



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 2356 Name W. J. Hilles Corps

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. William James Hilles
2. What is your full Address? 2. Taford Ck
3. Are you a British Subject? 3. No.
4. What is your age? 4. 24 Years 11 Months
5. What is your Trade or Calling? 5. Farmer
6. Are you Married? 6. No.
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. No.
8. Are you willing to be vaccinated or re-vaccinated? 8. Yes.
9. Are you willing to be enlisted for General Service? 9. Yes.
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?..... 10. { Name
Corps } FOR ENLISTMENT OF THE WAR
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, W. J. Hilles 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.

W. J. Hilles SIGNATURE OF RECRUIT.

R. P. Hallaway Signature of Witness.

F March 22

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, W. J. Hilles 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 he said recruit has made and signed the declaration and taken the oath before me at St. John's on this 30th day of March 1916

Signature of Attesting Officer R. P. Hallaway

† CERTIFICATE OF APPROVING OFFICER.

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

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

Date..... 1916 } Approving Officer.
Place.....

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name William James Hibbs
 Apparent age 24 years 11 months. Height 5 feet 6 1/2 inches
 Chest Measurement { Girth when fully expanded 37 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs. William Hibbs
Tapsall C.B. | Relationship Mother
 Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from _____									
Joined at _____ on _____									
Total Service forfeited as above.....									
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days									
" " " Pension { " " } _____ " _____ "									

2356



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 2356 Name W. J. Hillis Corps

Questions to be put to the Recruit before Enlistment.

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

I, W. J. Hillis 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.

W. J. Hillis SIGNATURE OF RECRUIT.

E March 22

R. P. Holloway Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 22 day of March 1916

Signature of Attesting Officer R. P. Holloway 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 complied with. I accordingly approve, and appoint him to the.....

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

Date.....1916 } Approving Officer.
Place.....

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

* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows: vis:—(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.

1356

Name	William James Hibbs		
Apparent age	24 years 11 months	Height	5 feet 6 1/2 inches
Chest Measurement	Girth when fully expanded		37 inches
	Range of expansion		3 inches
Distinctive marks			

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs. William Hibbs Topsail, C. B.	Relationship Mother
Particulars as to Marriage	

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from 22.3.16									Lane Lt.
Joined at <u>St John's</u> on <u>March 22nd 16</u>									
<u>Embarked St John's S.S. Steamer for U.K. 19th 16</u>									Lance Lt.
<u>Embarked for S.S. 3.10.16 Diver, Gladstone Row, U.K. 16</u>									
Joined <u>Bath</u> at the field 14.10.16 <u>Work Bath</u> 20.12.17									Lance Lt.
<u>for repatriation 16.4.19 Arrived Newcastle 19.4.19</u>									
<u>Arrives <u>Benfleet</u> 1.6.1919</u>									Lance Lt.
<u>Demobilization <u>St John's</u> 27.6.19</u>									

Total Service forfeited as above.....	
Total Service towards Engagement to	29-6-19 (date of discharge) 3 years 100 days
“ “ Pension “	“ “ “ “ “ “ “ “ “ “ “ “

C.R. 2356

Extract of Part 2 Orders by Major A.E. Bernard M.C. Commanding
1st Battalion Royal Newfoundland Regiment

The undermentioned is granted leave to the United Kingdom.

2356 Ste. ^W H. Hibbs,

A.Coy 24/12/18 to 7/1/19

C.R. 2356

Extract from Orders By Major A.E. Bernard, M.C. Commanding
1st Battalion Royal Newfoundland Regiment, dated 22-12-18.

The undermentioned has been granted leave to U.K.
24-12-18 - 7-1-19.

2356 Pte. W. Hibbs, A. Coy.

C.R. 2356.

extract from Daily Orders Part 11 by Major A.H. Bernard
Commndg. 1st Bn. Royal WFLA. Regt. 22-12-18.

The u/m has been granted leave to U.K. 24-12-18 - 7-1-19

2356 Pte. W. Hibbs.

C.R.

2356

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.
St. John's, June 14, 1919.

2356 L/Cpl. Wm. Hibbs.

Reported at Headquarters 1-6-19 Ex "Corsican" which sailed
Liverpool 22-5-19.

C.R. 2356

Extract from Nominal Roll of Draft for Repatriation, 1st,
Bn. Royal Newfoundland Regiment, which arrived at Hasleby
Down Camp, 19/4/19 from B.E.F.

2356 L/Cpl. W.J.Hibbs.

C.R. 2356

Extract from Daily Orders Part 11 Unit The Royal Rifles.
Regt. St. John's, June 30th, 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from 29-6-19.

2356 L/Cpl. Wm. J. Hibbs. -

C.R. 2356

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.
St. John's, June 16th, 1919.

The discharge of the undernoted on demobilization has
been APPROVED BY O.C. Discharge Depot with effect from 15-6-19.

2356 L/Cpl. Wm Hibbs.

C.R. 2356

Extract from Daily Orders part II, In the field,
dated 15-2-19.

Promotions and appointments.(

#2356 Pte. W.J. H^hbbs.

App. L. Cororal. 8-2-19

C.R. 2356

Extract from Nominal Roll of Nfld. Regt. Draft No.11 from
2nd Bn. Depot, to 1st Bn. B.E.F. Embarked Southampton, 3-10-16.

2356 Pte. W.Hibbs.

C.R. 2356

Extract from Nominal Roll Embarked St. John's for Overseas,
per S.S. "Siwilian" July 19, 1916.

2356 Pte. Hibbs W.

C.R. 2356

William J. Hibbs was attested for General
Service with the NEWFOUNDLAND REGIMENT ON March 22nd 1916.
Regimental No. 2356 was allotted to Pteg. W. J. Hibbs.

AUTHORITY:

Recrd Ledger;

Dept. of Militia.

March 25th 1919



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 *William J. Hebb*
aged *27* conducted at *ChB*
Date: *Mar 2/16* Recruiting Officer:

NO OF TEST

FINDING

- 1 *No*
- 2 *No*
- 3 *No.*
- 4 *No*
- 5 *No.*
- 6 *No.*
- 7 *No.*
- 8 *Yes*
- 9 *No. - No -*
- 10 *u*
- 11 *u*
- 12 *u*
- 13 *Seck to be fined -*
- 14 *u*
- 15 *u*
- 16 *u*
- 17 *u*
- 18 *u*
- 19 *u Both*
- 20 *u*
- 21 *u*
- 22 *u*
- 23 *u*
- 24 *u*
- 25 *u*
- 26 *u*
- 27 *u*
- 28 *u*
- 29 *u*
- 30 *u*
- 31 *u*
- 32 *u*
- 33 *No.*
- 34 *5'6"*
- 35 *133 lbs.*
- 36 *- 24/27*
- 37 *4.30 month*
- 38 *None*
- 39 *None*

Heck

2356

Mr. Wm. H. H. Toppell

Pat

Signature of Medical Examiner:

J. W. Burden

W. Hibbs

2856.

P. 1. P. 6



3/ 1ST. NEWFOUNDLAND REGIMENT 1

ALLOTMENTS

I, W. J. Hibbs, Regl. No. 2356

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

May 1st.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
1991	Wife	Mrs William Hibbs	Topsail C.B.	60
		Commencing	21/7/16	
			Total Allotment, \$	

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.) R.P. Holloway
Adj. Officer Commanding
Company
St. John's
May 2nd 1916.

(Sig.) Wm. J. Hibbs

(Rank)

WILL. 796

Name

Hibbs W. J.

Regtl. No.

2356

Rank

Pte.

Regiment

ROYAL NEWFOUNDLAND REGIMENT

Date of:—

2/4/19

Receipt ...

...

Transfer ...

...

Final disposal and
to whom sent ...

2853/105/P&A.

O/C. 1st Batt.
R.Nfld. Regt.
B.E.F.

WF/FK.

Pay & Record Office.

17th February 1919.

PTE. W.J.HIBES, 2356.
R.NEWFOUNDLAND REGT.

Your memo.14/2/19.

(1480): enclosing "Railway
Transport A" relating to
the above named soldier has
been received and amount
debited to his account, please.

Capt.
Asst. Paymaster.
For Chief Paymaster & O.i/c. Recds.

CHIEF PAYMASTER'S OFFICER I.C. RECORDS.
NEWFOUNDLAND CONTINGENT,
53, VICTORIA STREET,
LONDON, S.W. 1.
ENGLAND.

Herewith "Railway Transport A"
duly filled in please

NEWFOUNDLAND CONTINGENT
PAY & RECORD OFFICE

Ref. Nos 1480

Rec'd 77 FEB 19 1919
Full Waterloo St

Ack 1ST BN ROYAL NEWFOUNDLAND REGIMENT

Ref. Nos (U)

2833/105

BRANCH

Comd.

T. & A.

B. & C.

B. & E.

P. S.

14/2/19

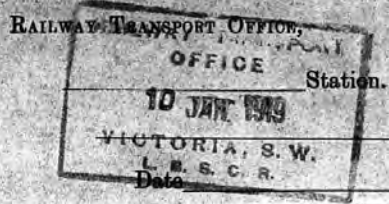
[Handwritten signature]

*Copy
P/B*

1916 fare

Railway Transport "A."

No. 2356
Rank Pte
Name Hibbs W G
Coy. Transport



No. of Warrant issued
60/993524
Date 10/1/19
From Victoria

The man marginally noted, of the unit under your Command, presented himself at the above office this day and stated that he was without means to pay for the journey to Folkestone 14/6

To Folkestone 14/6
Amount due 6/-

After investigation, I issued to him a warrant on repayment, number and date as per margin.

Will you please adjust as indicated below.* Cash should not be remitted.

Signature of Soldier

H. J. Hibbs



Dunning
Railway Transport Officer.

The Officer Commanding,

621

1st Bn. Royal Newfoundland Regt

* Note.—If the man is serving at home the Commanding Officer should fill in the perforated portion below and forward it to the War Office.

If the man is serving with an Expeditionary Force the Commanding Officer should enter the debtor item among the cash payments in the man's paybook (but not in an acquittance roll) and forward the form in its entirety to the Fixed Centre Paymaster at home after signing the following Certificate.

Certified that the above amount has been entered in the man's paybook.
(Signed) *W. G. Hibbs* **LIEUT. COL.**
COMMANDING 1st BN. ROYAL NEWFOUNDLAND REGIMENT and Unit.

The Fixed Centre Paymaster will then complete the perforated portion of this form below.

This portion of the form when completely filled in to be forwarded to the Secretary, War Office (F. 5. Rlys.), London, S.W. 1.

The sum of £ : s. d. on account of Warrant No. _____, dated _____ from _____ to _____, issued on repayment to No. _____ (Station) (Station)
(Rank and Name) _____ of the _____ Regiment, will be credited to the public in _____ through the Regimental Paymaster at _____

(Signed) _____
Rank and Corps _____

Date _____

No. 207

ANGLO-AMERICAN

WESTERN UNION



DIRECT UNITED STATES

CABLEGRAM

Prefix _____ Code _____		SENT		FOR STAMPS	
Word	CHARGE	At _____	To _____	By _____	
		VIA ANGLO.		THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.	

26/12/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To MRS J HIBBS

TOPSAIL (Newfoundland)

ARRIVED FURLOUGH CABLE FIVE POUNDS THROUGH MILITIA

2356 HIBBS

Change cable → *12/-*

CHARGED
 PAY LEDGER *1st Base*
 Date *10/1/19* by *W.H.*

CHECKED.
W.H.
 10/1/19

Authorised.

NOT TO BE TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

59 Victoria St. S.W. 1.

Signature _____

Address _____

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

No. 2356

Rank

Pte

Name

Thinks W J

Pay	F.A.	Wkg	Total	N.F.P/33
1.00	10		1.10	
Less Allotment			60	
Net Rate			50	WJ

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£ s d				
						From	To			£	s	d		
Balance				Balance							11	8		
Acquittance Rolls		24	19	8	Pay @ Net Rate	21/12/17	24/12/18	370	50	185	00	38	0	3
Hospital Advances					Other allowances	2/1/18	7/1/19	12	1/9			1	4	6
A.B. 64. 8 1/2 p.		3	5	2								1	4	6
P. & R.O. Payments					Cr. Bal. 15.1							11	0	11
Other Allowances		7	2	6	Pay	21/12/18	8/1/19	19	50	9	50	1	19	0
Cash R. 89		28	5	10	Cr. Bal. 2.4.6									
Cash R. 823	8/1/19	2	4	1										

26
 18

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 F, or P. (1), 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 consider 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. *1st Royal Newfoundland* 7. Former Trade or Occupation } *Miner*
2. Regtl. No. *2256* 3. Rank. *1st Corp.* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Hells* *W.D.* (a) Former Regts. or Corps; with Regtl. Nos.
- (Surname) (Christian Names)
5. Age last birthday *28*
6. Posted for duty on *Mar. 22/16* at *St. Johns* 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? (b) Date of Discharge;
9. If a Court of Inquiry was held on an injury state:— (c) Cause of Discharge.
- (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. 179a (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? }

na
na

no complaint of no Disability.

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, etc., 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?

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. E. Proctor Capt R.A.M.C.
Medical Officer in charge of case.

Station *Langley Camp*
Date *12/6/19*

* 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

OPINION OF THE MEDICAL BOARD.

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) *The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

21. Give diagnosis and particulars of :—

- (a) Any disability claimed or discovered.
- (b) The present condition thereof.

22. 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 part of the soldier

Give details :

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

23. Is the disability in a final stationary condition? If not

- (a) How long is the present degree of disability likely to last?
- (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

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

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

Opinion of Military Member in case of disagreement.

OR

- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures:—

Station

Date

Harley D. Camp
17.8.19

President or Chairman.

Members.

Discharge Approved under Para. 392 (xvi) King's Regulations.

Station

Date

Officer in charge, Central Hospital.

Only applicable in cases of Patients in Hospitals.

OR
Discharge Approved under Para. 392 () King's Regulations.
or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station

Date

O.C. Discharge Centre.

No. 2356 Name *Hibbs W.G.*

Sqn., Batty., or Company } *"A" Corps 1st Newfoundland*

Date of enlistment } *Mar 22nd /16*

G.C. Badges } *1*

Service or Proficiency Pay } *Good*

Signature O.C. } *J. Munn*

Company, etc. } *Capt*

Date of last entry in Company Conduct Sheet } *20/9/16*

No. and date of last drunk } *20/9/16*

Period not reckoning towards freedom from extra fine } *None*

Sheet No. } *One*

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>Field</i>	<i>17/1/17</i>	<i>Plt</i>		<i>when on active service being deficient in provisions</i>	<i>Capt. Munson</i>	<i>4 days pay for def.</i>	<i>17/6/17</i>	<i>Lt Col. Hadow</i>	<i>Jah</i>
<i>Field</i>	<i>21/5/18</i>	<i>Plt</i>		<i>Absent from barracks after 9.30 P.M. contrary to G.R.O.</i>	<i>Docuworks</i>	<i>4 days - C.B.</i>	<i>22/5/18</i>	<i>Lt Col. Hadow</i>	<i>H.S.</i>

Hughes Wm

2356

Pay Day-

ST. JOHN'S, June 11th /19

Royal Newfoundland Regiment.

Billeting Account,

To L/c. W. Hibbs

Billeting Soldiers as undermentioned

from June 1st /19 to June 15th /19

2356 - L/c. W. Hibbs 15 50

ACCOUNT *Bm*

CH. NO. *23258* INITIALS *W*

IND. LEDGER... INIT. NO.

PAY LEADER... INITIALS

DETA. REGG. NO. *50* INIT. NO.

Certified correct for \$

R. J.

Alfred Boust
Billeting Officer.

L/c. W. Hibbs

NEWFOUNDLAND POSTAL TELEGRAPHS.**CABLE CONNECTION WITH ALL THE WORLD.****ALL MESSAGES SENT ARE SUBJECT TO THE FOLLOWING CONDITIONS:**

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED.)

Signature of Sender _____ Address _____

Line Number	Recd	By	Sent	By	Check

Dated April 28, 1919To The Operator,TOPSAIL, C. B.Remit \$20.50 to cover cable 2356 Fibbs

Lieut.
For Paymaster.

NEWFOUNDLAND POSTAL TELEGRAPHS

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 10 Sent by Lopraire Rec'd by 121 No. 26Place from Militia DeptTo London advise

please Cable twenty

Dollars 235-6

lets pay & record

London advise

Cost

Operator

May 9, 1919

Miss Florence Miller,
Topsail.

Dear Madam:

I beg to acknowledge receipt of your letter of April 28th. enclosing \$20.60 and as requested I have cabled £4.2. 2, being the equivalent of this amount, less the cost of message to 2365, Pte. Hibbs.

Yours truly,

Lieut.
For Paymaster.

June 29, 1919

#2356 I/Cpl. William J. Hibbs,
Topsail, C.B.

Dear Sir:-

Please find enclosed Discharge
Certificate No. 2405.
Yours truly

Captain,
Paymaster & U.i/c Records.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 2356 Rank L/Cpl Name Hilbert W
 Intended place of residence Topsail
2. Occupation Farmer
 Classification of soldier E Medical Category A1
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 JUN 11 1919
ST. JOHN'S
 Date JUN 11 1919
- Mr. J. J. J. J.
 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 11 1919
- H. Hilbert
 Signature of soldier
- W. J. J. J.
 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 11 1919
- H. Hilbert
 Signature of soldier
- W. J. J. J.
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service RECEIVED No of days on Military
 Discharged from service JUN 15 1919 Plus 14 days Service 1196

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge Records, The Royal Newfoundland Regiment, twenty-eight days from date.
- Place ST. JOHN'S
JUN 15 1919
 Date JUN 15 1919
- R. H. J. J.
 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, Nfld.
June 29, 1919
 Date June 29, 1919
- W. J. J. J.
 Officer in Charge Records
 The Royal Newfoundland Regiment

a 927079/2402

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 2556 Rank Sgt. Pl. Name Hills, William
 Date of Enlistment 21-3-16 Address Topshill District St. John's
 Occupation Farmer Classification for Discharge 14 Medical Category A.1
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. 1136	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	5
B 17H	D 400H	Form L		do 3rd	" 4	
B 17Ba	D 400C	Form K		do 4th	" 5	
B 179b	B 103	ME 2		" 6		
B 179c	B 120	M 93				

Date 10-6-19 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 \$60.00

(b) Clothing Supplied _____

Date 11-6-19

O. C. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. _____ to his home at Top Seal, Top Seal and Release Certificate No. 2616 issued.

Date 11-6-19 J. A. Sumrell
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 29-6-19

Date 11-6-19 J. A. Sumrell
Depot Paymaster.

Discharged approved for 15-6-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. 136	B 288	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 108	ME 2		" 6
B179c	B 120	M 93		

2 Form B

Date 11-6-19 J. A. Sumrell
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

JUN 15 1919

Eligible for War Service Gratitude

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

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

Date _____

June 29, 1919

#2356 L/C. William Hibbard

Topsail, C.B.

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 & O.I/c Records.

25296

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 *William*..... 2. Surname..... *Hills*.....

3. Rank..... *R. Cpl.*..... 4. Regtl. No. *2356*.....

5. Address in full to which future payments of gratuity are to be forwarded..... *Popsail, C. B.*.....

6. Date of enlistment in the Regiment..... *Mar 27/16*.....

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

.....

8. Relationship of such dependents.....

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

.....

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

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

.....

12. Give total length of time which you served on active service.

What part in field, or overseas..... *From Mar 27/16*.....

To June 11/19...... 1.1.....

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.

No

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.

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 Rest.? If not give? - (a) Date of discharge. (b) Reason for discharge.

No
June 11, 1919
Temporary Deputation

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 - from Oct 1916 to Feb 1919

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

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.

H. Hibbs

Signature of Applicant:

Place of Residence:

*Topsail, L. B.
St. John's, Nfld*

Declared before me at:

This

11th

day of

June 19... 19...

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

John W. Carthy

POST DISCHARGE PAY.

Date paid	Waid	Waid	War Service	Net amount
	Soldier.	Dependent.	Gratuity.	due

.....	<i>6 mo</i>	<i>470</i>
-------	-------	-------	-------------	------------

.....
Certified correct.				Paymaster

MAILED
NOV 1918

The Royal Newfoundland Regiment

Class for Demobilization: 76

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 10.6.19

Regimental No 2356

Name Hills-Williams

Rank L/Cpl.

Address Popoail

Present Medical Category A1

Recommended for: (a) Immediate discharge

(b) Standard Medical Board

Members of Board

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

W. Paterson
Senior Medical Officer

W. S. Sinden
M. O. Depot

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

W. Hibbs

Signature of Man.

J. A. Snowcraft

Signature of the Vocational Officer or his Representative.

Reg. No. *2356*

Place *ST. JOHN'S.*

Date *11-6-19* 191

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

MEDICAL HISTORY

Surname Nichols OF Christian Name William

Table I.—GENERAL TABLE.

Birthplace:—Parish	SPECIAL RESERVE.		REGULAR ARMY	
	on	day of	on	day of
Examined	on	21 st day of March 1914	on	day of 191
	at	St John's Rd.	at	
Declared Age		34 years		years days
Trade or Occupation				
Height		5 feet 6 $\frac{1}{2}$ inches		feet inches
Weight		133 lbs.		lbs.
Chest Measurement	Girth when fully expanded	37 inches		inches
		13 inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V=	6/6 6/6	R.E.—V=	
	L.E.—V=		L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
	(b) Slight defects but not sufficient to Cause Rejection		(b)	
Approved by (Signature)	<i>Samuel Paterson</i> Capt - Medical Officer.		Medical Officer.	
(Rank)				
Enlisted	at	St John's	at	
	on	21 day of March 1914	on	day of 191
Joined on Enlistment	Corps.		Corps.	
	Regtl. No.		Regtl. No.	
Transferred to	<i>St Neas Reg 256</i>			
Became non-effective by				
	on	day of 191	on	day of 191
(Signature)				
(Rank)				

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
17/7/16	1 st Inoculation D
18/7/16	2 nd Do D
18. 8. 16	Successful vaccination N.Y.W.
22. 9. 16.	3 rd Inoculation Para T N.Y.W.
29. 9. 16	Fit for foreign service N.Y.W.
<p>It is hereby certified that this soldier has been before a Travelling Medical Board and has been classified as <u>C</u> for Discharge on Demobilisation. Medical category <u>T</u></p> <p>10. 6. 19 Date of T.M.B.</p> <p><i>for</i> [Signature] <u>Medical Officer</u></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

The Royal Wld. Regiment

DEMOBILIZATION

No. 2356 Rank _____

Name: Hibbs W

Warned for demobilization on

JUN 11 1919

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 Fusiliers*
2. Regtl. No. *2356* 3. Rank. *Lt Col*
4. Name *Boiles* *L W J*
(Surname) (Christian Names)
5. Age last birthday. *28*
6. Posted for duty on *Mar 22/16* at *St Johns*
 in category (or grade).....
7. Former Trade or Occupation } *Miner*
- 7a. If the soldier claims previous service in Army, he should state—
 (a) Former Regts. or Corps; with Regtl. Nos.
8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty? (b) Date of Discharge;
 (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. *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? }

The Complainant's Pro 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. E. Premier Capt. R. A. M. C.
 Medical Officer in charge of case.

Station *Harley Camp*
 Date *17.5.19*

* 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

OPINION OF THE MEDICAL BOARD.

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) *The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

21. Give diagnosis and particulars of:—

- (a) Any disability claimed or discovered.
- (b) The present condition thereof.

22. 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 part of the soldier .. .. .	.....	.....

Give details:

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

23. Is the disability in a final stationary condition? If not

- (a) How long is the present degree of disability likely to last?
- (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

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

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

Opinion of Military Member in case of disagreement.

OR

- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures:—

Station *Hazley Camp* } President or
 Date *14-5-19* } Members.

Discharge Approved under Para. 392 (xvi) King's Regulations.

Station } Only applicable
 Date } in cases of
 Officer in charge, Central Hospital. } Patients in
 Hospitals.

OR
 Discharge Approved under Para. 392 () King's Regulations.
 or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station
 Date
 O.C. Discharge Centre.

N^o 2255



3/ 1ST. NEWFOUNDLAND REGIMENT *1*

ALLOTMENTS

I, *W. J. Hibbs*, Regl. No. *2356*

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. *May 1st.*

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<i>1991</i>	<i>mother</i>	<i>Mrs William Hibbs</i>	<i>Topsail C.B.</i>	<i>60</i>
Total Allotment, \$				

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.) *R.P. Holloway*
Serjeant
 Officer Commanding
7 Company
St. John's
May 2nd 1916

(Sig.) *Wm. J. Hibbs*
 (Rank) *Pvt.*

Reg. No. *2356* Rank *96* Name *Hibbs, Wm*
Attested Address *Lipscomb*
Allotment Allottee
Date of Allotment Returned from Overseas *1-6-19*
Returned on S S *Corucan* Cause *Discharge*

10-6-19
15-6-19

PASSED TO DEMOBILIZATION OFFICER
~~DISCHARGE APPROVED ON DEMOR~~

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

Fold Here

Sept. 6th. 1921.

The accompanying **Victory Medal** and/or **British War Medal**
is/are forwarded herewith to

Pte. W. J. Hibbs

in respect of his service as No. 2356 Rank Pte.

Name Wm. J. Hibbs Royal Nfld. Regt.
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received Medals.

Signature Wm. J. Hibbs

Date Sept. 15th. 1921

Address Lopsail, C.B.

Receipt for Army Book 64

No. 2356 Name Hibbs,

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

Name W. J. Hibbs

Date .. 31. 7. 20.

Place .. Ipswich

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

45
~~2820~~

RECEIPT.

C.R. 2356

FOR ISSUE OF RIBBON OF VICTORY MEDAL/1914-1919.

I certify that I have received an issue of 2 inches
of Ribbon of British Victory Medal-1914-1919.

NO 2356...NAME Capt. H. J. Gibbs

DATE 31/12/19...

PLACE T. S. S. S.

Regiment or Corps **1st Newfoundland**
 Rank **Rt** Surname **Nisbo** Christian Name **W. J.** **1639**
 Religion **CPG** Age on Enlistment **24** years **11** months
 Enlisted (a) **Mar 22nd/16** Terms of Service (a) **duration of war** 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.

[Handwritten signature]

Report		Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		24 APR 1919 ROYAL CANADIAN GENDARMERIE OFFICE	Embarked Southampton	3 OCT 1916	
		Disembarked	ROUEN	4 OCT 1916	
		Joined Battalion	14 OCT 1916		
			With BATT.	25. 1. 17	
		WITH .Bn. 30-13-17.			
		Appointed 2/Corp was to Eng for Demob.		8.2.19	Base - 15.2.19 W 162816 MCLA
			<i>[Signature]</i> Captain for		
			Officer i/c Infantry Section No. 1 G.H.Q. 3rd Echelon.		

[Handwritten signature]

(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, Shoeling-Smith, &c.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.
 [684] W5017/2124 1000m 6/15ss 93 56

Forms
B. 121
B.

Regiment of 1st. New Brunswick

Number of Sheet 1
 Signature of O. C. Company [Signature]
Major

Regimental Number and Name		Enlistment	Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<u>2356. Hibbs W.F.</u>	Age on <u>24</u> years <u>11</u> months	<u>Farmer</u>	
Joined	Date	Place and Date of Enlistment) <u>S. John's N.S.W.</u>	Religion	
Joined	Date		<u>C.P.E.</u>	
Joined	Date	Period of <u>3</u> years <u>100</u> years. (with Colours with Reserve <u>3 1/2</u> years.)	Place of Birth	
Joined	Date		<u>Topshill C.B.</u>	

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>CyN</u>	<u>19/9/16</u>	<u>pte</u>		<u>Absent from base Parade</u>	<u>J. Perry</u>	<u>2 days CB</u>	<u>29/9/16</u>	<u>[Signature]</u>	<u>[Signature]</u>
				<u>Demobilized 29⁶/₁₉</u>					

To be carried over

Army Form B. 121.



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 *Hilbs William*

Regiment from which discharged *Royal Newfoundland*

Regimental number *2356*

Intended address *St. John's*

Height on discharge *5* Feet *6 1/2*

Color of hair on discharge *Dark Brown*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks _____

Figure on discharge *Medium*

Christian name of Father _____

Christian name of Mother *Julia*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *St. John's* *26-4-1891*

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) *William Hilbs*

A. G. G. J.
(Rank)

Station **ST. JOHN'S.**

Date *9-6-19*

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 _____



The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 2356 Rank S. Pl. Name W. Hibbs
 Date of Enlistment 21-3-16 Address St. John's District St. John's
 Occupation Farmer Classification for Discharge F. Medical Category F.I.
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N. F. 1/36	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 10-6-19 Pro. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am W. Hibbs 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 _____

Date 11-6-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. _____ to his home at Tipton, Ind. and Release Certificate No. 2616 issued.

Date 11-6-19 *J. A. Snowcliff*
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 11-1-19.

Date 11-1-19 *J. A. Snowcliff*
Depot Paymaster.

Discharge approved for 15-6-19
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
E 179b	B 103	ME 2		" 6
B179c	B 120	M 93		

Date 11-6-19 *J. A. Snowcliff*
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

JUN 15 1919

Eligible for War Service Gratitude

Date _____ *R. H. Sait Capt.*
O. C. Discharge Depot.

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

Date June 20/19

J. A. Snowcliff
Post of Records