

FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 2179 Name James B. Grant Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>James B. Grant</u> |
| 2. What is your full Address? | 2. <u>25 Bruce Street</u>
<u>St. John's</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>23</u> Years <u>10</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Carpenter</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 |
| 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? | Corps |

I, James B. Grant 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.

J. B. Grant SIGNATURE OF RECRUIT.
R. P. Murray Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION

I, James B. Grant do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's

on this 25 day of February 1916
 Signature of Attesting Officer R. P. Murray

† CERTIFICATE OF APPROVING OFFICER.

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

Date 1916 25 Feb 1916 } Approving Officer.
 Place

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.
 ‡ Here insert the "Corps" for which the Recruit has been enlisted.

* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows:
 viz:—(Name) re-enlisted in the (Regiment) on the (Date)

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name James B. Grant
 Apparent age 23 years 10 months. Height 5 feet 10 inches
 Chest Measurement { Girth when fully expanded 40 inches
 Range of expansion 7 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Grant
25 Brine Street St. Johns | Relationship father
 Particulars as to Marriage

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


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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

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



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- | | |
|--|--|
| <p>1. What is your name?</p> <p>2. What is your full Address?</p> <p>3. Are you a British Subject?</p> <p>4. What is your age?</p> <p>5. What is your Trade or Calling?</p> <p>6. Are you Married?</p> <p>7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which?</p> <p>8. Are you willing to be vaccinated or re-vaccinated?</p> <p>9. Are you willing to be enlisted for General Service?</p> <p>10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.....</p> <p>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?</p> | <p>1. <u>James B. Grant</u></p> <p>2. <u>25 Brun Street</u>
<u>St John's</u></p> <p>3. <u>Yes</u></p> <p>4. <u>23</u> Years <u>10</u> Months</p> <p>5. <u>Carpenter</u></p> <p>6. <u>No</u></p> <p>7. <u>No</u></p> <p>8. <u>Yes</u></p> <p>9. <u>Yes</u></p> <p>10. { Name</p> <p style="padding-left: 20px;">Corps</p> <p>11. <u>Yes</u></p> |
|--|--|

I, James B. Grant 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.

J. B. Grant SIGNATURE OF RECRUIT.

R. P. Holloway Signature of Witness.

Feb. 26th

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, James B. Grant do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St John's

on this 26th day of February 1916

Signature of Attesting Officer

R. P. Holloway
Lieut.

† CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the 1st

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

Date 1916

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.

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DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Jama B. Grant
 Apparent age 23 years 10 months. Height 5 feet 10 inches
 Chest Measurement { Girth when fully expanded 40 inches
 Range of expansion 7 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Grant
25 Brine Street St Johns | Relationship Father
 Particulars as to Marriage

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

(a)	(b)	(c)	(d)
	<u>Theresa Grant Wife</u>		
		<u>66 Parsonson St.</u>	

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for living the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>26-2-16</u>									
Joined at <u>St Johns</u> on <u>February 26</u>					<u>16</u>				
<u>Died in German hands April 1917</u>									
<u>Embarked St Johns St. Julian for UK 1916</u>									<u>Embarked 1916</u>
<u>Joined Battalion 14-10-16</u>					<u>2</u>				<u>Missing 14/7</u>
<u>Lt Col 25-11-16</u>									
<u>Died in German hands 1917</u>									
<u>Buried in Douai Communal Cemetery (Douai - France)</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>19-4-17</u> (date of discharge)					<u>1</u> year	<u>53</u> days			
Pension _____									

mjm
COPY.

C.R. 2179



KOMMANDANTUR DER
KRIEGSGEFANGENENLAGER VIII A.K.
J. NO. 38345/1
Zu lfd. Nr. 785 des
Sterberegisters der Kommandantur.

TODESBESCHEINIGUNG DES KRIEGSGEFANGENEN:

1. Familienname: GRANT.
2. Vornamen (Rufname unterstreichen) James.
3. Soldat welcher feindlichen Armee: Engländer.
4. Kompagnie, Regt. Divn.: 1 Newfoundland Regt., A. Comp.
5. Inhalt der Erkennungsmarke: No. 2179.
6. Geburtstag (ev. Lebensalter nach Jahren) ?
7. Letzter Wohnort: St. John's, Newfoundland.
8. Beruf im bürgerlichen Leben: ?
9. Angaben über Familienverhältnisse: (ob verheiratet, Kinder, ledig.?, ev. Name der Eltern) Grant, St. John's, Nfld.
10. Todesort: Kriegsgefang. Laz. St. Clotilde, Douai.
11. Todeszeit: (Tag, Monat, Jahr, Stunde), 19 April 1917, 8.30 ?
12. Todesursache: *Blank*
13. Etwaige nähere Angaben über Verlauf der Krankheit oder Art des Unfalls: *Blank*
14. Ort und Bezeichnung der Grabstätte: ?

Angast
Wahn, den 17 ? 1917.

(Dienstsiegel)

Crest.

(Sgd) Illegible

Generalmajor und Kommandant.

C.R. 2179

Sept. 2nd 1919.

Mrs. Teresa Grant,
66 Bannerman St.

Dear Madam:

I am directed by the Minister of Militia to forward you the following information with reference to the gravesite of your late husband No. 2179 L/C. Jas. B. Grant, received from the Pay Record Office, London, recently. It reads as follows:-

"The undermentioned is reported by
"Graves Registration Units to be
"buried in Douai Communal Cemetery
"Douai, France."
No. 2179 L/C. J. Grant.

Again assuring you of my deepest sympathy in the loss you have sustained and in the renewed sorrow which the receipt of this must entail.

I beg to remain,
Yours sincerely,

H. G. J.
Casualty Officer.

C.R. 2179

Oct 22nd, 1918

Mrs. J. Grant,
67. Bannerman Street
C I T Y

Dear Madam:

I have your letter of 16th inst., dealing with effects of your late husband No. 2179, L/Corpl. James B. Grant; and I beg to say in reply that no effects have been received by this Department belonging to him. If anything had been recovered belonging to this soldier it would have been forwarded to this Office and we in turn would have had it forwarded to you; but as nothing has arrived so far, it is not probable that anything has been found in the way of effects.

Yours faithfully

Ident. Off.

Casualty Officer.

July 18, 1917.

Dear Madam,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that

the cause of death of No. 2179, L.Corp. James B. Grant, was due to shrapnel wounds in the head.

Yours faithfully,

Colonial Secretary.

Mrs. Olive Grant,
66 Bannerman St.

M

July 10, 1917.

Dear Sir,

I regret to inform you that the
Record Office of the First Newfoundland
Regiment, London, to-day reports No. 2179,
L.Corp. James B. Grant, who was previously
reported missing, is now reported as having
been admitted to hospital, Douai, and died in
German hands, April 19th.

Yours sympathetically,

Colonial Secretary.

Mr. John Grant,
25 Brine St.

May 11,

7

191

Sir,

Dear

I regret to have to inform you that a report has this day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that _____
 No. 2179, L. Corp. James B. Grant,

 missing April 14th.

has been posted as _____

Should any further information be received concerning him, such information will be at once communicated to you.

Yours faithfully,

Mr. John Grant,
 25 Brine St.

Colonial Secretary.

C.R. 2179

Extract of Cablegram received from Pay & Record Office,
London dated May 11, 1917.

#2179 Lance Corporal Grant.

"Missing" April 14th.

C.R. 2179

Extract of Daily Orders part 11, from Unit 1st Regt.
Regiment, 3rd Echelon, B.E.F. dated December 18, 1916.

#2179 Pte. J. Grant, A.Co.,

Appointed Lance Corporal. 23/11/16.

C.R. 2179

Extract from Nominal Roll Embarked St. John's for Overseas,
per S.S. "Sicilian" July 19, 1916.

2179 Pte. Grant J.B.

C.R. 2179

66 Bannetman Street
March 14/18

Majot W. Rendell
Lept. of Militia
of City.

Dear Sir:

I hereby acknowledge receipt of your
letter of the 2nd inst. with photograph of my
late husband Lt. James B. Grant enclosed
for which I thank you.

Yours respectfully
Feresa Grant.

2179

C.R. 2179

66 Bannetman Street
March 14/18

Major W. Rendell
Capt. of Militia
of Calif.

Dear Sir:

I hereby acknowledge receipt of your
letter of the 2nd inst. with photograph of my
late husband Lt. James B. Grant enclosed
for which I thank you.

Yours respectfully
Teresa Grant.

2179

67 Bannetman St.

October 16/18

C.R. 2179

Lieut V. Warren

Officer in charge of
"Kit Room"
Stoll Bldg.
City

Dear Sir:

Would you kindly
let me know as soon as
possible if there is any
personal belongings of my
late husband S. Corp.
James B. Grant yet

Come to hand, he died
in April 1917 and I
should think it is about
time I was in possession
of anything he might
have left.

If nothing yet
arrived would thank you
to notify me immediately
on arrival.

Thanking you for
your attention in the
matter.

Sincerely
Respectfully yours
Teresa Grant.

NEWFOUNDLAND CONTINGENT.

MEMORANDUM.

No 1051/333/R.A.C.

2179

From
PAY AND RECORD OFFICE,
59, VICTORIA STREET,
LONDON, S.W.1.
5th September, 1919

To
The Minister of Militia,
St. John's,
Newfoundland.

SUBJECT:

2179 L/OPL. JAMES GRANT,
Deceased

Reference Nos.

REPLY

Dated **Sept. 25th 1919** 191

Please return ORIGINAL and retain DUPLICATE.

I enclose German Certificate relating to the above-named H.C.O., which has been received here through the War Office.

As you will have the Ledger sheets and file of this man, it is not possible to state whether the certificate contains any new information or not.

Forwarded for your information, please.

J. B. Hudson
for Major,
Chief Staff Officer (London).

HA/TV

Certificate received with thanks. This man's already contains the information conveyed by the certificate.

A. E. Nickman

Minister of Militia.

NEWFOUNDLAND CONTINGENT.

MEMORANDUM.

NO 1051/833/R.A.C.

2179

From
PAY AND RECORD OFFICE,
58, VICTORIA STREET,
LONDON, S.W.1.
5th September, 1919

To
The Minister of Militia,
St. John's,
Newfoundland.

<p>SUBJECT :</p> <p>2179 L/OPL. JAMES GRANT, Deceased</p> <p>Reference Nos.</p>	<p>REPLY</p> <p>Dated Sept. 25th 1919 191</p> <p>Please return <u>ORIGINAL</u> and retain <u>DUPLICATE.</u></p>
<p>I enclose German Certificate relating to the above-named N.G.O., which has been received here through the War Office.</p> <p>As you will have the Ledger sheets and file of this man, it is not possible to state whether the certificate contains any new information or not.</p> <p>Forwarded for your information, please.</p> <p><i>J.B. Anderson</i> Major, Chief Staff Officer (London).</p> <p>HA/RV</p>	<p>Certificate received with thanks. This man's already contains the information conveyed by the certificate.</p> <p><i>A.E. Nickman</i></p> <p>Minister of Militia.</p>

Kriegsgefangenen-
Inspektion VIII. A.-K.

Neufornland

Nr. 8680 Pk
411 41/51 Nationalität: Engländer
8789

Familiennamen

Vorname

(bei Russen auch

Vatersvorname)

Muttersprache:

Dienstgrad:

Gef.

Truppenteil

u. Kompagnie

I. Armee
Neufornland
a. Neufornland

Gefangennahme

Ort und Tag

? Frankreich

Vorhergeh. Aufenthaltsort

Front

(Dept bzw. Gouv.)

Geburtstag und Ort

St. John

(Dept bzw. Gouv.)

Name und Adresse der
nächsten Verwandten

Grant St. John

(Ort bzw. Gouv.)

Neufornland

Beruf:

Religion:

Personal-Beschreibung

Grösse:

Gestalt:

Haar:

Bart:

Augen:

Nase:

Besondere Merkmale:

Schrapnellverletzung
Kopf

Herkunft am

aus

Unterbringung:

Gef. Lager St. Alstide

19. 4. 19

gestorben - Sonai.

N. L. 257

C.R! 2179

Extract from Nominal Roll of Mfls. Regt, Draft No.11 from
2nd BDepot, to 1st Bn. B.E.F. Embarked Southampton, 3-10-16.

2179 Pte. J. Grant.

C.R. 2179

James V. Grant

was attested for General

Service with the NEWFOUNDLAND REGIMENT ON February 26th 1906

Regimental No. 2179

was allotted to Peter J.V. Grant

AUTHORITY:

Recrd Ledger,

Dept. of Militia.

March 25th 1919

J. Grant

C.R.

2119

P & R O

ACK ^d dated	/ /	No. IN
Received	/ /	
REPLY dated	/ /	
Received	/ /	
LAST Ref No.		
NEXT " "		

11051/833/R.A.C.

The Minister of Militia,
St. John's,
Newfoundland.

5th September, 9

3179 L/OPL. JAMES GRANT,
Deceased

I enclose German Certificate relating to the above-named N.C.O., which has been received here through the War Office.

As you will have the Ledger sheets and file of this man, it is not possible to state whether the certificate contains any new information or not.

Forwarded for your information, please.

Major,
Chief Staff Officer (London).

HA/MV

NEWFOUNDLAND CONTINGENT.

MEMORANDUM.

No. 11051/633/R.&C. **C.R. 2179**

From
PAY AND RECORD OFFICE,
58, VICTORIA STREET,
LONDON, S.W.1.
5th September, 1919.

To
The Minister of Militia,
St. John's,
Newfoundland.

SUBJECT:

2179 L/OPL. JAMES GRANT,
Deceased

Reference Nos.

REPLY

Dated **Sept. 25th 1919**

Please return ORIGINAL and retain DUPLICATE.

I enclose German Certificate relating to the above-named N.C.O., which has been received here through the War Office.

As you will have the Ledger sheets and file of this man, it is not possible to state whether the certificate contains any new information or not.

Forwarded for your information, please.

J. B. [Signature]
Major,
Chief Staff Officer (London).

HA/NV

Certificate received with thanks. This man's already contains the information conveyed by the certificate.

A. E. [Signature]

Minister of Militia.



J B Grant

2179

P. F. R. P

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

MEDICAL HISTORY

Surname Grant OF Christian Name James B.

Table I.—GENERAL TABLE.

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY	
	Right	Left	Right	Left
Examined	on <u>24</u> day of <u>February</u> 191 <u>6</u> at <u>St. John's, Hfld.</u>		on _____ day of _____	191 _____
Declared Age	<u>24</u> years		_____ years	_____ days
Trade or Occupation	_____		_____	_____
Height	<u>5</u> feet <u>10</u> inches		_____ feet	_____ inches
Weight	<u>154</u> lbs.		_____ lbs.	_____ lbs.
Chest Measurement	Girth when fully expanded... <u>40</u> inches		_____ inches	_____ inches
	Range of expansion... <u>7</u> inches		_____ inches	_____ inches
Physical Development	_____		_____	_____
Vaccination Marks	Arm	_____	_____	_____
	Number	_____	_____	_____
When Vaccinated	_____		_____	_____
Vision	R.E.—V= <u>4/6</u>		R.E.—V=_____	_____
	L.E.—V= <u>6/6</u>		L.E.—V=_____	_____
(a) Marks indicating congenital peculiarities or previous disease	(a) _____		(a) _____	_____
	(b) _____		(b) _____	_____
(b) Slight defects but not sufficient to Cause Rejection	_____		_____	_____
Approved by (Signature)	<u>Samuel Paterson</u>		_____	_____
(Rank)	<u>Capt</u>		_____	_____
	at <u>St. John's</u>		at _____	_____
Enlisted	on <u>24</u> day of <u>Feb</u> 191 <u>6</u>		on _____ day of _____	191 _____
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>1st Hfld. Reg. 2179</u>		_____	_____
Transferred to	_____		_____	_____
Became non-effective by	_____		_____	_____
(Signature)	on _____ day of _____ 191 _____		on _____ day of _____	191 _____
(Rank)	_____		_____	_____

Stammlager: _____

Principal-camp: _____

oder

or

Lazarett: St. Glotwi, Douai

Hospital: _____

Datum der Ausfertigung:

Date:

Tag: 20 Monat: IV Jahr: 17
Day: _____ Month: _____ Year: _____

Zuname: _____

Surname: _____

Grant

Vorname: _____

Christian name: _____

James B.

Rang: _____

Rank: _____

Lance corporal

Reg. oder Korps: _____

Reg. or Corps: _____

I New Fossilaw

Reg. Nr. _____

Reg. Nr.: _____

Komp.: _____

Komp.: _____

A

Identifikationsmarke Nr.:

Number of identification disc: _____

2179

Gefangennahme: _____

Capture: _____

France

Ort: _____

Place: _____

Datum: _____

Date: _____

Ob verwundet,

Whether wounded,

Bezeichnung der Wunde:

Description of wound:

hit by shrapnel on the head

Geburt: _____

Birth: _____

St. Johns

Ort: _____

Place: _____

New Fossilaw

Datum: _____

Date: _____

Heimatort: _____

Home place: _____

St. Johns

Adresse des nächsten Verwandten:

Address of next-of-kin: _____

Der Chefarzt
St. Glotwi
Douai

TELEPHONE: GERRARD 9910 & 9911

TELEGRAMS & CABLES: "SOCARECRO, WESTRAND, LONDON."



CANADIAN RED CROSS SOCIETY,
PRISONERS OF WAR DEPARTMENT,

14/16, COCKSPUR STREET, LONDON, S.W. 1.
4th Oct. 1917.

Officer i/c Records,
Newfoundland Record Office,
58, Victoria St. S.W.1.

Dear Sir,

I enclose Sheet from a German List, on which is reported the death of James GRANT, 2179, 1st Newfoundland Regiment.

Yours truly,

S M Bulkeley

No news information
HSS

NOTENLISTE

- | | | |
|------------------|---------|---|
| <u>FAYONE</u> | George | Sold. 2. S. Staffs Rgt. 2. Div. 6. Brig. D. Komp. - Erk. Mrk. 40347. - geb. 10. 6. 1896. Wohnort: Chesle. - verst. 19. 4. 17 im Gef. Laz. zu <u>C A M B R A I</u> (Cambrai-Angere) Gräb. 061. - Akts. 15348/W. 5beerd. Kriegfrdh. d. selbst |
| <u>GAHM</u> | William | Sold. 12. Royal Warwick. Rgt. B. Komp. Erk. Mrk. 36516. - geb. 1891. - Wohnort. Denbury, Oxford. - verst. 3. 5. 17 im Gef. Laz. Museum zu <u>T O U R N A I</u> beerd. Friedhof. d. selbst. Gräb. 330 Akts. 15348/W. |
| <u>GOODWIN</u> | Edward | Sold. 15. Royal Scots Rgt. B. Komp. Erk. Mrk. 17337. - geb. 1. 3. 1895 verst. 1. 5. 17 im Kriegsgef. Laz. St. Clotilde zu <u>D o u a i</u> - beerd. Friedhof. d. selbst. Gräb mit Kreuz u. Namen. - Akts. 15348/W. |
| <u>GRANT</u> | | Sold. 1. Newfoundland Rgt. A. Komp. Erk. Mrk. 2179. - Wohnort: St. Johns Newfoundland. - verst. 19. 4. 17 im Kriegsgef. Laz. St. Clotilde zu <u>D o u a i</u> . - beerd. Friedhof d. selbst Gräb. mit Kreuz u. Namen. - Akts. 15348/W. |
| <u>ROBERT</u> | Thomas | Sold. Rifles Brigade, C. Komp. Erk. Mrk. 23318. - geb. 8. 7. 1883. Wohnort: Hollowy, London. - verst. 15. 5. 17 im Kriegsgef. zu <u>L i l l e</u> beerd. Friedhof. Tournai. Gräb. 354. Akts. 15348/W. |
| <u>HOWETT</u> | V. S. | Sold. - Essex Rgt. - Erk. Mrk. 31262 geb. zu? Mehrere Angaben fehlen. - verst. 19. 4. 17 im Kriegsgef. Laz. St. Clotilde zu <u>D o u a i</u> . - beerd. Friedhof. d. selbst. Gräb mit Kreuz u. Namen. - Akts. 15348/W. |
| <u>HINGGIEFF</u> | Alex | Sold. 2. Leicestershire Fts. Rgt. B. Komp. Erk. Mrk. 20106. - geb. 4. 3. 1898. - Wohnort: Liverpool. - verst. 30. 5. 17 im Gef. Laz. Museum zu <u>T o u r n a i</u> beerd. Friedhof. d. selbst. Gräb. 384. Akts. 15348/W. |
| <u>HURELL</u> | George | Sold. Essex Rgt. 1. W. Komp. - Erk. Mrk. 28805. - geb. 28. 7. 1883. - Wohnort. Bures. - verst. 7. 5. 17 im Kriegsgef. Laz. St. Clotilde zu <u>D o u a i</u> beerd. Friedhof. d. selbst. Gräb. mit Kreuz u. Namen. - Akts. 15348/W. |



Effects: please note and file
H.A.S.

17¹⁰/₁₇

4/

See Cas. Repr. 2586

Swiss Bank Corporation.

BASLE - ZURICH - ST GALL - GENEVA - LAUSANNE - LONDON.

WEST END BRANCH: 111 REGENT STREET, WATERLOO PLACE, LONDON, S. W.

ES
CAPITAL ISSUED & FULLY PAID-UP £3,200,000.
RESERVES £1,110,000.

13, Lothbury.

London, E.C.2.

15th Oct. 1917

The Paymaster & Officer i/c Records,
Newfoundland Contingent,
58, Victoria Street. S.W. I.

Dear Sir,

Missing Soldiers.

We beg to inform you that our Geneva Office
have received the following letter from the Queen Victoria
Jubilee Association :

- Referring to the list of missing men of the 1st Newfoundland Regiment published in our circular No. 29.- we beg to say that we received from the Frankfurt Red Cross the following statement regarding Lance Corporal J.B. Grant, No. 2179.- born 26th February 1896.

This soldier was taken prisoner on the 15th April 1917 and in consequence of shrapnel wound in the head, died in the Lazaretto St. Clothilde Douai, on the 19th April 1917. He was buried in the cemetery there, his grave being marked with a cross bearing his name.

He was unconscious when brought to the Hospital and died without regaining consciousness. His belongings were sent to the Succession Office of the German Ministry of War in Berlin, from where no doubt they will be forwarded to England."

which kindly note.

Yours faithfully,

SWISS BANK CORPORATION.

5735

10 OCT 1917

Rec'd.

Ans'd.

File No.

PAY LIST.

to

191 . Voucher No.

NGN EFFECTIVE ACCOUNT.

Regiment or corps

No. 2179 ✓

Rank

Newfoundland
Private

Name

Grant J.B. ✓

Died (a)

enlisted at Germany

on the

19th of April

1917.

Deserted at

on the

of

191 .

I Certify to the correctness of above in every particular.

Commanding Squadron, Troop,
Battery or Company.

STATEMENT OF ACCOUNT.

Form 1.

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month	1	12	7
	Cash issues (Date of each issue to be stated)				Pay days at from to	2	16	10
	£ s. d.				Proficiency, Service or good conduct pay days at from to			
	191				Messing allowance days at from to			
	"				Kit allowance			
	"				Amount produced by the sale of Effects from Form 2			
	Consolidated stoppage				Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
					Deferred Pay or Gratuity			
	Balance due by the Paymaster			2 16 10 ✓	Balance due to the Paymaster	2	16	10 ✓
	£			1	£			1

CHECKED.

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ _____ is correctly chargeable against the Public (b).

Dated at

this

day of

191

Paymaster.

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B. 2090 or Army Form O. 1815.

(b) Words in Italics to be struck out when there is no debtor balance.

Forwarded with the Compliments of the Secretary

of the War Office.



War Office,

Finbury Court.
May 3rd 1919. *Finbury Tavern -*

W7522—WD2135 20,000 11/18 HWV(P907)

Kommandantur der
Kriegsgefangenenlager VIII A. K.

J. № 36345 11

Zu lfd. Nr. 785 des
Sterberegisters der Kommandantur.

Copy to mofm 797
12/6/19 L.

Todesbescheinigung des Kriegsgefangenen:

1. Familienname:
2. Vornamen:
(Rufname unterstreichen.)
3. Soldat welcher feindlichen
Armee:
4. Kompagnie, Regiment, Division:
5. Inhalt der Erkennungsmarke:
6. Geburtstag:
(ev. Lebensalter nach Jahren.)
7. Letzter Wohnort:
8. Beruf im bürgerlichen Leben:
9. Angaben über Familienverhält-
nisse: (ob verheiratet, Kinder, ledig?,
ev. Name der Eltern.)
10. Todesort:
11. Todeszeit: (Tag, Monat, Jahr, Stunde)
12. Todesursache:
(Durch welchen Arzt festgestellt.)
13. Etwaige nähere Angaben über
Verlauf der Krankheit oder Art
des Unfalls:
14. Ort und Bezeichnung der
Grabstätte:

Grant,
James
Engländer.
F. Kerrfrindland Regt. A. Comp.
Nr. 2139.
unbekannt.
St. Johns, Kerrfrindland.
unbekannt.
Grant, St. Johns.
Kerrfrindland.
Kriegsgefang. Laz. "St. Clotilde"
19. April 1917 8¹⁰ vorm. Douai.
Wien, D. R.
ii. Humm. R. ? August

Wahn, den 17. August 1917.

(Dienstiegel.)



Wahn

Generalmajor und Kommandant.

This information already received
5/5/19 L.

COPY.



KOMMANDANTUR DER
KRIEGSGEFANGENENLAGER VIII A.K.
J. NO. 56345/1
Zu lfde. Nr. 785 des
Sterberegisters der Kommandantur.

TODESBESCHEINIGUNG DES KRIEGSGEFANGENEN:

1. Familienname: GRANT.
 2. Vornamen (Rufname unterstreichen) James.
 3. Soldat welcher feindlichen Armees: Engländer.
 4. Kompagnie, Regt. Divn.: 1 Newfoundland Regt., A. Comp.
 5. Inhalt der Erkennungsmarke: No. 2179.
 6. Geburtstag (ev. Lebensalter nach Jahren) ?
 7. Letzter Wohnort: St. John's, Newfoundland.
 8. Beruf im bürgerlichen Leben: ?
 9. Angaben über Familienverhältnisse: (ob verheiratet, Kinder, ledig.?, ev. Name der Eltern) Grant, St. John's, Nfld.
 10. Todesort: Kriegsgefang. Laz. St. Clotilde, Douai.
 11. Todeszeit: (Tag, Monat, Jahr, Stunde), 19 April 1917, 8.30 ?
 12. Todesursache: *Blank*
 13. Etwaige nähere Angaben über Verlauf der Krankheit oder Art des Unfalls: *Blank*
 14. Ort und Bezeichnung der Grabstätte: ?
- Wahn, den 17 *May* ? 1917.

(Dienstsiegel)

Crest.

(Sgd) Illegible

Generalmajor und Kommandant.

Grant, J. B.

2179

Ray sept

Casualty Form—Active Service.

Regiment or Corps Newfoundland

Rank Platoon Leader

Name Grant Jas. D.

Regimental No. 2179

Enlisted (at) 16.2.16

Terms of Service (at) Sancti Spiritus Service reckons from (a) _____

Date of promotion to present rank _____

Date of appointment to lance rank 23.11.16

Numerical position on roll of N.C.Os. _____

Extended _____

Re-engaged _____

Qualification (b) _____



CERTIFIED TRUE COPY

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 83, or in other official documents. The authority to be stated in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 86, or other official documents.
Date	From whom received				
		<u>Comdr Southampton</u>		<u>3.10.16</u>	
		<u>Comdr France</u>		<u>4.10.16</u>	
		<u>Joined Battalion</u>		<u>14.10.16</u>	
	<u>Thick</u>	<u>1st Lt. France</u>	<u>France</u>	<u>23.11.16</u>	<u>O/S 10 46 B.</u>
<u>15.4.17</u>	<u>O.C. Co.</u>	<u>1st Lt. Battalion</u>	<u>France</u>	<u>23.11.17</u>	<u>B 213</u>
<u>9.7.17</u>	<u>St. John's</u>	<u>Missing</u>	<u>France</u>	<u>14.4.17</u>	
		<u>Prisoner of War in Germany</u>		<u>14.4.17</u>	<u>Official German list forwarded by Netherlands Legation Antwerp 14.10.17</u>
		<u>Captured at Munchy</u>		<u>14.4.17</u>	
		<u>Sold. of Wounds at Douai</u>		<u>17.4.17</u>	
		<u>Sgt S. Lookill</u>			
		<u>Platoon Leader</u>			

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such engagements or enlistments will be entered.
 (b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

PAY LIST.

to

191

Voucher No.

Army Form O. 1625.

NON-EFFECTIVE ACCOUNT.

Regiment or corps *1st Newfoundland*
 No. *2179* Rank *Private* Name *Grant*
 Died (a) *Intestate* at *Germany* on the *19th* of *April* 1917.
 Deserted at _____ on the _____ of _____ 1917.

I Certify to the correctness of above in every particular.

(Commanding Squadron, Troop,
 Battery or Company.)

STATEMENT OF ACCOUNT.

Form I.

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month <i>1914/17</i>	<i>2</i>	<i>16</i>	<i>70</i>
	Cash issues (Date of each issue to be stated)				Pay days at _____ from _____ to _____			
		£	s.	d.	Proficiency, Service or good conduct pay days at _____ from _____ to _____			
	191				Messing allowance days at _____			
	"				from _____ to _____			
	"				Kit allowance			
					Amount produced by the sale of Effects from _____			
	Consolidated stoppage				<p style="text-align: center;"><i>Checked</i> This account is in accordance with information received at the Pay & Record Office to <i>23/11/17</i> and is therefore subject to amendment if, and as may be found necessary.</p>			
	Balance due by the Paymaster	<i>2</i>	<i>16</i>	<i>10</i>	Balance due to the Paymaster			
		£				<i>2</i>	<i>16</i>	<i>10</i>

I hereby Certify that the above account is correct in every particular, and that the

debtor balance of _____ is correctly chargeable against the Public.

Dated at _____ day of _____ 1917

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already attached with Army Form B. 2090 or Army Form O. 1816.
 (b) Words in Italics to be struck out when there is no debtor balance.

PAY LIST

MONTHLY PAYROLL STATEMENT

Period: 10/1/17 to 10/31/17

Employee Name: [Illegible]
Job Title: [Illegible]
Department: [Illegible]

Subject to the provisions of orders in every particular.

(Company Name, Dept., Building, City, State)

STATEMENT OF EARNINGS

(Page 1)

Item	Rate	Days	Amount	Item	Rate	Days	Amount
Regular Pay				Regular Pay			
Over Time				Over Time			
Shift Differential				Shift Differential			
Standby Pay				Standby Pay			
Travel Pay				Travel Pay			
Commuting Allowance				Commuting Allowance			
Medical Insurance				Medical Insurance			
Life Insurance				Life Insurance			
Retirement				Retirement			
Union Dues				Union Dues			
Charitable Contribution				Charitable Contribution			
Other Deductions				Other Deductions			
Total Earnings			216.00	Total Earnings			216.00
Total Deductions			0.00	Total Deductions			0.00
Net Pay			216.00	Net Pay			216.00

Checked
 This account is in accordance with information received at the Pay & Record Office to 23/11/17 and is therefore subject to amendment if, and as may be found necessary.

Subject to the provisions of orders in every particular, and subject to the provisions of the following schedule of deductions.

[Signature]

PAY LIST.

to

191 Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps *1st Newfoundland*
 No. *2179* Rank *Private* Name *Grant J. B.*
 Died ^(a) *intestate* at *Germany* on the *17th* of *April* 191*7*.
 Departed at _____ on the _____ of _____ 191*7*.

I Certify to the correctness of above in every particular.

 Commanding Squadron, Troop,
 Battery or Company.

STATEMENT OF ACCOUNT.

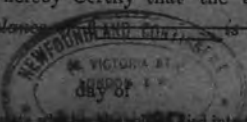
Form 1.

Date	Dr.	£	s.	d.	Cr.	£	s.	d.	
	Balance Dr. last month				Balance Cr. last month <i>19/4/17</i>	2	16	10	
	Cash issues (Date of each issue to be stated)				Pay days at _____ from _____ to _____				
		£	s.	d.	Proficiency, Service or good conduct pay days at _____ from _____ to _____				
	191				Messing allowance _____ days at _____				
	"				from _____ to _____				
	"				Kit allowance				
	"				Amount produced by the sale of Effects from Form 2				
					Savings Bank balance, including _____ (if no balance, to be so stated)				
					Pay or Gratuity				
	Balance due by the Paymaster	2	16	10	Balance due to the Paymaster				
		£	2	16	10				
						£	2	16	10

This account is ^{checked} in accordance with information received at the Pay & Record Office to *23/11/17* and is therefore subject to amendment if, and as may be found necessary.

I hereby Certify that the above account is correct in every particular, and that the ~~debit balance~~ ^{amount} is correctly chargeable against the ~~Public~~ ^{NEWFOUNDLAND CONTINGENT}.

Dated at _____
 this _____



191

J. H. Marshall

(a) Here state whether the deceased died intestate, or whether he left a Will. In the latter case refer to the name of the executor, administrator, or other person named in the Will, and to the date when the account was rendered.
 (b) Words in italics to be struck out when there is no debtor balance.

PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps *1st Newfoundland*
 No. *2179* Rank *Private* Name *Grant J. B.*
 Died (a) *Intestate* at *Germany* on the *19th* of *April* 191*7*.
 Deserted at _____ on the _____ of _____ 191*7*.

I Certify to the correctness of above in every particular.

{ Commanding Squadron, Troop,
Battery or Company.

STATEMENT OF ACCOUNT.

Form 1.

Date	Dr.	£	s.	d.	Cr.	£	s.	d.	
	Balance Dr. last month				Balance Cr. last month <i>1914/17</i>	2	16	10	
	Cash issues (Date of each issue to be stated)				Pay days at _____ from _____ to _____				
		£	s.	d.	Proficiency, Service or good conduct pay days at _____ from _____ to _____				
	191				Messing allowance days at _____ from _____ to _____				
	"				Kit allowance				
	"				Amount produced by the sale of Effects from Form 2				
					Savings Bank balance, including est (if no balance, to be so stated)				
					ay or Gratuity				
	Balance due by the Paymaster	2	16	10	Balance due to the Paymaster				
		£	2	16		£	2	16	10

This account is ^{checked} in accordance with information received at the Pay & Record Office to *23/11/17* and is therefore subject to amendment if, and as may be found necessary.

I hereby Certify that the above account is correct in every particular, ~~and that the debtor balance of _____ is correctly chargeable against the Public.~~

Dated at _____ this _____ day of _____



191 *J. W. Marshall* Paymaster

- (a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B, 2090 or Army Form O. 1815.
- (b) Words in Italic to be struck out when there is no debtor balance.

July 4th. 1918.

The Deputy Minister of Justice,
C i t y.

Dear Sir:

I beg to acknowledge receipt of your letter of July 3rd. authorizing to pay out the estate of No.2179,L/C. J.B.Grant, for which I thank you.

Yours truly,

For Paymaster

April 1st. 1919

Mrs. Theresa Grant,
66, Bannerman Street,
C i t y.

Dear Madam:

With reference to your letter of March 26th
I enclose herewith cheque for \$262.67, being the amount of Separation
Allowance due you, from the date of your husband's enlistment up to
the date of his death.

Yours truly,

Lieut
For Paymaster

66 Bannetman Street

Tuesday

March 25/19

(2179?)

4398

To:-

Capt. J. M. Howley
Paymaster
Royal Rifled Regt.
City.

Paymaster
Passed to you please
for necessary action
J.M.H.

Dear Sir:-

Not quite understanding what is to be done before the money due the dependants of the deceased soldiers is paid

I would appreciate if you will kindly send me by return mail particulars of any papers I may have to fill out. (if any are necessary).

I understood that payments

were to have been made on it about
March 1st. but to the time of writing I
have received no notification of any
application to be made although I
hear that this has to be done in order
to obtain the money due you.

Hoping to hear from you by
return mail.

I remain,

Sincerely yours,

Peterson Grant



This Form is to be used in connection with Pamph.

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

Examination of *James B Grant*

aged *24 yrs.* conducted at *C. L. B.*

Date: *Feb. 24 1916* Recruiting officer:

NO. OF TEST	FINDING
1	no
2	no
3	no
4	no
5	no
6	no
7	yes
8	yes
9	n no
10	n
11	n
12	n
13	n
14	n
15	n
16	n
17	n
18	n
19	n 76 lb
20	n
21	n
22	n
23	n
24	n
25	n
26	n
27	n
28	n
29	n
30	n
31	n
32	n
33	no.
34	5' 10
35	154 lbs.
36	33-40
37	\$10.50 week
38	Father John Grant - 25 Brien St.
39	nobody.

30 infant February 26, 1916

2179

JH

Signature of Medical Examiner: *D.W. Burder*

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

The Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

NO STAMP REQUIRED

Dept. of Militia,
St. John's.

Rec. Sept. 6/21... 1921

I beg to acknowledge receipt of
Memorial Plaque issued in respect of services of
the late No. 2179 Rank Lt. L. G. B.
Name James B. Grant
Royal Newfoundland Regt.

..... Teresa Grant (Sgd.)

..... Widow Relationship.
new
Address 14 Pilots Hill City

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.



Fold Here

Sept. 1 1921.

The accompanying **Victory Medal** and/or **British War Medal**

is/are forwarded herewith to

Mrs. Olive Grant (W)

in respect of his service as No. 2179 Rank Pte.

Name J.B. Grant (D) Royal Nfld. Regt.
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received

Sept. 6/21

Signature

Teressa Grant-Widow

Date

Sept. 6/21

new
Address

14 Pilots Hill City

[P.T.O.]

