

# First Newfoundland Regiment

## ATTESTATION PAPER

Regimental No. 1206

Name in full Ernest May Age 19

Address Bell Island.

Married  Single  Height 5' 8" Weight 150

Color Dark Hair Brown Eyes Blue

Other distinguishing marks none

Nearest relative Mother (Jessie)

Address Bell Island.

Dependents none

Occupation Miner Present Wage \$6.00 per month

Previous service \_\_\_\_\_

Decorations \_\_\_\_\_

General Remarks \_\_\_\_\_

Date of Enlistment March 8/15

I, Ernest May, do sincerely promise and swear that I will be faithful and bear true allegiance to His Majesty, and that I will faithfully serve His Majesty in any place where I may be needed (or in the Colony of Newfoundland, as the case may be), against all His enemies and opposers whatsoever, according to the condition of my service.

Declared before me this 16 day  
of March 1914

Ernest May  
Ernest May



**DESCRIPTIVE REPORT ON ENLISTMENT.**

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

Reg. No. 1006

Name Ernest May

Apparent age 19 years \_\_\_\_\_ months. Height 5 feet 8 inches.

Chest measurement { Girth when fully expanded \_\_\_\_\_ inches.  
 { Range of expansion \_\_\_\_\_ inches.

Distinctive marks Color: Dark. Hair: Brown. Eyes: Blue

**INFORMATION SUPPLIED BY RECRUIT.**

Name and Address of next of kin Jessie May, Doll Island, Nfld.

\_\_\_\_\_ | Relationship Mother

**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	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pay on		Service in Re-serve not allowed to reckon towards U. C. Pay		Signature of Officers certifying correctness of entries
					years	days	years	days	
Service towards limited engagement reckons from <u>8/3/15</u>									<u>Discharged July 30/1919</u> 
Joined at <u>St. John's</u> on <u>8 March 1915.</u>									
Total Service forfeited as above .. .. .									
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days									
" " " Pension " _____ ( " ) _____ " _____									

E. May

C.R.

1206.

P.L.O.

Admitted 5.7.16

Army Form W. 3016.

No. \_\_\_\_\_

Date August 1<sup>st</sup> 1916

(1) To the Officer i/c Records,

58 Victoria St  
SW (Station.)

(2) The Officer Commanding,

Infed Contingent  
Camp (Station).

(3) The Paymaster,

58 Victoria St  
SW (Station).

Regimental No. 1206

Rank and Name Pte May E W.

Regiment or Corps 1<sup>st</sup> Newfoundland Contingent

has been granted a furlough from Aug 1<sup>st</sup> to Aug 10<sup>th</sup>.

His address while on leave will be:—

58 Victoria St SW

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

I consider he is fit for ~~the~~ and likely to be fit for service overseas  
Light duty. within 3 months -

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

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

\* Strike out that which is inapplicable.

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



No. 1206

Rank

Private

Name

May E.

Pay	F.A.	Wkg	Total
100	10	20	160
Less Allotment			mit
Net Rate			160

N.F.P/33

H.N.

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	\$	%	£ s d			
		From	To	From		To	From					To	From	To	
Balance					Balance	21 <sup>12</sup> / <sub>17</sub>								277	10
Acquittance Rolls		25	3	2	Pay @ Net Rate	22 <sup>12</sup> / <sub>17</sub>	27 <sup>12</sup> / <sub>18</sub>	37	H0	40	10	83	17	1	
Hospital <del>Advances</del>		6	0	10	Cooks pay	24 <sup>7</sup> / <sub>18</sub>	27 <sup>12</sup> / <sub>18</sub>	127	50	78	00	16	2	7	
A.B. 64. <sup>70 francs</sup>		2	13	8	R.A. B. <sup>1/9</sup>	26 <sup>12</sup> / <sub>18</sub>	9 <sup>12</sup> / <sub>18</sub>	14	1/9					1	4
P.&R.O. <sup>of marks</sup> Payments		1	16	0											
forbited pay			4	6											
Cash '102	27 <sup>12</sup> / <sub>18</sub>	50	00	0											
Cash Receipt 242	3 <sup>12</sup> / <sub>17</sub>	30	00	0											

#128-12-0.

35-18-2  
 27/12/18

## SYPHILIS CASE-SHEET.

Regtl. No. 1206 Rank and Name Pte May Ernest Corps 2/1 Rfd.  
 Placed on Syphilis Register at 47<sup>th</sup> Sco Gen H<sup>Q</sup> on 18.5.17 No. in Register  
 Disease contracted at Ayr. Primary sore appeared on (date) 12.4.17.

## CONDITION WHEN PLACED ON REGISTER.

Primary sore—character and site sore under foreskin.  
 Lymphatic glands glands indurated  
 Skin (nature and distribution of rash) macular syphilide over body  
 Mucous membranes mucous patches on throat  
 Other symptoms sore on penis & scrotum

Examination of exudate from sore—Spirochaeta Pallida (present or absent)

Examination of blood serum—Method employed (original or modification)

Wassermann reaction Result (positive or negative)

47<sup>th</sup> Sco Gen H<sup>Q</sup>

Station Gen Gen Date 18.7.17 Signature of M.O. Station Gen Gen

Struck off Syphilis Register at \_\_\_\_\_ on \_\_\_\_\_

Cause of being struck off Register { (a) Recovered  
 (b) Transferred to Army Reserve  
 (c) Discharged from Army }

Station \_\_\_\_\_ Date \_\_\_\_\_ Signature of M.O. \_\_\_\_\_



N.B.—On completion of a course of treatment a red line to be drawn across the page, and the date when the next blood test is due to be entered in red ink below the line, e.g., "Blood test due 15.3.14."  
The date and result of the blood test to be entered; and if negative, the date on which the next blood test is due to be also entered.

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Weight (stated, without boots—lb.)	Urine Normal (N.) Albumen (Alb.)	Wassermann Reaction Method (Original (O.) Modification (M.)	Treatment				Signature of M.O.  (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialed)	
						Arsenical	Mercurial	Other Methods	Intra-venous Injection. Dose in grammes		
											Neo-Salvarsan
4 <sup>th</sup> Sec. San FP Lancaster	18-5-17	Admitted 4 <sup>th</sup> Sec. San H <sup>2</sup> Glasgow. Acute of hot under tension. Sores on penis & scrotum. Macular syphilitide over body. Stands indicated. Mucous patches in mouth									
	19-5-17			N		3gr					
	22-5-17			N		3gr					
	27-5-17			N		3gr					
	3-6-17					"					
	10-5-17			N		4gr					
	17-5-17			N		5gr					
	24-5-17					"					
	1-7-17			N		5gr					
	8-7-17			N		5gr					
	10-7-17					5gr					
	-	No action taken.			0	-					
	Next	Blood test due									
											10-10-1917

*Depot 1206*  
 Registered in the  
 MAY 31 1926  
 PAY & RECORD OFFICE

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

**MEDICAL HISTORY**

Surname *May* OF Christian Name *Barnest*

Table 1.—GENERAL TABLE.

Birthplace:—Parish..... County.....

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	at	on	at
Examined	6 day of <i>March</i> 1915	<i>St John's</i>	day of	191
Declared Age	19 years	days	years	days
Trade or Occupation	<i>miner</i>			
Height	5 feet	8 inches	feet	inches
Weight		154 lbs.		lbs.
Chest Measurement	Girth when fully expanded	33 inches		inches
	Range of expansion	37 inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm			
	Number			
When Vaccinated	<i>1909</i>			
Vision	R.E.—V=	<i>20/20</i>	R.E.—V=	
	L.E.—V=	<i>20/20</i>	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to Cause Rejection	(b)		(b)	
Approved by (Signature)	<i>L. P. Pearson</i>			
(Rank)	<i>Capt</i>			
	Medical Officer.			Medical Officer.
Enlisted	at <i>St John's</i>	at		
	on 8 day of <i>March</i> 1915	on	day of	191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<i>1st Rifle</i>	<i>1206</i>		
Transferred to				
Became non-effective by				
	on	day of	191	on
			day of	191
(Signature)				
(Rank)				

13 AUG 1917  
 PAY & RECORD OFFICE

*UK N 1140 212*

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

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and readmissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
8 <sup>th</sup> LONDON GENERAL HOSPITAL WANDSWORTH.	6	7	16	1	8	16	S.I.W. Left leg IX. 1. subject	27	hem. hand. Superficial S.I.W. left leg wound healed. for discharge	H. W. K. H. H. H. Capt. R. H. H. H.
4 <sup>th</sup> SCOTTISH GENERAL HOSPITAL, STOBHILL, GLASGOW	18	5	17	11	7	17	Cyphitis	55	2-8 pm. Klenison x 8 per 14.	Dr. J. C. H. H. H.

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 Signature
29. 2. 16.	Vaccination. R.P. Graham. de Rourke.

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
St Johns 17					

ORIGINAL



NEWFOUNDLAND CONTINGENT

CANCELLATION OF ALLOTMENT

I, (No.) 1166 (Rank) Private (Name) Ernest May  
 hereby apply for cancellation of Allotment made by me on  
 N.F. 1165 dated March 1917 April 24<sup>th</sup> in favour  
 of Mr. Raffell (Alaska) for \$ — cts 60  
 per diem. Such cancellation to take place on the  
Thirty-first day of July 1917.

I agree to accept all risks and consequences of this application  
 failing to reach headquarters, St. John's, by mail in time to become  
 operative at above nominated cancelling date; and that in the event  
 of such non-delivery by mail, and thereby the Allotment continuing to  
 be paid to the Allottee, I also agree to such further stoppage as may  
 be thereby necessary being made against me in the Pay Books, or other-  
 wise to refund such overdrawn amount or amounts.

Dated at Barraboo Camp  
July 26<sup>th</sup> 1917

Ernest May  
 Allotter.

Approved and Witnessed,

J. Heyman  
 1st O.C. "A" Company.

<p>NOTED  <u>W. Martin</u>          3/77</p>	<p>NOTED  <u>A. J. Clancy</u>          3/77</p>
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To be made out in TRIPLICATE and sent to the Paymaster & Officer  
 in Charge of Records, who will forward Original to Headquarters by  
 first mail, Duplicate by the following, and retain Triplicate.



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Ernest May, Regl. No. 1206

hereby agree, until further notification by me, and in similar official form to make an Allotment of — Dollars and Sixty Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup> <sub>or</sub> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> <sub>or</sub> Persons concerned, viz :

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
1548	Mother	Mrs. Frederick McFall	Bell Island	- 60
Cancelled 31/7/17				
Total Allotment, \$				- 60

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, countersigned by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

(Sig.) Eric Shyres  
Officer Commanding  
Company

(Sig.) Ernest May  
(Rank) Private

April 10 1915

4000/272  
No. ~~1206/1~~

NEWFOUNDLAND CONTINGENT

N.F.P./79

From: Chief Paymaster & O. 1/c Records,  
Newfoundland Contingent,  
58, Victoria Street,  
London, S.W. 1.

To: Officer Commanding,  
1st Newfoundland Regt.  
~~1st~~ B.E.F.

10th December 1917

23 - 12 - 1917

Subject: 1206, Pts. Ernest May

Receipt hereunder.

With reference to the following telegram (7511) from the Hon. Minister of Militia, received 7/12/17

Officer Comdg. 1st Battn  
1st Newfoundland Regiment

"Pay to 1206 May £1:0:0, Xmas Gift from Dominion Fire Brigade

Received the sum of One  
£100 on account of  
cable remittance from Newfoundland.

Draft £1:0:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Ernest May  
No. 1206 Rank Private

*[Signature]*  
Chief Paymaster & O. 1/c Records.

1206 St. E. May

NEWFOUNDLAND REGIMENT PAY & RECORD OFFICE.	The Paymaster,
Ref. Nos IN	London, S.W.
Rec'd 15 DEC 1917	
Ack'd	
Ref. Nos. OUT	
14000/272 oc/1	
Comd	
P & A. v 7-10-17 9th. N.B.	
H. & C	
B & E	14-12-17.
P.S.	



Reference attached

This man is not on our strength, please.

11<sup>th</sup> St. Newfoundland  
 B. J. J. Fort  
 Captain  
 for

LIEUT. COLONEL  
COMMANDING 2nd BN. NEWFOUNDLAND REGT.



No.

500

# WESTERN UNION

ANGLO-AMERICAN  DIRECT UNITED STATES  
**CABLEGRAM**

Prefix _____ <small>WORDS</small>	Code _____ <small>CHARGE</small>	SENT At _____ To _____ By _____	FOR STAMPS  THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.
<b>VIA WESTERN UNION</b>			

**1/8/18** TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To **E. F. M., MRS. JESSIE HOPTALL, BELL ISLAND,  
(NEWFOUNDLAND)**

**CABLE FIVE POUNDS 1206 ERNEST MAY NEWFOUNDLAND REGIMENT CARE BANK  
MONTREAL LONDON.**

**ERNEST MAY.**



**Authorized,**

**NOT TO BE  
TELEGRAPHED.**

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature \_\_\_\_\_ Address **55, Victoria St., S. W.**

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

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. *Regt. 1st Buffs and 1st Par.* Former Trade or Occupation } *Miner*
2. Regtl. No. *126* 3. Rank..... 7a. If the soldier claims previous service in Army, he should state—
4. Name *M. J. E.* (Surname) (Christian Names) (a) Former Regts. or Corps; with Regtl. Nos.
5. Age last birthday *28*
6. Posted for duty on *May 18/16* 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 (if any)  
(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
- |  |                     |                   |
|--|---------------------|-------------------|
| (i.) Service during the present war .. .. .                | (a) attributable to | (b) aggravated by |
| (ii.) Previous active service.. .. .                       | <del>na</del>       | <del>na</del>     |
| (iii.) Climate in pre-war service .. .. .                  | <del>na</del>       | <del>na</del>     |
| (iv.) Ordinary military service before the war .. .. .     | <del>na</del>       | <del>na</del>     |
| (v.) Serious negligence or misconduct on the man's part. } | V.P. S (Cured)      |                   |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } na.

In all cases such as facial injuries, eye, ear, nose and throat, dislocation, etc., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the usual 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.)*

na  
 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?

na  
 na  
 na  
 na

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. Procurier, Capt RMC*  
 Medical Officer in charge of case.

Station *Hazley & Camp*  
 Date *30/6/19*

\* 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.

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?

Opinion of Military Member in case of disagreement.

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 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 Wesley D Camp ..... { President or Chairman.

Date 11/6/14 ..... } Members.

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

Station ..... } Only applicable in case of Patients in Hospital.

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 ..... O.C. Discharge Centre.

Date .....

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. Regt. Hussarum et al. Former Trade or Occupation } Miner
2. Regt. No. 126 3. Rank..... 7a.  The soldier claims previous service in Army, he should state—
4. Name May E (Surname) (Christian Names) (a) Former Regts. or Corps; with Regt. Nos.
5. Age last birthday 23
6. Posted for duty on May 8/18 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 (if any)  
(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? } *na.*

In all cases with no 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.)*

*Complain of no disability.*

16. Was an operation performed? If so, when and what was its nature? *na.*
17. If not, was an operation advised and declined? *na.*
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? *na.*
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? *na.*

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

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

*D. E. Procuier, Capt RMC*  
 Medical Officer in charge of case.

Station *Wagley S. Camp*

Date *30/6/19*

\* 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.

**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 24.

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 Member, 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 invalided at a foreign station)?

Opinion of Military Member in case of disagreement.

Only to be answered when the soldier is placed in either class 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 *Hayley D Camp* ..... { President or Chairman.  
Date *11/3/49* ..... } Members.

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

Station ..... } Only applicable in cases of Patients in Hospital.  
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.



N.F.P./88.

NEWFOUNDLAND CONTINGENT

TELEGRAM ~~Full-text~~/extract from MINISTER OF MILITIA,

No. \_\_\_\_\_ Dated 29/ 5/19 ( 211), received 30/ 5/ 19

Decoded by J. S. Checked by R.A.P.

Branch Records Acted upon (Initial) \_\_\_\_\_

Acknowledged per No. \_\_\_\_\_

Dated / / \_\_\_\_\_

Please inform-whereabouts of-1206-May-fullstop-

N.F.P./104.

NEWFOUNDLAND CONTINGENT

TRANSLATION ~~full text~~/extract of TELEGRAM to MINISTER OF MILITIA,

No. 213 30/5/19 . M. of M. Reply No. \_\_\_\_\_ d/d \_\_\_\_\_

Coded by \_\_\_\_\_ Branch Records Checked by \_\_\_\_\_

With reference to your telegram 29th May-1206-May-depot-

~~CONFIRMATION~~  
MAILED:

N.F.P./86.

NEWFOUNDLAND CONTINGENT

TELEGRAM ~~Full text~~/extract from MINISTER OF MILITIA,

No. \_\_\_\_\_ Date 29 / 5 19 (211 ), received 30 / 5 19

Decoded by J. S. Checked by R.A.P.

Branch Records Acted upon (Initial) \_\_\_\_\_

Acknowledged per No. \_\_\_\_\_ Dated / /

---

Please inform-whereabouts of-1206-May-fullstop-

*file*

L  
May, E.

1206

May Sept.

DUPLICATE ORIGINAL



N.F./12.

Allotments.

NEWFOUNDLAND CONTINGENT

CANCELLATION OF ALLOTMENT

908 B.

I, (No.) 1206 (Rank) Private (Name) Ernest May hereby apply for cancellation of Allotment made by me on N.F. 1165 dated March 1915 April 24<sup>th</sup> in favour of Mr. Raffell (Mother) for \$ - cts 60 per diem. Such cancellation to take place on the Thirty-first day of July 1917

I agree to accept all risks and consequences of this application failing to reach Headquarters, St. John's, by mail in time to become operative at above nominated cancelling date; and that in the event of such non-delivery by mail, and thereby the Allotment continuing to be paid to the Allottee, I also agree to such further stoppage as may be thereby necessary being made against me in the Pay Books, or otherwise to refund such overdrawn amount or amounts.

Dated at Bury Camp July 26<sup>th</sup> 1917

Ernest May  
Allotter.

Approved and Witnessed, J. Seymour Smith  
for O.C. "A" Company.

NOTED  
W.H. Markin  
C. & M. O. P.  
Date 31/7/17 Coy

NOTED  
J. S. D. Lavigne  
C. & M. S.  
Date 26/7/17 Coy

To be made out in TRIPLICATE and sent to the Paymaster & Officer in Charge of Records, who will forward Original to Headquarters by first mail, Duplicate by the following, and retain Triplicate.

July 30th 1919.

#1206, Cpl. K. May.  
Bell Island. C.B.,

Dear sir:

Enclosed please find Discharge Certificate  
# 3277

Yours truly,

Capt. & Paymaster.

RS/.

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 1206 Rank Pl. Name May E  
 Intended place of residence Bell Island

2. Occupation Miner  
 Classification of soldier A Medical Category A.L.

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 17 1919

H. M. W. H.  
 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 17 1919

Ernest May  
 Signature of soldier  
W. J. Eaton  
 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 16 1919

Date .....

E. May  
 Signature of soldier  
W. J. Eaton  
 Signature of witness

### STATEMENT OF SERVICE

7. Enlisted for service 8. 2. 15 No. of days on Military  
 Discharged from service JUL 16 1919 Plus 14 days Service 1606

### 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 16 1919

H. R. Cooke Capt.  
 Officer in Charge  
 The Royal Newfoundland Regiment

### CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place, ST. JOHN'S

Date July 30/1919

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

218 2029/3247

24  
 20  
 31  
 20  
 30  
 1919

# 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. 1206

Name

Address

Present Medical Category

Recommended for: —

- (a) Immediate discharge  
(b) ~~Standing Medical Board~~

Members of Board

*N.R. Cooke Capt*  
O.C. Discharge Depot.

*H. Johnson*  
Senior Medical Officer

*D.W. Burden*  
M.O. Depot



# The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 206 Rank Sergeant Name Major E. May  
 Date of Enlistment 13.1.15 Address Bell St. St. John's District St. John's  
 Occupation Mined Classification for Discharge E1 Medical Category A1  
 Recommendation S.M.B. \_\_\_\_\_ Disability Rating \_\_\_\_\_  
 Passed to Demobilization Officer with following documents:—

N.F. P136	B 268	B 121	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122	Board 1st	" 2	3
B 178a	D 400A	B 1915	do 2nd	" 3	
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2	<u>19.11.15</u>	" 6	
B 179c	B 120	M 93			

Date 15.7.19

O. C. Discharge Depot.

## PARTICULARS FOR DEMOBILIZATION

## 1. Civil Re-Establishment.

I am  in a position to resume civilian occupation.

E. May

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 16-7-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 99229921 to his home at Bellfield and Release Certificate No. 3642 issued.

Date 17-7-19

A. M. Blomster  
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 .....

Date .....

Depot Paymaster.

Discharge approved for 16-7-19  
Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1
B 175	W 3494	B 122	Board 1st	" 2
B 175a	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>1914-1</u>	" 6
B 179c	B 120	M 93		

Date 17-7-19

A. M. Blomster  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer in Records.  
Board of Pension Commissioners.

with following additional documents

**Eligible for War Service Gratuity**

JUL 16 1919

Date .....

A. R. Cooke Cabot  
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 the Vocational Officer or his Representative.

*M. Bloustein*

Reg. No. 1206

*E. May*

Signature of Man.

Place

ST. JOHN'S.

Date

16-7-19.

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 Office 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

*Ernest May*

Regiment from which discharged

*Royal Newfoundland*

Regimental number

*1206*

Intended address

*Bell Isld*

Height on discharge

*5* Feet *6*

Color of hair on discharge

*light*

Complexion

*Fair*

Color of eyes

*Blue*

Descriptive Marks

*wound left leg*

Figure on discharge

*medium*

Christian name of Father

*Mark*

Christian name of Mother

*Jessie*

Wife's maiden name in full

—

Date and place of marriage

—

Christian names of children

—

Place and date of soldier's birth

*Bellefleur Isld Aug 9<sup>th</sup> 1896*

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)

*Ernest May*

(Rank)

*Corporal*

Station

*ST. JOHN'S*

Date

*15.7.19*

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.



Medical Officer of Hospital, Unit, or Command Depot.

Date

## Casualty Form-Active Service.

Regiment or Corps

*1st Newfoundland**6521*Regimental No. *1206*

Rank

*Pte*

Name

*E May*Enlisted (a) *8-3-15*

Terms of Service (a)

*Duration*recons from (a) *8-3-15*

Date of promotion

to present rank

Date of appointment

to lance rank

Numerical position on

roll of N.C.Os.

Extended

Re-engaged

Qualification (b)

Report		Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received			
	Embark'd Southampton		<i>28.3.16</i>	
	Disembark'd ROUEN		<i>22.3.16</i>	
	<i>Approved by G. S. W. H. G. L. G. L. G. L.</i>	<i>Etapas</i>	<i>27.16</i>	<i>A.A. 576</i>
	<i>Hospital ship</i>		<i>5.7.16</i> <i>W3083</i>	<i>All Clerk</i> CAPTAIN. FOR THE INFANTRY RECORDS G. H. Q.; 3 <sup>RD</sup> ECHELON.
	Transferred to England			

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

(b) e.g., Signaller, Shooting Smith, etc., etc., also special qualifications in technical Corps duties.

Regimental Number 1206

Company E

THE  
1ST NEWFOUNDLAND REGIMENT.

I hereby enlist for service at home or abroad in the King's  
Forces under the following conditions :

For the duration of the present war, or until my  
discharge.

Subject to the Army Act, the King's Regulations,  
and to such ordinances as may apply or may  
be made to apply to the British Regular Army.

Subject to the Newfoundland Volunteer Act,  
5 George V., Chapter IV.

Signed

E. W. May

Witness

H. K. Goodyear 2/51

Dated at \_\_\_\_\_

March 27 1916

August 1st 1919.

Mr. Ernest May,  
Bell Island. C.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,

Capt. & Paymaster.

RS/.

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 & RECORDS OFFICE, ST. JOHN'S.

- Christian name..... *Barnesh W* ..... 2. Surname..... *May* .....
3. Rank..... *Corp* ..... 4. Regtl. No..... *1206* .....
5. Address in full to which future payments of gratuity are to be forwarded..... *Bell Island* .....
6. Date of enlistment in the Regiment..... *March 1915* .....
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..... *Not applicable* .....
9. Address in full of such dependents..... *Not applicable* .....
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....
11. Were you on active service only in Mfld., if so, give dates and particulars of such service..... *On Active Service 1915* .....
12. Give total length of time which you served on active service whether in Mfld. or Overseas..... *Overseas Four Weeks & 5 Months* .....



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

*Enlisted once Mar 1<sup>st</sup> 1915*

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.

*None*

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.

*None*

18. Did you revert 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 Regt? *No* If not give (a) date of discharge *July 18/19* (b) Reason for discharge *Demobled*

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.

*July 1916 Battle of Somme Oct 9/17 Belgium Nov 5/17 Cambrai  
Mar 1918 Passendale Apr 1918 Arras Sept 27/18 Ypres*

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.

*No*

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:

*Ernest W. May*  
*Bell Island.*

Place of Residence:

Declared before me at:

*ex officio*

This

*19th*

day of

*July*

19*19*....

Signature of Barrister of the *Ernest W. May*  
Supreme Court, Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of affidavits. *Ernest W. May*

POST DISCHARGE PAY.					Net amount
Date paid	Widow	Soldier Dependence	Paid	War Service Gratuity.	Due
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
Certified correct.					Registrar



ST. JOHN'S, July 17<sup>th</sup> 119

Royal Newfoundland Regiment.

Billeting Account,

To Cpl. E. May

Billeting Soldiers as undermentioned

from July 4<sup>th</sup> 119 to July 16<sup>th</sup> 119

1206. Cpl. E. May 12 70

ACCOUNT	B7m
AM. NO.	3165
IND. LEDGER	
PAY LEDGER	
GEN. LEDGER	

Certified correct

N.S.

*[Signature]*

Billeting Officer.

E. May

Receipt for Army Book 64

No. 1206 Name Emay

To Certify that I have received the <sup>2</sup>AB 64 of the above  
named soldier.

Date Sept 2nd / 20

Name Conrad May

Place Halifax Nova Scotia 73 Grafton Street

N.B. For completion and return to the Department of Militia  
Insert in corner of envelope "AB 64"

*WR*

C.R. 1206

Extract from Daily Orders Part II Royal Newfoundland Regiment  
Depot St. John's dated Aug. 6th 1919.

The discharge of the undernoted on demobilization has been  
CONFIRMED by Officer i/c Records from noted date 30-7-19.

1206, Pte. E. May.

C.R. 1206

Extract from Daily Orders Part 11 Unit The Royal Nfld.  
Regt. St. John's July 19th, 1919.

The discharge of the undernoted on demobilization has been  
APPROVED by O.C. Discharge Depot with effect fro, 16-7-19

1206 Cpl. E. May.

C.R. 1206

Extract from Daily Orders Detachment Unit The Royal Nfld.  
Regt. St. John's, July 3rd, 1919.

1206 Cpl. E. May.

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



C.R. 1206

Extract from Daily Orders by Lt.Col. B.J. Barten, D.S.O.  
Commanding 2nd Bn. Royal Wfld. Regt. 2-6-19.

The following having reported from the 1st Bn. is taken on the  
strength and posted to "G" Company as from 1-6-19.

1206 B/Spl. E. May

C.R. 1206

Extract of telegram from the Military St. John's from  
Synoptical London dated May 30th 1919

In answer to your telegram May 29th

1206 May

at Depot

C.R. 1206

Extract from Telegrams sent to Synoptical London, May 29th,  
1919.

In from whereabouts 1206 May.

C.R.

1206

Extract of DAILY ORDERS PART I ROYAL NEWFOUNDLAND  
REGIMENT IN FRANCE DATED FEB. 16th 1919.

---

Appointed L/Cpl.

29/1/19.

#1206 Pte. E. May.

C.R. 1206

Extract from Daily Orders Part 11 By. Major A.E. Bernard  
M.C., Commdg. 1st Battn. R. Nfld. Regt. 23-12-18.

The u/m has been ~~xxxxxxxx~~ granted leave to U.K.

26-12-18 - 9-1-19.

1206 Pte. E. May.

CR 1206

Extract from Daily Orders, UNIT, in the field, dated 31/7/18.

#1206 Pte. E. May

APPOINTED COOK 24/7/18.

---

C.R. 1206

Extract from Daily Orders part 11, from Unit The Royal  
Nfld. Regt. In the Field, dated 8-6-18.

#1206 Pte. E. May.

Admitted Hospital Venereal 13-5-18 dis. 31-5-18



CF 1206

SICK AND WOUNDED N:C:O'S AND MEN OF THE EXPEDITIONARY FORCE - FRANCE.

INFANTRY RECORDS - P E R T H.

No. H. A. 24300.

Adm. 6. Sty. H. Prevent. 31. May. 18

1170 Pte. Grealley D.....10. Ar. & Suth. H.....Def. Vision.

Dis to duty ex. 12. Sty. H. St. Pol. 29. May. 18

10528	Pte. Williamson, J.....	9.	Gord. Highrs.....
40670	" Phillips J.....	1/7	" "
265603	" Ramsey A.....	1/6	R. Highrs.
241037	Sgt. Livie J.....	1/6	" "
350701	Pte. Bruce W.....	1/6	" "

704 L/c. McDonald W:.....M. "

Adm. 12. Sty. H. St. Pol. 29. May. 18

265756	Pte. Dean R.....	1/5	Sea Highrs.....	Loss of Teeth. Mild.
21190	" Gardiner J.....	1/4	Gord Highrs.	Wound. (accdtl) R. Foot Mild.
17643	" Baker H.....	1/7	" "	Wound. (accdtl) L. Hand. Mild.

No. TWO RECORD OFFICE - Y O R K.

No. H. A. 24300.

Adm. 6. Sty. H. Prevent. 31. May. 18

60520 Pte. Rhodes H.....10. W. Yorks.....BW. Ft. L. S. I.

NEWFOUNDLAND EXPEDITIONARY FORCE

No. H. A. 24300.

Dis to Camp. Adjutant ex. 1. Sty. H. Bouen. 31. May. 18.

X 1206 Pte. May. E.....1/R. N. Foundlands..

1265





CD 1206

SICK AND WOUNDED N:C:O'S AND MEN OF THE EXPEDITIONARY FORCE - FRANCE.

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NEWFOUNDLAND EXPEDITIONARY FORCE

No. H. A. 24300.

Dis to Camp. Adjutant ex. 1. Sty. H. Rouen. 31. May. 18.

X 1206 Pte. May. E.....1/R. N. Foundlands..

1265

Bell Island.

Aug 6<sup>th</sup>/18.

C.R. 1206

Dear Sir:-

Will you please let me know if Pte Ernest May no 1206 is coming with this draft. I, have'nt heard from him since April, and he told me then he was promised a furlough. I, have'nt heard from him since.

Oblige yours truly

Mrs Fred Noftall  
Bell Island

C.R. 1206

Extract from Nominal Roll of Rifle Regt. Draft Pass  
from 1st Bn. Depot, to 1st Bn. B.M.F. Embarked HM  
Folkestone, 5-8-17.

1206 Pte. E.May.

C.R. 1206

Extract of Casualties received from Pay & Record Office,  
London, dated August 2nd, 1916.

#1206 Pte. E.W. May. ✓

Discharged from Hospital, granted furlough from 1/8/16  
to 10/8/16. fit for Light Duty and likely to be fit for  
service overseas within three months.

C.R. 1206

Extract of casualties received from Pay & Record Office,  
London, dated July 31, 1916.

(Extract from Army Form B 215, from G.C. 1st. Wfld. Regt.  
dated 11/7/16.)

#1206 Pte. E. May. ✓

Wounded in Action 1/7/16.

C.R. 1206

Extract of Casualties received from Pay & Record  
Office, London, dated July 12, 1916.

#1206 Pte. E.W. May, ✓

Gunshot wound Leg.

To England ex St. John Ambulance Bde. Hospital

July 5th, 1916.

C.R. 1706

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P&R.O.

July 10th. 1916.

1206, Pte E.W. May. ✓

Leg.

GSW. ~~1206~~. Severe Adm. St. John Am. Ede. Hos. Etaples

2nd July 1916; 1 Newfoundland's B. Co.

C.R. 1206

Abstract of Casualties received from War & Record Office,  
London, dated July 6th, 1916.

#1206 Pte. E. May. ✓

Gunshot wound Left Leg.

Admitted 3rd London General Hospital, Wandsworth, S.W.  
July 6th, 1916.



C.R. 1286

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

#1206 Pte. E.May.

C.R. 1206

Extract from Nominal Roll of Royal Nfld. Regt. Draft No.3.

~~Extract from~~

from 2nd Bn., Depot to 1st Bn., B.E.F. Embarked 28-3-16.

1206 Pte. E.May.

C.R. 1206

Extract from Nominal Roll Embarked St. John's, for Overseas,  
per S.S. "Stephano" April, 22, 1915.

1206 Pte. May Ernest.

C.R. 1206

**Ernest May** was attested for General Service  
with the NEWFOUNDLAND REGIMENTS on March 8th 1915  
Regimental No. 1206 was allotted to Pte **E. May**

AUTHORITY:

Record Officer

Dept. of Militia,

March 25th, 1919.

**Casualty Form—Active Service.**

Regiment or Corps *Westphaland*

Rank *Private* Surname *May* Christian Name *Ernest*

Religion *Methodist* Age on Enlistment *19* years ..... months

Enlisted (a) *St. Paul* Terms of Service (a) *Duration* Service reckons from (a) *1/1/18*

Date of promotion to present rank ..... Date of appointment to lance rank .....

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

Occupation *Miner* *A. Raby, Capt.* Signature of Officer.

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 <i>Hampton</i>	<i>5.8.17</i>	
			Disembarked... <i>Rouen</i>	<i>7.8.17</i>	
			Joined Battalion	<i>28 AUG 1917</i>	<i>B 213.</i>
		<b>WITH .Bn. 30-13-17.</b>			
	<i>Sgt. A.</i>	<i>ad V.D. Lytham? trans</i>	<i>64 CCS</i>	<i>9/18</i>	<i>E.D. 9800</i>
	<i>1st Lt. M.</i>	<i>— v.d. G.</i>	<i>Rouen</i>	<i>12/4/18</i>	<i>HA 21908</i>
	<i>A. G. B. D.</i>	<i>Arrived</i>	<i>Rouen</i>	<i>31.5.18</i>	<i>Rail.</i>
		Joined Battalion	<i>7-6-18</i>		
<i>12.7.18</i>	<i>O. B. Cth</i>	<i>appointed Cook</i>	<i>Field</i>	<i>14.7.18</i>	<i>B 213</i>
<i>2.1.19</i>	<i>-d.</i>	<i>Leave 26<sup>1</sup>/<sub>2</sub> to 9<sup>1</sup>/<sub>4</sub>.</i>	<i>.d.</i>		<i>B 213. Par. 76</i>
	<i>To be</i>	<i>L. R. P. 29/1/19</i>			<i>1/2/19</i>
	<i>1st Lt. Hop</i>	<i>Adm! V.D. S.C.</i>		<i>21-2-19</i>	<i>HA 35705</i>
		<i>Arrived A. P. D.</i>	<i>Rouen.</i>	<i>6-5-19</i>	<i>Home</i>

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

(b) Signaller, Shoenig-Smith, &amp;c.

Date	Report From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
	<p>Wife Rees London</p>	<p>HP stoppage 22<sup>3</sup>/<sub>19</sub> to 6<sup>5</sup>/<sub>19</sub> (74 days) Transferred to England for release.</p>		<p>01643 1-6-19</p>	<p>Minor</p>
<p>28/4/19</p>					<p>W.D. Hunt Capt. R. 676 West End London Record Section GAA BT in 4. &amp; 5.</p>
	<p>ms</p>				

## Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.  
(523) W18871/204 400m 2/15-1 22 50Forms  
B. 121  
22.Number of Sheet 1Regiment of First NewfoundlandSignature of O. C. Company J. G. Bunnell  
2. Reed

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No. <u>1206</u>	<u>Ray Ernest</u>	Age on <u>19</u> years months		<u>River</u>	
Joined Date	Date	Place and Date of Enlistment		Religion	
Joined Date	Date	Period of { with Colours <u>11</u> <sup>1913</sup> years. with Reserve <u>3</u> <sup>1916</sup> years.		Place of Birth	

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>Stobbs Camp</u>	<u>14/7/15</u>	<u>Pte</u>		<u>Assault</u>	<u>Pte Roberts</u>	<u>3 days lb</u>	<u>15/7/15</u>	<u>Capt O'Brien</u>	
<u>Racecourse</u>	<u>1916</u> <u>31-8</u>	<u>Pte</u>		<u>Absent from Tattoo Roll</u> <u>Call until 4<sup>25</sup> pm</u>	<u>P/Cpl Sullivan</u>	<u>2 days C. B.</u>	<u>1916</u> <u>2-9</u>	<u>Capt. Rowsell</u>	<u>I.S.S.</u>
<u>Racecourse</u>	<u>9-9</u>			<u>Absent from 6.30 am parade</u>	<u>P/Cpl Small</u>	<u>2 days C. B.</u>	<u>11-9</u>	<u>Capt. Rowsell</u>	<u>I.S.S.</u>
<u>4<sup>th</sup> Scuttl</u>	<u>25-6-14</u>	<u>"</u>		<u>Attempting to break out of Hospital</u>	<u>Pvt W. Kinnon</u>	<u>14 days</u>			
<u>General Hospital</u> <u>Glasgow</u>				<u>Bounded at a point opposite ward</u>	<u>Pvt</u>		<u>26-6-17</u>	<u>Lt Col. Alex Napier</u>	
<u>Bony Camp</u>	<u>21/7/17</u>	<u>"</u>		<u>I.A. on South Side of Hospital</u> <u>Absent from Draft when named for waiting man</u>	<u>CSM Burns</u>	<u>14 days Detention</u>	<u>23/7/17</u>	<u>Lt Col. R. A. M. C (T)</u> <u>Lt Col. Whitaker</u>	<u>H.M.</u>
				<u>Demobilized</u>	<u>St Johns</u>	<u>30 19</u>			
				To be carried over					

# The Royal Newfoundland Regiment

1206

## DEMOBILIZATION OF

Reg. No. 1206 Rank Scout Name May, E.  
 Date of Enlistment 8-3-15 Address Bell St District St. John's  
 Occupation Mined Classification for Discharge 1 Medical Category A  
 Recommendation S.M.B. \_\_\_\_\_ Disability Rating \_\_\_\_\_  
 Passed to Demobilization Officer with following documents:—

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	1914-1	" 6
B 179c	B 120	M 93		

Date 15-7-19 O. C. Discharge Depot. [Signature]

### PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

E May

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 [Signature]

Date 16-7-19 O i/c. Re-clothing.



3. Transportation and Release Certificate.

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

Date 1-7- ..... Will Lamb  
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 .....

Date ..... Depot Paymaster.

Discharge approved for 16-7-19  
Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1	
E 178	W 3494	B 122	Board Ist.	" 2	2 Form B
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>19-14-1</u>	" 6	
B 179c	B 120	M 93			

Date 17-7-19 ..... Will Lamb  
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 JUL 16 1919 ..... W. R. Cooper Capt.  
O. C. Discharge Depot.

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

Date July 28/19 ..... W. R.