



# FIRST NEWFOUNDLAND REGIMENT.

## ATTESTATION OF

No. 2096 Name Samuel Harding Corps \_\_\_\_\_

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

1. What is your name? ..... 1. Harding
2. What is your full Address? ..... { 2. \_\_\_\_\_
3. Are you a British Subject? ..... 3. \_\_\_\_\_
4. What is your Age? ..... 4. 19 Years ..... Months.
5. What is your Trade or Calling? ..... 5. \_\_\_\_\_
6. Are you Married? ..... 6. \_\_\_\_\_
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. \_\_\_\_\_
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, Samuel Harding 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.

Samuel Harding SIGNATURE OF RECRUIT.

Signature of Witness.

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

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

### CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me at \_\_\_\_\_

on this \_\_\_\_\_ day of \_\_\_\_\_ 1915

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 \_\_\_\_\_ 1915

Place \_\_\_\_\_

Approving Officer.

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

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

# DESCRIPTIVE REPORT ON ENLISTMENT.

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

2096

Name Samuel Harding  
 Apparent age 17 years 2 months. Height 5 feet 8 inches.  
 Chest measurement { Girth when fully expanded 39 1/2 inches.  
 { Range of expansion 3 1/2 inches.  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Nathaniel Harding, Greenspond, B. B.  
 | Relationship Father  
 Particulars as to Marriage.

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

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

## Particulars as to Children.

Christian Names.	Date and Place of Birth.

## STATEMENT OF THE SERVICES.

Corps in which served	Rgt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank.	Dates	Service not allowed for reckoning 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 _____							<p>Discharged <u>St. John's. May 30/1917</u></p>
Joined at _____ on _____							
Total Service forfeited as above ... ..							
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days							
" " " Pension " _____ ( " ) _____ " _____							



# FIRST NEWFOUNDLAND REGIMENT.

## ATTESTATION OF

No. 2076 Name Samuel Harding Corps \_\_\_\_\_

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

- |  |                                     |
|--|-------------------------------------|
| 1. What is your name? .....  | 1. <u>Samuel Harding</u>            |
| 2. What is your full Address? .....  | 2. <u>Guernsey, B.P.R.</u>          |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u>                       |
| 4. What is your Age? .....   | 4. <u>19</u> Years <u>3</u> Months. |
| 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>                      |

I, Samuel Harding 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.

Samuel Harding SIGNATURE OF RECRUIT.

Feb 17<sup>th</sup> 1916 Walter B. [Signature] Signature of Witness.

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

I, Samuel Harding 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, Nfld.

on this 17<sup>th</sup> day of February 1916 Walter B. [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 \_\_\_\_\_ 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, the Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz—  
 (Name) \_\_\_\_\_ re-enlisted in the (Regiment) \_\_\_\_\_ on the (Date) \_\_\_\_\_

# DESCRIPTIVE REPORT ON ENLISTMENT.

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

2554

Name Samuel Harding  
 Apparent age 17 years 2 months. Height 5 feet 8 inches.  
 Chest measurement { Girth when fully expanded 37 1/2 inches.  
 Range of expansion 3 1/2 inches.  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Mathew Harding, Greenpoint, N. Y.  
 | Relationship Father  
 Particulars as to Marriage.

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

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

### Particulars as to Children.

Christian Names. Date and Place of Birth.

Christian Names.	Date and Place of Birth.

## STATEMENT OF THE SERVICES.

Corps in which served	Rgt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank.	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					years	days	years	days	
Service towards limited engagement reckons from <u>17-2-16</u>									
Joined at <u>St John's</u> on <u>February 17/16</u>									
<u>Embarked 1st Bn. 1st Division 1st Lt. 24/16</u>									Embarked for B.C.S. 9/16 Invalided to England 2/17 Discharged 30-5-17 Re-embarked for Special duty 16-10-17 Struck off strength 3-1-18
<u>Joined base depot 10-7-16</u>									
<u>Admitted 1st General Hosp. Roadstead 4/16</u>									
<u>Embarked for B.C.S. 12/16</u>									
<u>Joined 1st 25-9-16</u>									
<u>Invalided to England 9/17</u>									
<u>Admitted 1st Gen. Hosp. 10/17</u>									
<u>Continued in 1st Gen. Hosp. until 14-4-17</u>									
<u>Arrived Newfoundland 11-5-17</u>									
<u>Discharged 30-5-17</u>									
<u>Re-embarked for Special duty 16-10-17</u>									
<u>Struck off strength 3-1-18</u>									
Total Service forfeited as above									
Total Service towards Engagement to <u>30-5-17</u> (date of discharge) <u>1</u> years <u>169</u> days									
" " " Pension " " " " " " " "									



SERIAL NUMBER 7096

COMPANY D.

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 Samuel Harding

Witness Wm. Churchill 2/11/16

Dated at St. John's  
me 30 1916

## Proceedings on Discharge.

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

No.	2096	Army Rank	Private
Name	Harding Samuel		
(The name must agree exactly with that on enlistment, unless changed subsequently by authority.)			
Corps	Newfoundland Regiment		
Battalion Battery, Company, Depot, &c. (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			
Description at the time of discharge.			
Age	19	years	months
Height	5	feet	9 1/2 inches
Chest measurement	girth when fully expanded		ins.
	range of expansion		ins.
Complexion	Flesh & well		
Eyes	Grey		
Hair	Brown		
Trade	None		
Intended place of residence	27 Regent St St. John's Newfoundland		
(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)			
2. The above-named man is discharged in consequence of <u>gunshot wound</u> <u>to the eye producing defective vision</u> <u>of right eye.</u>			
(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)			
3. Military character:—			
4. Character awarded in accordance with King's Regulations:—			
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.			
Initials of Commanding Officer.			
Army Form B. 2068 has been issued to*			

O.C. M.C.  
 ACCOUNTS FIELD  
 27/3/18  
 MAR 29 1918

Moles near left ear

To be filled in on the soldier quitting the Colours.

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

Yes. Yes.

# Proceedings on Discharge.



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

No.	2096	Army Rank	Private
Name	Harding Samuel		
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)			
Corps	1 <sup>st</sup> Newfoundland Regiment		
Battalion, Battery, Company, Depot, &c.			
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)			
Date of discharge	May 30 <sup>th</sup> 1917		
Place of discharge	St. John's, Nfld.		
1.	Description at the time of discharge.		
Age	19 years	3 months	Descriptive marks.  Moles near left ear
Height	5 feet	9 1/2 inches	
Chest measurement	girth when fully expanded ins.		
	range of expansion ins.		
Complexion	Flesh & red		
Eyes	Grey		
Hair	Brown		
Trade	None		
Intended place of residence	62 George St		
	St. John's Newfoundland		
(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)			
2.	The above named man is discharged in consequence of <u>Gunshot wound</u> <u>in right eye producing defective vision of</u> <u>left eye</u>		
(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)			
To be filled in on the soldier quitting the Colours.	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 <sup>o</sup>			



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

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

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

6. Campaigns, Medals and Decorations

Certificate of education .....

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

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

(Date) \_\_\_\_\_ Commanding \_\_\_\_\_ Batta. \_\_\_\_\_ 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 Rd. Samuel Harding (Signature of Soldier.)

(Date) May 31. 1917 C. O. Ke. (Signature of Witness.)

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

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

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

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

10. *Statement of service.*

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

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

Total ... .. " " "

11. *Confirmation of discharge.*

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

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

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

Signature \_\_\_\_\_

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

RESERVATIONS REFERRED TO AT PARA. 8.

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

*No Reservations!—*

*Samuel Harding*

C.R. 2096

Extract from Daily Orders Part II Unit The Royal WFLD.  
Regt., St. John's, May. 15th, 1917.

2096 Pte. S. Harding.

Attached to Strength from May 11th, 1917.

C.R. 2096

Extract from Casualties received from Pay and Record Office  
London, dated Aug. 7th., 1918

Admitted 3rd., London General Hospital Wandsworth.

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#2096 Pte. S. Harding.

ULCER L. FOOT.

BC.

C.R. 2096

Extract of Daily Orders part 11, from Unit Royal  
Newfoundland Regiment. Headquarters, dated  
January 3, 1918.

#2096 Pte. S. Harding

Re attested for recruiting ~~to~~ struck off the  
strength with effect from 3-1-18.

C.R. 2096

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

2096 Pte. Samuel Harding,  
Discharged May 30th 1917, Medically unfit

C.R. 2096

Extract from roll of Officers  
N. C. O's and men DISCHARGED  
from the Royal Newfoundland  
Regiment

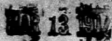
REGTL.#	Rank	name	date	reason.
3096	Pts.	Harding Samuel	30/5/17	MED. UNFIT.

Form

Foundation Postal Telegraphs

Office Stamp and Date

H. 1/10



Service MESSAGE

Time received by Time sent by

From

To

Postal Casualty Chest  
Greenpond notifies your  
date Harding undelivered  
party now living 62  
George's St St Johns - we  
deliver copy there.



C.R. 2096

Extract from Casualties received from P.&.R.Office, London,  
Mar.13th,1917.

Wandsworth;

2096 Harding.

Contusion.

# V FOUNDLAND POSTAL TELEGRAPHS.

Counter No. 100

## 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)**

*Handwritten signature: J. R. Bennett*

Signature of Sender

Address

Line Number	Rcd	By	Sent	by	Check

Dated March 13, 1917.

To Mr. Nathaniel Harding,

Greenspond.

Regret to inform you that Record Office, London, officially reports No. 2096, Private Samuel Harding, has been admitted to Wandsworth suffering from contusion.

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**

C.R.

2096

Extract from Nominal Roll of Draft No. 15 Embarked Southampton  
12/12/16 from 2/1st Newfoundland Regiment to 1/1st Newfoundland  
Regiment B.E.F.

2096 Pte. Harding, S.

MP.

C.R. 2096

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P. & R.O. August 14th. 1916.

2096. Pte S. Harding. ✓

1 Newfoundland R. Ulcer Left Foot. to Eng. ex 16 Gen. Hos. 2nd Aug. 16.

C.R.

2096

Extract fo Casualty Lost received from P. & R. O. Aug. 10th. 1916.

2096, Pte S. Harding. ✓

Transferred from the 3rd London Gen. Hosp, to Brooklands Military Hosp.  
Weybridge.

C.R. 2096

NO. 2096 HARDING S. ✓

EXTRACT OF CASUALTY LIST RECEIVED FROM THE PAY & RECORD  
OFFICE LONDON DATED AUGUST 7, 1916.

"WANDSWORTH ULCER FOOT DEFT." August 4, ✓

# (100)

COPY OF TELEGRAM.

Dated  
7th August, 1916.

To  
Mr. Nathaniel Harding,

Greenspond.

Regret to inform you that the Record Office,  
London, officially reports ~~No. 2096 Private Samuel~~  
Harding at Wandsworth August 4th Ulcer on foot.

Upon receipt of further information I shall immedi-  
ately wire you and trust that the next report will  
be of his convalescence.

J. R. BENNETT,

Colonial Secretary.

C.R. 2096

## SICK AND WOUNDED H.C.O.'S AND MEN OF THE EXPEDITIONARY FORCE - FRANCE.

## TERRITORIAL FORCE HOSPITAL RECORD OFFICE.

2116 Dmr. Bodley, R.	7/Mx.Rgt.	Influenza.....	Adm.16.Gen.H.Lo	LIST NO.H.A.1387.
2181 Pte. Martin, H.J.	2/7.Iix.Rgt.att.9/ Lond.	GSW.H.Eye.	Treport.28th.July.16.	-do-
4700 Pte. Harris, A.A.	1/8.Iix Rgt.	GSW.Head.Legs & Back.	-do-	-do-
2047 Pte. Amis, V.L.	7/ -do-	Ulcer Neck	-do-	-do-
3322 Bdm. Koder, A.H.	2/8 -do-	H.Y.D.	-do-	-do-
3052 Pte. Kim, H.A.	2/7 -do-	Synov.R.Knee.	-do-	-do-
2724 Sjt. Heslop, V.	1/7 -do-	D.A.H.	-do-	-do-
3217 Pte. Syrett, L.	2/8 Mx.att.1/9 Lond. Rgt.	Hernia L.Ing.	-do-	-do-
3233 Pte. Williams, P.	1/8 Mx.Rgt.	Colitis.	-do-	-do-
2069 Pte. Rixon, T.G.	1/8 -do-	Diarrhoea.	-do-	-do-
4862 Pte. Morgan, P.E.	2/8 -do-	Cont.Foot.L.	-do-	-do-
4876 Pte. Ridgegrave, J.	2/8.Mx.R.att.1/6.Lond. Rgt.	I.C.T.Finger J. Hand.	-do-	-do-
2471 Pte. Green, H.	8/Mx.Rgt.	GSW.Back.	-do-	-do-
3180 Pte. Harrison, H.W.	2/8 Mx.att.1/6.Lond. Rgt.	I.C.T.R.Ankle.	-do-	-do-
2285 L/C. Daykin, J.	1/8 Mx.Rgt.	Cont.R.Leg.	-do-	-do-
3243 Sjt. Spencer, V.J.	2/8.Mx.att. 1/6.Lond. Rgt.	Enteritis	-do-	-do-
3002 Pte. Frater, W.C.	2/7 Mx.att 1/5 Lond. Rgt.	Hernia R.Ing.	-do-	-do-
2856 Cpl. Dyer, H.	1/7 Hx.Rgt.	Myalgia.	-do-	-do-
4615 Pte. Kingham, H.	2/8 Mx.att 9/Lond. Rgt.	V.D.G.	-do-	-do-
2299 L/C. Dann, F.H.	1/5 R.Sussex.R.	I.C.T.Abdominal Wall.	To.Eng.ex.16.Gen.H.29th.July.16.	
5311 Pte. Tasker, G.W.	7/Mx.R.	ICT.Fng.R.Hand...	Adm. 16 Gen.Hos. Le Treport, 28th July, 16.	

## NEWFOUNDLAND CONTINGENT.

2406 Pte. Harding, S.	1/Novfoundland Rgt.	X Ulcer L.Foot.....	Adm.16.Gen.H.Lo	LIST NO.H.A.1387.
			Treport.28th.July.16.	

2096



2477



CASUALTIES.

Admitted 3rd, London General Hospital, Wandsworth S.W. 4/8/16:-

No. 2096, Pte. S. Harding,  1, Newfoundland R.

suffering from Ulcer Foot.

Authority:- Tel. message from Hospital, received 5 p.m., 5/8/16.

C.R.

2096

C.R. 2096

Extract from Nominal Roll Embarked St. John's for Overseas.  
Mar. 23, 1916.

2096 Pte. S. Harding.

C.R. 2096

Extract from Nominal Roll of Field. Regt. Draft No. 15  
from 2nd Bn. Depot, to 1st Bn. B.E.F. Embarked South-  
ampton, 12-12-16.

2096 Pte. S. Harding.

C.R. 2096

Extract from Nominal Roll of Mfld. Regt. Draft No.8.  
from 2nd Bn. Depot, to 1st Bn. B.E.F. Embarked Southampton,  
9-7-16.

2096 Pte. S. Harding.

Δ 2096.

Copy.

#22.

Cash advanced by Messrs. Patten. & Forsey.

2096. Pte. Harding.

Cash advanced.

\$5.00

Signed. J.M. Howley,

Department of Militia,

St. John's. Newfoundland.

December 29th. 1917.

Reg. No. 2096 Rank Pfc Name Harding S.

Attested \_\_\_\_\_ Address \_\_\_\_\_

Allotment \_\_\_\_\_ Allottee \_\_\_\_\_

Date of Allotment \_\_\_\_\_ Returned from Overseas 11.5.17.

Embarked for Overseas \_\_\_\_\_ Cause Wounded.

16-5-17 Rec for discharge

30-5-17 Discharged.

16-10-17 Proceeded to Berlin Recruiting

returned from recruitment granted leave 24/11/17-1/1/18  
3/1/18. Retd. for Struck off SR strength with effect. 3/1/18

C.R. 2096

Saml. Harding was attested for General Service with  
the NEWFOUNDLAND CONTINGENT on Feb. 17th 1916.

Regimental No. 2096 was allotted to Pte Saml. Harding.

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th 1919

S. Harding.

CR. 2096

P & R. O









2090, Pte. Harding, B  
 25/12/16 20/4/17

Miserable  
 Liverpool 34 20/4/17

1.10 1 1 10 4 6  
 .65 119 77 55 15 17 11  
 78 45

1.00 119 119 00  
 .10 119 11 90

150 90 26 17 11½

Balance carried forward 18 10  
 Ration allowance 5 - 14/10/16  
 = 10 days @ 2/- 1 0 0

28/3/17 Age, Rolls France. 3 10 5  
 Hospital advance 7 0

15/4/17 *P.978.0* 7 10 0  
 1 6 11  
 28 16 9

28 16 9



NEWFOUNDLAND CONTINGENT  
 Syd F. W. Marshall, Lieut.  
 FOR PAYMASTER & OFFICER I/C RECORDS

Temp. a/c

NO. 2096RANK: PrivateNAME: Samuel HardingCO. 8<sup>th</sup> StaffALLOTMENT. 65

Date	P., As. etc.	Amount	PAY	Amount
	Dr. Balance		Credit Balance <u>7/7/</u> 191	
	Hospital	1 10 0 ✓	Exchange " _____ 191	
	A.B. 64		PAY @ HI RATE	
	Kit Charges	1 0 ✓	From <u>8/7</u> To <u>5/10/6</u> 90 days	86.50 ✓
	Aug 1944	37 ✓	From _____ To _____ days	5 1 1
	P. & R. Uniform.	3 6 6 ✓	From _____ To _____ days	3 5 4
		£ 5 1 1	From _____ To _____ days	

*[Signature]*

3rd. London General Hospital.

Wandsworth, S.W.

March 15/1917.

From O.C. 3rd. London General Hospital.

To O.C. Records.

58 Victoria St, S.W.

In conformity with instructions contained in A.O.I.

No. 2069 of 1916., I beg to report that:-

2096. *Plt. S. Harding. 1/ Newfoundland.*

will shortly be brought before a Medical Board, and will probably be discharged from the Army or re-Classified.

*Dup. documents will not be required, please.*

*H. Tazewell*  
*Capt. R.A.M.C.*  
3rd London General Hospital,  
WANDSWORTH, S.W.

Admitted

10-3-14

Army Form W. 3202.

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

1st Bn

Regiment

~~The Officer Commanding~~

1st Bn Contingent

The Officer in Charge of Records

58 Victoria St S.W.

The Regimental Paymaster

58 Victoria St S.W.

With reference to No.

2096 Plc Standing S.

of the above Regiment, who appeared before a Medical Board and was approved by

the D.D.M.S.

Command, on the

23-3-14

for discharge from the Service as permanently unfit, please note that this man has been sent to his home on warrant with orders to await instructions as to his final discharge; he has been given £1 (one pound) advance and a suit of plain clothes.

He proceeded to

58 Victoria St S.W.

on [date]

13-4-14

H. Jagan

Officer Commanding

Capt. R.A.M.C.

Registrar, R.A.M.O.I. Hospital.

Place

Wandswoth

3rd London General Hospital,

Date

13-4-14

WANDSWORTH, S. W.

\* In case of Territorial Force "Officer Commanding the Administrative Centre."

Four copies to be made, and one copy sent to each Officer mentioned above, and one copy filed in the Office.



Harding, S.

2096

Hay Sept



NEWFOUNDLAND CONTINGENT

No. 40.

~~Deputy Paymaster~~

1st Newfoundland Regt.,

St. John's, Newfoundland.

MEMORANDUM of STOPPAGES/CREDITS on Account of

**HOSPITAL ADVANCES**

NOTE:- Charge under **Casual Payments** Column.

**Credit Pay & Record Office, London.**

Regtl No.	Rank & Name	Particulars & Authority	AMOUNT				
			£	s	d	q	
2096	Pte Harding, S	Advances Srd. London General Hospital, per A. P. O. 1823a/1872 & 1355			1	7	0
					1	7	0

*ok. copy*

Pay & Record Office,  
58, Victoria Street,  
London, S.W.,

Srd, May 1917

*W. H. ...* Major,  
Paymaster & Officer i/c Records.

CERTIFIED that the above Stoppages/Credits have been made in the  
Pay Book of ~~Headquarters~~ Company for Period 11 to 11

Dated at

*St. John's, Nfld.*  
*May 19<sup>th</sup> 1917*

Deputy Paymaster,  
Battalion.

ORIGINAL of this FORM to be COMPLETED and RETURNED intact to Paymaster & Officer i/c Records, Newfoundland Contingent, 58, Victoria Street, London, S.W. DUPLICATE to accompany PAY BOOK as VOUCHER.

4984

Laguna Gold  
April 29/19

Lieut H Maddick

Dear Sir

In reply to your letter of April 15<sup>th</sup> to my brother Lawrence regards to my War service gratuity you said Sir it was necessary for me to write to the Department to notify or otherwise to come myself.

Sir I cannot come myself at present but I would kindly ask you to send it to address.

No 12 Cor pleasant and Hagerty Street City  
and oblige yours truly

Samuel Harding

#2096

April 15, 1919

Mr. Laurence Harding,  
12, Cor. Pleasant & Magerty Streets,  
C i t y.

Dear Sirs:

With reference to your letter of April 13th. I beg to inform you that in order for you to receive your brother's War Service Gratuity, it is necessary for him to write direct to this Department and notify us to that effect, otherwise he may come and receive it himself.

Yours truly,

Lieut.  
For Paymaster

Capt Howley

his friend  
received  
y<sup>o</sup> /

St. John's, Newfoundland.

April 18<sup>th</sup> 1919

Dear Sir:-  
4610

Private Samuel Harding  
No 2096 is not at home. So when leaving  
he told me that if this money did not  
come up the first of April to write and let  
him know, his money did not come up  
So I wrote and told him yesterday I  
had a letter from him saying to write you  
and ask if you would send it to his  
home as he will be away for some time  
and in case he would want it I could  
send it to him as I am his brother.

I might say that he is up on  
the west coast and if his money dont come  
up I will write him and tell him to write  
you himself but he generally leaves me  
to do the writing for him.

Sincerely Yours

Lawrence Harding Esq  
of Private Samuel Harding No 12 Cor  
of Pleasant + Hagerly Street  
City.

**NEWFOUNDLAND CONTINGENT**

STATEMENT of ACCOUNT of No. 2096, Pte. Harding, S  
 Company. From 23/12/16 To 20/4/17 (Dates inclusive)

(Substituting A.F.O-1625) N.F.P/36.  
 Embarked per S. S. Missenabie  
 From Liverpool Date 20/4/17  
 Draft No. 54 CR.

DR. Classification (See procedure)

Date	Pay Book Col	Particulars	Rate	Dys	£	sh	d	Date	Pay Book Col	Particulars	Rate	Dys	£	sh	d
	8	Forfeited Pay	1.10	1	1	10	4	6	1	Pay	1.00	119	119	00	
	0	Allotments	.65	119	77	58	15	17	11	2	Field Allowances	.10	119	11	90
	10								3	Other Allowances					
	11/12	Total Stoppages							4/5	Total @ 4.85 2/3					
													130	90	26 17 11½
	13	Fines							6a	Balance carried forward					18 10
	14	Clothing and Necessaries								Ration allowance 5 - 14/10/16					1 0 0
	15	Arms & Accoutrements								= 10 days @ 2/-					
	16	Barrack Damages													
	17	Hospital Stoppages													
	17a	Miscellaneous Stoppages					3	10	5						
28/3/17	19	Casual Payments						7	0						
	20	1st Payment													
	21	2nd "													
	22	3rd "													
13/4/17	23	Final " <i>P.F.R.O.</i>					7	10	0						
	24	Balance Debit Last Period					1	6	11	27	Balance Due to Paymaster				
	28	" Due by Paymaster													
							28	16	9						28 16 9



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CERTIFIED CORRECT  
 NEWFOUNDLAND CONTINGENT

*[Signature]*  
 FOR  
 PAYMASTER & OFFICE COMPANY

CHECKED  
*[Signature]*



NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 2020, Pte. Harding, S  
 Company. From 25/10/16 To 20/4/17 (Dates inclusive)

(Substituting A.F.O. 1625) N.F.P/36.  
 Embarked per S. S. Miscellaneous  
 From Liverpool Date 20/4/17  
 Draft No. 54 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	1.10	1	1	10		4 8		1	Pay	1.00	119		119	00	
	9	Allotments	.65	119	77	35	15	17 11		2	Field Allowances	.10	119		11	90	
	10									3	Other Allowances						
	11/12	Total Stoppages								4/5	Total @ 4.86 2/3						
								78 45									150 90 26 17 11 1/2
	13	Fines								6a							
	14	Clothing and Necessaries									Balance carried forward						18 10
	15	Arms & Accoutrements									Ration allowance 5 - 14/10/16						
	16	Barrack Damages									= 10 days @ 2/-						1 0 0
	17	Hospital Stoppage															
	17a	Miscellaneous Stc															
	19	Casual Payments															
28/3/17	20	1st Payment															
	21	2nd "															
	22	3rd "															
15/4/17	23	Final " <i>p.y.</i>															
	24	Balance Debit Last Period															
	28	" Due by Paymaster								27	Balance Due to Paymaster						
								28 16 9									28 16 9



191

CHECKED  
*M.H.H.*

DUPLICATE  
 MAIL COPY  
 Posted 26 APR 1917

CERTIFIED CORRECT  
 NEWFOUNDLAND CONTINGENT  
*J. H. Marshall*  
 PAYMASTER & OFFICER IN CHARGE

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 *Samuel* 2. Surname *Harding*  
3. Rank *Private* 4. Regt. No. *20th*  
5. Address in full to which future payments of gratuity are to be forwarded. *Samuel Harding, 12 Wagerly St. St. John's*  
6. Date of enlistment in the Regiment. *February, 1916*  
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 dependent.  
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?  
11. Were you on active service only in Mfld. If so, give dates, and particulars of such service. *Overseas*  
12. Give total length of time which you served on active service, whether in Mfld. or Overseas. *From Feb 1916 to May 1917*  
*One year one hundred and three days*



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. *\$87.15 (Eighty seven dollars and fifteen cents)*

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 *May 1917* (b) Reason for discharge *Medically unfit on account of wounds received on active service.*

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. *On the Somme front in France from July 1916 to Mar 1917.*

21. (a) Are you receiving treatment from the Civil Re-Establishment Com.? (b). If so, are you in receipt of full pay and allowances from that Committee? *No.*

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

Signature of Applicant: *Samuel Harding*  
 Place of Residence: *12 Hagers Street City*  
 Declared before me at: *Ohio*  
 This *3rd* day of *May* 19*17*

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

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
<i>11-12-18</i>	<i>100.00</i>		<i>4 hrs.</i>	<i>280.00</i>
			<i>less P.D.P.</i>	<i>102.00</i>
				<i>178.00</i>
Certified Correct.			Paymaster.	



No 2296

Name Handing S.

Date	Particulars	Ch. No.	Dr.	Cr.	Bal.
Apr 20	Acduce by B.M. L-611			6 54	6 54
30	By pay 10 days @ 1 <sup>10</sup> / <sub>100</sub>			11 00	17 54
May 10	" " 10 " do			11 00	28 54
30	" " 20 " 1 <sup>10</sup> / <sub>100</sub>			27 00	65 54
	Bonus clearing			12 95	78 49
				25 00	103 49
Apr 30	To Allot 10 day abt		6 50		96 99
May 3	advance at S. P. H. L-17-0		6 56		90 43
"	To pay		15 00		75 43
31	To allotment		20 15		55 28
	To Balance		53 28		2 00
	To pay		20 00		
	War Service Credit 4 mo @ 70 <sup>00</sup> / <sub>100</sub>			280 00	280 00
	clearing			35 00	315 00
	Bonus		12 95		302 05
Dec 11	To pay		87 15		214 90
Jan 31	" "	6639	55 00		179 90
Mar 1	" "	10731	70 00		109 90
Jun 24	" "	24536	109 90		
			418 49	418 49	2

PAY LEDGER  
 Date 14-5-21 by AK

Sis. A. Hoany SSM



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 *Samuel Harding*  
aged *19* conducted at *C L B Amourp*  
Date: *Feb. 15/16* Recruiting officer:

NO. OF TEST	FINDING
1	<i>No</i>
2	<i>No</i>
3	<i>No</i>
4	<i>No</i>
5	<i>No</i>
6	<i>No</i>
7	<i>Yes</i>
8	<i>Yes</i>
9	<i>No</i>
10	<i>n</i>
11	<i>n</i>
12	<i>n</i>
13	<i>n</i>
14	<i>n</i>
15	<i>n</i>
16	<i>n</i>
17	<i>n</i>
18	<i>n</i>
19	<i>6-6 both eyes</i>
20	<i>n</i>
21	<i>n</i>
22	<i>n</i>
23	<i>n</i>
24	<i>n</i>
25	<i>n</i>
26	<i>n</i>
27	<i>n</i>
28	<i>n</i>
29	<i>n</i>
30	<i>n</i>
31	<i>n</i>
32	<i>n</i>
33	<i>No</i>
34	<i>5-11 1/2 inches</i>
35	<i>15 3/8 lbs</i>
36	<i>36-39 1/2</i>
37	<i>350. a year.</i>
38	<i>Both parents alive. Pattenel &amp; Sumanals Harding. Greenpond.</i>
39	<i>Father &amp; mother (partly defunct?)</i>

*2096*

Signature of Medical Examiner:

*J.W. Burden*

*21*

St Johns  
June 7<sup>th</sup> 19

Capt Howley  
Wearin.

371

I am about to ask  
you if I could get the mothers  
allowance <sup>money</sup> as I has not received  
one during the time my son  
went to war. every one around  
informs me that they received  
it and, I think that I am  
worthy of it also. you might  
say that I am too late. but not  
yet as the soldiers are not all  
back and I dont consider the war  
over until all the soldiers are  
back home.

I am the mother of  
Private Samuel Harding. 2096  
and would like to get what I  
think belongs to me.

Sincerely yours  
Mrs Nathaniel Harding  
12 Co. Pleasant Hagerly St  
City,







# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

V. F. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.  
 [5-4] W1017/2134 1000m 6/15m 25 50

Forms  
 B. 121.  
 32.

Regiment of 1st Newfoundland Regiment

Number of Sheets 1  
 Signature of O. C. Company W. J. Bell Coy  
W. J. Bell Coy

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay	
No.	<u>2076 Harding S.</u>	Age on	<u>19 years 2 months</u>	<u>Fulmar</u>		
Joined	Date	Place and Date of Enlistment	Religion			
<u>2076 N.F.L.D.</u>	<u>Feb. 17 1916</u>	<u>St. John's, Nfld.</u> <u>Feb. 17 1916</u>	<u>C. of S.</u>			
Joined	Date	Period of	with Colours	Place of Birth		
<u>2076 N.F.L.D.</u>	<u>June 29 1916</u>					<u>1 1/2 years.</u>
Joined	Date	with Reserve				
<u>2076 N.F.L.D.</u>	<u>Oct. 13 1916</u>					

Place	Date of Offence	Rank	Cases of Disobedience.	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order disallowing with effect.	By whom awarded	REMARKS
		<u>Pvt.</u>		<u>Medically Unfit 30 5/7</u>					
<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;">                     COPY SENT TO                      O.C. H.Q.                      ST. JOHNS, N.F.L.D.                      N.F.L.D. NO. <u>278378</u>                      DATED <u>MAR 29 1917</u> </div>									
To be carried over									

Army Form B. 121.

## Casualty Form—Active Service.

1331

Regiment or Corps 1<sup>st</sup> Newfoundland Regt. Regimental Number C.R. 2096  
 Rank Pls Surname Harding Christian Name A. 2554  
 Religion b. of e. Age on Enlistment 19 years 2 months.  
 Enlisted Feb 17/16 Terms of Service (a) Duration of Service reckons from (a)  
 Date of promotion to present rank \_\_\_\_\_ Date of appointment to lance rank \_\_\_\_\_  
 Extended  Re-engaged  Qualification (b) \_\_\_\_\_  
 or Corps Trade and Rate \_\_\_\_\_  
 Signature of Officer i/c Records.

Report		Record of promotions, reductions, transfers, operations, &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>Scourmouth</u>		<u>9.7.16</u>
		Disembarked...	<u>Rever</u>		<u>10.7.16</u>
	<u>unt James Hartman</u>		<u>France</u>		
	<u>887 A</u>	<u>Ad Ward of 30th Troop</u>	<u>29<sup>th</sup> BOLS</u>	<u>22.7.16</u>	<u>88806</u>
	<u>3500</u>	<u>Admtd. War of Foot</u>	<u>Lauer</u>	<u>26.7.16</u>	<u>88982</u>
	<u>16 Gen A.</u>	<b>Transferred to England</b>	<u>of Gloucester</u>	<u>28.16</u>	<u>W3083</u>
	<u>Le Depot</u>				

COPY SENT TO

O.C. H.Q.

ST. JOHNS, N.F.L.D.

N.F.F. 59.

No.

MAR 29 1917

DATED

all Clerk

FOR OFFICIAL RECORDS

S. H. G. G. S. COLEMAN.

(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, &amp;c.

(20012) W 1202-5156 J. F. &amp; Co., Ltd. FORM B. 103/3

(P.T.O.)

## Casualty Form—Active Service.

2554

Regiment or Corps 21<sup>st</sup> New Foundland

Rank Pte. Surname Harding Christian Name Samuel 2231

Religion Church of England Age on Enlistment 19 years 2 months.

Enlisted (a) 17.2.16 Terms of Service (a) Duration Service reckons from (a) 17.2.16

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

Extended  Re-engaged  Qualification (b) \_\_\_\_\_  
or Corps Trade and Rate \_\_\_\_\_

MAR 2 1 1917

Signature of Officer i/c Records.

COPY SENT TO		Report	Record of promotions, reductions, transfers, casualties, &c., during active service, as recorded on Army Form B. 213, Army Form A. 30, 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. 30, or other official documents
O.C. H.Q.	Date	From whom received				
ST. JOHN'S, N.F.L.D.						
A.F.P. 53	21831			Embarked ...	Southampton 12-12-16	
	MAR 2 1 1917			Disembarked ...	Bone 13-12-16	
		29 A.S.D.	Deposited 1 Days Pay (Def of War)	France	12/12/16	6180-50B
		Unit	Joined Battalion	France	25/12/16	B213
		21 C.C.	Admitted French Inf.	France	15/1/17	ED 5540
		24	Discharged to Duty	Unit	22/1/17	EB 9094
				With BATT.	24.1.17	
		5/3/17	Wounded in Action	France	2/3/17	B213
		"Aberdonian"	Invalided to England		9.3.17	W 3053
			see V.S. Hoop, London			
				H. Parrichell		

for Officer i/c No. 1 Regular Infantry Section

General Headquarters, 3rd Echelon

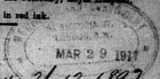
(a) In the case of a man who has re-engaged or, enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shoeing-smith, &amp;c.

I.P.T.O.

# 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.  
 The 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 it by a 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 in Charge 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, E.W.  
 Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.



**A Name in full** *Harding, Samuel*  
**Regiment from which discharged** *Newfoundland*  
**Regimental Number** *2096*  
**Where born (Parish, Town and County), and when** *Guayford, B. Bay 26.12.1897*  
**Intended address** *62 George St. St. John's Newfoundland*  
**Height on discharge** *5 Feet 9 1/2 Inches*  
**Colour of Hair on discharge** *Brown* **Colour of Eyes** *Grey*  
**Descriptive marks** *Moles near left ear* **Complexion** *Ruddy & Fresh*  
**Figure on discharge** *Slender*  
**Christian name of Father** *Nathaniel*  
**Christian name of Mother** *Susannah*  
**Wife's Maiden name in full** \_\_\_\_\_  
**Date and Place of Marriage** \_\_\_\_\_  
**Christian names of Children** \_\_\_\_\_  
**Nature and locality of civil employment desired** *Uncertain*

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)** *Samuel Harding Pt.*  
*3 London General Hospital* **(Rank)** \_\_\_\_\_  
**Station** *Woodworth St.* **Date** *18.3.17*

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** *Woodworth St.* **Date** *18.3.17*  
*London General Hospital* **Medical Officer i/c**

**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.** \_\_\_\_\_

C.R.2096

Extract from Daily Orders Part 11 Unit the Royal Nfld.  
Regt., St. John's, Oct. 31st, 1917.

2096 Pte. S. Harding.

Re-attested for Recruiting with effect from Oct. 16th, 1917

C.R. 2096

Extract from Daily Orders Part II Unit The Royal Welch  
Regt., St. John's, Oct. 16th, 1917.

The following man proceeded on special duty (Recruiting)  
Oct. 16th, 1917.

2096 Pte. S. Harding.

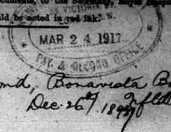
# Descriptive Return of a Soldier discharged on account of Disability.

**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, so, if awarded a pension, his subsequent litigation 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 in Charge 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** Harding, Samuel  
**Regiment from which discharged** 1st Newfoundland  
**Regimental Number** 2096  
**Where born (Parish, Town and County), and when** Greenespond, Bonaville Bay  
**Intended address** 62 George St St John's, Nfld.  
**Height on discharge** 5 Feet 9 inches  
**Colour of Hair on discharge** Brown **Colour of Eyes** Grey  
**Descriptive marks** Moles near left ear. **Complexion** Rather fresh.  
**Figure on discharge** Sturdy  
**Christian name of Father** Nathaniel  
**Christian name of Mother** Susannah  
**Wife's Maiden name in full** -  
**Date and Place of Marriage** -  
**Christian names of Children** -  
**Nature and locality of civil employment desired** Amateur

COPY SENT TO  
 O.C. H.Q.  
 ST. JOHNS, N.F.L.D.  
 M.F.P. 38. No. 278378  
 DATED 24 MAR 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) Samuel Harding (Rank) Private  
 Station 3rd London General Hospital Date 18th Mar 1917

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 WARDSWORTH, ... Date 18. Mar. 17.  
 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

Medals

Wounds, and Actions in which received

Other distinguishing marks

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

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

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



No. 2096

Rank Private

Name (surname first) Harding - Samuel

Regiment 1 Newfoundland

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

No school to enter

COPY SENT TO  
O.C. H.Q.  
ST. JOHNS, N.F.L.D.  
P.P.38 No. 2096/18  
DATED MAR 29 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?

No etc

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

Uncertain owing to diminished sight

4. What is the name of your Approved Society? No

5. Have you been employed whilst with the Colours? If so, in what capacity? No

Date 23. 3. 17

Signature Samuel Harding

NOTE--This Army Form will be given to all patients in Hospital to complete before being sent to the Medical Board for discharge, this Army Form will be produced to the Board, together with the documents laid down in para. 4 (ii), item 3, of Army Council Instruction No. 119 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 O.O.



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

**MEDICAL HISTORY**

Surname

*Harding*

OF  
Christian Name

*Samuel*

**Table I.—GENERAL TABLE.**

Birthplace:—Parish

County

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	at	on	at
Examined ... ..	15 <sup>th</sup> day of <i>Febry</i> 1916	<i>St John's Nfld</i>	day of	191
* Declared age ... ..	<i>19</i> years	days	years	days
Trade or occupation ... ..				
Height ... ..	<i>5</i> feet	<i>8</i> inches	feet	inches
Weight ... ..		<i>153</i> lbs.		lbs.
Chest Measure- ment { Girth when fully expan- ded Range of expansion ... ..		<i>39 1/2</i> inches		inches
		<i>3 1/2</i> inches		inches
Physical development ... ..				
Vaccination marks { Arm ... .. Number ... ..	Right	* Left	Right	Left
When vaccinated ... ..				
Vision ... ..	R.E.—V.= <i>6/6</i> L.E.—V.= <i>6/6</i> (a)		R.E.—V.= L.E.—V.= (a)	
(g) Marks indicating congenital peculiarities or previous disease	(b)		(*)	
(b) Slight defects but not suffi- cient to cause rejection				
Approved by (Signature) (Rank)	<i>W. W. ...</i> <i>Leut.</i> Medical Officer.		Medical Officer.	
Enlisted ... ..	at		at	
	on	day of 191	on	day of 191
		Corps		Regtl. No.
Joined on enlistment ... ..		<i>Nfld Regt. 2096</i>		
Transferred to ... ..				
Became non-effective by ... ..	on	day of 191	on	day of 191
(Signature) (Rank)				

Table II.—Only for admissions to hospital or to the sick list in the case of Warrant Officers treated in quarters.

Name of hospital	Admitted to hospital			Discharged from hospital			Disease	Number of days in hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3rd Lt. General Woodward W.M.	21	9	16	5	10	16	L.C. (Warrant Officer)	15	Old injury L foot. Afterward, in service foot became painful. On admission here left sore on foot. Injuries, convalescent.	Ed. Bingham W.M.
L.C.	10	3	17				R.W. 3 R eye producing defective vision		Boas left - see overleaf Disability - R.W. 3 to eye producing defective vision L eye - Aphakia. R eye - Normal. Cause - Fall on actual service Note - ability at present to earn a livelihood	W.M. 3rd Lt. General Woodward

**Table III.**—Boards; Courts of Inquiry, Vaccination, Inoculations, &c.; Examination 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
24. 6. 16	<del>24. 6. 16</del> <i>held</i>
1. 7. 16	2
6. 7. 16	Vacc <i>H. D. W.</i>
6. 7. 16	Fit for Foreign Service <i>H. D. W.</i>
23. 3. 17	Board held found - Permanently unfit. Board approved <i>H. D. W.</i>
	<i>H. D. W.</i> 3 <sup>rd</sup> Hussar General Hospital Wandsworth <i>H. D. W.</i>

**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
<i>St Johns Nfld</i>	23. 3. 16	9. 4. 16			

*Original*

Medical Report on an Invalid



3rd London General Hospital, WANDSWORTH SW

Station \_\_\_\_\_

Date 19 11 17

- 1. Unit 1/ Newfoundland.
- 2. Regimental No. 2096.
- 3. Rank Private
- 4. Name Harding, S
- 5. Age last birthday 19
- 6. Enlisted { on: Feb 17 1916  
at: St John's, Nfld.
- 7. Former Trade { or Occupation: School - pupil.

8. Disability.

G.S.W. II. 3 (ex) producing defective vision of right eye

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. July 1916.
- 10. Place of origin of disability. Ypres, Belgium
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

COPY SENT TO  
O.C. H.Q.  
ST. JOHNS, N.F.L.D.  
N.F.P.38. No. 278311  
DATED MAR 29 1917

He was on a fatigue party when a shell exploded near to him, & damaged his right eye. He did not go sick. Later on he was hit in the left foot by a pick, accidentally. He went sick in August 1916, & was admitted here in August & discharged in October 1916. He rejoined depot in Apr, & did light duty until December 1916. Then went back to general service in France, but had to report sick on 2<sup>nd</sup> March, at Comber ~~place~~ he had been blown up by a shell. Then taken to 5<sup>th</sup> General Hospital, Boulogne & thence here.

- 12. (a) Give your opinion as to the causation of the disability.
- (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 3).

Active Service  
G.S.W.

## 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.

Left Eye - Normal Vision =  $\frac{6}{6}$ .

Right Eye - Aphakia. With lens vision =  $\frac{6}{60}$ .  
The lens capsule is visible through the pupil as a white band.

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

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

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

- If so—(a) When? *No*  
(b) Where?  
(c) Opinion?

16. Was an operation performed? If so, what? *No*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 wound, injury or disease, directly\* attributable to active service? *✓*

## 19. Do you recommend

- (a) Discharge as permanently unfit, or  
(b) ~~Change to England?~~ *Yes.*

*W. P. Holyoak*

*W. P. Holyoak*  
Officer in medical charge of case.

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

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

*H. E. Prince*

Date *20.3.17*

*H. E. Prince*  
Officer in charge of Hospital,  
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, 1913).
- (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.
- (b) If due to one of these causes, to what specific conditions do the Board attribute it?

*Active Service*  
*S.P.W.*

21. Has the disability been aggravated by

- (a) Intemperance?
- (b) Misconduct?
- (c) Any of the conditions mentioned in Question 20, and if so which?

*No*  
*No*  
*-*

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?

*Not at present*

In defining the extent of his inability to earn a livelihood, estimate it at  $\frac{1}{2}$ ,  $\frac{1}{3}$ ,  $\frac{1}{4}$ , 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?

*-*

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

*-*

26. Do the Board recommend

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

*Yes*

Signatures:—

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

*Surkin...* *R. H. ...*  
President

Station

*J. W. ...*

Date *23<sup>rd</sup> March 1917*

*R. P. Howard Esq.*  
Members.

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

*Surkin...* *R. H. ...*  
Administrative Medical Officer.

Date *23<sup>rd</sup> March 1917*

(On leaving Corps or Station where invalidated.)

Transfer { Date \_\_\_\_\_  
 Station \_\_\_\_\_ } Conveyance \_\_\_\_\_  
 or Name of Vessel \_\_\_\_\_  
 Embark- of Officer in }  
 ation { Date \_\_\_\_\_ } medical charge \_\_\_\_\_  
 Port \_\_\_\_\_

Brief remarks on case during transit, and state on transfer for final disposal.

Re-transferred { Date \_\_\_\_\_  
 Hospital or } \_\_\_\_\_ Officer in medical charge.  
 Station }

(At Station or Hospital where finally disposed of.)

Station and } \_\_\_\_\_  
 Hospital } \_\_\_\_\_  
 Arrived from \_\_\_\_\_ Date \_\_\_\_\_

If admitted	If under treatment		Disease	How finally disposed of	Date of Discharge, &c.
	From	To			
Date					

Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

Date of final Medical Board, or decision } \_\_\_\_\_

Administrative Medical Officer. \_\_\_\_\_

ARMY FORM B. 179.  
 MEDICAL REPORT ON AN  
 INVALID.

58/16

Station *Appt*  
 Corps *Newfoundland*  
 Regimental No. *2095*  
 Rank *Plt.*  
 Name *Herbert J. D. King*  
 Disability *45. 1st II 8. 2nd 10. 3rd 10. 4th 10.*  
 Date *26/5/17*  
 Hospital or Station \_\_\_\_\_  
 Hospital to which transferred for final disposal \_\_\_\_\_  
 Date of final disposal } \_\_\_\_\_  
 How finally disposed of } \_\_\_\_\_

The original Report is invariably to accompany the discharge documents of invalids.  
 (4736.) W. 5830/2774. 620x. 9113. G. P. 144.  
 Form B. 179  
 14



**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.

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 days after the date on this notification—see A.C.I. 1623 of 1916.)

Soldier's surname Harding, Christian names Samuel  
(in full)

Regt. No. and Rank 2096 Pte. Regt. or Corps 1st Newfoundland  
(If T.F. this should be stated)

His address on discharge will be 62 Georges St.,  
St John's, Newfoundland

This information is for the Central Army Pension Issue Office only. The Soldier states that no. allowance is being issued in respect of him.

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

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

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

Station \_\_\_\_\_

Date 28. 3. 17

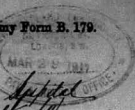
Subj. to Army Regs. Pensions  
\_\_\_\_\_  
President of Board  
(Approving Officer).

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.



Medical Report on an Invalid.



*Certified True Copy*

Station London General Hospital Wandsworth W.

Date 19.3.17

- 1. Unit 2 Newfoundland
- 2. Regimental No. 3096
- 3. Rank Pte
- 4. Name Harding S.
- 5. Age last birthday 19
- 6. Enlisted on 17.2.16  
at St John's Wld
- 7. Former Trade or Occupation School pupil

8. Disability.

G.S.W. 3 (eye) producing defective vision of right eye  
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.
- 10. Place of origin of disability.

July 1916  
Ypres Belgium

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

He was on a fatigue party when a shell exploded near to him, & damaged his right eye. He did not go sick. Later on he was hit in the left foot by a pick, accidentally. He went sick in August 1916, & was admitted here in August & discharged in October 1916. He rejoined Depot in Sept & did light duty until December 1916. Then went back to General Service in France, but had to report sick on 2<sup>nd</sup> March at Comblès, after he had been blown up by a shell. Then taken to 5<sup>th</sup> General Hospital, Boulogne & thence here

- 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 3).

G.S.W.

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.

Left Eye - Normal Vision -  $\frac{6}{6}$   
Right Eye - Aphakia. With Lens Vision -  $\frac{6}{60}$   
The lens capsule is visible through the pupil as a white band.

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

(a) In action? *Yes*

(b) On field service?

(c) On duty?

(d) Off duty?

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

If so—(a) When? *No*

(b) Where?

(c) Opinion?

16. Was an operation performed? If so, what? *No*

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 *Yes*

(b) Change to England? *Yes*

*Sgt*  
*W. L. Bullock 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.

Station *Woodwool SW*

Date *20.3.17*

\* 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, 1913).

(iv.) In answering question 20 the Board should be careful to discriminate between diseases 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.

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

*Active Service*  
*G.S.M.*

21. Has the disability been aggravated by

(a) Intemperance? } *No*  
(b) Misconduct? }

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?

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

*Total at present*

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

26. Do the Board recommend

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

Signatures:—

*3<sup>rd</sup> London General Hospital*

Station *Woodsword L.W.*

Date *23.3.17*

*Sidney Martin Major R.A.M.C.* President.

*J. J. Woodcock Capt. R.A.M.C.*

*A. J. Howard Col.* Members.

*3<sup>rd</sup> London General Hospital*

Station *Woodsword L.W.*

Date *23.3.17*

*Sidney Martin Major R.A.M.C.*  
Administrative Medical Officer.

(On leaving Corps or Station where invalided.)

Transfer { Date \_\_\_\_\_  
 or { Station \_\_\_\_\_ Name \_\_\_\_\_  
 Embarkation { Date \_\_\_\_\_ of { Conveyance \_\_\_\_\_  
 { Port \_\_\_\_\_ { Vessel \_\_\_\_\_  
 { \_\_\_\_\_ { Officer in \_\_\_\_\_  
 { \_\_\_\_\_ { medical charge \_\_\_\_\_

Brief remarks on case during transit, and state on transfer for final disposal.

Re-transferred { Date \_\_\_\_\_  
 { Hospital or } \_\_\_\_\_  
 { Station } \_\_\_\_\_ Officer in medical charge.

(At Station or Hospital where finally disposed of.)

Station and Hospital } \_\_\_\_\_  
 Arrived from \_\_\_\_\_ Date \_\_\_\_\_

If admitted		If under treatment		Disease	How finally disposed of	Date of Discharge, &c.
Date	From	To				

Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

Date of final Medical Board, or decision } \_\_\_\_\_

Administrative Medical Officer. \_\_\_\_\_

Army Form B. 179.

MEDICAL REPORT ON AN  
 INVALID.

Station \_\_\_\_\_  
 Corps \_\_\_\_\_  
 Regimental No. \_\_\_\_\_  
 Name \_\_\_\_\_  
 Rank \_\_\_\_\_  
 Disability \_\_\_\_\_  
 Date \_\_\_\_\_

Hospital or Station transferred to for final disposal } \_\_\_\_\_  
 Date of final disposal } \_\_\_\_\_  
 How finally disposed of } \_\_\_\_\_

The original Report is irrevocably to accompany the discharge documents of invalids.  
 (a) 188779. M. 1286 6726 6.15 W 2 & L.

FORM B. 179  
 14

No. 2096 Name *S. Harding*

Sgt. Battery,  
or Company

*E* Corps *2/ Newfoundland*

Date of enlistment *17/2/16*

G.C. Badges

Service or Proficiency Pay

Date of last entry in Company Conduct Sheet

No. and date of last drink

Period not reckoning towards freedom from extra fine

Sheet No. *1*

Signature O.C. Company, etc.

*J. Kinn* Character *V. Good*

Place	Date of offence	Rank	Case of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
<i>France</i>	<i>18/10/16</i>	<i>Pte.</i>		<i>When on active service being deprived of his</i>	<i>Sgt Major Chemell</i>	<i>Exp 1 day Pay</i>	<i>13/12/16</i>	<i>CO 9/16</i>	<i>Just</i>
				<i>To England</i>	<i>9/10/17</i>				
COPY SENT TO O.C. H.Q. ST. JOHNS, N.F.L.D. N.F.P.38 NO. .... DATED MAR 29 1917					<i>Wounded</i>		<i>3-3-17</i>		

Army Form B. 122



Admitted 4. 8. 16

Army Form W. 3016.

No. \_\_\_\_\_

Date Oct 5<sup>th</sup> 1916

(1) To the Officer i/c Records,

58 Victoria St  
A W (Station).

(2) The Officer Commanding,

Infed Cont  
Cypr (Station).

(3) The Paymaster,

58 Victoria St  
A W (Station).

Regimental No. 2096

Rank and Name Plé Harding S.

Regiment or Corps 1<sup>st</sup> Infed Contingent

has been granted a furlough from Oct 5<sup>th</sup> to Oct 14<sup>th</sup>

His address while on leave will be:—

58 Victoria St S.W.

*This man has been furnished with a warrant to Victoria and given an advance of £1. (one pound).*

I consider he is fit for\*  Duty.

Horace Tagan Capt R.A.M.C.  
Registrar, R.A.M.C.I.,  
London General Hospital,  
WANDSWORTH, S. W.  
\_\_\_\_\_  
(Station).

\* Strike out that which is inapplicable.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office.







23

**NEWFOUNDLAND.**  
**REPORT OF MEDICAL BOARD**  
**ON SOLDIER OR NAVAL RESERVIST RETURNED**  
**FROM OVERSEAS**

Station ST. JOHN'S NFLD. Date MAY 16 1917  
 No. 2096 Age 19 Height 5ft 9½"  
 Rank PRIVATE Complexion RATHER FRESH  
 Name HARDING, SAMUEL Eyes GREY Hair BROWN  
 Unit 1ST NEWFOUNDLAND  
 Address 62 GEORGE STREET Former Trade SCHOOL PUPIL  
 Enlisted at ST. JOHN'S NFLD. on FEBRUARY 17th., 1916.

Disease or disability GSW 11.3(Eye) PRODUCING DEFECTIVE VISION OF R. EYE

Present condition GSW 11.3 left foot - outer ankle. Scar healed  
 no disability. Right eye ~~blurred~~ after shell explosion  
 was mentioned for 2 days & after that suffered from  
 stiffness & pain in head. Still complains in this way  
 cannot carry weight on shoulder as causes pain  
 & weakness in shoulder.

Estimated disability 20%

Recommendation of Medical Board

*Discharge*

Class



Members of Board

*H. G. Evans*  
*W. Borden, Dist*  
*Ed. Borden, pro Major Paterson.*

Approving Medical Officer.

*Cluny Keefe, Major.*

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

## MEDICAL HISTORY

OF

Surname Harding Christian Name Samuel

Table I.—GENERAL TABLE.

Birthplace:—Parish

County

		SPECIAL RESERVE.		REGULAR ARMY.	
Examined	on <u>15</u> day of <u>February</u> 19 <u>16</u>	on	day of	19 <u>16</u>	day of
	at <u>St. John's nfld.</u>	at			
Declared Age	<u>19</u> years	days	years	days	years
Trade or Occupation					
Height	<u>5</u> feet	<u>8</u> inches	feet	inches	
Weight		<u>153</u> lbs.			
Chest Measurement	{ Girth when fully expanded... Range of expansion..	<u>39½</u> inches			
		<u>3½</u> inches			
Physical Development					
Vaccination Marks	Arm	Right	Left	Right	Left
	Number				
When Vaccinated					
Vision	R.E.—V=	<u>4/6</u>	R.E.—V=		
	L.E.—V=	<u>4/6</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>J.W. Borden</u>				
(Rank)	<u>Lieut.</u>		Medical Officer.		Medical Officer.
Enlisted	at	at			
	on day of 19 <u>16</u>	on day of 19 <u>16</u>			
	Corps.	Regtl. No.	Corps.	Regtl. No.	
Joined on Enlistment	<u>14thfld. Reg.</u>	<u>2096</u>			
Transferred to					
Became non-effective by	on day of 19 <u>16</u>	on day of 19 <u>16</u>			
(Signature)					
(Rank)					

COPY SENT TO  
O.C. H.Q.  
ST. JOHNS, N.F.L.D.  
REG. No. 3783/18  
MAR 29 1917

REVIEWED BY  
MAR 16 1917  
PAY & RECORD OFFICE

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 further use. In cases of syphilis, admission and readmission 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				
3 <sup>d</sup> LONDON GENERAL HOSPITAL WANDSWORTH.	21	9.	16.	5.	10.	16.	S.C.T. (Sprain left foot)	15	On injury, foot inflamed & a trace of foot became painful. On admission here definite sore on foot. Aresorps - Convalescent	J.M. Smyly Capt. RAMCEL.
3 <sup>rd</sup> London General Hospital, WANDSWORTH, S.W.	10	3	17				G.S. to II 3 - R. eye - producing defective vision.		Found held - see overleaf Disability - G.S. to II 3 R. eye, producing defective vision - R. eye, aphakia. L. eye, normal. Cause - G.S. to on active service. Treat - inability at present to earn a livelihood	H. Pagan 3 <sup>rd</sup> London General Hospital, WANDSWORTH, S.W.

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.: Examination 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
24.6.16	T.A.B. H.F.W.
3.7.16	T.A.B. H.F.W.
6.7.16	Vaccination F.H.W.
6.7.16	Fit for Foreign Service H.F.W.
23.3.17	Board held Found - permanently unfit Board - approved

H. Logan Capt (Retd)

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

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
H. Johnston	22/2/16	9/1/16			



Casualty Form - Active Service.

Regiment or Corps Newfoundland

Regimental No. 2096 Rank Pte Name Harding J

Enlisted (a) April Terms of Service (a) Duration Service reckons from (a) 17.2.16

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N.C.Os. }

Extended Re-engaged Qualification (b)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 25, 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. 26, or other official documents.
Date	From whom received				
		<u>Embarked Southampton</u>		<u>12.12.16</u>	
		<u>Disembarked Rouen</u>		<u>13.12.16</u>	
<u>29.1.17</u>	<u>Unit</u>	<u>Deposed &amp; Days pay def. lit</u>	<u>Rouen</u>	<u>12.12.16</u>	<u>01810 SOB</u>
		<u>Joined Battalion</u>	<u>France</u>	<u>20.12.16</u>	<u>A 213</u>
<u>21.1.17</u>	<u>do</u>	<u>Adm. French Sect.</u>	<u>France</u>	<u>18.1.17</u>	<u>E.D. 8840</u>
		<u>Discharged to Duty</u>	<u>Unit</u>	<u>22.1.17</u>	<u>E.D. 9094</u>
		<u>With Battalion</u>		<u>23.1.17</u>	
<u>5.3.17</u>	<u>O.C. Unit</u>	<u>Wounded in Action</u>	<u>France</u>	<u>3.3.17</u>	<u>A 213</u>
		<u>Invalided to England</u>		<u>9.3.17</u>	<u>W 3083</u>
		<u>at S. P. Hosp. Rouen</u>			

See Mr. Burchell  
Capt.  
for O.C. No. 1 Regt. Infantry Section  
2nd Echelon

(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) A.G., Signaller, Shoeling Smith, etc., etc., also special qualifications in technical Corps duties.

(9'38 41) W 1751-6589/1 75,000(6) 10/15 H W V(M 531)  
16.92-191 75,000 1/16

Form W. 3201/1

Army Form W. 3201/1



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

1st W. Inf. (Regiment).

No. 2096, Rank Pte, Name Harding, S.

is discharged from Hospital with orders to proceed to his home  
(Address 58 Victoria St. S.W.)

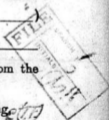
and there await further instructions as to his discharge from the  
Service.

Place 3<sup>rd</sup> LONDON GENERAL HOSPITAL  
WANDSWORTH.

H. Jagan Officer Commanding  
Capt. R.A.M.C.I.  
Registrar, R.A.M.C.I.

3<sup>rd</sup> London General Hospital Hospital.  
WANDSWORTH, S.W.

Date 13/4/17





Admitted

10.3.14



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

1st Bnld.

Regiment

The Officer Commanding

Bnld Contingent

The Officer in Charge of Records

58 Victoria St S.W.

The Regimental Paymaster

58 Victoria St S.W.

With reference to No. 2096 Pte Harding S.

of the above Regiment, who appeared before a Medical Board and was approved by

the B.D. Command, on the 23-3-14 for discharge from the Service as permanently unfit, please note that this man has been sent home on warrant with orders to await instructions as to his final discharge; he has been given £1 (one pound) advance and a suit of plain clothes.

He proceeded to 58 Victoria St S.W.

on [date] 13.4.14

H. Jagan

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

Officer Commanding

Registrar No. Hospital

Place Wandsworth

3rd London General Hospital,

Date 13.4.14

WANDSWORTH, S.W.

\* In case of Territorial Force \* Officer Commanding the Administrative Centre. Four copies to be made, and one copy sent to each Officer mentioned above, and one copy filed in the Office.



**MEMORANDUM**

*Tom 16/7*

*16 4 1917*

From **Regimental Paymaster,**  
**No. 2 YORK.**

*58 Victoria St SW.*

To *Ofc Inftry Seconda Newfoundland Contingent*

*Attached W 3202 passed to you please  
forwarded to this office in error.*

*Watson Clark*

*Watson*  
Regimental Paymaster,  
No. 2 YORK.

*2720, file*

THE CANADIAN PENSION COMMISSION

GPC 290129

MEMORANDUM

TO Director of War Service Records.

OTTAWA, November 4, 1949.

FROM The Canadian Pension Commission.

#2096 Sam Harding.  
Roy. Nfld. Regt.

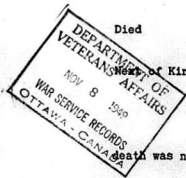
The marginally named

October 1, 1945.

Mrs. Rose Harding (widow),  
22 John Street,  
St. John's, Nfld.

Died

Next of Kin



In the opinion of the Commission,  
death was not related to service with the forces.

mb  
Not on strength

*E. Laehey*  
for  
Secretary.

*Noted  
R+B*