

The Association F.S.G. 853

853

ROYAL NEWFOUNDLAND REGT.

Discreased 29-12-53

1914-1918

P.W. 12.3.49 D

SN 65-01-6

J. E. LeMessieur

C.R.

853

Pr. 10.



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 853

Name in full Francis Earnest Le Mesurier Age 35
Masamir Terrance St Johns

Address

~~Marrried~~ Single Height 5. 5 1/2 Weight 132

Color Dark Hair Brown Eyes Light Gray

Other distinguishing marks Letter F tattooed on left arm.

Nearest relative wife

Address Masamir Terrance

Dependents wife & three children

Occupation clerk Present Wage 500⁰⁰ per annum

Previous service

Decorations

General Remarks

Date of Enlistment 30th Dec. 1914

I, Francis Earnest Le Mesurier, do sincerely promise and swear that I will be faithful and bear true allegiance to His Majesty, and that I will faithfully serve His Majesty in any place where I may be needed (or in the Colony of Newfoundland, as the case may be), against all His enemies and opposers whatsoever, according to the condition of my service.

Francis Earnest Le Mesurier

Declared before me this 1st day of Jan. 1915

Eucliyre

Recruited by W. H. ...

DESCRIPTIVE REPORT ON ENLISTMENT.

(To correspond with Entries on the Medical History Sheet.)
Applicable to all ranks.

Reg. No. 853

Name Francis Ernest Lemoisurier

Apparent age 35 years months. Height 5 feet 5 1/2 inches.

Chest measurement { Girth when fully expanded inches.
Range of expansion inches.

Distinctive marks Color: Dark, Hair: Brown, Eyes: Light Gray

Other distinguishing marks: Letter "F" tattooed on left arm

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Mrs ---- Lemoisurier, Masonic Terrace, St. John

Relationship Wife

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	Regt. or Depot	Promotions, 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>30/12/14</u>									
Joined at <u>St. John's</u> on <u>30th December '14</u>									
		<u>Debility</u>		<u>26/11/15</u>					
		<u>Embarked SS Stephens St John's 20/7, Embarked H.C.F. 20/12</u>							<u>Disembarked Nov.</u>
		<u>and entrained for Cairo 31/7. Embarked for Gallipoli 13/8</u>							<u>Landed Suva Bay night of 19-20 Sept 15. Admitted S.H. C.C.S. DEBILITY 26/11/15</u>
		<u>Embarked West Sep 14/16</u>							<u>With 13 Battalion 16/76</u>
		<u>Admitted 29 C.C.S. 4.S.W. Leg 2-7-16</u>							<u>Wounded 1-7-16</u>
		<u>Discharged from Hospital 25-9-16 to Newfoundland for discharge 27-9-16</u>							<u>Admitted Hants 4/76</u>
		<u>Discharged medically unfit 20-2-17</u>							
		<u>Reinstated for special duty India 30-11-17.</u>							
		<u>10 Sept. 1-1-1918</u>							
		<u>Demobilization St John's 30-4-19</u>							
Total Service forfeited as above									

Total Service towards Engagement to 20-2-17 (date of discharge) 2 years 53 days

Reinstated 30/7 Pension Demobilized 30-4-19 (") 1 " 152 "

3 205
365.

COPY.



To be used only for Special Reserve Recruits, and for Special Reserve recruits enlisting in the Regular Army.

MEDICAL HISTORY

Surname

LeMessurier

OF

Christian Name

James Ernest

Table I.—GENERAL TABLE.

Birthplace:—Parish

County

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	at	on	at
Examined	29 day of Dec 1914	<i>S. Johns</i>	day of	191
Declared age	30 years	days	years	days
Trade or occupation	<i>clerk</i>			
Height	5 feet 5 1/2 inches		feet	inches
Weight	132 lbs.			lbs.
Chest Measurement { Girth when fully expanded	30 inches			inches
	Range of expansion ...	3 1/2 inches		inches
Physical development	Right	Left	Right	Left
Vaccination marks { Arm ...				
	Number ...			
When vaccinated				
Vision	R.E.—V.= 1905		R.E.—V.=	
	L.E.—V.= 16/9		L.E.—V.=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<i>Clay Macpherson</i>			
(Rank)	Capt. Medical Officer.			Medical Officer.
Enlisted	30 day of Dec 1914	<i>S. Johns</i>	day of	191
Joined on enlistment	Corps	<i>Infantry Regt</i>	Corps	
	Regtl. No.	<i>853</i>	Regtl. No.	
Transferred to				
Became non-effective by	on	day of	191	on
(Signature)				
(Rank)				

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

Name of hospital	Admitted to hospital			Discharged from hospital			Disease	Number of days in hospital	Remarks 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
	Day	Month	Year	Day	Month	Year				
3 rd London Gen Hosp Wandsworth	4	7	16	27	9	16	G.W. TX, severe	86	G.S.W. Left thigh. Improvement. Wound healed.	H. Stogau Capt A.M.C.

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

Date	Brief details, and signature
74/2	
64/2	
	Vacc.
	Fit for Foreign Service

Table IV.—SERVICE TABLE.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation
St. John's Nfld	Dec 30/15	20/Mar/15			
St. Stephen's	26/Mar/15	22 " 15			
St. John's Nfld	22/Mar/15	30/Mar/15			
Edinburgh Castle	30/Mar/15				

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 853 Rank Serjt Name Lemesurier J.

Intended place of residence St Johns

2. Occupation clerk

Classification of soldier B Medical Category 6

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 Comanding Discharge Depot
The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date ST. JOHN'S.

Signature of soldier

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

Signature of soldier

Signature of witness

*Discharged papers forwarded to Pay & Records office
16th 7th Working @ Job Brook*

STATEMENT OF SERVICE

7. Enlisted for service 30-11-17 No of days on Military

Discharged from service 10-4-19 Plus 14 days Service 517

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 R.H. Lait Capt.
Officer Commanding Discharge Depot
The Royal Newfoundland Regiment.

Date APR 16 1919

Date

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place St Johns, Nfd M. Bowley Capt.
Officer i/c Records
The Royal Newfoundland Regiment

Date April 30/1919

A.F.B 2079/2140

*3/231
131
31
30
21*



Medical Report on an Invalid.

NOTES:—

- (a) This report is solely concerned with Pensions.
- (b) A single copy only is required.
- (c) "Aggravated" being now a technical term, carrying right to pension, discrimination in its use is essential.
- (d) Be as brief as possible compatible with lucidity.
- (e) Avoid dubiety—"perhaps" "possibly" "might" and the like.
- (f) Only sufficient clinical data need be given to establish the degree of disability and assist the Board in arriving at a decision.

Statement of Case

Station

Date

M. John M.
Jan 20/17

- | | |
|---|--|
| 1. Unit <i>1st. Newfoundland</i> | 5. Age last birthday. <i>37.</i> |
| 2. Regimental No. <i>853</i> | 6. Enlisted on <i>30 Dec., 1911.</i> |
| 3. Rank <i>Pte</i> | at <i>St. Johns</i> |
| 4. Name. <i>Lemercier, Francis Ernest</i> | Former trade or occupation <i>clerk.</i> |

8. Disability

Gluc. severe up high.

9. History

Active Service France July 11, 1916

10. What is his present condition?

(This is the important question. Be brief—the clearer the case the less need be written. Read note f above.)

Wound Healed.
Has pain below hip.
walks with cane.

11. Was sanatorium operation advised and refused? ✓

12. Do you recommend discharge as permanently unfit?

Yes.

Signature

J. W. Burden

Rank or Qualification

Lieut.

Remarks if any by Officer i/c Hospital.

Place

.....

Signature

.....

Date

.....

Rank

.....

Opinion of the Medical Board.

In para. 13, the President should write "may" or "cannot" at x
Erase inapplicable words.

13. For pension purposes, the disability x *may* be considered as ~~aggravated by~~ due to
- (a) Service during this war.
 - (b) ~~Climate.~~
 - (c) ~~Ordinary Military Service~~

Remarks if any:—

*Large scar over left buttock (point of exit) & small
Scar on part of hip. Splinter of bone was worked out in
hospital. Been deaf since July 1916. Believed due to explosion of
shell near him after receiving his wound.*

14. At present his capacity for earning a full livelihood in the general labor market is lessened by:—
(Here the president should write in Total, 3-4, 1-2, or 1-4).

Remarks if any:—

25%

15. The refusal of operation ~~sanatorium~~ is:—

- (a) Reasonable. ✓
- (b) Unreasonable.

Remarks if any:—

16. We recommend discharge from ~~retention in~~ the Army

Remarks if any:—

Signatures.

R. S. Keas

President

J. P. ...

Penclau ...

Place

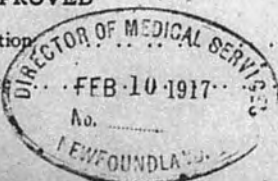
Date

St. John's
Jan 10 1917

APPROVED

Station

Date



Chas. Macpherson
Administrative Medical Officer. *Major*

G. N. MURPHY, M.D., C.M.

160 DUCKWORTH STREET.

OFFICE HOURS
10-12 A.M.
2-4 P.M.

St. John's, Jan 30 1917

Report. 853 Mc Lennan

Right ear $\frac{2}{10}$ Left ear $\frac{3}{10}$

after inflation with Eustachian
catheter. Quaternary might
improve this.

G. N. Murphy

S E C O N D B O A R D

Form Z179 N. M. D.

Report of Medical Board.

Station	St. John's, Nfld.	Date	APRIL 1st., 1919.
No. and Rank	853 - PRIVATE	Age	40 Height 5'7"
Name	LOMESSURIER FRANCIS	Complexion	FAIR
Unit	Royal Newfoundland	Eyes	BLUE GREY Hair DARK BROWN
Address	MASONIC TERRACE		
Former Trade	CLERK		
Enlisted at	ST. JOHN'S · On 30/12/14	(The Board will please note how the soldier's appearance corresponds with above description).	
Disease or Disability	Original	GUN SHOT WOUND LEFT THIGH, SEVERE.	

Subsequent

Present Condition (Compare with previous Board)

Hearing much improved. Leg condition greatly improved. Does not need a stick

Wounded soldier new for ...

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? *20% for 200 months sp*

Recommendation of Medical Board

*Discharge permanently
will benefit by further treatment
2 years*

Members of Board

Cluny Macpherson Major

[Signature]
[Signature]
[Signature]

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 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 *Le Messurier Francis Ernest.*

Regiment from which discharged *1st. Newfoundland*

Regimental number *853.*

Intended address *Moscow Terrace St Johns*

Height on discharge *5 Feet 7*

Color of hair on discharge *Dark Brown*

Complexion *Fair*

Color of eyes *Blue Grey*

Figure on discharge *Medium*

Christian name of Father *Peter*

Christian name of Mother *Annis Fannin*

Wife's maiden name in full *Helena Mosey*

Date and place of marriage *July 20. 1900. Gouardo. Wfed.*

Christian names of children *Flora, May, Avis, George, Victoria*

Place and date of soldier's birth. *Twillingate 20 May 1879.*

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) *Francis Ernest Le Messurier*

(Rank) *Pte*

Station *St Johns*

Date *Jan 20 1917*

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.

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

Station *St Johns*

Date *Jan 20/17*

To be used only for **SPECIAL RESERVE** recruits, and for Special Reserve recruits transferring into the Regular Army.

MEDICAL HISTORY



Surname Le Messurier OF Christian Name James

Table 1.—GENERAL TABLE.

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>29th</u> day of <u>Dec</u> 191 <u>4</u>		on _____ day of _____ 191	
	at <u>St John's</u>		at _____	
Declared Age	<u>35</u> years		_____ years	
Trade or Occupation	<u>clerk</u>		_____	
Height	<u>5</u> feet	<u>5 1/2</u> inches	_____ feet	_____ inches
Weight	<u>132</u> lbs.		_____ lbs.	
Chest Measurement	Girth when fully expanded... <u>31 1/2</u> inches		_____ inches	
	Range of expansion... <u>35</u> inches		_____ inches	
Physical Development	_____		_____	
Vaccination Marks	Arm	_____	Right	Left
	Number	_____	_____	_____
When Vaccinated	_____		_____	
Vision	R. E.—V=	<u>4/6</u>	R. E.—V=	_____
	L. E.—V=	<u>4/9</u>	L. E.—V=	_____
(a) Marks indicating congenital peculiarities or previous disease	(a) _____		(a) _____	
	(b) _____		(b) _____	
Approved by (Signature)	<u>Clayton Macpherson</u>		_____	
(Rank)	<u>Capt.</u>		_____	
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St John's</u>		at _____	
	on <u>30th</u> day of <u>Dec</u> 191 <u>4</u>		on _____ day of _____ 191	
Joined on Enlistment	Corps. <u>1st Nfld Regt</u>	Regtl. No. <u>853</u>	Corps. _____	Regtl. No. _____
Transferred to	_____		_____	
Became non-effective by	_____		_____	
	on _____ day of _____ 191		on _____ day of _____ 191	
(Signature)	_____		_____	
(Rank)	_____		_____	

Table II.—Only for admissions to hospital or to the sick list in the 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 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
	Day	Month	Year	Day	Month	Year				
8 th LONDON GENERAL HOSPITAL WANDSWORTH.	4	7	16	27	9	16	G.S.W. R 1. severe	80.	G.S.W. left thigh. Improvement. Wound healed.	H. Jagan (Capt R.A.M.C.)

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

Date	Brief Details, and Signature
	<p><i>T.V.</i> <u>2</u></p> <p><i>OW V</i> <u>2</u></p> <p><i>Vacc.</i></p> <p><i>Fit for Foreign Service</i></p>

TABLE IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation.	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
<i>Sr. John's Wfid.</i>	<i>Dec 20 15</i>	<i>20 Mar. 15</i>			
<i>T.S. "Stephano"</i>	<i>20 Mar 15</i>	<i>22 Mar 15</i>			
<i>T.S. "Orduna"</i>	<i>22 Mar 15</i>	<i>30 Mar 15</i>			
<i>Edinburgh Castle</i>	<i>20 Mar 15</i>				

C.R. 853

Army

Casualty Form Active Service.

Regiment or Corps Newfoundland

Regimental No. 850 Rank Pvt Name LeMessurier

Enlisted (a) _____ Terms of Service (a) 1 year Service reckons from (a) _____

Date of promotion to present rank _____ Date of appointment to lance rank _____ Numerical position on roll of N.C.Os. _____

Extended for home Re-engaged Aug 18/15 Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked St. John's, NFLD.		20/3/15.	
		Disembarked Alexandria		1/9/15.	
		Embarked for Gallipoli		13/9/15.	
17/12/15.	54 C.C.S.	Admitted, Debility	54th.C.C.S.	26/11/15.	C 4994.
do	15th.Stat. Mudros.	do	15th.Stat. Mudros.	30/11/15.	C 5013.
23/1/16	and with Battalion	Embark'd Port Suez	and	14.3.16	B 213
20.4.16	29th Ad. G. S.W. Leg. Siph	Disembk'd MARSEILLES	France	22.3.16 27/6	62 11931
"	John Pryde	Transferred to England	14 Gen H. Warriner	4 JUL 1916	W 3083 CPTAIN. INFANTRY RECORDS G.H.Q.; 3 RD ECHELON.

(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) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

C.R. 853

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P.&.R.O.
July 14th. 1916.

853, Pte F. E. LeMessurier. ✓

1 Newfoundland R. "D" GSW L Hip Sev. To Eng. per H.S.
Jan Breydel 3x 14 Gen. Hos. 4th. July 1916.

C.R. 853

Extract from Casualties received from Pay & Record
Office, London.

Admitted to Srd L.G.H. July 4th, 1916.

853 Pte. F. McMessirier.

GSW L. Hip.

C.R. 853.

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P & R.O.

June 15th. 1916.

853, Pte F.E. LeMessurier. ✓

1/Newfoundland R. GSW. Ankle Severe Adm. 14 Gen. Hos.

Wimereux 4th. July 1916.

C.R. 853

Extract of Casualty List received from Pay and Record Office London
Dated Dec. 27 1915.

853 Pte. ~~E~~ Messurier

~~2nd Bn.~~ 1st. Newfoundland Regt. Sick Slight, Adm. 15 S.H. Mudros E. 30th.
November 1915.

C.R. 853

Extract from Casualties received from Pay & Record Office,
London, dated December 23, 1915.

#853 Pte. E. LeMessurier.

Debility severe.

Admitted 54 C.C.S. Sulva 26th November 1915.

C.R. 853

Extract of Cablegram received from London, dated
December 25, 1915.

#853 Pte. LeMessurier. ✓

Debility.

Seriously ill at 54 Casualty Clearing Station,
Suvla November 26th.

C.R. 853

Extract from Medical Board held on Tuesday April 1st
1919.

853 Bgt. F. LeMessurier.

2nd Board.RE-ATTESYED. recommended Discharge from the
Army as Permanent.y Unfit. Requires Treatment for ear. of Ears.

C.R. 853

Extract from Daily Orders part II,
Regt St. John's dated May 2nd., 1919.

The discharge of the undernoted
demobilisation has been CONFIRMED
by Officer i/o Records on ³⁰⁻⁴⁻¹⁹ 29-4-19.

#853 Pte. Frank LeMessurier.

C.R. 853

Extract from Daily Orders part II,
Regt St. John's dated May 2nd., 1919.

The discharge of the undernoted
demobilisation has been CONFIRMED
by Officer i/o Records on ³⁰⁻⁴⁻¹⁹ 29-4-19.

#853 Pte. Frank LeMessurier.

C.R. 853

Extract from Daily Orders Part 11 Unit The Royal Newfound-
land Regt. St. John's, April 21st, 1919.

The discharge of the undernoted on demobilization has been
APPROVED ^{by} O.C. DISCHARGE DEPOT from noted date.

853 Sgt. LeMessurier†F.

16-4-19.

C.R. 1853

Extract from Nominal Roll of "D" Co. 1st Bn. Rifle Regt
Embarked at Devonport for Active Service, 30-8-15.

853 Pt e. F. LeMessurier.

Disembarked Alexandria 31-8-15 Proceeded to Abhassia,
Cairo, same date. Embarked Alexandria for Gallipoli
13-9-15.

C.R. 853

Extract from Manual Roll of Draft submitted for
Overseas per S.S. Stephens March 20th 1918.

Mr. G. Elton.

853 Pte. E.F. LeMessurier.

C.R. 853

PERSONAL EFFECTS

Received from Militia Department

One Kit Bag #853 Pte. F. E. LeMessurier.

Signed

F. E. LeMessurier

Date

June 22/18.

RECEIPT FOR ISSUE OF
RIBAND OF 1914-15 Star.

C.R. 853

I certify that I have received an issue
of 3 inches of Riband of 1914-15 Star.

Name *Hole Messurer*

Date *March 19/19*

Place *St Johns*

C.R. 853

Extract of Daily Orders part 11, from Unit 4/1st
Royal Newfoundland Regiment, Headquarters, dated
January 7, 1918.

#833 Pte. E. LeMessurier.

To be promoted to the Rank of Corporal with effect
from January 1st, 1918.

853

C.R.

Extract from Daily Orders Part II Unit The Royal Wfld.
Regt., Nov.30th, 1917.

853 Pte. F.E. LeMessurier.

Re-attested for Special Duty at Militia Dept. with effect
from Nov.1st, 1917.

C.R. 853

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

cpl
#853 ~~Pte.~~ F.E. LeMessurier, discharged Feb. 20th 1917, Medically
unfit

C.R. 853

Copy of Cablegram to Governor St. John's Nfld from P.&.R.O. 30th Sep 16.

853, Pte LeMessurier.

Left Liverpool on Scandinavian 27th. Sept. Passage has been provided
to Quebec. On Furlough.

C.R. 853

Extract from Roll of Officers
and N. C. O.'s and men discharged
from the Royal Newfoundland
Regiment.

<u>Regtl.#</u>	<u>rank</u>	<u>name</u>	<u>date</u>	<u>reason</u>
8 53	Cpl.	Lemessurier F.E.	30/2/17	Med. Unfit.

C.R. 853

Extract from Telegram received from London, dated
September 30, 1916.

Leaving Liverpool. Scandinavian, September 27th
passage has been provided, Quebec, following on
furlough:

#853 Pte. LeMessurier.

C.R. 853

Extract o Casualties received from Pay & Record Office,
London, dated July 31, 1916.

(Extract from Army Form B 213, from O.C. 1st.Nfld.Regt.
dated 11/7/16.)

#853 Pte. F. LeMessurier. ✓

Wounded in Action 1/7/16.

C.R. 853

Copy of Cablegram to Governor St. John's Nfld.
from P.&R.O. 6/7/16.

853, LeMessurier. ✓

At Wandsworth Gunshot Wound Left Hip.

C.R. 853

Extract of Casualties recieved from Pay & Record
Office, London, dated July 6, 1916.

No. 853, Private F. LeMessurier ✓

Hun Shot Wound L. Hip

Admitted 3rd London General Hospital, Wandsworth.

July 4, 1916.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 26th. 1919.

A complete reply must be given to every question in this Declaration there must be no blanks and no dashes, if any questions are not applicable the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C

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

Christian name. *Francis Ernest* 2. Surname. *Le Messurier*.....

3. Rank. *Sgt*..... 4. Regt. No. *853*.....

5. Address in full to which future payments of gratuity are to be forwarded. *Masonic Terrace City*.....

6. Date of enlistment in the Regiment. *Dec. 30th. 1914*.....

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

Helena Le Messurier.....

8. Relationship of such dependents. *Wife*.....

9. Address in full of such dependents. *Masonic Terrace City*.....

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 Hfld. If so, give dates and particulars of such service. *Overseas*.....

12. Give total length of time which you served on active service, whether in Hfld. or Overseas. *2 years & 53 Days*.....

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

*Discharged on Feb 20 1917.
Reattested for work in Militia Dept
under same Regt No. on Nov 1 1917.*

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 £2 ²⁵/₁₀₀
from the Militia Office*

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

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.

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.? *No* ... If not give? - (a) date of discharge

March 1919 (b) Reason for discharge *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.

Gallipoli 1915 France Beaumont Hamel 1916

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

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

Signature of Applicant: *J. E. Le Messurier*

Place of Residence: *St Johns n.f.*

Declared before me at: *St John's*

This *16th* day of *April* 19*19*

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of affidavits.
Chas. O'Neill Couray Not. Pub

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
			<i>6mes</i>	<i>60000</i>

Certified Correct.

Paymaster. *[Signature]*

ORIGINAL.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.
[251] W7020/296 250m 10/16a 28 58

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121
29.

Regiment of *Newfoundland*

Number of Sheet

Signature of O. C. Company

J. March
C.O.

Regimental Number and Name		Enlistment	Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<i>853 Coe-Messurier F.</i>	Age on <i>35</i> years - months	<i>clerk</i>	
Joined	Date	Place and Date of Enlistment	Religion	
Joined	Date	Period of { with Colours <i>3 2051</i> years. with Reserve <i>3 365</i> years	Place of Birth	
Joined	Date		<i>S. John's</i> <i>Dec 30 1914</i>	



Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<i>Radeys Becks</i>	<i>9 9/15</i>	<i>Pte.</i>		<i>Taking drinks</i>	<i>Daley</i>	<i>3 days p.c.B.</i>	<i>10 9/15</i>	<i>Lt J. March</i>	<i>745</i>
				<i>Medically Unfit</i>	<i>M. O'Brien</i>	<i>20 2/17</i>	<i>2 53/365</i>		
				<i>Reattested</i>	"	<i>30 11/17</i>	}	<i>1 54/365</i>	
				<i>Demotitized</i>	"	<i>30 4/19</i>			

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 853 Rank Serjt Name Lemesurier Francis
 Date of Enlistment 30-11-17 Address St Johns District St Johns
 Occupation Clerk Classification for Discharge B Medical Category E
 Recommendation S.M.B. Permanently unfit Disability Rating 20% 6 mos
 Passed to Demobilization Officer with following documents:—

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122	Board 1st	" 2	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		" 6	
B 179c	B 120	M 93			

Date 8-11-19 O. C. Discharge Depot H. News

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

*Demobilizing to take up employment with
 Job Pros Coy etc.*

Particulars passed to Vocational Officer for information and action.

Date 19-4-19

2. Clothing.

Certified that Clothing Regulations have been complied with:—

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

Date..... 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. issued.

Date *19. 4. 19* *J.A. Lawrence*
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
Depot Paymaster.

Discharge approved for *16. 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* *W. H. Sait 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 *APR 16 1919* *R.H. Sait Capt.*
O. C. Discharge Depot.

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

Date *April 22, 19* *James Math 2/pt*
for O.C. Records

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 853 Rank Serjt Name Lemessurier Francis
 Date of ~~Enlistment~~ Reactivated 30.11.47 Address St Johns District St Johns
 Occupation Clerk Classification for Discharge B Medical Category E
 Recommendation S.M.B. Permanently unfit Disability Rating 20% 6 mos
 Passed to Demobilization Officer with following documents:—

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122	Board 1st	" 2	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		" 6	
B 179c	B 120	M 93			

reactivated forms!

Date 8.1.19 H. M. S. H.
 P. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

*Demobilized to take up employment with
 Job Bros & Coy Ltd.*

Particulars passed to Vocational Officer for information and action.

Date 19-1-19

2. Clothing.

Certified that Clothing Regulations have been complied with:—

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

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

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. to his home at 25 and Release Certificate No. 2146 issued.

Date 19-4-19 Demobilization Officer *J.A. Crawford*

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 Depot Paymaster.

Discharge approved for 16-4-19

Forwarded with following documents to O.C Discharge Depot.

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

Date 19-4-19 Demobilization Officer *R.H. Sait Capt.*

APPROVED.

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

Eligible for War Service Gratuity
R.H. Sait Capt.

Date APR 16 1919 O. C. Discharge Depot.

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

Date

The Royal Newfoundland Regiment

Class for Demobilization:—

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

Reattached

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

Regimental No.

Name

Address

Present Medical Category.....

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

(b) Standing Medical Board.....

Members of Board {

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

J. C. Patterson
Senior Medical Officer

Geo. Birdeu
M. O. Depot



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, *Francis E. Le Messurier*, Regl. No. *513*

hereby agree, until further notification by me, and in similar official form to make an Allotment of _____ Dollars and _____ Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons concerned, viz. :

Allotment begins *March 1917*

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<i>3217</i>	<i>Wife</i>	<i>Edna (Mrs.)</i>	<i>Le Messurier</i>	<i>80</i>
Total Allotment, \$				<i>80</i>

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, countersigned by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

Sig.) *[Signature]*
Officer Commanding
Company
1917

(S) *Francis E. Le Messurier*
(Rank) *1st Lt*

S. }
A. }

SEPARATION ALLOWANCE.

NEWFOUNDLAND REGIMENT.

- 1. Name of Soldier in Full (Surnames first) *Francis Ernest LeMessurier*
- 2. Rank and Regimental Number *Pte. 853*
- 3. Date of Enlistment *Dec 30th 1914*
- 4. Full Name of Wife *Helena LeMessurier*
- Widowed Mother
- Children's Guardian

5. Address

6. State ages of Children: Girls under 17 = *3* *Victoria* Boys under 16 = *1* *George*

7. With whom do your Children reside? *3 with self & 1 with uncle whom*

8. Amount of Allotment *80⁰ per day*. Name of Allottee *Helena LeMessurier*

10. Address *Masonic Terrace*
city

Allotment 80⁰ per day

Ch. no. 1583

11. From what date is Allotment effective?
12. Date of Marriage *July. 28th 1910.*
13. Date Marriage Certificate examined by Paymaster *Dec. 10th 1917*
14. Date Birth Certificates (in case of guardian) examined by Paymaster.....
15. If soldier is sole support, does Statutory Declaration accompany this application? *yes*
no
16. Have you made a previous claim for Separation Allowance? Give particulars.....
-
17. Is Separation Allowance being paid on your account to any person?.....
18. Were you at the time of enlistment an employee of the Newfoundland Government? In what capacity, and in what place? *no*
19. Will you be in receipt of a salary as such, while serving? If so paid, how much per month?.....
20. Name of Corps prior to enlistment in the Nfld. Regt.

I hereby certify that the above is a true statement.

F. L. Messure

Name of Soldier.

Signature of Officer forwarding this application.

Unit.....

Date.....

NEWFOUNDLAND.

CLAIM FOR PENSION

PENSION NO. _____

EUROPEAN WAR.

NOTICE:—This Certificate is to be completed and returned IMMEDIATELY you receive it or payment of your pension will be delayed.

Name in full I hereby solemnly declare that my name is Francis Ernest
Le Messurier and that I was
Fill in rank and force a (rank) Private (1st. Nfld. Reg.) in 1st. Nfld. Regt.
(R.N.R.) and that I am entitled to a Pension from the Colony of Newfoundland
Fill in place giving full postal address I am residing at (Street and number) Marion Terrace
Town of St. John's Nfld.
and request my next pension cheque be sent to this address.
Francis Ernest Le Messurier SIGNATURE or mark of Pensioner.
Witness Chas. C. C. C.

It is only during the months January and July that the following certificate MUST be completed.

This is to certify that the foregoing declaration and signature (or mark) were made by the above named pensioner in my presence this _____ day of _____ 19____, and I believe him to be the person he represents himself to be

To be signed by a Police, Magistrate or Notary Public, or Justice of the Peace, or Clergyman.

Signature.

Rank or position.

Postal Address.

Add any Remarks _____

\$ _____

Le Comte de S.

853

Gay Sept.

Sept 25th

To be Discharged from Hospital ~~to-morrow.~~

Unit.	Squadron, battery, or company.	Regtl. No.	Rank and Name.	
18 th W.F.O.		853	Pte.	LeMessurier.

TO OFFICER $\frac{1}{2}$ RECORDS
N.F.L.D. 5th Victoria St

In accordance with your letter
dated Sept 23rd this man is instructed
to report to you today.
He has been furnished with a warrant
to Victoria

Norain Jagan Capt R.A.M.C.(F)

Registrar, R.A.M.C.T.
5th London General Hospital,
WANDSWORTH, S.W.

CERTIFICATE TO BE SIGNED BY THE SOLDIER ON DISCHARGE

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

Place St. John's P.M. H. Le Messurier Sig. of Sold'r
Date March 1st 17 C. Fisher Sig. of Witness

Admitted 4/7/16

2891



Army Form W. 3016.

No. _____

Date Sept 25th 1916

(1) To the Officer i/c Records,

58 Victoria St., S.W.

(Station).

(2) The Officer Commanding,

Depot,

Ayr. (Station).

(3) The Paymaster,

58 Victoria St., S.W.

(Station).

Regimental No. 853

Rank and Name Pte Le Messurier, F.
~~1st Newfoundland Regt~~

Regiment or Corps 1st Newfoundland Regt

has been granted a furlough from instructed to report to
////////////////////

His address while on leave will be:
////////////////////

O. i/c Records,

58 Victoria St., S.W.

in accordance with instructions received Sept 25rd.

Furnished with a warrant to Victoria.

I consider he is fit for ^(Duty) ADGM duty.
////////////////////

(Sgd) Horace Fagan, Capt, R.A.M.C.T.,
Registrar, R.A.M.C.T.,
for Officer in charge 3rd London General Hospital,

Wandsworth, S.W. (Station).

* Strike out that which is inapplicable.

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

Nov 30/17

#853

Plt J.E. Messurier
I.....discharged Soldier of the 1st, NEWFOUNDED
REGIMENT, hereby agree to serve in the 1st, NEWFOUNDLAND REGIMENT
for Home Service as long as my services shall be required; under
the same terms and conditions under which I was serving before
discharge.

J.E. Messurier Plt

Plt J.E. Messurier

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

J.J. O'Keefe Capt

Deput,
1st Newfoundland Regiment,
St. John's, Nfld.

April 30, 1919

#853 Sergt. Frank LeMessurier,

Masonic Terrace, off Gower St.,
City.

Dear Sir:-

Please find enclosed "Discharge Certificate
No. 2140."

Yours truly

Paymaster & O./c Records Captain,

STATEMENT OF ACCOUNT

No. 853

Name L. Messner & Co.

Date	Particulars	Ch. No.	Dr.		Cr.		Bal.
1918	Brought forward		415	34	415	14	20
Jan 1	By Pay 31 days @ 2 1/2%				65	10	64 90
15	To Pay	3209	19	50			45 40
31	" "	3643	20	80			24 60
	To allotment 31 days @ 80¢		24	80			20
Feb 28	By Pay 28 days @ 2 1/2%				58	80	58 60
15	To Pay	425	19	50			39 10
28	" "	4390	16	90			22 20
	To allotment - 28 days @ 80¢		22	40	2		20
March 31	By Pay 31 days @ 2 1/2%				65	10	64 90
15	To Pay	4796	19	50			45 40
31	" "	5151	20	60			24 80
31	To allotment		24	80			0
April 30	By Pay 30 days @ 2 1/2%				63	00	63 00
15	To Pay	3659	19	50			43 50
30	" "	6076	19	50			24 00
30	To allotment						0
	To days @ 80¢		24	00			0
			667	14	667	14	0

Signed H. W. [Signature]

STATEMENT OF ACCOUNT

No. 853

Name L. Messurier 76

Date	Particulars	Ch. No.	Dr.		Cr.		Bal.
	Brought forward		667	14	667	14	—
May 31	By Pay 31 days @ 2 1/2%				65	10	65 10
15	To Pay	6728	19	50			45 60
30	" "	7187	20	80			24 80
31	To allotment		24	80			—
June 30	To Pay 30 days @ 2 1/2%				63	00	63 00
15	To Pay	7668	19	50			43 50
30	" "	8107	19	50			24 00
	To allotment		24	00			—
July	By Pay 31 days @ 2 1/2%				65	10	65 10
15	To Pay	853	19	50			45 60
	To allotment		24	80			20 80
30	" Pay	4	20	80			—
August 31	By Pay 31 days @ 2 1/2%				65	10	65 10
15	To Pay	1125	19	50			45 60
30	" "	1779	20	80			24 80
31	To Allotment		24	80			—
			925	44	925	44	—

Signed A. Looney Esq

STATEMENT OF ACCOUNT

No. 853

Name Le Messurier J.E

Date	Particulars	Ch.No.	Dr.		Cr.		Bal.
	Brought forward		925	44	925	44	0
Sept 30	By Pay 30 days @ 2 ⁰⁰ / ₁₀₀				63	00	63 00
	30 days @ 20 ⁰⁰ / ₁₀₀				4	40	67 40
30	To Pay allotment	2601	43	30			24 10
			24	00			10
Oct 31	By Pay 31 days @ 2 ³⁰ / ₁₀₀				71	30	71 40
15	To Pay						48 80
31	To allotment	4006	22	60			24 00
30	To Pay						<u>0</u>
		4073	24	00			
Nov 30	By Pay 30 days @ 2 ³⁰ / ₁₀₀				69	00	69 00
15	To Pay						46 40
30	"	5398	22	60			24 00
	To allotment		22	40			<u>0</u>
			24	00			
Dec 31	To Pay 31 days @ 2 ³⁰ / ₁₀₀				71	30	71 30
15	To Pay	6752	22	50			48 80
22	"	7354	24	00			24 80
31	To allotment						<u>0</u>
			24	80			
			1204	44	1204	44	0

Signed A. J. Looney

STATEMENT OF ACCOUNT

No. 853

Name L. Messner J. E.

Date	Particulars	Ch. No.	Dr.		Cr.		Bal.	
1919			1204	44	1204	44		
Jan	By Pay 31 days @ 2 1/2%							
15	To Pay				80	60	80	60
31	" "	1290	22	50			58	10
	20 allotment		33	30			24	80
			24	80				
Feb 28	By Pay 28 days @ 2 1/2%				72	80	72	80
15	To Pay		27	00			45	80
28	" "		23	40			22	40
	Allotment 28 days		22	40				
March 31	By Pay 31 days @ 2 1/2%							
15	To Pay				80	60	80	60
30	" "		27	00			53	60
	Allotment 31 days		28	80			24	80
	Staff Pay		24	80				
	" "		270	00				
					270	00	270	00
April 30	By Pay 30 days @ 2 1/2%							
30	To allotment 30 days				88	50	88	50
21	To Pay		24	00	24	00	64	50
			64	50				
			1796	94	1796	94		

Signed A. Joany Lm

STATEMENT OF ACCOUNT

No. 853

Name Le Meunier J.C.

Date	Particulars	Ch. No.	Dr.		Cr.		Bal.	
	Brought forward		1796	94	1796	94	0	
	clothing allowance				55	00	35	00
	Ward Service Proratedy 6 mo @ 100.00				600	00	635	00
Jan'y 31	To Pay	9056	35	00			600	00
May 1	" "	18708	70	00			530	00
	Separation allowance	3388	30	00			500	00
June 1	To Pay	21570	70	00			430	00
"	S. A.	3801	30	00			400	00
July 1	To Pay	210	70	00			330	00
"	S. A.	4223	30	00			300	00
Aug 1	To Pay	5291	70	00			230	00
"	S. A.	4628	30	00			200	00
Sept 1	To Pay	7392	70	00			130	00
	do	4925	30				100	00
Oct 1	To Pay	12694	57	05			42	95
	do	5154	30	00			12	95
	Bonus		12	95			0	
			2431	94	2431	94	0	

Signed A. J. Swaney Adm

16
11
1920

STATEMENT OF ACCOUNT

No. 853.

Name Le Mesurier F.C.

Date	Particulars	Ch.No.	Dr.	Cr.	Bal.
Sept 29	Balance due by ^{Dr} _{to Cr}				
	^{20. 7. 4 1/2}			1 79	1 79
Oct 9	Pay to date			11 00	12 79
31	" " "			35 20	47 99
Nov 30	" " "			55 50	103 49
Dec 31	" " "			57 35	160 84
Jan 31	" " "			57 35	217 89
Feb 20	" " "			37 00	254 89
					255 19
Nov 24	To Pay	22	15		240 19
Sept 30	" allotment 1 day @ 80		80		239 39
Oct. 31	" do 31 "		24 80		214 59
Nov 30	" do 30 "		24 00		190 59
Dec 2	To Pay				170 59
12	" "	58	20 00		155 59
31	To allotment 31 days @ 80	66	15 00		130 79
23	To Pay	78	15 00		115 79
			139 40	255 19	115 79
			255 79		79 6r

Signed Af Loany Adm

STATEMENT OF ACCOUNT

No. 853

Name Le Messurier J.E.

Date	Particulars	Ch.No.	Dr.	Cr.	Bal.
	Brought forward.		255 100 139 40		
Jan 5	To Pay.			255 19	115 79
20	" "	88	10 00		105 79
31	To Allotment 31 day @ 80¢	100	15 00		90 79
			24 80		65 99
Feb 5	To Pay.				53 99
10	" "	114 116	12 00 10		43 99
	Bonus.				
	Lab. clothing			12 95	56 94
				25 00	81 94
Feb 16	To Pay.	128	82 14		— 20
1917 Nov. 30	By Pay 30 day @ 2.00/22				
Dec 31	" 31... do			60 00	59 80
				62 00	121 80
Nov 30	To Pay.	1635	60 00		61 80
Dec 15	" "	2255	18 00		33 80
31	" allotment		24 80		19 00
19	To Pay	2313	19 20		20
			415 24	415 14	20 00

Signed A. J. Swaney sm

Pvt S. S. Scandinavian

Form P/K.

Embarked 'Scandinavian'

Enrol 27-9-16

1ST NEWFOUNDLAND REGIMENT.



Statement of Account of No. *853 Private Frank Le Mansuet*

D Company. From *5/8* to *29/9* *56* (both days inclusive)

Date	Pay Book Col. No.	Particulars	No. of days.	@ per day.	Dr.		Cr.		Dr.			Cr.		
					\$	c.	\$	c.	£	s.	d.	£	s.	d.
		Cr.												
1		Pay	<i>56</i>	<i>1 00</i>			<i>56 00</i>							
2		Field Allowance	<i>56</i>	<i>10</i>			<i>5 60</i>							
3		Other Allowances												
4		Total Pay & Allowances ...					<i>61 60</i>							
5		Converted into Sterling @ \$4.86 $\frac{2}{3}$										<i>12</i>	<i>13</i>	<i>2 1</i>
6		Balance from previous Pay Book										<i>10</i>	<i>19</i>	<i>2 1/2</i>
7		Total Credits (in £ s. d.) ...										<i>£ 23</i>	<i>12</i>	<i>4 1/2</i>
		Dr.												
8		Forfeited Pay												
9		Allotments	<i>56</i>	<i>10 44 80</i>										
10														
11		Total Stoppages (in \$ c.) ...					<i>44 80</i>							
12		Converted into Sterling @ \$4.86 $\frac{2}{3}$										<i>9</i>	<i>14</i>	<i>1 1</i>
13		Fines												
14		Clothing and Necessaries												
15		Arms and Accoutrements												
16														
17														
18		Total Stoppages (in £ s. d.) ...												
19		Casual Payments												
20		1st Payment												
21		2nd "												
22		3rd "												
23		Total Cash Payments												
24		Balance from previous Pay Book										<i>14</i>	<i>0 11</i>	<i>1</i>
25		Total Stoppages & Cash Payments										<i>23</i>	<i>5 0</i>	<i>1</i>
26		Final Cash Payment												
27		Balance (debit)												
28		" (credit)											<i>7 4 1/2</i>	

Sept 25
26

PAY & RECORD OFFICE,
58, VICTORIA STREET,
LONDON, S.W.

£ *23 12 4 1/2* | *23 12 4 1/2*

CHECKED.
[Signature]

Oct 6
1916

NEWFOUNDLAND CONTINGENT

Admitted 4. 7. 16.

Army Form W. 3016.

No. _____

Date Sept. 25th 1916

6

(1) To the Officer i/c Records,

58 Victoria St

S W (Station).

(2) The Officer Commanding,

Newfoundland Contingent

Avr - (Station).

(3) The Paymaster,

58 Victoria St.

S.W. (Station).

Regimental No. 853.

Rank and Name Pte Le Messurier 4.

Regiment or Corps 1st Newfoundland Contingent

has been granted ~~leave~~ ~~through from~~ ~~instructed~~ to report to

His address while on leave will be _____

Officer i/c Records

58 Victoria St. S W.

in accordance with instructions recd. Sept 23rd

Furnished with a warrant to Victoria

Horace Tapan Capt R.A.M.C.(F)

Officer in charge

Registrar, R.A.M.C.I. Hospital,

3rd London General Hospital,

WANDSWORTH, S. W.

(Station).

* Strike out that which is inapplicable.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office.

Ru SS Scandinavia

Embarked Scandinavian



Form P/K.

Liverpool 27-9-16

1ST NEWFOUNDLAND REGIMENT.

Statement of Account of No. *533 Pte Frank Le Mesurier*

D Company. From *5/8* to *29/9* *56* (both days inclusive)

Date	Pay Book Col. No.	Particulars	No. of days.	@ per day.	Dr.		Cr.		Dr.			Cr.		
					\$	c.	\$	c.	£	s.	d.	£	s.	d.
		Cr.												
1		Pay	<i>56</i>	<i>1</i>				<i>56 00</i>						
2		Field Allowance	<i>56</i>	<i>10</i>				<i>56 00</i>						
3		Other Allowances												
4		Total Pay & Allowances						<i>61 60</i>						
5		Converted into Sterling @ \$ 4.86 2/3										<i>12</i>	<i>13</i>	<i>21</i>
6		Balance from previous Pay Book										<i>10</i>	<i>19</i>	<i>2 1/2</i>
7		Total Credits (in £ s. d.)										<i>£23</i>	<i>12</i>	<i>4 1/2</i>
		Dr.												
8		Forfeited Pay												
9		Allotments	<i>56</i>	<i>80</i>	<i>44</i>	<i>80</i>								
10														
11		Total Stoppages (in \$ c.)			<i>44</i>	<i>80</i>								
12		Converted into Sterling @ \$ 4.86 2/3										<i>9</i>	<i>4</i>	<i>1</i>
13		Fines												
14		Clothing and Necessaries												
15		Arms and Accoutrements												
16														
17														
18		Total Stoppages (in £ s. d.)												
19		Casual Payments												
<i>Spt</i> 20	<i>25</i>	1st Payment						<i>6 00</i>	<i>00</i>					
<i>26</i>	<i>26</i>	2nd "						<i>8 00</i>	<i>11</i>					
21		3rd "												
22		Total Cash Payments												
23		Balance from previous Pay Book										<i>14</i>	<i>0</i>	<i>11</i>
24		Total Stoppages & Cash Payments										<i>23</i>	<i>5</i>	<i>0</i>
25		Final Cash Payment												
26		Balance (debit)												
27		" (credit)												
28														

PAY & RECORD OFFICE,
58, VICTORIA STREET,
LONDON, S.W.

£ 23 12 4 1/2

CHECKED
[Signature]

Oct 6 1916

NEWFOUNDLAND CONTINGENT

NEWFOUNDLAND CONTINGENT.



MEMORANDUM.

From
 PAY & RECORD OFFICE,
 58, VICTORIA STREET,
 LONDON, S.W.
 22nd September, 1916.

From
 Medical Officer i/c
 3rd London General Hosp.,
 Wandsworth,
 S.W.

HA/ww

SUBJECT: No. 853, PTE. LEMESSURIER

REPLY

Reference Nos.

Dated 23rd Sept 1916. 191

The steamer by which the above man is booked to sail is the "Scandinavian" from Liverpool on the 27th inst. He should report at this office on Monday, the 25th, when all instructions will be given him.

With reference to minute opposite, I beg to state that Pte Lemessurier has been instructed to report to you ~~as~~ soon after 10.0 am on Monday next the 25th inst.

A. C. Munnell
 Capt.,
 Paymaster & O. i/c Records.

H. Logan
 Capt R.A.M.C.T.
 for Comd'g 3rd London General Hospital



Temp. a/c.

CO. D

NO. 883 RANK P/S

NAME J. L. Messner

ALLOTMENT 80

Date	P.M.As. etc	Amount	PAY	Amount
	Dr. Balance		Credit Balance <u>17/3</u> 191	11 8 11 1/2
	<u>Hospital</u>		Exchange " _____ 101	
	A.B. 64		<u>PAY @ NET RATE</u>	
			From <u>18/3</u> To <u>27/9 - 194</u> days	11 19 21
	<u>AcqRolls.</u>	9 25 1	@ <u>30</u> \$58201	
		14 5 62	From _____ To _____ days	£ 29 8 1 1/2
			@ _____	15 2 5 1/2
			From _____ To _____ days	5 5 8 1/2
		6 00	@ _____	
		15 2 5	From _____ To _____ days	
			@ _____	
			From _____ To _____ days	
			@ _____	

P. & R.O.
Uniform.

25/9/6

CIRCULAR LETTER

St. John's,

March 13th 1919.

Riband of 1914-15 Star.

Please complete the following claim and return it to this Department. If possible, call at Room No. 3 for your issue.

W. F. Readell

Lieut. Colonel.

Chief Staff Officer.

CLAIM FOR ISSUE OF RIBAND
of 1914-15 STAR.

Department of Militia,
St. John's.

I hereby make claim for issue of Riband of 1914-15 Star.

I certify that I am entitled to this issue, having served on* *Gallipoli* from *Sept 19* 1915 to *Dec 31st* 1915.

(Date) *19/3/19* (NO) *853*... (Rank) *Sgt.*... (Name) *F. G. L. Messurier*
(Place) *St. Johns*.....

*Fill in theatre of War where you served in Gallipoli, Mudros, Lemnos, or Western Egyptian Frontier.

April 19th, 1919

From Adjutant,
Discharge Depot

To Paymaster and Officer i/c Records,
Militia Department

853 Sgt. LeMessurier

Marginally noted man's discharge on demobilization has been approved by O.C. Discharge Depot for 16-4-19. He is at present working with Messrs. Job Bros & Co. and he is now referred to you for adjustment of pay and allowances.

He has received no payments from the Depot and his account is kept in your Department.

CCD/C

April 19th, 1919

From Adjutant,
Discharge Depot

✓ To 853 Sgt. LeMessurier,

Demobilization

Enclosed herewith you will please find Release Certificate #2146, showing your discharge approved from 16-4-19. You will please apply to Paymaster and Officer i/c Records for adjustment of your account.

GCD)C

July, 20th., 1918.

Major Montgomerie,
District Officer Commanding,
City.

Re- #853 Cpl. F.E. Lemessieur

Dear Sir:-

I have been advised that this man is sick at his home, Bay Bulls Road, and requests the services of a Doctor.

Will you kindly arrange to have a Doctor call to see him at the earliest opportunity.

Yours faithfully,

Capt. & Paymaster.

NEWFOUNDLAND.

CLAIM FOR PENSION

PENSION No. 73

EUROPEAN WAR.

NOTICE:—This Certificate is to be completed and returned IMMEDIATELY you receive it or payment of your pension will be delayed.

Name in full

I hereby solemnly declare that my name is Francis E. Le Messurier

and that I was

Fill in rank and force

a (rank) Private (1st. Nfld. Reg.) 1 Nfld Reg
in or (R. N. R.)

and that I am entitled to a Pension from the Colony of Newfoundland

Fill in place giving full postal address

I am residing at (Street and number) Masonic Terrace St. John's (No. Number)

Town of St. John's

and request my next pension cheque be sent to this address.

Francis E. Le Messurier SIGNATURE or mark of Pensioner.

Witness

It is only during the months January and July that the following certificate MUST be completed.

This is to certify that the foregoing declaration and signature (or mark) were made by the above named pensioner in my presence this 5th day of July 1917, and I believe him to be the person he represents himself to be.

To be signed by a Police, Magistrate or Notary Public, or Justice of the Peace, or Clergyman.

C. C. C. C. Signature.
Rank or position.
Postal Address.

Add any Remarks

\$

PAY LIST.

to

191

Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

No. *853*

Rank *Private*

Name *Frank Le Messurier.*

Died (a)

at

on the

of

191

Deserted at

On Fuling to

on the

26 of Sept

1916.

I Certify to the correctness of above in every particular.

Embarked 'Scandinavian'

FROM Liverpool *27-9-16*

Commanding Squadron, Troop,
Battalion or Company.

STATEMENT OF ACCOUNT.

[FORM 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month.....				Balance Cr. last month..... <i>4/8/16</i>	10	19	2 1/2 ✓
	Cash issues (Date of each issue to be stated)				Pay <i>56</i> days at <i>1-10</i> from <i>18</i> to <i>29/9</i> <i>#61.60 ✓</i>	12	13	2 ✓
					Proficiency, Service or good conduct pay			
					days at from _____ to			
					Messing allowance days at			
					from _____ to			
					Clothing and kit allowance			
					Amount produced by the sale of Necessaries			
					Personal Clothing and Effects from Form 2...			
					Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
					Deferred Pay or Gratuity.....			
					Balance due by the Paymaster	7	4 1/2 ✓	
					Balance due to the Paymaster.....			
						£ 23	12	4 1/2 ✓

I hereby Certify that the above account is correct in every particular, ~~and that the debtor balance of £~~ *is correctly chargeable against the Public* CONTINGENT.

Dated at

this

day of

191

NEWFOUNDLAND CONTINGENT

J. H. Marshall
PAYMASTER & OFFICER IN CHARGE

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with A.F.B. 2090 or Army Form O. 1815.

(b) Words in Italics to be struck out when there is no debtor balance.

W 14c66-626-300M. 4/15. (C. & Co., Grange Mills, S.W.)

Forms O. 1625 27

CHECKED
M.H.
6/10/16



~~XXXXXXXXXXXX~~

Francis LeMessurier

#853

Service required.....Final date of discharge.

Please quote above reference
and date of this letter in
your reply.



DEPARTMENT OF
PUBLIC HEALTH AND WELFARE

ST. JOHN'S,
NEWFOUNDLAND.

21 May 1946

The Auditor
Dept. of Public Health & Welfare.

Re: 853 - Francis E. LeMessurier

The service documents in respect of
the above-named certify that he was discharged
medically unfit 20th. February, 1917.
He was re-attested for special duty
30th. November, 1917 and demobilized on
30th. April, 1919.

HWI—D.

In reply please quote
Date and Initials

COMMISSION OF GOVERNMENT



NEWFOUNDLAND

Department of Public Health and Welfare

ST. JOHN'S

9 March 1949

TO WHOM IT MAY CONCERN:

#853 - Francis E. LeMessurier

This is to certify that the above named
enlisted in the Royal Newfoundland Regiment on the
30th. December, 1914, was discharged on the 20th. February,
1917, re-attested for Special Service on the 30th.
November, 1917, discharged on the 30th. April, 1919.
Total length of service - 3 years 205 days.

A handwritten signature, possibly 'S', written in ink.

Kindly address all Communications to the Department, not to Individuals



C.R. 853

DEPARTMENT OF MILITIA

ADDRESS REPLY TO
DEPARTMENT OF MILITIA
AND QUOTE NO.

ST. JOHN'S, NEWFOUNDLAND,

July, 20th., 1918.

Major Montgomerie,

District Officer Commanding,

City.

Re- #853 Cpl.F.E. LeMessurier

Dear Sir:-

I have been advised that this man is sick at his home, Bay Bulls Road, and requests the services of a Doctor.

Will you kindly arrange to have a Doctor call to see him at the earliest opportunity.

Yours faithfully,

*of dep't -
for your attention please*

M. Howley



Capt. & Paymaster.

No. of Paper 1093

PERSONAL EFFECTS.

Name A. Messurier No. 853

Rank Private Regiment THE ROYAL NEWFOUNDLAND REGT.

Article	Where stored	Notified by
<u>K.A. Bag.</u>		
	Final disposal	

Shipped from Depot.

Remarks: — Repatriated
Next of Kin: Wife
Mrs. Messurier.

2892

C.R. 853



CASUALTIES:

No. 853, Pte. Le Messurier has been granted
SPECIAL PERMISSION TO PROCEED TO

NEWFOUNDLAND ~~ON FURLOUGH~~ 27/9/16
for disposal ~~to~~ at Headquarters
HAG

Dated, 28th September, 1916,
Newfoundland Contingent,
Pay & Record Office,
London, S.W.

C.R. 853

NEWFOUNDLAND CONTINGENT.

CABLES AND TELEGRAMS:
"SYNOPTICAL."
LONDON.

TELEPHONE:
VICTORIA 147.

COMMUNICATIONS TO BE ADDRESSED TO THE
PAYMASTER & OFFICER I/c RECORDS.
AND THE FOLLOWING NO. QUOTED:

PAY & RECORD OFFICE,

58, VICTORIA STREET,

LONDON, S.W.,

24th August, 1916.

3492/133

His Excellency,

The Governor,

St. John's, Newfoundland.

Sir,

No. 936, Pte. C. H. Ellis,
No. 855, Pte. F. LeMessurier.

I have the honour to acknowledge two letters addressed to Captain Timewell, who is now away on leave, relating to the above men.

Steps are being taken to have them sent to Newfoundland. It is not yet known whether they will be declared permanently unfit or fit for further duty.

I have the honour to be,

Sir,

Your obedient servant,

H. A. Anderson

for Paymaster & O. i/c Records.

January 20, 1916.

Dear Madam,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that

No. 853, Private Francis E. LeMessurier, who was previously reported with debility serious at Suvla on 26th November, is now reported as having been admitted to Fifteenth Stationary Hospital, Madros East, 30th November, suffering from a slight attack of sickness.

This information has been received by mail.

Yours faithfully,

Colonial Secretary.

Mrs. F. E. LeMessurier,
Masonic Terrace.

L16

December 24, 1915

Dear Madam,

I regret to have to inform you that a report has this day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 853.
Private Francis Ernest LeMessurier, was admitted to
Fifty-fourth Casualty Clearing Station, Suvla, November
26th, seriously ill of debility.

I trust that later reports will bring news of his convalescence.

Any further information received at this Office as to his condition will be at once notified to you.

Yours faithfully,

Colonial Secretary.

Mrs. F. E. LeMessurier,
Masonic Terrace.

C.R. 853

Francis E. LeMessurier was attested for General Service
with the NEWFOUNDLAND REGIMENT on December 30th 1914

Regimental No. 853 was allotted to Pte F. E. LeMessurier

AUTHORITY:

Record Officer

Dept. of Militia,

March 25th, 1919.

C.R.

853

RECEIPT.

I hereby certify that I have received the 1914-1915

STAR.

No 853 Name F. C. Le Messurier

Witness W. Parks

Date 3/12/19

Place St John's

FORM K

Nº 4502



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Francis E. Le Messurier, Regl. No. 853

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person and Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person and Persons concerned, viz :

Allotment begins December 1st - 1917

Table with 5 columns: Identity Certificate No., Whether Wife, Child, other Relative or Friend, NAME (in full), ADDRESS, AMOUNT (each person). Row 1: 3217, wife, Helena (Morse) Le Messurier, Masonic Terrace, 80. Total Allotment, \$ 80.

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, counter-signed by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

Sig.) [Signature]

Officer Commanding Company

(S) Francis E. Le Messurier

(Rank) Pt

Dec 11th 1917



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, *F E Le Messurier*, Regl. No. *853*

hereby agree, until further notification by me, and in similar official form, to make an Allotment of *eighty* Dollars and *eighty* Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and} *one* Person, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and} *or* *one* Persons concerned, viz.:

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<i>881</i>	<i>Wife</i>	<i>M^{rs} Adelaide Messurier</i>	<i>Masonic Terrace</i>	<i>80</i>
Total Allotment, \$				

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, counter-signed by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

<p>(Sig.) <i>[Signature]</i></p> <p style="text-align: center;">Officer Commanding Company <i>St John's</i></p> <p style="text-align: center;"><i>Mar 3rd</i> 1915</p>	<p>(Sig.) <i>F E Le Messurier</i></p> <p>(Rank) <i>Private</i></p>
---	--



THE ROYAL NEWFOUNDLAND REGIMENT
DISCHARGE DEPOT

ST. JOHN'S, NEWFOUNDLAND,

April 19th, 1919

From Adjutant,
Discharge Depot

To Paymaster and Officer i/c Records,
Militia Department

853 Sgt. LeMessurier

Marginally noted man's discharge on demobilization has been approved by O.C. Discharge Depot for 16-4-19. He is at present working with Messrs. Job Bros & Co. and he is now referred to you for adjustment of pay and allowances.

He has received no payments from the Depot and his account is kept in your Department.

*noted
all
a/c*

CCD/C

65/100
[Signature]
Captain
Assistant Adjutant & Paymaster
Discharge Depot-Newfoundland

No.



1ST NEWFOUNDLAND REGIMENT

VOUCHER

In Acct. with F.E. LeMessurier

Voucher No. 30933.

Cheque No. 30933.

Reg'l Ac No.

Name

C.B. Folio No.

Date	Req'n No.	Invoice No.	Particulars.	Amount
May 28	389		Salary to May 31/17.	\$50
				\$ 50 00

CERTIFICATION

Dissectⁿ Sheet No.

Recap. Sheet No. 389

Checked by CCO

PAYMASTER

RECEIPT

May 28th, 1917.

Received from the 1st. NEWFOUNDLAND REGIMENT the sum o
 Fifty ----- Dollars

and ----- Cents in Payment as above stated.

May 1917.

\$ 50.00

[Sig.]

No.



1st NEWFOUNDLAND REGIMENT

VOUCHER

In Acct. with Pte. F. LeMessurier

Voucher No. 28468.

Cheque No. 28468.

Reg'l A/c No. Name

C.B. Folio No.

Date	Req'n No.	Invoice No.	Particulars.	Amount.
Feb. 26	320		Balance of pay to Feb.20/17.	\$44 19
			Bonus 1 week @ \$1.85	12 95
			Clothing.	25
				\$82 14

CERTIFICATION

Dissectⁿ Sheet No.

Recap. Sheet No. 320.

Checked by

M. Howley
PAYMASTER

RECEIPT

February 26th, 1917.

Received from the 1st. NEWFOUNDLAND REGIMENT the sum of
Eighty Two Dollars
and Fourteen Cents in Payment as above stated.

February 1917.

\$ 82.14

[Sig.] *F. Le Messurier*

No.



1st NEWFOUNDLAND REGIMENT

VOUCHER

In Acct. with F. L. LeMessurier.

Voucher No. 1552

Cheque No. 1552

Reg'l A/c No. Name

C.B. Folio No.

Date	Req'n No.	Invoice No.	Particulars.	Amount
Aug 27	49		Salary to 31/8/17.	50 00

CERTIFICATON

50 00

Dissectⁿ Sheet No.

Recap. Sheet No.

Checked by WCB

M. Howley
PAYMASTER

RECEIPT

Aug 27th., 1917.

Received from the 1st. NEWFOUNDLAND REGIMENT the sum of Fifty Dollars

and Cents in Payment as above stated.

Aug 27th., 1917.

\$ 50.00

[Sig.] *F. L. LeMessurier*

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 270⁰⁰/₁₀₀

Apr 4 19 19

Received from the First Newfoundland Regiment
the sum of two hundred ⁰⁰ Seventy Dollars.
~~on account~~ of Pay.
balance

J. H. Levesque

Ch. No. 15114	Initials. J. H.
Pay Ledger 18	Initials. J. H.
Gen. Ledger	Initials.

Regtl. No.

Rank

No. 853.

Rank Sgt

Name Le Messurier F

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 64 ⁵⁰/₁₀₀

April 21 1919

Received from the First Newfoundland Regiment
the sum of Sixty four ⁵⁰/₁₀₀ Dollars.

~~on account~~
balance of Pay.

J B de Messena

Ch. No. 16642	Initials EW
Pay Ledger 18	Initials WJ
Gen. Ledger	Initials

Regtl. No. Rank

[Signature]

No. 853. Rank Sgt

Name Le messurier J.E.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$60.⁰⁰/₁₀₀

Nov. 30th 1917

Received from the First Newfoundland Regiment
the sum of Sixty ⁰⁰/₁₀₀ Dollars.

on account
balance

of Pay. to 30/11/17

J. B. Le Messurier

Ch. No. 1635	Initials. J.W.
Pay Ledger 283	Initials. J.W.
Gen. Ledger	Initials.

Regtl. No. 853

Rank Pte



No. 853

Rank Pte.

Name F. E. Le Messurier

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 35⁰⁰/₁₀₀

January 31 1919

Received from the First Newfoundland Regiment
the sum of Thirty Five ⁰⁰/₁₀₀ Dollars.
~~on account~~
balance of Pay. Clothing
36 Dec Measure

Ch. No.	9056	Initials	RW
Pay Ledger	148	Initials	WX
Gen. Ledger		Initials	

Regtl. No. Rank

Frederick Owen

No. 853.

Rank Sgt.

Name Lemessurier, F