  
£ 8.0 ✓  
Cash 1025/3

LAST PAY CERTIFICATE

OFFICE COPY

To be rendered for all ranks on discharge, transfer to other Units or on return to Newfoundland in accordance with C.L. 19, 23/5/17.

Regt No. 5940 Rank L/Cpl. Name Elliott E. Unit Royal Nfld. Regt. who was depatriated

Newfoundland on 12 12 18 Authority Draft 79 Cause

RECEIPTS				PAYMENTS				GR.							
Balance b/f from 7/12/18 Allocated 5 days @ 60 3 00 Cash Payments: V.7102 Other Debits				4	6	12	4	5	25	50	3	75	1	5	7
Other Credits: Total Credits				1	0	4							1	5	7
Balance due to Paymaster				1	5	7							1	5	7

*Copy sent  
 Prof Mr 1355/1  
 21-1-19*

CHECKED  
 18/1/19  
 10

8/12/18 TO 12/12/18

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

and in therefore subject to amendment if and as may be found necessary.  
 Pay & Record Office, London,  
 8.1.19  
 Chief Paymaster & O. i/c Records.  
 London to 8/1/19



**1ST. NEWFOUNDLAND REGIMENT**

**ALLOTMENTS**

I, Erastus Elliott, Regl. No. 3920

hereby agree, until further notification by me, and in similar official form to make an Allotment of Twenty Dollars and 60 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup>/<sub>or</sub> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup>/<sub>or</sub> Persons concerned, viz.:

November 1917  
Allotment begins

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3707	Wife	Elizabeth Elliott	Locks Cove Sand Bay St. George's Bay	60
Total Allotment, \$				60

**NOTE.**—This form must be completed by the Officer Commanding Company, signed by the Volunteer, countersigned by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

(Sig.) W. J. [Signature]  
 Officer Commanding  
 Company  
M. Stone  
Oct 30<sup>th</sup> 1917

(Sig.) Erastus Elliott  
 (Rank) 76



Paymaster  
Royal Field. Regt.

Sir:-

Please let me have  
the sum of £ 7 and change  
to my account.

3940 Pte. A. Cramm.

O.K. £ 7-0-0

W.R. 2/14/19

Receipt No. 2092

WANDSWORTH, S.W. 18.
21 APR 1919
327 GERRARD STREET EAST LONDON, E.C. 4

Attest  
W.R.  
Paymaster

rec. 2092

TELEPHONE:  
BATTERSEA 3035.

THIRD LONDON GENERAL HOSPITAL,

WANDSWORTH, S.W. 18.



Chief paymaster,  
Royal W. of W. Regiment

Pay to *etc*

# 2940 Lt C. Elliot

The sum of one pound

and eight pence

Approved *etc* Registrar, *etc*

Third London General Hospital,  
WANDSWORTH, S.W.

Recd 1-00  
C/11/1913  
80808

11-18

*etc*



TELEPHONE:  
BATTERSEA 3035.

THIRD LONDON GENERAL HOSPITAL,

WANDSWORTH, S.W. 18.

To Chief paymaster  
Royal W. 1226

pay to

£ 3940

regt.  
AC

The sum of one pound

admitted

Subscription Card

and deduct

91 NOV 1918  
3RD LONDON GENERAL HOSPITAL

OK. 1-0-0

M.R. 2/11/18

Receipt No 9903

21-11-18

P.L.D.

Elliott, Erastus

3940

Hay Sept.

January 13th., 1919.

#3940 Pte, Erastus Elliott,

Hare Bay,

St. Barbe Dist.

Dear Sir:-

Please find enclosed "Discharge  
Certificate No. 454."

Yours faithfully,

Captain,  
Paymaster & O.i/c Records.

Enc'l 1.

*paid in*

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..... *Eustas* ..... 2. Surname..... *Elliott* .....

3. Rank..... *Private* ..... 4. Regtl. No. *3940* .....

5. Address in full to which future payments of gratuity are to be forwarded..... *Eustas Elliott Cooks Harbor Strait of Belle Isle District of St. Pierre* .....

6. Date of enlistment in the Regiment..... *August 28<sup>th</sup> 1917* .....

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....  
*No separation allowance has been paid* .....

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 Nfld, if so, give dates and particulars of such service..... \_\_\_\_\_ .....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *Enlisted 28 August 1917. Served in France June 1918. Remained there until 14<sup>th</sup> October 1918* .....

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.

*I have not received any.*

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?

*Yes to Private*

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

*I voluntarily surrendered my Lance Corp. strip*

19. Are you now serving in the *Res.* If not give - (a) Date of discharge (b) Reason for discharge.

*January 13/19 of none.*

*I know*

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.

*Yes. August 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.

*I have not received any pay.*

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:

Place of Residence:

*Erastus Elliott*

Declared before me at:

*John*  
This *15<sup>th</sup>*

day of *December* 19*19*.....

*R. Adams J.P.*

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

POST DISCHARGE PAY.

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

Certified correct.

Paymaster

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 3940 Rank Plt Name Kellett - Evans  
 Date of Enlistment 28.8.17 Address Stone Bay District St. George's  
 Occupation Fisherman Classification for Discharge B Medical Category 2  
 Recommendation S.M.B. Permanently unfit Disability Rating Nil  
 Passed to Demobilization Officer with following documents:—

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

Date 27.12.18

*M. Kelly Capt.*  
O.C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### i. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

*E. Kellett*

Particulars passed to Vocational Officer for information and action.

Date .....

#### ii. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable £60.00

(b) Clothing Supplied Joseph H. Snowling

Date 27.12.18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *637* to his home at *27-13-18* and Release Certificate No. *Ch. Dick Capt* issued

Date ..... 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 *13-1-19* *Ch. Dick Capt.*

Date *30* *12* *18* Depot Paymaster.

Discharge approved for.....

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.....	<i>1</i> <i>Serial B.1</i>
B 178a.....	D 400A.....	B 1915.....	do 2nd.....	" 3.....	<i>2</i>
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.....			<i>Ch. Dick Capt.</i>

Date ..... Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records,  
Board of Pension Commissioners.

with following additional documents.

**ELIGIBLE for POST DISCHARGE PAY**

**DEC 30 1918**

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

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

Date *Jan. 31 1919* .....



**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 New Zealand* 7. Former Trade }  
or Occupation }
2. Regtl. No. *940* 3. Rank. *Sfc.* 7a. If the soldier claims previous service in Army, he should state—  
(a) Former Regts. or Corps ;  
with Regtl. Nos.
4. Name *ELLIOTT* *Erastus*  
(Surname) (Christian Names)
5. Age last birthday.....
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. *Sent from J. I. G. H. especially for repatriation*

- | 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, &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.)

*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 ?

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

*Discharge as permanently unfit*  
*W. H. C. Jones*

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

## Civil Re-establishment Committee



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

*To work at Fishing*

*L. Elliott*

Signature of Man.

Reg. No. *3940*

*Ch. Dicks Call*

Signature of the Vocational Officer or his Representative.

Place

*Hobbs*

Date

*27-12-18*

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## Medical Report on an Invalid.

Station \_\_\_\_\_

Date \_\_\_\_\_

- |   |  |
|---|--|
| <p>1. Unit <b>Royal Newfoundland</b></p> <p>2. Regimental No. <b>3940</b></p> <p>3. Rank <b>L/Cpl.</b></p> <p>4. Name <b>ELLIOTT, ERASTUS</b></p> <p>5. Age last birthday _____</p> <p>6. Enlisted <span style="font-size: 2em; vertical-align: middle;">{</span> on _____<br/>at _____</p> | <p>7. Former Trade }<br/>or Occupation }</p> <p>7A. If with previous service in Army, state—</p> <p>(a) Former Unit;</p> <p>(b) Regimental No.;</p> <p>(c) Date of Discharge;</p> <p>(d) Cause of Discharge.</p> |
|---|--|

### 8. Disability in respect of which invaliding is Proposed.

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

#### Statement of Case.

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

9. Date of origin of disability. \_\_\_\_\_
10. Place of origin of disability. \_\_\_\_\_
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.
- Sent from 3rd L.C.H. especially for repatriation**

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

13. What is his present condition?

**NO DISABILITY**

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

14. If the disability is an injury, was it caused—

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

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

If so—(a) When?

(b) Where?

(c) Opinion?

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

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

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

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

20. Do you recommend—

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

**To be repatriated**

**(Sgt) E. S. P. Knight, CAPT. R. A. M. C.**

Officer in medical charge of case.

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

Station \_\_\_\_\_

Officer in charge of Hospital.

Date \_\_\_\_\_

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

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

Opinion of the Medical Board.

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

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

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

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

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

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

(i.) Service during the present war;

(ii.) Climate;

(iii.) Ordinary military service;

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

(v.) Whether it is constitutional or hereditary.

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

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

23. Is the disability permanent?

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

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

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

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

27. Do the Board recommend—

(a) Discharge as permanently unfit, or

(b) Change to England?

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

(a) Sanatorium;

(b) Hospital;

(c) Convalescent home;

(d) Asylum; or

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

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

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

**Was caused October 17, 1918. While in Hospital took Influenza Pulse 96. Lungs and heart sound? Temperature normal.**

**Yes**

**No**

**Nil**

**Yes**

Signatures:—

(Sgd) **H. S. FRASER**

President.

Station

**St. John's, Nfld.**

**ARTHUR G. TAIT**

Members.

Date

**L. PATTERSON, Major**

Approved

Station

**DEC 26 1918**

(Sgd) **CLYDE W. PATTERSON, Major**

Administrative Medical Officer.

Date



**LAST PAY CERTIFICATE ORIGINAL**

To be rendered for all ranks on discharge, transfer to other Units or on return to Newfoundland to be credited with G.D. 19, 23/0/19.

Regt. No. **3940** Rank **L/Cpl.** Name **Elliott E.** Unit **Royal Nfld. Regt.** who was **repatriated**

Newfoundland

on **12/12/18** Authority

Draft **79**

Cause

STATEMENT OF ACCOUNT

GR.

From 8/12/18 To 12/12/18

CHECKED  
*18/1/19*  
*RC*

DEBITS				CREDITS						
Balance b/f from 7/12/18				4	6	Balance Cr. for				
Allowance 5 days @ .60	3	00		12	4	Pay 5 days @ \$ 1 05	5	25		
Cash Payments:						Field Allice 5 days @ \$ 10		50		
<b>V.7102</b>				3	6		5	75	1	3
Other Debits						Other Allices days @ \$				7
						Other Credits:				
Total Debits				1	0	Total Credits			1	3
Balance due by Paymaster					4	Balance due to Paymaster				7
				1	3				1	3
				7						7

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

and in this respect is in accordance with information received in the Pay & Record Office London on 8/1/19.

Pay & Record Office, London, 8:1:19

Chief Paymaster & O. I/c Records.

*A. D. Munnell*





DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 70<sup>00</sup>

Dec 15 1919

Received from the First Newfoundland Regiment  
the sum of Seventy Dollars.  
~~Account~~ of Pay. W. J. & Elliott

Ch. No. <u>24156</u>	Initials <u>FEW</u>
Pay Ledger <u>433</u>	Initials <u>WR</u>
Gen. Ledger.....	Initials.....

Regtl. No..... Rank.....

*J*

No. 3940 Rank Pt

Name E Elliott

C.R. 3940

RECEIPT.

FOR ISSUE OF RIBAND OF VICTORY MEDAL 1914-1919.

I certify that I have received an issue of 2 inches  
of Riband of Victory Medal 1914-1919.

NO. 3940. NAME L. E. Elliot

DATE. 7.9.29  
PLACE. Locker Cove

Please send my medal

C.R. 3940

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

I certify that I have received an issue of 2 inches  
of Riband of British War Medal-1914-1919.

Name.....*E. Elliott*.....

Date.....*Mar 1 1920*.....

Place.....*Locks core: st. Barb*.....

**Casualty Form—Active Service.**

Regiment or Corps *21st Royal Newfoundland*

Rank *Platoon* Surname *Elliott* Christian Name *Erastus*

Religion *C of E* Age on Enlistment *18* years *17* months

Enlisted (a) *28.8.17* Terms of Service (a) *Duration* Service reckons from (a) *28.8.17*

Date of promotion to present rank ..... Date of appointment to lance rank *8.12.17*

Extended { ..... } Re-engaged { ..... } Qualification (b) .....  
of Corps Trade and rate .....

Occupation *Fisherman* *J. M. Curran* Signature of Officer



Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		<i>AI</i>	<i>Embarked</i>	<i>2 JUL 1918</i>	
		<i>28-6-18</i>	<i>Disembarked</i>	<i>5 JUL 1918</i>	
			<i>1st Bn</i>	<i>9.7.18</i>	
	<i>44 Cpl</i>	<i>for "Diarrhoea"</i>		<i>17/6/18</i>	<i>C.D. 8186</i>
	<i>2 Coon Stary</i>			<i>20/10/18</i>	<i>RA 30547</i>
	<i>St Denis</i>	<i>Transferred to England</i>		<i>5/11/18</i>	<i>W 3053</i>
			<i>W. H. D. Carr</i>		
			<i>For Officer i/c</i>	<i>No 1 Infantry Section</i>	
			<i>3rd Echelon,</i>	<i>General Headquarters</i>	

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

NEXT OF KIN: *Father Benjamin Elliott Lock Cove New Bay Nfld*

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 3940 Rank Pvt. Name E. Elliott  
 Intended place of residence... Hare Bay St Johns  
 2. Occupation Journalist  
 Classification of soldier B Medical Category F

## DEMobilIZATION.

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

# ELIGIBLE for POST DISCHARGE PAY

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

Place .....  
 Date DEC 27 1918 .....  
 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, subject to my overpayment of being adjusted.

Place and date St Johns .....  
27. 12. 18 .....  
 Signature of soldier E. Elliott  
 Signature of witness Edwards Capt

## 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 Dec 27 1918 .....  
St Johns .....  
 Signature of soldier E. Elliott  
 Signature of witness Raymond Sgt

## STATEMENT OF SERVICE

7. Enlisted for service 28. 8. 17 ..... No of days on Military  
 Discharged from service 30. 12. 18 plus 14 Days ..... Service 504 Days

## APPROVAL OF DISCHARGE

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

Place ST. JOHN S. .....  
DEC 0 1918 .....  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment

## CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place St Johns, Nfld. .....  
 Date January 13/1919 .....  
 Officer i/c Records  
 The Royal Newfoundland Regiment

4  
20  
31  
21  
12  
139



## 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 *Elliott, Erastus*

Regiment from which discharged *Royal Newfoundland*

Regimental number *3940*

Intended address *Look's Harbour, Straits Bell Isle.*

Height on discharge *5* Feet *6"*

Color of hair on discharge *Brown*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks

Figure on discharge *Medium*

Christian name of Father *Benjamin*

Christian name of Mother *M. Anna*

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth *Look's Harbour, Dec. 29, 1899.*

Nature and locality of civil employment required

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full)

Station

*Erastus Elliott*

*St Johns*

Date

*December 24/18*

(Rank)

*L/C*

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.

*J. P. Peterson*  
Medical Officer i/c Hospital,  
Unit, or Command Depot.

Station

*St Johns, nfld.*

Date

*Dec. 24/18*

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B. 121.  
39.

Regiment of 1<sup>st</sup> Newfoundland.

Number of Sheets First.

Signature of O. C. Company W. H. J. [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>Elliott E.</u>	Age on	<u>18</u> years — months	<u>Fisherman</u>	
<u>SqHD</u>	<u>Elliott E.</u>	Place and Date of Enlistment	<u>St John's</u> <u>12<sup>th</sup> 8. 17</u>	Religion	<u>Promoted <u>Major</u> 8-12-17.</u>
Joined	Date			<u>C. of E.</u>	
Joined	Date			Place of Birth	
Joined	Date				
Joined	Date				
		Period of			
		with Colours			
		with Reserve			

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>Demobilized St. John's, 13 17</u>					

To be carried over



A 3940

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 3940 Rank PRK Name Collett - Eustus  
 Date of Enlistment 29-8-17 Address Harbour District St George's  
 Occupation Fisherman Classification for Discharge B Medical Category E  
 Recommendation S.M.B. Promptly profit Disability Rating Nil  
 Passed to Demobilization Officer with following documents:—

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

Date 27.11.18 W. Bailey Capt.  
 O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

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

*E. Collett*

Particulars passed to Vocational Officer for information and action.

Date.....  
**POST DISCHARGE**  
 DEC 20 1918

#### 2. Clothing

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$60.00
- (b) ~~Clothing~~ Supplied Joseph H. Crawford

Date 27-12-18 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *Lu 33* to his home at *St Anthony* and Release Certificate No. *637* issued.

Date

*27-12-18*

*OB Dicks Capt.*  
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to *13-1-19*

Date

*11-12-18*

*W. Bailey Capt.*  
Depot Paymaster.

Discharge approved for

*30. 12. 18*

Forwarded with following documents to O.C Discharge Depot.

N.F. P136	B 268	B 121	N.F. Med.	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date

*27. 12. 18.*

*OB Dicks Capt.*  
Demobilization Officer.

APPROVED.

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

with following additional documents.

**ELIGIBLE for POST DISCHARGE**

**DEC 30 1918**

Date

*W. Bailey Capt.*  
Officer Commanding  
Discharge Depot - Newfoundland  
O. C. Discharge Depot.

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

Date

*Jan. 31/1919*

*M. Bowley Capt.*  
O.C.D.

Reg. No. *3940* Rank *Plt* Name *Elliott, E.*

Attested ..... Address *Lacks. Cove. F.H. 10*

Allotment..... Allottee .

Date of Allotment..... Returned from Overseas *21-12-16*

Embarked for Overseas ..... Cause *Discharge*

*27-12-18*

**PASSED TO DEMOBILIZATION OFFICER**

*26-12-18*

*Rec. Discharge as Permanently Unfit*

*30 12 18*

**DISCHARGE APPROVED ON DEMOBILISATION.**