



# First Newfoundland Regiment

## ATTESTATION PAPER

Regimental No. 248

Name in full Norman Albert Hooper Age 24

Address Port au Port Bay St George

Married S Single Single Height 5'8" Weight 167

Color Fair Hair Brown Eyes Blue

Other distinguishing marks Scar on left hand

Nearest relative Brother Walter Hooper

Address Port au Port

Dependents -

Occupation Fisherman Present Wage \$2.00 day

Previous service -

Decorations -

General Remarks -

Date of Enlistment -

I, Norman Albert Hooper do sincerely promise and swear that I will be faithful and bear true allegiance to His Majesty and that I will faithfully serve His Majesty in any place where I may be needed (or in the Colony of Newfoundland as the case may be) against all his enemies and opposers whatsoever according to the conditions of my service.

Declared before me this 1 day of October 1914  
Arthur Paly  
Albert A P Hooper  
Sept 2-14

**DESCRIPTIVE REPORT ON ENLISTMENT.**

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

Reg. No. 248

Name **Albert Norman Hooper**

Apparent age **24** years \_\_\_\_\_ months. Height **5** feet **8** inches.

Chest measurement { Girth when fully expanded \_\_\_\_\_ inches.  
Range of expansion \_\_\_\_\_ inches.

Distinctive marks **Color: Fair, Hair: Brown, Eyes: Blue.**

**Other distinguishing mark: Scar on left hand.**

**INFORMATION SUPPLIED BY RECRUIT.**

Name and Address of next of kin **Walter Hooper, Port au Port, Newfoundland**

| Relationship **Brother.**

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) Signature of Officer verifying entry from certificate.

(a)	(b)	(c)	(d)
			Verified from certificate.

Particulars as to Children.

Christian Names	Date and Place of Birth	(d)
		Verified from certificate

**STATEMENT OF THE SERVICES.**

Corps in which served	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Belong to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries	
					years	days	years	days		
Service towards limited engagement reckons from <b>2/9/14</b>										
Joined at <b>St. John's</b> on <b>2nd September '14</b>										
<b>Discharged July 12, 1919</b>										
<i>Embarked S.S. Hovgel for St. J. 3<sup>rd</sup> Feb</i>					<i>Embarked in C. # 1, 10<sup>th</sup> Feb</i>					<i>Landed Sable Point</i>
<i>Disembarked and arrived St. J. 15<sup>th</sup> Feb</i>					<i>Proceeded to St. J. 16<sup>th</sup> Feb</i>					
<i>Embarked Port aux Français 14<sup>th</sup> Feb</i>					<i>Disembarked Gaspé 22<sup>nd</sup> Feb</i>					
<i>Embarked 1<sup>st</sup> Feb</i>					<i>Admitted to England 2<sup>nd</sup> Feb</i>					<i>Admitted Handworth 5<sup>th</sup> Feb</i>
<i>Embarked for attack to Port 2<sup>nd</sup> Feb</i>					<i>Embarked 5<sup>th</sup> Feb</i>					<i>Joined 1<sup>st</sup> Bn. Prince of Wales</i>
<i>in the field 5<sup>th</sup> Feb</i>					<i>Admitted 57<sup>th</sup> P. B. W. 13<sup>th</sup> Feb</i>					<i>Admitted 13<sup>th</sup> Feb</i>
<i>Admitted to England 7<sup>th</sup> Feb</i>					<i>Admitted Handworth 8<sup>th</sup> Feb</i>					<i>Discharged from Handworth 12<sup>th</sup> Feb</i>
<i>Admitted Handworth 21<sup>st</sup> Feb</i>					<i>Admitted Handworth 26<sup>th</sup> Feb</i>					<i>Placed 12 days leave 1<sup>st</sup> - 12<sup>th</sup> Feb</i>
<i>Embarked Handworth 21<sup>st</sup> Feb</i>					<i>Admitted Handworth 22<sup>nd</sup> Feb</i>					<i>Admitted 15<sup>th</sup> Feb</i>
<i>to field for demobilization per Barragan 29<sup>th</sup> Feb</i>					<i>Embarked 22<sup>nd</sup> Feb</i>					<i>Admitted 22<sup>nd</sup> Feb</i>
<i>Embarked Newfoundland 29<sup>th</sup> Feb</i>					<i>Discharged 28<sup>th</sup> Feb</i>					<i>CONFIRMED 12<sup>th</sup> Feb</i>
<i>Demobilization Approved</i>										
Total Service forfeited as above ... ..										
Total Service towards Engagement to <b>12-7-19</b> (date of discharge)					<b>4</b> years <b>193</b> days					
" " " Pension " " " " " "					" " " " " "					



This Form is to be used in connection with Pamph. M. E. (1)  
N. F. 1914

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 Hooper, Albert Norman (512)  
aged 23 conducted at Seamen's Institute

Date: 31/8/14 Recruiting Officer:

NO. OF TEST FINDING

1 no  
2 no  
3 no  
4 no  
5 no  
6 no  
7 yes  
8 yes  
9 no  
10 no  
11 no  
12 F  
13 N  
14 N  
15 N  
16 N  
17 N  
18 N  
19 N  
20 N  
21 N  
22 N  
23 N  
24 N  
25 3  
26 5  
27 5  
28 5  
29 5  
30 5  
31 5  
32 5  
33 4  
34 4  
35 5-8  
36 160  
37 34-37  
38 Abt. \$1.50 a day.  
39 Another, Walter Hooper, Profswarles, Port au Port.

Fit

not

Signature of Medical Examiner: Cluny Stephenson M.D.

A. N. Hooper.

248.

P. R. O.

Admitted 5.7.16

Army Form W. 3016.

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

Date Aug 9<sup>th</sup> 1916

(1) To the Officer i/c Records,

58 Victoria St

S.W. (Station).

(2) The Officer Commanding,

Newfoundland Contingent

Quar. (Station).

(3) The Paymaster,

58 Victoria St

S.W. (Station).

Regimental No. 248

Rank and Name Plt Hooper. A

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

has been granted a furlough from Aug 9<sup>th</sup> to Aug 18<sup>th</sup>.

His address while on leave will be:-

58 Victoria St S.W.

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

I consider he is fit for ~~Light~~ and light duty within 3 months in service overseas.

Horace Tagan Capt R.A.M.C.(F)

Officer in charge \_\_\_\_\_ Hospital, Registrar, R.A.M.C.T.

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

\* Strike out that which is inapplicable.

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

## Report to the Local Committees of the War Pensions Committee on Soldiers Discharged.

- (a) From Central Hospitals or Discharge Centres, as no longer physically fit for war service, under para. 392 (xv1.), King's Regulations.
- (b) From Discharge Centres, as surplus to military requirements (having suffered impairment since entry into the Service) under para. 392 (xvi.a), King's Regulations.

To be sent by the Officer i/c Records, within 24 hours of the receipt of the soldier's discharge documents, to the Local Committee of the Area in which the man intends to reside.

**PART** Soldier's Name Hooper Albert  
(Surname) (Christian names in full)

**A.** Unit from which discharged Royal Hfld.  
Regimental Number 248 Rank on discharge Pte. Age on discharge 28  
Married, widower with children, or single \_\_\_\_\_  
Occupation before enlistment Labourer  
Special qualifications (if any) for } Labourer if fit to undertake work.  
employment in civil life } Newfoundland.  
Nature and locality of employment desired \_\_\_\_\_

Full postal address to which } St Georges Newfoundland.  
proceeding on discharge }  
Name of Approved Society (if any) \_\_\_\_\_

**PART** Nature of medical unfitness \_\_\_\_\_  
**B.** Service with Colours \_\_\_\_\_ years \_\_\_\_\_ days, of which \_\_\_\_\_ years  
\_\_\_\_\_ days were served abroad during the present war.  
Military character \_\_\_\_\_  
Anything against the soldier to render his recommendation undesirable \_\_\_\_\_  
Date of discharge \_\_\_\_\_ 191\_\_\_\_.  
Station \_\_\_\_\_  
Date \_\_\_\_\_ Officer i/c Records \_\_\_\_\_

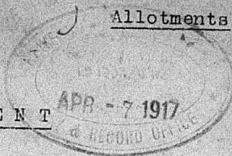
NOTE 1.—Part B. of this Army Form and Army Form W. 3463a can be completed at the same time by the use of carbon paper.

NOTE 2.—Part A of this Army Form is to be completed by the O.C. unit in all cases of soldiers sent to a Discharge Centre with a view to discharge or transfer to the Reserve, as it will not be known until a soldier is medically boarded whether he may not be discharged under Para. 392 (xvi.) or (xvi.a), King's Regulations.

ORIGINAL

N.F./12.

Allotments.



NEWFOUNDLAND CONTINGENT

CANCELLATION OF ALLOTMENT

I, (No.) 248 (Rank) Pte. (Name) Hooper A.  
hereby apply for cancellation of Allotment made by me on  
N.F. 560 dated 1<sup>st</sup> January 1915 in favour  
of Myself for manager Bank of Montreal for \$ — cts 60<sup>+</sup>  
per diem. Such cancellation to take place on the  
30<sup>th</sup> day of April 1917

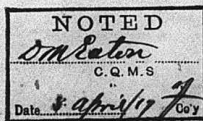
I agree to accept all risks and consequences of this application failing to reach headquarters, St. John's, by mail in time to become operative at above nominated cancelling date; and that in the event of such non-delivery by mail, and thereby the Allotment continuing to be paid to the Allottee, I also agree to such further stoppage as may be thereby necessary being made against me in the Pay Books, or otherwise to refund such overdrawn amount or amounts.

Dated at Race-course Apr.  
3<sup>rd</sup> April 1917

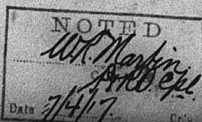
A Hooper.  
Allotter.

Approved and Witnessed,

C. B. Dicks  
O.C. "2" Company.



To be made out in TRIPLICATE and sent to the Paymaster & Officer in Charge of Records, who will forward Original to Headquarters by first mail, Duplicate by the following, and retain Triplicate.



DUPLICATE

560

Albert W Hooper  
Sixty

248

575

Managers  
Bank of Montreal

Water St

= 60

Commence 1<sup>st</sup> January 1915

60

Arsenal Capt

Albert W Hooper  
Private

Fort George B  
9 1 1915



No. 11/18

To Paymaster & Pay's Records  
Royal Newfoundland.

Sir

*[Handwritten initials]*

Please pay to No 248  
Pl. A. Hooper the sum  
of One pound £1.0.0  
and charge same  
to my account.

Pl. A. Hooper

11 NOV 1918  
LONDON GENERAL HOSPITAL

O.K. 10-0  
11/11/18 MR

Receipt No. 9676  
*[Handwritten initials]*

C. N. £ 1-0-0 M.P.R. 4/11/18  
Receipt No 9498

To Paymaster of Pay & Records  
Royal Newfoundland Regt

Sir,

Please pay to No 248  
P. A. Hooper the sum  
of One pound £ 1.0.0.  
that may be due  
me.

P. A. Hooper  
Approved  
Wm. Hooper

Nov. 4/18



P. A.

Approved  
Wagon  
2/2/1918

2nd London General  
Wandsworth

Dear Sir—

Will you kindly  
allow me one pound from  
my credit—

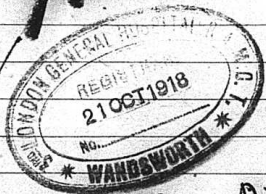
Yours Sincerely

Wm A Hooper

Provincial

Regt—

*[Large handwritten signature]*



AC

P.L.H.

8/11-18  
1-0-0-1  
Receipt 9273

NEWFOUNDLAND CONTINGENT  
 PAY & RECORD OFFICE

Ref. Nos. *13290*  
 Recd. **17 AUG 1918**

Ack'd \_\_\_\_\_ Ans'd \_\_\_\_\_  
 Ref. Nos. **OUT 13290/11**

ACTED UPON

BRANCH	DATE	BY
Comd.		
P & A		
R & C		
B & E		
P.S.		

Military Hospital  
 Vincent Sq.  
 Block B.  
 B1 Ward  
 London SW1  
 14/8/18.

Sir,

I shall be greatly obliged if you will remit me £2 (Two pounds) to the above hospital. My account is very much in credit.

Off. P 2-0-0  
 14/8/18  
 Receipt No. 8801

I remain, Sir,  
 Your obedient servant  
 A. Hooper.

Stn. No. 248.  
 1st Royal Newfoundland Regt.

Chief Paymaster & Officer in Charge,  
 Newfoundland Contingent,  
 Pay & Record Office,  
 55 Victoria St.  
 London W.

13290/11



*Sumner*  
 A. Leonard  
 Capt. R.A.M.C.

13290/11.

Military...

Rochester Row, S. W.

20th, August, 188.

248.....Rte...

A. Hooper..

S. O. O.

**Notification to the Officer i/c Records that a Soldier is about to be brought before an Invaliding Board at a Central Hospital with a view to discharge from the Service.**

NOTE.—On receipt of this notification the Officer i/c Records is to ensure that he has all the documents of the soldier that should be in his possession, or prepare temporary documents in the event of absence or loss of the originals.

Army Form W. 3977c has been sent to the Regimental Paymaster with instructions for that Officer to return it to the Officer i/c Records after having filled in the particulars of the names and dates of birth of the soldier's children for whom separation allowance is being paid, on receipt of which the Army Form is to be attached to the soldier's documents. In the event of the soldier's discharge documents being forwarded to the Controller, Ministry of Pensions, Army Form W. 3977c is to accompany them whenever possible; the despatch of the documents is not, however, to be delayed for this purpose. If the Army Form has not been received by the Officer i/c Records from the Regimental Paymaster in time for transmission with the discharge documents, it is to be forwarded to the Controller, Ministry of Pensions, as soon as received.

**Part I.**

A.F. W. 3977A has been sent to O.C.

The Officer i/c Records,

A.F. W. 3977c has been sent to The Regimental Paymaster,

*R.N.F.I.R.*  
*55 Victoria St*

*58 Victoria St*

The undermentioned soldier is about to be brought before an Invaliding Board at this hospital with a view to discharge from the Service.

You are requested to forward without delay Army Form B. 178, or temporary document, for the soldier.

No. *248* Rank *Plt*

Name *Hooper* (Surname) *Albert* (Christian names in full)

Unit and Corps *R.N.F.L.D.*

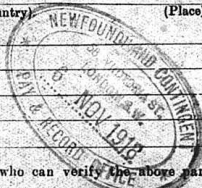
Station *London General Hospital* Officer i/c Hospital.

Date *5 NOV. 1918* \* Strike out if inapplicable.

NOTE.—If the soldier claims to be repatriated abroad and is prepared to embark at the first available opportunity, the Officer i/c Hospital is to complete such of the following particulars as the soldier can furnish before transmitting the Army Form to the Officer i/c Records:—

The soldier claims repatriation to \_\_\_\_\_ (Country) \_\_\_\_\_ (Place).

- (i) Where enlisted \_\_\_\_\_
- (ii) Date of arrival in United Kingdom \_\_\_\_\_
- (iii) Port of arrival \_\_\_\_\_
- (iv) Ship on which arrived \_\_\_\_\_
- (v) Name of Shipping Line or Agent \_\_\_\_\_
- (vi) Names and addresses of two references who can verify the above particulars \_\_\_\_\_



In such a case the Officer i/c Records is to verify the soldier's claim forthwith and report on Part II. of this Form whether the claim is substantiated or not.

**Part II.**

Officer i/c Hospital, \_\_\_\_\_

The soldier's claim to be repatriated abroad \_\_\_\_\_ accepted. { Insert "is" or "is not." }  
On termination of his leave he is to report to the Officer Commanding, \_\_\_\_\_ { Strike out if inapplicable. }  
at \_\_\_\_\_ (Station)

Station \_\_\_\_\_

Date \_\_\_\_\_ 191 \_\_\_\_\_

Officer i/c \_\_\_\_\_ Records.

**Notification to the Regimental Paymaster that a Soldier is about to be brought before an Invaliding Board at a Central Hospital with a view to discharge from the Service.**

Note.—This notification is sent in order that the Officer i/c Records, at the time the soldier's documents reach him from the Officer i/c Hospital, may be in possession of particulars of the soldier's children in respect of whom separation allowance is being paid.

(1) This information is required by the Ministry of Pensions at the time of assessing the soldier's pension, and it is important that this Army Form should be returned to the Officer i/c Records in time for despatch to the Controller, Ministry of Pensions, with the soldier's documents.

(2) To enable the Ministry of Pensions to make the assessment by the termination of the period covered by the temporary pension allowance and thereby avoid hardship to the soldier, it is essential that there should be no delay in completing and forwarding this Army Form to the Officer i/c Records.

**Part I.**

A.F.W. 3977a has been sent to O.O. at [unclear]

A.F.W. 3977b has been sent to The Officer i/c Records, The Regimental Paymaster,

R.N.F.I.R. 58 Victoria St  
58 Victoria St

The undermentioned soldier is about to be brought before an Invaliding Board at this hospital with a view to discharge from the Service.

No. 242 Rank Sgt

Name Keoper (Surname), Albert (Christian names in full).

Unit and Corps R.N.F.I.

Station 3RD LONDON GENERAL HOSPITAL Officer i/c Hospital.

Date MEDICAL BOARD  
5 NOV. 1918

NOTE.—If the soldier claims to be repatriated abroad and is prepared to embark at the first available opportunity, the Officer i/c Hospital has been instructed to complete such of the following particulars as the soldier can furnish. This information is required by the Officer i/c Records to enable him to verify the claim.

The soldier claims repatriation to \_\_\_\_\_ (Country), \_\_\_\_\_ (Place).

(i) Where enlisted \_\_\_\_\_

(ii) Date of arrival in United Kingdom \_\_\_\_\_

(iii) Port of arrival \_\_\_\_\_

(iv) Ship on which arrived \_\_\_\_\_

(v) Name of Shipping Line or Agent \_\_\_\_\_

(vi) Names and addresses of two references who can verify the above particulars \_\_\_\_\_

In such a case the Officer i/c Records is to verify the soldier's claim forthwith and report to the Officer i/c Hospital on Part II. of Army Form W. 3977a whether the claim is substantiated or not.

Part II. of this Army Form is to be completed by you, or if necessary by the Secretary, T.F. Association, and forwarded without delay to the Officer i/c Records.

Station \_\_\_\_\_

Date 191

Officer i/c Hospital.

Admitted 21 10 18  
101

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



Soldier's Regt. No. } 248 Rank Plt

Name Hooper  
(Surname first)

Corps or Regiment (also Unit if known) } R Med Winchester

To Officer i/c of Records 58 Victoria St.

Regimental Paymaster 58 Victoria St

The above-named man, who appeared before a Medical Board, and whose discharge as "~~no longer~~ physically fit for war service" was approved by the President of the Board on the 11 11 18, has been sent to his home on warrant to await instructions as to his final discharge; he has been given £1 (one pound) advance and a suit of plain clothes.

He proceeded on (date) 12 11 18

to (full address) 58 Victoria St

DW

Date 12/11/18 g chall } Officer Comm.

Place Wardsworth capt mcd } Registrar, R.A.M.C.I. Hospital.

Three copies to be made; one of these to be sent to each Officer above-mentioned, and one copy to the General Hospital Office.



C.K. 1-0-0 MR. 3/3/9

3rd Receipt No. 1505

London General Hospital.

3/2/19

To pay & Record  
5-8 Victoria St.

please remit to  
No. 248 The Hooper &  
one pound that  
may be due to  
his credit

Approved  
One Pound

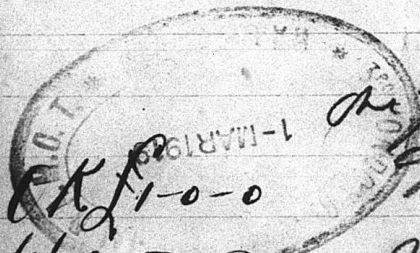
For  
Capt.



5th London General  
Hospital

1/3/19

To pay & Reward  
Office 5, 8 Victoria  
Street please remit  
to 248. etc & enclose  
one pound. That  
may be paid to £1-0-0  
his Credit. — OK. 1/3/19 R.M.  
R.—



1/3/19 R.M.

R. 1480

The Joint  
Office  
W. H. C. J. P.



affirmed  
Wagon  
transport

London General  
Hospital Wandsworth

13/2/19

To pay + Record  
Office 5-8. Victoria Street  
please Remit to

No. 248 Rte. A Hooper  
1st Lt. R. F. S. D. Regt

The sum of 1 pound  
that may be due  
to my credit

P.R. 10-0  
13/2/19

Receipt No. 1290

270

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

N.F.P./45.

NEWFOUNDLAND CONTINGENT

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

Please remit to 248 Mr A.W. Hooper  
Red Cross Hospital Essex

the sum of Three pounds — s. (£3-0-0)

on account of any balance that may be due to me.

*O.K.*  
*£3.0.0.*  
*E.H. 16/7/18*  
*Receipt No.*  
*Essex*  
*July 16<sup>th</sup> 1918*

Regtl. No. 248 Rank Pt

Name A.W. Hooper

Approved H. Rabbot  
Officer I/C.,

Red Cross Hospital.

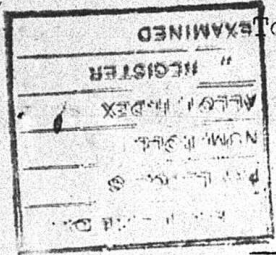
Dated at Essex 8140

*Essex*  
*8140*  
FILE BY INITIALS

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

N.F.P./45.

NEWFOUNDLAND CONTINGENT



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

Please ~~pay~~ <sup>pay</sup> to A. W. Hooper (No. 248)  
Red Cross Hosp. Esch

the sum of One pounds — s. (£1-0-0)  
on account of any balance that may be due to me.

O.F. £1-0-0  
N.F.P.  
14/7/18

Rec. No. 8142

Regtl. No. 3049 Rank Sgt  
Name R. M. J. Leese

Approved W. J. [Signature]  
Officer I/C.,  
Red Cross Hospital.

Dated at Esch  
July 16<sup>th</sup> 1918

Esch  
BRAND  
14/7/18

Chief Paymaster & Officer for Records  
Newfoundland Contingent,  
55 Victoria Street, London



Please remit to me £1.0.0, on  
Balance of £ due me

OR. £1-0-0  
H.P.P.  
22/7/18

£248 to A. Hooper. Rec. No. 8234

Chid G.H.  
Wansworth  
22/7/18

Approved.

Wansworth  
Capt. Hooper

RB  
22/7/18

O. admitted 8.5.18

Only for use with Men returned from an Expeditionary Force or from Garrisons Abroad.

Army Form W. 3016. (In Books of 200.)

No. .... Date 26 July 1918

- \* (1) To the Officer i/c Records
  - \* (2) The Officer Commanding
  - \* (3) The Paymaster
- } 25 Victoria M  
} R. H. W. Wheeler  
} 25 Victoria M. Station.

\* Strike out that which is inapplicable.

Regimental No. 248

Rank and Name. Pte Hooper A.

Regiment or Corps. 15

has been granted a furlough from } transferred on 26 July

His address while on leave will be } Military Hospital, Ryeheath Row

- I consider he is fit for
  - \* I. DUTY.
  - \* II. COMMAND DEPOT.
  - \* III. EMPLOYMENT.

\* Strike out that which is inapplicable.

Officer in charge. G. C. Hall, Capt. R.A.M.C.T. Hospital.

Registrar, R.A.M.C.T. Station.

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

In the case of men of the Royal Flying Corps, Royal Engineers and Army Ordnance Corps, two copies of Army Form W. 3016 will be sent to the Officer in charge Records concerned and one to the Paymaster, instead of one copy to the Officer i/c Records, the Paymaster and O.C. shown in the Schedule.

Payment to



Royal Wfld. Reg't  
Sir:

Please  
advance the sum of £1.0.0  
to Pte. A. Hooper # 248<sup>one</sup>  
R. Wfld. on account of  
any balance coming to  
him. I remain



Obediently

Approved Pte A. Hooper  
S. Wall # 248 R. Wfld. Reg't  
Capt

O.K. £1.0.0 h.p.

11<sup>2</sup>/<sub>18</sub>

Receipt no 708



ROOK  
1-10-18  
4/16/18  
7/15/18  
248  
W. 151/18

WANDSWORTH BRANCH  
WANDSWORTH, S.W. 18.  
LONDON, S.W. 1  
JUN 19 18  
& RECORD OFFICE

8<sup>RD</sup> LONDON GENERAL HOSPITAL  
No. 416/18  
4<sup>TH</sup> JUN 1918  
WANDSWORTH, S.W. 18.

Please pay 248 Mr A. Hooper

£ (one pound)  
his account  
248 Mr A. Hooper

BRANCH  
INITIALS  
FILE

charge to  
4/16/18  
Approved  
W. W. M. M. M.  
Capt Ramey

OK  
F-10-0 75/6/18  
Receipt No  
9886

June 25<sup>th</sup>  
Pay + Record office

5-8. Victoria Street

Please Remit to

BRANCH  
INITIALS  
R26/6

248.



the sum of one pound & no pence  
by Handwritten Name  
Approved  
G. C. Hall  
Clerk

Wandsworth ward 5-  
3rd. London Gened

July 25<sup>th</sup> 1918

Pay and Received  
Office 5-8 Victoria St.  
Dress Rent to  
248 P<sup>ts</sup> Hoopes  
The sum of  
pound.

*[Handwritten scribbles and signatures]*  
S. 1-0-0  
P. 22  
No. 17/18

3rd. London  
General  
Hospital  
Ward 5-

Approved  
E. H. S. S. S. S.  
Capt. R. A. S.

8th LONDON GENERAL HOSPITAL  
No. 25 JUL 1918  
MANNSWORTH S.W. 18.

FILE BRANCH INITIALS  
M. B. S. / 18

# STATEMENT BY A SOLDIER CONCERNING HIS OWN CASE.

NOTE.—This Form is to be filled in by every soldier prior to the compilation of Army Form B 179A, whether a patient in hospital or not, and attached thereto. The questions are to be answered in the soldier's own words, and the Form is to be signed by him and the signature witnessed. In the event of the soldier being unable to write he should affix his mark, such act being witnessed.

Regimental No. 248 Rank Pte.

Name Hooper Albert Unit and Corps } Royal Hfld. Rgt.  
(Surname) (Christian Names)

Note.—Before answering the questions below, the soldier is to note that  
 (a) The statements made by him will be checked by official records.  
 (b) In answering Question 2 any special matters which in his opinion caused any unfitness from which he may be suffering or which aggravated it should be clearly stated.

If the soldier is unable to read, the above notes are to be read to him by an officer.

<p>1. (a) In what countries have you served during this war, and for what periods?</p> <p>(b) In what capacity?</p>	<p><i>France &amp; Belgium</i></p> <p><i>4 years</i></p> <p><i>Soldier</i></p>
---	--

<p>2. If you are suffering from any disease, wound, or injury, state what it is, the date upon which it started, and what, in your opinion, was the cause of it.</p> <p><small>(If more space is required a sheet of foolscap should be used, and firmly attached to this form.)</small></p>	<p><i>Wounded</i></p> <p><i>left leg fract. Fibula &amp; tibia</i></p> <p><i>April 12<sup>th</sup> 1918</i></p> <p><i>G.S.V.</i></p>
--	--

3. Give the names of any hospitals where you have been treated for the above disease, wound or injury during the present war.

47<sup>th</sup> Gen. Hosp. Le Troport  
3<sup>rd</sup> London General

4. Did you suffer from the disease or injury mentioned in above answer to Question 2, or anything like it, before joining the Army? If so, give details and dates.

No

5. Give the names (and addresses if you know them) of any hospitals you were in or doctors who attended you before you joined the Army.

Nil

6. Give the name of your National Health Approved Society, and (if possible) your Membership Number.

Nil

7. What is the name and address of your last employer before joining the Army?

D. J. S. Coy.  
N. F. L. D.

8. (a) What was your occupation before joining the Army?

D. J. S. Coy.

(b) What was your trade before joining the Army?

N. F. L. D. (Labour)

(To be checked by A.F.B.64 or A.F.B.103.)

The above statement has been read over to me; I agree to it, and have nothing further to add.

Station

3<sup>rd</sup> London General Hosp.

Signed (Soldier)

Sgt. Albert Hooper

Date

8. 11. 18

Signed

Sgt. Cpl. W. Lissier

Witness

# Descriptive Return of a Soldier medically boarded before Discharge or Transfer to the Reserve.

**INSTRUCTIONS.**—Parts A. and D. of this Army Form are to be completed for every soldier prior to his being medically boarded with a view to discharge or transfer to Class W., W.(T), P., or P.(T), of the Reserve, as follows:—

(a) By the O.C. unit prior to the soldier being sent to the Discharge Centre.

(b) By the Officer i/c Central Hospital, when the soldier is a patient in hospital, prior to his being brought before an Invaliding Board.

It is most important that all particulars should be correctly filled in, and that the soldier should be given a full opportunity of examining the Army Form before he signs the Certificate below, as, if awarded a pension, his subsequent identification may depend on the correctness of these entries. The "rank," "station," and "date" following the soldier's signature are to be in his own handwriting.

This Army Form is to be forwarded with the proceedings of the Medical Board to the Officer i/c Records, and Parts B. and C. completed by that officer before forwarding the Form with the remainder of the soldier's documents, to the Controller, Ministry of Pensions, Burton Court, King's Road, London, S.W.3.

**PART A.** Soldier's Name Hooper Albert  
(Surname) (Christian names in full)

Unit from which discharged Royal Hfld.

Regimental Number 248 Rank on discharge Pte. Age on discharge 28

Married, widower with children, or single —

Occupation before enlistment Labourer

Special qualifications (if any) for employment in civil life } Labourer if fit to undertake work

Nature and locality of employment desired Newfoundland

Full postal address to which proceeding on discharge } St Georges Newfoundland.

Name of Approved Society (if any) —

**PART B.** Period of service, and in what Corps

Regiment	Years	Days	All services abroad, with Stations	Years	Days
			India		
			South Africa		

Disallowed ... ..

Service towards pension ... ..

**PART C.** Number of G.C. badges — medals —

Wounds and actions in which received —

**PART D.** Where born (parish, town and county), and date 26. 9. 1890 Newfoundland

Colour of hair on discharge Brown Colour of eyes Grey Complexion Fresh

Christian name of father John

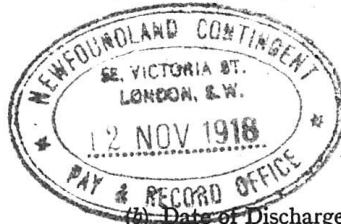
Christian name of mother Julie

NOTE.—Army Forms D. 400 and W. 3463A and B are issued in sets in pad form for use with carbon paper in cases where the soldier is a patient in hospital. Army Forms D. 400 and W. 3463A are similarly issued in sets for use in cases where the soldier is not a patient in hospital. The Statements on Parts A. and D. of Army Form D. 400 and on Part A. of Army Form W. 3463A and B are to be completed by the Officer i/c hospital before a soldier is brought before an Invaliding Board. The Statements on Parts A. and D. of Army Form D. 400 and on Part A. of Army Form W. 3463A are to be completed by the O.C. unit before the despatch of a soldier to the Discharge Centre.

*Original*  
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... *R. N. F. L. D.*
2. Regtl. No. *248* 3. Rank... *Sgt.*
4. Name *Hooper* *Albert*  
(Surname) (Christian Names)
5. Age last birthday... *28*
6. Posted for duty on... *29.8.1914* at... *St. John's*  
in category (or grade)... *A.*
7. Former Trade or Occupation } *Labour*
- 7a. If the soldier claims previous service in Army, he should state—  
(a) Former Regts. or Corps; with Regtl. Nos. *N/A.*
8. If the disability is an injury was it caused  
(a) in action *Yes* (b) on field service *Yes*  
(c) on duty  (d) off duty?
9. If a Court of Inquiry was held on an injury state:—  
(a) When *N/A.*  
(b) Where  
(c) Opinion of Court  
(d) Particulars of Pension or Gratuity (if any)



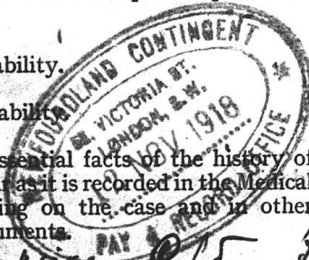
NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

### Statement of Case.

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

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

11. Date of origin of disability.
12. Place of origin of disability.
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.
- g. S. W. Leg left Fract. tibia & Fibula  
France Amputation  
Bullet wound in left  
Fract tibia & Fibula  
There is drop foot.  
Host specific Gonorrhoea*



14. State whether the disabilities are
- |   |            |                           |  |
|---|------------|---------------------------|--|
| (i) Service during the present war .. .. .                        | <i>Yes</i> | (b) aggravated by .. .. . |  |
| (ii) Previous active service .. .. .                              | <i>No</i>  |                           |  |
| (iii) Climate in pre-war service .. .. .                          | <i>No</i>  |                           |  |
| (iv) Ordinary military service before the war .. .. .             | <i>No</i>  |                           |  |
| (v) Serious negligence or misconduct on the man's part. } .. .. . | <i>No</i>  |                           |  |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

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

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

*The general condition is good - wounds are healed but there persists a limp.*

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?

*Two operations in hand, wounds, etc.*

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.

*Permanently unfit*

Station *Wandsworth*  
Date *17/11/18*

*V. S. Koch C. I.*  
Medical Officer in charge of case.

\* Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

**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.

*The general health is poor but there is marked limp foot.*

22. State whether the disabilities are:—
- |   |                             |                           |
|---|-----------------------------|---------------------------|
|   | (a) Attributable to .. .. . | (b) Aggravated by .. .. . |
| (i) Service during the present war .. .. .                              | <i>Yes</i>                  |                           |
| (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 24.



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).

*100% as a soldier  
30% as a civilian*

(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?

*side 16*

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

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

*Yes.*

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:—

*Wandsworth*  
*W. E. Somerton*  
President of Members.

Station *Wandsworth*  
Date *9.11.18*

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

Station **280 LONDON GENERAL HOSPITAL  
WANDSWORTH**  
Date *11/1/18*

*W. E. Somerton*  
Officer in charge, Central Hospital.  
Only applicable in cases of Patients in Hospitals.

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.

Duplicate

Sm

B.9

Army Form I. 1238.

SYPHILIS CASE-SHEET.

Regtl. No. 248. Rank and Name Pr. A. Hooper. Corps Rt. Newfoundland

Placed on Syphilis Register at Warlingham on 5/9/18. No. in Register

Disease contracted at Glasgow Primary sore appeared on (date) May 1917

CONDITION WHEN PLACED ON REGISTER.

Primary sore—character and site No scar seen

Lymphatic glands General adenitis

Skin (nature and distribution of rash) Nil. Acneiform rather on face

Mucous membranes Patch of ~~leucoplakia~~ leucoplakia behind ears

Other symptoms Lower incisor. Scars of ulceration on tonsils

Eyes normal. H. of pressure

Sore May 1917. on scrotum

Treated Glasgow 7/1917 & 9/1917, again  
Nov 17 with 3/1918 & 3/1919

Wounded April 1918. in 3rd London Gren. H.P. in May

In July had sore throat. Wound found positive  
sent G.R.R.

Wound of old fracture left leg not quite  
healed. Foot drop left

Examination of exudate from sore—Spirochaeta Pallida (present or absent) not found

Examination of blood serum—Method employed (original or modification)

Wassermann reaction (Result (positive or negative) ++ 27/8/18. R.R.

Station Warlingham Military Date 5-9-18. Signature of M.O. J. O. Kedman  
Lieut. R.A.M.C.

Struck off Syphilis Register at Warlingham Military on 21-10-18.

Cause of being struck off Register (a) Recovered  
(b) Transferred to Army Reserve  
(c) Discharged from Army

Station Warlingham Military Date 21-10-18. Signature of M.O. J. O. Kedman  
Lieut. R.A.M.C.



No. 289/21

N.F.P./80.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,

3rd. General Hospital. London

19th February

No. 191  
21 FEB 1919

22<sup>nd</sup> February 1919

248. Pte A. Hooper.

With reference to the following telegram from the Minister of Militia, / / ( 15 )

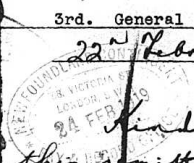
"Pay to-248. Hooper.

£59.16.4.

Kindly advise whether this remittance should be

- (1) forwarded to you for payment to this Soldier;
- (2) retained to credit of his account; or
- (3) otherwise dealt with.

Chief Paymaster & O. i/c Records



Kindly place this remittance to the credit of Pte Hooper's a/c

H. Sagan  
 for O.C.

3rd GENERAL HOSPITAL,  
 WANDSWORTH, S. W.

Admitted 21 10 18

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

Soldier's } 218 Rank Pte  
 Regtl. No. }  
 Name Hooper  
 (Surname first)  
 Corps or Regiment } R Med Winchester  
 (also Unit if known) }  
 To Officer i/c of Records 58 Victoria St.  
 Regimental Paymaster 58 Victoria St

The above-named man, who appeared before a Medical Board, and whose discharge as "no longer physically fit for war service" was approved by the President of the Board on the 11. 11. 18., has been sent to <sup>the address below</sup> his home on warrant to await instructions as to his final discharge; he has been given £1 (one pound) advance and a suit of plain clothes.

He proceeded on (date) 12. 11. 18  
 to (full address) 58 Victoria St

Date 12/11/18  
 Place Wandsworth  
 Registrar, R.A.M.C. Hospital.  
 3rd London General Hospital,  
 WANDSWORTH S. W.

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

To Officer i/o Records  
R. Newfoundland Regt  
58 Victoria St  
S W

From O.C.  
3rd London General Hospital  
Wandsworth S W 18

Re 248 Pte Hooper A N

The enclosed letter is forwarded to you please, as it is thought that you would be in a better position to say if the above-named is a "fit and proper person".

He is now in this hospital suffering from Influenza; his previous medical history is in your possession.

Wandsworth  
23-1-19.

7

H. Jagan  
Major R.A.M.C.F.

Registrar, R.A.M.C.F.  
3rd London General Hospital,  
WANDSWORTH, S. W.

NEWFOUNDLAND CONTINGENT.  
PAY & RECORD OFFICE.  
No. 801  
24 JAN 1919  
el. nos. 00

196 Duke St  
Dennistown

Glasgow

July 20<sup>th</sup> 19

Dear Sir

My Daughter has become engaged  
to be married to Mr J. R. Hooper No(248)

Regal N. S. L. D Regt

now in Ward(9) As I am naturally anxious  
about her future welfare & my only daughter I  
would esteem it a great favour if you would  
please let me know if he is a fit & proper person  
& is not troubled by any bodily ailment other  
than his wounded foot. An early reply will oblige

Yours in waiting

M<sup>rs</sup> Annie C. Bell

Enclose stamped addressed envelope for reply  
A.C.B.



1433/2/R.&.O.

Forms  
C. 242  
63

MEMORANDUM.

From C.P. & O. 1/c Records,  
Newfoundland Contingent.

From

To Major J. St.P. Knight,  
D.D.D.M.S.,  
Newfoundland Contingent,  
2nd Bn. R. Nfld. Regt.,  
Hazeley Down Camp, Winchester.

To

ANSWER.

Pay & Record Office.

25th January, 1919.

191

248 PTE. A. B. HOOPER.

Will you be good enough to  
to reply to attached letter  
from Mrs. Annie G. Bell, 191,  
Duke St., Denniston, Glasgow,  
which has been forwarded to this  
Office by O.C. 3rd L.G.H.  
23/1/19 (801)?

I enclose Medical Histories  
A.F. B.178 (2) and A.F.I.1238 (2)  
relating to Hooper. Kindly  
return them to this Office  
when available of, together with

correspondence.

*J. B. Hudson*  
Major,  
Chief Paymaster & O.1/c Records.

HA/NV



MEMORANDUM.

From *D Stone*

From

To *OC Records*

To

ANSWER.

*Jan 27* 1919.

191

Ref. 248 Pte Hooper.

Mr Annie C Bell should  
be informed that pte  
Hooper is suffering from an  
infectious disease which should  
preclude his marriage  
for at least two years.  
vide A. F. B. 178.

*WPK*  
*myr.*

1659/1/R.&C.

28th January, 9

Mrs. Annie C. Bell,  
191, Duke Street,  
Dennistoun, Glasgow.

Madam: 248 Pte. A. N. Hooper.

With reference to your letter passed by the Officer Commanding, 3rd London General Hospital, 23/1/19 (801): on reference to the Medical authority, I am informed that 248 Pte. A.N. Hooper is suffering from an infectious disease which should preclude his marriage for at least two years.

I am, Madam,  
Your obedient Servant,

Major,  
Chief Paymaster & O. i/c Records.

HT/JC

1659/1/R.&C.

28th January, 9

Mrs. Annie C. Bell,  
191, Duke Street,  
Dennistoun, Glasgow.

Madam: 248 Pte. A. N. Hooper.

With reference to your letter passed by the Officer Commanding, 3rd London General Hospital, 23/1/19 (801): on reference to the Medical authority, I am informed that 248 Pte. A.N. Hooper is suffering from an infectious disease which should preclude his marriage for at least two years.

I am, Madam,  
Your obedient Servant,

CONFIDENTIAL

Major,  
Chief Paymaster & O. 1/c Records.

HT/JC

No. 13290/11

NEWFOUNDLAND CONTINGENT

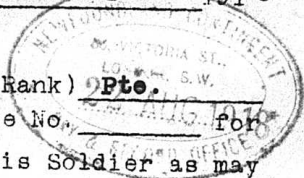
N.F.P./48.

Pay & Record Office,  
58, Victoria Street,  
London, S.W. 1,  
To: Officer in Charge,  
Military Hospital, 20th, August 1918  
Rochester Row, S. W.

With reference to request of (No.) 248 (Rank) Pte.  
(Name) A. Hooper Cheque No. \_\_\_\_\_ for  
£ 2. 0. 0 is enclosed for payment to this Soldier as may  
be deemed fit.

Kindly complete Receipt Form on back of cheque before  
presenting at a Bank.

*A Hooper* for *J. H. Marshall* Cashier  
Chief Paymaster & Officer i/c Records.



POST OFFICE



TELEGRAPHS.

Office Stamp.

Handed in at

Office of Origin and Service Instructions

Words

Charges to pay

D 195 3439 GLASGOW C RL 21 =



THIS FORM MUST ACCOMPANY ANY ENQUIRY RESPECTING THIS TELEGRAM.

Received here at

TO

.M.

5/1

NEWFOUNDLAND RECORD OFFICE 58 VICTORIA ST LND

= PLEASE WIRE EXTENSION OF LEAVE =

248

A N HOOPER Y M C A SAUCHIEHALL ST

Handwritten scribbles and marks at the bottom right of the page.

**“ A ” Form  
MESSAGES AND SIGNALS.**

Army Form C. 2121  
(In pads of 100.)

No. of Message.....

Prefix.....	Code.....m.	Words	Charge.	<i>This message is on a/c of:</i>	Recd. at.....m.	
Office of Origin and Service Instructions		Sent			.....Service.	Date.....
.....		At .....m.				From .....
.....		To .....				By.....
.....		By .....				(Signature of "Franking Officer")

<b>248</b>	<b>Pte.</b>	<b>Hooper</b>	<b>Royal</b>
TO Newfoundland	Regt.	<del>I.M.C.A.</del>	<del>Sauchiehall</del>
Street	Glasgow.		
Sender's Number. <b>395</b>	Day of Month. <b>21/11/18</b>	In reply to Number.	<b>AAA</b>

<b>Furlough</b>	<b>extended</b>	<b>to</b>	<b>10 a.m.</b>
<b>Tuesday</b>	<b>26th</b>	<b>instant.</b>	
		<b>Synoptical.</b>	

From	Place	Time
The above may be forwarded as now corrected. (Z)		

Censor.	Signature of Addressor or person authorised to telegraph in his name

**" A " Form**  
**MESSAGES AND SIGNALS.**

Army Form C. 2121  
(In pads of 100.)

No. of Message.....

Prefix.....Code.....m.	Words	Charge.	<i>This message is on a/c of :</i>	Recd. at.....m.
Office of Origin and Service Instructions	Sent			Date.....
.....	At.....m.	.....		From.....
.....	To.....	.....		By.....
.....	By.....	(Signature of "Franking Officer")		.....

TO	248	Pte.	Hooper	Royal
	Newfoundland	Regt.	Y.M.C.A.	Sauchiehall
	Street	Glasgow.		

Sender's Number.	Day of Month.	In reply to Number.	AAA
395	21/11/18		

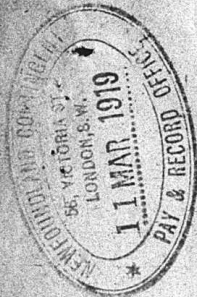
Furlough	extended	to	10 a.m.
Tuesday	26th	instant.	
		Synoptical.	

From		
Place		
Time		
<i>The above may be forwarded as now corrected.</i>		(Z)
Censor.	Signature of Addressor or person authorised to telegraph in his name	

\* This line should be erased if not required.

10/3/19.

To be Discharged from Hospital tomorrow.



Unit.	Squadron, battery, or company.	Regtl. No.	Rank and Name.	
R. Infd.		248	Plc.	Hooper. A. H.

To Officer 16 Revsels. 58 Victoria St. S.W

The abovesaid was boarded & found unfit 13.11.18,  
was admitted to Hospital while on leave. 26.11.18  
Sent to you. In disposal please. 10/3/19

Horace Sagar Major

Registrar, R.A.M.C.  
3rd London General Hospital  
WANDSWORTH, S. W.



34 London Gen Hosp.

16/4/19

To pay & Record  
Office 5 & Victoria St.  
please remit to  
No. 248 St. George's  
the sum of 3 pounds  
this may be done  
to my credit

on your

Order  
Capt

R A M

R A M

O.K. of 1-0-0 M.R.

Receipt No. 2036



No. 248 Rank Pte. Name Hooper

Pay	F.A.	Wkg	Total	N.F.P/33
100	10		110	
Less Allotment				
Net Rate			110	<i>W/te</i>

DEBITS	Date	£ s d			CREDITS	Period From To	Days	Rate	£ s d			
		£	s	d					£	s	d	
Balance				Balance	20/2/18			6	11	6	✓	
Acquittance Rolls				Pay @ Net Rate	20/2/18	179	72	110	13	20	2 14 3	✓
Hospital Advances				P.A.	1/19	12/19	12	2-1			1 5 0	✓
A.B. 64.												
P.&.R.O. Payments												
Cash Receipt No 192		1/19	10	10 0 0	<i>Original</i>							
					<del>10-10-9</del>							

*10-10-9*

No. 248 Rank Pte Name Woofer A

Pay	F.A.	Wks	Total	N.R.F./56
100	10		110	
Less Allotment				
Net Rate			110	

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	s	d	p	s	d		
						From	To									
Balance					Balance	20/1/18							6	11	6	
Acquittance Rolls					Pay @ Net Rate	21/1/18	10/1/18	80	110	88	0	18		1	8	
Hospital Advances					R allow	10/2/18	19/4/18	2/1						1	0	10
A.B. 64.					R allow											
P. & R.O. Payments		10	10	00	R allow									1	5	0
Leave		3	0	00	for <del>leave</del>											
				11												
Cash R 1592	10/3/19	12	10	0												

MEMORANDUM OF ACCOUNTS

14-1-0

10/3/19

ADMITTED BY THE COMMANDANT

No. 20

Date 12-3- 1919

(1) To the Officer i/c Records,

58 Victoria Street  
London W. (Station).

(2) The Officer Commanding,

/  
/ (Station).

(3) The Paymaster,

/  
/ (Station).

Regimental No. 248

Rank and Name Pte A Hooper

Regiment or Corps Royal Newfoundland

has been granted a furlough from 10-3-19 to 19-3-19

His address while on leave will be:—

Y.M.C.A.  
Sanchehall Street,

Glasgow

Reports 58 Victoria Street expenses of furlough  
I consider he is fit for  Duty  Light duty  Rehabilitation  for instruction

Officer in charge 3rd Lond Hosp

Res. Hosp Wantswood (Station).

\* Strike out that which is inapplicable.

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

Admitted 10 5 19

Only for use with Men returned from an Expeditionary Force  
or from Garrisons Abroad.

Army Form W. 3016.  
(In Books of 200.)

No. .... Date 12/5/19 1911  
\* (1) To the Officer i/c Records 58 Victoria St  
\* (2) The Officer Commanding Rd Wmchestr  
\* (3) The Paymaster 58 Victoria St Station

\* Strike out that which is inapplicable.

Regimental No. 248

Rank and Name Pte Hooper A.M.

Regiment or Corps R.V. Coy.

has been granted sent on 10/5/19  
a furlough from 58 Victoria St to

His address while on leave will be 58 Victoria St  
on disposal pending a patch

Nearest Railway Station Victoria

I. DUTY.

I consider he is fit for

\* II. COMMAND DEPOT.

\* III. EMPLOYMENT.

\* Strike out that which is inapplicable.

Officer in charge. Registrar, R.A.M.C.T. Hospital.

3rd London General Hospital Station.

Four copies to be made, and one copy sent to each Officer mentioned above, and one copy filed in the office.  
In the case of men of the Royal Air Force, Royal Engineers and Army Ordnance Corps, two copies of Army Form W.3016 will be sent to the Officer in charge Records concerned and one to the Paymaster, instead of one copy to the Officer i/c Records, the Paymaster and O.C. and in the Schedule.

To pay Master  
500 Victoria St

OK for P. 1/0  
Rec 2269

Please Remit to 40248  
the Hooper the sum  
of 1 pound



Approved  
G. H. G.

# CANADIAN PACIFIC—ALLAN LINES.

THE CANADIAN PACIFIC OCEAN SERVICES LTD.,  
Managers and Agents.

To be surrendered when embarking on

Steamship *Corsican* Date *22.5.1919*

No. *248* Rank *Pte*

Name *Hooper A.M.*

Res. Unit *—* Orig. Unit *R. Newfld*

Sign here *A. Hooper.*

This Card must be given up when going on board ship.

10-5-19.

To be Discharged from Hospital tomorrow.

Unit.	Squadron, battery, or company.	Regtl. No.	Rank and Name.	
R. Med.		248.	<del>Pte</del>	<del>Hooper. A. A.</del>

To Officer H. Reeds  
58. Victoria St. For discharge  
Has been retained here till this date  
at his own request.

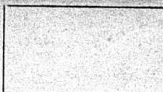
J. B. Andrew Testman  
Registrar, R.A.M.  
London General Ho.  
WANDSWORTH, S.W.

12 MAY 1919



This space to be left blank for the Chelsea Number.

Army Form B. 268.



# Proceedings on Discharge.

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

No. 248 Army Rank Pte

Name Hooker Albert  
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps Royal Newfoundland Rgt.

Battalion, Battery, Company, Depot, &c.  
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge \_\_\_\_\_

Place of discharge \_\_\_\_\_

1. *Description at the time of discharge.*

Age _____ years _____ months	Descriptive marks.
Height _____ feet _____ inches	
Chest measurement { girth when fully expanded _____ ins.	
{ range of expansion _____ ins.	
Complexion _____	
Eyes _____	
Hair _____	
Trade _____	
Intended place of residence (To be given as fully as practicable) { _____	
{ _____	

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of \_\_\_\_\_

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character :— \_\_\_\_\_

4. Character awarded in accordance with King's Regulations :— \_\_\_\_\_

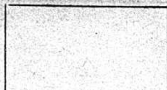
To be filled in on the soldier quitting the Colours.

Certified that the above is an accurate copy of the character given by me on Army Form B. 268\* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2688 has been issued to\*

This space to be left blank for the Chelsea Number.



# Proceedings on Discharge.

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

No. 248 Army Rank Pte.

Name Hooper - Albert  
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps Royal Newfoundland Regt.

Battalion, Battery, Company, Depot, &c.  
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge \_\_\_\_\_

Place of discharge \_\_\_\_\_

1. Description at the time of discharge.

Age _____ years _____ months	Descriptive marks.
Height _____ feet _____ inches	
Chest measure- ment { girth when fully expanded _____ ins. range of expansion _____ ins.	
Complexion _____	
Eyes _____	
Hair _____	
Trade _____	
Intended place of residence { _____ (To be given as fully as practicable)	

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of \_\_\_\_\_

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character :— \_\_\_\_\_

4. Character awarded in accordance with King's Regulations :— \_\_\_\_\_

To be filled in on the soldier quitting the Colours.

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067\* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to\*

Hooper-a.

248

Ray Dept

Admitted 5/7/16.

2506



Army Form W. 9016.

No. \_\_\_\_\_ Date August, 9th, 1916

(1) To the Officer i/c Records,

58, Victoria Street,

S. W. (Station).

(2) The Officer Commanding,

Newfoundland Contingent,

Ayr. (Station).

(3) The Paymaster,

58, Victoria Street,

S. W. (Station).

Regimental No. 248

Rank and Name Pte Hooper, A.

Regiment or Corps 1st Newfoundland Contingent

has been granted a furlough from 9th August to 18th Aug., 1916.

His address while on leave will be:—

58, Victoria Street, S.W.

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

I consider he is fit for <sup>Light Duty</sup> ~~Duty~~ and likely to be fit for service ~~overseas~~ within three months.

(Sgd) Horace Fagan, Capt, R.A.M.C.T.,  
Registrar, R.A.M.C.T.,  
Officer in charge 3rd London Genl Hospital,

Wandsworth, S. W.  
(Station).

\* Strike out that which is inapplicable.

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

DUPLICATE ORIGINAL

N.F./12.

Allotments.



NEWFOUNDLAND CONTINGENT

CANCELLATION OF ALLOTMENT

I, (No.) 248 (Rank) Pte. (Name) Hoopes A

hereby apply for cancellation of Allotment made by me on

N.F. 560 dated 1<sup>st</sup> January 1917 in favour

of Myself for Manager Bank of Montreal for \$ - cts 600 +

per diem. Such cancellation to take place on the 30<sup>th</sup> day of April 1917

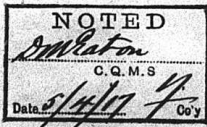
I agree to accept all risks and consequences of this application failing to reach headquarters, St. John's, by mail in time to become operative at above nominated cancelling date; and that in the event of such non-delivery by mail, and thereby the Allotment continuing to be paid to the Allottee, I also agree to such further stoppage as may be thereby necessary being made against me in the Pay Books, or otherwise to refund such overdrawn amount or amounts.

Dated at Race course Cys.  
5<sup>th</sup> April 1917

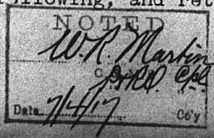
A. Hoopes  
Allotter.

Approved and Witnessed,

[Signature]  
O.C. "J" Company,



To be made out in TRIPLICATE and sent to the Paymaster & Officer in Charge of Records, who will forward Original to Headquarters by first mail, Duplicate by the following, and retain Triplicate.



July 12, 1919

#248 Pte. Albert Norman Hooper,

Fort an Fort,

St. George's.

Dear Sir:-

Please find enclosed Discharge Certificate #2981.

Yours truly

Captain,  
Paymaster & U.I/c Records

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 248 Rank Pte. Name Hooper A.  
 Intended place of residence St. John's  
 2. Occupation Miner  
 Classification of soldier B Medical Category F1

3. The above named man is discharged in consequence of  
**DEMobilIZATION**

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulation **Eligible for War Service Gratuity**  
 Place, ST. JOHN'S  
 Date JUN 27 1919  
 Commanding Discharge Depot  
 The Royal Newfoundland Regiment

### CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.  
 Place, ST. JOHN'S  
 Date JUN 27 1919  
 Signature of soldier  
 Signature of witness

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

6. I hereby certify that I am <sup>not</sup> in a position to resume civilian occupation immediately on discharge.  
 Place, ST. JOHN'S  
 Date 27-6-19  
 Signature of soldier  
 Signature of witness

### STATEMENT OF SERVICE

7. Enlisted for service 2-9-14 No. of days on Military  
 Discharged from service 27-6-19 Plus 14 days Service 1774

### APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge of Records, The Royal Newfoundland Regiment, twenty-eight days from date.  
 Place, ST. JOHN'S  
 Date JUN 28 1919  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment

### CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed  
 Place, ST. JOHN'S  
 Date July 12/1919  
 Officer in Charge of Records  
 The Royal Newfoundland Regiment

a 28079/2981

DEPARTMENT OF VETERANS AFFAIRS

To **Copy for H.O. file.**

OTTAWA ~~ON~~, ONTARIO.  
Date ~~SEPTEMBER 1, 1966~~

Attention of

NAME **HOOPER Albert.**

SERVICE **248 ROYAL** C.P.C. No. **260214**  
NUMBER **NFLD REGT. W.W.I** W.V.A. No.

NAVY  
ARMY **X**  
R.C.A.F.

The DEPARTMENT has received information from

**MRS. ALBERT HOOPER, WOBURN, MASS., U.S.A., AUGUST 25, 1966.**.....  
(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death **AUGUST 15, 1966**.....

Cause of Death.....

Place of Death **CHOATE MEMORIAL HOSPITAL, WOBURN, MASS. U.S.A.**

Name and Address of next of kin (if known).....

Copies to: W.S.R.  
V. I.  
~~DEPT~~  
~~DEPT~~  
H.O.  
F.R.D.

} Destroy form if advice of death already received.

*E.C. Richards*  
for  
Chief, Central Registry



# The Royal Newfoundland Regiment

## DEMobilIZATION OF

Reg. No. 248 Rank Plt Name Hooper A.  
 Date of Enlistment 29.14 Address St. John's District St. John's  
 Occupation Miner Classification for Discharge B Medical Category E  
 Recommendation S.M.B. Permanently unfit Disability Rating 30% 3 months Post  
 Passed to Demobilization Officer with following documents:—

N.F. 136	B 268	B 121	2	N.F. Med	D.F. 1	1
B 178	W 3494	B 122	1	Board Ist.	" 2	
B 178a	D 400A	B 194	1	do 2nd.	" 3	3
B 179	D 400B	Form L		do 3rd.	" 4	
B 179a	D 400C	Form K		do 4th.	" 5	
B 179b	B 103	ME 2		" 6	" 7	
B 179c	B 120	M 93		<u>2505</u>	<u>238</u>	

*[Signature]*  
 O. C. Discharge Depot.

Date 27.6.19

### PARTICULARS FOR DEMobilIZATION

#### 1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

*A. H. Hooper*

Particulars passed to Vocational Officer for information and action.

Date 27-6-19

*J. A. [Signature]*

#### 2. Clothing

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable £ 00/00

(b) Clothing Supplied £ 00/00

*J. A. [Signature]*

Date 27-6-19

O i/c. Re-clothing

**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrants No. \_\_\_\_\_ to his home at \_\_\_\_\_ and Release Certificate No. 3072 issued.

Date 27-6-19

*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 27-6-19

*J.A. Snowball*  
Depot Paymaster.

Discharged approved for \_\_\_\_\_

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

28-6-19

N.F. P/36	2	B 268	2	B 121	2	N.F. Med	1	D.F. 1	1
B 178	2	W 3494	2	B 122	1	Board 1st	1	" 2	2
B 178a	2	D 400A	2	B 1915	1	do 2nd	1	" 3	2
B 179		D 400B		Form L		do 3rd		" 4	
B 179a		D 400C	2	Form K		do 4th	1	" 5	
B 179b	1	B 103	2	ME 2				" 1238	2
B179c		B 120		M 93					

Date 27-6-19

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

**APPROVED.**

Documents as above forwarded to:—

Officer in Records.  
Board of Pension Commissioners.

with following additional documents.

**Eligible for War Service Gratuity**

Date JUN 28 1919

*R.H. [Signature]*  
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 take course in Electrical Engineering

*A. Cooper*

Signature of Man.

Reg. No. 248

*[Signature]*

Signature of the Vocational Officer or his Representative.

Place

St Johns

Date

June 27th 1919

# The Royal Newfoundland Regiment

Class for Demobilization:—

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date .....

Regimental No. *248* .....

Name *W. J. ...* .....

Rank .....

Address *St. John's* .....

Present Medical Category *E* .....

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

(b) Standard Medical Board .....

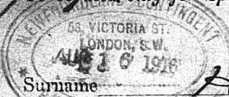
Members of Board {

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

*W. ...*  
Senior Medical Officer

*S. W. ...*  
~~M. O. Depot~~

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



# MEDICAL HISTORY

OF

Surname Hooper Christian Name Albert Norman

Table I.—GENERAL TABLE.

Birthplace:—Parish Port au Port St. George's County Newfoundland

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	...	191	...	191
Declared age	24	years	...	days
Trade or occupation	Fisherman		...	days
Height	5	feet	...	feet
Weight	167	lbs.	...	lbs.
Chest Measurement	Girth when fully expanded	...	...	...
	Range of expansion	...	...	...
Physical development	...	...	...	...
Vaccination marks	Right	Left	Right	Left
	Arm ...	...	...	...
When vaccinated	...	...	...	...
Vision	R.E. - V =	...	R.E. - V =	...
	L.E. - V =	...	L.E. - V =	...
(a) Marks indicating congenital peculiarities or previous disease	...	...	...	...
(b) Slight defects but not sufficient to cause rejection	...	...	...	...
Approved by (Signature)	...		...	
(Rank)	...		...	
Enlisted	at	St Johns N S L A	at	...
	on	1st day of Oct 1914	on	... day of ... 191
Joined on enlistment	Corps	Newfoundland	Corps	...
	Regtl. No.	248	Regtl. No.	...
Transferred to	ROYAL NEWFOUNDLAND REGIMENT.		...	...
Became non-effective by	...	...	...	...
on	... day of	191	on	... day of
(Signature)	...		...	
(Rank)	...		...	



OK NFD 210

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

Name of hospital	Admitted to hospital			Discharged from hospital			Disease	Number of days in hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer.
	Day	Month	Year	Day	Month	Year				
8 <sup>th</sup> LONDON GENERAL HOSPITAL WANDSWORTH.	5	7	16	9	8	16	S. & W. left leg. TB - 1 rivet.	36	From 1. rind. Lubricant wound inner side of leg, junction of lower & middle tibiae. 1st wound, about external malleolus. Wounds healed. Furlough Class B. Also on furlough for scabies.	J. W. C. Wood. Capt. R. A. Hill.
1 <sup>st</sup> SCOTTISH GENERAL HOSPITAL STOBHILL, GLASGOW	14	5	17	11	7	17	Syphilis	59	2-8 pm. Mercurin & 8 pm. Hg.	Dr. Patton Capt. Rose
3 <sup>rd</sup> Scottish General	17	11	17	12	17	17	Syphilis	31	3 injections to 14th & 4 injections 14th. May. travel to depot to return for further treatment 25-12-17. 2-18. 16-18. 23-18.	Dr. Patton Capt. Rose
3 <sup>rd</sup> London General Hospital WANDSWORTH.	8	5	18	26	7	18	Q. sw. Left leg. comp fracture of tibia & fibula.	78	Wounded in France 12/14/18. Wound nearly healed 27/6/18 on 21/7/18. Ulceration of Tarsal bones. Post-operative treatment. Transferred to Rochester Row Mil Hosp.	Dr. Patton Capt. Rose
3 <sup>rd</sup> London General Hospital WANDSWORTH, S.W.	8	5	18				S. & W. L. leg. comp fract. tibia & fibula.		Board held in su. overleaf Disability - S. & W. leg. comp fract. tibia & fibula. marked not daps Cause - S. & W. in active service. Disablement - 30% as a Soldier.	Dr. Patton Capt. Rose

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

Date	Brief details, and signature
9-11-18	<p>Board held                      Permanently unfit                      W. W. Humphreys, Surgeon                      1st London General Hospital                      Wandsworth, S.W.</p>
	<p>It is hereby certified that this soldier                      has been found for the Standing Medical                      Board and has been classified as                      B for discharge on Demobilisation.                      Medical category <i>B</i>                      Date of S.M.B. <i>24.6.19</i>                      Discharge by <i>W. W. Humphreys</i>                      Surgeon, 1st London General Hospital</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

Regimental Number 249

Company E

THE  
1ST NEWFOUNDLAND REGIMENT.

---

I hereby enlist for service at home or abroad in the King's  
Forces under the following conditions :

For the duration of the present war, or until my  
discharge.

Subject to the Army Act, the King's Regulations,  
and to such ordinances as may apply or may  
be made to apply to the British Regular Army.

Subject to the Newfoundland Volunteer Act,  
5 George V., Chapter IV.

Signed A Hooper

Witness Robertson

Dated at \_\_\_\_\_



191\_\_\_\_\_



**DESCRIPTIVE REPORT ON ENLISTMENT.**

(To correspond with Entries on the Medical History Sheet.)  
Applicable to all ranks.

Reg. No. 248

Name Albert Norman Hooper

Apparent age 24 years \_\_\_\_\_ months. Height 5 feet 8 inches.

Chest measurement { Girth when fully expanded \_\_\_\_\_ inches.  
Range of expansion \_\_\_\_\_ inches.

Distinctive marks Color: Fair, Hair: Brown, Eyes: Blue

Other distinguishing marks: Cut on left hand

**INFORMATION SUPPLIED BY RECRUIT.**

Name and Address of next of kin Walter Hooper, Port au Port, Newfoundland

Relationship Brother

**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	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of Pension	Service in Reserve not allowed to reckon towards G. C. Pay	Signature of Officers certifying correctness of entries.
					years   days	years   days	
Service towards limited engagement reckons from <u>2/9/14</u>							
Joined at <u>St. John's</u> on <u>2nd September '14</u>							
Total Service forfeited as above ... ..							
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days							
Pension _____ ( " ) _____ ( " ) _____ ( " )							

# Descriptive Return of a Soldier medically boarded before Discharge or Transfer to the Reserve.

**INSTRUCTIONS.**—Parts A. and D. of this Army Form are to be completed for every soldier prior to his being medically boarded with a view to discharge or transfer to Class W., W.(T), P., or E.(T), of the Reserve, as follows:—

(a) By the O.C. unit prior to the soldier being sent to the Discharge Centre.

(b) By the Officer i/c Central Hospital, when the soldier is a patient in hospital, prior to his being brought before an Invaliding Board.

It is most important that all particulars should be correctly filled in, and that the soldier should be given a full opportunity of examining the Army Form before he signs the Certificate below, as, if awarded a pension, his subsequent identification may depend on the correctness of these entries. The "rank," "station," and "date" following the soldier's signature are to be in his own handwriting.

This Army Form is to be forwarded with the proceedings of the Medical Board to the Officer i/c Records, and Parts E. and C. completed by that officer before forwarding the Form with the remainder of the soldier's documents, to the Controller, Ministry of Pensions, Burton Court, King's Road, London, S.W.5.

**PART A.** Soldier's Name: *McGowan Albert* (Surname) (Christian names in full)

Unit from which discharged: *R. N. F. L. I.*

Regimental Number: *248* Rank on discharge: *Sgt* Age on discharge: *28*

Married, widower with children, or single

Occupation before enlistment: *Labourer*

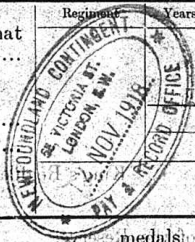
Special qualifications (if any) for employment in civil life: *Labourer if fit to undertake work*

Nature and locality of employment desired: *Newfoundland*

Full postal address to which proceeding on discharge: *St. Georges Newfoundland*

Name of Approved Society (if any)

**PART B.** Period of service, and in what Corps ... ..

Regiment	Years	Days	All service abroad, with Stations	Years	Days
			India		
			South Africa		

Disallowed ... ..

Service towards pension ... ..

Number of G.C. badges ... .. medals

**PART C.** Wounds and actions in which received

**PART D.** Where born (parish, town and county), and date: *26.9.1890 Newfoundland*

Colour of hair on discharge: *Brown* Colour of eyes: *Grey* Complexion: *Fair*

Christian name of father: *John*

Christian name of mother: *Julia*

NOTE.—Army Forms D. 400 and W. 3463A and B are issued in sets in pad form for use with carbon paper in cases where the soldier is a patient in hospital. Army Forms D. 400 and W. 3463A are similarly issued in sets for use in cases where the soldier is not a patient in hospital. The Statements on Parts A. and D. of Army Form D. 400 and on Part A. of Army Form W. 3463A and B are to be completed by the Officer i/c hospital before a soldier is brought before an Invaliding Board. The Statements on Parts A. and D. of Army Form D. 400 and on Part A. of Army Form W. 3463A are to be completed by the O.C. unit before the despatch of a soldier to the Discharge Centre.

Wife's maiden name in full  
Date and place of marriage

Christian names  
of children and  
dates of birth

Date and place of 1st enlistment

29. 8. 1914 St. Johns

Figure on discharge

Medium

Height: 5'10"

Descriptive and other distinguishing marks

L.S.M.L. Foot.

I certify that I am the soldier referred to and that all the particulars contained in Parts A. and D. above are, to the best of my knowledge, correct.

(Signature in full)

Arthur Harper

Rank

Plt.

Station

Wandsworth

Date

19-11-15

I certify that the above named soldier signed the foregoing declaration in my presence.

W. S. Brown ~~Plt.~~ (Rank)

O.C. unit or Officer i/c Hospital.

THE CONTROLLER,

MINISTRY OF PENSIONS,

BURTON COURT,

KING'S ROAD,

LONDON, S.W.3.

The soldier named overleaf was

Discharged under para.

King's Regulations

or

Transferred to Class\*

of the Reserve.

Strike out  
whichever  
inapplicable.

Military character

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

Officer i/c Records.

Station

Date

191

\* Insert P. on P.(D)

# STATEMENT BY A SOLDIER CONCERNING HIS OWN CASE.

NOTE.—This Form is to be filled in by every soldier prior to the compilation of Army Form B 179A, whether a patient in hospital or not, and attached thereto. The questions are to be answered in the soldier's own words, and the Form is to be signed by him and the signature witnessed. In the event of the soldier being unable to write he should affix his mark, such act being witnessed.

Regimental No. 248Rank Plt.Name Albert Hoopes

(Surname)

(Christian Names)

Unit and Corps Bapt. Newfoundland

Note.—Before answering the questions below, the soldier is to note that

(a) The statements made by him will be checked by official records.

(b) In answering Question 2 any special matters which in his opinion caused any unfitness from which he may be suffering or which aggravated it should be clearly stated.

If the soldier is unable to read, the above notes are to be read to him by an officer.

1. (a) In what countries have you served during this war, and for what periods?

*France & Belgium  
7 years*

(b) In what capacity?

*Soldier*

2. If you are suffering from any disease, wound, or injury, state what it is, the date upon which it started, and what, in your opinion, was the cause of it.

(If more space is required a sheet of foolscap should be used, and firmly attached to this form.)

*wounded  
Left Leg. Fract. Fibula  
Eibia  
April. 12<sup>th</sup> 1918.  
G. S. W.*

3. Give the names of any hospitals where you have been treated for the above disease, wound or injury during the present war.

47 General Le Taprot  
3rd London General.

4. Did you suffer from the disease or injury mentioned in above answer to Question 2, or anything like it, before joining the Army? If so, give details and dates.

No

5. Give the names (and addresses if you know them) of any hospitals you were in or doctors who attended you before you joined the Army?

Nil

6. Give the name of your National Health Approved Society, and (if possible) your Membership Number.

Nil

7. What is the name and address of your last employer before joining the Army?

D. J. S. Company  
W. G. L.

8. (a) What was your occupation before joining the Army?

Labour

(b) What was your trade before joining the Army?

(To be checked by A.F.B.64 or A.F.B.103.)

The above statement has been read over to me. I agree to it, and have nothing further to add.

Station 3rd London General Hospital Signed (Soldier) Albert Hooper

Date 8. 11. 18. Signed Cpl W. Leaver



# 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 *Albert Hooper*

Regiment from which discharged *Royal Newfoundland*

Regimental number *2489*

Intended address *St. John's*

Height on discharge *5 Feet 10"*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *wound left foot & leg*

Figure on discharge *Slim*

Christian name of Father *John*

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 *Bay of Islands 1892 Sept 26*

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) *A. H. Hooper*

(Rank) *Plt*

Station *St. John's*

Date *23.6.19*

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*  
 Rank *Pvt* Surname *Hooper* Christian Name *Abey*  
 Religion *Methodist* Age on Enlistment *24* years *1* months  
 Enlisted (a) *St Johns* Terms of Service (a) *Duration* Service reckons from *1st Feb 1918*  
 Date of promotion to present rank ..... Date of appointment to lance rank .....  
 Extended { ..... } Re-engaged { ..... } Qualification (b) .....  
 or Corps Trade and Rate .....  
 Occupation *Miner* *firmarch helper* *Charge of Officer.*



Date	Report From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
			Embarked <i>1</i> MAR 1918 Disembarked <i>3</i> MAR 1918		
		<b>Wounded in Action</b>			
	<i>57 Pa</i>	<i>ad. Newcastle trans</i>	<i>62 Cols</i>	<i>13/4/18</i>	<i>B.43 23/4/18</i>
	<i>27 J. Hor</i>	<i>Adm.</i>		<i>13/4/18</i>	<i>62164</i>
<i>7.5.18.</i>	<i>47 G.H.</i>	<i>Trans to Eng for "Barisake"</i>	<i>62 Cols</i>	<i>16.4.18</i>	<i>M17 22.069</i>
		<i>(few. leg. L.)</i>			
<i>16.5.18.</i>					<i>Discharged</i>
					<i>for</i>
					<i>C. 1/c No. 1 Infantry Sqdn</i>
					<i>G.H.Q. 3rd</i>

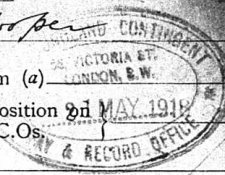
*[Handwritten signature]*

(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, Shoeing-Smith, &c.  
 W. 11214—M1183 10000 1/17 (27227) S.P. & Co. Ltd. Forms B./103/4. E./354.

## Casualty Form—Active Service.

Regiment or Corps Newfoundland RegtRegimental No. 245 Rank Pte Name Albert N. HooperEnlisted (a) 1/10/14 Terms of Service (a) War Service reckons from (a) \_\_\_\_\_Date of promotion } \_\_\_\_\_ Date of appointment } \_\_\_\_\_ Numerical position 21 21  
to present rank } \_\_\_\_\_ to lance rank } \_\_\_\_\_ roll of N.C.O.s

Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) \_\_\_\_\_



Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked St, John's, NFLd.		3.10.14	
		Disembarked Gallipoli		1.12.15	
				14.3.16	Embk'd Port Suez
				22.3.16	Disembk'd MARSEILLE S
		In to England		4.9.16	W 3083
					<u>all clerk</u> CAPTAIN.
					FOR OFFICER INFANTRY RECORDS
					G.H.Q. 3 <sup>RD</sup> ECHELON.

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

(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

(P.T.O.)



# Report of Medical Board.

Station	St. John's, Nfld.	Date	June 24/19.
No. and Rank	248 Pte.	Age	28. Height 5'10".
Name	<b>Keeper Albert</b>	Complexion	Fair
Unit	Royal Newfoundland	Eyes	Blue Hair Light.
Address	<b>St. George's</b>		
Former Trade	<b>Labourer</b>		
Enlisted at	<b>St. John's</b> On <b>Sept. 1/14.</b>	(The Board will please note how the soldier's appearance corresponds with above description).	
Disease or Disability	Original	<b>G.S.W. L. LEG WITH COMPOUND FRACTURE TIBIA &amp; FIBULA ABOVE MALLEOLA.</b>	

Subsequent

Present Condition (Compare with previous Board)

**Large scar across lower part of front of Tibia. Adherent to bone. Some loss of bone & slight deformity. Scar weak blue-looking. Loss of sensation over foot cannot move Ankle or Toes. Pain through the leg. Walks well. Walks on the Heel & outer side of foot.**

**THE ENTIRE DISABILITY:** To what extent is his capacity lessened at present for earning a livelihood in the general labour market?

**30%.**

**PENSIONABLE DISABILITY:** To what extent is his capacity at present for earning a full livelihood in the general labour market lessened by that proportion of his disability due to or incurred during service?

Recommendation of Medical Board

**30% 3 Months. & treatment. (Empire)**  
Members of Board

**H.S. FRASER.**

**(SOD) CLUNY MACPHERSON. MAJOR.**

**J.S. TAIT. /**

**L. PATERSON. MAJOR.**

Approving Medical Officer



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

# MEDICAL HISTORY

Surname Hopew OF Christian Name Albert Norman

Table 1.—GENERAL TABLE.

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Birthplace:—Parish <u>Port au Port Bay St. George</u> County <u>Newfoundland</u>				
Examined		191		191
Declared Age	<u>24</u> years	— days		
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet	<u>8</u> inches		
Weight	<u>167</u> lbs.			
Chest Measurement	Girth when fully expanded	inches		
	Range of expansion	inches		
Physical Development				
Vaccination Marks	Right	Left	Right	Left
When Vaccinated				
Vision	R. E.—V==		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)		(b)	
Approved by (Signature)				
(Rank)				
		Medical Officer.		Medical Officer.
Enlisted	at <u>St. John's, Nfld.</u>	at		
	on <u>1</u> day of <u>October</u> 191 <u>4</u>	on	day of	191
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment	<u>1st. Nfld.</u>	<u>248</u>		
	<b>ROYAL NEWFOUNDLAND REGIMENT.</b>			
Transferred to				
Became non-effective by				
	on	day of	on	day of
		191		191
(Signature)				
(Rank)				

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

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
The Castle, EDINBURGH.	27	7	15	28	7	15	GONORRHOEA.	1	To Military Hospital, Glencorse for treatment.	W. L. Lyle. Captain. R.A.M.C.
Glencorse Workhouse Military Newcastle-on-Tyne	28 30	7 7	15 15	30 13	7 8	15 15	Gonorrhoea. Gonorrhoea	3 114	Catagen: Post. Cas. except. head alt. Urinogen. to h. a. Type for path. bacterias.	on name Capt. R. A. M. C. W. Hodgson Capt. R. A. M. C. T.
MILITARY HOSPITAL ROCHESTER ROW ST	26	7	18	4	9	18	Syphilis H.B.	48	Relapsing Syphilis. Primary attack May 1917 was treated at Glasgow with 7 inj: 606 + 7 Hg. with a further course of 3. 606 + 3 Hg in Nov 1917. Wassermann now strongly positive. Cerebro-spinal fluid is as follows: Vase: + + + Germ. adenitis present with globulin present. only of epitheliococci. All cells 124 reflexes normal. P. has recd 2 1/2 qms 606 + 900 1/4 Hg. & is transferred to Warrington H.P. to continue treatment.	A. Seward Capt. R.A.M.C.
	4	9	18	21	10	18	Syphilis	48	transferred from Rochester Row, & completed full course of injections of 606 & Hg; also took Mest. Potar. ovidini for 14 days & had 4 extra injections of 606 & 2 Hg. Discharged. Pass +. Stage late Secondary. Received 2 1/2 qms 606, & 4 qms Hg. 1st Injcc. given 7-9-18, last 14-10-18. Lara Wassermann out 15/18 = +	J. O. Newman Lieut. R.A.M.C.

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

Date	Brief Details, and Signature
9. 11. 18	<p>Board held.            Permanently unfit.            Spd. E. A. Bayley Capt. Rance.            Pres. J. J. C. 3<sup>d</sup> Gen. Hosp.            Wandsworth Cir.</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

To be used for recruits enlisting direct into the Regular Army only.  
 Army Form B. 178 to be used for Special Reserve recruits  
 and Special Reservists enlisting into the Regular Army.

### MEDICAL HISTORY of

Surname Hooper Christian Name Albert Norman

#### TABLE I.—GENERAL TABLE.

Birthplace ... Parish Port au Port St. Georges County Newfoundland

Examined ... { on \_\_\_\_\_ day of \_\_\_\_\_ 191  
 at \_\_\_\_\_

Declared Age ... 24 years \_\_\_\_\_ days.

Trade or Occupation ... Fisherman

Height ... 5 feet 8 inches.

Weight ... 167 lbs.

Chest Measurement { Girth when fully Expanded. \_\_\_\_\_ inches.  
 Range of Expansion \_\_\_\_\_ inches.

Physical Development ...

Vaccination Marks { Arm ... Right Left  
 Number \_\_\_\_\_

When Vaccinated ...

Vision ... { R.E.—V= \_\_\_\_\_  
 L.E.—V= \_\_\_\_\_

(a) Marks indicating congenital peculiarities or previous disease ... { (a) \_\_\_\_\_

(b) Slight defects but not sufficient to cause rejection ... { (b) \_\_\_\_\_

Approved by (Signature) \_\_\_\_\_

(Rank) \_\_\_\_\_

Medical Officer.

Enlisted ... { at St. Johns H. fld.  
 on 10<sup>th</sup> day of October 1914

Corps.	Regt. No.
<u>10<sup>th</sup> H. fld.</u>	<u>248</u>

Became non-effective by \_\_\_\_\_

on \_\_\_\_\_ day of \_\_\_\_\_ 191

(Signature) \_\_\_\_\_

(Rank) \_\_\_\_\_

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In case of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
The Castle Edinburgh	27	7	15	28	7	15	Gonorrhoea.	1	To Mil. Hosp., Gloucester for treatment.	W. Lockie Lyall. Capt. Rame.
Gloucester	28	7	15	30	7	15	Do.	3	Contagion. Rest. Cond. large. Mist. alk. Miotropin. To Newcastle - on Tyne for further treatment	Ad. A. Division Capt. Rame.
Workhouse Mil. Hosp. N. on Tyne	30	7	15	13	8	15	Do.	14		Ad. R. Hodgson .. .. T.
Mil. Hosp. Rochester Row S.W.	26	7	18	4	9	18	Syphilis 42 B	41	Relapsing Syphilis. Primary attack May 1917 & was treated at Glasgow with 7 inj. 606 & 7 Hg. with a further course of 3 .606 & 3 Hg. in Nov. 1917. Wasserman was strongly positive & Cerebro Spinal fluid is as follows. Wass. 4 1/2 1/5 Genl. admitts present with cells <sup>54</sup> 19.4 prot. enlargement of epilocheles. All reflexes normal. Patient has received 2.4 gms. 606 & 4 grs. iv Hg. & is transferred to Warlingham Hosp. to continue treatment. Wasserman on admission ++	Ad. R. Deward Capt. Rame.
Mil. Hosp. Court Lane Warlingham	4	9	18	21	10	18	Syphilis	48	Transferred from Rochester Row & completed full course of injections of 606 & Hg.; also took Miot. Potas. Sodid. for 14 dgs. & had 4 extra injections of 606 & 2 Hg. Discharged Wass. + Stage - late secondary. Received 2.1 from 606 & 4 grs. Hg. 1 <sup>st</sup> Injec. given 7.9.18 last 14.10.18 Last Wasserman Oct. 15 <sup>th</sup> /18 = +.	Ad. J. Steadman Lt. Rame.

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

Date	Brief details, and signature
9. 11. 18	<p>Board held.            Permanently un fit.            Sgd. E. H. Dayley Capt. R. a. m. c.            pro. O. i. c. 3<sup>rd</sup> Lon. Gen. Hosp.            Wandsworth S. W.</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

To be used for recruits enlisting direct into the Regular Army only.  
 Army Form B. 178\* to be used for Special Reserve recruits  
 and Special Reservists enlisting into the Regular Army.

### MEDICAL HISTORY of

Surname Hooper Christian Name Albert Norman

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Port-au-Port St. Georges County Newfoundland

Examined ... { on \_\_\_\_\_ day of \_\_\_\_\_ 191  
 at \_\_\_\_\_

Declared Age ... 24 years \_\_\_\_\_ days.

Trade or Occupation ... Fisherman

Height ... 5 feet, 8 inches.

Weight ... 167 lbs.

Chest Measurement { Girth when fully Expanded \_\_\_\_\_ inches.  
 Range of Expansion \_\_\_\_\_ inches.

Physical Development ... \_\_\_\_\_

Vaccination Marks { Arm ... Right Left  
 Number \_\_\_\_\_

When Vaccinated ... \_\_\_\_\_

Vision ... { R.E.—V= \_\_\_\_\_  
 L.E.—V= \_\_\_\_\_

(a) Marks indicating congenital peculiarities or previous disease ... { (a) \_\_\_\_\_

(b) Slight defects but not sufficient to cause rejection ... { (b) \_\_\_\_\_

Approved by (Signature) \_\_\_\_\_

(Rank) \_\_\_\_\_ Medical Officer.

Enlisted ... { at St. Johns Hfld.  
 on 10<sup>th</sup> day of October 1914

Corps.	Regtl. No.
<u>10<sup>th</sup> Hfld.</u>	<u>248</u>

Became non-effective by \_\_\_\_\_

on \_\_\_\_\_ day of \_\_\_\_\_ 191

(Signature) \_\_\_\_\_

(Rank) \_\_\_\_\_



Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3 <sup>rd</sup> Lon. Gen. Hosp. Wandsworth	5	7	16	9	8	16	G. S. W. L. leg Tx. 1 cure	36	From France. Entrance wound inner side of leg, junction of lower & middle spiral. Entrance wound also external. Wounds healed. Furlough. Class B. Also suffered from scabies.	Opd. S. J. Wethered Capt. Rawe.
4 <sup>th</sup> West. Gen. Hosp. St. Hill Glasgow	14	5	17	11	7	17	Syphilis	59	2.8 yrs. Kharisium + 8 yrs. Hg.	Opd. Dr. Watson Capt. Rawe.
3 <sup>rd</sup> Scot. Genl.	17	11	17	17	12	17	4 <sup>2</sup> Syphilis	31	3 injections 36. Khar. 4 injections Hg d. May travel to depot. to return for further treatment, 24.12.17-2.1.18. 16.1.18-23.1.18. Had 2 inj. Hg. w/ the Kharisium as out-patient when not transferred to Wickett.	Opd. J. Hutchinson Capt. Rawe.
3 <sup>rd</sup> Lon. Gen. Hosp. Wandsworth	8	5	18	26	7	18	G. S. W. L. leg comp. fracture tibia + fibula	78	Wounded in France 12.4.18. Wound nearly healed 27.6.18. On 21.7.18 Ulceration of troils observed. Positive Wassermann. Transferred to Rochester Row Mil. Hosp.	Opd. Dr. Watson Capt. Rawe.
3 <sup>rd</sup> Lon. Gen. Hosp. Wandsworth Str.	5	5	18				G. S. W. L. leg comp. fracture tibia + fibula		Board held see overleaf. Disability - G. S. W. L. leg comp. fracture tibia + fibula marked foot drop. Cause - G. S. W. in active service. Disablement - 30% as a Civilian	Opd. E. H. Bayler Capt. Rawe. for Op. 3 <sup>rd</sup> Lon. Gen. Hosp. Wandsworth Str.

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

Date	Brief details, and signature
9. 11. 18	<p>Board held.</p> <p>Permanently unfit.</p> <p>Sgt. E. H. Bailey Capt. Rame.</p> <p>pro. O/p 3rd. Lon. Gen. Hoop.</p> <p>Wandsworth S.W.</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

## SYPHILIS CASE-SHEET.

Regtl. No. 248 Rank and Name 9<sup>th</sup> Cooper alt Lt Corps 2/1 2/1  
 Placed on Syphilis Register at 4<sup>th</sup> Eco Gen H<sup>q</sup> on 14-5-17 No. in Register  
 Disease contracted at Apr. Primary sore appeared on (date) 28-4-17

## CONDITION WHEN PLACED ON REGISTER.

Primary sore—character and site Eros on Scrotum  
 Lymphatic glands glands indurated  
 Skin (nature and distribution of rash)  
 Mucous membranes mucous patches on tonsils  
 Other symptoms

Examination of exudate from sore—Spirochaeta Pallida (present or absent)

Examination of blood serum—Method employed (original or modification) original

Wassermann reaction (Result (positive or negative) 21-5-17 positive  
 4<sup>th</sup> Eco Gen H<sup>q</sup>

Station 4<sup>th</sup> Eco Gen H<sup>q</sup> Date 10.8.17 Signature of M.O. [Signature]

Struck off Syphilis Register at on

Cause of being struck off Register { (a) Recovered  
 (b) Transferred to Army Reserve  
 (c) Discharged from Army }

Station Date Signature of M.O.

N.B.—On completion of a course of treatment a red line to be drawn across the page, and the date when the next blood test is due to be entered in red ink below the line, e.g., "Blood test due 15.5.14."

The date and result of the blood test to be entered; and if negative, the date on which the next blood test is due to be also entered.

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Weight clothed, without boots— lb.	Urine Normal (N) Abnormal (Ab)	Wassermann Reaction	Treatment			Signature of M.O.  (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialed)
						Arsenical	Mercurial	Other Methods	
4th Scoon Hospital	14-5-17	Admitted 4th Scoon H.P. Glasgow. a few scars of lues are seen on scrotum & stem of penis clonids inscribed mucous patches on tonsils							
	21-5-17				0 +				M. acton C.M.
	19-8-17		N			3gm	87i		
	22-8-17		N			3gm	=		
	27-8-17		N			3gm	87i		
	3-6-17					=	87i		
	10-6-17		N			4gm	87i		
	17-6-17		N			5gm	87i		
	24-6-17					=	87i		
	1-7-17		N			5gm	87i		
8-7-17		N			5gm	87i			
10-7-17	M. acton C.M.				0 -				
Blood test due 10-10-1917						<del>Medicine</del>			
3rd Scottish General Hospital	28-11-17	mucous patches on tonsils: result of food infection			0 +				M. acton C.M.
	3-12-17		156 N			4gm	87i		
	7-12-17		157 N			4gm	87i		
	10-12-17		157 N			4gm	87i		
	17-12-17	M. acton C.M.: satisfied.					87i		
	24-12-17		158 N			6gm	87i		
2-1-18	Smith transferred to Remondou.		158 N			6gm	87i		

## SYPHILIS CASE-SHEET.

Regtl. No. 248 Rank and Name Pte. A. Hooper Corps Royal Infd.  
 Placed on Syphilis Register at Warlington on 5.9.18 No. in Register  
 Disease contracted at Glasgow Primary sore appeared on (date) May 1917

## CONDITION WHEN PLACED ON REGISTER.

Primary sore—character and site No scar seen  
 Lymphatic glands General Adenitis  
 Skin (nature and distribution of rash Nil Acneiform rash on back.

Mucous membranes Patch of Acneiform rash behind ears lower molar.  
 Scars of ulcerations on tonsils. Eyes normal. R. of present  
 Other symptoms

Sore May 1917. On scrotum.  
 Treated Glasgow 7/606. + 1/Hg., again Nov. 17<sup>th</sup> with 3/606  
 + 3 Hg.  
 Wounded April 1918. in 3<sup>rd</sup> Lon. Gen. Hosp. in May.  
 In July had sore throat. Wass. found positive. Sent  
 to R.R. Wound of old fracture of leg not quite healed.  
 Foot drop - left.

Examination of exudate from sore—Spirochaeta Pallida (present or absent) Not found

Examination of blood serum—Method employed (original or modification)

Wassermann reaction (Result (positive or negative) ++ 27.8.18. R.R.

Station Warlington Mil. Date 5.9.18 Signature of M.O.

2<sup>nd</sup> J. O. Steadman  
 Lt. R. am c.

Struck off Syphilis Register at Warlington Milon 21.10.18

Cause of being struck off Register (a) Recovered  
 (b) Transferred to Army Reserve  
 (c) Discharged from Army

Station Warlington Date 21.10.18 Signature of M.O.

2<sup>nd</sup> J. O. Steadman  
 Lt. R. am c.

N.B.—On completion of a course of treatment a red line to be drawn across the page, and the date when the next blood test is due to be entered in red ink below the line, e.g., "Blood test due 15.5.14."  
 The date and result of the blood test to be entered; and if negative, the date on which the next blood test is due to be also entered.

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Weight clothed, without boots—lbs.	Urine Wasser- mann Reaction	Treatment				Signature of M.O. (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initials)		
					Normal (N.) Albumen (Alb.)	Original (O) Method Modification (M.)	Result Positive (+) Negative (-)	Intravenous Injection. Dose in grammes			
								Arsenical		Mercurial	Other Methods
27.7.18	27.7.18										
Aug. 7 <sup>th</sup>	Aug. 7 <sup>th</sup>	Int. Musc.				+					
" 12 <sup>th</sup>	" 12 <sup>th</sup>	Ven.					.3	/			
" 16 <sup>th</sup>	" 16 <sup>th</sup>	Musc.					.3	/			
" 19 <sup>th</sup>	" 19 <sup>th</sup>	Ven.					.3	/			
" 23 <sup>rd</sup>	" 23 <sup>rd</sup>	Musc.					.3	/			
" 26 <sup>th</sup>	" 26 <sup>th</sup>	Ven.					.3	/			
" 30 <sup>th</sup>	" 30 <sup>th</sup>	Musc.					.3	/			
Sept. 2 <sup>nd</sup>	" 2 <sup>nd</sup>	Ven.					.3	/			
" 7 <sup>th</sup>	" 7 <sup>th</sup>	Musc.					.3	fr. T			
" 11 <sup>th</sup>	" 11 <sup>th</sup>	Ven.					.3	fr. T			
" 14 <sup>th</sup>	" 14 <sup>th</sup>	Musc.					.3	fr. T			
" 15 <sup>th</sup>	" 15 <sup>th</sup>		161								
" 18 <sup>th</sup>	" 18 <sup>th</sup>	Int. Ven.					.3	/			
" 19 <sup>th</sup>	" 19 <sup>th</sup>	Wass. Test Result				++					
" 21 <sup>st</sup>	" 21 <sup>st</sup>	Mist. Pot. Iodid. gr. x tid.	163								
" 22 <sup>nd</sup>	" 22 <sup>nd</sup>		164								
" 29 <sup>th</sup>	" 29 <sup>th</sup>						.3	T			
Oct. 4 <sup>th</sup>	" 4 <sup>th</sup>	Int. Musc.					.3	fr. T			
" 11 <sup>th</sup>	" 11 <sup>th</sup>	Ven.					.3	fr. T			
" 14 <sup>th</sup>	" 14 <sup>th</sup>						.3	/			
" 15 <sup>th</sup>	" 15 <sup>th</sup>	Wass. Test Result.				+					

R. R.

Dr. J. S. Steadman  
 J. S.  
 John Payton

Dr. J. S.

## The Royal Newfoundland Regiment

COPY

## PROCEEDINGS ON DISCHARGE

1. No. 248 Rank Pte Name Hooper, A.  
Intended place of residence St. John's

2. Occupation Miner  
Classification of soldier B Medical Category E

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 (sgnd) J. H. Snow, Capt.  
for Commanding Discharge Depot  
Date JUN 27 1919 The Royal Newfoundland Regiment

## CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place, ST. JOHN'S (sgnd) A. N. Hooper,  
Signature of soldier  
Date JUN 27 1919 " J. H. Snow, Capt.  
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, ST. JOHN'S (sgnd) A. N. Hooper,  
Signature of soldier  
Date JUN 27 1919 " G. W. Chaney, CSM.  
Signature of witness

## STATEMENT OF SERVICE

7. Enlisted for service 2-9-14 No. of days on Military  
Discharged from service JUN 28 1919 Plus 14 days Service 1774

## 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 R. H. Sait Capt.  
Date JUN 28 1919 Officer Commanding Discharge Depot  
The Royal Newfoundland Regiment

## CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place, ST. JOHN'S  
Date Officer i/c Records  
The Royal Newfoundland Regiment

# RECEIPT FOR A SOLDIER'S DOCUMENTS

## HEADQUARTERS NEWFOUNDLAND REGIMENT

To Pension Board.

Please receive documents as indicated below

No.	RANK AND NAME	Non-effective account.	Medical history sheet.	Nfld. medical history sheet	Medical report on an invalid.	Proceedings on discharge.	Civil life qualification.	Descriptive return.	Active service casualty form.	Regimental conduct sheet	Company conduct sheet	Field conduct sheet	Report of Newfoundland Medical Boards					Attestation paper	Identity certifi- cate	Allotment papers	Headquarters Travelling Board	Proceedings on discharge			
		N. F. P. 386	B. 178	B. 178a	B. 179	B. 288	W. 3494	D. 400A	B. 103	B. 120	B. 121	B. 122	1st. Board	2nd Board	3rd Board	4th Board	Board	B. 1015	Form L	Form K		A. F. W. 3483	D. F. 2	D. F. 1	
248	6 <sup>th</sup> Lt Hooper A.																							1.	✓

Received above noted documents,

Dated \_\_\_\_\_ 19\_\_

Signature of Officer forwarding documents:

Date JUL 4 1919







THE ROYAL NEWFOUNDLAND REGIMENT  
DISCHARGE DEPOT

ST. JOHN'S, NEWFOUNDLAND.

..... June 23rd, 1919 .....

From Adjutant,  
Discharge Depot

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

248 Pte. A. N. Hooper

The above mentioned, who returned on the last "Corsican", states that a considerable sum of money sent over to him from here was held to the credit of his account at Pay and Record Office, London. We have received no advice of this; could an enquiry be made, please, so that any credit balance he may have may be paid him.

ERC/C

L. R. Cooper  
Capt, Adjnt

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... *Albert - H* ..... 2. Surname... *Kospiel* .....  
3. Rank... *Private* ..... 4. Regt. No. *249* .....  
5. Address in full to which future payments of gratuity are to be forwarded... *Albert - H Kospiel - Empire Barrack St. John's* .....  
6. Date of enlistment in the Regiment... *1 September 1914* .....  
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....  
*No one* .....  
8. Relationship of such dependents... *No myself* .....  
9. Address in full of such dependents.....  
*Not applicable* .....  
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?... *N.A.* .....  
11. Were you on active service only in Mfld, if so, give dates and particulars of such service... *Empire October 14 Gallipoli - Suble Bay - August 1916 - France - February - Battle of Somme Belgium - Battle of Arras - Arras 1918* .....  
12. Give total length of time which you served on active service, whether in Mfld. or Overseas... *From 1<sup>st</sup> Sept 14 to 28<sup>th</sup> June 1919* ..... 13. ....

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?

*no applicable*

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

*28 June 1919*

*no*

*Re-education*

(b) Reason for discharge.

*getting treatment for wounds in Cyprus Barrack*

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.

*Gallipoli, Suvla Bay, Egypt, Serbia, France, Belgium  
in Battle of Cape Helles, Suvla Bay, Arras, Passchendaele, Somme*

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

*no*

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

Signature of Applicant:

*A. N. Hooper*

Place of Residence:

*St. Kupala Barracks, St. John's*

Declared before me at:

*St. John's*

This

*29<sup>th</sup>*

day of

*June*

19*19*....

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

*Wm. James P.O.*

POST DISCHARGE PAY.

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

June 24, 1919

From: Paymaster & O i/c Records,  
Militia Dept.

To: The Adjutant,  
Depot.

Re 24B, Pte. A.N. Hooper

With reference to your letter of June 23rd. regarding the above noted man, I beg to advise you that notification has been received from London, to pay out \$232.70 to this man, which was lying to his credit in the Pay & Record Office, London.

If he should call at your Office, will you kindly direct him here, so that he may be furnished with a cheque for this amount.

Yours truly,

Lieut.  
For Paymaster



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Albert B Hooper, Regl. No. 248  
 hereby agree, until further notification by me, and in similar official form, to make an Allotment of  
✓ Dollars and Sixty Cents, per diem, from my Pay,  
 to, and for the benefit of the undermentioned Person <sup>and</sup> <sub>or</sub> Persons, such payment to be made  
 on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> <sub>or</sub>  
 Persons concerned, viz:

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person).
575.		Managers Bank of Montreal	Water St.	= 60
Commence 1 <sup>st</sup> January 1915				
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.) Ar. Sernoff  
 Officer Commanding  
 Co. George B. Company  
 9 21 - 1915

(Sig.) Albert B Hooper  
 (Rank) Private

248 Hooper

AM. Please settle W. S. G. % when  
making next pay<sup>t</sup> - on or about 12<sup>th</sup>.

11/11/19

W. F. R.

Fort au Port.

June 16<sup>th</sup> 1919

Sir: Enclosed you will find a bill of  
travelling expenses for 248 Private &  
Nosper from and to Steffenville Loring and  
Fort au Port.

I am,

Yours respectfully,  
A. S. DeBourcier

The Paymaster  
Nfld. Regt.  
St. John's.



ACCOUNT	<i>Grant</i>
CH NO	<i>2485</i>
IND. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

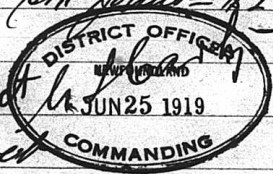
*Put away, June 14<sup>th</sup> 1919*

*Militia Department*  
*To Armed Gallant*

*To Carriage hire from Put away*  
*to Stephemill crossing for 248 Private*  
*A. Hooper on his return to St. John = \$2.00*

*6*

*Certified Correct*  
*Ad. Lt. [Signature]*  
*A. S. Dubauwain Jr.*



CERTIFIED CORRECT  
*By [Signature]*

Port au Port, June 14<sup>th</sup> 1919

Militia Department

To Charles Mc. Hatridge

To Carriage hire from Stephenville crossing  
to Stephenville ~~expenses~~ for 248 Private A. Hooper  
on his return from St. John's ✓ \$1.50

Certified correct

CERTIFIED CORRECT,

~~W. L. Coole Capt. Adjt.~~

A. S. DuBourcier J. P.

Port au Port June 14<sup>th</sup> 1919

Militia Department

To William March

To Carriage hire from Stephenville to Port au Port  
for 249 Private A. Hooper — — \$2.50

ACCOUNT	248
P. CH. NO.	248
IND. LEDGER	INITIALS
PAY LED.	INITIALS
GEN. LEDGER	INITIALS

Certified correct

A. S. DuBourcier J. P.

CERTIFIED CORRECT,

~~W. L. Coole Capt. Adjt.~~



July 23, 1919

A.S. DuBourdiou, Esq.,  
Port au Port.

Dear Sir:



With reference to your  
letter of June 16th. enclosing bill of travelling  
expenses of #248, Pte. A. Hooper from and to  
Stephenville Crossing and Port au Port, will you  
please hand the enclosed cheques to the parties  
concerned.

Yours truly,

Capt.  
Paymaster

LM/  
Enc. 3

Hooper.

1 suit cloths	—	60 <sup>00</sup>
1 overcoat.	—	50 <sup>00</sup>
1 shirt	—	2 <sup>00</sup>
4 Collars	—	1 <sup>00</sup>
1 tie	—	1 <sup>00</sup>
1 pair underwear	—	6 <sup>00</sup>
1 pair case	—	6 <sup>00</sup>
1 shaving outfit	—	1 <sup>00</sup>
1 Cap	—	6 <sup>00</sup>

\$ 127.60

R. Hooper  
24699  
Cul

ISS. LEADER	INITIALS
PAY LEADER	INITIALS
GRN LEADER	INITIALS

*[Handwritten signature]*

G. M. Hooper.

I, ..... *Albert N. Hooper* ..... being duly sworn  
depose and say, that the attached statement of claim for  
property lost in the fire at the Empire Hospital, is a  
correct statement of my losses.

..... *his*  
*A. N. Hooper*  
*mark*

Sworn before me at  
Militia Department, St. John's,  
this... *11<sup>th</sup>* ... day of ... *December* .....  
A.D. 1919.

*C.C. Byrne*  
*Capt.*

*[Handwritten signature]*

248: Albert N Hooper

List of Clothing Bought

one suit of Brown. tux <sup>\$70<sup>00</sup></sup> made

one overcoat Blue. \$40<sup>00</sup>

two top shirts 1<sup>66</sup>

eight hand collars 1<sup>00</sup>

two neck ties 1<sup>50</sup>

~~three pairs of socks~~ <sup>CCB</sup>

~~one pair of shoes~~ <sup>CCB</sup>

~~two~~ suits of underwear <sup>CCB</sup> 3<sup>00</sup>

one pair of pants 10<sup>00</sup>

one grip 5<sup>00</sup>

one shaving outfit 1<sup>00</sup>

one cap. Total \$148<sup>60</sup>

~~total~~ Dollars 141<sup>60</sup>  
<sup>CCB</sup>  
145<sup>00</sup>

ST. JOHN'S, June 26<sup>th</sup> /19

# Royal Newfoundland Regiment.

Billeting Account,

To M. A. Hooper

Billeting Soldiers as undermentioned

from June 1<sup>st</sup> /19 to June 21<sup>st</sup> /19

248 · M. A. Hooper 21 60

ACCOUNT	<u>BY</u>
CH. NO.	<u>24919</u> INITIALS <u>GH</u>
IND. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

Certified correct for \$ 21 60

J. H. Shaw  
Billeting Officer.  
G. Hooper

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 16  $\frac{11}{100}$

Nov 12 19 19

Received from the First Newfoundland Regiment  
the sum of Sixteen ———— " Dollars.  
on account of Pay. 6  
balance

G. H. Hooper

Ch. No. 19576	Initials. CBK
Pay Ledger 420	Initials. WM
Gen. Ledger.....	Initials.....



Regt. No. 248. Rank. Pte



No. 248

Rank

Pf.

Name

A. N. Hopfen.

12389  
1611

14000

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 16  $\frac{11}{2}$

July 31 19 19

Received from the First Newfoundland Regiment  
the sum of Sixteen  $\frac{11}{2}$  Dollars.  
on account of Pay.  
balance

A. H. Hooper

Ch. No. 4070	Initials JEW
Pay Ledger.....	Initials.....
Gen. Ledger.....	Initials.....

Regtl. No. 142 Rank Plt

J. C. B.

No. <sup>248</sup>  
Pt

Rank Pt

Name Hooper, Or

C.R. 248

Sept. 20th, 1920

Secretary,

Board of Pension Commissioners

Dear Sir:-

The attached letter from Ex-No.  
248 A.H. Hooper, of 1034 Massachusetts Ave, Cambridge,  
Mass., 9/10/20, relative to the matter of pension,  
is forwarded to you for attention and reply direct  
to Hooper, please.

Yours faithfully,

Secretary

for Chief Staff Officer

C.R. 248

Feb. 12th. 1920

To Whom it may Concern:-

This is to certify that No. 248 ex-Private Albert H. Hooper, Royal Newfoundland Regiment has served from 2nd September, 1914 to 16th July, 1919, and has been on active service in Gallipoli and France. His military character all through his service has been good.

Lieut.-Col.,

Chief Staff Officer

C.R. 248

RECEIPT.

I hereby certify that I have received the 1914-1915

STAR.

No 248 Name G. V. Hooper

Witness. Ward

Date 2/12/19

Place St John's

C.R. 248

RECEIPT FOR ISSUE OF  
RIBAND OF 1914-15 STAR.

---

I certify that I have received an issue  
of 3 inches of Riband of 1914-15 Star.

NAME... *G. H. Cooper*...

DATE... *25/9/19*.....

PLACE... *St. John's*.....

C.R. 248

Extract from Daily Orders Part II Unit The Royal WFLD,  
Regt. St. John's, July 16th, 1919

The discharge of the undernoted on demobilization has been  
ORDER CONFIRMED by officer i/c Records from 12-7-19.

248 Pte. Albert N. Hooper.



C.R. 248

**Extract from Daily Orders Part 21 Unit The Royal Newfoundland Regt.  
St. John's, July 4th, 1919.**

**The discharge of the undernoted on decubilitation has been  
APPROVED by C.O. Discharge Depot with effect from 28-6-19.**

248 Pte. Albert Hooper.

C.R.

248

Extract from ~~Medical Board~~ Medical Board held on Tuesday June  
24th 1919.

248 Pte. A. Hooper.

Recommended discharge from the Army REQUIRES TREATMENT(EMPIRE)S



**DEPARTMENT OF MILITIA**

ST. JOHN'S, NEWFOUNDLAND

June 24, 1919

**From: Paymaster & C i/c Records,  
Militia Dept.**

**To: The Adjutant,  
Depot.**

**Re 248, Pte. A.H. Cooper**

With reference to your letter of June 23rd. regarding the above noted man, I beg to advise you that notification has been received from London, to pay out \$232.70 to this man, which was lying to his credit in the Pay & Record Office, London.

If he should call at your Office, will you kindly direct him here, so that he may be furnished with a cheque for this amount.

Lieut.  
For Paymaster

June 23rd, 1919

From Adjutant,  
Discharge Depot

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

248 Pte. A. N. Hooper

The above mentioned, who returned on the last "Corsican", states that a considerable sum of money sent over to him from here was held to the credit of his account at Pay and Record Office, London. We have received no advice of this, could an enquiry be made, please, so that any credit balance he may have may be paid him.

LRC/C

C.R. 248

Extract from Telegram received from Synoptical, London,  
June 6th 1919.

Remittance received as follows:- Havenot been paid,  
Soldier repatriated, you can adjust?

248 Hooper

f.47.16-4.

C.R. 248

Extract from Daily Orders Part 11 Depot, St. John's,

Date June 18th 1919.

248, Pte. Hooper.

Reported at Headquarters 1/6/19.

which sailed Liverpool May 22/1919.

ex "Corsican"

C.R. 248

Extract from Daily Orders part II, Depot  
Winchester by Lieut. Col. B. J. Barton, D.S.O.  
Officer Commanding 2nd. Battalion. 12-5-19.

15

The undernoted having reported back from the  
1st. Battalion is taken on the strength and  
posted to "H" Company.

248 Pte. A. Hooper.

16-5-19.

C.R.

248

Extract from Casualties from Pay & Record Office, London  
dated 14/5/19. NEWFOUNDLAND CONTINGENT.

The undermentioned, ex 3rd L.G.H. 10/5/19 reported at the  
Pay & Record Office and was ordered to report to Depot,  
Winchester, 10 a.m. 13/5/19:  
(pending repatriation)

AUTHORITY: #248, Pte. A.N. Hooper.

Permanently unfit for Military service.

AUTHORITY:

A.F.B.256, from 3rd L.G.H.



April 14th, 1919

Mr. Walter Hooper  
Port au Port

Dear Sir:-

I beg to inform you that a report has to-day been received from the Visiting Committee of the Newfoundland War Contingent Association concerning No. 248, Private Albert Hooper, who has been re-admitted to 3rd London General Hospital, to the effect that he is now progressing favourably.

Yours faithfully,

Lieut. Col.,

Chief Staff Officer.

RECEIPT FOR ISSUE OF  
RIBAND OF 1914-15 STAR.

---

I certify that I have received an issue  
of 3 inches of Riband of 1914-15 Star.

SIGNED *A. Hooper*

DATE *June 27th 1919*

PLACE *St. John's*

CIRCULAR LETTER

St. John's,

March 15th 1919.

Riband of 1914-15 Star.

Please complete the following claim and return it to this Department. If possible, call at Room No. 3 for your issue.

Lieut. Colonel.

Chief Staff Officer.

CLAIM FOR ISSUE OF RIBAND  
of 1914-15 STAR.

Department of Militia,

St. John's.

I hereby make claim for issue of Riband of 1914-15 Star.

I certify that I am entitled to this issue,

having served on\* *Gallipoli*  
from *Dec 1<sup>st</sup>* 1915 to *Jan. 6<sup>th</sup>* 1916.

(Date) *27<sup>th</sup> / 12* (NO) *248*. (Rank) *plater*. (Name) *H. U. Hooper*

(Place) *St. John's...*

\*Fill in theatre of War where you served in Gallipoli, Mudros, Lemnos, or Western Egyptian Frontier.

C.R. 248

Extract from Casualties received from Pay & Record  
office, London, Mar. 10th, 1919.

248 Pte. A.N. Hooper.

Was discharged from 3rd London G. Hospital on. 10-3-19  
and ordered to report to the Pay & Record Office same  
date. Found by Med. Board "Unfit" and sent for disposal  
Granted furlough to 19-3-19.

C.R. 248

Extract from Casualties received from Pay & Record Office,  
Mar. 24th, 1919.

248 Pte. A.N. Hooper

Was admitted 3rd London General Hospital, on 20-3-19

C.R.

248

Extract from telegram sent to Synoptical London,  
Fe, 17th, 1919.

In answer to your telegram Feby. 14th my telegram  
~~read~~ Feby. 14th should read

248 Hooper.

C.R. 248

Extract from Telegram from Syn. to Mil. dated Feb. 14/1919.

With reference your telegram Feby 12th.,  
verify carefully and report whether correct  
regimental particulars 548 Hooper .

L

C.R. 248

E t

Extract of Casualties from Pay & Record Office, London,  
dated Jan.2/1/19.

#248 Pte. A. Hooper.

Granted 12 days leave from 1/1/19 to 12/1/19, from 3rd London  
General Hospital. Will return to Hospital on expiration of  
his leave.

Memo from O.C. Hospital.



C.R. 248

Extract from Casualties received from Pay & Record Office,  
London,

248 Pte. A.N. Hooper.

Was re-admitted to 3rd London G. Hospital on 26-11-18 (Whilst  
on sick Furlough/

C.R. 248

Extract from Casualties received from P & R. O. London,  
Nov. 26th, 1918.

248 Pte. A.N. Hooper.

To be granted extension of leave to 10-a.m. 28-11-18 to be  
repatriated.

C.R. 748

Extract from Casualties received from Pay & Record  
Office, London, Nov. 12th, 1918.

248 Pte. Hooper.

Was discharged from the 3rd London General Hospital  
on 12/11/18, and granted furlough to 10 a.m. 21/11/18  
with orders to report at the P.S.R. on the latter date  
for disposal. To be repatriated.

20 69 A

C.R. 248



NEWFOUNDLAND CONTINGENT

CASUALTIES

248 PTE. A. HOOPER (V.D.) was transferred from  
THE MILITARY HOSPITAL, Warlingham, to the  
3rd London General Hospital, S.W. 18, on  
21/10/18.

---

Authorities:-

Memo from 3rd L.G.H.

1739A

C.R. 248

NEWFOUNDLAND CONTINGENT



CASUALTIES

248 PTE. A. <sup>H</sup>COOPER (V.D.) was transferred  
from the Military Hospital, Rochester Row, S.W.,  
to the Military Hospital, Warlingham, on 4/9/18.

Authority: Memo from Hospl, Rochester Row.

1534A

C.P.

248

NEWFOUNDLAND CONTINGENT

CASUALTIES

248 PTE. A. HOOPER was transferred from  
the 3rd London General Hospital to the  
Military Hospital, Rochester Row, London,  
S.W. 1, on 26/7/18.

---

Authority:-

A.F. W.3016 from  
3rd Lond.G.Hosp.

---

C.R. 248

Extract from G.A.L.S. Code Telegram from Secretary of  
State received May 21, 1918. to Governor 22.5.18

The Visiting Committee of the Newfoundland Contingent  
Association reports the condition of the following  
man in Hospital:-

#248 Pte. Albert N. Hooper.

Improving.

C.R. 248

Extract from Daily Orders part 11, from Unit The Royal  
Mfld. Regt. in the field, dated May 18, 1918.

#248 Pte. A. Hooper.

Invalided to England (W) May 7, 1918.



## 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)

Militia Dept.

Signature of Sender \_\_\_\_\_

Address \_\_\_\_\_

Line Number	Rcd	By	Sent	by	Check

Dated May 11th 1918.

To Mr. Walter Hooper, Port au Port.

Regret to inform you that Record Office, London, officially reports #248, Private Albert N. Hooper at Wandsworth suffering from G.S.W. leg, fractured Tibia

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

J. R. Bennett,

Acting Minister of Militia.

FOR TYPEWRITER

CR. 248

Extract from Casualties received from pay & Record Office,  
London, dated May 10, 1918.

#248 Pte. A Hooper

Admitted 3rd London General Hospital, Wandsworth S.W.18,  
8-5-18 Gunshot wound leg frag. tibia.

C.R. 248

Extract from Telegram received from London, dated  
May 10, 1918.

248. Hooper. Gunshot wound Leg, fractured Tibia.

**NEWFOUNDLAND POSTAL TELEGRAPHS.****Cable Connection with all the World**

C.R. 248

**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.

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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 Dept of Militia.

Line Number	Rcd	By	Sent	by	Check

*Dated* **April 26th, 1918.***To* **Walter Hooper, Port au Port.**

Regret to inform you that Record Office, London, officially reports **No. 248, Private Albert Norman Hooper at 47th General Hospital, Letreport, April 16th G.S.W. right knee severe.**

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

**J.R. Bennett**

Actg. Minister of Militia.

**FOR TYPEWRITER**

C.R. 248

Extract of Sick and Wounded N.C.O.s, and Men of the Expeditionary Force ---  
France, dated April 26th. 1918.

List No: H.A. 22069

23248 Pte. A.A. Hooper

Royal Newfoundland Regiment.....G.S.W? R. Knee severe.

Admitted 47 Gen. Hos. Le Treport 16th. April 1918.

C.R. 248

Extract from Nominal Roll of Draft No. 59, 50 Other  
Ranks from 2nd Bn. Royal Newfoundland Regiment, to 1st  
Bn. Royal Newfoundland Regiment, B.E.F.

Embarked Southampton 1/3/18.

248 Pte. A.N. Hooper.

C.R. 248

Extract of Casualties received from Pay & Record Office,  
London, dated July 31, 1916.  
(Extract from Army Form B 215, from G.O. 1st. Field. Dept.  
dated 11/7/16.)

#248 Pte. A. Hooper. ✓

Sounded in action 7/17/16.

C.R. 248

Extract from Nominal Roll, 1st Draft to M.E.F. from  
Governor July 8th, 1916.

#248 Pte. A.M. Hooper.



C.R. 248

Extract of Casualties received from Pay & Record  
Office, London, dated July 9, 1916.

#248 Pte. A.N. Hooper. ✓

Gunshot wound left leg.

Admitted 3rd London General Hospital, Wandsworth,  
July 5, 1916.

**NEWFOUNDLAND POSTAL TELEGRAPHS.****Cable Connection with all the World**

H64

**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.

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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	Rcd	By	Sent	by	Check

Dated 7 July, 1916.

To Mr. Walter Hooper, Port au Port.

Regret to inform you No. 248 Private Albert N. Hooper  
reported Wandsworth Hospital, wounded left leg.

J. R. Bennett,

COLONIAL SECRETARY.

C.R. 248

Extract of reinforcement ~~draft~~ Draft to 1st Bn. M.H.F.  
Embarked for Gallipoli 14-11-16.

248 Pte. A.N. Hooper.

C.R. 748

Extract from Nominal Roll embarked St. John's per S.S.  
"Florizel. Oct. 4, 1914.

248 Hooper Albert N.

C.R. 248

Abert H. Hooper. was attested for General Service  
with the NEWFOUNDLAND REGIMENT on ..Sept. 2, 1914..  
Regimental No. 248 was allotted to Pte A. N. Hooper.

AUTHORITY:

Record Officer

Dept. of Militia,

March 25th, 1919.

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Regiment of Newfoundland

Number of Sheet 1

Signature of O. G. Company James Alexander Capt.

Printed and Sold by Gale & Polden, Ltd., Wellington Works, Aldershot. 2/6 per 100.20,712-s.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	Name	Age on	years months		
248	A. Hooper	23		Sailor	
Joined	Date	Date of Enlistment		Religion	
Joined	Date	2/9/14			
Joined	Date	Period of		Meth.	
Joined	Date				

Place	Date of Offence	Rank	Case of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
Fort George	23-12-15 1915.	Pte		absent from guard mounting	Cpl Clouchie	2 days C.C.	23-12-15	Capt Alexander	
Stoke Camp	July 4 <sup>th</sup>	"		Overstaying pass fr. midnight to 8 p.m. July 6 <sup>th</sup>	Cp. Garland	2 days C.C.	8-7-15	Capt Alexander Lt Col. Burton	forfeit 2 days pay under R.W.
Stokes	17-7-15	"		Absent from Tattoo to midnight 18-7-15	Cp. Ryan	3 days C.C. forfeit 2 days Pay R.W.	19-7-15	Lt. J. Minnis.	C.
				Demobilized St. John's 12/7/19.					
				To be carried over					

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.  
[321] W13871/604 400m 2/15-1 83 56

Forms  
B. 121.  
83.

*Leedsford Lane* Regiment of *Infantry*

Number of Sheet *1*

Signature of O. C. Company *J. S. ...*

Regimental Number and Name <i>218 Hooper A.</i>		Enlistment		Trade		Good Conduct Badges, Service Pay or Proficiency Pay	
No.		Age on	<i>24</i> years months	<i>Mason</i>			
Joined	<i>12/11/15</i>	Date	<i>14-11-15</i>	Place and Date of Enlistment	<i>St. Johns 2nd/11/14</i>	Religion	<i>Methodist</i>
Joined	<i>2/10/16</i>	Date	<i>19-8-16</i>	Period of	with Colours years.	Place of Birth	<i>Not in list</i>
Joined		Date		with Reserve 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
<i>Newton Park School</i>	<i>7/8</i>	<i>Pvt</i>		<i>Absenting himself.</i>	<i>Cpl Carter</i>	<i>3 days C.B.</i>		<i>G. T. Innes</i>	<i>2/12</i>
<i>Highly Devon</i>	<i>20-7-18</i>	<i>"</i>		<i>Overstaying pass from midnight 20-7-18 until 4p.m 22-7-18</i>	<i>Cpl. mews</i>	<i>Forfeit 3 days pay</i>	<i>23-2-18</i>	<i>Major March</i>	<i>Forfeit 2 days pay</i>

To be carried over

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 248 Rank Plt Name Hooper A.  
 Date of Enlistment 2.9.14 Address St Johns District St Johns  
 Occupation Miner Classification for Discharge B Medical Category E  
 Recommendation S. M. B. Permanently unfit Disability Rating 30% 3. max 5. 1. ext.  
 Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	<u>2</u>	N.F. Med	D.F. 1	<u>1</u>
B 178	<u>2</u> W 3494	B 122	<u>1</u>	Board 1st	" 2	
B 178a	<u>2</u> D 400A	<u>2</u> B 1914	<u>1</u>	do 2nd	" 3	<u>3</u>
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K		do 4th	" 5	
B 179b	<u>1</u> B 103	<u>2</u> ME 2			" 6	
B 179c	B 120	M 93		<u>2505</u>	<u>238</u>	<u>2</u>

Date 27.6.19 O. C. Discharge Depot. H. H. H. H.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action.

Date 24-6-19 J. H. Hooper Capt.

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$ 00
- (b) Clothing Supplied J. H. Hooper Capt.

Date 27-6-19 O. i. c. Re-clothing



**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrants No. 2176-19 to his home at 2176-19 and Release Certificate No. 3092 issued 2176-19

Date 2176-19

*J.A. Newbatt*  
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 27-6-19

Date 27-6-19

*J.A. Newbatt*  
Depot Paymaster.

Discharge approved for 28-6-19

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

N.F. P136	2	B 208	2	B 121	1	N.F. Med	1	D.F. 1	1
B 178	2	W 3494	2	B 122	1	Board Ist	1	" 2	2
B 178a	2	D 400A	2	B 1915	1	do 2nd	1	" 3	2
B 179	2	D 400B	2	Form L	1	do 3rd	1	" 4	2
B 179a	2	D 400C	2	Form K	1	do 4th	1	" 5	2
B 179b	1	B 108	2	ME 2	1	2505	1	" 2505	2
B179c	2	B 120	2	M 93	1		1	" 1238	2

Date 27-6-19

*J.A. Newbatt*  
O.C. Discharge Depot.

**APPROVED.**

Documents as above forwarded to:-

Officer in Charge Records.  
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUN 28 1919

*R.H. Dait* MAJOR  
O.C. Discharge Depot.

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

Date July 10/19

*James Mackenzie*  
Corporal