



FIRST NEWFOUNDLAND REGIMENT.



ATTESTATION OF

No. 1716 Name Chas Hardman Corps _____

Questions to be put to the Recruit before Enlistment.

- | | |
|--|-------------------------------------|
| 1. What is your name? | 1. <u>Chas Hardman</u> |
| 2. What is your full Address? | 2. <u>St. John's</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your Age? | 4. <u>21</u> Years <u>5</u> Months. |
| 5. What is your Trade or Calling? | 5. <u>fisherman</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, Charles Hardman 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.

Chas Hardman SIGNATURE OF RECRUIT.
St. John's Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Charles Hardman 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 22 day of July 1915
St. John's 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) _____



FIRST NEWFOUNDLAND REGIMENT.

ATTESTATION OF

No. 1716 Name Chas Hardiman Corps _____

Questions to be put to the Recruit before Enlistment.

- | | |
|--|-------------------------------------|
| 1. What is your name? | 1. <u>Chas J. Hardiman</u> |
| 2. What is your full Address? | 2. <u>St. John's Bay</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your Age? | 4. <u>21</u> Years <u>5</u> Months. |
| 5. What is your Trade or Calling? | 5. <u>Fisherman</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, Charles Hardiman 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.

E. July 1915 Chas J. Hardiman SIGNATURE OF RECRUIT.
[Signature] Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Charles Hardiman 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 22nd day of July 1915.
[Signature] 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 1716

COMPANY 9

THE
1st NEWFOUNDLAND REGIMENT.

***-----

I hereby enlist for service 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 ^{His} C. K. Hardman
Warrant

Witness Shepherdson Lt

Dated at Qym

19:6 1916

C.R. 1716

Extract from Nominal Roll of RFLA. Regt. Draft No. 7.
from 2nd Bn., Depot, to 1st Bn. B.S.F. Embarked South-
ampton, 25-6-16.

1716 Pte. C. Hardiman.

C.R. 1716

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

1716 Pte. G. Hardiman,

Discharged Feb. 14th 1918, Medically unfit

C.R. 1716

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

1716 Pte. Hardiman.

C.R. 1716

Extract from Roll of Officers N.C.O's and Men Discharged from
The Royal Nfld.Regt.,

Regtl.No.	Rank.	Name.	Date.	Reason.
1716	Pte.	Hardiman C.	Feb.14/18.	Med.Unfit.

C.R. 1716

Extract of Daily Orders part 11, from Unit The Royal
Newfoundland Regiment, Headquarters, St. John's.
dated February 22, 1918.

#1716 Pte. C. Hardman,

~~Attest:~~

Having been found Medically Unfit is discharged with
effect from 14/2/18.

C.R. 1716

May 17, 1918.

Dear Sir:-

One Kit Bag the property of your son No.1716 Pte. Hardiman of The Royal Newfoundland Regiment, is laying at this office, would you kindly advise him to call for same or instruct us where to send it.

Yours faithfully

Captain.

Mr. James Hardiman,
Grand John, T.B.

Grand John
via ~~the~~ Cove
May 20th
1918

Department of Militia
Dear Sir.

Please send my - Dan's
kit bag to the Charles
Hardiman to ~~the~~ Cove
Fortune Bay.

Yours truly
James Hardiman.

June 14, 1918

Dear Mr. Hardiman:-

In reply to your letter
of 28th May, I am forwarding by "EXPRESS"
to-day one Kit Bag which belonged to your son
#1716 Pte. Hardiman.

Enclosed you will find
receipt will you kindly sign same and return at
your earliest convenience.

I am,

Yours faithfully,

Lieut.

C. E.

Mr. James Hardiman,
Grand John, F.B.

C.R. 1716

Extract from Casualties received from P.&R. Office London,
Mar. 9th, 1918.

At Wandsworth.

1716 Hardiman.

Gunshot right arm.

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

Lucy M. [unclear]

Address

Line
Number

Rcd

for Dep [unclear]

By

Sent

- by

Check

Dated

10th March, 1917.

To

Mr. Jas. Hardiman,

Grand John, F.B.

Regret to inform you that Record Office,

London, officially reports No. 1716 Private

Charles Hardiman admitted Wandsworth Gunshot

Wound Right Arm.

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

J. R. BENNETT,

Colonial Secretary.

FOR TYPEWRITER

No. 1716 Pte. C. Hardiman, embarked by government transport
from Liverpool to Halifax, August 26.

Extract of telegram received from Pay & Record Office,
London. "Sent home for discharge"

Dated August 30, 1917.

C.R. 1716

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt., St. John's, Sept. 17th, 1917.

1716 Pte. C. Hardman.

Attached to Headquarters from Sept. 13th, 1917.

9171 C.R.



Grand John

Nov 13 1917

my hand is no better
he is just the same
as he was when I leave
down there, I cant do
any work anyhow I am
willing to come whenever
you sends for me ple. C
hardeman

Reg. No. 1716 Rank Pte Name Nardiman B

Attested _____ Address Grand John F.B

Allotment _____ Allottee _____

Date of Allotment _____ Returned from Overseas 13-9-17

Embarked for Overseas 1917 Cause _____

Oct 15.17	Rec. for discharge per unfit. 15 ⁹ / ₁₇	
Nov 2.18	Discharged.	

C.R. 1716

Chas. Hardiman was attested for General service
with the NEWFOUNDLAND REGIMENT on .. July ¹⁹ 1915
Regimental No 1716 was allotted to Pte. C. Hardiman

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th, 1919.

FEBRUARY 9th.

8.

From Adjutant,
Depot.

To Paymaster and Officer i/c Records,
Department of Militia.

1898 Pte. N. Boone.
492 Pte. A. Coomes.
1716 Pte. C. Harciman.
272 1/Cpl. W. Manuel.
2876 Pte. R. Pike.
1607 Pte. M. Tucker.

Marginally noted men have been recommended for Discharge as permanently unfit By Medical Boards held at various times and as far as our records show have not yet been discharged. They are not employed on any duty in connection with depot. Will you please look them up and if discharged please advise me so that I can put them through Part 11 Orders. Tucker has been discharged some time so I am told, but this office has no record of same, consequently is still carried on Regimental Strength.

D. 1716

February 22nd. 1918.

The C. C.
Royal Newfoundland Regiment,
Headquarters.

Sir,-

The undermentioned men have been
discharged on the dates given.

Kindly note and post in Daily orders
Part 11.

I have the honour to be,

Sir

Your obedient Servant.

Signed. J.H. Howley,

Captain & Paymaster & Officer

i/c Records.

JMH/JH.

No. 492 Private.	Coombs, Arch'd.	Feb. 14th. 1918	Med. Unfit
No. 2876 Private.	Pike, R. T.	Feb. 14th. 1918.	Med. Unf
No. 2711/Cpl.	Manuel, Willis.	Feb. 16th. 1918	Med. Unfit.
No. 1898 Private.	Boone, Z. .	Feb. 16th. 1918	Med Unfit.
No. 1716 Private.	Hardiman, C.	Feb. 14th. 1918.	Med. Unfi

C. Hardiman

1716

P.P. 10

Proceedings on Discharge.

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

No. <u>1716</u>	Army Rank <u>Private</u>	
Name <u>Nardiman C.</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>		
Corps <u>1 Newfoundland Regiment</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	COPY SENT TO O.C. H.Q. ST. JOHNS, N.F.L.D. No. <u>24 AUG 1917</u> Descriptive marks:	
Place of discharge		
1. Description at the time of discharge.		
Age <u>22</u> years	months	<div style="font-size: 2em; font-family: cursive;">G.S.W. of Arm</div>
Height <u>5</u> feet	<u>2</u> inches	
Chest measurement	girth when fully expanded _____ ins.	
	range of expansion _____ ins.	
Complexion <u>Fresh</u>		
Eyes <u>Blue</u>		
Hair <u>Fair</u>		
Trade <u>Sailor's</u>		
Intended place of residence <u>St. John's</u>		
(To be given as fully as practicable) <u>Fortune Bay Newfoundland</u>		
<small>(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.)</small>		
2. The above-named man is discharged in consequence of <u>Wounds received in Action.</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 :— <hr/>		
4. Character awarded in accordance with King's Regulations :— <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>		
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.

Original

Medical Report on an Invalid.

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

Date 7th Aug 1917

1. Unit 1st Newfoundland.

5. Age last birthday 22.

2. Regimental No. 17186.

6. Enlisted { on 20.7.1915 ?
at St Johns. nfld.

3. Rank Pte.

7. Former Trade or Occupation { Sailor.

4. Name Hardeman, C.

8. Disability.

G. S. W. chest
IV. 4.

XII Injury to brachial plexus
RT

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. 3. 3. 17

10. Place of origin of disability. Combles - France

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. Wounded on 3. 3. 17 at

Combles on the RT side of chest in pectoral region
exit wound in back. RT brachial plexus injured
Admitted here 7. 3. 17. Wounds healed up. There was
partial injury of median ulnar & internal
cutaneous nerves
Has been treated with Galvanism & massage
with no appreciable results.

12. (a) Give your opinion as to the causation of the disability.

Active Service

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page B).

G. S. W.

COPY SENT TO
O.C. H.Q.
ST. JOHNS, N.F.L.D.
NO. 845703
DATED 2 4 AUG 1917

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.

Wounds healed up.

Weakened of R+ wrist

Total palsy of the motor supply of median & ulnar including the pronator Radii teres & flexor carpi Radialis. The outer head of the median is involved & the lesion is not limited to the inner cord. Outer cord not involved

Sensation: Incomplete anaesthesia of median & ulnar

Electrical reactions R.D. of all muscles as above. but hyperexcitability to Galvanism. Only partial lesion

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 ?

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. Do you recommend

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

L. Zeitline C.S.

Officer in medical charge of case.

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

Station _____

Date *8th Aug 1917*

A. E. Doneltoth

Officer in charge of Hospital. A.M.C.T.

Comdg. 3rd. London Gen. 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 Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them 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 attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1918).

(iv.) In answering question 20 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.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

*Active service
S.S.*

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

21. Has the disability been aggravated by

(a) Intemperance?

no

(b) Misconduct?

no

(c) Any of the conditions mentioned in question 20, and if so, which?

-

22. Is the disability permanent?

Yes

23. If not permanent, what is its probable minimum duration?

-

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

Total at present.

In defining the extent of his inability to earn a livelihood, estimate it as $\frac{1}{2}$, $\frac{1}{4}$, $\frac{2}{3}$, or total incapacity.

24A. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?

no

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

no.

26. Do the Board recommend

(a) Discharge as permanently unfit, or

Yes

(b) ~~Change to England?~~

23a. Is he fit for discharge from the service as an out-patient? and will he require out-patient treatment on discharge from Hospital?

Yes - Yes

Signatures:—

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

Date 8th August 1917

Leslie Franking Major R.A.M.C.
President.
H. W. E. Wood. Capt. R.A.M.C.
Members.

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

Date 8th August 1917

Leslie Franking Major R.A.M.C.
Administrative Medical Officer.



3rd. London General Hospital,
Wandsworth, S.W. (18)

- 3 AUG 1917

From, O. O.,

3rd. London General Hospital.

To, O. O.,

Records, Newfoundland, 58 Victoria St.

In accordance with instructions contained in A.O.I. No. 1069 of 1916, I beg to report that:-

No. { 1716. Pte. Hardeman C. 1st Newf?
1957. Pte. Morey. L. 1. nfd.

will shortly be brought before a Medical Board and will probably be discharged from the army or re-classified.

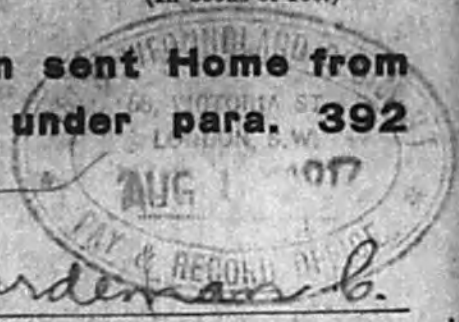
Duplicate documents will not be required, please.

H. Tagon

Capt. R.A.M.C. (T)

Admitted 7 3-17

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



Soldier's Regtl. No. 1716 Rank Pte Name Hardenan G.
(Surname first)

Corps or Regiment (also Unit if known) _____

1st Newfoundland

To OFFICER in charge of RECORDS 58 Victoria St SW

REGIMENTAL PAYMASTER 58 Victoria St SW

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 8.8.17, 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) 13 August 1917

to (full address) 58 Victoria St SW

Place Wandsworth G.C. Hall capt 9th fw Officer Comm.

Date 13/8/17 3rd London Gen Hospital.

Three copies to be made; one copy sent to each Officer mentioned above, and one copy filed in the Office. Registrar, R.A.M.C.

(9 38 41) W 11751-6539/1 75,000(6) 10/15 H W V(M 679)

Army Form W 3901

ONLY FOR USE IN THE CASE OF SOLDIERS RETURNED FROM AN EXPEDITIONARY FORCE, OR FROM GARRISONS ABROAD.



1st Newfoundland (Regiment)

No. 1716., Rank Pte., Name Hardeman. C.

is discharged from Hospital with orders to proceed to ~~his home~~ ^{the address below}

(Address 58 Victoria Street)

S.W.

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

H. Jagan

Officer Commanding,

Capt. R.A.M. (M)

Place

Wandsworth

Registrar, R.A.M. Hospital.

3rd London General Hospital

WANDSWORTH

Date

13/8/17

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

MEDICAL HISTORY

OF

Surname Hardman Christian Name Charles

Table 1.—GENERAL TABLE.

Birthplace:—Parish _____ County N.fld

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>19</u> day of <u>July</u> 191 <u>5</u> at <u>St Johns Nfld</u>		on _____ day of _____ 191____ at _____	
Declared Age	<u>21</u> years _____ days		_____ years _____ days	
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet <u>6</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			
	Number			
When Vaccinated	<u>10</u>			
Vision	R.E.—V	<u>6/6</u>	R.E.—V	
	L.E.—V	<u>6/6</u>	L.E.—V	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to Cause Rejection	(b)		(b)	
Approved by (Signature)	<u>Lamm Paterson</u>			
(Rank)	<u>Capt.</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St Johns</u> on <u>22</u> day of <u>July</u> 191 <u>5</u>		at _____ day of _____ 191____	
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment	<u>1 Nfld Reg</u>	<u>1716</u>		
Transferred to				
Became non-effective by	on _____ day of _____ 191____		on _____ day of _____ 191____	
(Signature)				
(Rank)				

COPY SENT TO
O.C. H.Q.
ST. JOHNS, N.F.L.D.
N.F.P. 38. No. 8645/103
DATED 24 AUG 1917



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 London General Hospital, WANDSWORTH, S.W.	7	3	17				G.S.W. chest Injury to trachea & pleura R.N.		Board held Disability Cause Total -	- see overleaf G.S.W. chest. injury to trachea & pleura R. Weakness of R. wrist Total palsy of the motor supply of median & ulnar G.S.W. in Active Service. Inability to earn a livelihood at present.	<i>W. S. M. [Signature]</i> 3rd London General Hospital, WANDSWORTH, S.W.

Notification by President of Medical Board of Approval of a Soldier's Discharge under Paragraph 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

58 Victoria St. SW

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 ²¹ ~~14~~ days after the date on this notification, see A.C.I. 1623 of 1916.)

Soldier's surname Hardeman, Christian names Charles
(in full)

Regt. No. and Rank 1716. Pte Regt. or Corps 1st Newfoundland
(If T.F. this should be stated.)

His address on discharge will be Grand farm.
St John's. Nfld.

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.

Station 3rd London General Hospital, WANDSWORTH, S.W.
Date 8. VIII. 1917.

Arthur Leaking Major R.R.M.
President of Board
(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 Secretary, Royal Hospital, Chelsea, London, S.W.

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

A Name in full Nardeman, Charles
 Regiment from which discharged 1st New Brunswick
 Regimental Number 1716
 Where born (Parish, Town and County), and when Grand Jcton Irel 1895
 Intended address Grand Jcton, St. John's Irel.
 Height on discharge 5 Feet 5 Inches
 Colour of Hair on discharge Fair Colour of Eyes Blue
 Descriptive marks 4 sw R arm Complexion Fair
 Figure on discharge medium
 Christian name of Father James
 Christian name of Mother Susana
 Wife's Maiden name in full _____
 Date and Place of Marriage _____
 Christian names of Children _____
 Nature and locality of civil employment desired when fit to return as a sailor.

COPY SENT TO
 O.C. H.Q.
 ST. JOHNS, N.F.L.D.
 N.F.P.38. No. 86451103
 DATED 2 4 AUG 1917

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) [Signature] X his marks.
 (Rank) Pte
 Station Wandsworth
 Date 5.8.17

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.

Station 3rd London General Hospital
WANDSWORTH, S.W.
 Date 5.8.17
A. J. Gilman Medical Officer i/c Hospital.

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 _____
 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 _____ 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(T) in substitution for a man fit for General Service.

No. 1716 Rank Pte

Name (surname first) Hardiman Charles

Regiment 1st Newfoundland

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

Sailor

COPY SENT TO
O.C. H.Q.
ST. JOHNS, N.F.L.D.
N.F.P.38. No. 8645708
DATED 8 AUG 1917

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. Harris
Grand Bank
Newfoundland
12 months*

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

4. What is the name of your Approved Society? *National Health Society*

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

No

Date August 4th 1917 Signature Charles Hardiman

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.

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 1716, Pte. Hardiman,
 Company. From 9/8/17 To 26/8/17 (Dates inclusive)

(Substituting A.F.O. 1625) N.F.P./36.
 Embarked per S. S. Germania
 From Liverpool Date 26/8/17
 Draft No. CR.

DR. Classification (See procedure)

Date	Pay Book Col.	Particulars	Rate	Dys	£	¢	¢	¢	s	d	Date	Pay Book Col.	Particulars	Rate	Dys	£	¢	¢	s	d
	8	Forfeited Pay										1	Pay							
	9	Allotments										2	Field Allowances	1.00	79	79	00			
	10											3	Other Allowances	.10	"	7	90			
	11/12	Total Stoppages	.50	79	39	50			8	2	4	4/5	Total @ 4.86 2/3							
	13	Fines										6a								
	14	Clothing and Necessaries											Balance Credit Last Period							
	15	Arms & Accoutrements																		
	16	Barrack Damages											Ration Allowance							
	17	Hospital Stoppages																		
	17a	Miscellaneous Stoppages																		
	19	Casual Payments																		
	20	1st Payment																		
	21	2nd "																		
	22	3rd "																		
	23	Final " <i>Heup Advances</i>							1	17	6									
	24	Balance Debit Last Period							36	5	0									
	28	" Due by Paymaster										27	Balance Due to Paymaster							

CERTIFIED CORRECT.

191

1 18 5
 47 15 3

O.C. " " Company.

47 15 3

Recd. 29/8/17



1718, Pto. Hardican,
9/8/17 26/8/17

"A"

Liverpool
46

Germania
26/8/17

.50 79 59 50 8 2 4

1.00 79 79 00
.10 " 7 90

86 90 17 17 1
28 18 2

15 8

26 8

14 2 1 8 0

--- s per P & R. O.

1 17 8
36 5 0

1 18 6
47 13 3

47 13 3

7-6-17.

J. K. [Signature]

1716. Pte Hardman wishes to draw £2. from
the paying Record office, this day 7th May
1917.

1716. Pte Hardman
1st Newfoundland Regt.

L. Zeitline
C.S.

Ph.D. 00 f
1961

June 19th

Will you kindly allow me to draw £2
from your account please this day

1716. Ple to and man
of the [unclear]

L. Zeitline
C.S.

Repl. No. 3428.

3rd London General Hosp.

No. _____

N.F.P./45.

NEWFOUNDLAND CONTINGENT

To: Paymaster & Officer i/c Records,
Newfoundland Contingent,
58, Victoria Street,
London, S.W. 1.

*O.K.
FS-0-0
R-96
23/7/17*

Please remit to St C Hardiman 1716

1st Newfoundland Reg

the sum of 5 pounds _____ shillings, on
account of any balance that may be due to me.

Regtl. No. 1716 Rank St

Name Hardiman C

Approved L. J. [Signature]
Officer i/c.,

3rd London General Hospital.

Dated at Handsworth

July 23rd 1917.

No. 1716 Rank Pte. Name C. Nardiman

Pay	F.A. Wks	Total
1.00	10	1.10
Loss Allotment		50
Net Rate		60

N. J. P. 7/53

DEBITS	Date	£	s	d	CREDITS	Period		Days	Rate	£	s	d
						From	To					
Balance					Balance		8 ⁶ / ₁₇					28 18 3
Acquittance Rolls					Pay @ Net Rate	9 ⁶ / ₁₇	13 ⁸ / ₁₇	66	60	39 60	8 2 8	
Hospital Advances		1	17	6	<i>Ration allowance</i>							
A.B. 64					13- ⁸ / ₁₇ to 23 ⁸ / ₁₇			11	21		1 2 0	37-2-10
P. & R.O. Payments		5	0	0								
L-17-6												
(6190) Cheque	13 ⁸ / ₁₇	15	0	0								
20/8/17 (6418) Cheque		15	10	0								
Cash			15	0								
Rept. 3879												

CHECKED:
[Signature]
 13/8/17

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. **1716, Pte. Hardiman,**
 Company. From 9/8/17 To 26/8/17 (Dates inclusive)

(Substituting A.F.O. 1625) N.F.C./36.
 Embarked per S.S. Carmania
 From Liverpool Date 26/8/17
 Draft No. _____

DR. Classification (See procedure)

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	8	Forfeited Pay								1	Pay									
	9	Allotments								2	Field Allowances	1.00	79		79	00				
	10									3	Other Allowances	.10	"		7	90				
	11/12	Total Stoppages	.50	79	39	50	3	2	4	4/5	Total @ 4.86 2/3									
	13	Fines								6a					86	90	17	17	1	
	14	Clothing and Necessaries									Balance Credit Last Period				28	15		2		
	15	Arms & Accoutrements									Ration Allowance									
	16	Barrack Damages																		
	17	Hospital Stoppages																		
	17a	Miscellaneous Stoppages																		
	19	Casual Payments																		
	20	1st Payment																		
	21	2nd "																		
	22	3rd "																		
	23	Final " <i>Hosp. Advances</i>					1	17	6										8	0
	24	Balance Debit <i>part P. R. O.</i>					36	5	0											
	28	" Due by Paymaster								27										

This account is in accordance with information received at the Pay & Record Office to 24/8/17 and is therefore subject to amendment if, and as may be found necessary.

CERTIFIED CORRECT.

[Signature]
 O.C. " " Company. 47 13 3

191

1 18 5
 47 13 3



*216
 1/1/17
 23/1/17*

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 1716, Pte. Hardiman,
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	8	Forfeited Pay										1	Pay									
	0	Allotments										2	Field Allowances	1.00		79	79	00				
	10											3	Other Allowances	.10		"	7	90				
	11/12	Total Stoppages	.50	79	59	50		8	2	4		4/5	Total @ 4.86 2/3									
	13	Fines										6a						86	90	17	17	1
	14	Clothing and Necessaries											Balance Credit Last Period						28	15	2	
	15	Arms & Accoutrements											Ration Allowance									
	16	Barrack Damages																				
	17	Hospital Stoppages																				
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	21	2nd "																				
	22	3rd "																				
	23	Final "																				
	24	Balance Debit <i>Hosp. Advances</i>																				
	28	" <i>part P. R. O.</i> Due by Paymaster																				

CERTIFIED CORRECT.

[Signature]
 O.C. " " Company.



NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 1716, Pte. Hardiman,
 Company. From 9/6/17 To 26/8/17 (Dates inclusive)

Substituting A.F.O. 1625) N.F.P./36.
 Embarked per S. S. Germania
 From Liverpool Date 26/8/17
 Draft No. _____ CR.

DR. Classification (See procedure)

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	8	Forfeited Pay									1	Pay							
	6	Allotments									2	Field Allowances	1.00		79	79	00		
	10										3	Other Allowances	.10		"	7	90		
	11/12	Total Stoppages	.50	79	39	50	8	2	4		4/5	Total @ 4.86 2/3							
	13	Fines									6a				86	90	17	17	1
	14	Clothing and Necessaries										Balance Credit Last Period			28	15	2		
	15	Arms & Accoutrements										Ration Allowance							
	16	Barrack Damages																	
	17	Hospital Stoppages																	
	17a	Miscellaneous Stoppages																	
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	20	1st Payment																	
	21	2nd "																	
	22	3rd "																	
	23	Final "						1	17	6									
	24	Balance Debit <i>Hosp. Advances</i>						36	5	0									
	28	" Due by Paymaster									27								

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CERTIFIED CORRECT.

A. D. Hardiman
 O.C. " " Company. 47 13 3

191

1 18 5
 47 13 3



Hardiman, (Kas)

1716

Sept

DEPARTMENT OF MILITIA.

WAR SERVICE GRANTING.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claim War Service Gratuity under Order-in-Council dated January 28th. 1918.

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

On completion this Declaration is to be returned to THE OFFICER I/C

REWARDS, PAY & RECORD OFFICE, ST. JOHN'S.

Christian name *Chas* 2. Surname *Hardeman*

3. Rank *Plt* 4. Regt. No. *1617*

5. Address in full to which future payments of gratuity are to be forwarded *Point Rosee, F. B.*

6. Date of enlistment in the Regiment *July 20. 1915*

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

8. Relationship of such dependents.....

9. Address in full of such dependents.....

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....

11. Were you on active service only in field, if so, give dates and particulars of such service..... *Overseas*

12. Give total length of time which you served on active service, whether in field or Overseas..... *From July 20/15 to March 1917 1 1/2*

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.....

..... ~~.....~~

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

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

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.....

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?.....

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

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

..... *Physical Disability*

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 - From Oct. 1915 to March 1919

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee.....

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

his
Charles H. Henderson
Went

Signature of Applicant:

Joseph Rosey J. R.

Place of Residence:

N. Ohio, Twp.

Declared before me at:

No. 19

This *15*th day of *Nov.* 19*19*

John W. Carthy

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

POST DISCHARGE PAY.

Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	Net amount due
.....
.....
.....
Certified correct.			Paymaster	

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 1716, Pte. Hardiman,

(Substituting A.F. O.1625). N.F.P./36.

Company. From 9/6/17 To 26/8/17 (Dates inclusive).

Embarked per S.S. Carmania

From Liverpool Date 26/8/17

DR. Classification (See Procedure). "A"

Draft No. 46 CR.

Date	Pay Book Col.	PARTICULARS	Rate	Dys	£	s	d	Date	Pay Book Col.	PARTICULARS	Rate	Dys	£	s	d
	8	Forfeited Pay							1	Pay	1.00	79	79	00	
	9	Allotments	.50	79	39	50	8	2	4	2	Field Allowance	.10	"	7	90
	10									3	Other Allowances				
	11/12	Total Stoppages								4/5	Total @ 4.86 2/3			86	90
	13	Fines								6	Balance Credit Last Period			28	18
	14	Clothing & Necessaries								6a	<u>OTHER CREDITS:</u>				
	15	Arms & Accoutrements									Ration Allowance,				
	16	Barrack Damages									13 / 8 / 17 to 26 / 8 / 17				
	17	Hospital Stoppages									= 14 days @ 2 /			1	8
	17a	Miscellaneous Stoppages													0
	19	Casual Payments <i>Hosp. Advances</i>			1	17	6								
	20	1st Payments per P & R. O.			36	5	0								
	21	2nd "													
	22	3rd "													
	23	Final "													
	24	Balance Debit Last Period						1	18	5					
	28	" Due by Paymaster													
					47	13	3			27					
														47	13
															3

This account is in accordance with information received at the Pay & Record Office to 24/8/17 and is therefore subject to amendment if, and as may be found necessary.

CERTIFIED CORRECT.

Handwritten initials and date:
 CHE
 24/8/17



NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 1716, Pte. Hardiman,

(Substituting A.F. O.1625). N.F.P./36.

Company. From 9/6/17 To 26/8/17 (Dates inclusive).

Embarked per S.S. "Garmania"

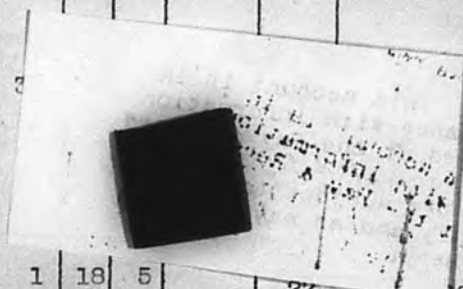
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Draft No. 46

CR.

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	13	Fines									6	Balance Credit Last Period					28	18	2
	14	Clothing & Necessaries									6a	<u>OTHER CREDITS:</u>							
	15	Arms & Accoutrements										Ration Allowance,							
	16	Barrack Damages										13 /8/17 to 26/8/17							
	17	Hospital Stoppages										=14 days @ 2 /					1	8	0
	17a	Miscellaneous Stoppages																	
	19	Casual Payments <i>Hosp. Advances</i>																	
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	21	2nd "																	
	22	3rd "																	
	23	Final "																	
	24	Balance Debit Last Period																	
	28	" Due by Paymaster					1	18	5		27	Balance Due to Paymaster							
							47	13	3								47	13	3



CHECK
17/8/17



CERTIFIED CORRECT.

[Signature]
O.C. " " Company.

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 1716, Pte. Hardiman,

(Substituting A.F. O.1625). N.F.P./36.

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	10								3	Other Allowances					
	11/12	Total Stoppages							4/5	Total @ 4.86 2/3			86	90	17 17 1
	13	Fines							6	Balance Credit Last Period					28 18 2
	14	Clothing & Necessaries							6a	<u>OTHER CREDITS:</u>					
	15	Arms & Accoutrements								Ration Allowance,					
	16	Barrack Damages								13 /8/17 to 26/8/17					
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	22	3rd "													
	23	Final "													
	24	Balance Debit Last Period													
	28	" Due by Paymaster			1	18	5		27						
					47	13	3								47 13 3

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CERTIFIED CORRECT.

NEWFOUNDLAND

[Signature]

O.C. " " Company.

CHECKED
24/8/17



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 signing this declaration. The "Rank," "Station," and "Date" should be in his own handwriting.

This 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.

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

CERTIFICATE COPY

RECORDED
24 AUG 1917
OFFICE

A Name in full *Wardiman Charles*
Regiment from which discharged *1st Newfoundland*
Regimental Number *1716*
Where born (Parish, Town and County), and when *Grand John Hfld 1895*
Intended address *Grand Jean St Johns Hfld.?*
Height on discharge *5* Feet *5* Inches
Colour of Hair on discharge *Hair* **Colour of Eyes** *Blue*
Descriptive marks *G. I. N. R. Arm.* **Complexion** *Fresh*
Figure on discharge *Medium*
Christian name of Father *James*
Christian name of Mother *Jusana*
Wife's Maiden name in full _____
Date and Place of Marriage _____
Christian names of Children _____
Nature and locality of civil employment desired *When fit, to return as a sailow.*

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) *Charles Wardiman*
X His mark. (Rank) *Private*

Station *Handsworth.* Date *5. 8. 17.*

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.

(Signed) *L. Zeibler* *C.S.* Medical Officer i/c Hospital.

Station *Handsworth S.W.* Date *5. 8. 17.*

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.

CERTIFIED TRUE 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. 1716 Rank Plt
Name (surname first) Hardiman Charles
Regiment 1st Newfoundland

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

Sailor

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. Harris
Grand Bank
April (12 months)

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

4. What is the name of your Approved Society? National Health Society

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

No

Date 4.8.17

Signature Sgt Charles Hardiman

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.

Despatching
Office
Stamp



No. 92

From NY 7/18/88

Registered Letter Addressed--

Arrival
Office
Stamp

A handwritten signature in cursive script, appearing to read "M. J. [unclear]".

Received by _____

Casualty Form—Active Service.

Regiment & Corps Newfoundland

Regimental No. 1716

Rank Plt. Name Hartman

Enlisted (a) 19.7.16

Terms of Service (a) Duration

Service reckons from (a) _____

Date of promotion to present rank _____

Date of appointment to lance rank _____

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

Extended _____

Re-engaged 19.6.16

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. 35, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 35, or other official documents.
Date	From whom received				
		<u>Embarked Southampton</u>		<u>25.6.16</u>	
		<u>Embarked Rouen</u>		<u>26.6.16</u>	
		<u>Joined Battalion</u>		<u>12.7.16.</u>	<u>With Battalion 23.1.17.</u>
<u>S. 3.17.</u>	<u>O. Elliot</u>	<u>Wounded in Action</u>	<u>France</u>	<u>3.3.17</u>	
	<u>Co. 2nd.</u>	<u>Trans. C.W. 1st</u>	<u>2nd Lt. C.</u>	<u>3.3.17</u>	<u>Ed 881</u>
	<u>Gravelly Castle</u>	<u>Went to England</u>		<u>6.3.17</u>	<u>W 3083</u>
		<u>at 1st Aust. Cav. Force</u>			
					<u>Sgt. W. Burchell</u>
					<u>Capt</u>
					<u>For 1st Reg. Infantry</u>
					<u>Ed 2 3rd Echelon</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) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

-Certificate to be signed by the soldier on date of 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.

Name Charles Hardiman Sig. of Soldier Charles Hardiman

Place Grand John Bay Sig. of Witness Elijah Brown

This space to be left blank for the Certificate Number.

CERTIFICATE TRUE COPY

Rfb

Army Form B. 268.



Proceedings on Discharge.

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

No. <u>1716</u>	Army Rank <u>Private</u>
Name <u>Hardiman C.</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
Corps <u>1st Newfoundland Regiment</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>February 14th 1918</u>	
Place of discharge <u>St. Louis, Nfld</u>	
1. <u>Description at the time of discharge.</u>	
Age <u>22</u> years <input checked="" type="checkbox"/> months	Descriptive marks. <u>P.L.W. of Arm</u>
Height <u>5</u> feet <u>5</u> inches	
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.	
Complexion <u>Fresh</u>	
Eyes <u>Blue</u>	
Hair <u>Bair</u>	
Trade <u>Sailor</u>	
Intended place of residence { <u>Grand John</u> <u>Fortville Bay</u> <u>Newfoundland</u> <small>(To be given as fully as practicable)</small>	
<small>(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.)</small>	
2. The above-named man is discharged in consequence of <u>Wounds received in Action</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. 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.

N.F.P./54

No.417.

From Pay & Record Office,
London

To Minister of Militia,
St. John's, Nfld.

#1716 Pte.C.Hardiman

Overcredited Ration Allowance as per claim 156. 3s. 6d.

January 20th 1920

Major Howley
O. I. C. Records

Please pay to C. Hardiman, 1716
the sum of five dollars
in payment of arrears of allowance for month ended Jan 10th 1920
and charge same to Civil Re-establishment Committee

\$5.00

Pension \$20.00

Board \$30.00

26551	Fee

C. B. H.
Hardiman

W. V. H.

.....
Vocational Officer

May 1st 1920

Major Howley
O. I. C. Records

Please pay to C. Hardiman, 1716
the sum of seven dollars
in payment of arrears of allowance for week ended this date
and charge same to Civil Re-establishment Committee

\$7.00

Pension \$20.00

J. J. McNeill
J. J. McNeill

Vocational Officer

ACCOUNT	36506	INITIALS	JW
CHK NO		INITIALS	
INV. LEDGER		INITIALS	
PAY LEDGER		INITIALS	
GEN. LEDGER		INITIALS	

C. Hardiman

BB*EB

July 31st, 1920.

Major Howley,
O..I. C. Pay & Records.

Kindly pay to C. Hardiman, 1716,
the sum of forty dollars,
in payment of attendance and punctuality bonus.
Charge same to the Civil Re-establishment Committee.

\$40.00

W. W. Beckell

Vocational Officer.

ACCOUNT		INITIALS	<i>[Signature]</i>
CH. NO.	147	INITIALS	
INL. LEDGER		INITIALS	
PAY LEDGER		INITIALS	<i>[Signature]</i>
GEN. LEDGER		INITIALS	

C. Hardiman

Sept 4 1920

Major Howley
O. I. C. Records

Please pay to C. Hardiman 1716
the sum of eighteen dollars and sixty six cents
in payment of two weeks allowance to date
and charge same to Civil Re-establishment Committee

\$18.66

Pension \$20.00

ACCOUNT		
CHK. NO.	2251	INITIALS
INL. LEDGER		INITIALS
PAY LEDGER		INITIALS
GEN. LEDGER		INITIALS

~~C. H. A.~~ W. W. Mehall.

Vocational Officer

C. Hardiman

January 13th 1920

Major Howley
O. I. C. Records

Please pay to C. Hardiman, 1617
the sum of five dollars
in payment ~~RNK~~ of allowance for month ended Jan 12th 1920
and charge same to Civil Re-establishment Committee

\$5.00

Pension	\$25.00
Board	30.00
Allowance	5.00

ACCOUNT	25968	Rev
CHEQUE NO.		
DATE		
PAY TO THE ORDER OF		
AMOUNT		

[Handwritten initials]
.....
Vocational Officer

[Handwritten signature]
C. Hardiman
Mark
Wit Ewalds

2027

C.R. 1716

NEWFOUNDLAND CONTINGENT

CASUALTIES.

For

~~the~~

DISCHARGE

1716, Pte. C. Hardeman, ex. 3rd London General Hospital, 13/8/17, is granted furlough to 10 a.m. 23/8/17, with instructions to report at 58, Victoria Street, on the latter date for disposal.

Authority: For discharge,
A. F. B. 179.

Army Form B. 103.

Casualty Form—Active Service.

1204

Regiment or Corps 2/1 Wilt Regt Regimental Number GR 1776
 Rank Pte Surname Hardiman Christian Name Charles
 Religion Ch of England Age on Enlistment 21 years 5 months.
 Enlisted (a) July 19/15 Terms of Service (a) Duration Service reckons from (a) June 19/16
 Date of promotion to present rank _____ Date of appointment to lance rank _____
 Extended { _____ } Re-engaged { June 19/16 } Qualification (b) _____
 or Corps Trade and Rate _____
 Signature of Officer i/c Records.

Date	Report From whom received	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
		Embarked ...	<u>Southampton</u>	<u>25.6.16</u>	
		Disembarked...	<u>Rouen</u>	<u>26.6.16</u>	
		Joined Battalion	<u>12 JUL 1916</u>		
			<u>With BATT.</u>	<u>23.1.17</u>	
<u>5/17</u>	<u>G.C. Unit</u>	Wounded in Action	<u>France</u>	<u>3/3/17</u>	<u>B213</u>
	<u>60 F.A.</u>	<u>Trans. 3rd Wd. T.V. 1. 7th London B.S.</u>		<u>3.3.17</u>	<u>E.A. 881</u>
	<u>"Specially fit"</u>	<u>Invalided to England</u>		<u>6.3.17</u>	<u>W 3085</u>
		<u>as 1st Lt. 3rd Regt. Rifles</u>			
			<u>W. Burchell</u>		<u>CAPTAIN.</u>
					<u>for Officer i/c No. 1 Regular Infantry Section</u>
					<u>General Headquarters, 3rd Echelon.</u>

COPY SENT TO
 O.C. H.Q.
 ST. JOHNS, N.F.L.D.
 N.F.P.38. No. 8145/103
 DATED 4 AUG 1917

(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, Shoemaker, &c.
 (B20130) W 15012-3126 J. P. & Co., Ltd. Forms B103/2. **(P.T.O.)**

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.
 (6-40) W5017/2134 1000m 6/15ss 93 56

Forms
B. 121.
29.

Number of Sheet 1 of 1

Regiment of 1st Newfoundland

Signature of O. C. Company James [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay	
No.	<u>1716</u>	<u>16</u>	<u>Hardiman</u>	Age on <u>21</u> years <u>5</u> months	<u>Fisherman</u>	
Joined	Date	Place and Date of Enlistment		Religion		
Joined	Date	<u>St John's</u> <u>July 19, 1915</u>		<u>CoE</u>		
Joined	Date	Period of		Place of Birth		
Joined	Date	{ with Colours <u>2</u> ¹¹ years.		<u>Grand John</u>		
		{ with Reserve <u>2</u> ³⁶ years.				



Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order disposing with trial	By whom awarded	REMARKS
<u>Comp.</u>	<u>13/6/16.</u>	<u>No.</u>	<u>1</u>	<u>Drunk in town</u>	<u>Pls: Milley, J</u> <u>Life. Walsh, U</u>	<u>Admonished.</u>	<u>15/6/16</u>	<u>H. G. Co.</u> <u>Whitaker</u>	<u>- Int</u>
				<u>Medically Unfit</u>	<u>14 2/8</u>				

To be carried over

Army Form B. 121.