



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 272.

Name in full Willis Manuel Age 27.

Address Loon Bay N.B.

~~Married~~ S. Height 5'9 1/2" Weight 146 lb.

Single
Color Hair black Eyes brown

Other distinguishing marks None

Nearest relative Mother's Jan

Address Loon Bay N.B.

Dependents None

Occupation millwright Present Wage \$3.00 per day

Previous service

Decorations

General Remarks

Date of Enlistment

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

Handwritten notes:
Rec'd
Sept 2nd 1914
J. J. [unclear]
[unclear]

Willis Manuel

Declared before me this day
of 1914

Sept 2nd

Handwritten signature:
J. J. [unclear]

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Reg. No. E72

Name Willis Manuel

Apparent age 27 years months. Height 5 feet 9 $\frac{1}{2}$ inches.

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

Distinctive marks Hair: Black, Eyes: Brown

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Jane Manuel, Loon Bay N.D.B., Newfoundland

Relationship Wife 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	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of Pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries.
					years	days	years	days	
Service towards limited engagement reckons from <u>2/9/14</u>									
Joined at <u>St. John's</u> on <u>2nd September '14</u>									
Total Service forfeited as above									

Total Service towards Engagement to (date of discharge) years days
 " " " Pension " " " " " " " " " " " "

DESCRIPTIVE REPORT ON ENLISTMENT.

Applicable to all ranks. To correspond with entries on the Medical History Sheet Reg. No. 272

Name Willis Manuel

Apparent age 27 years _____ months. Height 5 feet 9 1/2 inches.

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

Distinctive marks Hair: Black, Eyes: Brown

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Jane Manuel, Loon Bay, N.D.B. Newfoundland

| 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) Signature of Officer verifying entry from certificate.

(a)	(b)	(c)	(d) Verified from certificate.

Particulars as to Children.

Christian Names	Date and Place of Birth	(d) Verified from certificate

STATEMENT OF THE SERVICES.

Corps in which served	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					years	days	years	days	
Service towards limited engagement reckons from <u>2/9/14</u>									
Joined at <u>St. John's</u> on <u>2nd September '14</u>									
		<u>Appointed Dept Armour 31/7/15</u>							<u>Promoted</u> <u>L/Capt 11/15</u>
		<u>Disch'd. St. John's. Feb 16/1918</u>							
		<u>Embarked S. George for Lt. 3rd Embarked to 8th 20th Disembarked Regt</u>							
		<u>and embarked for Cuba 13/1st. Embarked for Halifax 13th. Landed Salt Lake Bay night</u>							
		<u>of 19-20 Sept/15. Admitted 18-14th 2nd Canadian Bn 26th. Landed to duty 31st Jan 20th 1916</u>							
		<u>Admitted 29 Oct 15 4th N. Bn 2nd Lt. Invalid to England 4th Feb</u>							
		<u>Key 15th Invalid Admitted 3rd 4th H. Cardy 9th Ann 4th Rank 7th Surgeon has report to 10th 5th</u>							
		<u>to his 14th Invalid Embarked Liverpool Feb 1st for home for 13th Surgeon</u>							
		<u>Post Aug 14th Invalid Arrived Sept 28th Discharged medically Sept 16th 1918</u>							
Total Service forfeited as above									
Total Service towards Engagement to <u>16-2-18</u> (date of discharge) <u>3</u> years <u>168</u> days									
" " " Pension " (") " " "									



This Form is to be used in connection with Pamph. M. E. (1)
N. F. 1914

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of Manual Willis 699
aged 27 conducted at C. S. Annan
Date: 2/9/14 Recruiting Officer:

NO. OF TEST FINDING

- 1 no
- 2 no
- 3 no
- 4 no
- 5 no
- 6 no
- 7 yes
- 8 yes
- 9 no
- 10 ~
- 11 ~
- 12 ~
- 13 no
- 14 ~
- 15 ~
- 16 ~
- 17 ~
- 18 ~
- 19 ~
- 20 ~
- 21 ~
- 22 ~
- 23 ~
- 24 ~
- 25 ~
- 26 ~
- 27 ~
- 28 ~
- 29 ~
- 30 ~
- 31 ~
- 32 ~
- 33 no

34 5' 9"

35 135-lb.

36 32 34

37 \$2.50 per day
38 Match of one Manual, Lora Bay, N. D. Bay

39 no

Fit

Signature of Medical Examiner: Clay Macpherson M.D.

This Form is to be used in connection with Pamph. M. E. (1)
N. P. 1914

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of Manual Willis 899 717
 aged _____ conducted at C. B. Annouy
 Date: 2/9/14 Recruiting Officer: _____

NO. OF TEST FINDING

1 No
 2 No
 3 No
 4 No
 5 No
 6 No
 7 Yes
 8 Yes
 9 No
 10 N
 11 N
 12 N
 13 No
 14 N
 15 N
 16 N
 17 N
 18 N
 19 N
 20 N
 21 N
 22 N
 23 N
 24 N
 25 N
 26 N
 27 N
 28 N
 29 N
 30 N
 31 N
 32 N
 33 No

5' 9"
 135 lbs.

32 34
 B. 2. 50 lbs
 M. 2. 50 lbs
 Manual, Lora Ray, N. O. Ray

Signature of Medical Examiner: Clayton Macpherson, M.D.

W. Manuel

272

P+R O.

Regimental Number 272

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. Mansel

Witness S. Robertson

Dated at



191

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

MEDICAL HISTORY

OF

Surname Mannuel Christian Name Willis

Table I.—GENERAL TABLE.

Birthplace:—Parish		County					
		SPECIAL RESERVE.		REGULAR ARMY.			
Examined	... ..	on	day of	191	on	day of	191
	... ..	at			at		
Declared age	... ..	27 years		days	years		days
Trade or occupation	... ..	Hullwright					
Height	... ..	5 feet	9 1/2	inches	feet		inches
Weight	... ..	146		lbs.			lbs.
Chest Measure- ment	Girth when fully expan- ded Range of expansion			inches			inches
				inches			inches
Physical development	... ..					
Vaccination marks	Arm ... Number	Right	Left		Right	Left	
When vaccinated	... ..					
Vision	... ..	R.E. - V =			R.E. - V =		
	... ..	L.E. - V =			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)	(Rank)						
				Medical Officer.			Medical Officer.
Enlisted	... ..	at	St. John		at		
	... ..	on	day of	191	on	day of	191
Joined on enlistment	... ..	Corps			Corps		
		Regtl. No.	272		Regtl. No.		
Transferred to	... ..					
Became non-effective by	... ..					
		on	day of	191	on	day of	191
(Signature)	(Rank)						

13083/16

Forms
C. 318

MEMORANDUM.

From *OC.*

From



To *Pay Record Office,
58 Victoria St.
London Sec.*

To

ANSWER.

191 .

191 .

*L. O. Manuel & Lie
DeLANEY were admitted
to this Hospital on
the 6th inst.*

*L. O. Manuel - G.W. Back
& Left Arm*

Lie. DeLANEY - G.W. R. Leg

please.

1ST WOUND AND REGIMENT
PAY & RECORD OFFICE

Ref. No. *3649*

DATE *JUL 27 1916*

APPROVED *J. H. Johnson*

Colonel Commanding

5th Western General Hospital R.A.M. Corps (T)

12936/16

~~CONFIDENTIAL~~

NEWFOUNDLAND CONTINGENT.

MEMORANDUM.

No. 2925/2

From *7.7.16*
PAY & RECORD OFFICE,
58, VICTORIA STREET,
LONDON, S.W.
191

To 3rd Western General Hospital,
Cardiff.

SUBJECT: ~~PRIVATE'S~~ PAY BOOKS

REPLY

Dated *22nd July* 1916.

Reference Nos.

Please return ORIGINAL and retain DUPLICATE.

The Pay Books (A.B. 64) of
272 Manuel, L/C W.
1474 Delaney, Pte L.
the both of 1st Nfld Rgt., have
reached this Office, but there has
been no report of Admission.....
(W.S. or 6A)
For your kind attention, please.

I have the honour to report, please, that the two soldiers in question were admitted to the Newport section of this Hospital on the 7th instant.

Notifications of such arrivals will in future be forwarded you immediately, please.

H. A. Anderson.

for C. i/c Records.

21st July, 1916.

D. Hepburn
Colonel Commanding

3rd Western General Hospital R.A.M. Corps (I)

What is the matter with them?

RECEIVED
2561
JUL 24 1916

2990/3

Medical Officer i/c
3rd Western General Hosp.
Cardiff

H.A./N.W. 25th July, 6.

No. 872, MANUEL, L/C. W.,
1474, DELANEY, Pte. L.
1/1 Newfoundland Regiment.

Kindly state what the above
men are suffering from. Are they
sick or wounded? No previous
report has been received of them.
State also nature of sickness or
wound, please?

for Paymaster & O.i/c Records.

13082/16

NEWFOUNDLAND CONTINGENT.

MEMORANDUM.

No. 2990/3

From

PAY & RECORD OFFICE.

58, VICTORIA STREET,

LONDON, S.W.

25th July, 1916.

H.A./N.W.

To

Medical Officer i/c

3rd Western General Hosp.,

Cardiff

SUBJECT: No. 272, MANUEL, L/C. W.,
1474, DELANEY, Pte. L.
1/1 Newfoundland Regiment.

REPLY

Reference Nos.

Dated

191

Kindly state what the above men are suffering from. Are they sick or wounded? No previous report has been received of them. State also nature of sickness or wound, please.

H. A. Anderson

for Paymaster & O.i/c Records.

13082/16	
NEWFOUNDLAND CONTINGENT	
PAY & RECORD OFFICE	
Ref. No.	
Rec'd.	JUL 27 1916
Acc'd.	
Ans'd.	
File No.	

NEWFOUNDLAND CONTINGENT.

MEMORANDUM.

No. 4586/476

From
 PAY & RECORD OFFICE,
 58, VICTORIA STREET,
 LONDON, S.W.
 1st November, 1916.

To Officer Commanding,
 2/1 Newfoundland Regiment,
 Newton-on-Ayr,
 Scotland.

HT/NW

SUBJECT: No. 272, Cpl. W. MANUEL.

REPLY

Dated *Nov. 3rd* 1916.

Reference Nos.

The following letter from H.E. the Governor, please:

"Government House,
 St. John's, Nfld.
 10 Oct. 1916.

Sir,

I have received a request from the friends of No. 272 Corporal Willis Manuel, now in 3rd Western General Hospital, Wales, that he be granted furlough in order to visit his mother and family.

He was wounded on July 1st. Please deal with this application as in previous cases requesting furlough.

(Sd.) W.E. Davidson,
 Governor."

This soldier was admitted 3rd Western General Hospital, Cardiff, 27/7/16, suffering from G.S.W. back and left arm.

From recent private sources it is understood that he is progressing favourably and is now convalescent.

A. Q. Minors
 Capt.,

Paymaster & O. i/c Records.

With reference to the attached requests for furlough I regret that I do not see my way clear to grant furlough in any of these cases unless they may happen to be recommended by the M.O. on medical grounds.

1ST NEWFOUNDLAND REGIMENT
 PAY & RECORD OFFICE
 No. 4586/476
 COMMANDING, 2nd Bat N.F.L.D. REGT.,
 NOV - 1916
 NEWTON-ON-AYR, N.B.
 A
 And
 File No.

5445/2

NEWFOUNDLAND CONTINGENT.

N.F.P/35.

272 L.Cpl. W. Manuel,
1st Newfoundland Regt,
The Rest,
Porthcawl.

Reference your request dated 14/12/16 . Postal Money
Order for £ 5 : 0 : 0 enclosed, together with receipt form,
which please sign and return to this Office.

Pay & Record Office,
58, Victoria Street,
London, S.W..

Capt.,
Paymaster & O. i/c Records.

16 DEC 1916



O.K. £3.
M.H. 7/11/16

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

Please remit the sum of 3 pounds _____ shillings

to Lt Col Manuel The Post Newfoundland & Wales

on account of Pay & Allowances that may be due to me.

NEWFOUNDLAND REGIMENT
PAY & RECORD OFFICE

Ref No. 4156
Recd. NOV - 7 1916
Acct. 4691/1
Ans'd. ff
File No. Dated at Nov 5

Regtl No. 272 rank Lower Corporal

Name Willis Manuel

Approved Tom D. Alexander

Medical Officer i/c

Auxiliary Hospital Post
Post Office

1916.

November 7th 6 .

4691/1 .

272, L/O. W. Manuel, .
1/1st. Newfoundland Regiment,
The Rest,
Porthcawl,
S. Wales.

W.F..

. POSTAL MONEY ORDER £3. 0. 0. .

Reference your request dated 5/11/16, Postal Money Order .
for £3. 0. 0. enclosed, together with receipt form which
please sign and return to this Office.

Capt.
Paymaster. & O. 1/c. Records.



ward to The Post

Penthouse

South Wales

Daymaster 111 Newfoundland Regt. Nov 10/16

Thank very much

for sending me the money for which I asked
for I have enclosed the forms to
your requisition hoping to get my dis-
charge from hospital soon

I am yours sincerely
L. C. W. Mansel



15/12/16
of £5.00
Paymaster & O. i/c Records,
Newfoundland Contingent,
58, Victoria Street,
London, S. W.

Please remit the sum of Five pounds — shillings

to 242 Supt. W. Manuel. The Post Potheawl

on account of Pay & Allowances that may be due to me.

John D. Alexander
14. 12. 16
see 640
ST. JOHN'S
FORTHCAWL

regtl No. 242 rank S. Supt

Name Manuel

Approved _____

John D. Alexander Medical Officer i/c
Hospital.

Dated at Post Potheawl
Dec 14th 1916.

DEC 15 1916
5445/2
10/26380
Recd.
Ack'd.
Ans'd.
File No.

DEPARTMENT OF VETERANS AFFAIRS

To  Copy for HO file

Ottawa 4, Ont
April 23, 1968

Date.....

Attention of

NAME MANUEL Willis

SERVICE 272 WWI
NUMBER ROYAL Nfld
REGT.

C.P.C. No. 260534
W.V.A. No. 50619

NAVY
ARMY x
R.C.A.F.

The DEPARTMENT has received information from

.....
PME CPC St John Newfoundland Date April 11, 1968

.....
(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death..... April 8, 1968
Cause of Death.....
Place of Death..... Veterans Pavilion

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

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

} Destroy form if advice of death already received.

E. C. Richards
for
Chief, Central Registry

NEWFOUNDLAND CONTINGENT

No

The Paymaster & Officer i/c Records,
Newfoundland Contingent,
58, Victoria Street,
London, S.W.

Please remit per Postal Money Order to:

Lt Manuel W. 1st N. F. L. D. Ward 1. The Rest
Portsmouth

the sum of 5 £ pounds — shillings, on
account of any balance that may be due to me.

P.K.
5-0-0
MWR

NEWFOUNDLAND REGIMENT PAY & RECORD OFFICE		Regtl. No. <u>272</u>	Rank <u>Lt</u>
Ref. No. <u>317</u>	Name <u>Manuel W.</u>		
Res'd. <u>JUN 15 1917</u>	Approved <u>M. H. Ruffe</u>		
Ack'd. <u>15/6/17 5818/1</u>	Officer i/c		
Ans'd. <u>C</u>	<u>85 John Porthcaul Hospital.</u>		
File No.			

Dated at

Over.

191

Glasgow South Wales

June 14/17

Lieut M Manned 272

1st Regt Regt

Word 1 the Regt

Panama

South America

Pay Master

Dear Sir

I am enclosing form for \$ 5.
which I should like to be sent on to the above
address hoping to receive

AT.
75-0-0
MAN

1ST N. W. FOUND.
PAY & RECORD OFFICE
Ref. No. 3117
Rec'd. JUN 15 1917
Ack'd.
Ans'd. 6/17 5818/1
File No.

Lieut M Manned

8818/1.

15th June, 1917.

St. John Porthcawl

Glam, South Wales.

272, L/Cpl. W. Manuel, 1st Newfoundland Regiment.
Cheque

5s. 0s. 0.

Kindly complete receipt form on back of cheque before

presenting at a bank, please.

7



The Grand Priory of
The Order of the Hospital of St. John of Jerusalem in England.
AMBULANCE DEPARTMENT.



The St. John Ambulance Association.

(A PART OF THE RED CROSS ORGANIZATION OF THE BRITISH EMPIRE.)

Patron:

HIS MOST GRACIOUS MAJESTY THE KING
(Sovereign Head and Patron of the Order).

ST. DAVID'S CENTRE.

(COMPRISING THE WHOLE OF WALES AND MONMOUTHSHIRE)

Patrons:

THE MOST HONOURABLE THE MARQUIS OF BUTE.
THE RIGHT HONOURABLE THE EARL OF PLYMOUTH, P.C., C.B.

President:

THE RIGHT HONOURABLE LORD DYNEVOR.

Chairman of Committee:

THE RIGHT HONOURABLE THE LORD MAYOR OF CARDIFF.

Honorary Secretary:

HERBERT LEWIS, Esq.

ST. JOHN AUXILIARY HOSPITAL,

PORTHCAWL,

GLAM.

Telephone No. 49.

Commandant:
Mrs. KATE LEWIS.

Note—All communications are to be
addressed to the Commandant.

18th June 1917.

*To The Quartermaster & Officer In Charge
(Newfoundland Contingent)
Pay & Record Office
58 Victoria Street
London W.1*

Dear Sir

(re - L. Col W. Kimmel - 272 - 1st Newfoundland Regt)

*I beg to acknowledge receipt of Cheque value £5
for payment to this Officer. I will transmit to him as he desires
when he receives same.*

Yours truly,

M. S. Ruffle

Heaton O. J. C.

ST. JOHN AMBULANCE ASSOCIATION	
PAY & RECORD OFFICE	
Ref. No.	3196
Rec'd.	JUN 18 1917
Ack'd.	
Ans'd.	
File No.	

D1008

Newport Section.

To:-

O.I/c Records,
Newfoundland Contingent,
58 Victoria Street,
London S.W.

From:-

O.C.
3rd Western General Hospital,
Howard Gardens,
Cardiff.

^W
272 L/Cpl. ~~M. Willis~~ *W. Willis*
1 Newfoundlands.

The ~~above~~-mentioned who is now fit for discharge from hospital is regarded as unfit for further Military Service. Will you kindly instruct me as to his disposal?

1st NEWFOUNDLAND REGIMENT
& RECORD OFFICE

Ref. No. *4585*

21/8/17

18 AUG 1917

CARDIFF

File No.

D. Hepburn
Colonel Commanding,
3rd Western General Hospital.

8484/4

HA/JO

PAYMASTER & OFFICER I/C RECORDS,
NEWFOUNDLAND CONTINGENT,
58, VICTORIA STREET,
LONDON, S.W. 1.
ENGLAND.

20th August, 7.

O.C., 3rd Western General Hospital,
Howard Gardens, Cardiff.

272, L.Cpl. W. Manuel.

With reference to your memorandum No.D1008 of 18/8/17: the above man should be boarded on A.F. B.179. He should be ordered to report at this Office for disposal at the earliest opportunity, when steps will be taken for his repatriation and discharge from the Service, as may be advisable. A.Fs. B.179, B.178a, D.400a, and W.3494 should be furnished to this Office. Please note that this man's name is Manuel, not Willis.

2/Lt.,
for Maj.,
Paymaster & Officer i/c Records.

To:-

NEWPORT SECTION
3RD WESTERN
GENERAL HOSPITAL

Officer i/c Records.
Newfoundland Contingent. London.

From:-

M. O. i/c.
3rd Western General Hospital 1.

272 L/Cpl Manuel.

This N. C. O is being discharged to you to-day August 25th for disposal in accordance with your memo 8484/4. H.A./J.C of 20th inst, please. Invaliding documents were dispatched to you yesterday.

M. O. i/c

Major. R. A. M. C.
M. O. i/c.



Newport. Mon.
Aug 25th/1917.

*flex hood. 25/8/17
furlough to ~~to~~ tattoo 4/9/17. Pass to Barry
Camp. ~~to~~ Orders to report there.*

Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man fit for General Service.

No. 272



Rank L' Cpl.

Name (surname first) Manuel Willis

Regiment Newfoundlands



1. State what special qualifications you have for employment in civil life,

Nil.

**NEWPORT SECTION
3RD WESTERN
GENERAL HOSPITAL**

COPY SENT TO
O.C. H.Q.
ST. JOHNS, N.F.L.D.
N.F.P.38. No. 9422/110
DATED 12 SEP 1917

2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed?

J. J. Manuel. Co. Millwright
7 years.

3. What is the nature and locality of the employment you desire?

Millwright. Newfoundland.

4. What is the name of your Approved Society?

Sunlife.

5. Have you been employed whilst with the Colours? If so, in what capacity?

No.



Date 23. 6. 17.

Signature Manuel Willis

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 4 (ii), item 3, of Army Council Instruction No. of 1916.

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's O.C.

Descriptive Return of a Soldier ^{reclassified} 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 Commissioners of Chelsea Hospital.

Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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.

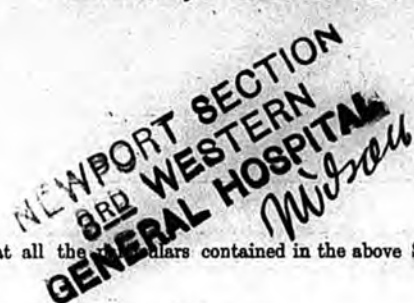
The Form will then be attached to the Proceedings of the man's Medical Board, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.

Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

A Name in full Manuel Willis
Regiment from which discharged 1st Newfoundlander
Regimental Number. 272
Intended address 5 Clifton Place. Stow Hill Newport



Height on discharge 5 Feet 10 Inches
Colour of Hair on discharge Black Colour of Eyes brown
Figure on discharge Slight
Christian name of Father Thomas
Christian name of Mother Jane
Wife's Maiden name in full _____
Date and Place of Marriage _____
Christian names of Children _____



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) Manuel Willis

Station Porthcawl

(Rank) Sa cpl
Date 23 6/17

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.

John D. Ollender

Medical Officer i/c Hospital.

Station _____

Date June 23rd 1917



B Period of Service and in what Corps ...

Regiment	Years	Days	All Service Abroad with Stations	Years	Days
			India		
			S. Africa		

Disallowed ...

Service towards Pension ...

Date inclusive to which pay has been issued ...

Sums due on account of public debts ...

Sum due on account of advance of Pension }

COPY SENT TO
O.C. H.Q.
ST. JOHN'S, N.F.C.D.
N.F.P. 38. No. 9122/110
DATED 12 SEP 1917

Rank on Discharge
Character (as on Certificate of discharge)
Where born, and on what date
Date and Place of first Enlistment
Trade on Enlistment
Cause of Discharge
Number of G.C. Badges
Wounds, and Actions in which received

Medals

Other distinguishing marks

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

Station _____

Officer in Charge

Date _____

Records.

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 Manuel 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 ... _____
Number ... _____

When Vaccinated ... _____

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

(a) Marks indicating congenital peculiarities or previous disease ... { (a) _____

(b) Slight defects but not sufficient to cause rejection ... { (b) _____

Approved by (Signature) _____

(Rank) _____

Medical Officer.

Enlisted ... { at _____
on _____ day of _____ 191

Corps.	Regtl. No.
<u>1st Newfoundland</u>	<u>272</u>

Became non-effective by _____

on _____ day of _____ 191

(Signature) _____

(Rank) _____

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3 ^d Western Gen Hos	6	7	16				P.W.L. Hip		X-ray, hip. Operation, C.F. large drainage tube inserted - baritone felt. Fomentations.	The General
"							Ally's Gen		Sept 18y dressing - fange drain	
							P.W.L. / Mann Fradini W.S.M.		2/2/17. Improved - transferred to Newport Hospital.	J. M. D. Allen M.D.
							Bullet W.L. Buttock Povunum D. Skun		X-ray / d. Hip - hip - ? small separation 1 d. Torax - Fractured Ribs, good position	M. L. M. M. M.
									28/6/17. Returns to Newport Hospital for X-ray Exam	John D. Alexander

18-9-16
POOTHKAW

11-4-17

Medical Report on an Invalid.

Station Porthcawl

Date 23.6.17



- 1. Unit 1st Newfoundlands.
- 2. Regimental No. 272.
- 3. Rank L.cpl.
- 4. Name Manuel Willis
- 5. Age last birthday 30
- 6. Enlisted { on 2.9.14.
at St John Newfoundland.
- 7. Former Trade or Occupation } millwright

**NEWPORT SECTION
8RD WESTERN
GENERAL HOSPITAL**

8. Disability.

Bullet wound through hip and spine and left arm

Statement of Case.

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

- 9. Date of origin of disability. 1st July 1916
- 10. Place of origin of disability. Albert - France
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

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O.C. H.Q.
ST. JOHNS, N.F.L.D.
N.F.P.38. No. 9433/110
DATED 12 SEP 1917

Bullet wound through hip and spine and left arm

- 12. (a) Give your opinion as to the causation of the disability. Bullet wound
- (b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3). Active Service

13. What is his present condition?

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

Let's pain up spine, and causing sickness
Weight 11 Stones 7 lbs



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

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

Yes
Yes
Yes
Yes

15. Was a Court of Inquiry held on the injury?

- If so—(a) When?
- (b) Where?
- (c) Opinion?

16. Was an operation performed? If so, what?

Yes - Wound cleaned out and drainage tube put in

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

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly attributable to active service?

19. Do you recommend

- (a) Discharge as permanently unfit, or
- (b) Change to England?

Yes



John D. Alexander

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except

Station _____

Date _____

Colonel Commanding
3rd Western General Hospital
Officer in charge of Hospital.

* 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.
† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

- (ii.) Expressions such as "may," "might," "probably," &c., should be avoided.
- (iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1913.)
- (iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.
- (v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.
- (b) If due to one of these causes, to what specific conditions do the Board attribute it?

Disability due to active service

21. Has the disability been aggravated by
- (a) Intemperance?
 - (b) Misconduct?

**NEWPORT SECTION
3RD WESTERN
GENERAL HOSPITAL**

23a. Is he fit for discharge from the Service as an out-patient and will he require out-patient treatment on discharge from Hospital.

26 months

earn a livelihood, estimate it at $\frac{1}{4}$, $\frac{2}{4}$, or total incapacity.

24. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?

28

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

operation refused

26. Do the Board recommend

- (a) Discharge as permanently unfit,

in war service have service hospital etc

Signatures:—

Y. J. P. M. J. C. President.

Station *Weymouth*

Our witness approved

Members.

Date *24/8/1917*

Approved.

Station *Weymouth*

Y. J. P. M. J. C.
Administrative Medical Officer.

Date *24/8/1917*

President

Discharge as permanently unfit for war service and hospital duty at home

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

- (ii.) Expressions such as "may," "might," "probably," &c., should be avoided.
- (iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1182 and 1185, Pay Warrant, 1918.)
- (iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.
- (v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.
- (b) If due to one of these causes, to what specific conditions do the Board attribute it?

Bullet wound a active service

21. Has the disability been aggravated by

- (a) Intemperance?
- (b) Misconduct?

Any of the conditions mentioned in question 20, and if so, which?

Is the disability permanent?

If permanent, what is its probable duration?

in months.

To what extent is his capacity for earning a full livelihood in the general market lessened at present?

To what extent of his inability to earn a livelihood, estimate it at $\frac{1}{4}$, $\frac{2}{4}$, $\frac{3}{4}$, or total incapacity.

- 24A. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?

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

26. Do the Board recommend

- (a) Discharge as permanently unfit,

~~(b) Discharge as fit for service,~~

Signatures:—

W. J. ... President.

Station *Worcester*

Date *24/8/1917*

Approved.

Station *Worcester*

Date *24/8/1917*

W. J. ... Administrative Medical Officer.

**NEWPORT SECTION
3RD WESTERN
GENERAL HOSPITAL**

Bullet wound a active service
29 permanent
Denial

Total for 6 months

29

apostrophe marked

In war service have service light etc
at home

Discharge as Permanent Home Service

Discharge as Home Service



N.F.P. /75.

NEWFOUNDLAND CONTINGENTApplication for Overseas Transport

1. Name in full.

Surname ManuelChristian Names Mary
Annie

2. Postal and Telegraphic Address.

49 Catehale Avenue
St. John's, Newfoundland.

3. Your last Address in Newfoundland.

4. When did you leave Newfoundland, and for what reason did you come here?

5. If relation or dependant of a member of the Newfoundland Contingent state relationship, Regtl.No., and Rank.

Wife of # 272 Pfc
Wili Manuel

6. Your Destination in Newfoundland.

St. John's
Newfoundland

7. What arrangements have you made for passport?

Arranged by Newfoundland
Office 58 Victoria Street

8. Can you leave for Newfoundland on 24 hours' notice by telegram?

Yes

9. No Government or Department can accept responsibility for safety of passengers or baggage, but it is understood that the usual ocean passengers' baggage may be carried.

Date: Sept 5/17Signature: Mary Annie Manuel

To: Chief Paymaster & Officer i/c Records,
Newfoundland Contingent,
58, Victoria Street,
London, S.W. I.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 272 Army Rank Lance Corporal
 Name Manuel Willis
 (The name must agree strictly with that on enlistment, unless changed subsequently by authority.)
 Corps 1st Newfoundland Regiment
 Battalion, Battery, Company, Depôt, &c. _____
 (If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)
 Date of discharge _____
 Place of discharge _____

1. Description at the time of discharge.

Age 30 years _____ months
 Height 5 feet 10 inches
 Chest measurement { girth when fully expanded _____ ins.
 range of expansion _____ ins.
 Complexion _____
 Eyes Brown
 Hair Black
 Trade Millwright
 Intended place of residence { _____
 (To be given as fully as practicable)

Descriptive marks.

COPY SENT TO
 O.C. H.Q.
 ST. JOHNS, N.F.L.D.
 N.F.P.38. NO. 9452/110
 DATED 12 SEP 1917

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of Wound received in Action.

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character :—

4. Character awarded in accordance with King's Regulations :—

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

No. 272 Rank L. Sgt. Name Manuel W.

Pay	P.A.	Reg	Total
1.05	10		115
Less Allotment			60
Net Rate			55

11/2/53

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£ s d				
						From	To							
Balance					Balance	8/6/17				34	2	7		
Acquittance Rolls					Pay @ net rate	9/6/17	25/9/17	78	55	42	90	8	16	4
Hospital Advances					Ration Allow.									
A.B. 34					10 days @ 2/-							1	0	0
P. & R.O. Payments		10	0	0										
<i>Chq</i>						25/9/17	4/9/17	10	55	5	50	1	2	7
<i>Rep. No. 2948</i>														
<u>Cash.</u>														

Rep. No. 2948

[Handwritten signature]

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 272, L/O., Mammel, W

(Substituting A.F. J.1625). N.F.P./33

Company. From 9/8/17 To 15/9/17 (Dates inclusive).

Embarked per S.S. _____

DR.

Classification (See Procedure).

From Liverpool Date 15/9/17

Draft No. 48 CR.

Date	Pay Book Col.	PARTICULARS	Rate	Days	£	¢	£	s	d	Date	Pay Book Col.	PARTICULARS	Rate	Days	£	¢	£	s	d
	8	Forfeited Pay									1	Pay							
	9	Allotments	.60	97	58	20					2	Field Allowance	1.05	97	101	85			
	10										3	Other " "	.10	"	9	70			
11/12		Total Stoppages			58	20	11	19	2		4/5	Total @ 4.86 2/3			111	55	22	18	4 1/2
13		Fines									6	Balance Credit Last Period					54	2	7 1/2
14		Clothing & Necessaries									6a	<u>OTHER CREDITS:</u>							
15		Arms & Accoutrements										Ration Allice,	27	8	17	15	9	17	
16		Barrack Damages										18	days @	2	1	16	0		
17		Hospital Stoppages																	
17a		Miscellaneous Stoppages																	
19		Casual Payments per P & R. O.			45	0	0												
20		1st Payment																	
21		2nd "																	
22		3rd "																	
23		Final "																	
24		Balance Debit Last Period																	
28		" Due by Paymaster			1	17	10				27	Balance Due to Paymaster							
					58	17	0												

CHECKED.
RMA
12/9/17



191

CERTIFIED CORRECT AND CONTINGENT.

PAYMASTER & OFFICER COMPANY.

Regrs. sub

✓

272, L/C., Mammel, W

9/6/17

15/9/17

Liverpool

15/9/17

A

48

R

1.05 97 101 85

.10 " 9 70

.60 97 58 20

58 20 11 19 2

111 55 22 18 4½

34 2 7½

27 8 17 13 9 17

18 2 1 18 0

per P & R. O. 45 0 0

1 17 10

58 17 0

58 17 0

CHECKED
Rma
12/9/17



NEWFOUNDLAND CONTINGENT

PAYMASTER & OFFICER IN CHARGE

1ST NEWFOUNDLAND REGIMENT
PAY & RECORD OFFICE

Ref. No. 4891

Rec'd SEP - 2 1917

ACK'D
APPROVED
No. ✓



This is to certify. I. Sgt Cpl W Manuel
was duly married to Miss Mary A Watkins
on Sept 1 1917 at Newport. I wish
my wife to travel home with me to
Newfoundland

Your Truly
Willis Manuel

Witness Rev Harry Taylor.
Minister of St Johns Wesleyan Church
Newport, Nfld. Sept 1st 1917

Address
Mrs W Manuel
49 Cotehale Avenue
Rayhan
Devonport
Devon

Application for
passport and travel
forms sent

NO EXTENSION OF THIS FURLOUGH IS PERMITTED.

N.B.—This Form is to be used for N.C.O.'s and men granted furlough from Hospitals during the period of the War.

No. *J. W. Anderson*
 Hospital at *.....*

FURLOUGH.

No. *272* (Rank) *Lance Corp.* (Name) *Manuel W.*
 Unit *1st Newfoundland Regiment*

has been granted a furlough from *25th August 1917*
 to return on *4th September* and leave to proceed to

Newport, then to report at Bally Scotland
 No *.....* made to him on any account without previous reference

to the *.....* Master at *.....*
 (Station) *8, VICTORIA ST., LONDON, S.W.*

(Date) *AUG 25 1917*
 [M225] *NEWFOUNDLAND CONTINGENT* *NEWFOUNDLAND CONTINGENT*
 G & S *J. W. Anderson* *.....*
 718 *MASTER & OFFICER I/C RECORDS*





The Grand Priory of
The Order of the Hospital of St. John of Jerusalem in England.
AMBULANCE DEPARTMENT.



The St. John Ambulance Association.

(A PART OF THE RED CROSS ORGANIZATION OF THE BRITISH EMPIRE.)

Patron:

HIS MOST GRACIOUS MAJESTY THE KING
(Sovereign Head and Patron of the Order).

ST. DAVID'S CENTRE.

(COMPRISING THE WHOLE OF WALES AND MONMOUTHSHIRE)

Patrons:

THE MOST HONOURABLE THE MARQUIS OF BUTE.
THE RIGHT HONOURABLE THE EARL OF PLYMOUTH, P.C., C.B.

President:

THE RIGHT HONOURABLE D. LLOYD GEORGE, M.P.

Chairman of Committee:

THE RIGHT HONOURABLE THE LORD MAYOR OF CARDIFF.

Secretary:

HERBERT D. W. LEWIS, R.S.Q. Prudential Buildings, Cardiff.

ST. JOHN AUXILIARY HOSPITAL,

Telephone No. 49, Porthcawl.

Commandant:

Mrs. KATE LEWIS.

Note—All communications are to be addressed to the Officer-in-Charge.

PORTHCAWL,

GLAM.,

Sept 20th 1917.

Dear Sir.

272. L. Cpl. W. Masquel } address
1/1. Newfoundland Regt. }

is not known. Would you try
& forward on this letter to him.

Yours Truly
Matron

ST. JOHN AUXILIARY HOSPITAL
RECORD OFFICE

Ref. No. 5393

Rec'd. SEP 21 1917 E.P.

Acc'd. Death With 21/17

Ans'd.

File No.



Monday
15/1/14

NOTED	
C.O.M.S.	
Date	17/1/14
	BC
	Ord.

File

Paymaster ^{of} Newfoundland Regt.

Kindly hold over my credits as I'm getting my discharge from hospital in a few days, and expecting to come to London, to spend a few days, as I have been informed by the Matron that it would be forwarded on to the depot, and if not all should like to draw a little of it.

I remain yours

very Sincerely

L. Cpl. W. Manuel.

Ref No. 314

Rec'd JAN 17 1914

FILE NO.

Monday
15/1/19

NOTED	
G. G. M. S.	
Date	17/1/19
	BC

File

Paymaster ^{1st} Newfoundland Regt.

Kindly hold over my credits as I'm getting my discharge from hospital in a few days, and expecting to come to London, to spend a few days, as I have been informed by the Matron that it would be forwarded on to the depot, and if not all should be to draw a little of it.

I remain yours

very Sincerely

L. Cpl. W. Manuel

Ref. No.	314
Rec'd.	JAN 17 1919
Ack'd.	
Filed	
File No.	

Manuel. W.

272

Ray Dept

-Certificate to be signed by the Soldier on date of Discharge-

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

Name Willis Manuel Sig. of Soldier Willis Manuel.

Place Loon Bay Sig. of Witness Alfred Young

March 13/18

~~~~~

**NEWFOUNDLAND CONTINGENT**

STATEMENT of ACCOUNT of No. 272, L/O., Manuel, W

(Substituting A.F. J.1625). N.F.P./36.

Company. From 9/6/17 To 13/9/17 (Dates inclusive).

From Liverpool Date 13/9/17

DR. Classification (See Procedure). A

Draft No. 48 CR.

| Date | Pay Book Col. | PARTICULARS                               | Rate | Days | £  | s  | d  | Date | Pay Book Col. | PARTICULARS     | Rate                                                                                                                                                                                                                                                                | Days | £   | s   | d  |    |    |       |  |  |  |  |  |
|------|---------------|-------------------------------------------|------|------|----|----|----|------|---------------|-----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|-----|-----|----|----|----|-------|--|--|--|--|--|
|      | 8             | Forfeited Pay                             |      |      |    |    |    |      | 1             | Pay             | 1.05                                                                                                                                                                                                                                                                | 97   | 101 | 85  |    |    |    |       |  |  |  |  |  |
|      | 9             | Allotments                                | .60  | 97   | 58 | 20 |    |      | 2             | Field Allowance | .10                                                                                                                                                                                                                                                                 | "    | 9   | 70  |    |    |    |       |  |  |  |  |  |
|      | 10            |                                           |      |      |    |    |    |      | 3             | Other " "       |                                                                                                                                                                                                                                                                     |      |     |     |    |    |    |       |  |  |  |  |  |
|      | 11/12         | Total Stoppages                           |      |      | 58 | 20 | 11 | 19   | 2             | 4/5             | Total @ 4.86 2/3                                                                                                                                                                                                                                                    |      |     | 111 | 55 | 22 | 18 | 4 1/2 |  |  |  |  |  |
|      | 13            | Fines                                     |      |      |    |    |    |      |               | 6               | Balance Credit Last Period                                                                                                                                                                                                                                          |      |     |     |    | 34 | 2  | 7 1/2 |  |  |  |  |  |
|      | 14            | Clothing & Necessaries                    |      |      |    |    |    |      |               | 6a              | <u>OTHER CREDITS:</u>                                                                                                                                                                                                                                               |      |     |     |    |    |    |       |  |  |  |  |  |
|      | 15            | Arms & Accoutrements                      |      |      |    |    |    |      |               |                 | Ration Allowance, 27/ 8/17- 13/9 /17                                                                                                                                                                                                                                |      |     |     |    |    |    |       |  |  |  |  |  |
|      | 16            | Barrack Damages                           |      |      |    |    |    |      |               |                 | = 18 days @ 2/                                                                                                                                                                                                                                                      |      |     |     |    | 1  | 16 | 0     |  |  |  |  |  |
|      | 17            | Hospital Stoppages                        |      |      |    |    |    |      |               |                 | <div style="border: 1px solid black; padding: 5px;"> <p align="center">This account is in accordance with information received at the Pay &amp; Record Office to <u>12/9/17</u> and is therefore subject to amendment if, and as may be found necessary.</p> </div> |      |     |     |    |    |    |       |  |  |  |  |  |
|      | 17a           | Miscellaneous Stoppages                   |      |      |    |    |    |      |               |                 |                                                                                                                                                                                                                                                                     |      |     |     |    |    |    |       |  |  |  |  |  |
|      | 19            | <del>General</del> Payments per P & R. O. |      |      | 45 | 0  | 0  |      |               |                 |                                                                                                                                                                                                                                                                     |      |     |     |    |    |    |       |  |  |  |  |  |
|      | 20            | 1st Payment                               |      |      |    |    |    |      |               |                 |                                                                                                                                                                                                                                                                     |      |     |     |    |    |    |       |  |  |  |  |  |
|      | 21            | 2nd "                                     |      |      |    |    |    |      |               |                 |                                                                                                                                                                                                                                                                     |      |     |     |    |    |    |       |  |  |  |  |  |
|      | 22            | 3rd "                                     |      |      |    |    |    |      |               |                 |                                                                                                                                                                                                                                                                     |      |     |     |    |    |    |       |  |  |  |  |  |
|      | 23            | Final "                                   |      |      |    |    |    |      |               |                 |                                                                                                                                                                                                                                                                     |      |     |     |    |    |    |       |  |  |  |  |  |
|      | 24            | Balance Debit Last Period                 |      |      |    |    |    |      |               |                 |                                                                                                                                                                                                                                                                     |      |     |     |    |    |    |       |  |  |  |  |  |
|      | 28            | " Due by Paymaster                        |      |      | 1  | 17 | 10 |      |               | 27              | Balance Due to Paymaster                                                                                                                                                                                                                                            |      |     |     |    |    |    |       |  |  |  |  |  |
|      |               |                                           |      |      | 58 | 17 | 0  |      |               |                 |                                                                                                                                                                                                                                                                     |      |     |     |    | 58 | 17 | 0     |  |  |  |  |  |

CHECKED.  
*R.M.C.*  
12/9/17



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CERTIFIED CORRECT.  
NEWFOUNDLAND CONTINGENT

*F. H. M. [Signature]*  
P.O. [Signature] & Co. Company.

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 272, L/O., Manuel, W

(Substituting A.F. J. 1825). N.F.P./36.

Embarked per S.S. \_\_\_\_\_

Company. From 9/6/17 To 13/9/17 (Dates inclusive).

From Liverpool Date 13/9/17

DR. Classification (See Procedure). A

Draft No. 48 CR.

| Date | Pay Book Col. | PARTICULARS                              | Rate | Days | £  | s  | d       | Date | Pay Book Col. | PARTICULARS                                                                                                                                                                   | Rate | Days | £   | s  | d           |
|------|---------------|------------------------------------------|------|------|----|----|---------|------|---------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|------|-----|----|-------------|
|      | 8             | Forfeited Pay                            |      |      |    |    |         |      | 1             | Pay                                                                                                                                                                           | 1.05 | 97   | 101 | 85 |             |
|      | 9             | Allotments                               | .60  | 97   | 58 | 20 |         |      | 2             | Field Allowance                                                                                                                                                               | .10  | "    | 9   | 70 |             |
|      | 10            |                                          |      |      |    |    |         |      | 3             | Other " "                                                                                                                                                                     |      |      |     |    |             |
|      | 11/12         | Total Stoppages                          |      |      | 58 | 20 | 11 19 2 |      | 4/5           | Total @ 4.86 2/3                                                                                                                                                              |      |      | 111 | 55 | 22 18 4 1/2 |
|      | 13            | Fines                                    |      |      |    |    |         |      | 6             | Balance Credit Last Period                                                                                                                                                    |      |      |     |    | 34 2 7 1/2  |
|      | 14            | Clothing & Necessaries                   |      |      |    |    |         |      | 6a            | <u>OTHER CREDITS:</u>                                                                                                                                                         |      |      |     |    |             |
|      | 15            | Arms & Accoutrements                     |      |      |    |    |         |      |               | Ration Allce, 27/ 8/17- 13/9 /17                                                                                                                                              |      |      |     |    |             |
|      | 16            | Barrack Damages                          |      |      |    |    |         |      |               | = 18days @ 2/                                                                                                                                                                 |      |      | 1   | 18 | 0           |
|      | 17            | Hospital Stoppages                       |      |      |    |    |         |      |               | This account is in accordance with information received at the Pay & Record Office to <u>12/9/17</u> and is therefore subject to amendment if, and as may be found necessary. |      |      |     |    |             |
|      | 17a           | Miscellaneous Stoppages                  |      |      |    |    |         |      |               |                                                                                                                                                                               |      |      |     |    |             |
|      | 19            | <del>Grants</del> Payments per P & R. O. |      |      | 45 | 0  | 0       |      |               |                                                                                                                                                                               |      |      |     |    |             |
|      | 20            | 1st Payment                              |      |      |    |    |         |      |               |                                                                                                                                                                               |      |      |     |    |             |
|      | 21            | 2nd "                                    |      |      |    |    |         |      |               |                                                                                                                                                                               |      |      |     |    |             |
|      | 22            | 3rd "                                    |      |      |    |    |         |      |               |                                                                                                                                                                               |      |      |     |    |             |
|      | 23            | Final "                                  |      |      |    |    |         |      |               |                                                                                                                                                                               |      |      |     |    |             |
|      | 24            | Balance Debit Last Period                |      |      |    |    |         |      |               |                                                                                                                                                                               |      |      |     |    |             |
|      | 28            | " Due by Paymaster                       |      |      | 1  | 17 | 10      |      | 27            | Balance Due to Paymaster                                                                                                                                                      |      |      |     |    |             |
|      |               |                                          |      |      | 58 | 17 | 0       |      |               |                                                                                                                                                                               |      |      |     |    | 58 17 0     |

CHECKED.  
R.M.C.  
12/9/17



191

CERTIFIED CORRECT.  
NEWFOUNDLAND CONTINGENT

*[Signature]*  
Company.



NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 272, L/C., Manuel, W

(Substituting A.F. J. 1325). N.F.P./35.

Embarked per S.S. \_\_\_\_\_

Company. From 9/6/17 To 13/9/17 (Dates inclusive).

From Liverpool Date 13/9/17

DR.

Classification (See Procedure). A

Draft No. 48

CR.

| Date | Pay Book Col. | PARTICULARS                                | Rate | Days | £  | s  | d  | Date | Pay Book Col. | PARTICULARS                                                                                                                                                                              | Rate                     | Days | £   | s   | d  |    |       |       |  |
|------|---------------|--------------------------------------------|------|------|----|----|----|------|---------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|------|-----|-----|----|----|-------|-------|--|
|      | 8             | Forfeited Pay                              |      |      |    |    |    |      | 1             | Pay                                                                                                                                                                                      | 1.05                     | 97   | 101 | 85  |    |    |       |       |  |
|      | 9             | Allotments                                 | .60  | 97   | 58 | 20 |    |      | 2             | Field Allowance                                                                                                                                                                          | .10                      | "    | 9   | 70  |    |    |       |       |  |
|      | 10            |                                            |      |      |    |    |    |      | 3             | Other " "                                                                                                                                                                                |                          |      |     |     |    |    |       |       |  |
|      | 11/12         | Total Stoppages                            |      |      | 58 | 20 | 11 | 19   | 2             | 4/5                                                                                                                                                                                      | Total @ 4.86 2/3         |      |     | 111 | 55 | 22 | 18    | 4 1/2 |  |
|      | 13            | Fines                                      |      |      |    |    |    |      | 6             | Balance Credit Last Period                                                                                                                                                               |                          |      |     |     | 34 | 2  | 7 1/2 |       |  |
|      | 14            | Clothing & Necessaries                     |      |      |    |    |    |      | 6a            | <u>OTHER CREDITS:</u>                                                                                                                                                                    |                          |      |     |     |    |    |       |       |  |
|      | 15            | Arms & Accoutrements                       |      |      |    |    |    |      |               | Ration Allowance, 27/ 8/17- 13/9 /17                                                                                                                                                     |                          |      |     |     |    |    |       |       |  |
|      | 16            | Barrack Damages                            |      |      |    |    |    |      |               | = 18 days @ 2/                                                                                                                                                                           |                          |      |     |     | 1  | 18 | 0     |       |  |
|      | 17            | Hospital Stoppages                         |      |      |    |    |    |      |               | <p>This account is in accordance with information received at the Pay &amp; Record Office to <u>12/9/17</u> and is therefore subject to amendment if, and as may be found necessary.</p> |                          |      |     |     |    |    |       |       |  |
|      | 17a           | Miscellaneous Stoppages                    |      |      |    |    |    |      |               |                                                                                                                                                                                          |                          |      |     |     |    |    |       |       |  |
|      | 19            | <del>Gratuity</del> Payments per P & R. O. |      |      | 45 | 0  | 0  |      |               |                                                                                                                                                                                          |                          |      |     |     |    |    |       |       |  |
|      | 20            | 1st Payment                                |      |      |    |    |    |      |               |                                                                                                                                                                                          |                          |      |     |     |    |    |       |       |  |
|      | 21            | 2nd "                                      |      |      |    |    |    |      |               |                                                                                                                                                                                          |                          |      |     |     |    |    |       |       |  |
|      | 22            | 3rd "                                      |      |      |    |    |    |      |               |                                                                                                                                                                                          |                          |      |     |     |    |    |       |       |  |
|      | 23            | Final "                                    |      |      |    |    |    |      |               |                                                                                                                                                                                          |                          |      |     |     |    |    |       |       |  |
|      | 24            | Balance Debit Last Period                  |      |      |    |    |    |      |               |                                                                                                                                                                                          |                          |      |     |     |    |    |       |       |  |
|      | 28            | " Due by Paymaster                         |      |      | 1  | 17 | 10 |      |               | 27                                                                                                                                                                                       | Balance Due to Paymaster |      |     |     |    |    |       |       |  |
|      |               |                                            |      |      | 58 | 17 | 0  |      |               |                                                                                                                                                                                          |                          |      |     |     | 58 | 17 | 0     |       |  |

CHECKED.  
*R.M.C.*  
12/9/17



191

CERTIFIED CORRECT.  
NEWFOUNDLAND CONTINGENT

*J.H.M. [Signature]*  
P.O. [Signature] & Co. Company.

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 272, L/C., Manuel, W

(Substituting A.F. J. 1825). N.F.P./36.

Company. From 9/6/17 To 13/9/17 (Dates inclusive).

Embarked per S.S. \_\_\_\_\_

DR.

Classification (See Procedure). A

From Liverpool Date 13/9/17

Draft No. 48 CR.

| Date | Pay Book Col. | PARTICULARS                        | Rate | Days | £  | s  | d  | Date | Pay Book Col. | PARTICULARS                      | Rate                     | Days | £   | s   | d  |    |       |       |
|------|---------------|------------------------------------|------|------|----|----|----|------|---------------|----------------------------------|--------------------------|------|-----|-----|----|----|-------|-------|
|      | 8             | Forfeited Pay                      |      |      |    |    |    |      | 1             | Pay                              | 1.05                     | 97   | 101 | 85  |    |    |       |       |
|      | 9             | Allotments                         | .60  | 97   | 58 | 20 |    |      | 2             | Field Allowance                  | .10                      | "    | 9   | 70  |    |    |       |       |
|      | 10            |                                    |      |      |    |    |    |      | 3             | Other " "                        |                          |      |     |     |    |    |       |       |
|      | 11/12         | Total Stoppages                    |      |      | 58 | 20 | 11 | 19   | 2             | 4/5                              | Total @ 4.86 2/3         |      |     | 111 | 55 | 22 | 18    | 4 1/2 |
|      | 13            | Fines                              |      |      |    |    |    |      | 6             | Balance Credit Last Period       |                          |      |     |     | 34 | 2  | 7 1/2 |       |
|      | 14            | Clothing & Necessaries             |      |      |    |    |    |      | 6a            | <u>OTHER CREDITS:</u>            |                          |      |     |     |    |    |       |       |
|      | 15            | Arms & Accoutrements               |      |      |    |    |    |      |               | Ration Allce, 27/ 8/17- 13/9 /17 |                          |      |     |     |    |    |       |       |
|      | 16            | Barrack Damages                    |      |      |    |    |    |      |               | = 18days @ 2/                    |                          |      |     |     | 1  | 16 | 0     |       |
|      | 17            | Hospital Stoppages                 |      |      |    |    |    |      |               |                                  |                          |      |     |     |    |    |       |       |
|      | 17a           | Miscellaneous Stoppages            |      |      |    |    |    |      |               |                                  |                          |      |     |     |    |    |       |       |
|      | 19            | <del>Gratuity</del> Payments per P |      |      |    |    |    |      |               |                                  |                          |      |     |     |    |    |       |       |
|      | 20            | 1st Payment                        |      |      |    |    |    |      |               |                                  |                          |      |     |     |    |    |       |       |
|      | 21            | 2nd "                              |      |      |    |    |    |      |               |                                  |                          |      |     |     |    |    |       |       |
|      | 22            | 3rd "                              |      |      |    |    |    |      |               |                                  |                          |      |     |     |    |    |       |       |
|      | 23            | Final "                            |      |      |    |    |    |      |               |                                  |                          |      |     |     |    |    |       |       |
|      | 24            | Balance Debit Last Period          |      |      |    |    |    |      |               |                                  |                          |      |     |     |    |    |       |       |
|      | 28            | " Due by Paymaster                 |      |      | 1  | 17 | 10 |      |               | 27                               | Balance Due to Paymaster |      |     |     |    |    |       |       |
|      |               |                                    |      |      | 58 | 17 | 0  |      |               |                                  |                          |      |     |     | 58 | 17 | 0     |       |

CHECKED.  
*R.M.C.*  
13/9/17



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CERTIFIED CORRECT.  
NEWFOUNDLAND CONTINGENT

*J. H. M. ...*  
Company.

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 272, L/O., Manuel, W

(Substituting A.F. J. 1325). N.F.P./39

Company. From 9/6/17 To 15/9/17 (Dates inclusive).

Embarked per S.S. \_\_\_\_\_ Date \_\_\_\_\_

DR.

Classification (See Procedure).

Draft No. Liverpool 15/9/17 CR.

| Date | Pay Book Col. | PARTICULARS               | Rate          | Days | £  | s  | d       | Date | Pay Book Col. | PARTICULARS                | Rate | Days | £   | s  | d       |
|------|---------------|---------------------------|---------------|------|----|----|---------|------|---------------|----------------------------|------|------|-----|----|---------|
|      | 8             | Forfeited Pay             |               |      |    |    |         |      | 1             | Pay                        |      |      |     |    |         |
|      | 9             | Allotments                | .60           | 97   | 58 | 20 |         |      | 2             | Field Allowance            | 1.05 | 97   | 101 | 85 |         |
|      | 10            |                           |               |      |    |    |         |      | 3             | Other " "                  | .10  | "    | 9   | 70 |         |
|      | 11/12         | Total Stoppages           |               |      | 58 | 23 | 11 19 2 |      | 4/5           | Total @ 4.86 2/3           |      |      | 111 | 55 | 22 18 4 |
|      | 13            | Fines                     |               |      |    |    |         |      | 6             | Balance Credit Last Period |      |      | 54  | 2  | 7 1/2   |
|      | 14            | Clothing & Necessaries    |               |      |    |    |         |      | 6a            | OTHER CREDITS:             |      |      |     |    |         |
|      | 15            | Arms & Accoutroments      |               |      |    |    |         |      |               | Ration Allice,             | 27   | 8    | 17  | 15 | 9 17    |
|      | 16            | Barrack Damages           |               |      |    |    |         |      |               | = 18 days @                |      |      |     |    |         |
|      | 17            | Hospital Stoppages        |               |      |    |    |         |      |               |                            |      |      |     |    |         |
|      | 17a           | Miscellaneous Stoppages   |               |      |    |    |         |      |               |                            |      |      |     |    |         |
|      | 19            | Casual Payments           |               |      |    |    |         |      |               |                            |      |      |     |    |         |
|      | 20            | 1st Payment               | per P & R. O. |      | 45 | 0  | 0       |      |               |                            |      |      |     |    |         |
|      | 21            | 2nd "                     |               |      |    |    |         |      |               |                            |      |      |     |    |         |
|      | 22            | 3rd "                     |               |      |    |    |         |      |               |                            |      |      |     |    |         |
|      | 23            | Final "                   |               |      |    |    |         |      |               |                            |      |      |     |    |         |
|      | 24            | Balance Debit Last Period |               |      |    |    |         |      |               |                            |      |      |     |    |         |
|      | 28            | " Due by Paymaster        |               |      | 1  | 17 | 10      |      | 27            | Balance Due to Paymaster   |      |      |     |    |         |
|      |               |                           |               |      | 58 | 17 | 0       |      |               |                            |      |      |     |    |         |

This account is in accordance with information received at the Pay & Record Office to 12/9/17 and is therefore subject to amendment if, and as may be found necessary.

*R.M.C.*  
*12/9/17*

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NEWFOUNDLAND CONTINGENT  
35 VICTORIA ST.  
LONDON, S.W.  
12 SEP 1917  
PAY & RECORD OFFICE

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Posted 20 SEP 1917

CERTIFIED CORRECT.  
NEWFOUNDLAND CONTINGENT.

*J. H. M. Ambrose*  
PAYMASTER & OFFICER IN CHARGE

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 272, L/O., Mammal, W  
 Company. From 9/6/17 To 13/9/17 (Dates inclusive).  
 DR. Classification (See Procedure).

(Substituting A.F. J. 1325). N.F.P./33  
 Embarked per S.S. \_\_\_\_\_  
 From Liverpool Date 13/9/17  
 Draft No. \_\_\_\_\_ CR.

| Date  | Pay Book Col. | PARTICULARS               | Rate | Days | £  | s  | d  | Date | Pay Book Col. | PARTICULARS                                                                                                                                                            | Rate             | Days   | £   | s   | d  |    |    |       |  |  |  |  |  |
|-------|---------------|---------------------------|------|------|----|----|----|------|---------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------|-----|-----|----|----|----|-------|--|--|--|--|--|
|       | 8             | Forfeited Pay             |      |      |    |    |    |      | 1             | Pay                                                                                                                                                                    |                  |        |     |     |    |    |    |       |  |  |  |  |  |
|       | 9             | Allotments                | .60  | 97   | 58 | 20 |    |      | 2             | Field Allowance                                                                                                                                                        | 1.05             | 97     | 101 | 85  |    |    |    |       |  |  |  |  |  |
|       | 10            |                           |      |      |    |    |    |      | 3             | Other " "                                                                                                                                                              | .10              | "      | 9   | 70  |    |    |    |       |  |  |  |  |  |
| 11/12 |               | Total Stoppages           |      |      | 58 | 20 | 11 | 19   | 2             | 4/5                                                                                                                                                                    | Total @ 4.86 2/3 |        |     | 111 | 55 | 22 | 18 | 4 1/2 |  |  |  |  |  |
| 13    |               | Fines                     |      |      |    |    |    |      | 6             | Balance Credit Last Period                                                                                                                                             |                  |        |     |     |    | 54 | 2  | 7 1/2 |  |  |  |  |  |
| 14    |               | Clothing & Necessaries    |      |      |    |    |    |      | 6a            | OTHER CREDITS:                                                                                                                                                         |                  |        |     |     |    |    |    |       |  |  |  |  |  |
| 15    |               | Arms & Accoutrements      |      |      |    |    |    |      |               | Ration Allce,                                                                                                                                                          | 27               | 8      | 17  | 15  | 9  | 17 |    |       |  |  |  |  |  |
| 16    |               | Barrack Damages           |      |      |    |    |    |      |               | =                                                                                                                                                                      | 18               | days @ | 2   |     |    | 1  | 16 | 0     |  |  |  |  |  |
| 17    |               | Hospital Stoppages        |      |      |    |    |    |      |               | This account is in accordance with information received at the Pay & Record Office to 12/9/17 and is therefore subject to amendment if, and as may be found necessary. |                  |        |     |     |    |    |    |       |  |  |  |  |  |
| 17a   |               | Miscellaneous Stoppages   |      |      |    |    |    |      |               |                                                                                                                                                                        |                  |        |     |     |    |    |    |       |  |  |  |  |  |
| 19    |               | Casual Payments           |      |      | 45 | 0  | 0  |      |               |                                                                                                                                                                        |                  |        |     |     |    |    |    |       |  |  |  |  |  |
| 20    |               | 1st Payment               |      |      |    |    |    |      |               |                                                                                                                                                                        |                  |        |     |     |    |    |    |       |  |  |  |  |  |
| 21    |               | 2nd "                     |      |      |    |    |    |      |               |                                                                                                                                                                        |                  |        |     |     |    |    |    |       |  |  |  |  |  |
| 22    |               | 3rd "                     |      |      |    |    |    |      |               |                                                                                                                                                                        |                  |        |     |     |    |    |    |       |  |  |  |  |  |
| 23    |               | Final "                   |      |      |    |    |    |      |               |                                                                                                                                                                        |                  |        |     |     |    |    |    |       |  |  |  |  |  |
| 24    |               | Balance Debit Last Period |      |      |    |    |    |      |               |                                                                                                                                                                        |                  |        |     |     |    |    |    |       |  |  |  |  |  |
| 28    |               | " Due by Paymaster        |      |      | 1  | 17 | 10 |      | 27            | Balance Due to Paymaster                                                                                                                                               |                  |        |     |     |    |    |    |       |  |  |  |  |  |

*RMA*  
 12/9/17  
 NEWFOUNDLAND CONTINGENT  
 VICTORIA ST.  
 LONDON, S.W.  
 2 SEP 1917  
 PAY & RECORD OFFICE  
 191

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 NEWFOUNDLAND CONTINGENT.  
*J.H. Mammal*  
 PAYMASTER & OFFICER IN CHARGE  
 O.S. " " Company.

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 272, L/O., Manuel, W  
 Company. From 9/6/17 To 15/9/17 (Dates inclusive).  
 DR. Classification (See Procedure).

(Substituting A.F. J. 1925). N.F.P./33.  
 Embarked per S.S. \_\_\_\_\_  
 From Liverpool Date 15/9/17  
 Draft No. \_\_\_\_\_ CR.

| Date | Pay Book Col. | PARTICULARS               | Rate          | Days | \$ | ¢  | £  | s  | d  | Date | Pay Book Col. | PARTICULARS                | Rate | Days   | \$  | ¢  | £  | s  | d     |   |
|------|---------------|---------------------------|---------------|------|----|----|----|----|----|------|---------------|----------------------------|------|--------|-----|----|----|----|-------|---|
|      | 8             | Forfeited Pay             |               |      |    |    |    |    |    |      | 1             | Pay                        |      |        |     |    |    |    |       |   |
|      | 9             | Allotments                | .60           | 97   | 58 | 20 |    |    |    |      | 2             | Field Allowance            | 1.05 | 97     | 101 | 85 |    |    |       |   |
|      | 10            |                           |               |      |    |    |    |    |    |      | 3             | Other " "                  | .10  | "      | 9   | 70 |    |    |       |   |
|      | 11/12         | Total Stoppages           |               |      | 58 | 20 | 11 | 19 | 2  |      | 4/5           | Total @ 4.86 2/3           |      |        | 111 | 55 | 22 | 18 | 4 1/2 |   |
|      | 13            | Fines                     |               |      |    |    |    |    |    |      | 6             | Balance Credit Last Period |      |        |     |    | 34 | 2  | 7 1/2 |   |
|      | 14            | Clothing & Necessaries    |               |      |    |    |    |    |    |      | 6a            | OTHER CREDITS:             |      |        |     |    |    |    |       |   |
|      | 15            | Arms & Accoutrements      |               |      |    |    |    |    |    |      |               | Ration Allice,             | 27   | 8      | 17  | 15 | 9  | 17 |       |   |
|      | 16            | Barrack Damages           |               |      |    |    |    |    |    |      |               | =                          | 18   | days @ | 2   |    |    | 1  | 16    | 0 |
|      | 17            | Hospital Stoppages        |               |      |    |    |    |    |    |      |               |                            |      |        |     |    |    |    |       |   |
|      | 17a           | Miscellaneous Stoppages   |               |      |    |    |    |    |    |      |               |                            |      |        |     |    |    |    |       |   |
|      | 19            | Casual Payments           |               |      |    |    | 45 | 0  | 0  |      |               |                            |      |        |     |    |    |    |       |   |
|      | 20            | 1st Payment               | per P & R. O. |      |    |    |    |    |    |      |               |                            |      |        |     |    |    |    |       |   |
|      | 21            | 2nd "                     |               |      |    |    |    |    |    |      |               |                            |      |        |     |    |    |    |       |   |
|      | 22            | 3rd "                     |               |      |    |    |    |    |    |      |               |                            |      |        |     |    |    |    |       |   |
|      | 23            | Final "                   |               |      |    |    |    |    |    |      |               |                            |      |        |     |    |    |    |       |   |
|      | 24            | Balance Debit Last Period |               |      |    |    |    |    |    |      |               |                            |      |        |     |    |    |    |       |   |
|      | 28            | " Due by Paymaster        |               |      |    |    | 1  | 17 | 10 |      | 27            | Balance Due to Paymaster   |      |        |     |    |    |    |       |   |

This account is in accordance with information received at the Pay & Record Office to 12/9/17 and is therefore subject to amendment if, and as may be found necessary.

58 17 0

R.M.G.  
12/9/17



191

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CERTIFIED CORRECT.  
 NEWFOUNDLAND CONTINGENT.

*J. H. M. ...*  
 PAYMASTER & OFFICER IN CHARGE

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 272, L/O., Manuel, W  
 Company. From 9/6/17 To 15/9/17 (Dates inclusive).  
 DR. Classification (See Procedure).

(Substituting A.F. J. 1525). N.F.P./33  
 Embarked per S.S. \_\_\_\_\_  
 From Liverpool Date 15/9/17  
 Draft No. \_\_\_\_\_ CR.

| Date  | Pay Book Col. | PARTICULARS               | Rate          | Days | £  | s  | d       | Date | Pay Book Col. | PARTICULARS                | Rate | Days | £   | s  | d           |  |
|-------|---------------|---------------------------|---------------|------|----|----|---------|------|---------------|----------------------------|------|------|-----|----|-------------|--|
|       | 8             | Forfeited Pay             |               |      |    |    |         |      | 1             | Pay                        |      |      |     |    |             |  |
|       | 9             | Allotments                | .60           | 97   | 58 | 20 |         |      | 2             | Field Allowance            | 1.05 | 97   | 101 | 85 |             |  |
|       | 10            |                           |               |      |    |    |         |      | 3             | Other " "                  | .10  | "    | 9   | 70 |             |  |
| 11/12 |               | Total Stoppages           |               |      | 58 | 20 | 11 19 2 |      | 4/5           | Total @ 4.86 2/3           |      |      | 111 | 55 | 22 18 4 1/2 |  |
| 13    |               | Fines                     |               |      |    |    |         |      | 6             | Balance Credit Last Period |      |      |     | 54 | 2 7 1/2     |  |
| 14    |               | Clothing & Necessaries    |               |      |    |    |         |      | 6a            | OTHER CREDITS:             |      |      |     |    |             |  |
| 15    |               | Arms & Accoutrements      |               |      |    |    |         |      |               | Ration Allowance,          |      |      |     |    |             |  |
| 16    |               | Barrack Damages           |               |      |    |    |         |      |               | 27 / 8 17 13 9 17          |      |      |     |    |             |  |
| 17    |               | Hospital Stoppages        |               |      |    |    |         |      |               | = 18 days @ 2 /            |      |      |     | 1  | 16 0        |  |
| 17a   |               | Miscellaneous Stoppages   |               |      |    |    |         |      |               |                            |      |      |     |    |             |  |
| 19    |               | Casual Payments           |               |      |    |    |         |      |               |                            |      |      |     |    |             |  |
| 20    |               | 1st Payment               | per P & R. O. |      |    |    | 45      |      |               |                            |      |      |     |    |             |  |
| 21    |               | 2nd "                     |               |      |    |    |         |      |               |                            |      |      |     |    |             |  |
| 22    |               | 3rd "                     |               |      |    |    |         |      |               |                            |      |      |     |    |             |  |
| 23    |               | Final "                   |               |      |    |    |         |      |               |                            |      |      |     |    |             |  |
| 24    |               | Balance Debit Last Period |               |      |    |    |         |      |               |                            |      |      |     |    |             |  |
| 28    |               | " Due by Paymaster        |               |      |    |    |         |      |               | Balance Due to Paymaster   |      |      |     |    |             |  |
|       |               |                           |               |      |    |    |         |      |               |                            |      |      |     |    | 58 17 0     |  |

DUPLICATE MAIL COPY  
 Posted 20 SEP 1917

CERTIFIED CORRECT.  
 NEWFOUNDLAND CONTINGENT.  
 J.H. Manuel  
 PAYMASTER & OFFICER IN CHARGE  
 O.C. " " Company.



R.M.A.  
 12/9/17

191

**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 Commissioners of Chislea Hospital. The form should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and the soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his signing 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, to be completed by the Officer in Charge when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Chislea Hospital, Chislea, London, S.W.

Changes occurring in the description subsequent to the date of admission to pension should be noted in the margin.

**CERTIFICATE COPY**



**A Name in full** *Manuel Willis*  
**Regiment from which discharged** *1st Newfoundland*  
**Regimental Number** *272*  
**Where born (Parish, Town and County), and when** \_\_\_\_\_  
**Intended address** *S Clifton Place Stow Hill Newport Mon.*  
**Height on discharge** *5* Feet *10* Inches  
**Colour of Hair on discharge** *Black* **Colour of Eyes** *brown*  
**Descriptive marks** \_\_\_\_\_ **Complexion** \_\_\_\_\_  
**Figure on discharge** *Slight*  
**Christian name of Father** *Thomas*  
**Christian name of Mother** *Jane*  
**Wife's Maiden name in full** \_\_\_\_\_  
**Date and Place of Marriage** \_\_\_\_\_  
**Christian names of Children** \_\_\_\_\_  
**Nature and locality of civil employment desired** \_\_\_\_\_

*NEWPORT SECTION  
 3rd WESTERN  
 GENERAL HOSPITAL  
 J. Wilson*

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) *Manuel Willis* (Rank) *L. Col.*  
 Station *Portsmouth* Date *23.6.17*

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.

*John A. Hospital* *John A. Alexander* Medical Officer i/c Hospital.  
 Station *Portsmouth* Date *June 23/17*

| B Period of Service and in what Corps ...   | Regiment                                   | Years | Days | All Service Abroad with Stations | Years | Days |
|---------------------------------------------|--------------------------------------------|-------|------|----------------------------------|-------|------|
|                                             |                                            |       |      |                                  | India |      |
|                                             |                                            |       |      | S. Africa                        |       |      |
| Disallowed ... ..                           |                                            |       |      |                                  |       |      |
| Service towards Pension ... ..              |                                            |       |      |                                  |       |      |
| Date inclusive to which pay has been issued | Sum due on account of advance of pension ) |       |      |                                  |       |      |
| Sums due on account of public debts ...     |                                            |       |      |                                  |       |      |

**Rank on Discharge** \_\_\_\_\_  
**Character (as on Certificate of discharge)** \_\_\_\_\_  
**Where born, and on what date** \_\_\_\_\_  
**Date and Place of first Enlistment** \_\_\_\_\_  
**Trade on Enlistment** \_\_\_\_\_  
**Cause of Discharge** \_\_\_\_\_  
**Number of G.C. Badges** \_\_\_\_\_ **Medals** \_\_\_\_\_  
**Wounds, and Actions in which received** \_\_\_\_\_

**Other distinguishing marks** \_\_\_\_\_

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

Station \_\_\_\_\_ Officer in Charge \_\_\_\_\_  
 Date \_\_\_\_\_ Records. \_\_\_\_\_

Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man **of the General Service.**



No. 272

Name (surname first) Manuel Willis

Regiment 1st Newfoundland

1. State what special qualifications you have for employment in civil life.

*Nil*

2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed?

*J. J. Manuel Co. Millwright  
7 years*

3. What is the nature and locality of the employment you desire?

*Millwright Newfoundland*

4. What is the name of your Approved Society?

*San Life*

5. Have you been employed whilst with the Colours? If so, in what capacity?

*No.*

Date 23. 6. 17.

Signature Manuel Willis

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 4 (ii), item 3, of Army Council Instruction No. .... of 1916.

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.



H.P.P./54  
No.417.

From Pay & Record Office,  
London.

To Minister of Militia,  
St. John's, Nfld.

#272 Pte.W.Manuel

Overcredited Ration Allowance as per Claim 156.4s.6d.



This space to be left blank  
for the Certificate Number.

# Proceedings on Discharge.



(When forwarded for confirmation the documents named on page 4 should be enclosed.)

|                                                                                                                                                                                                                                                                                              |                                                                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| No. <u>272</u>                                                                                                                                                                                                                                                                               | Army Rank <u>Leads Corporal</u>                                 |
| Name <u>Manuel Willis</u><br>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)                                                                                                                                                               |                                                                 |
| Corps <u>1<sup>st</sup> Newfoundland Regiment</u>                                                                                                                                                                                                                                            |                                                                 |
| Battalion, Battery, Company, Depot, &c.<br>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)                                                                      |                                                                 |
| Date of discharge <u>February 16<sup>th</sup> 1918.</u>                                                                                                                                                                                                                                      |                                                                 |
| Place of discharge <u>St. John's, Nfld</u>                                                                                                                                                                                                                                                   |                                                                 |
| 1. Description at the time of discharge.                                                                                                                                                                                                                                                     |                                                                 |
| Age <u>30</u> years _____ months                                                                                                                                                                                                                                                             | Descriptive marks.<br><u>Wound scars on back &amp; left arm</u> |
| Height <u>5</u> feet <u>10</u> inches                                                                                                                                                                                                                                                        |                                                                 |
| Chest measurement { girth when fully expanded _____ ins.<br>range of expansion _____ ins.                                                                                                                                                                                                    |                                                                 |
| Complexion _____                                                                                                                                                                                                                                                                             |                                                                 |
| Eyes <u>Brown</u>                                                                                                                                                                                                                                                                            |                                                                 |
| Hair <u>Black</u>                                                                                                                                                                                                                                                                            |                                                                 |
| Trade <u>Millwright</u>                                                                                                                                                                                                                                                                      |                                                                 |
| Intended place of residence _____<br>(To be given as fully as practicable)                                                                                                                                                                                                                   |                                                                 |
| (The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.) |                                                                 |
| 2. The above-named man is discharged in consequence of <u>Wounds received in Action.</u>                                                                                                                                                                                                     |                                                                 |
| (The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)                                                                   |                                                                 |
| 3. Military character:—                                                                                                                                                                                                                                                                      |                                                                 |
| 4. Character awarded in accordance with King's Regulations:—                                                                                                                                                                                                                                 |                                                                 |
| Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.                                                                                                                                          |                                                                 |
| Initials of Commanding Officer.                                                                                                                                                                                                                                                              |                                                                 |
| Army Form B. 2088 has been issued to*                                                                                                                                                                                                                                                        |                                                                 |

To be filled in on the soldier quitting the Colours.

April 3rd., 1919

#272 Bt Corp. Willis Manuel,

Loon Bay,

Via Lewisporte.

Dear Sir:-

Referring to your application I enclose cheque for  
Seventy dollars (\$70.00), being amount of first payment due  
you on account of the "War Service Gratuity."

Yours truly

Captain,  
Paymaster & O.i/c Records

7.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

10960

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 question are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

- 1. Christian name..... *Willis*..... 2. Surname..... *Manuel*.....
- 3. Rank..... *Lance*..... *b.p.l.*..... 4. Regtl. No..... *242*.....
- 5. Address in full to which future payments of gratuity are to be forwarded..... *Loon Bay, via Lewisporte*.....  
..... *St. J. Nfld.*.....
- 6. Date of enlistment in the Regiment..... *Sept. 4<sup>th</sup> 1914*.....
- 7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....  
..... *Mrs. A. Manuel (Wife)*.....
- 8. Relationship of such dependents..... *Wife*.....
- 9. Address in full of such dependent..... *Loon Bay, via Lewisporte*.....  
..... *Newfoundland*.....
- 10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *no*.....
- 11. Were you on active service only in Nfld. if so, give dates, and particulars of such service.....  
..... *Served over seas*.....
- 12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *September 4<sup>th</sup> 1914 to February 16<sup>th</sup> 1918*.....

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

..... *One enlistment only* .....

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.....

..... *I have received no Post Discharge pay or War Service Gratuity* .....

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

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

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

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

(b). If so, was such reversion in consequence of misconduct or inefficiency?..... *not applicable* .....

19. Are you now serving in the Regt. *Discharged*. If not give:- (a) Date of discharge... *February 16<sup>th</sup> 1918*. (b) Reason for discharge. *as unfit*.....

..... *on account of wounds* .....

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. *Yes*.....

..... *..... Iwola. Trar. & Cape Helles. <sup>how to form.</sup> 1915. 1916. Somme. <sup>April</sup> Battles. May to July 1918.....* .....

21. (a) Are you receiving treatment from the Civil Re-Establishment Com.?

(b). If (a), are you in receipt of full pay and allowances from that Committee..... *no* .....

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

Signature of Applicant: *Willis Manuel*

Place of Residence: *Loon Bay Via Leriesport*

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

This *28<sup>th</sup>* day of *April* 19*17*

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

*Alfred G. Young J.P.*

POST DISCHARGE PAY.

| Date paid | Paid<br>Soldier | Paid<br>Dependent | War Service<br>Gratuity | Net amount<br>due |
|-----------|-----------------|-------------------|-------------------------|-------------------|
| .....     | .....           | .....             | <i>6.00</i>             | <i>600.00</i>     |
| .....     | .....           | .....             | .....                   | .....             |
| .....     | .....           | .....             | .....                   | .....             |

Certified Correct.

Proxaster.

RECEIVED FOR THE  
POST OFFICE

6708

Loon Bay  
Sept - 20/19

S. S. Crawford.  
Lieut. - Paymaster.

Dear Sir:-

Re your answer to my  
Communication of Sept. 13<sup>th</sup>. I think  
there must be some slight  
misunderstanding as I have  
received the amount of gratuity  
money due to me, to help in  
St John's on Sept. 2. I called  
and received the balance due  
to me but was informed that  
the balance due for the wife's  
allowance should be forwarded.  
As I have not received it,  
is there not more due to her  
I shall be glad if a 10<sup>th</sup> 11

Yours respectfully  
Walter Mackay  
272 L. Col.



6508

Loon Bay  
via Lewisporte.

Sept 13<sup>d</sup> 19.

Secretary.

War Gratuity Dept.  
Military Buildings  
St John's.

Sir.

My husband tells me that I should receive  
Gratuity money for July, and August. which have  
not reached me yet; also I did not receive any  
for March month. I am writing in case the  
cheques are delayed in transit.

Yours respectfully,

Mrs Willie's Manual.

Not Entitled To one for August

Alroy

5902

272  
Sept. 20, 1919

Willis Manuel,  
Leon Bay.

Dear Sir:

With reference to your letter of 13/9/19 (6506), your services in the Royal Newfoundland Regiment entitles you to five month's gratuity only, subsequently the reason for not receiving your 6th. instalment, please.

Yours truly,

Lieut.  
For Paymaster



November 19th, 1917.

L/C. W. Manuel,  
Loon Bay, N.D.B.

Dear Sir,-

I enclose herewith cheque for \$41.20, being  
the balance of pay due you to 31st October, 1917.

Yours faithfully,

Capt. & Paymaster

October 9th, 7

L/Cpl. W. Manuel,  
Loon Bay, N.D.B.

Dear Sir,-

I enclose herewith cheque for \$10.00  
as Pay on account.

Yours truly,

Lieut.  
D/Paymaster

Long Bay  
Vice Commissary  
March 17/19

Sir

I understand that I am entitled  
to travel money also a balance  
on clothes I had my discharge  
Jan 18/8 & received \$25.00 several of  
the boys here discharges since then  
tell me that they received other  
money as this has been loaded  
yours respectfully  
Willis Mameel  
Board 419

April 31, 1919

No. 272, L/Corp. W. Manuel,  
Leon Bay, via Lewisporte.

being balance due you I enclose herewith cheque for \$20.00  
on account of Clothing Allowance.



Capt.  
Paymaster.

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$41<sup>20</sup>/<sub>100</sub>

Nov 13<sup>th</sup> 1917

Received from the First Newfoundland Regiment  
the sum of Forty One Dollars.  
on account of Pay to 31/10/17  
balance

|                  |               |
|------------------|---------------|
| Ch. No. 1197     | Initials C.W. |
| Pay Ledger 43    | Initials R.C. |
| Gen. Ledger R.P. | Initials N.S. |

Regtl. No. Rank

*(Handwritten signature)*



No. 272 Rank L/C.

Name A. Manuel

Loone Bay

W.D.B.

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$10<sup>00</sup>/<sub>100</sub>

Oct. 3<sup>rd</sup> 1917

Received from the First Newfoundland Regiment  
the sum of Ten <sup>00</sup>/<sub>100</sub> Dollars.  
on account of Pay.  
~~balance~~

Wh. Mailed Oct 9<sup>th</sup> 1917.

|                 |                  |
|-----------------|------------------|
| Ch. No. 179     | Initials. C.C.O. |
| Pay Ledger 243  | Initials. C.C.O. |
| Gen. Ledger 168 | Initials. J.H.S. |

Regtl. No. 272 Rank 2/B

C

No. 272

Rank L. / Cpl.

Name M. Manuel

Loone Bay N.B.



No. 272

Rank *Lt Col*

Name

*Manuel W*

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

June 15th., 1921. 1917.

The accompanying King's Certificate, on his discharge,

(No. 154), is forwarded herewith to

Lance Corporal Willis Manuel

in respect of his service as No. 272 Rank L/Cpl.

Name Willis Manuel Corps Royal Nfld. Regt

Receipt of the same should be acknowledged hereon.

Received Certificate.

Signature Willis Manuel

Date July 2nd 1921. H.S.J.

Address Patric's building

Bay of Islands  
P.T.O.

1501



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.

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

Willie Manuel

in respect of his service as No. 272 Rank Pte.

Name W. Manuel

Royal Nfld. Regt.  
Nfld. Forestry Corps

Receipt of the same should be acknowledged hereon.

Received Victory & British War Medals.

Signature Willie Manuel.

Date Oct 28<sup>th</sup> 1921.

Address Bealing, Bay of Islands.

[P.T.O.]

m. P.

C.R.

272

RECEIPT.

I hereby certify that I have received the 1914-1915  
STAR.

No 272. Name Ex 2 Sgt Willie Manuel

Witness W. Manuel.

Date Apr 9<sup>th</sup> 1920.

Place Guadalupe, Bay of Islands.

C.R. 272

RECEIPT FOR ISSUE OF  
RIBAND OF BRITISH WAR MEDAL 1914-1919

---

I certify that I have received a issue of 8 inches  
of Riband of British War Medal-1914-1919.

Name .....

(Date) ... *Nov. 17. 1919.*

(Place) ... *Willis Manuel.*

*Burling  
Bay of Islands.*

C.R. 272

RECEIPT FOR ISSUE OF  
RIBAND OF 1914-15 STAR.

---

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

272 Name .. *Uphill's Manuel* ..

Date. *April 8<sup>th</sup> 1919* ..

Place. *Loon Bay* ..

Please sign, and return to Dept. of Militia.

CIRCULAR LETTER

C.R. 272

St. John's,

March 15th 1919.

Riband of 1914-15 Star.

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

*W. J. Readell*  
Lieut. Colonel.

Chief Staff Officer.

CLAIM FOR ISSUE OF RIBAND  
of 1914-15 STAR.

Department of Militia,  
St. John's.

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

I certify that I am entitled to this issue, having served on\* *Suvla Bay & Cape Helles.*  
from *Nov 20<sup>th</sup>* 1915 to *Jan 10<sup>th</sup>* 1916.  
(Date) *25. 3. 19* (NO) *242*... (Rank) *L. Col.* (Name) *William Readell*.  
(Place) *Suvla Bay, via Lemnos.*

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

*Riband posted March 31/19*

July 8, 1918

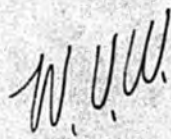
Mrs. Jane Manuel,  
Loon Bay, N.D.B.

Dear Madam:-

I am writing to inform you that I am forwarding by "Express" one Kit Bag, which belongs to your son #272 L/Cpl. Willis Manuel of The Royal Newfoundland Regiment.

Enclosed you will find, receipt, will you kindly sign same and return at your earliest convenience.

Yours faithfully,

  
Lieut  
for Lieut. Col. G.S.O.

Enc'l 1.

No. of Paper 1073**PERSONAL EFFECTS.**Name Manuel W. No. 273.Rank 4 Cpl Regiment THE ROYAL NEWFOUNDLAND REGT.

| Article           | Where stored   | Notified by               |
|-------------------|----------------|---------------------------|
| <u>1 K.B. Bag</u> |                |                           |
|                   | Final disposal |                           |
|                   |                | <b>Shipped from Depot</b> |

Remarks: Casualty Advice: Repatriated.Next of Kin: Mother: Mrs Jane ManuelLoon Bay N.S.

PERSONAL EFFECTS

Received from Militia Department.

One Kit Bag #272 L/Cpl. Willis Manuel.

Signed.....*Mrs. Gene Manuel*

Date.....*July 22<sup>th</sup>*



June 4, 1918

Dear Mrs. Manuel:-

In answer to your letter of the 29th May, I am forwarding by Express to-day 1 Kit Bag the property of your son 1272 Pts. W. Manuel. Trusting that you will receive same in good condition,

I am,

Yours faithfully,

Mrs. Jane Manuel,

Leen Bay,

Campbellton.

W. V. Warren

Lieut.

C.R. 272'

Soon Bay  
May 25/18

Department of Militia  
St. John's

Dear Sir:

Please forward on  
Kit-Bag No 272 property of  
plet W. & Manuel to Campbellton  
Fort St. John's Bay.

Yours faithfully  
Geo. Lane Manuel

May 18, 1918.

Dear Madam:-

One Kit Bag the property of your son No. 272 Pte. Manuel of The Royal Newfoundland Regiment is laying at this office, would you kindly advise him to call for same, or instruct us where to send it.

Yours faithfully,

Captain.

Mrs Jane Manuel,

Loon Bay,

via Campbellton.

C.R. 272

Extract of Daily Orders part 11, from Unit The Royal  
Newfoundland Regiment, Headquarters, St. John's.  
dated February 22<sup>nd</sup> 1918.

#272 L/Cpl.. W. Mamel. .

Having been found Medically Unfit is discharged with  
effect from 16/2/18.

C.R. 272

Extract from list of men of the Royal Newfoundland Regiment

discharged on various dates.

272 L/C W. Mamel,

Discharged Feb. 16th 1918, Medically unfit

C.R. 272

Extract from Roll of Officers N.C.O's and Men Discharged from  
The Royal Nfld.Regt.,

| Regtl.No. | Rank.  | Name.     | Date.      | Reason.    |
|-----------|--------|-----------|------------|------------|
| 272       | L/Cpl. | Manuel W. | Feb.16/18. | Med.unfit. |

R. 222

EXTRACT OF CASUALTY

1ST BATTALION

Received from Pay & Record Office, London

Dated May 18th, 1917

272 L/C W. MANUAL

Reported by Sgt. Janes, 3rd Wchelon, Rouen, to be with  
1st Battalion and is cleared from Casualty List

February 22nd. 1918.

The O. C.  
Royal Newfoundland Regiment,  
Headquarters.

Sir,-

The undermentioned man have been  
discharged on the dates given.

Kindly note and post in Daily orders

Part 11.

I have the honour to be,

Sir

Your obedient Servant.

Signed. J. B. Howley,

Captain & Paymaster & Officer&

i/c Records.

JMH/JH.

|                   |                 |                             |
|-------------------|-----------------|-----------------------------|
| No. 492 Private.  | Coombs, Arch'd. | Feb. 14th. 1918 Med. Unfit  |
| No. 2876 Private. | Pike, R. T.     | Feb. 14th. 1918. Med. Unfit |
| No. 272 1/Cpl.    | Manuel, Willis. | Feb. 16th. 1918 Med. Unfit. |
| No. 1898 Private. | Boone, Z. W.    | Feb. 16th. 1918 Med Unfit.  |
| No. 1716 Private. | Hardiman, C.    | Feb. 14th. 1918. Med. Unfit |



5272

FEBRUARY 09.

8.

From Adjutant,  
Depot.

To Paymaster and Officer i/c Records,  
Department of Militia.

- 1895 Pte. H. Beane.
- 492 Pte. E. Brown.
- 1718 Pte. C. Harrison.
- 374 i/cpl. T. Marshall.
- 1876 Pte. H. Pike.
- 1607 Pte. E. Tucker.

Kindly noted men have been recommended for discharge as permanently unfit by Medical Boards held at various times and as far as our records show have not yet been discharged. They are not employed on any duty in connection with depot. Will you please look them up and if discharged please advise me so that I can put them through Part II Orders. Tucker has been discharged some time so I am told, but this office has no record of same, consequently is still carried on Regimental strength.

APPROVED AND FORWARDED:  
 \_\_\_\_\_  
 ADJUTANT GENERAL

C.R.

272

Extract from Daily Orders Part 11 Unit The Royal Nfld.  
Regt., St. John's, Sept. 29th, 1917.

The following man returned from Overseas and ~~reported~~  
is attached to H.Q'S from Sept. 28th, 1917.

272 L/C. W. Manuel.

C.R. 272

No. 117.

Government House,

St. John's, Nfld.

10 October 1916.

Sir,

I have received a request from the friends of No. 273 Corporal Willis Manuel, now in 3rd Western General Hospital, Wales, that he be granted furlough in order to visit his mother and family.

He was wounded on July 1st.

Please deal with this application as in previous cases requesting furlough.

I have the honour to be,

Sir,

Your obedient servant,

Capt. H.A. Timewell.

Governor.

ackn. -  
Usual letter 5/10/16  
Coon Bay,  
bc

5/10 October 3/16

His Excellency  
Sir W. H. Davidson

C.R. 272

St John's

Your Excellency;

Corporal Willis Manuel, 272  
First Newfoundland Regiment; wounded  
on July 1st, now in 37 Western General  
Hospital, Wales. His friends are  
very anxious that he should be  
allowed furlough in order to visit  
his mother and family.

Can you kindly arrange this,  
and would you be kind enough  
to stiff me - his sister - as to  
the possibilities of such furlough  
being effected.

Thanking you in advance,  
Your Excellency's servant,  
Ethel A. Manuel.

G.

3rd October, 1916.

Dear Madam,

I am in receipt of your letter of the 5th ultimo, regarding the condition of your brother who was last reported to be in Hospital. Should any news be received of him I shall at once forward the same. You may rest assured, however, that he is being well taken care of and that no news is good news. If his condition became serious or dangerous, notification of this would be sent to us and forwarded to you.

Yours truly,

Colonial Secretary.

Miss Ethel Manuel,  
Loon Bay, N.D.B.

(82)  
Loose Bay  
U. S. Bay  
Sept 5. 16

Gen. J. R. Bennett.

St. John's

Dear Sir

We have been indirectly informed that you kindly make inquiries for friends, who have been in the Army.

My brother, 272 Willis  
Mannell L.C. was wounded  
July 1st & reported to be in  
hospital at Newport Wales

Since then we have ~~not~~ not  
heard from him. Consequently  
we are very anxious.

If possible, will you kindly  
let us know if any information  
can be obtained.

Very respectfully yours  
(Miss) Ethel Mannell

C.R. 272

Extract of Casualty List received from B.&.R.O.  
August 24th, 1916.

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

272, L. Cpl. W. Manuel. ✓

WOUNDED

C.R. 272

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

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

#272 L/Cpl. W. Manuel. ✓

Sounded in Action 1/7/16.



C.R. 272

P.&R.O.

Extract of casualties received from/London, dated  
July 27, 1916.

In answer to an enquiry to the 3rd Western General  
Hospital, Cardiff.

#272 L/Cpl. W. Manuel. ✓

is stated to be suffering from Gunshot wound back and  
left ~~arm~~ arm.

# 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 Frederick M. Stirling Address \_\_\_\_\_

|                   |           |                                 |            |          |             |
|-------------------|-----------|---------------------------------|------------|----------|-------------|
| Line Number _____ | Rcd _____ | By <u>Frederick M. Stirling</u> | Sent _____ | by _____ | Check _____ |
|-------------------|-----------|---------------------------------|------------|----------|-------------|

Dated 27th July, 1916.  
To Mrs. Jane Manuel,  
Loon Bay, N.D.B.

Regret to inform you that Record Office First Newfoundland Regiment reports No. 272 Lance Corporal Willis Manuel at Third Western General Hospital Cardiff Gunshot Wound Back and Arm.

J.R.BENNETT,  
Colonial Secretary.

C.R. 272

Extract of Casualty List received from P.& R.O.  
July 25th. 1916.

272, L/C. W. Manuel.

Admitted to the 3rd Western General Hospital Cardiff  
7th July 1916.

Note:-

After much effort these admissions were secured from  
the M.O. i/c ~~Remains~~ Hospital. Even now it is not stated  
the what they are suffering from. Further enquiries are being  
made.----- H.A.A.

C.R.

272

Extract from Nominal Roll, 1st Draft to M.S.F. received  
from Governor July 8, 1916

#272 L/Cpl. W. Mamel.

JUN 16 1916

*Dear* **Madam,**

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

**No. 272, Lance Corporal W. Manuel, is now reported with the First Battalion and is removed from Casualty Lists.**

**This information has been received by mail.**

*Yours faithfully,*

*Colonial Secretary.*

**Mrs. Jane Manuel,  
Loon Bay, N.D.B.**

MAY 31 1916

Dear Madam,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 272, Lance-Corp. W. Manuel, who was previously reported sick at Suez on March 3rd, was discharged to Mustapha Camp, Alexandria, March 31st.

This information has been received by mail.

Yours faithfully,

Colonial Secretary.

Mrs. Jane Manuel,  
Loon Bay, N.D.B.

SICK AND WOUNDED N.C.O's AND MEN OF THE EXPEDITIONARY FORCE - EGYPT.

HOUNSLOW RECORD OFFICE.

15414 Cpl. Osborne, H. 2nd Roy. Fus. Pneumonia. . . . . Dis. to Mustapha Camp Alexandria ex 18 Sty.H. 30th March '16. LIST NO. H.7757.

TERRITORIAL FORCE HOUNSLOW RECORD OFFICE.

2418 Tpr. Tattersall, E. Sussex Yeo. N.Y.D. . . . . Adm. 18 Sty.H. Suez 30th March '16. LIST NO. H.7757.  
 2635 " Hayes, A.F. 1/1 E. Kent Yeo. Dengue. . . . . Dis. to Unit ex 18 Sty.H. Suez 30th March '16.

DUBLIN RECORD OFFICE.

9929 Pte. Byrne, J. 1st R.D. Fus. V.D.G. . . . . Dis. to Mustapha Camp Alexandria ex 18 Sty.H. 1st April '16. LIST NO. H.7757.  
 22153 " Burke, P. 1st Do. Myalgia. . . . . Dis. to Mustapha Camp Alexandria ex 18 Sty.H. 31st March '16.

EXETER RECORD OFFICE.

8369 Sgt. Shaw, A.G. 2nd Dorset. Ulcer (Ankle) . . . . Dis. to Unit ex 18 Sty.H. Suez 30th March '16. LIST NO. H.7757.  
 16070 Pte. Lelong, E. 2nd Hants. V.D.G. . . . . Dis. to Mustapha Camp Alexandria ex 18 Sty.H. 1st April '16.

NEW FOUNDLAND CONTINGENT.

272 L/C. Manuel, W. 1st Newfoundland. V.D.G. . . . . Dis. to Mustapha Camp Alexandria ex 18 Sty.H. 31st March '16. LIST NO. H.7757.



C.R. 272

1438

M 82

APR 12 1916

Dear Madam,

I regret to have to inform you that a report has this day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 272, Private-Armourer Willis Manuel, was admitted to the 18th Stationary Hospital, Suez, March 3rd, sick. This information has been received by mail.

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

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

Yours faithfully,

Mrs. Jane Manuel,  
Loon Bay, N.D.B.

Colonial Secretary.



C.R. 272

Extract from Daily Orders part II, Unit the Royal  
Newfoundland Regiment from Sgt. Schelan B.C.F.  
dated May 20th. 1916.

272 L/C. W. Mamel.

Discharged Hospital. Venereal, 31/3/16.

C.R.

272

Extract from War Office List No.H. 6796

272 L/W. Manual W.

1/Nfld. R. V.D.G. Adm. to 18 Sty. Hos. Suez 26th, Feb'16.

C.R.

272

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.

Alexandria, March 11th, 1916.

272 L/Cpl. W. Mamuel

Admitted Hospital, Venereal, 26-2-16.

Extract from war List No.E.736.

C. No. 20

272  
~~272~~

O.C. 18 STATIONARY HOSPITAL (SUEZ) REPORTS BY CABLEGRAM 3RD  
MARCH 1916 THE UNDERMENTIONED SICK ADMISSION. LIKELY TO REMAIN  
IN HOSPITAL MORE THAN 7 DAYS.

272 L/C. Manual, W.

1/Nfld. Sick, Sev.

C.R. 272

Extract ~~from~~ of Reinforcement Draft to 1st Batt.

ME.F. Embarked for Gallipoli 14-11-15.

272 Pte. W. Manuel.

C.R. 272

Extract from Criminal Roll Subscribed by John's per S.S.  
"Florisel" Oct. 6, 1914.

272 Manual Willis.

C.R. 272

**WILLIS MANUEL** was attested for General Service  
with the NEWFOUNDLAND REGIMENT on ..... **SEPT. 2, 1914.**  
Regimental No. **272** was allotted to Pte **WILLIS MANUEL.**

**AUTHORITY:**

**Record Officer**

**Dept. of Militia,**

**March 25th, 1919.**







