

FIRST NEWFOUND D REGIMENT

ATTESTATION OF

| No. | 2152 | Name John | n morris | Corps | |
|--------------------------------|---------------------------------------|--|----------------------|---|-----------------|
| | | Questions to be put to | the Recruit befor | e Enlistment. | |
| 1. What | t is your name? | | 1 00 | In morris | |
| 2. Wrat | t is your full Ac | kdress? | | na /aco | |
| 3. Are v | you a British Su | bject? | 3 Jes | | |
| 4. What | is your age? | | . 19 | Vears Mont | h |
| 5. What | is your Trade | or Calling? | Pap | er mekens A | elp |
| 6. Are y | ou Married? | | 6 200 | | |
| 7. Have jesty' | you ever served s Forces, naval | in any Branch of His Mor military, if so,* which | fa 7. 70 | Years Mont | |
| | | be vaccinated or re-va | | | |
| | | enlisted for General S | | | |
| 10. Did stand | you receive a N its meaning, an | otice, and do you und I who gave it to you? | er-} 10 | Name | |
| 11. Are yo | ou willing to ser signed by you if | ve upon the conditions a you are accepted? | s embodied in the ro | ll of service } 11. | , |
| made by n | | | | solemnly declare that the I the engagements made. SIGNATURE SIGNATURE | |
| I bear true a bound, hon | allegiance to His h | OATH TO BE TAKEN B | Y RECRUIT ON ATT | ESTATION. o make oath, that I will be successors, and that I will is, in Person, Crown and I | oe faithful and |
| The R | ecruit above name | CERTIFICATE OF MAGIS | | G OFFICER. ise answer to any of the a | bove questions |

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 empred as replied toward, the said recrift hap made and signed the deplaration and taken the oath before me at the contract of the con

Signature of Attesting Officer Secret Williams

*CERTIFICATE OF APPROVING OFFICER.

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

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

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

DESCRIPTIVE REPORT ON ENLISTMENET Applicable to all ranks. To correspond with entries on the Medical History Sheet.

| Name | | | | | | | | | | | |
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| Chest M | | ment {G | irth when | fully expa | inded 3 | inch | in in | ches | | | |
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| | | | | / | Relatio | onship | " | iotti | ev | | |
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| (a) | Christian | and Surname | of Woman to (c) Preser | whom marries it address. (| d, and whether | officer ver | or wide | ow. (b) entry. | Place : | and date of | marriage. |
| | (4) | - | | (6) | | 10 | , | | | | (d) |
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| | Ciris | cian Names | | | | | | Date | and Ph | ace of Birtl | |
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| Corps in tich served | Rgt. or Depot | Promotion, Casual | STATE Reductions, ies, &c. | EMENT Army Rank | OF THE | Service lowed to for fixir rate of p | not al- reckon se the sension | Service serve no ed to rec wards G | - | Signatur fying | e of Officers cer correctness of entries |
| Corps in hich served | | | Reductions, ies, &c. | Army Rank | T . | - | 257511 | | in Re- tallow- kon to- C. Pay | Signatur fying | correctness of |
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FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

| Vo. 2152 Name John Merica Corps |
|---|
| Questions to be put to the Recruit before Enlistment. |
| 1. What is your name? |
| 2. Wrat is your full Address? |
| 3. Are you a British Subject? |
| 4. What is your age? 4 |
| 5. What is your Trade or Calling? |
| 6. Are you Married? |
| 7. Have you ever served in any Branch of His Ma jesty's Forces, naval or military, if so,* which? 7 |
| 8. Are you willing to be vaccinated or re-vac- |
| 9. Are you willing to be enlisted for General Service? |
| 10. Did you receive a Notice, and do you under- stand its meaning, and who gave it to you? 10 Name |
| 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? |
| 1 |
| OATH TO BE TAKEN BY RECRUIT ON ATTESTATION. |
| OATH TO BE TARKS OF STATES OF A THE STATES OF |
| CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER. |
| The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act. |
| The above questions were then read to the Recruit in my presence. I have taken care that he understands each question, and that his answer to each question has been duly entered. |
| as replied to, and the said recruit has made and signed the declaration and taken the oath before me at. |
| on this. Att day of Attenting Officer Suche Willes |
| |
| †CERTIFICATE OF APPROVING OFFICER. |
| I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been compiled with. I accordingly approve, and appoint him to the: |
| quired forms appear to have been compiled with. I accordingly approve, and appoint min to the If enlisted by special authority, such will be attached to the original attestation. |
| |
| Date |
| Place |
| + 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 the configuration of the configuratio

DESCRIPTIVE REPORT ON ENLISTMENET Applicable to all ranks. To correspond with entries on the Medical History Sheet.

John morris Name 19 years months. Height 5 feet 9 inches Appropri 36/2 inches Girth when fully expanded Che inches Range of expansion marks INFORMATION SUPPLIED BY RECRUIT mis Elyabeth monis Grand Falls Name and Address of next of kin mother Relationship Particulars as to Marriage (a) Christian and Surname of Woman to whom married, and whether apinster or widow. (b) Place and date of marriage.
(c) Present address. (d) Initials of Officer verifying entry. (d) (a) (6) Particulars as to Children Christian Names Date and Place of Birth STATEMENT OF THE SERVICES Signature of Officers certi-Service not al-lowed to reckon serve not allow-for fixing the ed to reckon to-rate of pension wards G. C. Pay Corps in Rgt. or which served Depot Promotion, Reductions, Casualties, &c. fying correctness of Army Rank Dates Years Days Years Days whaches for BES. wharter St John's SI Sielian In let 24 3 12 Year Short Jouen You Security Sende sto 2-17 - newlested to England 5 3-17 fromther 3 nor Lan General Hospital 6-3-17 Furlough then attacked they Lep wharker for Bl. & 7 ty wined wind in the field 12-10-17 hour 55 0.06. 45 N. Shoulder 31-11-17 matited to lang land 18 11-17 Maplat Membereau 4-11-19 Furlangs de attacker obefort her Combonho to B& \$ 25.718 Line Bathation 4.7-18 Sel 3 E & 2 Docthe Winchite intages to love tought Rown 28-10-18 - transfer from To henfoundland for demolifiation 30-1-19. Arxived kenter than 7-2-1919 10 emobile chion of Total Service forfeited as above. 24-4-19 .Idate of dischargel Total Service towards Engagement to





THE TRANSPORTERS OF THE PROPERTY OF THE PROPER

I havely enlictive corrion at home or abreed in the Ring's Furner under the following conditions.

For the denties of the present var, or until my discharge.

Subject to the Army Agt. The Ngag⁴s Regulations, and to much ordinance as my apply or may be unde to apply to the Syttick Regular Army.

Subject to the Hymfoundless Volunteer Act.

8 Goarge V.

Chapter M.

20 hm, Maries

10m Churchill 214

Mace Course ays

Jan 30 th

C. 2152

Extract from Daily Orders Fart 11 Unit The Moyal Bild. Regt. By Mt. Col. T.G. Mathias, D.B.O. Commanding lat Ba, 3-11-18.

The fellowing joined the Batte. 5-11-18.

2152 B/Cpl. J. Morris.

c coy.

Extract from Orders by Major G.T. Mathias, D.S.O. Commanding 1st Battn. Royal Nfld. Regt. 3-8-18.

2152 fte. J. Morris

To be Lance Corporal.

Extract from Orders by Major 7.G. Mathias, D.S.O. Comig. Let Batta. Royal Newfoundland Regiment, 3-8/18

The followingswired's arrived yesterday and is posted to O. Company.

2152 Pte. J.Morris.

Extract from Daily Orders part II, Depot St. John's dated April 28,1919

The discharges of the undernoted on demobilization has been GOMPIRAZD by Officer 1-0 Accords on 24-4-19.

#2152 L/C. John Morris.

Extract from Heminal Roll of Highd, Regt. Embarked Sputhsmpton, (Draft Ho.S.) from 2nd Bn. Depot to lat Bn. ByE.Ff 9-7-16.

2152 Pte.J. Morris.

distract from Daily rdors part II, Depot t. Johns deted 18-4-19.

The dicharge of the wis on described attention has been advanted by 0. d. Discharge reports 10-4-19.

#2152 L/C. John Morris. Morris.

Extract of Preliminary Report of a Medical Board held on Friday Afternoon April 4th. The following was the finding.

Recommended Discharge from the Army.

Stat L/C. J. Morris.

2152

Extract from Casualties Received from P.&.R.Offier London,

(March 6th.1917.

1152 Morris.

12th General Hospital, Rouen, Feb. 26th, suffering from gas poison, severe.

Extract from Nominal Roll Embarked St. John's for Overseas, Nar. 23, 1916.

2152 Pte. J. Morris.

NEWFOUNDLAND POSTAL TELEGRAPHS



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

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

the Sender the amount paid for its transmission.

It came the Message is the N. P. T. or its Servants whilst the Message It came the Message is the N. P. T., they will refine the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refineded as above for any loss, injury, or damage arising or remaining from the montransmission or condectively of the Message, or distance or ever in the transmission or collective thereof, however under transmission or collective the condective of the Message, or distance or ever in the transmission or collective thereof, however under transmission or collective of the Message and the Message, or distance or ever in the transmission or collective thereof, however under transmission or collective thereof, however the message that the collective the transmission or collective three or the Message shall be formed to have nitrive caused for the purposes of these Conditions at any point where, in the course of the transit of the Message shall be formed to have nitrive caused for the purposes of these Conditions at any point where, in the course of the rains of the Message shall be formed to have nitrive caused for the purposes of these Conditions at any point where, in the course of the rains of the Message shall be formed to have nitrive caused for the purposes of these Conditions at any point where, in the course of the rains of the Message shall be formed to have nitrive caused for the purposes of these Conditions at any point where, the course of the rains of the Message shall be formed to have nitrive caused for the purpose of these Conditions at any point where, and the course of the rains of the Message shall be formed to have nitrive caused for the purpose of these Conditions at any point where, and the course of the rains of the Message shall be decreased to have nitrive caused for the purpose of these Conditions at any point where the course of the conditions are not continued to the conditions and the course of

Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusion vely, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

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

Signature of Sender

Oheek Number. Red

6th March. 1917. Dated

Mrs. Elizabeth Morris, To

Grand Falls.

Regret to inform you that Record Office, London, officially reports No. 2152, Private John Morris at Twelfth General Hospital Rouen February 26th suffering from Gas Poison severe.

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

J. R. BENNETT.

Colonial Secretary.

FOR TYPEWRITER

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions: The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to

the Sender the amount paid for its transmiss In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message

If take use account of the N. P. T., they will refund the amount paid by the Sender for such Message.

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

resulting an an efficient delay, or error shall have experted.

The control of the N.P. I over the Message shall be shoured in have utirely caused for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrasted by the N.P.T. In all the N.P.T. shall have full power so to entrast the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T. arded according to the foregoing Conditions, by which I agree to abide.

I request that the following Tel (NOT TRANSMITTED)

Red

Signature of Sender

Address

Check

Line Mumber

9th March, 1917.

Dated To

Mrs. Elizabeth Morris

Grand Falls.

Record Office London today reports No. 2152 Private John Morris now admitted Wandsworth.

J.R.BENNETT.

Colonial Secretary.

Extract from Casualties received from P & R Office London, Mar. 9th, 1918.

At. WANDSWORTH:

(Gas) 2152 Morris.

NEWFOUNDLAND POSTAL TELEGRAPHS CABLE CONNECTION WITH ALL PARTS OF THE WORLD Place from Whiley Bennett Saw todays papers pervate moreis 2152 Inffering from Sas posson Levele loven first Information Secenced Could you manie his Condition now very

No enquiry respecting this Message will be attended to without the production of this paper.

Charles moires

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VFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions: The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to

the Sender the amount paid for its transmi In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message in case the message said the N. P. T., they will refund the amount paid by the Sender for such Message. The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such

transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have ntirely ceased for the purposes of these Conditions at any point where, The control of the rx. F. 1. over the message shall be decined to have intrely ceased for the purposes of these conditions at any point master in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

y be for I request that the following To garded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED) Signature of Sender. Address

Check Number-Red 12th March, 1917,

Dated

Mr. Charles Morris. To

Trinity.

Report respecting No. 2152 Private John Morris was communicated to next of kin Mrs. Elizabeth Morris Grand Falls. Report received today states progressing favourably.

COLONIAL SECRETARY.

VFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

he Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to Sender the amount paid for its transmis In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message

in case the biessage shall hever reach its desination of the amount paid by the Sender for such Message. The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such

resuming from the mon-transmission, one-dievery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have ntirely ceased for the purposes of these Conditions at any point where, in the course of the transi of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authorit worked of part of or in connection with the Telegraphic system or service of the N. P. T. not controlled by the N. P. T. exclusively, although gled according to the foregoing Conditions, by which I agree to abide. I request that the following T

(NOT TRANSMITTED) Signature of Sender

Number

Dated To

12th March, 1917,

Mrs. Elizabeth Morris.

Grand Falls.

Report received today states No. 2152 Private John Morris progressing favourably.

J.R.BENNETT.

Address

Cheek

Colonial Secretary.

·C.R. 2/52

Artract from Hominal Hell of Druft Ho.29t 51 Other Hamin from 2/1st Henfoundland Hegts, to 1/1st Henfoundland Hegts, B. S.F. Rabaried Southampted 7/9/17

2152 Pte. Morris, J.

FOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Messages, though it has been received for transmission; but in case of so doing shall refund to the Sender the annount paid for its transmission by the sender the annount paid for its transmission by reason of any neglect or default of the N.P. T. or its Servants whilst the Message in the Message shall not be finished to make componation beyond the amount refunded as above for any loss, injury, or damage arising or Admange arising or damage arising or damage arising or the damage of the management of the Message in the Message i

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Message for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any assumption of the controlled by the N. P. T. exclusively, although worked as part of or in conscious with the Telegraphic system or service of the N. P. T. I request that the following Telegraph maps for pravaded according to the foreguing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender Jan Address

Line
Number Rcd By Sent by Check

Dated November 27, 1917.

To Mrs. Elizabeth Morris.

Grand Falls.

Regret to inform you that Record Office,

London, officially reports No. 2152; Private John Morris, has been admitted to the New End Military

Hospital, Hampstead, London, suffering from gunshot

wound in the right shoulder.
Upon receipt of further information I shall immedi-

ately wire you and trust that next report will be

of his convalescence.

1//4////////////////////////// R.A. SQUIRES

Colonial Secretary.

FOR TYPEWRITER

NO. 2152 PTE. JOHN MORRIS.

EXTRACT OF CASUALRY LIST RECEIVED FROM THE PAY AND RECORD OFFIDE LONDON DARRO MOVEMBER 27th, 1917.

AT NEW RED MILITARY HOSPITAL HAMPSTRAD LONDON GUESHOT WOUNDS RIGHT SHOULDER,"

Artest from Dealy Orders, Part 11, UNIT: the Reyal Hold, Rost., deted 19th. Don. 1917.

STREEGTE.

2152 Pte. J. Merris.

Invalides to U.K. 23/11/17. Wded.

C.R. 2/52

Extractof C smalty list received from P y & Record Office, London, d ted J mary 8,1918.

#2152 Pte. J. Morris.

From Milit ry Hospital, H mpsto d, Farlough 2/1/18 to 12/1/18 . 1 Command Depot.

Artra of from Ganualties received from Pag and Record Office. London, dated End., Samuar, 1918.

#No. 2152 Pte. J. Norris.

From Military Hospital
Furlough 2-1-18- 12/1/188

i. Duty.

CR 2/52

Actract from Nominal Roll from And Dettalion to D. S. F., that omburked at Southempton 25/7/18

#2152 Pte Morris J.

Extract from Daily Orders Part 11 Unit The Royal Nfld. B.E.F. Brance, 17/8-18.

2152 Pte. Morris,

App. N.Cpl. 3/8/18.

C. 2152

Extract from Casualties6List No.H.A. 29068.

2152 L/Cpl. J. Morris.

L/Hfld.R. Diarrheon Adm. 1 S. Afr. Gen. Hosp. Abberville 6th Sept. 18.

WOUNDED AND SICK N.C.OS AND MEN OF THE EXPEDITIONARY FORCE - FRANCE.

| | WOUNDED AND SICK N.C.OS AND MEN | OF THE EXPEDITIONARY FO | RCE - FRANCE. |
|---|--|--------------------------|---------------------|
| ARTILLERY | - ROYAL HORSE & ROYAL FIELD. | | LIST NO.H.A. 29456. |
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| | 9 Dvr. Buckenham, J | B/95 Bde | . Myalgia. |
| 17A70 | 9 Gnr. Cassomer, W. RFA. 22 Bdr. Widdowson, J. RFA. | C/256 Bde. | W.Gas (Shell). |
| 89526 17870 2702 17870 2702 | 2 Bdr. Widdowson, J. RFA. | D/256 Bde. | -do- |
| 1787C 2702 | ADMITTED 5 CONVALESCENT DEF | OT CAYEUX. 20TH SEPT. 1 | 918. |
| 68103 | Gnr. Walker, A | | |
| 23126 | 2 Bdr. Bowdler, F. RFA. | 34/189 Bde. | Diarrhoes, |
| 25189 | 6 Dyr. Gill,L. RHA. | K.Bty. | Adenitis Axilla. |
| | DIS. TO BASE DEPOT HAVRE EX 5 | CONTRAT PECENIE DEDOE 20 | CTPD# 1010 |
| | 5 Pte. Levis, ARFA. | CONVALEDCENT DEFOT, SO | Connect Will |
| 22489 | 5 Pte. Levis, A | 462/179 Bde | *Gassed M. |
| 1 23572 | Dyr. Stanvell.C. RFA. | 126/411 bde. | Debility. |
| 6671 | 7 Dyr. Stanwell, C. RFA. 8 Bdr. Sparham, D. RFA. 3 Gnr. Heath, T. RFA. | 95/280 Bde | Gasada "a" |
| 65109 | 3 Gnr. Heath, T. RFA. | 23/40 Bae. | TOT. BUT TOCK. L. |
| 1 A A | 9 Onr. Itzcovitz,SRFA. | 6/87 Bde | .Debility. |
| 17474 | 1 Gnr. Croft, W | 293/Bde AFA | .Spr.Ankle.R. |
| 20 | 4 Gnr. Handley.N. RFA. | 27/Bde. | GS7.Scalp. |
| 945 | O Bdr. Bosworth.V. RFA. | A/72 Bde. | SW.Foot.L. |
| 26169 | 6 Gnr. Taylor.A. RFA. | A/112 Bdc. | PUO. |
| 23151 | 4 Gnr. Handley, N. RFA. O Bdr. Bosworth, V. RFA. 6 Gnr. Taylor, A. RFA. 2 Gnr. Mawson, A. RFA. | A/159 Bde | .Boils. |
| | | | |
| 26745 | 2 Dvr. Brand, H | B/210 Bde | .Debility. |
| 75099 | 1 Dyr. McElhatton, J. RFA. | B/250 Bde. | Gassed "T" |
| 11468 | O Dvr. Farmer, A. RFA. | C/84 Bde. | Debility. |
| | | | |

NEWFOUNDLAND CONTINGENT.

LIST NO.H.A. 29456.

SICK AND WOUNDED NICIO'S AND MEN OF THE EXPEDITIONARY PO

No. H. A. 31279



DIS TO BASE DEP STAPLES EX 5 CON: DEP 28th OCT 18.

49972 . Watson A. 9th do. GSW Arm. T.

DIS TO MED BD DEP STAPLES EX 5 CON: DEP 28th OCT 18.

63511 Pte Jackson J......6th K O Y L I......GSV Hand R.

ADM 3 CAN GEN H BOULDGNE 3rd HOV'18.

267417 Pte Burnett A.1/7 W York R...... SW Head R Arm. Slt. 34065 Barlow H. 1/7 W Rid R. P. U. O. 81 t. 53565 Campion G. 21 W. York R. do-38888 Grayson B. 6 York & L.R. Sutcliffe R. 18/359 .1/6 W York R. Influenza Sit.

GUERNSEY BRANCH RECORD OFFICE

No. TWO RECORD OFFICE - Y O R K

HO. H. A. 31279

DIS TO BASE DEP ROUEN EX 5 CAN DEP 28 OCT 18.

200 Pte Fox W. Diarrhoea.

NEWFOUNDLAND BXPEDITIONARY FORCE

No. H. A. 31279

DIS TO BASE DEP ROUEN EX 5 CON DEP 28th OCT 18.



C.R. 2/52

John Morris was attested to General
Service with the NEWFOUNDIAND RECIPENT ON Herman 23rd 1916
Regimental No. 2152 was alloted to Ptes J.Morrie

AUTHOR ITY:

Record Ledger;

Dept. of Militia.

March 25th 1919

CR1 2152

Extract from Rominal Roll of the Reyal Mild. Regt.

The undermutioned who was transferred from B.E.F. to the End En., winobester, 19-1-19 meniting Regutriction.

2152 E/8. I. CMorris.

C.P. 2152

Extense from Redly Orders Part 11 Unit the Royal Mild. Regt St. John's, ll-d-19.

The undermoted weturned from Oversean and Reported to Depot 7-2-10.

Repatriated on a/c of demobilisation.

2152 L/C. John Morris.

Extract from Neminal Rell of the Reyal Mild. Regt. Babarked S.S.Germican, Jan. 50th, 1919.

2152 L/C. Morris.

I. A. Morris C.R. 2102 Parso

Nº 1965





1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

| lentity rificate | Whether Wife, Chila, other Relative or Friend | NAME (in full) | Address | AMOUNT (each perso |
|---------------------|--|---|---|-----------------------------|
| | | | | |
| 908 | nother | mo clare morris | Grandfalls | |
| | | | 3 | |
| | | | | |
| | | | - · · · · · · · · · · · · · · · · · · · | |
|) | | | | |
| | | | | |
| | | | Total Allotment, \$ | |
| 5 | This form must be digned by the Office required payments | completed by the Officer Commanding r Commanding Company and handed on application. | Company, signed by the Volum | teer, counter to make th |

Nº 1965



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

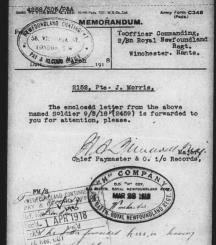
| Certificate No. | Whether Wife, Child, other Relative or Friend | NAME (in full) | | ADDRESS | AMOUNT (each person |
|--------------------|---|--|--------------------------------------|--|-------------------------------|
| 1908 | nother | or Clarks me | rio G | rand fall | |
| | | | | 3 | |
| | | | | | |
| | | -, | | | |
| | | | | | |
| | | | | | |
| NOTE.—Th | nis form must be congned by the Officer | npleted by the Officer Com Commanding Company and | manding Company i handed to the I | Total Allotment, S 7, signed by the Volum Paymaster as authority | nteer, counter to make the |

| D . |
|---|
| only for use with Men returned from an Expeditionary Force or from Army Form W. 3016. Garnison Abroad. (in Bods of 200.) |
| (MILITARY HOUSE IN L |
| No. Date 1918 |
| (1) To the Officer i/c Records, Well-found and |
| 580 Victoria St. SW (Station). |
| (2) The Officer Commanding, I kewfound and |
| (Station). |
| (3) The Paymaster, I newfoundland |
| 158 Victoria St. W. (Station). |
| Regimental No. 215-2 |
| 101= 911 |
| Rank and Name 1/ 10 mlory and Date A Road |
| Regiment or Corps. View For State Land Conference of State Corps. |
| has been granted a furlough from 25 Ms. Donald Rd |
| His address while |
| on leave will be: Colinburgh, Wolland |
| It consider he is it. Duty. |
| Strike out that which is inapplicable. |
| brofficer in charge William Military Hospital, |
| Hampstelad (Station) |
| Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office. |

In the case of men of the Meyna Flying Corps, Noval Engineers and Army Ordance Corps two copies of AFW, 2010 will be sent to the Officer in charge Record concreted and core to the Flymaster, instead of one copy to the Officer's Pergenter, instead of one copy to the Officer's Pergenter, instead of Officer to the Of

| 1 | in 2/52 name P/5 | ame Mor | ris | | F | Pay /00 Less Net R | /o | ent | Tot | |
|------|--|------------|----------------|-------------------|------|-----------------------------|-----|-----|-----|----------|
| | DEBITS O | Date £ s d | CREDITS | Reriod From To | Days | Rat 3 | 8 6 | £ | s | 1 . 4 |
| | Deplant days Pay | 140 | Balance | 9 30/1 | | | | 9 | 0 | 0 - |
| | Acquittance Rolls Hospital Advances | 136 | Pay Diet Rate | 19 271 | 124 | 60 | 744 | 015 | 5 | 91 |
| | A.B. 34 (15 fco) | 11/0 | allow | | | | | 1 | 0 | 0 25.5.9 |
| | P. & R.O. Payments Hospital Stoppages | 1 16 1 | 100 dais 02/ | | | | 1 | | | - |
| 100 | 6-19-3 | | Pater all 2018 | | 5 | 1/9 | | | 8 | 925.7.6 |
| Ut B | 1-10-3 | | (48.15.3) | | | | | | | |
| | Och 5028 | 18 0 0 | 18-4-3 | | | | | | | |
| | | | | | | | | 1 | | 15 |
| | | | | | | | | | | 1 = 1 |
| CHE | QKED. | | | | | | | | | 1.1.1 |
| | | | | | | | • | | | |

| / Wal | Army Form W. 8664 |
|---|-----------------------------|
| vame Ohn | morri |
| Regtl. No. 2/52 ROYAL NEWFOU Regiment | Rank Ptr NDLAND REGIMENT |
| Date of :- 28/ | 7/16 |
| Receipt | 21/3/18 |
| Transfer | |
| Final disposal and to whom sent | |



CLED UPON

D.C. THE HE GOY,

4258/305/P&A



Officer Commanding, 2/Bn Royal Newfoundland Regt. Winchester. Hants.

15th March

2152, Pte. J. Morris,

The enclosed letter from the above named Soldier 9/5/18 (2459) is forwarded to you for attention, please.

> Major, Chief Paymaster & O. 1/c Records,

PM/S

HE FROUGDLAND CONTINUES

H.F.P/33.

| _ | legtl No. 2/52 Mahk | | | Fay / oo | /o | Torking | Total / 10 |
|-----|---------------------|-----|---|-------------|-----------|---------|------------|
| | ama Morris | | | Less A | Allotment | 1 | 50 |
| ate | DEBITS | £ s | d | Cr | EDITS | | E B C |
| | Balance //1 | | | Balance | | 22/10/2 | 151 |

| Date | DEBITS | £sd | 0 2707 | | Γ. | - | - |
|------|----------------------------------|--------|--------------------------|-----------|----|---|-----|
| 1017 | | TT | CREDITS | - | E | 8 | d |
| | Balance //1 P.L. ADVANCES: | 1. 3 | Balance | 22/12/16. | 15 | 1 | 5 |
| | A.B. 64. | 1120 | Pay & net hate: | | | | |
| | Acquittance Rolls | 239 | 23/12/16 to 10/4/7/=/091 | ays | - | | |
| | Hospital Advances STOPPAGES: | 1100 | 760d= \$ 65. | | 13 | 8 | 9 |
| | Hospital dys = Forfeited Pay dys | | //1 to $//1 = d$ | ays | | | |
| | Cables P.&.R.O. PAYMENTS: | 1 | Ration allowance. | | 1 | 1 | |
| | Sundry Bills | \$16 6 | 10/4/17 to 19/4/17 =10 d | аув / | 1 | - | _ ' |
| | 18 X11/2 7 | W 000 | 9 7- 1 2/1- | :- | 9, | 0 | 1 |
| | 17/4.17 | 100 | VISI | | 1 | 1 | 1 |
| 1 | | | 1986 | | 1 | 1 | 1 |

The state of the s

TO, - The Chief Paymaster,
Royal Perfoundlend Regiment,
58 Victoria Street,
London, S.V.

Sirt-

Please charge the amounts set epposite my mane to my account and pay it to the F. C.A. "Prisoners of "ar Fund" in quarterly instalments for the period of one year.

Commenting on the lat July 1816.

| Regtl. | Rank | Name | Amount | Signature. |
|--------|------|--------|--------|------------|
| 2152 | Pla. | Morris | 2.30 | 2 Mois |
| | | | | |

I have the honour to bo, Sir,

Your obedient servant.

Date 12 7 18

2 Mboris

Korris J. 2152

April 24,1919

#2152 Pte. John Mprris,

Grand Falls.

Dear Sir:-

Please find enclosed "Discharge Certificate

No.2049."

Yours truly

Paymester & O. i/c Records

| PROCEEDINGS ON | DISCHARGE |
|--|--|
| 1. No. 2 1. 5. 2. Rank Part 514 Na | me Marina John |
| ' 2 - | Dies O |
| | |
| 2. Occupation Paper Make | 6 |
| Classification of soldier | edical Category |
| 3. The above named man is discharged in consequence of | DEMOBILIZATION. |
| * | |
| Eligible for War Ser | vice Granniy |
| His accounts are correctly balanced and I have impartia accordance with Regulations. | dly inquired into all matters brought before me, in |
| Place ST. JOHN'S | A Mas Mul |
| Date APR . 8 . 1919 | The Royal Newfoundland Regiment |
| | V SOLDIER ON DISCHARGE |
| CERTIFICATE TO BE SIGNED B 5. I hereby acknowledge that I have received all my pay a | and allowances (including clothing allowance) and a |
| I hereby acknowledge that I have received all my pay a just demands up to the present date, and hereby release of all financial responsibility in my connection. | the Discharge Depot, Royal Newfoundland Regimen |
| Place and date .S.TJOHN.'S | John albonia |
| APR 8 1919 | A snowfered |
| 71.11. 0 1313 | Signature of witness |
| CIVILLAN DE BOMAD | ICATE TO BE SIGNED BY SOLDIED |
| CIVILIAN RE-ESTABLISHMENT CERTIFICATION 6. I hereby certify that I am in a position to resume civilia | un occupation immediately on discharge. |
| Place and Date ST. JOHN'S | Jahn albumit |
| | Signature of soldier |
| 8-14-19 | Signature of witness |
| STATEMENT O | OF SERVICE |
| 7. Enlisted for service | No of days on Militar |
| Discharged from service. 10 - 4 - 19 Flu | |
| | |
| APPROVAL OF | |
| The discharge of the above mentioned soldier is hereby. The Royal Newfoundland Regiment, twenty-eight days | s from date. |
| PlaceS.T. JOHN'S, | Officer Commanding Discharge Depot The Royal Newfoundland Regiment. |
| Date APR 1 0 1919 | |
| CONFIRMATION | OF DISCHARGE |
| o. The discharge of above mentioned soldier is hereby of | |
| Maleria Mos | 1 xn vow eyent |
| Place & yours, ryea. | Officerile Records |

a.f. 13 2079/2049

The Royal Newfoundland Regiment

| DEMOBILIZATION OF |
|--|
| Reg. No. ZIDZ Rank PM Name Truting John 1 |
| Date of Enlistment 7 2 16 Address Than Laft District |
| Occupation . Augustuated Classification for Discharge |
| Recommendation S.M.B. Meterasantly lemberedity Rating 20% 6 mos |
| Passed to Demobilization Officer with following documents:— |
| N.F. P 36 B 268 B 121 N.F. Med D.F. 1 |
| B 178 W 3494 B 122 Board 1st " 2 |
| B 178a D 400A B 1915 do 2nd " 3 |
| B 179 D 400B Form L do 3rd " 4 |
| B 179a D 400C Form K do 4th " 5 |
| B 1796 B 103 |
| B 179c B 120 M 93 A 38./ |
| Date. E. M. 19 Jan O. H. Discharge Depot. |
| |
| PARTICULARS FOR DEMOBILIZATION |
| |
| PARTICULARS FOR DEMOSILIZATION 1. Civil Re-Espablishment. I in a position to resume civilian occupation. |
| z. Civil Re-Espablishment. |
| Civil Re-Espablishment. I amin a position to resume civilian occupation. |
| Civil Re-Esymblishment. I am |
| Civil Re-Esymblishment. I am |
| 1. Civil Re-Esphlishpant. I am |
| 2. Civil Re-Esphlishment. I am |
| Particulars passed to Vocational Officer for information and action. Date |
| 2. Clothing. Certified that Clothing Regulations have byer compiled with: (a) Clothing Allowance payable of the compiled with: |
| Particulars passed to Vocational Officer for information and action. Date |
| Particulars passed to Vocational Officer for information and action. Date |

| 3. Transportation and Release Certificate. |
|--|
| The above named has been provided with Travelling Warrant No |
| at |
| on Villian |
| Date 8-E+-191 |
| Demobilization Chicer |
| 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 Lt. 19. |
| Date 8 - 4 - 19 Megot Psymaster. |
| Discharge approved for. 10- 4- 19 |
| Forwarded with following documents to O.C Discharge Depot. |
| N.F. P 36 B 258 B 121 N.F. Med D.F. 1 /. |
| Б 178 |
| B 178a D 400A B 1915 do 2nd " 3 |
| B 179 4. D 400B Form L do 3rd " 4 |
| B 179a D 400C Form K do 4th " 5 |
| B 1130 |
| В 179с В 120 М 93 |
| 9-4-19 Demantend |
| Date Demobilization Officer. |
| APPROVED. |
| Documents as above forwarded to :- |
| Officer ilc Records. Board of Pension Commissioners. |
| with following additional documents. |
| Bligible for War Service Gratelty |
| APR 1 0 1919 P. H. Sait Taple |
| Date 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 fellows:

To resume work at Trand Faels. John Mornis Signature of Man Reg. No. 2/5 2 Signature of the Nocational Officer or his Representative.

Place Deft. Skilita:

The Royal Newfoundland Regiment

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

| 4 | |
|-------------------------------|---|
| Discharge Depot: Headquarters | The Royal Newfoundland Regiment |
| | Date |
| Regimental No. 2152 | · Pipio |
| Name Manis Je | falls |
| Address | Falls |
| | |
| Present Medical Category | |
| Re | commended for:= { (a) Immediate discharge |
| | O.C. Discharge Depot. |
| | Members of Board Senior Medical Officer |
| | Sw Burden |

Birthplace: -Parish

MEDICAL HISTORY

| | A | |
|---------|----|-----|
| Surname | mo | rus |

Christian Name

Table I.—GENERAL TABLE. 1917 County

| Examined | on // day of 7- at #: pshwa; } 19 years | days days 9 inches 129 lbs. 36½ inches | on day of | days |
|--|---|--|-------------|------------------|
| Measure- ment Range of expansion | | 4 inches | | inches |
| Physical Development | | | | |
| Vaccination Marks Arm | Right | Left | Right | Left |
| When Vaccinated Vision | R.EV= 4/6 L.EV= 4/6 | | R.EV= L.EV= | OCATION . |
| (a) Marks indicating congenital peculi- arities or previous disease | (6) COUNTRACTORS OF | | Ann de Mei | |
| (b) Slight defects but not sufficient to Cause Refection: Approved by (Signature) | 18 APR 191 | GHE . | | |
| (Rank) | | Medical Officer. | at | Medical Officer. |
| Enlisted | on day of | 191 | on day | of 191 |

Joined on Enlistment . . .

UK MAN 195

(Rank)

191

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

| | , | | | | | | Table II.—Only for admission | n to hos | pital or to the sick list in case of Warrant Officers treated in quarters. | |
|---|-------------|--------|--------|-------|--------|--------------|--------------------------------|-------------------------------|---|------------------------------|
| Name of Hospita | 1 | Admitt | ed to | Di | Hospit | d from al | Disease | Number Days in Hospital | Remarks bearing as the cause, nature or treatment of the case likely to be of interest, or of further use. In cases of syphilis, admissions and re-admissions to hospital with be shown. The subsequent progress, including particulars of treatment out of hospital, transfere, de., will be given in the special pythilis case sheet. | Signature of Medical Officer |
| | Day | Mon | th Yea | r Day | Mont | Year | | Hospital | of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet. | |
| TO LONDON GENERAL 1940 WALKER WORTH | 6 | 3 | 17 | 10 | 4. | 7 | Gas Porioning | 35 | France: sheel gas: 4 days unconscions: Confut rounting | Appromera es |
| 4th SCOTTISH GENERAL HO STORMAL OLASONE 8rd SCOTTISH GENE | SAJ6 RAL | 7 | 17 | 22 | 7 8 | 17 | Syphilis (42) Syphilis (42) | 88 | transferred to 300 to En 7? | Prettin Sylens |
| | 24 | 11 | 17 | 2 | / | 18- | S.S. W. RIELLA. | 39 | Heales - | Leun Solowa Colow VADAA. |
| | | | | ~ | | | | | | |
| | | | | | | | | | | 7 |
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| | | | | | | × | | | | |
| | | | | | 10 | | • | | | F 2 |
| | | | BARGE | | | | | | | [P.T.0.] |

Table III.—Boards: Courts of Inquiry, Vaccination, Inceulations, &c.: Examination 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 |
|--|---|
| The second secon | Successful Vaccination Completed Attistes |
| . 7. 16 w . 7-18 | Git for freign Service N. J. W. |
| | It is hereby certified that this shir r has been before the Standing Medic t Board and has been classified as for discharge on Demobilisa- tion. Medical category |
| | Jan Mas J |

TABLE IV.—SERVICE TABLE.

| Station or Troopship | Date of Embarkation | Date of Departure on Disembarkation | Station or Troopship | Date of Arrival or Embarkation | Date of Departure or Disembarkation |
|---|------------------------|---|--|--------------------------------------|---|
| St Thus, reged. | 23/3/16 | 9/4/16 | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | 2000 | |
| A 100 March 18 March | | | | 1 | |
| | | | | - | |
| | | | | - 18 | |
| | T. | | La Carta de la Car | | |



Department of Militia, Newfoundland Medical Department

Medical Report on an Invalid

NOTES:-

- (a) This report is solely concerned with Pensions.
- (b) A single copy only is required
- (c) "Aggravated" being now a technical term, carrying right to pension, discrimination in its use is essential.
- (d) Be as brief as possible compatible with lucidity.
- (e) Avoid dubiety-"perhaps" "possibly" "might" and the like.
- (f) Only sufficient clinical data need be given to establish the degree of disability and assist the Board in arriving at a decision.

STATEMENT OF CASE

Station of Johns.

Date opin 3 - 5/19

- 1. Unit Royal Newfoundland
- 5. Age last birthday 22
- 2. Regimental No. 3152
- 6. Enlisted on 13 feb/16.
- 3. Rank Stape.

- at the gola Grandfallo.
- 4. Name mouis g.
- 7. Former trade or occupation Paper marker.

 Disability G. E.W. R. Should

8. Disability 9. EN. R. Shoulder.

9. History Ales gamed 23 feb. 1917. mas in Hoop. 6 mos. Relimed to line & he seemed of Son & he seemed

| 10. What is his present condition? Loose in frod Condition |
|--|
| (This is the important question. Be brief-the clearer the case the less need be written. Read note f above.) R. Amelder Complete |
| Pain in should non morting |
| also shortness breath. aux |
| no advention sound |
| in ohear - |
| / |
| 11. Was sanatorium operation advised and refused? |
| 12. Do you recommend discharge as 75 |
| |
| |
| |
| Signature II Nomi |
| Rank or Qualification |
| |
| |
| |

Signature

Remarks if any by Officer i|c Hospital.

Place

Date

Opinion of the Medical Board

May

be considered as aggravated

due to

In para. 13, the President should write "may" or "cannot" at x Erase inapplicable words

13. For pension purposes, the disability x

| (a) Service during this war. (b) Climate (c) Ordinary Military Service Remarks if any:— |
|---|
| 14. Does the Board concur in preceding report? (see Sect. 10) If not give differing opinion and additional findings. |
| Ro cough pulse 80 but complains of |
| Sporthers of treath were in gas any. |
| Wound of shoulder fengledating - two |
| and morement at the boat |
| 15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market? |
| (b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a ful livelihood in the general labor market lessened by that poption of his disability to or incurred during service? |
| (State in percentage.) |
| Remarks if any:- |
| 16. Is the disability permanent? |
| 17. Has the disability been aggravated by (a) Intemperence (b) Misconduct |
| 18. The refusal of operation sanatorium is:— (a) Reasonable (b) Unreasonable |
| Remarks if any:- |
| |
| 19. If fit subject for Hospital do you recommend admittance to (General Hospital, Naval and Military Convalescent Hospital, Jensen Tuberculosis Camp. |
| 20. We recommend discharge from the Army |
| Lo al |
| Remarks if any:- |
| President |
| Signatures Usubjoint |
| Le L |
| Place & Johns, |
| Date Opt/19 |
| |
| APPROVED |
| DE MEDICAL C |
| Date APR 4 1919 9 |
| No. I Clums Macherson |
| Administrative Medical Office Age |
| |
| |

(1000-16-12-18)



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 persion, 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 John Murres Regiment from which discharged Royal Newfoundland Regimental number 2/62 Intended address Frank Tall Height on discharge 5 Feet 10 Color of hair on discharge Light. Brown Complexion Scar Right Shoulde Descriptive Marks Figure on discharge Christian name of Father Chale Elizabeth. Christian name of Mother Wife's maiden name in full Date and place of marriage Christian names of children Place and date of soldier's birth Lowly 713. 6th feb. 1897. Nature and locality of civil employment required statement are, to the best of my knowledge, correct

I declare that I am the soldier referred to above and that all the particulars contained in the above

John Moonis (Soldier's signature in full) L/Cpl Station Segolus Date 3-4-19.

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 ic Hospital. Unit, or Command Depot.

tobals during

Se VICTORIA ST.
LONDON E.W.
2 4 JAN 1918

0. ijc No. 1 Infantry Section G. H. O. . 3rd Echelon

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178 to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY OF

| TABLE I.—General Table, Birthplace County | | Inoculation Service, En of Service; | ns, etc.; Exs xtension, Re | ourts of Enquiry minations for Fi engagement, or rgical Appliance to. | eld or Poreig Prolongatio |
|--|----------|---|-------------------------------|---|--|
| Examined {onday sf | 191 , | Date | | Brief Details and Signs | sture |
| namined (at | | | | | |
| Declared Age | daya. | | | | |
| Trade or Occupation | | | | | |
| Jeight | inches | | | | |
| Veight | lbs. | | • | | |
| Chest Girth when fully Expanded Expanded | inches | | | | |
| Range of Espansion | inches | | | | |
| Physical Development | | | | | |
| Vaccination Marks Arm RIGHT | LAFT | | | | |
| (Number | | | | | |
| When Vaccinated | | | | | |
| Vision R E - V - | | | | | |
| (LE.—V= | | | | | |
| Marks indicating congenital peculiarities or discase— | previous | | | | |
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| b) Slight defects but not sufficient to cause rejection | n— | | | | |
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| approved by | | | | | |
| Rank | | | | | |
| | Officer, | | MADIE III | Service Table. | NO PERSONAL PROPERTY. |
| 5.00 | | | TABLE IV. | | |
| Bulisted (at | | - | Troopship | Date of arrival or conbarkation | Date of departure or disembarkation |
| enlisted at | 191 | - | | | |
| Bulisted at | gtl. No. | - | | | |
| Sulisted at | | - | | | |
| talisted an day of the control of th | gtl. No. | - | | | |
| taliated at day of day of Corps Re- cined on Corps Re- calistment forces chlores of 2 | gtl. No. | - | | | |
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| Initiated at the state of the s | gtl. No. | - | | | |

TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.

| Name of | 3 7 | dmitted t Hospital | | Die | charged f Hospital | om | Disease | Number of days in | 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 re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, de, will be given in the special cyphilis case sheet. | Signature of |
|-----------------------------|-----|-----------------------|------|-----|-----------------------|------|-----------------------|---|--|-----------------|
| Hospital | Day | Month | Year | Day | Month | Year | Hospital out of hospi | | will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special apphilis case sheet. | Medical Officer |
| DIVISION MILITARY HOSPITAL, | 24 | 1 | 18 | 9 | 4 | 18 | Goworrhoea. | 76 | Transperses out patients | Verurellar |
| Unioction, | | | | | | | | | / | Capt |
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SYPHILIS CASE-SHEET.

Regtl. No. 2152 Rank and Name 9 to horris Jue Corps 4. Wflot. Placed on Syphilis Register at 4 And Slon you 26 - 4- 17 No. in Register

Disease contracted at . Primary sore appeared on (date) 8-6-17.

CONDITION WHEN PLACED ON REGISTER.

Lymphatic glands

Primary sore character and site love under proponer.

Indurated flowers. Skin (nature and distribution of rash) "papula rash a Trusc.

Mucous membranes

Other symptoms

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) 11-6-17

Station

Date 7.8.17. Signature of M.O. Mekhan Afterns

Struck off Syphilis Register at

(a) Recovered

Cause of being struck off Register (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 15.5.14."

| | | dresult of the blood test to be entered; and if negative, the date on which the | _ | 10000 | | | | 200 | | | | |
|---------------|---------|--|-------------------------------|-------------|-----------------------|-------------------------|--------------|--------------------------|--|--|------------------|--|
| | | | | Uris | W m | asser anno action | | | | reatment | | |
| | | | I B | - | Re | action | Intre | renical | 1 | Mercurial | Other Methods | |
| Station | Date | Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.) | Weight clothed, without boots | Normal (N.) | Method (Original (O.) | tive (+) | Inje Do gran | sction. se in mmes | Intramuscular injection. Dose of Metallic Mercury in grains. | Inunctions or Oral (Preparation and dose) | | Signature of M.O. (Each M.O. will sign his rance in fall on the first occasion; subsequent entries may be initialised) |
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| | rm B. 103. | Casualty Form-Active | | | 1363 |
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| | or Corps / | newfoundand 1 | Regime | ntal Num | ber 2/5 |
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| Religion_ | hot. | Age on En | listment_ % | years | - month |
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| Date | From whom received | Record of promotions, reductions, issue fore considered of during active service, as impaired on Anny Form A. St. Arm Form A. St. St. St. St. St. St. St. St. St. St | Place of Casualty | Date of Casualty | Remarks Taken from Atmy Form A. or other official documents |
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(a) In the case of a man who have engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.

[P.T.O.]

[P.T.O.]

| Place | Date of offence | Rank | Cases of Drunken- ness | Offence | Names of Witnesses | Punishment awarded | Date of award or of order dispensing with trial | Service or Proficiency I Life Character By whom awarded | Rem |
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April 28,1919

#2152 Ptc. John Morris, Grand/Fells.

Dear Sir:
Meferring to your application I enclose chaque
for Seventy dollars (\$70,00), being amount of first payment
due you on account of the "wer Bervice Gratuity."

Yours truly

Peym ster & v. 1 . Records

17376

DEPARTMENT OF MILITIA. WAR SERVICE GRATULTY.

St. John's, Newfoundland.

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

A complete reply must be given to every question in this Declaration There must be no blanks and no deahes 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 T/C RECORDS. PAY & RECORD OFFICE. ST. JOHN'S. Christian name 6. Address in full to which future powents of raturaly are to be 6. Date of enlistment in the Regiment ... 7. Hard of dependent, if any, to whom Separation Allowance is being issued, or was being issued, innedictely prior to your discharge ... 8. Relationship of such dependents 9. Address in full of such dependents.... 10. Is said dependent, now, or was said dependent at any time in receipt of Someration Allowance on account of another soldiers ... 11. Were you on active service only in Hild Is so, give dates and particulars of such service. . 12. Give total length of time which you served of

the ful of glade of language discharge

| [- [- [- [- [- [- [- [- [- [- |
|---|
| 13. Have you had more than one enlistment? If so, give particulars |
| of discharge and re-enlistments and under what regimental numbers. |
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| 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 end by whom paid |
| Mother allowance Hackpay 140.30 |
| Board allowance 54.8 |
| 15. Have you been issued with a War Service Badge? |
| 16. Have you, during the present war, served in the I period Borces. 10 |
| .17.Are you entitled to receive, or have you received my Gratuity |
| in the nature of Post Discharge Pay from the Isporial Forces? If |
| so, state mount received, or to which you are entitled. Mo |
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| 18. Did you revert Overseas to a rank lower than the substantive |
| renk hold by you on your arrivel in England? |
| (b) If so, was such reversion in consequence of Misconduct or |
| inefficiency? |
| 19. Are you now serving in the Roat ? It not give? - (a) date |
| of discher 3. 1.9. (b) Roason for dyscher 50. |
| Memporary Wenestellization |
| |
| 20. Did you at any time serve at the front in an actual theatre of |
| War? If calgive particulars of places, and dates of such service |
| all Delgram thermany - From Stuly 1916 |
| amilations Guera, Muderout |
| 21.(2) Are you receiving treatment from the rivil Re-Establishment |
| Com.(b) If so are you in receipt of full pay and allowences from |
| that Cornittee |
| And I she this solan 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:

Place of Residence:

Declared before no at:

Signature of Barrister of the
Supreme Court, Stapediary Registrate, Fotor Table, Justice of the
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1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

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This Form is to be used in connection with Pamph. N.F. 1915

In the spaces below should be entered the findings in the routine of cammination as forth in the appendix, Care should be exercised that each finding be entered after the number which corresponds to the number of that test.

| Examination of John Morris | | | | |
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| aged | 19 conducted at Franco Falls | | | |
| Date: | 17//6 Recruiting officer: | | | |
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ST. JOHN'S, APR 8 - 19

Royal Newfoundland Regiment.

| Billeting | To L/C | 9. | Morris |
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| Billeting Soldiers as from Feb 8 th | undermentioned /19 to afor 1 at | /19 C.S. |
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DEPARTMENT OF SOLDIERS' CIVIL RE-ESTABLISHMENT

Halifax, N.S., April 9021 SCR "B" M-1011

| TO THE PAYMASTER Dept. of M.& D. New | foundland M. D. | DISTRICT |
|---|----------------------------------|---------------|
| Name 2152 ex L/Cpl. Morris John Ed | ward | |
| (Ez-No.) | (Ex-Rank) | (Barr.) |
| was admitted for treatment under this Department on | 4-4-21 | |
| On receipt of this form, please complete and detach | (Date lower portion, and retu | rn same to"B" |
| Unit, Dept of S.C.R., at Halifax, N.S. | | |
| ischarged from His Majesty's Forces at | St. Johns Mfld | - Annil 24-10 |

Dis It Johns

[Army Form W3601.]

761 WILI

| Soldi | er's | - |
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| Regl. | er's No.2 | 152 |

Surname Morris

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Corps

ROYAL NEWFOUNDLAND REGIMENT.

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Tunia B

(tatie) 13 blanter france at the day of my death I have all my pround mony to Charles More is crowly trainly the tinfty Bay of Judy I teave ear for france 28.7.16 John Morris -no2159

Jane S. Cap Badge. 10/6/16

Reg. No. 2102 Rank Light. Name Morris Attested Allottee Returned from Overseas. exsican lee Dis- from the army.

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

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

Name . John Morris . (Spe).

Date . 17: 11: 12 ...

Place Frand Falls.

C.R. 2152

RECEIPT.

FOR ISSUE OF REBAND OF TIOTORY METAL 1914-1919.

I cortify that I have received an issue of 2 inches of Riband of Victory Medel-1914-1919.

NO. 2.152 NAME, form Morris

DATE . 12 . 2 . 20

FIECE Grand Falls.

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

W10050/P2108 500m 3/19 C. & Co. S.W E 4632 Army Form W3553.

June 30th., 1921, 1919.

| The accompanying | King's Certificate, | on | his | discharge |
|------------------|---------------------|----|-----|-----------|

(No. 780), is forwarded herewith to

Lance Corporal John Morris

in respect of his service as No. 2152 Rank L/Opl.

Name John Morris Corps Royal Mfla. Reg

Receipt of the same should be acknowledged hereon.

Received Certificate. Hbs.

Signature John Morris.

Date 36. July 1921.

Address Trouty Chinity Bay &

The Royal Newfoundland Regiment

| No | Rank LAS | Name |
|----------------|--|---|
| Former Occupa | ition Add | ress District |
| Class | Medical Category | Disability Rating |
| O.C. Discharge | Depot. | |
| | | no employment in prospect on his discharge. His personal wish |
| | been referred this day to the V abeyance. | |
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| | Army Forn | B. 103. | Casualty Borm-Active | Regiment Service. | O:F | 2152 |
|-----------|-------------------------|--|--|--------------------------------------|---------------------|---|
| | Rank 🛪 | Surname | ment or Corps Noyae 16 | an Name | plan | de His |
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| inform. | Date | Report From whom received | Record of promotions, reductions, transfers, committee, Ac., during active service, as reported on Ardy Form II. 213. Army Form A. 36, or in other official definitions, The authority to be gooded in each case. | Blace of Cartialty | Date of Casualty | Remarks Taken from Army Form B. 21s, Army Form A. 30, or other official documenta |
| | | D.9 B D | Embarked, Disembarked | South aufta | 25.7.18 | · C |
| | | N. 9 13 N | Joined Joined Battellon | Rosen 31 JUI | 1918 | |
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| NahilV. | (a) In the ca | se of a man who has re-eng phoeing-smith, & Marker 1970 | gaged for, or enlisted into Section D, Army Reserve, par | ticulars of such re-engag | ement or enlists | nent will be entered. [P.T.O. |

Next of hu : " Wither, "Morret, Mrs. Elizabeth Mane rella Afth.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

| | iental Number | and Name | | Enlistment | Trade | New foundand Ray | tement | Signature of O. C. Compar | BUTHERINE | |
|-------|--------------------|----------|----------------------------------|---|-----------------------|------------------------------|--|---------------------------|-----------|--|
| No. 7 | monis | y. a. | | Age on 19 years months | Trade mark | Good Conduct Badges, Service | Pay or Proficier | acy Pay | ludg A Co | |
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The Royal Newfoundland Regiment

| DEMOBILIZATION OF |
|---|
| Reg. No. 2/52 Rank Hts. Name Motris Johns |
| Date of Enlistment 17: 2. 16 Address Frank Lall District Lulight |
| Occupation . Kaper Maked Classification for Discharge Medical Category |
| Recommendation S.M.B. Altmanertly unfestility Rating Zogo 6. mo |
| Passed to Demobilization Officer with following documents:- |
| N.F. P 36 |
| B 178 W 3494 B 122 Board 1st 2 B 178a / D 400A R 1916 do 2nd 3 3. |
| |
| B 179 D 400B Form L do 3rd " 4 |
| B 179a D 400C Porm K do 4th " 5 |
| B 179b. B 103 A. ME 2 6 6 7.2.3.8. / 6 |
| B 179c B 120 M 93 |
| Date. E. M. 19 Jan O. C. Discharge Deport. |
| PARTICULARS FOR DEMOBILIZATION |
| I. Civil Re-Establishment. |
| I am |
| Tam. V. S. S |
| |
| golm allows |
| Particulars passed to Vocational Officer for information and action. |
| Date \$ 9-4-19 9 9 from Level |
| Date 8-4-19 9A Smwfw1 |
| . 0' |
| 2. Clothing. Certified that Clothing Regulations have been complied with:— |
| Certified that Clothing Regulations have been compiled with:- |
| \$10000 |
| (a) Clothing Allowance payable (1) |
| (a) Clothing Allowance payable & Comments of Comments |
| alloto - for 1/1 |

| 3. Transportation and Release Certificate. |
|--|
| The above named has been provided with Travelling Warrant No 1.2.3.1 to his home |
| at |
| and section certaintain 10 Issueu. |
| Date Lt -19 Me thought |
| 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 5 - 4 - 19 AM 11 L |
| Depot Paymaster. |
| Discharge approved for 10 - 4 - 19 |
| Discharge approved for |
| Forwarded with following documents to O.C Discharge Depot. |
| N.F. P 36 B 268 B 121 |
| Б 178 |
| 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 179c B 120 M 93 |
| |
| Down 1 19 A Showlford |
| Deprobilization Officer. |
| |
| APPROVED. |
| Documents as above forwarded to:— Officer ilc Records. |
| Board of Pension Commissioners. |
| with following additional documents. |
| Figural for War Consider Cratify |
| Eligible for War Service Gratiky |
| 100. |
| Date APR 1 0 1979 P. H. Jail Capl. |
| O. C. Discharge Depot. |
| Received the above noted documents from O. C. Discharge Depot. |
| Hitholling IV Show |
| 11/1/1/1 |
| Date 10/4/19 for free of Reards |
| |