



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

	Questions to be put to the Recrait before Enlistment
I.	What is your name?
2.	What is your full Address?
	View Prince of the Control of the Co
	Are you a British Subject?
	What is your age?
	What is your Trade or Calling?
	are you Married?
	Have you ever served in any Branch of His Ma esty's Forces, naval or military, if so,* which?
8. 2	inated?
9. 1	re you willing to be enlisted for General Service? 9
1	old you receive a Notice, and do you understand s meaning, and who gave it to you?
I. A	re you willing to serve upon the conditions as emb died in the roll of service to be and the roll of service to be another the roll of service to be an another the roll of service to be an another the roll of service to be an another the roll of
	Writing Ollio do solemnly declare that the above answe
ade	by me to the above questions are true, and that I am willing to fulfil the engagements made.
V	5/18 Signature of RECRUIT
,	
	OATH BE TAKE BY RECRUIT ON ATTESTATION. do make oath, that I will be faithful an honestly and faithfully defend His Majesty, His Heirs and Successors, and that I will, as in dur honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against a saccording to the conditions of my service.
emi	rue allegiance to His Marest King George the Fifth, His Heirs and Successors, and that I will be faithful an honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against a saccording to the conditions of my service. CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.
emi	rue allegiance to His Marest King George the Fifth, His Heirs and Successors, and that I will be faithful an honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against a saccording to the conditions of my service. CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.
emie we	do make oath, that I will be faithful an do make oath, that I will be faithful an honestly and faithfully defend His Majesty, His Heirs and Successors, and that I will, as in duration duration 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 question and be liable to be punished as provided in the Army Act. The above questions were then read to the Recruit in my presence.
emie wo	do make oath, that I will be faithful an domesty and faithfully defend His Majesty, His Heirs and Successors, and that I will, as in duration 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 question ald be liable to be punished as provided in the Army Act. The above questions were then read to the Recruit in my presence. The above question has been duly in the description of the above question and that his answer to each question has been duly in the description.
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emide wo	do make oath, that I will be faithful and conserved the Fifth. His Heirs and Successors, and that I will, as in duration and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against a seconding 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 question ald be liable to be punished as provided in the Army Act. The above questions were then read to the Recruit in my presence. The above questions were then read to the Recruit in my presence. The above questions were then read to the Recruit in my presence. The above question has been duly entered to the said retruit has made, and signed the declaration and taken the oath before me at the condition of Attesting Officer. The above question has been duly entered to the said retruit has made, and signed the declaration and taken the oath before me at the condition of Attesting Officer.
emide wo	do make oath, that I will be faithful and conserved the Fifth. His Heirs and Successors, and that I will, as in duration and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against a seconding 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 question ald be liable to be punished as provided in the Army Act. The above questions were then read to the Recruit in my presence. The above questions were then read to the Recruit in my presence. The above questions were then read to the Recruit in my presence. The above question has been duly entered to the said reputit has made, and signed the declaration and taken the oath before me at the condition of the said reputit has made, and signed the declaration and taken the oath before me at the condition of the said reputit has made any false answer to each question has been duly entered the said reputit has made, and signed the declaration and taken the oath before me at the condition of the said reputit has made any false answer to any of the above made any false answer to any of the above question and taken the oath performence of the said reputit has made any false answer to any of the above made any false answer to any of the above question and taken the oath performence of the said reputit has made any false answer to any of the above question and taken the oath performence of the above made any false answer to any of the above question and taken the oath performence of the above made any false answer to any of the above made any false answer to any of the above made any false answer to any of the above made any false answer to any of the above made any false answer to any of the above made any false answer to any of the above made any false answer to any of the above made any false answer to any of the above made any false answer to any of the above made any false answer to any of the above made
emide wo	do make oath, that I will be faithful and conserved the Fifth. His Heirs and Successors, and that I will, as in duration and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against a seconding 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 question ald be liable to be punished as provided in the Army Act. The above questions were then read to the Recruit in my presence. The above questions were then read to the Recruit in my presence. The above questions were then read to the Recruit in my presence. The above question has been duly entered to the said retruit has made, and signed the declaration and taken the oath before me at the condition of Attesting Officer. The above question has been duly entered to the said retruit has made, and signed the declaration and taken the oath before me at the condition of Attesting Officer.
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viz:—(Name).....on the (Date)

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extract from soily orders rart if moyel newfoundland megt. Supply at. John's dated July Sth 1919.

The discharge of the endernoted on demobilishtion has been conflicted by officer 1/c Henords from noted days.

5229, Pte. Arthur Ellis.

extract from selly orders must it mayor newfoundland megt. sepot at. John's dated July 5th 1919.

The discharge of the undernoted on demobilishtich has been conflicted by officer 1/o seports from notes down

5229, Pte. Arthur Ellis.

C.R. 5229

Regard from Newinal Roll Score 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.

#5229 Pte. A. Fllis.

Color 5229

Entirect from Daily Culoro Part 11 Unit The Royal Mild. Hogh. Dopos St. John. June 10th, 1919

The discharge on denobilisation of the undernoted has been APPROVED by 0.0. Discharge Depot with effect from Sun-6-19. 26-6-19

5229 Pte. A.Ellis.

C.R. 5229

Extract from Daily Orders Part 11 Depot, Sp. John's, Date 9-6-19.

5229 Pte. A. Ellis

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

End.. Bottolion. Windhoster to the 1 st., Battalian of the Regiment No No Ft Embersed Southeapton 28/11/18.

#5229 Pte, f. Ellis.

C.R. 5229

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

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

#5229 Pte.Arthur Ellis.

Extract from Daily Orders part 11, from Unit The Rogal Wfld.Regt.St.John's, dated May 21,1918

#5229 Pte. A Ellis

Attested for General Service with the Royal Nfld.Regt. from 20.5.18 to report 24.5.18

Hellis C.R. 5229 rigo

Medical Report on an Invalid.

Station Idazeley Low Date 30/4/19 1. Unit Royal newfoundland 7. Former Trade or Occupation 2. Regimental No. 5'2.29 7a. If with previous service in Army, state-3. Rank (a) Former Unit; arthur 4. Name (b) Regimental No.; 5. Age last birthday 2/ (c) Date of Discharge; 6. Enlisted on may 20/18 at 29 bus (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

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

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

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

on the case.

- (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? H.e.	complaine of his
•	Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.	disculling.
14.	If the disability is an injury, was it caused—	
	(a) In action?	
	(b) On field service?	
	(c) On duty?	
	(d) Off duty?	
1 5.	Was a Court of Inquiry held on the injury?	
	If so—(a) When?	
	(b) Where?	
	(e) Opinion?	
16.	Was an operation performed? If so, what?	n e
17	If not, was an operation advised and	N Q
	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?	n a.
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.	i a
		Repatriation
		Melatria
1		/ ~/
20). Do you recommend— (a) Discharge as permanently unfit, or (b) Change to England?	
	Soli	Officer in medical charge of case.
	RX	Officer in medical charge of case.
e:	I have satisfied myself of the	general accuracy of this report, and concur therewith,
S	tation Mozeley bourn	
	station Mazeley bourn	Officer in charge of Hospital.
I	Date	
	to a facth on as impodiately after sating service	should be attributed thereto unless there is evidence that it is due to some

^{*}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.

Nº 4102 B



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	Address	Amour (each per
V8 1	Mother	ElizabethEllis	Hants Atr.	
			(A)	
	*			
			Total Allotment, \$	
S	igned by the Officer equired payments of	ompleted by the Officer Commandin Commanding Company and handen application.	g Company, signed by the Volunt d to the Paymaster as authority	eer, coun to make

Nº 4102



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS attur Ellis , Regl. No. 52 hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person and Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person and Persons concerned, viz. : Allotment begins. Identity Certificate No. Whether Wife, Child, other Relative or Friend AMOUNT (each person) ADDRESS Total Allotment, \$ 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.

Company

N.F.P./80. No. 4465/183 NEWFOUNDLAND ER & OFFICER VC. RECORDS From: NEW 1960 Commanding INGENT Chief Paymaster & O.i/c Records, 1/Bn Royal Newfoundland Regt Newfoundland Contingent, B.B.F.DON. S.W. 58. Victoria Street, London, S.W. 1. 1919 20th March 5229 Pte a Elles 5229 Pte. Ellis A. With reference to the following telegram from the Minister of This man wroke The Militia, / / (84) amoun retained to credit "Pay to- 5229 Ellis, 1) his account please £4. 2. 0. Kindly advise whether this re-Englody homen for mittance should be (1) forwarded to you for payment to this Soldier; (2) retained to credit of his account; or (3) otherwise dealt with ... Deported wall That 20/3/19 8W. Chief Paymaster & O. i/c Record

Company Cond	act Sheet	11 10	of last	freedom from extra fine		Company, etc.	1/2/	of the souls	A SALES
Place	Date of offence	Rank	Cases of Drunkens ness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
Romen	24/3/14	Pt.		Def of ket		pay for same	1/4/19	May Bernard .	wmy
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					and the Figure 1	17. j			Service and the services
							and the same of		an many state

Ellis, A

5229

Hay Loeph.

July 5,1919

#5229 Pts. Arthur Ellis.

Hants Barbor, T.B.

"ear bir:-

Referring to your application I enclose chaque for seventy dollars (\$70.00), being amount of first payment us you on account of the war service tratuity.

Yours truly

Captain Paymester & O.i/c 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 dakhes. 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. JOENS.4 Regtl. no. 4229 5. Address in full to which fature payments of gratuity are to be 6. Date of enlistment in the Regiment. May 7. Name of dependent, if any, to warm Separation Allowance is being issued, or was boing issued irredictory prior to your discharge 8. Relationship of such dependents ... 9. Address in full of such dependents... 16. Is said dependent, now, or was said dependent at any time in receipt 11. Were you on active service only in Nfld. II so, give dates and particulars of such service 12. Give total length of time which you served on active service, whether in Hild.or Oversess. hurken

13. Have you had more than one chlistment? If so, give particulars
of discharge and re-collistments, and under what regimental numbers.
That applicable
,
14. Have you already received any payment of Post Discharge pay or
War Service Cretuity? If so, stars content you and your dependents
have already received and by whom paid.
to go. IT Clothing and Ration allowances
15. Have you been issued with a War Service Badge?
16. Have you, during the present war, served in the Imperial Borees. 20
17. iro you entitled to receive, as have you received any Gratuity
in the nature of Pest Discharge Pay from the Teperial Forces? If
so, state amount received or to thich you are entitled
••••••••••••••
18.Did you revert oversees to a rank lower than the substantive
renk held by you on your arrival in England?
(b) If so, was such reversion in consequence of Misconduct or
inofficiency?
19. Are you now searing in the Rosta? If not give?- (a) date
of discharge June 30/19. (b) Fooder. For hischerge
Vemobilization
.,
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
trance & Germany
,
21.(c) Are you receiving treatment from the Vivil Re-Establishment
Com.(b) If so are you in receipt of full pay and allowences from
that Cormittee
And I take this solemn deeleration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under Oath.

Johns aged.
June 1969. Signature of Applicant: Place of Residence: Declared before me at: day of This

Signature of Barrister of the Supreme Court, Stipendaar, Logistrate, Hotery Tublic, Unstice of the Peace, or Commissioner of affidewits.

Not amount POST DISCHARGE PAY. Jano or Paid War Sorvice Date paid Feid Soldier. Dependent t. Paymester Ø/ Cortified correct.

July 4,1919

#5229 Pte. rthur Ellis.
Hants Harbor, T.B.

Dear Sir:-

Please find end os ed Discharge

Certificate No. 2362.

Yours truly

Paymaster & Officer i/c Records.

The Koyal Mild. Regiment DEMOBILIZATION

No. 5779 Rank

Warned for demobilization on

JUN 6 1919

The Royal Newfoundland Regiment

	. Oge Alegar Specialistants Auguntin
	PROCEEDINGS ON DISCHARGE
ı.	No. 5279. Rank Plé Name Ellis 9. Intended place of residence. Hauls #
2.	Occupation Sulforman Classification of soldier E 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. Date JUN 6. 1919 Comanding 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 giars JOHN'S. Clis
	JUN 6 1918 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
	JUN 6-1919 Signature of witness
	STATEMENT OF SERVICE
7.	Enlisted for service
	Discharged from service 20: 6-19 Plus 14 Says Service 4!1
	APPROVAL OF DISCHARGE
8.	The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer ic Records, The Royal Newfoundland Regiment, twenty-eight days from date.
	Place Officer Commanding Discharge Deport The Royal Newfoundland Regiment.
	Date
	CONFIRMATION OF DISCHARGE
9.	The discharge of above mentioned solder is hereby confirmed MA Acros Co. Last
_	Place July 4/1919 Officer ic Records The Royal Newformstand Regiment
ע	ate

af \$ 2079/2362

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

The Royal Newfoundland Regiment

Class for Demobilization:—

		" 1 P
Discharge Depot: Headquarters T	he Royal Newfoun	Date 4519.
Regimental No 5.2.2.9		
Name Ellis	arthu	A. Pta
Address	Hants	}_
Present Medical Category	Ai	
Rec	ommended for:— $\left\{ \right.$	(a) Immediate discharge
		RHLat Capt. O.C. Discharge Depot.
:	Members of Board &	Masterson. Senior Medical Officer
		Buberden
	\ \	M . O. Depot

The Royal Newfoundland Regiment

3. Transportation and Release Certificate.	R.1512-9-594
The above named has been provided with Travelling Wa	rrant No to his home
Hauts A-	2388
at and Release Certificate	log issued.
6-6-19	John Holl
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 .	# 1 1111 / .
indewith section. The has received pay and allowances to	Killet a land
Date	I William Facion
	Depot Paymaster.
20-1-	19
Discharge approved for	//
Forwarded with following documents to O.C Discharge De	·pot.
N.F. P 36 B 268 B 121 N.F. Med	D.F. 1
Б 178 W 3494 В 122 Board 1st	2 romp
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	
	6 6
6-6-17	I man call
pate	· · · · · · · · · · · · · · · · · · ·
01.	Demobilization Officer.
	grander at the second
APPROVED.	
Documents as above forwarded to:—	
Officer i c Records.	
Board of Pension Commissioners.	
with following additional documents.	course property and a second
	a -in Cratmity
Fligible for Wa	r Service Gratuity
JUN 20 1919 Ling 1010 101	
	Title Jail all.
Date	O. C. Discharge Denot
	O. C. Discharge Depot.
Received the above noted documents from O. C. Discharge Depot.	e our war keynelleji kari ili ili ili ili ili ili ili ili ili i
Accepted 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:

Is resume Jorner Occupation

01	£ 22.
arthur	Ellis
	Signature of Man.
	• · ·

Reg. No. 5 22 9

Signature of the Vocational Office or his Representative

Place U- Johns

Date

191____

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

MEDICAL HISTORY

1.00		//	0	
Surname		//		
	,	4 1	"0	
α	//			10

Christian Name Arthu

Table I.—GENERAL TABLE.							
Birthplace:—Parish Kar	to Ar 2	B, Count	nhe	d · ·			
Birthplace:—Parish) <i>p</i> = = = 1		, , ,				
	SPECIAL		REGULAR	ARMY			
	on 20 day of	May 1918	on day of	191			
Examined	at & M	luo	at				
Declared Age	20 years	days	years	days			
Trade or Occupation	Frehen	nan					
Height	feet	of tuches	feet	inches			
Weight		13/ lbs.		lbs.			
Chest (Girth when fully expanded		37 inches		inches			
ment Range of Expansion		Hy inches		inches			
Physical Development		Lett	Right	Left			
(Arm	Right	- Lett	Augut				
Vaccination Marks Number	-5						
When Vaccinated	611						
Vision	R.EV= 90		R.E.—V=				
Vision	96						
•	(a)		(a)				
(a) Marks indicating congenital peculi-	The state of the s						
arities or previous disease							
			(4)				
	(6)		(b)				
(b): Slight defects but not sufficient to			<u> </u>				
Approved by (Signature	2 annol	axorem					
(Rank							
	100	Medical Officer.		Medical Officer.			
	at the HA	wo	at				
Enlisted	on Do day	of May 1918	on day	of 191			
	Corps.	Regtl. No.	Corps	Regtl. No.			
Joined on Enlistment	Meknal	1229					
Joined on Market	1 non Road						
	The contest						
Transferred to	• {	1 1 1 1 1 1 1 1 1 1					
Became non-effective by	The Control of the Control		on day	of 7 191			
(Signatu		of 191	on day				
, (Ran	k) ,						
			F	[P.T.O.			

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

g.c.	a reprinances, randomars of points
Date Valle	Brief Details, and Signatures
Vace 31-5-18	10
13-6-18	Inse, to
20-6-18	" " Lp
20-6-18	" LP
	It is hereby certified that this soldier
	Town or site of tree at Treamplify a to
	Brand and has been c'assided as for Dischargeon Demobilisa-
	tion. Medical category
*.	Date of T.M.B. Mins fl
	And hard A Papina

Table IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
			•		

			<i>T</i>		100
					•

	Medical Report on an Inva	lid O
	Station & and	uf D. Camp
	1. Unit Postal No. 5229 7. Former Trad or Occupation 7. Former Trad or Occupation 7. If with pre	30-4-19
	(Hofal Newfoundland	11
	1. Unit 7. Former Trad or Occupation	e) fisherman
2.	2. Regimental No. 5229 7a. If with pre	vious service in Army, state-
3.	3. Rank (a) Former I	
	4. Name ollis Orthur (b) Regiment	al No.;
5.	5. Age last birthday 36 (c) Date of I	vischarge;
6.	5. Age last birthday 6. Enlisted on hay 20/18 6. Enlisted at Styling 8. Disability in respect of which invaliding	Discharge.
	8. Disability in respect of which invaliding	g is Proposed.

Statement of Case.

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

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.

Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

nil nil nil

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 condi-tion 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., misconduct, &c.

13.	What is his present condition?	He conflains of 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?	λa .
17.	If not, was an operation advised and declined?	na.
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?	Za.
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.	ha.
4		Repatriation
		0 (1
20	(a) Discharge as permanently unfit, or (b) Change to England?	
•		W.T. Trocunier last R. A. 9
		Officer in medical charge of case.
e:	I have satisfied myself of the g	reneral accuracy of this report, and concur therewith,
S	station Maxily D. b. amp	Officer in charge of Hospital.
Ι	Date30-4-19	
. •]	Loss of teeth on or immediately after, active service, s	hould 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.



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 occuring in the description subsequent to the date of admission to pension should be noted in

Name in full Whin Elles
Regiment from which discharged Royal Dewfoundland
Regimental number 5229 Intended address Hank! Hr.
Height on discharge 5 Feet 5 2
Color of hair on discharge H. Brown
Complexion San
Color of eyes flue
Descriptive Marks
Figure on discharge medium
Christian name of Father Sugabeth
Christian name of Mother Elizabet 4
Wife's maiden name in full
Date and place of marriage
Christian names of children
Place and date of soldier's birth Hants the July 11 1 1598
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) Orthur Ellis (Rank)
Station Station Date 4679

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.

	Army For	n.B. 103.	alle and the second	-		Regi	mental N	umber 5229	
	August Talahan		Casu	alty/Form	Active S		1		
		Regi	ment & 8	grps U.	(ewfor	unalan	2,		
	Rank	Surname	/CU	lis	U	tian Name	\mathcal{N}	Filly Charles	
	Religion	S. Um	ny					months	
	114 4 115 117 11					Service recko			
,	Date of pro	emotion to present	rank		Date of ap	pointment to la	nce rank.		
	Extended		engaged (Qualificati	Prade and Rate			
	Tax tended		(,		or Corps				
	Occupation	Tisherm	an		//	099	Sig	nature of Officer	
		Report	Record of p	ecord of promotions, reductions, transfers, casualities, during active service, as reported on Army Form 13, Army Form A.36, or in other official documents, authority to be quoted in each case.		Date of	Remarks		
	Date	From whom received	B.213, Army The authority	Form A.36, or in other to be quoted in each ca	re official documents.	Place of Casualty	Casualty .	Taken from Army Form B.213, Army Form A.36, or other official documents	
				,	Embarked				
				Disembarked	28 NOV 1918				
				Joined Batt.		5	JANE	19	
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To the same of the same	SEP SEP						1		
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7		e of a man who has re-engaged	for, or enlisted i						
Peat of Sin	(b) Signaller,	Shoeing-Smith, &c	0.4 800	(17591.) WE.	dr w.	0. 6/18. D&S. Form F	1 4 6 X	[P.T.O.	
. /	"("0)	word or way	will will	· · · · · · · · · · · · · · · · · · ·		7 7	Selection of the select		

Nº 4102



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

AMOUNT (each perso	Address	NAME (in full)	Whether Wife, Child, other Relative or Friend	Identity Certificate No.
S	Hanto Her.	Elizabette Ellis &	Mother	281
				.1
	*			
	Total Allotment, \$			
	ompany, signed by the Volunte	npleted by the Officer Commanding Comp Commanding Company and handed to the application.		si

mm of Jwo arthur Ellis Reg. No.5329 Rank 11-8-19.

No. 594 TRAVELLING WARRANT
Date 6-6-19. The Koyal Pewfoundland Kegiment
General
Please issue 1st Class Passage and Meals for
No. 1229 Rank Ite Name Elles E-
From - ST. JOHN'S To Have \$2.00 Hearts content The Royal Dewloundland Regiment
ON STATEMENT AND MEAL CHECKS
SIGNATURE OF ISSUING OFFICER.
Discharge Dopol-tewisnagiand

mr Arthor Ellis Rants Frankos Fundo Bay

August 22, 1919

Arthur Ellis, Hant's Hr., T.B.



Dear Sir:

I enclose herewith cheque for \$2.00, amount due you on account of driving Pte.E.Ellis from Heart's Content to Hant's Harbour.

Yours truly,

Capt. Paymaster Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

imher of Sheet The

Forms B 121. 39. Regiment of Royal New forms land

gnature of O. C. Company Provides

									neens
Regi	imental Numb	er and Na	me,	Enlistment	Trade	Good Conduct Badges, S	ervice pay	or proficiency pay	
No. 5229	Ell:	a	H.	Age on 20 years months	Fisherman				
Joined_/	Da	STREET, STREET	mu	Place and Date Office of Enlistment 20.5.16	Religion . A				
Joined	Da	RESIDENCE PROPERTY C) with Colours tul, years.	Place of Birth				
Joined Joined	Da	NOONS OF A STATE OF S		Period of with Reserve 36 years.		3			
Place	Date of Offence	Rank	Cases of Drunk- enness.	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
							with trial		
				Demobilized .	en.	7			
			1	Demobilised &	Il sino	4 79			
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111227

Demobilization Fra

The Royal Newfoundland Regiment

Reg. No. 5229. Rank. Name, Collis A.
Date of Enlistment 30.5.18 Address Hank Att District Agency
Occupation
Recommendation S.M.B
Passed to Demobilization Officer with following documents:-
N.F. P 36 B 268 B 121
B 178 W 3494 B 122 Board 1st " 2
B 178a
B 179a D 400C Form K do 4th
B 179b B 103
B 179c B 120
Wilson It
Date. 5:6.19 MO. C. Discharge Depot.
PARTICULARS FOR DEMORILIZATION
I. Civil Re-Establishment.
I am
I am. in a position to resume civilian occupation.
Cesthur Ellis
Particulars passed to Vocational Officer for information and action.
Particulars passed to Vocational Officer for information and action. Date.
Particulars passed to Vocational Officer for information and action. Date
Particulars passed to Vocational Officer for information and action. Date. 2. Clothing. Certified that Clothing Regulations have been complied with:—
Particulars passed to Vocational Officer for information and action. Date. 2. Clothing. Certified that Clothing Regulations have been complied with:— (a) Clothing Allowance payable of the complete with the

3. Transportation and Release Certificate.	R.1512 . 9.5394
The above named has been provided with Travelling Warran	nt Noto his home
at	issued /
6-6-19	min bell
Date	Demobilization Officer
	3197
4. Pay and Allowances. The herein named soldier's accounts have been correctly b	alanced and all matters in connection
therewith settled. He has received pay and allowances to	4-77-19-15
therewith settled. He has received pay and allowances to	Allel at the
Date	Depot Paymaster.
70-/-	19
Discharge approved for	(./
Forwarded with following documents to O.C Discharge Depo	t. \ \
N.F. P 36 B 268 B 121 N.F. Med	D.F. 1
F 178 W 3494 B 122 Board 1st	" 2 to
B 178a do 400A B 1915 do 2nd	" 3 2 Form 5
B 179 do 3rd 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	
6-6-19	Invital "
Date	Demobilization Officer.
APPROVED.	
Documents as above forwarded to:— Officer ilc Records.	
Officer i c Records. Board of Pension Commissioners.	
with following additional documents.	
Filable for W	ar Service Grainty
	41 00: 130
JUN 2 0 1919	→ 1 - 一大大大 作
Date	O. C. Discharge Depot.
Received the above noted documents from O. C. Discharge Depot.	
Accessed the above noted documents from O. C. Discharge Depot.	and at 2/1
	of the state of th
Date fune 11/19	cor felecanda.

Reg. No	1999. Rank Name Ellis . 4. Address Haub fr.	
Allc	Allottee	2
Date of Allo	nt Returned from Overseas	7
Returned on	nt. Returned from Overseas. 29 5.19 S.S. Cause And Returned from Overseas.	
1		
	BACCES TO STATE OF THE STATE OF	
5-6-19	PASSED TO DEMOBILIZATION :	
2-6-19	PARCE ASSOCIATION OF THE PROPERTY OF THE PROPE	
é,	ARGE APPROVED ON DEMORITY AND APPROVED	
	Mary Aller	
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