



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4888 Name Eleanor Jackson Corps Melta

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Eleanor Jackson</u> |
| 2. What is your full Address? | 2. <u>Cabana St.</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>22</u> Years <u>4</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Systeman</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, Eleanor Jackson 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.

A
3.5.18
Eleanor Jackson SIGNATURE OF RECRUIT.
James Stewart Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Eleanor Jackson 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 S. John on this 3 day of May 1918
Signature of Attesting Officer James Stewart

†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 May 3 1918
Place S. John } Approving Officer.

† 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 Eleazer Jackson
 Apparent age 22 years 4 months. Height 5 feet 4 inches
 Chest Measurement { Girth when fully expanded 37 inches
 Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Alexander Jackson
Savannah T. Bay | Relationship Father
 Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or L'epot	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>3-5-18</u>									
Joined at <u>S. P. Has</u> on <u>Moay 3-1918</u>									
<u>Discharged July 21, 1919</u>									
<u>Embarked at Has from to Halifax N.S. 11/18</u> <u>Embarked for S. P. Has 26-10-18</u> <u>Officer in charge 16-10-18</u> <u>Joined Has 3-11-18</u> <u>Embarked from Has 22-11-18</u> <u>Arrived New Center 23-1-1919</u> <u>Embarked from New Center for demobilization 22-5-1919</u> <u>Arrived to a hospital 2-6-1919</u>									
Total Service forfeited as above <u>Demobilization S. P. Has 2-7-1919</u>									
Total Service towards Engagement to <u>2-7-1919</u> (date of discharge)									
Pensions									

C.R. 4888

Extract from Daily Orders Part II Unit The Royal WFLD. -
Regt. St. John's, July 4th, 1919.

The discharge of the undernoted on demobilisation has been
APPROVED by C.O. Discharge Depot with effect from 2-7-19.

4888 Pte. Eleazer Jackson.

C.R. 4888

Extract from Daily Orders Force 22 Unit: The Royal WFLD.
Regt. St. John's on June 9th, 1918.

The discharge of demobilization of the interested has
been APPROVED by C.C. Discharge Regt with effect from
16
18-4-18.

4888Pts. Pte. E. Jackson.

C.R. 4888

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

Date June 7th 1919

4888 Pte. E. Jackson

Reported at Headquarters 1-6-19.

NR "Corsican"

which sailed Liverpool May 22/1919.

C.R. 4888

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

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

#4888 Pte. E. Jackson.

C.R. 4888

Extract from Daily Orders Part II Unit The Royal Wfld. Regt
By Lt. Col. T.G. Mathias, D.S.O. Commanding 1st Bn. 3-11-16

The following joined the Battr. 3-11-16

4888 Pte. E. Jackson.

D Coy.

C.R. 4888

Extract from Serial Roll re-inforcement Draft No. 55: Amherst Falkson,
26/10/18, from 2nd Batta, Royal Newfoundland Regiment, Hasley Down Camp,
Winchester, to 1st Batta, Royal Newfoundland Regiment, E.A.F.

4888 Pte. Jackson H.

EE.

BLANDFORD 150

STRENGTH & QUALITY

C.R. 4888

Extract from Daily Orders Part 11, from Unit The Royal Nfld.
Regiment, St. John's, dated June 14th 1918.

4888 Pte E. Jackson

Embarked for Overseas with draft 11-5-18.

C.R. 4888

Extract from Daily Orders part 11, from Unit The Royal
Newfoundland Regiment, St. John's, dated May 4, 1918.

#4888 Pte. Ebenezer Jackson.

Attested for General Service with the Royal Nfld. Regt.
from 1/5/18.

E Jackson

C.R.

4888

100

Medical Report on an Invalid.

Station Hazelton New Camp
Date 1 - 5 - 19

1. Unit Royal Newfoundland
2. Regimental No. 4888
3. Rank Pte
4. Name Jackson E. Leary
5. Age last birthday 22
6. Enlisted on May 2/13
at St John's
7. Former Trade } Tradesman
or Occupation }
- 7a. If with previous service in Army, state—
(a) Former Unit ;
(b) Regimental No. ;
(c) Date of Discharge ;
(d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

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

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

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

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

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

13. What is his present condition?

See complaint of his disability

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

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

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

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

If so—(a) When?

(b) Where?

(c) Opinion?

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

na

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

na

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

na

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

na

Repatination

20. Do you recommend—

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

W. E. Proctor

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

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

Station *Hazley Down*

Officer in charge of Hospital.

Date *1-5-19*

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

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

To:- The Chief Paymaster,
Royal Newfoundland Regiment,
58 Victoria Street,
London, S.W.

Sir:-

Please charge the amount set opposite my name to my account and pay it to the N.W.C.A. "Prisoners of War Fund" in quarterly instalments for the period of the year.
Commencing on the 1st July 1918.

Regtl. No.	Rank	Name	Amount	Signature
4888	Lt	Jackson E	£250	E Jackson

Date July 1/18

I have the honour to be, Sir,
Your obedient servant.

E Jackson

No. 4289/165

From: NEWFOUNDLAND

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

N.F.P./80.
CHIEF PAYMASTER & O.I/c RECORDS.
NEWFOUNDLAND CONTINGENT,
To: 58 Victoria Street,
1/Bn. Royal Newfoundland Regt.
ENGLAND.
B.E.F.

17th March 1919

4888 Pte. Jackson E.

With reference to the following telegram from the Minister of Militia / / (81)

"Pay to- 4888 Jackson
£4. 0..0.

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.

H. A. [Signature]
Chief Paymaster & O. I/c Records.

29-3-1919
4888 Pte E. Jackson
PAY & RECORD OFFICE

This man wishes this amount retained to the credit of his account please

A. J. [Signature]
LIEUT. COL.

COMMANDING 1st Bn. ROYAL NEWFOUNDLAND REGIMENT

*Deposited
E.W. 16/3/19 E.W.*

Jackson, E

4888

3
Pay Capt

July 2, 1919

#4688 Pte Eleazar Jackson,

Cavendish, T.B.

Dear Sir:-

Referring to your application

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

Yours truly

Captain,
Paymaster & O.i/c Records.

460

DEPARTMENT OF MILITIA.
WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claim War Service Gratuity under Order-in-Council dated January 28th. 1918.

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.

1. Christian name *Elexzer* 2. Surname *Jackson*

3. Rank *Pte* 4. Regt. No. *4888*

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

6. Date of enlistment in the Regiment. *May 2/18*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued immediately prior to your discharge.
No

8. Relationship of such dependents.
No

9. Address in full of such dependents.

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

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

12. Give total length of time which you served on active service, whether in field or overseas. *From May 2/18 to June 11/19 date of temporary discharge*

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.
Clothing allowance back pay 86.19

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.?..... If not give:- (a) Date of discharge *June 5/19* (b) Reason for discharge *Demobilization*

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service.
France, Belgium & Germany - In an actual fighting

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: *his* **Eleazer Jackson**
 Place of Residence: *Mark T. P.* **Cavenish T. P.**
 Declared before me at: **St. John's, Nfld**
 This **5th** day of **June** 19**19**
John W. [Signature]

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

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

July 2, 1919

#4868 Pte. Klenzer Jackson,
Cavendish, T.B.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 2263."

Yours truly

Captain,
Quartermaster & O.I/c Records.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4855 Rank Pte Name Jackson E.
 Intended place of residence Carleton Place

2. Occupation Intermar
 Classification of soldier E Medical Category AZ

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

Eligible for War Service Gratuity

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

Place ST. JOHN'S
 Date JUN 4 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 4 1919
 Signature of soldier
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date ST. JOHN'S
3-6-19
 Signature of soldier
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 3-5-18 No of days on Military
 Discharged from service 18-6-19 Plus 142 days Service 426

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 18 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, Nfld.
 Date July 2 1919
 Officer i/c Records
 The Royal Newfoundland Regiment

AD 13 2079/2263

The Royal Newfoundland Regiment

Class for Demobilization:—

F

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *4-5-19*

Regimental No. *4888 Jackson*

Name ~~Jackson~~ *Elmer* *Plt.*

Address *Cardinal*

Present Medical Category..... *A1*

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

Members of Board

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

Ransom
.....
Senior Medical Officer

D.W. Burden
.....
M. O. Depot

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 4358 Rank Plt Name Jackson E
 Date of Enlistment 3.5.16 Address Presidents District Trinity
 Occupation Fisherman Classification for Discharge E Medical Category AI
 Recommendation S.M.B. _____ Disability Rating _____
 Passed to Demobilization Officer with following documents:—

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

Date 4.1.49 O. C. Discharge Depot H.M.S. Lant

PARTICULARS FOR DEMobilIZATION

i. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with

(a) Clothing Allowance payable. £60.00

(b) Clothing Supplied 1 new cap

Date 4.6.49 O. i. c. Re-clothing _____

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R. 14.05 to his home at Govardish and Release Certificate No. 2267 issued.

Date

4-6-19

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 1-7-19

Date

4-6-19

H. M. ...
Depot Paymaster.

Discharge approved for

19-6-19

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

N.F. P126	B 298	B 181	N.F. Med.	D.F. 1	1
F 178	N.W. 3894	B 182	Board 1st	" 2	1
F 178a	D 400A	B 1915	do 2nd	" 3	2 Form B.
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B 179c	B 120	M 93			

Date

4-6-19

J.A. Snow Capt.
Demobilization Officer.

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. 18 1919

R.H. Jait 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

^{Mr}
^X
E. Mark Jackson
Signature of Member
Wm. W. H. H. H.
Reg. No. 4888

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

Place St Johns.

Date 4-6-1919

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

MEDICAL HISTORY

Surname Jackson OF Christian Name Clayton

Table I.—GENERAL TABLE.

Birthplace:—Parish Camden, T.B. County Nfld.

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	on	<u>3rd</u> day of <u>May</u>	on	day of
		191 <u>8</u>		191
Declared Age.....	at	<u>St John's, Nfld.</u>	at	
		<u>22 7/2</u> years — days		years days
Trade or Occupation		<u>Fisherman</u>		
Height		<u>5</u> feet <u>4</u> inches		feet inches
Weight		<u>143</u> lbs.		lbs
Chest Measure- ment {	Glth when fully expanded....	<u>37</u> inches		inches
	Range of Expansion..	<u>4</u> inches		inches
Physical Development... ..				
Vaccination Marks {	Right	Left	Right	Left
	Arm			
Number				
When Vaccinated				
Vision	R.E.—V=	<u>6/10</u>	R.E.—V=	
	L.E.—V=	<u>6/10</u>	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved By (Signature)	<u>Wm. B. Brown</u>			
(Rank)	<u>Major</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at	<u>St John's, Nfld.</u>	at	
	on	<u>3rd</u> day of <u>May</u>	on	day of
		191 <u>8</u>		191
	Corps.	Regtl. No.	Corps	Regtl. No.
Joined on Enlistment... ..		<u>The Royal Nfld Regt.,</u>		
		<u>4888</u>		
Transferred to... ..				
Became non-effective by	on	day of	on	day of
		191		191
(Signature)				
(Rank)				

Medical Report on an Invalid.

Station Hazelton
 Date 1/5/19
 1. Unit Royal Newfoundland
 2. Regimental No. 4888
 3. Rank Sole
 4. Name Jackson Cleeger
 5. Age last birthday 22
 6. Enlisted { on May 4/18
 at St John's
 7. Former Trade or Occupation } fisherman
 7A. If with previous service in Army, state—
 (a) Former Unit;
 (b) Regimental No.;
 (c) Date of Discharge;
 (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

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

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

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

no
 no
 no
 nil

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

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

nil.

13. What is his present condition?

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

the complaints of his disability.

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

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

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

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

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

na.

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

na.

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

na.

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

na.

20. Do you recommend—
(a) Discharge as permanently unfit, or
(b) Change to England?

Repatriation

W. P. Proemier

Capt Ram. C.

Officer in medical charge of case.

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

Station *Hazeley Down*

Officer in charge of Hospital.

Date *1/5/19*

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

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



Descriptive Return of a Soldier Discharged on Account of Disability

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

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

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

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

Name in full *Ebazer Jackson*

Regiment from which discharged *Royal Newfoundland*

Regimental number *488*

Intended address *Canendish 200*

Height on discharge *5* ^{feet}

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks —

Figure on discharge *Medium*

Christian name of Father *Alexander*

Christian name of Mother *Elizabeth*

Wife's maiden name in full —

Date and place of marriage —

Christian names of children —

Place and date of soldier's birth *Canendish, 20th Dec, 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) *Ebazer Jackson* *Pte.*

W. B. E. O'Keefe (Rank)

Station *St John's* Date *4-6-18*

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.

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

Station

Date

ACCOUNT	<i>Newsp</i>	INITIAL	
CH. NO.	<i>6195</i>	INITIAL	<i>JS</i>
IND. LEDGER		INITIAL	
PAY LEDGER	<i>Newsp</i>	INITIAL	
GEN. LEDGER		INITIAL	

May 3rd. 1918.

The Royal Newfoundland Regiment.

4888
To E. Jackson, (Recruit).

To passage from Cavandish to St. John's.

\$2.60.

his AS per voucher).

E. X Jackson
mark

CERTIFIED CORRECT

OK
James



REID-NEWFOUNDLAND COMPANY.

PASSENGER DEPARTMENT.

AGENTS', CONDUCTORS' & PURSERS' RECEIPT.

Received from

Dollars

Cents, being the amount of

the sum of

Class Fare

From

and have issued him Ticket No.

Form No.

Date

191

Agent, Conductor or Purser

This form to be used when requested to give receipt for amount paid for tickets.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121
39

Number of Sheets 011

Regiment of Boys Newfoundland

Signature of O. C. Company G. James

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>4888 Jackson 2</u>	Age on	<u>20</u> years <u> </u> months	<u>Fisherman</u>	
Joined		Place and Date of Enlistment	<u>St. John's</u> <u>3.5.18.</u>	Religion <u>Method.</u>	
Joined		Date	Period of) with Colours <u>16</u> years. with Reserve <u>36</u> years.	Place of Birth <u>Cavendish Bay</u>	
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</u>	<u>St John's</u>	<u>3/19</u>			

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

DEMOLIBIZATION OF

Reg. No. 4888 Rank Plt Name Jackson E
 Date of Enlistment 3.5.16 Address Cherryfield District Trinity
 Occupation Fisherman Classification for Discharge E Medical Category A I
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:-

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1.
B 178	W 3494	B 122	Board 1st	" 2.
B 178a	D 400A	B 1915	do 2nd	" 3. <u>3</u>
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 92		

Date 4.6.19 for O. C. Discharge Depot. H. M. S. Grant

PARTICULARS FOR DEMOLIBIZATION

1. Civil Re-Establishment.

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

E. H. Jackson
W. G. Galois

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 new cap

Date 4-6-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *Re. 14.05* to his home at *Govanandish* and Release Certificate No. *2267* issued.

Date *4-6-19* *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 *1-7-19*

Date *4-1-19* *J.A. Snow Capt*
Depot Paymaster.

Discharge approved for *18-6-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 298	B 181	N.F. Med.	D.F. 1
B 178	W 349	B 123	Board 1st	" 2
B 178a	D 400A	B 1015	do 2nd	" 3 <i>Form B</i>
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 *4-6-19* *J.A. Snow Capt*
Demobilization Officer.

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 18 1919* *R.H. Sait Capt*
O. C. Discharge Depot.

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

Date *June 10 1919* *Inspector of Records*

Reg. No. 4884 Rank Pfc. Name Jackson, E.
Attested Address Cavalry
Allotment Allottee
Date of Allotment Returned from Overseas 1.6.19.
Returned on S.S. Russian Cause Discharge

4.6.19.
14.6.19.

PASSED TO DEMOBILIZATION CENTER
APPROVED IN DEMOBILIZATION CENTER