



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5201 Name Edward Mercer Meth

Questions to be put to the Recruit before Enlistment.

- | | |
|--|-------------------------------------|
| 1. What is your name? | 1. <u>Edward Mercer</u> |
| 2. What is your full Address? | 2. <u>Bay Roberts</u>
<u>CB.</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>27</u> Years |
| 5. What is your Trade or Calling? | 5. <u>Fisherman</u> |
| 6. Are you Married? | 6. <u>no</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>no</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? | 10. Name |
| | Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>yes</u> |

I, Edward Mercer 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.

Edward Mercer SIGNATURE OF RECRUIT.
John Meth Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Edward Mercer 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 answered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at Bay Roberts on this May day of 1918
Signature of Attesting Officer Edwards

†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 rank of Private.
If enlisted by special authority, such will be attached to the original attestation.
Date.....1918
Place.....
} Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

5301

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

Name Edward Mercer
 Apparent age 24 years months. Height 5 feet 3 inches
 Chest Measurement { Girth when fully expanded 36 inches
 Range of expansion 4 1/2 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Madame Mercer
Box Roberts Co. | Relationship Wife

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names

Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>22-5-18</u>									
Joined at <u>St. Johns</u> on <u>May 22-1918</u>									
<u>& Discharged July 10/19</u>									
<u>Embarked St. Johns S. Colombella to Halifax N.S. 22-7-18</u>									
<u>Embarked for B.C. 23-11-18. Disembarked France 25-11-18.</u>									
<u>Joined Battle 5-1-19, transferred from Queen 22-4-19. Arrived Warrimuir 25-7-19</u>									
<u>To file for demobilization 22-5-19. Arrived Hld. 1-6-1919</u>									
<u>Demobilization St. Johns 10-7-1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 10-7-1919 [date of discharge] 1 years 50 days
 " " Pensions " [" "] " " "

E. Mercer

C.R. 5301

~~11/10~~

Medical Report on an Invalid.

Station Hazley Down Camp
 Date 20 4. 19

1. Unit Royal Newfld
 2. Regimental No. 5301
 3. Rank Pte
 4. Name Mucus E.
 5. Age last birthday 25
 6. Enlisted { on 22. 5. 18
 at St John

7. Former Trade } Fisherman
 or Occupation }
 7A. If with previous service in Army, state—
 (a) Former Unit;
 (b) Regimental No. ;
 (c) Date of Discharge ;
 (d) Cause of Discharge.

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

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. nil
 10. Place of origin of disability. nil
 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. nil
nil

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
 (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
 (b) constitutional or hereditary, and not aggravated by service during the present war.
 (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

na

13. What is his present condition?

no complaints of re disability

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

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

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

na

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

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

na

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

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

na

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

na

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

na

20. Do you recommend—

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

Repatriation
mi
major
Dakms

Officer in medical charge of case

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

Station *HD Camp*

Officer in charge of Hospital.

Date *30.4.19*

*Loss of teeth on or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

13. What is his present condition?

No complaints of re Disability

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

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

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

na

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

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

na

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

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

na

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

na

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

na

20. Do you recommend—

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

Repatriation
mi
major
Sabins

Officer in medical charge of case

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

Station *H D Camp*

Officer in charge of Hospital.

Date *30.4.19*

*Loss of teeth on or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

13. What is his present condition?

18 complaints of no disability

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

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

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

na

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

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

na

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

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

na

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

na

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

na

20. Do you recommend—

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

Repatriation
miss
major
Satms

Officer in medical charge of case

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

Station *H D Camp*

Officer in charge of Hospital.

Date *30. 4. 19*

*Loss of teeth on or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

No 6445/633

B. 6445/633

N.F.F. 70.

From. NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
2nd Batt Ryl. Nfld Regiment
[Signature]
Winchester

29th April 1919

May 18th 1919

5301 Pte E. Mercer

Receipt hereunder.

With reference to the following telegram from the Minister of Militia / / (155)

[Signature]
Officer Commdg. 1st Batt'n.

"Pay to 5301 E. Mercer

65-0-0

Received the sum of Five

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

pounds (£5.00) in respect of telegraphic remittance from the Minister of Militia.

[Signature]
Chief Paymaster & O. i/c Records.

E. Mercer
No. 5301 Rank Pte

Witness J.D. Hicks Sgt

C.R. 5301

Extract from Nominal Roll of Draft No. 86, of the 8rd.,
Battalion of the Regiment at Winchester to the 1st.,
Battalion, P. E. F., Embarked Southampton 25/11/18.

#5301 Pte. E. Merber.

C.R. 5301

Extract from Daily Orders part 11, from Unit The Royal
Field Regt. St. John's, dated July 28, 1918.

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

#5301 Pte. Edward Mercer

C.R. 5301

Extract from Daily Orders Part II Unit The Royal Nfld. Regt.
Depot St. John's, June 28th, 1919.

The discharge of the undersigned on demobilization has been APPROVED
by C.O. Discharge Depot with effect from 28-6-19.

5301 Pte. E. Mercer.

C.R.

5301

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

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

#5301 Pte. E. Mercer.

C.R. 5301

Extract from Daily Orders Part A1 Depot, St. Johns,

Date

June 18th 1919.

5301, Pte. E. Mercer.

Reported at Headquarters 1/6/19.

ex "Corsican"

which sailed Liverpool May 22/1919.

C.R. 5301

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

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from 10-7-19.

5301 Pte. Edward Mercer.

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. St. John's, dated May 23, 1918.

#5301 Pte. Edward Mercer.

Attested for General Service with the Royal Nfld. Regt
from 22.5.18

C.R. 5304

**Extract from list of men of the Royal Newfoundland Regiment dis-
charged on various dates.**

5304 Pte. G. Mercer,

Discharged 20 - 5 - 18, K.R. & R

Reg. No. 5301 Rank Pte Name Mercer E.
Attested 22-5-18 Address Ray Roberts
Allotment 60 Allottee Mrs. Isaac Mercer (Father)
Date of Allotment 1-7-18 Returned from Overseas _____
Embarked for Overseas 22.1918 Cause _____

23-5-18	Vacc	20/6/18	1 ^a	Inoc
H L.		30/8-16	6/18	R.I.L. 7/18
13-6-18		1 st		Pin

No. 5301

Name

Mercet, E.

Sqn., Batty.,
or Company

D.

Corps

Newfoundland

Date of
enlistment

22/5/18

G.C.

Badges

Service of

Proficiency

Pay

Date of last entry in
Company Conduct SheetNo. and date
of last drunkPeriod not reckoning towards
freedom from extra fine

Sheet No.

Signature O.C.
Company, etc.

Character

288

Army Form B. 122.

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
Field	8/1/19	Plt		dep. of drawers	Sgt Spencer	Pay for same	8/1/19	Major Bennett	Plt

[P.T.O.]

Mercer, Ed

5301

Ray Loeph.

July 10, 1919

#5301 Pte. Edward Mercer,

Bay Roberts.

Dear Sir:-

Please find enclosed Discharge
Certificate No. 2905.

Yours truly

Weymaster & O. I/ Captain
Records

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 2361 Rank Pte. Name Merces, E.
 Intended place of residence Bay Roberts, H. Grace.
 2. Occupation Fisherman
 Classification of soldier H Medical Category A I

3. The above named man is discharged in consequence of

DEMobilIZATION

Eligible for War Service Gratuity

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

Place, ST. JOHN'S

Date JUN 25 1919

E. M. Smith
 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

JUN 25 1919

Date

Edward M. Merces
 Signature of soldier

J. A. Snow Capt.
 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 JUN 25 1919

Date

Edward M. Merces
 Signature of soldier

J. W. Chaucy Capt.
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 22-5-18 No. of days on Military
 Discharged from service 26-6-19 Plus 14 days Service 415

APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S

Date JUN 26 1919

R. H. Lat Major
 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 July 10 1919

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

A. H. Brown 1919

The Royal Newfoundland Regiment

Class for Demobilization:—

A1

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *24-6-19*

Regimental No. *53.01*

Name *James Edward* Rank *Pte*

Address *249 Roberts*

Present Medical Category *A1*

Recommended for:— { (a) Immediate discharge
(b) Standard Medical Board

Members of Board

R. H. East Major
O.C. Discharge Depot.

W. P. Brown
Senior Medical Officer

B. E. Borden
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5301 Rank Plt Name Mercer E
 Date of Enlistment 22.5.18 Address Bay Roberts District As Grace
 Occupation Fisherman Classification for Discharge 6 Medical Category AI
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. 1136	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 24.6.19 O. C. Discharge Depot. Wms H

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Edward Mercer

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 25-10-19 O i/c. Re-clothing _____

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. R1959 to his home at Bay Roberts and Release Certificate No. 3015 issued.

Date 25-6-19 *J.A. Snowball*
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 10-7-19.

Date 25-6-19 *H.M. [unclear]*
Depot Paymaster.

Discharged approved for 26-6-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36	B 268	B 121	1	N.F. Med	D.F. 1	1
B 178	W 3494	B 122	1	Board 1st	" 2	
B 178a	D 400A	B 1915	1	do 2nd	" 3	2 Form B
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	
B179c	B 120	M 93				

Date 25-6-19 *J.A. Snowball*
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—
Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUN 26 1919 *R.H. [unclear]* MAJOR
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.

Edward Mercer

Signature of Man.

Reg. No. 5361

J. A. Shaw Capt.

Signature of the Vocational Officer or his Representative.

Place ST. JOHN'S.

Date 25-6-19. 191

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

MEDICAL HISTORY

OF

Surname Mercer

Christian Name Edward

Table I—GENERAL TABLE

Birthplace:—Parish Bay Roberts Co. County Nfld

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	at		at	
Declared Age	years	days	years	days
Trade or Occupation				
Height	feet	inches	feet	inches
Weight	lbs.		lbs.	
Chest Measurement	Girth when fully expanded		inches	
	Range of Expansion		inches	
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm			
	Number			
When Vaccinated				
Vision	P.E.—V=		R.E.—V=	
	L.E.—V=		L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Lamm Babson</u>			
(Rank)				
	Medical Officer.		Medical Officer.	
Enlisted	at		at	
	on	day of	on	day of
Joined on Enlistment	Corps	Regtl. No.	Corps	Regtl. No.
Transferred to				
Became non-effective by	on	day of	on	day of
(Signature)				
(Rank)				



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 *Mercer, Edward*

Regiment from which discharged *Royal Newfoundland*

Regimental number *5301*

Intended address *Bay Roberts*

Height on discharge *5* feet *3*

Color of hair on discharge *Light Brown*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks _____

Figure on discharge *Medium*

Christian name of Father *Isaac*

Christian name of Mother *Harriet*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *Bay Roberts 17-9-1894*

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) *Edward Mercer* *PL*
(Rank)

Station _____ Date *13-6-19*

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.

Medical Report on an Invalid.

Station Stazby Down

Date 30/3/19

1. Unit Royal Newfld.
 2. Regimental No. 8301
 3. Rank Pte
 4. Name Mercer E.
 5. Age last birthday 25
 6. Enlisted $\left\{ \begin{array}{l} \text{on} \\ \text{at} \end{array} \right.$ 22-5-18
St Johns

7. Former Trade } Fisherman
 or Occupation }

7A. If with previous service in Army, state—
 (a) Former Unit ;
 (b) Regimental No. ;
 (c) Date of Discharge ;
 (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

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

nil

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. *nil*
 10. Place of origin of disability. *nil*
 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. *nil*

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
 (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
 (b) constitutional or hereditary, and not aggravated by service during the present war.
 (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c. *nil*

13. What is his present condition?

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

He complains of disability

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

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

u

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

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

u

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

u

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

u

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

u

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

u

Repatriation

20. Do you recommend—

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

none

Major J. D. ...

Officer in medical charge of case.

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

Station *Hazeley Down*

Officer in charge of Hospital.

Date *30-4-19*

*Loss of teeth on or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Casualty Form—Active Service.

ROYAL NEWFOUNDLAND REG

Regiment or Corps.....
 Rank Pte Surname Mercer Christian Name E.
 Religion Methodist Age on Enlistment 24 years — months
 Enlisted (a) 22/5/18 Terms of Service (a) DURATION. Service reckons from (a) 22/5/18
 Date of promotion to present rank..... Date of appointment to lance rank.....
 Extended {.....} Re-engaged {.....} Qualification (b).....
 Occupation Fisherman or Corps Trade and Rate.....
 Signature of Officer. M. Long Capt

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

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeling-Smith, &c. (17591.) Wt. W 1887—F 1124. 1,000,000. 6/18. D & S. Form B/103. (E. 1254.)

Next of kin: Father: Isaac Mercer; Bay Roberts; C. Bay; N. S. L. D.

July 12, 1919

#53.1 Pte. Edward Mercer,

Bay Roberts, 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 the War Service Gratuity.

Yours truly

Paymaster & i/c Records
Captain,

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th. 1919.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out. On completion this Declaration is to be returned to THE OFFICER I/C

RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

- Christian name *Edward* 2. Surname *Murphy*
3. Rank *Private* 4. Regtl. No. *5701*
5. Address in full to which future payments of gratuity are to be forwarded *Edward Murphy (Son of Isaac) Bay Roberts C.B.*
6. Date of enlistment in the Regiment *23rd May 1918*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued immediately prior to your discharge *Isaac Murphy*
8. Relationship of such dependents *Father*
9. Address in full of such dependents *Isaac Murphy Bay Roberts Conception Bay*
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *NO*
11. Were you on active service only in Rfld. If so, give dates and particulars of such service *Expected 8 Aug 18 - France in November Germany January 19*
12. Give total length of time which you served on active service, whether in Rfld. or Overseas *From 23rd May 18 - 26 June 1919 - One year One month*

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

no

no

no

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

no

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

no

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

no

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

no

no

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

no

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

no not applicable

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

25 June 19

Demobilization

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

no

no

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: *Edward Mercer*

Place of Residence: *Bay Roberts*

Declared before me at: *W. Johns*

This *25th* day of *June* 19.*19*...

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

Wm. James J.

POST DISCHARGE PAY.				
Date paid	Widow Soldier. Dependents.	Paid	War Service Clarity.	Net amount due
.....
.....
.....
Certified correct.				Paymaster

ST. JOHN'S, JUN 25 1919

Royal Newfoundland Regiment.

Billeting Account,

To Mr. E. Mercer

Billeting Soldiers as undermentioned

from June 1st /19 to June 23rd /19

5361 - Mr. E. Mercer 23 80

ACCOUNT	<u>Btm</u>
ACCT NO	<u>24899</u>
IND LEDGER	---
PAY LEDGER	---
GEN LEDGER	---

[Handwritten initials/signature over the ledger box]

Certified correct for \$ 23

R. J. Snow Capt
Billeting Officer.

Edward Mercer



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



06 15

1921.

The accompanying ~~Victory Medal and/or~~ British War Medal

is/are forwarded herewith to

Edward Mercer

in respect of his service as No. 5301 Rank Pte.

Name E. Mercer

Royal Nfld. Regt.

Receipt of the same should be acknowledged hereon.

Received

British War Medal

Signature

E Mercer

Date

Oct 22

Address

Bay Roberts East

[P.T.O.]

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. ^{R1959} to his home at Bay Roberts and Release Certificate No. 3013 issued.

Date 25-6-19 *J.A. Knowlton*
Demobilization Officer

4. Pay and Allowances.

JA The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 16-7-19

Date 25-6-19
Depot Paymaster.

Discharge approved for 26-6-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1	
B 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	<i>Form B</i>
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	
B179c	B 120	M 93			

Date 25-6-19 *J.A. Knowlton*
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents. **Eligible for War Service Gratuity**

Date JUN 26 1919 *TR*
O. C. Discharge Depot.

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

Date July 9/19 *[Signature]*

Reg. No. *5301* Rank *Pte* Name *Merces, Ed.*
Attested Address *Bay Roberts*
Allotment Allottee
Date of Allotment Returned from Overseas *29-5-19*
Returned on S.S. *Corsican* Cause *Discharge*

25.6.19 PASSED TO DEMOBILIZATION OFFICER
26.6.19 DISCHARGE APPROVED ON DEMOBILISATION.



CANADA

WAR VETERANS' ALLOWANCE BOARD

URGENT

IN YOUR REPLY REFER TO FILE NO.
AND PLEASE QUOTE
YOUR REGIMENTAL NUMBER

DALY BUILDING,

OTTAWA, May 26th, 1950

Director of Records, (Army)
Department of National Defence.

Re MESGER Edwin Chas. Regt. No. 5301
(Surname) (Christian Names)

Veteran states he served in the following units: Nfld. Regt.

Dear Sir:

To enable the War Veterans' Allowance Board to determine the eligibility of the above named, will you kindly furnish the following particulars concerning his service during the Great War.

- | | |
|---|-------------------------------|
| 1. Did the applicant serve in the C.E.F. | No |
| 2. If Permanent or Non-Permanent Active Militia Service, did any part of his service constitute service in the C.E.F. as under P.C. 1569 dated June 22, 1918. | N.A. |
| 3. Field of service in Great War. | FRANCE |
| 4. If in France, unit and period of service. | R. Nfld. Regt., 3 Mos. |
| 5. Date and place of all enlistments. | 22 May 1918, St. John's, N.B. |
| 6. Date of all discharges and reason. | 10 July 1919, Demob. |
| 7. Rank on discharge. | Pte. |
| 8. Date and place of birth as per attestation paper. | 24 Years |
| 9. Domestic status, and if married, name in full of wife. | Single |
| 10. Military Service prior to Great War, (or prior to enlistment in C.E.F.) | Nil |
| 11. Has he received any special Medals or Decorations. | Nil |

2096/PS 30-5-50

for H.M. Jackson

Director of Records

~~SECRET~~