

FIRST NEWFOUNDLAND REGIMENT

	2000 ALESTATION OF	
Lo.	3255. Name Simion hilly Corp	os .
	Questions to be put to the Recruit belove Enlistme	out Lilley
I.	. What is your name? I Bay O	expois
2.	2. What is your full Address?	78.,
	Are you a British Subject?	
	What is your age?	Months
	. What is your Trade or Calling?	
	Are you Married?	
	. Have you ever served in any Branch of His Ma) jesty's Forces, naval or military, if so, which? 7	
8.	Are you willing to be vaccinated or re-vac-	~
9.	Are you willing to be enlisted for General Ser-	~
10.	o. Did you receive a Notice, and do you under- stand its meaning, and who gave it to you?} 10	
11.	Are you willing to serve upon the conditions as embodied in the roll of servi to be signed by you if you are accepted	ce I II.
	driff Landeskingt	SIGNATURE OF RECRUIT.
	OATH TO BE TAKEN BY CECULIT ON ATTESTATION	
bou	at true allegiance to His Majesty King George the Fifth, His Heirs and Successors, und, honestly and faithfully defend His Majesty, His Heirs and Successors, in Persol enemies, according to the conditions of my service.	th, that I will be faithful and and that I will, as in duty in, Crown and Dignity against
18	CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICE	
he	The Recruit above named was cautioned by me that if he made any false answer would be liable to be punished as provided in the Army Act.	to any of the above questions
	The above questions were then read to the Recruit in my presence.	Of
	I have taken care that he understands each question, and that his answer to each	
	replied to, and the said recruit and made and signed the declaration and taken de a this	lyelest
	Signature of Attesting Officer	
	†CERTIFICATE OF APPROVING OFFICER.	
	I certify that this Attestation of the above-named Recruit is correct, and proper	
qui	aired forms appear to have been compiled with. I accordingly approve, and appoint	him to the:
	If enlisted by special authority, such will be attached to the original attestation.	
m	ate191	Approving Officer
Pil		
	† The signature of the Approving Officer is to be affixed in the presence ‡ Here insert the "Corps" for which the Recruit has been enlisted.	

		DESCRIP							
Name	-/	Rinco	~ / ₁	7					
Apparent		(Girth when fu			inches	incl	es .		feet inch
Distincti	ve mark	:S							
Name an	d Addre	INFORMA ss of next of kin	-n	UPPLIE Relationars as to M	onship.	RE	CRL	IIT	the.
(a) Christian	n and Suspame of Woman (c) Press	o whom marrie ent address. (c	d, and whether			r. (6) F try.	lace and	
	(a)		(b).		(4	7)			(d)
		tian Names	Particul	ars as to C	hildren				ice of Birth
			EMENT	OF THI	-		-	in Re-	
Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service lowed to for fixi rate of p	ng the pension Days	Service serve no ed to re- wards G	Days	Signature of Officers cert fying correctness of entries
Service toward	rds limited	engagement reckous from	n .						



FIRST NEWFOUNDLAND REGIMENT

vo. 3255	Name Der	nion Ki	lley Corps	-07	-6
	Questions to be put	to the Recruit	beføre Enlistment.	Pio	
1. What is your name			Rincon	reley	1.
2. What is your full A	ddress?	} 2	9 4	3	
3. Are you a British S	ubject?	3	Mes		
4. What is your age? .		4	A. C. Cears 2	Months	
5. What is your Trade	or Calling?	5	when	an	
6. Are you Married?		6			
7. Have you ever serve jesty's Forces, naval	d in any Branch of Hi or military, if so,* w		y n	0,	
8. Are you willing to cinated?	be vaccinated or r	e-vac-} 8	ye	2,	
9. Are you willing to l		1 Ser-} 9	ye	2	
10. Did you receive a stand its meaning, a	Notice, and do you		Name		
11. Are you willing to se to be signed by you	erve upon the condition	as as embodied in		п уел.,.	
5 graffe	- 1	wild &	- company	gnature of Witness.	
bear true alregiance to Hi bound, honestly and faith all enemies, according to		the Fifth, His Hor, His Heirs and St	do make oath, and Successors, an	that I will be faithful d that I will, as in é Crown and Dignity aga	and luty inst
The Recruit above not he would be liable to be p	CERTIFICATE OF Manuel was cautioned by	me that if he made		any of the above quest	ions
	were then read to the		ence.	_	٨
	t he understands each				14
on this	November	Attesting Officer	Charl a	ye Copt	
	†CERTIFICA	TE OF APPROVIN	O OFFICER.		
I certify that this A	ttestation of the above-			filled up, and that the	re-
quired forms appear to h				to the t	
If culisted by special	authority, such will be	attached to the ori	ginal attestation.		
Date	191			Approving C	Mner
Place				····· S Approving C	
† The signatu † Here insert	re of the Approving Of the "Corps" for which	floor is to be affixe the Recruit has bee	i in the presence of m enlisted.	the Recruit.	
* If so, Recruit is to Discharge and Certificate of viz:—(Name)		d be returned to hi	m conspicuously end	orsed in red ink, as i	tollor

DESCRIPTIVE REPORT ON ENLISTMENT

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pparent age	/E years	months.	7 Help	ght.	feetin
	Girth when fu	illy expanded		nches	3
Chest Measurem	ent Range of expr	THE MINES	inches		
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distinctive mark	S				
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- / /-	3		Relationship	the state of the s	
(40)	15	Particulars as			
(a) Christia	n and Surname of Woman to (c) Presen	nt address. (d) Initi	whether spinster or witals of Officer verifying	dow. (b) Pisce	and date of marriage.
(4)		(8)	(c)		(d)
	14.				
			200.2	1000	CFS-M STEELER
		Particulars as	s to Children		
Christ	ian Names	1	1	Date and	Place of Birth
7 1	STATE	MENT OF	THE SERV	ICES	A CAS
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Total Septine to		nobela 3-10	along	1813	1919

DESCRIPTIVE REPORT ON ENLISTMENT Applicable to all ranks. To correspond with settine on the Medical History Shee

lame	1000	-						
pparent age /5	years	mont	hs.	Heigh	3	fe	et S	inches
	(Girth when fu	illy expand	ed 🛒	inc	hes		F. L. Sand	
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(a)	(c) Press	(b)	Initials of Off	(c)	otry.	1	(d)	-
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M. X. (2)



This Form is to be used in connection with Pamph. R. F. (1)

In the spaces below should be eintered the findings in the toutine of examination set forth in the Appendix. Care should be exercised that each finding be eitered after the number below which corresponds to the number of that text.

Examin	nation of Lemmin Lilly.	
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Date:	-how 19/16 Recruiting Officer:	
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	THE RESIDENCE OF THE PARTY OF T	

Extract from Offers by Lt. Col. G.T? Mathhas, D.S.O. Commanding 1st Battn. Royal Mfld. Regt. 26-8-18

The u/m is admitted to hospital.

3255 Pte. S. Lilly.

Extract from Daily Orders by Lt. Col. T.G. Mathias, D.S.C. Commanding lot Batta. R. Hild. Regt. 30-8-18.

The u/m has been evacuated and is struck off the strength of the unit.

3255 Pte. S. Lilly.

C.R. 82,55

E tract from Daily Orders part II. Depot st. John's date 22/8/19

The discharge of the u/n on dembe has been confirmed by 0.1/e seconds on 18-3-19.

#3255 Pte. Simeon Lilly.

Extract from Daily Orders part II, Depot St. John's dated March 6th., 1919.

The discharge of the undernoted on demobilization has been APPROVED by 0. 0. Discharge Depot on 4-3-19.

#3255 Pte. Simeon Lilly.

Delived from Delly trainer rept 12 test the Rept Mile. Rept. St. 4,50°C, 12-1526.

The Valuestian relative from Grapus-is and reported to Japon Will-20.

Depute Substitute on Auto 20070 .

3255 Pte. Simeon Lilly.

CR 3255

ENDING

LIMITED

LIMITED

ESTABLISHED 1886

EIGHT TRANS-ATLANTIC CABLES

ENDING

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ALITOMATIC DUDI EN GNOWN

Important M	essages should be repeated-	Attention is called to the Importance of legible writing			
CHECK	TELEPHONE 378 FOR	MESSENGED		TIME	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	HEDDENGER.	Received	Sent	
SEND the follow on back hereof wh	ring telegram subject to the terms }	Date 8.2.	1919	191	

10 Mrs. John McDonald, Conn River.

> 3255 billie arrived St. John's yesterday leaving for home to-day, watch for time arrival at telegraph office.

> > J.R. Bennett. Winister of Wili tis.

CLASS OF SERVICE	SYMBO
Day Message	STATE OF THE PARTY.
Day Letter	Blue
Night Message	Nite
Night Letter	NI.
If none of these th bols appears after ti (number of words) day message. Other character is indicate symbol appearing a	this is wise it

ANGLO-AMERICAN TELECTAPE. COMPANY, LIMITED

Day Bessage Blue Night Message Nite Night Message Nite Night Letter NL I mose of these three eyes bold appears after the check (number of words) this is a day message. Otherwise its symbol appears after the check (number of words) this is a day message. Otherwise its symbol appears after the symbol appears after the symbol appears are all the

THE WESTERN UNION TELEGRAPH COMPANY

OK 7 CONNRIVER 9PT

ST. JOHN'S. N.F. FEB 8 1919

MILITIA BENNETT

IS PTE 3255 SIMM LILLIE ARRIVED THERE YET REPLY

MRS JOHN MCDONALD

Extract from Seminal Rell of the Reyal Effa. Regt. Imbarked S.S.Gorsican, Jan. 30, 1919.

> 32 8355 Lilly.

Detroit from Nominal Roll of the Hoyal Rills. Hogis. 26-1-15:

The Underseational who was transferred from R.H.P. to the dat Mr., Minchester, 19-1-19 exciting maps traition.

3255 Pfs. L. Parsons.

Hov. 11th 18

Mrs. John Molounid,

pay D'Espair, F.B.

Dear Mrs. McDonald,

I beg to advise you that your letter addressed to your som. \$2005 rts. Simon Lilly, has been received by us, and that same has been forwarded on to him.

Yours faithfully.

Military Secretary.

CR 3255

Extract of Orders by Lt. Col. H. J. Barton D. S. O. Commanding 2nd Battelion Royal newfoundlend Regiment.

The following reported back from the lat Battn, is taken on the strength and posted to "H" Company

3255 Pte. S. Tilley as from 26/10/18.

G.R. 3255

Extract from Casualties from Pay and Record Office, London, dated 17th. October 1918.

3255 PTE. S. LILLEY

was discharged from the 4th. London General Hospital 17/10/18 and granted furlough by the Pay and Record Office, to 26/10/18. He is fit for 111 Employment.

Authority: A.F. W.3016 from 4th. L.G.H.

Oct 16th, 1918

Mrs. McDeneld

Bay D'Espeir

F.B.

Dear Madam:-

I beg to inform you that additional information concerning your son, No. 5255, Private Simeon Pilly, has been received, through the Visiting Committee of the Mowdbundland Har Contingent inseciation, to the effect that he is now progressing favourably Yours faithfully,

Lieut. Col.,

Chief Staff Officer.

NEWFOUNDLAND POSTAL TELEGRAPHS



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach is de-tination by reason of any neglect or default of the N.P. T. or its Servants whilst the Message remains under the control of the N.P. T., they will return the amount paid by the Sender for next Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising the remaining from the non-transmission or non-delivery for the Message, or delay or error in the transmission or delivery thereof, however such

resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission of delivery thereof, however such transmission, one delivery delay, or error shall have occurred to have nitrely caused for the purposes of these Conditions at any point whenever, the control of the N. P. T. over the Message shall be deemed to have nitrely caused for the purposes of these Conditions at any point whenever, the control of the N. P. T. over the Message shall be deemed to have nitrely caused for the purposes of these Conditions at any point whenever the control of the Condition of the Condition

not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T. I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of	Sender		A	ddress 1404 67 4111616	
Line Number	Rod	Ву	Sent by	Cheek	

Dated Oct 9th, 1918

To Mrs McDemeld, Bay D'Espeir, P.B.

to inform you that Record Office, London, officially reports No. 3855, Frivate Simon Kally new at 4th London General Hespital

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

J.R. Bennett

Minister of Militia.

FOR TYPEWRITER

NEWFOUNDLAND POSTAL TELEGRAPHS



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All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall ower reach its destination by mason of any respect to elected of the N. N. T. or its Servants whilst the Message reaches the Message shall ower reach its destination that the Georgies of the N. P. T. they will refuse the amount part by the Seconder or next Message.

The N. P. T. shall not be liable to make resuperantic beyond the amount refused as above for any loss, plany, or damage arising or exceeding from the Secondaries of the Message will be described to the Message shall be described to the Message will be described to the

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The state of the control of the cont

Signature of Sender______ Address Dept of Militla.

Line Number	Red	By	Sentbv_	Oheok	

Dated 0ct 7th, 1918

To Mrs. Mc Donald, Bay D'Espon, Fortune Bay

Regret to inform you that Record Office, London, officially reports Ho.3255, -rivate Simeon Lilly at 18th General Hospital Donnos Camiers, Sept 29th suffering from G.S.W. and and right leg slight

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

J.R. Bermett

Minister of Militia.

FOR TYPEWRITER

Extract from Casualties received from Pay & Record Office, London. Oct.2nd, 1918.

Admitted 4th London General Hospital Denmark Hill, S.E.B.,

3255 Pte. S. Lilly,

GSW R. ARM. sit.

EXPEDITIONARY FORCE - FRANCE.

ANTRACT FROM NO. H.A. (COL) 3865. O.C. 7 STATIONARY HOS. BOULOGME, Reports:-

Dis. to Duty 4th september 1918.

1/Newfoundland Rogt. 3255 Pte. Lilly S.

Appendicitie?

Extens from Counties List No. 29599

3255 Pte. S. Lilly.

MfM. R. Admitted 18 Con. H. DannesConters 29 Sept.18. GSW. Arm & Leg R Sit.

H-MR

T.TST NO' H.A. 28172 ------

INFANTRY RECORD OFICE - HAHIL TON. ADMITTE 2 STY. H. ABBBVILLE 25 Aug. 18. GS7. Hip R.hev. 19608 L/C. Andrews J2/KOSB Injury L.Elbow Accid.Hild. DIS. TO DUTY BX 12 STY. H. ST POL 25 Aug. 18. Debility.

ADMITTED 15 STY H. ST POL 25 Aug. 18. Die rrhose Mild. Diarrhose Mild. 42657 Pte. Broadley J. 2/Scot Rif.. MYD. Dysentery Mild. Pte. Ellingworth A.B. 1/7 do. 202469 Pte. Harrison R. 1/5 H L.I. RND Dysenfery Mile. 35947 Pte. Benforth W. 1/7 Scot Rifles. Debility Mile. MYD Dysentery Mild.

48305 Pt e. Campbell J. 1/8 3.8c ts

INPANTRY RECOR OFFICE - WAR VICE.

LIST NO. Y.A. 28172. ------------

ADMITT D 2 STY. H. / BRYLLE 25 Aug. 18. GST. Head & Arm L. Amp Sev. 43861 Pte. Kenwright Bassessel4/WorceR...... Bozema Mild. 43886 Pte. Winter E. 14/ forc.R.

ADM TTO 12 STY. H. ST POL 25 Aug. 18.

.... Wd. (Locdtl) R. Buttock Mild. 1/ Joro R. Spr. L. Ribow Mild. 1/8 R. War . R. att. 910 Ares Smpl Influenza Mild. 43711 Pte. Hill J. 512858 Col. Slater R.

Coy.

LIST NO. PSA :28172.

OUNDLAND EXPROTATONARY 1/R. Newfoundland R. turnette it is Mid. Adm. 7 Sty. H. Boulcome 25 Aug. 18. 3255 Pte.

5591

Extract from Daily Orders part 11, from Ubit The Royal Hild.Regt. In the field, dated 25-5-18

Awarded 14 days F.P.No.1. 15-5-18 for: "Stealing rations from R.B."

#3255 Pte. S. Lilly.

Extract from War Of ice List No.H.A. 81091.

MFLD. EX. FCRCE.

#3255 Pte. S.Lilly.

Diphtheria.mild......Adm.7th Gen. Hosp. St. Omer March 26/18.

·C.R. 325-5-

Artract from Reminal Rell Braft No. 36 200 Other Rabks, from 2nd., (Reserve) Battn. Reyal Newfoundlan Regt., and proceeded to join the lar., Estin, Reyal Newfoundland Regt., imbarked Southempton 4/2/18.

#3255 Pte. S. Lilley.

NEWFOUNDLAND POSTAL TELEGRAPH



Cable Connection with all the World

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In case the Ressage shall never reach its destination by reason of any neglect or default of the N.P.T. or its Servants whilst the Message.

In case the Message shall never reach us occumation by reason of any hoperconduction of the Nr. T., T., they will refund the amount paid by the Sender for such Message. The Servans wanted to the Nr. T. and the Servans wanted to the Nr. T. and the Servans wanted to the Nr. T. and the Servans wanted to the Se

resulting from the non-transmission or non-delivery of the Breasge, or dusty or error in the transmission, made in the state of the sta according to the foregoing Conditions, by which I agree to abide.

I request that the following (NOT TRANSMITTED)

Address

Signature of Sender Check Line Number Red

Dated

September 24, 1917.

To

Mrs. McDonald.

Bay D'Espoir, F.B.

Regret to inform you that Record Office

London, officially reports No. 3255. Private

Simeon Milley, has been admitted Wandsworth

suffering from pyrexis of unknown origin.

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

> AGEN -R -- BENNETT R.A. SQUIRES

Colonial Secretary.

FOR TYPEWRITER

3217 Miles

3255. Pte. Simeon Milley

C.K 3746

Ext. of Casualty list received Sept 24th., 1917. Pyrexia of Unknown Orgin. Admitted Wandsworth.

* C.R. 3255

Extract from Sanimal Hell of Doubt House Ambancked Joutheagton 11/6/19 from 2/lat Houseandland Regiment Heuten-amilyn, to 1/lat House undhead Regiment House

3255 Pte. Lilley. S.

C.K. 3255

Extract from Deily Orders part 11 Unit The Reyal Effd. Regt., St. John's, Hov. 17th, 1918.

3255 Pte. 3. Lilly.

Attached to the Strength from Now. 17/16.

From Officer Commanding, Discharge Depot.

To Paymaster & O. i/c Roords Hilitia Department.

3255 Pte. S. Lilly.

The above noted man has made application to have his allotment of 50¢ per day in favour of his Sister (Miss Charlotte Lilly) Cancelled from and including March 1st 1919.

Will you please carry out and advise.

PROM PAY AND RECORD OFFICE, LONDON

3255 Pte. Lilly, P. Dr. Bal. £2213-4

This transferred to Pay Office 26-3-19

Lilly 1480

. 4 1

Medical Report on an Invalid.

MAZPLEY BOWN GAMES Station 1 4 DEC 1918 Date 1. Unit ROYAL NEWFOUNDLAND REG. 7. Former Trade ! or Occupation 7a. If with previous service in Army, state-

- Regimental No. 3205.
- Rank Pto.
- 4. Name A XLY.
- 5. Age last birthday
- 6. Enlisted on

- (a) Former Unit;
- (b) Regimental No.;
- (e) Date of Discharge;
- (d) Cause of Discharge.
- 8. Disability in respect of which invaliding is Proposed. (Other disabilities should be reported upon in answer to question No. 19).

hil

Statement of Case.

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

- 9. Date of origin of disability.
- 10. Place of origin of disability.

11. Give concisely the essential facts of the bount aich in France lung 917 listory of the disability, noting carries buth P. V.O. Invalided to land grant heated at wandoworth cured. bounded in France act 1918, left ar left sleg, hath slight now cure

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

(a) In action? (b) On field service?	yes				
(I) O. C.11					
(o) On nead service t	lifes				
(c) On duty?	efes				
(d) Off duty?	NA.				
Was a Court of Inqui	ry held on the	NA	*		
injury?	,				
If so—(a) When?	NA				
(b) Where?	NH				
(c) Opinion?	NA.				
Was an operation perf	formed? If an				
what?		March 1985			
If not was an operation	m advised and				
leclined?					
		120			
In case of lass or decay	of teeth. Is the				
loss of teeth the resi	ult of wounds,				
injury or disease, direct to active service?	tly attributable	•			
existing but not in thes	macked sufficient	t and a second			
to cause invaliding, and	d state whether	r			
they are attributable t	o or have been	1			
war.	ing the present				
	Rela	The above			
Do you recommend—		atreature	0	0	
(a) Discharge as per	manently unfit, o		Indies	Cufs.	
Do you recommend— (a) Discharge as per (b) Change to F	manently unfit, o		Janling	Cuft.	
(a) Discharge as per	manently unfit, o		Jarding ROYAL NEW	Cuft. Novey	ieā.
(a) Discharge as per	manently unfit, o				
(a) Discharge as per	manently unfit, o		Modius ROYAL NEW		
(a) Discharge as per (b) Change to E	manently unfit, o	or	Officer in medic	al charge of	case.
(a) Discharge as per (b) Change to E	manently unfit, o	or		al charge of	case.
(a) Discharge as per (b) Change to E	manently unfit, o	or	Officer in medic	al charge of	case.
(a) Discharge as per (b) Change to E	manently unfit, o	or	Officer in medic	al charge of	case.
(a) Discharge as per (b) Change to E	manently unfit, of England?	or	Officer in medic	al charge of	case.
(a) Discharge as per (b) Change to E	manently unfit, o	or	Officer in medie	al charge of	case.
I have satisfied r	manently unfit, of England?	or	Officer in medie	al charge of	case.
(a) Discharge as per (b) Change to E	manently unfit, of England?	or	Officer in medie	al charge of	case.
	Was a Court of Inqui injury? If so—(a) When? (b) When? (c) Opinion? Was an operation per what? If not, was an operation lockined? If not, was are operation bear of each the re- injury or disease, dires to active service? We particulars of any excepting, but not in the to cause intributable to cause in the contributable of any excepting, but not in the to cause intributable of any against all y service de-	Was a Court of Inquiry held on the injury? If so—(a) When? (b) When? (c) Opinion? Whis an operation performed? If so what? If not, was an operation advised and leckined? If not, was an operation advised and leckined? If not operation in the season of the season	Was a Court of Inquiry held on the NA injury? If so—(a) When? (b) Where? (c) Opinion? Was an operation performed? If so, what? If not, was an operation serviced and leckined? If not, was an operation serviced If not, was an operation servic	Was a Court of Inquiry held on the NA injury? If so—(a) When? (b) Where? (c) Where? (d) Opinion? Was an operation performed? If so, what? If not, was an operation advised and leckined? If not, was are operation advised and leckined? If not, was a constituted a constitute and leckined? If not, was a constituted a constituted and leckined? If not, was a constituted a constituted and leckined? If not, was a constituted a constituted a constituted and leckined? If not, was a constituted	Was a Court of Inquiry held on the NA injury? If so—(a) When? (b) Wher? (c) Opinion? Was an operation performed? If so, what? If not, was an operation advised and leckined? If not, what is the small of womonia, injury or disease, directly* attributable to each service? Give particulars of any other disabilities existing, but not in themselves sufficient to coach a stributable to or have been aggravated by service during the present

all say out luface begins.

for aum also one artury surface higher thigh. Not pauful on pressure. Roufolen of no deabley.

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidences of the progress of the disability.

14. If the disability is an injury, was it caused—

3124



ALLOTMENTS



to, and of iden	for the benefit of tity of, and pro	the undermentioned Person and Person of Peduction of the relative Identi	Cents, per diem, lersons such payment to be m	Allotment of from my Pay, nade on proof
Identity Certificate No.	Whether Wife, Child other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
309	Sisty	Graseoute Graseoute Green	Pristing 48	5
	-			

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.

Nº 3124



AMOUNT	//7·	151	Fub NAME (in f	lotment begins Whether Wife, Child,	Identity Certificate
(each person			Ch.	Friend	200
5	Pusherings	evite	Char	Sisty	1
	₩8!	ly	· Vi		
	,				
	Total Allotment, S	170			
er, counter to make th	Company, signed by the Volunte to the Paymaster as suthority to	r Commanding C ny and handed t	r Commanding Compa	sis form must be of greed by the Officer quired payments o	Si

Only for use with Men returned from an Expalitionary Force Army Form W. 3016, or from Garrisons Abroad. (In Books of 2003)
No. 4019 D Date /7 Oct 1918
*(1) Tothe Omer 1/2 hours, New foundland Hyrs
* (m) m! 0 m - C - 1. E - 1
*(3) The Uniter Strike out that which is instrolliable.
Regimental No. 3255
Regimental No.
Rank and Name it Lilley . A
Regiment or Corps New Jew land Reg Chy
has been presented the Schuttel to Schutel
His address while
(on Wester MIT be) Returned to you for disprace please
I consider he is fit for
Scribe out that which is
drafting to Office in the Clarke Dague, Hospital.
Augusta
e 0.10.18 Station.
Four copies to be made, and one copy sent to each Officer mentioned above and one
copy filed in the office. In the case of men of the Royal Flying Corps, Royal Engineers and Army Ordnance

copy filed in the office.

In the case of men of the Boyal Flying Corps, Boyal Engineers and Army Ordnance
Corps, two copies of Army Form W. 3016 will be sent to the Officer in charge Becords
concerned and one to the Paymaster, instead of one copy to the Officer i/e Becords, the
Paymaster and O.C. shown in the Schedule.

[M3765] W1116/PP164 12m bks. 11/17s 1751 G & S E. 2034

No.16644/15/P&A WFOUNDLAND CONTINGENT N.F.P/48. (Name)

OSTRY OR S	Harrison M. R. P. A. S. W. R.
	NEWFOUNDLAND CONTINGENA
Newro	aymaster & O. i/c Record, 7 * 100 condland Contingent, Victoria Street, London, S.W. 1.
PAY & RECORD OFFICE.	foundland Selly
cold to 1918 cold the sum of	4 pounds - shillings (£4)
et Nos. du on account o	f any balance that may be due to me. Regtl No. 3255 Rank PAC
C 90 1	Approved what a c. (1.)
Babated at 12 6ct	4 Loldon Jeneral Hospital.
191 <u></u> 8	

	DEBITS	Date		d	. O.	OITS	Reriod	- I Down	Net I	Aile	tment	1/3	0	4 3 5 73	
	Balance Acquittance Rolls Hospital Advances A.B. 34 P.& R.O. Paymonts		1 16	800	Balance Pay @ net	8.6.17	95 16	10 120	Rats bo	78	0016	1000	960	玉如.11.	2
	dep & Jons Pay 30	11.9	13 10	10											
1	CHECKED.		•				•								Name and Address of the Owner, where

No 3255 Rank Trivate Name Lilley Pay | F.A. | Wkg | Total | N. D. C. DEBITS Date £ s d Feriod Days Rate | \$. 1 E CREDITS Balance Balance Acquittance Rolls Hospital Advances A4B. 84. P.&.R.O. Payments \$ 19.1.10 sep. of Pay. Cheque \$953

Place	Date of offence	Rank	Cases of Drunken- ness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
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			3	and worked & worksering	KI6 Ohner	J			WD 25
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,	White	,,	- 2	about from 9 AM Par	JF U	2. days be	1.15/2	0 1. 00000	2 2
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Place	Date of offence	Rank	Cases of Drunken- ness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with frial	By whom awarded	Remarks
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***************************************				15 the letting to day in order	TO PLANT	Mari			
DIANE.									***************************************
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}	-		-				32		
			1						

Lilly, S

3255

Pay Loeph.

March 16, 1919

\$2255 Pte. Simeon Lilly,

Modelium,

Fortune Dist.

Dear Sir:-

Please find enclosed "Discharge Cartificate

No.1343."

Yours truly.

Paymaster & Officer i/e Recor da

Demobilization Form 2.

The Royal Newfoundland Regiment

- St St.
PROCEEDINGS ON DISCHARGE
Intended place of residence One Collum Juna
2. Occupation Sharmon
Classification of soldier
3. The above named man is discharged in consequence of
Eligible for War Service Gratalty -
4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations. Place Date MAR 4 1919 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 Newtoundland Regiment, of all manical responsibility in my connections, measure to Additionate or over the state of the present that the property of the present that the property of the present that the present the present that the present that the present that the present the present the present that the present that the present the present the present that the present the pre
CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER 6. I hereby certify that 1 am in a position to resume civilian occupation unfacilitately on discharge Place and Date Signature of withers Signature of withers
2
STATEMENT OF SERVICE 7. Enlisted for service 7.7. 11. 16. No of days on Military Discharged from service 7.3. 9 feb. 1 + Nour Service 15.2 Sawy Service 15.2 Sawy
APPROVAL OF DISCHARGE
8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer ic Records, The Royal Newfoundland Regiment, twenty-eight days from date. Place ST. JOH!!'S. Officer Commanding Dischärge Depol The Royal Newfoundland Regiment.
9. The discharge of shovy mentioned soldier is bereby confirmed. Motor legislate Place & House Med Company of the Company of t

Atip 8097/1343

The Royal Newfoundland Regiment

Reg. No. 5250 Rank Thr Name hely Jimegal.								
Date of Enlistment 19.11.16 Address M. Callynn District Tortune								
Occupation trateman Classification for Discharge Medical Category								
Recommendation S.M.B. Disability Rating								
Passed to Demobilization Officer with following documents:								
N.F. P 36								
B 178 W 3494 B 122 Board 1st " 2								
B 178a/ D 400A/ B 1915 do 2nd " 3								
B 179 J. D 400B Form L do 3rd " 4								
B 179a D 400C Form K do 4th " 5								
B 179b B 103 2. ME 2 " 6 " 6								
B 179c B 120 M 93								
PARTICULARS FOR DEMOBILIZATION								
I. Civil Re-Establishment.								
I amin a position to resume civilian occupation.								
A to the same of t								
Junem's Total								
Particulars passed to Vocational Officer for information and action.								
Dariff -3-19 forflit from Line								
a. Clothing.								
Certified that Clothing Regulations have been complied with:								
(a) Clothing Allowance payrole B. Communication of the communication of								
(b) Clathing Supplied Joseph & Just Line								
Date, H 3 - 19 Oilc. Reclothing.								

3. Transportation and Release Certificate.	
The above named has been provided with Trave	lling Warrant No to his hom
at and Release Cer	1270
Date 4-3-19	Och I Cl
Date	Chousey
	Demobilization Officer
4- Pay and Allowances.	A
The herein named soldier's accounts have been	correctly balanced and all matters in connectio
therewith settled. He has received pay and allowa	
Date 4-3-19	A MEn It
SUBJECT TO ADJUSTMENT OF OVERSEAS PAY AGENT.	Depot Paymaster.
4 3 160	- Deport ay master.
Discharge approved for	
Forwarded with following documents to O.C Disci	sarge Depot.
N.F. P 36 B 268 B 121	W. 1 1 1 1 1 1 1 1 1
F. 178	
B 178a D 400A B 1915 do	2nd 3. 2
B 179 2. D 400B Form L do	3rd " 4
B 179a D 400C Form K do	4th " 5
B 179b B 103 ME 2	
B 179c B 120 M 93	
Date 4 3. 19	MARiko Caff.
Date	Demobilization Officer.
The second secon	Demodrazation Officer.
APPROVED.	
Documents as above forwarded to:— Officer ilc Records.	
Board of Pension Commissioners.	
with following additional documents.	
Eliait	ila da viz
THIST	de for War Service Grats!
MAR 4 1919	P. St. Sait Carl.
Date	O. C. Discharge Depot.
Received the above noted documents from O. C. Discharge De	pot.
Date	

The Royal Newfoundland Regiment

Class for	Demobil-
izatio	on:-
	E

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

Discharge Depot: Headquarters The Royal Newfo	undland Regiment
O.	Date
Regimental No. 3255 Ptr Name hilly Summen	
Name helly stareon	
Address	
14	
Present Medical Category. AI	
Recommended for:-	(a) Immediate discharge
	((b) Standing Medical Board
	(R.H. Jait laut O.C. Discharge Depot.
Members of Board	Senior Medical Officer
	200 Burden
	M. O. Depot

To be used only for Spec	ial Reserve Recru	its, and for Spe	ecial Reserva	ts enlisting into the
Regular Army	MEDICAL		- 1/	
1 200	O'ILDIOIT.	OF	O DUNDLA	ND CONTINO
Surnary Cle	1	Christian Nam	decre	
-0	Table I.—GEN	ERAL TABLE	131	UN 1917. / · /
Birthplace:—Parish		Count	y d RE	CORD OFFI
	SPECIAL.	RESERVE.	REGI	JLAR ARMY.
Examined	on 17 day of	flor - 1916	on da	y of 191
Examined	at De	huis . He	e I	EDUNDLAND CONT
Declared Age	18 Years	Elmoo. days	. 14	LONDON, S.W.
Trade or Occupation	fister	nan	- A	8 - FEB 1918 / *
Height	1 S feet	S inches	fe	d necono ex
Weight Chest (Grith when fully expanded		115 lbs.		lbs, inches
Measure- ment Range of Expansion		S inches		inches
Physical Development		3,		
(Arm	Right	Left	Right	Left
Vaccination Marks Number				A DYNAMI
When Vaccinated			1.	CONTINGENT
Vision	R.EV		R.EV	TORN CALL)*
	76		1	
(a) Marks to Mostley assessed a 1	(4)		(a) (a)	IV & RECORD
(a) Marks indicating congenital peculi- arities or previous disease			-	
			per tel	, nouve
(b) Slight defects but not sufficient to Cause rejection	(b)	Carlo Carrie	(6) -	DIANG CONTINGEN
Cause rejection	750		12	LOHDON, S.W.
A	da . v	Pal.	12/3	1001
Approved by (Signature) (Rank)	4 amount	warm		2
		Medical Officer.		Medical Officer
Enlisted	a Japan	is refer	at	and the same of th
	on , day of -	hr. 1016	on day	
Joined on Enlistment	tofist Mes.	Regtl. No.	Согря,	Regtl. No.
	1	0		1
Transferred to	Mentandle		r.	
Power and the same and	ROYAY NEWFOUN	DE MEGIMEN		
Became non-effective by				-
	on day of	191	on day of	191
(Signature)	-	4		
(Rank)		200		[r.r.o.

[P.T.O.

Name of Hospital.	-	dmittes Hospit Monti	d to tal	-	-	d from pital h Year	Discuse	Number Days in Hospital	Remarks bearing syphilis, admiss of to	in the cases, mature or treatment of the case likely to be of interest or of future use. In cases of send over-induces to beneath will be substituted in the case of the case	Signature of Medical Officer
9m James Griegel Hann WANDSWOOTH	20	9	17.	16	10	77.	РИ. О.	26	Reportes	Sickin France - I normal on also India	attender Castorman
4th LONDON GENERAL HOSPITAL R.A. M. C. (T) DENMARK HILL, S.E. 5	6	10	18	17	10	18		11	Wound	d 25 9 18.	Loby heur barry
										6	Indistrary till Landon Beneral Hospital
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									-		
						ر دار	1				
		1									

Table III.—Boards; Courte of Inquiry, Vaccination, Inscalations, sc.; Examinators labeling for Epolar Foreign Service, Extension, Re-management or Prolongation of service; Issue of Surgical Appliances; Particulars of Deals! Treatment, &c.

21-11-16 1-12-16 15-12-16 15-17	7-CAB 20	
15-12-16) Lp	
7-1-17	Nacc. IP	
	A STATE OF THE STA	AND D
and the second	The second secon	
14/1/19	Recommended Repolitable	á.
	95	orderes Ceft.
		hans .
	It is hereby has been bef Board, and	gersified that this soldier ore a Fravelling Medica? has been classified as Discharge on Demolyfisa

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
S. Honer	Hany 31	Hus.			
Soffwigel Windows M	Thu 3"	1914			
				-	
	and the same			-	
					255
100000000000000000000000000000000000000					
***					-
			Notation and	-	

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:

For Seave work with & J. 15. Co., of fortion available.

Reg. No. 3255

Commission of the Veryman Character of the Veryman Chara

Place Sept. Militia.

Medical Report on an Invalid.

Station Hazeley Down Camp

- 1. Unit ROYAL NEWFOUNDLAND BED
- 2. Regimental No. 5275
- 3. Rank Off
- 4. Name LILLY
- 5. Age last birthday
- 6. Enlisted on

- 7. Former Trade or Occupation
- 7a. If with previous service in Army, state-
 - (a) Former Unit;
 - (b) Regimental No.;
 - (c) Date of Discharge;
 - (d) Cause of Discharge.
- Disability in respect of which invaliding is Proposed.
 Other disabilities should be reported upon in answer to question No. 19).

hue

Statement of Case.

Note—The answers to the following questions are to be filled in by the Officer in motical charge of the care. In answering time the will carefully discriminate between the man's unsupported statements and cisiense recorded in his military and medical decounters. He will also correfully distinguish cases entirely due to recorred discase.

- 9. Date of origin of disability,
- 10. Place of origin of disability.
- 11. Give concisely the essential facts of the fivent sicile in France ang. 1917 listory of the disability, soing entries with "v.o. involuded to higher or in the control listory Steet bening the attend 3.7.9. H. wind. for model a name of the control of the cont
- Give your opinion as to the causation of the disability, stating whether in your opinion it is—
 - (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes
 - page 3).

 (b) constitutional or hereditary, and not aggravated by service during the present war.
 - (e) attributable to or aggravated by want of proper care on the man's part, e.g., intersperance, more address, fig.

	Control of the Contro	
		Il seas on outil surface up orward also one on anterior right thigh not kampel
		Il was on outil surface my
2	What is his present condition? Ame	Il seas on oute temporary or anterior wift thigh not personal and season of no die
0.	What is his present condition?	water thick not painful;
	Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.	pleseurs complains of no de
4.	If the disability is an injury, was it	
	caused—	
	(a) In action? yes (b) On field-service? yes (c) On duty? yes	
	(a) On their 2	
	(e) On duty? yes (d) Off duty? n q	
	a, same, N M	
5.	Was a Court of Inquiry held on the injury?	n d
	If so—(a) When? . (b) Where?	nd.
	(c) Opinion?	
16.	Was an operation performed? If so, what?	n. d.
		n: of
17.	If not, was an operation advised and declined?	
18	In case of loss or decay of teeth. Is the	n. 9
10.	In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?	n. 9
19.	Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.	91. 11
		1 1: lin
	· · · · · · · · · · · · · · · · · · ·	latiation
20.	(a) Discharge as permanently unfit, or	a Lin Cyt.
	(b) Change to England?	poolies cya.
		RDYAL NEWFOUNDLAND REG.
		Officer in medical charge of case.
		general accuracy of this report, and concur therewith,
	cept†	
ex		

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

† Delete this word if no ecomptions are no be made.



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 some posion, 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. ifc Records together with the remainder of the man's documents.

to the O. 1/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 no in red ink.	ted
Name in full I comeon hilly	
Regiment from which discharged Royal Newfoundland	
Regimental number 3255	
Intended address Stylins.	
Height on discharge . 5 Feet 6	
Color of hair on discharge Light	
Complexion	
Color of eyes Blue	
Descriptive Marks	
Figure on discharge Melium	
Christian name of Father Hezekiah	
Christian name of Mother Emmelia	
Wife's maiden name in full	
Date and place of marriage	
Christian names of children — ## 1	
Place and date of soldier's birth McCallum 1900 7 dept.	
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 abostatement are, to the best of my knowledge, correct	ve
(Soldier's signature in full) Simeon helly Karmichael.	-01
Station ST. JOHN'S. Date March 3/19 (Rank)	'
I certify that the above named soldier signed the foregoing declaration in my presence, and that above description and details are, to the best of my knowledge correct.	be

Medical Officer ije He

Squadron, Troop, Battery and Company Conduct Sheet.

Number of Sheet A By whom awarded REMARKS HAR Pos Luid.

Army Form B. 121.

Regiment of Mewfoundland. Signature of O. C. Company Company Enlistment
Age on 18 years, months
Place and Date of Children 19 11.11.11
Period of with Colours years.
Price of Birth Regimental Number and Name 3255 fillers D _____Date__ Date of Offence OFFENCE Names of Witnesses Punishment awarded Windson 72.17 Pto Maring Triarmo in Ho H Inter 3days CB. Barracks The J. Allen Windson 11-2-17 Rts Creating disturbance of Burge in recreation room \$6 10 Carro 3days CB. 1227 Major Montgomero Windson 26.3.17 Pto about from banach for stang without leave while a thinky 4 days CB. 2737 At a Rose Lieux on Light sout; Sengt. 9.5.17 The Durky brases on person Sof Morning 2 days 6.15. 10.517 Caps & & Pox Constant 4/4/9 " about from paral lips fight Alage 2 days 13. 86.7 Capt. J. 8. For allege for Latter Advised implicate shape It Hope with Annual

Pretuk. Interest in about 840 per or decourt de og days 18 6/4/4 Ift Seymon 51/18 2/4 Cayman's 4 Ensoloner to year le suppodigen 4 hora 4. 1 /2 2. Hozely Down Camp W.f.B. Mayely Dan Camp About what leave found to the 12-10-19 ends browned to the 19-11-19 of Johnson 16-10-19 Is he detata grant to Soute 500 8/18 13 degles Committing a mesinance in hut two nights in muccocin 10 days . C.B. 2/12/10 th. Cd. Barton 250 2005 A hour without have purpose to days CA 12/19 his & Anthropic 24/15 2 days to HAZELEY DOWN CAMP -1-19

124		Casualty Form A	otiye Service		
E .		iment or Corps	new to	andlan	21
Rank	Surnam	e fully	Christian Naı	neol	wo
Religion		TO A	e on Enlistment	1. Z years.	2 months
	1) 1.7-21-16	erms of Service (a). Dur	elion Service	e reckons from (a) 17-11-16
Date of pro	omotion to present r	ank D	te of appointment	to lance rank	
Extended		-engaged (ualification (b)	0	
		() '01	Corps Trade	1	
Occupation	- Jun	eruan	V	100 C81	gnature of Officer.
	Report	Record of promotions, reductions, transfer	, casualties,	Date of	Remarks
Date	From whom received	de, dering active service, as resurted on B.215. Army Form A.36, or in other official The authority to be quoted in each case	documents. Place of 6	Casualty Casualty	Taken from Army Form B.213, Army Form A.36, or other official documents
		Emb	orked Shamp	ton 11.6.17	
		Dise	barked Rome	~ 12.6.17	
		Joined	Battalion	2 1111 1917	\$ 213
26.8.17	646.6.8.	etd. P. U. D		26.8.17	EA 0638
14.9.17	3 Aust. 9. Aos	Ad Do	Alber		NA. 13.04 7
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) ac	ore	
					MAIO
				0 1/0	Na 1 Reg Infantey Section
					G.R.Q. and Echelo

⁽a) In the case of a man who has re-engaged for, or salisated into Section D. Army Reserve, particulars of such re-engagement or calisament will be entered
(b) Signaliter, Shoeing-Smith, As.

(4.25) W. 1865/9.1107 2.401.000 1517 MeA & W.Ltd Forms B. 1526 (E. 260

	Private Surnam	e Ally Chri	stian Name		
Religion	201 7 1		stment		
	(a) . Ut. formo.		Service reckons	\$500 XXXX - 740	
	: (lification (b)	c rank	
Extended	1	Re-engaged)	orps Trade and	Rate	
Occupati	on Fish	erman ju	much mo	7. Sign	nature of O
	Report	A STATE OF THE STA		Date of	Remark
Date	From whom rectived	Record of premotious, reductions, transfers, consulties, ac., during active service, as reported on Army Form Ruly, Army Form A, 16, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Casualty	Taken from Art 8.23, Army Fo or other of document
			3 FEB 19	18	
		Embarked Disembarked	G FEB 15	316	
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15/5/60	10 Must	awarded 140 go 7 Mills	Tiges	15/5/10	Oraco
"	Jeuns-	wet Bastolian	Ties _	13-6 8	lou se
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153	0.0.	and y days FPNO 2		26.8.18	100 2009
ani					

⁽a) In the case of a man who has re-angaged for, or enlisted into Section D. Army Rescue, particulars of such ty-engagement or enlistment will be subred.

(b) Signaker, Shoring-Smith, &c.

W. Tifter-Minist 1000m 1/17 (1797) S.P.R.Co. Ltd. Forms B./10/14 E./184.

(P.T.O.

Report Record of promotions, reductions, transfers, casualties, ac, dering active service, as reported on Army Form A. M. or in other official documents. The authority to be quoted in each case. Yo O I/e No 1 Intentry Section, Sed Eshelon., G.H.Q., B.E.E.

DEPARTMENT OF HILITIA.

WAR SERVICE GRATUITY.

St. John's, Hewfoundland.

Declaration required of Officers and men of the Royal Bermoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th.1919. A complete reply must be given to every question in this Declaration. There must be no blanks and no lashes, 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, MY & RECORD OFFICE, SO. NOHII'S. Christian nae. Jumion. 2. Sumare.. 4. Regtl . Ho 32.55 5. Address in full to which future myments of grazuity are to far be forwarded..... Saint Johns 6.Date of enlistment in the Regiment September 19/16 7. Home of dependent, if my, to whom Separation Allowance is being issued, or was being issued inmediately prior to your discharge ... Charlotte 8. Relationship of such dependents.. 9. Address in full of such dependent 10. Is said dependent, now, or was said dependent at my time in receipt of Separation Allowance on account of mother soldier?.... 11. Were you on active service only in Hild. If so give dates, and ratioulers of such service. I have 100 ... our head... Sagation. 12. Give total length of time thich you served on active service, Mether in Mild, or Overseas. ... have been overses Sance. January Mager writed Lebs

. ...

13. Have you had more than one enlistment? If so, give particulars of
discharge and re-emlistments, and under what regimental numbers
One enlistment only
14. Here you chreaty received any payment of Post Discharge pay or War Service Gratuity? If so, state anount you may your dependents have already received and by whom paid
15. Have you been assued with a 'ar service Bodge?
16. Have you, during the present war, served in the Imperial Rorces. The
17. Are you entitled to receive, or have you received any Cratuity in
the nature of post Bischerge Pay from the Imperial Porces? If so,
state amount received, or to which you are entitled "Monue
That applicable
18. Did you revert Overseas to a rank lower than the, substantive rank
held by you on your errival in ingland?
(b). If so, was such reversion in consequence of misconduct or in-
efficiency?
19. Are you now servin in the Regt.? . Use If not give:- (a) Date
of discharge(b) Redon for licery
20. Did you at any time serve at the front in an actual theatre of
Warplf so give particulars of places, and dates of such service.
Served at 1 pelgum Jone 1911 also fram
1918 the Month J. Lbruary.
21.(2) Are you receiving treatment from the Civil Re-Establishment Com.
(b) . If sb/, are you in receipt of full pay and allowences from that
00m1toee
and I make this selemn declaration, conscientionally believing it to be true, and knewing that it is of the same force and effect as if and makes with the same force and effect as if and the same force and effect as if and the same force and effect as if and the same force and t

Signature of Applicant: Place of Residence: Declared before ne at: 10%. Signature of Barrister of the Supreme Court, Stipendiary Hagis-trate, Notary Public, Justice of the Peaco, or Commissioner of affidavits. POST DISCHARGE PAY. Paid Peid War Sorvice Soldier Dependent Gratuity Not amount Date paid Paid due 350.00 5 mol. Certified Correct. Paymaster.

Nº 3124



3/1st. NEWFOUNDLAND REGIMENT /6.

ALLOTMENTS

	Whether Wite, Child, other Relative or Friend	NAME (in full)	/	Address	AMC (each	ount person
309	disti.	Anis		Emural Service		
1	succe	Charlo	u	Pusherrough		5
		Till		11.B		
			7	7		
			1 3	AND LEVEL L		
		* * * * * * * * * * * * * * * * * * * *				
						-
Mary.						-
		_				-
	,					-
				Total Allotment, \$		
	signed by the Office	er Commanding Company	Commanding and hande	g Company, signed by the Volum d to the Paymaster as authority	teer, c	ounte
	required payments	on application.	0		-	-



THE ROYAL NEWFOUNDLAND REGIMENT HEADQUARTERS

H. John's, Newfoundland.

191

From Officer Commanding, Discharge Depot.

To Paymaster & O. 1/c Rcords Militia Department.

3255 Pte. S. Lilly.

The above noted man has made application to have his allotment af 50¢ per day in favour of his Sister (Miss Charlotte Lilly) Cancelled from and including March 1st 1919.

Will you please carry out and advise.



noted

Conn River Bay D'Epoir

Hom. P. T. M. Grath of North Regiment Pay Department St. Johns

Mar Sir Could you please tell me what the address of my you Simon hillie is. He left for Scotland in bel, but I have more heart from him.

(My) John Me Donale.

..

Mrs. John McDonald, Conn River, Bay d' Espoir.

Dear Madem:

With reference to your enquiry of Jan.14th.regarding the address of your son, Simon Lilly, I beg to inform you that with the information stated in your letter, I am unable to locate who this man is. Would you therefore kindly give me his number, and whether he is in the Forestry or Regiment, so that I can furnish you with the required information.

Yours truly,

THE ROYAL NEWFOUNDLAND REGIMENT DR TO#3255 Pte. S. Lilly

LAS per vauchers attached. 17833 Cur

MAR 28 1919

Lucy

No. 460 TRAVELENG WARRANT The Koyal Bewfoundland Kegiment Date Please issue 1st Class Passage and Meals for No. 3255 Rank From - ST. JOHN'S Garallon 25/200

REID-NEWFOUNDLAND COMPANY. PASSENGER DEPARTISENT. A AGENT LIDETORS' & PURSERS' RECEIPT
AGENTA DUCTORS' & PURSERS' RECEIPT. The say of the say of the same of Machine fore
From And have issued him Teken No.
Date Flb W 191 J Agent, Conductor or Purser Myan
This form to be used when requested to give receipt for amount paid for tickets.

TRAVELING WARRANT 'No. R/10 The Koyal Bewfoundland Kegiment Date STATEMENT AND MEAL CHECKS

Labor was delited to take years?

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S, Nfld.

Fold Here

NE

OCT 5 1921 1921.

[P.T.O.]

The accompanying Victory Medal and/or British War Medal is/are forwarded herewith to. Simeon Lilly in respect of his service as No. 3255 Rank Pte. Royal Nfld. Regt. Name S. Lilly Receipt of the same should be acknowledged hereon. Received to angust 1923 Signature Mrs Melli Dridonald 1 Mother 1 Date 14. Address Com River

The Royal Newfoundland Regiment

No 3.2.5	CIVILIAN RE-ESTABLISHMENT ON DEMOBILIZATION
Former Occup	1
Class	Medical Category A Disability Rating
O.C. Discharg	e Depot.
	Above noted man states he has no employment in prospect on his discharge. His personal wish is to obtain a position as
	been referred this day to the Vocational dimeer for action, and his discharge is therefore held in abeyance.
Date	3/19 couls lue of officer and of A frameful
To be fowarde	d Orderly Room in Duplicate.

Reg. No. 3255 Rank Pt Name Lilly Simura. Attested Address Bay DEsp Allottee ischar Returned on S.S.

1321

The Royal Newfoundland Regiment

Reg. No. 5255 Rank Name hully Lamenal
Date of Enlistment. //
Occupation
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
B 179 D 400B Form L do 3rd " 4
B 179a D 400C Porm K do 4th " 5
B 179b B 103 2 ME 2 " 6 " 6
B 179c B 120 M 93
PARTICULARS FOR DEMOBILIZATION
I. Civil Re-Establishment
I amin a position to resume civilian occupation.
S. pen P.a.
Summer x Illy
Particulars passed to Vocational Officer for information and action.
Particulars passed to Vocational Officer for information and action.
Date 4-3-19 Falson town from
2. Clothing.
Certified that Clothing Regulations have been complied with:
(a) Clothing Allowance payable (1)
(b) Chothing Supplied It Stoff A how Live
Date 4-3-19 Oile Re-clothing.

3. Transportation and Release Certificate.
The above named has been provided with Travelling Warrant Noto his home
at
11 2 10 Beb. 1 C1.
Date 4-3-19 Coli
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 18 - 3 - 19
11 / 11
Date 4-3-19 # 1/1/Ews St.
STRUCT TO ABJUSTMENT OF SVERSEAS PAY ASCT POPOt Paymaster.
14 3
Discharge approved for
Forwarded with following documents to O.C Discharge Depot.
N.F. P 36
, but the state of
B 178a 1. D 400A 1. B 1915 do 2nd " 3
· B 179 2- D 400B Form L do 3rd " 4
B 179a D 400C Form K do 4th " 5
В 1796 В 103 2. МЕ 2 " 6
В 179с В 120 М 93
14 3 10 . appiles City
Date J. 4. 3.19 Bembilization Officer
9 Demonization Onices.
APPROVED.
Documents as above forwarded to:—
Officer ilc Records.
Board of Pension Commissioners.
with following additional documents.
Elizible 6 m
Eligible for War Service Gratisty
MAR 4 1919
Date
O. C. Discharge Depot.
CONTRACTOR DE LA CONTRA
Received the above noted documents from O. C. Discharge Depot.
1. samuela
Date March 8/1916 Dorote Record
Date March 8/1919 Dougle Records

July 20 Bt 1993 3255 Dear Su my dobress is reserve motise Loury to Don Mcolomala my Deal Rom as ho Bund-Woods Diesent acters he dies lost aprend they mi Bagilad Boy Desprior mesopotamix I never sam him What after the war he wentfrom st- Johns there I breceros letters after his death

merer 6 splanud he he spoke of his Juliu home he Would bome home day and I hope The is Bette off I Would Wish & menning of his death recene his metal his decress Was tte same 325-5 8x punte Tillig rand whed right Simion