



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5365 ~~5274~~ Name Loranza Francis Meth. Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Loranza Francis</u> |
| 2. What is your full Address? | 2. <u>New Chelsea</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>23</u> Years <u>0</u> 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, Loranza Francis, 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 by me.

Loranza Francis SIGNATURE OF RECRUIT.
Pte. Blower SIGNATURE OF WITNESS.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Loranza Francis, 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 given as replied to, and the said recruit has made and signed the declaration and taken the oath before me at New Chelsea on this 23 day of May 1915.

Signature of Attesting Officer A. B. Dicks

† 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 compiled with. I accordingly approve, and appoint him to the rank of Private 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

5365

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

Name Loranza Francis
 Apparent age 23 years _____ months. Height 5 feet 5 1/2 inches
 Chest Measurement { Girth when fully expanded 37 1/2 inches
 Range of expansion 3 1/2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Catherine ~~Francis~~ ^{Pynn} ~~Francis~~ ^{Just}
New Chelsea, S.B. | Relationship Mother
 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 United engagement reckons from <u>23-5-18</u>									
Joined at <u>St. John's</u> on <u>Nov 23-1918</u>									
<u>Discharged July 2/19</u>									
<u>Embarked St. John's N.S. to St. Lawrence 22-7-18</u>									
<u>Embarked Halifax 23-11-18</u>									
<u>Disembarked 25-11-18</u>									
<u>Joined 1st Bn. 5-1-19</u>									
<u>Left for demobilization 22-5-19</u>									
<u>Demobilization St. John's</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>3-7-1919</u> [date of discharge] <u>1</u> years <u>42</u> days									
" " Pensions " " " " " " " " " " " "									

C.R. 5365-

Excerpt from Daily Orders part II, Unit the A.M.I.D. S.
dated July 5th, 1918.

The discharge of the undernoted on demobilization has
been CONFIRMED by O.S./c Records on noted date.

#5365 te. Lorenzo Francis,

3-8-19.

3-7-19.

C.R. 5365

Extract from Nominal Roll from 1st. Battalion
Royal Newfoundland Regiment dated 30-4-19.

The undermentioned of the 1st. Battalion left
Rover Camps #2/4/19, embarked at Havre 22/4/19,
disembarked at Southampton 23/4/19 and reached
Hazeley Down Camp 23/4/19.

#5365 Pte. L. Frances.

C.R. 5365

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

Date June 7th 1919

5365 Pte. L. Francis.

Reported at Headquarters

1-6-19.

on "Corsican"

which sailed Liverpool May 22/1919.



5365

Extract from Daily Orders Part 21 Unit The Royal
Artillery Depot, St. John's, June 9th, 1919.

The discharge of the Undernoted on demobilization
has been APPROVED by C.O. Discharge Depot with effect
from 19-6-19.

5365 Pte. L.Francis.

C.R. 5365

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

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

#5365 Pte. Lorenzo Francis.

C.R. 5365

Extract from Daily Orders part 11, from Unit The Royal Nfld.
Regt. St. John's, dated May 25th, 1918.

#5365 Pte. Lorenzo Frances

Attested for General Service with the Royal Nfld. Regt.
from 23.5.18

L. Francis

C.R. 5365

P. T. R. C.

Medical Report on an Invalid.

Station Hazelton D. Camp
 Date 30-4-19

1. Unit Royal Newfoundland
 2. Regimental No. 5365
 3. Rank Pte
 4. Name Francis Lorenzo
 5. Age last birthday 24
 6. Enlisted on May 20/18
at St Johns

7. Former Trade or Occupation Fisherman
 7A. If with previous service in Army, state—
 (a) Former Unit;
 (b) Regimental No.;
 (c) Date of Discharge;
 (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.
 (Other disabilities should be reported upon in answer to question No. 19).

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. nil
 10. Place of origin of disability. nil
 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. nil
nil

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
 (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
 (b) constitutional or hereditary, and not aggravated by service during the present war.
 (c) attributable to or aggravated by want of proper care, on the man's part, e.g., intemperance, misconduct, &c.

na

13. What is his present condition?

*He complains of no
disability*

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

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

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

15. Was a Court of Inquiry held on the injury?

- If so—
- (a) When?
 - (b) Where?
 - (c) Opinion?

16. Was an operation performed? If so, what?

h a

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

h a

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?

h a

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

h a

Repatriation

20. Do you recommend—

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

Sgd W E P... Capt R.A.M.C.
Officer in medical charge of case.

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

Station *Langley D. B. Camp*
Date *30-4-19*

Officer in charge of Hospital.

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

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

No 2928/102.

From: NEWFOUNDLAND

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

NEWFOUNDLAND CONTINGENT
N.F.C. / 50
C.O. & PAYMASTER & OFFICER IN CHARGE
NEWFOUNDLAND CONTINGENT
1st Bn. Ryl Nfld Regt.
B.E.F.

19th February 1919

5365. Pte Francis. L.

With reference to the following
telegram from the Minister of
Militia, / / (34)

"Pay to- 5365. Francis.

£5.0.8.

Kindly advise whether this re-
mittance should be

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

Chief Paymaster & O. i/c Records

4-3-1919

5365 Pte Francis

This man wishes this amount
retained to the credit of his
account please

F. G. Matthews LIEUT. COL.
COMMANDING 1st Bn. ROYAL NEWFOUNDLAND REGIMENT.

Deposited
18/2/19 g/w

Francis, L

5365

Ray Sept.

July 3, 1919

#5365 Pte. Lorenzo Francis,
New Chelsea, T.B.

Dear Sir:-

Referring to your application I enclose
cheque for Seventy dollars (\$70.00), being amount of
first payment due you on account of the War Service
Gratuity.

Yours truly

Captain,
Paymaster & O.i/c Records.

546

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. 1918.

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..... *Lorena Francis*.....
 3. Rank..... *Private*..... 4. Regt. No..... *5365*.....
 5. Address in full to which future payments of gratuity are to be forwarded,..... *Lorena Francis*.....
New St. John's Trinity Bay.....
 6. Date of enlistment in the Regiment..... *May 20th 18*.....
 7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued immediately prior to your discharge.....
Edith M. Garland.....
 8. Relationship of such dependents..... *Cousin*.....
 9. Address in full of such dependents..... *New St. John's Trinity Bay*.....
 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 Mfld. If so, give dates and particulars of such service..... *No*.....
 12. Give total length of time which you served on active service, whether in Mfld. or Overseas..... *1 Month in Mfld.*.....
11 Months Overseas.....

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.

No

15. Have you been issued with a War Service Badge?

No

16. Have you, during the present war, served in the Imperial Forces?

No

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.

No

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?

No

(b) If so, was such reversion in consequence of Misconduct or inefficiency?

19. Are you now serving in the Regt.?
of discharge.....(b) Reason for discharge.....

Yes

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.

No

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:

Place of Residence:

Declared before me at:

This

L. Francis
New Orleans, La.
at St. Louis, Mo.
June 27th day of *1917*
John M. Carthy

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

POST DISCHARGE PAY.

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

May 9, 1919

Mr. Thos. Garland,
NEW CHELSEA.

Dear Sir:

I beg to acknowledge receipt
of your letter of April 28th. enclosing \$20.63
and as requested I have cabled £4.2.3 the equivalent
of \$20.00 to 5365, Lorenzo Frances.

Yours truly,

Lieut.
For Paymaster.

June 10, 1919

Mr. Aaron Francis,
HANT'S HR., T.B

Dear Sir:

I beg to acknowledge receipt
of your letter of May 2nd. enclosing \$29.43
and as requested I have cabled £5.16.8
being the equivalent of this amount less
the cost of message.

Yours truly,

Lieut.
For Paymaster.

July 3, 1919

#5365 Pte, Lorenzo Francis,

New Chelsea, T.B.

Dear Sir:-

Please find enclosed Discharge

Certificate No. 2270.

Yours truly

Captain

Paymaster and Officer i-c Records.

The Royal Nfld. Regiment

DEMOBILIZATION

No. *5365* *Bank*

Name *Francis A*

Warned for demobilization on

JUN 5 1919

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5365 Rank Plt Name Francis L
 Intended place of residence New Chelsea
 2. Occupation Fisherman
 Classification of soldier R Medical Category A7

3. The above named man is discharged in consequence of DEMOBILIZATION

Eligible for War Service Gratuity

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.

Place ST. JOHN'S
 Date JUN 5 1919
H. H. Mous Lt. Col.
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and Date ST. JOHN'S
JUN 5 1919
F. Francis
 Signature of soldier
W. L. ...
 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
5-6-19
F. Francis
 Signature of soldier
W. L. ...
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 20-5-18 No of days on Military
 Discharged from service 19-6-19 Plus 14 days Service 410

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S
 Date JUN 19 1919
R. H. ...
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place St. Johns, Nfld
 Date July 3/1919
M. Bowley
 Officer in Charge Records
 The Royal Newfoundland Regiment

A 713 2079/2270

The Royal Newfoundland Regiment

Class for Demobilization:—

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

Regimental No. ... 5365 ...

Name ... Francis L. ... Pte.

Address ... New Chelsea ...

Present Medical Category ... A1 ...

Recommended for:— (a) Immediate discharge
(b) ~~Standing Medical Board~~

Members of Board

RH Hart Capt
O.C. Discharge Depot.

L. Paterson
Senior Medical Officer

D. W. Burden
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5315 Rank PLC Name Francis L.
 Date of Enlistment 20.5.18 Address New. Harbour District St. John's
 Occupation Fisherman Classification for Discharge 4 Medical Category A1
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	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 11.6.19

O. C. Discharge Depot. [Signature]

PARTICULARS FOR DEMOBILIZATION

i. 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 Abrahamson Lt

Date 5-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *RM 1477.3.5-5-9* his home at *New Chelsea* and Release Certificate No. *2296* issued.

Date *5-6-19*

J.A. Snow Capt
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to *3-7-19*

Date *5-6-19*

H. M. Stewart
Depot Paymaster.

Discharge approved for *19-6-19*

Forwarded with following documents to O.C Discharge Depot.

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

Date *5-6-19*

J.A. Snow Capt
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date *JUN 19 1919*

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

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

Date

Civil Re-establishment Committee



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

To resume former occupation

Signature of Man.

Reg. No.

Capt. J. A. Snow

Signature of the Vocational Officer or his Representative.

L. Francis

Place

ST. JOHN'S.

Date

5-6

1919

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

MEDICAL HISTORY

OF

Surname Francis

Christian Name Lorenza

Table I.—GENERAL TABLE.

Birthplace:—Parish New Chelsey 2nd County Nfld

	SPECIAL RESERVE		REGULAR ARMY	
	Right	Left	Right	Left
Examined	on <u>23</u> day of <u>May</u> 191	on	day of	191
	at <u>Sydney</u>	at		
Declared Age	<u>25</u> years	days	years	days
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet <u>5 1/2</u> inches		feet	inches
Weight	<u>142</u> lbs.			lbs.
Chest Measurement	Girth when fully expanded... <u>37 1/2</u> inches			inches
	Range of Expansion... <u>4 1/2</u> inches			inches
Physical Development				
Vaccination Marks	Arm			
	Number	<u>1 Scar</u>		
When Vaccinated	<u>Chicago</u>			
Vision	R.E.—V=	<u>6/6</u>	R.E.—V=	
	L.E.—V=	<u>6/6</u>	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Lamm Parsons</u>			
(Rank)	<u>Major</u>			
	Medical Officer.			Medical Officer.
Enlisted	at <u>Sydney</u>	at		
	on <u>23</u> day of <u>May</u> 191	on	day of	191
Joined on Enlistment	Corps.	<u>Regt. No. 1265</u>	Corps	Regt. No.
	<u>Nfld Regt</u>			
Transferred to				
Became non-effective by	on	day of	191	on
(Signature)			day of	191
(Rank)				

Medical Report on an Invalid.

Station Hazley BowonDate 30/4/19

1. Unit Royal Newfoundland
2. Regimental No. 5365
3. Rank plc
4. Name Francis Lorenzo
5. Age last birthday 34
6. Enlisted { on May 20/18
at 21/2/18
7. Former Trade } Postman
or Occupation }
- 7A. If with previous service in Army, state—
(a) Former Unit;
(b) Regimental No.;
(c) Date of Discharge;
(d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.*(Other disabilities should be reported upon in answer to question No. 19).*Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability.
10. Place of origin of disability.
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

nil
nil
nil
nil

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

- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
- (b) constitutional or hereditary, and not aggravated by service during the present war.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

nil

13. What is his present condition?

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

He complains of no disability -

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

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

15. Was a Court of Inquiry held on the injury?

- If so—
- (a) When?
 - (b) Where?
 - (c) Opinion?

16. Was an operation performed? If so, what?

na.

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

na.

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

na.

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

na.

20. Do you recommend—

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

Repatriation

W.E. Proemer.

Capt Rame

Officer in medical charge of case.

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

Station

Hazeley Down

Officer in charge of Hospital.

Date

31/4/19

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

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

MEMO. FROM REGISTRAR
Newfoundland
Military Service Act, 1918.

ST. JOHN'S, NEWFOUNDLAND.

July 15th 1919

ACCOUNT	<i>Grant</i>
CH. NO	<i>3095</i>
IND. LEDGER	INITIALS <i>Re</i>
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

The Department of Militia

The sum of six dollars \$6.00 is due Pte L
Francis. New Chelsea. To transportation to his home.
Voucher attached.

Certified Correct for C.S.
\$ 6.00/100

Attest
Demobilisation Office
Discharge Department

Loreya Francis

No: 559

TRAVELLING WARRANT

Date 5-6-19

The Royal Newfoundland Regiment

John Logg for one drive of dollars

Please issue 1st Class Passage and Meals for

No. 5365 Rank 1st Lt Name Francis L.

From - ST. JOHN'S - To New Chelsea

Hearts content

The Royal Newfoundland Regiment
DEPOT ST. JOHN'S N.F.

PLEASE QUOTE THIS WARRANT NUMBER
ON STATEMENT AND MEAL CHECKS

J. J. [Signature]
SIGNATURE OF ISSUING OFFICER.

Deputy Quartermaster
Depot - Newfoundland

Receipt for Army Book 64

No. 5365- Name ... Francis L.

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

Name *Lorenzo J. Francis*

Date ... 1920 ... *July 27*

Place ... *New C. Kelsea*

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

J

Casualty Form - Active Service.

Regiment or Corps Newfoundland
 Rank Pte Surname Francis Christian Name J
 Religion W.M. Methodist Age on Enlistment 23 years — months
 Enlisted (a) 23/5/18 Terms of Service (a) Duration Service reckons from (a) 23/5/18
 Date of promotion to present rank — Date of appointment to lance rank —
 Extended — Re-engaged — Qualification (b) —
Fisherman or Corps Trade and Rate —
 Occupation Fisherman Signature of Officer M. H. D. A. P.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...		25 NOV 1918	
		Joined Batt.		5 JAN 1919	
		<u>Arrived in UK</u>		<u>13/4/19</u>	

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shoeing-Smith, &c

(17591.) Wt. W 1887-P 1124. 1,000,000. 6/18. D & S. Form B.103. (S. 1255.)

[P.T.O.]

Next of kin: Mother: Mrs Bathine P Jones: New Chelsea: Trinity Bay: N.C.L.D.

The Royal Newfoundland Regiment

D 3365

DEMobilIZATION OF

Reg. No. *5315* Rank *PLC* Name *Francis L*
 Date of Enlistment *20.5.18* Address *New Chelsea* District *London*
 Occupation *Fisherman* Classification for Discharge *6* Medical Category *AI*
 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 *4.6.19*

J. Williams Lt
 O. 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 *Amle Constn Lt*

Date *5-6-19*

O i/c. Re-clothing.

3. Transportation and Release Certificate.

R.1477.3.559

The above named has been provided with Travelling Warrant No. 2290 to his home at New Orleans and Release Certificate No. issued.

Date 5-6-19

J.A. Shaw Capt
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 3-7-19

Date 5-6-19

J. Mustard
Depot Paymaster.

Discharge approved for 19-6-19

Forwarded with following documents to O.C Discharge Depot.

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

1 Form B

Date 5-6-19

J.A. Shaw Capt
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUN 19 1919

R.H. Suter
O. C. Discharge Depot.

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

Date June 7 1919

J. A. Shaw
J. Mustard

Reg. No. *1361* Rank *1st Lie* Name *Francis L.*
Attested Address *New Orleans.*
Allotment* Allottee
Date of Allotment Returned from Overseas *29.1.19.*
Returned on S.S. *Corsican* Cause *Discharge*

4.6.19
19.6.19

PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILISATION



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 Office 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 *Lorenzo Francis*

Regiment from which discharged *Royal Newfoundland*

Regimental number *5365*
Intended address *Trinity Bay*

Height on discharge *5* Feet *7*

Color of hair on discharge *Black*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *—*

Figure on discharge *Medium*

Christian name of Father *Eli*

Christian name of Mother *Catherine*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Trinity Bay 13th June, 1895*

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) *Lorenzo Francis*

Alc.
(Rank)

Station *St Johns*

Date *11-6-19*

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

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

Station

Date