



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5173 Name Garland Goodhue Corps Inf.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---|
| 1. What is your name? | 1. <u>Garland Goodhue</u> |
| 2. What is your full Address? | 2. <u>South Lonsdale</u>
<u>Long Point</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>22</u> Years Months |
| 5. What is your Trade or Calling? | 5. <u>Tradesman</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? | 10. (Name)
(Corps) |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>yes</u> |

I, Garland Goodhue 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.

Garland Goodhue SIGNATURE OF RECRUIT.
W. Langdon SIGNATURE OF WITNESS.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Garland Goodhue 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 13th day of May 1918.

Signature of Attesting Officer W. Dicks Lieut

† CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the 1st Bn If enlisted by special authority, such will be attached to the original attestation.

Date May 13th 1918 } Approving Officer.
Place St. John's }

† 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

5173

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

Name Sanland Brodyer
 Apparent age 22 years — months. Height 5 feet 1 1/2 inches
 Chest Measurement { Girth when fully expanded 39 inches
 { Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Abraham Brodyer
Lumaden, Logansport 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 L'epot	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>18-5-18</u>									
Joined at <u>St. Marks</u> on <u>May 18-1918</u>									
<u>Discharged August 1-1919</u>									
<u>Embarked St. Marks S. S. Columbia to Halifax N.S. 22-7-18</u>									
<u>To be employed land for demobilization St. Marks 24-6-19</u>									
<u>Arrived Newfoundland 1-7-1919</u>									
<u>Demobilization St. Marks 6-8-1919</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>6-8-1919</u> [date of discharge] <u>1</u> years <u>81</u> days									
Pensions " " " " " " " " " " " "									

C.R.

5773

Duplicate

R

August 14, 1919

5173, Ex Pte. Garland Goodyear,
South Lumsden,
F o g o.

Dear Sir:

Will you kindly sign and re-
turn to us immediately the enclosed form so
as we can deduct \$35.00 from your War Service
Gratuity, and make that amount payable to
A. LeDrew, c/o Marshall Bros.

Yours sincerely,

W. S. Reed
W. S. Reed

Duplicate

South Lumsden,

August 1919

The Paymaster,
Royal Mfld. Regiment,
St. John's.

Dear Sir:

Please deduct \$35.00
(Thirty-Five Dollars) from my War Service Gratuity
and pay the same to A. LeDrew, c/o Marshall Bros.

Signed

Witness

C.R. 5173

Extract from Daily Orders Part 11 Unit The Royal Field. Regt.
St. John's, Aug. 15th, 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from 8-6-19.

5173 Pte. G. Goodyear.

C.R. 5173

Extract from Daily Orders Part 11 Unit The Royal Wfld. Regt.
St. John's, July 14th, 1919.

The discharge of the Undernoted on demobilization has been
APPROVED by C.C. Discharge Depot with effect from 23-7-19

5173 Pte. G. Goodyear.

C.R. 5173

Extract from Daily Orders Received Unit The Royal Field.

Regt. St. John's, City 3rd, 1919.

5173 Pte. G. Goodyear.

Reported at Headquarters 1-7-19 at "Cassandra" which
sailed Glasgow June 24th, 1919.

C.R. 5173

Extract from Casualties received from P.&R. Office London,
Aug. 20th, 1918.

The undermentioned man was admitted to Central Hospital, Chatam
(from Major Carty's Draft from Hfld.) and Discharged from Hospital
on 19-8-18, reported this office same date and was sent direct
to Depot, Winchester.

5173 Pte. Goodyear, G.

Authority:-

Officer i/c. Records Hfld. Regt.

C.R. 5173

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

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

#5173 Pte. Garland Goodyear.

Extract from Daily Orders part 11, from Unit The Royal
Hfld. Regt. St. John's, dated May 20th, 1916.

#5173 Pte. Garland Goodyear.

Attested for General Service with the Royal Hfld. Regt.
from 18.5.18.

H. Hooper

C.R.

5173

1890

FORM K

No 4080 A



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Garland Goodyear, Regl. No. 5173 hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and Fifty Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person and Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person and Persons concerned, viz :

Allotment begins July 1/18

Table with 5 columns: Identity Certificate No., Whether Wife, Child, other Relative or Friend, NAME (in full), ADDRESS, AMOUNT (each person). Row 1: 4264, Sister, Miss Julia Goodyear, Southeyton Mayo Dist, 50. Total Allotment, \$ 50.

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.) [Signature] Officer Commanding Company

(Sig.) [Signature] (Rank) Private

St John's June 12 1918

No. 6597/1016

399 B.



From: NEWFOUNDLAND CONTINGENT

Chief Paymaster & O. i/c Records,
Newfoundland Contingent,
Pay & Record Office,
53, Victoria Street,
London, S.W. 1.

To: Officer Commanding,
2nd Bn t. Ryl. Nfld. Regiment
Winchester

2nd pay 1919

5173 Pte G. Goodyear

May 5th 1919

With reference to the following telegram from the Minister of Militia / / (160)

Receipt hereunder.
Leyman
for **LIEUT. COLONEL,**
COMMANDING 2ND BATTAL ROYAL NEWFOUNDLAND REGT.

"Pay to-5173 G. Goodyear
£2-9-0

Received the sum of Two pounds

Cheque £2-9-0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

nine Shillings in respect of telegraphic remittance from the Minister of militia.

R. A. ...
Chief Paymaster & O. i/c Records.

G. Goodyear
No. 5173 Rank Private

Witness W. Barnes

No. 4255/636

N.F.P./79.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
2/Bn. Royal Newfoundland Regt.
Hazeley Down Camp,
Winchester.

17/3/1919
17th March 1919

March 20th 1919

5173 Pte. Goodyear G.

With reference to the following telegram from the Minister of Militia / / (79)

"Pay to- 5173 Goodyear,
£3. 6. 0

Cheque £ 3. 6. 0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

A.D. Guinness Maj.
Chief Paymaster & O. i/c Records.

Receipt hereunder.

Examd
LIEUT. COLONEL.
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commandg. ~~2nd~~ Batt n.

Received the sum of Three pounds
Six Shillings in respect of telegraphic remittance from the Minister of Militia.

J. Goodyear
No. 5173 Rank Private
Witness W. Barnes

60

No. 100/24/P&A

N.F.P./79.

NEWFOUNDLAND CONTINGENT

From:

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

To: Officer Commanding,
2nd. Bn. Royal Newfoundland Regt.,
Havelock Town Camp,
Winchester.

RECORD OFFICE
JAN 1919
LONDON & W

100/24
066529

2nd. January, 1919

6-1-1919

Subject: 5173. Pte. G. Goodyear.

With reference to the following telegram (19&20) from the Hon. Minister of Militia, received

Pay to 5173 Goodyear - £4:2:0

Draft £ 4:2:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

H. Maunders
Chief Paymaster & O. i/c Records.

Receipt hereunder.

J. Seymour
LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Royal Newfoundland Regiment

Received the sum of Four Pounds
Two Shillings on account of
cable remittance from Newfoundland.

G. Goodyear
No. 5173 Rank Pte

H. Maunders

Goodyear, G.

5173

Ray Sept.

August 6th 1919.

#5k73, Pte.G.Goodyear,
South Mumsden, Fogo.

Dear Sir:

Enclosed please find Discharge Certificate
3419.

Yours truly,

Capt.^{or} O.I/c Records.

RS/.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5173 Rank. Pte Name Goodyear G.
 Intended place of residence South Lumsden Sask

2. Occupation Fisherman
 Classification of soldier E Medical Category A 1

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 JUL 9 1919
 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, ST. JOHN'S
 Date JUL 9 - 1919
 Signature of soldier G. Goodyear Pte
 Signature of witness J. A. Newman Capt

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, ST. JOHN'S
 Date JUL 9 - 1919
 Signature of soldier G. Goodyear
 Signature of witness James Newman

STATEMENT OF SERVICE

7. Enlisted for service... 18-5-18 No. of days on Military
 Discharged from service... 23-7-19 Plus 14 days Service... 446

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge Records, The Royal Newfoundland Regiment, twenty-eight days from date.
 Place, ST. JOHN'S
 Date JUL 23 1919
 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
 Date August 6/1919
 Officer in Charge Records
 The Royal Newfoundland Regiment

CR 2 B 207913419

14
20
31
6
81

The Royal Newfoundland Regiment

Class for Demobilization: *76*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

8.7.19

Regimental No. ... *5173.*

Name

Goodyear Garland

Address

South Sumner

Present Medical Category

A1

Recommended for:— { (a) Immediate discharge

(b) ~~Standing Medical Board~~

Members of Board {

R.H. Lant Major
O.C. Discharge Depot.

H. Robinson
Senior Medical Officer

Geo. Burden
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 579 Rank Plt Name Goodyear G
 Date of Enlistment 10.5.18 Address Southey Street District Logan
 Occupation Fisherman Classification for Discharge B Medical Category A1
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P 36	B 268	B 121	N.F. Med	D.F. 1
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 8.1.19

O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Mark Goodyear
Neil Freeman

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$600

(b) Clothing Supplied

Date 9.7.19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. B.2277 to his home at Southwicks and Release Certificate No. 3346 issued.

Date 9-7-19

J.A. Snowball
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 6-8-19

Date 9-7-19

J.M. H.
Depot Paymaster.

Discharge approved for 23-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	/	N.F. Med	D.F. 1	
B 178	W 3494	B 122	/	Board 1st	" 2	/
B 178a	/ D 400A	/ B 1915	/	do 2nd	" 3	<i>2 Form B</i>
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 9-7-19

J.A. Snowball
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUL 23 1919

J.R. Coople Capt
for 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.

Goodyear. G

Signature of Man.

Reg. No. 5173

J. A. Snowlett
Signature of the Vocational Officer or his Representative.

Place

M. Johns

Date

9-7-19

191

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

MEDICAL HISTORY

Surname Madaya

Christian Name Palana

Table GENERAL TABLE.

Birthplace:—Parish South Rumsden County Nepean

SPECIAL RESERVE

REGULAR ARMY

Examined	on <u>18</u> day of <u>Nov</u> 191 <u>8</u>	at <u>St Johns</u>	on	day of	191
Declared Age	<u>27</u> years			<u>27</u> years	<u>11</u> days
Trade or Occupation	<u>Fisherman</u>				
Height	<u>5</u> feet	<u>11 1/2</u> inches		feet	inches
Weight		<u>170</u> lbs.			lbs.
Chest Measure-ment	Girth when fully expanded	<u>39</u> inches			inches
	Range of Expansion	<u>4</u> inches			inches

Vaccination Marks	Right	Left	Right	Left
		<u>173 ago</u>		<u>173 ago</u>

Vision	R.E.—V= <u>6/6</u>	R.E.—V=
	L.E.—V= <u>6/6</u>	L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by (Signature) [Signature] (Rank) Major Medical Officer.

Enlisted at St Johns on 18 day of May 1918

Joined on Enlistment... 1st Corps 173

Became non-effective by (Signature) (Rank)



Descriptive Return of a Soldier Discharged on Account of Disability

INSTRUCTIONS—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the Office Records together with the remainder of the man's documents.

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

Name in full *Garland. Goadyear.*

Regiment from which discharged *Royal Newfoundland*

Regimental number *5173*

Intended address *South Lumsden. Logo.*

Height on discharge *6* Feet

Color of hair on discharge *Black.*

Complexion *Fair.*

Color of eyes *Blue.*

Descriptive Marks *—*

Figure on discharge *— Medium.*

Christian name of Father *Abraham.*

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 *Wilbur Brook. N. S. 22 1897*

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) *Garland. Goadyear* (Rank) *Plc.*
ST. JOHN'S. *hak*

Station _____ Date *5-7-19*

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 _____

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 332 (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 F., 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 Rifles*.....
2. Regt. No. *5175* 3. Rank. *plc*.....
4. Name *Goodyear* *Farlow*.....
(Surname) (Christian Names)
5. Age last birthday. *22*.....
6. Posted for duty on..... at.....
in category (or grade).....
7. Former Trade or Occupation } *None*
- 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regt. Nos.
- (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."
11. Date of origin of disability. *nil*
12. Place of origin of disability. *nil*
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. *nil*

14. 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 man's part. } | | |

14 (a). If not due to any of these causes, to what specific condition do you attribute it? } *The complainant's disability*

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.)

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.

Repatriation

W. E. Proemier, Capt R.A.M.C.

Station *Hazley Barr.*

Medical Officer in charge of case.

Date *7/4/19.*

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

August 15, 1919

Mr. Garland Goodyear,
South Lumsden,
Fogo Dist.

Dear Sir :-

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

Yours truly,

Captain & Paymaster.

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 26th. 1919.

A complete reply must be given to every question in this Declaration There must be no blanks and no dashes, if any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

- Christian name. *Sarland* 2. Surname. *Goodyear*
3. Rank. *Pvt* 4. Regt. No. *5173*
5. Address in full to which future payments of gratuity are to be forwarded. *South Lumsden, Tops Boston*
6. Date of enlistment in the Regiment. *Nov 1918*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. *no*
8. Relationship of such dependents. *—*
9. Address in full of such dependents. *—*
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier. *—*
11. Were you on active service only in Mfld. If so, give dates and particulars of such service. *Overseas*
12. Give total length of time which you served on active service, whether in Mfld. or Overseas. *Fourteen months*
13

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

no

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

no

15. Have you been issued with a War Service Badge? *no*

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

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *no*

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *no*

(b) If so, was such reversion in consequence of Misconduct or inefficiency? *no*

19. Are you now serving in the Regt.? *no* If not give:- (a) Date of discharge *July 23/19.* (b) Reason for discharge.

Demobilization

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.

England.

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.

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: ^{his} ~~Gurland~~ ^{Goodyear} ~~x~~ ^{(return) Taylor}
 Place of Residence: ^{more} South ~~Pumden~~ ^{of. brother}
 Declared before me at: ^{Dr. Jones}
 This 10 day of ^{June} 1919...

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

John McCarthy

POST DISCHARGE PAY.				Net amount due
Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	
.....
.....
.....
Certified correct.		

NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 3 Sent by Jm Rec'd by _____ Check 13p No. _____From St. John's Carmanville IsTo Mr HickmanDept. Militia

I have recd. no
 Army allowance yet
 wife of Ex pte Goodyear
1213.

Mrs G. Goodyear

5173

2000

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.)**St. John's, Newfoundland.**

Signature of Sender _____ Address _____

Line Number	Rcd	By	Sent	By	Check
December 17, 1919					
Dated _____					
To Mrs. G. Goodyear,					
Carmanville.					

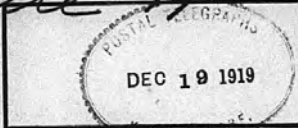
Telegram December Seventeenth received cannot trace allowance by Number.

Major
Paymaster.

1 2 3 4 5 6 7 8 9 10

NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 61Sent by forReceived by HarmanvilleChecked SpdNo. 19Price in centsTo Mr. J. Hawley
Major
Paymaster

Telegram received allowance
number is 3514 awaits
answer

Mrs L. G. Goodyear

Let's hope
18/12/19

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Number of Sheet one

Regiment of

Royal Newfoundland

Signature of O. C. Company

Aspirant Lieut

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay		
No.	<i>5173 Goodyear, Gairland</i>	Age on	<i>22</i> years	<i>months</i>		<i>Labourer</i>	
Joined		Date	Place and Date of Enlistment	Religion			
Joined		Date	}	<i>St John's</i>			<i>Meth.</i>
Joined		Date	} with Colours	<i>18.5.18</i>			Place of Birth
Joined		Date	} with Reserve	<i>36 1/2</i> years.	<i>St John's South, 1890</i>		

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>Demobilized 6/19</i>					

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5173 Rank Pvt Name Goodman G
 Date of Enlistment 18.5.18 Address South Head District Logo
 Occupation Fisherman Classification for Discharge B Medical Category 1
 Recommendation S.M.B. _____ Disability Rating _____
 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 8.1.19

H. Mins H
O. C. Discharge Depot

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am.....in a position to resume civilian occupation G Goodman
mark

H. Mins H
Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$6.00

(b) Clothing Supplied _____

Date 9-7-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. B2277 to his home at Southwicks and Release Certificate No. 3846 issued.

Date 7-7-19 J.A. Snowball
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 7-8-19

Date 7-7-19 J.M. [unclear]
Depot Paymaster.

Discharge approved for 23-7-19

Forwarded with following documents to O.C Discharge Depot.

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

J. Farn B

Date 9-7-19 J.A. Snowball
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents. **Eligible for War Service Gratuity**

Date JUL 23 1919 N.R. Cooper Capt
for O. C. Discharge Depot.

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

Date July 23 1919 [Signature]

Reg. No. *5173* Rank. *Pfc* Name. *Goodyear G*
Attested ... Address. *Lumsden*
Allotment ... Allottee ...
Date of Allotment ... Returned from Overseas. *JUL 1 1919*
Returned on S S. *Cassandra* Cause. *Discharge*

9 7 19
23 7 19
PASSED TO DEMOBILIZATION OFFICER
DISCHARGE APPROVED ON DEMOBILISATION

CD 5773

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (vi.), 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 Artillery*
- 2. Regtl. No. *5773*
- 3. Rank. *Private*
- 4. Name *Goodysar* (Surname) *Garland* (Christian Names)
- 5. Age last birthday. *22*
- 6. Posted for duty on..... at..... in category (or grade).....
- 7. Former Trade or Occupation } *Fisherman*
- 7a. If the soldier claims previous service in Army, he should state—
 - (a) Former Regts. or Corps; with Regtl. Nos.
 - (b) Date of Discharge;
 - (c) Cause of Discharge.
 - (d) Particulars of Pension or Gratuity (if any)
- 8. If the disability is an injury was it caused
 - (a) in action
 - (b) on field service
 - (c) on duty
 - (d) off duty?
- 9. If a Court of Inquiry was held on an injury state :—
 - (a) When
 - (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."
- 11. Date of origin of disability. *nil*
- 12. Place of origin of disability. *nil*
- 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. *nil*

14. 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 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.)

He complains of no disability

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?

Particulars

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.

W.E. Procunier. Capt Ranc
 Medical Officer in charge of case.

Station .. *Haystack*
 Date .. *2-4-19*

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