



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 3636 Name Morris Gillingham Corps R. b.

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

- 1. What is your name? ..... 1. Morris Gillingham
- 2. What is your full Address? ..... 2. Glenwood
- 3. Are you a British Subject? ..... 3. Yes
- 4. What is your age? ..... 4. 19 Years 19 Months
- 5. What is your Trade or Calling? ..... 5. Labour
- 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, Morris Gillingham 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.

Morris Gillingham SIGNATURE OF RECRUIT.

Brandon Smith Signature of Witness.

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

I, Morris Gillingham 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 19th day of April 1915.

Signature of Attesting Officer [Signature]

**†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 Morris Gillingham  
 Apparent age 18 years 0 months. Height 5 feet 5 1/2 inches  
 Chest Measurement { Girth when fully expanded 35 1/2 inches  
 Range of expansion 3 1/2 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Casau Gillingham  
Glenwood | 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>19-4-17</u>									
Joined at <u>St John's</u> on <u>April 19-17</u>									
Embarked <u>St John's St George's</u> to <u>Halifax N.S.</u> <u>19-4-17</u> Embarked									
for <u>R.C.A.</u> <u>1-12-17</u> Admitted <u>24</u> <u>St John's</u> <u>10-1-18</u> <u>10 5/8</u>									
<u>St John's</u> to <u>London Depot</u> <u>5-6-18</u> <u>Wounded</u> <u>28-9-18</u> <u>Admitted 2 Aug.</u>									
<u>P. H. B. B. B.</u> <u>29-9-18</u> <u>Admitted City of London</u> <u>Military Hosp.</u> <u>4-8-19</u> <u>10 10/8</u>									
<u>transferred to</u> <u>32nd Coy. H. W. B.</u> <u>30-11-18</u> <u>Surgeon</u> <u>then posted to H. Coy.</u>									
<u>Ninety</u> <u>14-12-18</u> <u>to Hqs for demobilization</u> <u>30-1-1919</u> <u>Arrives Hqs.</u> <u>7-2-1919</u>									
<u>Demobilization</u> <u>St John's</u> <u>12-4-19</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>12-4-19</u> (date of discharge) <u>1</u> years <u>359</u> days									
" " " Pensions " " " " " " " " " " " "									

No. 3636 Name *Gillingham M.*

Sqn. Batty. }  
or Company } *C*

Corps *1st Newfoundland*

Date of enlistment } *19-4-19*

Badges }

Service or Proficiency Pay }

Date of last entry in Company Conduct Sheet }

No. and date of last drunk }

Period not reckoning towards freedom from extra fine }

Sheet No. *1*

Signature O.C. } *H. Hopson 2/lieut*  
Company, etc. }

Character

*Good Fair 4/4*

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
<i>Romen</i>	<i>7/1/17</i>	<i>O.P.</i>		<i>When on Active Service being deficient of his</i>	<i>C.S.M. Thatley</i>	<i>Dep. 12 days pay and pay for deficiency</i>	<i>5/11/17</i>	<i>W.H. Flynn</i>	<i>7/4/17</i>
<i>Field</i>	<i>2.4.18</i>			<i>Deficient of Low Returns</i>	<i>Sgt. Adams</i>	<i>Dep. 2 days pay</i>	<i>3.4.18</i>	<i>W.H. Flynn</i>	<i>2.4.18</i>
<i>Field</i>	<i>19/6/16</i>			<i>I. Leaving a Fatigue Party without permission</i>		<i>7 day F.P.</i>	<i>22/6/18</i>	<i>Majors</i>	
				<i>II. Violating the orders</i>	<i>Sgt. Adams</i>	<i>#1</i>		<i>C/o Bernard Hill</i>	
				<i>III. Insulting to an N.C.O.</i>	<i>Sgt. Adams</i>				
	<i>5/7/18</i>			<i>Under the name</i>	<i>Sgt. South</i>	<i>2 days esp.</i>	<i>6-18</i>	<i>Sgt. Penick</i>	

Army Form B. 122

**C.R.**

C.R. 3636

Extract from Daily Orders part II, Depot St. John's dated  
April 23rd. 1919.

The discharge of the undernoted on demobilisation has been  
CONFIRMED by Officer in charge of records on April 24<sup>th</sup> 1919.

3636 Pte. <sup>14</sup> Norris Gillingham

C.R. 3636

Extract from Daily Orders Part 11 Unit The Royal Nfld.  
Regt. St. John's, Mar. 29th, 1919.

The discharge of the undernoted on demobilization  
have been approved by O.C. Discharge Depot on noted dates.

3636 Pte. M. Gillingham.

29-3-19.

C.R. 3636

Extract from Medical Board held on Monday Evening March

24th. / 19

3636 Pte. M. Cummingham.

Recommended discharge from the Army.

C.R. 3636

Abstract from Daily Orders Part II Unit The Royal WFLC.  
Regt. St. John's, 11-2-19.

The Detachment returned from operations and reported to  
Depot, 7-2-19.

Reprinted on A.F. 5170.

3636 Pte. Morris Gillingham.

C.R. 3636

Extract from Nominal Roll of the Royal Nfld. Regt.  
Embarked S.S. Corsican, Jan. 30, 1919.

3636 Gillingham.



C.R. 3636

Extract from Casualties received from Pay & Records Office,  
London, Dec.28th,1918.

The undermentioned was transferred from City of London  
Military Hospital to 3rd London General Hospital on <sup>30</sup>~~28~~-11-18.

3636 Pte. M. Gillingham.

C.R. 3636

Extract from Daily Orders part II, By Lt. Col., R. J. BARNON  
Commanding 2nd., Battalion of the Royal Newfoundland Regiment.

The undermentioned having reported back from the 1st Bn. is taken on  
the strength and posted to "H" Coy. 14/12/18.

#3636 Pte. Gillingham.

#

C.R. 3636

Extract from CASUALTIES from P.&R.O., London, dated 5 Dec. 1918.

3636 Pte. M. Gillingham

Discharged from 3rd London General Hospital, London, 4/12/18.

Granted furlough from 4/12/18 to 13/12/18. Classified fit for  
"1" Duty.

Authority: A.F.W. 3016.

C.R. 3636

Nov. 6th, 18

Mr. Esua Gillingham,  
Glenwood.

Dear Sir:-

I beg to inform you that additional information has to-day been received by this Department through the Visiting Committee of the Newfoundland War Contingent Association, to the effect that No. 3636 Pte. Maurice Gillingham, is now progressing favourably.

Yours faithfully,  
Lieut. Col.,

Chief Staff Officer.

## NEWFOUNDLAND POSTAL TELEGRAPHS.

C.R. 3636



**Gable 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)**

**Dept of Militia.**

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

Address \_\_\_\_\_

Line Number	Rcd	By	Sent	by	Check

Oct. 15th, 1918

Dated

Esau Gillingham, Glenwood

To

Regret to inform you that Record Office, London,  
officially reports No. 3636 Private Maurice Gillingham  
now at City of London Military Hospital Glapton

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

**J.R. Bennett**

Minister of Militia.

**FOR TYPEWRITER**

C.R. 3636

Extract from Nominal Roll of sick and wounded  
from France to the City of London Military  
Hospital, Clapton E. 5 admitted 10/10/18.

#3655 Pte. Morris Gillingham

3636

G.S.W. R. JAW.

C.R. 3636  
Helmwood  
Oct. 9<sup>th</sup> 1918

J. R. Bennett Esq.  
Lth. John's



Dear sir,

am writing you re  
message received from you  
yesterday, informing me  
that my son, 3636 Pte Maurice  
Gillingham, was at 2nd  
Australian General Hospital  
Boulouge, suffering from  
gunshot wound in the head  
Sept. 29<sup>th</sup>.

I am feeling very uneasy  
concerning him, and my  
husband being from home  
in the King's service also,  
makes it harder, having  
also a family of 6 small  
children; I would be so  
very much obliged. if you

could possibly inform me  
as to his condition, whether  
he will recover, as it was  
not stated if it was serious  
or not.

If it will cost anything  
I will gladly pay all costs,  
if I can but get more  
information.

Trusting you will be able  
to grant my request-

I remain

Yours truly

Mrs Esau Gillingham

Address; Mrs Esau Gillingham  
Glenwood



# 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 Dept of Militia.

Line Number	Rcd	By	Sent	by	Check

Dated Esau Gillingham, Glenwood

To Oct 8th, 1918

Regret to inform you that Record Office, London, officially reports No. 3636, Private Maurice Gillingham at 2nd Austrian General Hospital Boulogne suffering from G.S. W. head Sept. 29th

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

**J. R. Bennett**

Minister of Militia.

**FOR TYPEWRITER**

CR 3636

Extract from Casualties List No. H.A. 29634.

3636 Ste. Gillingham, H.

Admitted to Aust. Gen.H. Boulogne 29 Sept. 1918.

GSW Head.

M.M.

C.R. 3636

Extract from War Office List No. C. 4710 dated 10/11/18.

#3636 Pte. M. Gillingham.

WOUNDED 28/9/18.

EG.

C.R. 3636

Extract from Casualties received from Pay & Record  
Office, London, dated May 18th, 1918.

#3636 Pte. M. Gillingham

Tonsillitis mild.

Admitted 24th General Hospital Etaples May 10th, 1918.

C.R. 3636

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

No. TWO RECORD OFFICE Y O R K.

LIST NO. H.A. 24457

51823	Pte.	Haig W.	2/4 K.O.Y.L.I.	P. U. O.	Adm.14 Con.Dep.Trouville 3 June '18.
45249	"	Hudson H.	18 Yks. & Lances.	G.S.W. Shldr.L.	Adm.14 Con.Dep.Trouville 3 June '18.
41759	"	Brook J.G.	2 Garr. KOYLI.	Spr. Ankle R.	Adm.14 Con.Dep.Trouville 3 June '18.
129211)	"	Goles W.	(63 M.G.Corps	Wd. Face.	Adm.14 Con.Dep.Trouville 3 June '18.
45053)	"		(4 Yks.& Lances.		
241474	"	Simms F.	7th K.O.Y.L.I.	Ing. Hernia R.	Adm.14 Con.Dep.Trouville 3 June '18.
42856	L.C.	Kelly J.	1/8 W. Yorks.	Debility.	Adm.14 Con.Dep.Trouville 3 June '18.
499	Pte.	Stainrod E.	12th KOYLI.	Gassed Wd.	Adm.12 Con.Dep.Aubengue 2 June '18.
203160	"	Dickson G.	1/4 Y. & Lances.	Dis.to Base Dep.Etaples	ex 14 Con.Dep. 3 June '18.
200166	"	Hepworth W.	5th K.O.Y.L.I.	Dis.to Base Dep.Etaples	ex 14 Con.Dep. 3 June '18.
307448	Cpl.	Waring J.	9th W. Ridings.	Dis.to Base Dep.Etaples	ex 14 Con.Dep. 3 June '18.
201297	Cpl.	Gossop J.	2/4 K.O.Y.L.I.	Dis.to Base Dep.Etaples	ex 14 Con.Dep. 3 June '18.

DIS. TO BASE DEP. ETAPLES EX 14 CON.DEP. 3rd JUNE 1918.

10916	Pte.	Willey E.	2nd K.O.Y.L.I.
242619	"	Milbourne N.	2nd Y. & Lances.
18647	"	Semley W.	6th K.O.Y.L.I.
202377	"	Wilkinson B.	2/4 K.O.Y.L.I.
15877	Sgt.	Evason A. . .	7th Y. & Lances.
51395	Sgt.	Howarth A. .	9th K.O.Y.L.I.
51796	Pte.	Dickson A.	5th do.
236064	Sgt.	Ayton A.	9th West Yorks.
59088	Pte.	Robinson J.E.	1st West Yorks.
58590	"	Stockdale F.	2nd West Yorks.
201339	"	Baker G.	2/4 Yorks & Lances.

NEWFOUNDLAND EXPEDITIONARY FORCE.

LIST NO. H.A. 24457

2626	Pte.	Gillingham M.	1st R.Newfd'land.	Dis.to Base Dep.Rouen	ex 14 Con.Dep. 3 June '18.
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3636



1298



1168 C.R. 3636



WOUNDED & SICK N.C.Os & MEN OF THE EXPEDITIONARY FORCE - FRANCE

W I N C H E S T E R - RECORD OFFICE

LIST NO.H.A.23566

ADM. 14 CON DEP TROUVILLE 15 MAY. 18.

23464	Pte. Camfield, P...	7/Rif Bde.....	Gas Shell W.
0157	Frn. Smith E.J.	12/Rif Bde.	GSW. Ankle.
37783	Pte. Simpson, A.	13/Rif Bde.	Diarrhoea.
39525	L/C. West H.W.	9/London.	GSW.Scapula R.
40589	Pte. Jennings, A.J...	9/London.....	GSW.Arm.L.
47351	Pte. Coombes, R.	12/K.R.R.	Influenza.
470754	Pte. Fletcher, W.A.	12/London.....	GSW.Thigh L.
R/3159	Cpl. Onley, W.	2/K.R.R.	ICT Perineum.
13120	Cpl. Campey, A.	1/Rif Bde.	Laryngitis.
102653	Pte. Meager, H.R	1/MGCps. 3/IRB.	ICT Toe Foot L.
35213	Pte. Davison W.....	7/KOYLI.att 8/R.B...	ICT Foot Leg.L.
26531	Pte. Huntingford T.	8/Rif Bde.	Influenza.
9583	Cpl. Hankinson A...	20/KRRC.....	PUO.
71460	Pte Tilbury, G.	56/MGCps.9/London.	PUO.
2781	Pte. Dale, G.	18/K.R.R.	Boils Back.
43803	Pte. Jardine, F.J.	1/13 London.	Hæmorrhoids.
495707	Pte. Mertens, H.G....	1/13 London.	Ulcer Hand R.
S/28465	Pte. Flock, T.w.	9/Rif Bde.	Influenza.
B/214	Pte. Bellamy J.....	9/Rif Bde.....	Influenza.
315517	Pte. Brown J.S.	5/London att	PUO & Tr Fever.
		3/Rif Bde.	
S/27617	Pte. Grew J.	8/Rif Bde.	Influenza.
15828	Pte. Godingay, C.H.	10/Glouc.att 9/R.Bde.	-do-
12229	Pte. Thompson, E.J.	5/att 7/KRR.	-do-
32765	L/C. Boag G.	12/K.R.R.	PUO.
S/14224	Pte. Lovell, W.	12/Rif Bde.	PUO.

INFANTRY RECORD OFFICE - H A M I L T O N

LIST NO.H.A.23566

ADM. 14 CON DEP TROUVILLE 15 MAY. 18.

38259	Pte. Wilcox, W.Y.	17/R.Scots.....	GSW.Leg.L.
41344	Pte. Stirton T.	1/R.S.Fus.	GSW.Face.
30665	Pte. Sinton W.	7/8 KOSB.	Bronchitis.
351675	Pte. McNairn R.	1/9 R.Scots.	Bronchitis.
14186	Pte. Edwards J.....	1/Scots Rifs.....	PUO.
26992	Pte. Henderson J....	7/8 KOSB.....	DAH.
48990	Pte. Shaw, N.	11/R.Scots.	Gas Shell.
41375	Pte. Francis, D.	2/KOSB.	SW Face.
42275	etc. Brown T.	2/Scot Rifs.	Influenza.
48467	Pte. Bermoutitus G..	2/R.Sc.Fus.....	Diarrhoea.
119209	Pte. Thompson, N.....	40/MGCps.3/R.Sc.Fus..	PUO.
51492	Pte. McNaught, J.	12/R.Scots.	Shell Gas W.
43167	Sjt. Buchanan H.	2/R.Scots.	Gas Shell W.

NEW FOUNDLAND CONTINGENT

LIST NO.H.A.23566

ADM. 14 CON DEP TROUVILLE 15 MAY. 18.

3636	Pte. Gillingham N...	1/R.Newfld. ....	Tonsillitis;
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CR 3636

Extract from Nominal Roll Draft No.34 embarked Southampton 1/12/17  
from 2/1st Newfoundland Regiment to 1/1st Newfoundland Regiment  
B.E.F.

3636 Pte.Gillingham, M.

MP.



C.R. 3636

Extract from Nominal Roll, embarked St. John(s for Oversees 19-5-17

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#3636 Pte, M. Gillingham.

3636

CR

Extract from Daily Orders Part 21 Unit The Royal  
Militia Regt., St. John's, April 19th, 1917.

3636 Pte. M. Gillingham.

Attached to the strength from April 19th, 1917.

M. Hillingham

C.R.

3636

~~1110~~

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.  
 In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

## Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. *Royal Newfoundland*
2. Regtl. No. *36363*. Rank. *Pte*
4. Name *Pillingham, M.*  
(Surname) (Christian Names)
7. Former Trade or Occupation }  
 7a. If the soldier claims previous service in Army, he should state—  
 (a) Former Regts. or Corps ; with Regtl. Nos.
5. Age last birthday.....
6. Posted for duty on..... at.....  
 in category (or grade).....
8. If the disability is an injury was it caused  
 (a) in action (b) on field service  
 (c) on duty (d) off duty ?  
 (b) Date of Discharge ;  
 (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—  
 (a) When (d) Particulars of Pension or Gratuity (if any)  
 (b) Where  
 (c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

### Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here.  
 (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

*G. S. W. Head.*

11. Date of origin of disability.
12. Place of origin of disability.
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

*Small wound over right malar bone F.B. in neck opposite three cervical vertebra, giving rise to no discomfort. Partial blindness right eye resulting therefrom.*

14. State whether the disabilities are
- |  | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war .. .. .                        | Yes                 | .....             |
| (ii.) Previous active service .. .. .                              | No                  | .....             |
| (iii.) Climate in pre-war service .. .. .                          | No                  | .....             |
| (iv.) Ordinary military service before the war .. .. .             | No                  | .....             |
| (v.) Serious negligence or misconduct on the man's part. } .. .. . | No                  | .....             |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } N.A.

In all cases such as facial injuries, eye, ear, nose and throat disabilities, etc., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?

(A note should be made as to weight in all cases when it is likely to afford evidence of the progress of the disability.)

Scar over right Malas bone, examination of eye shows retinitis - choroiditis macular region and lower retina as result of tearing choroid. Yes. H. V. 99. F. B. not removed but causes no trouble.

16. Was an operation performed? If so, when and what was its nature?

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

18. \*In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

20. Do you recommend—

(a) Discharge as permanently unfit?

(b) Change to United Kingdom?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Reputation

Hodgins M.O.

ROYAL NEWFOUNDLAND REG.

Medical Officer in charge of case.

Station: WITLEY DOWN CAMP

Date: 18 JAN 1919

\* 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

OPINION OF THE MEDICAL BOARD.

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

21. Give diagnosis and particulars of:—

(a) Any disability claimed or discovered.

(b) The present condition thereof.

22. State whether the disabilities are:—

(a) Attributable to

(b) Aggravated by

(i) Service during the present war .. .. .

(ii) Previous active service .. .. .

(iii) Climate in pre-war service .. .. .

(iv) Ordinary military service before the war .. .. .

(v.) Serious negligence or misconduct on the part of the soldier .. .. .

Give details:

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it? .. .. .

23. Is the disability in a final stationary condition? If not

(a) How long is the present degree of disability likely to last?

(b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

Certified as signed  
by

Wm. Gillingham 27/11/18

W. Braudes

Major

per

Will you please advance me  
two pounds per my account

Yours truly,

W. Gillingham

3636. Mr. Gillingham  
1 Royal W. F. F. D. Regt  
Military Hospital  
Clapton E. 5  
London

W. Gillingham  
CITY OF LONDON  
MILITARY HOSPITAL,  
42, CLIFDEN ROAD,  
CLAPTON, N.E.

10/12/18  
10031  
10-0-0

P.S. N.

C.O. £2-0-0

A.P.P. 21/11/18.  
Receipt No 9908

21/11/18.

Military Hospital  
Clifton Road.  
Clayton, E.S.

Dear Sir

I shall be glad if you will  
advise me the sum  
of £2 from my a/c ~~AB~~

3636 Pto. Pm. Gillingham  
40 sqd. West. Inf. Regt.

to the Regimental Paymaster.  
Royal Army Medical Corps  
158 Victoria St. S.W.

CITY OF LONDON  
MILITARY HOSPITAL  
42, GLIDEN ROAD,  
— CLAYTON, E.C. —

J. G. G. G.  
Myra R. R.

P. R. R.

17790

3

CHIEF PAYMASTER & OFFICER IN CHARGE  
 NEW ZEALAND CONTINGENT  
 58 VICTORIA ST.,  
 LONDON, S.W.1  
 ENGLAND.

Officer Commanding,  
 City of London, Mil. Hosp.  
 Clapton, S.E.

Pay & Record Office,  
 2nd November 1918.

Reference reverse: Postal draft  
 for £5:1:0 is enclosed for payment  
 as indicated.

Kindly acknowledge receipt.

*A. H. Munro*  
 Major,  
 Chief Paymaster & Officer i/c Rcds.

FM/S

*M. J. Wintburn*

3549/18.

NEW ZEALAND CONTINGENT  
 58 VICTORIA ST.,  
 LONDON, S.W.1  
 6 - NOV 1918  
 PAY & RECORD OFFICE

*Chief Paymaster  
 New Zealand Cont.  
 58 Victoria St  
 S.W.1*

*Receipt hereby acknowledged*

*J. H. Hume*  
 Major R.A.M.C.  
 for O/C

*Nov 5/18*



No. 17398/6

*Er.*



N.F.P./80.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,  
City of London Mil. Hosp.  
Clapton, E. 5.

28th October 1918

Subject: 3636, Pte. M. Gillingham,

ANSWER.

*Lower Clapton 1918  
Oct 29/1918*

With reference to the following telegram (9304) from the Hon. Minister of Militia. received

*No 3636 Pte Gillingham.*

*This Soldier is desirous of drawing the amount.*

*Please remit to me.*

Pay to 3636 Gillingham £5:1:0

Kindly advise whether this amount should be remitted to you for payment to this Soldier, retained to credit of his account, or otherwise dealt with.

*3579/18*

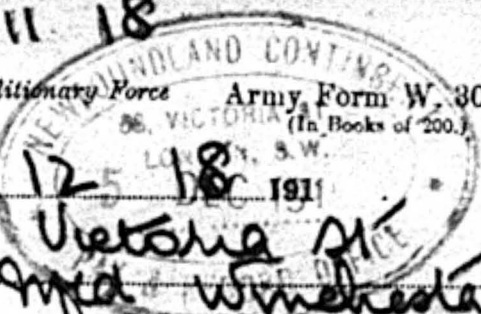
*B. Gley*

Chief Paymaster & O. i/c Records.

CITY OF LONDON  
MILITARY HOSPITAL,  
42, CLAPTON ROAD,  
CLAPTON, N.E.

*haja name  
Registration for  
o/c.*

Adm<sup>d</sup> 30 11 18



Only for use with Men returned from an Expeditionary Force or from Garrisons Abroad. Army Form W. 3016.

No. \_\_\_\_\_ Date 21 12 18  
\*(1) To the Officer i/c Records } 58 Victoria St  
\*(2) The Officer Commanding } R. Mtd Winesford  
\*(8) The Paymaster } 58 Victoria St Station.  
\* Strike out that which is inapplicable.

Regimental No. 3636  
Rank and Name Pvt Gillingham m.

Regiment or Corps R Mtd

has been granted } 4/12/18 to 13/12/18  
a furlough from }

His address while } 58 Victoria St  
on leave will be } SW

I consider he is fit for  
\* I. DUTY.  
\* ~~II. COMMUNIC. DEPT.~~ I Duty  
\* ~~III. EMPLOYMENT.~~

Officer in charge G. R. Simpson Capt Hospital.

Registrar, R.S.A.M.C.F.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office. Brd London General Hospital,

In the case of men of the Royal Flying Corps, two copies of Army Form W. 3016 will be sent to the Officer in charge Records concerned and one to the Paymaster, instead of one copy to the Officer i/c Records, the Paymaster and O.C. shown in the Schedule. WANDSWORTH, S.W.



This Form is to be used in connection with Pamph. M. E. (1)  
N. F. 1915

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of *Morris Grillingham*  
aged *18 years* conducted at *Fildgvars*  
Date: *April 19<sup>th</sup> 1917* Recruiting Officer:

NO OF TEST FINDING

- 1 *no*
- 2 *no*
- 3 *no*
- 4 *no*
- 5 *no*
- 6 *no*
- 7 *no*
- 8 *no*
- 9 *no* *no*
- 10 *no*
- 11 *no*
- 12 *no*
- 13 *no*
- 14 *no*
- 15 *no*
- 16 *no*
- 17 *no*
- 18 *no*
- 19 *6/6 Bats*
- 20 *no*
- 21 *no*
- 22 *no*
- 23 *no*
- 24 *no*
- 25 *no*
- 26 *no*
- 27 *no*
- 28 *no*
- 29 *no*
- 30 *no*
- 31 *no*
- 32 *no*
- 33 *no*
- 34 *5 ft 5 1/2 in*
- 35 *127 lbs*
- 36 *32-35 1/2*
- 37 *40 teeth mouth*
- 38 *Father Casaw Glenwood*
- 39 *no*

*36 36*

*J.H.* Signature of Medical Examiner: *Geo. Borden*

No 3994



4/ 1ST. NEWFOUNDLAND REGIMENT 6

ALLOTMENTS

I, M. Gillingham, Regl. No. 3636

hereby agree, until further notification by me, and in similar official form to make an Allotment of          Dollars and Twenty 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 June 1st 1917

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
2937	Mother	Esau Gillingham (Catherine)	14 Colford St St Johns	60
Total Allotment, \$				<u>60</u>

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

(Sig.) Chas R. Avelapt.

Officer Commanding  
Company

(Sig.) M. Gillingham

(Rank) Pvt.

St John  
May 16 1917

FORM K

No. 3994



4/ 1ST. NEWFOUNDLAND REGIMENT 6

ALLOTMENTS

I, M. Gillingham, Regl. No. 3636

hereby agree, until further notification by me, and in similar official form to make an Allotment of \_\_\_\_\_ Dollars and Twenty 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 June 1st 1917

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
2937	Wife	Esme Gillingham (Katherine)	4 St. Johns St St. Johns	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.) Charles Ayelapt.  
 Officer Commanding  
 Company  
St John  
May 16 1917

(Sig.) M. Gillingham  
 (Rank) Pvt.



16875/1/P&A .

21st. Oct. . .

Military Hospital, Clifden Road, .

Clapton, E. 5. .

3636, PTE. M., GILLINGHAM,  
ROYAL NEWFOUNDLAND REGIMENT.

19. 19. 18 8984 .

16791/3 .

17th, Oct. .

City of London Military Hosp., .

Clapton, E. 5., .

3636, PTE., M. GILLINGHAM,  
ROYAL NEWFOUNDLAND REGIMENT., .

8763 .



NEWFOUNDLAND CONTINGENT,  
PAY & RECORDS OFFICE.

Ref. No. 9231  
Rec'd 25/10/18  
25/10/18  
Ref. Nos.

CITY OF LONDON  
MILITARY HOSPITAL  
42, CLIFDEN ROAD  
CLAPTON, N.E.

P. & C.  
R. & C.  
B. & E.  
P.

23/10/18  
CITY OF LONDON MILITARY HOSPITAL,  
CLAPTON, N.E.

3636. Pte. M. Gillingham  
Military Hospital  
Clifton Road  
Clapton.  
London. E5  
Eng.

Under  
M. Gillingham  
M. Gillingham  
M. Gillingham

W.R. £2-0-0  
25/10/18  
W.R.

Dear Sir

17317/5

I am in hospital and i am  
in a poor condition i have  
lost my Pay Book. and i  
have not any money so  
will you forward me. a new  
Pay Book and two Pounds.  
By return mail. I rate to  
you two wire home for money  
and i have got it since  
But you need not use now  
you can send me two Pounds  
from the pay office  
Yours truly

Pte. M. Gillingham

17317/5

City of London  
Clapton, N. E.

25th October

8

M. Gillingham

3636, Pte

2:0:0

No. 80

*Pay Ledger*

# ANGLO-AMERICAN

WESTERN UNION DIRECT UNITED STATES  
CABLEGRAM



Prefix	Code	At	SENT	FOR STAMPS
WORDS	CHARGE	To	By	
10	<del>1/1</del> <del>1/1</del> <del>1/1</del>			
22/10/18			<b>VIA ANGLO.</b>	
THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.				

22/10/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To MRS E GILLINGHAM

~~XXXXXXXX~~ GLENWOOD (Newfoundland)

PLEASE CABLE FIVE POUNDS IMMEDIATELY

GILLINGHAM

CHECKED. *[Signature]*

*Charge @ 3636*

*10/- ✓*

*Express Rate.*

CHARGED  
PAY BOOK  
Date 26/10/18 *[Signature]*

NOT TO BE TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature \_\_\_\_\_ Address 59 Victoria St. S.W. 1.

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

Mrs E Gillingham

80

Stenwood

Newfoundland

Please cable five pounds  
~~as soon as possible~~ immediately.

M. Gillingham

no 3616

24/1/1916

3636: Pte. Mr. Gillingham 8763

City of London Military Hospital

H. H. H. Runic

CITY OF LONDON  
MILITARY HOSPITAL  
42, CLIFDEN ROAD,  
BLAYTON, N.E.

Blayton Rd

Blayton E.5.  
London

NEW BOUNDARY CONTINGENT  
PAY & RECORD OFFICE  
1918

11/10/18  
90  
999

Dear Sir 15/9/18

Will you please oblige me by  
writing to Mrs C. Gillingham  
Wentwood Weymouthland  
to wire me five pounds as  
soon as possible.

and will you please send me the  
total of my credit for I have  
lost my Pay Book and I don't  
no how much I am in  
credit please try and get this  
message up as soon as possible  
yours truly  
Pte. Mr. Gillingham

16791/3

NEWFOUNDLAND CONTINGENT.

Pay & Record Office,  
58, Victoria Street,  
London, S. W. (1),  
17th, Oct 1918.

Officer Commanding,

City of London Military Hosp.,

Clapton, E. 5.

3636, PTE. M. GILLINGHAM,  
ROYAL NEWFOUNDLAND REGIMENT.

The enclosed application from the above named Soldier  
/ / ( 8783 ) does not bear indication of your approval in  
accordance with A. G. I. 2175 of 1916, K. R. & O. 1864, and is  
therefore forwarded to you for your attention, please.

  
Major,  
Chief Paymaster & O i/c Records.

No. 187

# ANGLO-AMERICAN WESTERN UNION DIRECT UNITED STATES CABLEGRAM



Prefix <u>U</u>	Code _____	At _____	FOR STAMPS
WORDS <u>11</u>	CHARGE _____	To _____ By _____	
<b>VIA ANGLO.</b>			THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.

18/12/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To MRS GILLINGHAM  
GLENWOOD (Newfoundland)

CABLE TEN POUNDS THROUGH MINISTER MILITIA

MAURICE GILLINGHAM

*3636*

NOTIFIED PER N.P.  
 2ND. BR. *274*  
 BY *OK* CTD *23/18*

*11-*

*notify deposit*

Authorised.

NOT TO BE TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature \_\_\_\_\_

Address \_\_\_\_\_

58 Victoria St. S.W. 1.

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

Millingham, In

3636

Sept



April 12, 1919

14636 Pte! Morris Gillingham,

Glenwood,

Twillingate Dist.

Dear Sir:-

Please find enclosed "Discharge Certificate  
No.1781."

Yours truly

Paymaster & U.i/c Records <sup>Captain</sup>

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 36.36 Rank Pte Name Gillingham M.  
 Intended place of residence Glenwood Twillingate
2. Occupation Labourer  
 Classification of soldier B Medical Category F
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 MAR. 27. 1919

H. M. West  
 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

27. 3. 19

M. Gillingham  
 Signature of soldier

J. A. Snow  
 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

27. 3. 19

M. Gillingham  
 Signature of soldier

E. Woile, Sgt.  
 Signature of witness

## STATEMENT OF SERVICE

7. Enlisted for service 19. 4. 17 No of days on Military  
 Discharged from service 27. 3. 19 plus 14 days Service 724

## 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

MAR 29 1919

R. H. [unclear] Capt  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment.

Date .....

## CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place St. John's, Nfld

Date April 12, 1919

M. Bowley Capt  
 Officer in Charge Records  
 The Royal Newfoundland Regiment

A. B. 2097/1781

36  
308

April 18 1919

4652 glenwood  
to the department of militia

Dear Sir

I have Received discharge certificate  
of Post I never Received any check  
as when I got my Tempary discharge  
I under stood that I would get my  
first seventy dollars when I get my  
final discharge as one other soldier  
here did get his first seventy dollars  
when he got his discharge is there  
any Reason why I shoulden get mine  
as I need it owing to not been  
able to work please Reply  
yours truly

3636 maris gillingham  
glenwood

sent [unclear]

# The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 5636 Rank Platoon Name Gillingham M.  
 Date of Enlistment 194-17 Address St. John's District St. John's  
 Occupation laboured Classification for Discharge B Medical Category ES  
 Recommendation S.M. physically unfit Disability Rating 40% of service  
 Passed to Demobilization Officer with following documents:—

N.F. Pj36	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 25-3-19

*H. M. W. H.*  
No. C. Discharge Depot.

## PARTICULARS FOR DEMobilIZATION

### 1. Civil Re-Establishment.

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

*M. Gillingham*

Particulars passed to Vocational Officer for information and action.

Date.....

### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable. \$65.00

(b) Clothing Supplied None

Date 27-3-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *P. 943* to his home at *Glenwood* and Release Certificate No. *1463* issued.

Date *27-3-19*

*J.A. Lawrence*  
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 *12-4-19*

Date *27-3-19*

*H. M. H.*  
Depot Paymaster

Discharge approved for *29-3-19*

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
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 *27-3-19*

*J.A. Lawrence*  
Demobilization Officer

APPROVED.

Documents as above forwarded to:—  
Officer in Records.  
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

MAR 29 1919

Date .....

*R.H. Jait*  
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 (Fishing)*

*M. Gillinham*  
Signature of Man.

Reg. No. 3636

*J. A. Crawford*  
Signature of the Vocational Officer or his Representative.

Place

*St Johns*

Date

*27-3-19*

191

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.  
 In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

## Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. *Royal Newfoundland* 7. Former Trade or Occupation }  
 2. Regtl. No. *9636* 3. Rank. *Private* 7a. If the soldier claims previous service in Army, he should state—  
 4. Name *Cillingham* (a) Former Regts. or Corps ;  
 (Surname) (Christian Names) with Regtl. Nos.  
 5. Age last birthday.....  
 6. Posted for duty on..... at.....  
 in category (or grade).....  
 8. If the disability is an injury was it caused  
 (a) in action (b) on field service (b) Date of Discharge ;  
 (c) on duty (d) off duty ? (c) Cause of Discharge.  
 9. If a Court of Inquiry was held on an injury state :—  
 (a) When (d) Particulars of Pension or Gratuity  
 (b) Where (if any)  
 (c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

### Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability. *G.S.W. Head.*  
 12. Place of origin of disability.  
 13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *Small wound in right malar bone, F.B. in neck*  
*offensive*

**OPINION OF THE MEDICAL BOARD.**

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war .. .. . *Yes*
  - (ii.) Previous active service .. .. . *no*
  - (iii.) Climate in pre-war service .. .. . *no*
  - (iv.) Ordinary military service before the war .. .. . *no*
  - (v.) Serious negligence or misconduct on the man's part. } .. .. .
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?  
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

*See his right malocclusion examination of eye shows retinitis Choroiditis maculara region and lens retina as a result of tearing choroid*  
*60 L.V. 69*

16. Was an operation performed? If so, when and what was its nature?  
17. If not, was an operation advised and declined?  
18. \*In the case of loss or decay of teeth.—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?  
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

*A.B. not removed because no trouble*

20. Do you recommend—  
(a) Discharge as permanently unfit?  
(b) Change to United Kingdom?  
Note—(b) is only applicable to soldiers invalided at Foreign Stations.

*Repatriation*  
*Produce no.*  
ROYAL NEWFOUNDLAND REG.

Station *WEXLEY BUSH CAMP*  
Date *8 JAN 1919*

Medical Officer in charge of case.

\* 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

21. Give diagnosis and particulars of:—

- (a) Any disability claimed or discovered. *G.D.W.*  
(b) The present condition thereof.

*See headed, Complaints of numbness over right cheek & gums. Teeth feel tight cannot masticate with right side of mouth. States that had tetanus when in London - full attack lasting one week.*

22. State whether the disabilities are:—

- (a) Attributable to (b) Aggravated by
- (i.) Service during the present war .. .. . *Yes*
  - (ii.) Previous active service .. .. .
  - (iii.) Climate in pre-war service .. .. .
  - (iv.) Ordinary military service before the war .. .. .
  - (v.) Serious negligence or misconduct on the part of the soldier .. .. . *no*
- Give details:

- 22 (a). If not due to any of these causes, to what specific condition do the Board attribute it? .. .. . *G.D.W.*

23. Is the disability in a final stationary condition? If not

- (a) How long is the present degree of disability likely to last?  
(b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.



24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

*40% ext. benefits*

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

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

*Yes*

Opinion of Military Member in case of disagreement.

OR

- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

*Yes*

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures:

Station *S. Jhus* .....

Date *Mar 24/19* .....

*H. J. Lane* } President or  
Chairman.

*John L. O'Connell*  
*J. Sinclair Smith* } Members.

Discharge Approved under Para. 392 (xvi) King's Regulations

Station .....

Date *MAR 24 1919* .....

*Cluny Macpherson, Major*  
Officer in charge, Central Hospital.

Only applicable in cases of Patients in Hospitals.

Discharge Approved under Para. 392 ( ) King's Regulations.  
or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station .....

Date .....

O.C. Discharge Centre.



## 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

*Maurice Gillingham*

Regiment from which discharged

*Royal Newfoundland*

Regimental number

*3636*

Intended address

*Glenwood*

Height on discharge

*5* Feet *7*

Color of hair on discharge

*Black*

Complexion

*Fair*

Color of eyes

*Brown*

Descriptive Marks

*Scar right side face*

Figure on discharge

*medium*

Christian name of Father

*Esau*

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

*Glenwood, 16 June 1899*

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)

*Maurice Gillingham**Pte*

(Rank)

Station

*St Johns*

Date

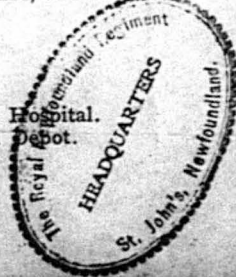
*22-3-19*

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



**Casualty Form—Active Service.**

Regiment or Corps Newfoundland

B

Rank pte Surname Lillingham Christian Name M

Religion Roman-Catholic Age on Enlistment 18 years  months.

Enlisted (a) 19/4/17 Terms of Service (a) Duration Service reckons from (a) 19/4/17

Date of promotion to present rank  Date of appointment to lance rank

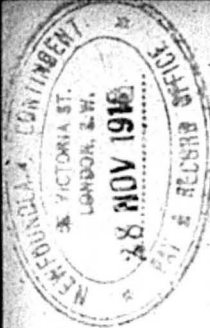
Extended {  } Re-engaged {  } Qualification (b)   
or Corps Trade and Rate

Occupation Laborer

F. H. Hopson R/Lieut. Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
			Embarked ... <u>Southampton</u>	<u>2/12/17</u>	
			Disembarked... <u>Rever</u>	<u>4/12/17</u>	
			Joined Battalion <u>11-11-17</u>		
			Joined Battalion <u>11.12.17</u>		
		<u>WITH .Bn. 30-10-17.</u>			
	<u>24 Gen. Hq</u>	<u>Lt. Toulmin</u>	<u>Water</u>	<u>1918</u>	<u>2120</u>
	<u>14 Cavalry</u>	<u></u>	<u>Ground</u>	<u>1918</u>	<u>2256</u>
	<u>8<sup>th</sup> Huss</u>	<u>Des A. Rose</u>	<u>Mountain</u>	<u>1918</u>	<u>2457</u>
	<u>8<sup>th</sup> Huss</u>	<u>Reynolds Battalion</u>	<u>Trench</u>	<u>1918</u>	<u>2457</u>
<u>17.7.18</u>	<u></u>	<u>Awarded 7 days F.P. 100% for misconduct.</u>	<u>Field</u>	<u>12.6.18</u>	<u>01810 34 A.</u>
		<u>Wounded in Action</u>	<u>28-9-18</u>		

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
(b) Signaller, Shoeing-Smith, &c.





# 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: 3636 .....

Name Pte Gillingham Maurice .....

Address Glenwood .....

Present Medical Category E .....

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

(b) Standing Medical Board .....

Members of Board {

R.H. Lat  
O.C. Discharge Depot.

P. Peterson  
Senior Medical Officer

D.W. Burdett  
M. O. Depot

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

# MEDICAL HISTORY

Surname Gillingham OF Christian Name Maurice

Table I.—GENERAL TABLE



Birthplace:—Parish Glenwood County \_\_\_\_\_

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>19<sup>th</sup></u> day of <u>April</u> 1917		on _____ day of _____ 1917	
	at <u>Headquarters</u>		at _____	
Declared Age	<u>18</u> years _____ days		_____ years _____ days	
Trade or Occupation	<u>Labourer</u>		_____	
Height	<u>5</u> feet <u>5 1/2</u> inches	_____ feet _____ inches	_____ feet _____ inches	_____ feet _____ inches
Weight	<u>127</u> lbs.	_____ lbs.	_____ lbs.	_____ lbs.
Chest Measurement	Grith when fully expanded ... <u>35 1/2</u> inches		_____ inches	
	Range of Expansion .. <u>3 1/2</u> inches		_____ inches	
Physical Development	_____		_____	
Vaccination Marks	Arm	_____	Right	Left
	Number	_____	_____	_____
When Vaccinated	_____		_____	
Vision	R.E.—V=	<u>4/6</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>W.E. Proenier</u>		_____	
(Rank)	<u>Lieut.</u>		_____	
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St. John's</u>		at _____	
	on <u>19<sup>th</sup></u> day of <u>April</u> 1917		on _____ day of _____ 1917	
Joined on Enlistment	Corps.	_____	Corps.	_____
	Regtl. No.	_____	Regtl. No.	_____
Transferred to	<u>4/12/17</u> <u>3636</u>		_____	
	ROYAL NEWFOUNDLAND REGIMENT.		_____	
Became non-effective by	_____		_____	
	on _____ day of _____ 1917		on _____ day of _____ 1917	
(Signature)	_____		_____	
(Rank)	_____		_____	

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

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
	10	10	18.				G.S.W. (Skull) Head.		Wound over Right wrist have healed. FB in neck opposite 3 <sup>rd</sup> cervical vertebra not removed. Had injury to Right Retina with hole in maculae Papilla and Pigmentaria at lower half of fundus.	W. Braucher M.D. Roulet
3 <sup>rd</sup> London General Hosp. Wandsworth.	30	11	18.	4	12	18.	J.P.H. Head	4.	FB in neck has removed	Lothrop Col M.D.





May 1st., 1919

#3636 Pte. Maurice Billingham,  
Glenwood, N.D.B.

Dear Sir:-

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

Yours truly

Captain,  
Paymaster & Officer i/c Records



# NEWFOUNDLAND POSTAL TELEGRAPHS

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 57 Sent by \_\_\_\_\_ Rec'd by \_\_\_\_\_ Check 10 / No. \_\_\_\_\_

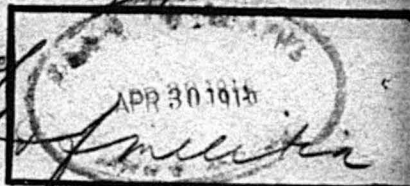
Place from \_\_\_\_\_

To \_\_\_\_\_

*Penwood*

*Captm Howley*

*Dept of Justice*



*please send along  
my overseas Cheque  
which I have not  
received.*

*3636 ple nauria  
Gillingham*

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th. 1919.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any question 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 *Francis* 2. Surname *Gillingham*

3. Rank *Private* 4. Regt. No. *3636*

5. Address in full to which future payments of gratuity are to be forwarded. *Mrs Gillingham Glenwood*

*Not applicable*

6. Date of enlistment in the Regiment. *17th April 1917*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....

*Not applicable*

8. Relationship of such dependents..... *not applicable*

9. Address in full of such dependent..... *not applicable*

.....

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *no*

11. Were you on active service only in Nfld. If so, give dates, and particulars of such service..... *France*

.....

.....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *Two years*

.....

*Incc*

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

*not applicable*

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

*not applicable*

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

*Yes*

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.....

*not applicable*

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?.....

*Yes*

19. Are you now serving in the Regt.? *Yes* If not give:- (a) Date of discharge..... (b) Reason for discharge.....

*not applicable*

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service.....

*France*

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.....

*not applicable*

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: *Maurice G. Gillingham*  
 Place of Residence: *Greenwood, Nfld.*  
 Declared before me at: *St. John's, Nfld.*  
 This *26<sup>th</sup>* day of *March 1919* *John M. McCarthy*

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

POST DISCHARGE PAY.				
Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	.....	.....	<i>4 mes.</i>	<i>280.<sup>00</sup></i>
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
Certified Correct.			Paymaster.	
			<i>Jyk</i> <i>[Signature]</i>	



ST. JOHN'S, Mar 27<sup>th</sup> /19

# Royal Newfoundland Regiment.

Billeting Account,

To Mr. M Gillingham

Billeting Soldiers as undermentioned

from Mar 25<sup>th</sup> /19 to Mar 29<sup>th</sup> /19

3636 - Mr. M. Gillingham 4 40

~~3636~~  
ACCO... 14535  
Bm  
CW

Certified correct for \$ 4.40

J. A. Lawrence  
R. J. Mr. Gillingham  
Billeting Officer.

ST. JOHN'S, MAR 25 1919

# Royal Newfoundland Regiment.

Billeting Account,

To *H. M. Gillingham*

Billeting Soldiers as undermentioned

from *Feb 8<sup>th</sup> /19* to *Mar 25<sup>th</sup> /19*

*3636. H. M. Gillingham 47 60*

*14467*

*47 60*

Certified correct for \$

*J. P. Snow*  
A.J. Billeting Officer.  
*H. M. Gillingham*



# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B. 121.  
39.

Number of Sheet First  
Signature of O. C. Company Thos. R. Ayel Capt.

Regiment of 1st Newfoundland

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>Gillingham Home</u>	Age on	<u>18</u> years — months	<u>Labourer</u>	
Joined	Date	Place and Date of Enlistment	<u>St. Johns.</u> <u>19.4.17</u>	Religion <u>R. C.</u>	
Joined	Date	Period of	{ with Colours <u>359</u> years. with Reserve <u>365</u> years.	Place of Birth	

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<u>Barry</u>	<u>18/7/17</u>	<u>Pte.</u>		<u>Absent from 6.30 am Parade Corp. Hall</u>		<u>3 days C.B.</u>	<u>18/7/17</u>	<u>Capt. Robertson</u>	<u>C.S.F.</u>
<u>Barry</u>	<u>24-7-17</u>	<u>Pte.</u>		<u>Leaving marks without permission Sgt. Kean</u>					
<u>Barry</u>	<u>11.8.17</u>	<u>"</u>		<u>Absent from 8.0. Inspection 6.0. m. Cpl. Smith</u>	<u>Cpl. Mayber</u>	<u>3 days C.B.</u>	<u>25/7</u>	<u>Capt. Robertson</u>	<u>SR</u>
<u>Barry</u>	<u>13.8.17</u>	<u>"</u>		<u>Absent from 6.0. M. parade for inspection by orderly officer</u>	<u>Cpl. Mayber</u>	<u>3 days C.B.</u>	<u>13.8.17</u>	<u>Capt. S. Robertson</u>	<u>SR</u>
<u>Barry</u>	<u>13.8.17</u>	<u>"</u>		<u>Absent from 7.30 P.M. to 9 P.M. defaulters calls</u>	<u>L/Cpl Roberts</u>	<u>48 hrs F.P. No 2</u>	<u>14.8.17</u>	<u>Capt. S. Robertson</u>	<u>Forfeits 1 day's pay</u>
<u>Barry</u>	<u>28-8-17</u>	<u>"</u>		<u>Absent from orderly officer</u>	<u>Sgt. Kean</u>		<u>14.8.17</u>		<u>Forfeits 1 day's pay</u>
<u>Barry</u>	<u>29/8/17</u>	<u>"</u>		<u>Inspection when duty worn</u>	<u>Cpl. Bishop</u>	<u>3 days C.B.</u>	<u>29-8-17</u>	<u>Lt. C. S. Frost</u>	<u>C.S.F.</u>
<u>Barry</u>	<u>3-9-17</u>	<u>"</u>		<u>Leaving camp parade</u>	<u>Sgt. Keen</u>	<u>2 days C.B.</u>	<u>30/8/17</u>	<u>Lieut. Col. Frost</u>	<u>C.S.F.</u>
<u>Barry</u>	<u>14-9-17</u>	<u>"</u>		<u>Absent from early parade until found in bed at 6.30 am.</u>	<u>Cpl. Kendall</u>	<u>5 days C.B.</u>	<u>3-9-17</u>	<u>Capt. S. Robertson</u>	<u>Forfeits 1 day's pay by R. W.</u>
				<u>Absent from 6.30 am parade until 8.15 am.</u>	<u>Cpl. Lewis</u>	<u>3 days C.B.</u>	<u>14-9-17</u>	<u>Lt. C. S. Frost</u>	<u>SR</u>
				<u>To be carried over</u>					
<u>Demobilized St. Johns, 12<sup>th</sup> / 19</u>									

Brought Forward

Barry	30/9/17	Pte.	Absent from fatigue party without leave	Cap. Walsh	7 days C.B.	1/10/16	Capt. S. Robertson	
Gluburn School	1/11/17	"	Mutiny in Parade	Sgt Hawker	14 days C.B.	2/11/16	2 Lt A. M. B. Ke	4/16

D.3636

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 3136 Rank Private Name William H. Gillingham  
 Date of Enlistment 19-11-17 Address Stemwood District St. John's  
 Occupation Labourer Classification for Discharge B Medical Category 1st  
 Recommendation S.M.B. Fit for employment Disability Rating 40% disability

Passed to Demobilization Officer with following documents:—

N.F. Pj36.....	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 25-1-19

*H. Mans H.*  
 O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

*W. Gillingham*

Particulars passed to Vocational Officer for information and action.

Date 25-1-19

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable. \$65.00
- (b) Clothing Supplied None

Date 27-3-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *P 973* to his home at *Glenwood* and Release Certificate No. *1763* issued.

Date *27-3-19*

*J.A. Snowfield*  
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 *12-4-19*

Date *17-3-19*

*H. M. ...*  
Depot Paymaster

Discharge approved for *29-3-19*

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

Date *27-3-19*

*J.A. Snowfield*  
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

MAR 29 1919

*R.J. ...*

Date .....

O. C. Discharge Depot.

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

Date *Apr. 11/1919*

*...  
... Records*

DEPARTMENT OF VETERANS AFFAIRS  
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION  
AVIS DE DÉCÈS

TO:  
À:

DATE .....18.10.1971.....

NAME Service No. CPC No.  
NOM ...GILLINGHAM MAURICE..... Matricule No ...3636..... CCP No ..260197.....

WVA No. 54453.  
AAC No .....

Information Received from:

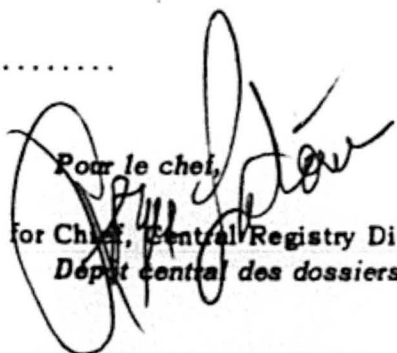
Information reçue de: .....SPME..ST JOHN..NEWFOUNDLAND..DIST.....

Date of Death OCTOBER 11 1971  
Date du Décès .....

Place NOT STATED.  
Endroit .....

Distribution: WSR-DASG

VI - ASS  
DO - BD  
HO - BC

Pour le chef,  
  
for Chief, Central Registry Division.  
Dépôt central des dossiers.