



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 5706 Name John Barnett Corps 6 of 6

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

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

I, John Barnett, 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.

John Barnett SIGNATURE OF RECRUIT.  
John Barnett SIGNATURE OF WITNESS.

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

I, John Barnett, 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 Dildo on this 21<sup>st</sup> day of June 1918

Signature of Attesting Officer C. B. Dick Lieut

### †CERTIFICATE OF APPROVING OFFICER.

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

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

Date July 2<sup>nd</sup> 1918 } Approving Officer.  
Place Dildo }

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

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

# DESCRIPTIVE REPORT ON ENLISTMENT

5706

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

Name John Barnett  
 Apparent age 19 years — months. Height 5 feet 9 7/8 inches  
 Chest Measurement { Girth when fully expanded 35 inches  
 Range of expansion 3 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin William Barnett  
Delco | Relationship Father

### Particulars as to Marriage

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

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

### Particulars as to Children

Christian Names	Date and Place of Birth

## STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officer certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>21-6-18</u>									
Joined at <u>M. H. Co</u> on <u>June 21-1918</u>									
<u>Discharged August 1 1919</u>									
<u>Embarked M. H. Co's train to Halifax N.S. 22-9-18</u>									
<u>to Hqs for demobilization 24-6-1919</u>									
<u>Arrive Vancouver Island 1-7-1919</u>									
<u>Demobilization M. H. Co 5-8-1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 5-8-1919 (date of discharge) 1 years 46 days  
 " " Pensions " [ " " ] " " " "

C.R. ~~R~~

5706

Extract from Daily Orders Bvt Major M.S. Sullivan, Commanding Newfoundland Forestry Companies 26-11-18.

The undernoted having arrived from Royal Nfld. Regt. (2nd Bn) is attached to the strength and posted to "C" Company from this date for rations.

5706 Pte. A. ~~Harum~~

*Harrett*

C.R. 5706

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.  
St. John's, Aug. 15th, 1919.

The discharge of the undernoted on demobilization has been  
CONFIRMED by Officer i/c Records from 5-8-19.

5706 Pte. J. Harnett.

C.R. 5706

Extract from Daily Orders Part 11 Unit the Royal Nfld. Regt.  
St. John's, July 14th, 1919.

The discharge of the undernoted on demobilization has been  
APPROVED by O.C. Discharge Depot with effect from 23-7-19

5706 Pte. John Harnett.

C.R. 5706

Extract from Daily Orders Part XL sent The Royal Field Regt.  
St. John's, July 3rd, 1919.

5706 Pte. J. Harnett.

Reported at Headquarters 1-7-19 on "Cassandra" which sailed  
Glasgow 24th June, 1919.

C.R. 5706

Extract from Daily Orders by Major H.S. Sullivan, Commanding  
~~2nd Newfoundland Forestry Company, 26-11-18.~~  
Commanding Newfoundland forestry Companies, 26-11-18.

The undernoted having arrived from 2nd Bn. Royal Nfld.  
Regt. is attached to the strength from this date and posted to  
"C" Co. for rations.

5706 Pte. J. Harnett  
5706



C.R. 5706

Extract from Nominal Roll Entained at St. John's for Overseas,  
Sept. 22, 1918. "H"

5706 Pte. Harrett John.



R. 5706

Extract fromz Daily Orders part 11, from Unit The Royal  
Nfld. Regt. St. John's, dated June 22, 1918.

#5706 Pte. John Harnett.

Attested for General Service with the Royal Nfld. Regt.  
from 21-6-18.

J. Harnett

C.R.

5706

~~J. H. H.~~



Harnett, J

5706

Ray Sept.

August 6th 1919.

#3412.

#5706, Pte. J. Harnett

Dildo. T. B.

Dear Sir:

Enclosed please find Discharge Certificate

# 3412.

Yours truly,

Capt. O. I. C. Records.

RS/.



# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 3706 Rank PLG Name Varnett J  
 Intended place of residence Sleds  
 2. Occupation Lumberman  
 Classification of soldier E Medical Category A 1  
 3. The above named man is discharged in consequence of

### DEMobilIZATION Eligible for War Service Gratuity

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.  
 Place, ST. JOHN'S  
 Date JUL 9 1919 Commanding Discharge Depot  
 The Royal Newfoundland Regiment

### CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.  
 Place, ST. JOHN'S  
 Date JUL 9 1919  
 Signature of soldier J. Varnett  
 Signature of witness J. A. Howley

### CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.  
 Place, ST. JOHN'S  
 Date JUL 9 1919  
 Signature of soldier John X Varnett  
 Signature of witness James O. Newman

### STATEMENT OF SERVICE

7. Enlisted for service... 21-6-18 No. of days on Military  
 Discharged from service... JUL 23 1919 Plus 14 days Service. 412

### APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge, The Royal Newfoundland Regiment, twenty-eight days from date.  
 Place, ST. JOHN'S  
 Date JUL 23 1919  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment

### CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.  
 Place, ST. JOHN'S  
 Date August 6/1919  
 Officer in Charge  
 The Royal Newfoundland Regiment

Aug 20 9 9/3412

10  
31  
6  
47

# The Royal Newfoundland Regiment

Class for Demobilization

*E*

Report of Demobilization  
Travelling Board, held on soldier for  
discharge.

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date .....

*8.7.19*

Regimental No. ... *5706*

Name .....

*Hannett John*

Address .....

*Dildo*

Present Medical Category .....

*A1*

Recommended for:— { (a) Immediate discharge .....

(b) ~~Standing Medical Board~~ .....

*R. J. Lat Mair*  
O.C. Discharge Depot.

Members of Board {

*H. Gibson*  
Senior Medical Officer

*J. W. Burden*

M. O. Depot



# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 5706 Rank Plt Name Harnett J  
 Date of Enlistment 21.6.18 Address Deer District St. John's  
 Occupation huntsman Classification for Discharge 6 Medical Category AI  
 Recommendation S.M.B. .... Disability Rating .....

Passed to Demobilization Officer with following documents:—

N.F. P 36.....	B 268.....	B 121.....	N.F. Med.....	D.F. 1.....
B 178.....	W 3494.....	B 122.....	Board 1st.....	" 2.....
B 178a.....	D 400A.....	B 1915.....	do 2nd.....	" 3.....
B 179.....	D 400B.....	Form L.....	do 3rd.....	" 4.....
B 179a.....	D 400C.....	Form K.....	do 4th.....	" 5.....
B 179b.....	B 103.....	ME 2.....		" 6.....
B 179c.....	B 120.....	M 93.....		

Date 8.7.19 .....

O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am.....in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action.

Date.....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable.....

(b) Clothing Supplied.....

Date 9-7-19 .....

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R2293 to his home at Duldo and Release Certificate No. 3350 issued.

Date 9-7-19 *J.A. Snow Capt*  
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 6-8-19

Date 9-7-19 *J.A. Snow Capt*  
Depot Paymaster.

Discharge approved for 23-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	/	N.F. Med	D.F. 1	/
F 178	W 3494	B 122		Board 1st	" 2	/
B 178a	D 400A	B 1915		do 2nd	" 3	2 Form B
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
B 179b	B 103	ME 2			" 6	
B 179c	B 120	M 93				

Date 9-7-19 *J.A. Snow Capt*  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

**Eligible for War Service Gratuity**

Date JUL 23 1919 *N.R. Cooper Capt*  
O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.

Date .....

## Civil Re-establishment Committee



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

To resume former Occupation.

*Harnett J.*  
Signature of Man.

Reg. No. 5706

*J. J. Newcomb*  
Signature of the Vocational Officer or his Representative.

Place

*St. Johns*

Date

*9-7-78*

191

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

# MEDICAL HISTORY

OF

Surname Harnett Christian Name John

Table I.—GENERAL TABLE

Birthplace:—Parish

Dieps 48. County Newfoundland.

SPECIAL RESERVE

REGULAR ARMY

Examined	on <u>26</u> day of <u>June</u> 191 <u>8</u> .	on	day of	191
	at <u>Dr. John's</u>	at		
Declared Age	<u>19</u> years	days	years	days
Trade or Occupation	<u>Timber man.</u>			
Height	<u>5</u> feet <u>9 3/4</u> inches		feet	inches
Weight	<u>137</u> lbs.			lbs.
Chest Measurement	Girth when fully expanded	<u>38</u> inches		inches
	Range of Expansion	<u>3</u> inches		inches

Vaccination Marks	Right	Left	Right	Left
	<u>—</u>	<u>—</u>		

When Vaccinated

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

(b) Slight defects but not sufficient to cause rejection

Approved by (Signature) Lamont P. ...

(Rank) Medical Officer Medical Officer

Enlisted

at <u>Dr. John's</u>	at
on day of 191	on day of 191

Corps	Regtl. No.	Corps	Regtl. No.
<u>Royal Nfld. Regiment</u>	<u>5906</u>		

Became non-effective by

on day of 191	on day of 191
---------------	---------------

(Signature)

(Rank)



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

Date	Brief Details, and Signatures
24.6.18.7	Vacc ✓✓
7.7.18	TAB
2.8.18	TAB ✓✓
2.9.18	do ✓✓
<p><i>It is hereby certified that this soldier has been before a Travelling Medical Board and has been classified as <u>B</u> for Discharge on Demobilisation. Medical category</i></p> <p><i>8.11.19</i> Date of T.M.B. _____</p> <p><i>J. H. W. H.</i> Captain The General Hospital, T. &amp; M. S. S. S. S. S.</p>	

**TABLE IV.—SERVICE TABLE**

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation



## Descriptive Return of a Soldier Discharged on Account of Disability

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

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

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

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

Name in full *John Harnett*

Regiment from which discharged **Royal Newfoundland**

Regimental number *5706*

Intended address *Ditlow G. B.*

Height on discharge *5* Feet *8*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Blue.*

Descriptive Marks *—*

Figure on discharge *Tall.*

Christian name of Father *Wm.*

Christian name of Mother *Mary*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Ditlow, Dec 22nd. 1897*

Nature and locality of civil employment required *—*

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

(Soldier's signature in full) *John Harnett*

Station **ST. JOHN'S** *Appeal* Date *5-7-19*

(Rank) *Pte*

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



Date

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

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.  
 In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

## Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

- |  |  |
|--|--|
| 1. Unit and Corps..... <i>Royal Newfoundland</i>               | 7. Former Trade or Occupation } <i>Lumberman</i>                     |
| 2. Regtl. No. <i>5706</i> 3. Rank..... <i>pl</i>               | 7a. If the soldier claims previous service in Army, he should state— |
| 4. Name <i>Sharnett</i> <i>John</i>                            | (a) Former Regts. or Corps ; with Regtl. Nos.                        |
| (Surname) (Christian Names)                                    |  |
| 5. Age last birthday..... <i>21</i>                            |  |
| 6. Posted for duty on..... at..... in category (or grade)..... |  |
| 8. If the disability is an injury was it caused,               |  |
| (a) in action (b) on field service                             | (b) Date of Discharge ;  |
| (c) on duty (d) off duty ?                                     | (c) Cause of Discharge.  |
| 9. If a Court of Inquiry was held on an injury state :—        |  |
| (a) When   | (d) Particulars of Pension or Gratuity (if any)                      |
| (b) Where  |  |
| (c) Opinion of Court   |  |

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

### Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability.
12. Place of origin of disability.
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

*nil*  
*nil*  
*nil*



14. State whether the disabilities are
- |   | (a) attributable to | (b) aggravated by |
|---|---------------------|-------------------|
| (i.) Service during the present war .. .. .                         | .....               | .....             |
| (ii.) Previous active service. . . . .                              | .....               | .....             |
| (iii.) Climate in pre-war service .. . . .                          | .....               | .....             |
| (iv.) Ordinary military service before the war .. . . .             | .....               | .....             |
| (v.) Serious negligence or misconduct on the man's part. } .. . . . | .....               | .....             |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?  
*(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)*

*The complaint of knee disability*

16. Was an operation performed? If so, when and what was its nature?
17. If not, was an operation advised and declined?
18. <sup>2</sup>In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

20. Do you recommend—
- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

*Repatriation*

*W. B. Procmier. Capt R. Rowe*

Medical Officer in charge of case.

Station *Hayley Down* .. . . .

Date *6/14/19* .. . . .

\* 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

Oct.14,1919

#5706 Pte.Kenneth Harnett,  
Dildo West, T.B.

Dear Sir :-

Referring to your application I enclose three  
cheques for Seventy dollars (\$70.00) respectively, being  
amount of first, second and third payments due you  
on account of War Service Gratuity.

Yours truly

Major  
Paymaster.

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

Christian name, *Kenneth* 2. Surname, *Harnum*

3. Rank, *Private* 4. Regtl. No. *5706*

5. Address in full to which future payments of gratuity are to be forwarded, *Dildo west Trinity Bay*

6. Date of enlistment in the Regiment, *20 June 1918*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge, *received none*

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 Nfld. If so, give dates and particulars of such service, *only in Nfld. Reg*

12. Give total length of time which you served on active service, whether in Nfld. or Overseas, *13 months*

*1 1/2*

*6094  
2985  
15251*

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

..... *only once* .....

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.....

..... *received none* .....

15. Have you been issued with a War Service Badge?..... *no*

16. Have you, during the present war, served in the Imperial Forces?..... *no*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled..... *none*

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

(b) If so, was such reversion in consequence of misconduct or inefficiency?..... *no*

19. Are you now serving in the Regt.?..... *no*..... If not give? - (a) Date of discharge. *July 9. 1919.* (b) Reason for discharge.....

..... *Demobilised* .....

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....

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

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: *Kenneth <sup>his</sup> Brown*  
*mark*

Place of Residence: *Dildo Trinity Bay*

Declared before me at: *St Johns*

This ~~10th~~ day of *July* 19*.19*....

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

*Wm James*

POST DISCHARGE PAY.				
Date paid	Paid Soldier.	Paid Dependant.	War Service Gratuity.	Net amount due
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
Certified correct.				Registrar



WWB/EJ

September 12, 1919.

6475

To:- Capt. Howley,  
O. I. C. Pay and Records.

From:- Vocational Officer.

*7*  
*Harnett*  
Kenneth Harnon 5706.

*(probably Harnum)*

Encl.

I attach hereto the letter received from the man named in the margin, also a copy of my reply.

*W. B. Beckhall*

Vocational Officer.

*Aug 7*

*Sep 7*

*Oct 3*

*Sent Oct 14*

*[Signature]*

September 2

1919

Dear Sir in future  
to you to see  
the trouble about my  
money I advise discharge  
the 9 of July and  
Hand Recd Cash  
Money Great No 5706  
I Remuan Goun  
Sealby Kenneth  
Harnon  
my adress Kenneth  
Harnon Dildo  
Harbour Trinity  
Bay



WWB/EJ

September 12, 1919.

Mr. Kenneth Harnon, 5706.

in Dildo.

Dear Sir:

I have your letter of recent date, and I am placing the same in the hands of Captain Howley O. I. C. Pay and Records. I trust you will hear from him shortly.

Yours faithfully,

Vocational Officer.



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, John Hammett, Regl. No 5706  
 hereby agree, until further notification by me, and in similar official form to make an Allotment of  
         Dollars and Sixty Cents, per diem, from my Pay,  
 to, and for the benefit of the undermentioned Person <sup>and</sup> <sub>or</sub> Persons, such payment to be made on proof  
 of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> <sub>or</sub> Persons  
 concerned, viz.:

Allotment begins Aug 1<sup>st</sup> 1918.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
4572	wife	W <sup>m</sup> William Hammett	D Sels TB	60
Total Allotment, \$				<u>60</u>

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

(Sig.) H. G. James 2/18  
 Officer Commanding  
F Company

(Sig.) John X Hammett  
 (Rank) Private

Sifphis  
26.6.18 191

Capt. H. G. James 2/18

## Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39.

Regiment of

*Royal Newfoundland.*

Signature of O. C. Company

Number of Sheet

*One**C. B. Dickson*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>5706 John Harnett</i>	Age on	<i>19</i> years months	<i>Lumberman</i>	
Joined	Date	Place and Date of Enlistment	<i>St. John's</i>	Religion	
Joined	Date		<i>21-6-18</i>	<i>Cof. E.</i>	
Joined	Date	Period of	with Colours <i>1 1/2</i> years.	Place of Birth	
Joined	Date		with Reserve <i>3 1/2</i> years.	<i>Dildo, N.B.</i>	

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<i>Demobilized</i>	<i>St. John's</i>	<i>5</i>	<i>5/19</i>		

To be carried over.

Army Form B. 121.

C.R. 5706

Army Form B. 179A

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve. In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

### Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

- 1. Unit and Corps... *Royal Hampshire Regt.*
- 2. Regtl. No. *5706* 3. Rank... *Pvt*
- 4. Name *Hannett* *John*  
(Surname) *21* (Christian Names)
- 7. Former Trade or Occupation } *Ambleton*
- 7a. If the soldier claims previous service in Army, he should state—  
(a) Former Regts. or Corps; with Regtl. Nos.
- 5. Age last birthday.....
- 6. Posted for duty on..... at.....  
in category (or grade).....
- 8. If the disability is an injury was it caused  
(a) in action (b) on field service  
(c) on duty (d) off duty?
- 9. If a Court of Inquiry was held on an injury state:—  
(a) When (b) Where (c) Opinion of Court  
(d) Particulars of Pension or Gratuity (if any)

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

#### Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

- 11. Date of origin of disability. *nil*
- 12. Place of origin of disability. *nil*
- 13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*



14. State whether the disabilities are
- |  | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war .. .. .                        | ✓                   |                   |
| (ii.) Previous active service.. .. .                               | ✓                   |                   |
| (iii.) Climate in pre-war service .. .. .                          | ✓                   |                   |
| (iv.) Ordinary military service before the war .. .. .             | ✓                   |                   |
| (v.) Serious negligence or misconduct on the man's part. } .. .. . | ✓                   |                   |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

*He complains of no disability.*

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?  
*(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)*

16. Was an operation performed? If so, when and what was its nature?
17. If not, was an operation advised and declined?
18. \*In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

*Repatriation*

20. Do you recommend—
- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

*W.S. Procuria* *Capof. R.A.M.C.*

Station *Basiley Stn.*

Date *9/4/19*

Medical Officer in charge of case.

\* 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

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 9706 Rank Plt Name Harnett J  
 Date of Enlistment 21.6.18 Address Bellegarde District Trinity  
 Occupation Lumberman Classification for Discharge 6 Medical Category A1  
 Recommendation S.M.B. .... Disability Rating .....

Passed to Demobilization Officer with following documents:—

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	3
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B 179c	B 120	M 93			

Date 9.7.19 O. C. Discharge Depot Miss H

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am.....in a position to resume civilian occupation John Harnett  
Wit Mesmer mark

Particulars passed to Vocational Officer for information and action.

Date.....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable.....
- (b) Clothing Supplied.....

Date 9-7-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. P2293 to his home at Dildo and Release Certificate No. 3350 issued.

Date 9-7-19 *J.A. Snowcraft*  
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 6-8-19

Date 9-7-19 *J.A. Snowcraft*  
Depot Paymaster.

Discharge approved for 23-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36.....	B 268.....	B 121.....	N.F. Med.....	D.F. 1.....
F 178.....	W 3494.....	B 122.....	Board 1st.....	" 2.....
F 178a.....	D 400A.....	B 1915.....	do 2nd.....	" 3.....
B 179.....	D 400B.....	Form L.....	do 3rd.....	" 4.....
B 179a.....	D 400C.....	Form K.....	do 4th.....	" 5.....
B 179b.....	B 103.....	ME 2.....		" 6.....
B 179c.....	B 120.....	M 93.....		

*2 Form B*

Date 9-7-19 *J.A. Snowcraft*  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-  
Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

**Eligible for War Service Grants**

Date JUL 23 1919 *For N.R. Coole Capt.*  
O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.

Date July 21 1919



C.F.# 5706 Hildo  
Jan. 18, 1921

Cy P Cy Rendell Esq.

Dear Sir  
I see John Harnett  
advertised for which is  
me as that's the name  
I enlisted under. My  
no. 5706. I am still  
at Hildo S.B. and any  
communication addressed  
the same will be received  
by me. O.K.

Very  
Respectfully  
John Harnett