

Marshall, Albert

Bugler

Record

C.R.

Extract of Daily Orders part 11, from Unit The Royal
Hfld. Regt. St. John's, dated April 6th, 1918.

Albert Marshall.

Attached to Drum & Bugle Band 3/4/18.

C.R. —

Extract from Daily Orders part II, Depot St. John's
dated March 7th., 1919.

Bugher A. Marshall.

Admitted to Barracks Hospital 6-3-19.

C.R. /

Extract from Daily Orders part II, Depot St. John's dated
April 23rd., 1919.

The discharge of the undernoted on demobilisation has been
APPROVED by Officer Commanding Discharge Depot on 19-4-19.

#Bugler Albert Marshall.

C.R. -

Extract of DAILY ORDERS PART II ROYAL NEWFOUNDLAND
REGIMENT DEPOT ST. JOHN'S DATED MARCH 10th/19.

DISCHARGED FROM BARRACKS HOSPITAL

Bulger Marshall.

9/3/19.

C.R.

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. St. John's, dated August 3, 1918.

Bugler Marshall A.

Admitted to Donovans Con. Hospital 3-8-18

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. Rank *Private* Name *Marshall, Albert*
 Date of Enlistment *3-4-18* Address *St. John's* District *St. John's*
 Occupation *Student* Classification for Discharge *A* Medical Category *A II*
 Recommendation S.M.B. Disability Rating *3*

Passed to Demobilization Officer with following documents:—

N.F. P136	B 268	B 121	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	3
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B 179c	B 120	M 93			

Date *14-4-19* for O. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am *not* in a position to resume civilian occupation.

Albert Marshall

Particulars passed to Vocational Officer for information and action.

Date *14-4-19*

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable *\$6.50*
 (b) Clothing Supplied *Alloouston, Lewis*

Date *14-4-19*

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. to his home
 at 113 1/2 Street Weston and Release Certificate No. 2122 issued.

Date 19-4-19 J.A. Snowland
 Demobilization Officer

Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection
 therewith settled. He has received pay and allowances to 4-5-19

Date 19-4-19 J.A. Snowland
 Depot Paymaster.

Discharge approved for 19. 4. 19

Forwarded with following documents to O.C Discharge Depot.

N.F. P136.....	B 268.....	B 121.....	N.F. Med.....	D.F. 1.....	1	
B 178.....	W 3494.....	B 122.....	Board 1st.....	" 2.....	2	<u>James</u>
B 178a.....	D 400A.....	B 1915.....	do 2nd.....	" 3.....	3	
B 179.....	D 400B.....	Form L.....	do 3rd.....	" 4.....	4	
B 179a.....	D 400C.....	Form K.....	do 4th.....	" 5.....	5	
B 179b.....	B 103.....	ME 2.....		" 6.....	6	
B 179c.....	B 120.....	M 93.....				

Date 19-4-19 J.A. Snowland
 Demobilization Officer.

APPROVED:

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

Eligible for War Service Gratuity

APR 19 1919

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

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

Date April 26/19 James
Records

Reg. No. _____ Rank Regt Name Marshall, Ch
Attested 3.11.18 Address City
Allotment _____ Allottee _____
Date of Allotment _____ Returned from Overseas _____
Embarked for Overseas _____ Cause _____

16-7-18 Admitted to Barracks Hos.
17-7-18 Admitted to M.I.D.
2-8-18 Discharged from M.I.D. to Bonnavan.
10-9-18 do do Bonnavan
1.3.19 Adm. to Barracks Hosp.
9.9.19 Discharged from " "

APR 1 1919

PASSED TO DEMOBILIZATION C. 3-2-19

19.4.19

DISCHARGE APPROVED ON DEMOBILISATION

Civil Re-establishment Committee



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

To resume work as Motor Engineer

Albert Marshall

Signature of Man.

Reg. No.

Kepler

J. J. Snowfiert

Signature of the Vocational Officer or his Representative.

Place

St John's

Date

19-4-19

191

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. Rank *Private* Name *Marshall, Albert*
 Date of Enlistment *3-4-18* Address *St Johns* District *St Johns*
 Occupation *Student* Classification for Discharge *A* Medical Category *#7*
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. F36.....	B 268.....	B 121.....	N.F. Med.....	D.F. 1.....	1
B 178.....	W 3494.....	B 122.....	Board 1st.....	" 2.....	3
B 178a.....	D 400A.....	B 1915.....	do 2nd.....	" 3.....	
B 179.....	D 400B.....	Form L.....	do 3rd.....	" 4.....	
B 179a.....	D 400C.....	Form K.....	do 4th.....	" 5.....	
B 179b.....	B 103.....	ME 2.....		" 6.....	
B 179c.....	B 120.....	M 93.....			

Date *14-4-19*

H. Marshall
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am *not* in a position to resume civilian occupation.

Albert Marshall

Particulars passed to Vocational Officer for information and action.

Date *14-4-19*

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable *\$65.00*

(b) Clothing Supplied

McClellan
 O i/c. Re-clothing.

Date *14-4-19*

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. to his home
 at 113 1/2 Street Boston and Release Certificate No. 2122 issued.

Date 19-4-19 J.A. Snow
 Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection
 therewith settled. He has received pay and allowances to 4-5-19

Date 19-4-19 J.A. Snow
 Depot Paymaster.

Discharge approved for 19-4-19

Forwarded with following documents to O.C Discharge Depot.

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

Date 19-4-19 J.A. Snow
 Demobilization Officer.

APPROVED.

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

Eligible for War Service Gratuity

Date APR 19 1919 R.H. Sait Capt.
 O. C. Discharge Depot.

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



Descriptive Return of a Soldier Discharged on Account of Disability.

INSTRUCTIONS—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. i/c Records together with the remainder of the man's documents.

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

Name in full *Albert Marshall*
 Regiment from which discharged *Royal Newfoundland*
 Regimental number *Bugler*
 Intended address *Boston?*

Height on discharge *5 Feet 7*
 Color of hair on discharge *Dark Brown*
 Complexion *Fresh*
 Color of eyes *Blue*
 Descriptive Marks *—*
 Figure on discharge *Medium*
 Christian name of Father *—*
 Christian name of Mother *—*
 Wife's maiden name in full *—*
 Date and place of marriage *—*
 Christian names of children *—*

Place and date of soldier's birth *St Johns 26-5-1900*
 Nature and locality of civil employment required *—*

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full) *Albert Marshall* *Bugler*
 (Rank)
 Station *St Johns* Date *14-4-19*

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



Medical Officer i/c Hospital
 Unit, or Command Depot.
John's, Newfoundland

Station _____ Date _____

Registered 3-4-1918.

The Royal Newfoundland Regiment

Class for Demobilization:—
X/A

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *14. 11. 19*

Regimental No. *Bugles.*

Name *Albert Marshall.*

Address

Present Medical Category *AI A11*

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

Members of Board

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

Robinson
Senior Medical Officer

T. W. Borden
M. O. Depot.

274

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. Rank Bugler Name Albert Marshall
 Intended place of residence. Fort Gower St. John's.
 2. Occupation Student
 Classification of soldier A Medical Category ATI

3. The above named man is discharged in consequence of DEMobilIZATION.

Eligible for War Service Gratuity

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.

Place ST. JOHN'S

Date APR. 19 1919

H. Moush
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date ST. JOHN'S

APR 19 1919

Albert Marshall
 Signature of soldier

J. A. Gower
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place and Date ST. JOHN'S

14-4-19

Albert Marshall
 Signature of soldier

W. J. Galey
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 3-4-18 No of days on Military
 Discharged from service 19-4-19 Plus 14 days Serv 396

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S

APR 19 1919

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

Date

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place St. John's, Nfld.

Date May 4, 1919

W. J. Galey
 Officer in Charge
 The Royal Newfoundland Regiment

Nfld. 20.79/2169

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th. 1919.

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

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

- Christian name..... *Albert* 2. Surname..... *Marshall*
3. Rank..... *Buyer* 4. Regtl. No..... *none*
5. Address in full to which future payments of gratuity are to be forwarded..... *Fort Dowland*
- *St. John's*
6. Date of enlistment in the Regiment..... *Apr. 3rd 1918*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
..... *none*
8. Relationship of such dependents..... *not applicable*
9. Address in full of such dependents..... *not applicable*
-
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *not applicable*
11. Were you on active service only in Hfld. If so, give dates and particulars of such service..... *Yes. As Buyer from*
- *April 3rd 1918 to April 19th 1919*
-
12. Give total length of time which you served on active service, whether in Hfld. or Overseas..... *one year 16 days*
- 1.2

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

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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.

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

ho

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

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

not applicable

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

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(b) If so, was such reversion in consequence of misconduct or inefficiency?

not applicable

19. Are you now serving in the Res? If not give - (a) date of discharge. (b) Reason for discharge.

April 19th 1919

hs

Demobilization

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service.

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21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee.

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not applicable

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.

C.R.

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. St. John's, dated July 20, 1918.

Bugler Marshall.

Admitted to M.I.D. Hospital 19-7-18