



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 2648

Name Norman R. Greene Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--|
| 1. What is your name? | 1. <u>Norman R. Greene</u> |
| 2. What is your full Address? | 2. <u>St. John's, Nfld.</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>19</u> Years <u>4</u> Months |
| 5. What is your Trade or Calling? | 5. <u>School teacher</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, Norman R. Greene

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.

Apr 28/15

..... SIGNATURE OF RECRUIT.
Charley Holman Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Norman R. Greene

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 April 1915

Signature of Attesting Officer H. D. Bishop

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the

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

Date 1915 } Approving Officer.
 Place

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

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

2648

31
30
4
52



FIRST NEWFOUNDLAND REGIMENT

2. 55
7. 90
11. 18.
May 27

ATTESTATION OF

No. 2648

Name Norman Le Presne Corps

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Norman Le Presne
2. What is your full Address? 2. Isle - aux - mout.
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 19 Years 4 Months
5. What is your Trade or Calling? 5. School teacher
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, Norman Le Presne 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.

April 28/16

Norman Le Presne SIGNATURE OF RECRUIT.
Chesterly Holman Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Norman Le Presne 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 April 1916

Signature of Attesting Officer H. 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..... } 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 Norman Peterson

Apparent age 19 years 4 months. Height 5 feet 7 inches

Chest Measurement { Girth when fully expanded 38 1/2 inches
 Range of expansion 5 1/2 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mr P. J. Lepore
Isle and More | Relationship uncle

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 28th 16</u>									
<u>Discharged St John's Med May 22/1918</u>									
<u>Embarked St John's St. Michael for det 19th 16 Embarked for B.C. 11th 16</u>									
<u>Resembarked Queen 12-10-16 Sailed Bath 27-10-16 Wounded 21-11-17 Admitted 55 66th</u>									
<u>U.S. Army 21-11-17 Invalided to England 31-12-17 Admitted 32nd 14th and admitted 1st 17th</u>									
<u>Although then report lay at 20th 18 To hospital and for discharge 26th 18 Arrived Hqs 19th 18</u>									
<u>Discharged medically unfit 22-5-18</u>									
<u>Re-called for special duty 1st 18</u>									
<u>Embarked St John's 4-5-18 55</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>22-5-18</u> (date of discharge) <u>2</u> years <u>25</u> days									
" " " Pension " <u>Re-called</u> " <u>50</u> "									



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

Norman Le Fresnoe

aged

19

conducted at

6RB

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 *6/16 Both*

20 *n*

21 *n*

22 *n*

23 *n*

24 *n*

25 *n*

26 *n*

27 *n*

28 *n*

29 *n*

30 *n*

31 *n*

32 *n*

33 *no*

34 *5-7*

35 *12 7 lbs*

36 *35 38 1/2*

37 *8230*

38 *Uncle Philip J. Le Fresnoe Isle aux Moines*

39 *none*

204.8

21

Signature of Medical Examiner:

William Roberts

C.R. 2640

Extract from Daily Orders part II, Depot St. John's dated
April 23rd., 1919.

The discharge of the undernoted on demobilisation has been
APPROVED by Officer Commanding Discharge Depot on 19-4-19.

2648 Cpl. Norman LeFresne.

C.R. 2648

Extract from Nominal Roll of Mfld. Regt. Draft No.12
From 2nd Bn. Depot, to 1st Bn. B.E.F. Embarked Southampton
11-10-16.

2648 Pte. N. LeFresne.

C.R. 2648

SEPTEMBER 18th 1919.

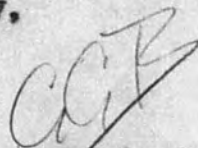
Mrs. Wm. Peidle,
32 John Street.

Dear Madam:

In explanation of why the amount of \$30.00 referred to by you, and also referred to in your daughter's letter received to-day, I may say that Mrs. LeFresne requested us to pay you the amount of \$30.00 due on account of the late Sgt. Piceo. There is no money due on this soldier's account, but there is a cheque for \$30.00 due for Separation Allowance on account of her husband, Cpl. LeFresne.

We are unable to pay you this amount unless we receive instructions from Mrs. LeFresne to do so. If you will ask her to give us further instructions in this connection, we shall pay you the money due ~~you~~ *her*.

Yours faithfully,



Captain,
for Chief Staff Officer.

C.R. 2648

Extract of Preliminary Report of a Medical Board
held on Tuesday Afternoon April 15th/19. The following
was the finding.

3rd Board. Recommended Discharge from the Army.

2648 Pte. N. LeFresne.

C.R. 2648

Extract of DAILY ORDERS PART II ROYAL NEWFOUNDLAND
REGIMENT DEPOT ST. JOHN'S DATED MARCH 18th/19.

Reattested for duty at Depot from
11/3/19.

#2648 Cpl. Norman LeFresne.

CR. 2648

Extract from Daily Orders part II,
Depot St. John's dated Feb. 18/1919.

The discharge of the undersigned on
demobilization have been CONFIRMED
by Officer i c records on noted dates.

#2648 Cpl. Norman LeFresne.

12-2-19

C.R. 7648

EXTRACT FROM DAILY ORDERS PART II, DEPOT ST. JOHN'S DATED FEB. 3rd. 1919.

The discharge of the undernoted on demobilization have been APPROVED
by O. C. Discharge Depot on noted dates:-

Y

2648 Cpl. N. Le ~~G~~resne

29-1-19

C.R. 2648

Extract from Medical Board held Jan. 22, 1919.

2648 Pte. N. LeFresne.

Recommended Discharge as permanentlt Unfit. (2nd Board)

C.R. 2648

Extract from Daily Orders part 11, Depot. St. John's
dated December 4th, 1918.

To be Acting-Corporal from 3-12-18, while attached to Military
Service Board.

#2648 Pte. N. LeFresne.

CR 2648

Dec. 3, 18.

From:- District Officer Commanding,
Newfoundland.
To:- Officer Commanding Depot,
City.

#2648 Pte. N. LeFrayne.

This soldier is now acting in charge
of the Military Service Board Office,
and while so attached is recommended for
promotion to the rank of Acting Corporal.

Major.
District Officer Commanding.
Newfoundland.

C.R. 2648

Extract from Daily Orders part 11, Depot St. Johns
Dated ~~XXXX~~ September 28th., 1918.

#2648 Pte. Norman LeFresne.

RETESTED FOR SPECIAL DUTY FORM 27-9-18.

BC?

C.R. 2648

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

2648 Pte. N. LeFresne,

Discharged 22 - 5 - 18, medically unfit

C.R. 2648

Extract of Hospital Advances No. 3629/29 received from P.&R.O., London
dated 23rd. April 1918.

2648 Pte. N. LeFresne

Royal Newfoundland Regiment.....Advances whilst at 3rd London
General Hospital per Voucher 4788, 3 shillings, 6 pence.

C.R. 2648

Extract from Casualties received from P & R Office London,
Mar. 21, 1918.

FOR DISCHARGE.

Reference Casualty Report No. 438; 2648 LeFresne,
Has been granted extension of furlough to 10 a.m. 25/3/18.

Authority;

Officer i/c. Records.

C.R. 2648

Extract from Casualties received from Pay & Record
Office, London, dated March 14, 1918.

#2648 Pte. L. LeFresne. ✓

ex 3rd London General Hospital 14/3/18, is granted
furlough to 10 a.m., 20/3/18, with orders to report
at the P & R O. on the latter date for disposal. To
be repatriated.

C.R. 2648

Extract of Casualties received from the Pay & Record Office,
London dated 14 Mar.1918.

FOR DISCHARGE

2648' Pte.L.LeFresne.

ex 3rd London General Hospital 14/3/18, is granted furlough
to 10 a.m. 20/3/18, with orders to report at the P & R.O.
on the latter date for disposal. To be repatriated.

Authority:-

A.F. W.3201

C.R. 2648

Counter No. _____

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 St. John's, Nfld.

Line Number	Rcd	By	Sent	by	Check

Dated Jan 4th, 1918

To P. J. LeFresne,
Isle ^{aux} Morts, Burgeo.

Pay & Record Office states 2648, Pte. Norman LeFresne
At. Wandsworth

G.G. Byrne
Military Secretary

C.R. 2648

Extract of Casualties received from Pay & Record
Office, London, dated ~~February~~ January 3, 1918.

#2648 Pte. N. Le Freane. ✓

Gunshot wound neck. Admitted 3rd London General
Hospital, 1/1/18.

CF 2648

Extract of Telegram received from London, dated
January 3rd, 1918.

#2648 LeFresne.

At Wandsworth.

C.R.

2648

Extract of Casualty received from Pay & Record
Office, London, dated January 2, 1918.

#2648 Pte. S. LeFresne. ✓

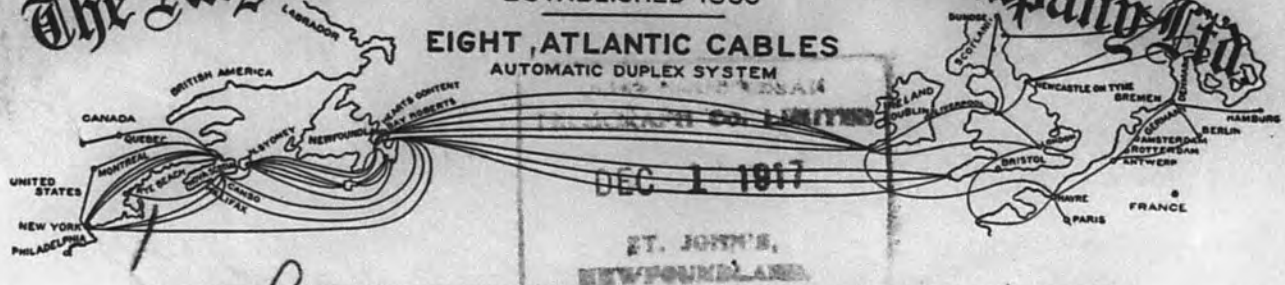
Wounded 21/11/17 Authority:- O.C. 55th C.C.S. 24/11/17

2648 Le Home

The Anglo-American Telegraph Company

ESTABLISHED 1866

EIGHT ATLANTIC CABLES
AUTOMATIC DUPLEX SYSTEM



IN DIRECT TELEGRAPHIC COMMUNICATION WITH ALL PARTS OF THE WORLD.

22/ - Isle aux Morts
No.
Wds.

10 { R. A. Squires
Colonial Secretary

Please let me know if
gunshot wound is very
dangerous for losing his
leg, have you heard
from him since rush
reply

Mr R. J. Lepresne
Mr Home Le Home

PLEASE HAND YOUR REPLY DIRECT TO THIS OFFICE.

C.R. 2648

NO. 2648 PTE. NORMAN LE^FFRESNE.

EXTRACT OF CASUALTY LIST RECEIVED FROM THE PAY AND
RECORD OFFICE LONDON DATED NOVEMBER 30th, 1917.

"AT 1ST AUSTRALIAN GENERAL HOSPITAL ROUEN NOV. 21
GUNSHOT WOUNDS RIGHT LEG SEVERE."

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 *J. P. Levesque* Address _____

Line Number	Rcd	By	Sent	by	Check

Dated 30th November, 1917.

To Mr. P. J. LeFresne,
Isle aux Morts, Burgeo.

Regret to inform you that Record Office London, officially reports No. 2648, Private Norman LeFresne at 1st Australian General Hospital, Rouen, Nov. 21st, gunshot wound right leg severe.

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

~~JOHN R. BENNETT~~, R. A. SQUIRES,
Colonial Secretary.

FOR TYPEWRITER

C.R. 2648

Extract from National Roll published at St. John's for Veterans,
for U.S. "Roll" July 20, 1916.

2648 Pte. LeFresne N.

Decr. 9th, 1918

From Asst. Adjutant,
Depot

To Paymaster and Officer i/c Records,
Militia Department

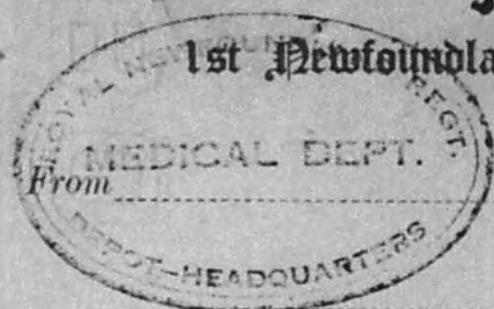
2648 Cpl. N. LeFresne

The account of the above noted man on Company
Pay Sheets has been squared up to and including
December 9th, 1918, with a credit balance of \$13.00,
and is now to be transferred to your Department.
He has no allotment current.

AWC

2648 Cpl. N. LeFresne

MEMO.



1st Newfoundland Regiment.

Sept 27 1915

To Asst Adjutant

- 2618. Ste N. L. Frense

The above named is fit for work at

Depot.

MEDICAL DEPARTMENT,
1ST NEWFOUNDLAND REGIMENT.

J. B. Kelly Capt
M.O. DEPOT!

Ramb

I. 2648 Pte Norman L. Greene a discharged soldier of the Royal Newfoundland Regiment, hereby agree to serve in the Royal Newfoundland Regiment for Home Service in the Dominion of Newfoundland as long as my services shall be required, under the same terms and conditions under which I was serving before discharge.

N. L. Greene

I. 2648 Pte Norman L. Greene do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, 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.

WITNESS

W. W. W. W.

PLACE

DATE



N. L. Greene

April 24th. 1918.

From Assistant Adjutant,
Depot.

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

8438 Pte. Fitzpatrick, J.
2648 Pte. LeFreshe, N.
2829 Pte. Gaines, J.
3551 Pte. Coles, S.

Marginally noted men were recommended for
discharge as permanently unfit by Medical Board held on
April 23rd. 1918.

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

St. John's. NF

Dec. 3rd. 1916.

From : D.O.C. Newfoundland.

To: O. C. Depot.
City.

2468. Pte. N. LeFresne.

This soldier is now acting in charge of the Military Service Board Office, and while so attached is recommended for promotion to the rank of Acting Corporal.

Sgd.....A. Montgomerie.

Major.

D.O.C.

Newfoundland.

C.R. 2648

Norman LeFresne was attested for General
Service with the NEWFOUNDLAND REGIMENT ON April 28th 1916
Regimental No. 2648 was allotted to Ptes N. LeFresne

AUTHORITY:

Record Ledger,

Dept. of Militia.

March 25th 1919

N. L. Greene.

C.R.

2648

P.L.O.

Original

Medical Report on an Invalid.

Station 5th London General Hospital,
WANDSWORTH, S.W.
Date 10/2/18

- 1. Unit 14th R. Rifled
- 2. Regimental No. 2648
- 3. Rank Plt.
- 4. Name Le Franc N.
- 5. Age last birthday 20
- 6. Enlisted on April 1916
 at St John's

- 7. Former Trade or Occupation } Teacher.
- 7A. If with previous service in Army, state--
(a) Former Unit;
(b) Regimental No.; no
(c) Date of Discharge;
(d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

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

G.S.M. of right side neck and penetrating injury and fracture of transverse process of 2nd dorsal vert.

Statement of Case.

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

- 9. Date of origin of disability. Nov 20/17
- 10. Place of origin of disability. Cumbria
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

COMPEN
O.C. H.Q.
ST. JOHNS, N.F.L.D.
M.F.P.38. No. H66044
DATED 25 MAR 1918

Muscular recovery is small piece of the spinal process being removed. Wounds were all quite clean and healed quickly

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

yes. Active Service G.S.M.
no
no

13. What is his present condition? *Atrophy & paralysis of trapezius
injury of spinal accessory nerve
was all healed -*
*Weight should be given in all cases when
it is likely to afford evidence of the
progress of the disability.*
*Arm cannot be raised to level with
Shoulder. No power in arm.*
14. If the disability is an injury, was it caused—
(a) In action? *yes*
(b) On field service? *yes*
(c) On duty? *yes*
(d) Off duty? *no*
15. Was a Court of Inquiry held on the injury? *no*
If so—(a) When?
(b) Where?
(c) Opinion?
16. Was an operation performed? If so, what? *yes - small piece of thorn
between scapula.*
17. If not, was an operation advised and declined? *no*
18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service? *no*
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war. *none*
20. Do you recommend—
(a) Discharge as permanently unfit, or *yes*
(b) Change to England?

F. J. Bunker & Morse
Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith,
~~except~~ †
3rd London General Hospital
Station, WANDSWORTH, S.W.
Date 11/3/18
H. E. Domett
Officer in charge of Hospital.

Col. A.M.S.
Comdg. 3rd. London Gen. Hospital,
*Loss of teeth on or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to other cause.
† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

Notes.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

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

(iii.) *The rates of pension vary directly according to whether the disability is, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

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

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

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

(i.) Service during the present war ;

(ii.) Climate ;

(iii.) Ordinary military service ;

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

(v.) Whether it is constitutional or hereditary.

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

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

23. Is the disability permanent?

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

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

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

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

27. Do the Board recommend—

(a) Discharge as permanently unfit, or

(b) ~~Change to England?~~

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

(a) Sanatorium;

(b) Hospital;

(c) Convalescent home;

(d) Asylum; or

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

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

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

Yes

✓

✓

No

No

Q.S.W.

✓

Yes

✓

60

vide 16

Yes

/ No

No

No

Signatures:—
3rd London General Hospital
Station WANDSWORTH, S.W.

Date 11/3/18

Approved London General Hospital,
Station WANDSWORTH, S.W.

Date 11/3/18

W. W. G. Major President.
D. Davies Esq. Members.

W. W. G. Major Rames Administrative Medical Officer.

Opinion of the Medical Board.

Notes.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

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

(iii.) *The rates of pension vary directly according to whether the disability is, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

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(i.) Service during the present war ;

(ii.) Climate ;

(iii.) Ordinary military service ;

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

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

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

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

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(a) Discharge as permanently unfit, or

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

Yes

✓

✓

No

No

Q.S.W.

✓

Yes

✓

60

vide 16

Yes

/ No

No

No

Signatures:—

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

Date 11/3/18

Approved London General Hospital,
Station WANDSWORTH, S.W.

Date 11/3/18

W. W. G. Major President.
D. Davies Esq. Members.

W. W. G. Major Administrative Medical Officer.

Notification by President of Medical Board of Approval of a Soldier's Discharge, under Para. 392 (xvi.) King's Regulations.

(To be completed and dispatched on the day on which the discharge is approved.)

To the Officer i/c Records 58 Victoria St.

The Soldier named below has appeared before an Army Medical Board at this station, and his discharge from the Service as "no longer physically fit for War Service" has **this day** been approved. (The discharge will be confirmed for a date 14 days after the date on this notification—see A.C.I. 1623 of 1916.)

Soldier's surname Le Gresne, Christian names Norman
(in full)

Regt. No. and Rank 2648 Pte Regt. or Corps L.R. n/ed
(If T.F. this should be stated)

His address on discharge will be Isle aux Morls
n/ed

This information is for the Central Army Pension Issue Office only. **The Soldier states that*** _____ **allowance is being issued in respect of him.**
*Insert "separation," "dependants," "family," or "no," as the case may be. The space *must not* be left blank

Army Form D. 400A. and Army Form B. 179 for the above-named Soldier are forwarded herewith.

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

W. Dwyer Major
President of Board
(Approving Officer).

Date 11/3/18

A set of three forms will be made out for each Soldier whose discharge is approved, and will be dispatched to the officers severally indicated.

Attention is drawn to the fact that Forms A, B and C of each set are not in identical terms.

Descriptive Return of a Soldier discharged on account of Disability.

INSTRUCTIONS.—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Commissioners of Chelsea Hospital.

Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and the soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The Form will then be attached to the Proceedings of the man's Medical Board, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.1.

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

A Name in full *Le Fresno Norman*
Regiment from which discharged *1 R. Rifed*
Regimental Number *2648.*
Where born (Parish, Town and County), and when *Isle Aux Noirs, Rifed.*
Intended address *Isle Aux Noirs, Rifed.* *4/7/97*
Height on discharge *5.* Feet *8 1/2* Inches
Colour of Hair on discharge *Dark* **Colour of Eyes** *Brown*
Descriptive marks *R side of neck 5 in* **Complexion** *Fair*
Figure on discharge *medium*
Christian name of Father *du*
Christian name of Mother *du*
Wife's Maiden name in full *—*
Date and Place of Marriage *—*
Christian names of Children *—*
Nature and locality of civil employment desired *Maintain at present.*

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

(Soldier's Signature in full) *Norman Le Fresno.*

Station *3rd London General Hospital Wandswoth, S.W.* **(Rank)** *Pte.* **Date** *March 7-18.*

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.

Station *3rd London General Hospital WANDSWORTH, S.W.*

J. Hambro **Medical Officer i/c Hospital.** **Date** *March 7-18.*

B Period of Service and in what Corps ...	Regiment	Years	Days	All Service Abroad with Stations		
				Years	Days	Days
Disallowed ...				COPY SENT TO India O.C. H.Q. S. Africa ST. JOHNS, N.F.L.D. N.F.P.38, No. <i>4660/94</i> DATED <i>25 MAR 1918</i>		
Service towards Pension ...				Sum due on account of advance of Pension }		
Date inclusive to which pay has been issued						
Sums due on account of public debts ...						

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

Medals

Other distinguishing marks

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

Station _____ **Officer in Charge**
Date _____ **Records.**

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

No. 2648 Rank Pte.
Name (surname first) Le Fresno. Norman
Regiment Royal Newfoundland

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

None

COPY SENT TO
O.C. H.Q.
ST. JOHNS, N.F.L.D.
N.F.P.38, No. 116664
DATED 25 MAR 1918

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

None

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

Wireless Telegraphy

4. What is the name of your Approved Society? None.

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

No

Date 11-3-18.

Signature N. Le Fresno.

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 4 (ii), item 3, of Army Council Instruction No. of 1916.

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

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

MEDICAL HISTORY

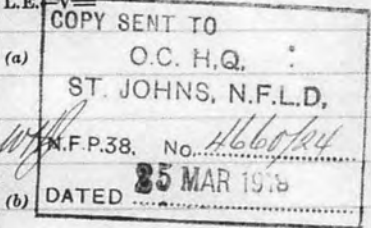
OF

Surname Le Presne Christian Name Norman

Table I.—GENERAL TABLE.

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY	
	Right	Left	Right	Left
Examined	on 28 day of April 1916	at St. Johns	on _____ day of _____ 1916	at _____
Declared Age	19 years 4 days	Teacher	_____ years _____ days	_____ years _____ days
Trade or Occupation	Teacher			
Height	5 feet 7 inches		_____ feet _____ inches	
Weight	127 lbs.		_____ lbs.	
Chest Measurement	Girth when fully expanded	38 1/2 inches	_____ inches	
	Range of expansion	3 1/2 inches	_____ inches	
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V=	6/6	R.E.—V=	
	L.E.—V=	6/6	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease				
(b) Slight defects but not sufficient to Cause Rejection				
Approved by (Signature)	<i>Samuel Paterson</i>			
(Rank)	Major Medical Officer.			Medical Officer.
Enlisted	at St. Johns	on 25 day of April 1916	at _____	on _____ day of _____ 1916
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	1st Nfld Reg.	2648		
Transferred to				
Became non-effective by				
(Signature)	on _____ day of _____ 1916		on _____ day of _____ 1916	
(Rank)				



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

MEDICAL HISTORY

OF

Surname Le Presne Christian Name Norman

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Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V=	6/6	R.E.—V=	
	L.E.—V=	6/6	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease				
(b) Slight defects but not sufficient to Cause Rejection				
Approved by (Signature)	<i>Samuel Paterson</i>			
(Rank)	Major Medical Officer.			Medical Officer.
Enlisted	at St. Johns	on 25 day of April 1916	at _____	on _____ day of _____ 1916
Joined on Enlistment	Corps.	Regtl. No. 2648	Corps.	Regtl. No.
Transferred to				
Became non-effective by				
(Signature)	on _____ day of _____ 1916		on _____ day of _____ 1916	
(Rank)				

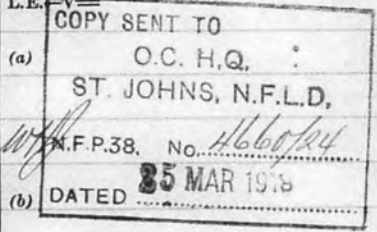


Table II.—Only for admission to hospital or to the sick list in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature, or treatment of the case likely to be of interest or of further use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3rd London General Hospital, WANDSWORTH, S.W.	1	1	18				S. Sw. R. side of neck		<p>Board held - see overleaf</p> <p>Disability - 4 lbs R. side of neck operating during fracture of transverse process of 2^d dorsal vertebra. No power in arm</p> <p>Leave - 4 lbs on Active Service</p> <p>Loss of - for ensuring a unilateral loss of vision by 60%</p>	<p><i>W. H. W. S. - Cap. M. C. M.</i></p> <p>for 3rd London General Hospital, WANDSWORTH, S.W.</p>

3rd London Gen. Hospital
Wandsworth. S.W.

7-1-18; Hut. 116

Chief Paymaster.
Newfoundland Contingent
58 Victoria Street.

Dear Sir

Kindly
advaise me the sum of £2; and
charge same to my "Account" please.

Your obedient Servant.

Approved

G. C. Hall
Capt. R.M.S.

Pte. N. Le Fresnoe.
No. 2648.

Registrar, R.A.M.C.

3rd London Gen. Hospital
WANDSWORTH S.W.

OK [Signature]

7/1/18 5/2



No. 2648 Rank She Name Re Khoni K.

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

N.P. 173

A.B. by Rahm France

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate			£ s d		
						From	To		£	s	d			
Balance					Balance									
Acquittance Rolle					Pay @ Net Rate	21 ⁷ / ₈						21	12	3
Hospital Advances		1	7	6	Nation Allow	22 ⁷ / ₈	14 ³ / ₈	83	50	41	50	9	10	7
A.B. 64.					7 days @ 7									
P.&.R.O. Payments		9	0	0										
£ 7 m ho nfd				3										
11.0.7 ✓ Cheque 7879	14/11	19	10	0										
					19 16 3									

30.16.10 ✓

1933



3rd Lon. Gen. Hosp
Wandsworth
17-1-18 Ward D6

Chief Paymaster
Newfld. Contingent
38 Victoria St
Sir.

JMB

Will you kindly
advance me the sum of £~~7~~^(two)_(two)
and charge same to my
"Account" please.

Your obedient Servant
Pte H. de Fresno

No 2648

1st N. F. L. S. - Regt.

Approved
S. C. A. L.

ok
£2
17/1/18

3rd London General Hospital
WANDSWORTH, S. W.

1470/2

Bleakdown Auxiliary
West Byfleet

29th January 8

2648 Pte

N. LeFresne
2:0:0

7497.

Bleakdown. Mil. Hosp.
West Byfleet.
Jan. 26/18.

The Chief Paymaster.
1st N. Y. L. D. Contingent.
58 Victoria Street.

Dear Sir.

Will you kindly
allow me the sum of £2. and charge same
to my account. please.

Your Obedient. Servant.
Pte. N. Le. Spence.
No 2648.

F. C. Carl (McDonald) 1st N. Y. L. D. Regt.
Mc etc.

BLEAKDOWN
AUXILIARY
HOSPITAL

Op £ 2-0-0
Aw. 28¹/₈

1470/2

✓ 961
28 JAN 1918
1470/2
30/1/18

2840/5

Bleakdown Mil.
West Byfleet,

21st February

8

N. LeFresne,

2648

Pte

£2:0:0

7586.

Bleakdown. Mil. Hosp.
West. Byfleet.
19/2/18.

The Chief Paymaster.
Newfoundland Contingent.
58 Victoria Street.

Dear Sir.

Will you forward to
me the sum of £2; and charge same to my
"Account" please.

Your Obedient Servant.
Pte. N. S. Greene.
No 2648.

F. C. Carl M.R.
M.O. i/c

BLEAKDOWN
AUXILIARY
HOSPITAL

BRANCH
Pay
ACTED UPON
BY *J.M.*
DATE *20/2/18.*

2570/10

OP £2 = 0 = 0
AW. 20 - 2 - 18

NEWFOUNDLAND CONTINGENT
PAY & RECORDS OFFICE
Ref. No. *1786*
Rec'd. *20 FEB 1918*
Ack'd.
Amtd. *2840/5. 21/2/18.*
File No.

WESTERN UNION

ANGLO-AMERICAN DIRECT UNITED STATES CABLEGRAM



SENT

FOR STAMPS

Prefix	Code
WORDS	CHARGE
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At _____
 To _____ By _____

VIA WESTERN UNION

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

5/3/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To (B. P. N.) P.J. LAFRESNE
 ISLE-AUX-MORTE
 PORT AUX BASQUES (NEWFOUNDLAND)

PLEASE CABLE FOUR POUNDS THROUGH MINISTER MILITIA

2648 LAFRESNE

NOT TO BE TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature _____ Address 58, Victoria St., N.W.

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

No. _____

N.F.P./45.

NEWFOUNDLAND CONTINGENT



To: Chief Paymaster & Officer i/c Records
Newfoundland Contingent,
58, Victoria Street,
London, S.W. (1).

pk
20 1.0.0
ORP
Receipt No.
8/3/18
5991

Please remit to me

the sum of £ 10-0 pounds _____ shillings, on
account of any balance that may be due to me.

(£ 1-0-0).

Regtl No. 2648 Rank Pte.

Name N. Le. Fresne.

8/3/18

Approved W. H. Rames
for deposit (£1). Officer i/c.,
3rd Lond. Inf. Div. Hospital.

Dated at _____

87 31 1918.

[Handwritten signature]

No. A/ 027429 NEWFOUNDLAND CONTINGENT

N.F.P./55.

To: 2648 Pt. N. Le Fresne.
Royal Wld Regts
London.

Pay & Record Office,
58, Victoria Street,
London, S.W. 1,

March 15th 1918

Herewith Postal Draft for £4-0-0 being amount of
remittance from transfer made at this Newfoundland

Please acknowledge receipt hereon.

(Sig.) Pl. N. Le Fresne.

(Date) March 15th 1918.

H. B. Anderson Lieut
Chief Paymaster & Officer i/c Records.

A/ 027429

Admitted 1-1-18.

Army Form W. 3202.
(In books of 100.)

NOTIFICATION that a Soldier has been sent Home from Hospital to await Discharge under para. 392 (xvi.) King's Regulations.

Soldier's Regtl. No. } 2648. Rank Pte

Name L. Fison. G.
(Surname first)

Corps or Regiment (also Unit if known) } 1st R. Field

To Officer i/c of Records 58, Victoria St. S.W.

Regimental Paymaster 58, Victoria St. S.W.

The above-named man, who appeared before a Medical Board, and whose discharge as "no longer physically fit for war service" was approved by the President of the Board on the 1-3-18., has been sent to ^{the address below} his home on warrant to await instructions as to his final discharge; he has been given £1 (one pound) advance ~~and a suit of plain clothes.~~

He proceeded on (date) 14-3-18.

to (full address) 58, Victoria Street. S.W.

Date 12-3-18 W. M. Undercap. Registrar, R.A.M.C.T. { Officer
3rd London General Hospital, { Comm.

Place WANDSWORTH, S.W. Hospital.

Three copies to be made; one copy sent to each Officer above-mentioned, and one copy filed in the Office.

Admitted 1-1-18.

Army Form W. 3202.
(In books of 100.)

NOTIFICATION that a Soldier has been sent Home from Hospital to await Discharge under para. 392 (xvi.) King's Regulations.

Soldier's Regt. No. } 2628. Rank Plt

Name L. Fison. N.
(Surname first)

Corps or Regiment (also Unit if known) } 1st R. A. M. C. T.

To Officer i/c of Records 58, Victoria St. S.W.

Regimental Paymaster 58, Victoria St. S.W.

The above-named man, who appeared before a Medical Board, and whose discharge as "no longer physically fit for war service" was approved by the President of the Board on the 1-3-18, has been sent to ^{the address below} ~~his home~~ on warrant to await instructions as to his final discharge; he has been given £1 (one pound) advance ~~and a suit of plain clothes.~~

He proceeded on (date) 14-3-18

to (full address) 58, Victoria Street S.W.

Date 14-3-18 S. W. M. C. T. Registrar, R.A.M.C.T. { Officer Comm.
3rd London General Hospital,

Place WANDSWORTH, S.W. Hospital.

Three copies to be made; one copy sent to each Officer above-mentioned, and one copy filed in the Office.

FOR USE IN THE CASE OF ALL SOLDIERS SENT TO THEIR HOMES UNDER
A.C.I. 1011 OF 1916, PARA. 2(ix.)

No. 2648, Rank 1st Lt. R. Med, Name Le Fresne. N
 is discharged from* 3rd London General Hospital
 with orders to proceed to his home:
 (Address 58 Victoria Street
S.W.)



and there to await further instructions as to his discharge from the Service.

Place 3rd LONDON GENERAL HOSPITAL WANDSWORTH. H. Jagan Officer Commanding.

Date 14/3/18. Capt. R.A.M.C.T.F. Registrar, R.A.M.C.T.F.
 *Here enter name of Hospital or Unit from which the Soldier is discharged.
3rd London General Hospital,
WANDSWORTH, S. W.

No. _____

Regtl. No. 2648

Rank Private

Name Le Fresnoe D.

Regiment R. Rifle

Date from 14 - 3 - 1918

to 10 AM 20 - 3 1918

To proceed to LONDON

elsewhere

I/c _____

Hospitals _____

Station _____

Date _____

14 - 3 - 18

Address whilst on leave to which any orders will be sent:

WESTERN UNION

ANGLO-AMERICAN DIRECT UNITED STATES CABLEGRAM



Pay

Prefix	Code
WORDS	CHARGE
17	2 1/2

SENT

At _____

To _____ By _____

VIA WESTERN UNION

FOR STAMPS

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

5/3/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

TdE. F. M., P.J. Lefresne
ISLE-AUX-MORTE
PORT AUX BASQUES (NEWFOUNDLAND)

PLEASE CABLE FOUR POUNDS THROUGH MINISTER MILITIA

2648 Lefresne

Charge to 2648, Lefresne

$$\begin{array}{r} 15 \\ 2 \end{array} \frac{1}{2}$$

$$\begin{array}{r} 30 \\ 7 \end{array} \frac{1}{2} = 37 \frac{1}{2}$$

$$\begin{array}{r} 37 \\ 1 \end{array} \frac{1}{2} = 38 \frac{1}{2}$$

CH 188
 PAY BOOK
 Dated 5/3/18 by JRB

CHECKED
 5/3/18

NOT TO BE TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature _____ Address 58 Victoria St, S.W.

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

La Thesne. H.

2648

Ray Dept
—

May 4th., 1919

#2648 Cpl. Norman Johannes,

Isle aux Herbes,

Burgeo Dist.

Dear Sir:-

Please find enclosed "Discharge Certificate

No. 2175 $\frac{1}{2}$ "

Yours truly

Paymaster & O.i/c Records
Captain,

CLASS OF SERVICE	SYMBOL
Day Message	
Day Letter	Blue
Night Message	Nite
Night Letter	N L

If none of these three symbols appears after the check (number of words) this is a day message. Otherwise its character is indicated by the symbol appearing after the check.

ANGLO-AMERICAN TELEGRAPH COMPANY, LIMITED

CONNECTING WITH
THE WESTERN UNION TELEGRAPH COMPANY

CLASS OF SERVICE	SYMBOL
Day Message	
Day Letter	Blue
Night Message	Nite
Night Letter	N L

If none of these three symbols appears after the check (number of words) this is a day message. Otherwise its character is indicated by the symbol appearing after the check.

B
F33 ISLEAUXMORTE 10PD

LIEUT COL RENDELL

MILITIA DEPT

STJOHNS

PLEASE DELIVER MRS PEDDLE 32 JOHN ST MONEY DUE ME

ST JOHNS
SEP 23 1919

MRS N LEFRESNE

Woman

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. *2448* Rank *Cpl* Name *L. F. F. Norman*
 Intended place of residence *St. John's - Robt. Burges*
 2. Occupation *Teacher*
 Classification of soldier *B* Medical Category *E*

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

Eligible for War Service Gratuity

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

Place **ST. JOHN'S**
 Date **APR 19 1919**
H. M. Swift
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date **ST. JOHN'S**
APR 19 1919
L. F. F. Norman
 Signature of soldier
Amie Louston
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date **ST. JOHN'S**
L. F. F. Norman
 Signature of soldier
John Conerman
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service *11-3-19* No of days on Military
 Discharged from service *19-4-19* Service *54 days*
Two week day

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**
APR 19 1919
R. H. Lait
 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 *May 4, 1919*
M. Bowley
 Officer i/c Records
 The Royal Newfoundland Regiment

H. b. 2079/2195

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE.

I hereby acknowledge that I have received all my pay and allowances (including clothing allowances) and all just demands up to the present date.

Date June 9. Sig. of Soldier P. N. Le Fresnoe

Place St. Ana. Mortis. Sig. of Witness P. J. Le Fresnoe

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

COPY

No. 2648 Rank Private
Name (surname first) Levesne, Norman
Regiment Royal Newfoundland

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

None



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

None

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

Wireless Telegraphy

4. What is the name of your Approved Society?

None

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

No

Date 11-3-18

Signature *Norman Levesne*

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 4 (ii), item 3, of Army Council Instruction No.....of 1916.

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

COPY

Army Form B. 103.

Regimental Number 2648

Casualty Form - Active Service

Regiment or Corps 2/1 New Zealand

Rank Pte Surname Le Mesurier Christian Name Norman

Religion C of E Age on Enlistment 19 years 4 months

Enlisted (a) 28/4/16 Terms of Service (a) War 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.....

Occupation..... Signature of Officer.....



Report Date	From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents.
			Embarked ... <u>Hampton</u>	<u>11.10.16</u>	
			Disembarked ... <u>Rouen</u>	<u>12/10/16</u>	
		<u>Joined Battalion</u>		<u>22/10/16</u>	
		<u>With - do -</u>		<u>23/1/17</u>	
<u>24/11/17</u>	<u>55 CAS (Australian) Gen. Hosp.</u>	<u>Ad Gen. H. Leg on</u>	<u>36 F.A.</u>	<u>21/11/17</u>	<u>E.D. 4094</u>
		<u>- do -</u>	<u>Rouen</u>	<u>21/11/17</u>	<u>H.A. 16647</u>
	<u>H/ Panama</u>	<u>To England</u>		<u>3/12/17</u>	<u>W. 3083</u>
		<u>(Gd) E. Aldridge major</u>			
		<u>o/c Inf Section</u>			
		<u>Capt G. Z. Beck</u>			

(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, Shoeing-Smith, & Co. W. 527-12205 1909m 7/17 (25620) C. P. & S., Ltd., Form B. 103 5/1958. I.P.T.O.

LAST PAY CERTIFICATE

N.P.P. 794
DUPLICATE MAIL COPY
 POSTED APR 1918
 Class A

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

Regtl No. 2648 Rank Private Name LeFroane N. Unit Royal Hfld. Regt. who was Registered
 to Newfoundland on 26/3/18 Authority A.F.B. 179 Cause Class A

STATEMENT OF ACCOUNT

DR.

CR.

PERIOD: FROM 22/12/17 TO 26/3/18

PARTICULARS				£	s	d	PARTICULARS				£	s	d		
Balance Dr. from							Balance Cr. from								
Allotment 95 days @ .60¢				57	00		21/12/17								
Cash Payments: P. & R. O.							Pay 95 days @ \$1.00				95	00			
Cable to Newfoundland						11	4	2½	Field Allowance 95 days @ \$.10				9.50		
Hospital Advances						28	10	0	Other Allowances days @ \$				104	50	
Other Debits:									Other Credits:						
									Ration Allowance						
									14/3/18-26/3/18						
									15 days @ 1/9				1	2	9
Total Debits							Total Credits								
Balance due by Paymaster						42	4	10	Balance due to Paymaster				44	4	5
						1	19	7							
						44	4	5					44	4	5

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

25/3/18 (Place) _____ (Date) 191 _____ O.C. " " Company.

Made up and checked in accordance with information received in the Pay & Record Office London to 25/3/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

25 MAR 1918 191

A.D. Mearns
 Chief Paymaster & Officer i/c Records.

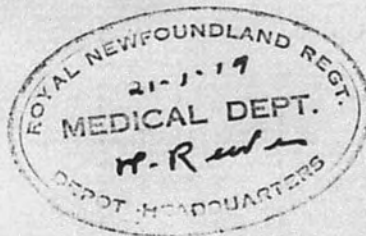


DEPARTMENT OF MILITIA

ST. JOHN'S 21 Jan 1919
NEWFOUNDLAND

*S. M. S.
Militia Dept.*

*Please give bearer paper for S. M. S.
2648 Corp N. L. Furse.*



The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 7648 Rank Corpl Name Lefevre Norman
 Date of Re-Enlistment 11.3.19 Address St. John's District Bungeo
 Occupation Teacher Classification for Discharge B Medical Category E
 Recommendation S.M.B. Permanently unfit Disability Rating 1070
 Passed to Demobilization Officer with following documents:—

N.F. P 36.....	B 268.....	B 121.....	N.F. Med.....	D.F. 1.....	<i>1 Re-establishment form!</i> <i>3</i>
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 17.4.19 O. C. Discharge Depot. *H. M. H.*

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable.....
- (b) Clothing Supplied *As supplied*.....

Date..... O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *2nd* to his home at *City* and Release Certificate No. *2170* issued.

Date *19-4-19*

J.A. Snowling
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 *A-5-19*

Date *19-4-19*

H. News H
Depot Paymaster.

Discharge approved for..... *19-4-19*

Forwarded with following documents to O.C Discharge Depot.

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 *19-4-19*

J.A. Snowling
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

- Officer i/c Records.
- Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date *APR 19 1919*

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

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

Date

THIRD BOARD

Form Z179 N. M. D.

Report of Medical Board.

Station **St. John's, Nfld.** Date **APRIL 15th., 1919.**
 No. and Rank **2648 - PRIVATE** Age **21** Height **5'8½"**
 Name **LOPRESNE NORMAN** Complexion **FRESH**
 Unit **Royal Newfoundland** Eyes **BROWN** Hair **DARK**
 Address **ISLE AUX MORTE**
 Former Trade **TEACHER**
 Enlisted at **ST. JOHN'S** On **APRIL 1916** (The Board will please note how the soldier's appearance corresponds with above description).
 Disease or Disability Original **G.S.W. RIGHT SIDE NECK PENETRATING LUNG AND FRACTURE OF TRANSVERSE PROCESS OF SECOND DORSAL VERT.**
 Subsequent

Present Condition (Compare with previous Board)

Has full movement at shoulder, slight pain down arm to elbow, like rheumatic pain.

*1918
21
1897*

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

10%

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?

10%

Recommendation of Medical Board

Members of Board

Cluny Macpherson
 Major

[Signature]
[Signature]
[Signature]

Approving Medical Officer.



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
Galemons

U. Le Gresne
Signature of Man.

Reg. No. 2648

J. A. Brewster
Signature of the Vocational Officer or his Representative.

Place ST. JOHN'S

Date APR 19 1918 191

The Royal Newfoundland Regiment

Class for Demobilization:—

Reattested.

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

Regimental No. *2648*

Name *Norman Levesque.*

Address *32 John Street City*

Present Medical Category *F*

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

Members of Board { *RH Lat* Capt
O.C. Discharge Depot.

Members of Board { Senior Medical Officer
JW Burden
~~M. O. Depot~~

I, Norman Le Fresne a discharged soldier of
the Royal Newfoundland Regiment, hereby agree to serve in the
Royal Newfoundland Regiment for home service in the Dominion
of Newfoundland as long as my services shall be required, un-
der the same terms and conditions under which I was serving
before discharge

Norman Le Fresne

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

Norman Le Fresne

WITNESS. W. M. King Capt.
PLACE. St. John's MAR 15 1919
DATE. (effective) 11-3-19

The Royal Newfoundland Regiment

Re-attested

PROCEEDINGS ON DISCHARGE

1. No. *2618* Rank *Corp.* Name *James Le June*
 Intended place of residence *Selwyn North*

2. Occupation *School teacher*
 Classification of soldier *B* Medical Category *2*

3. The above named man is discharged in consequence of... *S. Medical Officer*

ELIGIBLE for POST DISCHARGE PAY

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

Place *JAN 29 1919*
 Date

M. Bowley Capt.
 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 *Selwyn North* *Jan. 29 1919*
 Signature of soldier *J. M. L. June*
 Signature of witness *C. B. Dick's Capt.*

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 *Jan. 28th 1919*
 Signature of soldier *J. M. L. June*
 Signature of witness *James and [Signature]*

STATEMENT OF SERVICE

7. Enlisted for service *28th 11 16* No of days on Military
 Discharged from service *29 1-19 plus 107 days* Service *1026 days*

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*
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

R. H. Lait Capt.

Date *JAN 29 1919*

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place *Selwyn North*
 Date *February 11 1919*

M. Bowley Capt.
 Officer i/c Records
 The Royal Newfoundland Regiment

The Royal Newfoundland Regiment

Re attested

DEMobilIZATION OF

Reg. No. *267* Rank *Cpl.* Name *Le Fresne Monnier*

Date of Enlistment *31st Aug-18* Address *St. Anne's North Burgoyne* District *Burgoyne*

Occupation *Secretary* Classification for Discharge *B* Medical Category *F*

Recommendation S.M.B. *permanently unfit* Disability Rating *20%*

Passed to Demobilization Officer with following documents:—

N.F. P 36-94	B 268	B 121	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	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	<i>17921</i>	" 6	
B 179c	B 120	M 93			

Date *25-1-19* O. C. Discharge Depot *St. Anne's Capt*

PARTICULARS FOR DEMOBILIZATION

i. Civil Re-Establishment.

I am *not* in a position to resume civilian occupation.

N. Le Fresne

Particulars passed to Vocational Officer for information and action.

Date *28.1.19* *Asst Dir's Capt*

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable *#60.00*

(b) Clothing Supplied *Joseph H. Snowling*

Date *28-1-19* O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 2ml to his home
 at Delaware, Md. and Release Certificate No. 950 issued.

Date 28-1-19
Crosby 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 12-2-19

Date 29-1-19
Worley Capt.
 Depot Paymaster.

Discharge approved for Jan 29 19

Forwarded with following documents to O.C Discharge Depot.

N.F. P136	B 268	B 121	N.F. Med.	D.F. 1
E 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 29 1. 19
Crosby Capt.
 Demobilization Officer.

APPROVED.

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

with following additional documents.

ELIGIBLE for POST DISCHARGE PAY

Date JAN 29 1919
R.H. Lait Capt.
 O. C. Discharge Depot.

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

Date
PI-1-25

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

MEDICAL HISTORY of

Surname Le Fresnoe Christian Name Norman

TABLE I.—GENERAL TABLE.

Birthplace ... Parish _____ County _____
 Examined ... { on 28th day of April 1916
 { at St Johns
 Declared Age ... 19 years 4 days.
 Trade or Occupation ... Teacher
 Height ... 5 feet, 7 inches.
 Weight ... 127 lbs.
 Chest Measurement { Girth when fully Expanded. 38 1/2 inches.
 { Range of Expansion 3 1/2 inches.

Physical Development ...
 Vaccination Marks { Arm ... Right Left
 { Number _____

When Vaccinated ...
 Vision ... { R.E.—V—6/6
 { L.E.—V—6/6

(a) Marks indicating congenital peculiarities or previous disease ...
 (b) Slight defects but not sufficient to cause rejection ...

Approved by (Signature) (Sgd) Ramont Paterson
 (Rank) Major Medical Officer.

Enlisted ... { at St Johns
 { on 25th day of April 1916

Joined on Enlistment ...	Corps. <u>1st Hampshire Land Regt</u>	Regtl. No. <u>2648</u>
Transferred to ...		

Became non-effective by _____
 on _____ day of _____ 1916
 (Signature) _____
 (Rank) _____



Table II.—Only for Admissions to Hospital or to the Sick

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks
	Day	Month	Year	Day	Month	Year			
<i>3rd London Genl Hospital Wandsworth SW</i>	<i>1</i>	<i>1</i>	<i>18</i>				<i>GSW R. side of Neck</i>		

List in the case of Warrant Officers treated in quarters.

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

Signature of Medical Officer

Board held - see overleaf.

Disability - GSW R. side of neck & penetrating lung fracture of transverse process of 2nd dorsal vertebrae. No power in arm.

Cause - GSW on active service

Capacity - for earning a livelihood lessened by 60%

W. H. Bingley, M.D.
1st Lt. 2nd Lond. Gen. Hosp.
Wandsworth SW

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 take course in Accountancy.

Cpt. W. L. Greene.

Signature of Man.

Reg. No. *2648*

Butler

Signature of the Vocational Officer or his Representative.

Place

St Johns Nj

Date

Jan 28 1919

The Royal Newfoundland Regiment

Class for Demobilization:—

B

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

Jan. 21, 19

Regimental No. *2648*.....

Name *Lt. Evans Norman*..... *Capt*

Address *32 John St*.....

Present Medical Category *E.E*.....

Recommended for:— { (a) ~~Immediate discharge~~

(b) Standing Medical Board.....

Members of Board {

R.H. Lait Capt.

O.C. Discharge Depot.

W. Paterson

Senior Medical Officer

W. Burdett

M. O. Depot

*Papers
in Medical Dept
H.Q. Building*

LAST PAY CERTIFICATE

N.F.P./94

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

Regt No. 2648 Rank Private Name LeFresne N. Unit Royal Mfld. Regt. who was Repatriated
to Newfoundland on 26/ 3/18 Authority A.F.B.179 Cause Class A.

STATEMENT OF ACCOUNT

DR.		PARTICULARS					£	¢	£	s	d	PARTICULARS					£	¢	£	s	d	CR.
PERIOD: From 22/12/17 to 26/3/18		Balance Dr. from									Balance Cr. from 21/12/17						21	12	3			
		Allotment 95 days @ .60¢	57	00	11	14	2½				Pay 95 days @ \$1.00	95	00									
		Cash Payments: P. & R. O.			28	10	0				Field Allce 95 days @ \$.10	9	50									
		Cable to Newfoundland					3	1½				104	50				21	9	5			
		Hospital Advances			1	17	6				Other Allces days @ \$											
		Other Debits:									Other Credits:											
											Ration Allowance											
										14/3/18-26/3/18						1	2	9				
										13 days @ 1/9												
		Total Debits			42	4	10			Total Credits						44	4	5				
		Balance due by Paymaster			1	19	7			Balance due to Paymaster												
					44	4	5									44	4	5				

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

191

O.C. " " Company.

Made up/Checked in accordance with information received in the Pay & Record Office London to 25/3/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

25 MAR 1918

191

Chief Paymaster & Officer i/c Records.

"2nd. B O A R D."

Form Z179 N. M. D.

Report of Medical Board.

Station St. John's, Nfld Date **JAN, 22nd 1919.**
No. and Rank **2648 PTE.** Age **21 YEARS** Height **5'8 1/2".**
Name **LE FRESNE, NORMAN** Complexion **FRESH.**
Unit Royal Newfoundland Eyes **BROWN** Hair **DARK.**
Address **ISLE AUX MORTE.**

Former Trade **TEACHER**

Enlisted at **ST. JOHN'S.** On **APRIL 1916.** (The Board will please note how the soldier's appearance corresponds with above description.)

Disease or Disability Original **G.S.W. RIGHT SIDE NECK PENETRATING LUNG AND FRACTURE OF TRANSVERSE PROCESS OF SECOND DORSAL VERT.**

Subsequent

Present Condition (Compare with previous Board)

HAS GREATER IN SHOULDER JOINT THAN AT LAST BOARD BUT STILL SOME WEAKNESS IN THE ARM. WOUNDS SOUNDLY HEALED.

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

20%

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 **20 %.**

Members of Board

N.S. FRASER.

(SGD) CLUNY MACPHERSON.

J.S. TAIT.

MAJOR.

L.PATERSON. MAJOR.

Approving Medical Officer.



Report of Medical Board.

Station St. John's, Nfld Date **APRIL 23rd., 1918**
 No. and Rank **2648 PRIVATE** Age **20** Height **5' 8½"**
 Name **LEFRESNE NORMAN** Complexion **FRESH**
 Unit **Royal Newfoundland** Eyes **BROWN** Hair **DARK**
 Address **ISLE AUX MORTS**
 Former Trade **TEACHER**
 Enlisted at **ST. JOHN'S** On **APRIL 1916** (The Board will please note how the soldier's appearance corresponds with above description.)
 Disease or Disability Original **G.S.W. RIGHT SIDE NECK PENETRATING LUNG AND FRACTURE OF TRANSVERSE PROCESS OF SECOND DORSAL VERT.**
 Subsequent

Present Condition (Compare with previous Board)

SCAR TWO INCHES LONG HORIZONTAL DIRECTION IN POSTERIOR TRIANGLE OF NECK RIGHT SIDE. ANOTHER SCAR 1½" AT UPPER BORDER OF LEFT SCAPULA. CAN MOVE WRIST AND ELBOW CAN LIFT SHOULDER TO AN ANGLE OF 45 DEGREES

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 **60% for 6 months**
DISCHARGE AS PERMANENTLY UNFIT
 Members of Board

(SGD) N. S. FRASER

(SGD) CLUNY MACPHERSON. MAJOR

J. S. TAIT

L. PATERSON. MAJOR

Approving 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 Commissioners of Chelsea Hospital. Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and the soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The Form will then be attached to the Proceedings of the man's Medical Board, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.1.

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

A Name in full *Le Fresnoe, Thomas*
Regiment from which discharged *1st Royal Newfoundland*
Regimental Number *2648*
Where born (Parish, Town and County), and when *Ile aux Mortes Gld, 19/9/97*
Intended address *Ile aux Mortes Gld*
Height on discharge *5* Feet *8 1/2* Inches
Colour of Hair on discharge *Dark* **Colour of Eyes** *Brown*
Descriptive marks *Ysw R side of Neck* **Complexion** *Fresh.*
Figure on discharge *Medium*
Christian name of Father *decd*
Christian name of Mother *decd*
Wife's Maiden name in full _____
Date and Place of Marriage _____
Christian names of Children _____
Nature and locality of civil employment desired *Uncertain at present*



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

(Soldier's Signature in full) *(Sgd) Thomas Le Fresnoe*
3rd London General Hospital (Rank) *Pte*
Wandsworth SW Date *March 7/18*

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.

3rd London General Hospital (Sgd) *J. Hanlon* Medical Officer i/c
Wandsworth SW Date *March 7/18* Hospital.

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

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

Medals

Other distinguishing marks

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

Station _____ Officer in Charge
Date _____ Records.

5939

Isle aux Moris
July 23/9.

Capt Howley.

Paymaster.

Militia Dept.

~~File~~

Dear Sir

I am writing to know whether there is any Gratuity Money due me for the months of June & July. I received the amount for the months of April & May, so please let me know as soon as possible why it is I haven't received any since,

11

and, please ask
S. L. M. S. Quany if
there isn't some
separation Allowance
also due me.

Hoping Sir you
will give this matter
your attention.

I. Remain
Your Obedient Servant
for Cpl. N. de Fresno

17860. }
21566 }

6253

Isle Aux Morts
Aug. 18/9.

Capt Howley
Paymaster

Dear Sir.

I wrote
sometime ago concerning
my gratuity money,
asking why I did not
receive my usual \$70
for the months of May
& June.

I wish Sir you would
attend to this matter,
and let me know
by return mail all
particulars of same.
Trusting to hear

11

from you soon.

I Remain

Your Obedient Servant

No 2648.

Ex. Cpl. N. de. Frem.

Iole Aux Mort's
Oct, 27/9.

Lieut. Col. Russell.
Militia Dept.

Dear Sir.

I am again writing to you of the same matter I wrote of some time ^{ago} re- whether there is not some "Gratuity Money" due me.

I wrote Captain Howley some-time ago, but have received no answer.

I have only received two lots of \$70 each, one in March, the other in April

Gale

I Remain Sir.

Respectfully Yours

No 2648

Com. Capt. N. Le Vesne

11

and if Sir I have received my full allowance, I wish you would request Captain Howley to give me an explanation, as I will not be satisfied until I receive one.

There is also, Sir, a Separation Allowance due me of nearly \$30⁰⁰, and as I can certainly find the use of a dollar those days when the cost of living is not the cheapest. I wish you will enquire in the matter for me.

Reg. No. 2648 Rank Pte. Name Le Fresnoe. W.

Attested _____ Address Isle au Chat (2) field W

Allotment _____ Allottee _____

Date of Allotment _____ Returned from Overseas 19. 4. 18

Embarked for Overseas _____ Cause _____

~~Discharged 25-5-18~~

Isle Aux Moris

Nov 17/19.

Hon. A. E. Hickman

St. John's.

Sir.

I am writing to know if you will advise Capt Dowley (Paymaster) to send me an explanation why it is, my "Gratuity Money" was stopped in April. I received two payments of \$70⁰⁰ each, one in March the other in April; and since then, although I have written continually to him, I have heard nothing further concerning the matter.

And further Sir; I have received two letters from the Pension Commissioners regarding my wife's Pension Allowance.

I have been married since February last, and my wife hasn't received a single cent; so thinking the matter had gone far enough, I decided to write to you; hoping Sir, you will at least enquire into the matter for me.

Your Obedient Servant

No 2648

Ex-Cpt. W. Le Fresnoe

56 48

21, November, 1919

Ex Cpl. N. LeFresne,
Isle aux Morts.

Dear Sir:

With reference to your
letter to the Minister of Militia, I enclose
two cheques on account of War Service
Gratuity.

Yours truly,

Major
Paymaster.

M. Chase R

5533

Sale Am Morts

June 23/9.

Lieu - Col. Rendell
Militia Dept
St John's

Dear Sir.

I am writing
to know about a Separation
Allowance which is due me
from Mar 11 to April 19. 1919.
I have asked twice for it
but the answer has been
"Your papers are not through
yet", so this time I took
the liberty of writing to you.
Hoping Sir you will see

about this small matter
and Oblige

Your Obedient Servant
Ex-Cpt. N. de Yeane



DEPARTMENT OF MILITIA

STATEMENT OF ACCOUNT OF Cpl. H. LeFrense No. 2648.

FROM 1/1/19. TO 18/1/19.
(both days inclusive)

LEDGER FOLIO NO. 35.

Date	Particulars	No. of Days	Rate per Day	Amount	
				Dr.	Cr.
	CR.				
	Pay	15	1 00		15 00
	Field Allowances	15	20		3 00
	Other "				
	Balances from previous paybook				
	DR.				
	Forfeited Pay				
	Fines				
	Clothing and Necessaries				
	Arms and Accoutrements				
	Casual Payments				
July 15	1st Payment			18 00	
	2nd "				
	3rd "				
	Balance from previous paybook				
	Final Cash Payment				
	Totals			18 00	18 00
	Debit Balance				
	Credit Balance				
	Checked by			18 00	18 00

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 question 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... *Norman*. 2. Surname... *Le. Greene*.....

3. Rank... *Cpl.*..... 4. Regtl. No. *2648*.....

5. Address in full to which future payments of gratuity are to ~~for~~ be forwarded... *32 John Street*.....
City.....

6. Date of enlistment in the Regiment... *April 28 - 1916*.....

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
Not Applicable.....

8. Relationship of such dependents... *Not Applicable*.....

9. Address in full of such dependent... *Not Applicable*.....

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.... *None*.....

11. Were you on active service only in Nfld. If so, give dates, and particulars of such service... *No*.....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *Enlisted April 28 - 1916. Went Overseas*

wounded. 11.9.17. Discharged May 22 - 1918. Reattested Sept 28 - 1918. Finally Discharged Jan 19 - 19.

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

Discharged May 22nd 1918. Unfit.....
Re-attested Sept. 28-1918..... Regt 7602648

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 \$8.14.10. Paid by Sgt Newbury

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

Yes

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

760

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.....

Not Applicable

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?.....

Not Applicable

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

No

Discharged Jan. 29..... to take up other work

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 Oct. 1916 to Nov. 20. 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 Applicable

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: *Norman L. Greene*
 Place of Residence: *32 John Street*
 Declared before me at: *S. J. [unclear]*
 This *27* day of *July* 19*19*

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

William D. Kelly
Darius R.

POST DISCHARGE PAY.				
Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
<i>less</i>			<i>5.40</i>	<i>350.00</i>
<i>25.1.19</i>	<i>100.10</i>		<i>less P.D.P.</i>	<i>100.10</i>
				<i>249.90</i>
Certified Correct.			Paymaster.	



THE ROYAL NEWFOUNDLAND REGIMENT
HEADQUARTERS

St. John's, Newfoundland,

.....Decr. 9th, 1918..... 191.....

**From Asst. Adjutant,
Depot**

**To Paymaster and Officer i/c Records,
Militia Department**

2648 Cpl. N. LeFresne

The account of the above noted man on Company
Pay Sheets has been squared up to and including
December 9th, 1918, with a credit balance of \$13.00,
and is now to be transferred to your Department.
He has no allotment current.

Abbey Capt
Asst Adjutant
Depot The Royal Newfoundland Regiment
St. John's, Nfld.

AWC

*oil
ren*

May 28th. 1918.

Private Norman LePresne,
Isle aux Forts,
Surgeon, R.F.C.

Dear Sir,-

I enclose herewith cheque for £72.17, being
the balance of pay due you to the date of discharge,
also a Certificate of Pay.

I also enclose Certificate of Discharge, and
Character Certificate, dated 14th 22nd. 1918, together with
special form, which kindly ~~fill~~ and return to this Office.

Yours faithfully,

Capt. & Paymaster S
Officer i/c Records.

Encl. 5

J/H.

St. John's, Oct 14th / 18

Royal Newfoundland Regiment.

Billeting Account,

To Mr. N. Le Fresne

Billeting Soldiers as undermentioned

from Oct 4th / 18 to Oct 11th / 18

2648 Mr. N. Le Fresne 7 20

N. Le Fresne

ACCOUNT	<u>13 Ym</u>	INITIALS	<u>ew</u>
CH NO	<u>3980</u>	INITIALS	
IND LEDGER		INITIALS	
PAY LEDGER		INITIALS	
CASH LEDGER		INITIALS	

Certified correct for \$ 7.20

7.15

C. B. Dickson
Billeting Officer.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$15⁰⁰/₁₀₀

Apr. 20th 1918

Received from the First Newfoundland Regiment
the sum of Fifteen 00 Dollars.
on account of Pay.
balance

Pte. W. L. Fresne.

Ch. No. 5736	Initials. EW
Pay Ledger 178	Initials. [Signature]
Gen. Ledger [Signature]	Initials. [Signature]

Regtl. No. Rank

[Signature]

No. 2648

Rank

Pte.

Name

Le Frasse

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.


PAY VOUCHER.

\$72¹⁷/₁₀₀

May 23rd 1918

Received from the First Newfoundland Regiment
the sum of Seventy Two ¹⁷/₁₀₀ Dollars.
on account
balance of Pay.

Ch. No.	Initials
Pay Ledger	Initials
Gen. Ledger	Initials

 No. Rank:

No. 2648

Rank

Pte.

Name

N. Le Presne

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 86 $\frac{40}{100}$

July 25 1919

Received from the First Newfoundland Regiment
the sum of Eighty Six $\frac{40}{100}$ Dollars.
~~amount~~ of Pay. P. D. P.
balance

Norman Le Fresne

Ch. No. 8752	Initials J.
Pay Ledger 147	Initials a.w.h.
Gen. Ledger.....	Initials.....

Regtl. No. 2648 Rank P6

Frank J. Jones

No. 2648

Rank

PC

Name

Le Tussie K

Reg. No. 2648 Rank *Pte* Name *Le Fresne Norman*

RE Attested *27-9-18* Address.....

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

Date of Allotment..... Returned from Overseas.....

Embarked for Overseas..... Cause.....

*re-attested for special duty. From 27-9-18
To be a/cpl from 3-12-18 while attached to Military
Service Board.*

*re-attested
To be a/cpl from 3-12-18 while attached
to M. S. B.*

22-1-19 S.M.B. Rec. vis Per. Unit

PASSED TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED ON DEMOBILIZATION



1901

The accompanying Victoria Medal with British War Medal

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

10101



OCT 5 1921 1921.

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

Norman LeFresne

in respect of his service as No. 2648 Rank Pte.

Name N. LeFresne

Royal Nfld. Regt.
~~Wiltshire Regt.~~

Receipt of the same should be acknowledged hereon.

Received

Oct 12 - 1921.

Signature

N. LeFresne.

Date

12/10/21.

Address

Cape Ray.

[P.T.O.]

July 5th. 1921 1919.

The accompanying King's Certificate, on his discharge,
(No. 947), is forwarded herewith to
Norman LeFresne,

in respect of his service as No. 2648 Rank Pvte.

Name Norman LeFresne, Corps Royal Nfld Regt.

Receipt of the same should be acknowledged hereon.

Received

July 25/21. *HGJ*

Signature

N. LeFresne.

Date

Address

LeBlanc St. St. John's

C.R. 2648

RECEIPT.

FOR ISSUE OF RIBBAND OF VICTORY MEDAL 1914-1919.

I certify that I have received an issue of
2 inches of Ribband of Victory Medal-1914-1919.

NO. 2648 NAME. N. Le Greene

DATE. Jan 13/20

PLACE. Isle Aux Morb.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.
 [6-6] W. 017/2124 1000m 6/15ss 93 53

Forms
B. 121.
32.

Number of Sheet First.

Regiment of 1st Newfoundland

Signature of O. C. Company Albermarl
Capt.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service <u>10</u> For Proficiency Pay
No.	<u>2648</u>	<u>Le Fresne N.</u>	Age on <u>19</u> years <u>4</u> months	<u>Teacher</u>	
Joined _____	Date _____	Place and Date of Enlistment	<u>St. John's</u> <u>Apr. 28. 16.</u>	Religion	
Joined _____	Date _____	Period of	with Colours <u>279</u> years.	Place of Birth	
Joined _____	Date _____		with Reserve <u>365</u> years.	<u>Newfoundland.</u>	

SENT TO
 O.C. H.Q.
 ST. JOHNS, N.F.L.D.
 W.E.P. 38. No. 4660/24
25 MAR 1918.
 DATE

Place	Date of Offence	Rank	Cases of Drunkenness.	OFFENCE	Names of Witnesses	Punishment awarded	By whom awarded	REMARKS
				<u>St. John's</u>	<u>Medically Unfit</u>	<u>22 ⁵/₁₈.</u>		
				<u>Reattested</u>	<u>11 ³/₁₉</u>	<u>155</u>		
				<u>Demobilized</u>	<u>4 ⁵/₁₉</u>			
To be carried over								

Army Form B. 121.

The Royal Newfoundland Regiment

2648

DEMOBILIZATION OF

Reg. No. 2648 Rank Corporal Name Lefresne Norman
 Date of Re-Enlistment 11.3.19 Address St. John's District Burgeo
 Occupation Teacher Classification for Discharge B Medical Category E
 Recommendation S.M.B. Permanently unfit Disability Rating 10%
 Passed to Demobilization Officer with following documents:—

N.F. P 36	B 268	B 121	N.F. Med	D.F. 1	1 Re-Enlistment form #
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 11.4.19 for O. C. Discharge Depot. H. Mans H.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable.....
- (b) Clothing Supplied.....

A. McEwen

Date..... O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *me* to his home at *city* and Release Certificate No. *2175* issued.

Date *11-9-19*

J.A. Snowling
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 *4-5-19*

Date *19-4-19*

H. Jones
Depot Paymaster.

Discharge approved for *19-4-19*

Forwarded with following documents to O.C Discharge Depot.

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

Date *19-4-19*

J.A. Snowling
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date *APR 19 1919*

R.H. Sait
O. C. Discharge Depot.

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

Date *April 26 1919*

James G. Gath
George Records

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 264 Rank Cpl. Name Le Gresne Norman
 Date of Enlistment 27-9-18 Address St. Anne's Mount District George
 Occupation Teacher Classification for Discharge B Medical Category F
 Recommendation S.M.B. permanent Disability Rating 20%
 Passed to Demobilization Officer with following documents:—

N.F. P 3694	B 268	B 121	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	2
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2	17921	" 6	
B 179c	B 120	M 93			

Date 25-1-19

W. W. Cap
O. C. Discharge Dept.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

N. Le Gresne

Particulars passed to Vocational Officer for information and action.

Date 28-1-19

W. W. Cap
O. C. Re-clothing.

Date 28-1-19

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable #6.00(b) Supplied Joseph A. Snow



DEPARTMENT OF MILITIA

STATEMENT OF ACCOUNT OF Cpl. H. LeFrense No. 2648.

FROM 1/1/19. TO 15/1/19.
(both days inclusive)

LEDGER FOLIO NO. 35.

Date	Particulars	No. of Days	Rate per Day		Amount	
					Dr.	Cr.
	CR.					
	Pay	15	I	00		15 00
	Field Allowances	15		20		3 00
	Other "					
	Balances from previous paybook					
	DR.					
	Forfeited Pay					
	Fines					
	Clothing and Necessaries					
	Arms and Accoutrements					
	Casual Payments					
Jan'y	15 1st Payment				18 00	
	2nd "					
	3rd "					
	Balance from previous paybook					
	Final Cash Payment					
	Totals				18 00	18 00
	Debit Balance					
	Credit Balance					
	Checked by				18 00	18 00