



4 THE ROYAL NEWFOUNDLAND REGIMENT /

ATTESTATION OF

No. 4647 Name Ernest Kitchen Corps C/8

Questions to be put to the Recruit before Enlistment.

1. What is your name? Ernest Kitchen
2. What is your full Address? } Av. Grand
3. Are you a British Subject? } yes
4. What is your age? } 22 Years Months
5. What is your Trade or Calling? } Fireman
6. Are you Married? } no
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } no
8. Are you willing to be vaccinated or re-vaccinated? } yes
9. Are you willing to be enlisted for General Service? } 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? } yes

I, Ernest Kitchen 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.

Ernest Kitchen SIGNATURE OF RECRUIT.

J. J. [unclear] Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Ernest Kitchen 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 23 day of April 1915.

Signature of Attesting Officer [Signature]

†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 April 23 1915 }
Place St. John's } 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)



4 THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4647 Name Earnest Kitchen Corps C of B

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Earnest Kitchen
2. What is your full Address? 2. St. Cross
3. Are you a British Subject? 3. yes
4. What is your age? 4. 22 Years Months
5. What is your Trade or Calling? 5. Seaman
6. Are you Married? 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7. no
8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
9. Are you willing to be enlisted for General Service? 9. Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? 10. (Name)
(Corps)
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? 11. yes

I, Earnest Kitchen 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.

Earnest Kitchen SIGNATURE OF RECRUIT.
J. S. Raymond Signature of Witness.

Earnest Kitchen 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 23 day of April 1918.

Signature of Attesting Officer J. S. Raymond

†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 April 23 1918
Place St. John's } 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)

C.R. 4647

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, July 14th, 1919.

The discharge of the undernoted demobilization has been
CONFIRMED by Officer i/s Records with effect from 10-7-19.

4647 Pte. Ernest Kitchen.

C.R. 4647

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, June 16th, 1919.

The discharge of the undernoted on demobilization has been
APPROVED by O.C. Discharge Depot with effect from 26-6-19.

4647 Pte. R. Kitchen.

C.R. 41647

Extract from Daily Orders Part 11 Unit The Royal WFLA. Regt.
St. John's, June 14th, 1919.

4647 Pte. E. Kitchen.

Reported at Headquarters 1-6-19 in "Cerberus" which sailed
Liverpool 22-5-19.

C.R.

4647

Extract from Daily Orders Part 11 By Major A.E. Bernard, MC.,
Comm'dg. 1st Battn. R. Nfld. Regt. 23-12-18.

The u/m has been evacuated and is struck off Strength of Unit

4647 Pte. E. Kitchen.

C.R. 4647
Extract from Nominal Roll from 1st. Battalion

Royal Newfoundland Regiment dated 30-4-19.

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

#4647 Pte. E. Kitchen.

C.R. 4647

Extract from Daily Orders Part 11 Unit The Royal Nfid. Regt.,
By Lt. Col., T.G. Mathias, D.S.O. Commanding 1st Batta.
3-11-18.

The following joined the Bn. 3-11-18.

4647 Pte. J. Kitchen.

B Coy.

C.R. 4647

Extract from Nominal Roll Re-inforcement Draft No.55, Embarked Folkeston
26/10/18, from 2nd Battn, Royal Newfoundland Regiment, Hazeley Down Camp,
to 1st Battn, Royal Newfoundland Regiment, B.E.F.

4647 Pte. Kitchen, E1

MP.

C.R. 4647

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

4647 Pte E. Kitchin

Embarked for Overseas with draft 11-6-18.

Doc No 4647

Extract from Daily Orders part 11, from Unit The Royal
Wfld. Regt. St. John's, dated April 25, 1918.

#4647 Pte. Ernest Kitchen.

Attested for General Service with the Royal "fld." regt.
from 23/4/18.

L. Kitchen

CR

4647

~~*ARC*~~

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

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

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

1. Unit and Corps Royal Newfoundland Regt. 7. Former Trade or Occupation } Seriman
2. Regtl. No. 4647 3. Rank Plt 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regtl. Nos.
4. Name Ritcher Ernest
(Surname) (Christian Names)
5. Age last birthday 24
6. Posted for duty on apl 22/18 at S. J. G. h...
in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—
(a) When (d) Particulars of Pension or Gratuity
(b) Where (if any)
(c) Opinion of Court

Note.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability. nil

12. Place of origin of disability. nil

13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. nil

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

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

15. What is his present condition ?

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

The Complaints of no Disability

16. Was an operation performed? If so, when and what was its nature? *n. a*
17. If not, was an operation advised and declined? *n. a*
18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable? *n. a*
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions? *n. a*

20. Do you recommend—

- (a) Discharge as permanently unfit?
(b) Change to United Kingdom?

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

Reputation
Legit. Proc. Officer
A. J. H. Cpt. R.A.M.C.

Station *Longley Down*

Date *30/4/19*

Medical Officer in charge of case.

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

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

Sir:-

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

Regtl. No.	Rank	Name	Amount	Signature
1647	Plt	Kitcher E	£250	E. Kitcher

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

E. Kitcher

Date

July 1/18

Kitchen, E

4647

Hay sept.

July 12, 1919

#4647 Pte. Ernest Kitchen,

Harbor Grace, C.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

Captain,
Paymaster & O.i/c Records.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 26th. 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 *Ernest* 2. Surname *Kitchin*

3. Rank *Plt.* 4. Regtl. No. *4647*

5. Address in full to which future payments of gratuity are to be forwarded. *Mr. Grace, C. B.*

6. Date of enlistment in the Regiment. *Apr. 23/18*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.

8. Relationship of such dependents. *—*

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

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *—*

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

12. Give total length of time which you served on active service, whether in Hfld. or Overseas. *From Apr. 23/18 to June 12/19*

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

No

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

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

No

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

Yes

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

No

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

No

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

19. Are you now serving in the Regt.? If not give:- (a) date of discharge (b) Reason for discharge.

No
Temporary Deactivation

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

France, Belgium & Germany - from Oct. 1918 to April 1919

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

No

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

Signature of Applicant: *E. Kitchen*
 Place of Residence: *H. Grace, Wfld.*
 Declared before me at: *S. John, Wfld.*
 This *15th* day of *May* 19...*19*

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

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

July 10, 1919

#4647 Pte. Ernest Kitchen,

Harbor Grace.

Dear Sir:-

Please find enclosed Discharge Certificate

No. 2886.

Yours truly

Captain
Paymaster & O.i/c Records

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4647 Rank Pte Name Kitchen E
 Intended place of residence St. John's
2. Occupation Fireman
 Classification of soldier E Medical Category A 1
3. The above named man is discharged in consequence of..... **DEMOBILIZATION**.....

Eligible for War Service Gratuity

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

Place JUN 12 1919
 Date ST. JOHN'S

J. M. S. King
 for Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date JUN 12 1919
ST. JOHN'S

E. Kitchen
 Signature of soldier

Alfred Blomfield
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date JUN 12 1919
ST. JOHN'S

E. Kitchen
 Signature of soldier

James O. Newman
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 23-4-18 No of days on Military
 Discharged from service JUN 26 1919 plus 14 days Service 444

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S
 Date JUN 26 1919

R. H. East Major
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed
- Place St. John's Nfld
 Date July 10 1919
- J. M. Bowley Capt
 Officer i/c Records
 The Royal Newfoundland Regiment

R. F. B2079/2886

The Royal Newfoundland Regiment

Class for Demobilization:—

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 10.6.19

Regimental No 4647

Name Kitchens Ernest Rank Pte

Address Bell Island

Present Medical Category A1

Recommended for:— (a) Immediate discharge
(b) Standard Medical Board

Members of Board

R.H. Sant
O.C. Discharge Depot.

H. Paterson
Senior Medical Officer

Geo. Borden
M. O. Depot

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 4047 Rank Cts. Name Kepton E.
 Date of Enlistment 23-4-18 Address H. Edge District H. Edge
 Occupation Fireman Classification for Discharge H Medical Category H1
 Recommendation S. M. B. _____ Disability Rating _____
 Passed to Demobilization Officer with following documents:—

N. F. 136	B 268	B 121	N. F. Med	D. F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 11-6-19 for O. C. Discharge Depot. *H. Edge*

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation. *E. Kepton*

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
- (b) Clothing Supplied _____

Date 12-6-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. P. 1739 to his home at 113 Grace and Release Certificate No. 2649 issued.

Date 12-6-19 *J.A. Knowlton*
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 10-7-19

Date 12-6-19 *J. M. [unclear]*
Depot Paymaster.

Discharge approved for 26-6-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. P136	B 268	B 121	N. F. Med	D.F. 1
B 178	W 349A	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B179c	B 120	M 93		

2 Form B

Date 12-6-19 *J.A. Knowlton*
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Date JUN 26 1919 *R.H. [unclear]*
O. C. Discharge Depot.

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

Date

Civil Re-establishment Committee



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

To resume former occupation

E. Kitchin

Signature of Man.

J. P. Snow

Signature of the Vocational Officer or his Representative.

Reg. No. 4647

Place **ST. JOHN'S.**

Date *12-6-19* 191

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

MEDICAL HISTORY

Surname Kitchen OF Christian Name Ernest

Table I.—GENERAL TABLE.

Birthplace:—Parish Her Grace County Nfld

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>23rd</u> day of <u>April</u> 191 <u>8</u>		on day of 191	
	at <u>St John's, Nfld,</u>		at	
Declared Age	<u>22</u> years — days		years days	
Trade or Occupation	<u>Fireman</u>			
Height	<u>5</u> feet <u>4½</u> inches		feet inches	
Weight	<u>125</u> lbs.		lbs.	
Chest Measurement	Girth when fully expanded... <u>35</u> inches		inches	
	Range of Expansion... <u>4</u> inches		inches	
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R. E.—V= <u>6/6</u>		R. E.—V=	
	L. E.—V= <u>6/6</u>		L. E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Samuel Patterson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St John's, Nfld,</u>		at	
	on <u>23rd</u> day of <u>April</u> 191 <u>8</u>		on day of 191	
Joined on Enlistment	Corps.	<u>The Royal Nfld Regt,</u>		Corps.
	Regtl. No.	<u>4647</u>		Regtl. No.
Transferred to				
Became non-effective by	on day of 191		on day of 191	
[Signature]				
[Rank]				

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

Date	Brief Details, and Signature
23-4-18	Vacc. 20
3-5-18	I. A. B. 20
17-5-18	do 20
25-5-18	do. 20

It is hereby certified that this soldier has been before a Travelling Medical Board and has been classified as
_____ for Discharge on Demobilisation. Medical category _____
10.6.19
Date of T.M.B. _____ Signature _____ Rank and Name _____

Table IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation



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 *Ernest Kitchen*

Regiment from which discharged **Royal Newfoundland**

Regimental number *4647*

Intended address *Bell Island. N.B.*

Height on discharge *5* Feet *5*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks _____

Figure on discharge *Medium*

Christian name of Father *Edward.*

Christian name of Mother _____

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *H. Grace. 7 Dec. 1845*

Nature and locality of civil employment required _____

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

(Soldier's signature in full) *Ernest Kitchen*

Pte
(Rank)

Station _____

Date *10/6/19*

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

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

Station _____

Date _____

THIS TICKET TO BE SHOWN AT THE GANGWAY AND RETAINED BY THE SOLDIER

The Royal Newfoundland Regiment

DISEMBARKATION TICKET

Group No. 1011

No. 4147

Rank Private

Name W. J. ...

Address ...

PASS. You are granted permission to be absent from Depot

until

JUN 14 1919

on which date you will report

for demobilization, (see over)

EMPIRE BARRACKS

ST. JOHN'S, N.F.

R. H. ...

COMMANDING DISCHARGE DEPOT

The Royal Nfld. Regiment

DEMOBILIZATION

No. 4647 Rank

Name Sutherland E

Warned for demobilization on

JUN 19 1919

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.
In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

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

1. Unit and Corps. *Royal Newfoundland*
2. Regtl. No. *4467* 3. Rank. *Private*
4. Name *Kitchen* *Earnest*
(Surname) (Christian Names)
5. Age last birthday. *24*
6. Posted for duty on *Apr 22/18* at *St. Johns*
in category (or grade).....
7. Former Trade or Occupation } *Fireman*
7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regtl. Nos.
(b) Date of Discharge;
(c) Cause of Discharge.
(d) Particulars of Pension or Gratuity (if any)
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty?
9. If a Court of Inquiry was held on an injury state:—
(a) When
(b) Where
(c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
11. Date of origin of disability. *nil*
12. Place of origin of disability. *nil*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

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

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

15. What is his present condition?
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)
- He complains of no disability*

16. Was an operation performed? If so, when and what was its nature? *na.*
17. If not, was an operation advised and declined? *na.*
18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable? *na.*
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions? *na.*

20. Do you recommend—
- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?

Repatriation

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

W. E. Proenner, Capt R.A.M.C.
 Medical Officer in charge of case.

Station *Hazelton*

Date *30. 1. 19*

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

Casualty Form—Active Service.

Regiment or Corps ROYAL NEWFOUNDLAND REG.

Rank Pte. Surname Kitchen Christian Name X. Crest

Religion C. Age on Enlistment 24 years 23 months

Enlisted (a) 23/1/18 Terms of Service (a) Service reckons from (a) 23/1/18

Date of promotion to present rank Date of appointment to lance rank

Extended () Re-engaged () Qualification (b)
or Corps, Trade and Rate

Occupation Fisherman H. M. Everson Capt Signature of Officer.

RFB 1915

Report		Record of promotions, reductions, transfers, casualties, etc. 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 ...	<u>8800</u>		
		Disembarked...			
		Joined Battalion			
<u>5.1.19</u>	<u>2/1. Elanco St.</u>	<u>Adm. Impet go</u>	<u>Field</u>	<u>17.12.18</u>	<u>Sd 706</u>
<u>7.1.19</u>	<u>do</u>	<u>Duty</u>	<u>do</u>	<u>21.12.18</u>	<u>Sd 705</u>
	<u>87 Fk</u>	<u>Adm. Pediculosis</u>	<u>do</u>	<u>8.1.19</u>	<u>Ed. 172</u>
	<u>87 Fk</u>	<u>Adm. Scabies</u>	<u>do</u>	<u>15.1.19</u>	<u>Ed 214 B.13</u>
		<u>Discharged to Duty</u>		<u>8/2/19</u>	<u>Ed 213. 15-2/19</u>
		<u>Returned in UK</u>		<u>23/4/19</u>	

(a) In the case of a man who has been engaged for, or enlisted in, the Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) Signaller, Shoeing-Smith, & (15816) W.L.W. 1837 P 1124. 1000000 6/15. D & S. Form B/103. (E. 1266.)

Next of kin

Father Edward Kitchen
H. Grace Newfield

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Number of Sheets Full

Regiment of Royal Newfoundland

Signature of O. C. Company J. James Hunt

Regimental Number and Name		Enlistment		Trade
No.	<u>4647</u>	Age on	<u>22</u> years	<u>Firstman</u>
	<u>Kitchener</u>		months	
Joined	Date	Place and Date of Enlistment		Religion
Joined	Date	<u>St. Johns</u>	<u>23.4.18</u>	<u>CofE.</u>
Joined	Date	Period of	with Colours	Place of Birth
Joined	Date		with Reserve	years.

Good Conduct Badges, Service pay or proficiency pay

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
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To be carried over

Army Form B. 121.

No. 464 Name *Kitchin R* Sqn., Batty., or Company *B* Corps **ROYAL NEWFOUNDLAND REG** Date of enlistment *1871* (G.C.I.) *1871* Service or Proficiency Pay *1st Lt*

Date of last entry in Company Conduct Sheet *Nov. 13/19* No. and date of last drink *Nov. 13/19* Period not reckoning towards freedom from extra fine *None* Sheet No. *One* Signature O.C. Company, etc. *J. O. W. Russell* Character *1st Lt*

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>Reserve</i>	<i>13/19</i>	<i>1st Lt</i>		<i>Refusal of Bob Bonfarter</i>	<i>2nd Lieut. Admonished</i>	<i>Admonished</i>	<i>9/3/19</i>	<i>1st Lt Russell</i>	<i>By punishment Nov 13/19</i>

ARMY FORM B. 122

C.R. 4647

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

I certify that I have received an issue of 2 inches
of Riband of British War Medal-1914-1919.

Name.....*R. Kitchen*.....

Date.....*13th 1925/1919*.....
Place.....*H. Green*.....

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4047 Rank Cpl. Name Keston E.
 Date of Enlistment 23-4-18 Address H. Enge District H. Enge
 Occupation Fireman Classification for Discharge E. Medical Category H.
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

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

Date 11-6-19 for O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation. E. Keston

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 _____

Date 12-6-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. R. 1739 to his home at H. S. Grace and Release Certificate No. 2649 issued.

Date 12-6-19 *J. H. Shaw Capt.*
Demobilization Officer

Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 10-7-19

Date 12-1-19
Depot Paymaster.

Discharge approved for 26-6-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. P138	B 288	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2	do 5th	" 6
B179c	B 120	M 93		

2 Form B

Date 12-6-19 *J. H. Shaw Capt.*
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Charge Records,
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUN 26 1919 *R. H. Sait Capt.*
O. C. Discharge Depot.

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

Date June 20/19 *[Signature]*
Records

Reg. No. *4647* Rank *Pfc* Name *Kitchener, E.*

Attested Address *St. Grace,*

Allotment Allottee

Date of Allotment Returned from Overseas *29-5-19*

Returned on S.S. *Corsican* Cause *Discharge*

11-6-19
26-6-19.

PASSED TO DEMOBILIZATION OFFICE
DISCHARGE APPROVED ON DEMOBILIZATION