



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3441 Name H. Yegrow Recruit

Questions to be put to the Recruit before Enlistment

- | | |
|--|---|
| 1. What is your name? | 1. <u>Herbert Yegrow</u> |
| 2. What is your full Address? | 2. <u>3. George Street</u> <u>St. John's</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>18</u> Years <u>—</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Manufacturer</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, Herbert Yegrow 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.

H. Yegrow SIGNATURE OF RECRUIT.
J. Parsons Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Herbert Yegrow 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 fully entered as replied to, and the said recruit has made and signed the declaration, and taken the oath before me on this 17th day of Jan. 1915.

Signature of Attesting Officer Wm. R. Cape Capt.

† 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 }
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).....



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3441 Name H. Legrow Recruit Corps Recruit

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Herbert Legrow
2. What is your full Address? 2. 3. George Street
Civic
3. Are you a British Subject? 3. yes
4. What is your age? 4. 18 years — Months
5. What is your Trade or Calling? 5. Manufacturer
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, Herbert Legrow 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.

St. John's Herbert Legrow SIGNATURE OF RECRUIT.
23/17 W. Parsons Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Herbert Legrow 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 fully explained 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 23rd day of Jan. 1915
Signature of Attesting Officer Chas. A. Cape Capt.

†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 }
Place } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Herbert L. Grow
 Apparent age 18 years — months. Height 5-8 feet — inches
 Chest Measurement { Girth when fully expanded 30 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Joseph L. Grow
3 Georges St. | Relationship Father
City 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>23-1-17</u> | | | | | | | | | |
| Joined at <u>St John's</u> on <u>January 23rd 17</u> | | | | | | | | | |
| | | | | | | | | | Embarked for <u>St John's train to Halifax</u> <u>17th 17</u> <u>Embarked for</u> <u>St. Catharines</u> <u>1-6-17.</u> <u>since Battle 2-7-17.</u> <u>Embarked for</u> <u>St. Catharines for demobilization</u> <u>30-1-1919.</u> <u>Arrived</u> <u>17th 1919.</u> <u>Demobilization</u> <u>St John's</u> <u>11-3-1919</u> |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Total Service forfeited as above..... | | | | | | | | | |

Total Service towards Engagement to 11-3-1919 (date of discharge) 2 years 48 days
 " " " Pensions " " " " " " " " " " " "

C.R. 3441

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

The discharge of the undernoted on Demobilization has
been CONFIRMED by Officer i/c Records on 11/3/19.

#3441 Pte. Herbert LeGrow.

C.R. 3441

Extract from Daily Orders West 12 Unit The Depot Hill.
Regt. St. John's, 12-2-13.

The indicated returned from Germany and reported to
Depot 7-2-13.

Registered on A/C of Demobilization.

3441 Pte. Herbert LeGrowp

C.R. 3441

Extract from Memorial Roll of the Royal Nfld. Regt.
Embarked by S.S. Corsican, Jan/130th, 1919.

3441Legrow.

C.R. 3441

Extract from Nominal Roll of the Royal Field. Regt.

24-1-19.

The undermentioned who was transferred from
B.E.F. to the 2nd Bn., Winchester, awaiting repatriation.
19-1-19.

3441 Pte. H. LeGrow.

C.R.3441

Extract from Nominal Roll of Draft No.25 Embarked Southampton 11/6/17
from 2/1st Newfoundland Regiment Newton-on-Ayr, to 1/1st Newfoundland
Regiment B.E.F.

3441 Pte. LeGrow, H.

MP.

10
C.R. 3441

Extract from Nominal Roll, embarked St. John's per S.S. Florizel

17/3/17

3441 Pte. H. LeGrwo.

3441

C.R.

Extract from Daily Orders Part 11 Unit the Royal Nfld.
Regt., St. John's, Jan. 23rd, 1917.

3441 Pte; Herbert LeGrow.

Attached to the strength from Jan. 23rd, 1917.

C.R. 3441

Le grow. #

P.R.O.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 34451 Rank Private Name Lelyrow, H.
 Intended place of residence 3 George St St John's
2. Occupation Stone Cutter
 Classification of soldier E. Medical Category A.I.
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 FEB 25 1919

Date

W. H. Lelyrow 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. SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT.

Place and date ST. JOHN'S

25-2-19

H. Lelyrow
 Signature of soldier

W. H. Lelyrow Capt
 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

25. 2. 19.

H. Lelyrow
 Signature of soldier

W. H. Lelyrow Capt
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 23-1-17 No of days on Military
 Discharged from service 25-2-19 Plus 14 days Service 778 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

Date FEB 25 1919

R. H. Lelyrow Capt
 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 March 11/1919

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

22 B 2079/1152

9
28
11
48

No. 3441 Rank PL Name N. Selgrov

| | | | | |
|----------------|------|-----|-------|-----------|
| Pay | F.A. | Wkr | Total | N.V. 2/73 |
| 1.00 | 10 | | 1.10 | <u>CH</u> |
| Less Allotment | | | .60 | |
| Net Rate | | | .50 | |

| DEBITS | Date | £ | s | d | CREDITS | Period | | Days | Rate | £ | s | d |
|---|--------------------|----------------|-----------|------------|------------------------|----------|---------|------|-----------------|-----|----|---------|
| | | | | | | From | To | | | | | |
| Balance | | | | | Balance | | | | | | | 10 10 1 |
| Acquittance Rolls | 16/9/10 | 16 | 19 | 10 | Pay @ Net Rate | 22-12-17 | 26-9-18 | 279 | 50 ^d | 139 | 50 | 28 13 4 |
| Hospital Advances | | | | | <i>R.A. 14 days</i> | | | | 1/9 | | | 1 4 6 |
| A.B. 64. 50 hrs - | 1/16/5 | 1 | 16 | 5 | <i>from R.A.C. 1/9</i> | 27-9-18 | 9-10-18 | 13 | 50 | 650 | | 1 6 9 |
| P.&.R.O. Payments | | | | | <i>£ 21-11-5</i> | | | | | | | |
| <i>18-16-6</i> <i>CH</i> <i>26-9-18</i> <i>38-16-6</i> | <i>cheque 8874</i> | <i>26/11</i> | <i>20</i> | <i>00</i> | <i>+ 10-0</i> | | | | | | | |
| | <i>4029</i> | <i>7-10-18</i> | <i>2</i> | <i>152</i> | <i>£ 2-18-2</i> | | | | | | | |

~~£ 407-11~~
41-14-8

Witness _____

Home

No. 1062/K4/P&A

N.F.P./80.

From: NEWFOUNDLAND

CHIEF PAYMASTER & OFFICER I/C RECORDS.
NEWFOUNDLAND CONTINGENT,
58 VICTORIA STREET,
To: Officer Commanding,
1st Bn. Royal Newfoundland Rgt
B.E.F.

Chief Paymaster & O.i/c Records,
Newfoundland Contingent,
58, Victoria Street,
London, S.W. 1.

16th. January, 1919

28 - 1 - 1919

Subject: 3441 Pte. H. Legrow.

ANSWER.

With reference to the following telegram (520) from the Hon. Minister of Militia. received

3441 Pte H. Legrow

Pay to 3441 Legrow - £2:0:0

*This man has gone to
Manchester en route to Newfoundland*

Kindly advise whether this amount should be remitted to you for payment to this Soldier, retained to credit of his account; or otherwise dealt with.

Please
S.G. Matthews **LIEUT. COL**
COMMANDING 1st Bn. ROYAL NEWFOUNDLAND REGIMENT.

for
S.G. Marshall
Chief Paymaster & O. i/c Records.

Received by Mr. Legrow
28/1/19

March 11, 1919

#2441 Pys. Herbert LeGrow,
#3 George St.,
City

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 1152."

Yours truly,

Captain,
Paymaster "O.I/c Records"

Enc'l. 1.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. 5044 Rank Plr Name H. Kearrow A.
 Date of Enlistment 3-1-17 Address St. John's District St. John's
 Occupation Harbour Pilot Classification for Discharge F-1 Medical Category F-1
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

| | | | | |
|----------------|---------------|--------------|----------------|---------------|
| N.F. P/36..... | B 268..... | B 121..... / | N.F. Med..... | D.F. 1..... / |
| B 178..... | W 3494..... | B 122..... / | Board 1st..... | " 2..... |
| B 178a..... / | D 400A..... / | B 1915..... | do 2nd..... | " 3..... 5 |
| 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... 22-2-19

W. M. M. Capt.
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

H. Kearrow

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$6.00
- (b) Clothing Supplied Joseph A. Kearrow

Date 5-2-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. to his home
at and Release Certificate No. 1213 issued.

Date 25-2-19

J.H.S.
C. D. Dicks Capt.
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection
therewith settled. He has received pay and allowances to 11-3-19

Date 25-2-19

W. H. M. Capt.
Depot Paymaster.

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT.

Discharge approved for 25-2-19

Forwarded with following documents to O.C Discharge Depot.

| | | | | | | | |
|-----------|--------|--------|---|-----------|--------|---|----------|
| N.F. P 36 | B 268 | B 121 | / | N.F. Med | D.F. 1 | / | |
| E 178 | W 3494 | B 122 | / | Board 1st | " 2 | / | <u>3</u> |
| R 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 | X | | " 6 | | |
| B 179c | B 120 | M 93 | | | | | |

Date 25.2.19

C. D. Dicks Capt.
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 FEB 25 1919

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

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

Date

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

MEDICAL HISTORY

Surname Le Grow

OF
Christian Name Herbert

Table I.—GENERAL TABLE.



Birthplace:—Parish

County

| | SPECIAL RESERVE. | | REGULAR ARMY. | |
|---|--|------------------------|---|------------|
| | Right | Left | Right | Left |
| Examined | on <u>23</u> day of <u>Jan'y</u> 191 <u>7</u> at <u>St Johns N.F.</u> | | on _____ day of _____ 191____ at _____ | |
| Declared Age | <u>18</u> years — days | | _____ years _____ days | |
| Trade or Occupation | <u>Marble Cutter.</u> | | | |
| Height | <u>5</u> feet <u>8</u> inches | | _____ feet _____ inches | |
| Weight | <u>126</u> lbs. | | _____ lbs. | |
| Chest Measurement | Grith when fully expanded ... <u>35</u> inches | | _____ inches | |
| | Range of Expansion .. <u>3</u> inches | | _____ inches | |
| Physical Development | | | | |
| Vaccination Marks | Arm | | | |
| | Number | <u>2 scars</u> | | |
| When Vaccinated | <u>10 yrs ago.</u> | | | |
| Vision | R.E.—V= | <u>6/6</u> | R.E.—V= | |
| | L.E.—V= | <u>6/6</u> | L.E.—V= | |
| (a) Marks indicating congenital peculiarities or previous disease | (a) | | (a) | |
| (b) Slight defects but not sufficient to Cause rejection | (b) | | (b) | |
| Approved by (Signature) | <u>T. W. Burden</u> | | | |
| (Rank) | <u>Lieut</u> | | | |
| | Medical Officer. | | Medical Officer. | |
| Enlisted | at <u>St Johns N.F.</u> on <u>23</u> day of <u>Jan'y</u> 191 <u>7</u> | | at _____ day of _____ 191____ | |
| Joined on Enlistment | Corps. <u>3/1 Nfld Regt</u> | Regtl. No. <u>3441</u> | Corps. | Regtl. No. |
| Transferred to | | | | |
| Became non-effective by | on _____ day of _____ 191____ | | on _____ day of _____ 191____ | |
| (Signature) | | | | |
| (Rank) | | | | |

Civil Re-establishment Committee



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

To work as Stone Cutter

H. Leeson

Signature of Man.

Chas. W. Coffin

Signature of the Vocational Officer or his Representative.

Reg. No. *3441*

Place

St. Johns

Date

25/2/19

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The Royal Newfoundland Regiment

Class for Demobilization —

E.

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

18.2.19

Regimental No. *3441*.....

Name

Les. Grant

Herbert

Sti

Address

Present Medical Category

A1

Recommended for:—

(a) Immediate discharge

(b) ~~Standing Medical Board~~

Members of Board

R.H. Lant Capt.

O.C. Discharge Depot.

H. Paterson

Senior Medical Officer

B.W. Burden

M. O. Depot



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 *LeGraw. Herbert.*

Regiment from which discharged *Royal Newfoundland*

Regimental number *3441.*

Intended address *St. John's.*

Height on discharge *5* Feet *4"*

Color of hair on discharge *Light Brown.*

Complexion *Fair.*

Color of eyes *Grey.*

Descriptive Marks _____

Figure on discharge *Medium*

Christian name of Father *Joseph.*

Christian name of Mother *Laura.*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *St. John's. 24-3-1900.*

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) *Herbert LeGraw*

Station *St. John's.*

Date *18-2-19.* (Rank) *N/C*

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 _____

Date _____

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claim 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 & RECORDS OFFICE, ST. JOHN'S.

Christian names... *Norbert* 2. Surname... *LeGrow*

3 Rank... *Private* 4 Regt. No... *344*

5 Address in full to which future payments of gratuity are to be forwarded... *3 George Street St. Johns*

6. Date of enlistment in the Regiment... *25/Jan/17*

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

... *Mrs. Joseph LeGrow*

8. Relationship of such dependents... *Mother*

9. Address in full, of such dependents... *No. 3 George St*

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 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... *Overseas*

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. *No*.....

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *No*.....

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *No*.....

(b). If so, was such reversion in consequence of misconduct or inefficiency? *No*.....

19. Are you now serving in the Regt.? *No*..... If not give:- (a) Date of discharge. *11/3/19*..... (b) Reason for discharge. *Mobilisat*.....

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.
Belgum, France,.....

21. (a) Are you receiving treatment from the Civil Re-Establishment Com.?
(b). If (b), are you in receipt of full pay and allowances from that Committee. *No*.....

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

No 3441
-3- Pte Herbert LeGros
703 George St
City

Signature of Applicant:

Place of Residence:

Declared before me at: *St. John's Infldo*

This *Fifteenth* day of *March* 19*.57*

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

August Munn

POST DISCHARGE PAY.

| Date paid | Paid Soldier | Paid Dependent | War Service Gratuity | Net amount due |
|-----------|-----------------|-------------------|-------------------------|-------------------|
| | | | <i>5.40</i> | <i>350.00</i> |
| | | | | |
| | | | | |

Certified Correct. Paymaster.

Paid from 1-2-18 to 11-3-19
\$ 267 ³³/₁₀₀

SEPARATION ALLOWANCE.

Claimant... *Legrow, Laura (mother)*
On account of... *Arthur Legrow* No. *3441* Rank... *Pte*

Decision... *Approved*
Payable from Feb. 1st 1918 - date of
commencement of husband's total
incapacity

Date... *14/5/19*

J. W. Bennett
W. F. Reudace Lieut. Col.
A. M. Bowley, Capt.

Instructions.....
.....
.....
.....

Allotment of *60¢* per day payable to *Mrs Joseph Legrow*
his *mother* from *1/3/17* to *11/3/19*
Discontinued on account of *being Discharged*
L. Pike, Sgt.

NOTICE.

ROYAL NEWFOUNDLAND REGIMENT.
(Separation Allowance Branch)

LMOTHER.

THIS STATUTORY DECLARATION is to be filled in correctly in every detail, and a complete reply must be given to each question.

Each statement is considered as being made on Oath, and the form is to be signed before a Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace and returned to:

"The Paymaster"
Separation Allowance Branch,
St. John's, Nfld.

1. Name in full of soldier. Rank. Reg't. or Unit. Regt. No.
Herbert Le Gons Private Royal Nfld. 3rd Lt

2. Age of soldier. Married or Single.
19 Single

3. Name in full of mother. Age. Occupation. Permanent Address.
Laura Le Gons 45 3 George St.

4. Give name of your husband. Age. Occupation Where Employed.
Joseph Le Gons 57 Labourer. Sub^v unemployed

5. If your husband is not supporting you state the reason.
Sub unemployed

6. If your husband is a chronic invalid and totally incapacitated, state nature of malady. (A Medical Certificate must be enclosed with this document stating from what date husband has been totally incapacitated, and for how long incapacity is likely to continue.)

7. If you are a widow, state date and place of death of your husband.

8. Have you married again since death of above mentioned husband?

9. Names of your other children. Address in full. Age. Occupation Married or Single.

*None
sent to see on the plane
see Mr. St. Dennis*

*Laura Le Gons
unemployed*

10. State amount earned by (a) Yourself
(b) Your husband.
11. State amount and source of any other income.
12. State value of real property belonging to you and your husband.
13. State value of personal property belonging to you and your husband. *Two Hundred Dollars*
14. If husband is dead state value of real and personal property left by him. ✓
15. Actual amount contributed by soldier during the year prior to enlistment. ✓
16. Was this amount contributed weekly or monthly. ✓
17. Did this amount include payment of soldier's board, etc. ✓
18. State your son's trade or occupation prior to enlistment. *(apprentice) Stone Cutter*
19. State amount of his wages per week. *Four Dollars*
20. State name and address of his last employer. *J. M. Taylor, Wackerworth St*
21. State amount of monthly support from son since enlistment. *\$18.60⁰⁰*
22. State amount of allotment received by you from son since enlistment. *Eighteen Dollars & Sixty Cents*
23. State from what date did you receive allotment? *April 6/17*
24. Actual amount contributed by other children. Weekly Monthly. *none*
25. Are any of these children in the employ of you or your husband? *no*

*E. W. Forbes
Pastor Grace St Methodist Church*

26. If not receiving support from other children, state cause. Explain Fully.

Have no other

27. With whom are you residing at present?

✓

28. Have you made a previous claim for Separation Allowance. If not, why? Give particulars.

Thought it was only for married persons while some accrued some.

29. Are you already in receipt of Separation Allowance from any source? If so, how much?

none

30. Are you already in receipt of any payment from any Patriotic Fund? If so, how much.

none

31. Was the soldier at the time of his enlistment an employee of the Nfld. Government.

no

32. In what capacity and in what place?

✓

33. Is he in receipt of a salary as such while serving in the Royal Newfoundland Regiment? If so, how much.

✓

I herewith make this solemn Declaration conscientiously believing the same to be true and knowing it to be of the same force and effect as if made under Oath and in Virtue of the Evidence Act.

Signature of Applicant... *Laura L. G. Grew*

Place of Residence... *3 George St. St. John's*

Declared and subscribed before me at.....

this..... *14th*..... day of..... *May*..... 1919

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

[Signature]

This application must be signed by two responsible parties one of whom must be a Clergyman, the other a representative of your local Patriotic Fund Committee, certifying that to the best of their knowledge after careful investigation the above statements are correct and the soldier first above mentioned is the sole support of the applicant.

Signature of Clergyman.....

Signature of member of the Patriotic Fund Committee.

Glenn L. Paterson.

MEDICAL CERTIFICATE

For Information of Separation Allowance Department.

1. Name and regimental number of soldier in respect of whom Separation Allowance is claimed) #3441 Herbert Lee Grow
2. Name and age of said soldier.) Herbert Lee Grow Age 1942
5. Is said ~~father~~ a chronic invalid and totally incapacitated.) Yes.
4. Of what nature is disability?) Persecution Anemia
5. From what date has this total incapacity been existent?) 1 yr.
6. How long is total incapacity likely to continue and what will be the effect on earning power.) Always unable to work
7. If not totally incapacitated by what per cent in your opinion is capacity for work reduced and from what date.) 100/100
8. Are you the regular attending physician?) Yes.
9. Relationship to soldier of applicant?) ~~son~~ father

I certify that the above statements are correct.

John A. Lee Place,

Feb 10 1942 Date.

W. W. [Signature]
Physician.

May 26, 1919

Mrs. Laura LeGrow,
43 George Street,
City.

Dear Madam:-

Referring to your application for Separation Allowance, I beg to state that same has been granted to you, payable from February 1st 1918, which is the date, according to the Doctor's statement, from which your Husband's total incapacity can be considered to have commenced. I enclose cheque for Two hundred and sixty-seven dollars and thirty-three cents (\$267.33) in payment of same.

Yours truly

Captain,
Paymaster & O. i/c Records

June 21 1920

Major Howley
O. I. C. Records

Please pay to H. LeGrow, 3441
the sum of sixty dollars
in payment of P. & A. Bonus
and charge same to Civil Re-establishment Committee

\$60.00

Pension

Nil

| | |
|-------------|-------|
| ACCOUNT | |
| CHK. NO. | 39696 |
| INL. LEDGER | |
| PAY LEDGER | |
| GEN. LEDGER | |

F. C. A.

H. LeGrow

W. W. Mitchell

Vocational Officer

Casualty Form—Active Service.

Regiment or Corps *2nd New Zealand*

Rank *Pte* Surname *L. Brown* Christian Name *Hubert*

Religion *Methodist* Age on Enlistment *18* years *6* months

Enlisted (a) *19 Jan* Terms of Service (a) *Duration* Service reckons from (a) *23.1.17*

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

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

Occupation *Marble Cutter* Signature of Officer

| Date | Report 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 <i>Shampton</i> | <i>11.6.17</i> | |
| | | | Disembarked... <i>Rouen</i> | <i>12.6.17</i> | |
| | | | Joined Battalion | <i>2 JUL 1917</i> | <i>8 2.13</i> |
| | | | <i>WITH .En. 30-13-17.</i> | | |
| | | | <i>Leave to U.K. from 24-9-18 to 8-10-18</i> | | |
| | | | <i>Transferred to U.K. for repatriation</i> | | <i>Cor 2. 3/4</i> |
| | | | | | <i>Capt Lt Col</i> |
| | | | | | <i>in Office of the Infantry Section G.H.Q. 3rd Echelon.</i> |

(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, &c.

The Royal Newfoundland Regiment

3441

DEMOBILIZATION OF

Reg. No. 3441 Rank Pr. Name L. H. Green A.
 Date of Enlistment 2.5.1.17 Address St. John's District St. John's
 Occupation Marshall Classification for Discharge E1 Medical Category H1
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

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

Date 22.2.19.....

W. H. Green Capt
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

H. Green

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$65.00.....

(b) Clothing Supplied Joseph H. Snow Point.....

Date 25-2-19.....

O/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. _____ to his home
at _____ and Release Certificate No. 1213 issued.

Date 25-2-19

J.H.S.
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 11-3-19

Date 25-2-19

W. H. W. Capt.
Depot Paymaster.

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT

Discharge approved for 25-2-19

Forwarded with following documents to O.C Discharge Depot.

| | | | | | |
|-----------|--------|--------|-----------|--------|--------|
| N.F. P 36 | B 268 | B 121 | N.F. Med. | D.F. 1 | S.M.B. |
| 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 25.2.19

W. H. W. Capt.
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

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

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

Date March 1/19/19

W. H. W. Capt.
Depot Paymaster.

218 A

Feb. 18

9

7 p. M. Capt -
for Depot

- 1. 1/2 Underswear
- 1. 1/2 Shirt
- 1. 1/2 Boots
- 1. 1/2 Socks
- 1. 1/2 Hat Bag

for 3441 P. L. G. A.



EXTRACT FROM STATEMENT OF A/C TO 30-1-19 FROM PAY
& RECORD OFFICE LONDON

3441 Pte. LeGrow, H. Dr. Bal. £3:2:10 plus 1 day's pay (31-1-19)

This is transferred to Pay Office from 14-3-19

Reg. No. *34441* Rank *Pte* Name *Lelgrow Hubert*
Attested Address *3 George's St.*
Allotment Allottee
Date of Allotment Returned from Overseas
Embarked for Overseas Cause

FEB 22 1919 PASSED TO DEMOBILIZATION OFFICE

25.2.19

DISCHARGE APPROVED ON DEMOBILISATION.

Reg. file
3441

April 8, 1937

Dear Sir,

I beg to acknowledge receipt of your letter of March 11th. enclosing affidavit from Herbert LeGrow re the Victory Medal, which is herewith returned to you.

I am to request that you please advise Mr. Legrow to forward this affidavit to the War Office, Whitehall, London, England together with a Money Order covering cost of the medal, when same will be forwarded to him. The cost of these medals is \$1.00 each.

Yours very truly,

W. V. Warren,
Clerk i/c War Pensions Records.

Mr. W. R. Martin,
Secretary, St. John's Branch,
Great