



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 5012 Name Ananias King Corps C.F.R.

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

- |  |                                    |
|--|------------------------------------|
| 1. What is your name? .....  | 1. <u>Ananias King</u>             |
| 2. What is your full Address? .....  | 2. <u>Newton's Avenue</u>          |
| 3. Are you a British Subject? .....  | 3. <u>yes</u>                      |
| 4. What is your age? .....   | 4. <u>27</u> Year <u>11</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>yes</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>                     |

I, Ananias King 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.

Ananias King SIGNATURE OF RECRUIT.  
Joseph Pittman Signature of Witness.

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

I, Ananias King 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 18 day of May 1915.

Signature of Attesting Officer Edwards 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 rank.

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

Date ..... 1915 } Approving Officer.  
Place .....

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

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



# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Archie King  
 Apparent age 21 years      months. Height 5 feet 6 1/2 inches  
 Chest Measurement { Girth when fully expanded 35 inches  
 Range of expansion 3 inches  
 Distinctive marks     

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Shephilia King New  
Paradise 2 B Relationship Father

### Particulars as to Marriage

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

### Particulars as to Children

| Christian Names | Date and Place of Birth |
|-----------------|-------------------------|
|                 |                         |

## STATEMENT OF THE SERVICES

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





# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 5012 Name Ananias King ~~Case~~ Cdr.

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

- |  |  |
|--|--|
| 1. What is your name? .....  | 1. <u>Ananias King</u>                         |
| 2. What is your full Address? .....  | 2. <u>New Bonaventure</u><br><u>Timber Bay</u> |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u>                                  |
| 4. What is your age? .....   | 4. <u>24</u> Years <u>0</u> Months             |
| 5. What is your Trade or Calling? .....  | 5. <u>Fireman</u>                              |
| 6. Are you Married? .....  | 6. <u>No</u>                                   |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? .....                             | 7. <u>No</u>                                   |
| 8. Are you willing to be vaccinated or re-vaccinated? .....  | 8. <u>Yes</u>                                  |
| 9. Are you willing to be enlisted for General Service? .....   | 9. <u>Yes</u>                                  |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? .....                                     | 10. ) Name .....                               |
|  | ) Corps .....                                  |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... | 11. <u>Yes</u>                                 |

I, Ananias King 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.

Ananias King .....SIGNATURE OF RECRUIT.  
Joseph Pittman .....Signature of Witness.

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

I, Ananias King 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 13 day of May 1918  
Signature of Attesting Officer Charles Keith

### †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

5012

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

Name Archie Rmg  
 Apparent age 21 years        months. Height 5 feet 6 1/2 inches  
 Chest Measurement { Girth when fully expanded 35 inches  
                                   Range of expansion 3 inches  
 Distinctive marks       

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Joseph Rmg New  
Marquette 2 B. | Relationship Father

### Particulars as to Marriage

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

### Particulars as to Children

| Christian Names | Date and Place of Birth |
|-----------------|-------------------------|
|                 |                         |

## STATEMENT OF THE SERVICES

| Corps in which served  | Rgt. or L'epot | Promotion, Reductions, Casualties, &c. | Army Rank | Dates | Service not allowed to reckon for fixing the rate of pension |      | Service in Reserve not allowed to reckon towards G. C. Pay |      | Signature of Officers certifying correctness of entries |
|--|----------------|--|-----------|-------|--|------|--|------|---|
|  |                |  |           |       | Years  | Days | Years  | Days |   |
| Service towards limited engagement reckons from <u>13-5-18</u> |                |  |           |       |  |      |  |      |   |
| Joined at <u>St. Louis</u> on <u>13-1918</u>                   |                |  |           |       |  |      |  |      |   |
| <u>Discharged St. Louis Jan 12/1919</u>                        |                |  |           |       |  |      |  |      |   |
| <u>Admitted to S.D. Hospital Memphis 11-7-18</u>               |                |  |           |       |  |      |  |      |   |
| <u>Reassigned from W.D. to Seavoyers 10-8-1918</u>             |                |  |           |       |  |      |  |      |   |
| <u>Reassigned from Seavoyers 14-10-18</u>                      |                |  |           |       |  |      |  |      |   |
| <u>Remobilization St. Louis 12-1919</u>                        |                |  |           |       |  |      |  |      |   |
| Total Service forfeited as above.....                          |                |  |           |       |  |      |  |      |   |

Total Service towards Engagement to 12-1-1919 [date of discharge] 244 years        days  
 " " Pensions " " " " " " " " " " " "



C.R. 5-012

Extract of Daily Orders Part II, Depot St. John's, dated  
Jan. 14th 1919.

Discharge confirmed on demobilization.

The discharge of the undernoted man on demobilization  
has been confirmed by the Officer i/c Records on noted date

5012 Pte. Ananias King.

Discharged 112-1-19



C.R. 5012

Extract from Daily Orders Part 11 Unit The Royal Wfld.  
Regt., St. John's, Dec.16th, 1918.

The undernoted man discharges on Demobilization ~~has~~ been approved by G.O. Discharge Depot from noted date. he is removed from Dept strength and transferred to Discharge Depot pending confirmation by Officer i/c Records.

5012 Pte. A. King.

15-12-18.



C.R. 5012

Extract from Daily Orders, Part 11, Unit: The Royal Newfoundland  
Regiment, dated October 16th 1918.

Hospital.

5012 Pte. A. King.

Discharged from Donovans 14/10/18.

C.R. 5012

Extract from Daily Order part 11, from Unit The Royal  
Nfld. Regt. St. John's, dated August 12, 1918.

~~#501~~ #5021 Pte. A. King.  
5012

Discharged from M.I.D. Hospital and admitted to Donovan's  
Convalescent Hospital 10-8-18



**NEWFOUNDLAND POSTAL TELEGRAPHS.**
**Gable Connection with all the World**
**C.R. 5012**
**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 **St. John's**

| Line Number | Rcd | By | Sent | by | Check |
|-------------|-----|----|------|----|-------|
|             |     |    |      |    |       |

*Dated July 20, 1918.*

**To Mrs. Theophilus King,  
Bonaventure.**

**I beg to inform you that No. 5012 Pte. Ananias King  
at Military Hospital, St. John's, suffering from Mumps slight  
condition very much improved.**

**Lieut. Col. W. F. Rendell,**
**Chief Staff Officer.**
**FOR TYPEWRITER**



# NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

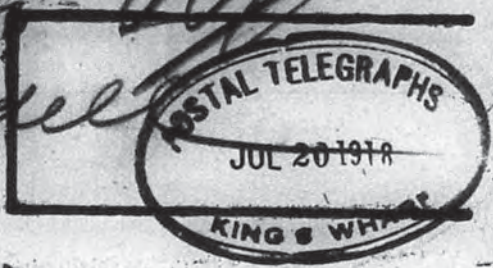
Line No. 37

From Bonaventure

Place from

To

Major W. F. Rendell



*Please advise immediately  
if 5012 King Sick or  
not*

*Mrs Theophilus King*

*Military Hospital  
suffering Munt.  
Cndman*



Extract from Daily Orders part 11, from Unit The Royal  
Nfld. Regt. St. John's, dated May 14, 1918.

#5012 Pte. A. King.

Attested for General Service with the Royal Nfld. Regt.  
from 13.5.18



King, A

5012

Aug - Sept.



January 12th., 1919.

#5012 Pte. Ananias King,

New Bonaventure.

Dear Sir:-

Please find enclosed "Discharge  
Certificate No.430."

Yours faithfully,

Captain,  
Paymaster & O.i/c Records

Enc'l 1.



# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 5012 Rank Plt Name Ananias King  
 Intended place of residence New Bonaventure NB

2. Occupation Fisherman  
 Classification of soldier C Medical Category A.U.

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

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

Place St John's Date DEC 14 1918  
 Comanding Discharge Depot  
 The Royal Newfoundland Regiment

## CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date St John's Dec 14<sup>th</sup> 1918  
 Signature of soldier Ananias King  
 Signature of witness ACapt

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

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

Place and Date St John's 13-12-18  
 Signature of soldier Ananias King  
 Signature of witness C. Peters Lic

## STATEMENT OF SERVICE

7. Enlisted for service 13-5-18 No of days on Military  
 Discharged from service 15-12-18 plus 28 day Service 245

## APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge, The Royal Newfoundland Regiment, twenty-eight days from date.

Place ST. JOHN'S Date DEC 15 1918  
 Officer in Charge  
 The Royal Newfoundland Regiment

## CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place St John's Nfld Date January 12/1919  
 Officer in Charge  
 The Royal Newfoundland Regiment

19  
20  
21  
22  
23  
24  
25



# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 5012 Rank Pte Name King - Ananas  
 Date of Enlistment 13518 Address New Bonaventure District County  
 Occupation Fisherman Classification for Discharge C Medical Category AE  
 Recommendation S.M.B. .... Disability Rating .....

Passed to Demobilization Officer with following documents:—

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

Date 12.12.18

W. Bailey Capt  
 O.C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Ananas King

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied .....

Joseph H. A. Snowling

Date 13-12-18

O i/c. Re-clothing.



3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 254 to his home at New Bouaventure and Release Certificate No. 335 issued.

Date 14.12.18 ..... C. D. Dicko Capt.  
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 12-1-19.....

Date 14.12.18 ..... W. H. M. Capt.  
Depot Paymaster.

Discharge approved for 15.12.18.....

Forwarded with following documents to O.C Discharge Depot.

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

Date 14.12.18 ..... C. D. Dicko Capt.  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—  
Officer i/c Records.  
Board of Pension Commissioners.  
with following additional documents.

Date DEC 15 1918 ..... R. H. East Capt.  
O. C. Discharge Depot.

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

Date Dec 17/1918 .....



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

# MEDICAL HISTORY

OF

Surname

*Seig*

Christian Name

*Ananias*

Table I.—GENERAL TABLE

Birthplace:—Parish

*New Bonaventure 213 County*

*Newfoundland*

|   | SPECIAL RESERVE                 |                                   | REGULAR ARMY |                 |
|---|---------------------------------|-----------------------------------|--------------|-----------------|
|   | on                              | day of                            | on           | day of          |
| Examined .....  | on                              | 13 day of <i>May</i>              | on           | day of          |
|   | at                              | <i>St John's</i>                  | at           |                 |
| Declared Age .....  |                                 | <i>21</i> years                   |              | years           |
| Trade or Occupation .....   |                                 | <i>Fisherman</i>                  |              |                 |
| Height .....  |                                 | <i>5</i> feet <i>6 1/2</i> inches |              | feet inches     |
| Weight .....  |                                 | <i>134</i> lbs.                   |              | lbs.            |
| Chest Measurement {   | Girth when fully expanded ..... | <i>35</i> inches                  |              | inches          |
|   | Range of Expansion .....        | <i>3</i> inches                   |              | inches          |
| Physical Development .....  |                                 |                                   |              |                 |
| Vaccination Marks {   | Arm .....                       | Right                             | Left         | Right           |
|   | Number .....                    |                                   |              |                 |
| When Vaccinated .....   |                                 |                                   |              |                 |
| Vision .....  | R.E.—V=                         | <i>6/10</i>                       | R.E.—V=      |                 |
|   | L.E.—V=                         | <i>6/10</i>                       | L.E.—V=      |                 |
| (a) Marks indicating congenital peculiarities or previous disease ..... | (a)                             |                                   | (a)          |                 |
| (b) Slight defects but not sufficient to cause rejection .....          | (b)                             |                                   | (b)          |                 |
| Approved by (Signature)   | <i>L. Munro Paterson</i>        |                                   |              |                 |
| (Rank)  | <i>Major</i>                    | Medical Officer                   |              | Medical Officer |
| Enlisted .....  | at                              | <i>St John's</i>                  | at           |                 |
|   | on                              | <i>13</i> day of <i>May</i>       | on           | day of          |
| Joined on Enlistment .....  | Corps                           | <i>5012</i>                       | Corps        | Regtl. No.      |
|   |                                 | <i>The Royal Nfld. Regt</i>       |              |                 |
| Transferred to .....  |                                 |                                   |              |                 |
| Became non-effective by .....   | on                              | day of                            | on           | day of          |
| (Signature)   |                                 |                                   |              |                 |
| (Rank)  |                                 |                                   |              |                 |



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

| Name of Hospital         | Admitted to Hospital |          |           | Discharged from Hospital |           |           | Disease               | Number Days in Hospital | Remarks bearing on Syphilis, admissions of treatment |
|--------------------------|----------------------|----------|-----------|--------------------------|-----------|-----------|-----------------------|-------------------------|--|
|                          | Day                  | Month    | Year      | Day                      | Month     | Year      |                       |                         |  |
| <i>M. I. D. Hospital</i> | <i>12</i>            | <i>7</i> | <i>18</i> | <i>10</i>                | <i>8</i>  | <i>18</i> | <i>Mumps</i>          | <i>29</i>               |  |
| <i>Donorhaus</i>         | <i>10</i>            | <i>8</i> | <i>18</i> | <i>15</i>                | <i>10</i> | <i>18</i> | <i>Conjunctivitis</i> | <i>67</i>               |  |



Table III - Board of Health, Vancouver, B.C. - Report on the Cause, Nature and Treatment of the Case likely to be of Interest or of Future Use. In case of and re-admissions to hospitals will be shown. The subsequent progress, including particulars sent out of hospital, transfers, etc., will be given in the special syphilis case sheet.

| Cause, nature or treatment of the case likely to be of interest or of future use. In case of and re-admissions to hospitals 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                        |
|--|---|
|  | <p><i>Watson m.g.</i></p> <p><i>Watson m.g.</i></p> |









## 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. & 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 *King, Ananias*  
 Regiment from which discharged *1st. Newfoundland*  
 Regimental number *5112*  
 Intended address *New Bonaventura, Trinity Bay*

Height on discharge Feet  
 Color of hair on discharge *Light Brown*  
 Complexion *Fair*  
 Color of eyes *Brown*  
 Descriptive Marks —  
 Figure on discharge *(Slight)*  
 Christian name of Father *Theophilus*  
 Christian name of Mother *Mary*  
 Wife's maiden name in full —  
 Date and place of marriage —  
 Christian names of children —  
 Place and date of soldier's birth *New Bonaventura, 12/3/97*  
 Nature and locality of civil employment required *fisherman, Labrador*

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) *Ananias King*

(Rank) *Pvt*

Station *St Johns*

Date *10/12/18*

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

*W. H. Woods* *Commanding A. S. C.*  
 Medical Officer in Hospital,  
 Unit, or Command Depot.

Station *Princess Rink*

Date *11/12/18*



# Civil Re-establishment Committee.



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

*To work at Fishing*

*Ananias King*

Signature of Man.

*Orville Thompson*

Signature of the Vocational Officer or his Representative.

Reg. No. *5012*

Place *St. John's*

Date *12/12/18* 191



*Trinity*

**The Royal Newfoundland Regiment**

Class for Demobilization:— *6*

*400 A*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date **NOV 28 1918**

Regimental No. *5012*

Name *King, Ananias* (P.H.)

Address *New Bonaventure, Trinity Bay*

Present Medical Category *A II*

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

Members of Board { *R.H. Lat* .....  
O.C. Discharge Depot.  
*Pateron* .....  
Senior Medical Officer  
*S.W. Curden* .....  
M. O. Depot















# ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at Head quarters May 13/16

1. Name Ananias King Age (a) Declared 21  
(b) Apparent

2. Do you know of anything wrong with you? bronchitis

What severe illnesses have you had? none

5012

3. Height 5 ft 6 1/2 in Weight 134 lbs

4. Eyesight (a) Left 6/10 (b) Right 6/10

5. Physical Defects (Examine after strenuous exercise)

6. Examination of Lungs ~  
Measurement (a) Expiration 32 (b) Inspiration 35

7. Examination of Heart ~

8. Examination of Urine ✓

9. Examination of Mouth—(Defective Speech)  
Teeth  
Throat  
Nose  
Ears—(Otorrhea)  
(Deafness) ~

10. Have you been successfully vaccinated, and when? no

11. Name and address of next of kin Father Stephen Bonaventure 2B

REMARKS--

A 11

St. W. Burden  
Archibald

Medical Examiners.



# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39.

Regiment of

*Royal Newfoundland*

Number of Sheet

*one*

Signature of O. C. Company

*P. B. Dicks Lieut.*

| Regimental Number and Name |                          | Enlistment   | Trade                        | Good Conduct Badges, Service pay or proficiency pay |
|----------------------------|--------------------------|--|------------------------------|---|
| No.                        | <i>5012 King Ammiral</i> | Age on <i>21</i> years <i>0</i> months                                     | Trade <i>Fisherman</i>       |   |
| Joined                     | Date                     | Place and Date of Enlistment   | Religion                     |   |
| Joined                     | Date                     | <i>St Johns 13.5.18</i>  | <i>CofS.</i>                 |   |
| Joined                     | Date                     | Period of } with Colours <i>24</i> years.<br>with Reserve <i>36</i> years. | Place of Birth               |   |
| Joined                     | Date                     |  | <i>New Bonaventure I. B.</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>Demobilized John's</i> |                    | <i>12 / 19</i>     |   |                 |         |

To be carried over



# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 5011 Rank Pte Name King - Ananias  
 Date of Enlistment 13-5-18 Address New Bonaventure District St. John's  
 Occupation Fisherman Classification for Discharge C Medical Category AE  
 Recommendation S.M.B. [Signature] Disability Rating 21-11-14  
 Passed to Demobilization Officer with following documents:—

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

Date 12-12-18

[Signature] Capt  
 O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

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

Ananias King

Particulars passed to Vocational Officer for information and action.

Date .....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

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

Joseph H. Snow  
 O i/c. Re-clothing.

Date 13-12-18

DEC 19 1918



3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 254 to his home at New Bonaventure and Release Certificate No. 335 issued.

Date 14.12.18 ..... C. Dicks Capt.  
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 12-1-19

Date 11-12-18 ..... Stowley Capt.  
Depot Paymaster.

Discharge approved for 15.12.18 .....

Forwarded with following documents to O.C Discharge Depot.

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

Date 14.12.18 ..... C. Dicks Capt.  
Demobilization Officer.

APPROVED. W-

Documents as above forwarded to:—

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

Date DEC 15 1918 ..... R. H. East Capt.  
O. C. Discharge Depot.

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

Date Dec. 17/1918 ..... Mr. Stowley Capt.  
O.C. P. 1-21-81



Reg. No. 5712 Rank Pte Name King, Ananias  
Attested 13-5-18 Address New Bonaventure B.B.  
Allotment 70 Allotee M<sup>r</sup> & Theophilus King (Mother)  
Date of Allotment 11/7/18 Returned from Overseas \_\_\_\_\_  
Embarked for Overseas \_\_\_\_\_ Cause \_\_\_\_\_

15-5-18 Vac 13<sup>6</sup>/<sub>8</sub>, & Spec. no disc 20/6/18

G.L. 28-5-18 to 8-6-18 R.L. 10<sup>6</sup>/<sub>8</sub>

29<sup>6</sup>/<sub>8</sub> Leave to the parent to see his mother Au. Oc.

30<sup>6</sup>/<sub>8</sub> - 4<sup>7</sup>/<sub>8</sub> Special leave 4-7-18 R.L.

11/7/18 Admitted M.F.O. Hos (Hamps)

10-8-18 Discharged from M.F.O. to Bonaventure.

14-10-18 Discharged from Bonaventure

12 11 18 **PASSED TO DEMOBILIZATION OFFICER**

15 12 18 **DISCHARGE APPROVED ON DEMOBILISATION**