

THE ROYAL NEWFOUNDLAND REGIMENT

vo. 5517	Name July	- hup	Corps	<u>Ca</u>
1	Questions to be put to th	e Recruit before	Enlistment.)
1. What is your name?		1	line	wife him
2. What is your full Ad	ldress?	2	Accine	reme inite
	abject?	3 Y	ears,	Months
	or Calling?	6	g. u.p	ke Angua francia
7. Have you ever served	l in any Branch of His Ma or military, if so,* which?	70	. L.	
	be vaccinated or re-vac-	8	bps	
9. Are you willing to be	enlisted for General Service?		/A/\$.e	
10. Did you receive a Noti its meaning, and who	ice, and do you understand	10	Name Corps	
11. Are you willing to ser signed by your f you ar	ve upon the conditions as em	bodied in the roll o		e} 11
made by me to the above	questions are true, and that I	am filling to fulfil	the engageme	~ J / / / / / / / / / / / / / / / / / /
bear true allegiance to His bound, honestly and faithful enemies, according to the con	Majesty King George the Fift ly defend His Majesty, His Hei	do	make oath, t	hat I will be faithful and I that I will, as in duty In and Dignity against all
	CERTIFICATE OF MAGISTR	ATE OR ATTESTING	OFFICER.	
he would be liable to be pu	med was cautioned by me tha unished as provided in the Arm	ny Act.	se answer to a	any of the above questions
	were then read to the Recrui			
I have taken care that	t he understands each question	, and that his answer	r to each ques	tion has been day entered
SAME SECTION AND ADDRESS OF THE SECTION OF THE SECT	recruit has made and signed t	918	ken the oath	before me at.
	†CERTIFICATE OF	APPROVING OFFIC	ER.	
I certify that this Att	testation of the above-named			lled up, and that the re-
	we been complied with. I acc			
	authority, such will be attache			
Date	191'			Approving Officer.
Place			• • • • • • • • • • • • • • • • • • • •) 🤾 🧸 🚟
† The signatur ‡ Here insert t	e of the Approving Officer is the "Corps" for which the Rec	to be affixed in the ruit has been enliste	presence of t d.	he Recruit.
	be asked the particulars of hi Character, which should be ret			

DESCRIPTIVE REPORT ON ENLISTMENT Applicable small ranks. To correspond with entries on the Medical History Sheet. Height. Apparent age months. inches (Girth when fully expanded Range of expansion inches Distinctive marks. INFORMATION SUPPLIED BY RECRUIT Name and Address of next of kin . 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. (6) (a) (d) Particulars as to Children Christian Names Date and Place of Birth STATEMENT OF THE SERVICES Service in Re-serve not allow-ed to reckon to-wards G. C. Pay Signature of Officers certi-- Corps in Rgt. or Which served Depot Promotion, Reductions, Casualties, &c. Army Rank Dates fying correctness of entries Days Years Vents Days Service towards limited engagement reckous from Joined at

Idate of discharge

Total Service forfeited as above

Pensions

Total Service towards Engagement



THE ROYAL NEWFOUNDLAND REGIMENT

No. 5517. Name Julia huye com
Questions to be put to the Becquit before Enlistment.
I, What is your name?
2. What is your full Address?
3. Are you a British Subject? 3
4. What is your age?
5. What is your Trade or Calling? 5
6. Are you Married? 6
7. Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which?
8. Are you willing to be vaccinated or re-vac- cinated?
9. Are you willing to be enlisted for General Service? 9.
10. Did you receive a Notice, and do you understand tits meaning, and who gave it to you?
11. Are you willing to serve upon the conditions as embodied in the roll of service to be } 11.
made by me to the above questions are true, and sat, I am turns to fulfil the engagers mas made. Signature of Recruit. Signature of Witness.
I
CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.
The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.
The above questions were then read to the Recruit in my presence.
I have taken care that he understands each question, and that his answer to each question has been day entered as replied to, and the said recent has made and signed the declaration and taken the oath before me at on this
Signature of Attesting Officer
†CERTIFICATE OF APPROVING OFFICER.
I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the re- quired 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.
Date
Place
† The signature of the Approving Officer is to be affixed in the presence of the Recruit. ‡ Here insert the "Corps" for which the Recruit has been enlisted.
• If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate

-435	<u> </u>	Applicable all ran						301.1
Name	ye e	16	1	-	Table A.		,	
Apparen	t age	/ 6 ' years	mont	ths.	Heigh	t3		feet 11 inch
Chest M	easuren	nent { Girth when fi	THE STATE OF	WEL	inches	hes		, 7 to 20 to 14 to 1
Distincti	ve mar	ks				nive (A		α,
		10000000	(3: 1:0, 033)		Maried To	ethille.		<u></u>
		INFORMA	ATION S	UPPLIED	BY R	ECRL	JIT	organism spirit di
Name ar	Addr	ess of next of kin	Airg-	. Relation	ship	1	ach	w,
	,	1.	Particula	ars as to Ma	rriage	, Ž		an was said
	(a) Christi	an and Surname of Woman (c) Prese	to whom marrie	d, and whether s	pinster or wido cer verifying e	w. (b) P	lace and	date of marriage.
	(a)		(b)		(c)			(d)
				144				
			Particula	ars as to Ch	ildren			* ************************************
•	Chri	stian Names				Date	and Pla	ce of Birth
Corps in	Rgt. or	STATI	EMENT Army Rank	OF THE	SERVI Service not allowed to recked for fixing the rate of pension	CHARLES (TIME)	in Re- t allow- kon to-	Signature of Officers certifying correctness of
	Bepor	Casuatties, &c.	2 20 5		Years Day	-	Days	entries
Service towa	ards limite	d epsagement reckons from	130-	5-18 30-1918		1 12		1
							_	100000
1		1.1.	#				3.00	Stock tradi
He	ed.	XX Jours	au.	11919			_	50 50
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Paturn	16	Heads warter	0 11-11-	1016	Esta a Salata Antonio			
L				Comment of the Commen	77	2 10/1	1	P. T. Communication of Texts
	To an analysis	Demo	bilia	tion	118/	1/10		1010 :11
		, - 2,,,,,,	7		_	//		779
Tot	al Service	forfeited as above				170	1.03	Al-7L),
etal Service t	owards V-	agreement to 10-1-	- 1a	Service pro-		22	6	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	" Pens	ions "	1.	[date of dischar	ge]	ATS	dnys 	

petract from paily Orders part 11, Deput it. John's dated Nov. 15th., 1918.

THE UNDERSCRIPTIONED RESULTED FOR SPECIAL DUTY & CAPE RACE 11/11/1918.

#5517 Pte. S. Tuff.

Extract Baily Orders Fort 11 Unit The Boyal Hild. Rogt.

5517 Pte. L. Luff,

Proceeded to Cape Race On Special Duty 3-9-18.

C.R. 5517

Ax tract of Baily "rders Part II, dated Jan-14th 1919. Bepot St. John's.

DISCHARGE COMPIRMED ON DEMOBILIZATION

The discharge of the undernoted man on de obilization has been confirmed by Officer i/e Records on noted date.

5517 PteSelby Tuff

Discharged 10-1-19

C.R. 5517

Extract from Dally Orders Part 11 Unit The Royal HILE. Regt. St. John's, Dgc.13th,18.

The Undersentianed men was discharged on Demobilization what been approved by 0.0. Discharge Depot from Noted Dates he is removedation strength and transferred to Discharge Dapot panding confirmation by Officer 1/c Records.

5517 Pte. Sylvester Cuff.

Extract from Daily Orders Part 11 Unit The Royal Hfld. Regt. St. John's, dated August 20th, 1918.

5517 Pte. G. Luff.

Granted leave from 20-8-18 to 30-8-18.

Extract from Beily Orders part 11. from Unit The Royal M21d. Fogt. St. John's dated May 51, 1918

#5517 Pte. S. Luff

Attested for Coneral Service with the Royal Hild. Rogt. from May 30,1918 Tuff, S Hay Loeph. Regimental number



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. iIc 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 Selly Leff
Regiment from which discharged 1st. Newfoundland

Intended address Jackson Compression
Height on discharge Feet
Color of hair on discharge
Complexion Loans
Color of eyes Blee.
Descriptive Marks / refair of of of whose ryes hand force.
Figure on discharge
Christian name of Father Levely
Christian name of Mother
Wife's maiden name in full
Date and place of marriage
Christian names of children
Place and date of soldier's birth. Jankon Scue. 1201. 1899.
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) Lelanture (Rank) Re
Station Park Date Date (Malle)

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

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.

Newfoundland Res

January 10th.,1919

#5517 Pte. Selby Tuff,

Jackson's Cove,

Green Bay.

Dear Sir:-

Please find enclosed "Discharge Certificate No.397.

Yours faithfully.

Captain.
Paymaster & O.i/c Rocords.

Enc '1 1.

The Royal Newfoundland Regiment

Classification of soldier
. The above named man is discharged in consequence of
Place DEC 1918 Commanding Discharge Depot Commanding Discharge Depot The Royal Newfoundland Regiment CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE 5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and a just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regimen
accordance with Regulations. Place
Place
accordance with Regulations. Place
Date
Date
5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and a just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regimen
just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regimen
Place and date Stohus Selby Mak Xuff affoods Signature of solder Signature of witness,
CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER 5. I hereby certify that I am in a position to resume civilian occupation infimediately on discharge. Place and Date Signature of soldies 11-12-18 Signature of witness
STATEMENT OF SERVICE
7. Enlisted for service
APPROVAL OF DISCHARGE
8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer ic Record The Royal Newfoundland Regiment, twenty-eight days from date.
Place ST. JOHN'S. Officer Commanding Discharge Depot
DEC 13 1918
CONFIRMATION OF DISCHARGE
9. The discharge of above mentioned politic is hereby confirmed Moreoleef leaft Place Politics, Upen

The Royal Aewfoundland Regiment

5511 Btr. While All 1
Reg. No.5/1 Rank 176 Nage uff Belly
Date of Enlistment 30-5-18 Address July Bry District Williams
Occupation
Recommendation S.M.B Disability Rating
Passed to Demobilization Officer with following documents:-
Tassed to Democrization officer with 1020 mag destations
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
B 179 D 400B Form L do 3rd " 4
B 179a D 400C Form K do 4th " 5
B 179b B 103 ME 2 " 6 " 6
B 179c B 120 M 93
Date: 8.11.18. Jahr. Cahr. Jahr. O. C. Discharge Depot.
PARTICULARS FOR DEMOBILIZATION
r. Civil Re-Establishment. I am
Service shall be seen as the service shall be set to see the service shall be seen as the service shall be set to see the ser
a. Clothing.
Certified that Clothing Regulations have been complied with:—
(a) Clothing Allowance payable 1000
(b) Clothing Supplied Lossof of Thomas
Date//-/2-/8
#####################################

3. Transportation and Release Certificate.	
The above named has been provided with Travelling W	arrant No. 1
at M. Lanne and Release Certificate	5.70 at 2.20 Million (1995)
	and the
Date	X38N WNO MUGA
	Demobilization Officer
4. Pay and Allowances.	
The herein named soldier's accounts have been correct	ly balanced and all matters in connection
therewith settled. He has received pay and allowances to	10-1-19
	Altalus Capl.
Date 12-12-18	Depot Paymaster.
	Depot raymaster.
Discharge approved for. 13 12 18.	
Forwarded with following documents to O.C Discharge I	Depot.
	1 1 1 1/2
N.F. P 36 B 268 B 121 N.F. Med.	1 1 How made 1
F 178	
B 179. D 400B. Form L. do 3rd.	
B 179a D 400C Form K do 4th	. 5
B 179b B 103 ME 2	" 6
В 179с В 120 М 93	
Date	LBD icks Heff-
	Demobilization Officer.
APPROVED.	to T
Documents as above forwarded to:—	
Officer i c Records.	
Board of Pension Commissioners.	
with following additional documents.	trained to except automost
Control of the second of the s	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠
DEC 13 1918	DIFF STONE
Date	O. C. Discharge Depot.
Received the above noted documents from O. C. Discharge Depot.	
Negellan	A PEAN BUILDING
Date ACOMIGIS.	M_{\star}

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

MEDICAL HISTORY

Surname____

Luff

Christian Name...

Silvia

	Table I.—GENERAL TABLE	E
	0	100.
Birthplace:—Parish	eccession come. Count	ty
ν	SPECIAL RESERVE	REGULAR ARMY
	on 30th day of Man 1918	on day of 191
Examined	at Segatini.	at
Declared Age	/ years days	years days
Trade or Occupation	3 isharman	
Height	J feet (1. tnches	feet inches
Weight	15°5°. 1bs.	a lbs.
Chest (Girth when fully expanded	39 h. inches	inches
Measure- ment Range of Expansion	Yw. inches	inches
Physical Development		
(Arm	Right Left	Right Left
Vaccination Marks Number		
When Vaccinated	1	
Vision }	R.EV= 6 6 (1).	R.E.—V= L.E.—V=
	L.BV-	
	(a)	(a)
(a) Marks indicating congenital peculi- arities or previous disease		
) arities or previous disease		1
		(6)
(b) Slight defects but not sufficient to	(b)	
cause rejection	7 4 .	
	1 Pel	*
Approved by (Signature)	a ammil alesson	· · · · · · · · · · · · · · · · · · ·
(Rank)	Major	* · · · · · · · · · · · · · · · · · · ·
Participation of the second se	Medical Officer.	Medical Officer.
20.0	at Symus.	at at
Enlisted	on 30 th day of Man 198.	on day of 191
	Corps. Regtl. No.	Corps Regtl. No.
Joined on Enlistment	loyae hea.	1
	Regiment 3517.	
Transferred to		•
Became non-effective by		
(Signature	on day of 191	on day of 191
volgnature		1 1
(Rank)	And the first of the course of the	

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 Signatures
31-5-18	Vace 10 LaB 10
*	It is hereby certified that this soldier has been before a Travelling Medica;
· ·	for Discharge on Demobilisation. NOV 27 1918 cal category AII Date of T.M.B. Action Adulant.

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
				1	
	2007				
			L		
			4		
			•		٧
	,				
Signature V				100	

Civil Re-establishment Committee.



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

To work at fishing

Selby is Suff Signature of Man.

Reg. No. 5517

Signature of the Vocational Officer or his Representative

Place St Johns n, 7, 2.D

Date 1/12/18. 191

The Royal Newfoundland Regiment

Class for Demobil-
ization:—
A.

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

Discharge Depot: Headquarters The Royal Newfou	ndland Regiment NOV 27 1918
Regimental No. 5.51.7. Selly Name Address Day	Rle NSB
Address green Bay	NOB
Present Medical Category.	
Recommended for:—	(a) Immediate discharge
	O.C. Discharge Depot.
Members of Board	Senior Medical Officer
	Sw. Burden. M. O. Depot

Nº 6468



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

Identity Certificat No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	Address	AMOUNT (each person	
68	mother.	Jeone Luff.	Jacksons Co.	4 6	
				*	
		1			
			(A)		
			Total Allotment, S	- /	
	This form must be of signed by the Office required payments	completed by the Officer Commanding r Commanding Company and hande on application.	g Company, signed by the Volund to the Paymaster as authority	teer, counte	

ROYAL NEWFOUNDLAND REGIMENT.

		Medical Examination Held at Many and water may 30/
	ı.	Name Selvia Luff Age (a) Declared (8 (b) Apparent
	2.	Do you know of anything wrong with you? ***
no up		What severe illnesses have you had? From Style & SSI
ach	ف	
	3.	Height of 11
	4.	Eyesight (a) Left 4,2 (b) Right 46
	5.	Physical Defects (Examine after strenuous exercise)
		Date foint third finger lethand amountated Slightly enlarged testical
	6.	Examination of Lungs
		Measurement (a) Expiration 35 (b) Inspiration 395
	7.	Examination of Heart W
	8.	Examination of Urine
	9.	Examination of Mouth—(Defective Speech)
		Teeth
		Throat
		Nose
		Ears—(Otorrhea)
		(Deafness)
	10.	Have you been successfully vaccinated, and when? No
	11.	Name and address of next of kin Jalhu Wasley Jacksonsh
	REI	MARKS
	1	GwBorden
11	-	archofant
		·

Medical Examiners.

Nº 6468



THE ROYAL NEWFOUNDLAND REGIMENT

68 mother Jessie Li	H.	Jacksons Co Green B	ne oy	6
				1653
		·		
,				
NOTE.—This form must be completed by the Officer (Total Allotment, S		6

Nº 6468



THE ROYAL NEWFOUNDLAND REGIMENT

Identity Certificate No.	Whether Wife, Child other Relative or Friend		ME (in full)	Address	AMOUNT (each person
68	mother	Jeon	e Luff.	Jacksons Con	u 6
					1.11
			•		
	<u>* </u>				
				9	
OTE.—Th	nis form must be-	completed by the	Officer Commanding	Company, signed by the Volunt to the Paymaster as authority	eer, counter

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Number of Sheet_Ove Regiment of The Koyae Henformaleure. Signature of O. C. Company OBD ich Shieure. B 121. Regimental Number and Name Good Conduct Badges, Service pay or proficiency pay F-sherman Toined Period of with Colours 276 years. Place of Birth with Reserve 36 years. Alflons love NOB. Toined Toined Date of award or of order Name of Place OFFENCE Punishment awarded By whom awarded REMARKS dispensing with trial Breaking Banacks for Sammotis hours 14418 haps RIST wind D. while under quaranter the Torains Detention Junio Renk 13-11-18 Pte Demobilged Status 10 19. To be carried over.

The Royal Newfoundland Regiment

Classification for Discharge Medical Category Passed to Demobilization Officer with following documents:-.... В 121... D 400A..... B 1915........... do 2nd.... D 400B Form L ... D 400C..... Form K..... ME 2. Date 28.11.18 Q. C. Discharge Depot. PARTICULARS FOR DEMOBILIZATION 1. Civil Re-Establishment. I am.....in a position to resume civilian occupation. Particulars passed to Vocational Officer for information and action. 2. Clothing. Certified that Clothing Regulations have been complied with:-(a) Clothing Allowance payable # 600

O i|c. Re-clothing.

(b) Clothing Supplied

Date 11-12-18

3. Transportation and Release Certificate. The above named has been provided with Travelling Warrant No. . K. 2.!! Mel L. Somo . Sorta and Release Certificate No. 4. D ... issued. 11-12-18 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 ... 10. Date 12-12-18 Discharge approved for. 13. 12. 18, Forwarded with following documents to O.C Discharge Depot. N.F. P|36.... B 268..... N.F. Med D.F. 1.... . . D 400A..... B 1915.... D 400B Form L. Form K... ME 2.... В 179b..... В 103... М 93..... Date /3. 12. 18. APPROVED. Documents as above forwarded to:-Officer i|c Records. Board of Pension Commissioners. with following additional documents. Dec 13 1918

Date DEC 13 1918

O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot & Howley. Caft

Date Dec. 16/1918

O. C. Discharge Depot.

Aug. R.

Aug. R.

Reg. No5	517 Rank 1/2 Name off Some 578 Address perhans bove	/
Allotment	ment '-T-, T. Returned from Overseas.	<i>]</i>
Embarked fo		
	a Barrank Skirps.	
	Dio to Light Outy	
	-e 6-7-18. 2. 35 -9-18. -8-18 230-8-18.	
3-9-19 1	period but laps have delurned 11-11-1	8
4-11-18	awarded 48 hours detention	
	asses to simolulization Officer	
3-12-18	DISCHARGE APPROVED ON DELOBILISATION.	
		200000000000000000000000000000000000000