



**THE ROYAL NEWFOUNDLAND REGIMENT**

**ATTESTATION OF**

No. 5351 Name Albert Fay Corps Cof B

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

1. What is your name? ..... 1. Albert Fay
2. What is your full Address? ..... 2. Long Beach St  
B. Bay
3. Are you a British Subject? ..... 3. Yes
4. What is your age? ..... 4. 20 Years ..... Months
5. What is your Trade or Calling? ..... 5. Fireman
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, Albert Fay 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

Albert Fay SIGNATURE OF RECRUIT.  
Prayer Smith Signature of Witness.

93/5/15

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

I, Albert Fay 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 93 day of May 1915.

Signature of Attesting Officer Prayer Smith

**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) .....





# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 5351

Name Albert Fay

Corps Cof B

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

- |  |                           |
|--|---------------------------|
| 1. What is your name? .....  | 1. <u>Albert Fay</u>      |
| 2. What is your full Address? .....  | 2. <u>Long Beach Bay</u>  |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u>             |
| 4. What is your age? .....   | 4. <u>30</u> Years .....  |
| 5. What is your Trade or Calling? .....  | 5. <u>Farmer</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. <u>Yes</u> Name ..... |
|  |                           |
| 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, Albert Fay ....., 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

Albert Fay SIGNATURE OF RECRUIT.

93/5/18

Edwards Signature of Witness.

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

I, Albert Fay ....., 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 .....

on this 23 day of May 1918

Edwards Signature of 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 .....

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.

5351

Name Albert Fry  
 Apparent age 20 years     months. Height 5 feet 7 3/4 inches  
 Chest Measurement { Girth when fully expanded 35 inches  
                           Range of expansion 3 inches  
 Distinctive marks \_\_\_\_\_

### INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Richard Fry  
Long Beach 13 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>23-3-18</u>									
Joined at <u>St Albans</u> on <u>Monday 23-19-18</u>									
<u>Discharged January 23 1919</u>									
<u>Admitted to Field Street (Hamp) 29-6-18</u>									
<u>Discharged do do 21-7-18.</u>									
<u>Granted leave without pay from 6-9-18 to 15-10-18</u>									
<u>Demobilization St Albans 23-1-19</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 23-1-1919 (date of discharge) 246 years 59 days  
207 days  
 " " Pensions " ( " " ) 246 years 59 days  
207 days

C.R. 5331

WOUNDED AND SICK N.C.OS AND MEN OF THE EXPEDITARY FORCE - FRANCE.



C O R K - RECORD OFFICE.

192 Pte. Leach J.

2/Leins.R.

V.D.G.Mild.....

LIST NO.H.A.34337.

Adm.1 Sty.H.Rouen 21 Jan.19.

D U B L I N - RECORD OFFICE.

479309 Pte. Best W.

945/A.E.Co.late  
1/Innis.Fus.

V.D.G.Mild.....

LIST NO.H.A.34337.

Dis.to Camp Adjutant ex 1 Sty.H.Rouen 21 Jan.19.

INFANTRY RECORD OFFICE - W A R W I C K.

9738 Pte. Salvey J.  
267196 Sjt. Skipper S.

1/Glouc.R.  
2/5 Glouc.R.

V.D.G.Mild.....

LIST NO.H.A.34337.

Trans.to 43 COS.ex 1 Sty.H.Rouen 16 Jan.19.  
Blt.Wd.Highs....Dis.to Detention Camp Abbeville (Prisoner)ex 2 S.O.  
Acc. H. 21 Jan 19.

ADMITTED 11 STY.HOS.ROUEN 21 JAN.19.

1/3975 Pte. Busby J.

88/MGC.late.....

Bronchitis.

2/Worc.R.

200936 Pte. Perry J.

2/4 O.& B.L.I.

G.S.W.Leg L.Acc.

34300 L/C. Fitzpatrick M.

16/R.War.R.att.

P.U.O.

26045 Pte. Still A.

APM.

5/R.Berks.R.

Scabies.

266392 Pte. Thompson A.P.

att.RE.1 Co.

Diarrhoea.

16/R.War.R.....

57704 Pte. Davies R.

2/6 War.R.

DAE.....

Dis.to Concentration Camp Abbeville ex 5 Con.  
Dep.14 Jan.19.

40487 Pte. Cretchley A.

1/h.War.R.

Influenza.....

Dis.to Concentration Camp Abbeville ex 5 Con.Dep.  
14 Jan.19.

N E W F O U N D L A N D - EXPEDITARY FORCE.

5331 Pte. Hardy S.

1/Newfld.R.

V.D.G.Mild.....

LIST NO.H.A.34337.

Dis.to Camp Adjutant ex 1 Sty.H.Rouen 21 Jan.19.

110A  
1071

C.R. 5351

Extract from Daily Orders part 11, Depot St. John's dated December 28th.,  
1918.

The undernoted discharge on demobilization have been approved by Officer  
Commanding discharge depot from noted date. He is removed from depot  
strength and transferred to discharge depot pending confirmation by  
Officer i/c Records.

#5351 Pte, Albert Fry.

26-12-18

C.R. 5351

Abstract from ~~Interdepartmental~~ Military Orders dated  
1. Report St. John's dated *Jan. 24th. 1919.*

The discharges of the unreported or demobilized  
have been reviewed by Officer in records on  
noted into **23-4-19.**

5351 Pte. Albert Fry.

C.R. 5351

Extract from Daily Orders part 11, from Unit/The Royal  
Hfld. Regt. St. John's, dated May 25.1918.

#5351 Pte. Albert Fry.

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



Jay, Albert

5351

Jay & Sept.

January 23rd., 1919

#E 51 Pte. Albert Fry,  
Long Beach, B.C.

Dear Sirs-

Please find enclosed "Discharge  
Certificate No. 679."

Yours faithfully,

Captain,  
Paymaster & O. i/c Records

Enc 1.

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 5351 Rank Pvt. Name Albert Fry  
 Intended place of residence Long Beach, N.B.
2. Occupation fisherman  
 Classification of soldier C. Medical Category A.P.
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 23 1918  
 Date .....
- J. H. McKay Capt.  
 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 Dec 23<sup>rd</sup> 1918  
 .....
- Albert Fry  
 Signature of soldier  
W. J. Calver  
 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 Dec 23<sup>rd</sup> 1918  
 .....
- Albert Fry  
 Signature of soldier  
J. H. McKay Capt.  
 Signature of witness

## STATEMENT OF SERVICE

7. Enlisted for service 22. 5. 18 No of days on Military  
 Discharged from service 26. 12. 18 plus 28 days Service 247

## APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge, The Royal Newfoundland Regiment, twenty-eight days from date.
- Place ST. JOHN'S  
 Date DEC. 26. 1918
- R. H. Lait Capt.  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment.

## CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
- Place St. John's Med  
 Date January 3<sup>rd</sup> 1919
- J. H. McKay Capt.  
 Officer in Charge  
 The Royal Newfoundland Regiment

A.B. 2079/679

# The Royal Newfoundland Regiment

## DEMobilIZATION OF

Reg. No. 5351 Rank Private Name Jay Albert  
 Date of Enlistment 22-5-18 Address Long Beach District Bonaivota  
 Occupation Fisherman Classification for Discharge C Medical Category A.II  
 Recommendation S.M.B. \_\_\_\_\_ Disability Rating \_\_\_\_\_  
 Passed to Demobilization Officer with following documents:—

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	
B 178a	D 400A	B 1915	2	do 2nd	" 3	3
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K	1	do 4th	" 5	
B 179b	B 103	ME 2			" 6	
B 179c	B 120	M 93	1			

Date 14-12-18

*W. H. C. Capt*  
O. C. Discharge Depot.

### PARTICULARS FOR DEMobilIZATION

#### 1. Civil Re-Establishment.

I am \_\_\_\_\_ in a position to resume civilian occupation.

*Albert Jay*

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. Snow*

Date 23-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R 419* to his home at *Somerville 68* and Release Certificate No. *571* issued.

Date *23-12-18* *C.B. Duke 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 *13-1-19*

Date *73-12-18* *W. H. H. Capt.*  
Depot Paymaster.

Discharge approved for *26.12.18*

Forwarded with following documents to O.C Discharge Depot.

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

Date *24.12.18* *C.B. Duke Capt.*  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

Date *DEC 26 1918* *R.H. East Capt.*  
O. C. Discharge Depot.

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

Date *Dec. 28/1918*

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

# MEDICAL HISTORY

OF

Surname Joy

Christian Name Albert

Table I.—GENERAL TABLE.

Birthplace:—Parish Long Beach Bk. County Nfld.

	SPECIAL RESERVE		REGULAR ARMY	
	on	at	on	at
Examined	27 <sup>th</sup> day of May 1918	S. Johns	day of	191
Declared Age	20 years	days	years	days
Trade or Occupation	Fisherman			
Height	5 feet 7 <sup>3</sup> / <sub>4</sub> inches		feet	inches
Weight	128 lbs.		lbs.	
Chest Measure-ment	Girth when fully expanded	35 inches		inches
	Range of Expansion	3 inches		inches
Physical Development				
Vaccination Marks	Right Arm		Right	Left
	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>Samuel Baker</u>			
(Rank)				
		Medical Officer.		Medical Officer.
Enlisted	at	S. Johns	at	
	on	27 <sup>th</sup> day of May 1918	on	day of 191
Joined on Enlistment	Corps		Corps	
	Regtl. No.	The Royal Nfld. Regt.	Regtl. No.	
Transferred to				
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				



st in case of Warrant Officers treated in quarters.

the cause, nature or treatment of the case likely to be of interest or of future use. In case of and re-admissions to hospitals will be shown. The subsequent progress, including particulars ment out of hospital, transfers, etc., will be given in the special syphilis case sheet.

Signature of Medical Officer

*W. W. Burdick*



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

Date	Brief Details, and Signatures
24-5-78	Vacc <i>JP</i>
13-6-18	TAB <i>JP</i>
2-9-18	do. <i>JP</i>
9-11-18	-60. <i>JP</i>
	<p><i>It is hereby certified that this soldier has been before a Travelling Medical Board and has been classified as <u>C</u> for Discharge on Demobilisation. Medical category <u>A II</u></i></p> <p><i>29.11.18</i> <i>[Signature]</i> <small>Captain</small></p> <p><small>Date of T.M.B. Discharge: 11.12.18</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



*Extract from form X*

## 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 *Fry Albert*

Regiment from which discharged *Royal Newfoundland*

Regimental number *5351*

Intended address *Long Beach B.B.*

Height on discharge *5 Feet 7<sup>3</sup>/<sub>4</sub>*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Grey*

Descriptive Marks

Figure on discharge

Christian name of Father *Richard*

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)

Station

*St John's*

Date

*26-12-18*

(Rank)

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.

## 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

his witness J. E. Sinclair  
Albert + Fry  
mark  
Signature of Man.

Reg. No. 5351

Signature of the Vocational Officer or his Representative.

Place St. Johns N. Y. L. D.

Date 23/12/18 191

Bonaivista

Demobilization Form 1

06

# The Royal Newfoundland Regiment

Class for Demobilization :-  
C

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date ..... NOV 29 1918

Regimental No. 5351

Name Fay Allan D. Bonaivista

Address St. John's

Bonaivista Bay Dist.

Present Medical Category A II

Recommended for:- (a) Immediate discharge .....  
(b) Standing Medical Board .....

Members of Board {  
R.H. East Capt.  
O.C. Discharge Depot.  
L.P. Paterson  
Senior Medical Officer  
S.W. Burden  
M. O. Depot

No. 6023



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Albert Gray, Regl. No. 8351

hereby agree, until further notification by me, and in similar official form to make an Allotment of \_\_\_\_\_ Dollars and Sixty 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 July 15<sup>th</sup> 18

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
4526	Father	Mr. Richard Gray	Summerville B. Bay	60
			Total Allotment, \$	60

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.) Swatton Linn  
Officer Commanding  
Company

(Sig.) Albert X Gray  
(Rank) Private

AA Johns  
June 26 1918

## ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at

*Headquarters 24/2/15*

1. Name *Albert Fox* Age (a) Declared *20*  
(b) Apparent

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

What severe illnesses have you had? *none*

3. Height *5ft 7 3/4*

Weight *128*

4. Eyesight (a) Left *6/6*

(b) Right *6/6*

5. Physical Defects (Examine after strenuous exercise) *no*

6. Examination of Lungs *no*

Measurement

(a) Expiration *32*

(b) Inspiration *35*

7. Examination of Heart *no*

8. Examination of Urine *no*

9. Examination of Mouth—(Defective Speech)

Teeth

Throat

Nose

Ears—(Otorrhea)

(Deafness)

10. Have you been successfully vaccinated, and when? *no*

11. Name and address of next of kin

*Father Richard Long Beach B.B.*

REMARKS--

*A 11*

*Geo. Burden*  
*Medical Officer*

Medical Examiner.



*Edward John Horn X*

## 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

*Frederick Albert*

Regiment from which discharged

*Royal Newfoundland*

Regimental number

*5351*

Intended address

*Long Beach B.B.*

Height on discharge

*5 Feet 7<sup>3</sup>/<sub>4</sub>*

Color of hair on discharge

*Light*

Complexion

*Fair*

Color of eyes

*Grey.*

Descriptive Marks

Figure on discharge

*Richard.*

Christian name of Father

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)

Station

*Albert*

Date

*30-12-15*

(Rank)

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.

April 16. 19

Mr. Richard Fry,  
Long Beach, Princeton, B.B.

Dear Sir:

With reference to your letter of April 14th. I beg to inform you that your son's allotment to you discontinued from the date of his discharge and no other payments are made, except on account of War Service Gratuity, in which case it has to be shown that your son is to be entitled to War Service Gratuity, and that he was your main or sole support.

If you consider your son as your main or sole support, please have the enclosed form filled out before a Magistrate or Justice of the Peace and return to this Department, so that your claim may be considered.

Yours truly,

Lieut.  
For Paymaster.



J R Bennett

Long Beach April 14 1919

Dear Sir      N. 4620

I Reg to ack knowledge receipt of your letter of april 5th about my sons money its not for the money over sea it was for my allotment I received 13 dollars 80cts since he was discharged January 23rd 1919 others people near by received three months pay I would like to no the troubles why all parents dont get payed alike I really need it as bad as they my son written you about my allotment March 29th it was not for the money due to days over sea it was my allotment

My sons names and number is  
5351 nte albert Juge  
Long Beach Princeton

B B

Mr Richard Juge

Long Beach

Princeton B B

Please answer as soon as possible



## 1ST NEWFOUNDLAND REGIMENT

## ALLOTMENTS

I, Albert Fry, Regl. No 5351

hereby agree, until further notification by me, and in similar official form to make an Allotment of Sixty Dollars and Sixty 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 July 15<sup>th</sup> 18

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>4526</u>	<u>Father</u>	<u>Mr Richard Fry</u>	<u>Summersville B. Bay</u>	<u>60</u>
			Total Allotment, \$	<u>60</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.) Watson Lien
 Officer Commanding  
 Company
SA JohnsJune 26 1918
 (Sig.) Albert X Fry  
 Hq. Mail Gardiner
(Rank) Pte

March 29/19

J. B. Bennett

Minister of Militia  
St Johns.

4478

Dear Sir

I am adressing you a few words to ask the reason why I havent recieved any money. But once since my discharge of that was \$13.80 cents other boys Discharged about the same time I was. have recieved three (3) months pay.


pleas answer this & tell the the reason why I havent recd. more. & obldge.

5.3 51 (ex pte)

Albert Fry  
Long Beach  
Proprietor  
Bonavista Bay

Military Service Act 7 days.

~~Enlistment~~  
Called up under Military Service Act.  
New Jersey



Long Beach

Dec. 20<sup>th</sup> 1918

3537

To J. R. Bennett.

Minister of Militia.

Dear Sir :-

This is to inform you that I have not received any money from you since Sept. 10<sup>th</sup>. My last pay then was #18.60. Since that my boy # 5351 Pte. Albert Fry has been home for 1 mo. and 9 days.

Other people are receiving their payment as usual, but I don't receive mine, and I would like to know the trouble.

O. K.   
 This man repays of age  
 from S.W.P. oil 15/11 I remain  
 payed for oil on your respectfully  
 is adjusted by Richard Fry  
 #46 no will be Long Beach,  
 Princeton.  
 B. Bay.



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Albert Fry, Regl. No 5351

hereby agree, until further notification by me and in similar official form to make an Allotment of 50 Dollars and 00 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <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 July 15<sup>th</sup> 18

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
4526	Father	Mr Richard Fry	Summersville B. Bay	60
Total Allotment, \$				60

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.) Watson Lind  
 Officer Commanding  
 Company  
SA Johns  
June 26 1918

(Sig.) Albert X Fry  
Mark Handum  
 (Rank) Pt

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39.

Regiment of Royal Newfound

Number of Sheet one  
Signature of O. C. Company W. Dickson

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	
No.	<u>5351</u>	Age on	<u>20</u> years <u>1</u> months	<u>Postman</u>		
Joined	<u>Smy Albert</u>	Place and Date of Enlistment	<u>St John's</u> <u>23.5.18</u>	Religion		
Joined		Period of ) with Colours ) with Reserve )	<u>246 days</u> years.	Place of Birth		
Joined						<u>St John's</u>
Joined						

Place	Date of Offence	Rank	Cases 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>23</u>	<u>19</u>		

To be carried over.

# The Royal Newfoundland Regiment 5351

DEMOBILIZATION OF  
 Reg. No. 5351 Rank Private Name Fry Abbot  
 Date of Enlistment 22-5-18 Address Long Beach District Bonaivista  
 Occupation Fisherman Classification for Discharge C Medical Category A II  
 Recommendation S.M.B. .... Disability Rating .....  
 Passed to Demobilization Officer with following documents:—

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	
B 178a	1 D 400A	B 1915	2	do 2nd	" 3	3
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K	1	do 4th	" 5	
B 179b	B 103	ME 2			" 6	
B 179c	B 120	M 93	1			

Date 14-12-18

*W. S. Capel*  
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 Joseph A. Snow

Date 23-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R. 419..... to his home at Somerville and Release Certificate No. 571 issued.

Date 23-12-18..... 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 73-1-19

Date 73-12-18..... W. Howley Capt.  
Depot Paymaster.

Discharge approved for 26-12-18.....

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	from R
B 178a.....	✓ 1 D 400A.....	✓ 1 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.....	ME 2.....		" 6.....	" 6.....		
B 179c.....	B 120.....	M 93.....	✓ 1				

Date 24.12.18..... C. B. Dicks Capt.  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records,  
Board of Pension Commissioners.

with following additional documents.

DEC 26 1918

Date ..... R. J. Hart Capt.  
O. C. Discharge Depot.

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

Date Dec 28/1918..... W. Howley Capt.  
o/c R  
81-81-88



Reg. No. 5351 Rank Pvt Name Fry, A. E. Co  
Attested 23-5-18 Address Long Beach, B. B.  
Allotment 60 Allottee Mr. Richard Fry (Father)  
Date of Allotment 15/7/18 Returned from Overseas  
Embarked for Overseas Cause

4-5-18  
13 6/18 1st Soc 2nd 2-9-18. 3rd Leave 9-11-18  
4. 2 16 9/18 - 24 9/18  
24 6/18 Returned from leave reported Adg  
29-6-18 admitted 21 July 18 mwp  
21-7-18 Discharge from 21 July 18  
L. Leave without pay 6-9-18 to 15-10-18.  
Returned L.W.P 15-10-18  
4-22-18  
DEC 26 1918 PASSED TO DEMOBILIZATION OFFICER  
DISCHARGE APPROVED ON DEMOBILIZATION.