



FIRST NEWFOUNDLAND REGIMENT.

ATTESTATION OF

No. 1953 Name Patrick W. Moran Corps _____

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--------------------------------------|
| 1. What is your name? | 1. <u>Patrick W. Moran</u> |
| 2. What is your full Address? | 2. <u>Grand Falls</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your Age? | 4. <u>36</u> Years, <u>2</u> Months. |
| 5. What is your Trade or Calling? | 5. <u>Farmer - woods</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> |

I, Patrick W. Moran 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.

Patrick W. Moran SIGNATURE OF RECRUIT.
Ronald W. O'Neil Signature of Witness.

6th Nov. 1915

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Patrick W. Moran 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 Grand Falls, Nfld.
 on this 19th day of November 1915
Ronald W. O'Neil
 Signature of the Attesting Officer.

† Certificate of Approving Officer.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the: _____
 If enlisted by special authority, such will be attached to the original attestation.

Date _____ 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, the 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) _____

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FIRST NEWFOUNDLAND REGIMENT.



ATTESTATION OF

No. 1983 Name Patrick N. Foran Corps _____

Questions to be put to the Recruit before Enlistment

1. What is your name? 1. Patrick Foran
2. What is your full Address? 2. Grand Falls
3. Are you a British Subject? 3. Yes
4. What is your Age? 4. 36 2 Months.
5. What is your Trade or Calling? 5. Tapet carmaker
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. Yes
8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
9. Are you willing to be enlisted for General Service? 9. _____
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? 10. { Name _____
Corps Yes
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. _____

I, Patrick N. Foran 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.

6. Nov. 15th 1915 Patrick N. Foran SIGNATURE OF RECRUIT.
Edward W. G. G. G. Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Patrick N. Foran 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 Grand Falls on this 15th day of November 1915
Edward W. G. G. G. Signature of the Attesting Officer.

† Certificate of Approving Officer.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the : _____
If enlisted by special authority, such will be attached to the original attestation.

Date _____ 1915
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, the 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 W. Folan
 Apparent age 36 years 2 months. Height 5 feet 8 1/2 inches.
 Chest measurement { Girth when fully expanded 38 inches.
 Range of expansion 2 inches.
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Patrick J. Folan, Grand Falls
 _____ | Relationship Father

Particulars as to Marriage.

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

Particulars as to Children.

Christian Names.	Date and Place of Birth.

STATEMENT OF THE SERVICES.

Corps in which served	Rgt. or Depot	Promotions, 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>15-11-15</u>									
Joined at <u>St John's</u> on <u>November 15 15</u>									
<u>Embarked St John's train to St John's N.S. 15 15</u>									<u>Embarked for B.C. 14 16</u>
<u>Discharged 15-6-16</u>									
<u>Wounded 1-7-16</u>									<u>Admitted F. Co, 1st Regt. 16-10-16</u>
<u>Admitted 4 London Regt 4-7-16</u>									
<u>Admitted 28-10-16</u>									<u>Discharged medically unfit St John's 5-12-16</u>
<u>Admitted 28-10-16</u>									
<u>Admitted 28-10-16</u>									<u>Admitted 17-11-17</u>
<u>Admitted 28-10-16</u>									
<u>Admitted 28-10-16</u>									
<u>Admitted 28-10-16</u>									
<u>Admitted 28-10-16</u>									
<u>Admitted 28-10-16</u>									
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<u>Admitted 28-10-16</u>									
<u>Admitted 28-10-16</u>									
<u>Admitted 28-10-16</u>									
<u>Admitted 28-10-16</u>									
<u>Admitted 28-10-16</u>									
<u>Admitted 28-10-16</u>									
<u>Admitted 28-10-16</u>									

Total Service forfeited as above

Total Service towards Engagement to 5-12-16 (date of discharge) ... years 353 days

" " " Pension " " " " " "

Regimental Number 1983

Company G

THE
1ST NEWFOUNDLAND REGIMENT.

I hereby enlist for service at home or abroad in the King's Forces under the following conditions:

For the duration of the present war, or until my discharge.

Subject to the Army Act, the King's Regulations, and to such ordinances as may apply or may be made to apply to the British Regular Army.

Subject to the Newfoundland Volunteer Act, 5 George V., Chapter IV.

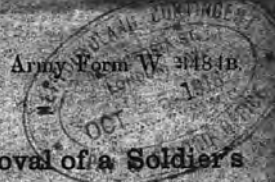
Signed Patrick W. Moran

Witness H. Howsell (2nd Lieut)

Dated at Arg.

May 24th 1916.

Referred to Special Medical Board Act 1935.



Notification by President of Medical Board of Approval of a Soldier's Discharge under Paragraph 392 (xvi.) King's Regulations.

(To be completed and dispatched on the day on which the discharge is approved.)



1983

To the Officer i/c Records 53 Victoria St. SW

The Soldier named below has appeared before an Army Medical Board at this station, and his discharge from the Service as "no longer physically fit for War Service" has **this day** been approved. (The discharge will be confirmed for a date 14 days after the date on this notification—see A.C.I. 1623 of 1916.)

Soldier's surname Sutton, Christian names Patrick William
(in full)

Regt. No. and Rank 1983. Pte. Regt. or Corps 1st New Southland.
(If T.F. this should be stated)

His address on discharge will be Grand Falls
New Southland.

This information is for the Central Army Pension Issue Office only. The Soldier states that* no. allowance is being issued in respect of him.

*Insert "separation," "dependants," "family," or "no," as the case may be. The space must not be left blank.

Army Form D. 400A. and Army Form B. 179 for the above-named Soldier are forwarded herewith.

Station 4th London General Hospital, R.A.M.C., Y.

Date 2-10-16.

D. H. Dwyer Capt. R.A.M.C.
President of Board
(Approving Officer)

A set of three forms will be made out for each soldier whose discharge is approved, and will be dispatched to the officers severally indicated.

Attention is drawn to the fact that Forms A, B and C of each set are not in identical terms.

C.R. 1983

Patk. W. Foran was attested for General
Service with the NEWFOUNDLAND REGIMENT ON Nov. 15th 1915.
Regimental No. 1983 was allotted to P. W. FORAN.

AUTHORITY:

Record Ledger;

Dept. of Militia.

March 25th 1919

C.R. 1983

Extract from Nominal Roll of WFLD. Regt. Draft No.6.
from 2nd Bn., Depot to 1st Bn., B.S.F. Embarked
Southampton, 14-6-16.

1983 Pte. P.W.Foran.

C.R. 1983

Extract from Daily Orders Part 11 Unit The Royal
Nfld. Regt., Nov.17th, 1916.

1983 Pte. P. Foran.

Attached to the strength from Nov.17th, 1916.

C.D. 1983

Extract of Casualties received from War & Record Office,
London, dated July 31, 1916.
(Extract from Army Form B 815, from 1st. Field. Regt.
dated 30/11/16.

#1983 Pte. P. Foran. ✓

Wounded in Action 1/7/16.

W
H
P
1
M

July 13, 1916.

Dear Sir,

I am in receipt of your letter of the 9th instant regarding your son and I am very sorry that his name appears on the Casualty List. As regards his physical and mental condition, the doctors at the hospital will certainly know exactly what to do with him and I feel sure that they will take his case into the fullest consideration. You may depend upon it that, if he is not properly fit, they will find other work for him to do than at the front. I do not think it would be any use at all sending your letter over for the chances are it would never reach the person for whom it was intended and the doctors in any case would be guided by their own examination of your boy's condition.

Yours truly,

Colonial Secretary.

Mr. P. J. Foran,
Grand Falls.

C.R. 1983
Kings Cove B.B.

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Sir
I notice an add in the Papers
that all men of the 1st Regt
are entitled to the General Service
Ribands

Please send me one

Constable P. W. Faran

1983

C.R. 1983

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P.&.R.O.
July 13th. 1916.

1983, Pte P.W. Foram. ✓

1/Newfoundland D. GSW W Shell Shock Slight. Adm. 3
Can. Gen. Hos. Boulogne 3rd July 1916.

C.R.



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

SHREWSBURY RECORD OFFICE

No.H.B.460

23440 Pte. Shackell E.	16th Welsh	Abscess in Groin Slit.	Adm. Royal Infirmary Hos. Chester 4th July '16
17548 " Appelby H.	1st R.W.Fus.	Wounded Sev.	Adm. 1st Southern Gen. H. Edgbaston Birmingham 4 July '16
18638 " Goodyear A.E.	2nd S.W. Borderers	" "	do.

INDIAN FORCE INDIA FORCE

No.H.B.460

70057 Bdr. Heming W.	Ex Batt. (Amballa) R.H.A. Cas. Bde.	Wounded Slit.	Adm. 1 Southern Gen. H. Edgbaston B'ham 4th July '16
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MACHINE GUN CORPS RECORD OFFICE

No.H.B.460

17694 Pte. McWathers A.	Mach. Gun. Coy. 108 Brig. 36 Div.	Sick Sev.	Adm. 1 Southern Gen. H. Edgbaston B'ham 4th July '16
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NEWFOUNDLAND CONTINGENT

No.H.B.460

1985 Pte. Foran P.	1st Newfoundland	Shell Shock Slit.	Adm. 4 London Gen. H. Denmark Hill S.E. 4th July '16
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PERTH RECORD OFFICE

NO.H.B. 460

2493 Pte. Hughes J.	2 Seaforth Hlrs.	GSW. R. Thigh Wd.	Adm. Roy. Inf. Hos. Chester 4 July '16.
758 " Baraacle A.	2 do.	" L. Leg.	do.
7677 " Whiston T.	2 do.	" R. Leg Wd.	...
9979 " Moraghan	2 Gordons	Wounded Slit. ? ...	Adm. 1 Southern Gen. H. Edgbaston Birm'ham 4 July '16.
381 Sgt. Boyle P.	2 do.	do. Sev.	do.
2610 Pte. McMurtrie J.B.	2 Gor. Hldrs.	do. "	do.

HAMILTON RECORD OFFICE

NO.H.B. 460

11183 Pte. Hunter J.	1 K.O.S.B.	GSW. R. Leg Wd. Slit.	Adm. Roy. Inf. Hos. Chester 4 July '16.
14586 Cpl. McCaig ?	H.M.H. 16 Highland L.I.	" Face " Sev.	...
1063 Pte. Cunningham D.	15 do.	Shell Shock Slit.	Adm. 4 London Gen. Hos. Denmark Hill S.E. 4 July '16.
13814 " McIlroy T.H.	15 do.	do. "	do.

2085

So Dear Sir I would be
 Ever thankful to you to let
 it be known ~~be~~ in time
 that I claim ~~that~~ that if
 he recover that he is not
 fit to put on firing
 line if there could be any

thing else found for him
 to do and I say if he do
 recover and is sent in the
 firing line again the same
 thing will happen again
 as I know that its very easy
 matter to put him off his
 head altogether as all
 his Brothers is partly the
 same way I know he can
 pass Examination but
 the doctors did not
 deal with this point

Grand Falls

July 9th 1916

Hon Col Sectomy

Dear Sir

I received the sad news
 of my Son from you
 yesterday which did not
 surprise me very much
 as it was getting more
 than I expected

and I am now
 asking you as a friend
 to send this communication
 to the proper authorities
 at the War office ~~to~~
 them know what I have
 to say in the matter

in Conclusion I wish
 to ask you to forward my
 Statement to the authorities
 and try to find out for
 me how he is and perhaps
 you may get a reply to
 my Statement as I will
 be anxious to know
 if any small cost occurs
 to you in the matter I
 am satisfied to pay
 and I do claim that boy
 is not fit for that work
 as I had my own trouble
 with him in the Past
 I am yours Respectfully

P. J. Foran

and as I am his Father
 there is no doctor no him
 better than I do and I
 want. Let it be known
 that I had my own trouble
 with that boy in the
 past as he is troubled with
 Insanity and heart trouble
 and as any shock or fright
 is likely to bring it on him
 at any time it is only
 two years ago since I
 buried his Brother after
 spending two years in
 the Lunatic Asylum so
 any shock or noise will
 knock him out and likely
 to put off his head
 altogether

NEWFOUNDLAND POSTAL TELEGRAPHS.**Cable Connection with all the World**

F 27

All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender _____

Address _____

Line Number	Rcd	By	Check
		<i>FW</i>	<i>W. Foran</i>

Dated _____

July 8, 1916.

To _____

Mr. Patrick J. Foran,

Grand Falls.

I regret to inform you that No. 1983, Private Patrick W. Foran, is reported at Fourth London Hospital shell shock slight.

J.R. BENNETT

Colonial Secretary.

C. 2.—Casualties.

COLONIAL CONTINGENTS ONLY.

Army Form 30884

JUL 8 - 1916

4th. London General HOSPITAL, at Denmark Hill, S.E.

Affiliated to

NOMINAL ROLL of Sick and Wounded from the * France Expeditionary Force
 admitted on 4th. July, 1916. from Hospital Ship "Cambria". Southampton
 or
 Dover.

* Here insert which Expeditionary Force.

The nature of the casualty is required for telegraphing details overseas. If the details given are insufficient, reference back to the hospital for further information is rendered necessary. The following instructions should therefore be carefully followed in all Colonial cases:

(a) In the case of sickness, the nature and degree should be stated, e.g., enteric, slight.

(b) In the case of wounds, the nature of the wound, the part of the body affected, and the severity of the injury should be stated, e.g., gunshot, skull, severe.

If a limb has been amputated the fact should be recorded.

NOTE.—These rolls should be forwarded direct to the War Office, Alexandra House, Kingsway, W.C., not later than the day after admission; envelopes to be marked C. 2, Casualties; rolls are not to be telegraphed in advance. The duplicate of the rolls should be sent to the Officer in charge of Records of the Colonial Contingent concerned.

Admissions to the outlying sections of the hospital should be shown separately. If the distance of these sections should render it impossible to forward the rolls the day after the admissions, the sections should be instructed to send lists (on these Army Forms) direct to the War Office, and to the Colonial Contingent Record Office concerned.

Regtl. No.	Rank	Name (Surname first)	Corps (Battn. numbers to be shown, also full title of Colonial Unit)	Casualty (See note in large type above).
1983	Pte.	Foran, Patrick.	1st. Newfoundland.	Shell Shock; slight.
			Major R.A.M.C., T. Registrar, 4th. London General Hospital.	
		To O. i/c Records, Newfoundland Contingents, 58, Victoria Street, S.W.		

CR. 1983

C.R.

1983

Extract from Nominal Roll of Draft which embarked for
B.E.F. on or about the 20 June 1916.

#1983 Pte. P.W. Foran.

C.R. 1983

Extract from Nominal Roll Entained St. John's for Overseas.

Dec. 18, 1918. "H"

1985 Pte. Foran Patrick W.

A. W. Poran:

C.R.

1983

P. 60.

No. 1983

Name Foran, Patrick W. Sqn., Batty., or Company

9. Corps 2nd Regt.

Date of enlistment

15/11/15

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.

Signature O.C. Company, etc.

Character

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

Army Form B. 122

[v.t.o.]

No. 1983 Name

Eaton, Patrick W. Sqn., Batty., }
or Company }-G. Corps 712nd Med. Regt.

Date of enlistment } 15/11/15.

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 time }

Sheet No.

Signature O.C. Company, etc. }

Character

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

Army Form B. 122

In. r. o.

12-2

SPECIAL MEDICAL BOARD AWARD

FINAL GRATUITY OF £15 (FIFTEEN POUNDS)

A. Fletcher, M.B., F.R.C.S., President (Army)
78, LANCASTER GATE, W. Date 4.10.16



Medical Report on an Invalid.



Station H. Landa General Hospital

Date Oct. 18/16

- 1. Unit 1st Newfoundland
- 2. Regimental No. 1983
- 3. Rank Plt
- 4. Name Foran Patrick W.
- 5. Age last birthday 36
- 6. Enlisted { on 12.11.11
at R.M. Newfoundland
- 7. Former Trade or Occupation { miner.

8. Disability.

Shell shock
Traumatic stricture of urethra

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. (1) Original injury some 7 years ago
(2) Shell shock. 7 June 16.
- 10. Place of origin of disability. (1) Newfoundland - hospitalized in same
(2) Home.
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

He was admitted here suffering from shell shock from which he was ~~admitted~~ has recovered. -

A week or so after admission he suffered with ~~acute~~ retention of urine, which was found to be due to a traumatic stricture resulting from explosion another some years ago, & which was brought about by a fall on the perineum. -

Two days before being here he fell in the trenches & struck his perineum with his rifle, which probably led to a renewance of explosion. -

Then he has had supra. pubic cystostomy & also perineal section.

- 12. (a) Give your opinion as to the causation of the disability. (1) the old injury
(2) the fall on the trenches
(3) shell shock.

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 8).

Certainly aggravated by
military service

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 has a very light traumatic stricture of the urethra, & a very hypertrophied bladder. -
The wounds of the supra-pubic & perineal operations have healed. -
No instrument ^{can} be passed thro' the stricture even under an anaesthetic, but the opening is probably funnel-shaped & he is able to pass urine fairly well. -*

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

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

shell shock equivalent -

not caused. operated

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 ?

Yes -

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 ?

✓

19. Do you recommend

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

Yes (a)

J. A. D. ...
and partner Officer in medical charge of case.

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

Station 11th London General Hospital, P.A.S.S.

Nestor Lizard LIEUT.-COL. R.A.M.C. (T),
11th London General Hospital.

Date 30 SEP 1916

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.

Opinion of the Medical Board.

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

- (ii.) Expressions such as "may," "might," "probably," &c., should be avoided.
- (iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1918).
- (iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.
- (v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

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

shell shock - Due to (i) shell shock
Stricture - not due to military service

21. Has the disability been aggravated by

(a) Intemperance?

no

(b) Misconduct?

no

(c) Any of the conditions mentioned in question 20, and if so, which?

stricture - Blood with rifle

22. Is the disability permanent?

Stricture - yes - shock no

23. If not permanent, what is its probable minimum duration?

↓ 12 months

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

Total

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{2}$, $\frac{1}{3}$, or total incapacity.

24A. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?

no

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

✓

26. Do the Board recommend

(a) Discharge as permanently unfit, or

yes

(b) Change to England-2.

Signatures:—

D. H. de Souza President. Colonel, R.A.M.C. & Civil Practitioner

Station 4th London General Hospital, R.A.M.C., T.

B. Bellis Clifts Captain, R.A.M.C. & Civil Practitioner

Date 2 OCT 1916

J. W. Stewart Members. Civil Practitioner

Approved.

Station 4th London General Hospital, R.A.M.C., T.

D. H. de Souza Captain, R.A.M.C.

Date 2 OCT

Administrative Medical Officer.

SURGEON COLONEL

D.D.M.S.

LONDON DISTRICT

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

MEDICAL HISTORY

OF

Surname JoranChristian Name Patrick W.

Table I.—GENERAL TABLE.

Birthplace:—Parish

County W. York

	SPECIAL RESERVE.		REGULAR ARMY	
	on	day of	on	day of
Examined	on	11 th day of <u>Nov</u>	on	day of
	at	<u>St John's W. York</u>	at	
Declared Age.....		<u>36</u> years		years
Trade or Occupation				
Height		<u>5</u> feet <u>8½</u> inches		feet inches
Weight		<u>140</u> lbs.		lbs.
Chest Measurement {		Girth when fully expanded...	<u>38</u> inches	inches
		Range of expansion...	<u>2</u> inches	inches
Physical Development.....				
Vaccination Marks {		Right	Left	Right
		Left	Right	Left
When Vaccinated		<u>1911</u>		
Vision		R.E.—V==	<u>4/6</u>	R.E.—V==
		L.E.—V==	<u>4/6</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>L. Mont Paterson</u>		
(Rank)		<u>Capt</u>	Medical Officer.	Medical Officer.
Enlisted	at	<u>St John's</u>	at	
	on	<u>10</u> day of <u>Nov</u>	on	day of
		191 <u>6</u>		191
Joined on Enlistment		Corps.	Regtl. No.	Corps.
		<u>1st West Yorks</u>	<u>1983</u>	
Transferred to				
Became non-effective by	on	day of	on	day of
		191		191
(Signature)				
(Rank)				

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

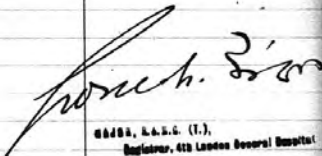
Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of further use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
Hospital, R.A.M.C. I.	4	7	16	15	10	16	Shell Shock. Traumatic Stricture of urethra.	104	Has a very tight traumatic stricture. After urethra & a ring by prostatic bladder - is unable to pass urine fairly well. Medical Board	 F. H. P. G., M.B., B.S. (L.), Registrar, 412 London General Hospital

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

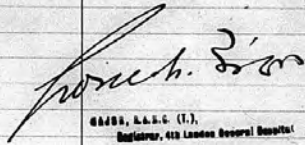
Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of further use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
London General Hospital, D.A.M.O. I.	4	7	16	15	10	16	<p>Shell Shock. Traumatic Stricture of urethra.</p>	104	<p>Had a very high spinal stricture. got urethra on way by perforated bladder. He is able to pass urine fairly well. Hadical 10 rods.</p>	 G.H.G. (I.), Registrar, 412 London General Hospital

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.: Examination 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
Nov. 20/16	1 st Inoculation
Dec. 9/16	2 nd " "
" 24/15	<p>Medic Permanently Unfit.</p> <p>Approved 2 OCT 1916</p> <p style="text-align: right;"><i>Forest H. Zinn</i> <small>MAJOR, R.A.M.C. (I.), Registrar, 4th London General Hospital.</small></p>

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
St. John N. 1st					



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Patrick Williams Fagan, Regl. No. 1483

hereby agree, until further notification by me, and in similar official form to make an Allotment of
 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 Dec 19th

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
1719	Father	Patrick Fagan	Grand Falls	60
			to be deposited in	
			Bank of Montreal in Name	
			of Self & Father or either	
			Total Allotment, \$	

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.

J. J. Grady Sub
 Officer Commanding

H Company

St. Johns N.Z.

Dec 11th 1915

(Sig.)

(Rank)

Patrick W. Fagan
 Private

R-2

Newfoundland

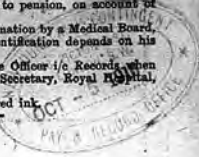
Descriptive Return of a Soldier discharged on account of Disability.

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 Commissioners of Chelsea Hospital.

Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/c Records, when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.

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



A Name in full Patrick William Goran
 Regiment from which discharged 1st New Foundland
 Regimental Number 1983
 Intended address Grand Falls New Foundland

Height on discharge 5 Feet 9 1/2 Inches
 Colour of Hair on discharge Light Colour of Eyes Blue
 Figure on discharge Medium
 Christian name of Father Patrick
 Christian name of Mother Martha
 Wife's Maiden name in full _____
 Date and Place of Marriage _____
 Christian names of Children _____

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 W Goran Pte (Rank)

Station 4th London General Hospital Date Sept 29th 1916

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.

Weston Island

Medical Officer i/c
HOSPITAL
U.C., 4th London General Hospital.

Station _____ Date 29.10.16.

B Period of Service and in what Corps ...	Regiment	Years	Days	All Service Abroad with Stations	Years	Days
					India	
				S. Africa		
Disallowed ...						
Service towards Pension ...						
Date inclusive to which pay has been issued	Sum due on account of advance of Pension }					
Sums due on account of public debts ...						

Rank on Discharge _____
 Character (as on Certificate of discharge) _____
 Where born, and on what date _____
 Date and Place of first Enlistment _____
 Trade on Enlistment _____
 Cause of Discharge _____
 Number of G.C. Badges _____
 Wounds, and Actions in which received _____

Medals

Other distinguishing marks

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.

Station _____ Date _____ Officer in Charge _____ Records.



PAY LIST. *Sept. 30th* to *Oct 27th* 1916. Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps *2/1st Newfoundland Regt*
 No. *1983* Rank *Pte* Name *P. Moran*
 Died (a) at on the of 191
 Deserted at *Repatriation* on the of 191

I Certify to the correctness of above in every particular.

J. Kinn (Commanding Squadron, Troop, Battery of Company)

STATEMENT OF ACCOUNT.

[FORM 1.]

Date.	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month	12	15	6 1/2
	Cash issues (Date of each issue to be stated)				Pay 11 days at 1/10 from <i>17/10/16</i> to <i>27/10/16</i>	2	9	8
	<i>Sept 20th 1916</i>	10	0		Proficiency, Service or good conduct pay			
	<i>" 26 "</i>	1	0		days at from _____ to _____			
	<i>" 27 "</i>	12	5	8 1/2	Messing allowance days at			
	<i>1/3</i>	15	8	1/2	from _____ to _____			
	<i>Colt. 11 days 600/-</i>	11	7	2	Clothing and kit allowance			
	<i>Post acct</i>				Amount produced by the sale of Necessaries			
	<i>Barrow Yamagoo</i>		1	3	Personal Clothing and Effects from Form 2...			
	<i>Paundref</i>			10	Amount of Savings Bank balance, including			
	<i>Consolidated stppage.....</i>				interest (if no balance, to be so stated)			
	Balance due by the Paymaster			3	Deferred Pay or Gratuity			
		£ 15	5	2 1/2	Balance due to the Paymaster.....	£ 15	5	2 1/2
				7 1/2				7 1/2

I hereby Certify that the above account is correct in every particular, ~~and that the debtor balance of £~~ *is correctly chargeable against the Public.*

NEWFOUNDLAND CONTINGENT

Dated at this day of 191

PAYMASTER & OFFICER IN CHARGE
Paymaster

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with A.F.B. 2090 or Army Form O. 1815.
 (b) Words in Italics to be struck out when there is no debtor balance.

CHECKED.
BC

147/8

Officer Commanding,
1st Newfoundland Regt.,
Headquarters,
St. John's, Nfld.

HT/NW

5th January, 7.

No.1983, PTE. P.W. FORAN.

With reference to this office
No.5551/251, 20/12/16, I enclose
original:

W.O. Letter 120805/16. (S.2),
25/12/16,
Special Medical Board on
Neurasthenia; Award
for Gratuity.

Copy of this office No.146/1
5/1/17, in reply,
for information and for what
action may be decided upon.

It may be mentioned that
forms and information asked for by
the O.C. Depot, H.Q., in his letter
dated 12/10/16 are still awaited
from the War Office. Meanwhile
reminders have been sent.

Major,

Paymaster & O. i/c Records.

ORIGINAL

NEWFOUNDLAND CONTINGENT.

MEMORANDUM.

No.2085/204.

From

PAY & RECORD OFFICE.

58, VICTORIA STREET,

LONDON, S.W.

31, May, 1916.

To

O.C.,

2/1 Newfoundland Regiment,

Newton-on-Ayr,

Scotland.

SUBJECT: NO.1983 PTE.PATRICK W.FORAN.

REPLY

Dated

1st June 1916

Reference Nos.

Please return ORIGINAL and retain DUPLICATE.

Draft £3.14.3 enclosed, received
30/5/16 per letter from Bank of
Montreal, Grand Falls, Newfoundland

"Enclosed please find cheque on
our London Office for £3.14.3 in
favor of Pte.Patrick Wm.Foran,
Regtl.No.1983, H.Company, First
Nfld.Regiment. I shall be obliged
if you will have this delivered
to him through his Commanding
Officer."

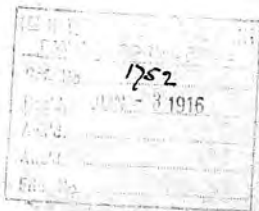
Please acknowledge.

M. A. Minwell
Capt.

Paymaster & O.I/c Records.

*Draft for £ 3:14:3
received, and handed
to Pte. P. W. Foran.*

*W. H. Hindell
Major
for O.C. 2/1st Nfld Regt*



NEWFOUNDLAND CONTINGENT.

MEMORANDUM.

No. 1751/162.

From

PAY & RECORD OFFICE.

58, VICTORIA STREET,

LONDON, S.W.

9, May, 1916.

To

O. C.,

2/1 Newfoundland Regiment,

Newton-on-Ayr,

Scotland.

SUBJECT: NO.1983 PTE.PATRICK W.FORAN.**REPLY**

Dated

May 13th

1916

Reference Nos.

Please return ORIGINAL and retain DUPLICATE.

Draft £12.19.9 enclosed, received
this date per letter from Bank of
Montreal, Grand Falls, Newfoundland:-

"I am enclosing herewith our
"cheque on our London Office for
"£12.19.9 in favor of Private
"Patrick William Foran, Regtl.No.
"1983, H.Company, First Nfld.
"Regiment. He has sent us a re-
"quest for some money but to make
"sure of this reaching the correct
"party, would ask you to have this
"delivered through his Commanding
"Officer."

Please acknowledge.

W. A. Munnell
Capt.

Paymaster & O. i/c Records.

*Herewith receipt to Draft
of £12-19-9.
H. F. S. Gibson Capt. R.*

ADJUTANT,
2nd/1st NEWFOUNDLAND REGIMENT,
NEWTON-ON-AYR, N.B.

1st NEWFOUNDLAND REGIMENT	
PAY & RECORD OFFICE	
Date	1527
Rec'd.	MAY 15 1916
Ack'd.	
Ans'd.	
File No.	

5th January, 7.

146/1

The Superintendent,
Central Army Pension Issue Office,
Baker Street, W.

Sir,

No.1983, Pte. P.W. Foran, 1st Newfoundland R.

With reference to your letter 23/12/16 and subsequent conversation per telephone, the matter has been referred to H.Q., St. John's, Newfoundland, where such questions are dealt with.

I am,

Sir,

Your obedient servant,

Major,

Paymaster & Officer i/o Records.

HT/NW

2/ N. 7 Regt
N. on App.
N. 15.

Bank of Montreal,
Grand Falls, Nfld.

April 18th 1916.

The Paymaster,

First Nfld Regiment,
58 Victoria Street,
London, S.W.

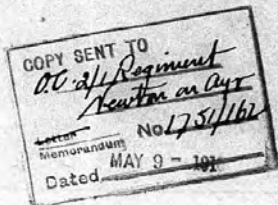
Dear Sir,

I am enclosing herewith our cheque on our London office for £12. 19. 9. in favor of Private Patrick William Foran, Regl. No. 1983, H. Company, First Nfld Regiment. He has sent us a request for some money but to make sure of this reaching the correct party, would ask you to have this delivered through his Commanding Officer.

Yours faithfully,

H. J. Brewster

Acting Manager.



RECEIVED	1916
NO. 1453	
MAY - 9 1916	
FILE NO.	



(Station) Prestwick

(Date) May 12 1916

RECEIVED of

Paymaster of H.M. Customs

the sum of

Twelve pounds sixteen & nine pence

in respect of

Draft from Bank of Montreal, Grand Falls
Nfld.

£ 12 : 19 : 9.

P. W. Fagan

* Insert the designation of the Officer making the payment.

15, May, 6.

1859/1.

The Manager,

Bank of Montreal,

Grand Falls, Newfoundland.

No.1983, Pte. P. W. Foran.

Reference to your letter 18/4/16 enclosing draft £12.19.9 in favour of No.1983 Pte. P.W.Foran: this was forwarded to the O.C. 2/1 Newfoundland Regiment to be handed to payee, whose receipt I now hold.

Capt.

Paymaster & O. 1/c Records.

Bank of Montreal,

Grand Falls, Nfld.

May 9th 1916.

The Paymaster,
First Nfld Regiment,
58 Victoria Street,
London, S.W.

Dear Sir,

enclosed please find cheque on our London office for £ 3. 14. 3. in favor of Pte. Patrick Wm. Foran, Regl.No.1983, H.Company, First Nfld Regiment. I should be obliged if you would have this delivered to him through his commanding Officer.

Yours truly,

R. J. Hurst

Acting. Manager.

COPY SENT TO	
<i>2d Lt. 2/1 Regiment</i>	
<i>Ayr</i>	
Memorandum No.	<i>2085/204</i>
Dated	<i>21/5/16</i>

RECEIVED THE PAYMASTER
PAYROLL OFFICE
No. <i>1679</i>
MAY 3 1916
AND
AND
AND

2085/204.

O.C.,

2/1 Newfoundland Regiment,

Newton-on-Ayr,

Scotland.

31, May, 1916.

NO.1983 PTE.PATRICK W.FORAN.

1st June, 1916.

Draft £3.14.3 enclosed, received
30/5/16 per letter from Bank of
Montreal, Grand Falls, Newfoundland:

"Enclosed please find cheque on
our London Office for £3.14.3 in
favor of Pte.Patrick Wm.Foran,
Regtl.No.1983, H.Company, First
Nfld.Regiment. I shall be obliged
if you will have this delivered
to him through his Commanding
Officer."

Please acknowledge.

Draft for £3.14. 3
received, and handed to Pte.
P.W. Foran.

(Sd.) W.F. Rendell, Major,
for O.C. 2/1st Nfld. Regt.

Capt.

Paymaster & O.I/O Records.

Jordan, W.

1983

May & Sept

STATEMENT OF ACCOUNT

No. 1983

Name Joran P.W.

Folio 59482/1

Date	Particulars	Ch.No.	Dr.	Cr.	Bal.
Oct 27	Balance due by PM				06
11	By Pay 1 day @ $\frac{10}{100}$				06
21	" " 10 " @ $\frac{10}{100}$			16 50	16 56
21	" " 21 " @ $\frac{25}{100}$			16	32 56
30	" " 9 " @ $\frac{155}{100}$			5 25	37 81
Dec 5	" " 5 " @ $\frac{185}{100}$			16 65	54 46
	Bonus			9 25	63 71
	b. allowance			12 95	76 66
1916				25 00	101 66
October 31	% allotment 4 days @ $\frac{60}{100}$				99 26
Nov 21	To Pay		2 40		
		48	20		79 26
30	% allotment 30 days @ $\frac{60}{100}$		18 60		61 26
Dec 1	To Pay	58	60	2 26	1 00
			100	66	101 66
				101	66
					100

Signed A. J. Wany SSM

STATEMENT OF ACCOUNT

No. 1983Name Joran Lee

82/

Date	Particulars	Ch.No.	Dr.	Cr.	Bal.
	Brought forward		100 66	101 66	1 00
	Wan Senora Security 4 M ^o @ 470 ⁰⁰ / ₁₀₀			280 00	281 00
	Bonus		12 95		268 05
1919					
March 1	To Pay	10655	70		198 05
April 2	" "	13597	70		128 05
May 1	" "	17176	70		58 05
June 1	" "	31401	57 05		0
			380 66	381 66	1 00 Cr

Dr Balance \$1⁰⁰/₁₀₀Signed Aloany Ston

Certified True Copy
[Signature]

Special Medical Board award
Special Fraternity of 2/8 (Twenty Pounds)
W. Helcher, Peter, Major Helcher, President (Actg)
78 Lancaster Gate, W. Date 4.10.16



Medical Report on an Invalid.

Station London General Hospital

Date Sept 28th 1916

- 1. Unit, Newfoundland
- 2. Regimental No. 1983
- 3. Rank Pte
- 4. Name John Patrick W
- 5. Age last birthday 36
- 6. Enlisted on 1st Nov 15
at St John's Newfoundland
- 7. Former Trade or Occupation Mine

8. Disability.

Shell Shock
Tramatic Stricture of Urethra

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. (1) Original Injury some 7 years ago
(2) Shell Shock June 16
- 10. Place of origin of disability. (1) Newfoundland exacerbated in France
(2) France

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

He was admitted here suffering from shell shock from which he has recovered. A week or so after admission he suffered with retention of urine which was found to be due to a tramatic stricture resulting from ruptured urethra some years ago & which was brought about by a fall on the perineum. Two days before leaving France he fell in the trenches & struck his perineum with his rifle, which probably led to a recurrence of symptoms. Here he has had sofa labie cystotomy & also perineal section.

- 12. (a) Give your opinion as to the causation of the disability.
 - (1) The old injury
 - (2) The fall in the trenches
 - (3) Shell Shock

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3).

Certainly aggravated by
Military Service

13. What is his present condition?

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

He has a very tight traumatic structure of the urethra & a very hypertrophied bladder. The wounds of the spongia & fibra perineal operations have healed, no instrument can be passed through the stricture even under an anaesthetic, but the opening is probably funnel shaped & he is able to pass urine fairly well.

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

Shall shock equivalent -
Not caused aggravated

- (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?

Yes
No

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

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

19. Do you recommend

- (a) Discharge as permanently unfit,
- (b) ~~Change to England &~~

Yes

J. Wallace, C.S. London
Civil Surgeon Officer in medical charge of case.

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

except†

London General Hospital Nestor, David
Station _____ Officer in charge of Hospital

Date 30 Sept 1912

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

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

Opinion of the Medical Board.

Notes.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

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

(iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1163, Pay Warrant, 1913).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

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

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

*Shell Shock - Due to (i)
Shell shock
Stricture - not due to military service -*

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

21. Has the disability been aggravated by

(a) Intemperance? *No*

(b) Misconduct? *No*

(c) Any of the conditions mentioned in question 20 or if so which.

22. Is the disability permanent?

*Stricture - Blow with rifle
Stricture yes - Shock no
12 Months*

23. If not permanent, what is its probable minimum duration?

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

Total

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{2}$, $\frac{1}{3}$, $\frac{1}{4}$, or total incapacity.

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

26. Do the Board recommend

(a) Discharge as permanently unfit, or

(b) Change to England?

Yes

Signatures:—

London General Hospital

*D. de Souza, Capt. R.A.M.C. President.
E. Ellis Clayton, Capt. R.A.M.C. Members*

Station

Date

2 October 1916

R. W. Hewitt, Civil Practitioner

Approved.

London General Hospital

*D. de Souza, Capt. R.A.M.C. Administrative Medical Officer.
Surgeon Colonel
for S.D. District*

Station

Date

2 October 1916

*for S.D. District
London District*

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 Commissioners of Chelsea Hospital.
 Statements should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.
 Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

A Name in full Yorau Patrick William
Regiment from which discharged 1 Newfoundland
Regimental Number 1983
Intended address Grand Falls Newfoundland
Height on discharge 5 Feet 9 1/2 Inches
Colour of Hair on discharge Light **Colour of Eyes** Blue
Figure on discharge Medium
Christian name of Father Patrick
Christian name of Mother Martha
Wife's Maiden name in full _____
Date and Place of Marriage _____
Christian names of Children _____

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 W. Yorau (Rank) Private
 Station London General Hospital Date 29 September 1916

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.

Netherdirard Medical Officer
of the London General Hospital

Station _____ Date 29 September 1916

B Period of Service and in what Corps ...	Regiment	Years	Days	All Service Abroad with Stations		
				Years	Days	
				India		
				S. Africa		
Disallowed ...						
Service towards Pension ...						
Date inclusive to which pay has been issued				Sum due on account of advance of Pension }		
Sums due on account of public debts ...						

Rank on Discharge
Character (as on Certificate of discharge)
Where born, and on what date
Date and Place of first Enlistment
Trade on Enlistment
Cause of Discharge
Number of G.C. Badges **Medals**
Wounds, and Actions in which received

Other distinguishing marks

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.

Station _____ Officer in Charge
 Date _____ Records.

Notification by President of Medical Board of Approval of a Soldier's
Discharge under Paragraph 592 (xvi) King's Regulations.

(To be completed and dispatched on the day on which the discharge
is approved)

To the Secretary.-

Pensions & disabilities Board.
St. John's, Nfld.

The Soldier named below has appeared before an Arm Medical Board at
this station and his discharge from the Service as "no longer physically fit
for War Service" has THIS DAY been approved. (The discharge will be con-
firmed for a date 14 days after the date on this notification, See A C I
1623 of 1916.

Soldier's surname Horan, Christian names Patrick William
(in full)

Regt No and Rank 1983 Pte Regt or corps 1st Newfoundland
(If T.F. this should be stated)

His address on discharge will be St Long's Hill

The Soldier states that ^{an} no allotment is being issued
in respect of him.

Station St. John's
Date 2/11/16

Cluny Macpherson
President of Board
Approving Officer.

Papers sent by
Nov 30 1916
[Signature]

Embarked on Inavian
 FROM Liverpool 28-10-16

DUPLICATE

Army Form O. 1625.

PAY LIST. *Sept 30th* to *Oct 27th* 1916. Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps *2/1st Newfoundland Regt*
 No. *1983*. Rank *Plt* Name *P. Moran*
 Died ^(a) at on the of 191
 Deserted at *Repatriation* on the of 191

I Certify to the correctness of above in every particular.

J. Hanna Commanding Squadron, Troop,
 Battery or Company.



STATEMENT OF ACCOUNT.

[FORM 1.]

Date.	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month	12	15	6 1/2
	Cash issues (Date of each issue to be stated)				Pay 11 days at 1/10 from <i>17/10</i> to <i>27/10</i>	2	9	8
	<i>Oct 20th 1916</i> £ s. d. 10 0				Proficiency, Service or good conduct pay			
	<i>" 26th " 1916</i> 1 0 0				days at from to			
	<i>27 " " 1916</i> 12 5 8 1/2		13	15	8 1/2			
	<i>allot: 11 days. 26.00</i> 1 7 2				Messing allowance days at			
	<i>Boot acct 8</i> 1 3				from to			
	<i>Parach Damages 7</i> 10				Clothing and kit allowance			
	<i>Unaccounted baggage</i>				Amount produced by the sale of Necessaries			
	Balance due by the Paymaster			3	Personal Clothing and Effects from Form 2...			
		£ 15	4	2 1/2	Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
					Deferred Pay or Gratuity			
					Balance due to the Paymaster	£ 15	4	7 1/2

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ 3 is correctly chargeable against the Public.

Dated at this day of 1916.

NEWFOUNDLAND CONTINGENT

A. J. Moran
 PAYMASTER & OFFICER IN CHARGE

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with A.F.B. 2050 or Army Form O. 1815.
 (b) Words in Italics to be struck out when there is no debtor balance.

CHECKED
BC

Deputy Paymaster.

For information.

W. E. Anderson

Governor.

20 Dec. 1916.

No. 733.

Code Telegram from Major Timewell.

(recd. 20 Dec. 1916)

Following for Howley:

Your Telegram 17th December. Did not pay Foran,
gratuity. No authority. Copy of Documents received in
this office have been forwarded from time to time.

see over

Best copy of telegram
sent

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 Commissioners of Chelsea Hospital. Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.

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

A Name in full *Patrick William Soran*
Regiment from which discharged *Newfoundland*
Regimental Number *1983*
Intended address *Grand Falls Newfoundland*



Height on discharge *5 Feet 9 1/2* Inches
Colour of Hair on discharge *Slight*
Figure on discharge *Medium*
Christian name of Father *Patrick*
Christian name of Mother *Martha*
Wife's Maiden name in full
Date and Place of Marriage
Christian names of Children

Colour of Eyes *Blue*

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.

Patrick W. Soran
 (Soldier's Signature in full) (Rank) *Private*

Chelsea General Hospital Date *Sept 29. 1916*

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.

Nestor Dinard
G. H. L. General Hospital

Station _____ Date *29. 9. 1916*

B Period of Service and in what Corps ...

Regiment	Years	Days	Service Abroad with Stations	Years	Days
			India		
			S. Africa		

Disallowed ...

Service towards Pension ...

Date inclusive to which pay has been issued

Sum due on account of advance of Pension }

Sums due on account of public debts ...

Rank on Discharge
Character (as on Certificate of discharge)
Where born, and on what date
Date and Place of first Enlistment
Trade on Enlistment
Cause of Discharge
Number of G.C. Badges
Wounds, and Actions in which received

Medals

Other distinguishing marks

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.

Station _____ Officer in Charge
 Date _____ 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 J. J. J.*..... 2. Surname *Jones*.....
3. Rank..... *Private*..... 4. Regtl. No. *1983*.....
5. Address in full to which future payments of gratuity are to be forwarded..... *Constable P. W. Jones Kings Cove Bonaville Bay*.....
6. Date of enlistment in the Regiment..... *fifteenth Nov. 1915*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
None.....
8. Relationship of such dependents..... *None*.....
9. Address in full of such dependents..... *None*.....
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 Hfld. If so, give dates and particulars of such service. *on active service*.....
in France 1916. 1st July engagement.....
12. Give total length of time which you served on active service, whether in Hfld. or Overseas..... *over seas*.....
one year 35 days.....

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

No

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.

World Dept. have recd forty dollars when discharged & 10 dollars for a few months & five dollars per month this last twelve months

15. Have you been issued with a War Service Badge? *Yes, have lost it*

16. Have you, during the present war, served in the Imperial Forces... *Please send me new badge*

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 Regt.? *No*... If not give - (a) date of discharge *Dec 30/16*... (b) Reason for discharge *Shell Shock & Disability*

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... *10th July 1916. Beaumont Hamel*

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... *No*

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

Signature of Applicant: *Constance P. W. Moran*
 Place of Residence: *Kings Cove C.B. N.Y.*
 Declared before me at: *Justice*
 This *15th* day of *October* 1922.....

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

POST DISCHARGE PAY.

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

Certified correct.

Paymaster

LM-

October 23, 1920

Patrick W. Foran,
King's Cove,
B.B.

Dear Sir:

With reference to your application for War Service Gratuity, I enclose four cheques, one for \$57.05 and three for \$70.00 each, being amount due you on account of same.

Yours truly,

Major

Paymaster.

Enc. 4

December 5th

6

Pte.P.Foran,
Grand Falls,
Mfld.

Dear Sir:-

I enclose herewith Cheque for \$60.26 being final payment to December 5th, and also ^{Certificate} ~~Form~~ of discharge *at* this date. This form is only temporary and will be replaced by proper parchment forms when same are received.

Your case will be immediately considered by the Pensions and Disabilities Board, and if they decide to do anything for you, you will be notified within a week of this date.

Yours truly,

1983

2nd.Lieut.& D/Paymaster.

11th March

6

Manager,

Bank of Montreal,

Grand Falld.

Dear Sir,-

Referring to your letter of March 6th, I return herewith a letter from No.1983 private P.W.Foran to you. The signature appears to be the same as that on our allotment form. I would suggest, that to be absolutely sure that the money gets into the proper hands, you send a draft for the amount private Foran requires, to Capt. Timewell,
Paymaster & C. i/c. Records,
Rgtl. Pay & Record Office,
58 Victoria Street,
London, S.W.

and ask him to turn it over through Foran's Commanding Officer.

Yours very truly,



J.M.H/B.M.W.

Deputy Paymaster.

Enclosure.

Grand Falls -

April 7th 1914

Dear Sir

I see its advertised
that men of all ranks
who have been honourably
discharged are to get the
imperial silver war badge
would you kindly send
me one

Your Obedient Servant

Patrick W. Moran
Regimental No. 1983-

A.K.
Morrow
O.K.

7141

Feb. 8/19.

Const. Pat. W. Foran,
King's Cove, B. B.

Sir:-

Referring to your letter of
January 30th, regarding your discharge
Badge.

Will you kindly have an affa-
davit taken out before a magistrate or
Justice of the Peace, to the effect that
you have lost your badge, so that we
may issue you another.

Yours truly,

Lieut.

For Paymaster.

3879

Kings Cove P.O.
Jan 30th 119

Sir

Sometime ago I lost my
Discharge Service Badge while going
through the Country I am afraid no
one ever found it you may see
if I can get another one please

no of badge 141 - -

Yours Respectfully

Patrick W Faran
Constable

Special Medical Board award
Final Analysis of MS (Fifteen Panel)
J. H. Leche, Surgeon Major, R.A.M.C. President (Actg)
78, Lancaster Gate W. Date 4.10.16
Medical Report on an Invalid.

Army Form B. 179.



Station London General Hospital

Date Sept 28th 1916

1. Unit Newfoundland
2. Regimental No. 1983
3. Rank Private
4. Name Toran Patrick W.
5. Age last birthday 36
6. Enlisted on 1 Nov 15
at St Johns Newfoundland
7. Former Trade or Occupation Mine

8. Disability.

Shell Shock
Traumatic Stricture of Urethra

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 cerebral disease.

9. Date of origin of disability. (1) Original injury some 7 years ago
(2) Shell shock June 16
10. Place of origin of disability. (1) Newfoundland - exacerbated in France
(2) France
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

He was admitted here suffering from shell shock from which he has recovered.
A week or so after admission he suffered with retention of urine, which was found to be due to a traumatic stricture resulting from ruptured urethra some years ago & which was brought about by a fall on the perineum.
Two days ago before leaving France he fell in the trenches & struck his perineum with his rifle, which probably led to a recurrence of symptoms.
He has had supra pubic cystostomy & also perineal section.

12. (a) Give your opinion as to the causation of the disability.
(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3).

- (1) The old injury
(2) The fall in the trenches
(3) Shell shock

Certainly aggravated by military service

Confidential
J. H. Leche

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 has a very tight traumatic structure of the urethra, & a very hypertrophied bladder.

The wounds of the supra pubic experimental operations have healed. no instrument can be passed thro the stricture even under an anaesthetic, but the opening is probably funnel shaped & he is able to pass urine fairly well.

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

shock equivalent
Not caused aggravated

- (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?

Yes
No

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

✓

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

19. Do you recommend

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

Yes

Sgd
J. A. Dalziel Col London
Civil Surgeon Officer in medical charge of case.

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

except†

London General Hospital
Station London

Nector Girard Lt Col R.A.M.C.
Officer in charge of Hospital
London General Hospital

Date 30 September 1901

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

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

Opinion of the Medical Board.

Notes.—(1) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

- (ii.) Expressions such as "may," "might," "probably," &c., should be avoided.
- (iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1913).
- (iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.
- (v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i) active service, (ii) climate, or (iii) ordinary military service.

*Shell shock - Due to (i) shell shock.
Stricture - not due to military service*

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

21. Has the disability been aggravated by

(a) Intemperance?

No

(b) Misconduct? *(c) Any of the conditions necessary to and if so which?*

No

22. Is the disability permanent?

Stricture - Blow with rifle shock No

23. If not permanent, what is its probable minimum duration?

Stricture - yes - 12 months

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

Total

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{2}$, $\frac{1}{3}$, $\frac{1}{4}$, or total incapacity.

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

Yes

26. Do the Board recommend

(a) Discharge as permanently unfit,

Yes

or

(b) Change to England?

No

Signatures:—

H. London General Hospital
Station *London*
Date *2 October 1912*

D. de Souza Cap. R.A.M.C.S. President
E. Bellis Clayte Cap. R.A.M.C.S. Member
F. W. Shewell Civil Practitioner

Approved
Station *London General Hospital*
Date *2 October 1912*

D. de Souza Cap. R.A.M.C.S. Administrative Medical Officer.
Surgeon General
London District

Medical Report on an Invalid.Station At St. OmerDate Nov 21 1916

1. Unit 14 New York Tank
 2. Regimental No. 6583
 3. Rank Private
 4. Name Foran P. W.

5. Age last birthday 38
 6. Enlisted { on Nov 1st 1915
 { at St Omer
 7. Former Trade { Printing & Paper Maker
 or Occupation

8. Disability.

- (1) Shell Shock, traumatic
 (2) Stricture of Urethra

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. (1) June 1st., 1916 (2) 7 years ago
 10. Place of origin of disability. (1) France. (2) Hfld., aggravated in France
 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

12. (a) Give your opinion as to the causation of the disability.
 (b) If you consider it to have been caused by active military service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3).

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.

Tight stricture of urethra. Operation.
Wounds healed.

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

(a) In action?

(b) On field service?

(c) On duty?

(d) Off duty?

No, aggravated

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?

Yes

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?

19. Do you recommend

(a) Discharge as permanently unfit,

or

(b) Change to England?

Yes

Officer in medical charge of case.

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

Station 4th London General Hospital.

Date _____

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.

Opinion of the Medical Board.

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

- (ii.) Expressions such as "may," "might," "probably," &c., should be avoided.
- (iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1163, Pay Warrant, 1913).
- (iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.
- (v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

*Shells - shot due to active service
stricture not due to military service*

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

21. Has the disability been aggravated by

(a) Intemperance? *no*

(b) Misconduct? *no*

22. Is the disability permanent?

shells - shot, no; stricture yes

23. If not permanent, what is its probable minimum duration?

to six months

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

*total for three
half for six*

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{2}$, $\frac{1}{4}$, $\frac{1}{8}$, or total incapacity.

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

vide cc

26. Do the Board recommend

(a) Discharge as permanently unfit, or

yes

(b) Change to England?

Signatures:—

Cluny Macpherson, Major President.

L. Paterson, Major

Station *St. Helen's*

Date *18th 2nd 1916*

J. Dundas, D.A.C.P.

Members.

Approved.

Station *St. Helen's*

Date *21.11.16*

Cluny Macpherson, Major
Administrative Medical Officer.

A.M.S.

-PROCEEDINGS ON DISCHARGE-

No. 1983 Army Rank Private
 Name Patrick W. Moran

(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps First Newfoundland Regiment
 Battalion, Battery, Company, Depot, &c. Headquarters
 Date of Discharge December 5th 1916
 Place of Discharge St. Johns, Nfld.

Description at the time of discharge.

1. Age _____ years _____ months _____ Descriptive marks.
 Height _____ feet _____ inches
 Chest { Girth when fully expanded ins.
 measurement { range of expansion _____ ins.
 Complexion _____
 Eyes _____
 Hair _____
 Trade _____

Intended place of residence {
 (To be given as fully as
 practicable)

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of being no longer physically fit for war service

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted)

3. Military character:- Very good

4. Character awarded in accordance with King's Regulations:-

Certificate that the above is an accurate copy of the character given by me on Army Form B.2067 and that Army Form D.489, was awarded in this case.

Initials of Commanding Officer

Certificate to be signed by the soldier on discharge.

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

Place A. John's Regd

P. W. Foran
(Signature of soldier)

Date Dec. 5th 1916

C. W. West
(Signature of witness)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

Confirmation of discharge.

The discharge of the above-named man is hereby confirmed for (date)

(Place) Grand Falls

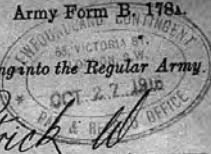
Signature

P. W. Foran

(Date) Dec 19th 1916

Commanding officers (or the Paymaster, if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital, Chelsea, a descriptive return of the man on Army Form D.400.

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



Surname Joran MEDICAL HISTORY OF Christian Name Patrick W.

Table I. - GENERAL TABLE.

Birthplace: - Parish

County

Newfoundland

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	11	Nov		
	at	St. John's Nfld	at	
Declared age	36	years		days
Trade or occupation				
Height	5	feet	8 1/2	inches
Weight			140	lbs.
Chest Girth when fully expanded ..			38	inches
Measure-ment			2	inches
Physical development				
	Right	Left	Right	Left
Vaccination marks {				
Arm				
Number				
When vaccinated				
Vision	R.E.-V.=	6/6	R.E.-V.=	
	L.E.-V.=	6/6	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>Lieut. Paterson</u>			
(Rank)	Medical Officer.		Medical Officer.	
Enlisted	at	St. John's	at	
	on	15 Nov	on	
	Corps		Corps	
		Regtl. No.		
Joined on enlistment				
Transferred to				
Became non-effective by				
	on	day of	on	day of
(Signature)		191		191
(Rank)				

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

Name of hospital	Admitted to hospital			Discharged from hospital			Disease	Number of days in hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
<i>H. H. H. General Hospital H. H. H. C. I.</i>	4	7	16	15	10	16	<i>Shell Shock Traumatic Stricture of Urethra</i>	<i>104</i>	<i>Has a very tight traumatic stricture of the urethra & a very hypertrophied bladder. Is now able to pass urine fairly well Medical Board.</i>	<i>Sgt. Major R. A. M. C. I. Regiment H. H. H. Hospital</i>



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

MEDICAL HISTORY

Surname Joran Christian Name Patrick W.

Table I.—GENERAL TABLE.

Birthplace:—Parish _____ County Newfoundland

	SPECIAL RESERVE.		REGULAR ARMY.	
	on _____ day of _____ 191 <u>1</u>	at _____	on _____ day of _____ 191 <u>1</u>	at _____
Examined	on <u>11</u> day of <u>Nov</u> 191 <u>1</u>	at <u>St John's Nfld</u>	on _____ day of _____ 191 <u>1</u>	at _____
Declared age	<u>36</u> years	<u>36</u> days	_____ years	_____ days
Trade or occupation	_____	_____	_____	_____
Height	<u>5</u> feet <u>8 1/2</u> inches	_____	_____ feet _____ inches	_____
Weight	<u>140</u> lbs.	_____	_____ lbs.	_____
Chest Measurement {	Girth when fully expanded	<u>38</u> inches	_____ inches	_____ inches
	Range of expansion	<u>2</u> inches	_____ inches	_____ inches
Physical development	_____	_____	_____	_____
Vaccination marks {	Right	Left	Right	Left
	_____	_____	_____	_____
When vaccinated	_____	_____	_____	_____
Vision	R.E.—V = <u>1911 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) _____ (Rank) _____	<u>Lamont Patrick</u> Cdt	_____	_____	_____
	Medical Officer.	_____	Medical Officer.	_____
Enlisted	at <u>St John's</u> on <u>15</u> day of <u>Nov</u> 191 <u>1</u>	at _____	on _____ day of _____ 191 <u>1</u>	at _____
Joined on enlistment	_____	_____	_____	_____
Transferred to	<u>Hoops Reg 1913</u>	_____	_____	_____
Became non-effective by	_____	_____	_____	_____
	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>
(Signature) _____ (Rank) _____	_____	_____	_____	_____

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

Name of hospital	Admitted to hospital			Discharged from hospital			Disease	Number of days in hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and readmissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
<i>1st London General Hospital</i>	4	7	16	10	16		<i>Shell Shock traumatic stricture of urethra</i>	<i>104</i>	<i>Has a very light traumatic stricture of the urethra & a very hypertrophied bladder. Is now able to pass urine fairly well. Medical Board</i>	<i>Major R. W. C. [Signature] Regimental Surgeon 1st London General Hospital</i>

RECEIPT FOR ISSUE OF
RIBAND OF BRITISH WAR MEDAL-1914-1919.

C.R.

1983

I certify that I have received a ribbon of 2 inches
of Riband of British War Medal-1914-1919

X Private
Name: *Latik Maharaj (Boustobh)*

(Date) *Oct. 12th/19*

(Place) *Kings Coal W.B.*

Please ~~sign~~ *sign* & return to Dept. of Militia,

P.S

Please if there are any medals
Send me one The say there is
some French a star or something
like that

Very Sincerely yours

Constable, Foran

King Come



FIRST NEWFOUNDLAND REGIMENT.

ATTESTATION OF

No. 1984 Name James G. Brown Corps _____

Questions to be put to the Recruit before Enlistment

- | | |
|--|---------------------------------|
| 1. What is your name? | 1. <u>James G. Brown</u> |
| 2. What is your full Address? | 2. <u>Rock Hb., Bona Ent.</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your Age? | 4. <u>31</u> Years..... Months. |
| 5. What is your Trade or Calling? | 5. <u>Fisherman</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? | 10. { Name |
| | { Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes</u> |

I, James G. Brown 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.

James G. Brown SIGNATURE OF RECRUIT.
Donald W. Ayre Signature of Witness.

8. Dec. 17th 1915

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, James G. Brown do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me at St John's, Newfoundland.

on this 17th day of December 1915
 Signature of the Attesting Officer. Donald W. Ayre

† 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, the 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.

1984

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

Name James S. Brown

Apparent age 21 years months. Height 5 feet 11 inches.

Chest measurement { Girth when fully expanded 37 inches.
 Range of expansion 3 inches.

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Henry Brown, Cook Hl., Penn Dist.

| Relationship Brother

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	Promotions, 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 _____							<div style="font-size: 2em; margin-bottom: 10px;">Died of Engagemt</div> <div style="font-size: 2em;">9-12-17</div>
Joined at _____ on _____							
Total Service forfeited as above							
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days							
" " " Pension " _____ (") _____ " _____ "							