



FIRST NEWFOUNDLAND REGIMENT.

ATTESTATION OF

No. 1631 Name William McKay Corps _____

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. William McKay
2. What is your full Address?..... 2. Bluswood N.F.
3. Are you a British Subject? 3. Yes
4. What is your Age?..... 4. 21 Years 2 Months.
5. What is your Trade or Calling?..... 5. Saturner
6. Are you Married?..... 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7. No
8. Are you willing to be vaccinated or re-vaccinated? } 8. Yes
9. Are you willing to be enlisted for General Service? } 9. Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?..... } 10. { Name
Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted?..... } 11. Yes

I, William McKay do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

William McKay SIGNATURE OF RECRUIT.
E. St. John's Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act
The above questions were then read to the Recruit in my presence.
I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me at
on this 12th day of July 1915
E. St. John's Signature of the Attesting Officer.

† Certificate of Approving Officer.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the : _____
If enlisted by special authority, such will be attached to the original attestation.

Date _____ 191____
Place _____ } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Name William Grekay

Apparent age 21 years 2 months. Height 5 feet 10 1/2 inches.

Chest measurement { Girth when fully expanded 36 inches.
 Range of expansion 3 inches.

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Mrs. Martha Lin. Grekay
Glenwood | Relationship mother

Particulars as to Marriage.

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.
 (c) Present address. (d) Initials of Officer verifying entry.

(a)	(b)	(c)	(d)

Particulars as to Children.

Christian Names.	Date and Place of Birth.

STATEMENT OF THE SERVICES.

Corps in which served	Rgt. or Depot	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 _____									
Joined at _____ on _____									
Total Service forfeited as above									
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days									
" " " Pension " _____ (") _____ " "									



FIRST NEWFOUNDLAND REGIMENT.

ATTESTATION OF

No. 1631 Name William McKay Corps _____

Questions to be put to the Recruit before Enlistment.

- | | |
|---|-------------------------------------|
| 1. What is your name? | 1. <u>William McKay</u> |
| 2. What is your full Address?..... | 2. <u>St. John's</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your Age?..... | 4. <u>21</u> Years <u>2</u> Months. |
| 5. What is your Trade or Calling?..... | 5. <u>Labourer</u> |
| 6. Are you Married?..... | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?..... | 10. { Name |
| | { Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted?..... | 11. <u>Yes</u> |

I, William McKay do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

Wm McKay SIGNATURE OF RECRUIT.
E. 26th June '15 S. C. Norris Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act
 The above questions were then read to the Recruit in my presence.
 I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me at
 on this 12th day of July 1915
S. C. Norris Signature of the Attesting Officer.

† Certificate of Approving Officer.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the : _____
 If enlisted by special authority, such will be attached to the original attestation.

Date _____ 191 _____
 Place _____ } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT.

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

1631

Name William McKay

Apparent age 21 years 2 months. Height 5 feet 10 1/2 inches.

Chest measurement { Girth when fully expanded 36 inches.
 Range of expansion 3 inches.

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Miss Martha Ann McKay
Sumner | Relationship Sister

Particulars as to Marriage.

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.
 (c) Present address. (d) Initials of Officer verifying entry.

(a)	(b)	(c)	(d)

Particulars as to Children.

Christian Names.	Date and Place of Birth.

STATEMENT OF THE SERVICES.

Corps in which served	Rgt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank.	Dates	Service not allowed 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>26-6-15</u>									
Joined at <u>St John's</u> on <u>26-6-15</u> .									
<p style="font-size: 2em; opacity: 0.5;">Demobilization St John's 18-4-1919</p>									
Total Service forfeited as above									
Total Service towards Engagement to <u>18-4-19</u> (date of discharge).					<u>3</u> years	<u>297</u> days			
" " " Pension " " " " " "									

Discharged from 18th Regt
 Embarked St John's train to Quebec 27-10-15
 Embarked Southampton 7-4-16 Disembarked Rouen 8-4-16
 Joined Battalion 26-4-16 Wounded 3-8-16 Admitted 25th
 Stry Hospital 4-8-16 Invalided to England 5-8-16 Admitted Wandsworth 5th
 75 N Staff 146th Ferbrough then attached depot 16-10-16 Embarked South
 Hampshire 25-4-17 Disembarked Rouen 26-4-17 Joined Battalion 7-6-17
 Admitted 88 FA 22-0-19-6-17 Discharged to unit 24-6-17 Wounded 16-8-17
 Admitted 61 C.C.S. S.A. Back 16-8-17. Joined Base depot 23-8-17. Wound Battalion 9
 Wounded 2-12-17 Admitted 89 S.A. Back Wound by 4-12-17. Dies to base Rev Board capt.
 by England 5-12-17. Returned unit in the field 28-12-17 Wounded 8-2-18 Admitted 67 FA 2nd N. 23
 by England 17-3-18 Admitted Hambrook 17-3-18 Ferbrough then attached depot 18-5-18
 Embarked 18-5-18 Wounded 21-9-18 Admitted Waterbury 25-8-18 Admitted 26-9-18
 Ferbrough then attached depot 22-7-18 Wounded 20-7-19 Arrived Southampton 7-7-19

Regimental Number 1631

Company E

THE
1ST NEWFOUNDLAND REGIMENT.

I hereby enlist for service at home or abroad in the King's Forces under the following conditions :

For the duration of the present war, or until my discharge.

Subject to the Army Act, the King's Regulations, and to such ordinances as may apply or may be made to apply to the British Regular Army.

Subject to the Newfoundland Volunteer Act, 5 George V., Chapter IV.

Signed W McKay

Witness A. L. Summers
2nd Lt

Dated at Newton Park School

Apr 5th 1916

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S, Nfld.

Fold Here

OCT 5 1921

1921.

The accompanying **Victory Medal** and/or **British War Medal**
is/are forwarded herewith to

Wm. McKay

in respect of his service as No. **1631** Rank **Pte**

Name **Wm. McKay**

Royal Nfld. Regt.
~~Nfld. Forestry Corps.~~

Receipt of the same should be acknowledged hereon.

Received

Revalsof

Signature

W McKay

Date

14-2-1922

Address

117 New Lower Street

[P.T.O.]

C.R. 1631

Extract from Nominal Roll of the Royal MFLA. Regt.
S.S. Scouts Division, Jan. 26/19.

1631 Mackay.

C.R. 1631

Extract from Daily Orders Part 11 Unit the Royal Nfld.
Regt. By. Lt. Col. B.J. Barton, D.S.O. Commanding
the 2nd Bn. 20-1-19.

The following having reported back from 1st Bn. is taken
on the strength and posted to H. Company 21-1-19.

1631 Pte. McKay, W.

R.

1631

Extract from Daily Orders Part 11 Unit The Royal
Nfld. Regt. Station 3rd Echelon, 23-3-18.

1631 Pte. W. McKay

Invalided to Eng. 17-3-18. Wound.

C.R. 1631

Extract from Orders by Major G.T. Mathias, D.S.O. Commdg.
1st Battn. Royal Nfld. Regt. 20-8-18.

The following joined the Battn. 19-8-18,, and is posted to
C. Company.

1631 Pte. W. MCKay.

R

1631

Extract of Daily Orders Part II Royal Newfoundland Regt.
Depot St. John's dated April 24th/19.

The discharge of the undernoted on Demobilization has been
CONFIRMED by Officer i/c Records from noted date.

#1631, Pte. Wm. McKay.

18/4/19.

C.R. 1631

Extract from Nominal Roll of Mfld. Regt. Draft No. 23.
from 2nd Bn. Depot, to 1st Bn. B.E.F. Embarked South-
ampton, 25-4-17.

1631 Pte. W. McKay.

C.R. 1630

1631

Extract from Medical Board held on FRIDAY AFTERNOON
MARCH 28th., the following was the finding.

RECOMMENDED DISCHARGE FROM THE ARMY.

REQUIRES TREATMENT

#308 Pte. Wm. McKay.

1631

C.R. 1631

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, April 10th, 1919.

The discharge of the undernoted on demobilization has
been APPROVED by O.C. Discharge Depot from noted dates

1631 Pte. Wm. McKay

4-4-19.

C.R. 1631

Extract from Nominal Roll of the Mfld. Regt. Draft
No.4, from 2nd Bn., Depot to the 1st Bn., B.E.F.
Embarked 8-4-16.

1631 Pte.W.McKay.

C.R. 1631

Extract of DAILY ORDERS PART II ROYAL NEWFOUNDLAND REGIMENT
IN FRANCE DATED "21/11/18.

TO ENGLAND

#1631 Pte. W. McKay.

26/10/18.

C.R. 1631

Extract of Casualties from Pay & Record Office, London, dated Jan.
14/1/19.

The undermentioned, ex 3rd London G, Hospital, 14/1/19, is granted
furlough to 21/1/19, with orders to report at the P.& R.O. on the
latter date for disposal. To be repatriated.

1631 PTE. W. McKay.

A.Fs. W.3001 from 3rd L.G.H.

C.R. 1631

Extract from War Office List No. C. 1737 dated 6/11/18.

1631 Pte. W. McKay.

WOUNDED 21-10-18

C.R. 1631

Extract from Daily Orders sent to Capt. The Royal Militia, Regt.
St. John's, 11-2-18.

The undersigned returned from Germany and reported at Depot.
7-1-18.

~~Registered at G. E. 2121.~~

1631 Pte. Wm. McKay.

C.R. 1631

Nov. 6th, 18.

Mrs. Martha L. McKay,
Glenwood.

Dear Madam:-

I beg to inform you that additional information has to-day been received by this Department through the Visiting Committee of the Newfoundland War Contingent Association, to the effect that No. 1631, Private William McKay, 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 its destination 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 refund the amount paid by the Sender for such 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 or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority 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 _____ Address **Dept of Militia.**

Line Number	Rcd	By	Sent	by	Check

Dated

Oct. 30th, 1918

To

Martha McKay, Glenwood

Regret to inform you that Record Office, London, officially reports **No. 1633, Private William McKay** at 3rd London General Hospital, Wandsworth suffering from **G.S.W. back and left arm.**

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

J.R. Bennett

Chge Dept of Militia.

Minister of Militia.

FOR TYPEWRITER

C.R. 1631

Extract from Nominal Roll of Sick and Wounded from the France
Expeditionary Force to the 3rd., London General Hospital
admitted 26/10/18.

#1631 Pte. W. McKay.

G.S.W. BACK L. ARM.

E.B. 7631

Bank of Montreal,
St. John's, Nfld.
1002

2220

August
Twelfth,
1918.

J. M. Howley, Capt. & Paymaster,
Department of Militia,
City.

Dear Sir:

Re No. 1631 Pte. William Mackay - Allotment

Referring to your letter of even date, we beg to advise that the allotments, account the above private have been placed to the credit of Savings Account No. 15455; the balance standing at credit of same, at present is \$202.77.

We have no record of having received any communication from Private Mackay.

Yours faithfully,

[Handwritten signature]

Manager.

C.R.

1631

Aug. 12th. 1918

The Manager,
Bank of Montreal,
City

Dear Sir:-

re No. 1631 Pte. William Mackay - Allotment

This soldier declared an allotment of 60¢ per day payable to the Bank of Montreal (Form. L. 1502) - reduced to 50¢ per day from November 1st. 1916; and cheques have been forwarded to you regularly on this account.

The following is an extract from a communication recently received from the Chief Paymaster, London:-
"It is stated by Pte. Mackay that he wrote
"the Bank of Montreal for some money, and he was
"advised by them that he had no account."

Will you kindly advise me what disposal has been made of the monies deposited with you on account of the above mentioned allotment, and oblige.

Yours truly,

Capt.
Paymaster

Cables and Telegrams :
"SYNOPTICAL," London.

Telephone :
VICTORIA 147.

Communications to be addressed to the
CHIEF PAYMASTER & OFFICER I/O RECORDS,
and the following No. quoted :

N. F. P/38A.

DUPLICATE.

NEWFOUNDLAND CONTINGENT.

MEMORANDUM.

No.

10250/393/P&A. **C.2** 1631

From

PAY AND RECORD OFFICE,

58, VICTORIA STREET,

LONDON, S.W.

June 27th,

191

8

To

The Hon. the Minister of
Militia,
St. John's,
Newfoundland.

August 12, 1918.

FM/NM.

SUBJECT :

1631 PTE. W. MACKAY:
ROYAL NEWFOUNDLAND REGIMENT.

Reference Nos.

REPLY

Dated August 12th, 1918

191

Please return **ORIGINAL** and retain **DUPLICATE.**

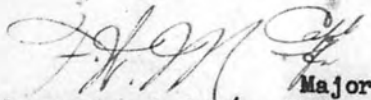
An enquiry has been received from the O.C. 2/Bn., regarding the above Soldier's allotment:

Reference may be made to Form K4004, 30 s. per diem, payable to the Bank of Montreal, N.F. in the name of Miss Mary Ellen Mackay, and self, or either, commencing 25/11/16:

It is stated by Pte. Mackay that he wrote to the Bank of Montreal for some money and he was advised by them that he had no account: Will you kindly look into this matter, and advise whether payments are being regularly made to his account at the Bank named, please.

Copy of correspondence with Bank of Montreal is enclosed for information.

Minister of Militia.


Major,
Chief Paymaster & O I/c. Reds.

CR: 1631

Extract from Casualties received from Bonden, dated May 6, 1918

#1631 Pte. W. McKay.

Was discharged from the 3rd London
General Hospital on 4/5/18 and granted furlough to ~~13/5/18~~
13/5/18 fit for 1, Duty.

AUTHORITY:- Notified by O.C. 3rd L.G.H.

C.R. 1631

Extract of Casualty List received from Pay and Record Office London
date 21st. 1918.

1631 Pte. W. McKay,

Royal Nfld. Regt., G.S.W. L.Gt. Toe Sev..... Adm. 14th. Gen. H. Wines
-sur 15th. March 1918.

C.R. 1687
Counter No. _____
NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World 1631

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 its destination 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 refund the amount paid by the Sender for such 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 or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

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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 _____ Address Dept of Militia

Line Number	Rcd	By	Sent	by	Check
-------------	-----	----	------	----	-------

Dated March 20th 1918

To Mrs. Martha L. McKay, Glenwood, Twillingate Dsct.

Regret to inform you that Record Office, London, officially reports No. 1631, Private William McKay at Sandsworth suffering from G.S.W. left foot

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

J.R. Bennett

Acting Minister of Militia.

FOR TYPEWRITER

C.R. 1631

Extract from Casualties received from Day Record Of 100
London, dated March 19th, 1918.

#1631 Pte. W. McKay.

Gunshot wound Left Foot.

Admitted 3rd Lon. Gen. Hosp. Wandsworth 17-3-18

C.R. 1631

Extract of Casualties received from Pay & Record Office,
London, dated December 18, 1918.

The following Casualty in the 1/1st. Nfld. Regt. with the
British Expeditionary Force, is reported under various
dates:-

#1631 Pte. W. McKay.

Wounded.

C.R. 1631

Extract from War Office, List No.H.A. 17247.

ADMITTED 6 CON. DEP. ETAPLES EX 7 CAN. GEN. H. 6th DEC. 17.

#1631 Pte. W. M.cKay.

BC.

C.R. 1631

Extract of Casualties received from Pay & Record
Office, London, dated December 16, 1917.

#1631 Pte. MacKey. ✓

Wounded 3/12/17.

C.R. 1631

Extract of Casualties received from Pay & Record
Office, London, dated December 15, 1917.

#1631 Pte. W. McKay. ✓

Gunshot wound right leg. Canadian.

Admitted 6th Con. Dep. Staples ex 7th/General
Hospital, December 6th, 1917.

WFOUNDLAND POSTAL TELEGRAPHS.**Cable Connection with all the World****All Messages Sent are Subject to the Following Conditions:**

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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 _____ Address _____

Line Number	Rcd	By	Sent	by	Check

Dated December 14, 1917.*To* Mrs. Martha L. McKay,
Glenwood.

Regret to inform you that Record Office, London, officially reports No. 1631, Private William McKay, was at Seventh Canadian General Hospital, Etaples, December fifth, suffering from mild gunshot wound in right leg.

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

R. A. SQUIRES,

Colonial Secretary.

FOR TYPEWRITER

SICK AND WOUNDED: N:C:O's AND MEN OF THE EXPEDITIONARY FORCE FRANCE

C.R. 1631

WINCHESTER RECORD OFFICE:

No. H.A. 17480.

422573	Pte Keith C	2/10 Londons	GSW Leg.R.	Adm 6 Con Dep Etaples ex 7 Can Gen H.13 Dec'17.
1599	" Brunt H	2 Rifle Bde	Tapeworm	Adm 6 Con Dep Etaples ex 7 Can Gen H.13 Dec'17.
332016	L/C Vincent W	1/6 Londons	GSW Face	Adm 6 Con Dep Etaples ex 22 Gen H.13 Dec'17.
2275	Pte Hill W	10. K.R.R.	GSW Hand L.	Adm 6 Con Dep Etaples ex 18 Gen H.13 Dec'17.
15946	" Mills W	12 do	Dis to Medical Board	Dep Etaples Class A ex 6 Con Dep 13 Dec'17.
372897	" Fraser D	1/8 Londons	Dis to Medical Board	Dep Etaples Class A ex 6 Con Dep 13 Dec'17.
536656	" Saywood A	15 do	Gas Shell W	Adm 6 Con Dep Etaples ex 18 Gen H 13 Dec'17.
2/9911	" Whan A	1/6 K.R.R.	Bronchitis	Adm 6 Con Dep Etaples ex 1 Can Gen H.13 Dec'17.
203868	" Proctor C.K.G	12 do	GSW Arm R	Adm 6 Con Dep Etaples ex 56 Gen H.13 Dec'17.
R/34347	" Gilkay L.	8 do	D.A.H.	Adm 6 Con Dep Etaples ex St John Amb. Bde. H.13 Dec'17.
C/7587	" Jackson G	16 do	Trench Feet	Adm 6 Con Dep Etaples ex 24 Gen H 13 Dec'17.
202984	" Denton A.V.	17 do	do	Adm 6 Con Dep Etaples ex 24 Gen H.13 Dec'17.
28100	" Bamford A	10 Rifle Bde	GSW Neck	Adm 6 Con Dep Etaples ex 24 Gen H.13 Dec'17.
422593	" Evans C.W	2/10 Londons	Dis to Medical Board	Dep Etaples Class A ex 6 Con Dep 14 Dec'17.
530222	" Eagle W.E.	15 do	Dis to Medical Board	Dep Etaples Class A ex 6 Con Dep 14 Dec'17.
574978	" Derbyshire J	17 do	Dis to Medical Board	Dep Etaples Class A ex 6 Con Dep 14 Dec'17.

ARMY SERVICE CORPS:

No. H.A. 17480.

T4/275683	Dvr Rontree N	ASC HT. 20 Fd Amb	Dis to Unit ex 6 Con Dep Etaples Class A 13 Dec'17.
M2/226234	" French C.J.	" MT 9 Aux Steam Co	
		PJ O	Adm 6 Con Dep Etaples ex 4 Gen H 13 Dec'17.
T4/250300	" Cackburn J	ASC 56 Dv Trn	Dis to Medical Board Dep Etaples Class A ex 6 Con Dep 13 Dec'17.
T2/017320	" Renshaw W.F	ASC HT. att 34 F Amb	Dis to Medical Board Dep Etaples Class A ex 6 Con Dep 14 Dec'17.
M2/678580	Cpl Cutteridge E	ASC MT 16 BAC	Dis to Medical Board Dep Etaples Class A ex 6 Con Dep 14 Dec'17.
DM2/179290	Pte Griffiths J	ASC MT att RGA	Dis to Medical Board Dep Etaples Class A ex 6 Con Dep 14 Dec'17.
		211 Sge	
T2/13055	Dvr Fitzgerald J.	ASC HT 9 Can Bde	Dis to Medical Board Dep Etaples Class A ex 6 Con Dep 13 Dec'17.

NEWFOUNDLAND EXPEDITIONARY FORCE

No. H.A. 17480.

X 1631	Pte McKay W	1 Newfoundland	Dis to Medical Board Dep Etaples Class A ex 6 Con Dep 13 Dec'17.
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C.R. 1631

Extract from List of Sick and Wounded N.C.Os. and Men of the
Expeditionary Force - France, dated 13th. Dec. 1917.

List No: H.A. 17141.

1631 Pte. W. McKay

1 Wfld..... GSW. R. Leg Mild.

Adm. 5th. Can. Gen. Hos. Staples 5th. Dec. 1917.

C.R. 1631

Extract from Casualties...Received from Pay & Record
Office, London, Oct.5th, 1916.

Discharged from Hospital Granted furlough from
4-10-16 to 13-10-16. DUTY.

1631 Pte. W. McKay.

C.R. 1631

Extract from Code Telegram from Major Timewell, received
2 p.m. August 25th. 1917.

At 2nd General Hospital, Letreport

1631 McKay

G.S.W. Back mild.

C.R. 1631

Extract from General Roll, Draft No. 50 from Sgt. Royal 2416.

Regt., Hasley Down Camp, Winchester, to Sgt. W. H. Field. R. S. S. S.

Entered "Southampton".

1631 Pte. McKay, W.

NEWFOUNDLAND POSTAL TELEGRAPHS.

C.R. 1631 136
Counter No. _____



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 its destination 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 refund the amount paid by the Sender for such 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 or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connect on 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 _____ Address _____

Line Number	Rcd	By	Sent	by	Check

Dated August 25, 1917.

To Mrs. Martha L. McKay,
Glenwood.

Regret to inform you that Record Office London, officially reports No. 1631, Private William McKay, is at Second General Hospital, LeTreport, suffering from mild gunshot wound in the back.

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

~~XXXXXXXXXXXX~~ R.A. SQUIRES

Colonial Secretary.

FOR TYPEWRITER

C.R. 1631

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

August 24th. 1916.

The following Casualty in the 1/1 Newfoundland Regiment with
the British Expeditionary Force is reported under various date

1631, W. McKay. ✓

WOUNDED

M (136)

C.R. 1631

COPY OF TELEGRAM.

Dated

7th August, 1916.

To Mrs. Martha L. McKay,
Glenwood.

Regret to inform you that the Record Office,
London, officially reports No. 1631 Private William
McKay admitted Wandsworth Gunshot Wound Hip slight.

Upon receipt of further information I shall immedi-
ately wire you and trust that the next report will
be of his convalescence.

J. R. BENNETT,

Colonial Secretary.



C.R. 1631

SICK AND WOUNDED N.C.O'S AND MEN OF THE EXPEDITIONARY FORCE - FRANCE.

A U S T R A L I A N I M P E R I A L F O R C E .

LIST NO. H.A. 13393.

7287	Gnr.	Cooles F.H.	Aus.FA.13/5 Bde.	Suff. Poison Gas Shell	Dis.to Base Dtls.ex.3	Con.Dep.Le Treport 25 Aug'17.
				W.		
3605	Pte.	Joynes W.	15th Aust.	Myalgia.	Dis.to Base Dtls.ex.3	Con.Dep.Le Treport 25 Aug'17.
107	"	James H.C.P.	36th do.	Influenza.	Dis.to Base Dtls.ex.3	Con.Dep.Le Treport 25 Aug'17.
2014	Sglr.	Dimmack B.	Aus.FA.51/13 Bde.	G.S.W. Fingers L.	Dis.to Base Dtls.ex.3	Con.Dep.Le Treport 25 Aug'17.

N E W Z E A L A N D C O N T I N G E N T .

LIST NO. H.A. 13393.

23/999	Pte.	Bowden H.J.	1st N.Z. R.B.	G.S.W. Head.	Dis.to Base Dtls.ex.3	Con.Dep.Le Treport 25 Aug'17.
27882	"	Halley G.C.	1st N.Z.Otago.	Gas Shell W.	Dis.to Base Dtls.ex.3	Con.Dep.Le Treport 25 Aug'17.
35209	"	Jelley J.T.	3rd N.Z.Auckland.	Anaemia.	Dis.to Base Dtls.ex.3	Con.Dep.Le Treport 25 Aug'17.
32312	"	Davidson A.	2nd N.Z. R.B.	G.S.W. Hand L.	Dis.to Base Dtls.ex.3	Con.Dep.Le Treport 25 Aug'17.

C A N A D I A N E X P E D I T I O N A R Y F O R C E .

LIST NO. H.A. 13393.

2222

46600	Pte.	Bell W.E.	15th Can.	G.S.W. Face L. & Leg.	Dis.to Base Dtls.ex.3	Con.Dep.Le Treport 25 Aug'17.
252411	"	Collier D.	10th Can.	G.S.W. Neck.	Dis.to Base Dtls.ex.3	Con.Dep.Le Treport 25 Aug'17.
1000860	"	Hutchinson J.	16th Can.	G.S.W. Leg L.	Dis.to Base Dtls.ex.3	Con.Dep.Le Treport 25 Aug'17.
678541	"	Brown F.	15th Can.	Cont. Shldr.R. W.	Dis.to Base Dtls.ex.3	Con.Dep.Le Treport 25 Aug'17.
1001219	"	Lintick R.S.	16th Can.	G.S.W. Chest.	Dis.to Base Dtls.ex.3	Con.Dep.Le Treport 25 Aug'17.
256561	"	Moe W.B.	5th Can.	G.S.W. Shldr.L.	Dis.to Base Dtls.ex.3	Con.Dep.Le Treport 25 Aug'17.
672963	Spr.	Wythindale C.	7th Can.Rly.Trps.	P. U. C.	Dis.to Base Dtls.ex.3	Con.Dep.Le Treport 25 Aug'17.
871109	Pte.	Fifer J.	8th Canadians.	Suff. Poison Gas Shell "W"	Adm.3 Con. Dep. Le Treport 25th August 1917.	
874607	"	Scales W.	107 Can.Pnrs.	do.	Adm. 3 Con. Dep. Le Treport 25th August 1917.	

N E W F O U N D L A N D C O N T I N G E N T .

LIST NO. H.A. 13393.

1631	Pte.	McKay W.	2/1 Newfoundland.	G.S.W. Back.	Dis.to Base Dtls.ex.3	Con.Dep.Le Treport 25 Aug'17.
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S O U T H A F R I C A N R E C O R D O F F I C E (N A T I V E S)

LIST NO. H.A. 13393.

13252	Pte.	Mamabulo F.	24th Co.SANLC.	Diarrhea slt.	Adm.S.A.Native Camp H. Saigneville 25 Aug. 17.
15410	"	Scotch	28th Co. do.		Dis. ex. Detention H. 2 Labour Camp Rouen 25th August 1917.
14545	"	Bob	26th Co. do.		Dis. ex. Detention H. 2 Labour Camp Rouen 26th August 1917.

C. 2.—Casualties.

COLONIAL CONTINGENTS ONLY.

Army Form W 3026A.

3rd London General

HOSPITAL, at

Wandsworth

Affiliated to

NOMINAL ROLL of Sick and Wounded from the * **France** **Expeditionary Force**
 admitted on **5th August 1916** from Hospital Ship **Cambria** Southampton
 or
 Dover.

* Here insert which Expeditionary Force.




The nature of the casualty is required for telegraphing details overseas. If the details given are insufficient, reference back to the hospital for further information is rendered necessary. The following instructions should therefore be carefully followed in all Colonial cases:

- (a) In the case of sickness, the nature and degree should be stated, e.g., enteric, slight.
 - (b) In the case of wounds, the nature of the wound, the part of the body affected, and the severity of the injury should be stated, e.g., gunshot, skull, severe.
- If a limb has been amputated the fact should be recorded.

NOTE.—These rolls should be forwarded direct to the War Office, Alexandra House, Kingsway, W.C., not later than the day after admission; envelopes to be marked C. 2, Casualties; rolls are not to be telegraphed in advance. The duplicate of the rolls should be sent to the Officer in charge of Records of the Colonial Contingent concerned.

Admissions to the outlying sections of the hospital should be shown separately. If the distance of these sections should render it impossible to forward the rolls the day after the admissions, the sections should be instructed to send lists (on these Army Forms) direct to the War Office, and to the Colonial Contingent Record Office concerned.

Regtl. No.	Rank	Name (Surname first)	Corps (Battn. numbers to be shown, also full title of Colonial Unit)	Casualty (See note in large type above).
1631	Pte	Mc Kay X W.	1st Newfoundland	G.S.W.L.Hip (flesh slight)
				
(Sgd) Horace Fagan, Capt.R.A.M.C.T.F., Registrar, R.A.M.C.T., 3rd London General Hospital, Wandsworth, S.W.				

C.R. 1631

C.R.

1631

Extract from Daily Orders Part II & at The Royal Wld.
Regt., St. John's, May 21st, 1917.

Nominal Roll of Draft. No. 23, which left Ayr for the B.E.F.
24-4-17 and which left Southampton on the 25-4-17.

1631 Pte. E. McKay.

C.R. 1631

Extract of Casualty List received from P. & R. O. Oct. 5th. 1916.

1631. Pte W. McKay. ✓

Discharged from Hospital and granted furlough from 4/10/16 to 13/10/16.

Fit for Duty.

SICK AND WOUNDED N.C.O's AND MEN OF THE EXPEDITIONARY FORCE. - FRANCE.WARLEY RECORD OFFICE.

17739	Pte.Course,P.	7-Bedford R.	Susp. Cerebro Spinal. Meningitis.	Adm.14.Sty.Hos.Boulogne	<u>LIST No. H.A. 1496.</u> 4th.Aug'16.
10019	" Brown,F.C.	5-North'n. R.	Influenza.	Adm.2.Can:Sty.Hos.Outreau	4th.Aug'16.
17139	" Bannard,L.	5- do.	S.W. L.Shldr. & Back.	do.	
13014	Sgt.Griffiths,J.	2-Essex R.	Incised Wd.L.Knee.	do.	
18192	Pte.Howe,C.	1-North'n. R.	G.S.W.R.Shldr.Legs	DIED.in 2.Can:Sty.Hos.Outreau	4th.Aug'16.
			Tetanus.		
10143	" Samson,C.	3-Bedford R.	S.W. L.Hand.	Adm.2.Can:Sty.Hos.Outreau	5th.Aug'16.
17159	" Kerley,S.J.	11-Suffolk R.	B.W. R.Hand.	do.	
22922	" Speed,W.	11- do.	G.S.W. R.Foot.	do.	
21103	" Peyton,A.	11- do.	S.W. R.Shldr.	do.	
16603	L/C.Brown,L.J.	1- do.	S.W. L.Arm.	do.	
25279	Pte.Wesley,A.G.	3-Bedf. R.	B.W. L.Leg.	do.	

TERRITORIAL FORCE. - WARLEY RECORD OFFICE.

3165	Pte.Quirman,L.S.	1-Herts. R.	V.D.H.	To Eng.ex.2.Can:Sty.Hos.	<u>LIST No. H.A. 1496.</u> 5th.Aug'16.
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CAVALRY RECORD OFFICE. - CANTERBURY.

4054	Pte.McKay,E.	12-Lancers.	Diphtheria	Adm.14.Sty.Hos.Boulogne	<u>LIST No. H.A. 1496.</u> 4th.Aug'16.
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CAVALRY RECORD OFFICE. - YORK.

1653	Tpr.Medell,S.	Sth.Irish Horse.	Influenza	Trans.to 1.Con.Camp ex.14.Sty.Hos.	<u>LIST No. H.A. 1496.</u> 4th.Aug'16.
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NEWFOUNDLAND CONTINGENT.

1631	Pte.McKay,W.	1-Newfoundland.	S.W.L.Hand,Hip,& Leg.	Adm.2.Can:Sty.Hos.Outreau	<u>LIST No. H.A. 1496.</u> 4th.Aug'16.
1631	" McKay,W.	1- do.	S.W. L.Hip,Leg.& Hand.	To Eng.ex.2.Can:Sty.Hos.	5th.Aug'16.

NAVAL FORCE. - ADMIRALTY.

2556C	A/B.MacDonald,W.	R.N.D.Mach G.Co.	Septic Ulc. R.Knee	To Eng.ex.2.Can:Sty.Hos.	<u>LIST No. H.A. 1496.</u> 4th.Aug'16.
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NEW ZEALAND CONTINGENT.

9/1436	Dvr.Heads,R.	N.Z.A.S.C.1-Div.Tr.	Susp. Nephritis.	Adm.14.Sty.Hos.Boulogne	<u>LIST No. H.A. 1496.</u> 4th.Aug'16.
10/4150	Pte.Miller,F.	2-Well.En.N.Z.Force.	Susp. Diphtheria.	do.	
24/71	" Caldwell,A.	2-N.Z. Rif. Bde.	do.	do.	



C.R.

N 31

Extract of Casualty List received from P. & L R. O. Aug. 10th. 1916.

1631. Pte W. McKay. ✓

Transferred fromt the 3rd London Gen. Hos. to Brooklands Military Hospital
Weybridge.

C.R. 1631

1631 MCKAY. ✓

EXTRACT OF CASUALTY LIST RECEIVED FROM THE PAY & RECORD OFFICE
LONDON DATED 7/8/16.

"Gunshot wound hip slight. ADMITTED WANDSWORTH."


C.R. 1631

1st NEWFOUNDLAND REGIMENT

Extract of Casualty List received from P. & R. O. Aug 12th 1916.

1631, Pte McKay.

W. Shell Wounds 3/8/16. Reported by O.C. Unit 3/8/16.



CR. 1631

Extract from Nominal Roll of Draft proceeding to I.I.F.
on or about the 8th April 1916.

#1631 Pte. W. McKay.

C.R. 1631

Extract from Nominal Roll Entained St. John's 27/10/16 for Overseas.

1631 Pte. W. McKay.

The Royal Newfoundland Regiment

CIVILIAN RE-ESTABLISHMENT ON DEMOBILIZATION

No. 1631 Rank Pvt Name Wm M Kay
 Former Occupation Printer Address Glenwood District St. John's
 Class B Medical Category E Disability Rating 100% 3 mths

O.C. Discharge Depot.

Above noted man states he has no employment in prospect on his discharge. His personal wish is to obtain a position as Student. His case has therefore been referred this day to the Vocational Officer for action, and his discharge is therefore held in abeyance.

Date 2-4-19

Lieut
Demobilization Officer

To be forwarded Orderly Room in Duplicate.

Reg. No. *16 31* Rank *Plt* Name *McKay Wms*

Attested Address *Glenwood*

Allotment Allottee

Date of Allotment Returned from Overseas *2-19*

Returned on S.S. Cause *Discharge*

28.3.18 Sec. his - from the Army. requires
Treatment

14.19.

PASSED TO DEMOBILISATION OFFICER

4.4.19.

DISCHARGE APPROVED ON DEMOBILISATION



THE ROYAL NEWFOUNDLAND REGIMENT
HEADQUARTERS

St. John's, Newfoundland,

April 3rd/19

191

From Officer Comanding,
Discharge Depot
Office of D.M.S.

To ~~Board of Pension Commissioners,~~
Militia Bldngg

1631, Pte. McKay, Wm.

Above noted man was before the Standing Medical Board
on 28-3-19 and was recommended for discharge as perman-
ently unfit and "requires treatment"

His discharge on demobilization has been approved by the
Officer Commanding, effective from 4-4-19 and I am send-
ing him herewith for your attention and necessary action please.

Copy of his Medical Board will be forwarded you in due
course.

Attest

Copy to Board of Pensions Commissioners

C.R. 1631

W. McKay was attested for General service
with the NEWFOUNDLAND REGIMENT on June 26th 1915.
Regimental No 1631 was allotted to Pte. W. McKay.

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th. 1919.

W. Mc Kay.

1631

P. H. G.

FOR USE IN THE CASE OF ALL SOLDIERS SENT TO THEIR HOMES UNDER
A.C.I. 1011 OF 1916, PARA. 2(ix.)

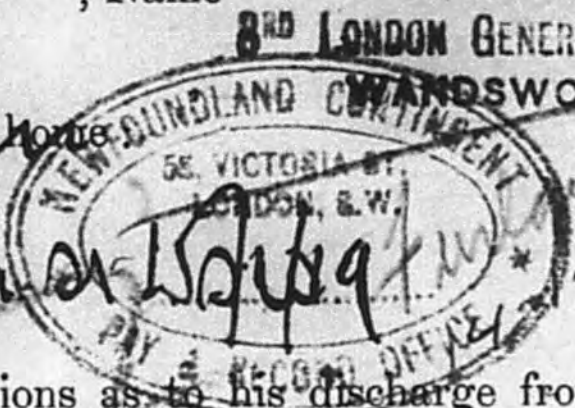
No. 1631, Rank R Med, Name McKay, W
Plé (Regiment)

is discharged from*

with orders to proceed to his home

(Address

58 Victoria St



19 to
21-1-19 re-attached

and there to await further instructions as to his discharge from the Service.

Officer Commanding.

Place Wandsworth

Date 14-1-19

Registrar, R.A.M.C.T.
3rd London General Hospital,
WANDSWORTH, S. W.

*Here enter name of Hospital or Unit from which the Soldier is discharged.

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

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

1. Unit and Corps. **R. Newfoundland.**
2. Regtl. **1931.** 3. Rank... **Pts.**
4. Name **Mc Kay** **William**
(Surname) (Christian Names)
5. Age last birthday **24.**
6. Posted for duty on **8.8.13.** at **St. John's.**
 in category (or grade) **A1.**
7. Former Trade or Occupation }
 7a. If the soldier claims ~~land~~ service in Army, he should state—
 (a) Former Regts. or Corps; with Regtl. Nos.
 (b) Date of Discharge;
 (c) Cause of Discharge.
 (d) Particulars of Pension or Gratuity (if any)
8. If the disability is an injury was it caused
 (a) in action **Yes** (b) on field service **Yes**
 (c) on duty **Yes** (d) off duty? **No**
9. If a Court of Inquiry was held on an injury state:—
 (a) When
 (b) Where **N. A.**
 (c) Opinion of Court

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

Statement of Case.

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

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

11. Date of origin of disability. **G.S.W. Back.**
12. Place of origin of disability. **21.10.13.**
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

Defending a line when hit by shell fire. Admitted to Base Hospital then to 3rd. London General Hospital.

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

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

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

All wounds healed.
 Movements of shoulder are restricted. The wounds of joint behind the shoulder. Hand grasp good. Some anaesthesia over lower and inner side of forearm

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

Yes, skin grafting.

not applicable.

A small G.S.W. on forearm causing the anaesthesia.

20. Do you recommend—

- (a) Discharge as permanently unfit?
 (b) Change to United Kingdom?

Transfer to Newfoundland

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

Sgd. ~~Thos. H. Harley~~ ~~Capt. R.A.M.C.T.~~
 Medical Officer in charge of case.

Station

Date

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

OPINION OF THE MEDICAL BOARD.

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

21. Give diagnosis and particulars of:—

- (a) Any disability claimed or discovered. Large scar of old G.S.W. adherent
 (b) The present condition thereof. to ribs limiting movements of left scapula causing inability to bear any pressure on back and to swing left arm freely, left hand weak.

22. State whether the disabilities are:—

	(a) Attributable to	(b) Aggravated by
(i) Service during the present war	Yes.....	.....
(ii) Previous active service.. ..	.....	.....
(iii) Climate in pre-war service .. ..	.....	.....
(iv) Ordinary military service before the war ..	.....	.....
(v) Serious negligence or misconduct on the part of the soldier	No.....	.....

Give details:

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

23. Is the disability in a final stationary condition? If not Yes.

(a) How long is the present degree of disability likely to last?

(b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures). 100 as a soldier.
50. as a civilian
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

25. If an operation was advised and declined, was the refusal unreasonable?

vide 16.

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?
- OR
- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

YES.

Opinion of Military Member in case of disagreement.

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

28. Is treatment being recommended on Army Form B. 179c?

No.

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures:—

Station Wandsworth S.W. Sgd. G. Gore-Gillon. Lt. COL. } President or
A. E. Dodson. Capt. R. A. M. C. } Chairman.
Date 11.1.19 R. J. B. Howard. C. S. } Members.

Discharge Approved under Para. 392 (xvi) King's Regulations.

Station Wandsworth H. S. B. ... } Only applicable
Date 14-1-19 } in cases of
Officer in charge, Central Hospital. } Patients in
Hospitals.

OR
Discharge Approved under Para. 392 () King's Regulations.
or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station
Date
O.C. Discharge Centre.

Notification to the Officer i/c Records that a Soldier is about to be brought before an Invaliding Board at a Central Hospital with a view to discharge from the Service.



NOTE.—On receipt of this notification the Officer i/c Records is to ensure that he has all the documents of the soldier that should be in his possession, or prepare temporary documents in the event of absence or loss of the originals.

Army Form W. 3977c has been sent to the Regimental Paymaster with instructions for that Officer to return it to the Officer i/c Records after having filled in the particulars of the names and dates of birth of the soldier's children for whom separation allowance is being paid, on receipt of which the Army Form is to be attached to the soldier's documents. In the event of the soldier's discharge documents being forwarded to the Controller, Ministry of Pensions, Army Form W. 3977c is to accompany them whenever possible; the despatch of the documents is not, however, to be delayed for this purpose. If the Army Form has not been received by the Officer i/c Records from the Regimental Paymaster in time for transmission with the discharge documents, it is to be forwarded to the Controller, Ministry of Pensions, as soon as received.

Part I.

A.F. W. 3977a has been sent to O.C.

The Officer i/c Records,

A.F. W. 3977c has been sent to The Regimental Paymaster,

58 Victoria St

58 Victoria St

The undermentioned soldier is about to be brought before an Invaliding Board at this hospital with a view to discharge from the Service.

You are requested to forward without delay Army Form B. 178, or temporary document, for the soldier.*

No. 1631 Rank Private

Name MCKAY (Surname) WILLIAM (Christian names in full)

Unit and Corps R. Newfoundland

Station 8RD LONDON GENERAL HOSPITAL Supply Stores Officer i/c Hospital.

Date 10 JAN 1919 191 191 * Strike out if inapplicable.

NOTE.—If the soldier claims to be repatriated abroad and is prepared to embark at any time, the Officer i/c Hospital is to complete such of the following particulars as the soldier can furnish before transmitting the Army Form to the Officer i/c Records:—

The soldier claims repatriation to _____ (Country). _____ (Place).

- (i) Where enlisted _____
- (ii) Date of arrival in United Kingdom _____
- (iii) Port of arrival _____
- (iv) Ship on which arrived _____
- (v) Name of Shipping Line or Agent _____
- (vi) Names and addresses of two references who can verify the above particulars _____

In such a case the Officer i/c Records is to verify the soldier's claim forthwith and report on Part II. of this Form whether the claim is substantiated or not.

Part II.

Officer i/c Hospital, _____

The soldier's claim to be repatriated abroad* _____ accepted. { Insert "is" or "is not." }

On termination of his leave he is to report to the Officer Commanding, _____ at _____ (Station) { Strike out if inapplicable. }

Station _____

Date _____ 191 _____

Officer i/c _____ Records.

Admitted 26.10.18

NOTIFICATION that a Soldier has been sent Home from Hospital to await Discharge under para. 392 (xvi.) King's Regulations.

Soldier's } 1631. Rank PLT
 Regtl. No. }
 Name McKay
 (Surname first)
 Corps or Regiment } Royal Wiltshire
 (also Unit if known) } 58 Victoria Bt
 To Officer i/c of Records _____
 Regimental Paymaster _____

The above-named man, who appeared before a Medical Board, and whose discharge as "no longer physically fit for war service" was approved by the President of the Board, on the 11.1.19, has been sent to his home in

~~to~~ to await instructions as to his final discharge; he has been given £1 (one pound) advance and a suit of plain clothes.

He proceeded on (date) 14.1.19
 to (full address) 58 Victoria Bt.

Date 14.1.19 [Signature] { Officer
 Comm.

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

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

Admitted 5.8.16

Army Form W. 3016.

No. _____

Date Oct 11th 1916

(1) To the Officer i/c Records,

58 Victoria St
S.W. (Station.)

(2) The Officer Commanding,

Med Comd
Quar (Station.)

(3) The Paymaster,

58 Victoria St
S.W. (Station.)

Regimental No. 1631

Rank and Name Pte Hutchings W.

Regiment or Corps 1st Med Comd

has been granted a furlough from Oct 11th to Oct 13th

His address while on leave will be:—

58 Victoria St. S.W.

This man has been furnished with a warrant to Victoria and given an advance of £1. (one pound).

I consider he is fit for*

}	Duty.
	Light duty.

Horace Jagan Capt R.A.M.C.(T)
Officer in charge Registrar, R.A.M.C.T 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.

ORIGINAL



FORM K.

No. 4004

NEWFOUNDLAND CONTINGENT

ALLOTMENTS

I, William McKay Regtl No. 1631

hereby agree, until further notification by me, and in similar official form, to make an Allotment of _____ dollars and 30 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:- To commence Nov 25th 1916 inclusive

Identity Certif. No.	Whether Wife, Child, other Relative, or Friend.	NAME (In full)	ADDRESS	AMOUNT (each person)
	/	<u>Ranke.</u> <u>The same as on original form</u> <u>In name of Miss Mary Ellen Mackay, and self or either.</u>	<u>St John's</u> <u>Nfld</u>	<u>30cts.</u>

NOTED
J. Stephenson
S.M.S.
Date Nov 24th 1916 K Coy

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.

(Sic.) J. Martin
Officer Commanding
'E' Company.

Received by

Nov 24th 1916

(Sic.) W. McKay his mark
SS

(Rank) Plt

J. Martin
4/11/16

Admitted 26.10.18

NOTIFICATION that a Soldier has been sent Home from Hospital to await Discharge under para. 392 (xvi.) King's Regulations.

Soldier's } 1631. Rank Pte
Regtl. No. }

Name McKay. W
(Surname first)

Corps or Regiment } Royal Wincesters
(also Unit if known) } 58 Victoria Bn

To Officer i/c of Records _____

Regimental Paymaster _____

The above-named man, who appeared before a Medical Board, and whose discharge as "no longer physically fit for war service" was approved by the President of the Board on the 11.1.19, has been sent to his home on Wants to await instructions as to his final discharge; he has been given £1 (one pound) advance and a suit of plain clothes.

He proceeded on (date) 14.1.19

to (full address) 58 Victoria Bn.

Date 14.1.19 [Signature] { Officer
Comm.

Place Wandswoth [Signature] Registrar, R.A.M.C. Hospital.

Three copies to be made London General Hospital sent to each Officer above-mentioned, and one copy Wandswoth Office. W.

Pay



Notification to the Regimental Paymaster that a Soldier is about to be brought before an Invaliding Board at a Central Hospital with a view to discharge from the Service.

NOTE.—This notification is sent in order that the Officer i/c Records, at the time the soldier's documents reach him from the Officer i/c Hospital, may be in possession of particulars of the soldier's children in respect of whom separation allowance is being paid.

This information is required by the Ministry of Pensions at the time of assessing the soldier's pension, and it is important that this Army Form should be returned to the Officer i/c Records in time for despatch to the Controller, Ministry of Pensions, with the soldier's documents.

To enable the Ministry of Pensions to make the assessment by the termination of the period covered by the temporary pension allowance and thereby avoid hardship to the soldier, it is essential that there should be no delay in completing and forwarding this Army Form to the Officer i/c Records.

Part I.

A.F.W. 3977A has been sent to
O.C.

A.F.W. 3977B has been sent to
The Officer i/c Records,

The Regimental Paymaster,

58 Victoria St 58 Victoria St

The undermentioned soldier is about to be brought before an Invaliding Board at this hospital with a view to discharge from the Service.

No. 1631 Rank Private

Name MCKAY (Surname) WILLIAM (Christian names in full)

Unit and Corps R. Newfoundland

Station BRD LONDON GENERAL HOSPITAL S. S. [Signature] Officer i/c Hospital.

Date 70 JAN 1919

NOTE.—If the soldier claims to be repatriated abroad and is prepared to embark at the WANDSWORTH DOCK the Officer i/c Hospital has been instructed to complete each of the following particulars as the soldier can furnish. This information is required by the Officer i/c Records to enable him to verify the claim. The soldier claims repatriation to _____ (Country) _____ (Place).

- (i) Where enlisted _____
- (ii) Date of arrival in United Kingdom _____
- (iii) Port of arrival _____
- (iv) Ship on which arrived _____
- (v) Name of Shipping Line or Agent _____
- (vi) Names and addresses of two references who can verify the above particulars _____

In such a case the Officer i/c Records is to verify the soldier's claim forthwith and report to the Officer i/c Hospital on Part II. of Army Form W. 3977B whether the claim is substantiated or not.

Part II. of this Army Form is to be completed by you, or if necessary by the Secretary, T.F. Association, and forwarded without delay to the Officer i/c Records.

Station _____

Date _____ 191 _____

Officer i/c Hospital.

Request payment

is

Please advance the sum
of (\$1) and oblige.

243 1631 Rte W. Mackay

Royal Newfoundland Regt.

Wandsworth Hospital

(W. Mackay)

at art 11
9/10/19

W. B. Carleton



O.K. 1-0-0

W.R. 10/1/19

Receipt No. 383

f y d.

The Regiment's Pay Master
Sir -

Please allow me
the sum of - 1 Pound (8) to oblige

1631 Pte W McKeay
Newfoundland Reg
13/12/18

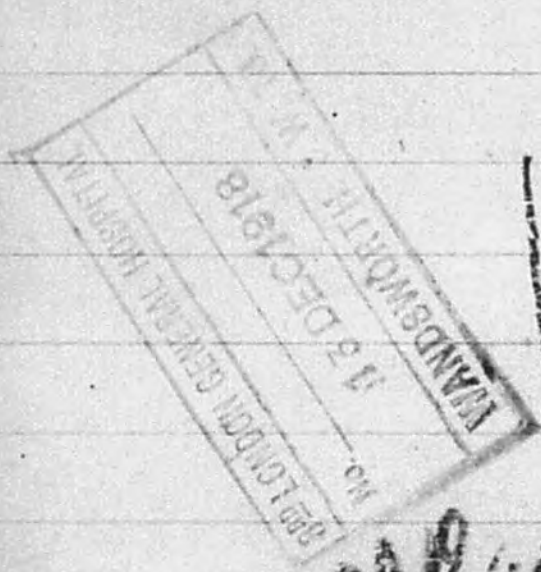
Approved
Submitted
Capt. R. M. C. F.

O.K. f 1-0-0

M.R. 13/12/18

Receipt No 10323

P. D. D.



To Regimental Pay-Master
Sgt

Please advance
me the sum of one pound (£2) out
of office

I am

1631 priv. W. Mc Kay
Royal Fusiliers ad R.

Approved

[Signature]
S. S. S. S.
Capt. Ranker

C.A.F. 1-0-0
Receipt 10303
C.M.S. 12/12



P.L.A.

1631

P to W W Chy
W F L O

Wishes to Draw the
due amount

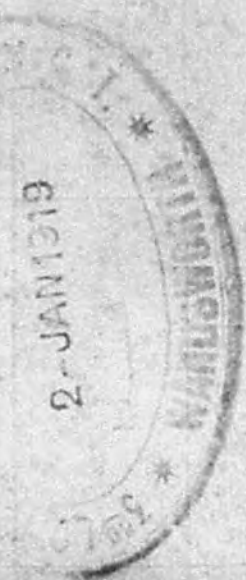
sum of 1 £. from account

signed

W McKay

J & B Carbyoz
Capt-

OK = 1-0-0
Receipt 194
Jan. 2-1-19



6/12/18

Please Sir will you
deliver me the sum
of £2 from my account
1631 Pte W. Mc Kay
To Regt Paymaster
Royal Newfoundland
58 Victoria St.
London S.W.

C.N.F. 2-0-0 MCR 6/12/18

Approved
Signature
Name

Receipt No. 10182

6-DEC-1918

NEWFOUNDLAND, CANADA
VICTORIA ST.
LONDON, S.W.
6-12/18
OFFICE

AC

P.S.

17870/355/P&A

SUSPENSE

CLEARED

C.P.&O.i/c Records.
58, Victoria Street,
London, S.W.1.

Officer i/c
3rd. London Gen. Hospital,
London.

Pay & Record Office.

4th November, 8.

1631. PTE. W. MACKAY.

With reference to
enclosed copy of this office No.
9909/956/P&A to O.C., 2nd.
Bn. 22/6/18 and his acknow-
ledgement 3/7/18 (6055): Copy
of correspondence exchanged
with the Minister of Militia
is forwarded for information,
please.

Chief Paymaster & O.i/c Rcds.
Major.

FM/MN.

No reply needed

14655/470/P&A

Officer Commanding,
1/Bn. R.Nfld. Regt.,
B. E. F.

F.

Pay & Record Office,

12th, September .. '8

1631, PTE. W. MACKAY.

With reference to enclosed
copy of this office No.
9909/956/P&A to O. C., 2nd.
Bn. 22/6/18 and his acknow-
ledgement 3/7/18 (6055). Copy
of correspondence exchanged
with the Minister of Militia
is forwarded for information,
please.

Major,
Chief Paymaster & O i/c Recds.

14655/470/P&A

(3004) W.L. W0720/12835. 10,000,000. 9/17. C. & Co.

Forms
Q. 242
1899

NEWFOUNDLAND CONTINGENT. Army Form C. 348.
PAY & RECORD OFFICE.

9411

Rec'd 30 OCT 1918

Or'd 1st R.N.R.

Ref. Nos. 601 17870/355

To P. & R.

BRANCH

Comd

P&R

ANSWER.

R. & C

B. & E

P.S.

28/10 191

CHIEF PAYMASTER & OFFICER IN CHARGE
NEWFOUNDLAND CONTINGENT.
From 53, VICTORIA STREET,
LONDON, S.W.1.
ENGLAND.

From

To Officer Commanding,
1/Bn. R.Nfld. Regt.,
B. E. F.

To

F.

Pay & Record Office,

12th, September 1918

1631, PTE. W. MACKAY.

With reference to enclosed copy of this office No. 9909/956/P&A to O. C., 2nd. Bn. 22/6/18 and his acknowledgement 3/7/18 (6055): Copy of correspondence exchanged with the Minister of Militia is forwarded for information, please.

Wounded Oct 21/18.

Pte. Mackay has been wounded during recent operations

A. Riley
Capt. & Adj.
Proc 1st R. Nfld. Regt.

NEWFOUNDLAND CONTINGENT.
PAY & RECORD OFFICE.

9411

Chief Paymaster & O i/c Recds. Major,

30 OCT 1918

Ack'd

Ref. Nos. 601 17870/355

ACTED

BRANCH

Comd

P&R

R. & C

B. & E

Forms
C 348
1660

MEMORANDUM.

From

UNDEVELOPED CONTINGENT,
65, VICTORIA STREET,
LONDON, S.W. 1.
ENGLAND.

From

vic

To

versa

Officer Commanding,
2/Bn. Royal Newfoundland
Regiment,
Winchester.

ANSWER.

DM/NM.

Pay & Record Office.

Hayley Down Camp.

22nd. June. 1918

July 3rd 1918

1631. PTE. W. MACKAY.
ROYAL NEWFOUNDLAND REGT:

Wanted. Thank you

Reference attached (5391)

Allotment Forms K4004,
30/- per day, payable to the
Bank of Montreal, St. John's,
Newfoundland, in the name of
Miss Mary Ellen Mackay, and self
or either, effective from 25/11/
16, were mailed to Newfoundland
17/11/17, and acknowledged by
Deputy Paymaster, 25/11/17:

J. E. M. Fox

Captain

Copy of this memorandum
has been forwarded to Minister
of Militia, St. John's, Nfld.
with the request that information
be forwarded at an early date as
to whether allotment is still in
force and payments being regul-
arly made to the Bank of Montreal.

His reply will be comm-
unicated to you in due course,
please.

J. H. Marshall Major,
Chief Paymaster & O i/c. Rcds.

NEWFOUNDLAND REGT.	
O.G. "H" COY.	
2ND BATTN. ROYAL NEWFOUNDLAND REGT.	
PAY & RECORD OFFICE,	
Ref. Nos	<i>M 12.6055</i>
Rec'd	
Ack'd	
Ref. Nos.	(1)
EIA	
Comm	
P&A	
R.&O.	<i>5/1/18</i>
B.&E	

Cables and Telegrams :
"SYNOPTICAL," London.

Telephone :
VICTORIA 147.

Communications to be addressed to the
CHIEF PAYMASTER & OFFICER I/O RECORDS,
and the following No. quoted :

N. F. P/38.

ORIGINAL.

NEWFOUNDLAND CONTINGENT.

MEMORANDUM.

No. 10250/393/P&A. *C.R. 1631*

From
PAY AND RECORD OFFICE,
58, VICTORIA STREET,
LONDON, S.W.

To
The Hon. the Minister of
Militia,
St. John's,
Newfoundland.

June 27th, 1918

FM/NM.

SUBJECT:
1631 PTE. W. MACKAY:
ROYAL NEWFOUNDLAND REGIMENT.

REPLY
Dated August 13th, 1918 191

Reference Nos.

Please return **ORIGINAL** and retain **DUPLICATE.**

(1)
An enquiry has been re-
ceived from the O.C. 2/Bn., regard-
ing the above Soldier's allotment:

(2)
Copy of correspondence with
Bank of Montreal is enclosed
for information.

Reference may be made to
Form K4004, 30 £. per diem, payable
to the Bank of Montreal, N.F. in
the name of Miss Mary Ellen Mackay,
and self, or either, commencing
25/11/16:

W.S. Rendell
Lieut. Col. C.S.D.
for Minister of Militia.

It is stated by Pte. Mackay
that he wrote to the Bank of
Montreal for some money and he was
advised by them that he had no
account: Will you kindly look in-
to this matter, and advise whether
payments are being regularly made
to his account at the Bank named,
please.

F.H. Marshall *Capt*
Major,
Chief Paymaster & O i/c. Rcds.

NEWFOUNDLAND CONTINGENT, PAY & RECORD OFFICE.	
REF. NO.	7947
DATE	7 SEP 1918
FILE NO.	AS D
REL. NOS.	001
ACTED UPON	
SEARCHED	INDEXED
FILED	BY
P&A	✓
R&C	
G&E	
P.S.	

Copy. 3

Department of Militia.

St. John's, Nfld. Aug. 12th. 1918

The Manager,
Bank of Montreal,
City.

Dear Sir:-

re No. 1631, Pte. William Mackay - Allotment.

This soldier declared an allotment of 60¢ per day, payable to the Bank of Montreal (Form L. 1502) - reduced to 30¢ per day from November 1st, 1916; and cheques have been forwarded to you regularly, on this account.

The following is an extract from a communication recently received from the Chief Paymaster, London:-

"It is stated by Pte. Mackay that he wrote the Bank of Montreal for some money, and he was advised by them that "he had no account."

Will you kindly advise me what disposal has been made of the monies deposited with you on account of the above mentioned allotment, and oblige.

Yours truly,
(Sgd.) J.M. Howley, Capt.
Paymaster.

Copy of Reply. 4

Bank of Montreal,
St. John's, Nfld.

August 12th. 1918.

J.M. Howley, Capt & Paymaster,
Department of Militia,
City

Dear Sir:-

re No. 1631, Pte. William Mackay - Allotment.

Referring to your letter of even date, we beg to advise that the allotments, account the above private have been placed to the credit of Savings Account No. 15455; the balance standing at credit of same, at present, is \$202.77.

We have no record of having received any communication from Private Mackay.

Yours truly,
(Sgd.) J.G. Ford
pro Manager.

ORIGINAL

N.F.P/L ALLOTMENTS

NEWFOUNDLAND CONTINGENT



CANCELLATION OF ALLOTMENT

I, (No.) 1031 (Rank) Pte. (Name) W. Mc Kay
 hereby apply for cancellation of Allotment made by me on
 N.F.K.No. 1561 dated October 21st /15. in favour
 of Charles Mc Kay (Rank) for \$ cts 60.
 per diem. Such cancellation to take place from (inclusive)
 the 25th day of November 1916.

I agree to accept all risks and consequences of this appli-
 cation failing to reach Headquarters, St. John's, by mail in time
 to become operative at above nominated **cancelling** date; and that
 in the event of such non-delivery by mail, and thereby the Allot-
 ment continuing to be paid to the Allottee, I also agree to such
 further stoppage as may be thereby necessary being made against me
 in the Pay Books, or otherwise to refund such overdrawn amount or
 amounts.*

Dated at Parsons Ave
Nov. 2nd 1916.

W. Mc Kay ^{his mark} X
 Allottee.

Approved and Witnessed.

J. C. "E" Company.
 C. C. "E" Company.

NOTED
A. Mack
 Date 4/1/16

NOTED
D. Stephenson
 C.C.M.S.
 Date Nov 24/16

*Attention is drawn to the fact that Allotments are payable by
 Headquarters per Calendar, not Regimental month, and therefore
 reasonable time must be allowed for delivery of this request
 at St. John's, in order to become operative.

To be made out in triplicate and sent to the Paymaster & Officer
 in Charge of Records, who will forward original to Headquarters by
 first mail, duplicate by the following, and retain triplicate.

3rd London General

28-12-18

Dear Sir

Will you kindly allow
me one Pound to my credit

yours truly W Mackay

1631 Royal W of L.D. Reig

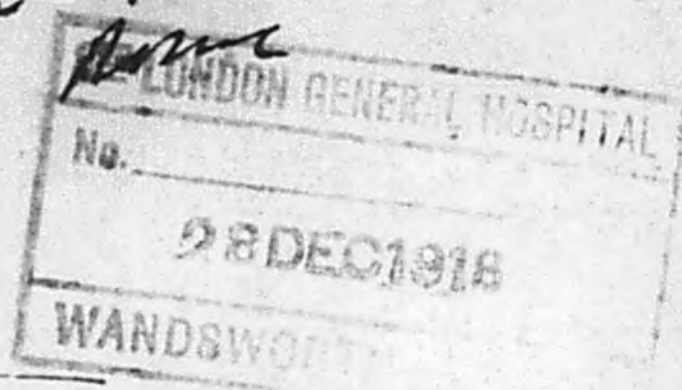
28-12-18

Approved

OR L-0-0

28-12-18

Receipt No 117



P O

SMITH STREET

CARD



NEWFOUNDLAND CONTINGENT GU
PAY & RECORD OFFICE

Ref Nos IN *J 9687 H*

Recd **11 NOV 1918**

Ack'd

Ref Nos. UN

O/C
Newfoundland War Contingent Assn

58 Victoria St -

Comd.

P & A.

R. & C. *J 12/11/18 H*

B & E

P. S.

Nov 10th 1918

M. F. / 61 A

S.W. 1

Dear Sis

Sent 12 ¹¹/₁₈

Private W. McKay 1631 B.N.R.

would be glad to have the latest
news & address of Private Victor Richards
1st Battⁿ B.N.R. no 7xxx(?) - Private

McKay is in Ward 11.

3rd Lon. Gen. Hosp.

If whom reply can
be sent direct: Wandsworth Common
For truly J. G. Howell.

No. 1631 Rank Pt

Name W. Mackay

Pay	F.A.	Wkg	Total	N.W. PAGE
100	10		110	
Less Allotment			30	
Net Rate			80	

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	\$	£ s d				
						From	To								
Balance				Balance							30	15	2		
Acquittance Rolls		3	6	0	Pay @ Net Rate	22 ¹² / ₇	4 ⁵ / ₁₈	134	80	107	20	22	0	6	
Hospital Advances		1	17	6	Rates accrs								17	6	
A.B. 64.					10 days @ 1/9										
P.&R.O. Payments		32	10	0	Other accrs								1	4	6
Receipt No 45 <u>6939</u>				16	4	0									
Receipt No 7103				2	0	0									
Cash. 725.00				17	5	2									

38-13-6 ✓
54-17-6
56-17-6

AW
4 5/19

~~54-17-6~~
~~56-7-3~~
57-3-8

~~16-4-0~~
~~11-9~~
-6-7

O.K. R No 6560
£

To Paymaster



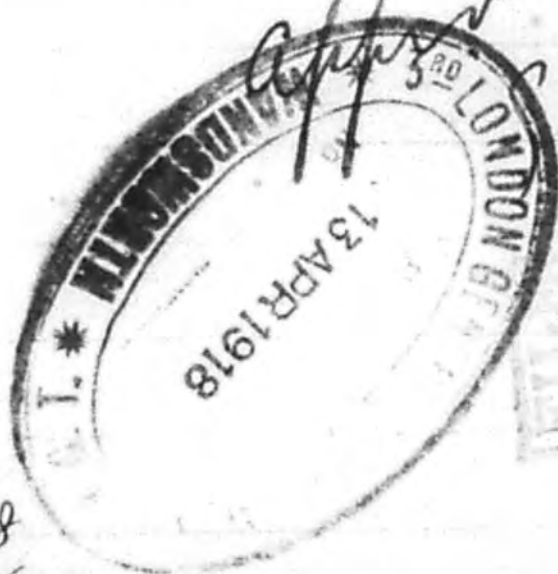
of R. Newfoundland Rego

of R. Newfoundland Rego

to the effect of

of 1831 the sum of £1 (one pound)
on account of any balance
that may be due to me

13th April.



Appointed
Capt Hall
Capt
J.M.

C. R.
13/4/18

May 1/19/18

Coy Master

Royal Newfoundland

58 Victoria St

Please sent to No. 1631
Pte McKee the sum of
£ (one Pound) on the account
which may be due to me

OK
P. 1.0.0
J.K.C.

1631 Mr McKee

Approved
W. J. [Signature]

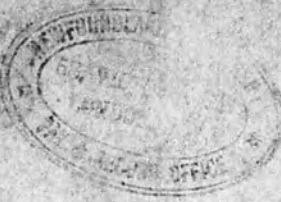
1/5/18

Receipt No. 6865

FILE
BRANCH
INITIALS

NEWFOUNDLAND CONTINGENT
58, VICTORIA ST.
LONDON, S.W. 1
MAY 1918
PAY & RECORD OFFICE

Dep. Mackay



10250/393/P&A.

The Hon. the Minister of
Militia,
St. John's,
Newfoundland.

O.R.

June 27th,

8

August 12, 1918.

FM/NM.

1651 PTE. W. MACKAY;
ROYAL NEWFOUNDLAND REGIMENT.

An enquiry has been received from the O.C. 2/Bn., regarding the above Soldier's allotment:

Copy of correspondence with Bank of Montreal is enclosed for information.

Reference may be made to Form K4004, 30 p. per diem, payable to the Bank of Montreal, N.F. in the name of Miss Mary Ellen Mackay, and self, or either, commencing 25/11/16:

W. J. Readell

Minister of Militia

It is stated by Pte. Mackay that he wrote to the Bank of Montreal for some money and he was advised by them that he had no account: Will you kindly look into this matter, and advise whether payments are being regularly made to his account at the Bank named, please.

Major,
Chief Paymaster & O i/c. Reds.

TO,- The Chief Paymaster,
Royal Newfoundland Regiment,
58 Victoria Street,
London, S.W.

Sir:-

Please charge the amounts set opposite my name to my account and pay it to the N.F.C.A. "Prisoners of War Fund" in quarterly instalments for the period of one year.

Commencing on 1st July 1918.

Regtl. No.	Rank,	Name	Amount	Signature.
2555 1631	Pte	McKay W	\$2.50	W McKay

I have the honour to be, Sir,
for the Committee,
Your obedient servant.

Date 12/7/18
Witnesses Cpl Heath & W McKay

O.K.
£1.0.0
L.H.B. 24/4/18

To Payee
St. Vincent & the Grenadines
St. Vincent

38019
No. 25 APR 1918
WANDSWORTH, S.W. 18.

Please remit to Pto Maskey.
No 1631 the sum of £1 (one pound)
on account of any balance
that may be due to me.

NEWFOUNDLAND CONTINGENT
58, VICTORIA ST.
LONDON, S.W. 1
APR 1918
PAY & RECORD OFFICE

24-4-18
Receipt
7751

Approved
W. J. Maskey
FILE
BRANCH
INITIAL

Temp. a/c

CO.

4

NO.

1631 Pursh NAME W McKay

ALLOTMENT

601

DESCRIPTION	AMOUNT	PAY	DATE
Dr. Balance		Credit Balance <u>14/4</u>	191
		Exchange "	191
Hospital	1 10 01		
		<u>PAY @ NET RATE</u>	
		From <u>12/4</u> To <u>4/10</u> =	173 days
	10 91		86.50
	3 11 41	50	
		From _____ To _____	days
		From _____ To _____	days
	3 12 01	From _____ To _____	days
	2 9 4	From _____ To _____	days
		From _____ To _____	days

2 4 51

17 15 (1)

19 19 11

Aug. 34

Acryffels

P. & R. Uniforms

No. 1631 Rank Pte

Name McKay W.

Pay	100	10	110
Leaves			30
Wages			80

WA

DEBITS	Date	s s d			CREDITS	Period		Days	Rate	P	Y	L	E	P
						From	To							
Balance					Balance	30/8/18								3 4 4 ✓
Acquittance Rolls		3	2	4	Pay @ Net Rate	31/8/18	14/1/19	137	80	109	60	22	10	5 ✓
Hospital Advances		2	8	0	R.A.	14/1/19	24/1/19	8	2/1					16 8 ✓
A.B. 64.					Other Allowances									12 6 ✓
P.&R.O. Payments		7	0	0										27 3 11 ✓
<hr/>					Grand Total									
					£14 13 7									
					Receipt No. 11503	14/1/19	14	10	0					

£12-10-4

WA 14/1/19

MEMORANDUM

McKay, W^m -

1631

Sept.

April 18, 1919

#1631 Pte. William McKay,

Glenwood.

Dear Sir:-

Please find enclosed "Discharge Certificate
No. 1900."

Yours truly

Captain,
Paymaster & O.i/c Records

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 1631 Rank. Pte Name W. Kay
 Date of Enlistment 26-6-15 Address Gleamwood District Twillingate
 Occupation Shopper Classification for Discharge B Medical Category EP
 Recommendation S.M.F. permitted to unfit Disability Rating 100% 3 Mths and Treatment
 Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	1	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122		Board 1st	" 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 1-4-19

H. News H.
for O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

W. Kay

Particulars passed to Vocational Officer for information and action.

Date 2-4-19

J.A. Shaw

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable £6.00

(b) Clothing Supplied permitted to unfit

Date 1-4-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *me* to his home at *Supreme* and Release Certificate No. *1951* issued.

Date *5-4-19*

J.A. Snowling
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 *18-4-19*

Date *3-4-19*

H. M. News H
for Depot Paymaster.

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY AC

Discharge approved for *4-4-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P|36	B 268	B 121	1	N.F. Med	D.F. 1	1
F 178	W 3494	B 122		Board 1st	" 2	1
B 178a	D 400A	B 1915		do 2nd	" 3	7
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 *3-4-19*

J.A. Snowling
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 4 1919*

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

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

Date

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 attend school

W W H ay

Signature of Man.

Reg. No.

1631

BH utler

Signature of the Vocational Officer or his Representative.

Place

St John's

Date

Apr 2nd

191 9



Department of Militia, Newfoundland

Medical Department

Medical Report on an Invalid

NOTES:—

- This report is solely concerned with Pensions.
- A single copy only is required.
- "Aggravated" being now a technical term, carrying right to pension, discrimination in its use is essential.
- Be as brief as possible compatible with lucidity.
- Avoid dubiety—"perhaps" "possibly" "might" and the like.
- 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 St. John's Field
Date March 27th 1915

- Unit Royal Newfoundland
- Regimental No. 1631
- Rank PL
- Name McKay. Wm.
- Age last birthday 24
- Enlisted on April 1915
at St. John's
- Former trade or occupation Snapper

8. Disability

~~g. SW.~~ L. Hip.
~~g. SW.~~ L. Shoulder
~~g. SW.~~ L. Arm
~~g. SW.~~ L. Foot
~~g. SW.~~ Back.

- History wounded Aug 1st 1916. L. Hip. In Hosp. 3 1/2 mos.
 " " 16th 1917. L. Shoulder. In Hosp. 1 month.
 " Sept 20. 1917. L. Arm. Slight
 " Mar 12. 1918. L. Foot. 2 months in Hosp.
 " Oct 21. 1918. Back L.

wounded on five different occasions

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 in back not quite healed. large irregular scar. Complaint of some pain in this wound.

11. Was sanatorium advised and refused? no
operation

12. Do you recommend discharge as permanently unfit? yes

Signature

Archibald
67

Rank or Qualification

..... M.O. Depot

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:—

14. Does the Board concur in preceding report? (see Sect. 10) If not give differing opinion and additional findings.

*Scar over back (over scapula) about 4 inches x 2
 not healed
 Scar of left arm feels tense on closing the hand*

15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market? 100%
 (b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a full livelihood in the general labor market lessened by that portion of his disability to or incurred during service? 100% 3 months treatment
 (State in percentage.)

Remarks if any:—

16. Is the disability permanent?

17. Has the disability been aggravated by (a) Intemperance (b) Misconduct

18. The refusal of operation sanatorium is:— (a) Reasonable (b) Unreasonable

Remarks if any:—

19. If fit subject for Hospital do you recommend admittance to { General Hospital,
 Naval and Military Convalescent Hospital,
 Jensen Tuberculosis Camp.

20. We recommend discharge from retention in the Army

Remarks if any:—

Signatures..... *[Signature]* President
 *[Signature]*
 *[Signature]*

Place..... *[Signature]*

Date..... *Mar 28/19*

APPROVED

Station.....

Date.....



..... *[Signature]*
 Administrative 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

William McKay

Regiment from which discharged

Royal Newfoundland

Regimental number

1631

Intended address

Glenwood.

Height on discharge

5 Feet *11*

Color of hair on discharge

Light Brown

Complexion

Fair

Color of eyes

Blue.

Descriptive Marks

2 shell wounds in Back.

Figure on discharge

Tall.

Christian name of Father

John.

Christian name of Mother

Mary

Wife's maiden name in full

—

Date and place of marriage

—

Christian names of children

—

Place and date of soldier's birth

Stephenville King, Aug 24th 1895

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)

*William McKay**pt*

(Rank)

Station

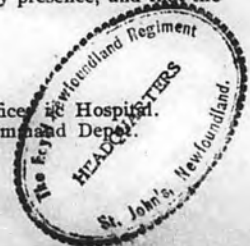
St Johns

Date

27-31 19

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

Medical Officer of Hospital,
Unit, or Command Depot.



Station

Date

The Royal Newfoundland Regiment

Class for Demobilization:—

B

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *28-3-19*

Regimental No. *1631*

Name *Pte William McKay*

Address *Glenwood.*

Present Medical Category *F*

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

Members of Board

R.H. Lant
O.C. Discharge Depot.

H. Baberson
Senior Medical Officer

Geo. Berden
M. O. Depot

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

MEDICAL HISTORY

OF

Surname McKay

Christian Name William

Table 1.—GENERAL TABLE.

Birthplace:—Parish

County Nfld



	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>25</u> day of <u>June</u> 191 <u>5</u>		on _____ day of _____ 191 <u>1</u>	
	at <u>St John Nfld</u>		at _____	
Declared Age	<u>21</u> years		_____ years	
Trade or Occupation	_____		_____	
Height	<u>5</u> feet	<u>10 1/2</u> inches	_____ feet	_____ inches
Weight	<u>137</u> lbs.		_____ lbs.	
Chest Measurement	Girth when fully expanded... <u>36</u> inches		_____ inches	
	Range of expansion... <u>3</u> inches		_____ inches	
Physical Development	_____		_____	
Vaccination Marks	Arm			
	Number	<u>1</u>		
When Vaccinated	_____		_____	
Vision	R. E.—V=	<u>4/6</u>	R. E.—V=	_____
	L. E.—V=	<u>4/6</u>	L. E.—V=	_____
(a) Marks indicating congenital peculiarities or previous disease	(a) _____		(a) _____	
(b) Slight defects but not sufficient to cause Rejection	(b) _____		(b) _____	
Approved by (Signature)	<u>Samuel Petersen</u>		_____	
(Rank)	<u>Capt</u>		_____	
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St John</u>		at _____	
	on <u>26</u> day of <u>June</u> 191 <u>5</u>		on _____ day of _____ 191 <u>1</u>	
Joined on Enlistment	Corps.	<u>1st Nfld Reg</u>	Corps.	_____
	Regtl. No.	<u>1631</u>	Regtl. No.	_____
Transferred to	<u>Royal Newfoundland</u>		_____	
Became non-effective by	_____		_____	
	on _____ day of _____ 191 <u>1</u>		on _____ day of _____ 191 <u>1</u>	
(Signature)	_____		_____	
(Rank)	_____		_____	

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


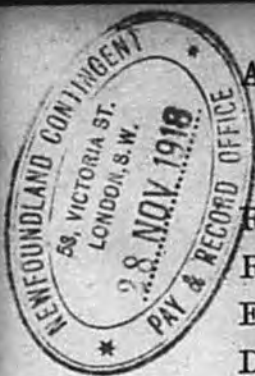
Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, 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				
	26	3	17	6	4	17	Scabies	12	Dr. Guzman, & King Joseph	W. J. Lawrence
3 RD LONDON GENERAL HOSPITAL WANDSWORTH.	17	3	18	4	5	18	G.S.W L foot fract 1 st Metatars	48	Wounded in France 12.3.18	G. C. Hall Capt. Med.
3 rd London General Hospital, WANDSWORTH, S. W.							G.S.W Back ... Rt arm		Board held 11-1-19 (see overleaf) Disability: G.S.W Back & Rt. arm Cause: Wound caused by shell fire in action Capacity for earning a livelihood lessened by 50%	W. J. Lawrence 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	
18.10.15		
19.11.15	Vacc.	R.P. Graham. Lt. Rams.
9.12.15	T.V. II	R.P. Graham. Lt. Rams.
11-1-19	<p>Medical Board held: <i>Findings: Permanently unfit for further military service</i></p> <p><i>Prof. [Signature]</i> 3rd London General Hospital, WANDSWORTH, S. W.</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>S't. Johns N' Cape</i>					



Army Form B. 103.

Regimental Number 1631

Casualty Form - Active Service.

Regiment or Corps 1st Royal Newfoundland

Rank Pte. Surname McKay Christian Name William

Religion R. C. Age on Enlistment 21 years 2 months

Enlisted (a) 26/6/15 Terms of Service (a) Duration Service reckons from (a) 26/6/15

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

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

Occupation Labourer Signature of Officer [Signature]

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...		<u>9.8.18</u>	
		Disembarked...			
		ARRIVED 1 B. D.		<u>13.8.18</u>	
		Joined Battalion		<u>19.8.18</u>	
		Wounded in action	<u>21-10-18</u>		
	<u>110 F.A.</u>	<u>Ad Gw Back & arm trans</u>	<u>36 CCS</u>	<u>24/10/18</u>	<u>6208597</u>
	<u>8 March 1918</u>		<u>Newcomen</u>	<u>23/10/18</u>	<u>4/3034</u>
<u>16.10.18</u>	<u>Cicero de Konecki</u>	Transferred to England	.	<u>26/10/18</u>	<u>103083</u>
			<u>John</u>	<u>Capt</u>	
		For Officer i/c	<u>No 1 Infantry Section</u>		
		3rd Echelon	<u>General Headquarters</u>		

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Signaling-Squad, &c (17501.) Wt. W 1887, 124, 1,000,000, 8/18, D & S. Form B/103, (E. 1256.)

[P.T.O.]

Next of Kin: Mother McKay Mrs Martha L Glenwood Sped

Original

11

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

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

1. Unit and Corps... *Royal Newfoundland* Former Trade or Occupation } *Lumber-man*
2. Regtl. No. *1631* 3. Rank... *Private* 7a. If the soldier claims previous service in Army, he should state—
4. Name... *MCKAY-William* (Surname) (Christian Names) (a) Former Regts. or Corps; with Regtl. Nos.
5. Age last birthday... *24*
6. Posted for duty on... *6/8/15* at... *St. John's* in category (or grade)... *A-1*
8. If the disability is an injury was it caused
 (a) in action *YES* (b) on field service *YES*
 (c) on duty *YES* (d) off duty? *NO* (b) Date of Discharge;
 (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—
 (a) When } *N/A*
 (b) Where }
 (c) Opinion of Court (d) Particulars of Pension or Gratuity (if any)

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

Statement of Case.

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

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

11. Date of origin of disability. *of S.M. Barb. 21st Feb-1918,*
12. Place of origin of disability. *Algeria.*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *Depending on time when hit by shell fire, sent to Base Hospital then to S. A. G. Hosp.*

14. State whether the disabilities are
- | | | |
|--|---------------------|-------------------|
| | (a) attributable to | (b) aggravated by |
| (i.) Service during the present war | Yes | |
| (ii.) Previous active service.. .. . | | |
| (iii.) Climate in pre-war service | No | |
| (iv.) Ordinary military service before the war | | |
| (v.) Serious negligence or misconduct on the man's part. } | | |

14 (a). If not due to any of these causes, to what specific condition do you attribute it? } G. S. W.

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

15. What is his present condition?

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

All Wounds Healed.
 Movement of Shoulder
 are restricted. The Wounds
 just behind the Shoulder.
 Hand grasp good. Some Anesthesia
 on lower inner side of Forearm

16. Was an operation performed? If so, when and what was its nature?

No Skin grafting.

17. If not, was an operation advised and declined?

18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?

Not applicable

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

Actual loss of skin on Forearm
 Causing the Anesthesia.

20. Do you recommend—

(a) Discharge as permanently unfit?

(b) Change to United Kingdom?

Transfer to Newfoundland

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

St B. Carleton
 Medical Officer in charge of case.

Station

Date

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

OPINION OF THE MEDICAL BOARD.

NOTES.—(1) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

21. Give diagnosis and particulars of:—

- (a) Any disability claimed or discovered.
- (b) The present condition thereof.

Large scar of old G.S.M. admission to ribs, limiting movements of left scapula, causing inability to bear any pressure on back & to swing left arm fully; left hand weak

22. State whether the disabilities are:—

- (i) Service during the present war
- (ii) Previous active service.. .. .
- (iii) Climate in pre-war service
- (iv) Ordinary military service before the war
- (v) Serious negligence or misconduct on the part of the soldier

(a) Attributable to

(b) Aggravated by

.....	<i>Yes</i>	.....
.....	<i>—</i>
.....	<i>—</i>
.....	<i>—</i>
.....	<i>No</i>	.....

Give details:

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

.....

23. Is the disability in a final stationary condition? If not

Yes

(a) How long is the present degree of disability likely to last?

(b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).

*100% as a soldier
50% as a civilian*

(b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

25. If an operation was advised and declined, was the refusal unreasonable?

vide 16

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

Yes

Opinion of Military Member in case of disagreement.

OR

(b) In what other grade do the Board place him?

(c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require:—

- (a) An attendant for his journey home?
(b) Transport from railway station to his home?
(c) The constant attendance of another person in his own home?

no

Signatures:—

Station *Handsworth*
Date *10-7-79*

Colin Gillin President or Chairman.
W. Brown
P. H. Howells Members.

Discharge Approved under Para. 392 (xvi) King's Regulations
Station *Handsworth*
Date *14-7-79*

J. E. Sweet Officer in charge, Central Hospital. Only applicable in cases of Patients in Hospitals.

OR
Discharge Approved under Para. 392 () King's Regulations.
or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station
Date

O.C. Discharge Centre.

Descriptive Return of a Soldier medically boarded before Discharge or Transfer to the Reserve.

INSTRUCTIONS.—Parts A. and D. of this Army Form are to be completed for every soldier prior to his being medically boarded with a view to discharge or transfer to Class W., W.(T), P., or P.(T), of the Reserve, as follows:—

(a) By the O.C. unit prior to the soldier being sent to the Discharge Centre.

(b) By the Officer i/c Central Hospital, when the soldier is a patient in hospital, prior to his being brought before an Invaliding Board.

It is most important that all particulars should be correctly filled in, and that the soldier should be given a full opportunity of examining the Army Form before he signs the Certificate below, as, if awarded a pension, his subsequent identification may depend on the correctness of these entries. The "rank," "station," and "date" following the soldier's signature are to be in his own handwriting.

This Army Form is to be forwarded with the proceedings of the Medical Board to the Officer i/c Records, and Parts B. and C. completed by that officer before forwarding the Form with the remainder of the soldier's documents, to the Controller, Ministry of Pensions, Burton Court, King's Road, London, S.W.3.

PART A. Soldier's Name MCKAY WILLIAM
(Surname) (Christian names in full)

Unit from which discharged R. Newfoundland Regt

Regimental Number 1631 Rank on discharge Private Age on discharge 24

Married, widower with children, or single SINGLE

Occupation before enlistment LUMBER-MAN

Special qualifications (if any) for employment in civil life }

Nature and locality of employment desired

Full postal address to which proceeding on discharge } Glenwood - Newfoundland

Name of Approved Society (if any)

PART B.

Period of service, and in what Corps	Regiment	Years	Days	All service abroad, with Stations	Years	Days
...				India		
...				South Africa		
Disallowed						
Service towards pension						

Number of G.C. badges medals

PART C. Wounds and actions in which received

PART D. Where born (parish, town and county), and date STEVEN MILL Crossing Nfld.

Colour of hair on discharge Brown Colour of eyes Blue Complexion pallor

Christian name of father James deceased

Christian name of mother Muriel "

NOTE.—Army Forms D. 400 and W. 3463A and B are issued in sets in pad form for use with carbon paper in cases where the soldier is a patient in hospital. Army Forms D. 400 and W. 3463A are similarly issued in sets for use in cases where the soldier is not a patient in hospital. The Statements on Parts A. and D. of Army Form D. 400 and on Part A. of Army Forms W. 3463A and B are to be completed by the Officer i/c hospital before a soldier is brought before an Invaliding Board. The Statements on Parts A. and D. of Army Form D. 400 and on Part A. of Army Form W. 3463A are to be completed by the O.C. unit before the despatch of a soldier to the Discharge Centre.

[P.T.O.]

Wife's maiden name in full
Date and place of marriage

Christian names
of children and
dates of birth

Date and place of 1st enlistment

Figure on discharge

Descriptive and other distinguishing marks

I certify that I am the soldier referred to and that all the particulars contained in Parts A. and D. above are, to the best of my knowledge, correct.

(Signature in full)

Station

Rank

Date

I certify that the above-named soldier signed the foregoing declaration in my presence.

(Rank)
O.C. unit or Officer i/c Hospital.

THE CONTROLLER,

MINISTRY OF PENSIONS,

BURTON COURT,

KING'S ROAD,

LONDON, S.W.3.

The soldier named overleaf was

Discharged under para. _____ King's Regulations

or

Transferred to Class * _____ of the Reserve.

Strike out
whichever
inapplicable.

Military character

I certify that the details of service overleaf and other particulars are, to the best of my knowledge, correct.

Officer i/c Records.

Station

Date

191

* Insert P., or P.(T).

STATEMENT BY A SOLDIER CONCERNING HIS OWN CASE.

NOTE.—This Form is to be filled in by every soldier prior to the compilation of Army Form B 179A, whether a patient in hospital or not, and attached thereto. The questions are to be answered in the soldier's own words, and the Form is to be signed by him and the signature witnessed. In the event of the soldier being unable to write he should affix his mark, such act being witnessed.

Regimental No. *1631*Rank *Pvt.*Name *William Mackay*Unit and Corps } *Royal N. F.S.D. Reg.*

(Surname)

(Christian Names)

Note.—Before answering the questions below, the soldier is to note that

(a) The statements made by him will be checked by official records.

(b) In answering Question 2 any special matters which in his opinion caused any unfitness from which he may be suffering or which aggravated it should be clearly stated.

If the soldier is unable to read, the above notes are to be read to him by an officer.

1. (a) In what countries have you served during this war, and for what periods?

France
22 months.

(b) In what capacity?

Infantry.

2. If you are suffering from any disease, wound, or injury, state what it is, the date upon which it started, and what, in your opinion, was the cause of it.

(If more space is required a sheet of foolscap should be used, and firmly attached to this form.)

Grav. Left Shoulder
Oct 21st 18.

3. Give the names of any hospitals where you have been treated for the above disease, wound or injury during the present war.

3rd London General Hospital

4. Did you suffer from the disease or injury mentioned in above answer to Question 2, or anything like it, before joining the Army? If so, give details and dates.

No.

5. Give the names (and addresses if you know them) of any hospitals you were in or doctors who attended you before you joined the Army.

No.

6. Give the name of your National Health Approved Society, and (if possible) your Membership Number.

No.

7. What is the name and address of your last employer before joining the Army?

A. M. D. Company. N. E. S. D.

8: (a) What was your occupation before joining the Army?

Subsiding

(b) What was your trade before joining the Army?

"

(To be checked by A.F.B.64 or A.F.B.103.)

The above statement has been read over to me; I agree to it, and have nothing further to add.

Station

3rd London G. Hospital

Signed (Soldier)

Wm McKay

Date

Jan 10th - 1919

Signed

W Shearley

Witness

Temporary

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname *McKay* Christian Name *W.*

TABLE I.—General Table.

Birthplace { Parish _____
 County _____

Examined { on _____ day of _____ 191____,
 at _____

Declared Age _____ years _____ days.

Trade or Occupation _____

Height _____ feet _____ inches.

Weight _____ lbs.

Chest Measurement { Girth when fully Expanded _____ inches.
 Range of Expansion _____ inches.

Physical Development _____

Vaccination Marks { Arm _____ RIGHT | _____ LEFT
 Number _____ | _____

When Vaccinated _____

Vision { R.E.—V = _____
 L.E.—V = _____

(a) Marks indicating congenital peculiarities or previous disease—

(b) Slight defects but not sufficient to cause rejection—

Approved by _____
Rank _____ Medical Officer.

TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and Signature

TABLE IV.—Service Table.

Enlisted { at _____
 on _____ day of _____ 191____

	Corps	Regtl. No.
Joined on enlistment	<i>1st Newfoundland</i>	<i>1031</i>
Transferred to		

Became non-effective by _____
on _____ day of _____ 191____
(Signature) _____
(Rank) _____

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

WWE/EB

February 16th 1920.

9579

To:- Major Howley,
O. I. C. Pay & Records,

Mr. Chas. McGrath, Accountants
Mr. Geo. Pomeroy.

From:- Vocational Officer.

William McKay 1631.

This is to certify that this man's course comes to an end
on February 28th. If an extension is in the meantime granted,
I shall notify you.

W.W. Blackall.
Vocational Officer.

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 28th. 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... *H. Williams* 2. Surname... *M. McKay*
3. Rank... *Private* 4. Regtl. No... *1631*
5. Address in full to which future payments of gratuity are to be forwarded... *Bank of Montreal St. John's Newfoundland*
6. Date of enlistment in the Regiment... *14 July 1915*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
Mary McKay
8. Relationship of such dependents... *Sister*
9. Address in full of such dependents... *Glennwood Nfld.*
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....
11. Were you on active service only in Nfld, if so, give dates and particulars of such service... *Not applicable*
12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *Served three years 23 months* 1. *3*

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

..... *Not applicable*

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.

..... *Not applicable*

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

..... *No*

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

..... *No*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.....

..... *No*

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

..... *No applicable*

(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.....

..... *4-4-19*..... (b) Reason for discharge.....

..... *Disabled*

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....

..... *France 1916 Belgium 1916*

..... *France 7 Belgium 1917 1918*

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.....

..... *In receipt of £60 per month*

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.

-5-

Signature of Applicant: *W McKay*

Place of Residence: *No. 1 Hamilton Street*

Declared before me at: *St. John's, Nfld*

This *5th* day of *April* 19*19*

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

POST DISCHARGE PAY.				
Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
			<i>bmes.</i>	<i>420 00</i>
Certified Correct.			Paymaster. <i>[Signature]</i>	

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 1631 Rank Private Name Mc Kay Wm
Intended place of residence Glenwoods

2. Occupation Draper
Classification of soldier B Medical Category E

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 APR 3 1919
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
3-4-19
Signature of soldier W. McKay
Signature of witness J.A. Shaw

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am ^{not} in a position to resume civilian occupation immediately on discharge.

Place and Date ST. JOHN'S
2-4-19
Signature of soldier W. McKay
Signature of witness W. Johnston

STATEMENT OF SERVICE

7. Enlisted for service 26-6-15 No of days on Military
Discharged from service 4-4-19 Plus 4 days Service 1393

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S
Date APR 4 1919
Officer Commanding Discharge Depot
The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place St. John's, Nfld
Date April 18/1919
Officer i/c Records
The Royal Newfoundland Regiment

Chas. B. 2077/1900

56
31
12
69
565
69
296



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Wm M Kelly, Regl. No. 1131
 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 October 30th 1915

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
1502	Wife	Dr. G. A. H. ...	St. John's	60
		... Bank of Montreal	St. John's	
		... after allotment an		
		... is satisfied		
		First pay \$67.47		
		to Capt. H. ...		
		and then proceed as		
		above.		
		Wm M Kelly		
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.

(Sig.) Gerald W. Ayle Senior
 for
 Officer Commanding
 Company

(Sig.) Wm M Kelly
 (Rank) Private

St. John's 1915
Sept. 23rd 1915

1561.

Allotment of 60[¢] per day Payable to
Bank of Montreal from 30/10/15 to 31/10/16

Allotment of 30[¢] per day Payable to Bank
of Montreal from 1/11/16 to 18/4/19
Date of Discharge

SEPARATION ALLOWANCE.

Claimant..... McKay, Mary Ellen (sister)

On account of..... Wm McKay..... No. 1631..... Rank. Pte.....

Decision..... Refused.
Brother did not make allotment
in her favour

J. B. Bennett
W. H. Kendall, Lieut. Col.
M. Howley, Capt.

Date..... 14/5/19.....

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

Allotment of per payable to
his from to
Discontinued on account of

L. R. H.

(SISTER)

NEWFOUNDLAND CONTINGENT.

SEPARATION ALLOWANCE BRANCH
(Information for Board of Review)

NOTICE.

THIS STATUTORY DECLARATION is to be filled in correctly in every detail, and a complete reply must be given to each question. Each statement is considered as being made on Oath, and the Form is to be signed before a Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace, and returned to :-

THE PAYMASTER,
Separation Allowance Branch,
St. John's Newfoundland.

1. Name in full of Soldier. Rank Reg't. or Unit. Ser. No.
William McKay Pte. Royal Wld Regt. 1631
2. Age of Soldier Married or Single.
26 single
3. Name in full of sister of Soldier. Age Occupation Permanent Add.
Mary Ellen McKay 25 none Glenwood
4. Give name of Father and Mother. Age Occupation Permanent Address
William D. Martha both dead
5. Names of other Brothers and Sisters. Address in Full Age Occupation Married or Single
Annie Sutherland Bishops Falls 30 none married
6. State amount earned by you per month. Address & Occupation
none unknown both single
7. Are you a chronic invalid and incapacitated? State nature of illness. (Medical certificate must be enclosed with this Declaration stating from what date applicant has been incapacitated and for how long incapacity is likely to continue.
only able to do light housework hip disease
8. State amount and source of any other income. *none*
9. What is the value of your (A) real property (B) personal property. *possess none*
10. Are you married? *no*
11. State actual amount contributed by soldier during the year prior to enlistment. *\$100.00*
12. Was this amount contributed weekly or monthly. *according as it was earned*
13. Did this amount include payment of Brother's Board &c.? *no*
14. State your brother's trade or occupation prior to enlistment. *trapper*
15. With whom are you residing at present? *alone*

- 16. State amount of his wages per week. _____
- 17. State name and address of his last employer. _____
- 18. State amount of support monthly from brother since enlistment. *none*
- 19. State amount of "Allotment" received by you from brother monthly. *none*
- 20. From what date have you received Allotment. *received none*
- 21. Actual amount contributed by other Brothers and Sisters. } Weekly Monthly.
none |
- 22. If not receiving support from other brothers and sisters, state cause. *unable to do so*
- 23. Have you made previous claims for Separation Allowance, if not, why? Give particulars. *did not know how to do so*
- 24. Was the soldier, at the time of his enlistment an employee of the Nfld. Government? *no*
- 25. In what capacity and in what place. *none*
- 26. Is he in receipt of a salary as such while serving in the Nfld. Regiment, if so, how much. *none*
- 27. Are you already in receipt of Separation Allowance from any source? If so, how much? *no*
- 28. Are you in receipt of Payment from any Patriotic Fund, if so, how much? *no*

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

Signature of Applicant. *Mary Ellen McKay*

Place and Residence. *Glenwood*

Declared and subscribed before me at. *Grand Falls*

this. *8th* day of *May* 191*9*.

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace. *Wm. Keogh*

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

Signature of Clergyman. *Wm. D. ...*

Signature of Member of Patriotic Fund Committee. *W. Scott*

John Pres. W. ...

MEDICAL CERTIFICATE

For information of the Separation Allowance Department

- 1. Name and Regimental Number of soldier in respect of whom Separation Allowance is claimed)
Wm. Mace Key No 1631

- 2. Name and age of ^{sister of} said soldier)
Mary Ellen Mace Key Age 28

- 3. Is said ^{sister} a chronic invalid and totally incapacitated)
yes not totally

- 4. Of what nature is disability?)
Tubercular Hip

- 5. From what date has this total incapacity been existent?)
Since 1916

- 6. How long is total incapacity likely to continue and what will be the effect on earning power?)
Don't Know

- 7. If not totally incapacitated by what per cent in your opinion is capacity for work reduced, and from what date?)
3/4

- 8. Are you the regular attending Physician?)
Patient has no regular Physician Since 1916 Only saw Patient once

- 9. Relationship to soldier of applicant.)
none

I certify that the above statements are correct

Bishops Falls -----Place
April 22/19 -----Date

James J. Smith

Physician

17-4-19
No. 1. Hamilton Street
St. John's

Dear Sister,

enclosed you will find separation allowance papers, & you will have to find a magistrate to fill out the papers & then signed by a priest to the effect. & after the papers is filled out you will then return them to the

Paymaster Separation allowance
Branch. St. John's Ryed.

Your Brother,
1631. W. H. McKay.

May 28, 1919

Miss Mary Ellen MacKay,

Glenwood.

Dear Miss MacKay:-

Referring to your application for Separation Allowance, I have been directed to inform you that according to the Regulations, you ~~are~~ not be considered to have any claim for same.

Your Brother did not make you any Allotment, and this would lead us to believe that he did not consider you to be dependent upon him.

Yours truly

Paymaster & ^{Captain,} Officer i/c Records.

BB/EJ

September 6, 1919.

Capt. Howley,
O. I. C. Pay and Records.

Please pay to W. McKay 1631
the sum of fifteen dollars
in account of allowances
and charge the same to Civil Re-Establishment.

\$15.00

[Signature]
Captain
for V O.

9178

Can
to W. McKay

Sept. 13th 1919

Capt. Howley
O. I. C. Records

Please pay to W. McKay,) 1631
the sum of twelve dollars
on account of allowance
and charge same to Civil Re-establishment Committee

\$12.00

Pension Nil

C.R.C.

AMOUNT	<i>12.00</i>
NO.	<i>9592</i>
ISS. LEAD.	
PAY LEAD.	
GEN. L.	

W. W. McCall
Vocational Officer.

W. W. McKay

Sept 20th 1919

Capt. Howley
O. I. C. Records

Please pay to W. McKay, 1631
the sum of eighteen dollars and sixty six cents
in payment of allowance for two weeks ended this date
and charge same to Civil Re-establishment Committee

\$18.66

Pension \$20.00
allowance 9.33

ACCOUNT _____
CH. NO. 11419 INITIALS CBH
IND. ISSUED _____ INIT. FILED _____
PAY. ORDER _____ INITIALS _____
GEN. ORDER _____ INITIALS _____

Hunter
Vocational Officer

W F McKay

Sept 27 th 1919

Major Howley
O. I. C. Records

Please pay to W. McKay, 1631
the sum of nine dollars and thirty three cents
in payment of allowance for week ended this date
and charge same to Civil Re-establishment Committee

\$9.33

Pension

\$20.00

ACCOUNT		INITIALS	<i>EW</i>
CH. NO	<i>11819</i>	INITIALS	
IND. LEDGER		INITIALS	
PAY LEDGER		INITIALS	
GEN. LEDGER		INITIALS	

A. C. J.
W. W. Stechell.
Vocational Officer

W McKay

Mar 1st 1920

Major Howley
O. E. C. Records

Please pay to W. McKay, 1631
the sum of four dollars and sixty four cents
in payment of arrears of allowance for 4 weeks to Feb 28th
and charge same to Civil Re-establishment Committee

\$4.64

Pension \$10.00

AMOUNT	30919
DATE	Feb
BY	[Signature]
FOR	[Signature]
TO	[Signature]

W. McKay
W. McKay
Vocational Officer

at W. McKay

March 8th 1920

Major Howley
O. I. C. Records

Please pay to W. McKay, 1631
the sum of eleven dollars and sixty six cents
in payment of allowance for week ended ~~XX~~ March 6th 1920
and charge same to Civil Re-establishment Committee

\$11.66

Pension \$10.00

J. B. H.

G. W. MacCall

Vocational Officer

ACCOUNT	
CH NO	31462
INVT LEDGER	
PAY LEDGER	
GEN LEDGER	

Ed

[Signature]

W. McKay

April 12th 1920

Major Howley
O. I. C. Records

Please pay to W. McKay, 1631
the sum of fifty dollars
in payment of P. & A. Bonus
and charge same to Civil Re-establishment Committee

\$50.00

Pension \$10.00

ACCOUNT		
CHK NO.	35093	INITIALS <i>HW</i>
INS. LEDGER		INITIALS
PAY LEDGER		INITIALS
GEN. LEDGER		INITIALS

F. C. G.
W. S. Mackall
Vocational Officer

W. S. Kay

April 26th, 1919

Capt. Howley,
O. I. C. Records.

Please pay to **Mr. W. McKay, No 1631**
the sum of **eleven dollars and sixty six cents**
in payment of allowance for week ended this date
in connection with re-education.

\$11.66

Pension Nil

ACCOUNT	<i>B. R. L.</i>
CN. NO. <i>17155</i>	INITIALS <i>[Signature]</i>
IND. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

[Signature]
Vocational Officer.

W McKay

MAY 8 1919

Capt. Howley,
O. I. C. Records.

Please pay to Mr. W. McKay, No 1631
the sum of **eleven dollars and sixty six cents**
in payment of allowance for week ended this date
in connection with re-education.

\$11.66

Pension Nil

B. W. Nichell,
Vocational Officer

W McKay

MAY 10 1919

Capt. Howley,
O. I. C. Records.

Please pay to Mr. W. McKay No. 1633
the sum of eleven dollars and sixty six cents.
in payment of allowance for week ended this date
in connection with re-education.

\$11.66

Allowances \$11.66

W. W. Mitchell
Vocational Officer

W. Mackay

MAY 17 1919

Capt. Howley,
O. I. C. Records.

Please pay to W. McKay, No 1631
the sum of **eleven dollars and sixty six cents**
in payment of allowance for week ended this date
in connection with re-education.

\$11.66

Pension Nil

G. W. Mitchell
Vocational Officer.

W. McKay

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

The Royal Newfoundland Regiment,

Department of Militia,

St. John's Newfoundland.

Fold Here

June 24th. 1921. 1917.

The accompanying King's Certificate, on his discharge,

(No. 60a), is forwarded herewith to

Private William McKay

in respect of his service as No. 1631 Rank Pvte.

Name Wm. McKay Corps Royal Nfld Regt.

Receipt of the same should be acknowledged hereon.

Received Discharge Certificate

Signature W McKay HGJ

Date 8/7/21

Address 216 New Gower St.

City.

THIS MONTH

NEXT MONTH

JULY						
S	M	T	W	T	F	S
..	..	..	..	..	..	1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31	..	..	..	..	..

WEDNESDAY

26
JULY

1944

AUGUST						
S	M	T	W	T	F	S
..	..	1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31	..	..
..

{ 1631 W McKay
get service file }

{ J. Wells
Order for new head
& repair
1/2 & box }

1308 Acad Marshall

July 29th., 1944.

Mr. William McKay,
131 Southside East,
St. John's.

Dear Sir:

I am pleased to give you the following particulars of your service in the War 1914-1918.

#1631. William McKay.

Enlisted at St. John's, 26.6.15 embarked for overseas 27.10.15. Wounded 3.8.16, invalided to England, admitted to Wandsworth Hospital 5.8.16 G.S.W. Left Hip. Joined Battalion 7.6.17 . Wounded 16.8.17 shell wound Back. Joined Battalion 9.9.17. Wounded 2.12.17 shell wound leg, rejoined unit in the Field 31.12.17 wounded 13.3.18 shell wound toe invalided to England, admitted to Wandsworth Hospital 17.3.18, re-joined unit 9.8.18, wounded 21.10.18 G.S.W. Back and Left Arm admitted to Wandsworth Hospital 26.10.18.

Arrived in Newfoundland 7.2.19, discharged Medically unfit 18.4.19, having served three years and two hundred and ninety seven days.

Yours very truly,



Casualty Form - Active Service.

Regiment or Corps Newfoundland

Rank Private Surname McKay Christian Name William

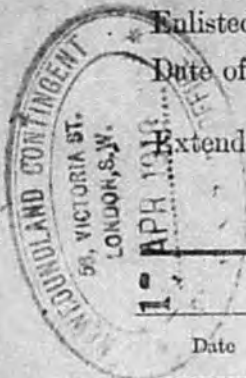
Religion Roman Catholic Age on Enlistment 21 years 2 months.

Enlisted (a) Johns Terms of Service (a) Duration Service reckons from (a) June 26/1915

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

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

J. J. J. J. J. Signature of Officer.




Date	Report From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
			Embarked <u>Shampton</u>	<u>25.4.17</u>	
			Disembarked... <u>Rouen</u>	<u>26.4.17</u>	
			Joined Battalion	<u>7 JUN 1917</u>	<u>B 213</u>
<u>23.6.17</u>	<u>88 F.A.</u>	<u>Ad. P.U.D.</u>		<u>19.6.17</u>	<u>E.A. 6520</u>
<u>30.6.17</u>	<u>Do</u>	<u>Discharged to</u>	<u>Unit</u>	<u>24.6.17</u>	<u>E.A. 6792</u>
<u>18.8.17</u>	<u>OC Unit</u>	<u>Wounded in Action</u>		<u>16 AUG 1917</u>	<u>B 213</u>
<u>18.8.17</u>	<u>61 L.S.D.</u>	<u>Ad. L.W. Back</u>		<u>16.8.17</u>	<u>E.A. 9157</u>
<u>2.9.17</u>	<u>26th S. Hosp.</u>	<u>Ad. Do</u>	<u>Le Zepport</u>	<u>17.8.17</u>	<u>HA. 13119</u>
<u>24.8.17</u>	<u>29 S.D.S.</u>	<u>Joined Base Depot</u>		<u>23.8.17</u>	<u>Non Roll.</u>
<u>15.9.17</u>	<u>OC Unit</u>	<u>Joined Battalion</u>		<u>9 SEP 1917</u>	<u>B 213</u>
	<u>O.C.</u>	<u>WOUNDED IN ACTION</u>		<u>3/1/17</u>	<u>B 213</u>
<u>8/1/17</u>	<u>89 S.</u>	<u>Ad. Mearns way trans</u>	<u>48 CCS</u>	<u>4/1/17</u>	<u>E.A. 4624</u>
	<u>7 Can Coy</u>		<u>Established</u>	<u>5/1/17</u>	<u>HA 174</u>

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) Signaller, Shoenig-Smith, &c.

[P.T.O.]

1631 Pte. McKay W

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 of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
	6 Causech	A. M. Kelly (C. M. Kelly)	Etaples	6/1/17	14A 17247
		Big. to Hedding Army		12/12/17	4 1748
	"D" G. B. D.	Joined Base Depot	Raven	18-12-17	Roll
5/1/18	Op. unit	Joined Unit	Yield	31-12-17	B. 213
14/3/18		Wounded in Action	- "	13-3-18	B. 213
	877A	Ad. Shaw wa. Soc. Trans	44 C. C. S.	13-3-18	E. O. 8941
	Appointed as Counsel to England			17-3-18	W 3083
		<p style="text-align: center;">  A. J. Dwyer O. I. C. No. 1 Infantry Section R. A. C. Area Section </p>			

Casualty Form—Active Service.

Regiment or Corps 1st Newfoundland.Regimental No. 1621. Rank Private Name W. McKeayEnlisted (a) 26-6-15 Terms of Service (u) Duration Service reckons from (a) 26-6-15Date of promotion } Date of appointment } Numerical position on }
to present rank } to lance rank } roll of N.C.Os. }

Extended _____ Re-engaged _____ 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 <u>Southampton</u>		<u>7.4.16</u>	
		Disembarked <u>Lower</u>		<u>8.4.16</u>	
		<u>unit James Battalion</u>	<u>Lance</u>	<u>26.4.16</u>	<u>B 213.</u>
		<u>2 Co. G. H.</u>	<u>Transferred to England</u>	<u>5.8.16</u>	<u>W 3083.</u>
		<u>Strapnel wound</u> <u>Rep. Leg & Hand</u>			

at Clerk
CAPT. IN.
FOR O.I.C. INFANTRY RECORDS
G. H. Q.; 3rd 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.

D. 1631

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 1631 Rank Pvt Name Mc Kay Wm
 Date of Enlistment 26-6-15 Address Spleenwood District Tullyhate
 Occupation Trapper Classification for Discharge B Medical Category Ex
 Recommendation S.M.B. permitted to Disability Rating 100% 3 Mths
and treatment
 Passed to Demobilization Officer with following documents:—

N.F. P|36	B 268	B 121	1	N.F. Med	D.F. 1	1
B 178	W 3494	B 122		Board 1st	" 2	3
B 178a	D 400A	B 1915	1	do 2nd	" 3	
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			" 6	
B 179c	B 120	M 93				

Date 1-4-19

H. Mears Jr
 for O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

Wm McKay

Particulars passed to Vocational Officer for information and action.

Date 2-4-19

J. A. Shaw Jr

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable £16.00
- (b) Clothing Supplied Shaw Jr

Date 1-4-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *me* to his home at *San Antonio* and Release Certificate No. *1951* issued.

Date *5-4-19*

J.A. Crawford
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 *18-4-19*

Date *3-4-19*

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY AC

H. H. H.
for Depot Paymaster.

Discharge approved for *4-4-19*

Forwarded with following documents to O.C Discharge Depot.

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

Date *3-4-19*

J.A. Crawford
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 4 1919*

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

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

Date *12/4/19*

H. H. H.
for Officer i/c Records.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.
 (6-5) W5017/2124 1000m 6/15s 53 56

Forms
B. 121.
39.

Regiment of 1st Newfoundland

Number of Sheet 1/102

Signature of O. C. Company J. G. Berzela

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay		
No.	<u>1631</u>	Age on	<u>21 years 2 months</u>	<u>Labourer</u>			
Joined	<u>2nd 11th N.F.L.D.</u>	Place and Date of Enlistment	<u>St John's June 26 1915</u>	Religion			
Joined	<u>1st N.F.L.D.</u>	Period of	<u>with Colours 297 years</u>	Place of Birth			
Joined	<u>2nd 11th N.F.L.D.</u>	<u>with Reserve 365 years</u>	<u>Wenwood</u>				

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
<u>Gailes</u>	<u>Nov 28 1915</u>	<u>Pte</u>		<u>Disorderly conduct in hut and breaking down among the men Insolence to NCO.</u>	<u>Exp. Fulleney Hobbes</u>	<u>96 hrs S.P.</u>	<u>Nov 29</u>	<u>Capt. Amory</u>	<u>Am</u>
<u>Roadhouse</u>	<u>5/2/19</u>			<u>Abused from Command</u>	<u>Cop. Madigan</u>	<u>1 day S.P.</u>			
				<u>Demobilized 18/19</u>					

To be carried over

Army Form B. 121.

DEPARTMENT OF VETERANS AFFAIRS

To Copy for H.O. file

OTTAWA ONTARIO
Date July 5, 1968

Attention of

NAME **MC KAY William**

SERVICE 1631 WW1
NUMBER *ROYAL Nfld
REGT.*

C.P.C. No. 260421
W.V.A. No. 231346

NAVY
ARMY X
R.C.A.F.

The DEPARTMENT has received information from

WVA ST. JOHN'S Nfld. d/ July 3, 1968
(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death NOT STATED
Cause of Death _____
Place of Death NOT STATED

Name and Address of next of kin (if known) _____

Copies to: W.S.R.
V. I.
~~NAVY~~
~~DOX~~
H.O.

} Destroy form if advice of death already received.

E.C. Richards
for
Chief, Central Registry

Dis St Johns

399

WILL

No. 1631,

W. McKey.

117 New Gower St

WILL.

In the event of my
 Death I give the whole
 of my property and
 effects to my Sister
 Mary Ellen McKee
 Glendwood Paupers
 # 1631 W. McKee
 W. D. B. Bay

June 13th 1916

NEWFOUNDLAND CONTINGENT

COPY OF WILL

of

No. 1631, W. McKey.

In the event of my death I give the whole of my property and effects to my sister Mary Ellen McKey Glendwood N.D.B. Bay Newfoundland.

June 13 1916.

W. McKey.

Certified True Copy

NEWFOUNDLAND CONTINGENT

COPY OF WILL

of

No. 1631, W. McKey.

In the event of my death I give the whole of my property and effects to my sister Mary Ellen McKey Glendwood N.D.B. Bay Newfoundland.

W. McKey.

June 13 1916.

Certified True Copyz