



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4115 Name Siddrick F. Hopkins Corps Militia

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Siddrick F. Hopkins
2. What is your full Address? 2. 2116, G. Ave.,
St. John's, Nfld.
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 29 Years 2 Months
5. What is your Trade or Calling? 5. Businessman
6. Are you Married? 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. No
8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
9. Are you willing to be enlisted for General Service? 9. Yes, for the duration of the war
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? 10. { Name
Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? 11. Yes

I, Siddrick F. Hopkins, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

Siddrick F. Hopkins SIGNATURE OF RECRUIT.
J. J. Walsh Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 22 day of July 1915.

Signature of Attesting Officer A. J. Wilson, C.M.O.

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him, to that
If enlisted by special authority, such will be attached to the original attestation.

Date 1915
Place St. John's } Approving Officer. W. J. Walsh

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Jacques S. Hopkins
 Apparent age 20 years 2 months. Height 5 feet 9 inches
 Chest Measurement { Girth when fully expanded 35 inches WT-130
 Range of expansion 2 inches
 Distinctive marks Fair Hair Eyes Blue Complexion fair

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin George S. Hopkins
Bellingham | Relationship Father
Kettle Cove Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

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



FIRST NEWFOUNDLAND REGIMENT

4155

ATTESTATION OF

No. 4155 Name Judrick F. Hopkins Corps Milit

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Judrick F. Hopkins</u> |
| 2. What is your full Address? | 2. <u>R. Little Cove</u> |
| 3. Are you a British Subject? | 3. <u>Jewell, G. H. T. Bay</u> |
| 4. What is your age? | 4. <u>29</u> Years <u>7</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Sister, nurse</u> |
| 6. Are you Married? | 6. <u>no</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>no</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... | 10. { Name |
| | { Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>yes</u> |

I, Judrick F. Hopkins do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

Judrick F. Hopkins SIGNATURE OF RECRUIT.

James B. Waugh Signature of Witness.

6 19/11/17

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

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

on this 22nd day of Nov 1917

Signature of Attesting Officer A. J. H. General, C.M.O.

†CERTIFICATE OF APPROVING OFFICER.

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

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

Date 22 Nov 1917 Place Handfield } Approving Officer. W. J. H. General

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Fredrick S. Hopkins
 Apparent age 20 years 2 months. Height 5 feet 9 inches
 Chest Measurement { Girth when fully expanded 35 inches WT 130
 Range of expansion 2 inches
 Distinctive marks Fair Hair. Eyes Blue Complexion fair

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin George Hopkins
Twillingate | Relationship Father
Kettle Cove Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>19-11-17</u>									
joined at <u>St John's</u> on <u>November 9-17</u>									
<u>& discharged July 1919</u>									
<u>Embarked at St John's N.S. bound to Halifax N.S. 29-18. Admitted</u>									
<u>Alexander Hosie's Loanham Hospital 30-3-18. Suffered from hepatitis near</u>									
<u>Hospital at St John's to 4th. Left for demobilization 22-5-19.</u>									
<u>Arrived Newfoundland 1-8-19</u>									
<u>No Active Service</u>									
<u>Demobilization at St John's 8-7-19</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 8-7-19 (date of discharge) 1 years 232 days
 Pensions " " " " " " " "

C.R. 4155

**Extract from Daily Orders Part 11 Unit The Royal Hfld.
St. John's, 11-7-19.**

**The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from 8-7-19.**

4155 Pte. Fred Hopkins.

C.R. 4155

Extract from Daily Orders Part II Unit The Royal Wfld. Regt.
St. John's, June 14th, 1919.

The discharge of the undernoted on demobilisation has been
APPROVED by C.O. Discharge Depot with effect from 24-6-19.

4155 Pte, Wm. Hopkins.

C.R. 4155

Extract from Daily Orders Part III Depot, Sjt. John's,

Date 13/6/19.

4155, Pte. Wm. Hopkins.

Reported at Headquarters 1/6/19.

ex "Corsican"

which sailed Liverpool May 22/1919.

CR 4155

May 23, 1918.

Dear Sir:-

A notification has been received by mail to-day from the Pay & Record Office, London, stating that 4155 Pte. F. Hopkins, was transferred from Alex. Hospital to Hapsbury War Hospital, on the 6th April 1918.

Yours faithfully,

W.V.W.

Lieut.

for Lieut. Col. Chief Staff Officer.

Mr. Geo. Hopkins,
Kettle Cove,
Twillingate.

C.R. 4155

May 15th, 1918.

George Hopkins Esq.,
Kettle Cove,
Twillingate.

Sir:-

Notification has been received by mail, that
your son #4155 Pte. Fred Hopkins, was admitted Alexander
Hospital, Gosham 20/3/18, suffering from Mental Disease.

Yours faithfully,



Major,

Chief Staff Officer.

C.R. 4155

NEWFOUNDLAND CONTINGENT

Extract of Casualties from P.&R.O., London dated 11th. April 1918.

4155 Pte. F. Hopkins

was transferred 6/4/18 from the Alexandra Hospital, Gosham, to the Napsbury
War Hospital, (an Asylum for the Insane.) St. Albans.

Authority: Memo from Alexandra Hospital Gosham.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

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

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

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

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

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

(NOT TRANSMITTED)

Signature of Sender _____ Address Dept of Militia.

Line Number	Rcd	By	Sent	by	Check

Dated March 23rd, 1918.

To George Hopkins, Kettle Cove, Twillingate

Regret to inform you that Record Office, London, officially reports **No.4155, Private Fred Hopkins admitted Alexander Hospital Gosham, March 20th from 2nd Battalion suffering from mental disease**

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.

C.R. 4155

Extract from Casualties received from The Pay and Record
Office London. dated Mar. 22nd, 1918.

4155 Pte. F. Hopkins.

Was admitted to Alexandra Hospital, Cosham, 20/8/18
from 2nd Battalion, suffering from mental disease.

C.R. 4155

Extract from National Roll Draft "A" Company
Edward G.S. "Florinel" Jan. 19th, 1910.

4155 Pte. Hopkins F.

4155

C.R.

Extract from Daily Orders Part 11 Unit The Royal
Nfld. Regt., St. John's, Nov. 26th, 1917.

4155 Pte. F.F. Hopkins.

Attested for General Service with the Nfld. Regt. with
effect from Nov. 22nd. 1917. attested at Grand Falls.

J. Hopkins

CR. 4155

R.R.O.

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.

In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

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

1. Unit and Corps. *Royal New Foundland* } Former Trade } *Grishman*
or Occupation
2. Regtl. No. *4155* 3. Rank. *Platoon* 7a. If the soldier claims previous service in Army, he should state—
4. Name *HOPKINS.* (a) Former Regts. or Corps; with Regtl. Nos.
(Surname) (Christian Names)
5. Age last birthday. *22*
6. Posted for duty on *20/26/1917* at *at St John's*
in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service (b) Date of Discharge;
(c) on duty (d) off duty? (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When (d) Particulars of Pension or Gratuity (if any)
(b) Where
(c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 a (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 general 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. *Durolancholia.*
12. Place of origin of disability. *Kezely Down. 6-4-18*
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. *sent to County of misdiagnosis war hospital, was treated 230 days. discharged with steady improvement.*

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

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

15. What is his present condition ?

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

General condition good. Has steadily improved on treatment of Tonics and Cod liver oil. and permanent light-duty.

16. Was an operation performed? If so, when and what was its nature?

na.

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

na.

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?

na.

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?

na.

20. Do you recommend—

(a) Discharge as permanently unfit?

(b) Change to United Kingdom?

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

Repatriation

W.P. Procunier, Cephalonia

Station Hazelton Down

Date 2-5-19.

Medical Officer in charge of case.

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

No. 20747

N.F.P./99.

NEWFOUNDLAND CONTINGENT

45130/H
11111

Pay & Record Office,
58, Victoria Street,
London, S.W. 1.

To:

Officer Commanding,

16-12- 1918

Chapobury War Hospital,
St. Albans

MEDICAL HISTORY SHEETS.

Kindly forward to this Office completed Medical
History Sheets relating to the following Soldiers, recently
discharged from your hospital:

4155 Hopkins S.

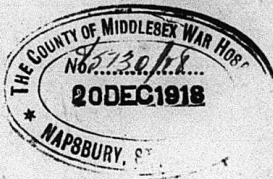
ROYAL NEWFOUNDLAND REGIMENT.

11111

J. B. Anderson
Chief Paymaster & Officer i/c Records.

From: - The O/f

THE COUNTY OF MIDDLESEX WAR HOSPITAL,
NAPSURY, ST. ALBANS.



To: - The O/f Records

Newfoundland contingent

58 Victoria St.

del!

Reference the reverse memo - A 9 B 178 for 4155 Rli
Hopkins was forwarded to O/f Unit 4: Newfoundland Regt
Army for which we hold their receipt dated the 10th inst.

NEWFOUNDLAND CONTINGENT,	
PAY & INCOME OFFICE.	
No. 1117	
REGD	
R. & C.	
B & P.	
P.S.	

[Large handwritten signature across the bottom of the form]

ad Reese

Major, R. A. M. C.,
Registrar,
The Co. of Middlesex War Hosp'l,
Napsbury, St. Albans.



H 1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Frank Hopkins, Regl. No. 4153
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
— Dollars and 50 Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{and} _{or} Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and} _{or} Persons
 concerned, viz :

Allotment begins July 1st 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3492	Father	Geo. Hopkins	Kelle Cove Swillingate	50
Total Allotment, \$				50

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

Sig.) [Signature]

Officer Commanding
 H. Company

(S) Jr Hopkins

(Rank) Pt

[Signature]

July 17 1918

Hopkins, I

4155

May 20th

The Royal Nfld. Regiment

DEMOBILIZATION

No. 415 Rank _____

Name Lupkin _____

Warned for demobilization on

JUN 10 1919

The Royal Newfoundland Regiment

Class for Demobilization:—

86

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

9.6.19

Regimental No *4155*

Name *Hopkins*

Frank

Rank

Address

T. Willingale

Present Medical Category

A.1

Recommended for:—

(a) Immediate discharge

(b) ~~Standard~~ Medical Board

Members of Board

Ret Lt Col Capt
O.C. Discharge Depot.

Madison
Senior Medical Officer

L. W. Burden
M. O. Depot

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4155 Rank Pvt. Name Hopkins W^{ms}
 Intended place of residence Trillingale

2. Occupation Fisherman
 Classification of soldier F Medical Category A

DEMOLIBILIZATION

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

Eligible for War Service Gratuity

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

Place ST. JOHN'S
 Date JUN 10 1919
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date ST. JOHN'S
JUN 10 1919
 Signature of soldier P. Hopkins
 Signature of witness W. C. Brewster

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place and Date JUN 10 1919
ST. JOHN'S
 Signature of soldier P. Hopkins
 Signature of witness James O'Brien

STATEMENT OF SERVICE

7. Enlisted for service 19-11-17 No of days on Military
 Discharged from service JUN 24 1919 Plus 14 days Service 397

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
 Date JUN 24 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 8/1919
 Officer i/c Records
 The Royal Newfoundland Regiment

a 9B2079/2781

July 8, 1919

#4155 Pte. Frederick Hopkins,
Twillingate.

Dear Sir:-

Please find enclosed Discharge
Certificate No. 2781.

Yours truly

Captain
Paymaster & O.i/c Records.

July 11, 1919

#4155 Pte. Frank Hopkins,
Kettle Cove, Twillingate;

Dear Sir:-

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

Yours truly

Captain,
Paymaster & C.i/c Records.

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..... *Frank* Surname..... *Stephens*

3. Rank..... *Rte* 4. Regt. No..... *4155*

5. Address in full to which future payments of gratuity are to be forwarded..... *Twickenham - Little Cove*

6. Date of enlistment in the Regiment..... *November 26/17*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge..... *Not applicable*

8. Relationship of such dependents..... *SO*

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

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

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

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

..... 1. $\frac{2}{3}$

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

No. applicable

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.

\$ 71.99 Clothing Co.

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*

19. Are you now serving in the Regt.? *No* If not give:- (a) date of discharge. *June 24/19*

Demobilization

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

Manchester

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

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

Signature of Applicant: *J Hopkins*

Place of Residence: *Amulungato, Kettle Cove*

Declared before me at: *St Johns road*

This *10th* day of *June* 19*19*....

John W. Gentry

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

POST DISCHARGE PAY.

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

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 1655 Rank Plt. Name Hopkins, Wm
 Date of Enlistment 19.11.17 Address Wellington District St. John's
 Occupation Postman Classification for Discharge 17 Medical Category 155
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

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

Date 9.6.19 C. Discharge Depot. Wm Hopkins

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation. Hopkins

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$60.00
- (b) ~~Clothing~~ Supplied Wm Constable

Date 10-6-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R.1633* to his home at *Swillingate* and Release Certificate No. *2572* issued.

Date

10-6-19

J.A. Snow Capt.
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to *8-19* SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT.

Date

10-6-19

J.A. Snow Capt.
Depot Paymaster.

Discharge approved for

24-6-19

Forwarded with following documents to O.C Discharge Depot.

N.F. Pj36	B 268	B 121	N.F. Med.	D.F. 1.	<i>1/2 Form B</i>
F 178	W 3494	B 122	Board 1st.	" 2.	
F 178a	D 400A	B 1915	do 2nd.	" 3.	
B 179	D 400B	Form L.	do 3rd.	" 4.	
B 179a	D 400C	Form K.	do 4th.	" 5.	
B 179b	B 103	ME 2.		" 6.	
B 179c	B 120	M 93.			

Date

10-6-19

J.A. Snow Capt.
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer in Records.
Board of Pension Commissioners.

with following additional documents

Eligible for War Service Gratuity

Date

JUN 24 1919

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

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

Date

Civil Re-establishment Committee



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

To resume former occupation

Signature of Man.

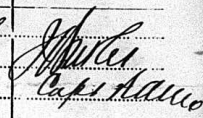
Reg. No. 4155 W Hopkins

J. A. Snow Capt.
Signature of the Vocational Officer or his Representative.

Place St Johns

Date JUN 19 1919 191

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number 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				
THE COUNTY OF MIDDLESEX WAR HOSPITAL, NAPSLEY, ST. ALBANS.	6	kt	18	22	11	18	Melanops Th	290	<i>Since depressed self absorbed unable to answer questions habits dirty Steady improvement Returned to bed</i>	 Capt. Hance

This hospital received patients under
 War Office Order of Treatment of 11th Oct
 1914, and has been assigned as
 6 for fighting from Dermatology
 for Medical purposes.
 W.H. A.



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. f. 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 *Frank Hopkins*
 Regiment from which discharged *Royal Newfoundland*
 Regimental number *4155*
 Intended address *Swillingate*
 Height on discharge *5* Feet *9*
 Color of hair on discharge *Light*
 Complexion *Fair*
 Color of eyes *Blue*
 Descriptive Marks _____
 Figure on discharge *medium*
 Christian name of Father *George*
 Christian name of Mother _____
 Wife's maiden name in full _____
 Date and place of marriage _____
 Christian names of children _____
 Place and date of soldier's birth *Swillingate. Dec 18th, 1897*
 Nature and locality of civil employment required _____

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

(Soldier's signature in full) *Frank Hopkins*

Pte

(Rank)

Station **ST. JOHN'S.**

Date *9-6-19*

I certify that the above named soldier signed the foregoing declaration in my presence, and that the above description and details are, to the best of my knowledge correct.

Station

Date



FORM K

No 4578



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Frank Hopkins, Regl. No. 2157

hereby agree, until further notification by me, and in similar official form to make an Allotment of _____ Dollars and 20 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and} _{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and} _{or} Persons concerned, viz.:

Allotment begins July 1st 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>3292</u>	<u>father</u>	<u>Geo Hopkins</u>	<u>Kelle Cove</u> <u>Sullington</u>	<u>20</u>
Total Allotment, \$				<u>20</u>

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

Sig.) Frank Hopkins

Officer Commanding
H. Company

(S) J. Hopkins

(Rank) PL

July 1st 1918

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121.
32.

Regiment of 1st New Brunswick

Number of Sheet One
Signature of O. C. Company W. J. [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>Hopkins P.P.</u>	Age on	<u>20</u> years <u>2</u> months	<u>Fisherman</u>	
Joined		Date	Place and Date of Enlistment	Religion	
Joined		Date		<u>Method</u>	
Joined		Date	Period of	with Colours <u>232</u> years. with Reserve <u>365</u> years.	Place of Birth
Joined	Date				

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<u>Demobilized P.P. Hopkins, 8/79</u>					

To be carried over

The Royal Newfoundland Regiment

94155

DEMOBILIZATION OF

Reg. No. 4155 Rank Plt Name Wm Hopkins
 Date of Enlistment 19-11-17 Address Twillingate District Twillingate
 Occupation Soldier Classification for Discharge FT Medical Category HST
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

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

Date 9-6-19 O. C. Discharge Depot. *[Signature]*

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation. *W Hopkins*

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$60.00
- (b) Clothing Supplied *[Signature]*

Date 10-6-19 O. C. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R. 1633* to his home at *Swillingale* and Release Certificate No. *2572* issued.

Date *10-6-19* *J.A. Snowlett*
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 *10-6-19* SUBJECT TO ADJUSTMENT OF PAY ACCT.

Date *10-6-19* *J.A. Snowlett*
Depot Paymaster

Discharge approved for *24-6-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1
F 173	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Form B

Date *10-6-19* *J.A. Snowlett*
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

- Officer in Records.
- Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date *JUN 24 1919* *R.H. Sait Capt.*
O. C. Discharge Depot.

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

Date *June 19/19* *J.A. Snowlett*
for O.C. Records

Reg. No. *4152* Rank *PLC* Name *Stephen Z.*
Attested Address *Kettle Lane.*
Allotment Allottee
Date of Allotment Returned from Overseas *29.1.19.*
Returned on S.S. *Corsican* Cause *Discharge*

9649
24-6-78

~~ISSUED~~ TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED ON DEMOBILISATION.