



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5461 Name Isaac Legge Corps C/6

Questions to be put to the Recruit before Enlistment

1. What is your name? 1. Isaac Legge
2. What is your full Address? 2. Robinson Street
Bay St George
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 31 Years Months
5. What is your Trade or Calling? 5. Section man
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, Isaac Legge 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.

Isaac Legge SIGNATURE OF RECRUIT.

J. W. King Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Isaac Legge 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 27 day of May 1918

C. B. Dickson Signature of Attesting Officer

† 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 1918

Place } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

5461

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

Name Isaac Legge
 Apparent age 21 years 0 months. Height 5 feet 6 1/2 inches
 Chest Measurement { Girth when fully expanded 36 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Thomas Legge
Robinson Head Bay St George Relationship Father
 Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (A) 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>27-5-18</u>									
Joined at <u>Mexico</u> on <u>Nov 27-1918</u>									
<u>Discharged August 1-1919</u>									
<u>Embarked Mexico St. Columella to Halifax N.S. 22-7-18</u>									
<u>Left for demobilization 24-6-19 Arrived H.M. 1-7-1919</u>									
<u>Demobilization Mexico 5-8-1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 5-8-1919 [date of discharge] 1 years 71 days
 " " Pensions " [" "] " " " "

J. Legge

5461

P. + R. 0

No. 6830/1078

N.F.P. / 100.

From. NEWFOUNDLAND CONTINGENT

Chief Paymaster & C. i/c Records
Newfoundland Contingent
Pay & Record Office
68, Victoria Street,
London, S.W. 1.

To: Officer Commanding,
2nd Batt. Ryl. Nfld. Regiment
Winchester

0990
6/5/19
1919

ES. VICTORIA ST. LONDON
MAY 1919
May 8th 1919

5461 Pte. I. Legge

With reference to the following
telegram from the Minister of
Militia / / (171)

Receipt hereunder.
I Leggett for
LIEUT. COLONEL,
COMMANDING 2nd Bn. ROYAL NEWFOUNDLAND REGT.

"Pay to- 5461 I. Legge
£8.0.0.

Received the sum of £8.0.0.

Cheque £8.0.0. is enclosed.
for payment to this Soldier.
Kindly obtain his receipt
hereon.

Eight pounds in respect of
telegraphic remittance from the
Minister of Militia.

A. A. Minnell
Chief Paymaster & O. i/c Records.

I. Leggett Signat. S.W.P.
No. 5461 Rank Pte.
Witness *Her. Perry*

Legge, Isaac

5461

May Sept.

David Legg

For Development.

Ch. Bruchis. Del.

Rec. Mrs C Furze.

recovery to recuperate.

~~W. C. F.~~

August 22, 1919

Mr. Isaac Legge,
Robinson's Head,
Bay St. George.

Dear Sir:-

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

Yours truly,

Captain & Paymaster.

The Royal Newfoundland Regiment

Class for Demobilization

6

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *17.19*

Regimental No. *5461*

Name *Legge Isaac*

Address *Robinsons Head St Georges*

Present Medical Category *A1*

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

Members of Board {

R.H. East Major
O.C. Discharge Depot.

H. H. H. H.
Senior Medical Officer

S. W. S. W.
M. O. Depot

August 5th 1919.

#5461, Pte. Isaac Leggen
Robinson's Head, Bay St. Geo.

Dear Sir:

Enclosed please find Discharge Certificate
3388.

Yours truly,

Capt. & O.i/c Records.

RS/.

April 29.. 19

Hon. J.F. Downey,
Department, Agriculture & Mines,
C i t y.

Dear Sir:

I have been instructed to acknowledge receipt of your letter of April 24th. to the Paymaster regarding cabling of some money to Pte. Isaac Legge, No. 5461, and to advise you that this money was forwarded to this Department by the Superintendent of the Money Order Branch, General Post Office, but the regimental number furnished was incorrect. I therefore asked him to endeavour to ascertain the correct number, so that the cable transfer may be made.

This money was held in this Department for a couple of months until we received a reply from the Superintendent, Money Order Office, which was on or about April 12th. He then requested us to return the money to him, so that he may refund it to the sender.

I may say that the money was refunded on April 12th., and if Mr. Legge has not yet received it, I would suggest that he communicate with the Superintendent of the Money Order Branch, General Post Office.

Yours truly,

Lieut
For Paymaster

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.

Legge S.

Signature of Man

Regl No. 5461

J. F. Knowlton

Signature of the Vocational Officer or his Representative.

Place

at Johns

Date

8-7-19.

191

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

MEDICAL HISTORY

Surname Legge OF Robinson Christian Name George

Table I.—GENERAL TABLE.

Birthplace:—Parish Robinson's Head County Nfld.

	SPECIAL RESERVE		REGULAR ARMY	
	on	at	on	at
Examined	24 th day of May 1918	St. John's	day of	191
Declared Age	21 years	days	years	days
Trade or Occupation	Section Man			
Height	5 feet 6 in.	inches	feet	inches
Weight	144	lbs.		lbs.
Chest Measurement	Girth when fully expanded	36 inches		inches
	Range of Expansion	3 inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	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	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Samuel Peterson</u>			
(Rank)	<u>Major</u>			
Enlisted	at	St. John's	at	
	on	24 th day of May 1918	on	day of 191
Joined on Enlistment	Corps		Corps	
	Regtl. No.		Regtl. No.	
Transferred to	<u>Royal Nfld. Regiment.</u>			
Became non-effective by	on	day of 191	on	day of 191
	(Signature)			
(Rank)				

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

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

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

1. Unit and Corps... *Royal Artillery*
2. Regtl. No. *5461* 3. Rank... *Plt*
4. Name *Legge* *Isaics*
(Surname) (Christian Names)
5. Age last birthday... *22*.....
6. Posted for duty on..... at.....
in category (or grade).....
7. Former Trade or Occupation } *Sectionnaire*
- 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps ;
with Regtl. Nos.
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty ?
- (b) Date of Discharge ;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When
(b) Where
(c) Opinion of Court
(d) Particulars of Pension or Gratuity (if any)

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

Statement of Case.

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

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

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

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

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

No Complaint of no disability

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

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

Repatriation

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

W.E. Procanier *Officer*

Station *Hayley Green*

Date *8.11.19*

Medical Officer in charge of case.

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

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Number of Sheet One

Regiment of The Royal Newfoundland

Signature of O. C. Company C. B. Dicks *lieut*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay		
No.	Isaac Legge	Age on	11 years	Section Man			
Joined	Date	Place and Date of Enlistment	17 th 5-18	Religion			
Joined	Date			CofC			
Joined	Date	Period of	with Colours 1 ^{1/2} years.	Place of Birth			
Joined	Date		with Reserve 1 ^{3/4} years.				

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
Hughes Downland	8-5-19	Pte		absent from 1-H. 5 pm. parade	6.8 M. Calaquey	2 Days. C.B.	9-5-19	Capt. G. Emerson	
				Demobilized to John's			5/19		

To be carried over.

The Royal Newfoundland Regiment

DEMOLIBIZATION OF

Reg. No. 546 Rank Plt Name Legg, Isaac
 Date of Enlistment 27-5-18 Address St. John's District St. John's
 Occupation Section Man Classification for Discharge 1st Medical Category HT
 Recommendation S. M. B. _____ Disability Rating _____
 Passed to Demobilization Officer with following documents:—

N. F. 1 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 7-7-19 O. C. Discharge Depot. St. John's

PARTICULARS FOR DEMOLIBIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Isaac Legg
Section Man

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied _____

Isaac Legg

Date 7-7-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 72232 to his home at Robinsons Head and Release Certificate No. 3302 issued.

Date 8-7-19

J.A. Snowcroft
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 5-8-19

Date 8-7-19

J.M. Smith
Depot Paymaster.

Discharged approved for 22-7-19
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
B179c	B 120	M 93		

2 Form B

Date 8-7-19

J.A. Snowcroft
O. C. Discharge Depot.

APPROVED.

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

with following additional documents.

JUL 22 1919

Eligible for War Service Gratuity

Date

N.L. Coople Capt
O. C. Discharge Depot.

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

Date

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 5461 Rank Plt Name Leagar Isaac
 Date of Enlistment 27-5-18 Address Robinson St District St. John's
 Occupation Section Quar. Classification for Discharge 1st Medical Category 1st
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

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

Date 7-7-19 O. C. Discharge Depot. [Signature]

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Isaac Leagar
with Isaac Leagar
with Isaac Leagar

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

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

Date 7-7-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 83332 to his home at Belmont, N.H. Release Certificate No. 3302 issued.

Date

8-7-19

J.A. Knowlton
Demobilization Officer

4. Pay and Allowances.

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

Date

8-1-19

J.M. [Signature]
Depot Paymaster.

Discharge approved for

22-7-19

Forwarded with following documents to O.C. Discharge Depot.

N.F. P136	B 268	B 121	N.F. Med	D.F. 1
B 178	W 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
B179c	B 120	M 93		

1/2 Form B

Date

9-7-19

J.A. Knowlton
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date

JUL 22 1919

R. Cooper Capt.
for O. C. Discharge Depot.

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

Date

July 24 1919

Reg. No. *5261* Rank *Plt* Name *Legge J.*

Attested Address *Rabensons Head*

Allotment..... Allottee ..

Date of Allotment..... Returned from Overseas *JUL 1 1919*

Returned on S.S. *Cassandra* Cause *Discharge*

87 19
27 19

PASSED TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED ON DEMOBILISATION

Reg. No. *5261* Rank *Plt* Name *Legge J.*
Attested Address *Robinsons Head*
Allotment..... Allottee ..
Date of Allotment..... Returned from Overseas *JUL 1 1919*
Returned on S S. *Cassandra* Cause *Discharge*

87 19
27 19
PASSED TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED ON DEMOBILISATION

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

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

1. Unit and Corps. *Royal Newfound Land*
 2. Regt. No. *5461* 3. Rank. *plc*
 4. Name *Rege* *Jesse Isaac*
 (Surname) (Christian Names)
 5. Age last birthday. *7.2*
 6. Posted for duty on..... at.....
 in category (or grade).....
 7. Former Trade or Occupation } *Section man*
 7a. If the soldier claims previous service in Army, he should state—
 (a) Former Regts. or Corps ; with Regt. Nos.
 (b) Date of Discharge ;
 (c) Cause of Discharge.
 9. If a Court of Inquiry was held on an injury state :—
 (a) When (d) Particulars of Pension or Gratuity (if any)
 (b) Where
 (c) Opinion of Court

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

Statement of Case.

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

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

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

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

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

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

No Complaints of no disability

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

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

Repatriation

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

W. E. Proctor *Col R. A. M.*

Station . *Hazelbury*

Medical Officer in charge of case.

Date *8/1/19*

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

5892

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 20th. 1919.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes, if any questions are not applicable, the words "NOT APPLICABLE" must be written out. On completion this Declaration is to be returned to THE OFFICER I/C

RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

Christian name..... *Shea* 2. Surname..... *Shea*

3. Rank..... *A/C* 4. Reg't. No. *5461*

5. Address in full to which future payments of gratuity are to be forwarded..... *Robinsons Shea Bay St George*

6. Date of enlistment in the Regiment..... *May 27: 1918*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge..... *no*

8. Relationship of such dependents..... */*

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

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier..... *no*

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

12. Give total length of time which you served on active service, whether in field, or Overseas..... *Fourteen months*

..... 13

5

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

no

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

no

15. Have you been issued with a War Service Badge? *no*

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

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.

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

(b) If so, was such reversion in consequence of Misconduct or inefficiency? *no*

19. Are you now serving in the Regt.? *no* If not give - (a) date of discharge. ~~1st Lt. 1919~~ (b) Reason for discharge.

August 1919 Demobilization

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. *England*

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.

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

Signature of Applicant: ^{his} Isaac ~~max~~ ^{Lake} ~~max~~ ^{(Witness) Campbell}
 Place of Residence: Robinson's Head, Bay St George,
 Declared before me at: St John's used
 This 9th day of July 1919.....

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

POST DISCHARGE PAY.

Date paid	Paid Soldier.	Paid Dependant.	War Service Gratuity.	Net amount due
.....
.....
.....

Certified correct.

Examiner

C.R. 5461

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. St. John's, dated May 29, 1918

#5461 Pte. Isaac Legge.

Attested for General Service with the Royal Nfld. Regt.
from May 27th, 1918

C.R.

5461

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

The following man embarked for overseas on H.M.S.
"Columbells" July 22, 1918.

#5461 Pte. Isaac Legge.

C.R. 5461

Extract from Daily orders part II Royal Newfoundland Regt.
Depot St. John's dated Aug. 14th 1919.

The discharge of the undernoted on demobilisation has been
CONFIRMED by officer i/c Records from 5-8-19.

5461, Pte. I. Legge.

C.R. 5461

Extract from Daily Orders Part 11 Unit The Royal WFLA.
Regt. St. John's, July 22, 1919.

The discharge of the underneted on demobilization has been
APPROVED by C.O. Discharge Depot with effect from 22-7-19.

5461 Pte. Isaac Legge

C.R. 5461

Extract from Daily Orders War Office and The Royal Nfld.
Regt. St. John's, July 3rd, 1919.

5461 Pte. I. Legge.

Reported at Headquarters 207-19 of "Consentia" which
sailed Glasgow June 24th, 1919.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5461 Rank Plt Name Legge Isaac
 Intended place of residence Robinsons Pt

2. Occupation Section Man
 Classification of soldier E Medical Category A 1

3. The above named man is discharged in consequence of

DEMOBILIZATION

Eligible for War Service Gratuity

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

Place, ST. JOHN'S

Date JUL 8 1919

[Signature]
 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, ST. JOHN'S

Date JUL 8 1919

[Signature]
 Signature of soldier

[Signature]
 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, ST. JOHN'S

Date JUL 8 1919

[Signature]
 Signature of soldier

[Signature]
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 27-5-18 No. of days on Military
 Discharged from service JUL 22 1919 Plus 14 days Service 436

APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S

Date JUL 22 1919

[Signature]
 602. 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

Date August 5 1919

[Signature]
 Officer in Charge
 The Royal Newfoundland Regiment

[Handwritten] 207913788

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20
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Descriptive Return of a Soldier Discharged on Account of Disability

INSTRUCTIONS—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. i. c. Records together with the remainder of the man's documents.

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

Name in full *Legge, Isaac*

Regiment from which discharged **Royal Newfoundland**

Regimental number *5461*

Intended address *Robinson Head St. George*

Height on discharge *5* Feet

Color of hair on discharge *Light Brown*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *—*

Figure on discharge *Medium*

Christian name of Father *Thomas*

Christian name of Mother *Isabel*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Robinson 17-1-1897*

Nature and locality of civil employment required *—*

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

(Soldier's signature in full)

Isaac X Legge *the*
man (Rank)

ST. JOHN'S.

Station

H. E. Redman Date *5-7-19*

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



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

Station

Date