



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4908

Name Thos Elliott Corps R.C.F.

Questions to be put to the Recruit before Enlistment

- 1. What is your name? 1. Thomas Elliott
- 2. What is your full Address? 2. Bunyas Cove
1818
- 3. Are you a British Subject? 3. yes
- 4. What is your age? 4. 19 Years 7 Months
- 5. What is your Trade or Calling? 5. fisherman
- 6. Are you Married? 6. no
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7. no
- 8. Are you willing to be vaccinated or re-vaccinated? 8. yes
- 9. Are you willing to be enlisted for General Service?.. 9. yes
- 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. yes

I, Thomas 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.

Thomas Elliott Witness J. Pittman
SIGNATURE OF RECRUIT.

Jas W. Pittman Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Thomas 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 Johns on this 6 day of May 1918

Signature of Attesting Officer James Hunt

†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).....

C.R.

4908

Extract from Daily Orders part II, Unit the Royal Nfld.
Regiment dated July 9th. 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records on 5-7-19.

#4908 Pte. Thos. Elliott.

C.R. 4908

Extract from Daily Orders for 3rd Unit The Royal Welch, Regt.
Depot, St. John's, June 11th, 1919.

The discharge of the undersigned number on demobilisation
has been APPROVED by C.O. Discharge Depot with effect from
21-6-19.

4908 Pte. Thos. Elliott.

C.R. 4908

Extract from Daily Orders Part 11 Depot, St. John's,

Date 10-6-19

4908 Pte. Thos. Eliotte

Reported at Headquarters 1-6-19.
which sailed Liverpool May 22/1919.

EX "Corsican"

C.R. 4908

Extract from Nominal Roll from 1st. Battalion

Royal Newfoundland Regiment dated 30-4-19.

The undermentioned of the 1st. Battalion left
Rouen Camps 22/4/19, embarked at Havre 22/4/19,
disembarked at Southampton 23/4/19 and reached
Hazeley Down Camp 23/4/19.

#4908 Pte. T. Elliott.

C.R. 4908

Extract from Daily Orders Part 11 Unit The Royal Wld. Regt
By Lt. Col. T.G. Mathias, D.S.O. Commanding 1st Battn
3-11-18.

The following joined the Battn. 3-11-18.

4908 Pte. T. Elliott.

B Coy.

C.R. 4908

Extract from General Roll of-Information Draft No. 55 Sharked Folkeston
25/10/16, from 2nd Batta, Royal Newfoundland Regiment, Hasleby Down Camp,
Winchester, to 1st Batta, Royal Newfoundland Regiment, R.N.F.

4908 Pte. Elliott, T.

C.R. 4908

Extract from Daily Orders Part 11. from Unit The Royal Mfld.,
Regiment, St. John's, dated June 14th 1918.

4908 Pte. T. Elliott.

Embarked for Overseas with draft 11-6-18.

Extract from Daily Orders part 11, from Unit The Royal Nfld.
Regt. St. John's, dated May 7, 1918.

#4908 Pte. T. Elliott.

Attested for General Service with the Royal Nfld. Regt.
from 6.5.18.

I. Elliott.

C.R.

4908

~~LRD~~

No. 18342/1765.

N.F.P. /79.

NEWFOUNDLAND CONTINGENT

From:

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

Officer Commanding,
2nd. Bn. Royal Nfld. Rgt.,
Winchester.

October 10th, 1918

Oct. 16th 1918

Subject: 4908, Pte. T. Elliott,

With reference to the following telegram (8636) from the Hon. Minister of Militia, received

"Pay to 4908, Pte. T. Elliott, £3.2.0

Draft £3.2.0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

A. A. Maxwell
Chief Paymaster & O. i/c Records.

Witness:

Receipt hereunder.
H. J. Barton LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commdg. Batt'n
Royal Newfoundland Regiment

Received the sum of £3-2-0

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

J. X. Elliott
Mark James
No. 4908 Rank Pte.

E. Manning

No 6172/324

N.F.P./80.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
1st Batt. Ry. Mfld. Regiment,
B.E.F.

B

22nd April 1919

29-4 1919

4908 Pte T. Elliot

With reference to the following telegram from the Minister of Militia, / / (146)

"Pay to- 4908 T. Elliott
£4. 2. 0.

4908. Pte T. Elliott.

The apm man wishes this remittance placed to his credit in the P & K.O please.

Kindly advise whether this remittance should be

- (1) forwarded to you for payment to this Soldier;
- (2) retained to credit of his account; or
- (3) otherwise dealt with.

Deposited

A.O. Minard Maj.
Chief Paymaster & O. i/c Records.

1919

To: The Chief Paymaster,
Royal Newfoundland Regiment,
58 Victoria Street,
London, S.W.

Sir:-

Please charge the amount set opposite my name to my account and pay it to the N.W.C.A. "Prisoners of War Fund" in quarterly instalments for the period of one year, commencing on the 1st July 1918.

Regt. No.	Rank	Name	Amount	Signature
4908	Lt	Elliot J.	£250	<i>J. Elliot</i>

I have the honour to be, Sir,
Your obedient Servant.

J. Elliot

Date

July 1/18

To. H. Elliott.

Bunyon's Cove
Bonavista Bay
Newfoundland

Cable from ~~London~~ through
Nilitia

1903. Ph. L. Elliott

241

Elliott, T.

4908

Ray Sept.

July 5, 1919

#4908 Pte. Thomas Elliott,

Bunyan's Cove, B.B.

Dear Sir:-

Please find enclosed Discharge

Certificate No. 2631.

Yours truly

Captain
Paymaster & Officer i/c Records

The Royal Nfld. Regiment

DEMOBILIZATION

No. *4908* Rank

Name *Elliot A.*

Warned for demobilization on

JUN 7 1919

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4908 Rank Plc Name Elliott T L

Intended place of residence Burgess Cove B. B

2. Occupation Fisherman

Classification of soldier E Medical Category A 2

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 J. H. Macleod

Date JUN 7 1919 for Commanding Discharge Depot
The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date ST. JOHN'S JUN 7 1919

ST. JOHN'S

JUN 7 1919

T. L. Elliott
Signature of soldier
A. B. Bousher
Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date ST. JOHN'S JUN 7 1919

JUN 7 1919

T. L. Elliott
Signature of soldier
James G. Newman
Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 6-5-18 No of days on Military

Discharged from service 21-6-19 Ten 14 days Service 426

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S R. H. Last Capt

Officer Commanding Discharge Depot
The Royal Newfoundland Regiment.

Date JUN 21 1919

CONFIRMATION OF DISCHARGE

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

Place St. John's Nfld A. M. Bowley Capt

Date July 5 1919 Officer in Charge
The Royal Newfoundland Regiment

a 7132079/2631

The Royal Newfoundland Regiment

Class for Demobilization
 6/

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 6.6.19

Regimental No. ... 4905

Name Elliott Thomas Pte

Address Benjamins Cove

Present Medical Category..... A1

Recommended for:— { (a) Immediate discharge

(b) ~~Standing Medical Board~~

Members of Board {

R.H. Lait Captn
O.C. Discharge Depot.

A. Peterson
Senior Medical Officer

Geo. Burdson
M.O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4908 Rank Plt Name Elliott Thomas
 Date of Enlistment 6-5-18 Address Bryans Cove District Lanarkshire
 Occupation Fisherman Classification for Discharge 4 Medical Category H.I.
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. P36	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 6-6-19 No. C. Discharge Depot _____

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Lt Elliott
but Fisherman

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:

- (a) Clothing Allowance payable. #60.00
 (b) ~~Clothing Supplied~~ _____

Date 7-6-19 O i/c. Re-clothing. _____

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R.15583.618 to his home at Bunyan Cove and Release Certificate No. 2436 issued.

Date 7-6-19 *J.A. Shaw Capt*
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 5-7-19

Date 7-6-19 *H. News Mast*
Depot Paymaster.

Discharge approved for 21-6-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36.	B 268.	B 121.	N.F. Med.	D.F. 1.
F 173.	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 7-6-19 *J.A. Shaw Capt*
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 JUN 21 1919 *R.H. Sait 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

Elliott E.

Signature of Man.

Reg. No. *4908-*

J. A. Snowball

Signature of the Vocational Officer or his Representative.

Place

St Johns

Date

JUN 7 1919

191

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

MEDICAL HISTORY

Surname Edwards

OF St John's
Christian Name Romas

Table I.—GENERAL TABLE

Birthplace:—Parish Brunyans Cove P.B. County Nfld

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	6	May	1918	191
at	St Johns		at	
Declared Age	19	years	—	days
Trade or Occupation	Fisherman		years	days
Height	5	feet	6 ³ / ₄	inches
Weight	146	lbs.		lbs
Chest Measure-ment	Girth when fully expanded		35	inches
	Range of Expansion		3	inches
Physical Development	Right	Left	Right	Left
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V=	6/10	R.E.—V=	
	L.E.—V=	6/10	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)	James B. Adams			
(Rank)	Medical Officer.		Medical Officer.	
Enlisted	at	St Johns	at	
	on	6	day of	May
			1918	191
	Corps.		Regtl. No.	
Joined on Enlistment	The Royal Nfld Regt		4908	
Transferred to	St John's			
Became non-effective by	on	day of	191	on
(Signature)			day of	
(Rank)			191	

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (vi), 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 be considered 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 or Occupation } *Zebedee Thomas*
2. Regt. *North* 3. Rank *Private* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Elliot Thomas* (a) Former Regt. or Corps with Regt. Nos.
(Surname) (Christian Name)
5. Age last birthday *20*
6. Posted for duty on *May 6/18* at *A. I. Johns* in category (or grade).....
7. 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.
8. If a Court of Inquiry was held on an injury state:—
(a) When (b) Where (c) Opinion of Court (d) Particulars of Pension or Gratuity (if any)
(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."
nil
11. Date of origin of disability. *nil*
12. Place of origin of disability. *nil*
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.

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?

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.)

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.

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.

Station *Hazley Down*

Date *1.9*

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

Reemployment for disability

Repatriation
W.A.C. D.A.P.R.
Capt. P.O.M.C.

July 16, 1919

#1908 Pte. Thomas Elliott,

Bungay's Cove, B.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 the War Service Gratuity.

Yours truly

Wm. S. G. & Co. /c Captain,
Records.

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... *Thos* *E. J. O'H*
3. Rank, *Pte* 4. Regtl. No. *4908*
5. Address in full to which future payments of gratuity are to be forwarded, *Bunyan's Cove B.B.*
6. Date of enlistment in the Regiment... *May 6/18*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
..... *Not applicable*
8. Relationship of such dependents..... *Do*
9. Address in full of such dependents..... *Do*
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *no*
11. Were you on active service only in Nfld. If so, give dates and particulars of such service..... *Overseas*
12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *Thirteen months*
..... *Fifteen days* *1 1/2*

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

Not applicable

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.

P. 81.66, Clothing Etc

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 or your arrival in England? *no*

(b) If so, was such reversion in consequence of Misconduct or inefficiency? *no*

19. Are you now serving in the Regt.? *no* If not give:- (a) Date of discharge *June 21/15* (b) Reason for discharge *Demobilization*

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

France Belgium and Germany

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.

Receipt for Army Book 64

No. 4909 NAME *Elliot*

To Certify that I have received the AB 64 of the above named soldier.

Name *J. Thomas Elliott*

Date *July 23 1920*

Place *Burman, Pa.*

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

Thomas Elliott Received His Book

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121.
39.

Number of Sheets one

Regiment of Royal Newfoundland

Signature of O. C. Company C. J. James

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>11908</u>	Age on	19 years	months	
Joined	Date	Place and Date of Enlistment	<u>St John's</u>		Trade
Joined	Date	Period of	with Colours	16 1/2 years.	Religion
Joined	Date	with Reserve	3 1/2 years.	Place of Birth	
Joined	Date			<u>Remyantown</u>	

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<u>Demobilized St John's</u>		<u>5 7/9</u>			

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

DEMobilIZATION OF
 Reg. No. 4908 Rank Pvt. Name Elliott Thomas
 Date of Enlistment 6-5-18 Address Bungay Cove District St. John's
 Occupation Fisherman Classification for Discharge E Medical Category H.I.
 Recommendation S.M.B. Disability Rating
 Passed to Demobilization Officer with following documents:—

N.F. P36	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 6-6-19 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Lt
Tho Elliott
hit
fisherman

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing

Certified that Clothing Regulations have been complied with:

(a) Clothing Allowance payable. # 60.00

(b) Clothing Supplied

Date 7-6-19

O. i.c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *N.1558.3.618* to his home at *Bunyan Cove* and Release Certificate No. *2436* issued.

Date

7-6-19

J.A. Brown 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

Date

7-1-19

H. J. Mansford
Depot Paymaster.

Discharge approved for

21-6-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1
F 178	W 3494	B 122	Board 1st	" 2
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		

2 Form B

Date

7-6-19

J.A. Brown Capt
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

JUN 21 1910

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

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

Date

June 14/19

J. M. ...
for O.C. Records

Reg. No. *4908*. Rank *1st Lt*. Name *Elliott, J.*

Attested Address *Banyans Cove.*

Allotment Allottee

Date of Allotment Returned from Overseas *29.1.19.*

Returned on S.S. *Corsican* Cause *Discharge*

6-6-19 PASSED TO DEMOBILIZATION OFFICER

21-6-19 DISCHARGE APPROVED ON DEMOBILISATION.

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (vi.) or (vii.), 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* 7. Former Trade or Occupation } *Fisherman*
2. Regtl. No. *4988* 3. Rank. *Pty* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Willis Thomas* (Surname) (Christian Names) (a) Former Regts. or Corps; with Regtl. Nos.
5. Age last birthday *20*
6. Posted for duty on *May 6/18* at *St. Johns* 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 (if any)
(b) Where
(c) Opinion of Court

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

Statement of Case.

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

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

11. Date of origin of disability. *me*

12. Place of origin of disability. *wt*
hil

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. *hil*

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? } *na.*

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.)

Decomplains gms involved.

16. Was an operation performed? If so, when and what was its nature? *Na*
17. If not, was an operation advised and declined? *na*
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? *na*
19. Give particulars of any other disabilities existing, but 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? *na.*

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

Major D.A.M.S.

Station *Hazeley D. Camp* *sgd.*

J. S. A. Knight

Capt R. A. M. C.

Medical Officer in charge of case.

Date *30-4-19*

* 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



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 *Thomas Elliott*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4908*

Intended address *Buryon Cove*

Height on discharge *5* Feet *6 1/4*

Color of hair on discharge *Light Brown*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *None*

Figure on discharge *Medium*

Christian name of Father *—*

Christian name of Mother *Bessie*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *St. John's, Newfoundland 22-7-1898*

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)

Thos X Elliott
man

(Rank)

Station

St John's

Date

4 6 19

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

Wm J. Edwards

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



Station

Date