



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 1093

Name in full Augustus Martlet Age 21

Address 125 Poirer St.

Married Single Height 5-7 Weight 130

Color Fair Hair Dark Brown Eyes Grey

Other distinguishing marks Scar on Right Shoulder

Nearest relative (Mother) Mary

Address 25 Poirer St.

Dependents None

Occupation Labourer Present Wage \$40.00 per month

Previous service _____

Decorations _____

General Remarks _____

Date of Enlistment July 22/15

I, Augustus Martlet, 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 condition of my service.

Declared before me this 19 day February, 1914

Re. engaged by contract
15/1914
CA Martlet
Augustus Martlet
Rec. signed

A. Martet.

1093.

P.R. 60

Admitted 3.7.16.

Army Form W. 3016.

No. _____

Date July 31st 1916

(1) To the Officer i/c Records,

58 Victoria St
S.W. (Station.)

(2) The Officer Commanding,

Newfoundland Contingent
C.A.S. (Station.)

(3) The Paymaster,

58 Victoria St
A.W. (Station.)

Regimental No. 1093

Rank and Name Pte Martret A.

Regiment or Corps 1st Newfoundland Contingent

has been granted a furlough from July 31st to Augt 9th

His address while on leave will be:—

58 Victoria St - S.W.

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

I consider he is fit for * ^{Duty.} ~~_____~~

Horace Fagan Capt. R.A.M.C.(F)

Officer in charge Registrar, R.A.M.C.T. Hospital,
3rd London General Hospital,
WANDSWORTH, S. W. (Station.)

* Strike out that which is inapplicable.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office.

No. 1093 Rank Plt Name Mortret A.

Pay	F.A.	Wkg	Total
100	10		110
Less: Allotment			50
Net Rate			60

M. P. 1/33.

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£ s d				
						From	To							
Balance					Balance		5/6/17				13	6	4	
Acquittance Rolls					Pay @ net Rate	9/6/17	6/1/17	12P	60	72	00	14	15	11
Hospital Advances		1	2	05	Ration allow									
A.E. 34					6/10/17 - 15/10/17			10	2			1	0	0
P. & R.O. Payments		5	19	11	(22-0-4)									
(7-1-11)														
Cheque 6868	6/1/17	20	0	0										

28-2-31
7-0
29-2-3

CHECKED
E. P.
6/1/17

NEWFOUNDLAND CONTINGENT

No. 1093

[Handwritten signature]

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

Please remit per Postal Money Order to:

Rte A Martret (1093)

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

4/9/17

Regtl. No. 1093 Rank Rte

Name Auguste Martret

Approved L. Zeitline
Officer i/c

22 London General Hospital.

Dated at _____

June 26. 17 1917

Please send this as soon
as you can to Pte A Martret
1st Newfoundland Regt
Section C ward 4
Pavilion & Military Hospital
Brighton

7858/2 ✓
18181

1ST NEWFOUNDLAND REGIMENT	
PAY & RECORD OFFICE	
Ref. No.	4137
Rec'd.	AUG - 2 1917
App'd.	7858/2 - 2/8/17
Exp. No.	

No. _____

N.F.P./45.

NEWFOUNDLAND CONTINGENT

To: Paymaster & Officer i/c Records,
Newfoundland Contingent,
58, Victoria Street,
London, S.W. 1.

Please remit to Pte Martret A

the sum of Two pounds - - shillings, on
account of any balance that may be due to me.

Ref. No.	4137
Rec'd.	AUG - 2 1917
Acc'd.	7838/2 - 2/8/17
Ans'd.	
File No.	

Regtl. No. 1093 Rank Pte

Name Martret A

Approved Robert Milne
Officer i/c.
M. G. E.
2/8/17

Hospital.

Dated at Pavilion General Hospital Brighton

July 31st. 1917.

7838/2

2nd, August.

Military
Pavilion General

Brighton

1093

Pte

A. Martret

2. 0. 0.

7

No. 273

NEWFOUNDLAND CONTINGENT

N.F.P/45.

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

Ch. L. J.
T. H. J.

Please remit per Postal Money Order to:

Pte. A. Mawbet

the sum of 4 None pounds — shillings, on
account of any balance that may be due to me.



Regtl. No. 1093 Rank Pte-

Name Pte A. Mawbet

Approved M. A. Clark

Officer i/c
MAJOR B.A.M.O. (T)
REGISTRAR, GROVE MILITARY HOSPITAL,
TOOTING GROVE, S.W.

Dated at Grove Military Hospital
July 15 1917

No.

Regtl. No. 1093

Rank Pte

Name Mastret A

Regiment Newfoundland

Date from Oct 6th 1917

to Jan 15/10 1917

To proceed to

Hawick

I/c. Hospital

Station

Date

Address whilst on furlough to which any orders will be sent.

J Myreslaw Green
Hawick

Hartret, A

1093

Ray Sept.



DEPARTMENT OF MILITIA

ST. JOHN'S, NEWFOUNDLAND

May 3rd., 1919.

From:- The Director of Medical Services.
To:- The Paymaster.

1093, Pte. Martret, A.

The marginally noted man has been engaged as Orderly in this Department at the rate of \$1.00 per day.

Will you kindly have him paid same monthly through your office?

He began duty on February 21st., 1919.

Cluny Macpherson

Major, D. M. S.

CM-AMB.

W.F.R.

OK / W.F.R.

Statement of Accounts

No. 1093 Rank Pte Name Martret. A.

Company, etc. Repatriation 18/10/17 per S.S. Misranabic (Class A)

From 9/6/17 to 18/10/17 (dates).

DEBITS				CREDITS						
Date				Date						
Period 9/6/17 to 18/10/17				Bal. from Period ending 9/6/17				13	6	4
<u>allowment</u>				Period 9/6/17 to 18/10/17				13	6	4
132 days @ 50¢ = \$66.00				13	11	3	<u>Pay</u>			
Boots per N.W.C.A. per voucher 1980				19	11		132 days @ \$1.00 = \$132.00			
Hospital advances				1	2	0	<u>Field Allow</u>			
P + R.O. Payments				25	0	0	132 days @ 10¢ = \$13.20			
							<u>Ration Allow</u>			
							10 days @ 2/- per day			
Creditor Balance				3	9	10	Debtor Balance			
Total £				44	3	0	Total £ 44 3 0			

(Signed)

This account is, in accordance with information received at the Pay & Record Office to 24/10/17 and is therefore subject to amendment if, and as may be found necessary.

Certified correct, NEWFOUNDLAND CONTINGENT.

[Signature]
 Paymaster.
 CHIEF PAYMASTER & OFFICER I/O RECORDS



Station
 CHECKED. AB
 Date 24.10.17

Statement of Accounts

No. 1093 Rank Pte Name Martret. A.

Company, etc. Repatriation 18/10/17 per S.S. Misianahie (Class A)

From 9/6/17 to 18/10/17 (dates).

DEBITS				CREDITS						
Date				Date						
Period 9/6/17 to 18/10/17				Bal: from Period ending 9/6/17				13	6	4
<u>allowment</u>				Period 9/6/17 to 18/10/17				13	6	4
	132 days @ 50¢ = \$66.00	13	11	3	<u>Pay</u>					
	Boots per N.W. & G. per voucher 1950		19	11	132 days @ \$1.00 = \$132.00	27	2	5 1/2		
	Hospital advances	1	2	0	<u>Field Allow</u>					
	P + R.O. Payments	25	0	0	132 days @ 10¢ = \$13.20	2	14	2 1/2		
					<u>Ration Allow</u>					
					10 days @ 2/- per day	1	0	0		
Creditor Balance				3	9	10	Debtor Balance			
Total £				44	3	0	Total £ 44 3 0			

Certified correct, NEWFOUNDLAND CONTINGENT.

[Signature]
Paymaster,
CHIEF PAYMASTER & OFFICER I/O RECORDS



Station
CHECKED Date
R.B.
24.10.17

This account is, ^{changed} in accordance with information received at the Pay & Record Office to 24/10/11 and is therefore subject to amendment if, and as may be found necessary.

Feb. 18th., 1918.

Pte. A. Martret,
35 Princes Street,
City.

Dear Sir,-

Please call at my Office immediately upon receipt of this letter, as I may be able to find some light work for you.

I am not sure whether you will be able to take the position or not, and it will not be held open later than Thursday next.

Yours faithfully,

Capt. & Paymaster.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claim War Service Gratuity under Order-in-Council dated January 28th, 1917.

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.

Christian name *Augustus* 2. Surname *Martinet*

3. Rank *Private* 4. Regtl. No. *1093*

5. Address in full to which future payments of gratuity are to ~~for~~ be forwarded *25 Prince St City*

6. Date of enlistment in the Regiment *1st Feb. 1915*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.

8. Relationship of such dependents *Not applicable*

9. Address in full of such dependent *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 Nfld. If so, give dates, and particulars of such service *Not applicable*

12. Give total length of time which you served on active service, whether in Nfld. or Overseas *Overseas 2nd Mar 1915*

To Nov. 1917

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

Not applicable

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.....

Yes
One Hundred Dollars ten cents (100.¹⁰/₁₀₀)
from Payments Overpaid Regt

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

Yes

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

Not Applicable

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?.....

Not applicable

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

Not applicable

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

No
20th Nov. 1917
Disgracefully owing towards recruit in France

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

France July 1 1916 Arras 14th April 1917
Guinecourt

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.....

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.

H.F.S./54

No. 416.

From Pay & Record Office, London

To Minister of Militia, St. John's, #114.

#1093 Pte. A. Martin

Overcredited Nation Allowance as per claim 155. 2/6.

Oct 25th 1919

A. C. S.

Major Howley
O. I. C. Records

Please pay to A. Martret, 1093
the sum of five dollars and twenty five cents
in payment of allowance for week ended this date
in connection with re-education

\$5.25

Pension \$37.50

ACCOUNT	16515	<i>EW</i>
CHEQUE NO.		
PAY TO ORDER OF		
PAY TO THE ORDER OF		
PAY TO THE ORDER OF		

A. Hunter
for Vocational Officer
A. Martret

ACCOUNT	
CH. NO. <u>16049</u>	INITIALS <u>LED</u>
IND. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

Oct 18th 1919

Major Howley
O. I. C. Records

Please pay to A. Martret, 1093
the sum of five dollars and twenty five cents
in payment of allowance for the week ended this date
and charge same to Civil re-establishment Committee

\$5.25

Pension \$37.50

A. C. Martret
Vocational Officer
a. martret

ACCOUNT	14636	INITIALS	<i>Howley</i>
CHECK NO.		INITIALS	
IND. LEDGER		INITIALS	
PAY LEDGER		INITIALS	
GEN. LEDGER		INITIALS	

Oct. 11 - 1919

~~AUG 30 '19~~

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

Please pay to A. Martret, 1093
the sum of five dollars and twenty five cents
in payment of allowance for week ended this date
in connection with re-education.

\$5.25

Pension \$37.50

A. Martret

W. H. Keckell
Vocational Officer.

A. Martret

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 69⁰⁰

May 5 19 19

Received from the First Newfoundland Regiment
the sum of Sixty Nine Dollars.
on account of Pay.
~~balance~~

a warrant

Ch. No. 18390	Initials. E. E.
Pay Ledger 190	Initials. E. E.
Gen. Ledger	Initials.

Regtl. No. Rank

A. C. R.

No. 1093

Rank P6

Name

Martret G

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 19⁰⁰/₄

May 31 19

Received from the First Newfoundland Regiment
the sum of Three Ten Dollars.
~~on account~~
balance of Pay.

A. Mart

Ch. No. 22665	Initials J. P. W.
Pay Ledger 22698	Initials J. P.
Gen. Ledger	Initials

Regtl. No. Rank



No. 1093

Rank PG

Name A. Martet

WA 100-1115

REC'D - WASHINGTON

DEPARTMENT OF THE ARMY

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$68.⁴⁹/₁₀₀

Nov. 20th 1917

Received from the First Newfoundland Regiment
the sum of Sixty eight 49/₁₀₀ Dollars.
on account of Pay when Discharged
balance a part

Ch. No. 1379	Initials. E.W.
Pay Ledger 4	Initials. [Signature]
Gen. Ledger [Signature]	Initials. [Signature]

Regtl. No. Rank

7011

No. 1093

Rank

Pte.

Name

A. Martnet

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$15.⁰⁰/₁₀₀

Dec 7th 1907

Received from the First Newfoundland Regiment
the sum of Fifty ⁰⁰/₁₀₀ Dollars.
on account of Pay.
balance

R. Martnet

Ch. No. 780	Initials
Pay Ledger 298	Initials CLO
Gen. Ledger	Initials

Regtl. No. 1093

Rank Pts

No. 1093

Rank Pte.

Name A Martret.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$20.⁰⁰/₁₀₀

April 16th 1917

Received from the First Newfoundland Regiment
the sum of Twenty 00/₁₀₀ Dollars.
on account of Pay.
balance

A. Martinet

Ch. No. 20.5	Initials	C.W.
Pay Ledger 4	Initials	[Signature]
Gen. Ledger [Signature]	Initials	[Signature]

Regtl. No. 1093 Rank Pte

Check

No. 1093

Rank Pt.

Name A. Mastrot.

COPY.

This space to be left blank for the Chelsea Number.



Proceedings on Discharge.

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

No. 1093 Army Rank Private

Name Martinet Augustus
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps Newfoundland Regiment

Battalion, Battery, Company, Depot, &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 November 20th 1917

Place of discharge St. John's, Nfld.

1. Description at the time of discharge.

Age <u>23</u> years <u>6</u> months	Descriptive marks. <u>Amp. L. Arm</u> <u>L. S. W. L. Shoulder</u> <u>" L. Shoulder</u>	
Height <u>5</u> feet <u>7 1/2</u> inches		
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.		
Complexion <u>Fairish</u>		
Eyes <u>Blue</u>		
Hair <u>Brown</u>		
Trade <u>Labourer</u>		
Intended place of residence (To be given as fully as practicable) { <u>25 Prince St</u> <u>St. John's</u> <u>Newfoundland</u>		
(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 Injuries 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 :-

To be filled in on the soldier quitting the Colours.

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*

* Strike out if not applicable.

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class _____

6. Campaigns, Medals and Decorations

Certificate of education

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

(Place) _____

(Date) _____ Commanding _____ Batta. _____ Regiment.

8. Certificate to be signed by the soldier on 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, subject to the reservations of the claims noted on the 3rd page.

(Place) St John's Field. (Signature of Soldier.)

(Date) 20/11/17 (Signature of Witness.)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. Additional certificate in the case of a soldier who takes his discharge at his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier.)

10. Statement of service.

Service towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service " " _____ (the date of confirmation of discharge) " " "

Total " " "

11. Confirmation of discharge.

The discharge of the above-named man is hereby confirmed for _____ (date)

(Place) _____

Signature _____

(Date) _____

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

No Reservations!-
a Yartred
D. H. K.

Squadron, Troop, Battery and Company Conduct Sheet.

Forms
E. 121.
25.

Regiment of Newfoundland

Number of Sheet 1
Signature of O. C. Company J. W. Nash
Capt.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay	
No.	<u>1093</u>	Age on	<u>20</u> years - months	<u>Labourer</u>		
Joined	Date	Place and Date of Enlistment	<u>St John Feb 8 1915</u>	Religion		
Joined	Date	Period of	with Colours <u>2</u> years. with Reserve <u>36</u> years	Place of Birth		
Joined	Date			<u>St John</u>		

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<u>St John's Camp</u>	<u>5/15</u>	<u>Pte.</u>		<u>Late Tam Parade</u>	<u>Cpl News</u>	<u>2 days CC</u>	<u>6/15</u>	<u>Capt J. W. Nash</u>	<u>FHK</u>
	<u>17/15</u>			<u>Walking out of ranks without permission</u>	<u>Sgt Hicks</u>	<u>2 days CC</u>	<u>20/15</u>	<u>do.</u>	<u>FHK</u>
	<u>29/15</u>			<u>Refusing to obey an order.</u>	<u>Sgt Hicks</u>	<u>2 days CC</u>	<u>30/15</u>	<u>do.</u>	<u>FHK</u>
<u>Babey's Barracks</u>	<u>9/15</u>	<u>1</u>		<u>Drunk in Laddington St. at 9.10pm.</u>	<u>Cpl Austin</u>	<u>7 days CC</u>	<u>10/15</u>	<u>Lt Col Burton</u>	<u>FHK</u>
				<u>While at fatigue taking officers knife fork spoon.</u>	<u>Cpl Clare</u>				
<u>New Stn in Coy</u>	<u>15.10.15</u>	<u>"</u>	<u>2</u>	<u>Drunk creating a disturbance in Coy</u>	<u>Cpl Dehoney</u>	<u>7 days CC</u>	<u>15.10.15</u>	<u>Major Whitaker</u>	<u>Final 5/-</u>
				<u>Using obscene & profane language in Barracks</u>	<u>documentary</u>				
				<u>To be carried over</u>	<u>Medically Unfit 20/17</u>				

COPIES SENT TO
O.C. H.Q.
ST. JOHNS, N.F.L.D.
NO. 11089/129

Army Form B. 121.

Newton Corp.	3/1/16	Pfc.	Involunt. NEO 2nd 4th	5 days C.B.	4/1/16	Capt. Estey
"	5/1/16	Pfc.	Absent from 2 nd parade	2 " "	6/1/16	"
Newton Corp	28/1/16	Pfc.	3 Drunk on High St	7 " "	24/1/16	Major Whitaker S.S.
"	9/2/16	"	Absent from Tattoo Sgt Tomallwood	2 " C.B.	10/2/16	Sgt. Norris 2 nd Lt. S.S.
Do	23/2/16	"	To 10.45 P.m. parade			
			Absent from Tattoo Sgt	4 Days C.B.	2/2/16	Sgt. Lewis 2 nd Lt. S.S.
			until 10.20pm Brown			
Newton on Agr	Mar. 2.	-	Absent from C. S. St.	2 Days C.B.	3/3/16	2 nd Lt. Murphy
"	March 13 th	-	3.30 for Parade Stornan			
"	" 14 th	-	Neglect of duty b/c Jackson	2 days C.B.	15/2/16	Capt. C. Daye S.S.
	1916		Absent from Tattoo			
Racecourse	13-9	"	till 10.40pm Capt. Guy	2 days C.B.	15/2/16	Capt. C. Daye S.S.
Racecourse	27-9	"	Absent from parade Sgt. Symonds			
	28-9	"	1) Absent from parade 6.45 a.m.	Cpl. Taylor 2 days C.B.	28-9	Capt. Rowell, S.S.
"	1-10	"	2) Absent from parade			
			1) Absent from Tattoo			
			Roll Call 10.45	Cpl. Baird		
			until 9 a.m. 2-10-16	7 days C.B.	6-10	2 nd Lt. Whitaker
			2) Absent from Tattoo			
			Roll Call next reported	"		
			until 9.15 a.m. 5-10-16			

Brought forward

deprived 6 days pay to which 6 days pay by R.W. R.S.R.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.
 (666) W:017/2124 1000m 6/16s 53 56

Forms
B. 121.
as.

Regiment of Newfoundland

Number of Sheet 2

Signature of O. C. Company J. R. Street

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No. <u>1093</u>	<u>S. Martlet</u>	Age on <u>20</u> years <u>—</u> months	<u>Labourer</u>		
Joined _____ Date _____	Place and Date of Enlistment <u>St Johns</u> <u>20th Feb 1915</u>		Religion <u>R. C.</u>		
Joined _____ Date _____	Period of { with Colours _____ years. { with Reserve _____ years.		Place of Birth <u>St Johns</u>		

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order of dispensing with trial	By whom awarded	REMARKS
<u>at Race Course</u>	<u>7-10-16</u>	<u>Pte</u>		<u>Not answering duties</u> <u>Calls from 5.30 to 9.30 P.M.</u>	<u>Sgt Walsh</u>	<u>168 hrs detention</u>	<u>9-10</u>	<u>Lt Col Whitaker</u>	<u>Forfeit 1 days pay by P.W.</u>
<u>Racecourse</u>	<u>13/11/16</u>	<u>Pte</u>		<u>Breaking detention at 10 P.M.</u> <u>until returning at 10 P.M.</u>	<u>Sgt. Sweeney</u>	<u>168 hrs detention</u>	<u>11/11/16</u>	<u>Lt Col Whitaker</u>	<u>Forfeit 1 days pay P.W.</u>
<u>Racecourse</u>	<u>13/11/16</u>	<u>Pte</u>	<u>4</u>	<u>Leaving barracks without permission & returning drunk at 3.45 P.M.</u>	<u>Capt. Taylor</u>	<u>96 hrs. detention</u>	<u>14/11/16</u>	<u>Major Bernard D.C.</u>	<u>C.G.B.</u>

To be carried over

COPY SENT TO
 O.C. H.Q.
 ST. JOHNS, N.F.L.
 24 OCT 1917

Army Form B. 121.

Casualty Form Active Service.

Regiment or Corps 1st New Foundland
 Rank Pte Surname Marino Christian Name Augustus 2244
 Religion R. C. Age on Enlistment 20 years — months.
 Enlisted (a) St. John's Terms of Service (a) Des of War Service reckons from (a) 8/10/15
 Date of promotion to present rank Date of appointment to lance rank
 Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and Rate

Signature of Officer. _____



Report From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
<i>Nil</i>		Embarked <u>Southampton</u> Disembarked <u>France</u>	<u>12-12-16.</u> <u>13-12-16</u>	
	<u>Joined Battalion</u>	<u>France</u>	<u>27/12/16</u>	<u>B213</u>
		<u>With BATT</u>	<u>25. 1. 17</u>	
<u>25.4.17</u>	<u>O.C. Unit</u>	<u>Wounded in Action</u>	<u>France</u>	<u>3 APR 1917</u>
<u>28.4.17</u>	<u>P.F.A.</u>	<u>Ad. 1 trans Edw. L. Am</u>	<u>66.8</u>	<u>24.4.17</u>
<u>10.5.17</u>	<u>7th and 8th</u>	<u>Ad. 1st Lt R. Am Ampt</u>	<u>Etaples</u>	<u>25.4.17</u>
	<u>"St. Andrew"</u>	<u>Invalided to England</u>		<u>6.5.17</u>
				<u>W. 3083</u>

COPY SENT TO
 O.C. H.Q.
 ST. JOHNS, N.F.L.D.
 P. 38. No. 11089/129
24 OCT 1917
 DATED

Doohy
 D. 1/2 No. 1 Reg. Infantry Section
 G.H.Q., 3rd Echelon

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

Casualty Form—Active Service.

Regiment or Corps 2/1st. Newfoundland.
 Regimental No. C.R. 1093 Rank Pte. Name Marquet, Augustus
 Enlisted (a) 8.2.15. Terms of Service (a) War. Service reckons from (a) _____
 Date of promotion } _____ Date of appointment } _____ Numerical position on }
 to present rank } to lance rank } roll of N.C.Os. }
 Extended _____ Re-engaged _____ Qualification (b) _____



Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embk'd Southampton		28.3.16	
		Disembk'd ROUEN		30.3.16	
	<i>1 Gen. Sp. Hq.</i>	<i>1st. Gen. Sp. Hq.</i>	<i>France</i>	<i>15.4.16</i>	<i>B 213</i>
	<i>Sp</i>	<i>ad. G. Sp. Hq. foot.</i>	<i>Etretat.</i>	<i>2.7.16</i>	<i>H a 546</i>
<i>8.9.16</i>		<i>Invalidd to England.</i>		<i>4.7.16</i>	<i>Letter from O.C. 1 Gen Sp. Etretat.</i>

11089/29
 24 OCT 1917

FOR Q/J^o INFANTRY RECORDS
 G. H. Q.; 3rd ECHELON.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

H. 5 10669

COPY

L.A.

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 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 Augustus Matthews
Regiment from which discharged 1st Bn. Newfound Land Regt
Regimental Number 1093
Where born (Parish, Town and County), and when St John Newfound Land 16-6-1894
Intended address 25 Prince St. S.W.

Height on discharge 5 Feet 7 1/2 Inches
Colour of Hair on discharge Brown **Colour of Eyes** Blue
Descriptive marks Cap. L. Arm G.S.W. 1. Gable **Complexion** Shade
Figure on discharge Normal
Christian name of Father Augustus
Christian name of Mother Mary Ellen
Wife's Maiden name in full
Date and Place of Marriage } Single
Christian names of Children
Nature and locality of civil employment desired Undecided.



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) Augustus Matthews
 (Rank) Pvt
 Station Rochampton Dor Date 16-9-17

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.

W.A. Nicholas Capt for Lt Col. Corran
 Station Rochampton Dor Date 15-9-17
Lieut. Col. Corran Medical Officer i/c Chelsea Hospital

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 fit for General Service.



No. 1093

Rank Private

Name (surname first) Watson A.

Regiment 1st Newfoundlands

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


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?

Casual Worker in Newfoundland

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

Returning to Newfoundland

4. What is the name of your Approved Society? _____

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

Date 15-9-17

Signature A. Watson

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.



To be used for recruits enlisting direct into the Regular Army only.
 Army Form B. 178^a to be used for Special Reserve recruits
 and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Martret Christian Name A.



TABLE I.—GENERAL TABLE.

Birthplace ... Parish _____ County _____

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

Declared Age ... years _____ days _____

Trade or Occupation ... _____

Height ... feet, _____ inches.

Weight ... lbs. _____

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

Physical Development ... _____

Vaccination Marks { Arm ... Right _____ Left _____
 Number _____

When Vaccinated ... _____

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

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

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

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 C.C.H.Q.
 ST. JOHNS, N.F.L.D.
 10767/126
 17 OCT 1917

Approved by (Signature) _____

(Rank) _____ Medical Officer.

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

Joined on Enlistment ...	Corps. <u>1 Newfoundland</u>	Regtl. No. <u>1093</u>
Transferred to ...		

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				
Cambridge Hospital aldershot	17	8	15	24	8	15	Tonsillitis		Enlarged tonsils. Tonsils. Laryngitis Recovery complete. R.O. to Mrs.	W. H. ... M. ...
8 th LONDON GENERAL HOSPITAL WANDSWORTH	3	7	16	31	7	16	G.I.W. left leg. IX 1. slight	29	Free Hand. G.I.W. over internal malrotation left foot. Wound healed. No disability. No injury to hand.	J. P. ... J. P. ...
3 rd LONDON GENERAL HOSPITAL WANDSWORTH.	7	5	17	20	6	17	G. S. W VIII 4 L. arm amputation	44	Wounded in France 23. 4. 17 To Grove Mill Hoop Posting Dunstford, 153rd Bn Par. H.	G. C. Hall Capt. Med. M. ... MAJOR R.A.M.C. (T) REGISTRAR GROVE MILITARY HOSPITAL, TOOTING GROVE, S.W.



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



MEDICAL HISTORY

OF

Surname *Martret.*

Christian Name *Augustus.*


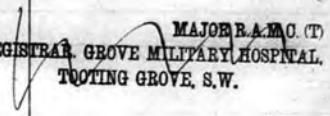



Table 1.—GENERAL TABLE.

Birthplace:—Parish..... County.....

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	at	on	at
Examined	6 th day of <i>Feb</i> 1915	<i>St Johns.</i>	day of	191
Declared Age.....	20 years	days	years	days
Trade or Occupation.....	<i>Labourer.</i>			
Height	5 feet	7 inches	feet	inches
Weight		130 lbs.		lbs.
Chest Measurement {	Girth when fully expanded...	32 inches		inches
	Range of expansion..	35 inches		inches
Physical Development.....				
Vaccination Marks {	Right	Left	Right	Left.
	Arm			
Number				
When Vaccinated	1913.			
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)	<i>Cluny Macpherson</i>			
(Rank)	Capt.			
	Medical Officer.			Medical Officer.
Enlisted	at <i>St Johns.</i>		at	
	on 8 day of <i>Feb</i> 1915		on	day of 191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<i>15th Mfgd Regt.</i>	1093		
Transferred to.....				
Became non-effective by.....				
	on	day of 191	on	day of 191
(Signature)				
(Rank)				

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O.C. H.Q.
ST. JOHNS, N.F.L.D.
SEP. 30. NO. 107/1126
DATED 17 OCT 1917

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

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
	20	6	14	30	4	14	G. J. W. VIII, H. left arm amputation.	40		 MAJOR R. A. M. O. (T) REGISTRAR, GROVE MILITARY HOSPITAL, TOOTING GROVE, S. W.
General Hospital Pavilion, Brighton.	30	7	14	14	9	14	Accept. L. Arm	46.	Wounded in France. 23 rd Apr. 1914. accept. 24 Apr. 1914. through middle $\frac{2}{3}$ left arm - his operation in this Hosp. Massage & movements to shoulder.	 Captain
	14	9	17	6	10	17	Amp. L. arm	23	ARTIFICIAL LIMB PROVIDED.	 Captain Adjutant Queen Marys Convalescent Hospital.

c 5/9/17

Transfer Statement of Clothing and Necessaries.

INSTRUCTIONS—This Statement will be made out by the Depot and will be sent to the Commanding Officer of the unit receiving the transfer, who will retain it as a voucher to the unit's Clothing Account. The Statement will also be forwarded in the case of men in the United Kingdom passing from Hospitals to Depots or units.

STATEMENT showing the Articles in possession of (Regimental No.,

Rank and Name) 1093 P^{te} Martiel 1/1 Newfoundland

proceeding from the Pavilion 14p. Brighton

to the Rockhampton

Date of Enlistment _____ Date of Transfer 14.9.1917.

FOR DETAIL OF ARTICLES, see overleaf.

Certified that this Statement, as detailed overleaf, is correct in every particular.

(1) Station _____

F. Crookes

Commanding Squadron, Battery, &c.



Major & Q. M.
Name of Unit man is leaving.
R.A.M.C.

(2) Station _____

Commanding Squadron, Battery,
or Company

Date _____

Name of Unit man is joining.

Articles of Clothing & Necessaries in Possession.

Articles not in possession should be struck out of the list. Any articles not included should be inserted.

Clothing.	No.	Necessaries.	No.
Aprons, kilt	/	Badge, cap	/
Boots, ankle, pairs ..	/	Bag, Kit	/
Caps, Service Dress ..	/	Braces, pairs	/
Caps, Glengarry	/	Brass, Button	/
Drawers, pairs	/	Brush, Brass	/
Frocks, Canvas	/	.. Blacking	/
Greatcoat, D.M.	/	.. Clothes	/
Jackets, Service Dress ..	/	.. Hair	/
Kilts	/	.. Polishing	/
Pantaloon, cord, pairs ..	/	.. Shaving	/
Putties, pairs	/	.. Tooth	/
Spurs, Jack, pairs	/	Cap, Comforter	/
Trousers, Service Dress, pairs	/	Comb, hair	/
Trousers, Canvas or Khaki	/	Disc, identity, with cord ..	/
Drill Overalls, pairs ..	/	Fork	/
Waistcoat, cardigan	/	Garters, Highland, pairs ..	/
Coat, waterproof	/	Holdall	/
Gloves, leather, pairs ..	/	Hose Tops, pairs	/
Gloves, Motor Cyclist, pairs	/	Housewife	/
Goggles, pairs	/	Knife, Clasp	/
		Knife, Table	/
		Laces, leather, spare, pairs ..	/
		Shirts, flannel	/
		Socks, worsted, pairs	/
		Spoon	/
		Titles, metal, pairs	/
		Towels, hand	/
		Wax Polish, tin	/

I certify that this statement is correct.

Date 14 - 9 - 17

Signature of the Soldier

A. M. Street

15669

Medical Report on an Invalid



Station GROVE MILITARY HOSPITAL
 No. _____
 Date 30-4-17
 Date _____
 FOOTING GROVE, S.W.

- 1. Unit 1st Newfoundland L. Coy.
- 2. Regimental No. 1093.
- 3. Rank Pte.
- 4. Name Hartrat H.
- 5. Age last birthday 23. ¹⁹¹⁵
- 6. Enlisted { on Feb 5. 1915
at St. Johns.
- 7. Former Trade or Occupation { Lab.

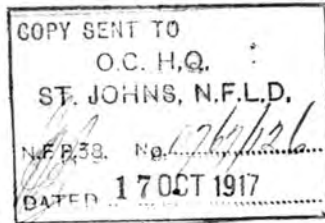
8. Disability.

Left Arm Amputated 3 in from shoulder.

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. April 23. 1917.
- 10. Place of origin of disability. Arms. France
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.



Arm was badly shattered, amputated in action - upper third Thru - stump was very septic & immediately healed.

- 12. (a) Give your opinion as to the causation of the disability.
- (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 8).

S. S. W.
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.

Shump healed & ready for artificial limb.
General health good.

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

(a) In action? *Yes*

(b) On field service? *Yes*

(c) On duty? *Yes*

(d) Off duty? *—*

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

No.

If so—(a) When?

(b) Where?

(c) Opinion?

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

Yes. amputation of arm.

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. discharge as permanently unfit

Shott Shown

Officer in medical charge of case.

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

Station *S. C. Bodall. Lt. Col. R.A.M.C.*
Date *30-7-14.*
Officer in charge of Hospital.

* Loss of teeth, 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, 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.

*Active service
G.S.W.*

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

21. Has the disability been aggravated by

(a) Intemperance? *no*

(b) Misconduct? *no*

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

22. Is the disability permanent?

yes

23. If not permanent, what is its probable minimum duration?

23A. Is he fit for discharge from the Service as an out-patient, and will he require out patient treatment on discharge from hospital general labour market lessened at present?

Total 2 1/2 then 1/2

In defining the extent of his inability to earn a livelihood, estimate it at 1, 2, 3, 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?

no

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

26. Do the Board recommend

(a) Discharge as permanently unfit, or

(b) Change to England?

yes

Signatures:—

W. Fulver James Col. President.
Ed. Thomas Capt. M.O. Secy.
Queen Mary's Convalescent Hospital, Roehampton.

Date *5 - OCT 1917*

Approved
Queen Mary's Convalescent Hospital, Roehampton.
W. Fulver James.
Administrative Medical Officer.

Date *5 - OCT 1917*

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.

stump healed & ready for artificial limb.
General health good.

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

(a) In action? *Yes*

(b) On field service? *Yes*

(c) On duty? *Yes*

(d) Off duty? *-*

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

If so—(a) When? *No.*

(b) Where?

(c) Opinion?

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

Yes. amputation of arm.

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. discharge as permanently unfit

Shirley Brown

Officer in medical charge of case.

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

Station *Q.M.H. Hospital*
Date *30-1-17*

S. C. Bodwell. Lt-Col R.A.M.C.
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, 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.

*active service
G.S.W.*

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

21. Has the disability been aggravated by

(a) Intemperance? *no*

(b) Misconduct? *no*

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

22. Is the disability permanent? *yes*

23. If not permanent, what is its probable minimum duration?

As stated in months.

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

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

Total $\frac{2}{3}$ then $\frac{1}{2}$

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?

no

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

26. Do the Board recommend

(a) Discharge as permanently unfit, or

(b) Change to England?

yes

Signatures:—

W. Fulver James Col. President.
Queen Mary's Convalescent Hospital,
Roehampton.

Ed. Thomas Capt. M.O.C. Members.

Date 5 - OCT 1917

Approved
Queen Mary's Convalescent Hospital,
Roehampton.

W. Fulver James.
Administrative Medical Officer.

Date 5 - OCT 1917

The Officer in Charge,
Record Office,
Newfoundland Contingent,
58, Victoria Street,
Westminster, S.W.

The undermentioned man, who has been passed with his artificial limb, is sent to you herewith for final disposal. He appeared before a final Invaliding Board on the date specified against his name:-

Regt.	Regtl Rk No.	Name	Date Boarded.
1/Newfoundland	1093	Pte. Martret A.	5.10.1917.

Herewith the following Army Forms:- B 179, B 178, ✓
D 400a, W 3494, W 3484b, W 3068. ✓

W. H. Nicholson Baptis
for Lt. Col:
Commandant,
Queen Marys Convalescent Hospital,
Roehampton.

Roehampton.

6.10.1917.

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 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/o 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 *Augustus Tharbert*
 Regiment from which discharged *1 Batt. Newfoundland Inf*
 Regimental Number *1093*
 Where born (Parish, Town and County), and when *St. Johns Newfoundland 15.1.894*
 Intended address *25 Prince St. St. Johns. Newfoundland.*
 Height on discharge *5 Feet 7 1/2 Inches*
 Colour of Hair on discharge *Brown* Colour of Eyes *Hazel*
 Descriptive marks *Imp. L. arm. S. Sw. L. ankle* Complexion *Rid.*
 Figure on discharge *normal.* " *R. shldr.*
 Christian name of Father *Augustus*
 Christian name of Mother *Mary Ellen.*
 Wife's Maiden name in full *J. Singh.*
 Date and Place of Marriage
 Christian names of Children
 Nature and locality of civil employment desired *Undecided.*

COPY SENT TO
 O.C. H.Q.
 ST. JOHNS, N.F.L.D.
 N.F.P.38. No. *10767/126*
 17 OCT 1917

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) *Augustus Tharbert* (Rank) *Pte*

Station *Queenshampton House* Date *Sept 15/1917*

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.

H. A. Nichol *Capt for Lt. Col. Commandant,*
Queen Marys Convalescent Hospital.

Station _____ Date *15 SEP 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	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
 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.

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. 1093

Rank Private

Name (surname first) Martret A.

Regiment Newfoundland

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



COPY SENT TO
O.C. H.Q.
ST. JOHNS, N.F.L.D.
N.F.P.38. NO. <u>1093/1093</u>
DATED <u>17 OCT 1917</u>

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?

Casual worker in Newfoundland.

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

Returning to Newfoundland.

4. What is the name of your Approved Society? —

5. Have you been employed whilst with the Colours? If so, in what capacity? no

Date 15. 9. 17

Signature A Martret

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 or reclassification in a category from which men are being transferred to Class P. or P.(T) of the Reserve 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. 3 (ii), item 3, of Army Council Instruction No. 1912, 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.

Notification by President of Medical Board of Approval of a Soldier's Discharge under Paragraph 392 (xvi.) King's Regulations.

(To be completed and dispatched on the day on which the discharge is approved.)

To the Officer i/c Records

Newfoundland Inf. St. Helena St. London S.S.

The Soldier named below has appeared before an Army Medical Board at this station, and his discharge from the Service as "no longer physically fit for War Service" has this day been approved. (The discharge will be confirmed for a date 14 days after the date on this notification, see A.C.I. 1623¹⁹¹² of 1916.)

Soldier's surname

Martinet

Christian names (in full)

Augustus

Regt. No. and Rank

1093 Pte

Regt. or Corps

1 Newfoundland Inf. (If T.F. this should be stated.)

His address on discharge will be

25 Premier St. St. Johns. Newfoundland

This information is for the Central Army Pension Issue Office only.

The Soldier states that* being issued in respect of him.

Dependants allowance is

* Insert "separation," "dependants," "family," or "no," as the case may be. The space must not be left blank.

Army Form D. 400A. and Army Form B. 179 for the above-named Soldier are forwarded herewith Also, A.C.I. 178. 42. 3494



Station

Date

5.10.17

W. F. James, President of Board (Approving Officer)

A set of three forms will be made out for each Soldier whose discharge is approved, and will be dispatched to the officers severally indicated.

Attention is drawn to the fact that Forms A, B and C of each set are not in identical terms.

Admitted 7-5-17.

Only for use with Men returned from an Expeditionary Force or from Garrisons Abroad.

Army Form W. 3016 (In Books of 200.)

No. _____ Date June 20th 1917
58. Victoria St.

(1) To the Officer i/c Records, _____
S.W. (Station).

(2) The Officer Commanding, _____
Infld Contingent. (Station).

(3) The Paymaster, _____
58. Victoria St.
S.W. (Station).

Regimental No. 1093

Rank and Name Plt. Marshall A.

Regiment or Corps 1st Infld.

has been granted a furlough from transferred on June 20th

His address while on leave will be: The Great Military Hospital
Tooting!

I consider he is fit for*

- (a) Duty
- (b) Light Duty, and likely to be fit for Service Overseas within three months.
- (c) Light Duty, and not likely to be fit for Service Overseas within three months or requiring special medical treatment.
- (d) Service at home, but unlikely ever to be fit for Service Overseas.

* Strike out that which is inapplicable.

Stammers
Capt. Ramesh Officer in charge Registrar, R.A.M.O.T.
London General Hospital, Hospital,
WANDSWORTH, S.W. (Station).

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office. In the case of men of the Royal Engineers two copies of A.F. W. 3016 will be sent to the Officer in charge R.E. Records and one to the Paymaster, instead of one copy to the Officer i/c Records, the Paymaster, and O.C. shown in the Schedule.

3447

QUEEN MARY'S CONVALESCENT AUXILIARY HOSPITALS,

ROEHAMPTON HOUSE,

ROEHAMPTON, S.W.

TO THE OFFICER IN CHARGE OF RECORDS.

Newfoundland Contingent

I beg to inform you that the undermentioned men have been admitted as patients to this Hospital.

58 Victoria St.
Westminster SW

Regt. No.	Rank and Name.	Unit.	Date of Admission.
1093	Sde Martel A.	1 Newfoundland	14.9.17

After these men have been fitted with artificial limbs, they will appear before a final Invaliding Board for the purpose of discharge from the Service.

W. H. Nichol
Commandant.

Sept 15th 1917.

Queen Mary's Convalescent Hospital.

DEPARTMENT OF VETERANS AFFAIRS

To Copy for H.O. file.

Attention of

P.A.

Ottawa, Ont.
Date.....May 30, 1966.....

NAME MARTRET, Augustus

SERVICE 1093 WW1
NUMBER ROYAL Nfld
REGT.

C.P.C. No. 260538
W.V.A. No.

NAVY
ARMY ~~XX~~
R.C.A.F.

The DEPARTMENT has received information from

S.P.M.E. St. John's, Newfoundland.....d/ May 20, 1966.....

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death.....May 18, 1966.....

Cause of Death.....

Place of Death...DVA Pavilion, St. John's Newfoundland.

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

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

} Destroy form if advice of death already received.

E.C. Richards
for
Chief, Central Registry

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

Augustus Martret

in respect of his service as No. 1093 Rank Pte.

Name A. Martret Royal Nfld. Regt.
Nfld. Forestry Corps.

Receipt of the same should be acknowledged hereon.

Received yes

Signature A. Martret

Date Oct 9 1921

Address 123 Georges St

[P.T.O.]

C.R. 1093

Mar. 24th 19

From Chief Staff Officer.

To: Director of Medical Services.

No. 1093, Pte. A. Martret.

With reference to your letter of the 5th inst., concerning the marginally noted man, payment is authorized of \$1.00 per day if taken on as an orderly.

This man is now in receipt of 80% disability pension from the Pensions Board, which gives him an income of \$70.00 per month if paid at the above rate. If he were an attested man not receiving a pension he would be paid as follows:

Service Pay	\$1.10
Subsistence Allowance	\$1.10

which would mean \$66.00 per month - less than the income which he will receive at above rate.

Lt. Col.

FAB/MP.

Chief Staff Officer.

C.R. 1093

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Lt. Col.

FAB/MP.

Chief Staff Officer.



C.R. 1093

DEPARTMENT OF MILITIA

ST. JOHN'S, NEWFOUNDLAND

S

March 5th., 1919.

From:- D. M. S.
To:- C. S. O.

1093, Pte. Martret, A.

I am asking D. O. C. to demobilize the Orderly which I have had for some time here. He was an A3 man (under age).

I now have the marginally noted man, who has lost his arm in the service, attached and he seems to do the work very well.

I shall be glad if you will say at what rate this man is to be paid. I understand that he received \$1.50 per day in addition to his pension while he was employed by the Military Service Board.

Cluny Macpherson
Major, D. M. S.

CM-AMB.

Mar 6. 19. This man has not shown up to-day, but I should be glad to know what rate of pay to give any man I may get as a permanency

*80% of \$50.
= \$40. p.m.
30.
\$70.
\$1. p. day
1-10
1-10
\$2.20 p. day
\$6.00 p.m.*



C.R. 1093

DEPARTMENT OF MILITIA

ST. JOHN'S, NEWFOUNDLAND

February 21st., 1919.

From:- D. M. S.
To:- C. S. O.

1093, Pte Martret, A.

The marginally noted man has been taken on in this department as Orderly for a week, on trial.

Cluny Macpherson

Major, D. M. S.

Noted

C.R. 1093

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt., St. John's, Nov.21st, 1917.

1093 Pte. A. Martret.

Having been found Medically Unfit is Struck off the
Strength with effect from Nov.20th, 1917.

C.R. 1093

Extract from list of men of the Royal Newfoundland Regiment
discharged on various dates

1093 Pte. A. Martrat

Discharged Nov. 20th 1917, medically unfit.

C.R. 1093

Abstract of Roll of Officers, N.C.Os. and Men Discharged from
The Royal Newfoundland Regiment.

Authority: Pay Office, St. John's.

<u>No.</u>	<u>Rank.</u>	<u>Name.</u>	<u>Date.</u>	<u>Reason.</u>
1093	Pte.	A. Martret	Nov. 20th 1917.	Med. Unfit.

C.R. 1093

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt., St. John's, Nov. Ens, 1917.

The following man returned from Overseas and is
attached to Headquarters with effect from Nov, 1st, 1917.

1093 Pte. H. Martret.

C.R. 4637

No. 1093 Pte. Martret.

Extract of telegram received from the Pay & Record Office,
dated Oct. 20th. 1917

"Embarked Liverpool, per Government transport, being sent
home for discharge, Oct. 18th."

G.

11th May, 1917.

Dear Madam,

In reply to a cablegram of enquiry, which I addressed to the Record Office, London, on the 7th instant, I am to-day advised that No. 1093, Private Augustus Martret, whose arm has been amputated as already reported, is fairly comfortable.

Yours faithfully,

Colonial Secretary.

Mrs. Mary Martret,
25 Princes Street.

1917
MAY 10, 1917.

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. 1093, Private Augustus Martret, has been admitted to Wandsworth.

Yours faithfully,

Colonial Secretary.

Mrs. Mary Martret,
25 Princes St.

CODE MESSAGE SENT TO SYNOPTICAL.

May 7, 1917.



Telegraph whereabouts of 2293 Gallant, 2355 Hoacworthy
 Report by telegraph present condition of 2371 Davey,
 1335 Carney, 2802 Brown, 1949 Hall, 1736 Chalke, 1093 Hartrot.
 What is address of, report by telegraph present condition
 of 2809 Hugford, 2636 Gense, 2441 Osborne. Report by
 telegraph nature of wounds of, what is address of, report
 by telegraph present condition of 2009 Head.



May 5, 1917.

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. 1093, Private Augustus Martret, was admitted Seventh Canadian General Hospital, Etaples, April 25th, suffering from shrapnel wound, amputation ^{left} right arm.

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,

Colonial Secretary.

Mrs. Mary Martret,
25 Princes St.

M

March 16, 1917.

Dear Madam,

Replying to my enquiry Record Office, London, to-day reports No. 1093, Private Augustus Martret, with with the British Expeditionary Force.

Yours faithfully,

Colonial Secretary.

Mrs. Mary Martret,
25 Princes St.

MADE IN AUSTRIA
SERIALIZED BY THE NATIONAL ARCHIVES

TRANSLATION OF CODE MESSAGE SENT TO SYNOPTICAL,
LONDON, 12th MARCH, 1917.

What is address of Report by telegraph present
condition of 2nd Lieut. Sheppard Report by telegraph
present condition of 1853 Hancock 2373 French 1618
Allan 2953 Kavanagh 2851 Brinston 1027 Dadd Telegraph
whereabouts of 459 Crotty 1093 Martret 2067 Forward
stop parcels letters addressed to 1770 Adams not received
Telegraph result of enquiry.

CR: 1093

Extract from Nominal Roll of Draft No.15 embarked Southampton
12/12/16 from 2/1st Newfoundland Regiment to 1/1st Newfoundland
Regiment B .E.F.

1093 Pse. Martret, A.

C.R. 1093

Extract of casualties received from Pay & Record Office,
London, dated August 1st, 1916.

#1093 Pte. A. Martret. ✓

Discharged from Hospital, granted furlough from 31/7/16
to 9/8/16 Fit for Duty.

C.R. 1093

NEWFOUNDLAND CONTINGENT

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

1093, Pte A/ Martret. ✓

1/Newfoundland R. Adm. 1 Gen. Hos. Etretat 2nd July 1916.

G.S.W. On Foot A Left. Busk. L.

TRANSLATION OF MESSAGE SENT TO SYNOPTICAL ON
July 8, 1916.

Relatives anxious for news of 1845 Boyd; Report
by Telegraph present condition of 1893 Martret, 712
Sheen, 1414 Sellers, 700 Master, 1609 Halcy, 459 Crotty,
~~1845 Boyd.~~

Col. Sec.

C.R. 1093

A
Extract from Casualties received from Pay & Record
Office, London, Jul.6th,1916.

Admitted 3rd London General Hospital, Wandsworth,
July 3,1916.

1093 Pte. A. Martret.

GSW L. Foot.

M 94

July 5, 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. 1093, Private Augustus Martret, is at the Third London General Hospital, Wandsworth, suffering from a bullet wound in the left foot.

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,

J. P. Bennett
Colonial Secretary.

Mrs. Mary Martret,
25 Princess St.

C.R. 1093

Extract of Casualties received from Pay & Record
Office, London, dated July 5, 1916.

#1093 Pte. A. Martret. ✓

Gunshot wound left foot.

t 3rd London, General Hospital, Wandsworth,
July 3, 1916.

C.R. 1093

Extract from Nominal Roll 3rd Draft to B.E.F. arrived
29, A.B.D. 30-3-16 Joined Battalion 15-4-16.

#1093 Pte .A. Martret.

C.R. 1093

Extract from Nominal Roll of Royal Wfld. Regt. Draft.

No. 3. from 2nd Bn. Depot to 1st Bn., B.E.F. Embarked 28-3-16.

1093 Pte. A. Martret.

C.R. 1093

Extract from Nominal Roll of draft embarked for overseas
per S.S. Stephano March 20th, 1915

#1093 Pte. A. Martret.

C.R.

1093

Augustus Martret was attested for General Service
with the NEWFOUNDLAND REGIMENT on February 8th 1915
Regimental No. 1093 was allotted to Pte A. Martret

AUTHORITY:

Record Officer

Dept. of Militia,

March 25th. 1919.