



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5072 Name William A. Mathew Corps Capt

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. William A. Mathew
2. What is your full Address? 2. St. Johns, Nfld.
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 22 Years Months
5. What is your Trade or Calling? 5. None
6. Are you Married? 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7.
8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
9. Are you willing to be enlisted for General Service? 9. 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? 11. Yes

I, William A. Mathew 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.

..... SIGNATURE OF RECRUIT.

W. A. Mathew Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, William A. Mathew 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.....

on this 16 day of May 1915

Signature of Attesting Officer W. A. Mathew

†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 May 16 1915

Place St. Johns, Nfld.

..... 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. *5072* Name *Nathan A Matthews* Corps *C*

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. *Nathan A Matthews*
2. What is your full Address? 2. *Burgess La Parle*
3. Are you a British Subject? 3. *Yes*
4. What is your age? 4. *35* Years Months
5. What is your Trade or Calling? 5. *Clerk*
6. Are you Married? 6. *No*
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. *No*
8. Are you willing to be vaccinated or re-vaccinated? 8. *Yes*
9. Are you willing to be enlisted for General Service? 9. *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? 11. *Yes*

I, *Nathan A 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.

Nathan A Matthews SIGNATURE OF RECRUIT.
J. C. Raymond Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.
 I, *Nathan A 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
 on this *16* day of *May* 191*8*
C. B. Banks 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 complied with. I accordingly approve, and appoint him to the
 If enlisted by special authority, such will be attached to the original attestation.

Date *May 16* 191*8*
 Place *Sydney* } 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. 5072
Extract from Daily Orders Part II The Royal Newfoundland
Regiment Depot St. John's, dated October 20th 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/s Records from noted date
16-10-19.

5072, Cpl. N. Matthews.

C.R. 5072

Extract from Daily Orders Part II Royal Newfoundland
Newfoundland Regiment dated 29/9/19. (Special).

The Discharge of the undernoted on demobilization
has been APPROVED by O.C. Discharge Depot from noted
date 2/10/19.

5072, Cpl. N. Matthews.

C.R. 5072

Extract from Daily Orders Part II Royal Newfoundland
Regiment, dated 20/9/19. (Special).

Returned from Overseas and reported to Militia Department.
18/9/19.

5072, Cpl. N. Matthews.

C.R. 5072

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

The following embarked "Saturnia" Glasgow to Quebec
Sept. 5th,

Cpl. 5072 Matthews.

C.R. 5072

Extract of General Orders No. 113 Issued from the War & Home
Office, London dated August 18th 1919.

The following promotions are made subject to the
approval of the Minister of Militia.

5072 Pte. N. Matthews

to A/Cpl 1/8/19

C.R. 5072

Extract from Casualties received from Pay And Record Office
London, Jan.13,1919.

The undermentioned from the 2nd Bn., reported at
the P.&.R.O., on 3-1-19 for duty.

5072 Pte. N. Matthews.

C.R.

5072

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.

#5072 Pte. Nathan Matthews.

C.R. 5072

Extract from Daily Orders part 11, from Unit The Royal
H.L.C. Regt. St. John's, dated May 17th, 1918

#5072 Pte. N. Matthew.

Attested for General Service with the Royal H.L.C. Regt .
from 16.5.18

A. Matthews

C.R. 5072

PRO

U

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

MEDICAL HISTORY

OF

Surname

Matthews

Christian Name

Nathan A.

Depot 5072

Table I.—GENERAL TABLE.

Birthplace—Parish

Burgoo

County

Nfld

	SPECIAL RESERVE		REGULAR ARMY	
	on	at	on	at
Examined	16 day of May 1918	S. Johns	day of	191
Declared Age	25 years	days	years	days
Trade or Occupation	Clerk			
Height	5 feet 8 1/2 inches		feet	inches
Weight	145 lbs.		lbs.	lbs.
Chest Measurement	Girth when fully expanded	37 inches		inches
	Range of Expansion	3 inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
		1 scar		
When Vaccinated	5 yrs ago			
Vision	R.E.—V=	6/6	R.E.—V=	
	L.E.—V=	6/6	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)	Samuel P. [Signature]			
(Rank)	[Signature] Medical Officer.			Medical Officer.
Enlisted	at	S. Johns	at	
	on	16 day of May 1918	on	day of 191
	Corps.		Corps.	Regtl. No.
Joined on Enlistment	Medical Depot 5072			
	Nfld Depot			
Transferred to				
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				

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 Newfld.*..... 7. Former Trade or Occupation - } *Clerk*
2. Regtl. No. *58721* 3. Rank..... 7a. If the soldier claims previous service in Army, he should state—
4. Name *Matthews W.A.*..... (a) Former Regts. or Corps ;
(Surname) (Christian Names) with Regtl. Nos.
5. Age last birthday... *26*.....
6. Posted for duty on *May 16/18* at *S. Johns*.....
in category (or grade).....
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) Date of Discharge ;
(b) Where (c) Cause of Discharge.
(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. 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.
12. Place of origin of disability.
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.

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 field injuries, eye, ear, nose and throat, diarrhoea, 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 Wright in all cases when it is likely to afford evidence of the progress of the 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

Cap R.A.M.C

Station *H. D. Camp.*

Medical Officer in charge of case.

Date

* 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.

OPINION OF THE MEDICAL BOARD.

NOTES.—(1) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

21. Give diagnosis and particulars of:—

- (a) Any disability claimed or discovered.
 (b) The present condition thereof.

22. 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 part of the soldier .. .. . | ..... | ..... |
- Give details:

- 22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

23. Is the disability in a final stationary condition? If not

- (a) How long is the present degree of disability likely to last?
 (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

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

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?
- OR
- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalidated at a foreign station)?

Opinion of Military Member in case of disagreement

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures:—

Station *Hazley D Camp* } President or Chairman.
 Date } Members.

Discharge Approved under Para. 392 (xvi) King's Regulations.

Station } Only applicable in cases of Patients in Hospitals.
 Date } Officer-in charge, Central Hospital.

OR

Discharge Approved under Para. 392 () King's Regulations.
 or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T).)

Station
 Date
 O.C. Discharge Centre.

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 New York*..... 7. Former Trade } *Clerk*
or Occupation }
2. Regtl. No. *5074* 3. Rank..... 7a. If the soldier claims previous service in Army, he should state—
4. Name *Matthews* *H. A.*..... (a) Former Regts. or Corps ;
(Surname) (Christian Names) with Regtl. Nos.
5. Age last birthday... *26*.....
6. Posted for duty on *May 16/18* at *St. John's*.....
in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty ? (b) Date of Discharge ;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When (d) Particulars of Pension or Gratuity
(b) Where (if any)
(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.
12. Place of origin of disability.
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.

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 amputations 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.)

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 invaded at Foreign Stations.

Station *Hayles, D. Camp*
Date

Reparation

Capt. R. A. [Signature]
Medical Officer in charge of case.

OPINION OF THE MEDICAL BOARD.

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

21. Give diagnosis and particulars of:—

- (a) Any disability claimed or discovered.
(b) The present condition thereof.

22. 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 part of the soldier | | |
- Give details:

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

23. Is the disability in a final stationary condition? If not

- (a) How long is the present degree of disability likely to last?
(b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24g.

* 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.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Wide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

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

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

Opinion of Military Member in case of disagreement.

OR

- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures:—

Station Hazley R. Camp } President or Chairman.
 Date } Members.

Discharge Approved under Para. 392 (xvi) King's Regulations.

Station } Only applicable in cases of Patients in Hospitals.
 Date } Officer in charge, Central Hospital.

OR

Discharge Approved under Para. 392 () King's Regulations.
 or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station
 Date O.C. Discharge Centre.

24
Gen. No. 3704
18 778
11133/M1110-3-17-100,000 Pads. (E 778)
17. & 101.—W5 11133/M1110-3-17-100,000 Pads. (E 778)
EP5049

If a General Mobilization is ordered every soldier on pass must return immediately to his unit without waiting for instructions.

No. 22

Regiment ROYAL NEWFOUNDLAND REGIMENT, Army Form B. 295.

PASS.

(In pads of 100.)

No. 2072 (Rank) Pte. (Name) Matthews

has permission to be absent from his quarters, from

6 P.M. 4-4-19 to 9.30 A.M. 9-4-19

for the purpose of attending to

London
NEWFOUNDLAND CONTINGENT

(Station) VICTORIA ST. LONDON, E.W.
4 APR 1919
(Date) PAY & RECORD OFFICE

[Signature]
Commanding
CHIEF PAYMASTER & OFFICER IN CHARGE RECORDS
[P.T.O.]

CROWN COPYRIGHT RESERVED.

SIGNALLER'S RECORD SHEET.

Rgtl. No. 5072 Rank Pte Name & Initial Matthews - T.

Unit Royal Newfoundland Regt.

STANDARD TESTS. (Details overleaf.)

No.	Map Reading		Electrical Instrument		Signal Training	
	Date	Officer's Sig.	Date	Officer's Sig.	Date	Officer's Sig.
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						

Qualified in all Standard Tests
Whitty Capt

CLASSIFICATION TESTS.

Instrument	Flag	Buzzer	Lamp	Slutter	Semaphore	Date
Sending	100%	100%	98%	99%	%	
Reading	100%	100%	98%	100%	%	

* R.A. Signaller only.

Classified as Pte Class Signaller at Hayley Down Camp.
 Date 9/12/18 Signature of Classifying Officer Whitty Capt
 Reclassified as _____ Class Signaller at _____
 Date _____ Signature of Classifying Officer _____

Courses

Other qualifications

NOTE.—This Sheet is to be used as an Office Record during training, and on completion pasted in the Signaller's A.B. 64.

MAP READING. STANDARD TESTS.

No. of Test.	DESCRIPTION OF TEST.
1.	Point out on a map the conventional signs of objects enumerated.
2.	From a map to point out on the ground points and objects selected on the map, and vice versa.
3.	Measure shortest distance from point A to B on a map according to scale.
4.	Set a map without a compass (a) by the ground. (b) by the sun and stars.
5.	Describe a point on a squared map by means of a map reference, and vice versa.
6.	Measure on a map the distance from one point to another by road.
7.	Set a map by compass.
8.	Determine if a point A is visible from point B by studying contours, but without drawing a section.
9.	Take a bearing with a protractor off a map.
10.	Convert a magnetic bearing into true bearing, and vice versa.
11.	Take a bearing with a compass and measure it on a map with protractor.

SIGNAL TRAINING. STANDARD TESTS.

1.	Accept a message including counting and filling in preamble.
2.	Fill in Sent Column on message form.
3.	Fill in Signal Register.
4.	Fill in Received Column on message form.
5.	Send and receive a verbal message on the telephone.
6.	Call up with (a) flag, known and unknown station. (b) buzzer. (c) ringing phone.
7.	Put through a call on a 4 plus 3 switch unit.
8.	VISUAL. Carry out duties of reader. (For R.A. Signallers includes Semaphore.)
9.	" " " caller.
10.	" " " writer.
11.	" " " answerer.
12.	" " " answer-reader.
13.	" " " sender.
14.	LUCAS LAMP. Set up and align.
15.	" Replace cells.
16.	" Connect up cells.
17.	" Trace the electric circuit with a view to locating a fault.
18.	" Change a bulb.
19.	" Change nightshades.
20.	" Test flexible cord.
21.	TELESCOPE. Set up on stand and align.
22.	" Focus on a blue flag unresolvable to the unaided eye and read a message.
23.	HELIOGRAPH. Set up and align with vane.
24.	" Change to duplex and align.
25.	" Regulate the heat.

ELECTRICAL INSTRUMENTS TESTS.

CELLS.	MISCELLANEOUS.
1. Render active.	14. Connect up Fullerphone and Telephone on same circuit so that they may be used at the same time without interruption.
2. Connect in series and parallel.	15. 4 plus 3 Buzzer Unit. Connect up.
TELEPHONE D. III.	
3. Connect and insert cells and cell connections.	
4. Test instrument.	
5. Localise and remedy the following faults:—	
(a) Adjustment of buzzer.	
(b) Dirty key contact.	
(c) Dirty Pressel switch contact.	
(d) Receiver discs and washers.	
(e) Microphone capsule.	
6. Connect up earth return, metallic return, and use of condenser terminal.	
FULLERPHONE.	
7. Connect and insert cells and cell connections.	
8. Test instrument.	
9. Localise and remedy the following faults:—	
(a) Adjust No. 1 on (A) contact of armature.	
(b) Adjust No. 2 or (B) contact of armature.	
(c) Dirty contacts.	
VIBRATOR, R.A.	
*10. Connect up hand set and cell connections.	
*11. Test instrument.	
*12. Localise and remedy the following faults:—	
(a) Adjustment of buzzer.	
(b) Dirty key contact.	
(c) Dirty Pressel switch contact.	
(d) Receiver disc and washers.	
(e) Microphone capsule.	
13. Connect up earth and metallic return.	
	LINEMAN'S DUTIES.
	16. Identify lines by labels.
	17. Draw and explain a simple circuit diagram.
	18. Draw and explain a simple route diagram.
	19. Make a reef knot, barrel hitch and clove hitch.
	20. Joint and insulate (a) D. II. } Single or (b) D. III. } Twisted, (c) D. V. } (d) D. twin Mk. III.
	21. Make simple joint in enamelled wire or single wire.
	22. Lay cable (a) in open country. (b) in trenches.
	23. Tap in on (a) metallic circuit, (b) earth circuit, and determine on which side the fault is.
	24. Test with Q. and I. detector— (a) cells; (b) a circuit, for disconnection earth and contact; (c) In order to pick up wires in a rope.

* R.A. only.

This space to be pasted in A.B. 64.

Matthews, E

507

Ray - Sept.

Oct 18, 1919

#5072 Epl. Nathan A. Matthews,
Burgoo

Dear Sir:-

Please find enclosed Discharge Certificate

No. 3864.

Yours truly,

Major
Paymaster.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 2072 Rank Cpl Name Matthews Nathan
 Intended place of residence Burgeo
2. Occupation Black
 Classification of soldier H Medical Category PT
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 19-9-19

J. A. Snowcroft
 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 19-9-19

Nathan Matthews
 Signature of soldier

J. A. Snowcroft
 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 19-9-19

Nathan Matthews
 Signature of soldier

J. W. Chaucey
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 18-5-18 No. of days on Military
 Discharged from service 2-10-19 Plus 14 days Service 587
517

APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S

Date 2-10-19
20-9-19

J. A. Snowcroft
 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

Date October 16/1919

J. M. Bowley Major
 Officer in Charge
 The Royal Newfoundland Regiment

Q-2 B 2079/3844

16
30
31
30
16
17/4

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. 5072 _____

Name Mauteyve R. _____ Capt.

Address Burgo _____

Present Medical Category A1 _____

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

It is hereby certified that this soldier
has been before a Travelling Medical
Board and has been classified as
E for Discharge on Demobilisa-
tion. Medical category A1 Members of Board
19.9.19 J. A. Brown
Date of T.M.B. Captain
Assistant Adjutant
Discharge Depot—Newfoundland

J. A. Brown
O. C. Discharge Depot.

H. A. Brown
Senior Medical Officer

D. W. Burden
M.O. Depot

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 5072 Rank Cpl Name Nathan Matthews
 Date of Enlistment 18-5-1918 Address Burges District Burges, H. Dist.
 Occupation Clerk Classification for Discharge E 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 <u>1</u>	B 1915	do 2nd	" 3	<u>3</u>
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B 179c	B 120	M 93			

Date 19-9-19 J. A. Snow Cpl
O. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Nathan 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

Date 19-9-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 92542 to his home
 at Bungeo and Release Certificate No. 3846 issued.

Date 19-9-19

J. H. Knowles
 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 16-10-19

Date 19-9-19

J. H. Knowles
 Depot Paymaster.

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT.

Discharge approved for 2-10-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36.....	B 268.....	B 121.....	N.F. Med.....	D.F. 1.....	1
F 178.....	W 3494.....	B 122.....	Board 1st.....	" 2.....	1
R 178a.....	D 400A.....	B 1915.....	do 2nd.....	" 3.....	2
B 179.....	D 400B.....	Form L.....	do 3rd.....	" 4.....	from B
B 179a.....	D 400C.....	Form K.....	do 4th.....	" 5.....	
B 179b.....	B 103.....	ME 2.....		" 6.....	
B 179c.....	B 120.....	M 93.....			

Date 19-9-19

J. H. Knowles
 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 20-9-19

J. H. Knowles
 O. C. Discharge Depot.

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

Date

8380

Burgess
Jan 8th 1920The O/c. War Service Gratuity
Dear Sir

I must inform you, that my discharge was confirmed on the 2nd of Oct. Since that time I have not received any thing of my Gratuity. While I was at H^qs Quarters St John's. I filled in my papers, so as not to cause you the trouble of having to send them to me for same. I have been away from home ever since Sept 14th and on arriving yesterday found that nothing had been sent in regards to my W. S. G. Trusting this will be looked up, and forwarded on to me as soon possible, as I am leaving this country in three or four months from date.

I remain

Yours Truly

Ex 5072. Capt. W. Matthews

Burgess

Dist of Burgess & La. Pile

D 276 $\frac{40}{x}$

Cordially

W. S. G.

Forwarding today

9/1/20

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.

Nathan Swatten

Signature of Man.

Reg. No.

5072

J. H. Snow Capt.
Signature of the Vocational Officer or his Representative.

Place

St. John's

Date

19-9-19

191



Descriptive Return of a Soldier Discharged on Account of Disability

INSTRUCTIONS—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the 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 *Nathan Matthews*

Regiment from which discharged *Royal Newfoundland*

Regimental number *5072*

Intended address *Buycer.*

Height on discharge *5 Feet 10 1/2*

Color of hair on discharge *Dark Brown*

Complexion *Fair*

Color of eyes *Grey*

Descriptive Marks *None*

Figure on discharge *Good*

Christian name of Father *Wm*

Christian name of Mother *Namah*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Buycer 12-3-1893*

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) *Nathan Matthews* *Lt.*
(Rank)

Station _____ Date *19-9-19*

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



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

Station *St John's Newfoundland* Date _____

ST. JOHN'S, Sep 19th /19

Royal Newfoundland Regiment.

Billeting Account,

To Cpl N Mathews

Billeting Soldiers as undermentioned

from Sep 20th /19 to Oct 2nd /19

Nathan Mathews

5022 Cpl N Mathews 13 80

B. & M.
CBH.

ACCOUNT

CEL. NO. 11339

IND. LEDGER

GEN. LEDGER

COMM. LEDGER

Certified correct for \$ 13 80

J. A. Ingle
R-J Billeting Officer.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 34 90

Feb 9 19 20

Received from the First Newfoundland Regiment
the sum of Sixty four 9⁰⁰ Dollars.
~~on account~~ of Pay. Ed

Ed M & Burger

Ch. No. <u>28217</u>	Initials <u>Ed</u>
Pay Ledger <u>355</u>	Initials <u>WR</u>
Gen. Ledger.....	Initials.....

Regtl. No..... Rank.....

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 34 90

Feb 9 19 20

Received from the First Newfoundland Regiment
the sum of Sixty four 9 Dollars.
~~on account~~ of Pay.

Wm G. M. & Burger

Ch. No. 28217	Initials. <u>EW</u>
Pay Ledger 355	Initials. <u>WR</u>
Gen. Ledger.....	Initials.....

Regtl. No. Rank

No. 5072

Rank *P/O*

Name *N. Matthews*

Burges

C.R. 15072

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.

Name,..... *Nathan A. Matthews*

Date..... *8-1-20*

Place..... *Burgen*



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 15

1921.

The accompanying ~~Victory Medal~~ British War Medal

is/are forwarded herewith to

Nathan A. Matthews

in respect of his service as No. 5072 Rank Pte.

Name N.A. Matthews Royal Nfld. Regt.

Receipt of the same should be acknowledged hereon.

Received Oct 24th

Signature Philip Matthews

Date Oct 24th

Address Burgeo

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121.
39.

Regiment of

Royal Newfoundland

Number of Sheet one

Signature of O. C. Company

Charles Hunt

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	
No.	<u>5072 Matthew M. A.</u>	Age on	<u>25</u> years <u>0</u> months	<u>Clerk</u>		
Joined Date		Place and Date of Enlistment	<u>St. John's</u>	Religion		
Joined Date		Period of } with Colours <u>1544</u> years. with Reserve <u>1865</u> years.	<u>16.5.18</u>	<u>C of E</u>		
Joined Date			Place of Birth	<u>Burgeo</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>Demobilized</u>	<u>St John's</u>	<u>16</u>	<u>10</u>		
--	--	--	--	--------------------	------------------	-----------	-----------	--	--

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

9 5072

DEMOBILIZATION OF

Reg. No. 5072 Rank Capt Name Nathan Matthews
 Date of Enlistment 18-5-1918 Address Burges District Burges, K. Dist.
 Occupation Clerk Classification for Discharge E Medical Category A1
 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.....	1
B 178.....	W 3494.....	B 122.....	Board 1st.....	" 2.....	
B 178a.....	D 400A.....	B 1915.....	do 2nd.....	" 3.....	3
B 179.....	D 400B.....	Form L.....	do 3rd.....	" 4.....	
B 179a.....	D 400C.....	Form K.....	do 4th.....	" 5.....	
B 179b.....	B 103.....	ME 2.....		" 6.....	
B 179c.....	B 120.....	M 93.....			

Date 19-9-19 J.P. Snow Capt
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Nathan 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 J.P. Snow Capt

Date 19-9-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 92542 to his home at Bunges and Release Certificate No. 3346 issued.

Date 19-9-19

J. H. Brown
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 16-10-19

Date 19-9-19

J. H. Brown
Depot Paymaster.

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT.

Discharge approved for 2-10-19

Forwarded with following documents to O.C Discharge Depot.

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

Date 19-9-19

J. H. Brown
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 20-9-19

J. H. Brown
O. C. Discharge Depot.

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

Date Sept-30-19