



# FIRST NEWFOUNDLAND REGIMENT.

## ATTESTATION OF

No. 1778 Name Abraham Gauldin Corps \_\_\_\_\_

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

- |  |                                     |
|--|-------------------------------------|
| 1. What is your name? .....  | 1. <u>Abraham Gauldin</u>           |
| 2. What is your full Address? .....  | 2. <u>George St (Gand)</u>          |
| 3. Are you a British Subject? .....  | 3. <u>yes</u>                       |
| 4. What is your Age? .....   | 4. <u>17 1/2</u> Years..... Months. |
| 5. What is your Trade or Calling? .....  | 5. <u>lumberman</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, Abraham Gauldin 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.

Abraham X Gauldin SIGNATURE OF RECRUIT.

Montgomery Signature of Witness.

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

I, Abraham X Gauldin 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 18 day of August 1915 Montgomery Capt  
Signature of the Attesting Officer.

† Certificate of Approving Officer.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the : \_\_\_\_\_

If enlisted by special authority, such will be attached to the original attestation.

Date \_\_\_\_\_ 191 \_\_\_\_\_  
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, the 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 Abraham Goulding.  
 Apparent age 25 years 3 months. Height 5 feet 5 inches.  
 Chest measurement { Girth when fully expanded 36 inches.  
 Range of expansion 4 inches.  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Mrs Joseph (Ellen) Goulding  
Gauleo | Relationship mother  
 Particulars as to Marriage.

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

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

### Particulars as to Children.

Christian Names.	Date and Place of Birth.

## STATEMENT OF THE SERVICES.

Corps in which served	Rgt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank.	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					years	days	years	days	
Service towards limited engagement reckons from _____									
Joined at _____ on _____									
Total Service forfeited as above ... ..									
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days									
" " " Pension " _____ ( " ) _____ " _____ "									



# FIRST NEWFOUNDLAND REGIMENT.

## ATTESTATION OF

No. 1778

Name Abraham Gauldin Corps \_\_\_\_\_

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

- |  |                                     |
|--|-------------------------------------|
| 1. What is your name? .....  | 1. <u>Abraham Gauldin</u>           |
| 2. What is your full Address? .....  | 2. <u>Gambos (Gambos) Nfld</u>      |
| 3. Are you a British Subject? .....  | 3. <u>yes</u>                       |
| 4. What is your Age? .....   | 4. <u>17</u> Years <u>2</u> Months. |
| 5. What is your Trade or Calling? .....  | 5. <u>lumberman</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, Abraham Gauldin 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.

Abraham Gauldin SIGNATURE OF RECRUIT.  
B. August 15 Amontgoune Signature of Witness.

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

I, Abraham Gauldin 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 \_\_\_\_\_ day of August 1915 Amontgoune Signature of the Attesting Officer.

### † Certificate of Approving Officer.

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

Date \_\_\_\_\_ 191\_\_\_\_\_ }  
 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, the 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) \_\_\_\_\_



REGIMENTAL NUMBER 1278

COMPANY 9

THE  
1st NEWFOUNDLAND REGIMENT.

I hereby enlist for service ~~XXXXXX~~ at home or abroad in the King's Forces under the following conditions.

For the duration of the present war, or until my discharge.

Subject to the Army Act, the King's Regulations, and to such ordinances as may apply or may be made to apply to the British Regular Army.

Subject to the Newfoundland Volunteer Act,  
5 George V. Chapter IV.

Signed <sup>Lieut. Henry Com</sup> Abraham X Goulding  
Mark

Witness Macdonald

Dated at Ayr

19 June 1916

C.R. 1778

DECEMBER 8th 1919.

The Secretary,

Board of Pension Commissioners.

Sir:

I beg to forward herewith for your necessary action letter from #1778 Pte. A. Goulding. Will you please communicate direct with him.

I have the honour to be,  
Sir,  
Your obedient servant,

Lieut. Colonel,  
Chief Staff Officer.

C.R. 1778

DECEMBER 8th 1919.

#1778 Pte. A. Goulding,  
c/o Mr. Enos Lane,  
Millertown.

Dear Sir:

Your letter of November 30th has been duly received,  
and has been forwarded to the Board of Pension Commissioners  
who have been requested to communicate with you direct.

Yours faithfully,

Lieut. Colonel,  
Chief Staff Officer.

THE BOARD OF  
PENSION COMMISSIONERS  
FOR NEWFOUNDLAND

Hon. Sir P. T. McGrath, K.B.E.,  
(President Legislative Council),  
Chairman.  
Hon. J. A. Clift, K.C., C.B.E.,  
Major W. H. Parsons, M.C.,  
R.A.M.C.



In reply refer to  
No. ....

CI 1778

St. John's,  
Dec. 9th., 1919.

Lt. Col. W. F. Rendell,  
Chief Staff Officer,  
City.

Sir:-

I have the honour to acknowledge receipt  
of your communication of December 8th., enclos-  
ing letter from #1778 Ex-Pte. A. Golding.

This communication will be placed before  
the Board of Pension Commissioners at an early  
date, and we will communication with Golding  
direct.

I have the honour to be,  
Sir,  
Your Obedient Servant

Asst. Secy.

CCO/GEC.



C.R. 1778

**Extract from Nominal Roll of Mfld. Regt. Draft No. 7.**

**from 2nd Bn. Depot, to 1st Bn. B.E.F. Embarked Southampton**

**25-6-16**

25-6-16

1778 Pte. A. Goulding.

C.R. 1778

Extract from Daily Orders Part 11 Unit The Royal Wfld.  
Regt. St. John's, dated August 1<sup>st</sup>, 1918.

1778 Pte. A. Goulding.

Having been found medically unfit is discharged from  
23-7-18.

C.R. 1778

Extract from list of men of the Royal Newfoundland Regiment  
discharged on various dates.

1778 Pte. A. Goulding,

Discharged 23- 7 - 18      Medically unfit

C.R. 1778

Extract from Telegram received from London, dated  
June 25, 1918.

The following man embarked June 22 per Government  
transport to Halifax being repatriated:

#1778 Pte. Abraham Goulding.

C.R. 1778

Extract from Telegram received from London, dated  
June 18, 1918.

In answer to your telegram June 15th 1778 Goulding  
on furlough, being repatriated next opportunity.

C. 1778

Extract from Code Telegram despatched to Synoptical,  
London, dated June 18th, 1918.

In answer your telegram June 15th:-

#1778 Pte. Goulding on furlough  
being repatriated next opportunity.

C.R 1778

Extract from Casualties received from Pay and Record Office, London  
dated, 17th June 1918.

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~~1778~~ Pte. A. Golding

1778

is granted extension of furlough from 15/6/18 to 10.a.m. 20/6/18  
with orders to report at the Pay and Record Office, on the later date,  
To be repatriated.



C.R. 1778

## DEPARTMENT OF MILITIA

ADDRESS REPLY TO  
DEPARTM'T OF MILITIA  
AND QUOTE NO.

-----

ST. JOHN'S, NEWFOUNDLAND,

August 15th., 1918  
-----

From:- D. M. S.

To:- O. C. Depot.

1778. Pte. Goulding, A.

The marginally noted man entered the Naval &  
Military Convalescent Hospital August 12th., 1918.

CLUNY MACPHERSON,  
Major, D. M. S.  
Per *A.M.B.*

Copy to Board of Pension Commissioners for Nfld.



C.R. 1778

Extract of Telegram to Synoptical London dated June 15th. 1918.

"please inform condition of:

1778 Goulding."

C.R. 1778

June 19th 1918.

Mrs. Ellen Goulding,  
Gambo.

Dear Madam;

In answer to our inquiries as to the condition of your son, #1778 Pte. A. Goulding, we are informed by the Record Office, London, that he is at present on furlough, and will be repatriated at the earliest opportunity.

Yours faithfully,

C.C.B.

Captain,

for Chief Staff Officer.

C.R. 1778

June 14, 1918.

Mrs. E. Goulding,  
Gambo.

Dear Madam:-

Your wire of June 14th inst.,  
received, and I beg to inform you that we have  
wired the Pay & Record Office, London, for  
particulars. On receipt of same you will be  
immediately notified.

Yours faithfully,



Lieut.

for Lieut. Col. C.S.O.

# NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 78 Sent by J Rec'd by P W No. 1778 Check 1778

Place from Largo 14  
To 1778 ple @ Goulding  
Wandsworth. Hospital  
to men militia



Very anxious to hear of  
how you are doing

of health  
Mother Mr Egan  
of Camborne

Were received and I try to inform you  
but we have no record of your  
for particulars. In receipt of some  
you will be immediately notified

Yours faithfully  
Agent for  
Post Office  
C.S.O.

C.R. 1778

Extract from Daily Orders part 11, from Unit The Royal  
Wfla. Regt. St. John's, dated July 9, 1918

The following man returned from overseas and reported  
at depot July 6, 1918

#1778 Pte. A. Goulding.

1778

Extract of Casualty received from Pay & Record Office, London,  
dated June 5th 1918.

For Repatriation

1778 Pte. A. Golding

at 3rd London General Hospital 5-6-18, are granted furlough  
to 10 a.m. 13-6-18, with orders to report at the P. & R.O. on  
the latter date for disposal.

**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 \_\_\_\_\_

Line Number	Rcd	By	Sent	by	Check

Dated Jan 1st, 1918

To Mrs. Ellen Goulding,  
Gambo.

Regret to inform you that Record Office  
London, officially reports  
No 1778, Pte. A. Goulding previously reported  
is now at Wandsworth

Upon receipt of further information I shall immediately wire you.

J. R. BENNETT,

~~Colonial Secretary~~

Minister of Militia

**FOR TYPEWRITER**

C.R. 1778

Extract of Casualties received from Pay & Record  
Office, London, dated December 31, 1917.

#1778 Pte. A. Golding. ✓

Gunshot w und Shoulder & Legs.

Admitted 3rd London General Hospital, 29/12/17.



C.R. 1778

Extract from Casualties received from Pay & Record  
office, London, Dec. 31st 1917.

Admitted to Hospital, ~~3rd~~ London General Hospital, Wandsworth,  
~~29~~ 12-18.

1778 Pte. A. Golding

G.S.W. Shoulder &  $\frac{1}{4}$  leg.

C. 1778

Extract from War Office List No. C. 1400

dated 4/12/17.

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#1778 Pte. A. Golding.

WC UNDED 20/11/18

BC.

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C.R.

1778

Extract of Casualty received from Pay & Record Office,  
London, dated December 4, 1917.

#1778 Pte. A. Golding. ✓

Wounded 20/11/17.

# 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 Frederic M. Squires Address \_\_\_\_\_

Line Number	Rcd	By	Sent	by	Check

Dated November 29, 1917.

To Mrs. Ellen Goulding,

Gambo.

Regret to inform you that Record Office, London, officially reports No. 1778, Private Abraham Goulding, was at Twelfth General Hospital, <sup>Rouen</sup> November twentythird, suffering from severe gunshot wounds in the right shoulder and legs.

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

R. A. SQUIRES,  
Colonial Secretary.

FOR TYPEWRITER

C.R. 1778

1778 PTE. ABRAHAM GOULDING.

EXTRACT OF CASUALTY .IST RECEIVED FROM THE PAY AND RECORD  
OFFICE LONDON DATED NOVEMBER 29th, 1917.

"AT 12TH GENERAL HOSPITAL ROUEN NOVEMBER 23RD G.S.W. SEVERE  
RIGHT SHOULDER AND LEGS." ✓

C.R. 1778

Extract from Nominal Roll Entrained St. John's for Overseas,  
27/10/15.

1778 Pte. Goulding A.

D.1778.

ST JOHN'S, NEWFOUNDLAND.

August 13th, 1918.

To O.C.,  
Royal Newfoundland Regiment,  
Headquarters.

SIR:

The undermentioned men have been discharged  
on the dates given.

Kindly note and post in Daily Orders Part II.

I have etc.

(sgnd) J.M.HOWLEY,  
Capt. etc.

2188	Pte. Penney, J.	23-7-18	Med. Unfit
1653	" Brake, E.	Do.	Do.
1778	" Goulding, A.	Do.	Do.
694	Cpl. Warrington, W.	Do.	Do.
2960	Pte. Moulton, J.A.	9-8-18	Do.
5044	" Parsons, H.	Do.	Do.
1004	" Ivimey, Thos.	1-8-18	Do.

August 1st, 1918

From Officer Commanding,  
Depot

To Director Medical Services,  
Militia Department

1778 Pte. A. Goulding

Above noted soldier was recommended for admission to Naval & Military Convalescent Hospital by Standing Medical Board held on 9-7-18. He has since been on Home Leave and has now reported back to Depot for orders. He is billeted with Mrs. Crocker, Adelaide Street

Will you please arrange that he be notified at this address when there is a vacancy for him in Hospital.



St John's, Nfld.,

July 10th, 1918

From D. M. S.

To O. C. Depot

1653 Pte. Edmund Brake

1778 Pte. A. Goulding

The marginally noted men have been recommended for admission to the Naval & Military Convalescent Hospital by the Standing Medical Board.

There is no medical reason why these men should not be given the usual home furlough.

Pte. Brake should return to town after short furlough, but Pte. Goulding may remain at his home until he receives a wire telling him that there is a vacancy in the Naval & Military Con. Hospital.

(sgnd) CLUNY MacPHERSON

Major, D.M.S.

2

Reg. No. 1776 Rank Pte Name Goulding, A.

Attested ..... Address Bonavista Bay

Allotment ..... Allottee .....

Date of Allotment ..... Returned from Overseas 1-7-18.

Embarked for Overseas ..... Cause .....

9-7-18 Rec Adm, To Naval + military Con Noo

G.A. 10-7-18 to 22-7-18.

13-7-18 Letter from D. M. S. Advises Dis Pen 14/18

DISCHARGED - MEDICALLY U..... 23-8-18. Noo 14/18

C.R.

1778

**Abram. Goulding** was attested for General service  
with the NEWFOUNDLAND REGIMENT on ... **August. 18th. 1915**  
Regimental No **1778** was allotted to Pte. **A. Goulding**

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th. 1919.

A. Gaudin

C.R.

1778

P.R.O.



LAST PAY CERTIFICATE

N.F.P./94

To be rendered for all ranks on discharge, transfer to other Units, or on return to Newfoundland in accordance with C.L./19, 26/5/17.

Regtl No. 1778 Rank pte Name A. Goulding Unit Royal Nfld. Regt. who was expatriated  
to Newfoundland on 22/6/18 Authority A. F. H. 179 Cause Class A

DR.

STATEMENT OF ACCOUNT

PARTICULARS	£			PARTICULARS			CR.		
	£	s	d	£	s	d	£	s	d
Balance Dr. from				Balance Cr. from					
Allotment 183 days @ 60	109	30		21/12/17			6	13	7
Cash Payments: P. & R. O.				Pay 183 days @ \$ 1.00	183	00			
Hospital Advances				Field Allowance 183 days @ \$ .10	18	30			
Cash 21/6/18				Other Allowances days @ \$	201	30	41	7	3
Other Debits:				Other Credits:					
				Ration Allowance					
				5/6/18-22/6/18, 18 days @ 2/1			1	17	6
Total Debits				Total Credits			49	18	4
Balance due by Paymaster				Balance due to Paymaster			1	14	11
							51	13	3

PERIOD: From 22/12/17 To 22/6/18

CHECKED.  
*[Signature]*  
21/6/18

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of

(Place) \_\_\_\_\_ (Date) 191

Made up/Checked in accordance with information received in the Pay & Record Office \_\_\_\_\_ O.C. " " Company. and is therefore subject to amendment if and as may be found necessary. London, to 21/6/18

Pay & Record Office, London,  
21/6/18 191

Chief Paymaster & Officer i/c Records.



No. 1778 Rank Pte Name Golding A.

Pay	F.A.	Wkg	Total	N.P. 73
100	10		110	
Less Allotment			60	
Net Rate			50	

DEBITS	Date	£	s	d	CREDITS	Period		Days	Rate	£	s	d
						From	To					
Balance					Balance		21 <sup>12</sup> / <sub>17</sub>					6 13 7
Acquittance Rolls					Pay @ Net Rate	22 <sup>12</sup> / <sub>17</sub>	5 <sup>6</sup> / <sub>18</sub>	166	50	83 00		17 1 1
Hospital Advances		1 0 0			Ration allow							18 9
A.B. 64.					9 days @ 2/11	6 <sup>6</sup> / <sub>18</sub>	15 <sup>6</sup> / <sub>18</sub>	10	50	5 00		10 6
P.&.R.O. Payments		6 0 0			<del>17-13-5</del>	16 <sup>6</sup> / <sub>18</sub>	17 <sup>6</sup> / <sub>18</sub>	2	50	1 00		4 1
<i>4-0-0</i>					<del>1-3-11</del>							12 6
<i>24-10-0</i>					Ration allow							
<i>25-10-0</i>					from 15 <sup>6</sup> / <sub>18</sub> to 20 <sup>6</sup> / <sub>18</sub>							
<i>1-6-0</i>					6 days @ 2/11							
<i>26-10-0</i>					<del>1-6</del>	18 <sup>6</sup> / <sub>18</sub>	19 <sup>6</sup> / <sub>18</sub>	2	50	1 00		4 1
<i>5/6/15</i>					<del>1-7</del>							
<i>27-14-0</i>												
Cheque 8164	5 <sup>6</sup> / <sub>18</sub>	17	10	0								
Receipt No 7745	15 <sup>6</sup> / <sub>18</sub>	1	0	0								
Receipt No 7753	17 <sup>6</sup> / <sub>18</sub>	1	0	0								
Cheque 7793	19 <sup>6</sup> / <sub>18</sub>		4	0								
Advance by promising	19 <sup>6</sup> / <sub>18</sub>	1	0	0								

24-13-5 ✓  
25-13-11 ✓  
26-10-6  
4-1  
26-14-7



FOR USE IN THE CASE OF ALL SOLDIERS SENT TO THEIR HOMES UNDER  
A.C.I. 1011 OF 1916, PARA. 2(ix.)



No. 1448, Rank Private, Name A. Newfoundland (Regiment) Golding

is discharged from \* 3rd London General Hsp. Wandsworth  
with orders to proceed to his home:  
*The address below.*

(Address) 58. Victoria Street  
S.W.

and there to await further instructions as to his discharge from the Service.

W. M. S. [Signature]  
Officer Colonel [Signature]  
Registrar, R.A.M.C.I.

Place Wandsworth

Date 5/6/18 3rd London General Hospital,  
WANDSWORTH, S. W. }

\*Here enter name of Hospital or Unit from which the Soldier is discharged.

*Delivered 10 am 13/6/18*

To: 6 Rue Paymaster & Officer I/c Records  
Newfoundland Contingent  
58 Victoria Street  
London S.W.

Please remit to me the sum of (51) one pound  
on account of any balance that may be due  
to me

No 1748

Pte W. Goding

ok f.c.  
Approved 16/2/18

J. Matthews  
Capt

3<sup>rd</sup> London General Hospital  
7 Feb 16<sup>th</sup>/18.

5727

<b>RED LONDON GENERAL HOSPITAL</b>
No. _____
16 FEB 1918
WANDSWORTH, S.W. 18.

C. K. R. No 6561

£ 1.00  
To Paymaster



of R. Newfoundland Regt  
68 Victoria St  
CS

Please remit to the following  
to 1778 the sum of £4 (four pounds)  
on account of any balance  
that may be due to me  
as approved

13<sup>th</sup> April.

General  
Capt [Signature]



[Signature]

C. R.  
13/4/18

*O.K.*  
*1.0.0 h/c.*  
*Repts to ~~bolger~~*

*22 4/18*

To Paymaster

1st R. Newfoundland Regt  
5-8 Victoria St.

Please remit - to pts Golding  
No 1778, the sum of 1 pound.  
on account of my balance  
it may be due to me

NEWFOUNDLAND CONTINGENT  
58 VICTORIA ST.,  
LONDON, S.W.  
REGIMENTAL RECORD OFFICE

*22/4/18*

LONDON GENERAL HOSPITAL B.M.N.I.  
REGISTRAR  
22 APR 1918  
No.

*approved*  
*S. Hall*  
*capt*

FILE	BRANCH
FILE	INITIALS

Receipt No 6119

To Paymaster

of the Newfoundland Regt.

58 Victoria

16-3-18

15<sup>th</sup> March.



Please remit to No 1778 St. John's  
 the sum of £1 (One pound) on account  
 of any balance that may be  
 due to me.

PAYEE'S	BRANCH
	INITIALS

*[Handwritten signature]*

*One pound  
 one shilling  
 1/11*

LONDON GENERAL HOSPITAL	
No.	_____
15 MAR 1918	
WANDSWORTH, S.W. 18.	



Sorry. Yours name.

It was on this slip

S. Pook.



*Paymaster*

*1st Royal Infld Regt  
58 Victoria Street*

*Please remit the sum of £1  
one pound to 1778 C Golding  
on any account that may be  
due to him*

*27/5/18. 1778 C Golding*

FILE	BRANCH
	INITIALS

*Approved  
E. H. [unclear]  
Capt. [unclear]*

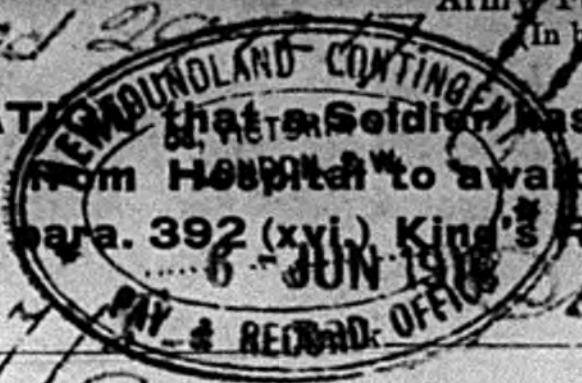


*O.K. £1.0.0 M/G  
27/5/18 Receipt No. 2413*



*admitted 20/1/18*

**NOTIFICATION** that a Soldier has been sent Home from Hospital to await Discharge under para. 392 (xvi) King's Regulations.



Soldier's Regt. No. } *17*

Name *Golding A.*  
(Surname first)

Corps or Regiment (also Unit if known) } *1st Bn*

To Officer i/c of Records *55 Victoria St*

Regimental Paymaster *do.*

The above-named man, who appeared before a Medical Board, and whose discharge as "no longer physically fit for war service" was approved by the President of the Board on the *28/5/18*, <sup>*the address given*</sup> has been sent to ~~his home on~~ warrant to await instructions as to his final discharge; he has been given £1 (one pound) advance ~~and a suit of plain clothes.~~

He proceeded on (date) *5/6/18*

to (full address) *55 Victoria St*

Date *5/6/18* *G C Hall* { Officer Comm.

Place *London* Registrar, R.A. General Hospital.

Three copies to be made; one copy sent to each of the Officer above-mentioned, and one copy filed in the Office.

2  
Louding, A.

1778

Haysept

ORIGINAL

LAST PAY CERTIFICATE

N.F.P./94

To be rendered for all ranks on discharge, transfer to other Units, or on return to Newfoundland in accordance with C.L./19, 26/5/17.

Regtl No. 1778 Rank Pte Name A. Goulding Unit Royal Nfld. Regt. who was "epatriated to Newfoundland on 27/6/18 Authority A. F. B. 179 Cause Class A

STATEMENT OF ACCOUNT

DR.

PARTICULARS	£			s			d			PARTICULARS	£			s			d		
	£	s	d	£	s	d	£	s	d		£	s	d	£	s	d			
Balance Dr. from										Balance Cr. from 21/12/17									
Allotment 183 days @ 60	109	80		22	11	3				Pay 183 days @ \$ 1.00	183	00		6	13	7			
Cash Payments: P. & R. O.				26	14	0				Field Allowance 183 days @ \$ .10	18	30							
Hospital Advances				1	0	0				Other Allowances days @ \$	201	30		41	7	3			
Cash 21/6/18				1	8	0				Other Credits:									
Other Debits:										Ration Allowance									
										5/6/18-22/6/18, 18 days @ 2/1				1	17	6			
Total Debits				51	13	3				Total Credits				49	18	4			
Balance due by Paymaster										Balance due to Paymaster				1	14	11			
				51	13	3								51	13	3			

PERIOD: FROM 22/12/17 TO 22/6/18

CHECKED.  
21/6/18

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of

(Place) \_\_\_\_\_ (Date) 191

Made up/Checked in accordance with information received in the Pay & Record Office London, and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,  
21/6/18 191

(Signature) \_\_\_\_\_  
Chief Paymaster & Officer i/c Records.

COPY.

This space to be left blank for the Chelsea Number.

[Blank box for Chelsea Number]

*KC*

Army Form B. 268.



# Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. <u>1778</u>	Army Rank <u>Ser</u>	
Name <u>Goulding Abraham</u> (The name must agree strictly with that on enlistment, unless changed subsequently by authority.)		
Corps <u>ROYAL NEWFOUNDLAND REGIMENT.</u>		
Battalion, Battery, Company, Depot, &c. (If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)		
Date of discharge <u>July 23<sup>rd</sup> 1918</u>		
Place of discharge <u>St Johns. Nfld</u>		
1. Description at the time of discharge.		
Age <u>37</u> years _____ months	Descriptive marks. <u>Scars of shot to shoulder</u>	
Height <u>Five</u> feet <u>nine</u> inches		
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.		
Complexion <u>Flesh</u>		
Eyes <u>Blue</u>		
Hair <u>Brown</u>		
Trade <u>Paper Mill Hand</u>		
Intended place of residence { <u>Gambu</u> (To be given as fully as practicable) <u>Newfoundland</u>		
(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)		
2. The above-named man is discharged in consequence of <u>wounds received in action</u>		
(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)		
3. Military character:—		
4. Character awarded in accordance with King's Regulations:—		
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.		
Initials of Commanding Officer.		
Army Form B. 2088 has been issued to*		

To be filled in on the soldier quitting the Colours.

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class \_\_\_\_\_

6. Campaigns, Medals and Decorations

{ \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Certificate of education .....

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

(Place) \_\_\_\_\_

(Date) \_\_\_\_\_ Commanding \_\_\_\_\_ Bttn. \_\_\_\_\_ Regiment.

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) St. John's Rfd. P. Adyoulding (Signature of Soldier.)

(Date) Aug. 13<sup>th</sup> 1918. E. Walsh (Signature of Witness.)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. *Additional certificate in the case of a soldier who takes his discharge at his own request.*

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

\_\_\_\_\_ (Signature of Soldier.)

10. *Statement of service.*

Service towards engagement to \_\_\_\_\_ (the date to which the record of service is completed) \_\_\_\_\_ years \_\_\_\_\_ days.

Further service " " \_\_\_\_\_ (the date of confirmation of discharge) ... .. " " "

Total ... .. " " "

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for \_\_\_\_\_ (date)

(Place) \_\_\_\_\_

(Date) \_\_\_\_\_

Signature \_\_\_\_\_

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

---

no. reservations  
for <sup>his</sup> ~~the~~ building  
mark.

witness E. Walsh.

LAST PAY CERTIFICATE

N.F.P./94

DUPLICATE  
MAIL COPY

To be rendered for all ranks on discharge, transfer to other Units, or on return to Newfoundland in accordance with C.L./19, 26/5/17.

Regtl No. R2778 Pte Name A. Goulding Posted Unit Royal Wld. Regt. who was repatriated  
to Newfoundland on / / 22 1918 Authority A.F.P. 179 Cause Class A

STATEMENT OF ACCOUNT

DR.		PARTICULARS					CR.				
		£	s	d							
	Balance Dr. from				Balance Cr. from						
	Allotment <u>185 @ 60</u>	109	80	22	11	Pay days @ $\frac{1}{2}$	21/12/17			6 13 7	
	Cash Payments: P. & R. O.			26	14	Field Allowance days @ $\frac{1}{2}$	185	185	00		
	Hospital Advances			1	0	Other Allowances days @ $\frac{1}{2}$	185	185	30		
	Cash 21/6/18			1	8	0		201	30	41 7 3	
	Other Debits:					Other Credits:					
						Ration Allowance					
						5/6/18-22/6/18, 18 days @ 2/1				1 17 6	
	Total Debits			51	13	5	Total Credits			49 18 4	
	Balance due by Paymaster						Balance due to Paymaster			1 14 11	
				51	13	5				1 14 11	

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book

CHECKED  
21/6/18

(Place) \_\_\_\_\_ (Date) 191

Made up, Checked in accordance with information received in the Pay & Record Office \_\_\_\_\_ to \_\_\_\_\_ London, 21 6 18  
and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,  
21/6/18 191

O.C. " " Company.  
*A.D. Munnell*  
Chief Paymaster & Officer i/c Records.

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 Commissioners of Chelsea Hospital.

Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.1.

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

A Name in full *Goulding Abraham*  
Regiment from which discharged  
Regimental Number *1778*  
Where born (Parish, Town and County), and when *Concorville Bay April 1894*  
Intended address *Yambo April*

ROYAL NEWFOUNDLAND REGIMENT



Height on discharge *Five* Feet *nine* Inches  
Colour of Hair on discharge *Brown*  
Descriptive marks *Rt. foot Rt. Shoulder*  
Figure on discharge *Medium*  
Christian name of Father *Joseph*  
Christian name of Mother *Ellen*  
Wife's Maiden name in full  
Date and Place of Marriage  
Christian names of Children

Colour of Eyes *Blue*  
Complexion *Fresh*

Nature and locality of civil employment desired *Uncertain at present*

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) *Goulding Abraham X*

Station *Walsworth* (Rank) *Sgt* Date *May 22<sup>nd</sup> 1918*

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.

*London General Hospital* Medical Officer i/c Hospital. Date *May 22<sup>nd</sup> 1918*

Station *Walsworth S.W.*

B Period of Service and in what Corps ...

Regiment	Years	Days	All Service Abroad with Stations	Years	Days
			India		
			S. Africa		

Disallowed ...

Service towards Pension ...

Date inclusive to which pay has been issued

Sums due on account of public debts ...

Sum due on account of advance of Pension }

Rank on Discharge  
Character (as on Certificate of discharge)  
Where born, and on what date  
Date and Place of first Enlistment  
Trade on Enlistment  
Cause of Discharge  
Number of G.C. Badges  
Wounds, and Actions in which received

Medals

Other distinguishing marks

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.

Station \_\_\_\_\_

Date \_\_\_\_\_

Officer in Charge

Records.



COPY

Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man fit for General Service



No. 1778

Rank Ser.

Name (surname first) Goulding Abraham

Regiment ROYAL NEWFOUNDLAND REGIMENT.

1. State what special qualifications you have for employment in civil life.

At Paper Mills

2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed?

Mr Ainsworth ?

2 years

3. What is the nature and locality of the employment you desire?

At Paper Mills

4. What is the name of your Approved Society?

5. Have you been employed whilst with the Colours? It so, in what capacity?

Date

20 May 1918

Signature

Sgt A G Goulding

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 4 (ii), item 3, of Army Council Instruction No.....of 1916.

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

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 *Franklin* 2. Surname *Franklin*.....

3. Rank *Pte*..... 4. Regt. No. *1778*.....

5. Address in full to which future payments of gratuity are to ~~for~~ be forwarded..... *Waterford Hall*.....

..... *St. Johns*.....

6. Date of enlistment in the Regiment..... *August 18<sup>th</sup> 1915*

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

..... *Mr Joseph Franklin (Mother)*.....

8. Relationship of such dependents..... *Mother*.....

9. Address in full of such dependent..... *Franklin, Nfld.*.....

.....

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.....

..... *No service in Nfld.*.....

.....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *2 years 340 days*.....

..... *Overseas*.....

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

..... *one enlistment* .....

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..... *Yes*.....

*Sum of \$85.00 Received by self*.....

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..... *None*.....

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<sup>rd</sup> 1918*..... (b) Reason for discharge.....

*On account of wounds*.....

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 Belgium 1916 & 1917*.....

21. (a) Are you receiving treatment from the Civil Re-Establishment Com.?

(b). If so, are you in receipt of full pay and allowances from that Committee..... *No*.....

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.

Signature of Applicant: *Abraham J. Gaudin*  
 Place of Residence: *Sambo.*  
 Declared before me at: *St. John's nfd.*  
 This *28<sup>th</sup>* day of *February* 19*19.*

*Chas. B. Hunt*  
 Signature of Barrister of the *Notary Public*  
 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>.18.12.18.</i>	<i>100.10</i>		<i>5.45</i>		<i>350.00</i>
			<i>Lea P.D.P.</i>		<i>100.10</i>
					<i>249.90</i>
Certified Correct.					Paymaster.



# NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Disc No.

Sent by

Rec'd by

Check

No.

Place from

To

*Grand Falls*  
*Captain Rowley*



*Please send my sheets  
to Grand Falls.*

*1778 A. Golding.*

*1<sup>st</sup> Mail ch  
mailed July 15*

Millertown Hampton River November 30  
Ego Gros Lane 1919  
7852

Caption Howley Dear Sir.

I would like for you to send me ~~the~~ two checks which I never received.

I only received 4 checks sense I came home I would like to get it now.

I would like for you to forward it as quick as possible please answer as soon as you can

no 1778 A Goulding

(420)

	Bonus date of dis	
Dec 10	Cost discharge	1370 ✓
18		1930 ✓
Mar 1		6910 ✓
Apr 1		7000 ✓
May 1		7000 ✓
June 1		7000 ✓
		3990 ✓
		<hr/> 35000 ✓

1778

7852

December 23, 1919

A. Goulding,  
C/o Knos Lane,  
Harpoon River, Millertown.

Dear Sir:

With reference to your letter of recent date, you are entitled to \$350.00 War Service Gratuity, which has been paid you in full, and is computed as follows:

Bonus date of discharge	13.70
Post Discharge Pay Dec. 10.	19.30
Dec. 18	67.10
March	70.00
Apr.	70.00
May	70.00
June	39.90
	<u>\$350.00</u>

Yours truly,

Lieut.  
For Paymaster.



1918-1919

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 19.91

Aug 10<sup>62</sup> 1918

Received from the First Newfoundland Regiment  
the sum of nineteen <sup>91</sup> Dollars.  
~~on account~~ of Pay.  
balance

his  
A. X. Goulding  
mark. withalps E. Walster  
Regtl. No. Rank Pte

Ch. No. 1048	Initials. EW
Pay Ledger... 20	Initials. WM
Gen. Ledger.....	Initials. J

No. 1778

Rank PL

Name Goulding A.

1918-1919

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER

\$ 6.00

July 1<sup>st</sup> 1918

Received from the First Newfoundland Regiment  
the sum of Six 00 Dollars.  
on account  
balance of Pay.

A. Goulding

Ch. No. <u>542</u>	Initials <u>EW</u>
Pay Ledger <u>EW</u>	Initials <u>WRD</u>
Gen. Ledger <u>WRD</u>	Initials <u>WRD</u>

Regtl. No. .... Rank .....

3

No. 1778

Rank

Pt

Name

Goulding A.

1918 - 1919

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$15.00

July 8<sup>th</sup> 1918

Received from the First Newfoundland Regiment  
the sum of Fifteen Dollars.  
on account of Pay.  
balance

Abraham <sup>his</sup> Goulding  
mark

Regtl. No. Rank

Ch. No. ....	93	Initials .....	JH
Pay Ledger .....	20	Initials .....	[Signature]
Gen. Ledger .....	RP	Initials .....	[Signature]

[Handwritten initials]

No. 1778

Rank. Pte.

Name Abraham Goulding

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 19  $\frac{30}{x}$ \*

Dec 10<sup>th</sup> 1918

Received from the First Newfoundland Regiment  
the sum of Pay discharge Number  $\frac{30}{x}$  Dollars.  
on account of Pay.  
~~balance~~

Ch. No.	6581	Initials	EW
Pay Ledger	20	Initials	WN
Gen. Ledger		Initials	

his  
A. Goulding  
mark  
Regtl. No. 778  
Rank Pte.  
Witness E. Walsh

PAID

No. 1778

Rank

66

Name

Goulding, A



SEPARATION ALLOWANCE.

Claimant... *Goulding, Helen (mother, widow)*

On account of *Abraham Goulding* No. *1778* Rank. *Pto*

Decision.....

.....  
.....  
.....

.....  
.....  
.....

Date.....

Instructions.....

.....  
.....  
.....

Allotment of *60<sup>c</sup>* per *day* payable to *Helen Goulding*  
his *Mother* from *Oct 30<sup>th</sup>/15* to *31/7/18*

Discontinued on account of *Discharged*

*Liike Sgt*  
.....

*1661*

NOTICE.

ROYAL NEWFOUNDLAND REGIMENT.

MOTHER.

(Separation Allowance Branch )

THIS STATUTORY DECLARATION is to be filled in correctly in every detail, and a complete reply must be given to each question.

Each statement is considered as being made on Oath, and the form is to be signed before a Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace and returned to:

"The Paymaster"  
Separation Allowance Branch,  
St. John's, Nfld.

1. Name in full of soldier. Rank. Reg't. or Unit. Regt. No.

*Abraham private 1st Regt. 1778*

2. Age of soldier. Married or Single.

*28*

*Single*

3. Name in full of mother. Age. Occupation. Permanent Address.

*Ellen Bonding 60 Cook Middle Brook  
Gambro*

4. Give name of your husband. Age. Occupation Where Employed.

*Husband dead*

5. If your husband is not supporting you state the reason.

6. If your husband is a chronic invalid and totally incapacitated, state nature of malady. ( A Medical Certificate must be enclosed with this document stating from what date husband has been totally incapacitated, and for how long incapacity is likely to continue.)

7. If you are a widow, state date and place of death of your husband.

*Nov 26th 1910*

8. Have you married again since death of above mentioned husband?

*No*

9. Names of your other children. Address in full. Age. Occupation Married or Single.

*(James) Miller of Gambro (25) Lumbering job  
(Sisters) " " " (24) do*

10. State amount earned by (a) Yourself *makes to earn*  
(b) Your husband.

11. State amount and source of any other income. *Nil*

12. State value of real property belonging to you and your husband. *Nil*

13. State value of personal property belonging to you and your husband. *Nil*

14. If husband is dead state value of real and personal property left by him. *Nil*

15. Actual amount contributed by soldier during the year prior to enlistment. *No particular amt. helped to support me*

16. Was this amount contributed weekly or monthly.

17. Did this amount include payment of son's board, etc.

18. State your son's trade or occupation prior to enlistment. *Working in lumbering*

19. State amount of his wages per week. *About \$12.00 per week. Makes to earn w. definitely*

20. State name and address of his last employer. *Denis Lane Millerton*

21. State amount of monthly support from son since enlistment. *None*

22. State amount of allotment received by you from son since enlistment. *None. 8560*

23. State from what date did you receive allotment? *Dec 6 1915*

24. Actual amount contributed by other children. Weekly Monthly. *was receiving \$5.00 from 1 child*

25. Are any of these children in the employ of you or your husband? *No* *up to Oct. 1916* *Now no permanent amount*

26. If not receiving support from other children, state cause. Explain fully.

27. With whom are you residing at present?  
*My 3 Sons*

28. Have you made a previous claim for Separation Allowance. If not, why? Give particulars.  
*No Did not know I had a pay*

29. Are you already in receipt of Separation Allowance from any source? If so, how much?  
*No*

30. Are you already in receipt of any payment from any Patriotic Fund? If so, how much.  
*No*

31. Was the soldier at the time of his enlistment an employee of the Nfld. Government?  
*No*

32. In what capacity and in what place?

33. Is he in receipt of a salary as such while serving in the Royal Newfoundland Regiment? If so, how much.

I herewith make this solemn Declaration conscientiously believing the same to be true and knowing it to be of the same force and effect as if made under Oath in Virtue of the Evidence Act.

Signature of Applicant *William Beaudin*  
Place of Residence *St. John's, Nfld.*

Declared and subscribed before me at *St. John's* this *18* day of *March* 191*9*

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

This application must be signed by two responsible parties one of whom must be a Clergyman, the other a representative of your local Patriotic Fund Committee, certifying that to the best of their knowledge after careful investigation the above statements are correct and the soldier first above mentioned is the sole support of the applicant.

Signature of Clergyman *H. E. Bert. Moors (Methodist)*

Signature of member of the Patriotic Fund Committee *Miss G. J. J. J.*

May 16, 1919

Mrs. Helen Goulding,  
Middle Brook,  
Gapbo.

Dear Madam:-

Referring to your application for Separation Allowance, will you kindly inform me if your son James offered for enlistment, and if so, what is the number of his Rejection Badge, if he has one?

Yours truly

Paymaster & O.i/c Records

Captain

Middle Brook  
Gambro

5123

May. 19. 1919

Lo

M Howley Captain

Dear Sir

I am writing  
to tell you that my  
son James did not  
enlist as he was  
sick all the time  
the war was on

Yours truly

Helen Goulding

June 12, 1919

Mrs. Helen Goulding,

Gambo.

Dear Madam:-

Referring to your letter of May  
19th., kindly have your Doctor complete the  
enclosed Certificate on account of your son  
James, whom you state were sick during War

Yours truly

Paymaster & Officer i/c      Captain,  
Records.

Jan.19/'20

Mrs.Helen Goulding,  
Middle Brook,  
GAMBO.

Dear Madam:-

With further reference to your application for Separation Allowance, I beg to state that on June 12th., I wrote you enclosing a Medical Certificate to be completed by your Doctor on account of your son JAMES.

I should like to have the Certificate as soon as possible, so that your claim may be disposed of.

Yours truly

Major

Paymaster.



JMH/LM.

August 25, 1920

Mrs. Helen Goulding,  
Middle Brook,  
Gambo.

Dear Madam:

On June 12/19 and on January 19/20, I wrote you as per enclosed copies of letters, but have not yet received a reply thereto.

Kindly furnish me with the information requested, at your earliest convenience, so that your claim may be finally dealt with.

Yours truly,

Major  
Paymaster.

# Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 1778 Army Rank Private  
 Name Goulding Abraham  
 (The name must agree strictly with that on enlistment, unless changed subsequently by authority.)  
 Corps ROYAL NEWFOUNDLAND REGIMENT.  
 Battalion, Battery, Company, Depot, &c.  
 (If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge \_\_\_\_\_  
 Place of discharge \_\_\_\_\_

1. Description at the time of discharge.

Age _____ years _____ months	Descriptive marks. <u>Scars R. Foot &amp; R. Shoulder</u>
Height <u>Five</u> feet <u>nine</u> inches	
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.	<div style="border: 1px solid black; padding: 5px; width: fit-content;">           COPY SENT TO            O.C. H.Q.            ST. JOHNS, N.F.L.D.            N.F.P.38. No. <u>9923/20</u>            DATED <u>22 JUN 1918</u> </div>
Complexion <u>Dark</u>	
Eyes <u>Blue</u>	
Hair <u>Brown</u>	
Trade <u>Paper Mill Hand</u>	
Intended place of residence (To be given as fully as practicable) { <u>Yambo</u> <u>Newfoundland</u>	

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character:—  
 \_\_\_\_\_

4. Character awarded in accordance with King's Regulations:—  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067\* and that Army Form D. 489 was awarded in this case.

\_\_\_\_\_  
Initials of Commanding Officer.

Army Form B. 2088 has been issued to\*

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps 2/1 Highland Regt. Regimental Number 1199  
 Rank Plat Surname Rowling Christian Name Abraham  
 Religion Methodist Age on Enlistment 25 years 3 months.  
 Enlisted (a) Aug 18/15 Terms of Service (a) Duration Service reckons from (a) June 9/16  
 Date of promotion to present rank \_\_\_\_\_ Date of appointment to lance rank \_\_\_\_\_  
 Extended { \_\_\_\_\_ } Re-engaged { June 9/16 } Qualification (b) \_\_\_\_\_  
 or Corps Trade and Rate \_\_\_\_\_  
 Signature of Officer i/c Records.



Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 86, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Taken from Army Form B. 213, Army Form A. 86, or other official documents
COPY SENT TO Date . . . . . O.C. H.Q. ST. JOHNS, N.F.L.D. N.F.P.38. No. <u>9913/80</u> DATED <u>22 JUN 1918</u>		Embarked .. <u>St John's</u> Disembarked... <u>St John's</u> Joined Battalion <u>12 JUL 1916</u> With BATT. <u>25. I. 17</u>			
	<u>53 FA.</u>	<u>Admitted Influenza</u>	<u>France</u>	<u>16/1/17</u>	<u>ED. 9291</u>
	<u>Do</u>	<u>Discharged to Duty</u>	<u>Brit</u>	<u>23/1/17</u>	<u>ED 176</u>
<u>2.4.17</u>	<u>88 F.A.</u>	<u>Ad. P.U.D.</u>	<u>France</u>	<u>22.3.17</u>	<u>ED. 1806</u>
<u>11.4.17</u>	<u>N.Z. St Hosp</u>	<u>Ad. Myalgia</u>	<u>France</u>	<u>27.3.17</u>	<u>H.A. 8043</u>
<u>12.4.17</u>	<u>54 Hosp</u>	<u>Ad. Bronchitis</u>	<u>France</u>	<u>29.3.17</u>	<u>H.A. 8053</u>
<u>16.5.17</u>	<u>29 I.B.D.</u>	<u>Joined Base Depot</u>	<u>Do</u>	<u>15.5.17</u>	<u>Nom. Roll</u>
<u>16.6.17</u>	<u>O.C. Unit</u>	<u>Re-Join'd Battalion</u>	<u>In the Field</u>	<u>1 JUN 1917</u>	<u>B 213</u>
<u>26 NOV 1917</u>	<u>U.C.</u>	<u>WOUNDED IN ACTION</u>		<u>20 NOV 1917</u>	<u>A.F.B. 213</u>
<u>20/11/17</u>	<u>89 FA</u>	<u>Ad G. Sw Shoulder</u>	<u>France</u>	<u>21 CES</u>	<u>22/1/17</u> <u>ED 11004</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.  
 (B99150) W 15012-5136 J. P. & Co., Ltd. Forms B103/8. [P.T.O.]



COPY

Army Form B. 103.

Regimental Number *1778*

**Casualty Form—Active Service.**

Regiment or Corps *ROYAL NEWFOUNDLAND REGIMENT*

Rank *Private* Surname *Goldberg* Christian Name *Abraham*

Religion *Meth* Age on Enlistment *25* years *3* months

Enlisted (a) *18.8.15* Terms of Service (a) *Duration* Service reckons from (a) *18.8.15*

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

Extended {.....} Re-engaged {*19.6.16*} Qualification (b) *21 JUN 1918*

Occupation..... or Corps Trade and rate.....

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	<i>Shampton</i>	<i>28.6.16</i>	
		Disembarked	<i>Rouen</i>	<i>26.6.16</i>	
		<i>Joined Battalion</i>		<i>12.7.16</i>	
		<i>With</i>		<i>22.11.17</i>	
	<i>53 F.A.</i>	<i>Rem. Influenza</i>	<i>France</i>	<i>16.1.17</i>	<i>ED 9291</i>
		<i>Discharged to Duty</i>	<i>Ukik</i>	<i>22.1.17</i>	<i>ED 176</i>
<i>2.4.17</i>	<i>88 F.A.</i>	<i>He of U.C.</i>	<i>France</i>	<i>22.3.17</i>	<i>ED 1806</i>
<i>11.4.17</i>	<i>19th Coy</i>	<i>" Myalgia</i>	<i>Amiens</i>	<i>27.3.17</i>	<i>RA. 8043</i>
<i>12.4.17</i>	<i>15. Coy</i>	<i>" Bronchitis</i>	<i>Rouen</i>	<i>29.3.17</i>	<i>" 8033</i>
<i>16.5.17</i>	<i>29 I.D.S.</i>	<i>Joined Base Depot</i>	<i>"</i>	<i>15.5.17</i>	<i>Now full</i>
<i>16.6.17</i>	<i>26.11.17</i>	<i>Left Battalion</i>	<i>in the Field</i>	<i>11.6.17</i>	<i>10213</i>
<i>26.11.17</i>	<i>O.C.</i>	<i>Wounded in Action</i>	<i>"</i>	<i>20.11.17</i>	<i>"</i>
<i>30.11.17</i>	<i>89 F.A.</i>	<i>Ad G.W. Shoulder strap</i>	<i>21 C.C.</i>	<i>22.11.17</i>	<i>ED 4004</i>

(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.

1778 J. Goulding A.

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				
	12 Gen. Top	Sam L. W. Shouler of Regt	France	23.11.17	AD 16635
	W. S. Squires	To England		28.12.17	W 3083
			S. C. Eldridge		Major
					of the Infantry Section
					3rd Echelon

*Original*

Medical Report on an Invalid.

Station 3rd London General Hospital,  
WANDSWORTH S.W.

Date \_\_\_\_\_



- 1. Unit *11th R. Ryfd*
- 2. Regimental No. *1778*
- 3. Rank *Plt.*
- 4. Name *Goldring A.*
- 5. Age last birthday *27.*
- 6. Enlisted { on *Sept 1914.*  
at *S. Johns*

- 7. Former Trade or Occupation \_\_\_\_\_
- 7A. If with previous service, state—
  - (a) Former Unit;
  - (b) Regimental No.; *us*
  - (c) Date of Discharge;
  - (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

*G.S.N. Rt. Shoulder, rt foot, left leg.  
persistent sinus, Rt foot.*

Statement of Case.

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

COPY SENT TO  
O.C. H.Q.  
ST. JOHNS, N.F.I.D.  
N.F.P.38, No. *9923/80*  
DATED *22 JUN 1918*

9. Date of origin of disability.

*21<sup>st</sup> Nov. 1917*

10. Place of origin of disability.

*Cambrai.*

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

*Received non perforating shell wd. Rt. Foot - Fracture of tarsal bones.  
ⓑ Perforating wound left calf. ⓓ Sutta wound post. aspect N.P. shoulder.  
F.B. removed in France on 22-11-17 from foot & all wounds cleaned. He had a record of opening drainage rt foot.  
Sent to England on 29-12-17 - wounds doing well. Has not been operated on here - all wounds healed except Rt. Foot.*

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

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

*G.S.N.*

*Active Service*

13. What is his present condition?

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

All wounds healed, except  
Chow of Rte. Foot - there is a large sinus  
present, surrounded discharges.  
No pt. will be able to do military work for  
for months - no consideration at present for op. he has  
been recommended for Board.

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

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

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

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

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

Yes - Removal of the B  
to open up drainage of the foot

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

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

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

20. Do you recommend—  
(a) Discharge as permanently unfit, or  
(b) Change to England?

Permanently unfit.

D. A. Davis, C.S.  
Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith,  
except †  
3rd London General Hospital,  
Station WANDSWORTH, S.W.

M. E. J. ...  
Officer in charge of Hospital.

Date May 22<sup>nd</sup> 1918

Col. A.M.S.

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

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



Opinion of the Medical Board.

Notes.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the 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.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) *The rates of pension vary directly according to whether the disability is, (a) caused or aggravated by service in the present war, (b) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease 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.*

(iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

1. (a.) State whether the disability is clearly attributable to—

(i.) Service during the present war;

(ii.) Climate;

(iii.) Ordinary military service;

(iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or

(v.) Whether it is constitutional or hereditary.

(b.) If due to one of the first three of these causes, to what specific conditions do the Board attribute it?

22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which?

23. Is the disability permanent?

24. If not permanent, how soon do the Board recommend re-examination?

25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

*Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.*

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

27. Do the Board recommend—

(a) Discharge as permanently unfit, or

(b) Change to England?

28. If discharge is recommended it should be stated whether further medical treatment (including orthopedic training) is desirable in a—

(a) Sanatorium;

(b) Hospital;

(c) Convalescent home;

(d) Asylum; or

(e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended?

30. Does the man require the constant attendance of another person?

Yes

No

No

Q. 26.

-

Yes

-

100.

v. 26 16.

Yes

*- As an out-patient if necessary - patient.*

Yes

No

*H. J. ...*  
 H. J. ... President.

*H. A. ...*  
 H. A. ... Members.

Signatures:—

3rd London General Hospital,

Station WANDSWORTH, S.W.

Date 28. 1. 18

Approved.

3rd London General Hospital,

Station WANDSWORTH, S.W.

Date 28. 1. 18

*H. J. ...*  
 H. J. ... Administrative Medical Officer.

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

# MEDICAL HISTORY

Surname Goulding

OF  
Christian Name Abraham



Table 1.—GENERAL TABLE.

Birthplace:—Parish..... County Nfld

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined .....	on <u>18</u> day of <u>Aug</u> 191 <u>5</u>	on .....	day of .....	191 .....
at .....	<u>St John's Nfld</u>		at .....	.....
Declared Age.....	<u>25</u> years	days .....	.....	days .....
Trade or Occupation.....	<u>Lumberman</u>		.....	.....
Height .....	<u>5</u> feet	<u>5</u> inches	.....	inches .....
Weight .....	<u>132</u> lbs.		.....	lbs. ....
Chest Measurement {	Girth when fully expanded... <u>36</u> inches		.....	inches .....
	Range of expansion... <u>4</u> inches		.....	inches .....
Physical Development.....	.....		.....	.....
Vaccination Marks {	Arm .....	.....	Right .....	Left .....
	Number .....	.....	.....	.....
When Vaccinated .....	<u>70</u>		.....	.....
Vision .....	R. E.—V== <u>4/6</u>	.....	.....	.....
	L. E.—V== <u>4/6</u>	.....	.....	.....
(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>L. M. Paterson</u>		.....	.....
(Rank)	<u>Capt.</u>		.....	.....
	Medical Officer.		Medical Officer.	
Enlisted .....	at <u>St John's</u>	at .....	.....	.....
on .....	on <u>18</u> day of <u>Aug</u> 191 <u>5</u>	on .....	day of .....	191 .....
Joined on Enlistment .....	Corps. <u>1<sup>st</sup> Nfld Regt</u>	Regtl. No. <u>1798.</u>	Corps. ....	Regtl. No. ....
Transferred to.. ..	.....		.....	.....
Became non-effective by .....	.....		.....	.....
	on .....	day of .....	191 .....	on .....
(Signature)	.....		day of .....	191 .....
(Rank)	.....		.....	.....

COPY SENT TO  
E.—V—O.C. H.Q.  
ST. JOHNS, N.F.L.D.  
F.P.38. No. 9023/80  
DATED 22 JUN 1918

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, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3rd Lond. General Hospital, WANDSWORTH, S.W. admitted 29	12	17					G. J. W. R. Hoalder R foot. left leg Peritonitis Genua R foot		Board held see overlap Disability G. J. W. R. Hoalder R foot. left leg Peritonitis Genua R foot. Cause Total G. J. W. on active service inability bear a load had covered by 100%.	G. C. Hall Capt 3rd London General Hospital WANDSWORTH, S.W.

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

Date	Brief Details, and Signature
15.10.15	1 <sup>st</sup> Inoculation
19.11.15	Vacc. R.P. Graham. Lt. Rame.
24.5.16	2 <sup>nd</sup> Inoculation Dr. McIntyre Capt. Rame
23 MAY 1916	<p>Board held                      Board finding Permanently unfit                      Board approved 25/5/16</p>
	<p style="text-align: center;">G C Hall                      Capt. Med                      3rd London General Hospital,                      WANDSWORTH, S.W.</p>

**TABLE IV.—SERVICE TABLE.**

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation.	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
St Johns Field					

# Notification by President of Medical Board of Approval of a Soldier's Discharge, under Para. 392 (xvi.) King's Regulations.

(To be completed and dispatched on the day on which the discharge is approved.)



To the Officer i/c Records \_\_\_\_\_

The Soldier named below has appeared before an Army Medical Board at this station, and his discharge from the Service as "no longer physically fit for War Service" has **this day** been approved. (The discharge will be confirmed for a date 14 days after the date on this notification—see A.C.I. 1623 of 1916.)

Soldier's surname Golding, Christian names Arthur  
(in full)

Regt. No. and Rank 1778 Lt Regt. or Corps 1st P.N.F.I.  
(If T.F. this should be stated)

His address on discharge will be Gambell St John's Island

This information is for the Central Army Pension Issue Office only.

The Soldier states that\* \_\_\_\_\_ allowance is being issued in respect of him.

\*Insert "separation," "dependants," "family," or "no," as the case may be. The space must not be left blank.

Army Form D. 400A. and Army Form B. 179 for the above-named Soldier are forwarded herewith.

3rd London General Hospital,  
Station WANDSWORTH, S.W.

L. J. ...  
President of Board

Date 28. 1. 18.

(Approving Officer).

A set of three forms will be made out for each Soldier whose discharge is approved, and will be dispatched to the officers severally indicated.

Attention is drawn to the fact that Forms A, B and C of each set are not in identical terms.

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 Commissioners of Chelsea Hospital. Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents to the Stationery Royal Hospital Chelsea, London, S.W.1.

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

**A Name in full** *Goldring Abraham*  
**Regiment from which discharged** *1 RFLD*  
**Regimental Number** *1778*  
**Where born (Parish, Town and County), and when** *Bonnamy 15 May 1891*  
**Intended address** *Gumble. 1st St. RFLD*

**Height on discharge** *5* Feet *9* Inches  
**Colour of Hair on discharge** *Brown* **Colour of Eyes** *Blue*  
**Descriptive marks** *R. foot & R. shoulder* **Complexion** *Fresh*  
**Figure on discharge** *medium*  
**Christian name of Father** *Joseph*  
**Christian name of Mother** *Ellen*  
**Wife's Maiden name in full** *W. J. P. 38*  
**Date and Place of Marriage** *—*  
**Christian names of Children** *—*  
**Nature and locality of civil employment desired** *Unemployed*



COPY SENT TO  
O.C. H.Q.  
ST. JOHNS, N.F.L.D.  
N.F.P.38. No. *9913/20*  
DATED *22 JUN 1918*

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) *Goldring - Abraham*  
Station *Wandsworth*

(Rank) *Private*  
Date *May 22 - 1918*

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.

*D. D. Daniels* M.O. Medical Officer i/c Hospital.

Station *3rd London General Hospital, WANDSWORTH, S.W.* Date *May 22<sup>nd</sup> - 1918*

B Period of Service and in what Corps ...	Regiment	Years	Days	All Service Abroad with Stations	Years	Days
					India S. Africa	
Disallowed ...						
Service towards Pension ...						
Date inclusive to which pay has been issued	Sum due on account of advance of Pension }					
Sums due on account of public debts ...						

Rank on Discharge  
Character (as on Certificate of discharge)  
Where born, and on what date  
Date and Place of first Enlistment  
Trade on Enlistment  
Cause of Discharge  
Number of G.C. Badges — Medals  
Wounds, and Actions in which received

Other distinguishing marks

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.

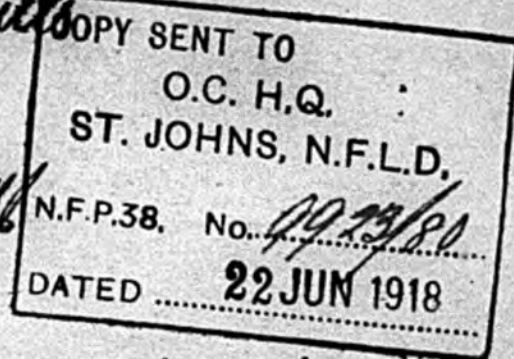
Station \_\_\_\_\_ Officer in Charge  
Date \_\_\_\_\_ Records.

Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(I) in substitution for a man fit for General Service.

No. 1778 Rank Pte Regiment Newfoundland  
 Name Golding, Abraham  
 (Surname first)

1. State what special qualifications you have for employment in civil life.

*At Paper Mills*



2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed.

*Mr Arnsworth*

*1/2 years.*

3. What is the nature and locality of the employment you desire?

*at Paper Mills,*

4. What is the name of your Approved Society?

5. Have you been employed whilst with the Colours? If so, in what capacity?

Date 20, May 1918

Signature A Golding

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge or reclassification in a category from which men are being transferred to Class P. or P.(T.) of the Reserve probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 3 (ii), item 3, of Army Council Instruction No. 1012, of 1916.

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.



# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.  
[523] W1357/604 400m 2/15c-1 53 50

Forms  
B. 121  
50.

Number of Sheet 1

Regiment of 1st Newfoundland

COPY SENT TO  
 O.C. H.Q.  
 ST. JOHNS, N.F.L.D.  
 W.P.F.38. No. 9923/20  
 DATED 22 JUN 1918

Signature of O. C. Company Jr. C. G. G. G.

Regimental Number and Name		Enlistment	Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No. <u>1778</u>	<u>A. Golding</u>	Age on <u>25 years 3 months</u>	<u>Lumberman</u>	
Joined _____ Date _____		Place and Date of Enlistment <u>St Johns Aug 18 1915</u>	Religion <u>Methodist</u>	
Joined _____ Date _____		Period of { with Colours <u>2 3/4</u> years. with Reserve <u>3/8</u> years.	Place of Birth <u>Stambs</u>	
Joined _____ Date _____				

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>Tales</u>	<u>8/1/16</u>	<u>Pvt</u>		<u>Absent from Tattoo till 10.30 am 10/1/16</u>	<u>Sgt Blackhall</u>	<u>Admonished</u>		<u>Sgt Norris 2nd Lieut</u>	<u>forfeits 3 days pay Under R.W. 1915.</u>
<u>Parly Banks</u>	<u>2/3/16</u>	<u>"</u>		<u>Refusing Duty and insolence</u>	<u>L/Cpl R Belton</u>	<u>1 Day CB</u>	<u>3/3/16</u>	<u>Capt E.S. Ayre</u>	<u>6/8</u>
<u>Gen School</u>	<u>15/4/16</u>	<u>"</u>		<u>Absent from Tattoo until 13 p.m 16/4/16</u>	<u>Lt Ruscombe</u>	<u>forfeits one day pay by R.W.</u>	<u>17/4/16</u>	<u>Capt E.S. Ayre</u>	<u>6/8</u>
<u>Racecourse</u>	<u>29/5/16</u>	<u>"</u>		<u>Absent from Tattoo until 10.30 P.M.</u>	<u>Sgt Costello</u>	<u>3 Day CB</u>	<u>30/5/16</u>	<u>W Summers 2nd Lt</u>	
<u>Racecourse</u>	<u>3. 6/16</u>	<u>"</u>		<u>Absent from Tattoo until 11.25 PM.</u>	<u>Sgt Pollettwaite</u>	<u>7 days CB.</u>	<u>6/6/16</u>	<u>Jr. C. G. G. G.</u>	
				<u>Medically Unfit 23 7/8</u>					

To be carried over

ARMY FORM B. 121.

# Squadron, Troop, Battery and Company Conduct Sheet.


Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.  
 (125) W2257/M25-9 250m 7/11a 03 58

Forms  
B. 121.  
41.

Regiment of **ROYAL NEWFOUNDLAND REGIMENT.**

Number of Sheet  
Signature of O. C. Company *G. Mackay Johnson*

Regimental Number and Name <i>1778 Galling A.</i>		Enlistment Age on <i>25</i> years <i>3</i> months		Trade <i>Carver</i>	
Place and Date of Enlistment <i>St. John's N.B. 8.1918</i>		Religion <i>Methodist</i>		Good Conduct Badges, Service Pay or Disability Pay	
Period of { with Colours years. with Reserve years.		Place of Birth <i>Stambo</i>			
No. <i>1778</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>Gables</i>	<i>8.1.16</i>	<i>Plt.</i>		<i>Absent from Duties till 10.30 AM. 10.1.16</i>	<i>Sgt. Blackwell</i>	<i>Admonished</i>		<i>S. Norris 2nd Lt.</i>	<i>Refers to pay by R.W. Clf.</i>
<i>Windy Carracks</i>	<i>2.2.16</i>			<i>Refusing Duty, &amp; Insolence</i>	<i>Cpl. &amp; Bellin</i>	<i>1 Days C.B.</i>	<i>2.3.16</i>	<i>Capt. Edsdyre</i>	<i>Clf.</i>
<i>Men. School</i>	<i>15.4.16</i>			<i>Absent from Duties until 3pm. 16.4.16</i>	<i>Cpl. Luscombe</i>	<i>Refers one days pay by R.W.</i>	<i>17.4.16</i>	<i>" " "</i>	<i>Clf.</i>
<i>Accourse</i>	<i>29.5.16</i>			<i>Absent from Duties until 10.30 pm.</i>	<i>Sgt. Hesthwaite</i>	<i>3 days C.B.</i>	<i>30.5.16</i>	<i>A. Summers 2nd Lt.</i>	
<i>"</i>	<i>3.6.16</i>			<i>Absent from Duties until 11.25 pm</i>	<i>Sgt. Hesthwaite</i>	<i>7 days C.B.</i>	<i>6.6.16</i>	<i>G. Mackay Johnson Lt.</i>	<i>Clf.</i>

To be carried over

Army Form B. 121.

# Report of Medical Board.

Station **St. John's, Nfld.** Date **July 9th., 1918**  
 No. and Rank **1778 - Pte.** Age **27** Height **5'9"**  
 Name **GOULDING A.** Complexion **Fresh**  
 Unit **Royal Nfld.** Eyes **Blue** Hair **Brown**  
 Address **Gambo**  
 Former Trade **Paper Mill Hand**  
 Enlisted at **St. John's On Sept. 1914** (The Board will please note how the soldier's appearance corresponds with above description.)  
 Disease or Disability Original **G.S.W. RT. SHOULDER, RT. FOOT, LEFT LEG PERSISTENT SINUS RIGHT FOOT**

Subsequent

Present Condition (Compare with previous Board)

*Scar outer side left leg healed no disability.  
 Left foot shows Scar over dorsum from operation,  
 An open sore over inner ankle and another  
 over outer ankle  
 Very large scar over right shoulder at the  
 back with loss of tissue. No ankylosis. Moves  
 shoulder well only weakness being due to loss  
 of muscle.*

THE ENTIRE DISABILITY: To what extent is his capacity lessened at present for earning a livelihood in the general labour market? *100%*

PENSIONABLE DISABILITY: To what extent is his capacity at present for earning a full livelihood in the general labour market lessened by that proportion of his disability due to or incurred during service?

Recommendation of Medical Board

*Total while in Hospital*  
 Admission to *Royal Can. Hosp.*  
 Discharge *permanently*  
*unfit*  
*Canny Macpherson,*  
*Major.*

Members of Board

*H. S. [Signature]*  
*Richard [Signature]*  
*H. [Signature]*

Approving Medical Officer.

D. M. S. NEWFOUNDLAND.



COPY

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178<sup>A</sup> to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY



Surname Goulding Christian Name Abraham

TABLE I.—GENERAL TABLE.

Birthplace ... Parish ... County Wex

Examined ... (on 18 day of Aug 1918 at St John's Wex)

Declared Age ... 25 years ... days.

Trade or Occupation ... lumberman

Height ... 5 feet, 5 inches.

Weight ... 132 lbs.

Chest Measurement { Girth when fully Expanded. 36 inches. Range of Expansion 4 inches.

Physical Development ...

Vaccination Marks { Arm ... Right Left Number

When Vaccinated ... no

Vision ... { R.E.—V— 6/6 L.E.—V— 6/6

(a) Marks indicating congenital peculiarities or previous disease ...

(b) Slight defects but not sufficient to cause rejection ...

Approved by (Signature) Frank Peterson (Rank) Capt Medical Officer.

Enlisted ... (at St John's Wex on 18 day of Aug 1918)

Table with 2 columns: Corps, Regtl. No. Row 1: ROYAL NEWFOUNDLAND REGIMENT., 1778

Transferred to ...

Became non-effective by ... on ... day of ... 191 ...

(Signature) (Rank)

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of 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, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3rd London General Hospital Wandsworth S.W.	29	12	17				R. L. W. Rt. Shoulder Rt. Foot: Left leg persistent sinus Rt. Foot		Board held - see overleaf Disability - R. L. W. Rt. Shoulder Rt. Foot Left Leg persistent sinus Rt. Foot Cause - R. L. W. on Active Service. Total - inability to earn a livelihood lessened by 100%	Sp. G. Hall, Capt. R. S. 3rd London General Hospital Wandsworth S.W.



COPY.

Medical Report on an Invalid

Station General Hospital, Walsworth, W.

Date 27. 5. 18



1. Unit ROYAL NEWFOUNDLAND REGIMENT.

2. Regimental No. 1778

3. Rank Sgt

4. Name Goulding A.

5. Age last birthday 27

6. Enlisted { on Sept 1914? (18. Aug 1915)  
at St John's

7. Former Trade or Occupation Paper Mill, Lancs

7A. If with previous service in Army, state—

(a) Former Unit;

(b) Regimental No.;

(c) Date of Discharge;

(d) Cause of Discharge.

No.

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

R.L.W. Rt. Shoulder. Rt. Foot. left leg  
persistent sinus Rt. Foot.

Statement of Case.

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

9. Date of origin of disability. 21 Nov. 17.

10. Place of origin of disability. Cambrai.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.  
Received with perforating shell wound Rt. Foot. Fracture of tarsal bones. (2) Perforating wound left calf (3) Gunter wound foot aspect of Rt. Shoulder. T.B. removed in France on 22.11.17 from foot & all wounds healed. He had a 2<sup>nd</sup> operation opening & drawing Rt. Foot. Sent to England on 29.12.17. Wounds doing well. Has not been operated on here. All wounds healed except Rt. Foot.

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

(a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).

(b) constitutional or hereditary, and not aggravated by service during the present war.

(c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

R.L.W.  
Active Service

All wounds healed except that of R. Foot, there is a long sinus present, & wound discharges.

13. What is his present condition? *M. R. will not be able to do military work for six months & no indication at present for operation. He has been recommended for Board.*  
Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

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

- (a) In action? *Yes*
- (b) On field service? *Yes*
- (c) On duty? *Yes*
- (d) Off duty? *no*

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

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

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

*at (1) removal of P.L.  
(2) opening up of bottom of R. Foot.*

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

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

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

20. Do you recommend—  
(a) Discharge as permanently unfit, or  
(b) Change to England?

*Permanently Unfit.  
Sgt. D. Davies C.S.*

Officer in medical charge of case.

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

*for Surgeon General Hospital.*

Station *Waukesha Wis.*

*W. B. Bruce Porter Col. A.M.S.*

Date *May 22<sup>nd</sup> 1918*

Officer in charge of Hospital.

*Comd'g 3<sup>rd</sup> Battalion General Hospital.*

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

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



Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the 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.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) *The rates of pension vary directly according to whether the disability is, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease 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.*

(iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

1. (a.) State whether the disability is clearly attributable to—

(i.) Service during the present war ; *Yes*

(ii.) Climate ; *—*

(iii.) Ordinary military service ; *—*

(iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c. ; or *no*

(v.) Whether it is constitutional or hereditary. *no*

(b.) If due to one of the first three of these causes, to what specific conditions do the Board attribute it? *S.S.W.*

22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which? *—*

23. Is the disability permanent? *Yes*

24. If not permanent, how soon do the Board recommend re-examination? *—*

25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

*Degrees of disablement should be expressed in the following percentages:— 100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.* *100*

26. If an operation was advised and declined, was the refusal unreasonable? *None 16*

27. Do the Board recommend— *Yes*

(a) Discharge as permanently unfit, or

(b) Change to England?

28. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic training) is desirable in a—

(a) Sanatorium; *— as an out-patient; if necessary in patient*

(b) Hospital;

(c) Convalescent home;

(d) Asylum; or

(e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended? *Yes. Crutches*

30. Does the man require the constant attendance of another person? *no*

2nd London *Signature*  
Station *Wandsworth SW*

Date *28.5.18*

*Sgt. A. Morrison Davis* *Capt. L. H. ...*  
President

*A. Davis* *Col.*

Members.

Approved.

Station *—*

Date *—*

*A. Morrison Davis* *Capt. L. H. ...*  
Administrative Medical Officer.

# Report of Medical Board.

Station	St. John's, Nfld	Date	MARCH 11TH., 1919		
No. and Rank	1778 - PRIVATE	Age	28	Height	5'9"
Name	GOULDING .A.	Complexion	FRESH		
Unit	Royal Newfoundland	Eyes	BLUE	Hair	BROWN
Address	GAMBO				
Former Trade	PAPER MILL HAND				
Enlisted at	ST. JOHN'S On SEPT. 1914	(The Board will please note how the soldier's appearance corresponds with above description.)			
Disease or Disability	Original	G.S.W. RIGHT SHOULDER, RIGHT FOOT, LEFT LEG. PERSISTENT SINUS RIGHT FOOT			

Subsequent

Present Condition (Compare with previous Board)

*The sinus over right ankle now healed. Considerable thickening below outer ankle with tendency for foot to turn over. Moves toes & ankle wearing an appliance to prevent the foot turning over.*

THE ENTIRE DISABILITY: To what extent is his capacity lessened at present for earning a livelihood in the general labour market?

*40%*

PENSIONABLE DISABILITY: To what extent is his capacity at present for earning a full livelihood in general labour market lessened by that proportion of his disability due to or incurred during service?

*40% 3 months*

Recommendation of Medical Board

Members of Board

*Clayton Macpherson.*  
Major.

*W. Peterman Major*

Approving Medical Officer.

