



FIRST NEWFOUNDLAND REGIMENT

4156

ATTESTATION OF

No. 4156 Name Patrick Foley Corps P.E.

Questions to be put to the Recruit before Enlistment

- | | |
|------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| 1. What is your name? | 1. <u>Patrick Foley</u> |
| 2. What is your full Address? | 2. <u>St. Brudes</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>19</u> Years <u>3</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Labourer</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> |

FOR THE DURATION OF THE WAR

I, Patrick Foley 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.

22/11/17

Patrick X Foley SIGNATURE OF RECRUIT.
James J. Wang Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Patrick X Foley 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. Brudes on this 23 day of Nov 1917
 Signature of Attesting Officer A. J. Fitzgerald, S.M.

†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 1st Bn.
 If enlisted by special authority, such will be attached to the original attestation.
 Date 23/11/17
 Place St. Brudes } Approving Officer W. J. ...

† 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 Patrick Foley
 Apparent age 19 years 3 months. Height 5 feet 9 inches

Chest Measurement { Girth when fully expanded 35 1/2 inches wt 152
 Range of expansion 3 inches

Distinctive marks Hair Brown Eyes Blue Complexion fair

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin William Foley
St Bradas | Relationship Father
P. Bay 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>22-11-17</u>									
Joined at <u>St Bradas</u> on <u>November 22-17</u>									
<u>& Discharged July 8/19</u>									
<u>Embarked</u>	<u>St Bradas</u>	<u>S. Hoijzel to Halifax</u>	<u>29/18</u>	<u>Embarked for</u>					
<u>St Bradas</u>	<u>2-7-18</u>	<u>Disembarked</u>	<u>St Bradas</u>	<u>5-7-18</u>	<u>Joined</u>	<u>Bethel</u>	<u>9-7-18</u>		
<u>Admitted</u>	<u>Hospital</u>	<u>Field</u>	<u>14-10-18</u>	<u>Admitted</u>	<u>1008</u>	<u>Discharged</u>	<u>19-10-18</u>		
<u>Admitted</u>	<u>10th Coy. Hoop. Brigade</u>	<u>22/18</u>	<u>Dis to duty</u>	<u>5-11-18</u>	<u>Returned</u>	<u>with</u>	<u>5/18</u>		
<u>Signifies</u>	<u>from</u>	<u>22/18</u>	<u>Arrives</u>	<u>23-4-19</u>					
<u>to</u>	<u>Newfoundland</u>	<u>for demobilization</u>	<u>22-5-19</u>	<u>Arrives</u>	<u>H.Q.</u>	<u>1-6-19</u>			
<u>Demobilization St Bradas</u>									
									<u>8-7-19</u>

Total Service forfeited as above.....

Total Service towards Engagement to 8-7-19 (date of discharge) 1 years 229 days
 " " Pensions " " " " " " " " " " " "

C.R.

No. 4156 Name Foley P

Sqn., Batty., or Company } *Royal Newfoundland*

Date of enlistment } *22-11-17*

G.C. Badges

Service or Proficiency Pay

Date of last entry in Company Conduct Sheet

No. and date of last drunk

Period not reckoning towards freedom from extra fine

Sheet No. *1*

Signature O.C. Company, etc. } *[Signature]*

Character *Very Good.*

Army Form E. 122.

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
<i>Field</i>	<i>29/8/16</i>	<i>Plt.</i>		<i>Drunk in cantina</i>	<i>[illegible]</i>	<i>8d. ec</i>	<i>3/8/18</i>	<i>[illegible]</i>	
<i>Trench</i>	<i>14/1/19</i>	<i>Plt.</i>		<i>drunk 5 Pool Helped from 20/2/19</i>	<i>P2MI New</i>		<i>14/1/19</i>	<i>[illegible]</i>	<i>for [illegible]</i>
<i>"</i>	<i>8/4/19</i>	<i>"</i>		<i>Dr. of Cardiff</i>	<i>DO</i>	<i>Pay for comm</i>	<i>8/4/19</i>	<i>do</i>	
<i>"</i>	<i>"</i>	<i>"</i>		<i>Dr. 3/10/14</i>	<i>"</i>			<i>"</i>	

C.R. 4156

Extract from Daily Orders Part 11 Unit The Royal Wfld. Regt.,
By. Lt. Col. T.G. Mathias, D.S.O. Commanding 1st Bn. 8-11-18

The u/m is ~~dis~~ discharged to duty.

4156 Pte. P. Foley

D Coy.

C.R. 4156

Extract from Daily Orders Part 11 Unit The Royal
Nfld. Regt. St. John's, 11-7-19

4156 Pte. Patk. Foley

The discharge of the above mentioned man has been CONFIRMED
by Officer i/c Records from 8-7-19.

C.R.

4156

**Extract from Daily Orders Part 11 Unit The Royal RFLA. Regt.
St. John's, June 14th 1919.**

**The discharge of the undernoted on demobilisation has been
APPROVED by C.G. Discharge Depot with effect from 24-6-19.**

4156 Pte. Patk. Foley

C.R.

4136

Extract from Daily Orders Part III Depot, St. Johns,

Date 13/6/19.

4156, Pte. Patrick Foley.

Reported at Headquarters 1/6/19.

ex "Corsican"

which sailed Liverpool May 22/1919.

C.R. 4156

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^u
disembarked at Southampton 23/4/19 and reached
Hazeley Down Camp 23/4/19.

#4156 Pte. P. Foley.

C.R. 4156

Extract from War Office List No. H. A. 31267

DIS. TO DUTY AT 10 STY. H. ARNEKE 3 NOV. 1918.

#4156 Pte. A. P. Foley.

DIARRHOEA.

C.R. 4156

Extract from War Office List No. H.A. 30842

Admitted 10 Sty. H. Arneke 22 Oct. 1918.

#4156 Pte. P. Foley

DIARRHOEA MILD.

C.R. 4156

June 8th, 1918

W. J. Walsh, Esq., M.H.A.,
C I T Y


Dear Sir:-

I beg to acknowledge receipt of your letter of 1st inst., and attached letter from Mr. Wm. Foley contents of which have been noted; and in reply thereto, I beg to state that Mr. Foley's son, No. 4156, Private Patrick Foley, enlisted in The Royal Newfoundland Regiment on Nov. 22nd, 1917, and gave his age as 19 years, and therefore it was not considered necessary to have the consent of his father, by the Military authorities, before sending him overseas.

As to compensation, which Mr. Foley thinks is due him, it is left entirely to Private Foley's own discretion, as to whether he thinks it advisable to make an allotment to his father or not.

Private Foley is now with the unit in France, and if Mr. Foley wishes, we will have instructions forwarded to him to communicate with his father.

Yours faithfully,


Lieut. Col.

Chief Staff Officer.



C.R. 41576

Major Rendell,
Militia Department,
St. John's

St. John's,

June 1, 1918

Dear Sir:

Enclosed you will please find a letter, the contents of which I would ask you to investigate, and let me have a reply at your earliest convenience.

I remain,

Yours very truly,

St Bridget's
April 21

1918

Mon W of Welsh

Dear Mr Welsh

My son Patrick Foley
left home last september went to grand
falls. worked there for a while..and allso
I understand he enlisted in the army from
the above mentioned place at the early age
of seventeen years

in this case it appears to me to be very much
like conscription.. as I had no communication
with or from him since he enlisted.. neither had I
any notice from the Military Authorities or
neither had I any money from him or them
since he joined the army

the entised him to join at grand falls sent him
on to st Johns.. from there to England.. with out
my consent.. the must think he had no parents..

Dear Mr Welsh you through my dull circumstances
and the great trial for to raise nine in number
with out a mother and he was my only help at
the present time.. with out going any farther I may
state I want to be compenced or my son back
safe and sound.. if I am not fully paid since he
joined the army I may state I will make my case
known fully to the imperial Authorities..

please give the matter your attention at your
earliest convenience) your Wm Foley

C.R. 4156

Extract from Nominal Roll to B. E. F. embarked
Folkestone. 2-7-18

#4156 Pte.P.Foley.

4156

C.R.

Extract from Daily Orders Part 11 Unit The Royal
Nfld. Regt., St. John's, Nov.26th, 1917.

4155 Pte. P. Foley.

Attested for General Service with the Nfld. Regt. with
effect from Nov. 19th, 1917. attested at Grand Falls.

P. Soley

R. 4156

P.R.O.

Medical Report on an Invalid.

Station Kezeley D. Camp
 Date _____

- | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>1. Unit <u>Royal Newfd</u></p> <p>2. Regimental No. <u>4156</u></p> <p>3. Rank <u>Pte</u></p> <p>4. Name <u>Foley P.</u></p> <p>5. Age last birthday <u>19</u></p> <p>6. Enlisted { on <u>Dec 28, 1917</u>
 at <u>St John</u></p> | <p>7. Former Trade or Occupation } <u>Fisherman</u></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.

- | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| <p>9. Date of origin of disability.</p> <p>10. Place of origin of disability.</p> <p>11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.</p> | <p><u>nil</u></p> <p><u>nil</u></p> <p><u>nil</u></p> <p><u>nil</u></p> |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
- | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| <p>(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).</p> <p>(b) constitutional or hereditary, and not aggravated by service during the present war.</p> <p>(c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.</p> | <p><u>na.</u></p> |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|

13. What is his present condition?

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

no complaint of no 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?

no

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

no

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?

no

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.

no

20. Do you recommend—

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

Repatritation

W. S. Proemier

Capt R. Mc. Major

Officer in medical charge of case.

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

Station *V. D. Camp*

Date *1. 5. 19*

Officer in charge of Hospital.

*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.

TO, - The Chief Quartersmaster,
Royal Newfoundland Regiment,
58 Victoria Street,
London, S.W.

Sir:-

Please charge the amounts 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,

Regtl. No.	Rank	Name	Amount	Signature:
4156	Pvt.	Toley. B.	\$2.50	

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

Date

28.6.18

G. J. Toley
28/6/18

No 6604/1023

099457

N.F.P./79.

From: NEWFOUNDLAND CONTINGENT

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

To: ~~Officer Commanding,
2nd Batt. Ryl. Mid. Regiment
Winchester~~

2nd May 1919

191

4156 Pte P. Foley

With reference to the following telegram from the Minister of Militia / / (160)

"Pay to 4156 P. Foley

£4-0-0

Cheque £4-0-0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

A. C. Minshall
Chief Paymaster & O. i/c Records.

Receipt hereunder.

for J. Walcott Captn
Officer Commandg. 2nd Batt'n.

Received the sum of four
pounds (4.00) in respect of telegraphic remittance from the Minister of militia.

No. 4156 Rank P Foley Pte

Witness J. H. Dicks Sgt

No. 4492



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Pat Foley, Regl. No. 4156
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
50 Dollars and 00 Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons
 concerned, viz.:
 Allotment begins December 16 1914

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)	
3206	Mother	Bride Foley	No. Harbour Saint John's A. N. B.		50
				Total Allotment, \$ <u>50</u>	

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

Sig.) [Signature]
 Officer Commanding
[Signature] Company
 Date Dec 8 1914

(S) Pat Foley
 (Rank) Private
[Signature]



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Pat Soley, Regl. No. 4156

hereby agree, until further notification by me, and in similar official form to make an Allotment of 4 1/2 Dollars and 50 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons concerned, viz.:

Allotment begins December 16 1917

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>3406</u>	<u>Wife</u>	<u>Brid Soley</u>	<u>28 Marlborough Barnes St. N. York.</u>	<u>50</u>
Total Allotment, £				<u>50</u>

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.) [Signature]
 Officer Commanding
[Signature] Company
Dec 8 1917
 191

(S) Pat Soley
 (Rank) [Signature]
[Signature]

Koley, H.

4156

Aug 4 sept

July 11, 1919

#4156 Pte. Patrick Foley,

St. Brides, P.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

Captain,
Paymaster & C.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 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 *Patrick* Surname *Jolly*
3. Rank *Pte* 4. Regtl. No. *4156*
5. Address in full to which future payments of gratuity are to be forwarded. *St Brides P. B*
6. Date of enlistment in the Regiment. *December 3, 1917*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued immediately prior to your discharge.
No
8. Relationship of such dependents.
No
9. Address in full of such dependents.
No
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.
Eighteen months
- and 3 weeks* 1. ³

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.P.P. 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 on 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 R.C.S.? *no* If not give? - (a) date of discharge. *June 24/17* (b) Reason for discharge. *Remobilization*

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 & 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.

-3- P Foley

Signature of Applicant:

Place of Residence:

Declared before me at:

This

10th

day of

June

19..19..

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

John McCarthy

POST DISCHARGE PAY.

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

Certified correct.

Paymaster

July 8, 1919

#4156 Pte. Patrick Foley,

St. Brides, P.B.

Dear Sir:-

Please find enclosed Discharge Certificate
No. 2795.

Yours truly

Captain
Faymaster & O.I/c records.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4156 Rank Private Name Joley Park
 Intended place of residence S. Brades
 2. Occupation Labourer
 Classification of soldier E Medical Category AT

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 JUN 10 1919
ST. JOHN'S
 Date

[Signature]
 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 10 1919

[Signature]
 Signature of soldier

[Signature]
 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 10 1919

[Signature]
 Signature of soldier

[Signature]
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 22-11-17 No of days on Military
 Discharged from service JUN 24 1919 Plus 14 days Service 594

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S
JUN 24 1919

[Signature]
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place St. John's
July 8/1919

[Signature]
 Officer in Charge Records
 The Royal Newfoundland Regiment

[Handwritten note]
 2795

The Royal Wld. Regiment

DEMOBILIZATION

No. *1156* Rank *Pte*

Name *Foley P.*

Warned for demobilization on

JUN 10 1919

COPY

The Royal Newfoundland Regiment

Class for Demobilization:—

E

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date **9-6-19**

Regimental No **4156**

Name **Foley, Patk**

Rank

Address **St. Brides**

Present Medical Category **A1**

Recommended for:—

(a) Immediate discharge

~~(b) Standard Medical Board~~

Members of Board

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

L. PATERSON
Senior Medical Officer

F. W. BURD

M. O. Depot

MILITARY SERVICE 594 days

RECEIPT FOR A SOLDIER'S DOCUMENTS

HEADQUARTERS NEWFOUNDLAND REGIMENT

To Pensions Board.

Please receive documents as indicated below

No. RANK AND NAME

N.F.P. 698	Non-effective account.	Medical history sheet.	Nfld. medical history sheet.	Medical report on an invalid.	Proceedings on discharge.	Civil life qualification.	Descriptive return.	Active service census form.	Regimental conduct sheet.	Company conduct sheet.	Field conduct sheet.	Report of Newfoundland Medical Boards				Attendance paper.	Identity certificate.	Allotment papers.	A.P.W. 3463.	Headquarters Travelling Bond.	Proceedings on discharge.
B. 173	B. 178a	B. 179	B. 268	W. 3404	D. 400A	B. 103	B. 120	P. 121	B. 122	1st Board	2nd Board	3rd Board	4th Board	Board	B. 1916	Form L	Form K	Form W.	D.P. 2	D.P. 1	

1006 Pte Foley P.

Received above noted documents,

Dated _____ 19 _____

Signature of Officer forwarding documents: _____

Date *16-6-19* 19 _____



The Royal Newfoundland Regiment

Class for Demobilization
 E

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 9.6.19

Regimental No. A156

Name .. Foley .. Sgt .. Sgt ..

Address .. St. P.

Present Medical Category A i

Recommended for:— (a) Immediate discharge

(b) ~~Standing Medical Board~~

Members of Board

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

P. Johnson
Senior Medical Officer

J.W. Berden
M. O. Depot.

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 156 Rank Plt Name Joley Patrick
 Date of Enlistment 22-11-17 Address H. B. ... District St. John's
 Occupation Laborer Classification for Discharge 1 Medical Category 1/1
 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 9-6-19O. C. Discharge Depot. [Signature]

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am [Signature] in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action.

Date 10-6-19

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) ~~Clothing~~ Supplied [Signature]

Date 10-6-19

O. C. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R16579 679* to his home at *St Brandon* and Release Certificate No. *2562* issued.

Date *10-6-19*

J.A. Snow 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 *10-1-19*

J.A. Snow Capt
Depot Paymaster.

Discharge approved for *24-6-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1.	
B 178	W 3494	B 122	Board 1st.	" 2.	1
B 178a	D 400A	B 1915	do 2nd.	" 3.	2 Form 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 *10-6-19*

J.A. Snow 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

JUN 24 1919

Date

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

Signature of Man.

Reg. No. *4156 P. Foley*

J. A. Snow Capt.
Signature of the Vocational Officer or his Representative.

Place ST. JOHN'S.

Date 11-6-19 191

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

MEDICAL HISTORY

Surname J. Day OF Christian Name Patrick

Table I.—GENERAL TABLE.

Birthplace:—Parish St. Briden Place B. County Nfld.

	<u>SPECIAL RESERVE.</u>		<u>REGULAR ARMY.</u>	
	on	day of	on	day of
Examined	22	Nov		1917
	at	<u>9 road Falls</u>	at	
Declared Age	19	years	3	months
Trade or Occupation	<u>Lo aboms</u>		years	days
Height	5	feet	9	inches
Weight			140	lbs.
Chest Measurement	Girth when fully expanded			inches
	Range of Expansion		<u>3 1/2</u>	inches
Physical Development			<u>3 1/2</u>	inches
Vaccination Marks	Right	Left	Right	Left
	/	/		
When Vaccinated				
Vision	R.E.—V	<u>6/6</u>	R.E.—V	=
	L.E.—V	<u>6/6</u>	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)	<u>Lamm Patterson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.			Medical Officer.
Enlisted	at	<u>9 road Falls</u>	at	
	on	22	day of	Nov
				1917
Joined on Enlistment	Corps.		Regtl. No.	
Transferred to	<u>1st Nfld Regt</u>		<u>4156</u>	
Became non-effective by	on		day of	1917
(Signature)				
[Rank]				

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.

Date	Brief Details, and Signature
26-11-17	Vac. 20
29-11-17	T.A.B. 20
18-12-17	T.A.B. 20
18-1-18	3 20

It is hereby certified that this soldier has been before a Travelling Medical Board and has been considered as fit for Discharge on Demobilisation. Medical category AT

9.6.19
Date of Signing

J. H. [Signature]
[Signature]

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

Medical Report on an Invalid.

Station Hayley DownDate 1-5-19

1. Unit Royal Newfoundland
2. Regimental No. 4156
3. Rank Pte
4. Name Foley P.
5. Ago last birthday 19
6. Enlisted { on Dec 28 1917
at St John's
7. Former Trade } Fisherman
or Occupation }
- 7A. If with previous service in Army, state—
(a) Former Unit;
(b) Regimental No.;
(c) Date of Discharge;
(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. nil
10. Place of origin of disability. nil
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. 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 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.
- na

13. What is his present condition?

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

He complains of no 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?

na

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?

na

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.

na

20. Do you recommend—

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

Repatriation
W. E. Prosser
Sgt. R. J. C. *Capt.*

Officer in medical charge of case.

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

Station *Hazley Down*

Officer in charge of Hospital.

Date *1.5.19*

*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.

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

Name in full *Patrick Foley*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4156*

Intended address *St. Bride's, Placentia Bay*

Height on discharge *5 Feet 9*

Color of hair on discharge *Dark*

Complexion *Ruddy*

Color of eyes *Brown*

Descriptive Marks _____

Figure on discharge *Tall*

Christian name of Father *William*

Christian name of Mother *Ellen*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *St. Bride's, Placentia Bay 10th Aug 1900*

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)

Patrick ^{his} Foley
mark

Pte
(Rank)

Station

ST. JOHN'S.

Date

6/6/19

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.

Medical Officer of the Newfoundland Regiment,
Unit, or Command Depot.

Station

Date



Casualty Form—Active Service.

Regiment or Corps *Royal Newfoundland*
 Rank *Private* Surname *Foley* Christian Name *Patrick*
 Religion *A.C.* Age on Enlistment *19* years *3* months
 Enlisted (a) *22-11-17* Terms of Service (*Duration*) Service reckons from (a) *22-11-17*
R.F.D. 1115
 Date of promotion to present rank Date of appointment to lance rank
 Extended (.....) Re-engaged (.....) Qualification (b)
 Occupation *Labourer* *W. W. W.* 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>A.I.</i>		Embarked	<i>2 JUL 1918</i>	
		<i>24-6-18.</i>		Disembarked	<i>5 JUL 1918</i>	
				<i>trained Battalion</i>	<i>Field</i>	<i>9-7-18</i>
	<i>of plun.</i>	<i>Ad. Discharge</i>				<i>Ans d. 13/7/18</i>
	<i>11 C.C.S.</i>	<i>Ad. Discharge</i>				<i>14/1/18</i>
	<i>10 Platy Hq</i>	<i>Ad. Discharge</i>		<i>Armed</i>		<i>19/9/18</i>
	<i>of plun.</i>	<i>Discharged Hq</i>		<i>Field</i>		<i>27/10/18</i>
		<i>Discharged in UK</i>				<i>7/1/18</i>
						<i>7/4/19</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.

W. 4548-312735 20,000 317 (35/11) C. P. & S., Ltd., Form B.103 B/1897.

P.T.O.

NEXT OF KIN:

William Foley Lt Colonel G. Gray

Nov 8th 1919.

Major Howley
O. I. C. Records

Please pay to P. Foley, 4156
the sum of ten dollars
in payment of allowance for five days to date
and charge same to Civil Re-establishment Committee

A.C.R.

\$10.00

Pension

Nil

H. Hunter
Vocational Officer

Pat Foley

ACCOUNT	
CH. NO.	19474 <i>Jew</i>
IND. LEDGER	INIT. NO.
PAY LEDGER	INIT. NO.
GEN. LEDGER	INIT. NO.

ACCOUNT	Trans.
CH NO	2484
TRD LEGGER	---
PAY LEGGER	---
GEN YEARS	---

Wickha Dept.

D^r To James Barron

Placentia

To Driving Private Lobby No 4156 Placentia
 To St Bridis fifteen dollars for Drive and
 one dollar for board.

\$16.00

Placentia June 16th 1919 Act



CERTIFIED CORRECT,

E. N. Cooper Capt. adjt.

March 24th 1919

July 23, 1919

Mr. James Barron
Placentia.
~~Spencer.~~

J. C. R.

Dear Sir:

I enclose herewith cheque
for \$16.00, amount due you for board (1 day)
and driving Pte. Polay No. 4156, from Placentia
to St. Brides.

Yours truly,

Capt.
Paymaster

GGB*EB

June 15th 1920.

Major Howley,
O. I. C. Pay & Records.

4156 P. Foley

Please pay the marginally named man,
the sum of twelve dollars, to cover cost of transportation
and meals to St. Brides, P. B. Charge same to the Civil Re-
establishment Committee.

\$12.00

J. C. A. Woodruff

Vocational Officer.

ACCOUNT _____	
CHK. NO. <u>39406</u>	INITIALS <u>OH</u>
INV. LEDGER _____	INIT - LS _____
PAY LEDGER _____	INITIALS _____
GEN. LEDGER _____	INITI LS _____

P. Foley

April 30th 1920

Major Howley
O. I. C. Records

Please pay to P. Foley, 4156
the sum of sixty dollars
in payment of P. & A. Bonus
and charge same to Civil Re-establishment Committee

\$60.00

Pension Nil

J. C. A. Grobeckall

Vocational Officer

P. Foley

ACCOUNT	
CHK. NO. <i>39381</i>	INITIALS <i>[Signature]</i>
INL. LEDGER	INITIALS
PAY LEDGER	INITIALS <i>[Signature]</i>
GEN. LEDGER	INITIALS <i>[Signature]</i>

C.R. 4156

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. 4156 NAME Patrick Foley

DATE Jan
PLACE 231. Gur. street.

1001

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

Fold Here

Signature

Date

Address

OCT 21 1921 1921.

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

Patrick Foley

in respect of his service as No. 4156 Rank Pte.

Name P. Foley Royal Nfld. Regt.
Nfld. Forestry Corps

Receipt of the same should be acknowledged hereon.

Received _____

Signature Patrick Foley

Date 9/1/22

Address 46 Clifford St.

[P.T.O.]

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
29.

Regiment of 1st Newfoundland

Number of Sheet One
Signature of O. C. Company [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>126</u>	Age on	<u>19</u> years <u>3</u> months	<u>Labour</u>	
Joined	Date	Place and Date of Enlistment	<u>Grand Falls</u>	Religion	
Joined	Date	Period of	<u>22-11-17</u>	<u>R.C.</u>	
Joined	Date	with Colours	<u>229</u> years.	Place of Birth	
Joined	Date	with Reserve	<u>365</u> years.		

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>Hazley down Camp</u>	<u>25.5.18</u>	<u>Rk</u>		<u>absent from tattoo to Sgt Scammell 2 days. CPD 10. 30 pm.</u>			<u>26.5.18</u>	<u>[Signature]</u>	<u>[Signature]</u>
				<u>Remobilized St. John's, 8/7/19</u>					

To be carried over

The Royal Newfoundland Regiment

846

DEMOBILIZATION OF

Reg. No. 4156 Rank Plt Name Foley Patrick
 Date of Enlistment 22.11.17 Address H. B. ... District Parryville
 Occupation Labourer Classification for Discharge F. Medical Category A1
 Recommendation S.M.B. Disability Rating
 Passed to Demobilization Officer with following documents:—

N.F. F36	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 7-6-19 for H. B. ... O. C. Discharge Depot.

PARTICULARS FOR DEMOBLIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

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 Shaw cap

Date 10-6-19

O. C. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R0657.9679 to his home at St Brendon and Release Certificate No. 2562 issued.

Date 10-6-19

J.A. Snowcraft
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 10-1-19

H.M. [unclear]
Depot Paymaster.

Discharge approved for.....

24-6-19

Forwarded with following documents to O.C Discharge Depot.

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

Date 10-6-19

J.A. Snowcraft
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 24 1919

R.H. [unclear]
O. C. Discharge Depot.

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

Date June 17/19

Jamieson [unclear]
for O.C. Records

Reg. No. *4156* Rank *The* Name *Polley. A.*

Attested Address *St Bruides*

Allotment Allottee

Date of Allotment Returned from Overseas *29.1.19.*

Returned on S.S. *Connaught* Cause *Discharge*

9.6.19.

24.5.19.

PASSED TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED ON DEMOBILISATION.