

Sept 17 1915



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 473 Name Subst Matthews Corps Artillery

Questions to be put to the Recruit before Enlistment.

1. What is your name? Hubert Matthews
2. What is your full Address? Truro Gravetown BSB
3. Are you a British Subject? Yes
4. What is your age? 22 Years 0 Months
5. What is your Trade or Calling? Lumberman
6. Are you Married? No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so, which? No
8. Are you willing to be vaccinated or re-vaccinated? Yes
9. Are you willing to be enlisted for General Service? Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? Name Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? Yes

I, Hubert 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.

Hubert Matthews SIGNATURE OF RECRUIT.  
J. S. James Signature of Witness.

Hubert Matthews OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I 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 Truro on this 29 day of Sept 1915.

J. S. James Signature of Attesting Officer

CERTIFICATE OF APPROVING OFFICER.

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

Hubert Matthews Artillery

Date Sept 30 1915

Place Truro 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).....





# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 473 Name Hubert Matthews Corps Ordnance

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

1. What is your name? ..... Hubert Matthews
2. What is your full Address? ..... Invergravetown P.B.
3. Are you a British Subject? ..... Yes
4. What is your age? ..... 22 Years ..... Months
5. What is your Trade or Calling? ..... Lumberman
6. Are you Married? ..... No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so, \* which? ..... No
8. Are you willing to be vaccinated or re-vaccinated? ..... Yes
9. Are you willing to be enlisted for General Service? ..... Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? ..... 10. Name .....  
Corps .....
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... Yes

I, Hubert 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.

Hubert Matthews SIGNATURE OF RECRUIT.  
J. J. G. G. G. Signature of Witness.

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

Hubert 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 29 day of April 1915.

Signature of Attesting Officer J. J. G. G. G.

### 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 compiled with. I accordingly approve, and appoint him to the .....  
If enlisted by special authority, such will be attached to the original attestation.

Date April 29 1915  
Place St. John's } 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) .....



C.R. 4783

Extract from Daily Orders Part II Royal Newfoundland Regt.  
Depot St. John's dated Aug. 18th 1919.

The discharge of the undernoted on demobilisation has been  
COMPLETED by officer i/c Records ~~xxx~~ from noted date  
8-8-19.

4783, Pte. H. Matthews.

C.R. 4783

Extract from Daily Orders Part 11 Unit The Royal Wfld. Regt.  
St. John's, July <sup>14</sup> 1919

The discharge of the undernoted on demobilization has been  
APPROVED by O.C. Discharge Depot with effect from 25-7-19

4783 Pte. H. Matthews.

C.R. 4783

Extract from Daily Orders Part II by Lt. Col. Barton D.S.O.  
Commanding 2nd. Batt. Royal Newfoundland Regiment, Jan'y. 29/19.

The following having reported back from 1st. Battn are taken @  
on the Strength on noted dates.

4783 Pte. Matthews, H.

27/1/19.

C.R. 4783

Extract of Casualties from Pay & Record Office London.

The u/m was discharged from 3rd London Gen. Hospital 18/1/19 and granted furlough to 27/1/19. Marked 1. Duty.

4783 PTE. H. Matthews.

A. Es. W. 5016 from 3rd London Gen. Hospl.



C.R. 4783

Jan. 14th, 1919

Mr. George Matthews  
Musgravetown, B.B.

Dear Sir:-

I beg to inform you that additional information concerning your son, No. 4783, Private Hubert Matthews, has been received from the Visiting Committee of the Newfoundland War Contingent Association, to the effect that he is now progressing favourably.

Yours faithfully,

Lieut. Col.

Chief Staff Officer.

**NEWFOUNDLAND POSTAL TELEGRAPHS.**
**Cable Connection with all the World**
**C.R.** 4783

**All Messages Sent are Subject to the Following Conditions:**

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

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

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

**(NOT TRANSMITTED)**

 Signature of Sender \_\_\_\_\_ Address **Jan. 7th, 1919**

Line Number	Rcd	By	Sent	by	Check

 Dated **Dept of Militia.**

 To **George Matthews, Musgravetown, B.B.**

Regret to inform you that Record Office, London,  
officially reports **No. 4783, Private Hubert Matthews**  
at **Wandsworth** suffering from **bronchitis**

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

**J.R. Bennett**

Minister of Militia.

 Chge Dept of ~~POST~~ **TYPEWRITER**

C.R.

4783

Extract from telegram received from Synoptical London,  
Jan. 6th, 1919.

Wandsworth Bronchitis 4783 Matthews.

C.R. 4783

Extract of DAILY ORDERS, PART 11, ROYAL NEWFOUNDLAND  
REGIMENT, in France, Jan. 16th 1919.

#4783 Pte. H. Matthews.

2/1/19. SICK.

Embarkation to U.K.

C.R. 4783

Extract from Casualties received from Pay & Record  
Office, Jan. 16, 1919.

6-1-19

Admitted to 3rd London General Hospital Wandsworth,  
3/1/19.

4783 Pte. H. Matthews.

Bronchitis.

C.R. 4783

Extract from War Office List No. H. A. #33914.

ADM. 55 GEN. H. BOULOGNE 19 DEC. 1918.

#4783 Pte. H. Mathews.

BRONCHITIS.

C.R. 4783

Extract from Daily Orders Part 11 Unit The Royal Nfld.  
Regt. By Lt. Col. G.T. Mathias, D.S.O. Commanding 1st  
Battn. 3-11-18.

The following joined the Battn. 3-11-18.

4783 Pte. H. Matthews.

C Coy.

C.R.4783

<sup>Draft</sup>  
Extract from Nominal Roll Re-inforcement, No. 55, Embarked Folkeston, 26/10/18  
from 2nd Batta, Royal Newfoundland Regiment, Haslely Down Camp, Winchester,  
to 1st Batta, Royal Newfoundland Regiment, B.E.F.

4783 Pte. Matthews, H.



C.R. 4783

Extract From Daily Orders Part 11. from Unit The Royal Mfld.  
Regiment, St. John's, dated June 14th 1918.

4783 Pte H. Matthews

Embarked for Overseas with draft 11-6-18.

Extract from Daily Orders part 11. from Unit The Royal  
Newfoundland Regiment, St. John's, dated April 30, 1918.

#4783 Pte. M. Matthews.

Attested for General Service with the Royal Newfound-  
-land Regiment from 29/4/18.

C.R.

4783

~~5783~~

Extract from Daily Orders Part II Unit The Royal Field. Regt.  
St. John's, July 3rd, 1919.

5783 Pte. J. Matthews.

4783 H. Matthews?

Reported at Headquarters 1-7-19 ex "Cassandra" which sailed  
Glasgow 24th June, 1919.

R. Matthews

C.R. 4783

~~1180~~





No. 4783 Rank Pte Name Matthew N.

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

N.F.P/33

*WAVE*

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£	s d			
						From	To							
Balance					Balance		25/1/19						7 6	
Acquittance Rolls			19	2	Pay @ Net Rate	26/1/19	18/1/19	85	60	51	00	10	9 7	
Hospital Advances		1	0	0	R.A.	18/1/19	27/1/19	10	2-1				1 0 10	
A.B. 64.														
P.&.R.O. Payments														
<i>Cash Receipt</i>					<i>Credit bal -</i>									
<i>554 18/19</i>					<i>£ 9 18 9</i>									
<i>9 150</i>					<i>£ 0 3 9</i>									

*EM*  
*15-7-19-*  
*1-19-2*

*11-19-11*

No. 4710/689

N.F.F./79.

From: NEW FOUNDLAND CONTINGENT

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

To: Officer Commanding,  
2/Bn. Royal Newfoundland Regt.,  
Hazeley Down Camp,  
Winchester.

35th March 1919

March 31<sup>st</sup> 1919

4783 Pte. Matthews H.

Receipt hereunder.

With reference to the following telegram from the Minister of Militia / / ( 93 )

*John G. J.* LIEUT. COLONEL.  
Officer Commd. 2<sup>nd</sup> BATTN.  
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

"Pay to- 4783 Matthews

£5. 0. 0.

Received the sum of £5.0.0

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

Five pounds. in respect of telegraphic remittance from the Minister of Militia.

*A. D. Munroe*

Chief Paymaster & O. i/c Records.

H. Matthews *his mark*

No. 4783 Rank Pte.

Witness Geo. Perry *L/c*



To:- The Chief Paymaster,  
Royal Newfoundland Regiment,  
86 Victoria Street,  
London, S.W.

Sir:-

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

Commencing on the 1st July 1918.

Regt. No.	Rank	Name	Amount	Signature
4783	Lt	Matthew R.	\$2.50	R. Matthews

I have the honour to be, Sir,  
Your obedient Servant.

R. Matthews

Date

July 1/18

Matthews, H

4783

Sept.

August 8th 1919.

#4785, Pte.H.Matthews,  
Musgravetown.

Dear Sir:

Enclosed please find Discharge Certificate  
# 3625

Yours truly,

Capt.&  
Officer i /c Records.

RS/.

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 4783 Rank Pfc Name Matthew H  
 Intended place of residence Augersdown

2. Occupation Lumberman  
 Classification of soldier E Medical Category A 2

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 JUL 11 1919

J. M. St.  
 Commanding Discharge Depot  
 The Royal Newfoundland Regiment

### CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place, ST. JOHN'S

Date JUL 11 1919

M. H. Matthews  
 Signature of soldier  
W. B. St.  
 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, ST. JOHN'S

Date JUL 11 1919

M. H. Matthews  
 Signature of soldier  
James O. Newman  
 Signature of witness

### STATEMENT OF SERVICE

7. Enlisted for service 29-4-18 No. of days on Military  
 Discharged from service JUL 25 1919 Plus 14 days Service 467

### APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S

Date JUL 25 1919

J. R. Cooper Capt.  
 Officer i/c Records  
 The Royal Newfoundland Regiment

### CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place, ST. JOHN'S

Date August 18 1919

J. R. Cooper Capt.  
 Officer i/c Records  
 The Royal Newfoundland Regiment

207913625

21  
31  
31  
8  
107

# The Royal Newfoundland Regiment

Class for Demobilization: *16-*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date ..... *10.7.19* .....

Regimental No. *4783*

Name ..... *Matthews Herbert* .....

Address ..... *Lusgrave town* .....

Present Medical Category ..... *A-* .....

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

Members of Board

*R. H. Lat* Major  
O.C. Discharge Depot.

*J. P. Peterson*  
Senior Medical Officer

*W. G. Borden*  
M. O. Depot.

# The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 283 Rank Pls Name Matthews A  
 Date of Enlistment 29-4-18 Address Musgrave Road District Dona Vista  
 Occupation Lumberman Classification for Discharge E Medical Category A1  
 Recommendation S.M.B. \_\_\_\_\_ Disability Rating \_\_\_\_\_  
 Passed to Demobilization Officer with following documents:—

N.F. F36	B 268	B 121	N.F. Med.	D.F. 1	3
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		" 6	
B 179c	B 120	M 93			

Date 10-7-19

*Mrs A*  
Q. C. Discharge Depot.

## PARTICULARS FOR DEMOBILIZATION

### 1. Civil Re-Establishment.

I am \_\_\_\_\_ in a position to resume civilian occupation

*Hubert Matthews*  
*Wm Keenan*

Particulars passed to Vocational Officer for information and action.

Date \_\_\_\_\_

### 2. Clothing.

Certified that Clothing Regulations have been complied with—

(a) Clothing Allowance payable. \$600

(b) ~~Clothing Supplied~~

Date 11-7-19

*Am Johnston*  
O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R2314 to his home

H. Magrawelton and Release Certificate No. 3474 issued.

Date 11-7-19

J. A. Snowcraft  
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 8-8-19

Date 11-7-19

H. M. H.  
Depot Paymaster.

Discharge approved for 25-7-19

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		" 6
B 179c	B 120	M 93		

2 Form B

Date 11-7-19

J. A. Snowcraft  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer in Charge Records,  
Board of Pension Commissioners.

with following additional documents:

**Eligible for War Service Gratuity**

**JUL 25 1919**

Date .....

K. R. Cooper  
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.

*Matthews H*

Signature of Man.

*J. J. Newbapt*  
Signature of the Vocational Officer or his Representative.

Reg. No. 4783

Place

*Al-john*

Date

*11-7-19*

191



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

## MEDICAL HISTORY

Surname Matthews OF Christian Name Rubert

Table I.—GENERAL TABLE.

Birthplace:—Parish Mungretowna County Uppea

	<u>SPECIAL RESERVE.</u>		<u>REGULAR ARMY.</u>	
	on	at	on	at
Examined .....	29 <sup>th</sup> day of <u>Oct</u> 1918	St. James	day of	191
Declared Age .....	27	years — days	years	days
Trade or Occupation .....	<u>Lumberman</u>			
Height .....	5	feet $5\frac{1}{2}$ inches	feet	inches
Weight .....	127	lbs.	lbs.	lbs.
Chest Measurement {	35	inches	inches	inches
	5	inches	inches	inches
Physical Development .....	Right	Left	Right	Left
Vaccination Marks {	/		12 cas	
	Arm .....	Number .....	Arm .....	Number .....
When Vaccinated .....	<u>4 yrs ago</u>			
Vision .....	R.E.—V=	<u>6/6</u>	R.E.—V=	=
	L.E.—V=	<u>6/6</u>	L.E.—V=	=
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>L. Matthews</u>			
(Rank)	<u>Major</u>			
	Medical Officer.		Medical Officer.	
Enlisted .....	at	St. James	at	St. James
	on	29 <sup>th</sup> day of <u>Apr</u> 1918	on	day of 191
Joined on Enlistment .....	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>The Royal</u>	<u>4783</u>	<u>Uppea</u>	
Transferred to .....				
Became non-effective by .....	on	day of	191	on
(Signature)				
(Rank)				

Table II.—Only for admission to hospital or to the sick list in 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 case of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
Heilses	24	4	19	17	6	19	monoc.	55	Aut. spol. leuk. G. found in Dress. Injection. P.S. Penicamp. Borjies. prot. homog. Fil. t. Urin. anal	D. V. Lamb C. M. M.





# 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 Hubert.*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4763*

Intended address *Musgravetown*

Height on discharge *5* Feet *6*

Color of hair on discharge *Black*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks *—*

Figure on discharge *Medium*

Christian name of Father *George.*

Christian name of Mother *Ethel*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Musgravetown Sept. 22, 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)

*Hubert Matthews* (Rank) *Pte*

Station *ST. JOHN'S.*

Date *7-7-19*

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

Station



Date

Medical Officer i/c Hospital.  
Unit or Command Depot.

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

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

1. Unit and Corps..... *Royal Newfoundland*
2. Regtl. No. *4183* 3. Rank..... *Sgt*
4. Name *Matthew* *Hubert*  
(Surname) (Christian Names)
5. Age last birthday..... *23*
6. Posted for duty on..... at.....  
in category (or grade).....
7. Former Trade or Occupation }  
7a. If the soldier claims previous service in Army, he should state—  
(a) Former Regts. or Corps ;  
with Regtl. Nos. (b) Date of Discharge ;  
(c) Cause of Discharge.  
(d) Particulars of Pension or Gratuity (if any)
8. If the disability is an injury was it caused  
(a) in action (b) on field service  
(c) on duty (d) off duty ?
9. If a Court of Inquiry was held on an injury state :—  
(a) When  
(b) Where  
(c) Opinion of Court

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

### Statement of Case.

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

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

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

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

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

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

*no disability claimed.*

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

20. Do you recommend—  
 (a) Discharge as permanently unfit?  
 (b) Change to United Kingdom?

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

*Repatriation*

*W. E. Procuier. Capt. Ramo*  
 Medical Officer in charge of case.

Station *Hazeley Down*  
 Date *27-3-19*

\* 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





August 16, 1919

Mr. Hubert Matthews,  
Musgravetown, B.B.

Dear Sir:-

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

Yours truly,

Captain & Paymaster.



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... *Robert* ..... 2. Surname... *Matthew* .....

3. Rank... *Pte* ..... 4. Regtl. No. *4783* .....

6. Address in full to which future payments of gratuity are to be forwarded... *Margaret town B.B.* .....

6. Date of enlistment in the Regiment... *Apr 20/18* .....

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

8. Relationship of such dependents... *mother* .....

9. Address in full of such dependents... *Margaret town B.B.* .....

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? .....

11. Were you on active service only in Nfld. If so, give dates and particulars of such service... *overseas* .....

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

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

*no*

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.

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

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

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.

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

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

19. Are you now serving in the R.F.C.? *no* If not give:- (a) Date of discharge *Aug 21/18* (b) Reason for discharge *Demob*

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

*yes Germany, Belgium, France*

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.



# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B. 121.  
39.

Regiment of Royal Newfoundland

Number of Sheet 1

Signature of O. C. Company J. James

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.		Age on	years	months	
4783	<u>Matthews</u>	22			
Joined	Date	Place and Date of Enlistment		Religion	
Joined	Date	29.4.14		Method	
Joined	Date	Period of		Place of Birth	
Joined	Date			with Colours	years.
		with Reserve	years.	B.D.	

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</u>	<u>23.10.18</u>	<u>Pte</u>		Absent without leave about 22.59. about 23. 10. 18 to 12.30. 19.18	<u>W. H. H. H.</u>	<u>Expulsion of 1 day pay</u>		<u>Capt. Emerson</u>	<u>Expulsion of 1 day pay</u>

To be carried over

C.R. 4780

Army Form B. 178a

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

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

1. Unit and Corps. *Royal Artillery*
2. Regt. No. *H.T. 85* 3. Rank. *Pvt*
4. Name *Matthews* *Hubert*  
(Surname) (Christian Names)
5. Age last birthday. *23*
6. Posted for duty on..... at.....  
in category (or grade).....
7. Former Trade or Occupation }  
7a. If the soldier claims previous service in Army, he should state—  
(a) Former Regts. or Corps; with Regt. Nos.  
(b) Date of Discharge;  
(c) Cause of Discharge.
8. If the disability is an injury was it caused  
(a) in action (b) on field service  
(c) on duty (d) off duty?
9. If a Court of Inquiry was held on an injury state :—  
(a) When (b) Where (c) Opinion of Court  
(d) Particulars of Pension or Gratuity (if any)

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

### Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
11. Date of origin of disability. *nil*
12. Place of origin of disability. *nil*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

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

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

15. What is his present condition?

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

*no complaints of no disability*

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

20. Do you recommend—

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

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

*Repatriation*

*W.S. Procuier. Capt RMC*  
 Medical Officer in charge of case.

Station *Haylesdown*

Date *18-3-19*

\* 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



# The Royal Newfoundland Regiment

## DEMobilIZATION OF

Reg. No. 785 Rank Plt Name Matthews  
 Date of Enlistment 29-11-18 Address Musgrave St District Bonaville  
 Occupation Lumberman Classification for Discharge T4 Medical Category A.1  
 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		" 6
B 179c	B 120	M 93		

Date 10-7-19

H.W.S.A.  
O. C. Discharge Depot.

### PARTICULARS FOR DEMobilIZATION

#### 1. Civil Re-Establishment.

I am ..... in a position to resume civilian occupation Hubert Matthews  
with Newman mach

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~~ .....

Date 11-7-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 22314..... to his home at Wagawagawtown and Release Certificate No. 3474 issued.

Date 11-7-19

*J. A. Snow*  
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 8-5-19

Date 11-7-19

*J. A. Snow*  
Depot Paymaster

Discharge approved for 25-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P136	B 268	B 121	N.F. Med.	D.F. 1
F 178	W 3494	B 122	Board 1st	" 2
F 178a	D 400A	B 194	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

*2 Form B*

D 11-7-19

*J. A. Snow*  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer in Charge Records,  
Board of Pension Commissioners.

with following additional documents.

**Eligible for War Service Gratuity**

Date JUL 25 1919

*L. R. Cooper*  
O. C. Discharge Depot.

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

Date 11-7-19

*W. H. T.*



