

**FIRST NEWFOUNDLAND REGIMENT**

**ATTESTATION OF**

No. 3223 Name Wm. J. James Corps New

**Questions to be put to the Recruit before Enlistment.**

1. What is your name? ..... 1. Wm. J. James
2. What is your full Address? ..... 2. St. John's
3. Are you a British Subject? ..... 3. yes
4. What is your age? ..... 4. 20 Years 9 Months
5. What is your Trade or Calling? ..... 5. Paper Mason
6. Are you Married? ..... 6. no
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,\* which? ..... 7. no
8. Are you willing to be vaccinated or re-vaccinated? ..... 8. yes
9. Are you willing to be enlisted for General Service? ..... 9. yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? ..... 10. { Name .....  
Corps .....
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... 11. yes

I, Wm. J. James 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.

Wm. J. James SIGNATURE OF RECRUIT.

Wm. J. James Signature of Witness.

**OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.**

Wm. J. James 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 subscribed 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 9 day of Nov 1915

Wm. J. James Signature of Attesting Officer Chas. A. ...

**† 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 ..... 1915 } Approving Officer.  
Place .....

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

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



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 3223 Name Wm J. Jones Corps Net

### Questions to be put to the Recruit before Enlistment.

1. What is your name? ..... 1. Wm J. Jones
2. What is your full Address? ..... 2. St. John's
3. Are you a British Subject? ..... 3. yes
4. What is your age? ..... 4. 20 Years 9 Months
5. What is your Trade or Calling? ..... 5. paper maker
6. Are you Married? ..... 6. no
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so, which? ..... 7. no
8. Are you willing to be vaccinated or re-vaccinated? ..... 8. yes
9. Are you willing to be enlisted for General Service? ..... 9. yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? ..... 10. { Name .....  
Corps .....
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... 11. yes

I, Wm J. Jones 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.

Wm J. Jones SIGNATURE OF RECRUIT.

5 Nov 14 Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Wm J. Jones 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 recorded as replied to, and the said recruit has made and signed the declaration and taken the oath before me at ..... on this 9 day of Nov 1914

Signature of Attesting Officer Chas. Aye

### 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 ..... 1914 Place ..... } Approving Officer.

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

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

# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 3223 Name Wm J. James Corps Nett

### Questions to be put to the Recruit before Enlistment

1. What is your name? ..... 1. Wm Joseph James
2. What is your full Address? ..... 2. 20 Whitehouse
3. Are you a British Subject? ..... 3. Yes
4. What is your age? ..... 4. 20 Years 9 Months
5. What is your Trade or Calling? ..... 5. Paper Maker
6. Are you Married? ..... 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so, which? ..... 7. No
8. Are you willing to be vaccinated or re-vaccinated? ..... 8. Yes
9. Are you willing to be enlisted for General Service? ..... 9. Yes
10. Did you receive a Notice, and do you understand its meaning, and do you give 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, Wm J. James 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.

William James SIGNATURE OF RECRUIT.

5 Nov 9/16 Wm J. James Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Wm J. James 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 explained as replied to and the said recruit has made and signed the declaration and taken the oath before me at Nett on this 9 day of Nov 1915

Signature of Attesting Officer Chas. Aye

### †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 ..... 1915 } Approving Officer.  
Place .....

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

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



## DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Wm. J. Jones  
 Apparent age 20 years 9 months. Height 5 feet 7 1/2 inches  
 Chest Measurement { Girth when fully expanded 35 inches  
 Range of expansion 3 inches  
 Distinctive marks \_\_\_\_\_

### INFORMATION SUPPLIED BY RECRUIT

Name and address of next of kin Mr. George Jones  
Smith Sound | Relationship father

#### Particulars as to Marriage

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

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

#### Particulars as to Children

Christian Names	Date and Place of Birth

### STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service to be 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>9-11-16</u>									
Joined at <u>St. Peter's</u> on <u>November 9</u> <sup>16</sup> / <sub>16</sub>									

Accepted. Arrived Sep 5 1918

Embarked St. Peter's S.S. Hospital to Winchester N.S. 31-17  
for 15th 11-6-17 Disembarked France 12-6-17 Joined Battalion 2-7-17  
November 16-5-17 Admitted 61 CAS. S.M. back to depot 2-5-17 Invalided 11-17  
Admitted 3 London Trench Hospital Bandenack 4-9-17 Surgeon the attached Regt. depot 8-24  
Embarked for 15th 6-4-18 Disembarked Rouen 10-4-18 Transferred to 11th 20-4  
to 14th 2-5-18 Admitted 5th L.I. Bandenack 6-5-18 Surgeon  
to 14th 6-18 to Langford-down for discharge 21-7-18 Arrived Langford-down 4-8-18

Discharged medically unfit 5-9-18

Total Service forfeited as above \_\_\_\_\_

Total Service towards Engagement to 5-9-18 (date of discharge) 1 years 301 days

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Wm. J. Jones  
 Apparent age 20 years 9 months. Height 5 feet 7 1/2 inches  
 Chest Measurement { Girth when fully expanded 35 inches  
 Range of expansion \_\_\_\_\_ inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and address of next of kin

Smith Jones

Relationship father

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names

Date and Place of Birth

## STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve and allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	

Service towards limited engagement reckons from 9-11-16  
 Joined at 1st Depot on November 9 16

Discharged: Apolis Sep 5 1918  
Embarked for 1st Lt. 11-6-17 1st Depot to 1st Depot 11-31-17 Embarked for 1st Lt. 12-6-17 1st Depot to 1st Depot 2-7-17  
Wounded to 8-17 Admitted 1st Depot to 1st Depot 8-17 Admitted 1st Depot  
Admitted 1st Depot to 1st Depot 4-9-17 Embarked for 1st Depot to 1st Depot 8-17  
Embarked for 1st Lt. 6-4-18 1st Depot to 1st Depot 10-2-18 Embarked for 1st Lt. 30  
to 1st Lt. 2-5-18 Admitted 1st Depot to 1st Depot 11-5-18 Embarked for 1st Lt. 2-7-18  
to 1st Lt. 2-7-18 Embarked for 1st Lt. 2-7-18 to 1st Lt. 2-7-18

Discharged Regularly 15-9-18

Total Service forfeited as above

Total Service towards Engagement to 5-9-18 (date of discharge) 1 years 301 days

Pensions \_\_\_\_\_



This Form is to be used in connection with Pamph. M. E. (1)  
M. P. 1915

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix.  
Care should be exercised that each finding be entered after the number below which corresponds to the number  
of that test.

Examination of William Jones.  
aged 20 years 7 months conducted at Le P.B.  
Date: Nov 9<sup>th</sup> 1916. Recruiting Officer:

NO OF TEST	FINDING
1	no
2	no
3	no
4	no
5	no
6	no
7	yes
8	yes
9	no - no
10	n
11	n
12	n
13	n
14	n
15	n
16	n
17	n
18	n
19	6/9 Lt 6/12 st.
20	n
21	n
22	n
23	n
24	n
25	n
26	n
27	n
28	n
29	n
30	n
31	n
32	n
33	no
34	5' 7 1/2"
35	110 lbs - <u>iris put on weight</u>
36	32" 35"
37	1 1/2 pints per day
38	Father <u>Mr A. Jones Smith's Found. P.B.</u>
39	none

*Di*

Signature of Medical Examiner: Geo Borden

C.R. 3223

Extract from Daily Orders ~~Part~~ 11 Unit The Royal Wfld.  
Regt., St. John's, Nov. 9th, 1916.

3223 Pte. Wm. Janes.

Attested 8-11-16 posted to D. Co.

C.R. 3223

Extract from Nominal Roll Draft embarked St. John's per  
S.S. "GRAMPIAN" 31/1/17 sailed Halifax 16/4/17.

3223 Pte. W. Janes.

C.R. 3223

Extract from Nominal Roll of Draft No. 28: Embarked Southampton 11/6/17  
from 2/1st Newfoundland Regiment Newton-on-Ayr, to 1/1st Newfoundland  
Regiment B.E.F.

3223 Pte. Janes, W.J.

# NEWFOUNDLAND POSTAL TELEGRAPHS.



## Cable Connection with all the World

### All Messages Sent are Subject to the Following Conditions:

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

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

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

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

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

(NOT TRANSMITTED)

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

Line Number	Red	By	Sent	by	Check

Dated August 27, 1917.

To Mr. Ambrose Janes,

Smith Sound, T.B.

Regret to inform you that Record Office

London, officially reports

No. 3223, Private

William J. Janes, was wounded August sixteenth.

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

JOHN R. BENNETT  
XXXXXXXXXXXXXXXXXXXX

R.A. SQUIRES

Colonial Secretary.

C.R. 3522

3225 Pte. William J. Janes. ✓

Ext. of Casualty list received Aug. 29th 1917.  
Previously reported wounded Aug. 16th Now re-  
ported, 53rd General Hospital, Boulogne, Aug. 22nd  
G.S.W. neck and Chest, severe.



## NEWFOUNDLAND POSTAL TELEGRAPHS.



## Cable Connection with all the World

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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.

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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	Red	By	Sent	by	Check

Dated

August 29, 1917.

To

Mr. Ambrose Janes,  
Smith Sound.

Record Office, London, today reports No. 3223,  
Private William J. Janes, at Fiftythird General Hospital,  
Boulogne, August twentyssecond, suffering from severe  
gunshot wounds neck and chest.

R.A. SQUIRES

Colonial Secretary

C.R.:

3223

Extract from Daily Orders part II, Unit  
Newfoundland Regiment from C.M.C. Ser.  
Scholar dated Sept. 22nd. 1917.

#3223 Pte. W. Jones.

Invalided to England

11/9/17 Wounded.

**NEWFOUNDLAND POSTAL TELEGRAPHS.****Cable Connection with all the World****All Messages Sent are Subject to the Following Conditions:**

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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 \_\_\_\_\_

Red \_\_\_\_\_

By \_\_\_\_\_

Sent \_\_\_\_\_

by \_\_\_\_\_

Check \_\_\_\_\_

Dated

September 14, 1917.

To

Mr. Ambrose Janes,

Smith Sound, T.B.

Record Office, London, today reports  
 No. 3223, Private William J. Janes, has now  
 been admitted to Wandsworth.

R.A. SQUIRES

Colonial Secretary

# NEWFOUNDLAND POSTAL TELEGRAPHS.



## Cable Connection with all the World

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I request that the following Telegram 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 15th September, 1917.

To Mr. Ambrose Janes,  
Smith Sound, T. B.

Replying my enquiry Record Office London today reports  
No. 3223, Private William J. Janes progressing favourably.

R. A. SQUIRES,  
Colonial Secretary.

C.R. 3223

Extract from Nominal Roll B.N.F. Embarked "Southampton"

6-4-18.

3223 Pte. James, W.J.

CR. 3123

Extract from Daily Orders part 11, from Unit The Royal  
Hfl Regt. in the field, dated May 4, 1918.

The following man is transferred to England Class "B"  
April 30, 1918

#3223 Pte. W. Jones.

C.R. 3223

EXTRACT OF CASUALTY RECEIVED FROM PAY & RECORD OFFICE  
LONDON, dated 6/6/18

O.C. 3rd London General Hospital , S.W. 18 Reports  
5/6/18.      DISCHARGED 5/6/18 Furlough to 14/6/18

No. 3223, Private W. Janes. Fit for 111 Emp. (Cat. B 3)

C.R. 3223

Extract from Daily Orders Part 11 Depot, St. John's dated 17/9/18.

~~3~~3223 Pte. W. J. Janes.

Having been found medically unfit is discharged from 5-9-18.

---



C.R. 3223

Extract from list of men of the Royal Newfoundland Regiment  
discharged on various dates.

3223 Pte. W.J.Janes,

Discharged 5 - 9-118, Medically unfit

C.R. 3223

Extract from Daily Orders part 11, from Unit The Royal  
MFL Reg. St. John's, dated August 5th, 1918.

The following men returned from overseas and reported  
at Depot August 4th.

#5225 Pte. W.J. James.

C.R. 3223

COFT

Extract from Daily Orders Part 11 Unit The Royal WFL.  
Regt. St. John's, dated August 19, 1918.

3223 Pte. W.J. ~~Jahn~~.

Returned from leave and reported at Headquarters for  
Duty 19-8-18.

W. J. James

C.R. 3223

~~W. J. James~~

*Original*

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. <u>3723.</u>	Army Rank <u>Private</u>																		
Name <u>James William</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>																			
Corps <u>ROYAL NEWFOUNDLAND REGIMENT.</u>																			
Regiment, Battery, Company, Det., &c. <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &amp;c., or to General Staff of the Army, it should be so stated.)</small>																			
Date of discharge _____																			
Place of discharge _____																			
1. <span style="float: right;">Description at the time of discharge.</span>																			
Age <u>22</u> years _____ months Height <u>5</u> feet <u>7</u> inches Chest measure { girth when fully expanded _____ ins. range of expansion _____ ins. Complexion <u>fresh</u> Eyes <u>Brown</u> Hair <u>Brown</u> Trade _____	Descriptive marks.  <div style="font-size: 2em; text-align: center; margin-bottom: 10px;"><i>l.s.w. Back</i></div> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: center;">COPIES SENT</th> </tr> <tr> <th style="width: 33%;">TO</th> <th style="width: 33%;">NO.</th> <th style="width: 33%;">DATE</th> </tr> </thead> <tbody> <tr> <td>M. OF M.</td> <td><u>12004/100</u></td> <td><u>26 JUL</u> 1918</td> </tr> <tr> <td>G.C. TR. BN.</td> <td><u>240 BN</u></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>	COPIES SENT			TO	NO.	DATE	M. OF M.	<u>12004/100</u>	<u>26 JUL</u> 1918	G.C. TR. BN.	<u>240 BN</u>							
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TO	NO.	DATE																	
M. OF M.	<u>12004/100</u>	<u>26 JUL</u> 1918																	
G.C. TR. BN.	<u>240 BN</u>																		
Intended place of residence (To be given as fully as practicable) <u>Trinity Bay, South Island, Antigua, Newfoundland.</u>																			
<small>(The measurements and description should be carefully taken on the day the man leaves the 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.)</small>																			
2. The above-named man is discharged in consequence of _____																			
<small>(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.)</small>																			
3. Military character:— _____																			
4. Character awarded in accordance with King's Regulations:— _____																			
<div style="display: flex; align-items: center;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-size: 0.8em; margin-right: 5px;">To be filled in on the soldier quitting the Colours.</div> <div style="border: 1px solid black; flex-grow: 1;"></div> </div>																			
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 429 was awarded in this case.																			
Initials of Commanding Officer. _____																			
Army Form B. 2088 has been issued to* _____																			

Original

Medical Report on an Inval. *Reclassified*  
3rd London General Hospital  
WANDSWORTH, S.W.



21/5/18

1. Unit *11th N. Newfoundland* 7. Former Trade } *Paper maker*  
2. Regimental No. *3223* 8. If with previous service in Army, state—  
3. Rank *Plt* (a) Former Unit;  
4. Name *James H.* (b) Regimental No.;  
5. Age last birthday *22* (c) Date of Discharge; *no*  
6. Enlisted { on *22 October 1916* (d) Cause of Discharge.  
at *St Johns*

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 12)

*G. S. W. Back*

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TO	NO.	DATE
M. OF M.		
O. C. 1ST. BN.		
2ND BN.		

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. *16th August 1917*
10. Place of origin of disability. *Steinbeck*
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.  
*Plt received a penetrating wound in the back - in region of 11th intercostal space. The wound was healed & it appears (no evidence as to loss) that he had slight haemiplegia for about 4 weeks & was in bed for 3 months - no sp. performed. X-ray reveals the presence of bullet in the body of 11th thoracic vertebra. He was sent to the depot bag company of 1918 & returned to France the beginning of April 1918 & was unable to carry on duty there was sent back to England the end of April. He has been sent up from depot this time for reclassification.*
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). *G. S. W.*
  - (b) constitutional or hereditary, and not aggravated by service during the present war. *Active Service.*
  - (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, etc.

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.

Wound healed; slight numbness to be heard over scar. Pt. unable to do much in the way of lifting heavy weights, & so unable to do work

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

(a) In action? *yes*

(b) On field service? *yes*

(c) On duty? *yes*

(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? *—*

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

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?

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.

Explain scars in rt. upper arm - the result of a machinery accident before he joined the Colours.

20. Do you recommend—

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

Reclassification.

*S. A. ... Lt.*

Officer in medical charge of case.

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

except †  
3rd London General Hospital,  
Station WANDSWORTH, S.W.

*H. E. ...*

Officer in charge of Hospital.  
Col. A.M.S.

Date *24/5/18.*

Comdg. 3rd London Gen. Hospital.

\*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.

Opinion of the Medical Board.

NOTE.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the 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.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is, (a) caused or aggravated by service in the present war, (b) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease 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.

(iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

1. (a.) State whether the disability is clearly attributable to—

(i.) Service during the present war ;

(ii.) Climate ;

(iii.) Ordinary military service ;

(iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or

(v.) Whether it is constitutional or hereditary.

(b.) If due to one of the first three of these causes, to what specific conditions do the Board attribute it?

22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which?

23. Is the disability permanent?

24. If not permanent, how soon do the Board recommend re-examination?

25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.

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

27. Do the Board recommend—

(a) Discharge as permanently unfit, or

(b) Change to England?

28. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic training) is desirable in a—

(a) Sanatorium;

(b) Hospital;

(c) Convalescent home;

(d) Asylum; or

(e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended?

30. Does the man require the constant attendance of another person?

Yes  
-  
No  
No  
G. S.  
-  
Yes.  
-  
60.

✓  
This is - relieved - about 13<sup>th</sup> 11<sup>th</sup>

~~3rd London General Hospital~~

Station WANDSWORTH, S.W.

Date 4. 11. 18

~~3rd London General Hospital~~

Station WANDSWORTH, S.W.

Date \_\_\_\_\_

*Thomas Davis* President.  
*P. A. Davies* M.B. Members.

Administrative Medical Officer.



*English*

Medical Report on an Invalid.

Station *Hagley Down Camp.*  
Date *5-7-18*

- 1. Unit *2nd Batt. Royal Newfoundland*
- 2. Regimental No. *3223*
- 3. Rank *Private*
- 4. Name *JAMES WILLIAM JOS.*
- 5. Age last birthday *21 years*
- 6. Enlisted *on November 1916*  
*at St. John's Newfoundland*
- 7. Former Trade or Occupation *Paper maker*

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).

*Low Back.*

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M. of M.	<i>1200/18</i>	<i>26 JUL 1918</i>
O.C. 1st Bn.		
" 2nd Bn.		

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. *16 August 1917.*
- 10. Place of origin of disability. *Steer beam.*
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. *He states that he received shells in back; when he awakes is still there.*

*Vide AF B 178.*

- 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.

*wounded on active service*

*na.*

*na.*

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.

There is a small scar on  
to 2nd in post. lateral lid.  
Dullness in percussion and diminished  
breath sounds in that side. He is  
unable to do any kind work without being  
extremely fatigued. Dyspnoea. and  
Cyanosis.

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

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

na.

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

If so—(a) When?

(b) Where?

(c) Opinion?

na.

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

no

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

not advised.

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?

Discharge as permanently unfit for  
Active service

D.P.R.

Capt R.A.H.C.

Officer in medical charge of case.

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

Station \_\_\_\_\_

Officer in charge of Hospital.

Date \_\_\_\_\_

\*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.

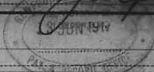
To be used only for Special Reserve Recruits, and for Special Reservists calling into the Regular Army

# MEDICAL HISTORY

Surname James

Christian Name Wm Joseph

Table I.—GENERAL TABLE.



Birthplace:—Parish \_\_\_\_\_ County \_\_\_\_\_

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	at	on	at
Examined	9 Nov 191	St. John's	day of	191
Declared Age	20 years 9 mos	days	years	days
Trade or Occupation	paper-maker.			
Height	5 feet 7 1/2	inches		
Weight	110	lbs.		
Chest Measurement	Grith when fully expanded	35	inches	
	Range of Expansion	2	inches	



Vaccination Marks	Right		Left	
	Arm	Number	Arm	Number
When Vaccinated				

Vision R.E.—V= 6/12 L.E.—V= 6/9



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G.C.—1st. Bn.		
" 2ND Bn.		

(a) Marks indicating congenital peculiarities or previous diseases

(b) Slight defects but not sufficient to cause rejection

Approved by (Signature) Samuel Paterson  
(Rank)

Medical Officer

Enlisted at St. John's on 9 day of Nov. 191

Joined on Enlistment 3/11/18 Corps 1st Newfound Regt. No. 3223

Transferred to 1st Newfoundland

Became non-effective by \_\_\_\_\_ on \_\_\_\_\_ day of \_\_\_\_\_ 191

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

Table II.—Only for admission to hospital or to the sick

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on syphilis, admission of treatment
	Day	Month	Year	Day	Month	Year			
3 <sup>RD</sup> LONDON GENERAL HOSPITAL WANDSWORTH.	12	9	17	25	11	17	(Shrapnel) G. S. W. L neck slight. R chest severe not penetrating	28	

in case of Warrant Officers treated in quarters.

the cause, nature or treatment of the case likely to be of interest or of future use. In cases of readmission to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.

Signature of Medical Officer

Wounded in France 16.8.17. F.B  
in awkward position in front of spine and  
removed.  
30 furl.

G.C. Hall  
Capt Med.

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

Date	Brief Details, and Signature
<del>5-1-17</del> 5-1-17	Vaccination <i>SP</i>
21-11-16	} <i>TAB. SP.</i>
25-11-16	} <i>S SP</i>
9-1-17	} <i>SP</i>
26 3 18.	<i>TNS. DON. 17. Capt. Rome.</i>
27 JUN 1918	<i>Boarded at Hazelton Camp Marked E Category</i> <i>Wp. P. name</i> <i>Wp. name</i> <i>Wp. name</i> <i>Wp. name</i>

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
<i>J.S. Hengel</i> <i>Windsor MS</i>	<i>31-1-11</i>	<i>3-2-11</i>			
	<i>3-2-11</i>				

Fold Here

---

**ON HIS MAJESTY'S SERVICE**

To the Officer in Charge of Records,

The Royal Nfld Regt.

Dept of Militia.

St. John's Nfld.

---

Fold Here



July 5th. 1921. 1919.

The accompanying King's Certificate, on his discharge,

(No. 1115), is forwarded herewith to

William J. James,

in respect of his service as No. 3223 Rank Prte.

Name Wm. J. James, Corps Royal Hfld Regt.

Receipt of the same should be acknowledged hereon.

Received Certificate

Signature William J. James

Date Aug. 23rd/21 H. J.

Address Grand Falls



**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 Commissioners of Chelsea Hospital.  
Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and the soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent discharge depends on his confirming this statement. 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, to be presented by the Officer in Charge when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Chelsea Hospital, Chelsea, London, S.W.1.  
Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.



**A Name in full** James Hillier  
**Regiment from which discharged** 11<sup>th</sup> Royal Hussars  
**Regimental Number** 3223  
**Where born (Parish, Town and County), and when** Trinity Bay South Sound  
**Intended address** Britannia Terr. Dept 9/11/95  
 Trinity Bay South Sound, Britannia Terr Dept  
**Height on discharge** 5 Feet 7 Inches  
**Colour of Hair on discharge** Brown  
**Colour of Eyes** Brown  
**Descriptive marks** 9/10 Back  
**Complexion** Fair  
**Figure on discharge** medium  
**Christian name of Father** James Ambrose  
**Christian name of Mother** Mary Ann  
**Wife's Maiden name in full**  
**Date and Place of Marriage**  
**Christian names of Children**  
**Nature and locality of civil employment desired** commercial agent

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M. OF M.	12/20/18		26 JUL 1918
O.C. 1ST. DIV.			
" 2ND DR.			

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)

Station *W James*

(Rank) *Pte.*  
 Date *May 26 1918*

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.

*S. A. Danks*

Medical Officer i/c Hospital.

Station *Spa General Hospital, WANDSWORTH, S.W.*

Date *May 26 1918*

**B Period of Service and in what Corps**

Regiment	Years	Days	All Service Abroad with Stations	Years	Days
			India		
			S. Africa		

Disallowed ...

Service towards Pension ...

Date inclusive to which pay has been issued

Sums due on account of public debts

Sum due on account of advance of Pension }

Rank on Discharge

Character (as on Certificate of discharge)

Where born, and on what date

Date and Place of first Enlistment

Trade on Enlistment

Cause of Discharge

Number of G.C. Badges

Medals

Wounds; and Actions in which received

Other distinguishing marks

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

Station \_\_\_\_\_

Officer in Charge

Date \_\_\_\_\_

Records.

"A" Form  
MESSAGES AND SIGNALS.

Army Form C. 1211  
(On Pads of 100)

No. of Message.....

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

TO

NEWFOUND

HAZELEY DOWN CAMP

WINCHESTER

Sender's Number.

Day of Month.

In reply to Number.

AAA

140

5/6/18

3223 JAMES GRANTED HOSPITAL FURLOUGH

14th JUNE SEND IMMEDIATELY

STATEMENT ACCOUNT

SYNOPTICAL.

From

Place

Time

The above may be forwarded as now corrected.

(Z)

Crossed

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

\* This line should be crossed if not required.



# POST OFFICE TELEGRAPHS

NEWFOUNDLAND COMMUNICATIONS  
PAY & RECORD OFFICE  
No. 115  
Office Stamp

If the Receiver of an Inland Telegram doubts its accuracy, he may have it repeated on payment of 1d. for its transmission, any fraction of 1d. less than 1d. being reckoned as 1d.; and if it be found that there is any inaccuracy, the amount paid for repetition will be refunded. Special conditions are applicable to the repetition of Foreign Telegrams.

Office of Origin and Service Instructions

Check Nos. 404  
to pay



Handed  
in at

TO { *Hazelby Ck* } *Synoptical London*

*193 614 149 aaa 3223*  
*James credit Balance period ending*  
*7/6/18 one pound thirteen shillings*  
*one pence Newfoundland Hazelby Ck*

*Ref. Receipt no 4629*  
*7/18*

*Handwritten signature and date 6/18*

No. \_\_\_\_\_ Date 29 Nov. 1917 Admitted

(1) To the Officer i/c Records, 58 Victoria St 12/9/17  
SW (Station).

(2) The Officer Commanding, nfld contingent  
Barry Joffar (Station).

(3) The Paymaster, 58 Victoria St  
SW (Station).

Regimental No. 3223

Rank and Name. Pte James W.

Regiment or Corps. 1st nfld

has been granted a furlough from 29 Nov to 8 Dec

His address while on leave will be: 58 Victoria St  
SW.

I consider he is fit for\*  
\* Strike out that which is inapplicable.  
 i. Duty. I  
 ii. Command Depot  
 iii. Employment

Officer in charge. \_\_\_\_\_ Registrar, R.A.M.C. Hospital,  
3rd London General Hospital,  
WANDSWORTH, S.W. (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 Flying Corps, Royal Engineers and Army Ordnance Corps two copies of A.F.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.

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

G C Hall  
Capt M.D.

**NOTIFICATION by President of Medical Board in the case of a soldier brought before the Board pending transfer to Class P. or P.(T.) Reserve.**

(To be completed and dispatched on the day on which the Medical Board is held.)



To the Officer i/c Records:

*38 Victoria St*  
*SW*

The Soldier named below has this day appeared before an Army Medical Board at this station, and his documents are forwarded for transmission to Chelsea for the consideration of his claim to pension.

*Note.*—His transfer to Class P. or P.(T.) Reserve will take effect from 21 days after the approval of the General Officer Commanding-in-Chief, and will be notified to you by the Officer i/c Records concerned.

Soldier's surname..... *James*

Christian names..... *William*  
(in full)

Regt. No. and Rank..... *2223 Pte*

Regt. or Corps..... *18th Regt*  
(If T.F. this should be stated.)

On transfer to the Reserve he will be placed in Class P. or P.(T.), and you will immediately furnish his address to C.A.P.I.O., 33, Baker Street, London, W.

*President of Board*  
President of Board.

Station..... *3rd London Regt*

Date..... *4/6/18*

**NOTIFICATION by the Officer i/c Records to the  
O.C. Unit of a Soldier placed in Class P. or  
P.(T.) of the Reserve, in case of his trans-  
fer to the Reserve.**

(To be completed and dispatched with the ~~document~~)

To the Officer Commanding



The Medical Board before whom this Soldier appeared are of opinion that his disabilities have been caused or aggravated by military service, and his documents have been sent to Chelsea for the consideration of his claim to a pension.

In the event of his transfer to the Reserve, he will be placed in Class P. or P.(T).\*

\* Strike out Class not applicable.

Soldier's surname..... *Jones* .....

Christian names..... *William* .....

(in full)

Regt. No. and Rank..... *Pte 2223* .....

Regt. or Corps..... *1st Rfld* .....

(If T.F. this should be stated.)

.....  
Officer i/c Records.

Station.....

Date.....

N.B.—This Army Form will be left blank and sent with Army Form W. 3498(B) to the Officer i/c Records.

Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge to the Reserve Section W or W(I) in substitution for a man in for General Service.

No. 3223 Rank R/S  Regiment Newfoundland

Name Janss William  
(Surname first)

1. State what special qualifications you have for employment in civil life.

*Paper Maker.*

2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed.

*A & D Coy.  
Grand Falls Newfoundland.  
Paper Maker.  
Four years.*

3. What is the nature and locality of the employment you desire?

Light employment  
Newfoundland.

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TO	No.	DATE
M. OF M.	12087/108	26 JUL 1918
O.C. 1ST. BN.		
" 2ND. BN.		

4. What is the name of your Approved Society?

nil

5. Have you been employed whilst with the Colours? If so, in what capacity?

no

Date May 29 - 18

Signature

William James

W. James

NOTE—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge or reclassification in a category from which men are being transferred to Class F, or F.(T.) of the Reserve probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 3 (d), item 3, of Army Council Instruction No. 1013, of 1916.

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.















No. 3223 Rank Plt Name James W. G.

Pay	F.A.	Wkg	Total
100	10		110
Less: Allotment			50
Net Rate			60

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£ s d			
						From	To						
Balance					Balance		8/6/17					108	
Acquittance Rolls		2	0	4	Pay @ Net Rate	9/6/17	29/11/17	174	60	104	40	21	9 0
Hospital Advances		1	17	6	Ration allowances								1 0 0
A.B. 84					10 days @ of	29/11	8/12/17						
P. & R.O. Payments					19-1-10	31/11	4/12	5	60	3 00			12 4
	2-17-10												
Receipt No. 4567	29/11	9	0	0									
Cash Receipt No. 4575		5	0	0	-14-2								
Cash	3-17-17	5	0	0									
"	22-17-10	4	6	2	Credit balance								
		25	11	10									



~~23-12-0~~  
23-12-0

No.

1882

# ANGLO-AMERICAN

## WESTERN UNION DIRECT UNITED STATES

### CABLEGRAM



SENT

FOR STAMPS

 Prefix               Adts  
 WORDS 23 CHARGE       

 At \_\_\_\_\_  
 To \_\_\_\_\_ By \_\_\_\_\_

VIA ANGLO.

 THIS FORM WILL BE ACCEPTED AT ALL  
 POST OFFICE TELEGRAPH STATIONS.

3/12/17 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

 To EFM AMBROSE JAMES  
 SMITH SOUND  
 BRITANNIA COVE TRINITY BAY (Newfoundland)

 ON FURLOUGH LONDON CABLE IMMEDIATELY FIVE POUNDS  
 THROUGH MINISTER MILITIA STJOHNS

3223 PTE W JAMES

$$\begin{array}{r} 23 \\ 22 \\ \hline 46 \\ 11 \\ \hline 49 \end{array}$$

 57  
 CHARGED  
 PAY BOOK 12  
 Date 12/17/17 *RM*

 CHECKED  
*Abel*

 Charge to  
 3223 Pte W. James.

$$\begin{array}{r} 22 \\ 42 \\ 10 \\ \hline 50 \\ 4 \\ \hline 44 \end{array}$$

Authorised.

NOT TO BE  
TELEGRAPHED.
 Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western  
 Union Telegraph-Cable System, subject to the said conditions to which I agree.

88 Victoria St. S.W. 1.

Signature \_\_\_\_\_ Address \_\_\_\_\_

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



Forms  
C. 348  
1959

## MEMORANDUM.

CHIEF PAYMASTER & OFFICER I.C. RECORDS.  
NEW FOUNDLAND COMTH CENT,  
23, VICTORIA STREET,  
LONDON, S.W. 1.

From

To Officer Commanding,  
2/Sn. Royal Wfld. Reg.,  
Winchester.

To

FM/WF

ANSWER.

Pay &amp; Record Office,

20th, July 1948

101

3223, PTE. H. JAMES.

Please consider N. F. P/54  
No. 253, 18/7/18 as cancelled.  
Credit of Ration Allowance for  
the period 5/8/18 - 14/8/18  
10 days @ 2/1, £1.0.10 having  
been made in his account in Pay  
Book for period ended 5/7/18,  
please.

*M. J. D. D. D.* Major  
Chief Paymaster & O t/e Records.

File

*W. H. S.*

Form  
C 244CHIEF PAYMASTER & OFFICER IN CHARGE MEMORANDUM.  
NEWFOUNDLAND CONTINGENT88, VICTORIA STREET,  
From LONDON, S.W. 1.  
ENGLAND.

From

Officer Commanding,

To 1/2 Bn. Royal Nfld. Regt., To  
Winchester.

FM/WF

ANSWER.

Pay &amp; Record Office,

20th, July 1941

101

191

3223, PTR. N. JAMES.

Please consider N. F. P/54  
No. 253, 18/7/18 as cancelled.  
Credit of Ration Allowance for  
the period 5/6/18 - 14/6/18  
10 days @ 2/1, £1.0.10 having  
been made in his account in Pay  
Book for period ended 5/7/18,  
please.

*R. D. MacCoy*, Major,  
Chief Paymaster & O & R Records.



To Pay Master  
Pay & Record Office  
58 Victoria St  
London

please pay me  
the sum of £ one pound  
which is to my credit  
and oblige yours sincerely

32 & 3 pts W James  
Royal ex F S D Regt  
London & Hosp  
Londonsmiths  
London S W



Ok, £1.  
17. 5. 18

affirmed  
Wagon  
Receipt No. 7237

LAST PAY CERTIFICATE

DUPLICATE  
MAIL COPY N.F.P./94

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 28/5/17.

Regtl No. 3223 Rank Pte Name James W. Unit Royal Newfoundland who was Repatented  
to Newfoundland on 20/7/18 Authority \_\_\_\_\_ Cause \_\_\_\_\_  
Posted \_\_\_\_\_

DR.

STATEMENT OF ACCOUNT

	PARTICULARS					PARTICULARS					CR.				
	£	£	£	s	d	£	£	£	s	d	£	£	£	s	d
Balance Dr. From						Balance Cr. from									
Allotment 15 days @ 50f	17	00	11	10	10	Pay 15 days @ \$1.00	115	00							
Cash Payments:						Field Allow 15 days @ \$.10f	11	50							
12-7-18				15	0	Other Allow days @ \$	16	50	1	3	7	10			
19-7-18				15	0	Other Credits:									
Other Debits:															
Barrack Damages					6										
Misc. Stops.				2	5										
Total Debits						Total Credits									
Balance (due) by Paymaster			1	4	1	Balance due to Paymaster									
			13	7	10				1	3	7	10			

PERIOD: From 6.7.18 To 20.7.18

CHECKED  
C.S.

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of

L. Coy Winchester 20-7-18 191 (Sgt) F. G. A. Rendell Lieut.  
(Place) (Date)

Made up/checked in accordance with information received in the Pay & Record office and is therefore subject to amendment if and as may be found necessary. O.C. "A" Company. 27 JUL 1918

Pay & Record Office, London, 27 JUL 1918 191 A. B. [Signature] Maj.  
Chief Paymaster & Officer i/c Records.

o.k. £1.0.0 k/c

27<sup>th</sup> Receipt no 7410 May 27<sup>th</sup>

Paymaster  
R. nfld



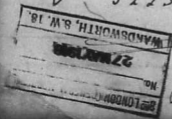
Li:



Please

advance the sum of £1.0.0  
to Pte W. Jones # 5223  
R. nfld, Reg't on account  
of any balance coming  
1 to Jones

Pte, W. Jones  
# 5223 R. nfld Reg't



Approved  
W. Humphreys  
Capt. R.A.M.C.

Janes, D<sup>ce</sup> J

3223

say sept.

Copy 4

COPY

This space to be left blank for the Cheque Number.

[Blank box for Cheque Number]



### Proceedings on Discharge.

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

No. <u>3223</u>	Army Rank <u>P/6</u>
Name <u>James Wm Joseph</u> <small>(The names must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
Corps <u>ROYAL NEWFOUNDLAND REGIMENT.</u>	
Battalion, Battery, Company, Depot, &c. <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &amp;c., or to General Staff of the Army, it should be so stated.)</small>	
Date of discharge <u>September 5<sup>th</sup> 1918</u>	
Place of discharge <u>St. John's, Nfld.</u>	
1. <u>Description at the time of discharge.</u>	
Age <u>22</u> years <u>10</u> months Height <u>5</u> feet <u>7</u> inches Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins. Complexion <u>fresh</u> Eyes <u>Brown</u> Hair <u>Brown</u> Trade _____	Descriptive marks.  <u>Gsw</u> <u>Back</u>
Intended place of residence (To be given as fully as practicable) <u>Smith Sound British Cove</u> <u>Trinity Bay</u> <u>Nfld.</u> <small>(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.)</small>	
2. The above-named man is discharged in consequence of <u>being no longer physically fit for war service on account of wounds received in action</u>	
<small>(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.)</small>	
3. Military character:— <u>H. G.</u>	
4. Character awarded in accordance with King's Regulations:— _____ _____ _____ _____ _____	
Certified that the above is an accurate copy of the character given by me on Army Form B, 2067* and that Army Form D, 262 was awarded in this case.	
Initials of Commanding Officer.	
Army Form B, 2088 has been issued to*	

To be filled in on the soldier quitting the Colours.

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class \_\_\_\_\_

6. Campaigns, Medals and Decorations

Certificate of education .....

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

(Place) \_\_\_\_\_

(Date) \_\_\_\_\_ Commanding \_\_\_\_\_ Batta. \_\_\_\_\_ Regiment.

8. Certificate to be signed by the soldier on discharge.

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) St. John's Rd. \_\_\_\_\_ (Signature of Soldier) W. James

(Date) Sept. 12th 1918. \_\_\_\_\_ (Signature of Witness) G. Walsh

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. Additional certificate in the case of a soldier who takes his discharge at his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier.) \_\_\_\_\_

10. Statement of service.

Service towards engagement to \_\_\_\_\_ (the date to which the record of service is completed) \_\_\_\_\_ years \_\_\_\_\_ days.

Further service " " \_\_\_\_\_ (the date of confirmation of discharge) ... .. " " \_\_\_\_\_

Total ... .. " " \_\_\_\_\_

11. Confirmation of discharge.

The discharge of the above-named man is hereby confirmed for \_\_\_\_\_ (date)

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

(Date) \_\_\_\_\_

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.



Hawley Barr Camp,  
3/7/18

- 1. Royal Wfld. Regt.
- 2. 3223
- 3. Private
- 4. JAMES, WILLIAM JOSEPH
- 5. 21
- 6. November 1916, at St. John's, Wfld.
- 7. Paper-maker
- 8. GUN SHOT WOUNDED BACK
- 9. August 16th, 1917
- 10. ?
- 11. He states that he received a bullet in back which he affirms is still there.
- 12. Wounded in active service
- 13. There is a small goar over tenth rib in posterior lateral line. Dulness on percussion and diminished breath sounds on that side. He is unable to do any hard work without being extremely fatigued. Dyspnoea and cyanosis
- 14. N. A.
- 15. N. A.
- 16. N. A.
- 17. Not advised
- 18. N. A.
- 19. N. A.
- 20. DISCHARGE AS PERMANENTLY UNFIT FOR ACTIVE SERVICE

(Sgt) J. StP. E., CAPT. R.A.M.C.

- 21. Yes
- 22. (Sgt) G. S. W.
- 23. Yes
- 24. ---
- 25. 40% for 3 months
- 26. ---
- 27. Yes
- 28. No
- 29. No
- 30. No

(Sgt) JOHN C. HUNGAN  
J. SINCLAIR TAIT  
ARCH C. TAIT

St. John's, Wfld.;  
August 22nd., 1918

A PPROVED (SGD) CLUNY MACPHERSON, Major

D. N. S. NEWFOUNDLAND.

CERTIFIED CORRECT COPY  
CLUNY MACPHERSON, Major  
Per J. W. B.



COPY.

Army Form B. 178.

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

MEDICAL HISTORY of

Surname Jones Christian Name Wm Joseph

TABLE I.—GENERAL TABLE.

Birthplace ... Parish \_\_\_\_\_ County \_\_\_\_\_

Examined ... { on 9 day of Nov. 1916.  
 at St Johns

Declared Age ... 20 years 9 mo2 day4.

Trade or Occupation ... Papermaker

Height ... 5 feet, 7 1/2 inches.

Weight ... 110 lbs.

Chest { Girth when fully Expanded. 35 inches.

Measurement { Range of Expansion 3 inches.

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

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

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

Vision ... R.E.—V—6/12  
 L.E.—V—6/7

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

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

Approved by (Signature) (Sgd) Lemuel Peterson  
 (Rank) Major Medical Officer.

Enlisted ... { at St Johns  
 on 4 day of Nov. 1916.

Corps.	Regtl. No.
ROYAL NEWFOUNDLAND REGIMENT.	<u>3223.</u>
Transferred to ...	

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				
3rd London Gen Windsorworth	12	9	17	24	11	17	Thompson Law to back Slight R. wrist other wd. penetrating	98	wounded in France 16.8.17 F.B. in awkward position in pouring rain rib-cage, 20 galls!	Lt Col G.C. Hall Capt M.S.
3rd Gen Hosp Windsorworth	21	5	18				Law. Back		Boards held see overleaf. Disability - Law. Back light rub to be heard on sea unable to do anything in the way of lifting has quickly got used Cause - Law. Action Service Inability - to earn livelihood lessened by 60%	Lt Col G.C. Hall, Capt M.S. 3rd Gen Hosp. Windsorworth.

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
5. 1. 17	Vaccination L.P.
21. 11. 16	L.P.
25. 11. 16	T.A.B. L.P.
9. 1. 17	3 L.P.
26. 3. 18	T.A.B. J. H. Knight Capt Home 2
27. June 1918	Boarded at Rally Down camp. marked "E" Cab. (Sgd) with Parsons Major Raine (Sgd) J. H. Knight Capt Home,
4 June 1918	Board held.
"	Finding Reclassified B. III (Sgd) G. C. Hall Capt Home.

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
S.S. 4. Longel	31. 1. 17 3. 2. 17	3. 2. 17			



**COPY** to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man fit for General Service.

No. 3223 Rank Plt.  
 Name (surname first) JAMES, William  
 Regiment ROYAL NEWFOUNDLAND REGIMENT

1. State what special qualifications you have for employment in civil life.

Papermaker

2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed?

~~14/11/14~~  
A & D Coy Grand Falls, Nfld.,  
Papermaker 4 years.

3. What is the nature and locality of the employment you desire?

Light Employment  
Newfoundland

4. What is the name of your Approved Society?

nil.

5. Have you been employed whilst with the Colours? If so, in what capacity?

no.

Date May 29 1918 Signature Wm James

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be sent to the Board, together with other documents laid down in para. 4 (b), Gen. 3, of Army Council Instruction No. 1014 of 1914.

\* When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

LAST PAY CERTIFICATE

ORIGINAL

N.F.P. / 64

To be rendered for all ranks on discharge, transfer to other Units, or on return to Newfoundland in accordance with C.L. / 19, 26/5/17.

Regt. No. 5223 Rank Pte Name James W Unit Royal Wfd who was repatriated  
N.S. L.D. on 20/7/18 Authority STATE DEPT OF ACCOUNTS Cause \_\_\_\_\_

PARTICULARS					PARTICULARS				
	\$	20	¢	d		\$	20	¢	d
Balance Dr. from					Balance Cr. from				
Alletment 15 days @ 50	17	50	11	10 00	Pay 15 days @ \$ 1.00	17	50		
Cash Payments:					Field Allice 15 days @ \$10	17	50		
12-7-19				15 00	Other Allice days @ \$	16	50	3	7 10
19-7-18				15 00	Other Credits:				
Other Debits:									
<i>Barack Days</i>				6					
<i>Miscel Exp</i>				2 5					
Total Debits				41 10	Total Credits				
Balance due by Paymaster				41 10	Balance due to Paymaster				41 10

I have carefully examined this Statement of Account and find it to be correct extract from the Pay Book of R. Coy  
Manchester 25-7- 1918  
 (Place) (Date)

Noted/Checked in accordance with information received in the Pay & Record Office and is therefore subject to amendment if and as may be found necessary.  
 Pay & Record Office, London, 27 JUL 1918 191  
 Chief Paymaster & Officer i/c Records  
 27 JUL 1918

*OK Wm*

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 70<sup>00</sup>/<sub>100</sub>

May 1<sup>st</sup> 19 19

Received from the First Newfoundland Regiment  
the sum of Seventy <sup>xx</sup> W. J. James Dollars.  
on account of Pay. W. J. James  
balance

Ca. No. <u>18115</u>	Initials. <u>[Signature]</u>
Pay Ledger. <u>129</u>	Initials. <u>[Signature]</u>
Gen. Ledger.....	Initials.....

Regtl. No.

Rank [Signature]

No. 3223

Rank Pte

Name

W. J. James



1918 - 1919

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 15<sup>00</sup>

Aug 23<sup>rd</sup> 1918

Received from the First Newfoundland Regiment  
the sum of 15 <sup>00</sup> Dollars.  
on account of Pay.

Mc James

Ck. No.	1466	Initials	EW
Pay Ledger	210	Initials	WJ
Gen. Ledger		Initials	J

Regtl. No. \_\_\_\_\_ Rank \_\_\_\_\_

No. 3223

Rank

PL-

Name

James W. J.

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 41.79

Sept 12 1918

Received from the First Newfoundland Regiment  
the sum of Forty One ~~70~~ 79 Dollars.  
on account  
balance of Pay. to date of discharge Sept 5<sup>th</sup> 18

Ch. No. <u>2399</u>	Initials <u>EW</u>
Pay Ledger <u>210</u>	Initials <u>EW</u>
Gen. Ledger	Initials <u>EW</u>

Regtl. No. 1st James Rank

No. 3223

Rank

Pte

Name

James W.J.



✓  
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.

*Smc* Christian name *William*..... 2. Surname *Jones*.....

3. Rank *Pte*..... 4. Regtl. No. *3223*.....

5. Address in full to which future payments of gratuity are to be forwarded..... *Smith Sound I B*

6. Date of enlistment in the Regiment..... *Nov. 1916*

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.....

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 Nov. 1916 to August 1918*

*Smc* *Oct 1918*..... 1.

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

*No*

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.

*JWC* ~~clothing allowance back pay~~ *25.00*  
~~board allowance~~  
*Pension, (monthly)* *20.00*

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

*No*

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

*No*

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

*No*

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

*No*

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

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

*No*

*Aug 1918*

(b) Reason for discharge

*Physical weakness*

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 - from May 1917 to Aug. 1917 - Steenbeke*

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*  
*William X Laues*  
*Master*

Place of Residence:

*Smith Sound, S. D.*

Declared before me at:

*N. J. N. J.*

This

*8th*

day of

*April*, 19*19*.

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

*John M. Carthy*  
*J.P.*

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	.....	.....	<i>4 60/100</i>	<i>280.00</i>
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
Certified Correct.			Paymaster.	



Great War Veterans' Association  
of Newfoundland,

6229

BRANCH:

Grand Falls.

August 25<sup>th</sup> 1919.

Paymaster

Department of Militia

St. Johns.

Sir

I have been requested by one of our members to write you, and make application on his behalf for the remainder of his gratuity, amounting, according to his statement, to some \$70.00.

The applicant is

# 3223 The William James.

P. O. Box 136.

Grand Falls.

He states that he has already made one application, without eliciting any reply.

I have the honour to be, sir.

Yours sincerely

Frank H. Hepson

Hon Sec:

Grand Falls Branch

G. W. V. A.

Mar 1

Apr 1

May 1

June 1

(A.1)

Must be  
made 2/10/20

N.F.P.)54

No.387.

From. Pay & Record Office, London,

TO; Minister of Militia, St.John's,Nfld.

#3225 Pte.W.Janes

Hospital Advance whilst  
at 3rd London General Hospital, as per voucher #5775, 3s.6d.

# Anglo-Newfoundland Development Co., Ltd.

(INCORPORATED IN NEWFOUNDLAND)

GRAND FALLS, NEWFOUNDLAND.

C.R. 5223

"Daily Mail" and "Daily Mirror" Paper Mills

LONDON OFFICE

"THE FLEETWAY HOUSE"  
FABRIQUE ST., E.C.

ACCOUNTING DEPARTMENT

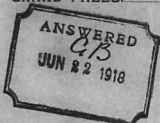
CABLE ADDRESS

"ANDOPHAN" LONDON  
"ANDOPHAN" GRAND FALLS

CODES USED

A. L.  
A.E.C. 5TH EDITION,  
WESTERN UNION, AND  
ENGINEERING.

GRAND FALLS, June 20th/18



Minister of Militia,  
St. John's, Newfoundland.

Dear Sir:-

On Nov. 25th, 1916 Capt. Charles R. Ayre informed us in reply to our letter of Nov. 23rd. that William James of Smith's Sound, T. B. was attested on Nov. 9th. and had received #3223. *From Ambrose James, Father Smith Sound, T.B. entiated Nov. 9th. 1916*

Last April the Public News received here stated that Pte Wm. James of Smith's Sound, T. B. died of wounds on the 15th. of that Month. We accordingly took Wm. James's name off the Bonus List from the beginning of May, but now have a letter from his Mother Mrs. Ambrose James of Petley, Smith's Sound, T. B., stating that her son is in Hospital recovering from a wound. *Reported at Wanda worth S. O.W. Neck & Chest. progressing favorably*

On looking through the Local Papers we find that on April 15th. #3767 Pte Wm. J. James, Britannia Cove, T.B. appears as having been received at the 64th. Casualty Clearing Station with G.S.W. Abdomen penetrating, dangerously ill. *misdated May 12/17*  
~~We cannot find any further reference to Private James.~~

As you will notice this number is different from the number given us by Capt. Ayre, and it has occurred to us that perhaps there is some mistake been made and there might be two men by the same name from the same place, one of which was killed and the other wounded. We should be glad if you would advise us regarding this.

The Wm. James on our list is a Son of Mrs. Ambrose James of Petley, Smith's Sound, T. B.

Yours truly,

Anglo-Newfoundland Development Co., Ltd.

*A.C. Hanson* Chief Acct.

Diet. HCH/MV

June 21st 1916.

H. C. Hanson, Esq.,  
Chief Accountant,  
Anglo-Newfoundland Development Co., Ltd.

Dear Sir:

In answer to your letter of June 20th, having reference to #3223 Pte. Wm. James of Smith's Sound, F.B., and in which you draw attention to the fact that there is also a #3767 Wm. James of Britannia Cove, F.B., in the Regiment. I may say that #3223 Pte. Wm. James, Smith's Sound, was attested on November 9th, 1916, and on September 15th, 1917, was reported at Wandsworth, Gun Shot Wound Neck and Chest. His next of kin is Ambrose James, father, Smith's Sound. #3767 Pte. W.J. James, Britannia Cove, F.B., enlisted on May 12th 1917, died of Wounds at the 64th Casualty Clearing Station, France, April 14th, 1918. His next of kin is Henry James, father, Britannia Cove.

The Wm. James on your list, undoubtedly is #3223, son of Ambrose.

Yours faithfully,

Captain,  
for Chief Staff Officer.

# NEWFOUNDLAND POSTAL TELEGRAPHS.

Form N



## 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 *R. A. Squires* Address *Colonial Secretary*

Line Number	Red	By	Sent	by	Check

Dated *7/25*

To *Ms Amrose James*

*Petty Va Brittain*

*Will inquire condition 3223*

*Private William James and will*

*notify you on receipt of reply*

*R. A. Squires Colonial Secretary*

TRANSLATION OF CODE MESSAGE SENT TO SYNOPTICAL

Sept. 19. 1917.

---

Telegraph whereabouts of, report by telegraph  
present condition of 3466 Ganning; Report by telegraph  
present condition of 131 Cleary; 2076 Adey; 2228 Larrow;  
3222 James; 2964 Douglas; 2332 Martin; 1304 Conworthy;  
3464 Fellett; 3262 Slaney; 3053 Neal; 2066 Neville; 2758  
Kennedy; 2419 Reid; 3213 Taylor.

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## NEWFOUNDLAND POSTAL TELEGRAPHS

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

4

Line No. 18 Sent by So Rec'd by [Signature] Check 14/ No. \_\_\_\_\_

Place from Stethy via Britannia 4 SEP 1917

To Hon R A Squires

Col Secty

St Johns.

Would like to know how my  
 son is no 3223 pte w/m James  
 wounded.  
 omers Ambrose James-

43223

St John's, Newfoundland,

Sept. 14th, 1918.

Officer Commanding,  
Royal Newfoundland Regiment,  
Headquarters

SIR:

The undermentioned men have been discharged  
on the dates given. Kindly note and post in Daily  
Orders Part II.

I have etc.

(sgnd) J.M.HOWLEY  
Capt. etc.

1549	Pte.	Lee, Harry	3-9-18	Med. Unfit
2111	"	Silk, Thos.	Do.	Do.
3471	"	Batt, John C.	Do.	Do.
2231	"	Small, Frank	Do.	Do.
3752	"	Squires, Ephraim	Do.	Do.
3223	"	Janes, Wm. Jos.	5-9-18	Do.
3735	"	Hinshey, Pat.	Do.	Do.
1479	"	Cooper, Hayward	Do.	Do.
2060	"	Snow, Walter	Do.	Do.
2969	L/C.	Dave, Isaac	Do.	Do.
3152	Pte.	Devereaux, John	7-9-18	Do.
3316	"	Hamilton, Wm.	Do.	Do.
3866	"	Ford, Simeon	Do.	Do.
1406	"	Kartery, John	10-9-18	Do.



August 22nd, 1918

From Officer Commanding,  
Depot

To Registrar and Officer i/c Messrs,  
Militia Department

2722 1/Opl. Garland, R.  
2766 Pte. Cross, A.  
3222 " Jones, W. J.  
3240 " Dingwell, A. C.  
4966 " Kelly, R.

The marginally noted were recommended for  
discharge as permanently unfit by Medical Board  
held on Thursday, August 22nd.

I am sending them herewith for your attention  
and necessary action, please.

LAST PAY CERTIFICATE

N.F.P. /94

To be rendered for all ranks on discharge, transfer to other Units, or on return to Newfoundland in accordance with C.E. /19, 26/5/17.

Regtl. No. 322 Rank Pte. Name James W. Unit Royal Nfld. who was repatriated  
Nfld. on 20/7/18 Authority \_\_\_\_\_ Cause \_\_\_\_\_  
 STATEMENT OF ACCOUNT

PARTICULARS					PARTICULARS				
	£	s	d			£	s	d	
Balance Cr. From				Balance Cr. From					
Allotment 15 days @ 80	17	00	11 10 10	Pay 15 days @ \$1.00	15	00			
Cash Payments:				Field Allow 15 days @ \$10 <sup>x</sup>	11	50			
12-7-18			15	Other Allowes days @ \$	16	50	13	7 10	
19-7-18			15	Other Credits:					
Other Debits:									
Banack Days			6						
Misc. Stop.			2 00						
Total Debits			4 10	Total Credits					
Balance due by Paymaster			13 7 10	Balance due to Paymaster					

I have carefully examined this Statement of Account and find it to be correct extract from the Pay Book of

S. Boy  
Winchester      26-7-1918  
 (Place)      (Date)

COPY SENT TO  
 O.C. H.Q.  
 ST. JOHN'S, N.F.L.D.  
 DATED 30 JUL 1918

S. A. R. L. L. L.  
 C.O. "P" Company  
 to / /

Made up/Credited in accordance with information received in the Pay & Record Office and is therefore subject to amendment if and as may be found necessary.  
 Pay & Record Office, London,      Chief Paymaster & Officer i/c Records.

Reg. No. 3223 Rank Pfc Name James W. J.

Attested ..... Address ..... Smiths Bend

Allotment ..... Allottee .....

Date of Allotment ..... Returned from Overseas 4-8-18

Embarked for Overseas ..... Cause Discharge

H.L. 4-5-18. To 15-7-18. Held 15-5-18.  
11-2-18 Recommended discharge permanently unfit

DISCHARGED - MEDICALLY UNFIT 5-9-18 bas 16.4



The accompanying Victory Medal and/or British War Medal

Fold Here

**ON HIS MAJESTY'S SERVICE**

To the Officer in Charge of Records,

*Royal Nfld. Regt.*

*Dept. of Militia,*

*JOHN'S. Nfld.*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SEP 9 1921



The accompanying **Victory Medal** and/or **British War Medal**

is/are forwarded herewith to

Mr. J. Jones

in respect of his service as No. 323 Rank Pvt.

Name W.J. Jones Royal Nfld. Regt.  
Nfld. Forestry Coy.

Receipt of the same should be acknowledged hereon.

Received The above medals

Signature William J. Jones

Date Oct. 5<sup>th</sup>/21

Address Grand Falls



## Casualty Form—Active Service.

Regiment or Corps Royal Newfoundland  
 Rank Plt Surname Jones Christian Name William  
 Religion Methodist Age on Enlistment 20 years 9 months  
 Enlisted (a) St. John's Terms of Service (a) Duration Service reckons from (a) 9-11-16  
 Date of promotion to present rank \_\_\_\_\_ Date of appointment to lance rank \_\_\_\_\_  
 Extended  Re-engaged  Qualification (b) \_\_\_\_\_  
 or Corps Trade and rate \_\_\_\_\_  
 Occupation Paper Maker Fredk. G. A. Lewis Signature of Officer



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	6-4-18		
		Disembarked	10-4-18		
	<u>5/18</u> <u>"D" I.B.O.</u>	<u>Transferred to Coy</u>	<u>Roubaix</u>	<u>30/4/18</u>	<u>Rose</u>
		<u>classified "B"</u>			
	<u>6-5-18</u>		<u>n7 Flgate</u>		<u>MAJOR</u>
			<u>0.1/c W.C.</u>		<u>Infantry Section</u>
					<u>G.M.C. 3rd Echelon</u>

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

(b) Signaller, Shooting Staff, &amp;c.

W. 6648-21223, 22444 (11-11); C. P. &amp; S. Ltd., Form B.103 E/1107.

P.T.O.







**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 Commissioners of Chelsea Hospital.

Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer in Charge when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.L.

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

**A Name in full** *James William*  
**Regiment from which discharged** ROYAL NEWFOUNDLAND REGIMENT.  
**Regimental number** 3223  
**Where born (Parish, Town and County), and when** *Trinity B. Smith Sound*  
**Intended address** *Brittania Cove nfld 9/14/18*  
*Smith Sound Brittania Cove*  
*T.B. nfld.*  
**Height on discharge** *5* Feet *7* Inches  
**Colour of Hair on discharge** *Brown* **Colour of Eyes** *Brown*  
**Descriptive marks** *l.s.w. Back* **Complexion** *Fresh*  
**Figure on discharge** *medium*  
**Christian name of Father** *Ambrose*  
**Christian name of Mother** *Mary Ann*  
**Wife's Maiden name in full**  
**Date and Place of Marriage**  
**Christian names of Children**  
**Nature and locality of civil employment desired** *uncertain at present*

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) *J. W. Jones*

Station *Wandsworth S.W.*

(Rank) *Pte,*  
Date *May 26<sup>th</sup> 1918*

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 *Wandsworth*

*P. D. Davies* Medical Officer i/c  
Date *May 26<sup>th</sup> 1918.* Hospital.

B Period of Service and in what Corps ...	Regiment	Years	Days	All Service Abroad with Stations	Years	Days
					India	
				S. Africa		
Disallowed ... ..						
Service towards Pension ... ..						
Date inclusive to which pay has been issued				Sum due on account of advance of Pension }		
Sums due on account of public debts ...						

**Rank on Discharge**  
**Character (as on Certificate of discharge)**  
**Where born, and on what date**  
**Date and Place of first Enlistment**  
**Trade on Enlistment**  
**Cause of Discharge**  
**Number of G.C. Badges**  
**Wounds, and Actions in which received**

Medals

Other distinguishing marks

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

Station \_\_\_\_\_

Officer in Charge

Date \_\_\_\_\_

Records

## DEPARTMENT OF VETERANS AFFAIRS

To ~~Copy~~ for H.O. file.

Attention of

NAME JAMES William Joseph,

SERVICE 3223 ROY MFLD. C.P.C. No. ~~260546~~  
NUMBER REGT. W.W. 1 W.V.A. No. 206176NAVY  
ARMY  
R.C.A.F.OTTAWA 4, ONTARIO  
Date ~~DECEMBER 22, 1965~~

P.A.

The DEPARTMENT has received information from

S.P.M.E. ST. JOHN'S NEWFOUNDLAND, NOVEMBER 25, 1965.

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death UNKNOWN  
Cause of Death  
Place of Death UNKNOWN

Name and Address of next of kin (if known)

Copies to: W.S.R.  
V. L.  
~~Copy~~  
~~Copy~~  
H.O.

} Destroy form if advice of death already received.

E.C. Richards  
for  
Chief, Central Registry