

# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 5664 Name Henry Joe Corps Reft

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

- |  |                                  |
|--|----------------------------------|
| 1. What is your name? .....  | 1. <u>Henry Joe</u> .....        |
| 2. What is your full Address? .....  | 2. <u>St. John's, Nfld</u> ..... |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u> .....              |
| 4. What is your age? .....   | 4. <u>18</u> Years .....         |
| 5. What is your Trade or Calling? .....  | 5. <u>Blackman</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, Henry Joe 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.

Henry Joe SIGNATURE OF RECRUIT.

J. B. Dickson Signature of Witness.

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

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

### CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 10 day of June 1915.

Signature of Attesting Officer C. B. Dickson Lieut.

### †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 Reft.

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, 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.

5664.

Name Perry Foss  
 Apparent age 30 years 0 months. Height 5 feet 4 inches  
 Chest Measurement { Girth when fully expanded 34 1/2 inches  
 Range of expansion 3 1/2 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin George Foss  
Brooks Arm of Bay | Relationship Father  
 Particulars as to Marriage \_\_\_\_\_

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

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

### Particulars as to Children

Christian Names	Date and Place of Birth

## STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>10-6-18</u>									
Joined at <u>St. Louis</u> on <u>June 10 1918</u>									
<u>Discharged: St. Louis Jan. 9/1919.</u>									
<u>Special Duty Home Defense Party Apr. 29-8-18</u>									
<u>Admitted Barracks Hosp. P.S.N. base Dec. 3-9-18.</u>									
<u>Discharged from Hospital 17.9.18</u>									
<u>Demobilization St. Louis 9-1-1919</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>9-1-1919</u> (date of discharge) <u>214</u> years <u>214</u> days									
" " Pensions " " " " " " " " " " " "									



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 5664 Name Henry Lee Corps Regt

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

1. What is your name? ..... 1. Henry Lee
2. What is your full Address? ..... 2. 106 St. John's
3. Are you a British Subject? ..... 3. Yes
4. What is your age? ..... 4. 18 Years ..... Months
5. What is your Trade or Calling? ..... 5. Electrician
6. Are you Married? ..... 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,\* which? ..... 7. No
8. Are you willing to be vaccinated or re-vaccinated? ..... 8. Yes
9. Are you willing to be enlisted for General Service? ..... 9. Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? ..... 10. Name ..... Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... 11. Yes

I, Henry Lee 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.

Henry Lee SIGNATURE OF RECRUIT.

J. P. [unclear] SIGNATURE OF WITNESS.

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

I, Henry Lee 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 ..... on this 10 day of June 1915.

Signature of Attesting Officer C. B. Dicks Lieut.

### †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, 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 Herry Foss

Apparent age 35 years 0 months. Height 5 feet 4 inches

Chest Measurement { Girth when fully expanded 34 1/2 inches  
 Range of expansion 3 1/2 inches

Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin George Foss

Brooks Arm of Bay | Relationship Father

Particulars as to Marriage

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

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

## Particulars as to Children

Christian Names	Date and Place of Birth

## STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from _____									
Joined at _____ on _____									
Total Service forfeited as above.....									

Total Service towards Engagement to \_\_\_\_\_ [date of discharge] \_\_\_\_\_ years \_\_\_\_\_ days

“ “ Pensions “ \_\_\_\_\_ [ “ “ ] \_\_\_\_\_ “ \_\_\_\_\_

C.R.

5664

Extract from Daily Orders Part II Unit The Royal WFLC.  
Regt., St. John's, Dec. 18th, 1918.

The undernoted man discharges on Disability has been approved by O.C. Discharge Depot from noted date. He is removed from Depot Strength to Discharge Depot pending confirmation by Officer i/s Records.

5664 Pte. Henry Foss.

12-12-18.

C.R. 5-664

Extract of Daily orders Part II, Depot St. John's, dated  
Jan. 10th 1919.

Demobilization

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

5664 Pte. Henrt Fosse

Discharged 9-1-19

C.R. 5664

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

5664, Pte. Henry Foss.

Attested for General Service with The Royal WFLA. Regt.,

10/6/18.

C.R. 5664

Extract from Daily Orders part 11 Depot, St. John's dated 18/9/18.

#5664 Pte. N. Fosse

Discharged from General Hospital 17-9-18.



Counter R 5664

# NEWFOUNDLAND POSTAL TELEGRAPHS.



## Cable Connection with all the World

### All Messages Sent are Subject to the Following Conditions:

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

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

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

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

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

(NOT TRANSMITTED)

Signature of Sender \_\_\_\_\_

Address **St. John's, Dept of Militia.**

Line Number	Rcd	By	Sent	by	Check
-------------	-----	----	------	----	-------

Dated **Sept. 10th, 1918.**

To **Mr. George Fess,  
Sneeks Arm,  
Green Bay.**

Regret to inform you that your son #5664 Pte. Henry Fess, was admitted to hospital yesterday, Gunshot wound knee, accidental.

J.R. Bennett,

Minister of Militia.

FOR TYPEWRITER

C.R. 5664

Extract from Daily Orders Part 11 from depot St. John's Aug. 30/18

#5664 Pte. H. Foss.

The following N. C. Co and men proceeded to Petty Harbour 29-8-18.

on Special Duty.

C.R. 5664

Extract from Daily Orders 1st LI Unit The Royal Wilt.  
Regt. St. John's 3-9-18.

5664 Pte. H. Fosse.

Admitted to Barracks Hospital 3-9-18.

Korse, Henry

5664

Ray Dept

Jan. 9th., 19

#5664 Pte. Henry Posse,  
Snooks Arm,  
Twillingate Dist.

Dear Sir:-

Please find enclosed "Discharge  
Certificate No. 305."

Yours faithfully,

Paymaster & Officer i/c Records.  
Captain,

Enc'l 1.

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 5664 Rank Pte Name Fosse Henry  
 Intended place of residence St. John's Arm. Twiss.
2. Occupation Fisherman  
 Classification of soldier A Medical Category A II
3. The above named man is discharged in consequence of Demobilization
4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.
- Place DEC 9 1918 Henry Cass  
 Date ..... 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 Henry Fosse  
Dec 9<sup>th</sup> 1918. Signature of soldier  
W. Dicks A/Cpl  
 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 Henry Fosse  
Dec 7<sup>th</sup> 1918 Signature of soldier  
Raymond St.  
 Signature of witness

## STATEMENT OF SERVICE

7. Enlisted for service 10.6.18 No of days on Military  
 Discharged from service Dec 12<sup>th</sup> 1918 plus 28 days. Service 214 days

## APPROVAL OF DISCHARGE

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

Place ST. JOHN'S. R.H. Lat. Capt.  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment.

Date DEC 12 1918

## CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
- Place St John's. Nfld. M. Bowley Capt.  
 Date January 9/1919 Officer i/c Records  
2079/305 The Royal Newfoundland Regiment

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 5664 Rank Plt Name Joseph Henry  
 Date of Enlistment 10.6.18 Address Brooks Court District St. John's  
 Occupation Sherman Classification for Discharge A Medical Category ATI  
 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 28.11.18

Joseph Henry  
 C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 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 Joseph A. Henry

Date 5-12-18

O f.c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R35* *42* to his home at *Snooks Area* and Release Certificate No. *42* issued.

Date *9.12.18* *QBDukes 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 *9-12-18* *QBDukes Capt.*

Date *9-12-18* *12 12 18*  
Depot Paymaster.

Discharge approved for.....

Forwarded with following documents to O.C Discharge Depot.

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

Date *9 12 18* *QBDukes Capt.*  
Demobilization Officer.

APPROVED.

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

DEC 12 1918

Date ..... *RH Lat Capt.*  
O. C. Discharge Depot.

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

Date *Dec. 12/1918*



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

# MEDICAL HISTORY

OF

Surname

*J. O.*

Christian Name

*Henry*

Table I.—GENERAL TABLE.

Birthplace:—Parish

*Snooks Arm N.B. County Newfoundland*

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	10 <del>4</del>	191		191
at	<i>St. John's.</i>			
Declared Age	18.	years		days
Trade or Occupation	<i>Fisherman.</i>			
Height	5	feet 4.	1	feet inches
Weight	116.	lbs.		lbs.
Chest Measurement	Girth when fully expanded			
	34 $\frac{1}{2}$ .	inches		inches
	Range of Expansion			
	3 $\frac{1}{2}$ .	inches		inches
Physical Development	Right	Left	Right	Left
Vaccination Marks	Arm			
	Number	1	Scar.	
When Vaccinated	6 years ago.			
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)	<i>Lammie Patterson</i>			
(Rank)	<i>Major</i>		Medical Officer.	
Enlisted	at	<i>St. John's.</i>	at	
	on	10 <del>4</del> day of <i>June</i> 191 <del>5</del>	on	day of 191
Joined on Enlistment	Corps.	<i>Royal New</i>	Corps	
	Regtl. No.	<i>Regiment.</i>	Regtl. No.	<i>5664.</i>
Transferred to				
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				

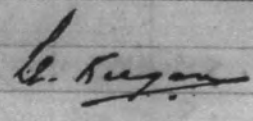


list in case of Warrant Officers treated in quarters.

on the cause, nature or treatment of the case likely to be of interest or of future use. In case of  
discharge and re-admissions to hospitals 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

Wound healed. Radiograph showed small foreign  
body near tubercle of Tibia.



REC'D  
MAY 19 1918



## Civil Re-establishment Committee.



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

To work at Fishing

Henry J. ...

Signature of Man.

Arthur A. ...

Signature of the Vocational Officer or his Representative.

Reg. No. 5664

Place

St John's N.Y. I.D.

Date

Dec 5<sup>th</sup> 1918

# The Royal Newfoundland Regiment

Class for Demobilization:—

A

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

NOV 27 1918

Date .....

Regimental No. 5664 .....

Name Foss Henry ..... Private

Address St. Johns Arm N. D. 73 .....

Present Medical Category A II .....

Recommended for:— { (a) Immediate discharge .....

(b) ~~Standing Medical Board~~ .....

Members of Board {

R. H. Tait Capt.

O.C. Discharge Depot.

J. Paterson

Senior Medical Officer

J. W. Borden

M. O. Depot



## 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 **Henry Foss**

Regiment from which discharged *1st. Newfoundland*

Regimental number **5664**

Intended address **Snooks Arm, T'gate**

Height on discharge **5** Feet **4**

Color of hair on discharge **Brown**

Complexion **Fair**

Color of eyes **Blue**

Descriptive Marks

Figure on discharge

Christian name of Father **George**

Christian name of Mother

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth.

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)

(Rank)

Station

Date

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.

Station



Date

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

FORM K

Nº 6469



THE ROYAL NEWFOUNDLAND REGIMENT  
ALLOTMENTS

I, Henry William Foss, Regl. No. 5664  
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 <sup>and</sup> <sub>or</sub> Persons, such payment to be made on proof  
of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> <sub>or</sub> Persons  
concerned, viz.:

Allotment begins August 1<sup>st</sup> 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
6469	father	George Foss	Snooks Arm St. John's	50
			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.) \_\_\_\_\_  
Officer Commanding  
Company  
St. John's  
July 6 1918

(Sig.) Henry William Foss  
(Rank) private Foss







# ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at Headquarters JUN 10 1918

1. Name Henry Jones Age (a) Declared 18  
(b) Apparent

2. Do you know of anything wrong with you? no

What severe illnesses have you had? none

5664

Eyes. Brown.  
Comp. medium  
Mach. none

3. Height 5ft. 4 Weight 116  
4. Eyesight (a) Left 6/6 (b) Right 6/6  
5. Physical Defects (Examine after strenuous exercise) no

6. Examination of Lungs n  
Measurement (a) Expiration 31 (b) Inspiration 30 1/2

7. Examination of Heart n

8. Examination of Urine ✓

9. Examination of Mouth—(Defective Speech)

Teeth  
Throat  
Nose  
Ears—(Otorrhea)  
(Deafness) n

10. Have you been successfully vaccinated, and when? yes. 6 years ago

11. Name and address of next of kin Father, George. Snooks Arm Green Bay

REMARKS--

A. 11.

W. B. ...  
Richard ...  
Medical Examiners.

ACCOUNT	<i>W. M.</i>
CL. NO.	<i>8329</i>
IND.	<i>SA</i>
PAY ORDER	<i>SA</i>
GEN. LED.	<i>SA</i>

*To be sent to Prince's Bank.*

July 2nd, 1918.

The Royal Newfoundland Regiment,

To 5664 Private Henry Foss.

*Account for \$2.40*

ROYAL NEWFOUNDLAND REGIMENT,  
St. John's, Nfld.  
*Asst. Lieut*

To Board and lodgings while waiting passage to St. John's. \$2.40.

(As per voucher).

*Cheque mailed  
1077/18*

*OK*

To be sent to #5664. Pt. Henry & Co.  
Princes Risborough

Minutes meeting

of Johns  
hr

Map Samuel Saunders  
Titt Cove

1918

June for board & lodging for  
Volunteers Henry for writing  
at Titt Cove for passage to John  
H. Wray's 60<sup>00</sup> 240

Correct for 2<sup>40</sup>

William Drum

W.D.

Recd Payment

by Samuel Saunders  
m2

Att. June 1918. # 5664.

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39.

Regiment of Royal Newfoundland Signature of O. C. Company C. A. Dickson

Number of Sheet One

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	
No.	<u>56611 Henry Jones</u>	Age on	<u>18</u> years <u>0</u> months	<u>Boatman</u>		
Joined	Date	Place and Date of Enlistment	<u>10/10/18</u>	Religion		
Joined	Date	Period of	with Colours <u>2/4</u> years. with Reserve <u>3/6</u> years.	Place of Birth		
Joined	Date				<u>St John's</u>	<u>Methodist</u>
Joined	Date	<u>St John's Nfld</u>				

Place	Date of Offence	Rank	Causes of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<u>Demobilized</u>	<u>St John's</u>	<u>9/19</u>			

To be carried over.

**The Royal Newfoundland Regiment**

DEMOBILIZATION OF

Reg. No. 5664 Rank Plt Name Joseph Henry  
 Date of Enlistment 10-6-18 Address Brooks Arm District St. John's  
 Occupation Lieutenant Classification for Discharge A Medical Category AI  
 Recommendation S.M.B. Plt Disability Rating A-1-P  
 Passed to Demobilization Officer with following documents:—

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

Date 28 11 18 Henry Capt  
 C. Discharge Depot.

**PARTICULARS FOR DEMOBILIZATION**

**1. Civil Re-Establishment.**

I am Henry in a position to resume civilian occupation.

Henry

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 Joseph A. Mansfield

Date 5-12-18

Off. Re-clothing.

DEC 15 1918

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R35 to his home at Snooks Arm and Release Certificate No. 42 issued.

Date 9.12.18 C. B. Dicks Capt.  
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 9-1-19

Date 9-12-18 W. Bowley Capt.  
Depot Paymaster.

Discharge approved for 12.12.18

Forwarded with following documents to O.C Discharge Depot.

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

Date 9.12.18 C. B. Dicks Capt.  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—  
Officer in Charge Records.  
Board of Pension Commissioners.  
with following additional documents.

**DEC 12 1918**

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

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

Date Dec. 12/1918 W. Bowley Capt.  
sup 181-51-2



Reg. No. 5664 Rank Pte Name Foss Henry 6604

Attested 10-6-18 Address Snooks Arm N.B.

Allotment 50 Allottee Geo Foss (Father)

Date of Allotment 1-5-18 Returned from Overseas

Embarked for Overseas Cause

13/8, SA - Inoc. 2<sup>nd</sup> Inoc 15-7-18. 3<sup>rd</sup> Inoc 24-8-18  
5-9-18 Admitted to Barracks Hospital  
wounded accidental in side-General Hosp.  
17-9-18 Discharged from General Hospital  
29-8-18 Special Duty Petty Harbour, to etc 24/9/18  
Relief from duty 14-10-18  
12-12-18