



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

4176

No. 4176 Name Roland Hart Corps R.C.E.

Questions to be put to the Recruit before Enlistment.

1. What is your name? Roland 1. Hart
2. What is your full Address? Fogo 2. Fogo
3. Are you a British Subject? yes 3. yes
4. What is your age? 24 Years 1 Months 4. 24 Years 1 Months
5. What is your Trade or Calling? Fisherman 5. Fisherman
6. Are you Married? No 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? No 7. No
8. Are you willing to be vaccinated or re-vaccinated? yes 8. yes
9. Are you willing to be enlisted for General Service? yes 9. yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... 10. { Name
Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? 11. yes

THE DURATION OF THE WAR

I, Roland Hart 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.

Geoffrey Roland Hart SIGNATURE OF RECRUIT.
S. Willar Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Roland Hart 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 Fogo on this 30 day of Nov 1917.

Signature of Attesting Officer W. H. [Signature]

†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 1st Battalion.

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

Date Nov 30 1917 } Approving Officer.
Place St. John's

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Roland Hart
 Apparent age 21 years 1 months. Height 5 feet 6 inches
 Chest Measurement { Girth when fully expanded 29 inches
 { Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Silas Hart
Fogo | Relationship Father
 Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>30-11-17</u>									
Joined at <u>St John's</u> on <u>November 30-17</u>									
<u>Discharged July 15, 1919</u>									
<u>Embarked St John's for transport to Halifax N.S. 29-18. Embarked for St. J. 2-7-18. Disembarked St. J. 5-7-18. Found berth 9^{7/8} Span from lower 22^{4/9} Area Disembarked 22-4-19 to Newfoundland for demobilization 22-3-19. Arrived St. J. 6/19</u>									
<u>Demobilization St John's 15-7-19</u>									

Total Service forfeited as above.....

Total Service towards Engagement to 15-7-19 (date of discharge) 1 years 228 days
 " " Pensions " " " " " " " " " " " "

No. 476

Name

Bryden H.

Sqn., Batty.,
or Company

Corps

Regt New York

Date of
enlistment

1911

G.C.
Badges

Service or
Proficiency Pay

Date of last entry in
Company Conduct Sheet

No. and date
of last drink

Period not reckoned towards
freedom from extra fine

Signature G.C.
Company, etc.

[Handwritten Signature]

Army Form B. 122.

Place	Date of offence	Rank	Cases or Drunken- ness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks

CR.

C.R. 4176

extract from daily orders part II Royal Newfoundland Regiment
Depot St. John's dated 17-7-19.

The discharge of the undernoted on de mobilization has been
CONFIRMED by Officer i/c Records from noted date
12-7-19.

4176, rte. Roland Hart.

C.R. 4176

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, June 20th, 1919.

The discharge of the undernoted on demobilization has
been APPROVED by O.C. Discharge Depot with effect from
1-7-19.

4176 Pte. R.Hart.

C.R. 4176

Extract from Daily Orders Part II Depot, St. John's,

Date June 18th 1919.

4176, Pte. R. Hart.

Reported at Headquarters

1/6/19.

RE "Corsican"

which sailed Liverpool May 22/1919.

C.R.

4176

Extract from Nominal Roll from 1st. Battalion
Royal Newfoundland Regiment dated 30-4-19.

The undermentioned of the 1st. Battalion left
Rouen Camp 22/4/19, embarked at Havre 22/4/19,
disembarked at Southampton 23/4/19 and reached
Hazeley Down Camp 23/4/19.

#4176 Pte. R. Hart.

CR. 4176

Extract from Telegram despatched to Synoptical, London,
dated June 5th, 1918

In answer your telegram May 27th #4176 Hart

C.R. 4176

Extract from Telegram received from London, dated May
27, 1918

In answer your message May 25rd verify carefully
and report whether correct #~~3176~~ Hart

4176

C.R. 4176

Extract of Telegram to Synoptical London dated May 22nd. 1918.

Pay as follows:

4176 Hart,

Royal Wfld, Regt. 4 pounds.

C.F. 4176

Extract ~~of~~ of Nominal Roll to B.E.F. embarked
Folkestone 2-7-18

#4176 Pte.R.Hart.

C.R. 4176

Extract from Nominal Roll Draft "H" Company
Embarked S.S. "Floribel" Jan. 29th, 1918.

4176 Pte. Hart R.

C.R. R.

4176

Extract from Daily Orders Part II Unit The Royal Wfld.
Regt., Dec. 1st, 1917.

4176 Pte. R. Hart.

Attested for General Service with the 1st Wfld. Regt.,
and assigned numbers as shown with effect from Nov. 30th, 17.

R. Hart

C.R. 4176

P + R ©

Medical Report on an Invalid.

Station Norsey Down Camp
 Date 1 - 5 - 19

- | | | | |
|----------------------|---|--|------------------|
| 1. Unit | <u>Royal Newfoundland</u> | 7. Former Trade or Occupation | <u>Tradesman</u> |
| 2. Regimental No. | <u>4176</u> | 7A. If with previous service in Army, state— | |
| 3. Rank | <u>PC</u> | (a) Former Unit; | |
| 4. Name | <u>Navy Poland</u> | (b) Regimental No.; | |
| 5. Age last birthday | <u>23</u> | (c) Date of Discharge; | |
| 6. Enlisted | { on <u>Oct 4/17</u>
at <u>St John's</u> | (d) Cause of Discharge. | |

8. Disability in respect of which invaliding is Proposed.
 (Other disabilities should be reported upon in answer to question No. 19).

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. | <u>nil</u> |
| 10. Place of origin of disability. | <u>nil</u> |
| 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. | <u>nil</u>
<u>nil</u> |
| 12. Give your opinion as to the causation of the disability, stating whether in your opinion it is— | } <u>nil</u> |
| (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3). | |
| (b) constitutional or hereditary, and not aggravated by service during the present war. | |
| (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c. | |

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.

No complaints of no disability.

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

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

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

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

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

no.

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

no.

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?

no.

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

no.

Repetition

20. Do you recommend—

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

W. J. Twomey *Capt R.A.M.C.*

Officer in medical charge of case.

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

Station *Hazley Down*

Officer in charge of Hospital.

Date *1-5-19*

*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.

† Delete this word if no exceptions are to be made.

No. 8910/819

NEWFOUNDLAND CONTINGENT

N.F.P. 170.

From

Chief Paymaster & O. i/c Records.
Newfoundland Contingent,
58, Victoria Street,
London S.W. 1

To

Officer Commanding,
2/Bn Royal Newfoundland Regt.
Winchester.

Subject: 6th June 1918

Subject: 4176, Pte. R. Hart

With reference to the following telegram (4698) from the Hon. Minister of Militia, received

Pay to 4176 Hart £4:0:0

Draft £4:0:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Chief Paymaster & O. i/c Records.

038991

Receipt hereon

Cham

LIEUT. COLONEL.

OFFICER COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Newfoundland Regiment

received the sum of Four

Pounds on account of

cable remittance from Newfoundland.

R. Hart

Witness Rank Private

TO, - The Chief Paymaster,
Royal Newfoundland Regiment,
53 Victoria Street,
London, S.W.

Sir:-

Please charge the amounts set opposite my name to my account and pay it to the N.W.C.A. "Prisoners of War Fund" in quarterly instalments for the period of one year.

Commencing on the 1st July 1918.

Regtl. No.	Rank	Name	Amount	Signature:
4176	Pte	Hart R.	\$ 25/-	

I have the honour to be, Sir,
~~for the purpose of~~
Your obedient servant.

Date 28-6-18.

R. X. Hart
28/6/18

FORM K

No 4591



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Roland Stark, Regl. No. 4196 hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and 60 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person and or Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person and or Persons concerned, viz.:

Allotment begins Feb. 1st 1918

Table with columns: Identity Certificate No., Whether Wife, Child, other Relative or Friend, NAME (in full), ADDRESS, AMOUNT (each person). Entry: 3676, Mother, The Sidon Leach Street, Dogs, 60. Total Allotment, \$ 60.

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

Sig. [Signature] Officer Commanding 11 Company Jan 17 1918

(S) Roland Stark (Rank) Plt Under Quartermaster

Nº 4591



1st. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Richard Hart, Regl. No. 4176

hereby agree, until further notification by me, and in similar official form to make an Allotment of _____ Dollars and 60 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and} _{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and} _{or} Persons concerned, viz. :

Allotment begins Feb. 1st 1919

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>3676</u>	<u>Wife</u>	<u>Mrs Silas Leah Hart</u>	<u>St. John's</u>	<u>60</u>
Total Allotment, \$				<u>60</u>

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

Sig.) [Signature]
 Officer Commanding
 H Company
[Signature]
 Jan 17 1919

(Sig.) Richard X Hart
 (Rank) Plc
[Signature]

No. 4176 Name *Hart R.*

Sqn., Batty., or Company } *Royal Newfoundland*

Date of enlistment } *30-11*

G.C. Badges

Service or Proficiency Pay

Date of last entry in Company Conduct Sheet

No. and date of last drunk

Period not reckoning towards freedom from extra fine

Sheet No. *1*

Signature O.C. Company, etc.

W. H. ...
Character *Good*

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
<i>Foehel</i>	<i>11/11/18</i>	<i>Priv</i>		<i>Shiny Brass on 9 a.m. Parade</i>	<i>Sgt Ryger</i>	<i>5 days P.C.</i>	<i>2/11/18</i>	<i>Williamson Capt</i>	
<i>do</i>	<i>8/4/19</i>	<i>"</i>		<i>Deficiencyes 12/2 1/2</i>	<i>6 witnesses</i>	<i>Pay for same</i>	<i>8/4/19</i>	<i>Major Bernard</i>	

Army Form B. 122.

Reg. No. 4176 Rank Olie Name Harold R.

Attested 30-11-17 Address Fogo

Allotment 60 Allottee H^o Sitas Leal Hart hutter

Date of Allotment 1-2-18 Returned from Overseas _____

Embarked for Overseas _____ Cause _____

Vac 7-12-17 Dec. 11-12-17, 2nd 9 mo. 17/12/17
H. & 18/12/17 - 28/12/17, Reported Home 28/12/17
2nd mo 3/1/17

Hart. R

4176

Ray Sept.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4176 Rank Pte. Name Hart R.
 Intended place of residence Sogo.
 2. Occupation Fisherman
 Classification of soldier B Medical Category H1

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 JUN. 17. 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 and date ST. JOHN'S.
JUN 16 1919
 Signature of soldier
 Signature of witness

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 and Date ST. JOHN'S.
JUN 16 1919
 Signature of soldier
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 30-11-17 No of days on Military
 Discharged from service 1-7-16 PLUS 14 DAYS Service 593

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.
 Place ST. JOHN'S.
JUL 1
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place St. Johns, Nfld
 Date July 15/1919
 Officer i/c Records
 The Royal Newfoundland Regiment

Handwritten: a 9/32049/3034

July 15, 1919

#4176 Pte. Roland Hart,

Fogo.

Dear Sir:-

Please find enclosed Discharge Certificate #3034.

Yours truly

Captain,
Quartermaster & O.I/c Records.

The Royal Newfoundland Regiment

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

Class for Demobil-
ization:—

E.C.

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *16.6.19*

Regimental No *4176*

Name *Hart, Roland* Rank *Pte*

Address *Fogo*

Present Medical Category *A*

Recommended for:—
(a) Immediate discharge
(b) ~~Standard Medical Board~~

Members of Board

R.H. Lait Major
O.C. Discharge Depot.

Paterson
Senior Medical Officer

Geo Burden
~~M.O Depot~~

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4176 Rank Plt Name Hart R
 Date of Enlistment 30-11-17 Address Fogo District Fogo
 Occupation Fisherman Classification for Discharge 1 Medical Category H.1
 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 16-6-19 O. C. Discharge Depot. [Signature]

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Roland Hart
max
with wife & family

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$600
- (b) Clothing Supplied [Signature]

Date 17-6-19 O. i. c. Re-clothing _____

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. ⁸⁷⁶⁹ to his home at ⁷⁰⁸⁰ and Release Certificate No. ²⁸⁶¹ issued.

Date

17-6-19

J.A. Snowball
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

Date

17-6-19

¹⁵⁻⁷⁻¹⁹
H. M. [unclear]
Depot Paymaster.

Discharge approved for

1-7-19

Forwarded with following documents to O.C. Discharge Depot.

N.F. P36	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
B179c	B 120	M 93		

2 Form B

Date

17-6-19

J.A. Snowball
O. C. Discharge Depot.

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 1 1919

R.H. [unclear]
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.

Har R.

Signature of Man.

J. H. Snowball

Signature of the Vocational Officer or his Representative.

Reg. No. *4176*

Place

Al-Johns

Date

17-6-19

191

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

MEDICAL HISTORY

Surname Harl. OF Christian Name Robson.

Table I.—GENERAL TABLE.

Birthplace:—Parish Cogo County Nfld.

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>30th</u> day of <u>Nov</u> 191 <u>7</u>	on	day of	191
	at <u>St. John's</u>	at		
Declared Age	<u>21</u> years	<u>1</u> year	years	days
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet	<u>6</u> inches	feet	inches
Weight		<u>115</u> lbs.		lbs.
Chest Measurement	Girth when fully expanded	<u>33</u> inches		inches
	Range of Expansion	<u>4</u> inches		inches
Physical Development				
Vaccination Marks	Arm	<u>/</u>		
	Number			
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	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Lammie Robson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St. John's</u>	at		
	on <u>30th</u> day of <u>Nov</u> 191 <u>7</u>	on	day of	191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
Transferred to	<u>1st Nfld Regt</u>	<u>4176</u>		
Became non-effective by	on	day of	191	on
			day of	191
[Signature]				
[Rank]				

The Royal Mfld. Regiment

DEMOBILIZATION

No. 4176 Rank

Name

Sent

Warned for demobilization on

JUN 17 19

Medical Report on an Invalid.

Station Hazelton

Date 1/5/19

- 1. Unit Royal Newfoundland Former Trade or Occupation } Postman
- 2. Regimental No. 4176
- 3. Rank plc
- 4. Name Mark Roland
- 5. Age last birthday 23
- 6. Enlisted { on Oct-16/17
at plc

- 7A. If with previous service in Army, state—
 - (a) Former Unit;
 - (b) Regimental No.;
 - (c) Date of Discharge;
 - (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

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

- 12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
 - (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
 - (b) constitutional or hereditary, and not aggravated by service during the present war.
 - (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

ca

13. What is his present condition?

He complains of no disability

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

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

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

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

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

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

na

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

na

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

na

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

na

20. Do you recommend—

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

Repatriation

W. E. Rosener
Sgt, R.A.M.C., Capt R.A.M.C.
 Officer in medical charge of case.

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

Station *Hazeley Down*

Officer in charge of Hospital.

Date *1/5/19*

*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.

† Delete this word if no exceptions are to be made.



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 *Roland Hart*

Regiment from which discharged **Royal Newfoundland**

Regimental number *4176*

Intended address *Fogo*

Height on discharge *5* Feet *6*

Color of hair on discharge *Dark*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks _____

Figure on discharge *Medium*

Christian name of Father *Silas*

Christian name of Mother *Lea*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *Fogo. = 1896*

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) *Roland Hart*

pt
(Rank)

Station _____ Date *16-6-19*

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 _____

Casualty Form—Active Service.

Regiment or Corps *Royal Newfoundland*

30-11-1895

Rank *Private* Surname *Stuart* Christian Name *Roland*

Religion *C of E* Age on Enlistment *21* years *1* months

Enlisted (a) *30-11-1895* Terms of Service (a) *3 years* Service reckons from (a) *30-11-1895*

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

Extended Re-engaged Qualification (b)
or Corps Trade and rate

Occupation *Engineer* Signature of Officer *W. Ellis*

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		<i>A I</i>	<i>Embarked</i>	<i>2 JUL 1918</i>	
		<i>78. 6. 18.</i>	<i>Disembarked</i>	<i>5 JUL 1918</i>	
			<i>Joined Battalion</i>	<i>Field</i>	<i>9-7-18 Based 13/7/18</i>
			<i>Arrived in UK</i>		<i>13/4/19.</i>

Int

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) Signaller, Shoeing-Smith, &c. W 8825 M2733 2000m 9/17 (3501) C. P. & S., Ltd., Form B./103 B/1897. P.T.O.

NEXT OF KIN: - *Silas Stuart. 50go. Inflat*

July 21, 1919

#4176 Pte. Ronald Hart.

Fogo

Dear Sir:-

Referring to your application I enclose cheque for seventy dollars (\$70.00), being amount of first payment due you on account of the War Service Gratuity.

Yours truly

Captain & 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..... *R* 2. Surname..... *Hart*

3. Rank..... *Pte* 4. Regt. No..... *4176*

5. Address in full to which future payments of gratuity are to be forwarded..... *Topo*

6. Date of enlistment in the Regiment..... *Nov. 14/17*

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..... *no*

9. Address in full of such dependents..... *no*

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *no*

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

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

..... *and 2 weeks* 13.

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

.....
.....
.....

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.

.....
\$76.62 Clothing etc

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

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

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

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

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

19. Are you now serving in the Regt.?..... If not give:- (a) Date of discharge...
July 1/18 (b) Reason for discharge...
Demobilization

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service.

.....
France Belgium & Germany

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

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

(written) Thompson

Signature of Applicant:

His Honor R. M. Hart

Place of Residence:

Zago

Declared before me at:

St John used

This

17th

day of

June

19...9...

John M. Carthy

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

POST DISCHARGE PAY.

Date paid	Paid Soldier.	Paid Dependents.	War Service Gratuity.	Net amount due
.....
.....
.....

Certified correct.

Paymaster

Receipt for Army Book 64

No.....*4176*..... Name.....*Hest*.....

To Certify that I have received the AB 64 of the above
named soldier.

Name.....*Roland Hart*.....

Date.....*Aug 2nd 19/20*.....

Place.....*Fogo N.F.S.d.*.....

N.B. For completion and return to the Department of Militia
Insert in corner of envelope "AB 64"

WR

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
29.

Regiment of 1st Newfoundland

Number of ~~Sigs~~ Ans
Signature of O. C. Company W. H. [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>Hart R.</u>	Age on	<u>21</u> years <u>1</u> months	<u>Boatman</u>	
<u>4176</u>		Place and Date of Enlistment	<u>St John's</u> <u>30-11-17</u>	Religion <u>C of E.</u>	
Joined	Date	Period of	with Colours	Place of Birth	
Joined	Date		<u>2 1/2</u> years.		
Joined	Date		with Reserve	<u>3 1/2</u> years.	

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<u>Demobilized St. John's 15/7/19.</u>					

To be carried over

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4176 Rank Plt Name Hart R
 Date of Enlistment 30-11-17 Address Fogo District Fogo
 Occupation Fireman Classification for Discharge By Medical Category A1
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. P36	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 16-6-19 O. C. Discharge Depot. H. M. Swift

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 \$60.00

(b) Clothing Supplied On Colmiston

Date 17-6-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 769 to his home at 7080 and Release Certificate No. 2861 issued.

Date 17-6-19

J. H. Snowball
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 15-7-19

Date 17-7-19

J. H. Snowball
Depot Paymaster.

Discharge approved for 1-7-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1
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
B179c	B 120	M 93		

2 Form B

Date 17-6-19

J. H. Snowball
O. C. Discharge Depot.

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 1 1919

R. H. Sait Capt.
O. C. Discharge Depot.

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

Date July 10/19

James H. Sait
George H. Sait

