

# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 5688 Name Ephraim Matthews C of E

### Questions to be put to the Recruit before Enlistment.

- |  |  |
|--|--|
| 1. What is your name? .....  | 1. <u>Ephraim Matthews</u> .....             |
| 2. What is your full Address? .....  | 2. <u>Burgeo</u> .....                       |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u> .....                          |
| 4. What is your age? .....   | 4. <u>20</u> Years <u>.....</u> Months ..... |
| 5. What is your Trade or Calling? .....  | 5. <u>Fisherman</u> .....                    |
| 6. Are you Married? .....  | 6. <u>no</u> .....                           |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? .....                             | 7. <u>no</u> .....                           |
| 8. Are you willing to be vaccinated or re-vaccinated? .....  | 8. <u>Yes</u> .....                          |
| 9. Are you willing to be enlisted for General Service? .....   | 9. <u>Yes</u> .....                          |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? .....                                     | 10. .... Name .....<br>..... Corps .....     |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... | 11. <u>Yes</u> .....                         |

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

Ephraim Matthews SIGNATURE OF RECRUIT.  
Pte R. Powel Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

### CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's

on this 17 day of June, 1918

Signature of Attesting Officer CB Dicks Lieut.

### † CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the .....

If enlisted by special authority, such will be attached to the original attestation.

Date ..... 191 .....  
Place ..... } Approving Officer.

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

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

# DESCRIPTIVE REPORT ON ENLISTMENT

5688.

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

Name E. Phram Matthews  
 Apparent age 20 years 0 months. Height 5 feet 2 1/4 inches  
 Chest Measurement { Girth when fully expanded 37 inches  
 Range of expansion 5 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Henry Matthews  
Burges. | Relationship Father.  
 Particulars as to Marriage \_\_\_\_\_

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

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

## Particulars as to Children

Christian Names	Date and Place of Birth

## STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion; 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>12.6.18</u>									
Joined at <u>M. John's</u> on <u>June 12.1918</u>									
<u>Discharged July 31.1919</u>									
<u>Embarked M. John's S.S. Colombo to Halifax N.S. 22.7.18</u>									
<u>Embarked for P.S.C. 23.11.18</u> <u>Disembarked same 28.11.18</u>									
<u>Journey Boston 5.19</u> <u>Swampscott from Boston 22.19</u> <u>Arrived Newport 23.19</u>									
<u>to Newfoundland for demobilization 22.19</u> <u>Arrived Newfoundland 1-6-1919</u>									
<u>Total Service forfeited as above</u> <u>Demobilization M. John's 3-7-1919</u>									

Total Service towards Engagement to 3-7-1919 (date of discharge) 1 years 23 days  
 " " Pensions " \_\_\_\_\_

E. Matthews

C.R. 5688

1890



Reg. No. 5688 Rank Pte Name Matthews Ephraim Fox

Attested 11-6-18 Address Burgeo Islands

Allotment 60 Allottee Annie Matthew (mother)

Date of Allotment 1-8-18 Returned from Overseas

Embarked for Overseas JUL 22 1918 Cause

13/6/18, 1st Inoc. 2nd Inoc. 20 Eye Retd Home 6-20-7-18  
5/2 23-6-18 to 3-7-18 S.L. 20-7-18

C.R. 5688

Extract from Daily Orders Part II Unit The Royal Rifles.

Regt. St. John's, July 7th, 1919.

The discharge of the undernoted on demobilization has been  
CONFIRMED by C.C. Discharge Depot with effect from 29-6-19

5688 Pte. Ephraim Matthews.

C.R. 5688

Extract from Daily Orders Part 11 Depot, St. John's,  
Date June 7th, 1919

5688 Pte. E. Matthews

Reported at Headquarters 1-6-19.  
which sailed Liverpool May 22/1919.

BE "Corsican"



C.R. 5688

Extract from Daily Orders Part II Unit The Royal W.M.

Regt. Depot St. John's, June 9th, 1919

The discharge of the undersigned on demobilization has been  
APPROVED By C.O. Discharge Depot with effect from 9-6-19.

5688 Pte. E. Matthews.

C.R.

5688

Extract from Nominal Roll from 1st. Battalion  
Royal Newfoundland Regiment dated 30-4-19.

The undermentioned of the 1st. Battalion left  
Rouen Camps #2/4/19, embarked at Havre 22/4/19,  
disembarked at Southampton 23/4/19 and reached  
Hazeley Down Camp 23/4/19.

#5688 Pte. E. Matthews.



C.R. 5688

Extract from Nominal Roll of Draft No. 56, of the 2nd.,  
Battalion of the Regiment at Winchester to the 1st.,  
Battalion, P. E. F., Embarked Southampton 23/11/18.

#5688 Pte. E. Matthew S.

C.R. 5688

Extract from Daily Orders part 11, from Unit The Royal  
Nfld. Regt. St. John's, dated July 25, 1918.

The following man embarked for overseas on H.M.S.  
"Columbella" July 22, 1918.

#5688 Pte. Ephraim Matthews.

C.R. 5688

Extract from Daily Orders Part 11, from Unit The  
Royal Nfld. Regt. St. John's, dated June 13, 1918.

#5688 Pte. Ephraim Matthews.

Attested for General Service with the Royal Nfld. Regt.  
from 12.6.18





## Medical Report on an Invalid.

Station Hazley DownDate 30-4-19

1. Unit Royal Newfoundland 7. Former Trade } Fisherman.  
 or Occupation }  
 2. Regimental No. 8688  
 3. Rank Pte  
 4. Name Matthews E.  
 5. Age last birthday 21  
 6. Enlisted { on 14/5/18  
 at St John's

7A. If with previous service in Army, state—

- (a) Former Unit;  
 (b) Regimental No.;  
 (c) Date of Discharge;  
 (d) Cause of Discharge.

## 8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

nilStatement 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. nil
10. Place of origin of disability. nil
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. nil
12. Give your opinion as to the causation of the disability, stating whether in your opinion it is— nil
- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
- (b) constitutional or hereditary, and not aggravated by service during the present war.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

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.

*Discomplain if no disability*

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

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

*h*

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

*h*

If so—(a) When?

(b) Where?

(c) Opinion?

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

*h*

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

*h*

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?

*h*

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

*h*

20. Do you recommend—

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

*Repatriation*

*h*

*Major R. A. Mc*

Officer in medical charge of case.

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

Station *Wagley Down*

Officer in charge of Hospital.

Date *30/4/19*

\*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.







No. 87/1006

099355

N.F.P. /79.

From: NEWFOUNDLAND CONTINGENT

Chief Paymaster & O.i/c Records,  
Newfoundland Contingent,  
Pay & Record Office.  
58, Victoria Street,  
London, S.W. 1.

To: Officer Commanding.  
2nd Batt. B.I. Wfld. Regiment  
Winchester

2nd May 191 9

5688 Pte E. Matthews

With reference to the following telegram from the Minister of Militia / / (180)

"Pay to- 5688 E. Mathews  
£5-0-8-

Cheque £ 5-0-8 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

*A. R. Munnell*  
Chief Paymaster & O. i/c Records.

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Receipt hereunder.

*Williams*  
Officer Commdg. Batt'n.

Received the sum of Three pounds

eight pence (£5-0-8) in respect of telegraphic remittance from the Minister of Militia.

E. Matthews

No. 5688 Rank Private

Witness *J. Bellier* Svt.



For God, For King & For Country



Y.M.C.A.



HANDS ON ACTIVE SERVICE

PATRON  
Y.M.C.A. NATIONAL COUNCIL  
W. M. THE KING

PATRON  
MILITARY CAMP DEPT  
H. H. DUKE OF CONNAUGHT

Reply to..... Company..... Bar..... Regt.

Stationed at.....

April 26 1919

Hazeley Down  
Camps

Bill 5688

Cable no 301

Dear Cousin

Just a few lines to let you know that I am well hoping to find you are the same. Well mate we are got back to Hazeley down again, Mate I wrote to you when I was in France for 6 pounds well mate I would be much oblige if you would send after it for me or if you got

it you can send it and I will pay you when I get home because you know I didnt have chance to send for it when I was in France

TO ECONOMISE PAPER PLEASE WRITE  
- ON OTHER SIDE IF REQUIRED. -

For God. For King & For Country



PATRON  
Y.M.C.A. NATIONAL COUNCIL  
W. M. THE KING.



PATRON  
MILITARY CAMP DEPT  
H.R.H. DUKE OF CONNAUGHT.

Reply to..... Company..... Bar..... Regt.....

Stationed at.....

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because I don't know how long  
I will be here. Mate I hope you  
will send and let me know  
because I want to get a beady  
suit before I go home. Well  
Mate I hope we could all get  
home together it would be a  
fine trip if we could. Well Mate  
I can't tell you the news home  
for I haven't had neither letter from  
home this three months but the was  
all well then we is all together  
here all the Burgeo Boys.  
so I must be lose my short  
letter wishing you good by  
From your cousin O. E. Matthews  
to is cousin Mate Matthews

TO ECONOMISE PAPER PLEASE WRITE  
- ON OTHER SIDE IF REQUIRED. -

Matthews, E.

5688

Ray Seph.



July 3, 1919

#5688 Pte. Ephraim Matthews,

Burgeo.

Dear Sir:-

Please find enclosed Discharge  
Certificate No. 2340.

Yours truly

Paymaster " Officer i/c Records. **Captain**

The Royal Wld. Regiment

DEMOBILIZATION

No. 5688 Rank \_\_\_\_\_

Name Matthews *ℓ*

Warned for demobilization on

JUN 5 1919

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 2688 Rank Pvt Name Matthew E  
 Intended place of residence Burgo

2. Occupation Fisherman  
 Classification of soldier E Medical Category A-1

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 JUN 5 1919  
 for H. M. [Signature]  
 Comanding Discharge Depot  
 The Royal Newfoundland Regiment

### CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.  
 Place and date ST. JOHN'S  
JUN 5 1919  
E. W. Matthews  
 Signature of soldier  
[Signature]  
 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  
5-6-19  
E. W. Matthews  
 Signature of soldier  
[Signature]  
 Signature of witness

### STATEMENT OF SERVICE

7. Enlisted for service 12-6-18 No of days on Military  
 Discharged from service 19-6-19 then 14 days Service 387

### APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge Records, The Royal Newfoundland Regiment, twenty-eight days from date.  
 Place ST. JOHN'S  
 Date JUN 19 1919  
[Signature]  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment

### CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.  
 Place St. John's, Nfld  
 Date July 3/1919  
[Signature]  
 Officer in Charge Records  
 The Royal Newfoundland Regiment

Handwritten number: 207912340



# The Royal Newfoundland Regiment

Class for Demobilization:—

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date .....

Regimental No. *5688*.....

Name *McArthur* *E*.....

Address .....

Present Medical Category *A.T.*.....

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

Members of Board

*R.H. East Capt.*  
.....

O.C. Discharge Depot.

*L. Paterson*  
.....

Senior Medical Officer

*Geo Burden*  
.....

~~M.O. Depot~~

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 5688 Rank Pte Name Matthews E.  
 Date of Enlistment 12-6-18 Address Burgeo District Burgeo  
 Occupation Fisherman Classification for Discharge E Medical Category A I  
 Recommendation S.M.B. .... Disability Rating .....

Passed to Demobilization Officer with following documents:—

N.F. P/36.....	B 268.....	B 121.....	/	N.F. Med.....	D.F. 1.....	/
B 178.....	W 3494.....	B 122.....	/	Board 1st.....	" 2.....	
B 178a.....	/ D 400A.....	/ B 1915.....	/	do 2nd.....	" 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.....		<u>13256</u> /	" 6.....	
B 179c.....	B 120.....	M 93.....				

Date 4-6-19 .....

H. Matthews  
 O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am.....in a position to resume civilian occupation.

E. Matthews

Particulars passed to Vocational Officer for information and action.

Date.....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable £65.00

(b) Clothing Supplied new cap

Date 5-6-19 .....

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R. 1434* to his home at *Burges* and Release Certificate No. *2306* issued.

Date *5-6-19* *J.A. Shaw Capt*  
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 *5-7-19*

Date *5-6-19* *H. Mansford*  
Depot Paymaster.

Discharge approved for *19-6-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1
B 178	W 3494	B 122	Board 1st.	" 2
B 178a	D 400A	B 1915	do 2nd.	" 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	<i>B.256</i>	" 6
B 179c	B 120	M 93		

Date *5-6-19* *J.A. Shaw Capt*  
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 *JUN 19 1919* *R.H. Sait Capt.*  
O. C. Discharge Depot.

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

Date .....



# Civil Re-establishment Committee



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

To resume former occupation

Signature of Man.

Reg. No. E Matthews

J. H. Shaw Capt.

Signature of the Vocational Officer or his Representative.

Place

21 Johns

Date

5-6-19

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Medical Report on an Invalid.Station Bozley D. Camp  
Date 30 4 19

1. Unit Royal Newfld
2. Regimental No. 5688
3. Rank Pte
4. Name Matthews &
5. Age last birthday 21
6. Enlisted { on 14.5.18.  
at Siphon
7. Former Trade } Fisherman  
or Occupation }
- 7A. If with previous service in Army, state—  
(a) Former Unit;  
(b) Regimental No. ;  
(c) Date of Discharge;  
(d) Cause of Discharge.

**8. Disability in respect of which invaliding is Proposed.**  
(Other disabilities should be reported upon in answer to question No. 19).

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. nil
10. Place of origin of disability. nil
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. nil
12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3). nil.
- (b) constitutional or hereditary, and not aggravated by service during the present war.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

13. What is his present condition?

*he complains of no disability*

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

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

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

*na*

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

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

*na*

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

*na*

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

*na*

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. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

*na*

20. Do you recommend—

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

*JSP Knight* *Major Rame*  
*JSP* Officer in medical charge of case.

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

Station *NA Camp*

Date *30. 4. 19*

\_\_\_\_\_  
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.



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

# MEDICAL HISTORY

OF

Surname Matthews Christian Name Ephson

Table I.—GENERAL TABLE.

Birthplace:—Parish Burges County Newfoundland

	SPECIAL RESERVE		REGULAR ARMY	
	on	at	on	at
Examined	12 <sup>th</sup> day of June 1918	St Johns	day of	191
Declared Age	20 years	days	years	days
Trade or Occupation	Fisherman			
Height	5 feet	7 <sup>1</sup> / <sub>4</sub> inches	feet	inches
Weight		126 lbs.		lbs.
Chest Measurement	Girth when fully expanded	37 inches		inches
	Range of Expansion	5 inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm	pleas		
When Vaccinated	8/4/20			
Vision	R.E.—V=	46	R.E.—V=	
	L.E.—V=	46	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>James Peterson</u>			
(Rank)	Major			
Enlisted	at	St Johns	at	
	on	12 day of June 1918	on	day of 191
Joined on Enlistment	Corps	The Royal Newfoundland	Corps	
	Regtl. No.	2688	Regtl. No.	
Transferred to				
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.



Date	Brief Details, and Signatures
13.6.18	Pass 40
20.6.18	T.A.S. <del>20</del>
10.5.18	T.M. <del>100</del>
10.7.18	T.M. <del>100</del>
	<p> <math>R.V. = \frac{6}{9}</math>      <math>L.V. \frac{6}{9}</math>      No improvement of vision                      It has no error of refraction                      Retinoscopy = <math>+1</math> in each eye.                      Fundi normal.                      A. Cowen Capt R.M.C.                 </p>

Table IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
			<p>                     It is hereby certified that this soldier has been before a Travelling Medical Board and has been classified as <u>E</u> for Discharge on Demobilisation. Medical category <u>AI</u>                      4.6.19  <small>Date of T.M.B.</small>    <small>Assistant Adjutant-General</small>                      Discharge Depot—Newfoundland                 </p>		

Unit 2nd Bn R. NewfoundlandMORNING SICK REPORT  
MEDICAL INSPECTION REPORT\*

Army Form B 256

Squadron, battery or company \_\_\_\_\_

Station and Date

Hagley Down 16. 10 1918

Regtl. No.	Rank and Name (Christian name in full; Surname first; M under name if married).	Completed Years of		Religion.	If for duty †	Whether a defaulter.	Lines or barracks.	Room.	Disease.	Disposal. Medical Officer's Remarks and Signature.
		Age.	Service.							
5688	Pte Matthews E.								Defect Vision	The oculist Winchester.
		The eye man has no error of refraction. $RV = \frac{0}{9}$ $LV = \frac{0}{9}$ no improvement e flames.								
		E. Cowley Capt R.N.C. Capt R.N.C.								

†State nature of duty for which warned. In the case of men for medical inspection, the reason, such as, "Soldiers for trial by Court-Martial," or "joining the station," &c., should be stated against their names.

\*Strike out whichever is not applicable.

Orderly  
N.C.O.



July 3, 1919

#5688 Pte. Ephraim Matthews,

Burgoe.

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 & Officer i/c Records.

SM

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 *Ephraim* 2. Surname *Matthews*

3. Rank *Pte* 4. Reg'tl. No. *5688*

5. Address in full to which future payments of gratuity are to be forwarded *Burgeo, Dist. Burgo + La Poile*

6. Date of enlistment in the Regiment *May 18/18*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued immediately prior to your discharge *Not applicable*

8. Relationship of such dependents *do*

9. Address in full of such dependents *do*

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 *Overseas*

12. Give total length of time which you served on active service, whether in Nfld. or Overseas *Thirteen months and one day*

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.

*\$ 80.62 Clothing & Ration*

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

*no*

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

*no*

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

*no*

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

*no*

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

*no*

19. Are you now serving in the Regt.? If not give? - (a) date of discharge

*no*

*June 19/19*

*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.

*France 1918 - Nov - and Germany*

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.



Signature of Applicant: *Ephraim Matthews*

Place of Residence: *Burgess.*

Declared before me at: *Phoenix*

This *5<sup>th</sup>* day of *June* 19*18*....

*John W. Carthy*

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

POST DISCHARGE PAY:				Net amount due
Date paid	Paid Soldier.	Paid Dependant.	War Service Gratuity.	
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
Certified correct.				Paymaster

C.R.  
5688

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

I certify that I have received an issue of 2 inches  
of Riband of British War Medal-1914-1919.

Date *March 22*

Name *Ephraim Matthews*

Place *Burgeo*





# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 5688 Rank Pte Name Matthews, E.  
 Date of Enlistment 12-6-18 Address Burgeo District Burgeo  
 Occupation Fisherman Classification for Discharge E Medical Category AI  
 Recommendation S.M.B. .... Disability Rating .....

Passed to Demobilization Officer with following documents:—

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 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	<u>18256</u>	" 6
B 179c	B 120	M 93		

Date 4-6-19

H. Matthews  
O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am.....in a position to resume civilian occupation.

E. Matthews

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied

H. Matthews Capt.

Date 5-6-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R. 1439* to his home at *Burgess* and Release Certificate No. *2306* issued.

Date *5-6-19*

*J.A. Snow Capt*  
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 *3-7-19*

Date *5-6-19*

*H. M. Stewart*  
Depot Paymaster.

Discharge approved for.....

Forwarded with following documents to O.C. Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1
F 178	W 3494	B 122	Board 1st	" 2
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	<i>B. 256</i>	" 6
B 179c	B 120	M 93		

Date *5-6-19*

*J.A. Snow Capt*  
Demobilization Officer.

APPROVED.

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

**Eligible for War Service Gratuity**

Date *JUN 19 1919*

*R.H. [Signature]*  
O. C. Discharge Depot.

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

Date *June 12 1919*

*[Signature]*

**Casualty Form—Active Service.**

Regiment or Corps *ROYAL NEWFOUNDLAND REG*

Rank *Pte* Surname *Matthews* Christian Name *E*

Religion *C of E* Age on Enlistment *20* years *—* months

Enlisted (a) *12/6/18* Terms of Service (a) *DURATION* Service reckons from (a) *12/6/18*

Date of promotion to present rank *—* Date of appointment to lance rank *—*

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

Occupation *Fisherman* Signature of Officer *W. H. Long Capt*

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...	<i>28 NOV 1918</i>		
		Joined Batt.	<i>5 JAN 1919</i>		
		<i>Arrived in UK</i>		<i>23/4/19</i>	

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) Signaller, Shoeing-Smith, &c (17591.) Wt. W 1887-P 1124. 1,000,000. 8/18. D & S. Form B/103. (E. 1256.)

Next of Kin: *Father: Henry Matthews: Burgeo: N. S. L. D*





## 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 *Matthews Ephraim*

Regiment from which discharged *Royal Newfoundland*

Regimental number *5688.*

Intended address *Berger.*

Height on discharge *5* Feet *7.*

Color of hair on discharge *Dark.*

Complexion *Dark.*

Color of eyes *Brown.*

Descriptive Marks *Tall.*

Figure on discharge *Henry.*

Christian name of Father *Annie.*

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 *Berger 21 Oct 1897.*

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) *Ephraim Matthews*

(Rank) *Pl.*

Station **ST. JOHN'S**

Date **JUN 4 1919**

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.



Station

Date