



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 2639 Name Heber Jones Corps .....

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

- |  |   |
|--|---|
| 1. What is your name? .....  | 1. <u>Heber Jones</u> .....               |
| 2. What is your full Address? .....  | 2. <u>St. John's, N.S.</u> .....          |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u> .....                       |
| 4. What is your age? .....   | 4. <u>21</u> Years <u>10</u> Months ..... |
| 5. What is your Trade or Calling? .....  | 5. <u>Fisherman</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 .....<br>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> .....                      |

FOR THE DURATION OF THE WAR

I, Heber 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.

E. Ap 28/16 ..... SIGNATURE OF RECRUIT.  
Heber Jones .....  
A. D. ... ..... Signature of Witness.

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

I, Heber 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 entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at .....

on this 29 day of Apr 1916  
 Signature of Attesting Officer A. D. ...

### † 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 ..... 191 .....  
 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 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 Heber Jones  
 Apparent age 21 years 10 months, Height 5 feet 6 1/2 inches  
 Chest Measurement { Girth when fully expanded 40 inches  
 Range of expansion 273 inches  
 Distinctive marks \_\_\_\_\_

18 JUL 1915

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Abel Jones  
Wrexham Hc. | Relationship mother  
N.D.B. Particulars as to Marriage

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

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

## Particulars as to Children

Christian Names	Date and Place of Birth

## STATEMENT OF THE SERVICES

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

1639

2770



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 2639 Name Heber Jones Corps .....

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

- 1. What is your name? ..... I. Heber Jones
- 2. What is your full Address? ..... 2. Marble Hill  
N. B.
- 3. Are you a British Subject? ..... 3. Yes
- 4. What is your age? ..... 4. 21 Years 10 Months
- 5. What is your Trade or Calling? ..... 5. Fisherman
- 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? ..... } II. Yes

I, Heber 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.

E. W. 28/16 Heber Jones ..... SIGNATURE OF RECRUIT:  
A. D. Whitebridge ..... Signature of Witness.

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

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

### CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.  
The above questions were then read to the Recruit in my presence.  
I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 29 day of Apr ..... 1916  
Signature of Attesting Officer A. D. Whitebridge 2nd Lieut

### †CERTIFICATE OF APPROVING OFFICER.

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

Date ..... 191 ..... } Approving Officer.  
Place .....

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

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

**DESCRIPTIVE REPORT ON ENLISTMENT**  
Applicable to all ranks. To correspond with entries on the Medical History Sheet.

2770

Name Arthur Jones  
 Apparent age 21 years 10 months. Height 5 feet 6 1/2 inches  
 Chest Measurement { Girth when fully expanded 40 inches  
 Range of expansion 373 inches  
 Distinctive marks \_\_\_\_\_

**INFORMATION SUPPLIED BY RECRUIT**

Name and Address of next of kin Mrs. Arthur Jones  
14. B.B. | Relationship Wife  
 Particulars as to Marriage

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

**Particulars as to Children**

Christian Names	Date and Place of Birth

**STATEMENT OF THE SERVICES**

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>28-4-16</u>									
Joined at <u>St John's</u> on <u>April 28<sup>th</sup> 16</u>									
<u>Discharged St John's May 25/1918</u>									
<u>Embarked St John's S.S. Dublin for UK 19<sup>th</sup> 16</u>									
<u>Embarked for B.C.F. 11<sup>th</sup> 16</u>									
<u>Joined Battalion 22-5-16 Wounded 1-5-17</u>									
<u>Admitted 5<sup>th</sup> Gen Hosp. Haslett. 10-5-17</u>									
<u>Invalided to England 6<sup>th</sup> 17 Admitted 3 London Gen Hospital 7<sup>th</sup> 17</u>									
<u>Surgeon then attached 14 Coy 20<sup>th</sup> 17</u>									
<u>So. Kensington Land for discharge 18<sup>th</sup> 17 Arrives Kensington 4-8-17</u>									
<u>Noted for duty report 22-10-17</u>									
<u>Discharged Medically 25-5-18</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>25-5-18</u> (date of discharge) <u>2</u> years <u>28</u> days									
" " " Pension " " " " " " " " " " " "									



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

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

Examination of *Heber Jones*  
aged *21* conducted at *CLB*  
Date: *Apr 28/16* Recruiting Officer:

NO OF TEST FINDING

- 1 *no*
- 2 *no*
- 3 *no*
- 4 *no*
- 5 *no*
- 6 *no*
- 7 *yes*
- 8 *yes*
- 9 *no*
- 10 *n*
- 11 *n*
- 12 *n*
- 13 *n*
- 14 *n*
- 15 *n*
- 16 *n*
- 17 *n*
- 18 *n*
- 19 *6/9 6/6 nt*
- 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*

*2/39*

*33 n*  
*34 5 6 1/2*  
*35 150 lbs*  
*36 39 40*

*37 \$1.00*  
*38 Brother Mrs Heber Jones Norton's Harbour N.D.B.*  
*39 Mother*

*Fil*

Signature of Medical Examiner: *L. Staker*

19/7/16  
Draft No: 9

EXACT COPY TAKEN FROM LEDGER

Date of Enlistment:  
28 April 16  
Age on Enlistment:  
21  
Married (Yes or No)  
NO

NAME: JONES, Heber

REGL. NO: 2639

Next of Kin: JONES, Mrs. Abel

Relationship: Mother

Address: Moreton's Hr., Notre Dame Bay, Newfoundland.



CASUALTIES.						PROMOTIONS, REDUCTIONS, etc.				
Date Rec'd.	Auth- ority.	Dated	Nature of	Whereabouts	Ref. No.	Authority	Date	Rank etc.		
13/3/17	O.C. Unit	1/3/17	Wounded Gas		752					
12/3/17	W.O.	5/3/17	Gas Shell W. Sev.	Adm. 5 Gen. Hosp. Rouen	744					
13/3/17	B103	6/3/17		Inv. to Eng. H/S St. David	B103					
9/3/17	Hosp.	7/3/17	Gas Poisoning	Adm. 3rd Lon. Gen. Hosp.	732					
5/6/17	"	4/6/17	Duty I	Furlough to 13/6/17	1590	Bn.	Draft No.	Date of Embarkation.	Expeditionary Force.	Rnks.
26/6/17	D.O. 2/1	20/6/17	Attached "H" Co.	Depot Ayr	155		12	11/10/16	B.E.F.	Joined Unit 22/10/ 16
21/7/17	P & R.O.	18/7/17	Posted to Hqrs. St. John's, Nfld.	Embarked at L'Pool per S.S. Justicia 18/7/17						
5/8/17	DO's Hq.	4/8/17	Attached to Strength		1890					
22/10/17	"	22/10/17	Posted for duty	Depot						
						SERVICES IN THE FIELD.				
						HONOURS, AWARDS, etc.				
						Authority.	Date.	Action.	Distinction.	
						DISCHARGE.				
						Authority.	Date.	Where.	Cause.	
						Daily Order Hq. 30/5/18	25/5/18	St. John's Nfld.	Medically- Unfit.	

**COPY**

only for Special Reserve Recruits, and for Special Reservists enlisting into the

**MEDICAL HISTORY**

OF

Surname JONES

Christian Name HEBER

Table I.—GENERAL TABLE.

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

	<u>SPECIAL RESERVE.</u>			<u>REGULAR ARMY.</u>		
	on	day of	191	on	day of	191
Examined	28	April	1916			
	at St. John's.			at		
Declared Age	20	years	10 days	years	days	
Trade or Occupation	Fisherman					
Height	5	feet	6½ inches	feet	inches	
Weight			150 lbs.			lbs.
Chest Measurement	Girth when fully expanded...			inches		
	Range of Expansion..			inches		
Physical Development						
Vaccination Marks	Right	Left		Right	Left	
	Arm	Number				
When Vaccinated						
Vision	R.E.—V=	5/6		R.E.—V=		
	L.E.—V=	6/6		L.E.—V=		
(a) Marks indicating congenital peculiarities or previous disease	(a)			(a)		
	(b)			(b)		
(b) Slight defects but not sufficient to cause rejection						
Approved by (Signature)	(Sgd) LAMONT PATERSON					
(Rank)	MAJOR			Medical Officer.		
Enlisted	at St. John's, Nfld.			at		
	on	28	day of April 1916	on	day of	191
Joined on Enlistment	Corps.	Regtl. No.		Corps.	Regtl. No.	
	1st. Nfld.	2639				
Transferred to						
Became non-effective by	on	day of	191	on	day of	191
[Signature]						
[Rank]						

Table II.—Only for admission to hospital for the week

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing syphilis, admission of treatment
	Day	Month	Year	Day	Month	Year			
3rd. Lon. Gen.	7	3	17	4	6	17	Gas Poisoning. Gas Shell	89	



Case of ~~...~~ Officers treated in quarters.

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

Signature of Medical Officer

Gassed in France 1/3/17. Resistual Cough. No. T.B.  
in Sputum. Furlough

(Sgd) G. C. HALL,  
CAPT. R. A. M. C. T.



529

February 6th., 1939

J. Cater, Esq.,  
Secty-Treasurer G. W. V. A.  
Grand Falls Branch.

Dear Sir,

I beg to acknowledge receipt of your letter of the 2nd. inst. with reference to #2639, Heber Jones of Morton's Harbour and #1195, Robert Upwards of Harry's Harbour. For your information the following is submitted:

Heber Jones: This man was awarded pension at the rate of 40% in 1919 for six months; at the expiration of this period pensionable disability was found to be nil and pension was discontinued. He was admitted to hospital in 1926 and hospital allowances were paid; he was examined on discharge and again no disability was found. He complained of abdominal trouble which was not considered as being due to his service. In September 1927 he was re-examined and recommended admission to hospital which he refused. In October of the same year he made application for pass to enter hospital for abdominal condition and he was advised that the Board could not accept liability for this condition which was not considered due to his service. In January 1929 and April 1928 he was examined by Drs. Wood and LeDrew respectively who stated that no definite symptoms could be found. In May 1932 his case was brought to the attention of the Board by the G. W. V. A. with respect to Rheumatism which was not accepted as due to his service. In 1934 he was again examined at St. John's with the same result - no disability.

It will be seen from the foregoing that repeated examinations in this case have failed to reveal any disability due to War Service. If however, in your opinion, he is suffering

from any condition that can be traced to his War services, ~~the enclosed~~ Medical Certificate could be completed and forwarded to this office for the attention of the Medical Adviser.

Robert Upwards, #1195: This man was in receipt of pension at the rate of 100% amounting to \$103.12 to June 30th. 1937 when it was increased to \$108.27. These amounts have been paid regularly each month except for the period of hospitalization from July 27th. to August 10th. 1936 and from November 25th. to December 4th. 1937 when pension was paid less \$1.00 per day for each hospital day. In June 1938 Mr. Upwards reported to St. John's for re-amputation of his stump in order to permit him to wear an artificial limb. He claimed however, that he was not in a fit condition to have this operation performed and the Board agreed that he return to his home for a further period of twelve months in order to build up for this operation and as soon as his condition permits, an operation will be carried out. Dr. Lidstone has been requested to make an examination the next time he is in this vicinity and let us have a report.

It is difficult to understand why Mr. Upwards should have to resort to the wearing of the fork of a tree for an artificial limb; it is evidently through choice and not through necessity. In fact, with his stump in its present condition he should not be wearing any kind of an artificial limb as it will in all probability only retard his progress. This man is in possession of crutches and we have not been advised that these are unfit for use.

With reference to Paul Billy, there is no special form for completion. Simply state all the facts that he desires to submit in support of his claim.

Yours very truly,

J. A. McGrath, Clerk, War Pensions.



# The Great War Veterans' Association of Newfoundland.



GRAND FALLS BRANCH.



Grand Falls, \_\_\_\_\_ February 2nd, \_\_\_\_\_ 1938.  
Newfoundland.

529

The Board of Pension Commissioners,  
St. John's.

Dear Sirs:

Attention J.A. McGrath, Esq.,

529  
2639

We have been giving relief to Heber Jones of Moreton's Harbour, for a considerable period as this man is very badly in need. He is living in a shack which is quite unfit for a family to live in and has no means of supporting his family. Some time ago Mr. Geo. Hicks, who was at Moreton's Harbour, looked into this case and reported the above to our Executive.

It has come to our notice that up to 1926 this man was in receipt of war pension around \$30.00 per month or more, when it was discontinued. This man claims a disability due to war service and we would be glad if you will give this matter consideration. Perhaps you would be good enough to advise why the pension to this man was stopped and the likelihood of an allowance being restored.

I am also requested to draw your attention to the case of Robert Upwards, Notre Dame Bay. This man is going around with the fork of a tree for a leg, which is rather annoying the people of his locality and certainly does not reflect credit to the department concerned. We feel sure he was given an artificial limb which no doubt he has broken up. I have been asked to notify you of this state of affairs. Perhaps you will advise what has been done for this man, and in the event of his limb being unsatisfactory if there is a possibility of another being supplied him.

Yours truly,

*J. Water*  
Secretary-Treasurer.

PS

Re. Paul Lacey  
have you a form to complete  
covering the cause  
to which you refer.  
C

Oct  
1195

upwards 100% 103.12 to 30.6.37  
108.29 from 1.7.37 to date

level continues until ~~Navigation opens in~~ he comes to lower

April. May. During P. 100% was

deducted : 27.7.36 to 10.8.36

to 11.37 to 4.12.37

529

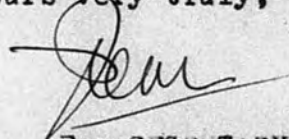
September 6, 1934.

Mr. Heber Jones,  
Western Head,  
Via Moreton's Mr.

Dear Sir:

As a result of your medical examination on August 27th., kindly be advised that your pensionable disability has been assessed at NIL.

Yours very truly,



For SECRETARY.

SM/

FORM FOR HISTORY AND MEDICAL RE-EXAMINATION OF PENSIONERS.**The Department Of War Pensions For Newfoundland**

TO MEDICAL EXAMINER:

Medical Report required; review date:—

ST. JOHN'S, Newfoundland,

Date AUGUST 27th., 1934.The Secretary, Dept. of War  
Pensions for Newfoundland.Per B:T:


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Regimental No. **2639** Rank **Pte:**

Name **HEBER JONES.** Address: **Western Head,**  
**Via Moreton's "r."**

Unit **ROYAL NFLD REGT:**

DESCRIPTION OF PENSIONER:

Apparent Age **34 Yrs.** Height Colour of Eyes **Brown.**

Complexion **FAIR.** Colour of Hair **Dark.** Weight

Marks of Identification:

---

SERVICE DISABILITY -

**GAS POISONING**  
- - - - -



Disability for which pension has been awarded:—

**MEDICAL REPORT**

- (1) Are you satisfied that the man presenting himself for examination is the pensioner named and described on page 1?
- (2) Give a definite detailed description of the present condition

WT 166½ P 80

Only complaint is that he gets weak when he goes to work.

He has much the same complaints of abdominal pains. Explained to him not pensionable disability. Seems very obtuse.

No signs in chest.

Special Questions:—

This is to certify that I have read, or have heard read, the above description of my disabling condition, that I find it to be correctly and satisfactorily stated, and have not withheld any information concerning any disability resulting from service. I also wish to state that my complaints are:—

(If there are no complaints, it will be so stated)

Signature  
of Witness .....

Pensioner's Signature .....

3. (a) PENSIONABLE DISABILITY—(Here state the nature of the disability which has been contracted, or aggravated, while on Active Service.)

*Nil*

(b) NON-PENSIONABLE DISABILITY—(Here state the nature of the disability which has not been contracted or aggravated, while on Active Service.)

4. (a) To what extent, if any, have the disabilities diminished or increased since last examination?

(b) If increased or undiminished is increase or failure to diminish due to intemperance, improper conduct or neglect to exercise reasonable care required by the nature of the disabling condition?

5. Will disabilities materially increase or diminish?

6. Are the disabilities permanent?

7. (a) Is pensioner wearing an artificial appliance for disability due to or aggravated by service?

(b) Should he continue to do so?

(c) If so, is any alteration in the form of the present appliance recommended?

(d) If any appliance is necessary?

8. (a) Would treatment reduce the pensioner's disability, or increase his comfort?

(b) Nature of treatment advised?

(c) Is pensioner willing to accept treatment advised?

(d) If not, is his refusal reasonable?

REFUSAL OF TREATMENT:—This is to certify that I thoroughly understand the nature of the treatment (To be completed when treatment advised has been refused.)

advised and refused to accept the same for the following reasons:

The foregoing report submitted by *me* Applied: *me* To *Clint* for *Clint* Months

Pensioner's Signature

Signature

Medical Examiner.

Place *St John's* by *me* *Clint* } Members

Date *Aug 27 94* *Clint* } (of a Board)

(In cases in which medical re-examination is being made by a medical practitioner in accordance with the second to last paragraph of page 1 hereof the medical practitioner will fill in such answer.)

9. (a) Has pensioner married since last medical examination?

(b) If so, is he receiving the additional allowance for a wife?

10. (a) Has a child been born to pensioner since last medical re-examination?

If so, is he receiving the additional allowance for a child?

11. If pensioner was married, has his wife died since last medical re-examination? (State date of death.)

12. Have any of pensioner's children died since last medical re-examination? (State date of death and names of children who have died)

Place

Date

Head of District Office, (or Medical Practitioner)

FOR OFFICE USE ONLY

Regt. No. 7639 Rank \_\_\_\_\_ Name K Jones Pension No. 529

Disability \_\_\_\_\_ per cent. Period \_\_\_\_\_ months

Pension for self nil per month

Allowance for wife \$ \_\_\_\_\_ per month

ALLOWANCE FOR CHILDREN

First Child \$ \_\_\_\_\_ per month

Second Child \$ \_\_\_\_\_ per month

Third and Other Children \$ \_\_\_\_\_ Each \$ \_\_\_\_\_

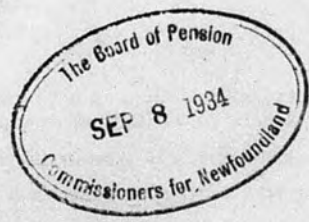
TOTAL MONTHLY PENSION \$ \_\_\_\_\_ For \_\_\_\_\_ Months

Total Authorized Amount \$ \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

PENSION GRANTED TO \_\_\_\_\_

Approved by [Signature] Chairman

[Signature] Commissioner.  
[Signature] Commissioner.



THE BOARD OF PENSION COMMISSIONERS  
FOR NEWFOUNDLAND.

Pension No: 529

Regt. NO: 2639 Rank Pte. Name HEBER JONES

Corps served with: ROYAL NEWFOUNDLAND REGIMENT

Date of Medical Board: SEPTEMBER 12, 1927 Disability: \_\_\_\_\_

Pension for Self: \_\_\_\_\_ per month, for ni mths.

Allowance for Wife: \_\_\_\_\_ per month, for \_\_\_\_\_ mths.

Allowance for children:

1st Child \_\_\_\_\_ per month, for \_\_\_\_\_ mths.

2nd Child \_\_\_\_\_ per month, for \_\_\_\_\_ mths.

\_\_\_\_\_ children \_\_\_\_\_ per month, for \_\_\_\_\_ mths.

(2 )

TOTAL MONTHLY PENSION: [Signature] per month, for \_\_\_\_\_ mths.

TOTAL AUTHORIZED AMOUNT [Signature]

*[Handwritten signature]*

Pension granted to:

HEBER JONES

ST. JOHN'S.

*Monahan's Hr  
n.s.B.*

Approved by:



[Signature]

CHAIRMAN.

[Signature]

COMMISSIONER.

[Signature]

COMMISSIONER.

[Signature]

SECRETARY.

Date of Marriage \_\_\_\_\_ Name of Wife \_\_\_\_\_

Name of Child \_\_\_\_\_ Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_ Date Allowance \_\_\_\_\_

*Monahan  
20/9/27*

# Report of Medical Board

Station St. John's, Nfld. Date September 12th, 1927.  
 No. and Rank 2639, PRIVATE. Age 27 YEARS Height  
 Name HEBER JONES Complexion FAIR BROWN  
 Unit Regt. Royal Newfoundland Eyes Hair DARK  
 Address (The Board will please note how the soldier's appearance corresponds with above description).  
 Former Trade  
 Enlisted at ST. JOHN'S On 28.4.16  
 Disease or Disability Original

## GAS POISONING:

Subsequent

Present Condition (Compare with previous Board)

164 lbs weight - Pulse 96 temp. 99° (mouth)  
 Some cough continued & some phlegm. Complaints of weakness and of pain in abdomen - constant pain near umbilicus, not aggravated by food. Pain interferes with doing any work. Abdomen soft ~~in~~ above umbilicus - more resistant below umbilicus particularly near McBurney point. Prostate not large. Seminal vesicles large and very sensitive. Skin reflex marked both sides at level umbilicus.

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

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

### Recommendation of Medical Board

This is a case of femoral hernia (with temperature & pain) not yet cleared up as to cause, might have to be operated on. When put to him explaining the condition he prefers to go home.

Members of Board

Explained that abdominal condition is not attributable to service - his case is not a case for operation in hospital - would pay allowance if he would accept. Refused to accept.

October 12th, 1927.

Mr. Heber Jones,  
MORSTON'S HR. N.D.B.

Dear Sir:-

I beg to acknowledge receipt of your letter of October 8th., referring to a letter written to Mr. Fox from this office stating certain particulars with regard to your pension.

In reply I beg to inform you that there was a typographical error made in this letter, and the date, to which you were paid pension should have read 1919, and not 1921 as given in the letter.

Trusting this explanation will prove satisfactory,

Yours very truly,

Secretary.

BT:

October 8/1927

Doctor Parsons

Dear Sir I want  
to bear you in mind of last  
Summer while I was at the  
Sudbury Hospital then I was  
drawing my Pension of \$112 dollar  
a month and when I came  
out of hospital it was totally  
cut off and then in forming  
a lawyer Mr Fox and  
I dare if you remember  
Sir here I have a copy  
of the letter with the Board  
of Pension send lawyer  
Fox and there are some  
thing in this letter that  
have struck me more  
foreely then any and  
that is I am agreed  
for drawing a Pension  
like this letter and I take my  
part - I did not -

as well give you the words  
 that - is on this copy that  
 Lawyer gave me and this  
 is the words

That - his service &  
 Disability was gas poisoning  
 he received a Pension in  
 respect - of this condition up  
 to 1921 which was at - the  
 year of 1921 I was at  
 Sundry Hospitals and I  
 got - you Pension then one  
 my family rather so what -  
 does this mean that I am  
 accused for Drawing Pension  
 from the time I was discharged  
 up to 1912 to this is false  
 I did not - see and if this  
 Pension was paid out - see  
 I did not - get it - and as  
 you are the speaker mean



of the Board of Pension  
 I would like for you to  
 look in to this for I have  
 the copy from the letter  
 that was send to me for  
 and I am going to see  
 what I can do about this  
 Well Doctor I think my self  
 according to this statement  
 that there have been money  
 payed put what I did  
 not get for I can take  
 my part that my Pension  
 was cut-off in 1919  
 the year I was at Water  
 foot Bridge Hospital after  
 discharged from Hospital  
 I came to Mortons Har and  
 after been here six months  
 I had a letter from the  
 Pension Board saying to

H  
Go to Doctor & I Leebrew  
that - Was in the year  
of 1919 that - was when  
my Pension was discontinued  
and here I am with this  
letter from Mr Fox Witch  
he had from the Board  
of Pension Station that I  
drawed a Pension from  
that - was - up to 1921  
I say again no Sir it  
is wrong & got - how Pension  
between the year of 1919  
and 1921 so Doctor Parsons  
Dear Sir I would like for  
you to consider this for  
me as you saw Sir there  
are some thing you doing  
in this and I am going to  
take this letter to some  
Higher Atority if I dont get  
Satisfactory

5-

So I am your truly Mr Hler  
Jones Vester Head

Via Mortons Her

2 D B

Am  
with  
Hler

March 28/<sup>th</sup> 1927

Mr C C Cole

Dear Sir

I am Righting down to you  
Asking you if John Oliver  
have drawn his Pension  
check yet as the Reason I am  
asking you this way she is  
because he owe me  
\$ 8 75 cts Board Money  
And I want you as AC  
Pension Secretary to make  
him pay me this before he  
get this check as I am only  
A poor man with a wife  
and 3 children to feed and  
I was good enough to take  
him in for shelter and then he

Ran away 2 day and left - fine  
and never pay me and he  
was payed off the Relief  
work & do it and promise -  
to come Right - Back and

Give it to me to wards his  
Board and I never layed  
eyes on him since and  
Mr. S. he also went  
around and talked about  
my home and said he was  
half starved but I  
can show you my ~~grocery~~  
grocery bills & Ram  
up since Oliver came  
& Board with me that  
shows he was not starved  
& was down & dective lee

And he told me to send  
down to you to tell you  
to put Attachment on  
his check so Mr  
Ock to find out the  
rights of this Ring  
up Mr Lee Detective  
And you will find  
it all out - so  
now Mr Ock I  
am leaving this  
up to you to do best  
as you are seeing  
of the Pension  
So I am yours  
truly  
Helen Jones  
28 Prince  
Street  
City

529

Mr C. C. Oke

Mr. C. C. Oke

Don't pay me  
I did not give  
you a receipt  
for the paid  
check  
Oct 9 1926  
Suburban Hospital

am sending down this note  
kindly give Mr. Nyles Bragg  
20 dollars as I owe it to  
him a long time ago and  
he told my wife to ask me  
for it as he read it so  
I am sending down this note  
to you and also since Mr  
Nyles Bragg came to  
check kindly oblige me  
Mrs Helix Jones  
Suburban Hospital

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act-21/1990

Mr. C. C. Cke  
Pension Board.

Dear Sir,

I am sending  
down this note to ask you  
if Doctor Knight told you  
any thing about a letter  
I gave him asking him  
if he would make ~~an~~  
arrangements for with you  
for my wife to draw a <sup>bit</sup> ~~part~~  
of money untill the end of  
the month as she is very  
much in need of it so kindly



fire out from Doctor Knight  
and

Oblige yours  
truly +

Mr Heber Jones  
Swobury Hospital

kindly answer  
by bearer

COPY

529

The Royal Newfoundland Regiment

Class for Demobilization:—  
**E**

529

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date ..... **28-2-19** .....

Regimental No. .... **2783** .....

Name ..... **Pte. Heber Jones** .....

Address ..... **St Phillips** .....

Present Medical Category..... **A1** .....

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

Members of Board { (**sgnd**) **R. H. Tait, Capt.** .....  
O.C. Discharge Depot.  
" **L. Paterson** .....  
Senior Medical Officer  
" **F. W. Burden** .....  
M. O. Depot

**Military Service: 1027 days**

THE BOARD OF PENSION COMMISSIONERS  
FOR NEWFOUNDLAND.

Pension No. 529  
Regt. No. 2639 Rank Pte Name Hester Jones

Corps served with \_\_\_\_\_

Date of Medical Board 26/10/26 Disability nil

Pension for self \_\_\_\_\_ per month, for \_\_\_\_\_ months.

Allee., for wife \_\_\_\_\_ per month, for \_\_\_\_\_ months.

Allowance for children:

1st Child \_\_\_\_\_ per month, for \_\_\_\_\_ months.

2nd child \_\_\_\_\_ per month, for \_\_\_\_\_ months.

\_\_\_\_\_ Children \_\_\_\_\_ per month, for \_\_\_\_\_ months.

TOTAL ALLEE., for C. \_\_\_\_\_ per month, for \_\_\_\_\_ months.

Total monthly Pension \_\_\_\_\_ per month, for \_\_\_\_\_ months.

TOTAL AUTHORIZED AMOUNT. nil

Pension granted to:

Regt. No. \_\_\_\_\_ Name Hester Jones

Corps served with \_\_\_\_\_ Address 41 Prince St

Date of Medical Board [Signature] city

Approved by:

\_\_\_\_\_ per month, for \_\_\_\_\_ months.

\_\_\_\_\_ Chairman.

[Signature] Commissioner.

\_\_\_\_\_ Commissioner.

\_\_\_\_\_ SECY.

PARTICULARS OF FAMILY:

Date of Marriage. Name of Wife.

Name of child. Sex. date of Birth. Expiration of A.

\_\_\_\_\_

Pension granted to:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



[Signature]  
8/11/26

[Signature]

# Report of Medical Board

Station	St. John's, Nfld.	Date	OCTOBER 26, 1926.	
No. and Rank	2639--PRIVATE	Age	26 YEARS	Height 5'7"
Name	HEBER JONES	Complexion	FAIR	
Unit	Royal Newfoundland	Eyes	BROWN	Hair DARK
Address	41, PRINCE'S STREET	(The Board will please note how the soldier's appearance corresponds with above description).		
Former Trade				
Enlisted at	ST. JOHN'S	On	28/4/16	
Disease or Disability	Original	<u>GAS POISONING.</u>		

## Subsequent

Present Condition (Compare with previous Board) *Wt 153 Pulse 88.*  
*See Sudbury report.*  
*Says he has pain in stomach and can eat no meat. Has not eaten meat for 6 mos.*  
*Chest normal. Except for some cardiac enlargement.*

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

*Nil*

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

*Nil*

## Recommendation of Medical Board

### Members of Board

*Amey Macpherson*  
*J. B. Jones*

*B.P.C. responsible for chest condition only.*

THE BOARD OF PENSION COMMISSIONERS  
FOR NEWFOUNDLAND.

Pension No 529

Regt. No 2639 Rank Plt Name Heber Jones

Corps served with \_\_\_\_\_

Date of Medical Board 29/9/26 Disability 100%  
*in Hospital*

Pension for Self \_\_\_\_\_ per month for \_\_\_\_\_ months.

Allowance for Wife " " " 6666 months.

Allowance for children:

1st. Child \_\_\_\_\_ per month for \_\_\_\_\_ months.

2nd. " 6666 " " " \_\_\_\_\_ months.

\_\_\_\_\_ Children @ \_\_\_\_\_ each per month for \_\_\_\_\_ months.

Total monthly pension \$ 11200 for in Hospital months.

Total authorized amount \$ \_\_\_\_\_.

Pension granted to:-

Approved: \_\_\_\_\_  
by \_\_\_\_\_ % for \_\_\_\_\_  
Medical Adviser. Months



Name Heber Jones  
Address: Sudbury St

W. J. ... Chairman  
E. Hall Commissioner  
do.  
Secretary.

Date of Marriage: \_\_\_\_\_ Name of Wife: \_\_\_\_\_

Names of Children. Sex. Date of Birth. Date expires.

*Jones*

So's Hope  
you will  
take this  
letter and  
understand  
what I am  
going to &  
do about -  
my pension.  
So's am  
you truly  
Believe me  
Doctor  
Carson

is getting it. And can get  
go to there days work  
But - that - don't - count  
it - is them and it - it  
only right that - they  
should get it - it - it  
then they fight for it.  
and my self I was  
severely gapped and it  
is still hand around  
me and all ways  
Will the Doctor say  
what - they like I was  
talking to a certain  
doctor and he said I should  
be getting my pension  
as I got - all my papers  
to show what - I was on  
fit - for medical service

Western Head  
Via Norton H.  
9 13

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the  
May 25 / 1928

Doctor Carson

Dear Sir

How dought you are just -  
about tired getting letters  
frome But - you will be  
tridder for I do not intend  
to give up my pension for  
I am intitled to it - and have  
it - I will suppose I go to  
law for it - as I can  
get - a lot - to back me  
up for they all know I  
am intitled to it - as I  
work a little and then give  
up to try and keep my  
wife and children from  
starven and then for the  
doctor at - the Board to

Pension Paying me a  
 (142) 0000 dollars a month  
 for 1926 if I was not  
 entitled to my Pension  
 was they paying me that  
 - I am for been in on  
 a sickness I got - Since I  
 come back from war  
 now - it - is he course I  
 am done in on my Pension  
 And you do not want  
 to give it - to me I get  
 But - I will see if I can  
 get it - as I have a good  
 money on my side - to  
 back me up and I  
 I should be getting my  
 Pension and I am my  
 self and I feel sure  
 it is due me and  
 why not - I get it - as  
 will as think that

Say that - my trouble is  
 not - due to my War Service  
 with I now my self it  
 is for I was a good strong  
 man when I went there  
 was not - I was cool and  
 of Calm and I was  
 I did - summer France I  
 and went - to London and  
 to the Hospital and come  
 out - on fit - for medical  
 Service with I was  
 discharged over there  
 and sent home as they  
 could do nothing more for  
 me and then for the doctors  
 over here to say it is  
 not true my War Service  
 when I was it is my  
 self so what - I want  
 to find out - is what -  
 was the Board of

# Report of Medical Board

Station St. John's, Nfld. ) Date SEPTEMBER 29, 1926  
 No. and Rank 2639--PRIVATE Age 26 YEARS Height 5'7"  
 Name HERBER JONES Complexion FAIR  
 Unit Royal Newfoundland Eyes BROWN Hair DARK  
 Address 41 PRINCES STREET (The Board will please note how the soldier's appearance corresponds with above description).  
 Former Trade  
 Enlisted at ST. JOHN'S On 28/4/16  
 Disease or Disability Original GAS POISONING.

Subsequent

Present Condition (Compare with previous Board)

155 lbs weight Pulse 104  
 Not much cough now + no blood for past two weeks.  
 Normal Vesicular Breathing both lungs.  
 Complaints of pain in lower abdomen, both sides.  
 And skin is hyperaesthetic. Rectal temperature 100°

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

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

**Recommendation of Medical Board**

Not yet fit for discharge from Hospital. Requires investigation of the abdominal pain with Rectal temperature.

Members of Board

*[Signature]*  
 \_\_\_\_\_  
*[Signature]*  
 \_\_\_\_\_



THE BOARD OF PENSION COMMISSIONERS  
FOR NEWFOUNDLAND.



IN REPLY REFER TO  
No. 529

ST. JOHN'S,  
NEWFOUNDLAND.

October 27, 1926.

To B.P.C.

2639 Heber Jones.

Kindly note that the marginally named man was DISCHARGED from SUDBURY HOSPITAL on October 26, 1926, where he had been undergoing OBSERVATION in respect of GAS POISONING.

*Margaret Doyle.*

*M*

*J. M. C.*

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Jan 13, 1932.

Rev. J. Brinton,  
Clergy House,  
C I T Y.

Dear Mr. Brinton:

With reference to your inquiry into the case of Mr. Heber Jones, Moreton's Hr., I beg to inform you that this man has been examined by various doctors and the decision of the Medical Board is that his present disability is in no way attributable to his war services and as a result no pension can be awarded. This fact has been communicated direct to Mr. Jones on several occasions.

I return herewith your letter from the Rev. Mr. Hollands.

Yours very truly,

For Secretary.

TMH/MMS.  
Enc. 1.

Sheet No. ....

## PAY AND ALLOWANCES

Pension No. 529

## HOSPITAL PERIOD

Name Heber Jones Regt. No. 2639 Rank \_\_\_\_\_ Hospital Madbury

Remarks .....

Date of Admission	Date of Discharge	Number of Months and Days	Rate of Pay and Allowance	Total Cr.	PREVIOUS PENSION			PAYMENTS		Total Dr.
					Rate	Date Paid to	Amount	Amount	Date	
29 9/26	26 10/26		112 00	10453			10.00	/	4827	
							20 00		4847	
							20 00		4926	
				10453			54.53		4927	10.453

*G. H. [unclear]*

of Pension Commissioners  
for Newfoundland.

DISABILITY

Pension No. 529

CLAIM FOR PENSION.

I hereby make claim for pension and solemnly declare that the answers given by me to the following questions are true.

1. What is your full name? *Heber Jones* Regt. No. *2639*
2. What is your address? *28 Princess Street St John's N.F.D.*
3. (a) Are you married? *yes* On what date? *the 2 day of January 1918*  
 (b) What is your wife's maiden name? *Mary Caroline Peddle*  
 (c) When was she born? *191*  
 (d) Is she living with you? *yes*  
 (e) Is she supported by you? *yes*
4. (a) How many children living under the age of sixteen years (if boys) or seventeen years (if girls) have you? *2 Boys 1 girl*  
 (b) Are they living with you? *yes*  
 (c) Are they being supported by you? *yes*  
 (d) Have any of them contracted marriage? *no*  
 (e) Give full particulars of children hereunder:—



PARTICULARS OF CHILDREN

(Name in Full)	(Sex)	Date of Birth (Day, Month, Year.)
<i>William Herman Friedrich Jones</i>		<i>Born on the 17 day of August 1914</i>
<i>Harold Boston Jones</i>		<i>Born on the 16 day of February 1913</i>
<i>Lenzie Lillian Jones</i>		<i>Born on the 4 day of June 1912</i>

*Heber Jones*  
Signature of Pensioner.

IMPORTANT

This claim form must be signed in the presence of either a representative of the Board of Pension Commissioners, a Barrister, Solicitor, Notary Public, Justice of the Peace, or any person authorized to administer an oath, who will make the following declaration:

I solemnly declare that I was present and saw the claimant (described above) sign this claim for pension form and to the best of my knowledge and belief he is the claimant he represents himself to be.

Date *Aug 23<sup>rd</sup> 1926*

*W. J. Martin* Signature  
*St John's* Address  
*Registrar General* Occupation

Mr Cooke

Sudbury Mass  
Oct 6

Dear Sir

I am writing to you  
for an answer of the letter  
I sent to you one the first  
of the month I wrote  
to you and you did not  
answer it. So I thought I  
would write you a few  
more words and ask you  
the reason why I did not  
hear what I said on the  
letter it was getting out  
of the way at all. Only  
I told you I was  
writing to you to find  
out if I was not entitled  
to my back Pension money  
with I know my self I am

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To Mr Crooke

You might think I am  
foolish for writing to  
you for such a thing  
But if you think I am  
a fool you will  
buy me for a wise one  
~~at least~~ Remember  
Mr Crooke I don't want  
any one's but only my own  
and that - I am going  
to leave when I come  
out of the hospital and  
and then I will talk to  
you my self I had  
written my letter that I  
wrote to you on the first  
so I will bring of for you  
I am yours truly Mr Heligson

of Hospital probably you think I cant  
prove what I am saying on the  
letter Mr Coker But I can testify  
I got the news from a real  
friend of mine he had his cut of  
the same way But got it - Back  
again you But you life and  
so will I so you see if it comes  
to any trouble I can tell you  
the man so I can tell you I  
am not going to give up if it  
takes till the day of my death  
I am going to fight my case to the  
better end as I am a sick man and  
cannot do it days work I

Am yours sincerely

Mrs Helen Jones 639

to CC Coker

To the Board of Jan 8/1927  
Pension 529  
Secretary Mr CC Coker  
Dear Sir I thought  
it of pleasure to sit down and  
drop you a hot - Can you remember  
when I was in Hospital I wrote you  
a letter and you did not answer  
them I was referring that time for  
my Back Pension as I came from  
the Hospital I was receiving a  
Pension at that time and I thought  
it would be right for me to put in  
a claim for my Back Pension then  
there are lots of things I can tell you  
probably you think I dont know  
what I am going to say now I am

Quit. Way then this & wired my  
 Brother last night as a witness  
 that she looked after me ever  
 since my opinion been cut by  
 my Brother been looking after  
 me you can probably guess what  
 I am promising to do I am not going  
 to do any more fighting I am  
 going to get at it. A quiet  
 way then that - as you are trying  
 to drive me out of my business  
 But you will want to go home for  
 I am a sick man & now by our  
 feelings I dont want any doctor to  
 tell me and dont think for a minute  
 it would be so to cut me off  
 from 10 hundred and twelve dollars  
 to nothing after just coming out

Not afraid to speak off back if  
 you pay more attention to your  
 work in that department you  
 would not be up start playing  
 Poser traps you think bye me saying  
 this I dont want you nothing but I have  
 found out a lot by friends who  
 have fat over seas with me  
 it is one soulders right - to tell  
 another if he has any thing and  
 this are the friends that told me  
 and I thought it was higher for me  
 to right to better then it - was for me  
 to come down to your apartment and  
 kick up a row I did not want  
 to do that - for I am not of man  
 for that - I can work my case it



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Nov. 6th, 1926

Mr. Heber Jones,  
41 Prince Street,  
C I T Y.

Dear Sir:-

I have been directed to inform you that as a result of the Medical Board last held on you, it is stated that you are not at the present time suffering from any disability due to your War Service.

Yours very truly,

SECRETARY.

BT.

THE BOARD OF PENSION COMMISSIONERS  
FOR NEWFOOTILLAND.

Pension No. 529  
Regt. No. 2639 Rank Pte. Name HEBER JONES

Corps served with ROYAL Nfld REGT.

Date of Medical Board Aug 16/26 Disability HP. ALLCE  
*for 6 months whilst under observation.*

Pension for self \_\_\_\_\_ per month for \_\_\_\_\_ months.

Allowance for wife \_\_\_\_\_ per month for \_\_\_\_\_ months.

Allowance for children:

1st Child \_\_\_\_\_ per month for \_\_\_\_\_ months.

2nd Child \_\_\_\_\_ per month for \_\_\_\_\_ months.

\_\_\_\_\_ Children @ \_\_\_\_\_ per month for \_\_\_\_\_ months.

TOTAL ALLCE. FOR C<sub>2</sub> \_\_\_\_\_ per month for \_\_\_\_\_ months.

Total monthly pension 112 ~~\$104.00~~ for 6 months.

TOTAL AUTHORIZED AMOUNT ~~\$624.00~~

Pension granted to:

Name HEBER JONES

Address 41 PRINCES ST.

20.6.26  
BT.

*Mann  
21/8/26*

Approved by: \_\_\_\_\_  
*for 6 months*  
by \_\_\_\_\_  
*Medical Adviser.*

\_\_\_\_\_  
Chairman.  
\_\_\_\_\_  
Commissioner.  
\_\_\_\_\_  
Commissioner.  
\_\_\_\_\_  
Secretary.

PARTICULARS OF FAMILY:

Date of Marriage. \_\_\_\_\_ Name of Wife. \_\_\_\_\_  
Names of Children. \_\_\_\_\_ Sex. \_\_\_\_\_ Date of Birth. \_\_\_\_\_ Expiration of Allowance. \_\_\_\_\_

# Report of Medical Board

Station St. John's, Nfld. Date AUGUST 16th, 1926  
 No. and Rank 2639 Pte. Age 26 Height 567 $\frac{1}{2}$ "  
 Name HEBER JONES Complexion FAIR  
 Unit Royal Newfoundland Eyes BROWN Hair DARK  
 Address 41 Prince Street, (The Board will please note how the soldier's appearance corresponds with above description).  
 Former Trade  
 Enlisted at 25.4.26 On  
 Disease or Disability Original

Subsequent GAS. POISONING

Present Condition (Compare with previous Board)

Complains of "pain in stomach" and pain in left side region  
 Pain has been constant for the past year. Gets worse  
 5 or 10 minutes after meals. Vomits in the evening.  
 States that he passed blood from bowels last week  
 on three occasions.

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

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

Recommendation of Medical Board

Enter Sudbury Hoop  
 for observation & repair

Members of Board

HOSPITAL ALLOWANCES DURING  
~~PERIOD OF OBSERVATION.~~ PERIOD OF OBSERVATION.

*m*

*[Signature]*  
 \_\_\_\_\_  
*[Signature]*  
 \_\_\_\_\_

529

Oct 41 1936

Sulbury Hospital

Mr C. C. Oke  
Pension Board

Dear Sir:

I am writing  
to you to ask you to let  
my wife to draw some money  
to morrow Oct 15<sup>th</sup> as she is  
need of it. Please give her \$100.00

Well Mr Oke you  
said I could not write my  
self no I can not but I  
can get some one to write  
for me please pay this  
to her My wife Mrs Jones

+  
From Mr Helen Jones  
Sulbury Hospital

THE BOARD OF PENSION COMMISSIONERS  
 ..... FOR NEWFOUNDLAND .....

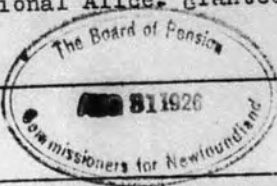
Regt. No. 2637 Rank Pte Name Heba Jones Pension No. 529

Rate of Pension 100 % in Hospital

Date of Marriage 27/1/18 Name of Wife Mary Caroline Peddle

Additional Allee. granted for wife \_\_\_\_\_ per month.

Date \_\_\_\_\_



*[Signature]*  
 Secretary

ALLOWANCE FOR CHILD OR CHILDREN

Rate of Pension 100 % ending in Hospital

Receiving allee. for \_\_\_\_\_ children *[Signature]*

Particulars of child, No. 3 children

Name	Sex	Date of Birth.
<u>Norman Fresh</u>	<u>Male</u>	<u>17/8/1919</u>
<u>Harold Boston</u>	<u>Male</u>	<u>10/2/23</u>
<u>Janice Lillian</u>	<u>Female</u>	<u>4/6/20</u>

Allee. of 100 per month granted from in Hospital



Child becomes of age \_\_\_\_\_

Date \_\_\_\_\_

*[Signature]*  
 Secretary

W. E. WOOD, K. C.  
W. O'D. KELLY  
ALEX. O'D. KELLY

WOOD & KELLY  
BARRISTERS, SOLICITORS AND NOTARIES  
TEMPLE BUILDING, DUCKWORTH STREET  
ST. JOHN'S, NEWFOUNDLAND

529

Oct. 11th, 1926

Mr. Heber Jones,  
50 Prince's St.,  
City.

Sir:

Unless the arrears of rent due by you to Jas. Lynch  
be paid by noon to-morrow, the 12th inst. legal proceedings  
will be instituted against you to compel payment.

Yours truly,

*Wood & Kelly*

January 16th 1924.

Mrs. M. H. Jones,  
Western Headg  
Moreton's Harbour.

Dear Madam:-

Your letter of November 2nd addressed to His Majesty, the King, has been referred to this Department for reply.

For your information I would say that when your husband was examined on October 14th 1921, the effect of his disability due to service was considered to have passed away, and consequently, pension was discontinued.

If, however, Mr. Jones considered that his disability is greater than that estimated by the Medical Board, and can prove same by Medical evidence, we shall be glad to have his case re-considered.

Yours very truly,

Secretary.

EED.



January 15. 1924.

Sir:

I have the honour to forward herewith Despatch No. 141 of the 15th December last from the Secretary of State, covering letter from Mrs. M.H. Jones, of Western Head, Montserrat Harbour, appealing for assistance in obtaining a Pension for her husband who was wounded in the Great War. Will you kindly look into this case and make direct reply to Mrs. Jones in the matter.

I have the honour to be,

Sir,

Your obedient servant,

Deputy Colonial Secretary.

C.C. Oke, Esq.,  
Secy. Board of Pension Commissioners.



H.



834/23

DUPLICATE

NEWFOUNDLAND

DOWNING STREET.

NO. 141

15 December, 1923.

Sir,

I have the honour by His Majesty's command, to transmit to you, to be laid before your Ministers, the accompanying letter addressed to His Majesty the King by Mrs. M.H. Jones appealing for assistance in obtaining a pension for her husband who was wounded in the Great War.

I have the honour to be,

Sir,

Your most obedient,

humble servant,

(Signed) DEVONSHIRE

Mrs. Jones  
19 Nov. 1923.

*B.S. 29 Dec: Oct.*

GOVERNOR

SIR W.L. ALLARDYCE, K.C.M.G.,

etc.

etc.

etc.

14

A thought of Poor Women

Please answer  
A Letter

King and country and his name  
 is Sirgan Marton Price  
 20101, D C M who was wounded  
 and dyed in there London general  
 Hospital and another brother  
 in Law was name is Lance  
 couple Norman Le France  
 who was wounded in the  
 Great War and also a  
 great number of courtes  
 decides so you see I  
 had a lot of people fighting  
 for there King and County  
 so my anagaty if you only  
 could see the condistry we  
 are in to day for a soldier  
 you should be surprised for  
 here is a cold winter coming on

PRIVATE SECRETARY'S OFFICE

BUCKINGHAM PALACE

10 DEC 1923

This letter has not been  
acknowledged

Nov 2 19/23

C. O.  
60409

12 DEC 23

King George V

My Anagaty

Thought it a great one  
 to sit down and right  
 you a letter as I thought  
 you were the only one that  
 would see in to my state  
 as I am a poor soldiers wife  
 and is a mother of three children  
 and my poor husband is  
 a wounded soldier he was  
 gart Prison in the great  
 War 1916 and came home in  
 1918 after seven years and  
 21 days in the Great War  
 he is listed April 28th 1916 and  
 was discharged May 28 1918 and

able to work only a short time  
 and I have to do some thing  
 for the sake of my dear little  
 children and my  
 Amagety I want them all  
 there is now but a little  
 work in Newfoundland to be  
 done and there is a lot of  
 our boys to day getting a  
 Pension money that is now  
 more than my Dear Husband is  
 But my Amagety not saying  
 they are not intitled to it for  
 I know there are as well as another  
 But my Amagety I also had  
 a Dear Brother in law who  
 fought and died for his

he was Private Heber Jones  
 Regimental Quartermaster is Feb 39. and  
 he also had to Moor Brothers  
 fighting for our Mother Country  
 Private Fred Jones and Private  
 Lyde Jones who thought it  
 a great Blessing to be in good  
 straight to do so and was  
 willing to give up the lives  
 for Home and King and  
 my Dear Amagety the Reason  
 I am Righting you is because  
 my Husband is not getting  
 any Pension money after  
 Risking his Precious life for  
 Home and King, and Sincerely  
 got Pension and he is not

us and we to day have now food  
and no clothing to keep us from  
the cold winter coming on if it  
woudnt for my little children  
I woudnt care so my enogity  
if you will kindly see in  
to my case and do some thing  
for us the Great Lord Above  
us will abundly Bless you  
and the Royal family and  
May he spare you to train over  
our country for money of grace

And also ~~the~~ Dear Queen  
long may she reign so

O Remain your A  
Soldiers Wife

Mrs Mary H Jones

Western Head

Via Mortons Har

N D B

Newfoundland

THE BOARD OF PENSION COMMISSIONERS FOR NEWFOUNDLAND

Pension No. 529

Regt. No. 2639 Rank \_\_\_\_\_ Pte. Name Heber Jones

Corps. served with Royal Newfoundland Regiment

Date of Medical Board November 8, 1921.

Pensionable Disability Sabbary for observation.  
100% whilst in Hp. for \_\_\_\_\_ months.

Pension granted: \$ \_\_\_\_\_ per month for \_\_\_\_\_ months.

Total authorized amount \$ \_\_\_\_\_

or Gratuity granted: \$ \_\_\_\_\_ payable in \_\_\_\_\_ equal monthly installments.

Granted to:-

Name Heber Jones

Address Moreton's Hr. N.D.B.

Date case disposed of: \_\_\_\_\_

Approved by:

Members of Board

W. H. P. P. P. Chairman.

Remarks:

Case only reviewed total if he  
had a pensionable disability  
W. H. P.

## Report of Medical Board.

Station	St. John's, Nfld.	Date	NOVEMBER 8TH., 1921.
No. and Rank	2639 PRIVATE	Age	26 YEARS    Height 5'7 $\frac{1}{4}$ "
Name	HEBER JONES	Complexion	FAIR
Unit	Royal Newfoundland	Eyes	BROWN            Hair DARK
Address	MORETONS HARBOR, N. D. B.		
Former Trade	FISHERMAN		
Enlisted at	ST. JOHN'S On 28.4.16		
Disease or Disability	Original	<u>GAS POISONING</u>	

(The Board will please note how the soldier's appearance corresponds with above description).

### Subsequent

Present Condition (Compare with previous Board)

*Pale 92.  
Complains of pain in left axilla  
Tender along tenth intercostal space  
Nothing in lungs or heart.*

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

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

**Recommendation of Medical Board**

*Sadler Hoop  
Observation*

Members of Board

*[Signature]*  
\_\_\_\_\_  
*[Signature]*  
\_\_\_\_\_



## FORM FOR HISTORY AND MEDICAL RE-EXAMINATIONS OF PENSIONERS.

## THE BOARD OF PENSION COMMISSIONERS FOR NEWFOUNDLAND.

TO MEDICAL EXAMINER:

Medical Report required; review date:—

ST. JOHN'S, Newfoundland,

Date OCTOBER 4, 1921AS SOON AS POSSIBLE.The Secretary, Board of Pension  
Commissioners for Newfoundland.

Per.....

Regimental No. 2639Rank PRIVATEName HEBER JONESADDRESS: MORETONS HARBOR, N. D. BAY.Unit ROYAL NEWFOUNDLAND REGIMENT.

## DESCRIPTION OF PENSIONER:

Apparent Age 26 YEARSHeight 5' 7 $\frac{1}{4}$ "Colour of Eyes BROWNComplexion FAIR

Colour of Hair

DARK

Weight

Marks of Identification:

JANUARY 22, 1918: PULSE 76. NOTHING IN CHEST. HAS SOME COUGH. HAS HEADACHES AND NO APPETITE IN MORNINGS. RECOMMEND ADMISSION TO HOSPITAL.

MARCH 7, 1918: PULSE 76. COMPLAINS HEADACHES AND NO APPETITE.

MAY 11, 1918: COMPLAINS OF HEADACHES AND SORE THROAT. HAS COUGH. DISCHARGE FROM HOSPITAL.

NOVEMBER 14, 1918: HE HAS DEFINITE PLEURISY RALES AT THE BASE OF THE LEFT LUNG. BREATHING AND LUNGS ABOUT NORMAL. PULSE 80. APPETITE GOOD. HAS HARD PAIN AT TIMES WHEN PASSING URINE AND SOME TIGHTNESS OVER THE LOWER ABDOMEN. THIS CONDITION STARTED IN JULY 1918 AND DOES NOT IMPROVE ANY. HEART NORMAL.

MAY 20, 1919: PULSE 72, SITTING. TEMPERATURE NORMAL. CYSTITIS CLEARED UP. SOME FLATULENCE IN LOWER ABDOMEN. SMALL PLEURITIC RALES OVER A SMALL AREA OF FRONT LEFT BASE. GENERAL HEALTH GOOD. MARKED IMPROVEMENT SINCE LAST REPORT. BREATHING NORMAL. HEART NORMAL. SOME SLIGHT PAIN AT TIMES AROUND RIGHT BASE.

DECEMBER 8, 1919: HEADACHES IMPROVED. TENDER ALONG INTERCOSTAL SPACE OF LEFT SIDE. (OWN STATEMENT) PULSE 80. NO OBJECTIVE SYMPTOMS. WELL NOURISHED, POWERFUL MAN.

DISABILITY FOR WHICH PENSION HAS BEEN AWARDED:

GAS POISONING.



THE BOARD OF PENSION COMMISSIONERS FOR NEWFOUNDLAND

IN WITNESS WHEREOF, I have hereunto set my hand and the seal of the Board of Pension Commissioners for Newfoundland, at St. John's, Newfoundland, this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

Signature of Pensioner: \_\_\_\_\_  
Name: \_\_\_\_\_  
Rank: \_\_\_\_\_

Signature of Medical Officer: \_\_\_\_\_  
Name: \_\_\_\_\_  
Rank: \_\_\_\_\_

Signature of Board Member: \_\_\_\_\_  
Name: \_\_\_\_\_  
Rank: \_\_\_\_\_

Signature of Board Member: \_\_\_\_\_  
Name: \_\_\_\_\_  
Rank: \_\_\_\_\_

Signature of Board Member: \_\_\_\_\_  
Name: \_\_\_\_\_  
Rank: \_\_\_\_\_

Signature of Board Member: \_\_\_\_\_  
Name: \_\_\_\_\_  
Rank: \_\_\_\_\_

Signature of Board Member: \_\_\_\_\_  
Name: \_\_\_\_\_  
Rank: \_\_\_\_\_

Disability for which pension has been awarded:—

## MEDICAL REPORT.

(1) Are you satisfied that the man presenting himself for examination is the pensioner named and described on page 1?

(2) Give a definite detailed description of the present condition.

eyes.  
Oct. 14<sup>th</sup> 1921. 3 p.m.

General condition good. Well nourished.  
all râles in left chest cleared up.

Complaints of unimportant neuralgic  
pain around the left side & back.  
Pulse sitting 80: Standing 84. Temp. N.

Cystitis cleared up.

He complains of tight feeling of the chest  
at times, absent at this time.

Nothing found by physical examination  
in the way of abnormal symptoms save  
a somewhat accelerated pulse.

Heart normal.

Special Questions:—

This is to certify that I have read, or have heard read, the above description of my disabling condition, that I find it to be correctly and satisfactorily stated, and have not withheld any information concerning any disability resulting from service. I also wish to state that my complaints are:—  
(If there are no complaints, it will be so stated.)

Signature

of Witness

A. J. Le Drene M.D.

Pensioner's signature

Heber <sup>his</sup> Jones  
M.D.  
A. J. Le Drene.

3 (a) PENSIONABLE DISABILITY—(Here state the nature of the disability which has been contracted, or aggravated, while on Active Service.-

(b) NON-PENSIONABLE DISABILITY—(Here state the nature of the disability which has not been contracted or aggravated, while on Active Service.)

4 (a) To what extent, if any, have the disabilities diminished or increased since last examination?

(b) If increased or undiminished, is increase or failure to diminish due to intemperance, improper conduct or neglect to exercise reasonable care required by the nature of the disabling condition?

5 Will disabilities materially increase or diminish?

6 Are the disabilities permanent?

7 (a) Is pensioner wearing an artificial appliance for disability due to or aggravated by service?

(b) Should he continue to do so?

(c) If so, is any alteration in the form of the present appliance recommended?

(d) If any appliance is necessary?

8 (a) Would treatment reduce the pensioner's disability, or increase his comfort?

(b) Nature of treatment advised

(c) Is pensioner willing to accept treatment advised?

(d) If not, is his refusal reasonable?

*Approved by [Signature]*

REFUSAL OF TREATMENT:—This is to certify that I thoroughly understand the nature of the treatment advised (To be completed when treatment advised has been refused.)

and refuse to accept the same for the following reasons:

The foregoing report submitted by \_\_\_\_\_ Pensioner's signature \_\_\_\_\_

Signature \_\_\_\_\_ Medical Examiner.

Place \_\_\_\_\_

Date \_\_\_\_\_

Members (of a Board)

The answers to the following questions are to be filled in by the representative of the District Office of the Board of Pension Commissioners.

(In cases in which medical re-examination is being made by a medical practitioner in accordance with the second to last paragraph of page 1 hereof the medical practitioner will fill in such answers).

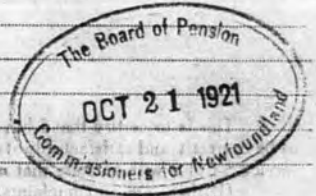
9 (a) Has pensioner married since last medical re-examination?

9 (b) If so, is he receiving the additional allowance for a wife?

10 (a) Has a child been born to pensioner since last medical re-examination?

10 (b) If, so, is he receiving the additional allowance for a child?

11 If pensioner was married, has his wife died since last medical re-examination? (State date of death.)



12 Have any of pensioner's children died since last medical re-examination? (State date of death and names of children who have died.)

Place \_\_\_\_\_

Head of District Office. (or Medical Practitioner.)

Date \_\_\_\_\_

7/14  
19/21

15 Branbridge St  
St Johns  
N.F.W.I.

529

c.c. Oake

Dear Sir

I am Promitted to the Hospital  
and I want to find out  
about my Pinson Money  
Please let me go as I  
am in need of it as I  
and my wife owe five  
shillings Board and I want  
to pay for it as my  
wife is in need of some  
money to to fit out  
the children for the  
cold weather as you  
know Mr Oake it is  
the only money she got  
to ~~live~~ live up on  
for she is getting getting  
any money of her own

Witch she should be  
getting some Patriotic  
money so please renewed  
eye the Bureau as I  
want to you ~~it~~  
How soon I will get it  
so I am you truly  
Mr. Keller yours

529

Oct. 5th/21

Mr. Heber Jones,  
Western Head, N. D. B.

Dear Sir:-

Your communication of Sept. 18th to Capt. G. J. Whitty has been referred to this Department for attention.

In reply I would state that we are making arrangements with Dr. LeDrew to have your boarded and on receipt of your papers your case shall be considered by the Board.

Yours faithfully,

Secretary.

EED.

The Secretary

Tullypore  
Sept 26/90.

Raccoon Board

Sir, I beg to say  
that Hester Jones 2639 of  
Moncton N.B. is here for a  
Medical Board. No Report  
form for this man has been  
received from your department  
as yet, please forward one  
so that I can examine the man  
or report, as he is anxious to  
have a board.

Yours

J. D. Sedgwick.

Wetton Head

sep 18

19/21

Captain Whitty

Dear Sir & You take the  
Pleasure of Righting to you again  
on the behalf of my certificate  
that I sent you five months ago  
and did not get any answer from  
it I write & got from the doctor  
& Le Ledrew after he examined  
me and you Mr Whitty as  
you are the man that the  
members of G. W. V. do get to  
trust to see Mr Whitty  
when I joined the G. W. V.  
& thought that I was in a  
society that would help me  
and to be looked after But  
I am led to think that there  
is no one taking my work up  
there are not even the doctors



I am going to do for the winter  
 so Mr Whitty & now it is  
 going to be pretty hard for  
 me for my Whitty & I dont  
 mind working if I could get  
 some job easy for a coal only  
 work till I die for I believe  
 every soldier that are dis-  
 abled that they are suppose  
 to have a job while Mr Whitty  
 Dear Sir if I was receiving  
 Pension money which is in-  
 titted to me it should help  
 me a long for the winter  
 for I dont think it is right  
 Mr Whitty to treat a soldier  
 in such a way as that so  
 I should like for you Mr Whitty  
 if you received the doctors

if you please Right and let  
 me you and a while get to know  
 in my own home that will  
 Right you and tell you just  
 how I am standing to day  
 and my state I am in and  
 they will tell you how I am  
 dectomated & tell you my  
 Whitty that I am feeling  
 Prutty Bad over the hard  
 ship I received in France  
 and you cannot work and  
 getting no suport as you can  
 my Whitty fishing is hard work  
 for I mean that cannot  
 work for I have not got fish  
 enough this summer to suport  
 my wife and child three months  
 so my Whitty just think one what

certificate to Right as soon  
 as you can and let me you  
 case was down to Doctor Le drew  
 about it and he told he  
 it was strange thing why you  
 did not Right ~~and~~ let me  
 you any thing about soon  
 rightly Right and let me  
 you in the name of his  
 Amagita the King

so you & am yours

in Respect Mr. Allen  
Jones

1 - Certificate No 2639

Sept. 15th/31

Mr. Heber Jones,  
Western Head, N.D.B.

Dear Sir:-

With reference to your communication of Aug. 15th to the Prime Minister, which has been referred to this Department.

I beg to state that we are awaiting report from Dr. Ledrew before the Board can further consider your case.

As soon as same is disposed of you will be further advised.

Yours faithfully,

Secretary.

EED.



September 6, 1921.

Sir,

I have the honour to forward herewith, letter under date 19th August from Mr. Heber Jones of Western Head, N.D.B., in relation to his pension. He sets forth his case, and I shall be glad if you will look into the matter, and make direct reply to him in the premises.

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

Deputy Colonial Secretary.

J.A. Clift, Esq., C.B.E., K.C.,  
Chairman, Board of Pension Commissioners.

N.

	Date	Initials
RECEIVED	12 9/21	CCD
FORWARDED TO		
ANSWERED	13 9/21	CCD

August 1/19  
19/21  
T.C.

Honorable Premier Squires

Dear Sir

I now take the

pleasure for Righting you this letter  
as I am a Return Soldier and a  
Member of the G. W. V. A. I am  
stating my case before you  
Referring to my Pinion Money  
which I am entitled to as I in-  
tended in the Army April 28<sup>th</sup> 1916  
and was discharged May 25<sup>th</sup> 1918  
as no longer fit for War service  
as I was gassed. Poison in France on  
the 24<sup>th</sup> day of March 1917 at the Battle  
of Cambes to Premier as I letter  
the G. W. V. A. at Johns as been one  
of the Members. Referring to them about  
my Pinion Money to they letter me  
saying for me to go to a Doctor

and telling me to go to a Doctor and  
 get Examand and get My Certificate  
 Mitch & did so By Doctor & L. L. Drew  
 and I send it Right on to St Johns  
 to captin J M Whitty and I have  
 Ritten him Sevril times But got  
 no Reply from him do you  
 weate he got it or not & do you  
 know the Reason he did not send  
 to Mr Squires Dear Sir I think that  
 Every Soldier whoon fit for Wars  
 Service should be Receiving it Pindon  
 Srectly - a Man Like me the gass  
 Poison have took Perteicular effects  
 on me this summer and I have  
 been Real Sick as I have been  
 fishing this Spring and I had to give  
 it up as it was hard to make  
 for me to stand so Mr. Squires

Doctor Le drew said I was severely suffering  
 from gas Poison so Mr Squire Dear  
 Sir as you know that a man  
 that was Broke up in this War  
 he needs some thing to suport  
 his Wife and Family so Mr  
 Squire Dear Sir only for My  
 Brothers it would of went  
 hard with me ~~the~~ <sup>last</sup> Winter and this  
 summer for you I am depending  
 on them to suport me and my  
 Family and that is Pruttly hard  
 for them as they are to soldiers  
 there self and they got a Mother  
 and sisters and Little Brothers to  
 suport as my Father is Dead  
 so you see it is Pruttly hard for  
 them ant it to do for me and the  
 times so Bad as they are now



as I have got no fish this summer  
 and I am sick and I can't work  
 and what are we going to do  
 this winter to stand like I am  
 home less and penny less so Mr  
 Squire this is the truth as I am telling  
 you this is just how I am situated  
 so Mr Squire as I thought you were  
 the Right Man for me to Right to  
 as you hold the stay of our  
 country so I thought you were  
 Justice and Justified to Right to  
 so I am Hoping that if you will  
 Help me yours truly one of the  
 Comrades of the G.W.U.A.

Put where Jones No. 639

to the Premier ~~Mr~~

Western Head

Honorable R. A. Squire

Via Moretons Har

G. D. B.

cannot see your way clear to secure a doctor's certificate.  
If you would kindly get a certificate from your clergyman,  
doctor or magistrate or some reliable person, stating that through  
your trade depression etc; that you are in very bad circumstances,  
I feel sure that the Patriotic Association will consider your  
case.

I should be very glad indeed to have this certificate  
which will give me an opportunity of helping you.

Yours fraternally,

*John A. Whitty*  
DOMINION SECRETARY.

GJW\*HN.

to Mr Squier this is what Capt J M Whitty  
sent me saying what to do so I am  
sending it to you to see for your  
self so Mr Squier he got my certificate so please find it out



St. John's  
July 15/21.

Mr Parsons:

Dear Sir,

Re G. Pte. Charles Jones  
last examination, his lungs showed  
some fine râles in places, with very  
coarse breathing in the tubes as far as  
I can remember. He has since written  
me a letter, as he says he has written you  
but I have been too rushed up to send it  
to you or write him. However, I do not keep  
a record of these examinations & perhaps it  
would be as well to notify him to come  
to my office again & I shall follow the man  
more carefully.

Yours very truly  
J. S. LeDrew

write

poses him to

he will have to

supply us with a

medical  
expense -

entirely at her own

cost

July 6  
1921

Doctor J. L. Ledrew

Dear Sir I am  
Righting down to ask you  
if you had any answer  
From the J. W. O. A. as I did  
not and I cannot see  
the reason why for doctor  
I send up my certificate  
the same which I came up  
from twelengate and I  
rote six letters to them  
But got no Reply so I  
cannot see what is the  
matter with them as Doctor  
here I am not here <sup>1918</sup> and cant

Should right to them for  
me and explain my  
state of health to them  
Doctor so please let me  
know if possible:

So I remain your  
truly priv Helber  
9102659. Jones

Walter Head  
Wm Norton How  
HDB

do any thing and I feel very  
sick & wounded full hot  
and all so my lungs  
as doctor to say I am in  
a very Bad Health and  
just to think I look  
Broken up I could after  
fighting for kind and  
country and during his  
strength for a good  
cause and then come back  
to get to D. and get able  
to do any work and then  
get getting any Pension  
money are getting to keep  
him ore his wife and child  
child so doctor & would  
be very obliging to you if

THE BOARD OF  
PENSION COMMISSIONERS  
FOR NEWFOUNDLAND

HON. J. A. CLIFT, K.C., C.B.E.  
MAJOR W. H. PARSONS, M.C.  
R.A.M.C.



In reply refer to

No. ....

*St. John's,*

May 25th, 1921.

Dear Doctor.

With reference to # 2639 Ex-Pte Heber Jones. I have your certificate of May 11th. stating that you find some of the symptoms of Gas Poisoning. As this man was found fit in Dec./19 by the medical Board and there had not been any symptoms of Gas for some time previous to that. Would you kindly state more definitely the above symptoms.

Yours Faithfully

Medical Advisor.

Dr. I. S. LeDrew.

Twillingate.

August 9  
1921

5 529  
Mrs Whitty

Dear Sir

I am sending Back the  
Little Slip of Paper showing  
you that I got my Kings  
certificate With I am  
very thankful and glad  
to have the name to get  
it..as there is A good  
Money in Newfoundland  
that ~~has~~ <sup>you</sup> ~~had~~ <sup>had</sup> the money  
are Bluck about them  
get one ore live and bring  
But got just as good  
A name to day as I got  
and got a better way of  
living and thought more  
about them. then a poor  
soldier for captain Whitty  
I am a member of your  
Society and have send you  
my ~~own~~ certificate



and do.  
I am thick  
for me  
as I have  
to thank  
to feed  
and guilty  
to feed the  
with only  
to but from  
head to  
to  
to white  
to and to  
children  
to  
to  
to  
to

2 months ago and have  
chired you and have bought  
you Dix. ~~Watters~~ But  
still got you Reply  
But ~~Watters~~ Whitty this  
is my last time Righting  
you for I see it is  
got much good for  
Captain Whitty I been  
down there over 10  
years you making you  
my Brother and Widow  
matter and I think they  
got enough to do to  
maintain this self so  
Mr Whitty you want  
is money up there coming  
to me as I you Mr self  
are I should through the  
was to Mr Whitty do to

THE BOARD OF PENSION COMMISSIONERS  
FOR NEWFOUNDLAND.

Pension No. 529

Regt. No. 2639 Rank Pte. Name Richard Jones

Corps served with ROYAL NEWFOUNDLAND REGIMENT

Date of Medical Board Dec 8/19

Pensionable Disability \_\_\_\_\_ for \_\_\_\_\_ months

Pension Granted:

\$ \_\_\_\_\_ per month for \_\_\_\_\_ months

Total Authorized Amount \$ \_\_\_\_\_

or Gratuity Granted:

\$ \_\_\_\_\_ Payable in \_\_\_\_\_ equal monthly instalments

Granted to:

Name \_\_\_\_\_

Address \_\_\_\_\_

*Noted  
JMS*

Date case disposed of \_\_\_\_\_

Approved by:

Members of Board

[Signature] Chairman

[Signature]

*lll*

*[Signature]*

Remarks:

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

BOND

W.W. SWIFT

## SEVENTH BOARD

Form Z179 N.M.D.

## Report of Medical Board.

Station St. John's, Nfld. Date **DECEMBER 8TH., 1919.**  
 No. and Rank **2639 PRIVATE** Age **24** Height **5'7½"**  
 Name **JONES HEBER** Complexion **FAIR**  
 Unit Royal Newfoundland Eyes **BROWN** Hair **DARK**  
 Address **32 JOHN STREET**  
 Former Trade **PIEHERMAN**  
 Enlisted at **ST. JOHN'S** On **28/4/16** (The Board will please note how the soldier's appearance corresponds with above description).  
 Disease or Disability Original **HAS POISONING.**

Subsequent

Present Condition (Compare with previous Board)

*Headache improved. Tender along intercostal spaces of left side (own statement) pulse 80. No objective symptoms - well nourished, powerful man*

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

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

Recommendation of Medical Board

Members of Board

*Clay Macpherson*  
*Doal*

*H. A. ...*  
*Johnson Capt.*  
*St. John's*

Approving Medical Officer.



Dec. 19, 1919.

529

Dear Sir:-

I beg to advise you that the Medical Board that examined you has reported as to your condition, and has rated you as having no disability.

In view of this report you do not come within the class of those for whom Pensions or Gratuities are granted.

Yours faithfully,

C.C. Oke  
Asst. Secy.

Heber Jones, Esq.,  
32 Lehn Street,  
City.

Per G.C.B.

529

NOV 1 - 1919

Dear Sir:-

I beg to advise you that the enclosed cheque for \$ ~~8~~<sup>8.00</sup> is the balance due you to Nov 25<sup>th</sup> the date on which your pension expires.

You will be notified where and when to report for Medical examination to determine the continuance or otherwise of your pension, during the present month. If, however, you are not notified by the end of the present month, kindly communicate with me.

Yours faithfully,

*C. C. Oke.*  
Asst. Secy.

THE BOARD OF PENSION COMMISSIONERS  
FOR NEWFOUNDLAND.

Pension No. 5-29

Regtl. No. 1639 Rank Pl. Name Leber Jones

Corps served with ROYAL NEWFOUNDLAND REGIMENT

Date of Medical Board May 20<sup>th</sup> 1919

Pensionable disability 20% for 6 months

Pension granted:

\$ 10<sup>00</sup> per month for 6 months

or Gratuity granted:

\$ \_\_\_\_\_ payable in \_\_\_\_\_ equal monthly insts.

Granted to:

Name Leber Jones

Address Moncton N.A.

NOTED  
DATE 6/1/19  
INITIALS Leber

Date case disposed of JUN 6 . 1919

NOTED  
DATE 29/1/19  
INITIALS Leber

Approved by:

Members of Board

P. J. Hall Chairman

W. B. Brown lll

Remarks:

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

# The Board of Pension Commissioners for Newfoundland

In replying please mention Date and

No. ....

All communications should be addressed to the  
DIRECTOR OF MEDICAL SERVICES,  
DEPARTMENT, OF MILITIA, NFLD.

St. John's, Nfld.,

April 29th., 1919.

To:— I, S. LeDrew, Esq., M. D.,  
Twillingate.

From:—The Board of Pension Commissioners for Nfld., St.  
John's, Nfld.

Sir:—

Name

2639, Pte. Heber Jones

The Board of Pension Commissioners requiring a report on the Pensioner named in the margin, kindly notify him to appear before you AS SOON AS POSSIBLE.

You will find a form on which to record your examinations on pages 2 and 3.

Pensioner will be notified to appear before you on whatever date you will find convenient.

Address

Marathon Harbor

If another Registered Medical Practitioner is in your neighbourhood, or likely to be there during the week, it is preferable that you should both examine the Pensioner at the same time, and both sign report.

The form when fully completed, signed and dated, is to be returned by the president of the Board of Medical Examiners to the undersigned.

If the pensioner neglects to present himself for examination within a reasonable period, you will please telegraph the fact to the undersigned.

If it is necessary for the pensioner to travel, in order to present himself for examination, bills for Transport should be certified by you and forwarded to the undersigned.

The fee laid down by the Board of Pension Commissioners for such examination is One dollar (\$1.00) for each Doctor for each examination.

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

DIRECTOR OF MEDICAL SERVICES.

TO THE MEDICAL BOARD, OR MEDICAL EXAMINER.

The Board of Pension Commissioners for Newfoundland requires a report on the present condition of the pensioner named on page one of this form.

The object of the report is to enable the Board to decide the question of continuance of pension.

The identity of the pensioner should be established, to prevent personation; for that purpose the description of the pensioner follows:

*(If incomplete or imperfect, amplification or correction is required)*

DESCRIPTION OF PENSIONER:—

Apparent age... **24** ... on ... Height **5'7 $\frac{1}{2}$ "** ... Colour of Eyes... **BROWN** ...  
Complexion... **FAIR** ... Colour of Hair... **DARK** ... Marks of Identification

A description of the disabling condition of the pensioner, as given by the Board of Medical Officers held on **NOV. 14<sup>th</sup> 1918** ... and other necessary information, follows:—

Condition of Pensioner: **HE HAS DEFINITE PLEURISY RALES AT THE BASE OF THE LEFT LUNG. BREATHING AND LUNGS ABOUT NORMAL. PULSE 80. APPETITE GOOD. HAS HARD PAIN AT TIMES WHEN PASSING URINE AND (SOME TIGHTNESS OVER THE LOWER ABDOMEN. THIS CONDITION STARTED IN JULY 1918 AND DOES NOT IMPROVE ANY. HEART NORMAL.**

**DISABILITY: GAS POISONING**

Signature (or mark) of the pensioner, for identification only, to be procured at the time of examination, and placed on page 4.

N.B.—The description of the pensioner should record all marks or peculiarities by which he may be identified.

The description of the condition of the pensioner, history, &c., as given above contains the essential information available to assist the Medical Board in making its report.

The whole purpose of the Medical Report on page 3 is to give an accurate description of the condition of the pensioner.

**PENSIONERS MUST NOT BE INFORMED OF THE EXTENT AT WHICH THEIR DISABILITY IS ESTIMATED.**



MEDICAL REPORT.

(An answer to each of these questions is desired; they are not to be altered. If further space is required for the answers, please use page 4.)

- (1) Are you satisfied that the man presenting himself for examination is the pensioner named on page 1, and described on page 2? *Yes*
- (2) Give a DEFINITE, DETAILED DESCRIPTION of the PRESENT STATE of the DISABLING CONDITION, stating time and cause of any appreciable change in the extent of the DISABILITY. If there is a new disabling condition not described on page 2, it is essential that a complete history of its origin be given, and if attributed to service, the reasons for this opinion should be definitely stated.

(Each disabling condition should be separately and conjointly estimated.)

*May 20-1919.*

*Pulse 72 (Sitting). Temp. normal. Cystitis cleared up. Some flatulence in lower abdomen. Small pleuritic rales over a small area of front left base. General health good. Marked improvement since last Report. Breathing normal: Heart normal, some slight pain at times over left base.*

- (3) To what extent, if any, has disability diminished or increased since last examination? If increased, is increase due to intemperance or improper conduct?

*Diminished 50%. Candidate greatly improved*

- (4) Will it materially increase or diminish? *Diminish*
- (5) Is the disability permanent? *No*
- (6) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labour market?

(Extent should be stated as TOTAL, 4-5, 3-5, 2-5, 1-5, or NOTHING.)

- (7) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a full livelihood in the general labour market lessened by that portion of his disability to or incurred during service?

(State in percentage.)

- (8) Would treatment reduce the prisoner's disability or increase his comfort?

*Reduce the Disability. Yes, any time.*

If not, why?

(Recommendations regarding nature, etc., of treatment may be made on page 4.)

Place .....

President

Date .....

Members

*Approved for 20%  
H. Peterson*

Pensioner's Signature..... *Pl. A. H. Jones*  
 Signature of Witness..... *S. S. Levesley M.D.*

CONTINUATION.

*Candidate has.*

*Scar 1 1/2 inches long curved wound on the  
 inner aspect of Right great toe.  
 Scar on thick part of left thumb.  
 The piece was cut off & stuck on a  
 quill pen. one inch by one quarter inch  
 in size, scoring all around*



- The answers to the following questions are to be filled in by the medical examiner.
- 8 (a) Has the pensioner married since last medical re-examination? .. *no* ..
  - 8 (b) If so, is he receiving the additional allowance? .. *no* ..
  - 9 (a) Has a child been born to pensioner since last medical re-examination? .. *no* ..
  - 9 (b) If so, is he receiving the additional allowance? .. *no* ..
  - 10 If pensioner was married, has his wife died since last medical re-examination?  
 .. *Wife Living well* ..
  - 11 Have any of pensioner's children died since last medical re-examination?  
 .. *no* ..

Place *Swillinggate*  
 Date *July 20/19* .. *S. S. Levesley M.D.* ..  
 Medical Examiner.



**DEPARTMENT OF MILITIA**

ST. JOHN'S, NEWFOUNDLAND

April 29th., 1919

529

From:- D. M. S.  
To:- B. P. C.

2639, Pte. Heber Jones,  
MMretens, Harbot, N. D. B.

The marginally noted man should report to Dr. I. S. LeDrew, Twillingate, for re-examination, on whatever date the doctor notifies him to appear.

*Cluny Macpherson*

Major, D. M. S.

AMB.

April 29/19

Ex-Pte. Heber Jones,  
Moraton's Ho.

Dear Sir:-

Kindly report to Dr. I. S. LeDrew, Twillingate,  
for re-examination, on whatever date he notifies  
you to appear.

Yours faithfully,

Asst. Secy.

LED.

2639 2x Pte Jones.

former address

Wichita

Present address

32 John St

City

529

T. H.

allusion

W. H. T. #

THE BOARD OF PENSION COMMISSIONERS  
FOR NEWFOUNDLAND.

Pension No. 529

Regtl. No. 2679 Rank Lt Name Seber Jones

Corps served with ROYAL NEWFOUNDLAND REGIMENT

Date of Medical Board Nov. 14<sup>th</sup> 1918

Pensionable disability 40% for 12 months <sup>6 pm</sup>

Pension granted: \$ 16.00 per month for 12 months <sup>6 pm</sup>

or Gratuity granted: \$ \_\_\_\_\_ payable in \_\_\_\_\_ equal monthly insts.

Granted to:

Name Seber Jones

Address \_\_\_\_\_

*OK*  
*Small*

Date case disposed of DEC 19 1918

Approved by:

Members of Board

[Signature] Chairman  
[Signature]  
[Signature]

Remarks:

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

No 39 Jones.

Unstable,  
Gas Poisoning.

Subsequent.

Pleurisy &

Cystitis.

? Whether <sup>Cystitis</sup> due to service.  
"

529



# DEPARTMENT OF MILITIA

ADDRESS REPLY TO  
DEPARTMENT OF MILITIA  
AND QUOTE NO.

2639

ST. JOHN'S, NEWFOUNDLAND,

November 30th., 1918.

From:- D. M. S.  
To:- B. P. C.

2639, Pte. Jones, Heber

I notice that treatment is suggested in the marginally noted man's case.

I am sending you copy of his record while in Waterford Hall. From it you will see that attempt at treatment, except in the guard room, is futile.

*Cluny Macpherson*

Major, D. M. S.

CM/AMB.



May 9th., 1918

Patient was again brought in at my request by the Military Police. He had no excuse to offer for his actions as recorded except that on his return his quarters were changed.

He is receiving no benefit from treatment because he is not disposed to remain in hospital but is constantly breaking leave.

As there is a long waiting list of men only too anxious to avail of treatment he is discharged from Hospital and ordered to come before Board.

(Sgd) CLUNY MACPHERSON,  
Major



# The Board of Pension Commissioners for Newfoundland

In replying please mention Date and

All communications should be addressed to the  
DIRECTOR OF MEDICAL SERVICES,  
DEPARTMENT, OF MILITIA, NFLD.

No. ....

St. John's, Nfld.,  
October 29th., 1918

To:— I. LeDrew, Esq., M. D.,  
Twillingate

From:—The Board of Pension Commissioners for Nfld., St.  
John's, Nfld.

Sir:—

The Board of Pension Commissioners requiring a report on  
the Pensioner named in the margin, kindly notify him to appear be-  
fore you AS SOON AS POSSIBLE.

Name  
2639, Pts. Heber Jones

You will find a form on which to record your examinations on  
pages 2 and 3.

Pensioner will be notified to appear before you on whatever  
date you will find convenient.

Address  
Moretons Harbor

If another Registered Medical Practitioner is in your neigh-  
bourhood, or likely to be there during the week, it is preferable that  
you should both examine the Pensioner at the same time, and both  
sign report.

The form when *fully* completed, signed and dated, is to be re-  
turned by the president of the Board of Medical Examiners to the  
undersigned.

If the pensioner neglects to present himself for examination  
within a reasonable period, you will please telegraph the fact to the  
undersigned.

If it is necessary for the pensioner to travel, in order to present  
himself for examination, bills for Transport should be certified by  
you and forwarded to the undersigned.

The fee laid down by the Board of Pension Commissioners for  
such examination is One dollar (\$1.00) for each Doctor for each  
examination.

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

*Cluny Macpherson*

DIRECTOR OF MEDICAL SERVICES.

TO THE MEDICAL BOARD, OR MEDICAL EXAMINER.

The Board of Pension Commissioners for Newfoundland requires a report on the present condition of the pensioner named on page one of this form.

The object of the report is to enable the Board to decide the question of continuance of pension.

The identity of the pensioner should be established, to prevent personation; for that purpose the description of the pensioner follows:

*(If incomplete or imperfect, amplification or correction is required)*

DESCRIPTION OF PENSIONER:—

Apparent age.. **23** ..... on ..... Height **5'7½"** ... Colour of Eyes **Brown** ...  
Complexion... **Fair** ..... Colour of Hair... **Dark** ..... Marks of Identification  
.....

A description of the disabling condition of the pensioner, as given by the Board of Medical Officers held on **Aug. 14<sup>th</sup> 1917** ..... and other necessary information, follows:—

Condition of Pensioner:— **Complains of tenderness over lower ribs left side. Nothing on lung. Heart normal.**

Condition Jan. 22<sup>nd</sup> 1918. **Pulse 76. Nothing in chest. Has some cough. Has headaches and no appetite in mornings.**

Condition March 7<sup>th</sup>., 1918. **Pulse 76. Complains headache and no appetite.**

HL  
Condition May 11<sup>th</sup>., 1918. **Complains of headache and sore throat. Has cough.**

Disability: **Gas Poisoning.**

Signature (or mark) of the pensioner, for identification only, to be procured at the time of examination, and placed on page 4.

N.B.—The description of the pensioner should record all marks or peculiarities by which he may be identified.

The description of the condition of the pensioner, history, &c., as given above contains the essential information available to assist the Medical Board in making its report.

The whole purpose of the Medical Report on page 3 is to give an accurate description of the condition of the pensioner.

**PENSIONERS MUST NOT BE INFORMED OF THE EXTENT AT WHICH THEIR DISABILITY IS ESTIMATED.**

MEDICAL REPORT.

(An answer to each of these questions is desired; they are not to be altered. If further space is required for the answers, please use page 4.)

- (1) Are you satisfied that the man presenting himself for examination is the pensioner named on page 1, and described on page 2? *Yes*.....
- (2) Give a DEFINITE, DETAILED DESCRIPTION of the PRESENT STATE of the DISABLING CONDITION, stating time and cause of any appreciable change in the extent of the DISABILITY. If there is a new disabling condition not described on page 2, it is essential that a complete history of its origin be given, and if attributed to service, the reasons for this opinion should be definitely stated.

(Each disabling condition should be separately and conjointly estimated.)

*Nov. 14/1918.*  
*Condition*  
*of*  
*Pensioner*

*He has definite pleurisy rules at the Base of the left lung. Breathing through about normal. Pulse 80. Appetite good. Has hard pain at times when passing urine & some tightness over the lower abdomen, this condition started in July 1918, and does not improve any. Heart normal.*

- (3) To what extent, if any, has disability diminished or increased since last examination? If increased, is increase due to intemperance or improper conduct?

*Condition is on the whole w. better health.*

- (4) Will it materially increase or diminish? *Diminish*.....

- (5) Is the disability permanent? *no*.....

- (6) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labour market?

(Extent should be stated as TOTAL, 4-5, 3-5, 2-5, 1-5, or NOTHING.)

*Total. He cannot work*.....

- (7) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a full livelihood in the general labour market lessened by that portion of his disability to or incurred during service?

(State in percentage.)

- (8) Would treatment reduce the prisoner's disability or increase his comfort? *Yes*.....

- (9) If so, is pensioner willing to accept such treatment, and when? *Yes. Immediately*.....

If not, why? *✓*.....

(Recommendations regarding nature, etc., of treatment may be made on page 4.)

Place ..... President

Date ..... Members

MB.

Candidone can make no attempt at writing his signature.

Pensioner's Signature... *John Jones*  
Signature of Witness... *W. H. Jones*

CONTINUATION.

Candidone may be treated for the Cystitis, also for the affected pleura on left side. These are practically the vital complaints at the present time.

Approved for 40%  
*Cluny Macpherson*



The answers to the following questions are to be filled in by the medical examiner.

- 8 (a) Has the pensioner married since last medical re-examination? *Married July 1st 1918*
- 8 (b) If so, is he receiving the additional allowance? *no.*
- 9 (a) Has a child been born to pensioner since last medical re-examination? *no.*
- 9 (b) If so, is he receiving the additional allowance? *no.*
- 10 If pensioner was married, has his wife died since last medical re-examination? *no.*
- 11 Have any of pensioner's children died since last medical re-examination? *Has none.*

Place *St. John's*

Date *Nov. 14/18*

*A. S. LeDrew*  
Medical Examiner.

# Report of Medical Board.

Station **St. John's, Nfld.** Date **May 11th., 1918**  
 No. and Rank **2639 - Private** Age **22** Height **5'7 $\frac{1}{4}$ "**  
 Name **JONES, HEBER** Complexion **Fair**  
 Unit **Royal Nfld.** Eyes **Brown** Hair **Dark**  
 Address **Moretons Harbor, N.D. Bay**

Former Trade **Fisherman**

Enlisted at **St. John's** On **28/4/16**

(The Board will please note how the soldier's appearance corresponds with above description.)

Disease or Disability: Original **GAS POISONING**

Subsequent.

Present Condition (Compare with previous Board)

*Complains of headache & sore throat. Has cough.*

Has he been employed, and by whom?

Average Weekly Earnings

To what extent is his capacity for earning a full livelihood at his employment, or in the general labour market, lessened at present?

*40% last 4 months*

Recommendation of Medical Board

*Discharge permanently unfit.*

Members of Board

*[Signature]*

*William Roberts  
pro Major Patterson*

Approving Medical Officer

*Chas. Macpherson,  
Major*

D. M. S. NEWFOUNDLAND.



THIRD BOARD

REPORT OF THE MEDICAL BOARD.

STATION St. John's, Nfld. DATE March 7'1918

NO. 2639 AGE 22 HEIGHT 5'7 $\frac{1}{4}$ "

RANK PRIVATE COMPLEXION FAIR

NAME JONES, HEBER EYES BROWN HAIR DARK

UNIT 1ST NEWFOUNDLAND

ADDRESS MORETONS HARBOR, N. D. BAY FORMER TRADE FISHERMAN

ENLISTED AT ST. JOHN'S NFLD. ON APR. 28th., 1916

DISEASE OR DISABILITY GAS POISONING

PRESENT CONDITION

*None. Complains headache & no  
appetite*

HAS HE BEEN EMPLOYED AND BY WHOM?

AVERAGE WEEKLY EARNINGS

ESTIMATED DISABILITY

RECOMMENDATION OF MEDICAL BOARD

*unfit for any duty for three  
months*

MEMBERS OF BOARD

*H. J. Jones  
S. J. Sinclair, Dist  
L. Baberson, major*

APPROVING MEDICAL OFFICER

*Cluny Macpherson, Major*

NEWFOUNDLAND.

REPORT OF MEDICAL BOARD

ON SOLDIER OR NAVAL RESERVIST RETURNED FROM OVERSEAS

Station ST. JOHN'S NFLD.

Date JANUARY 22nd., 1918.

No. 2639

Age 22 Height 5'7 $\frac{1}{4}$ "

Rank PRIVATE

Complexion FAIR

Name JAMES HEBER

Eyes BROWN Hair DARK

Unit 1ST NEWFOUNDLAND

Address MORETONS HR. N. D. B.

Former Trade FISHERMAN

Enlisted at ST. JOHN'S NFLD.

on APRIL 28th., 1916

Disease or disability GAS POISONING

Present condition *Palp. 76. Nothing in chest. Has some cough. Has headaches & no appetite in mornings*

Estimated disability

Recommendation of Medical Board

*Inter. N. M. C. Hosp.*



Class

Members of Board

*H. J. [unclear]  
Pindar [unclear]  
Stateron [unclear]*



Approving Medical Officer.

*Cluny Macpherson [unclear]*



THE DECLARATION AT BOTTOM MUST BE COMPLETED.

This Form applies to ALL Pensioners.

# CLAIM FOR PENSION

TO THE BOARD OF PENSION COMMISSIONERS FOR NEWFOUNDLAND,  
St. John's, Newfoundland.

If your address has been changed, correct this address. Private, Heber Jones Pension No. 599 (This space to be left blank.)  
Western Head  
via Martins Harbor

I hereby solemnly declare that my name, address and pension number are correctly set forth above and that I am entitled to a pension from the Dominion of Newfoundland for the coming month.  
(This declaration applies to female pensioners only.) yes

I hereby solemnly declare that I have not contracted marriage since my pension was first awarded to me.  
(This allowance applies to Pensioners receiving allowances for children.)

I hereby solemnly declare that the undermentioned children are being cared for by me and that I am entitled to receive allowances for them; that the boys are under the age of sixteen years; that the girls are under the age of seventeen years; and that none of the undermentioned children have contracted marriage or have died.

### PARTICULARS OF CHILDREN.

	NAME IN FULL	DATE OF BIRTH			NAME IN FULL	DATE OF BIRTH	
		Day, Month	Year			Day, Month	Year
1	<u>Heber Jones</u>	<u>27</u>	<u>June</u>				
2				6			
3				7			
4				8			
5				9			
				10			

(This declaration applies to married disabled pensioners only.)

I hereby solemnly declare that I am the wife of the above named pensioner. Wife must sign (or make mark) here.....  
Heber Jones

If Pensioner cannot write he or she must make his or her mark in the presence of a Postmaster or in the presence of a representative of the Board of Pension Commissioners or before a Commissioner for the taking of Oaths or Bank Manager.

ALL PENSIONERS MUST SIGN (OR MAKE MARK) HERE Private Heber Jones

### DECLARATION BY A DISINTERESTED PERSON

I Private Heber Jones of Western Head 92 B  
(Name in full) (Street and Number)  
.....in the (Province or State) of .....

in the 1919 25 hereby solemnly declare that: I have known the person who signed the foregoing Claim for Pension for ..... years and I verily believe that (he or she) is the pensioner (he or she) represents (himself or herself) to be; that the foregoing claim for Pension was made and signed in my presence by the said pensioner, that I have read the foregoing claim for Pension, that the facts stated therein are true and that the children named therein are all alive.

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.

Declared and subscribed before me  
at Western Head this  
16 day of May 1919  
Signature Heber Jones Signature Private Heber Jones  
Address Western Head Address Western Head  
Occupation fisherman Occupation fisherman

NOTE.—This declaration must be signed THIS MONTH before a representative of the Board of Pension Commissioners or before a person authorized to administer an oath.

239.

Pens no. 579

Dec 23  
1918

367.i

Dear Sir

I received a paper  
from you stating that your  
papers have my examination  
papers which I do not  
you mean that are to  
I was examined in the  
By Doctor Tedrow as  
By order of the  
Department in St John  
about the tent of November  
I ~~write~~ let you know that  
I was examined so I  
have sent down to Doctor  
Tedrow to ask him where  
my examination papers

8

core was capturing holding  
of an going to try this  
time to see if I cant get  
some body to understand  
this effear about my  
~~preaching~~ money it got  
fear for the man in  
the forestry company to  
be getting thirty to dollars  
a month and he was  
only over seas three  
weeks and I was over  
yearly to years and I  
am got getting thirty cts  
and load then that for I  
am got getting going at

ettel so I dont think  
 it is fear to treat a  
 Poor Man like that  
 that cant help his self  
 & Wounded Mind if I  
 could reach some way  
 it appears to me  
 like the old slaves in  
 older times they had to get  
 out and get wunden  
 and after the job of  
 whorb was finished all  
 the wunden get was a  
 Broken Back so I  
 just think that's how  
~~the~~ some of the Return

Reto Soldiers are treated  
 and I am one of them  
 and I want for get  
 this way to Brothers  
 come! Back from war  
 to appear the tree of us  
 in St Johns to start my  
 calculation I have been  
 treated since I came  
 back I want talk  
 about it if the best  
 of the Return Soldier  
 was treated like me  
 But all of them some  
 hear in quarters & others  
 are getting some pinching

among so I think it is  
 a early time for me to let  
 some body else about  
 it so when this letter  
 reaches you I want  
 you to Puffly please Sir  
 for which I get to  
 know I am going to see  
 what the Law can  
 do for me because  
 I was told to go  
 ahead and I would  
 make some one pay it  
 so I think this is all  
 for this time so I

Remain your truly  
 Heber Jones to captu

1864

Dec. 24th 1918

To:- D. M. S.

From:- B. P. C.

2639 Pte. Heber Jones

With reference to the marginally noted case.

I beg to state that the Board has agreed that his pension be for a period of six months instead of twelve.

The Secretary,

Per

CCO/LBD.

Dec. 3rd 1918

Robert Jones, Esq.,

Marston's Br.

Dear Sir:-

With reference to your communication of recent date re your pension.

I beg to state that we are awaiting the result of your Medical Board, as soon as this has been received your pension will be forwarded.

Yours faithfully,

The Secretary,

THE BOARD OF PENSION COMMISSIONERS FOR WFLD.

Per

CCO/LHD.



Nov. 22nd 1918

Heber Jones, Esq.,

Moreton's Hr.

Dear Sir:-

With reference to your communication of Nov. 6th. I beg to state that your case has been considered by the Board, and I have been directed to state that according to Medical examination your pension cannot be increased.

If you find that your condition has increased since your last Medical Board, kindly forward Medical Certificate to that effect, and it will be placed before the Board.

Yours faithfully,

pro Secretary,

THE BOARD OF PENSION COMMISSIONERS FOR Nfld.

CCO/LBD.

See Pen to comm  
for your info  
Matter of  
J. H. M.

you 6  
1918

Mr. J. H. M. Banet

Dear Sir just  
I got to ask you why  
I am not getting the soldiers  
Patrol money as well  
as other soldiers there  
are all getting it except  
me so I should be  
getting it as well as  
any other soldier around  
and I have to wife to  
maintain out of sixteen  
dollars per month and  
I am not able to  
work I haven't done  
a stroke of work

the summer for I was  
gastpison and if cons  
agents me quit often  
So please Sir do you  
Best for me

So I am yours  
truly Mr H Jones  
Address Mr H Jones  
Western Head  
vii Mortons Harbor  
N. D. B

Heber Jones  
Mortas Is.  
N. D. B.



# DEPARTMENT OF MILITIA

ADDRESS REPLY TO  
DEPARTMENT OF MILITIA  
AND QUOTE NO.

-----

ST. JOHN'S, NEWFOUNDLAND,

October 29th., 1918

-----

From:- D. M. S.  
To:- B. P. C.

2639, Pte. Heber Jones  
Moetons Harbor

The marginally noted man should report to  
Dr. I. LeDrew, Twillingate, for re-examination,  
on whatever date the Doctor notifies him to appear.

*Clay Macpherson*  
Major, D. M. S.

October 30th 1918

Robert Jones, Esq.,

Warren's Dr.

Dear Sir:-

Kindly report to Dr. I. Ledrow, Twillingate, for re-examination, on whatever date he notifies you to appear.

Yours faithfully,

pm Secretary,

THE BOARD OF PENSION COMMISSIONERS FOR NWLD

CCC/LRB.



Western Head 26/9/8

2639

C. C. Oake Pro. Secretary

Dear Sir

I have been for examination down to twillingate as you told me to go to doctor. I. Tedrew and I told him how I was feeling and that was got very well the President for he had sent my complaint to St Johns and I am shore they know what it is well I am sending one paper and it is the only one I got and that is the paper I had come with my Pension money last

Summer. So that  
is all I have to  
say about the  
Paper. Well about  
myself I can't  
say much for  
I don't have  
done much the  
summer for I  
haven't. And as  
much as one school  
child spends the summer  
so I am show you  
agree with me that  
is pretty small wages  
for a man is  
disabled so I must  
close I am yours

truly Mrs H Jones

~~to the~~

C. C. Oake

Pro Secretary



PENSIONS AND DISABILITIES BOARD  
OF  
NEWFOUNDLAND PATRIOTIC ASSOCIATION

HON. P. T. MCGRATH, J.L.D.  
(President Legislative Council)  
Chairman  
HON. M. P. CASHIN,  
(Minister of Finance and Customs)  
HON. M. G. WINTER, M.L.C.  
MAJOR. G. T. CARTY, (1st. Nfld. Regt.)  
FLEET PAYMASTER G. A. E. WYLLYS, R.N.  
C. P. AYRE, Esq.,  
J. A. CLIFT, Esq., K C., M.H.A.  
H. E. COWAN, Esq.  
R. F. HORWOOD, Esq.  
R. A. TEMPLETON, Esq.

All Communications should be addressed to the Secretary  
2ND. LIEUT. J. M. HOWLEY,  
Deputy Paymaster 1st. Nfld. Regt  
St. John's.

St. John's, Newfoundland,

May 31<sup>st</sup> 1918

SIR:--

The Medical Board that examined you has reported as to your condition, and you will be paid the sum of \$16.00 per month for *six* months, and \$ per month for months thereafter, as a temporary allowance on account of any pension or grant to which you may become entitled by any Act of the Legislature hereafter passed.

Not later than ten days prior to the close of this period you will <sup>be advised to</sup> submit yourself for re-examination to determine the continuance or otherwise of your allowance.

I enclose payment, in advance, for *month ending June 28/18*

*Arber Jones Esq,*  
*Moreton St*  
*NFB*

Yours truly,

*J. M. Howley*  
Secretary.

COPY

2639

May 9th., 1918.

From:- D. M. S.  
To:- O. C. Depot.

2639. Pte. H. Jones

The marginally noted man was discharged from  
the Naval & Military Convalescent Hospital May 9th., 1918

*Cluny Macpherson*

Major, D. M. S.

Copy to Paymaster & Officer i/c Records.

Staff Sgt. Major C C Oke.

Result of this mans Re Examinatin  
now get to hand. Prison of \$16.00 per  
month. has been paid in full up to  
period ending Nov. 25<sup>th</sup>

Y M W T

2639

# BOARD OF PENSION COMMISSIONERS FOR NEWFOUNDLAND

Form to be signed by pensioner on receipt of pension and returned to the Secretary  
of the Board

Received of The Board of Pension Commissioners for Newfoundland

the sum of Sixteen  $\frac{77}{100}$  Dollars,

being payment of pension or ~~gratuity~~ to Sept 25/18 \$16.00

Date Sept 2 1918



Gene & Cameron Heber Signature of Pensioner Jones  
I received & Attested Signature of Witness

N.B. — This form must be signed, and returned immediately on receipt, otherwise your next payment may be delayed.

Form B.P.C. 4 And By Rights & dont PENSION No. 529

think it is done for & been such all the summer

REGIMENTAL NO. 2639.

PENSION NO. 529

NAME. HEBER JONES.

AUGUST 14TH, 1917

COMPLAINS OF LITTLE COUGH AT NIGHT. PAIN IN LEFT SIDE.  
AUSCULTATION NEGATIVE.

JANUARY 22ND, 1918

PULSE 76. NOTHING IN CHEST. HAS SOME COUGH. HAS HEADACHES  
AND NO APPETITE IN THE MORNINGS.

MARCH 7TH, 1918

PULSE 76. COMPLAINS OF HEADACHES AND NO APPETITE.

MAY 11TH, 1918.

COMPLAINS OF HEADACHES AND SORE THROAT. HAS COUGH.

NOVEMBER 14TH, 1918

HE HAS DEFINITE PLEURISY RALES AT THE BASE OF THE LEFT LUNG.  
BREATHING AND LUNGS ABOUT NORMAL. PULSE 80. APPETITE GOOD.  
HAS HARD PAINS AT TIMES WHEN PASSING URINE AND SOME TIGHTNESS  
OVER THE LOWER ABDOMEN. THIS CONDITION STARTED IN JULY 1918.  
AND DOES NOT IMPROVE ANY. HEART NORMAL.

MAY 20TH, 1919.

PULSE 72 SITTING TEMPERATURE NORMAL. CYSTITIS CLEARED UP. SOME  
FLATULENCE IN LOWER ABDOMEN. SMALL PLEURITIC RALES OVER A  
SMALL AREA OF FRONT OF LEFT BASE. GENERAL HEALTH GOOD. MARKED  
IMPROVEMENT SINCE LAST REPORT. BREATHING NORMAL. HEART NORMAL.  
SOME SLIGHT PAINS AT TIMES AROUND RIGHT BASE.

DECEMBER 8TH, 1919.

HEADACHES IMPROVED. TENDER ALONG INTERCOSTAL SPACE OF LEFT SIDE.  
PULSE 80. NO OBJECTIVE SYMPTOMS. WELL NOURISHED. POWERFUL MAN.

DISABILITY: GAS POISONING.

REGIMENTAL NO. 2639.  
-----

PENSION NO. 529  
-----

NAME. HEBBER JONES.  
-----

AUGUST 14TH, 1917  
-----

COMPLAINS OF LITTLE COUGH AT NIGHT. PAIN IN LEFT SIDE.  
AUSCULTATION NEGATIVE.  
-----

JANUARY 22ND, 1918  
-----

PULSE 76. NOTHING IN CHEST. HAS SOME COUGH. HAS HEADACHES  
AND NO APPETITE IN THE MORNINGS.  
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MARCH 7TH, 1918  
-----

PULSE 76. COMPLAINS OF HEADACHES AND NO APPETITE.  
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MAY 11TH, 1918.  
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COMPLAINS OF HEADACHES AND SORE THROAT. HAS COUGH.  
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NOVEMBER 14TH, 1918  
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BREATHING AND LUNGS ABOUT NORMAL. PULSE 80. APPETITE GOOD.  
HAS HARD PAINS AT TIMES WHEN PASSING URINE AND SOME TIGHTNESS  
OVER THE LOWER ABDOMEN. THIS CONDITION STARTED IN JULY 1918.  
AND DOES NOT IMPROVE ANY. HEART NORMAL.  
-----

MAY 20TH, 1919.  
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PULSE 72 SITTING TEMPERATURE NORMAL. CYSTITIS CLEARED UP. SOME  
FLATULENCE IN LOWER ABDOMEN. SMALL PLEURITIC RALES OVER A  
SMALL AREA OF FRONT OF LEFT BASE. GENERAL HEALTH GOOD. MARKED  
IMPROVEMENT SINCE LAST REPORT. BREATHING NORMAL. HEART NORMAL.  
SOME SLIGHT PAINS AT TIMES AROUND RIGHT BASE.  
-----

DECEMBER 8TH, 1919.  
-----

HEADACHES IMPROVED. TENDER ALONG INTERCOSTAL SPACE OF LEFT SIDE.  
PULSE 80. NO OBJECTIVE SYMPTOMS. WELL NOURISHED. POWERFUL MAN.  
-----

DISABILITY: GAS POISONING.



## Medical Report on an Invalid.

### NOTES:—

- (a) This report is solely concerned with Pensions.
- (b) A single copy only is required.
- (c) "Aggravated" being now a technical term, carrying right to pension, discrimination in its use is essential.
- (d) Be as brief as possible compatible with lucidity.
- (e) Avoid dubiety—"perhaps" "possibly" "might" and the like.
- (f) Only sufficient clinical data need be given to establish the degree of disability and assist the Board in arriving at a decision.

### Statement of Case

Station

*Saint John's*  
*Aug 13, 17*

Date

1. Unit *1st. Newfoundland*5. Age last birthday. *22*2. Regimental No. *2639*6. Enlisted on *Apr. 28/16.*3. Rank. *Plt*at *Saint John's -*4. Name. *Jones Hebr.*7. Former trade or occupation *Fisherman*

8. Disability

*Gas poisoning.*

9. History

*Poisoned by gas from shell in France Mar. 1, 1917*

10. What is his present condition?

(This is the important question. Be brief—the clearer the case the less need be written. Read note f above.)

*Complains of little cough at night  
pain in left side.  
Circulation negative*

11. Was sanatorium advised and refused?  
operation

*✓*

12. Do you recommend discharge as permanently unfit?

*✓*

Signature

*W. Borden*

Rank or Qualification

*MO.*

Remarks if any by Officer i/c Hospital.

Place

Signature

Date

Rank



# Opinion of the Medical Board.

In para. 13, the President should write "may" or "cannot" at x  
Erase inapplicable words.

13. For pension purposes, the disability x *may* be considered as aggravated by :—  
due to
- (a) Service during this war.
  - (b) ~~Glimate,~~
  - (c) ~~Ordinary Military Service~~

Remarks if any:—

*Cramps of tenderness over lower ribs left side.  
Nothing in lung. Heart sound*

14. At present his capacity for earning a full livelihood in the general labor market is lessened by:—  
(Here the president should write in Total, 4-5, 3-5, 2-5, 1-5).

Remarks if any:—

15. Is the disability permanent? ✓

16. Has the disability been aggravated by

- (a) Intemperance.
- (b) Misconduct.

*no*

17. The refusal of operation sanatorium is:—

- (a) Reasonable.
- (b) Unreasonable.

Remarks if any:—

18. We recommend discharge from retention in the Army

*2 months furlough*

Remarks if any:—

Signatures.

*H. H. ...*  
..... President  
*J. ...*  
.....  
*J. ...*  
.....

Place

Date

*St. Johns*

*Aug. 14, 1917*

APPROVED

Station

Date



*Clay Macpherson*  
Administrative Medical Officer.



## 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 *Jones Heber*

Regiment from which discharged *1st. Newfoundland*

Regimental number *2629.*

Intended address ~~*175*~~ *Moretons Hs. H.D.B.*

Height on discharge *5* Feet *7 1/4*

Color of hair on discharge *Dark.*

Complexion *Fair*

Color of eye *Brown*

Descriptive Marks

Figure on discharge *Medium*

Christian name of Father

Christian name of Mother *Maggie*

Wife's maiden name in full *✓*

Date and place of marriage *✓*

Christian names of children *✓*

Place and date of soldier's birth. *Moretons Hs. 27th June. 1895.*

Nature and locality of civil employment required

*Witness*

*J. Hammett*

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)

*Heber Jones.*

(Rank) *Plt*

Station *St Johns.*

Date *Aug 13th 1917*

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.

*St. Burden*

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

Station *St Johns*

Date *Aug 13/17*

529?

GEO. W. B. AYRE, LLB.  
BARRISTER, SOLICITOR AND NOTARY,  
OFFICES- RENOUF BUILDING,  
ST. JOHN'S, NEWFOUNDLAND.

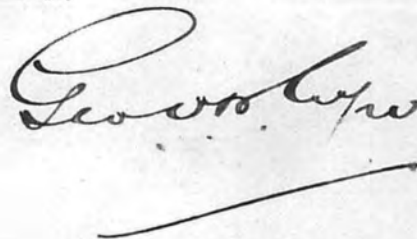
January 10th 1927.

C. C. Oke, Esq.,  
Secretary,  
Board of Pension Commissioners.

Dear Sir:

I am in receipt of your letter of January 8th re  
Heber Jones and thank you therefor.

Yours truly,



Geo. W. B. Ayre

GWBA/MS.

PENSION No. 529 disability

GAS. POISONING

REG'T No. 2639

RANK Private

H. Q. No.

SOLDIER'S NAME Jones Heber  
 DATE PENSION COMMENCES 1-7-19  
 PENSIONER'S NAME Jones Heber  
 WIFE'S NAME  
 CHILDREN'S NAMES

BLOCK No.

ANNUAL RATE	PERIOD	MONTHLY RATE	EXPIRES	AMT. PAYABLE	AUTHORIZED AMOUNT	BY
\$120.00	6	\$10.00	25-11-19	\$48.33	\$48.33	
\$ Nil		Nil				

## DEBITS

## CREDIT

TOTAL PAYMENTS	DATE	PERIOD	DED.	ABSTRACT	CHEQUE		TOTAL AMOUNT PAID	AUTHORIZED AMOUNT	BALANCE DUE	
					SERIES	No.				MONTHLY PAYMENT
	JUL	1 JUL				4.11	10.00	10.00 s	48.33 -	38.33 Cr
10.00	AUG	1 AUG				18.93	10.00	20.00 s	48.33 -	28.33 Cr
20.00	SEP	1 SEP				33.83	10.00	30.00 s	48.33 -	18.33 Cr
30.00	OCT	1 OCT				48.83	10.00	40.00 s	48.33 -	8.33 Cr
40.00	NOV	1 NOV				65.36	8.33	48.33 s	48.33 -	.00 Cr

Sept 10/1926

529  
2639

Mr W. Warren,

Dear Sir

I am sending down my sister with this note to ask you if you would be so kind as to let me have 20.00 dollars as my Babsy is very sick and I got to get the Doctor for her so please oblige me by letting me ~~having~~ have it till the last of the month as I have not got a cent to pay the Doctor or to be any thing for I would be very thankful to you if you will do this for me,

as Mr Warren if I did not want it I would not send down for it kindly give answer my sister the answer

Thanking you for your trouble

I remain your truly  
Mr Heber Jones  
28 Princes Street

Mr C. C. C. C.

529

Sept  
16/1926

Subury

Hospital

Dear Sir<sup>17</sup>

I am sending  
down to you for advance of  
25 dollars to Mr Heber Jones  
at Subury Hospital pay  
this to my wife for me  
pleas for I owe this money  
for rent my wife had  
a lot of money sence  
I have been up here  
and did not pay the  
rent so I am going to  
pay this my self  
pleas do this for me this  
well be in a in close  
Envelope I remuar Mr Heber Jones

529

Sept 21/1926

Subury  
Hospital

l.l. Oke

Dear Sir

I am sending  
 down this to ask you to give  
 my wife 200 dollars as my  
 little baby is very sick  
 and my wife want to get  
 some thing for her and she  
 want to get the baby  
 perchison fell that ~~the~~ Doctor  
~~right~~ knight gave her  
 so pleas give my wife  
 this by my orders thanking  
 you very much pleas oblige  
 me Mr Helen Jones

529

Sudbury Mass.

Sept. 12. /26

Mr Oak.

Dear Sir,

I am sending  
down to ask you if my  
wife was down there  
and drew any money in  
this month if so

Please let me know  
for I want to find  
out the reason I  
sent down to ask you  
is because I had  
suspicious that she  
drew money if she  
did I dont think  
thats good enough  
for at the end of  
August she got \$30  
and I got ten so



I think that was quite sufficient for any woman for I think its a waste what do you think.

Put a stop to this drawing money for if you dont she will draw every cent is down there before the end of the month so please write me and let me know

I am yours Truly

Wm Heber Jones

Sudbury Hospital

September 13th, 1926.

Mr. Heber Jones,  
SUDBURY HOSPITAL,

Dear Sir:-

I beg to acknowledge receipt of your letter of September 12th., addressed to Mr. Oke, regarding the payment of pension allowance to your wife, and requesting us to make her no further allowance without a written order from you.

I would advise you that on the 10th inst., we received a communication from your wife asking for an advance of \$20.00 in order to enable her to procure medical assistance and medicine for one of her children. This amount was ordered to be paid by Mr. Oke, the Secretary.

Mr. Oke is not in the office to-day, I shall therefore hold your letter until his return, when you will be further advised regarding the matter.

Yours very truly,

EVW/BT.

FOR Secretary.

# PENSION ACCOUNT.

P. No 529

## Hospital Period

Name Heber Jones Regt. No. 2639 Rank \_\_\_\_\_ Hospital Sudbury

Remarks \_\_\_\_\_

112  
 22  
 3) 22 99 29  
 104 53

Date of Admission	Date of Discharge	Number of Days	Rate of Pension	Total Cr.	Previous Pension			Payments		Total Dr.
					Rate	Date Paid to	Amount	Amount	Date	
17/8/26	28/9/26		11200	156 80 ✓				10 00		1620
								10 00	31/8/26	3128
								30 00	31/8/26	3136
								20 00		3229
								25 00		3242
								20 00		3266
				156 80 ✓				41 80	29/9/26	3279 15680

*[Signature]*

No. 274

Pension No. 529

### The Board of Pension Commissioners for Newfoundland

#### AUTHORITY FOR PENSION PAYMENTS

Heba Jones ..... Wife .....  
 (Pensioner's Name) (Relationship to member of forces)  
 Mrs. Heba Jones .....  
 (Pensioner's Address)  
 28 Bunsell ..... 2639 .....  
 (Name of member of forces) (Rank) (Regt. No.)

Entire Disability .....% Pensionable Disability .....%

#### AWARD

For Pensioner .....	\$	a month
For Pensioner (Bonus) .....	\$	a month
For Wife .....	\$	a month
For..... Children .....	\$	a month
Addition to pension for helplessness .....	\$	a month
Total .....	\$	a month for ..... months
		from ..... to .....

Amount of adjustment payment :

From ..... to ..... (at \$) ..... \$ 20<sup>00</sup>/<sub>100</sub>

Date 11/9/26

Computed by .....  
 (Secretary)

Checked by ..... Board of Pension Commissioners for Newfoundland.

Remarks :

Payment on a/c Hospital allowance H 20<sup>00</sup>/<sub>100</sub>

No. 1.10.....

Pension No. 529.....

### The Board of Pension Commissioners for Newfoundland

#### AUTHORITY FOR PENSION PAYMENTS

Mrs Heba Jones ..... *Wife*  
 (Pensioner's Name) (Relationship to member of forces)

c/o 2639 Heba Jones .....  
 (Pensioner's Address)

Princes St City ..... 2639  
 (Name of member of forces) (Rank) (Regt. No.)

Entire Disability ... 1.0.0...% *in Hospital* Pensionable Disability ... 1.0.0...%

#### AWARD

For Pensioner .....	\$	a month
For Pensioner (Bonus).....	\$	a month
For Wife.....	\$	a month
For..... Children.....	\$	a month
Addition to pension for helplessness .....		a month
<b>Total.....</b>	<b>\$</b>	<b>a month for..... months</b>
		from.....to.....

Amount of adjustment payment :

From.....to..... @ \$ *30.00*

Date ..... *31/3/26* Check No. .... *2136*

Computed by *mm* .....  
*[Signature]*  
 (Secretary)

Checked by.....  
 Board of Pension Commissioners for Newfoundland.

Remarks' :

*Payment on of pension to  
 whilst in Hospital 30.00*



No. 115

Pension No. 529

The Board of Pension Commissioners for Newfoundland

AUTHORITY FOR PENSION PAYMENTS

Jones Heber  
 (Pensioner's Name) ..... (Relationship to member of forces)  
per Mrs Jones  
 (Pensioner's Address) .....  
28 Prince St  
 (Name of member of forces) ..... (Rank) ..... (Regt. No.) 2607

Entire Disability .....% Pensionable Disability .....%

AWARD

For Pensioner .....\$ a month  
 For Pensioner (Bonus).....\$ a month  
 For Wife.....\$ a month  
 For..... Children.....\$ a month  
 Addition to pension for helplessness ..... a month  
 Total.....\$ a month for..... months  
 from..... to.....

Amount of adjustment payment :

From..... to..... @ \$.....

Date 20-7-26

Computed by JM

Checked by.....

JM  
 Check No. 1170  
 (Secretary)  
 Board of Pension Commissioners for Newfoundland

Remarks :

Paid in full



No. 172

Pension No. 529

The Board of Pension Commissioners for Newfoundland

AUTHORITY FOR PENSION PAYMENTS

Heber Jones (Pensioner's Name)
St. John's # (Pensioner's Address)
Rank (Rank)
2639 (Regt. No.)

Entire Disability 100% Pensionable Disability 100%

AWARD

For Pensioner \$ a month
For Pensioner (Bonus) \$ a month
For Wife \$ a month
For Children \$ a month
Addition to pension for helplessness \$ a month
Total \$ a month for months
from to

Amount of adjustment payment :

From 10 @ \$
Date 30/8/26
Computed by
Checked by
Check No. 3128
(Secretary)
Board of Pension Commissioners for Newfoundland

Remarks :



No. 287

Pension No. 529

# The Board of Pension Commissioners for Newfoundland

## AUTHORITY FOR PENSION PAYMENTS

Heber Jones .....  
 (Pensioner's Name) ..... (Relationship to member of forces)  
 Per Mrs Heber Jones .....  
 (Pensioner's Address)  
 Prince St .....  
 (Name of member of forces) ..... (Rank) ..... 2639 .....  
 (Regt. No.)

Entire Disability .....% Pensionable Disability .....%

## AWARD

For Pensioner .....	\$	a month
For Pensioner ( Bonus) .....	\$	a month
For Wife .....	\$	a month
For .....	\$	a month
Children .....	\$	a month
Addition to pension for helplessness .....		a month
<b>Total .....</b>	<b>\$</b>	<b>a month for ..... months</b>
		from ..... to .....

Amount of adjustment payment :

From ..... to ..... @ \$ .....  
 Date 11/9/26  
 Computed by .....  
 Checked by .....  
 (Secretary)  
 Board of Pension Commissioners for Newfoundland.

Remarks :

Payment on of Hospital allowance \$25.00

If you do not receive any notice regarding re-examination at the end of your pension period, kindly communicate with this Department when the necessary arrangements will be made.



No. 492

Pension No. 529

### The Board of Pension Commissioners for Newfoundland

#### AUTHORITY FOR PENSION PAYMENTS

Heber Jones ..... (Pensioner's Name) ..... (Relationship to member of forces)  
Princes St. ..... (Pensioner's Address)  
..... (Name of member of forces) ..... (Rank) ..... 2629 (Regt. No.)

Entire Disability 100% Pensionable Disability 100%  
in Hospital Ent. 29/9/26

#### AWARD

Discharged 26/10/26

For Pensioner .....	\$	a month
For Pensioner (Bonus) .....	\$	a month
For Wife .....	\$	a month
For .....	\$	a month
For .....	\$	a month
Addition to pension for helplessness .....		a month
<b>Total</b> .....	\$	a month for ..... months

from ..... to .....

Amount of adjustment payment :

From ..... 10 ..... @ \$ M \$ 54 <sup>53</sup> ~~xx~~

Date 27/10/26 .....

Computed by M .....

Checked by .....

Check No. 4927  
[Signature]  
 (Secretary)  
 Board of Pension Commissioners for Newfoundland.

Remarks : Balance due for Hospital period to 26 <sup>10</sup> / 26 \$54 <sup>53</sup> ~~xx~~

If you do not receive any notice regarding re-examination at the end of your pension period, kindly communicate with this Department when the necessary arrangements will be made.

No. 1187

Pension No. 529

### The Board of Pension Commissioners for Newfoundland

#### AUTHORITY FOR PENSION PAYMENTS

*Heber Jones*  
 (Pensioner's Name) ..... (Relationship to member of forces)  
*See Mrs. Heber Jones*  
 (Pensioner's Address) .....  
*St. John's City* ..... (Name of member of forces) ..... (Rank) ..... *2639* (Regt. No.)

Entire Disability .....% Pensionable Disability .....%

#### AWARD

For Pensioner .....	\$	a month
For Pensioner (Bonus) .....	\$	a month
For Wife .....	\$	a month
For .....	\$	a month
For .....	\$	a month
Addition to pension for helplessness .....		a month
<b>Total</b> .....	\$	a month for ..... months

from ..... to .....

#### Amount of adjustment payment:

From ..... 10 ..... @ \$ .....  
 Date ..... *21/1/26* .....  
 Computed by ..... *M* .....  
 Checked by .....  
 Board of Pension Commissioners for Newfoundland.

*M*  
 Check No. *2000*  
*[Signature]*  
 (Secretary)

Remarks: *Payment on a/c pension 2000*

If you do not receive any notice regarding re-examination at the end of your pension period, kindly communicate with this Department when the necessary arrangements will be made.

No. 406

Pension No. 529

### The Board of Pension Commissioners for Newfoundland

#### AUTHORITY FOR PENSION PAYMENTS

Heber Jones  
 (Pensioner's Name) ..... (Relationship to member of forces)  
Ru Joo Lynch  
 (Pensioner's Address) .....  
City ..... (Rank) 2639  
 (Name of member of forces) ..... (Regt. No.)

Entire Disability .....% Pensionable Disability .....%

#### AWARD

For Pensioner .....	\$	a month
For Pensioner (Bonus) .....	\$	a month
For Wife .....	\$	a month
For .....	\$	a month
Children .....	\$	a month
Addition to pension for helplessness .....	\$	a month
<b>Total</b> .....	\$	a month for ..... months
		from ..... to .....

Amount of adjustment payment :

From ..... to ..... @ \$ 20<sup>00</sup>/<sub>100</sub>

Date 11/9/26

Computed by M.

Checked by .....

MW \$ 20<sup>00</sup>/<sub>100</sub>  
 Check No. 4847  
 (Secretary)  
 Board of Pension Commissioners for Newfoundland.

Remarks :

Payment on r/c pension 20<sup>00</sup>/<sub>100</sub>

No. 387

Pension No. 529

### The Board of Pension Commissioners for Newfoundland

#### AUTHORITY FOR PENSION PAYMENTS

Heber Jones Wife  
 (Pensioner's Name) (Relationship to member of forces)

St Mrs Heber Jones  
 (Pensioner's Address)

Princes St 2639  
 (Name of member of forces) (Rank) (Regt. No.)

Entire Disability .....%

Pensionable Disability .....%

#### AWARD

For Pensioner .....	\$	a month
For Pensioner (Bonus) .....	\$	a month
For Wife .....	\$	a month
For .....	\$	a month
For .....	\$	a month
Addition to pension for helplessness .....		a month
<b>Total</b> .....	\$	a month for ..... months
		from ..... to .....

Amount of adjustment payment :

From ..... to ..... @ \$.....

Date 6/10/26

Computed by *MM*

Checked by .....

Remarks Payment on etc pension

\$10.00

*MM* \$ 10.00

Check No. 4827

(Secretary)

Board of Pension Commissioners for Newfoundland.

If you do not receive any notice regarding re-examination at the end of your pension period, kindly communicate with this Department when the necessary arrangements will be made.

No. 323

Pension No. 529

### The Board of Pension Commissioners for Newfoundland

#### AUTHORITY FOR PENSION PAYMENTS

*Heba Jones*  
 (Pensioner's Name) ..... (Relationship to member of forces)  
*Prince St*  
 (Pensioner's Address) .....  
 ..... (Name of member of forces) ..... (Rank) ..... (Regt. No.) *2639*

Entire Disability .....% Pensionable Disability .....%

#### AWARD

For Pensioner .....	\$	a month
For Pensioner (Bonus) .....	\$	a month
For Wife .....	\$	a month
For .....	\$	a month
For .....	\$	a month
Addition to pension for helplessness .....		a month
<b>Total</b> .....	\$	a month for ..... months
		from ..... to .....

Amount of adjustment payment :

From ..... to ..... @ \$ *41.50*  
 Date *29/9/16* .....  
 Computed by *M* .....  
 Checked by .....  
 (Secretary)  
 Board of Pension Commissioners for Newfoundland.

Remarks :  
*Balance due for Hospital period to 29/9/16 \$41.50*

If you do not receive any notice regarding re-examination at the end of your pension period, kindly communicate with this Department when the necessary arrangements will be made.

No. 310

Pension No. 529

# The Board of Pension Commissioners for Newfoundland

## AUTHORITY FOR PENSION PAYMENTS

Heber Jones ..... (Pensioner's Name)      Wife ..... (Relationship to member of forces)

Rt. Mrs. Heber Jones ..... (Pensioner's Address)

Primas K ..... (Name of member of forces)      2639 ..... (Regt. No.)

Entire Disability .....%      Pensionable Disability .....%

### AWARD

For Pensioner .....	\$	a month
For Pensioner (Bonus).....	\$	a month
For Wife.....	\$	a month
For..... Children.....	\$	a month
Addition to pension for helplessness.....		a month
<b>Total.....</b>	<b>\$</b>	<b>a month for..... months</b>

from ..... to .....

Amount of adjustment payment :

From..... to ..... @ \$..... M \$20<sup>00</sup>/<sub>4</sub>

Date..... 23/9/26.....

Check No. 3266

Computed by..... JRM.....

Checked by.....

Board of Pension Commissioners for Newfoundland.

Remarks :

Payment on esp pension \$20<sup>00</sup>/<sub>4</sub>  
 Hospital allowance



529!

Mr Oke

Dear Sir

This is to certify that  
I Mr Herbert Jones  
Paid my Mr Bragg  
the sum of twenty  
Dollars dont lay  
any blame to me  
Bragg for any  
longer for a letter  
it was my wife that  
done this & done  
it with out my  
notice I am yours  
resplfully Mr Herbert  
Jones

C.R. 2639

Extract from Nominal Roll of 2nd Bn. Royal West Kent Regiment: Draft  
No. 12. from 2nd Bn. Depot, to 1st Bn. B.E.F. Embarked  
Southampton, 11-10-16..

2639 Pte. H. Jones.



Western Head  
Via Mortons Har

Dec 3/9/23

2639

Leite. H. Jones

Dear Sir I got the great  
medal to Day with you see was picked  
up by the English please Sir My  
Husband had it in it Johns couple years  
ago and if that is all you got to send  
A poor wounded soldier I should rather  
for you to off keep it where it was  
for the good of it so I am sending  
it back again they can keep it  
in the British Department for a  
souvenir for it is of you value to me  
or any one belong to me

So I am sincerely  
Yours Mrs H. Jones

Western Head

Via Mortons Har  
J. H. B.

in the post

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. 941), is forwarded herewith to

Heber Jones,

in respect of his service as No. 2639 Rank Pvte.

Name H. Jones, Corps Royal Nfld Regt.,

Receipt of the same should be acknowledged hereon.

Received on Friday

Signature Heber Jones

Date July 29 1921

Address Western Head via Norton

*H.J.*  
J. D. B.  
P.T.O.

NEWFOUNDLAND CONTINGENT.

---

From:-  
The High Commissioner for Newfoundland,  
58, Victoria Street,  
London, S.W.1.

To:-  
The Chief Staff Officer,  
Department of Militia,  
ST. JOHN'S,  
Newfoundland.

November 12th., 1923.

---

SUBJECT.

Medals.

REPLY.

---

I am forwarding herewith, for disposal, the Victory medal inscribed 2639 Private R. Jones, Royal Newfoundland Regiment, which was found and returned to the War Office by the police.

Kindly acknowledge receipt.

Obverse acknowledged with thanks. The Medal is being forwarded to the party concerned.

Lieut. Col.,  
Chief Staff Officer.

*Victoria Gordon*

Nov. 25rd., 23.

Mrs. Abel Jones,  
Moretons Hr., N.D.B.

Dear Madam,

Kindly furnish this Department with the address of your son 2629 ExPte. Heber Jones, Royal Newfoundland Regiment.

We have received from the High Commissioner, London, his Victory Medal which was picked up by the Police in England.

An early reply would be much appreciated.

I have the honour to be,

Yours very truly,

Lieut.  
Officer i/c Records.

C.R. 2639

Dec. 6th 22

Mrs. Heber Jones,  
Blackhead Road,  
St. John's, West.

Dear Madam:-

In reply to your letter of recent date, I have to inform you that I applied to the Patriotic Fund Comm. for assistance, and was informed that as your husband is now earning, they are unable to help. I also spoke to Mrs. Rendell to see if she was able to help you with clothes, and I am sorry that at the present time she has nothing available.

Yours faithfully,

Lieut.-Col.,  
Chief Staff Officer.

I am living in a  
old shack on the  
South Side Hills  
With the Rain coming on  
We in all parts of  
it as I cannot afford  
to get on I can get  
18 hours this morning  
turning Riddle for  
four dollars But I  
havent got one cent  
Let it be four dollars  
it would be a god  
send for me if I  
could get it

So please answer  
Bye the Little girl

Will Curnel Rendell  
 if you or your wife  
 can help me or  
 Little God Will  
 Bless you and your  
 Will Succeed in  
 Every thing you do  
 for any one that  
 do any thing for  
 the Poor Will give  
 What for any thing  
 so you Curnel Rendell  
 I must close  
 Hoping that you  
 will do your Best  
 for me and answer  
 Bye the little girl  
 your truly Mrs Heber Jones



any one can come  
and see me and  
see for them self  
and curmb Rendell  
My husband was out  
of work ~~that~~ got going  
ago for three months  
~~and~~ out to last week  
they gave him a job  
at the Rock Shop for  
100 dollars a week  
And thank god  
curmb Rendell it  
is a blessing to  
me but I can only  
get a bit for us to  
caght with out any  
thing to caght

you 23 <sup>tw</sup>  
1922  
C.R. 7639  
Curmb Rendell  
Dear Sir I  
am Righting down to ask  
you if you would ask  
Mrs Rendell if she  
had a few old cloes  
that she could give  
me as I am very much  
in need of it. I dont  
care how old it is  
it will be of good  
use to me as I am  
very bad off will  
curmb Rendell there  
the to Ladies up to  
see me a couple of  
weeks ago and I want

send him out of  
 it and never told  
 him what was  
 wrong with him or  
 any thing and took  
 his pinon and every  
 thing and he dont  
 you know this day  
 the reason why  
 I named Rendell &  
 should come down my  
 self only I am in  
 a delicate state of  
 health and yet only  
 that I havent got  
 a bit of clori to  
 were in a boat to  
 my foot and God was

seen then I saw they  
 they said they were going  
 to do what they can  
 for me they said they  
 were talking to you  
 about me they would  
 Rendell my husband  
 was in the ~~sanatorium~~  
 Iuberg protested for treatment  
 he was there for three  
 week on Moor and  
 never got it sent while  
 he was there I was  
 living one my widower  
 mother all that time  
 me and my child were  
 named Rendell they

Fold Here

---

**ON HIS MAJESTY'S SERVICE**

To the Officer in Charge of Records,

*Royal Nfld. Regt.*

*Dept. of Militia,*

*ST. JOHN'S. Nfld.*

---

Fold Here

SEP 9 1921

1921.

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

Pte. H. Jones

in respect of his service as No. 2639 Rank Pte.

Name H. Jones Royal Nfld. Regt.  
Nfld. Forestry Corps

Receipt of the same should be acknowledged hereon.

Received To Madels

Signature Pet Heber Jones

Date 23 day of September

Address Western Head via Mortons Har

[P.T.O.]



2639

PRIME MINISTER'S OFFICE,  
ST JOHN'S, NEWFOUNDLAND.

October 19, 1921.

Dear Colonel Rendell:

2639

Herewith letter of the 15th September from Mr. Heber Jones, of  
Western Head, via Moreton's Harbor.

Would you kindly look into this matter and let me have a report?

Very truly yours,

Prime Minister.

Lt. Col. Rendell,  
Department of Militia.

*Re-bounding papers sent to Mr Lebreu  
Oct 4/21*

September the  
15  
1917

Mr Squires Dear Sir

Just a few more  
words to ask you if you received  
my letter which I ~~sent~~  
sent you a forth night ago  
But got no answer from it  
so I did not get any answer  
so I thought I would write  
you again and see what is  
the reason will Mr Squires this  
is twice I have wrote to you  
and three times to the G. W. C. O. B.  
and got no answer of what  
you are going to do with me  
are you going to see me  
and my family starve and  
go naked for clothe when I  
should be getting my pension  
money a poor wounded soldier

Witch faith for you and  
all the country And just think  
come home and cannot get  
enough to live out of India  
I remain this is our last  
time fighting to you are Mr  
Whitely for the next time  
& Rights will be to the King  
god Bless Him And see  
what he got to say about  
it for Mr Squires it  
& could do hard work  
& should not ask for  
your help But I cannot  
it & cant My Wife will have  
to work for to live so that  
is it hard think for me to  
see her going to work and  
me to stay here

So Mr Squire if you do not  
 give me a Pension the  
 Government will have to stand  
 to - my Expenses and Pay my  
 Debt which is a great  
 and cannot pay it you  
 to have getting to pay it out  
 of the Mr Squires & think I  
 must close Hoping to hear from  
 you before long

As I am yours truly

Mr Heber Jones

Wester Head

Via Mortons Har



C.R. 2639

April 28th 20

W.B. Jennings, Esq.,  
Minister Public Works.

Dear Sir:-

I beg to acknowledge receipt of your letter of April 24th relative to No. 2639 Ex-Pte. Heber Jones.

With reference to your enquiry regarding the shortage of \$14.00 in the War Service Gratuity paid this man, I might say that when he was discharged a bonus of \$13.70 was paid to him, and was later deducted from his Gratuity.

Yours faithfully,

Lieut.-Col.,

Chief Staff Officer.



Department of Public Works,  
St. John's, Newfoundland.

J

April 24<sup>th</sup> 19

Dear Sir

My Private Helper James has  
complained that when receiving  
his War Gratuity there was a shortage  
of \$14.<sup>00</sup> that is instead of receiving  
\$350.<sup>00</sup> which he was entitled to  
only received \$336.<sup>00</sup> Will you  
kindly make an investigation to find  
out the reason if this is correct

Yours truly,  
W.B. Jennings  
Paymaster

40  
Capt. Rowland W. R. Ry.  
Military Branch

P.M. What did balance of \$14 represent. R

lets. Bonus date of discharge (# 2639)  
\$13.<sup>70</sup>/<sub>100</sub> - please Rm  
per S

St Johns

Jun 8  
1919

C.R. 2639

3233

I

Cornal Rendell

Dear Sir I am sending  
down to ask you if you  
will please find out why  
one of my seventy dollar  
were cut of if you are  
you man Cornal I do not  
think it is fear of ones  
money to be cut and it  
nothier to be all right  
while Cornal I got tree  
seventy dollar check  
and one fifty six while  
you see Cornal there  
was fourteen dollars cut  
of while Cornal I cannot  
understand why it  
was don as you you  
Cornal every other

Mar 1	to pay	7000
Apr 1		7000
May 1		7000
June 1		7000
July 1		5630
	Bonus	1370
		<hr/>
		27350

9

Sargent's Money was all  
Right - I hear of mine  
so you see it is not  
I guess so several of  
Now you will please  
do your Best for me  
to inquire about this  
check so several it was  
only here a few days  
ago that I got one of  
my checks which was  
almost to month's over  
due and I left going  
down to see about it  
and I could not get  
satisfaction of the bank  
about it so I will  
close hoping that you will  
do your Best for me  
I am your friend

So & a [redacted] truly truly  
one of the Soldiers Boys

A H Jones

So Please Reply  
Sir

My address is

Mr Heber Jones  
39 John St  
St Johns  
City

P.M.

How about Heber's a/c  
2 weeks bonus deducted  
R

C.R. 2639

Extract from Telegram from Synoptical to All. dated Feb 14/1919

Remittance received as follows not been paid for soldiers  
~~Repatriated~~ Repatriated ~~you can~~ you can adjust.

2639 Janes.

PERSONAL EFFECTS

Received from Militia Department

One Kit Bag #2639 Pfc. Heber Jones

Signed *Pfc. Heber Jones*

Date *July 15 1968*



C.R. 2639

July 8, 1918

Mrs. Abel Jones,  
Moretons Harbor, N.D.B.

Dear Madam:-

I am writing to inform you that I am forwarding by "Express" one Kit Bag, which belongs to your son #2639 Pte. Heber Jones of The Royal Newfoundland Regiment.

Enclosed you will find, receipt, will you kindly sign same and return at your earliest convenience.

Yours faithfully,

*W. J. W.*  
Lieut  
for Lieut. Col. C.S.O.

Enc'1 1.

No. of Paper 1211

**PERSONAL EFFECTS.**

Name Jones, H.

No. 2639

Rank Plt

Regiment THE ROYAL NEWFOUNDLAND REGT

Article	Where stored	Notified by
<u>Kit Bag.</u>		
	Final disposal	

Shipped from Depot.

Remarks :—

Repatrolled  
Next of Kin: Mother: Mrs Abel Jones  
Marston St.

C.R. 2639

Extract from Daily Orders part 11, from Unit The Royal  
Wfld. Regt. St. John's, dated May 30th, 1918.

#2639 Pte. H. Jones.

Having been found Medically Unfit is discharged  
from 25.5.18

C.R. 2639

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

2639 Pte.H. Jones,

Discharged 25 - 5 - 18, Medically unfit

C.R. 2639

Extract from Preliminary Report received from The Director  
Depot  
of Medical Services, Lt. Officer Commanding/St. John's, dated  
May 13, 1918.

2639 Pte. H. Jones.

4th Board. Recommended Discharge as Permanently Unfit,

C.R. 2639

Extract from Daily Orders Part II Unit The Royal Wfld.  
Regt., St. John's, Oct. 22nd, 1917.

2639 Pte. H. Jones.

Attached to Headquarters for Duty with effect from Oct.  
22nd, 1917.

C.R. 2639

Extract from Daily Orders Part II. Unit the Royal Wfld.  
Regt., St. John's, Aug. 6th, 1917.

2639 Pte. H. Jones.

Attached to Strength Aug. 4th, 1917.

# 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

Rcd

By

Sent

By

Check

Dated

10th March, 1917.

To

Mrs. Abel Jones,

Moreton's Harbor, N.D.B.

Regret to inform you that Record Office,

London, officially reports No. 2639, Private Heber

Jones admitted Wandsworth Gas Poison.

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

J. R. BENNETT,

Colonial Secretary.

FOR TYPEWRITER



C.R. 2639

Extract from ~~Intelligence Summary~~: Casualties received from  
P.O. Office London, Mar. 9th, 1917.

At Wandsworth.

2639 Jones.

Suffering from Gas posion.

C.R. 2639

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

2639 Pte. Jones Heber.

A.2639

May 14th,

8.

From Officer Commanding Companies,  
Depot.

To Paymaster and Officer i/c Records,  
Dept. of Militia.

#2639 Pte. H. Jones.

The above mentioned man has been recommended for discharge. His account has been squared up to and including today. He has a debit balance as at this date of Seventy Cents (\$0.70) and an allotment current of \$0.60 per day.

C.R.

2639.

**Heber Jones** was attested for General  
Service with the NEWFOUNDLAND REGIMENT ON **April 28th 1916**  
Regimental No. **2639** was allotted to Pte. **Heber Jones**

AUTHORITY:

Record Ledger;

Dept. of Militia.

March 25th 1919

A. Jones

2689.

~~P. P. O.~~

MAY 13th.1918.

To Paymaster & Officer i/c Records.  
Department of Militia.

From O.C.  
Depot.

2639. Pte. N. Jones.

The marginally noted man has been recommended for discharge as permanently unfit by a Medical Board held on 11-5-18.

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

Reg. No. 2639 Rank Pt Name Jones H.  
 Attested 28-4-16 Address Worlton St. N.S.B.  
 Allotment 60 cts. Allottee 32 John St. City.  
 Date of Allotment \_\_\_\_\_ Returned from Overseas 4-8-17  
 Embarked for Overseas \_\_\_\_\_ Cause \_\_\_\_\_

Oct	11-17	2 months furlough l. from 14-8-17.
"	22	att. Ngn for duty.
12-11-17		Inspected Southern Shore & reporting from West End Accounting Station.
17-11-17		Retd. from Southern Shore & rep <sup>d</sup> Home.
		H. O. 28/12/17 - 4/12/18, Retd. 5/11/18.
19-1-18.		Transferred Rec. Medical Dept.
22-1-18.		Rec. Adm. N.S.M.C.H.
7-2-18		sent to depot for action
8-2-18		Retd to depot until vacancy occurs -

11.3.17 aom. N.M.C.H

25.4.17 forfeits 30 days pay

13/5/18. 4<sup>th</sup> Bd., Recommended Discharge as permanently  
unfit.

Admitted to Naval & Military Convalescent Hospital 9-5-18



4/1st ROYAL NEWFOUNDLAND REGIMENT.  
REPORT OF HEADQUARTERS TRAVELLING BOARD HELD ON  
SOLDIER ON REGIMENTAL STRENGTH.

---

Depot. Headquarters 1st. Newfoundland Regiment.

Regimental No. 2639

Name.

Jones H. He.

Address.

32 John St.

Disease or Disability.

Finding of last standing  
Medical Board held on

..... Aug. 14.....1917..

- Light Duty - 2 mos. (stretcher) furlough.

Present Condition.

- No much improved.

Recommendation.

- Med Board.

Category.

Members  
of  
Board.

{ G. J. Carthy ..... C.O. Depot  
H. H. H. ..... D.D.M.S.  
J. W. Burden ..... M.O. Depot

Depot.

Headquarters Royal Newfoundland Regiment..... Jan. 19.....1918.....

March 11th. 1918.

From The Director of Medical Services,  
To O. C. Depot.

2639 Pte. Jones, H.  
2494 Pte Billard, V. L.

The marginally noted men were admitted to the  
Naval and Military Convalescent Hospital March 11th.  
1918.

Signed. Cluny Macpherson,  
Major, D. M. S.

Copy to Secty. Pensions & Disabilities Board.



# DEPARTMENT OF MILITIA

ADDRESS REPLY TO  
DEPARTMENT OF MILITIA  
AND QUOTE NO.

2639

ST. JOHN'S, NEWFOUNDLAND.

March 9th., 1918

From:- D. M. S.

To:- O. C. Depot.

2639, Pte. Jones, H.

The marginally noted man is recommended by the Standing Medical Board as "Unfit for any Duty for three months".

There is no medical reason why this man should not be allowed to proceed to his home for this period.

There is now a vacant bed for him at the Naval & Military Convalescent Hospital which I shall retain until Monday noon. If you consider that he had better go there no can notify me on Monday morning.

*Cluny Macpherson*

Major, D. M. S.

*Rang up Major Macph. re this on 11-3-18. He agreed Jones had better go to Hosp. Sent R.P. to locate him to report to A.M.S.*

December 28th. 1917.

From Adjutant,  
Depot.

To Esq. Master and Officer i/c Records,  
Dept. of Militia.

Re Allotment 2639 Pte. H. Jones.

Above mentioned man has made application to have his allotment of sixty cents per day cancelled from and including December 1st. 1917. Will you please note and carry same into effect. New allotment on Form K. 4567 for the same amount is substituted. I enclose herewith necessary papers.





# DEPARTMENT OF MILITIA

ADDRESS REPLY TO  
DEPARTMENT OF MILITIA  
AND QUOTE NO.

ST. JOHN'S, NEWFOUNDLAND.

February 7th., 1918

From:- D. M. S.

To:- Adjutant, Depot.

2639. Pte. H. Jones

The marginally noted man will be notified as soon as there is a vacancy at the Naval & Military Convalescent Hospital, at the address given by him, 32 John Street.

*Cluny Macpherson*

Major, D. M. S.

FEBRUARY 7th. 1916.

From Adjutant,

Depot.

To D.M.S.

Colonial Building.

2639. Pte. Heber Jones.

Marginally noted man was recommended for admission to Naval & Military Convalescent Hospital by Medical Board of 4-2-16. I am sending him herewith for your attention and necessary action, please.

L 287

# NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Amount No. 1 Sent by Mortons Check 9

No. 158

Place from

To Capt. O Grady

Johnst

UGT 9-1911

cannot come until  
next week please  
extend leave week  
from today.

Rte Heber Jones

granted by telegram

9-10-11



2/1st NEWFOUNDLAND REGIMENT.

Pte Jones. A

No. 2639 is unlikely to be fit for Service with the Expeditionary Force for 6 *disc* months, on account of

*Gas Poisoning*

I recommend that he be posted to the Depôt at St. John's, Newfoundland.

*J. S. Prentice* M.O.,  
*Capt. Name.*  
I/C. 2/1st Newfoundland Regt.

*Barry Camp*

~~ATTN~~  
16-7-17



# DEPARTMENT OF MILITIA

**NEWFOUNDLAND RESERVE**

P. O. BOX No 1242

TELEPHONE No. 361

## PAY DEPARTMENT

CABLES AND TELEGRAMS TO  
"PAYDEPT."  
ST. JOHN'S, NEWFOUNDLAND

ST. JOHN'S, NEWFOUNDLAND.

ALL COMMUNICATIONS TO BE  
ADDRESSED TO THE  
PAYMASTER

October 24th. 1917. 191.....

Officer Commanding,  
Headquarters.

Dear Sir,-

Re No. 2639, Pte. H. Jones.

This man has been squared up to and including the  
21st. October, and has an allotment current of 60¢ per  
day.

Yours faithfully,

Capt. & Paymaster.

*Handwritten note:*  
Noted  
man

CHARGE.

N. & M.  
CONVALESCENT  
HOSPITAL.

Army Form B. 252.  
(See King's Regulations.)

1st Newfoundland Regiment

.....COMPANY

CHARGE against No. 2639 Pte. H. Jones

Place	Date of Offence	Offence.	Names of Witnesses.	Punishment Awarded	By whom Awarded.
	May 5	1. Absent from N. & M. Convalescent Hospital, without leave, while undergoing C. B.	Pte. T. Hussey R.M.P.	Forfeits <del>one week's</del> <del>pay</del> 7 days pay	CLUNY MACPHERSON Major <i>Cluny Macpherson</i> Major
		11. Absent from N. & M. Convalescent Hospital without leave from May 5th to May 9th. until arrested by Regimental Police			

N. & M.  
CONVALESCENT  
HOSPITAL.

*Substant*

.....Company,  
1st Newfoundland Regiment

N. & M.  
CONVALESCENT  
HOSPITAL.

CHARGE.

Army Form B. 252.  
(See King's Regulations.)

1st Newfoundland Regiment

.....COMPANY

CHARGE against No. 2639 Pte. H. Jones

Place	Date of Offence	Offence.	Names of Witnesses.	Punishment Awarded	By whom Awarded.
	May 3	Absent from N. & M. Convalescent Hospital, without leave, from May 3rd. to May 5th. until arrested by Regimental Police	Matron	7 days C.B.	CLUNY MACPHERSON Major  <i>Cluny Macpherson Major</i>

N. & M.  
CONVALESCENT  
HOSPITAL.

.....Company,  
1st Newfoundland Regiment



# DEPARTMENT OF MILITIA

ADDRESS REPLY TO  
DEPARTMENT OF MILITIA  
AND QUOTE NO.

2639

ST. JOHN'S, NEWFOUNDLAND,

April 24th., 1918

From:- D. M. S.  
To:- O. C. Depot.

2639, Pte. Jones, Heber

Crime Sheet in connection with the marginally  
noted man is attached herewith for ~~enclosure~~ *inclusion*  
DAILY ORDERS.

*J. J. Phelan*

*Clay Macpherson*

Major, D. M. S.

ENCLOSURE.



**1ST. NEWFOUNDLAND REGIMENT**

**ALLOTMENTS**

I, Heber Jones

, Regl. No. 2639

hereby agree, until further notification by me, and in similar official form to make an Allotment of 60 Dollars and 60 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup>/<sub>or</sub> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup>/<sub>or</sub> Persons concerned, viz.:

Allotment begins July 1<sup>st</sup> 1916

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
2335	mother	Mrs Maggie Jones	Monteons St	60
Commencing 21/7/16				
Total Allotment, \$				

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

Sig.)

*Charles Aye Capt.*

Officer Commanding  
B Company

*St John's  
June 14 1916*

(Sig.)

*Heber Jones  
non Cholera*

(Rank)

Form P/K. Embarked from Liverpool 18.7.17 Classification B  
 1ST NEWFOUNDLAND REGIMENT.

Diary No 43.



Statement of Account of No. 2639 Pte. Jones H.

"H" Company. From 7-7-17 to 18-7-17

(both days inclusive)

Date	Pay Book Col. No.	Particulars	No. of days.	@ per day.	Dr.		Cr.		Dr.			Cr.		
					\$	c.	\$	c.	£	s.	d.	£	s.	d.
		<b>Cr.</b>												
1		Pay ... ..	12	1 00			12	00						
2		Field Allowance ... ..	12	10				1	20					
3		Other Allowances ... ..												
4		Total Pay & Allowances ... ..					13	20						
5		Converted into Sterling @ \$4.86 $\frac{2}{3}$										12	14	3
6		Balance from previous Pay Book												
7		Total Credits (in £ s. d.) ... ..										2	14	3
		<b>Dr.</b>												
8		Forfeited Pay ... ..												
9		Allotments ... ..	12	60	7	20								
10														
11		Total Stoppages (in \$ c.) ... ..				7	20							
12		Converted into Sterling @ \$4.86 $\frac{2}{3}$					1	9	7					
13		Fines ... ..												
14		Clothing and Necessaries ... ..												
15		Arms and Accoutrements ... ..												
16														
17														
18		Total Stoppages (in £ s. d.) ... ..								1	9	7		
19		Casual Payments ... ..						11	2					
20		1st Payment ... ..						10	0					
21		2nd " ... ..												
22		3rd " ... ..												
23		Total Cash Payments ... ..								1	1	2		
24		Balance from previous Pay Book ... ..									3	6		
25		Total Stoppages & Cash Payments ... ..								2	14	3		
26		Final Cash Payment ... ..												
27		Balance (debit) ... ..												
28		" (credit) ... ..												

PAY & RECORD OFFICE,  
 58, VICTORIA STREET,  
 LONDON, S.W.

£ 2 14 3      2 14 3

CHECKED.  
 [Signature]  
 15.7.17 P.H.

Barry Camp, July 16<sup>th</sup> 1917

[Signature]  
 for a.c. "H" Coy.

5220/...

3rd London General Hosp.  
Wandsworth SW  
April 23<sup>rd</sup> 1917

Paymaster & Co i/c Records  
Newfoundland Contingent.

Dear Sir:-

Would you kindly send to Officer commanding 3rd London General Hospital; the sum of Two pounds, for me

Pte H. Jones 30  
Regt. No 2624.

X 2039

1ST NEWFOUNDLAND REGIMENT	
PAY & RECORD OFFICE	
Ref. No.	1938
Rec'd.	APR 25 1917
Ac'd.	
Ans'd.	3770/1
File No.	

FILE	BRANCH	Regt.
	UNIT	30



NEWFOUNDLAND CONTINGENT

Paymaster & Officer i/c Records,  
Newfoundland Contingent,  
53, Victoria Street,  
London, S.W.

*Ration 3035*

*M.L. 2.00*  
*78/17*

Please remit per Postal Money Order to: O.C. 3<sup>rd</sup> London Gen Hospital

To be handed to Heber Jones

1<sup>st</sup> Newfoundland Regiment

the sum of Two pounds — shillings, on  
account of any balance that may be due to me.

Regtl. No. 2639 Rank Private

Name H. Jones

Approved M. J. Caplan  
for Officer. i/c

3<sup>rd</sup> LONDON GENERAL HOSPITAL, Hospital.  
WANDSWORTH, S. W.

Dated at WANDSWORTH.

27 APR 1917 191

2024  
APR 2 1917  
3886/58

*3886/58*

3886/58.

April 28th. 1917.

3rd London General

Wandsworth, S.W.

2639 Private Heber Jones.

2. 0. 0.

53295

Ward 10

N.F.P/48.

NEWFOUNDLAND CONTINGENT

No. 3886/58.

Pay & Record Office,  
58, Victoria Street,  
London, S.W.  
April 28th. 1917.

To: Officer in Charge,

3rd London General Hospital,

Wandsworth, S.W.

With reference to request of

No. 2639 Private Heber Jones.

Postal Money Order No. 53295 for £2. 0. 0. is enclosed  
for payment to this Soldier as may be deemed fit.

Attached receipt form for SIGNATURE and RETURN to this  
Office, please.

*A. J. Simons* Major,

Paymaster & Officer i/c Records.

Paymaster & Officer in Charge Records  
Newfoundland Contingents  
59 Victoria Street, S.W.

Reference reverse. Mr Jones desires me to request  
that the sum sent him yesterday be refunded to his ac.  
a cheque for £2. 0. 0. is therefore forwarded herewith for  
necessary action please.

Kindly acknowledge receipt.

A Jagan Capron

2110

Ret. for  
Rec. No 29  
2.1.29.

Wandsworth S.W.  
1<sup>st</sup> May 1914.

Registrar  
3<sup>rd</sup> London General Hospital

NEWFOUNDLAND CONTINGENT

Paymaster & Officer i/c Records,  
Newfoundland Contingent,  
53, Victoria Street,  
London, S.W.

Please remit per Postal Money Order to:

2629 Pte. Heber Jones  
1<sup>st</sup> Newfoundland Regiment

the sum of Two (£2) pounds — shillings, on  
account of any balance that may be due to me.

Regtl. No. 2629 Rank Private

Name Heber Jones

Approved J. M. M. Broadbent Capt. R.A.M.C.  
Officer i/c

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

Dated at

11<sup>th</sup> May 1917 at 3<sup>rd</sup> London General Hospital.

1917

To Paymaster of Newfoundland Regt.

Please pay to Harbut Greenland the sum  
of Two Pounds (2) for me

# 2639, H. Jones  
1st. Regt. Regt.

May 13/17



NEWFOUNDLAND CONTINGENT

N.F.P/33.

Temporary A/c.

Regtl No

2639 (rank)

Name

*S Pte Jones A.*

Pay	R. Alice Working	Total
1-	10	110
Less Allotment		60
Net Rate		50 ✓

Date	DEBITS	£ s d	CREDITS	£ s d
1917	Balance	1 / 1	Balance	22 / 11
	<u>P.M. ADVANCES:</u>		<u>Pay &amp; Net Rate:</u>	5 13 3
	A.B. 64.			
	Acquittance rolls	3 4 6	4/6/16 to 4/6/17 164 days	
	Hospital Advances	2 18 6	20 = \$ 821000	16 17 0
	<u>STOPPAGES:</u>			
	Hospital dys =		4/6/17 to 13/6/17 = 10 days	
	Forfeited Pay dys =		7 = \$ R. Alice	1 0 0
	Miscellaneous			
	Cables			
	<u>P.&amp;R.O. PAYMENTS:</u>		1/1 to 1/1 = days	
	Sundry Bills	4 0 0		23 10 3
	Cash	4 10 3		
		6 13 0		
		15 1 0		

*Cash*

*R. Alice*

Jones, H.

2639

Pay Dept



Classification <sup>13</sup> Draft No 43  
 Form P.K. Liverpool 1877. *Justice's*

1ST NEWFOUNDLAND REGIMENT



Statement of Account of No. 2639 Pte. H. Jones

"H" Company. From 7-7-17 to 18-7-17

(both days inclusive)

Date	Pay Book Col. No.	Particulars	No. of days.	@ per day.	Dr.		Cr.		Dr.			Cr.		
					\$	c.	\$	c.	£	s.	d.	£	s.	d.
		<b>Cr.</b>												
1		Pay ... ..	12	1 00			12 00							
2		Field Allowance ... ..	12	10			1 20							
3		Other Allowances ... ..												
4		Total Pay & Allowances ...					13 20							
5		Converted into Sterling @ \$4.86 2/3									2	14		
6		Balance from previous Pay Book												
7		Total Credits (in £ s. d.) ...									2	14	3	
		<b>Dr.</b>												
8		Forfeited Pay ... ..												
9		Allotments ... ..	12	1 60			7 20							
10														
11		Total Stoppages (in \$ c.) ...					7 20							
12														
		<i>checks</i>									1	9	7	
		This account is, in accordance with information received at the Pay & Record Office to / / and is therefore subject to amendment if, and as may be found necessary.												
18		Total Stoppages (in £ s. d.) ...									1	9	7	
19		Casual Payments ... ..						11 2						
20		1st Payment ... ..						10 0						
21		2nd " ... ..												
22		3rd " ... ..												
23		Total Cash Payments ... ..									1	1	2	
24		Balance from previous Pay Book ...										3	6	
25		Total Stoppages & Cash Payments ...									2	14	3	
26		Final Cash Payment ... ..												
27		Balance (debit) ... ..												
28		" (credit) ... ..												

PAY & RECORD OFFICE,  
 58, VICTORIA STREET,  
 LONDON, S.W.

£ 2 14 3 | 2 14 3

CHECKED.  
*MLH*  
 18.7.17 P.P.O.

*Barry Camp, July 16<sup>th</sup> 1917*

*J. J. ...*  
*J. O. C. ...*

Draft: No 42

Form P/K. *Drawn from Liverpool 18.7.17. Classification B.*

**NEWFOUNDLAND REGIMENT.**

Statement of Account of No. 2639 Pte. Jones H.

Company From 7-17 to 18-7-17



MAILED COPY  
AUG 1917  
Posted

Date	Pay Book Col. No.	Particulars	No. of days.	@ per day.	Dr.		Cr.		Dr.			Cr.		
					\$	c.	\$	c.	£	s.	d.	£	s.	d.
		<b>Cr.</b>												
	1	Pay ... ..	12	1 00			12	00						
	2	Field Allowance ... ..	12	10			1	20						
	3	Other Allowances ... ..												
	4	Total Pay & Allowances ...					13	20						
	5	Converted into Sterling @ \$4.86½										2	14	3
	6	Balance from previous Pay Book												
	7	Total Credits (in £ s. d.) ...										2	14	3
		<b>Dr.</b>												
	8	Forfeited Pay ... ..												
	9	Allotments ... ..	12	60	7	20								
	10													
	11	Total Stoppages (in \$ c.) ...			7	20								
	12	Converted into Sterling @ \$4.86½					1	9	7					
		<i>cheques</i>												
		This account is, in accordance with information received at the Pay & Record Office to / / and is therefore subject to amendment if, and as may be found necessary.												
												1	9	7
July	18	19						11	2					
"	14	20						10	0					
		21												
		22												
		23										1	1	2
		24										3	6	
		25										2	14	3
		26												
		27												
		28												

PAY & RECORD OFFICE,  
58, VICTORIA STREET,  
LONDON, S.W.

July 18  
" 14

Barry Camp, July 16<sup>th</sup> 1917

*Handwritten signature and initials*

CHECKED.  
7.7.17

£ 2 14 3    2 14 3

May 3rd., 1919

#2639 Pte. Heber Jones,

Western Head,

Via Mereton's Hr., N.D.B.

Dear Sir:-

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

Yours truly

Paymaster & O.i/e Rec rds

Captain

10835

DEPARTMENT OF MILITIA.  
WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th. 1919.

A complete reply must be given to every question in this Declaration There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

Christian name... *Heber* ..... 2. Surname... *Jones* .....

3. Rank... *Private* ..... 4. Regt. No... *2639* .....

5. Address in full to which future payments of gratuity are to be forwarded... *Heber Jones Western Head*  
*Via Norton's Harbor* .....

6. Date of enlistment in the Regiment... *April 28<sup>th</sup> 1916* .....

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

8. Relationship of such dependents... *Wife* .....

9. Address in full of such dependents... *Western Head*  
*Via Norton's Harbor* .....

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 Hfld. If so, give dates and particulars of such service... *Was on active service*  
*in France* .....

12. Give total length of time which you served on active service, whether in Hfld. or Overseas... *2 years & 28 days with 120 days*  
..... *1 1/2* .....

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

*Had only one Enlistment*

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.

*Received \$30.00 when discharged*

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

16. Have you, during the present war, served in the Imperial Forces. *with 29 Division*

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.

*Have not received any Gratuity*

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? *No* ... If not give: (a) Date of discharge *May 25 1918* (b) Reason for discharge *Gas Poisoned*

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.

*Served at Cambrai. I was gassed in March 4th 1917*

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.

*Not receiving treatment. Receiving \$20 from Pension Fund*

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: *Heber + Jones*  
 Place of Residence: *Wesley Head via Moton Harbor*  
 Declared before me at: *Moton Harbor*  
 This *38<sup>th</sup>* day of *April* 19*19*.....

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

*J. B. Osmond J.P.*

POST DISCHARGE PAY.				Net amount
Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	due
.....	.....	.....	<i>5 me</i>	<i>500 00</i>
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
Certified correct.			Registrar	<i>7</i>



**THE ROYAL NEWFOUNDLAND REGIMENT**  
**HEADQUARTERS**

*St. John's, Newfoundland,*

May 14th, 1918.

From Officer Commanding Companies,  
Depot.

To Paymaster and Officer i/c Records,  
Dept. of Militia.

#2639 Pte. H. Jones.

The above mentioned man has been recommended for discharge. His account has been squared up to and including today. He has a debit balance as at this date of Seventy Cents (\$0.70) and an allotment current of \$0.60 per day.

*C. S. James Lieut*  
*Dir. Edward*  
*J. R. Sear*

*OK*  
*CCO*



**THE ROYAL NEWFOUNDLAND REGIMENT**  
HEADQUARTERS

711

*St. John's, Newfoundland,*

MAY 13th.1918.

191

To Paymaster & Officer i/c Records.  
Department of Militia.

From O.C.  
Depot.

2639. Pte. H. Jones.

The marginally noted man has been recommended for discharge as permanently unfit by a Medical Board held on May 11th.1918.

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

*[Handwritten initials]*

*Geo. L. Barty* MAJOR  
Commanding Depot,  
The Royal Newfoundland Regiment.  
St. John's, Nfld.



1490

Sirgent Mager oak  
I mean Sir

Will you please send  
me my discharge  
badge if you have  
it if you have  
them come for I  
never thought of  
it when I was  
in St John and if  
there are some like  
you please try to  
send it to me  
So I am yours  
truly Heber

Jones

Martens Harbor  
Walter Head  
Bay Westhadane

October 24th. 1917.

Officer Commanding,  
Headquarters.

Dear Sir,-

Re No. 2639. Pte. H. Jones.

This man has been squared up to and including the  
21st. October, and has an allotment current of 60¢ per  
day.

Yours faithfully,

Capt. & Paymaster.





Richard Rendell

Dear Sir "

I am Righting down to  
ask you if you will  
please hunt up and see  
if there is any money  
down there due to me  
as I only Reaved to  
checks since I came  
up here and please  
let me know about  
my ticket; so if there  
is any money due to me please  
give it to the Bearer so on

yours truly, Mrs Heber  
Jond

---

P.M.

Please issue cheque  
and give beaver certificate

25/6/19

R

This man's sep. Allee  
has been paid from  
date of marriage to date  
of discharge M.H.

SEPARATION ALLOWANCE.

Claimant *Jones Mary (wife)*  
On account of *Herbert Jones* No. *2639* Rank. *Pto*

Decision... *Approved*

Date *June 12/1919*

*W. J. Rindall Lieut. Col.*  
*Dr. Bowley Capt.*

Instructions.....

Allotment of *60<sup>4</sup>* per *day* payable to *Mary Jones*  
his ~~*wife*~~ *Wife* from *1/12/17* to *3/14/18*  
Discontinued on account of

*Cancelled*  
*L. I. Ke*

4285

NOTICE

Royal Newfoundland Regiment  
(Separation Allowance Branch)  
(Information for Board of Review)

WIFE

THIS STATUTORY DECLARATION is to be filled in correctly in every detail, and a complete reply must be given to each question.

Each statement is considered as being made on Oath and the form is to be signed before a Barrister of the Supreme Court, Stipendiary Magistrate of Justice of the Peace and returned to:-

THE PAYMASTER,  
Separation Allowance Branch,  
St. John's, NEWFOUNDLAND.

1. Name in full of soldier. Rank. Reg't or Unit. Reg't No.  
*Herbert Jones. Pte. R.N. Reg. 2639.*

2. Age of soldier. Married or single.  
*25 Married*

3. Name in full of wife.  
*Mary Jones,*

4. Address in full  
*32 George Street, St. John's,*

5. Date of Marriage.  
*January 2/18*

6. Place of Marriage.  
*St. Mary's Church, South Side*

7. Did marriage take place since soldier's enlistment.  
*after enlistment.*

8. Was Commanding Officer's permission obtained? If not, why?  
*I do not know.*

9. If not married, how long have you been dependent on the soldier for your maintenance, and supported regularly by him on a bona fide permanent domestic basis.

10. Were you living with your husband immediately prior to his enlistment? If not, how long have you been separated.  
*No.*

11. Is separation a legal one?  
\_\_\_\_\_



12. If legal, are you in receipt of alimony? If so, state amount.

13. If not legal, how long since your husband contributed to your support? Explain fully.

14. State amount of allotment received by you from soldier monthly. \$18.60

15. From what date have you received allotment. March 1918,

16. Names of children. Age last Birthday. Names of Children. Age last Birthday. No children,

17. Are you already in receipt of Separation Allowance from any Source? If so, state amount. No,

18. Are you in receipt of payment from any Patriotic Fund? If so, how much? Two cheques aggregating \$40.00

19. Have you made a previous claim for Separation Allowance, if so, why? Give particulars. No,

20. Was your husband at the time of his enlistment an employee of the Nfld. Government. No,

21. In what capacity and in what place.

22. Is he in receipt of a salary as such while serving in the Nfld. Regiment. If so, how much? No

I herewith make this solemn declaration conscientiously believing the same to be true and knowing it to be of the same force and effect as if made under Oath and in virtue of the Evidence Act.

Signature of applicant. Mrs. Mary Jones  
Place of residence. 32 George St. St. John's  
John

Declared and subscribed before me  
at..... *St. John's, Nfld* .....

this..... *30th* ..... day of..... *May* ..... 191*9*

Signature of Barrister of Supreme  
Court, Stipendiary Magistrate, Notary  
Public or Justice of the Peace..... *John McCarthy*

This application must be signed by two responsible parties  
one of whom must be a Clergyman, the other a representative of your  
local Patriotic Fund Committee, certifying that to the best of their  
knowledge, after careful enquiry, the above statements are correct.

Signature of Clergyman..... *W. S. Stirling, Rector St. John's Church.*

Signature of member of  
Patriotic Fund Committee..... *J. J. Morris*  
*Judge C. D. Cant*

N.B. Marriage Certificate must accompany this application, and will  
be returned after perusal. If marriage is after enlistment, Commanding  
Officer's permission in writing must be forwarded.

*Cheque to be mailed*

January 4  
1921

Dear Sir

I am sending  
you my Regimental Number  
it is 2639. As you led  
on the Last of your Letter  
if I am Entitled to it  
you will send me one  
Bill of you & did get do  
much to be entitled to it  
Bage But I think I don  
my share for there is  
got so many as done  
so much as that for  
some only been Enlisted  
one year and they get  
it Bage and so more  
money then I did so I  
think I am Entitled to  
some more money if  
I only find out the  
truth so I Hope you

Don't be offended

from what I said

so I am yours  
truly.

Herbert Jones

Western Hill  
via Morton

Harbor

issued with  
Papers not enclosed  
to Perry.

32 John Street  
City  
July 5<sup>th</sup> /19

J. M. Howley, Capt.  
Military Dept.  
City

Dear Sir,

Will you please  
give the bearer the  
remainder of my  
months gratuity money  
for month ending June.  
Spec'd \$26.30  
100

And O Hige

Yours etc  
# 2639. Haber Jones.

HMM/LM.

January 17, 1921

Herbert Jones,  
Western Head, via Moreton's Mr.

Dear Sir:

With reference to  
your letter of January 4th. please be advised that as  
you received a Silver Badge, you are not entitled to a  
Class II. Badge.

For your information  
I may state that Class II Badges are only issued to men  
who were discharged from the Service as medically fit.

Yours truly,

Capt.  
For Paymaster.

March 30<sup>th</sup>  
1919

4589

Dear Sir

I am Righting to ask you why I  
~~am not~~ Receiving my money till Sir I  
 Received only one lot of money sence my  
 Husband been discharged and he has been discharge  
 Ever sence Last may and so I cant see  
 the Reason why I cannot get some money  
 so well as other Salders Wives and you  
 see my husband is one rebel to work and  
 he only gets twenty dollars a month to support  
 me and myself ~~and~~ so I kindly ask  
 you if you can do some thing for  
 me so I Remain yours truly

Mrs Heber Jones

Western Head

Via Martins Har  
of D Bay

267A

Mrs J A Bennet  
St Johns  
77 to D

39 John St  
St John

Quarter Master Sergeant

Dear Sirs have  
you found any trace of  
my check. If you should  
like you to find it to day  
as I am in need of it ~~of~~  
~~it~~ so please give it  
to ~~the~~ the Bearer.

Marked  
out  
yours truly  
Pet H Jones  
Go to 639



2639

April 17, 1919

Mrs. Heber Jones,  
Western Hr., via Moreton's Hr.

Dear Madam:

With reference to your letter of March 19th. I enclose form of claim for War Service Gratuity, which kindly have your husband complete and return, so that his claim may be considered.

Yours truly,

Lieut.  
For Paymaster.



No. ....



1st NEWFOUNDLAND REGIMENT

VOUCHER

In Acct. with #2639 Pte. Harry Jones

Voucher No. 1029.

Cheque No. 1029.

Reg'l A/c No. Name

C.B. Folio No.

Date	Req'n No.	Invoice No.	Particulars.	Amount
Aug. 6	30		Pay on a/c	\$15
				\$15 00

CERTIFICATON

Dissect<sup>n</sup> Sheet No. ....

Recap. Sheet No. 30

Checked by *[Signature]*

*[Signature: M. Howley]*  
PAYMASTER

RECEIPT

August 6th, 1917.

**Received** from the 1st. NEWFOUNDLAND REGIMENT the sum of  
Fifteen Dollars  
 and \_\_\_\_\_ Cents in Payment as above stated.

August 1917.  
 \$ 15.00 [Sig.] *Pte Harry Jones*

246

Nov. 26 <sup>th</sup> / 19/23

2639

And he will not see his  
People in want and misery  
For I am a Christian  
Woman and I know for  
myself it is not  
fear how they are treated

So I am very thankful to  
you Lieut James for sending  
for my husbands address

So I am your  
Very truly Private Helens  
Jones Wife

Yours H Jones

Western Head  
Via Mortons Har  
H D B

Lieut. H Jones  
St Johns

Dear Sir  
your letter of the 23<sup>rd</sup> is  
just to hand asking my  
Mother in Law for my  
Husbands address Well  
Sir it is Western Head  
Via Mortons Harbour as we  
are living here but in  
poor circumstances as  
we have not a cent in the  
world to call our own  
nor a bit of food  
I am living to day my  
self and little children  
on my Widows Mother in Law

Put for all the Brave  
 Boys thought don't the  
 same and there are a  
 good many more who  
 are getting a Pension  
 and a good many more  
 not getting any more for  
 one is not getting any  
 although they see  
 he was sound enough  
 But the time is coming  
 probably not far behind  
 when they will find  
 out there is some thing  
 wrong with him But never  
 mind the good Lord has  
 all things he is above  
 all saying this only for my Husband

so Mr James you can get  
 our state and my poor  
 husband had to go in  
 on Newfoundland Island  
 to seek for some in-  
 employment at contract  
 work But on while to  
 do so and don't you  
 think Lieut James it  
 is a great shame the  
 way our poor boys are  
 treated after shedding their  
 precious blood for King  
 and country God Bless him  
 and to have the lives of  
 others not because I am

St. John's, MAY 30 1918  
(Date)

1st Newfoundland Regiment  
BILLETING ACCOUNT

To Mrs W. Peddle  
32 John Street

Billeting soldiers as undermentioned

from May 2<sup>nd</sup> / 18 to May 20<sup>th</sup> / 18

2639. Pte. H. Jones,	16 50
2 weeks 5 days	

Certified correct for \$ 16.50



R.J

Dr. Dicks Lieut  
Billeting Officer

Mrs William Peddle

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

7639

PAY VOUCHER.

\$92<sup>60</sup>/<sub>100</sub>

Oct 23<sup>rd</sup> 1917

Received from the First Newfoundland Regiment

the sum of Ninety two <sup>60</sup>/<sub>100</sub> Dollars.

on account  
balance of Pay. to 21/10/17

Herbert <sup>Lie</sup> Jones  
Private

Regtl. No. 2139 Rank Private

Ch. No. <u>527</u>	Initials. <u>JH</u>
Pay Ledger <u>190</u>	Initials. <u>CCO</u>
Gen. Ledger <u>Pay</u>	Initials. <u>JH</u>



No. 2639

Rank Pte.

Name A. Jones



DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$25.00

May 12<sup>th</sup> 1918

Received from the First Newfoundland Regiment  
the sum of Twenty five Dollars.  
00  
balance of Pay.

Pte. J. X. Jones  
mark

Ch. No. <u>6721</u>	Initials <u>ew</u>
Pay Ledger <u>[Signature]</u>	Initials <u>[Signature]</u>
Gen. Ledger <u>[Signature]</u>	Initials <u>[Signature]</u>

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

[Signature]

No. 2639

Rank

Pte

Name

A Jones

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$34.<sup>20</sup>

May 25<sup>th</sup> 1918

Received from the First Newfoundland Regiment  
the sum of Thirty four <sup>20</sup> Dollars.  
on account of Pay.  
~~balance~~

Subscribed for  
mark, *[Signature]*

Ch. No.	7005	Initials	.....
Pay Ledger	199	Initials	<i>[Signature]</i>
Gen. Ledger		Initials	.....

Regtl. No. .... Rank .....

Witness *[Signature]* SSM

No. 2639

Rank Pte

Name A. Jones.

COPY.

Casualty Form Active Service.



Regiment or Corps 2<sup>d</sup> Newfoundland  
 Regimental No. 2639 Rank Plt Name Jones Peter  
 Enlisted (a) 28/4/16 Terms of Service (a) War Service reckons from (a) 28/4/16  
 Date of promotion to } Date of appointment } Numerical position on }  
 present rank } to lance rank } roll of N.C.Os. }  
 Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) \_\_\_\_\_

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 38, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked	Southampton	11.10.16	
		Disembarked	Rouen	12.10.16	
		Joined Battalion	France	22.10.16	
		with No	"	23.1.17	
		Wounded in action	France	1/3/17	8213
		Stand Inv. to England ex 5 <sup>th</sup> Hosp	Rouen	6/3/17	103083

*Sqn Imbucked Cap for eye for Reg. Infantry G.H.Q. 3d Ech*

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. (P.T.O.)

## 2/1st NEWFOUNDLAND REGIMENT.

—————  
 Pte James H.

No. 2639 is unlikely to be fit for Service with the  
 Expeditionary Force for 6 (six) months, on account of

Gas Poisoning

.....

.....

.....

.....

.....

I recommend that he be posted to the Depôt at St. John's,  
 Newfoundland.

J. S. Prentice M.O.,  
 Capt. Rowe  
 I/C. 2/1st Newfoundland Regt.

Barry Camp

~~16-7-17~~  
 16-7-17

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

# MEDICAL HISTORY

2770

Surname Jones OF Christian Name Heber

Table I.—GENERAL TABLE.



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

	SPECIAL RESERVE.		REGULAR ARMY	
Examined . . . . .	on 28 day of April 1916	on _____ day of _____ 191	at St. Johns	at _____
Declared Age . . . . .	21 years 10 days	_____ years _____ days		
Trade or Occupation . . . . .	Fisherman			
Height . . . . .	5 feet 6 1/2 inches	_____ feet _____ inches		
Weight . . . . .	150 lbs.	_____ lbs.		
Chest Measurement {	Girth when fully expanded . . . . .	40 inches	_____ inches	_____ inches
	Range of expansion . . . . .	3 inches	_____ inches	_____ inches
Physical Development . . . . .				

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

When Vaccinated . . . . .				
Vision . . . . .	R.E.—V= 616	R.E.—V=		
	L.E.—V= 619	L.E.—V=		

(a) Marks indicating congenital peculiarities or previous disease	(a)	(a)		
	(b) Slight defects but not sufficient to Cause Rejection	(b)		



Approved by (Signature) Samuel Paterson (Rank) \_\_\_\_\_ Medical Officer.

Enlisted . . . . .	at St. Johns	at _____
	on 28 day of April 1916	on _____ day of _____ 191

	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment . . . . .	1st Nfld Reg.	2639		
Transferred to . . . . .				

Became non-effective by . . . . .	on _____ day of _____ 191	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 syphilis, admission of treatment
	Day	Month	Year	Day	Month	Year			
3RD LONDON GENERAL HOSPITAL WANDSWORTH.	4	3	17	4	6	17	Gas poisoning Shell gas	89	



list in case of Warrant Officers treated in quarters.

on the cause, nature or treatment of the case likely to be of interest or of further use. In cases of  
 and re-admissions to hospital will be shown. The subsequent progress, including particulars  
 ment out of hospital, transfers, &c., will be given in the special syphilis case sheet.

Signature of Medical Officer

Gaseed as France 1.3.17. Residual  
 Cough. No T. B in Sputum.  
 Furlough

G. C. Hall  
 Capt. Amb.



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.	2639	Army Rank	Private
Name	Seber Jones		
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)			
Corps	The Royal Newfoundland Regt.		
Battalion, Battery, Company, Depot, &c.			
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)			
Date of discharge	May 25 <sup>th</sup> 1918		
Place of discharge	St. John's, Nfld.		
1. Description at the time of discharge.			
Age	22 years	11 months	Descriptive marks.
Height	5 feet	7 <sup>1</sup> / <sub>4</sub> inches	
Chest measurement	girth when fully expanded _____ ins.		
	range of expansion _____ ins.		
Complexion	fair		
Eyes	brown		
Hair	dark		
Trade	fisherman		
Intended place of residence	Moreton's Str.		
(To be given as fully as practicable)	N.A.D.		
(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)			
2. The above-named man is discharged in consequence of <u>being no longer physically fit for war service</u>			
(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)			
3. Military character:—			
4. Character awarded in accordance with King's Regulations:—			
_____			
_____			
_____			
_____			
_____			
_____			
_____			
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.			
Initials of Commanding Officer.			
Army Form B. 2088 has been issued to*			

To be filled in on the soldier quitting the Colours.

\* Strike out if not applicable.

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 \_\_\_\_\_ Battn. \_\_\_\_\_ 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 Nfld. (Signature of Soldier) Robert Jones
(Date) May 25th 1918 (Signature of Witness) R. Jones

(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.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

\_\_\_\_\_

- )

— Nil —

*Certified true copy.*  
**Squadron, Troop, Battery and Company Conduct Sheet.**

Army Form B. 121.

Forms  
B 121.  
39.

Regiment of *The Royal Newfoundland Regiment*

Number of Sheet *First*  
 Signature of O. C. Company *(sgt) A. E. Bernard*  
*captain.*

Regimental Number and Name		Enlistment	Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>Jones H.</i>	Age on <i>21</i> years <i>10</i> months	<i>Fisherman</i>	
2639		Place and Date of Enlistment <i>St John's</i>	Religion	
Joined _____ Date _____		<i>April 28, 1916</i>	<i>Salvation Army</i>	
Joined _____ Date _____		Period of <i>with Colours 2 1/2</i> years.	Place of Birth	
Joined _____ Date _____		<i>with Reserve 5 1/2</i> years.	<i>Newfoundland</i>	

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<i>Racecourse, Headquarters</i>	<i>14-9-16</i>	<i>Pte</i>		<i>Attending sick parade without a cause</i>	<i>Co. Sgt. m. Lower</i>	<i>7 days l. B.</i>		<i>capt. Bernard</i>	<i>(sgt) E. B.</i>
	<i>19-11-18</i>	<i>"</i>		<i>Disobeying an order</i>	<i>Three issues</i>	<i>forfeits 3 days pay</i>	<i>25th April</i>	<i>Major MacPherson</i>	<i>CSJ.</i>
				<i>St John's Medically Unfit 25 5/8.</i>					

To be carried over

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.


W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.  
 (695) W5017/2124 1000m 6/15ss 83 5G

Forms  
B. 121.  
29.

Regiment of 1<sup>st</sup> Newfoundland

Number of Sheet Just

Signature of O. C. Company Althorn

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay		
No.	Name	Age on	21 years 10 months	Seaman			
Joined	Date	Place and Date of Enlistment		Religion			
Joined	Date	St. Johns April 28 1916		Salvation Army			
Joined	Date	Period of		Place of Birth			
Joined	Date	with Colours		years.	Newfoundland		
Joined	Date	with Reserve		years.			

Place	Date of Offence	Rank	Cases of Drunkenness.	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
Racecourse	14.9.16	Pte		Attending sick parade without a cause	Coop M. Power	7 days C.C.		Capt. Burnard	E.C.B.
To be carried over									

Army Form B. 121.









**NO EXTENSION OF THIS FURLOUGH IS PERMITTED.**

*N.B.—This Form is to be used for N.C.O.'s and men granted furlough from Hospitals during the period of the War*

3<sup>RD</sup> LONDON GENERAL HOSPITAL  
WANDSWORTH.

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

Hospital at \_\_\_\_\_

**FURLOUGH.**

No. 2639 (Rank)

P/6

(Name)

Jones H.

Unit \_\_\_\_\_

1st hhd Contingent.

has been granted a furlough from - 4 JUN 1917

to tattoo on 13 JUN 1917 13 JUN 1917 and leave to proceed to \_\_\_\_\_

H. Jagan

Capt. R.A.M. (11)

No advance is to be made to him on any account without previous reference to the Paymaster at 58 Victoria St.

(Station) WANDSWORTH

Registrar, R.A.M. (11)

(Date) - 4 JUN 1917

I/c \_\_\_\_\_

3<sup>RD</sup> London General Hospital, Wandsworth

**Casualty Form—Active Service.**

Regimental Number **C.R. 2639**

Regiment or Corps **2/1 Newfound Land Regt.**  
 Rank **Private** Surname **Jones** Christian Name **Heber**  
 Religion **S.A.** Age on Enlistment **21** years **10** months.  
 Enlisted (a) **28/4/16** Terms of Service (a) **10 Yrs** Service reckons from (a) \_\_\_\_\_  
 Date of promotion to present rank \_\_\_\_\_ Date of appointment to lance rank \_\_\_\_\_  
 Extended { \_\_\_\_\_ } Re-engaged { \_\_\_\_\_ } Qualification (b) \_\_\_\_\_  
 or Corps Trade and Rate \_\_\_\_\_ **MAR 13 1917**  
 \_\_\_\_\_ Signature of Officer i/c Records.

Report		Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
			Embarked Southampton		11 OCT 1916
			Disembarked ROUEN		12 OCT 1916
		<b>Joined Battalion</b>		<b>22 OCT 1916</b>	
			With BATT.	26. I. 17	
	<b>G.C. Unit</b>	<b>Wounded in Action</b>	France	1/3/17	13213.
	<b>MS. St. David</b>		<b>Invalided to England via 5<sup>th</sup> Hosp. Rouen</b>	<b>6/3/17</b>	<b>W 3083</b>
			<b>John Birchall</b>	<b>CAPTAIN.</b>	
			<b>for Officer i/c No. 1 Regular Infantry Section</b>		
			<b>General Headquarters, 3rd Echelon.</b>		

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

[P.T.O.]

DEPARTMENT OF VETERANS AFFAIRS

Dept. of Veterans Affairs  
War Service Records

Ottawa Ont.

To Copy for H.O. file

Date Feb 24/64

Attention of

FEB 25 1964

NAME JONES, Heber

Referred to

SERVICE

2639 WW1

C.P.C. No. 261157

NAVY

Charged to

NUMBER

W.V.A. No. 50631

ARMY

R.C.A.F.

WFLP  
REG

The DEPARTMENT has received information from

Medical Certificate of death; 20, Fitzmaurice Rd Gander Feb 14, /64

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death January 4th, 1964.

Cause of Death

Place of Death Gander.

Name and Address of next of kin (if known)

Copies to: W.S.R.  
V. I.  
~~BAV~~  
~~BO~~  
H.O.

Destroy form if advice of death already received.

*J. C. Brady*  
for  
Chief, Central Registry