



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3162 Name Arthur Sullivan Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---|
| 1. What is your name? | 1. <u>Arthur Sullivan</u> |
| 2. What is your full Address? | 2. <u>212 Seagram Place</u>
<u>St John</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>19</u> Years |
| 5. What is your Trade or Calling? | 5. <u>Labourer</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> |

FOR THE DURATION OF THE WAR

I, Arthur Sullivan 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.

Arthur Sullivan SIGNATURE OF RECRUIT.

Oct 19/16

Arthur Sullivan Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Arthur Sullivan 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 on this 19 day of Oct 1916

Signature of Attesting Officer Charles E. ... Capt

†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.....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 Archie G. Guller

Apparent age 19 years 7 months. Height 5 feet 7 1/2 inches

Chest Measurement { Girth when fully expanded 39 inches
 Range of expansion 31 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs. Leana ~~Smith~~ ^{Chas.} Roseworthy
475 S. 1st St. Pease | 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	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									
" " " Pensions " _____ [" "] _____ " _____ "									



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3162 Name Arthur Sullivan Corps Infantry

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Arthur Sullivan
2. What is your full Address? 2. St. Joseph's Place
St. John's
3. Are you a British Subject? 3. yes
4. What is your age? 4. 19 Years — Months
5. What is your Trade or Calling? 5. Labourer
6. Are you Married? 6. no
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. no
8. Are you willing to be vaccinated or re-vaccinated? 8. yes
9. Are you willing to be enlisted for General Service? 9. yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?..... 10. { Name
Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? 11. yes

I, Arthur Sullivan 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.

Arthur Sullivan SIGNATURE OF RECRUIT.

Oct 19/16

Arthur Sullivan
Arthur Sullivan Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Arthur Sullivan 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 19 day of Oct 1916.

Signature of Attesting Officer Charles O'Connell Capt

†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 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.

* 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 Archie J. Fuller

Apparent age 19 years - months. Height 5 feet 7 1/2 inches

Chest Measurement { Girth when fully expanded 39 inches
Range of expansion 37 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mr. William J. Fuller
412 W. 1st St. St. Louis, Mo. | 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	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>19-10-16</u>									
Joined at <u>St. Johns</u> on <u>October 19th 16</u>									
<u>Discharged. St. Johns. Med Aug 31/18</u>									
<u>Embarked at St. Charles S. F. Koyel to Windsor N.S. 31st 7.</u>									
<u>Disembarked Lower 27-9-17. Employed A.P. at 29th 18. Rm and transferred to England 9-10-17. Attended 11-day depot 11-10-17. S. Koyel and law for discharge 31-7-18. Arrived Koyel and law. 4-8-18</u>									
<u>Discharged Medically Dept 31-8-18</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 31-8-18 (date of discharge) 1 years 317 days

" " " Pensions " " " " " " 1 " " "



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

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

Examination of

Arthur Sullivan

aged

19 yrs

conducted at

Det B

Date:

Oct 19/16

Recruiting Officer:

NO OF TEST

FINDING

1 *no*

2 *no*

3 *no*

4 *no*

5 *no*

6 *no*

7 *yes*

8 *yes*

9 *no + up*

10 *n*

11 *n*

12 *n*

13 *teeth to be attended to.*

216

14 *n*

15 *n*

16 *n*

17 *n*

18 *n*

19 *6/16 Both.*

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 *yes 3 years ago, left arm, 2 scars,*

34 *5 7/8*

35 *136 lbs*

36 *36-39*

37 *\$14 per week*

38 *mother Mrs. Susan Mrs. honorable Professor Place*

39 *mother*

In duplicate 13.

Signature of Medical Examiner:

J. W. Benson
Lieut

Copy

This space to be left blank for the Chelsea Number.

[Blank box for Chelsea Number]



Proceedings on Discharge

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

No. <u>3162</u>	Army Rank <u>Private</u>
Name <u>Gulliver Arthur</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
Corps <u>THE ROYAL NEWFOUNDLAND REGT.</u>	
Battalion, Battery, Company, Depot, &c. _____ <small>(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.)</small>	
Date of discharge <u>August 31st 1918</u>	
Place of discharge <u>St. John's Nfld.</u>	
1. <u>Description at the time of discharge.</u>	
Age <u>21</u> years _____ months Height <u>5</u> feet <u>7 1/2</u> inches Chest measure { girth when fully expanded _____ ins. range of expansion _____ ins. Complexion <u>fair</u> Eyes <u>blue</u> Hair <u>dark</u> Trade <u>Labourer</u> Intended place of residence <u>24 Jessier Place</u> <small>(To be given as fully as practicable)</small> <u>St. John's</u>	Descriptive marks.
2. The above-named man is discharged in consequence of <u>being no longer physically fit for war service</u>	
<small>(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.)</small>	
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. 2087* 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.

* Strike out if not applicable.

5. He is in possession of the following number of G.C. badgers (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 _____ Battn. _____ 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 nfld. Arthur Gulliver (Signature of Soldier.)

(Date) Sept 7th - 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) _____

Signature _____

(Date) _____

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

by
a. Gullier

mark
E. Walsh

Casualty Form - Active Service.

Regiment or Corps *1st Nfld Regiment*
 Rank *Pte* Surname *Gulliver* Christian Name *Arthur*
 Religion *Church of England* Age on Enlistment *19* years *—* months.
 Enlisted (a) *St John's* Terms of Service (a) *Duration* Service reckons from (a) *19.10.16*
 Date of promotion to present rank Date of appointment to lance rank
 Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and Rate
 Occupation *Laborer* Signature of Officer *W. H. P. [Signature]*

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					
<div style="border: 1px solid black; padding: 5px;"> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">COPIES SENT</p> <p>DATE 26 JUL 1918</p> <p>To <i>W. H. P.</i></p> <p>M. of M. <i>10-10-17 29 I.M.D</i></p> <p>C.C. (par. 14) <i>Transferred to England</i></p> <p>" 24 p. B. <i>Classified "P.B."</i></p> </div>			Embarked <i>Shampton 22.9.17</i>		
			Disembarked... <i>Roman 27.9.17</i>		
			Joined Battalion		
					<i>9-10-17 Aust 1858/277/24-7-16</i>



W. H. P.
for
 MAJOR
 Infantry
 6. H. O. 3rd

(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.



Army Form B. 103.

Regimental Number 3162

Casualty Form—Active Service.

Regiment or Corps **THE ROYAL NEWFOUNDLAND REGT.**

Rank Pte Surname Julliver Christian Name Arthur

Religion Church of England Age on Enlistment 19 years months

Enlisted (a) St Johns Terms of Service (a) Duration Service reckons from (a) 19. 10. 16

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

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

Occupation Labourer Sgt C. S. Frost Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
			Embarked <u>St Hampton</u>	<u>22.9.17</u>	
			Disembarked... <u>Rouen</u>	<u>27.9.17</u>	
			<u>Joined Battalion</u>		
<u>10-10-17</u>	<u>29 J. B. D.</u>	<u>Transferred to England</u>			
		<u>Classified "P B"</u>	<u>9-10-17</u>	<u>Aut 1858/272/24.7.16</u>	

H.A.B

Sgt.
Nearly 2/21
for major
3. 1/2 no!
Infantry Section
3rd Echelon
9.11.17

(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, Shoing-Smith, &c.

Medical Report on an Invalid.

Station Hazelton Down Camp
 Date 9-7-18

1. Unit 2nd Batt Royal Newfoundland
 2. Regimental No. 3162
 3. Rank Private
 4. Name GULLIVER ARTHUR
 5. Age last birthday 20 years
 6. Enlisted { on October 1916
 at St. John's, Newfoundland
7. Former Trade } Labourer
 or Occupation }
 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 12.)

D. A. H.

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TO	NO	DATE
M. OF M.	<u>12004/08</u>	<u>26 JUL 1918</u>
O.C. 1st. BN.		
" 2ND. BN.	<u>With</u>	

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. Oct. 1917.
10. Place of origin of disability. Rouen France.
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.
He states that he did not feel fit whilst with the recruit corp; reports such continuously; he however carried on and went to France with his corp in Oct. 1917 whilst at Rouen he was wounded and sent back to England treated P.B. suffering from D.A.H.
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).
Aggravated by military service
- (b) constitutional or hereditary, and not aggravated by service during the present war.
na.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.
na.

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.

Since regaining dept. he was put on physical exercises with view to strengthening his dent muscles. After three months' treatment he still has a M. Reduplic. & compressed but closed. M₂ closed. R 184. after exertion. He will be fit to regain R² baltn.

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

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

na.

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

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

na.

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

na.

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

na.

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?

na.

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.

na.

20. Do you recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

Discharge as permanently unfit for Active service

PPX

Capt R.A. M.C.

Officer in medical charge of case.

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

Station _____

Officer in charge of Hospital.

Date _____

*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.

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

MEDICAL HISTORY

Surname Gulliver OF Christian Name Arthur

Table I.—GENERAL TABLE.



Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	19	Oct		
	at	St John's N.F.	at	
Declared Age	19	years		years
Trade or Occupation	Labourer			
Height	5 feet	7 1/2 inches		
Weight	136	lbs.		
Chest Measurement	Grith when fully expanded ...		inches	
	Range of Expansion ..		inches	
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	2 Scars			
When Vaccinated	2 years ago			
Vision	R.E.—V=	6/6	R.E.—V=	
	L.E.—V=	6/6	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to Cause rejection	(b)		(b)	
Approved by (Signature)	Lanmont Peterson			
(Rank)	Major			
	Medical Officer.		Medical Officer.	
Enlisted	at	St John's N.F.	at	
	on	19 day of Oct	on	day of 191
Joined on Enlistment	31 st	Dec		
	REG. No. 3162			
Transferred to				
Became non-effective by				
	on	day of 191	on	day of 191
(Signature)				
(Rank)				

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To	feet No.	DATE
M. OF M.	1200/108	26 JUL 1917
O.C. 1ST. BN.		
" 2ND. BN.		



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
20-10-16	Vaccinated SP
7-11-16	SP
14-11-16	T.A.B. SP
20-11-16	3 SP.
6-7-18	Boarded at Hazely Down. Market F. Col. <div style="text-align: right; margin-right: 50px;"> Major Rame Mr. Rame Capt Rame </div>

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
S.S. Florigel	Feb 21	Feb 27			
Windsor R.	Feb 27				



Descriptive Return of a Soldier Discharged on Account of Disability

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

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

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

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

Name in full *Arthur Gullives*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *3162*
 Intended address *Sessies Place*
 Height on discharge *5* Feet *7 1/2*
 Color of hair on discharge *Dark*
 Complexion *Fair*
 Color of eye *Blue*
 Descriptive Marks
 Figure on discharge *Medium*
 Christian name of Father *—*
 Christian name of Mother *Diana*
 Wife's maiden name in full *—*
 Date and place of marriage *—*
 Christian names of children *—*

Place and date of soldier's birth. *St Johns 1897*
 Nature and locality of civil employment required

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full) *Arthur Gullives*
Rank

Station *St Johns* Date *Aug 15th / 18* (Rank) *Plc*

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.

St Warden
 Medical Officer i/c Hospital,
 Unit, or Command Depot.

Station *St Johns* Date *Aug 16 / 18*

*Witness
D. Barker*

Signatures

The space to be left blank for the Chelsea Number.



Proceedings on Discharge.

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

No. 3162 Army Rank Private

Name Gulhaies Arthur
 (The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps THE ROYAL NEWFOUNDLAND REGT.

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 20 years _____ months

Height _____ feet _____ inches

Chest measurement { girth when fully expanded _____ ins.
 range of expansion _____ ins.

Complexion _____

Eyes _____

Hair _____

Trade _____

Intended place of residence _____
 (To be given as fully as practicable)

Descriptive marks.

COPIES SENT		
TO	NO.	DATE
M. of M.	<u>12009/108</u>	<u>26 JUL 1918</u>
G.C. 1st BN.		
G.C. 2nd BN.		

(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. 2087* 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.

C.R. 3162

Extract from Daily Orders Part 11 Unit The Royal Hfld. Rgtt.,
St. John's, Sept. 14th, 1918.

3162 Pte. A. Gulliver,

Admitted to H & M Hospital Conv. 31-8-18.

C.R. 3162

Extract from Daily Orders Part 11 Unit The Royal Nfld.

Regt. St. John's 3-9-18.

3162 Pte. Arthur Gulliver.

Having been found medically unfit is struck off the
strength from 31-8-18.

C.R. 3162

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

3162 Pte. A. Gulliver,

Discharged 29 - 8 - 18, Medically unfit

C.R. 3162

Extract from Daily Orders part 11, from Unit The Royal
Mfld. Reg. .St. John's, dated August 5th, 1918.

The following man returned from overseas and reported
at Depot August 4th.

#3162 Pte. A. Gulliver.

G.

25th October, 1917.

Dear Madam,

With reference to your enquiry regarding No. 3162, Private Arthur Gulliver, I have the honour to inform you that I am now in receipt of a reply from the Newfoundland Pay and Record Office, London, to the effect that he is on duty at the Depot, that is at Ayr.

Yours faithfully,

Colonial Secretary.

Mrs. Diana Tucker,
24 Tessier Place.

TRANSLATION OF CODE MESSAGE SENT TO SYNOPTICAL,
LONDON, OCTOBER 22, 1917.

Report by telegraph present condition of 0262 Hill
3303 Beasley 728 Brown 2584 Gillispie 3163 Gulliver
3194 Inder 2735 Normore 3222 Upward.

316- Gulliver

M

October 16, 1917.

Dear Madam,

I have to inform you that the
Record Office, London, to-day reports No. 3162,
Private Arthur Gulliver, has been transferred
to Depot from the British Expeditionary Force,
classed permanent base.

Yours faithfully,

Colonial Secretary.

Mrs. Diana Tucker,
24 Tessier Place.

C.R. 3162

Extract from Nominal Roll of Draft No. 30, 50 Other Ranks
from 2/1st Battalion Newfoundland Regiment Barry Camp
E. B., to 1/1st. Newfoundland Regiment B. E. F.,
Embarked Southampton 22nd September 1917.

#3162 Pte. A. Gulliver

BC.

C.R. 3162

Extract from Officers and men embarked St. John's

31-2-17 Sailed Halifax "S. s. NORTHLAND" 17-4-17.

4

#3162 Pte. A. Gulliver.

C.R. 3162

Extract from Daily Orders, Newfoundland Regiment, St. John's,
dated October 20th., 1916.

STRENGTH.

3162, Pte. A. Gulliver.

Attached to the Strength from October 19th., 1916.

D.3162

St John's, Nfld.

August 31st, 1918

From D.M.S.

To O.C.Depot

3735 Pte. P. Hinchy
 3448 " W. Way
3162 " A. Gulliver

The marginally noted men entered the
 Naval & Military Convalescent Hospital,
 August 31st, 1918.

(sgnd) CLUNY MACPHERSON

Major, D.M.S.

per A. M. B.

Reg. No. 3162 Rank Pfc Name Gulliver Asmus

Attested..... Address 24 Tenner Place

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

Date of Allotment..... Returned from Overseas 4-8-18

Embarked for Overseas..... Cause Discharge

17-5-18. Recommended Discharge - Permanently unfit and admission to Naval & Military Convalescent Hospital.

DISCHARGED MEDICALLY UNFIT 31-1-18 Das 155

St John's, Newfoundland,

September 2nd, 1918

Officer Commanding,
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. ROWLEY, Captain

Regiment etc.

2227	Pte.	Speaser, Albert	Aug. 28/18	Med. unfit
1050	"	Boggen, John J.	Do.	Do.
1040	E	Sinnett, Wm. J.	Aug. 28/18	Do.
401	"	Murphy, Jas. E.	Aug. 27/18	Do.
2604	"	Sinnes, Wallace	Do.	Do.
2608	"	Marshall, Wm. J.	Aug. 29/18	Do.
2676	"	Harris, Samuel	Do.	Do.
2422	"	Taylor, Frank H.	Aug. 31/18	Do.
5162	"	Culliver, Arthur	Do.	Do.
949	"	Brass, Jas. J.	Do.	Do.
944	L/C.	Sallett, Fredk.	Do.	Do.
1215	Pte.	Saunders, R.J.	Do.	Do.
1022	"	Curran, Paul	Do.	Do.
405	"	Analgrove, Frank	Do.	Do.
450	Sgt.	Butcher, Ernest	Do.	Do.
2302	Pte.	Brussett, Leonard	Do.	Do.
2229	Opl.	Quick, Cyril	Do.	Do.
860	Pte.	Costello, Paul	Do.	Do.
459	"	Crotty, Stan F.	Do.	Do.
795	Opl.	Roland, Francis P.	Do.	Do.
2068	Pte.	Sexton, John F.	Sept. 2/18	Do.
2037	"	Gillingham, Kenneth	Do.	Do.



THE ROYAL NEWFOUNDLAND REGIMENT
HEADQUARTERS

St. John's, Newfoundland,

August 19th. 1918

191

From :-

Assistant Adjutant - Headquarters

To :-

Paymaster & Officer in charge Records -

3162 Pte. Gulliver, A.

Above noted man has been recommended for discharge as permanently unfit, and admission to N. and M. Convalescent Hospital, held on Aug. 17th. 1918. I am sending him herewith for your attention, and necessary action, please, and have given him verbal instructions to report to D.M.S. for his attention when he has finished his business with you.

66
17
845
4
18

St John's, Newfoundland,

August 31st, 1918

From D.M.S.,

To O.D. Depot

3735 Pte. P.Hinchy
3448 " W.Way
3162 " A.Gulliver

The marginally noted men entered the Naval
& Military Convalescent Hospital August 31st, 1918.

(sgnd) CLYNY MACPHERSON

Major, D.M.S.

per A. M. B.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121.
99.

Number of Sheet

First
First Coy Capt.

Regiment of 1st Newfoundland

Signature of O. C. Company

Regimental Number and Name	
No.	<i>3162 Gulliver CA</i>
Joined	Date
Joined	Date
Joined	Date
Joined	Date

Enlistment	
Age on	<i>19</i> years <i>7</i> months
Place and Date of Enlistment	<i>St. John's, N.F. 19.10.16</i>
Period of	with Colours, <i>27/315</i> years.
	with Reserve years.

Troop	<i>Labourer</i>
Religion	<i>R. of G.</i>
Place of Birth	

Good Conduct Badges, Service pay or proficiency pay

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>St. John's</i>	<i>1.12.16</i>	<i>Plt</i>		<i>Absent 7 p.m. parade to 9 a.m. 2.12.16</i>	<i>Sgt. Cooper</i>	<i>Admonished</i>	<i>2.12.16</i>	<i>R.H. Knight Lt.</i>	<i>Forfeits 14 days pay. R.O. C.S.</i>
<i>Barry</i>	<i>21.8.17</i>	<i>"</i>		<i>Reporting sick without a cause</i>	<i>Cop. Brown</i>	<i>7 days S.B.</i>	<i>22/17</i>	<i>Lt. Col. Whitaker</i>	
<p><i>Discharged Medically unfit, St. John's - 31/18</i></p>									

COPIES SENT

T.O. M. of M. O.C. 1st. Bn. " 2nd Bn.	No. <i>111111</i> DATE <i>26 JUL 1918</i>
--	--

To be carried over



Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B.121.

W. P. Griffith & Sons, Printers, Old Bailey, E.C.4.
 (1424) W9227/21259

Regiment of 1st Newfoundland

Number of Sheet First

Signature of O. C. Company Sgd. Chas. Aye. Capt.

Regimental Number and Name		Enlistment		Trade		Good Conduct Badges, Service Pay or Proficiency Pay	
No.	<u>Gulliver A</u>	Age on	<u>19</u> years - months	<u>Labourer</u>			
Joined	Date	Place and Date of Enlistment	<u>St. John's N.F.</u>	Religion			
Joined	Date		<u>19.10.16</u>	<u>C of E.</u>			
Joined	Date	Period of	{ with Colours	years.	Place of Birth		
Joined	Date		{ with Reserve	years.			

Place	Date of Offence	Rank	Cases of Drunkenness.	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order expiring with trial	By whom awarded	REMARKS
<u>St Johns</u>	<u>1-12-16</u>	<u>Pte</u>		<u>Absent 7pm parade to 9 Am. 2-12-16</u>	<u>Sgt Cooper</u>	<u>admonished</u>	<u>2-12-16</u>	<u>Sgd F.H. Knight Lt</u>	<u>Forfeit 1 days pay. P.W. C.S.</u>
<u>Barry</u>	<u>21-8-17</u>			<u>Reported sick without a cause</u>	<u>Cpl. Greene</u>				
<u>Barry</u>	<u>21-8-17</u>								

To be carried over

B. Gulliver

3162.

P. & P. Co



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, *Arthur G. Guineer*, Regl. No. *3162*.

hereby agree, until further notification by me, and in similar official form to make an Allotment of *4* Dollars and *50* Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and} _{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and} _{or} Persons concerned, viz :

Allotment begins *Nov. 1/06*.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
2002	<i>Mother</i>	<i>Mrs. Sarah</i> <i>Guineer</i> <i>Che</i> <i>Thorsworthy</i>	<i>24 Leinster</i> <i>Quebec, P. Q.</i>	<i>50</i>
Total Allotment, \$				<i>50</i>

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

(Sig.) *Charles A. G. Guineer*

Officer Commanding

J. J. Guineer
Company

Sig. *Arthur G. Guineer*

(Rank) *Platoon*

(initials)
Arthur G. Guineer

Nov 10 191*6*

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. /18, 26/5/17.

Regt. No. 3162 Rank Plt Name Gulliver Unit 2nd Bn R Newfoundland who was Repatriated.

Newfoundland on 20/9/18 Authority DOF Cause _____

STATEMENT OF ACCOUNT

CR.

PARTICULARS	\$				PARTICULARS	\$			
	£	s	d			£	s	d	
Balance Dr. from					Balance Cr. from				
Allotment 15 days @ 50	17	00	11	10	Pay 15 days @ £ 1.00	25	00		
Cash Payments: 6/7/18			15	0	Field Allow 15 days @ £ 10	15	00		
a 72			15	0	Other Allow days @ £	106	50	2	79
Other Debits:					Other Credits:				
Barrack Damages				6					
Misc. Stop			2	5					
<u>C</u> Total Debits			4	0	Total Credits				
Balance due by Paymaster			13	79	Balance due to Paymaster				13 79

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

Harley & Camp 1918
(Place) (Date)

COPY SENT TO
O.C. H.Q.
ST. JOHNS, N.F.L.D.
to / /
Chief Paymaster & Officer i/c Records
DATED 30 JUL 1918

Made up/Checked in accordance with information received in the Pay & Record Office and is therefore subject to amendment if and as may be found necessary. 12156

Chief Paymaster & Officer i/c Records

U

Gulliver A.

3162

Ray Dept



THE ROYAL NEWFOUNDLAND REGIMENT
HEADQUARTERS

St. John's, Newfoundland,

August 19th. 1918

191

From :-

Assistant Adjutant - Headquarters

To :-

Paymaster & Officer in charge Records -

3162 Pte. Gulliver, A.

Above noted man has been recommended for discharge as permanently unfit, and admission to N. and M. Convalescent Hospital, held on Aug. 17th. 1918. I am sending him herewith for your attention, and necessary action, please, and have given him verbal instructions to report to D.M.S. for his attention when he has finished his business with you.


Ass't Adjutant
Depot The Royal Newfoundland Regiment
St. John's, Nfld.

LAST PAY CERTIFICATE

ORIGINAL.

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.

Regt. No. 3162 Rank Pte Name Sullivan A. Unit 2/CR. Nfld. Who was Repatriated
 No. Nfld. on 20/7/18 Authority DO Cause _____
STATEMENT OF ACCOUNT

PARTICULARS					PARTICULARS				
	\$	s	d		\$	s	d		
Balance Dr. from				Balance Cr. from					
Allowment 15 days @ 50	17	50	10	Pay 15 days @ \$1.00	15	00			
Cash Payments: 6/7/18			15	Field Allow 15 days @ \$10	1	50			
<i>as n</i>			65	Other Allow days @ \$	16	50		3	7
Other Debits:				Other Credits:					
Barrack Damages			6						
Miss Stph			2						
			8						
Total Debits			40	Total Credits					
Balance due by Paymaster	13	7	9	Balance due to Paymaster	0			13	7

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

Down Camp Dressing 191
 (Place) 26/7/18 (Date)

Made up/Checked in accordance with information received in the Pay & Record Office and is therefore subject to amendment if and as may be found necessary.
 Pay & Record Office, London, 27 JUL 1918 191
 O.C. Company
 Chief Paymaster & Officer i/c Records.
 280 JUL 1918
OF Lewis

LAST PAY CERTIFICATE

DUPLICATE
MAIL COPY 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. 3162 Rank Pte Name Galliver A Unit 2/Bn. R. Newfoundland who was Repatriated
to Newfoundland on 20/7/18 Authority _____ Cause _____

Posted.

STATEMENT OF ACCOUNT

DR.	PARTICULARS	£ s d				PARTICULARS	£ s d				CR.
		£	s	d	£		s	d			
	Balance Dr. from				Balance Cr. from						
	Allotment 15 days @ 50¢	17	50	11	Pay 15 days @ \$1.00	15	00				
	Cash Payments:				Field Allowance 15 days @ \$1.00	15	00				
	6-7-18			15	0	16	00	1	3	7	9
	A. I. of			15	0						
	Other Debits:				Other Allowances days @ \$						
	B. Damages				6						
	fix. stop.			2	5						
	Total Debits				Total Credits						
	Balance due to Paymaster			1	4	0					
				13	7	9					
					Balance due to Paymaster						

PERIOD: From 6-7-18 To 20-7-18.

CHECKED
27 JUL 1918
C.S.

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

Hazley D. Camp, Winchester 25-7-18. 1918
(Place) (Date)

(Sgd) C. J. Little Capt
O.C. " " Company.

Made up/Checked in accordance with information received in the Pay & Record Office

and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

27 JUL 1918 1918

27 JUL 1918
A. O. Mearns Maj.
Chief Paymaster & Officer i/c Records.

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. *Chittwar*..... 2. Surname..... *Guiliver*.....
3. Rank..... *Private*..... 4. Regtl. No. *3162*.....
5. Address in full to which future payments of gratuity are to ~~be~~ be forwarded..... *26 Lesser Place*.....
6. Date of enlistment in the Regiment..... *December 1916*.....
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
none.....
8. Relationship of such dependents.....
9. Address in full of such dependent.....
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.....
12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *in France. months*.....

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

no

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

\$5.6, : dollars

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.... *no*.....

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

(b). If so, was such reversion in consequence of misconduct or inefficiency?.....

19. Are you now serving in the Regt.? *no*.... If not give:- (a) Date of discharge.. *August 1918*... (b) Reason for discharge.....

Sick

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.....

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.... *yes*.....

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:

Arthur M. Galloway
26 Tesser Place N. Phoenix

Place of Residence:

Declared before me at:

St. John's U.S.A.

This

12th,

day of

1919.

John M. Carthy

Signature of Barrister of the
Supreme Court, Stipendiary Magis-
trate, Notary Public, Justice of the
Peace, or Commissioner of Affidavits.

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	<i>4 mos.</i>	<i>280.00</i>
.....
.....
Certified Correct.			Paymaster.	

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$70⁰⁰

Dec 11 19 19

Received from the First Newfoundland Regiment
the sum of Seventy Dollars.
on account of Pay. *W. G.*
~~Balance~~

A. Gulliver
Regtl. No. 3162

Ch. No. 21707	Initials <i>W. G.</i>
Pay Ledger 100	Initials <i>W. G.</i>
Gen. Ledger	Initials

Witness *C. B. Jefferson*

No. 3162

Rank Pt

Name

A Gellies

1918-1919

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 46 ²⁶/₁₀₀

Aug 31st 1918

Received from the First Newfoundland Regiment
the sum of Forty six ²⁶/₁₀₀ Dollars.
~~on account~~ of Pay.
balance

Arthur J. Gullivan
witness CW.

Ch. No.	1820	Initials
Pay Ledger	209	Initials	CGM
Gen. Ledger	Initials

Regtl. No. Rank

No. 3162

Rank PL

Name Guinness, A.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 86 ⁴⁰/₁₀₀

Dec 26 1918

Received from the First Newfoundland Regiment
the sum of Eighty Six ⁴⁰/₁₀₀ Dollars.
on ~~account~~ balance of Pay. P.D.P.

As
A. Gullweir
Master

Ch. No. 7430	Initials. C.W.
Pay Ledger. I.O.O.	Initials. C.W.
Gen. Ledger.....	Initials.....

Regtl. No. Rank

Witness W. Newbery Sgt.

No. 3162

Rank


OL

Name

Gulliver A

DEPARTMENT OF VETERANS AFFAIRS

Ottawa Ont.

To  Copy for H.O. file

P.A.

Date May 27, 1964

Attention of

NAME GULLIVER, Arthur

SERVICE NUMBER 3162 REG

C.P.C. No.
W.V.A. No.

210981

NAVY
ARMY X
R.C.A.F.NFLD
REG

The DEPARTMENT has received information from

S.T.M.O. DVA. May 19, 1964. St. John's Nfld. Tele Memo.

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death May 16, 1964

Cause of Death

Place of Death Hospital For Mental & Nervous Diseases St. John's NFLD.

801 405 813

Name and Address of next of kin (if known)

Copies to: W.S.R.
V. I.
~~REG~~
~~DVA~~
H.O.

} Destroy form if advice of death already received.

E.C. Richards
for
Chief, Central Registry