

2790

# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 2790

Name Selby Allan Morris Corps

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

- |  |                                    |
|--|------------------------------------|
| 1. What is your name? .....  | 1. <u>Selby Allan Morris</u>       |
| 2. What is your full Address? .....  | 2. <u>Crook Island Cove</u>        |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u>                      |
| 4. What is your age? .....   | 4. <u>19</u> Years <u>2</u> Months |
| 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, Selby Allan Morris 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.

Selby 23rd/16 Selby Allan Morris SIGNATURE OF RECRUIT.  
Chas. A. Ape Signature of Witness.

Selby Allan Morris OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Selby Allan Morris do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 25th day of May 1916.

Signature of Attesting Officer Chas. A. Ape

†CERTIFICATE OF APPROVING OFFICER.

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

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

Date.....191..... } Approving Officer.  
 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 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).....





This Form is to be used in connection with Pamph. M. E. (1)  
N. F. 1915

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of Selby Morris  
aged 19 conducted at C. Y. 13.  
Date: May 23/16 Recruiting Officer:

NO OF TEST	FINDING
1	no
2	no
3	no
4	no
5	no
6	no
7	yes
8	yes
9	no, no
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
17	✓
18	✓
19	✓
20	✓
21	✓
22	✓
23	✓
24	✓
25	✓
26	✓
27	✓
28	✓
29	✓
30	✓
31	✓
32	✓
33	no
34	5.4
35	131
36	35/39
37	4.00 per year
38	Father Mrs Eleanor Lower Island Cove
39	none

2790

7/11

Signature of Medical Examiner: W. Burden  
Lieut.

C.R!

2790

**Extract from Daily Orders part II, Depot St. John's**

**dated 12-4-19.**

**The discharge of the undernoted on demobilization has been  
CONFIRMED by Officer I-c Records on 10-4-19.**

**#2790 Pte. Selby Morris.**

C.R. 2790

Extract from Nominal Roll of Nfld. Regt. Embarked  
from Southampton from 2nd Bn. Depot, to 1st Bn. B.E.F.  
Draft No.15. 12-12-16.

2790 Pte. S.A.Morris.

C.R. 2790

Repbast from Daily Orders Part 11 Unit The Royal Nfld. Regt.  
St. John's, March 27th, 1919.

The Discharge of the undernoted on Demobilization has  
been APPROVED BY.O.C. Discharge Depot on noted date.

2790 Pte. Sebly Morris.

27-3-19.

C.R. 2790

Selby Allan Morris was attested for General Service  
with the NEWFOUNDLAND REGIMENT on ..... May 23rd 1916  
Regimental No. 2790 was allotted to Pte S.A. Morris.

AUTHORITY:

Record Officer

Dept. of Militia,

March 20th, 1919.

S. Morris.

C.R.

2790

P. 2790





✓ 9. Name and address of your last Employer.	Mr E. Morris. Lower Isld Cove. C. B. Nfld.
✓ 10. The amount of your salary or wages immediately prior to Enlistment.	\$ 400.00 per annum.
✓ 11. Are your wages or any portion being paid by your employer during your absence?	No.
✓ 12. If paid, what is the amount per month?	No.
13. Name of Corps prior to Enlistment in the Newfoundland Contingent.	_____

I CERTIFY that the above is a true statement

Mr Selby William Morris

Signature of Officer forwarding this Application.

W. H. C. [Signature]

Unit 2<sup>nd</sup> Bn. ROYAL NEWFOUNDLAND REGT.

Date Nov 4/18.

FOR COMPLETION AT THE PAY & RECORD OFFICE.

Date marriage Certificate examined 2/3/11/18

Date Birth Certificates (in case of children) examined \_\_\_\_\_

If Soldier is sole support, does Statutory Declaration accompany this Application? \_\_\_\_\_

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

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

1. Unit and Corps. *Royal Newfoundland* } Former Trade or Occupation }
2. Regtl. No. *2796* 3. Rank. *Pte* 7a. If the soldier claims previous service in Army, he should state—
4. Name *MORRIS* *Selby* (a) Former Regts. or Corps ;  
(Surname) (Christian Names) with Regtl. Nos.
5. Age last birthday.....
6. Posted for duty on..... at.....  
in category (or grade).....
8. If the disability is an injury was it caused  
(a) in action (b) on field service  
(c) on duty (d) off duty? (b) Date of Discharge ;  
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—  
(a) When (d) Particulars of Pension or Gratuity  
(b) Where (if any)  
(c) Opinion of Court

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

### Statement of Case.

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

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

*J.S.W right leg fracture 4/12/17  
wound not healed. No  
disability.*

**OPINION OF THE MEDICAL BOARD.**

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

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

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

14. State whether the disabilities are
- |  |                     |                   |
|--|---------------------|-------------------|
|  | (a) attributable to | (b) aggravated by |
| (i.) Service during the present war .. .. .                | <i>Yes</i>          |                   |
| (ii.) Previous active service .. .. .                      | <i>No</i>           |                   |
| (iii.) Climate in pre-war service .. .. .                  | <i>No</i>           |                   |
| (iv.) Ordinary military service before the war .. .. .     | <i>No</i>           |                   |
| (v.) Serious negligence or misconduct on the man's part. } | <i>No</i>           |                   |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } *N.A.*

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

15. What is his present condition?

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

*Sear about 3 x 1 1/2 posterior surface right leg. Not painful on pressure. Blisters of pain in leg after walking long distance.*

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

20. Do you recommend—

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

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

*Rehabilitation  
Hobbs, M.O.*

ROYAL NEWFOUNDLAND REG.

Medical Officer in charge of case.

Station .....

Date .. 8 JAN 1919 ..

\* 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

21. Give diagnosis and particulars of:—

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

22. State whether the disabilities are:—

- |  |                     |                   |
|--|---------------------|-------------------|
| (i) Service during the present war .. .. .                               | (a) Attributable to | (b) Aggravated by |
| (ii.) Previous active service .. .. .                                    |                     |                   |
| (iii.) Climate in pre-war service .. .. .                                |                     |                   |
| (iv.) Ordinary military service before the war .. .. .                   |                     |                   |
| (v.) Serious negligence or misconduct on the part of the soldier .. .. . |                     |                   |
- Give details:

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

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

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

NEWFOUNDLAND CONTINGENT N.F.P./11.  
 53, VICTORIA ST.  
 17 JUL 1918  
 PAY & RECORD OFFICE

NUM. 1001  
 ALLOT. INDEX 387  
 REGISTER 651  
 EXAMINED

NEWFOUNDLAND CONTINGENT  
 No. 4337

ALLOTMENT

I, (No.) 2796 (Rank) Cpl (Name) Selby Morris

hereby agree, until further notification by me, and in required form, to make an Allotment of \_\_\_\_\_ dollars and Thirty cents per diem, from my pay, to and for the benefit of the undermentioned Person and/or Persons. Such payments to be made on proof of identity of the Person and/or Persons concerned, viz.,

Whether Wife, Child, other Relatives or Friend.	NAME (In Full)	ADDRESS	AMOUNT (Each Person)	
			\$	¢
Brother.	Alfred. B. Morris.	Lower Island Cove. Conception Bay Newfoundland.		30
				30

This Allotment to take effect from and including Aug 1st 1918.

NOTE:- This Form must be completed and signed by the Soldier, countersigned by the Officer Commanding his Company, and forwarded to the Chief Paymaster in accordance with P. & R.O. C.L.10, 9/12/16.

(Sig.) J. B. [Signature] Captain  
 Officer Commanding,  
 "A" Company.

Dated at  
Hazelton Down Camp.  
Winchester Heights July 16 1918

(Sig.) Selby Morris  
 Allottor.

NOTED  
 J.R. Hopkins.  
 16/7/18 H.



Bleakdown. Mil. Hosp.  
W. Byfleet.  
Surrey. 7-2-18

The Chief Paymaster  
Newfoundland Contingent  
58 Victoria Street.  
London.

Dear Sir.

Will you kindly  
forward me the sum of £5; and charge  
same to my "Account" please  
Your Obedient Servant.

Pt. S. A. Morris

No 2790.

Royal N. F. L. S. Regt.

Approved  
J. S. Carli  
No.

BLEAKDOWN  
AUXILIARY  
HOSPITAL

BRANCH
ACTED UPON
BY
DATE

DEPARTMENT	✓ 1346
Reference No.	
Date Rec'd.	8 FEB 1918
" Ack'd.	
" Ans'd.	2/12/4
File	

Rs £ 5 = 0 = 0  
AW. 8-2-18

2/12/4

2112/4

Blekkdown Mil.  
West Byfleet

9th February 8

2790 Pte.

S. A. Morris

5:0:0



No. 2790 Rank Pvt Name S. Morris

Pay	F.A.	Wkg	Total	N.F.P. 3
100	10		110	
Less Allotment			60	
Net Rate			50	

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£ s d		
						From	To			£	s	d
Balance					Balance		21 <sup>17</sup> / <sub>7</sub>			21	19	7 <sup>1</sup> / <sub>4</sub>
Acquittance Rolls					Pay @ Net Rate	22 <sup>17</sup> / <sub>7</sub>	27 <sup>18</sup> / <sub>78</sub>	68	50	34	00	6 19 9 <sup>1</sup> / <sub>4</sub>
Hospital Advances		2	8	0	Rahim Allow.							1 0 0
A.B. 64.					27 <sup>18</sup> / <sub>78</sub> 8 3 <sup>1</sup> / <sub>8</sub>							
P.&.R.O. Payments		5	0	0	10 days @ 2/-							
	6 Lesue 780	9	27 <sup>18</sup> / <sub>78</sub>	22 10 0								
					22-11-4 ✓							

29-19-4 ✓

7.8.0 ✓

*[Handwritten signature]*

No. 15852/1674.

N.F.P./79.

NEWFOUNDLAND CONTINGENT

From:

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

To:

Officer Commanding,  
Bn. Royal Nfld. Regt.,  
Winchester.

October 2nd, 1918

Subject: 2790, Pte. S.A. Morris,

With reference to the following telegram (8444) from the Hon. Minister of Militia, received

"Pay to 2790, Pte. S.A. Morris, £25.0.0.

Draft £ 25.0.0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon

*A. A. Munnell Maj.*  
Chief Paymaster & O. i/c Records.

Oct 7 1918

Receipt hereunder.

*Chambers* <sup>Capt</sup> *for* **LIEUT. COLONEL,**  
**COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.**  
Officer Commdg.          Batt'n  
Royal Newfoundland Regiment

Received the sum of Twenty  
Five Pounds on account of  
cable remittance from Newfoundland.

Morris  
No. 2790 Rank Pte

Witness, *J. R. Hopkins* £2ms

ORIGINAL.

ENTERED.
PAY LEDGERS
NUM. R.O. N.F.P.
ALLOT. INDEX
" REGISTER
EXAMINED

NEWFOUNDLAND CONTINGENT

CANCELLATION OF ALLOTMENT

1. I, (No) 2790 (Rank) Pte (Name) Selby Allen Morris.  
 hereby apply for cancellation of Allotment made by me on N.F.P./11  
 No. 4337 dated 1<sup>st</sup> Aug July 1918 in favour of  
Mr Alfred Morris. Lower Island Cove. C. Bay Nfld.  
 for \$ .30cts per diem.

Such cancellation to take effect on the 31<sup>st</sup> day of  
October 1918.

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

Dated at HAZELEY DOWN CAMP.  
Oct 10 1918

COPIES SENT		
TO	NO.	DATE
M. OF M.	<u>16567/170</u>	<u>22/10/18</u>
O.C. 1ST. BN.		
" 2ND. BN.		
<u>2790 Pte Selby Allen Morris</u>		
Allotter.		

Approved and Witnessed:  
[Signature]  
 O.C. "H" Company.

2nd BATTN. ROYAL NEWFOUNDLAND REGT.  
 N.B. - To be made out TRIPLICATE and delivered to the Pay & Record  
 Office not later than the date of cancellation, in accordance  
 with P. & R.O. C.L./10, 9/12/16.

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

NEWFOUNDLAND CONTINGENT

N.F.P/55.

Pay & Record Office,  
53, Victoria Street,  
London, S.W. 1,

To:

Mrs. Mary Morris,  
D.M.A.A. Hostel,  
Hazelty Down Camp.



Reference:

Separation Allowance 1918 P. & A. Morris.

Herewith

Marriage Certificate.

Please acknowledge receipt hereon.

(Sig.) Mary Morris

(Date) Date 11<sup>th</sup> 1918

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

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

NEWFOUNDLAND CONTINGENT

PAY DISC.	
NUM. INDE.	
ALLOT. INDEX	N.F.P. 184
REGISTER	
EXAMINED	

*Self*  
*W. J. Gordon*  
*W. J. Gordon*

SEPARATION ALLOWANCE

To be Used in the Case of Men Requesting Permission to Marry

To the Officer Commanding 2<sup>nd</sup> Bn ROYAL NEWFOUNDLAND REGT

Sir,

I have the honour to request permission to marry and your recommendation for the issue of Separation Allowance to my intended wife:-

- ✓ My intended wife's name is Mrs Mary Greatbatch
- ✓ Address 26 Broom St. Hanley Stoke on Trent
- ✓ Occupation Housemaid
- ✓ Name and address of parents or guardian. Mother Mrs Rose Banks  
26 Broom St. Hanley Stoke on Trent

I attach herewith certificate as to my intended wife's character and general worthiness from H. Baron. M.A. 2 M.A.A.C.

I am not in receipt of a salary from the Newfoundland Government in addition to my Military Pay.

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

Selly Allan Morris  
(Regtl No.) 2790 (Rank) Pte

I hereby approve of the marriage of the above named soldier, and recommend that separation allowance be granted to his wife.

I have personally investigated the above application and am satisfied as to the intended wife's good character and consider her worthy to receive the benefits of separation allowance.

The soldier has assigned at least 50% of his pay in favour of the above-mentioned lady.

\*CERTIFIED COPY EXTRACT FROM PART II ORDERS No. 587 Dated 11/10/18

PERMISSION TO MARRY.

2790 Pte. S. Morris,

The marginally named is granted permission to marry with effect 12<sup>th</sup> Oct. 1918

\*Auth. \_\_\_\_\_ )

The written evidence upon which my decision is based is enclosed for your disposal together with the marriage certificate.

Signature J. J. Barton Rank LIEUT. COLONEL.

Dated Oct. 10<sup>th</sup> 1918 COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT. Comdg

This document must be signed personally by the Officer Commanding the Unit.

APPLICATION FORM MUST ACCOMPANY THE ABOVE.

*[Handwritten signature]*



Mrs Mary Greatbatch has been serving  
in the Camp for nine months, when  
forming three references are required.  
Greatbatch has very good references;  
her conduct in the Camp has been  
excellent. as regards work & character.

A. T. Baroni  
U.A.  
2 H.A.A.C.

*colt*

ENTERED
PAY LOG N. F. 27.2
NUM. SOL. 1531
REGISTERED
EXAMINED

*with the*

NEWFOUNDLAND CONTINGENT

SEPARATION ALLOWANCE

NOTICE

THIS STATUTORY DECLARATION is to be filled in correctly in every detail, and a complete reply must be given to each question. Each statement is considered to be made on Oath and the form is to be signed before a Magistrate of your District, and returned to

Chief Paymaster & Officer i/c Records,  
Newfoundland Contingent,  
58, Victoria Street,  
London, S.W. 1.

1. Name in full of Soldier <i>✓ Selby Allen Morris</i>	Rank <i>✓ Pte</i>	Regiment or Unit <i>Royal Newfoundland</i>	Regtl No. <i>✓ 2490</i>
2. Age of Soldier: <i>22</i>	Married or Single: <i>married</i>		
3. Name in full of Dependent <i>Mary Morris</i>	Relationship: <i>Wife</i>		
4. Address in full	<i>6/o Mrs Thos. G. North (Widow) St. Winchester</i>		
5. Date of Marriage <i>12 Oct 1916</i>			
6. Place of Marriage	<i>Winchester Hants</i>		
7. Did marriage take place since Soldier's enlistment?	<i>yes.</i>		
8. Was Commanding Officer's permission obtained? If not, why?	<i>yes.</i>		
9. If not married, how long have you been dependent on the Soldier for your maintenance, and supported regularly by him on a bona fide domestic basis?			
10. Were you living with your husband immediately prior to his enlistment? If not, how long have you been separated?			
11. Is Separation a legal one?	<i>yes</i>		
12. If legal are you in receipt of Alimony? If so, state amount.			
13. If not legal, how long since your husband contributed to your support? Explain fully.			
14. State amount of Allotment received by you from Soldier.	<i>none at present received</i>		
15. From what date have you received Allotment?	<i>allots 60 cents (2/6) see above 23/11/18</i>		
16. Names of Children (Male)	Age last Birthday	Names of Children (Female)	Age last Birthday
<i>(I have one child by my former husband.) William Raymond Squettish</i>	<i>1 year.</i>		

*by*

17. Are you already in receipt of Separation Allowance from any source? If so, state amount.	<i>which ceased on re-enlistment 13/9. a week pension</i>
18. Are you in receipt of payment from any Patriotic Fund? If so, how much?	
19. Have you made a previous claim for Separation Allowance? If not, why? Give particulars.	
20. Was your husband at the time of his enlistment an employee of the Newfoundland Government?	
21. In what capacity and in what place?	
22. Is he in receipt of a salary as such while serving in The Royal Newfoundland Regiment? If so, how much?	

I herewith make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the Acts 5 & 6, Will. IV., c. 62.

Signature *Henry Thomas*

Place of Residence *40 St. John's, Toronto*

Declared and subscribed before me at *Wanchick*  
this *13<sup>th</sup>* day of *November*, 1918

*Cable R.* Signature of the Magistrate *H. Pearson* *Capl No*

Place or County for which he acts *Wanchick*

This application must be signed by two responsible parties one of whom must be a Clergyman, the other a representative of your local Soldiers & Sailors Families Association or other recognized society, certifying that to the best of their knowledge, after careful enquiry, the above statements are correct.

Signature of Clergyman \_\_\_\_\_

Signature of representative *H. Pearson*

State name of Society *Newfoundland*  
*Local Committee Wanchick*

N.B. Marriage Certificate must accompany this application, and will be returned after perusal. If marriage is after enlistment, Commanding Officer's permission in writing must be forwarded.



No. 18089/1

ENCLOSURE

N.F.P./101.

NEWFOUNDLAND CONTINGENT

Pay & Record Office,  
58, Victoria Street,  
London, S.W. 1



To: Mrs. M. Morris,

7th November 1918

Q. M. A. A. C. Hospital,

Hazeley Down Camp, Winchester, Hants.

No. 2790, Pte. S. A. Morris,

A claim for Separation Allowance in your favour has been received from the above-named Soldier. In order to support the claim, you are required to complete the enclosed Statutory Declaration, N.F.P./87A, before a Magistrate of your District, and return it to this Office as soon as possible.

Marriage and Character Certificates, and Permission of Officer Commanding have been received. Marriage Certificate will be returned to you when the claim has been dealt with, please.

*A. A. Minwell Maj.* Major,  
Chief Paymaster & Officer i/c Records.

No. 18089/1

ENCLOSURE

N.F.P. /101.

NEWFOUNDLAND CONTINGENT

Pay & Record Office,  
58, Victoria Street,  
London, S.W. 1

7th November 1918

To: Mrs. M. Morris,

Q. M. A. A. C. Hospital,

Hazeley Down Camp, Winchester, Hants.

No. 2790, Pte. S. A. Morris,

A claim for Separation Allowance in your favour has been received from the above-named Soldier. In order to support the claim, you are required to complete the enclosed Statutory Declaration, N.F.P./87A, before a Magistrate of your District, and return it to this Office as soon as possible.

Marriage and Character Certificates, and Permission of Officer Commanding have been received. Marriage Certificate will be returned to you when the claim has been dealt with, please.

*A. A. Minshall Maj.* Major,  
Chief Paymaster & Officer i/c Records.





2790 Pte. Sa. Morris

Mrs Mary Morris  
c/o Mrs Thick  
North Town

Dec: 10<sup>th</sup> 1918.

Jury road  
W. Winchester Stants

Sir.

I being the wife of Pte Selby Allen<sup>morris</sup>  
was N. F. I. D. stationed at Stately Down Camp  
Winchester. would consider it a great favour  
if you could let me have my allotment or  
allowance granted as soon as possible as  
all my money as been invested in the War Loan  
for quite a long while and I am beginning to run  
short hoping you will excuse the liberty  
I am taking in writing to you

RECORDS CONTINENT,  
PAY & RECORD OFFICE,  
W. POS 10734  
11 DEC 1918  
Remain  
M. Morris

ENTERED.  
PAY LEDGERS  
NUM. ROLL  
ALLOT. INDEX  
REGISTER  
EXAMINED

*[Handwritten signatures]*

BRANG.  
Comd.  
P. & A.  
R. & C.  
R. & E.  
P. S.  
*[Handwritten signature]*

Foria K.  
5022

NEWFOUNDLAND CONTINGENT



N.F.P./11.

ALLOTMENT

I, (No.) 2790 (Rank) Pte. (Name) Selby Allen Morris

heraby agree, until further notification by me, and in required form, to make an Allotment of \_\_\_\_\_ dollars and Sixty cents per diem, from my pay, to and for the benefit of the undermentioned Person and/or Persons. Such payments to be made on proof of identity of the Person and/or Persons concerned, viz.,

Whether Wife, Child, other Relative or Friend.	NAME (In Full)	ADDRESS	AMOUNT (Each Person) \$ c
Wife	Mrs Mary Morris <div data-bbox="392 932 685 1209" style="border: 1px solid black; padding: 5px;"> <p>ENTERED.            PAY LEDGERS <i>Amuly</i>            NUM. ROLL <i>P. 2790</i>            ALLOT. INDEX            " REGISTER <i>1st</i>            EXAMINED</p> </div>	R. N. A. A. Co. Hostel Hazeley Down Camp. Winchester.	60
			60

This Allotment to take effect from and including Nov. 23 1918.

NOTE:- This Form must be completed and signed by the Soldier, counter-signed by the Officer Commanding his Company, and forwarded to the Chief Paymaster in accordance with P.&R.O. C.L.10, 9/12/16.

(Sig.) [Signature]  
Officer Commanding,  
" " Company.

Dated at  
HAZELEY DOWN CAMP.

NOV 4 1918 191

(Sig.) 2790 Pte Selby A Morris  
Allotter.

TO,- The Chief Quartermaster,  
Royal Newfoundland Regiment,  
58 Victoria Street,  
London, S.W.

Sir:-

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

Commencing on the 1st July 1918.

Regtl. No.	Rank	Name	Amount	Signature
2790	Pt	Morris	2.50	J. A. M.

I have the honour to be, Sir,  
~~for the Committee,~~  
Your obedient servant.

Date 12-7-18

Billy Morris

## NEWFOUNDLAND CONTINGENT

## APPLICATION FOR OVERSEAS TRANSPORT



1. Name in full

Surname MorrisChristian Names Mary

2. Postal and Telegraphic Address.

6/o 9075 Hick both Townsford  
Stifford Post office near Telephone

3. Names and ages of all travelling with you except yourself.

William Raymond Greatbatch  
18 months old

4. Your last address in Newfoundland

5. When did you leave Newfoundland, and for what reason did you come here?

6. If Relation or Dependent of a Member of the Newfoundland Contingent state relationship, Regtl No., and Rank.

Wife of Pte Selley Allen Morris  
2790 N.F.C.D.

7. Your Destination in Newfoundland.

Lower Island Cove  
Conception Bay

8. What arrangements have you made for Passport.

9. Can you leave for Newfoundland on 24 hours notice by telegram?

If my monthly allowance comes  
before Telegram.

10. No Government or Department can accept responsibility for safety of passengers or baggage, but is understood that the usual ocean passengers' baggage may be carried.

Date 16<sup>th</sup> 1919Signature Mary Morris

THIS FORM TO BE COMPLETED AND RETURNED TO:

Chief Paymaster & Officer i/c Records,  
Newfoundland Contingent,  
58, Victoria Street, London, S.W. 1.



Morris, S.

2790

Pay Dept

April 10, 1919

#2790 Pte. Selby A. Morris,

Lower Island Cove, B.D.V.

Dear Sir:-

Please find enclosed "Discharge  
Certificate No. 1674."

Yours truly

Captain,  
Paymaster <sup>as</sup> O.I/c Records

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 2790 Rank Pte Name Morris, Delly  
 Intended place of residence Lower Island Cove B. D. V.
2. Occupation Fisherman  
 Classification of soldier E 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 .....  
 Date MAR. 25 1919 .....  
 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 and date ST. JOHN'S .....  
25-3-19 .....  
 Signature of soldier Delly Morris  
 Signature of witness J.A. Snowfoot

## 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 and Date ST. JOHN'S .....  
25-3-19 .....  
 Signature of soldier Delly Morris  
 Signature of witness E. Wilson Sgl

## STATEMENT OF SERVICE

7. Enlisted for service 23-5-16 ..... No of days on Military  
 Discharged from service 27-3-19 plus 14 days ..... Service 1053 .....

## APPROVAL OF DISCHARGE

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

Place ST. JOHN'S .....  
 Date ST. JOHN'S MAR 27 1919 .....  
 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, Nfld .....  
 Date April 10 1919 .....  
 Officer in Charge of Records  
 The Royal Newfoundland Regiment

H.B. 20/4/1919

55  
 75  
 30  
 45  
 300

# The Royal Newfoundland Regiment

Class for Demobilization:—

*6*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date ..... *24.3.19* .....

Regimental No. *2490* .....

Name *Morris S. Kelly St.* .....

Address *Lower Island Cove* .....

Present Medical Category *A.T.* .....

Recommended for:— { (a) Immediate discharge .....

(b) ~~Standing Medical Board~~ .....

Members of Board {

*R.H. Sait Capt.*

O.C. Discharge Depot.

*P. Parsons*

Senior Medical Officer

*Geo. Burdett*

M. O. Depot

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 279 Rank Plt Name Morris Selby  
 Date of Enlistment 23.5.16 Address Lower Island Cpt BAV District B.A.V.  
 Occupation Fisherman Classification for Discharge 4 Medical Category AI  
 Recommendation S.M.B. .... Disability Rating .....

Passed to Demobilization Officer with following documents:—

N.F. P 36.....	B 268.....	B 121.....	N.F. Med.....	D.F. 1.....	/
B 178.....	W 3494.....	B 122.....	Board 1st.....	" 2.....	
B 178a.....	D 400A.....	B 1915.....	do 2nd.....	" 3.....	B
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 24.3.19 ..... O. C. Discharge Depot [Signature]

### PARTICULARS FOR DEMOBILIZATION

**1. Civil Re-Establishment.**

I am / in a position to resume civilian occupation.

*Selby Morris*

Particulars passed to Vocational Officer for information and action.

Date.....

**2. Clothing.**

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$6.00
- (b) Clothing Supplied [Signature]

Date 25-3-19 ..... O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R.9.15 to his home at Lowen, D. W. ... and Release Certificate No. 1702 issued.

Date 25.3.19 ..... C. D. ... Capt  
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 10-4-19

Date 25-3-19 ..... H. ...  
Depot Paymaster

Discharge approved for 27.3.19

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
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 25.3.19 ..... J. A. ...  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—  
Officer i/c Records.  
Board of Pension Commissioners.  
with following additional documents.

Eligible for War Service Gratuity

Date MAR. 27. 1919 ..... R. H. ... Capt.  
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  
Fishing

*Selly Morris*  
Signature of Man.

Reg. No.

2790

*Charles Capl*

Signature of the Vocational Officer or his Representative.

Place

St Johns

Date

25-3-19

191

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

# MEDICAL HISTORY

Surname Winnis OF Christian Name Seebly

Table I.—GENERAL TABLE.

Birthplace:—Parish \_\_\_\_\_ County \_\_\_\_\_

	SPECIAL RESERVE.		REGULAR ARMY	
	Right	Left	Right	Left
Examined . . . . .	on <u>23</u> day of <u>May</u> 191 <u>6</u>	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>
Declared Age . . . . .	at <u>St John's N.T.</u>	at _____	at _____	at _____
Trade or Occupation . . . . .	<u>19 years — 7 — no</u> days	<u>19</u> years — <u>7</u> — <u>no</u> days	_____ years — _____ — _____ days	_____ years — _____ — _____ days
Height . . . . .	<u>5</u> feet — <u>4</u> inches	_____ feet — _____ inches	_____ feet — _____ inches	_____ feet — _____ inches
Weight . . . . .	<u>131</u> lbs.	_____ lbs.	_____ lbs.	_____ lbs.
Chest Measurement {	Girth when fully expanded . . . . .	<u>39</u> inches	_____ inches	_____ inches
	Range of expansion . . . . .	<u>4</u> inches	_____ inches	_____ inches
Physical Development . . . . .				
Vaccination Marks {	Arm . . . . .			
	Number . . . . .			
When Vaccinated . . . . .				
Vision {	R.E.—V=	<u>6/6</u>	R.E.—V=	_____
	L.E.—V=	<u>6/6</u>	L.E.—V=	_____
(a) Marks indicating congenital peculiarities or previous disease {	(a)		(a)	
	(b) Slight defects but not sufficient to Cause Rejection		(b)	
Approved by (Signature)	<u>L. Lambert Peterson</u>			
(Rank)	<u>Major</u> Medical Officer.		_____ Medical Officer.	
Enlisted . . . . .	at <u>St John's</u>	at _____	at _____	at _____
	on <u>26</u> day of <u>May</u> 191 <u>6</u>	on _____ day of _____ 191 <u>6</u>	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>
Joined on Enlistment . . . . .	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>Infantry</u>	<u>2790</u>		
Transferred to . . . . .	NEWFOUNDLAND CONTINGENT.			
Became non-effective by . . . . .	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>
(Signature)				
(Rank)				





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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of further 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, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3rd London Genl Hosp Kensington	19	12	17	27	2	18	G.S.W. Right Leg. (sample of lead)	70	Wounded in France 12/12/17	R.H.K. Major Capt 7241057





## 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 *Selby Morris*

Regiment from which discharged *Royal Newfoundland*

Regimental number *2790*

Intended address *Lower Island Cove*

Height on discharge *5* Feet *7*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks *1 scar on each Leg.*

Figure on discharge *Tall*

Christian name of Father *Eliason*

Christian name of Mother *Charlotte Jane*

Wife's maiden name in full *Mary Gratebatch*

Date and place of marriage *England, 12 Oct. 1918*

Christian names of children *William*

Place and date of soldier's birth *Lower Isld. Cove. 25th Oct. 1897*

Nature and locality of civil employment required

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full) *Selby Morris*

Station *St John's*

Date *22-3-19*

(Rank) *Pt.*

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

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

Station

Date

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

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

1. Unit and Corps.. *Royal Newfoundland* 7. Former Trade }  
 or Occupation }
2. Regtl. No. *2792* 3. Rank. *Plt.* 7a. If the soldier claims previous service in Army, he should state—  
 (a) Former Regts. or Corps ;  
 with Regtl. Nos.
4. Name *MORRIS*  
 (Surname) (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....  
 in category (or grade).....
8. If the disability is an injury was it caused  
 (a) in action (b) on field service  
 (c) on duty (d) off duty? (b) Date of Discharge ;  
 (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—  
 (a) When (d) Particulars of Pension or Gratuity  
 (b) Where (if any)  
 (c) Opinion of Court

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

### Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here.  
 (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
11. Date of origin of disability.
12. Place of origin of disability.
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *L.S. Went by France 4-12-17 not healed red disability*

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war .. .. . *Yes* .. .. .
  - (ii.) Previous active service.. .. . *No* .. .. .
  - (iii.) Climate in pre-war service .. .. . *No* .. .. .
  - (iv.) Ordinary military service before the war .. .. . *No* .. .. .
  - (v.) Serious negligence or misconduct on the } *No* .. .. .  
man's part. }
- 14 (a). If not due to any of these causes, to what } *N. C.*  
specific condition do you attribute it? }

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

15. What is his present condition? *Scar 3 in long 1 1/2 wide posterior*  
*(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)* *suffered at but no pain*  
*in feet. complaints of*  
*pain after walking long distance*

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

20. Do you recommend—
- (a) Discharge as permanently unfit?
  - (b) Change to United Kingdom?
- Note—(b) is only applicable to soldiers invalided at Foreign Stations.

*Repatriation*  
*W. H. M. M. O.*  
 ROYAL NEWFOUNDLAND REG.

Station *Hazelton Barracks Camp*  
 Date *8 JAN 1919*

Medical Officer in charge of case.

\* 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

2790 Pvt Jelby Allen  
Morris  
Latter Island Cove  
Conception Bay - N. F. L. D.  
Sept 28<sup>th</sup> 1919.

Sir  
I am an ex soldier and  
in receipt of War service  
gratuity but cannot under  
stand why payments have  
ceased for over two months  
now as I fully believed  
that overseas soldiers receive  
pay for seven months for  
three years service and I  
serve three years excepting  
45 days I would be  
obliged if you could  
let me have some  
under standing on the  
matter trusting you will  
oblidge I am  
Yours Truly  
J. Morris.

Apr 10

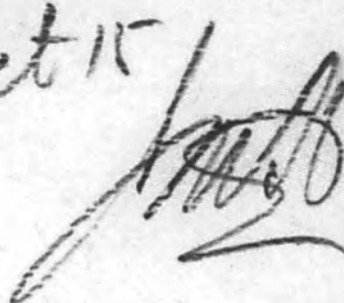
May

June

July

Aug

911 } mailed Oct 15  
6242 }

A handwritten signature or set of initials, possibly 'M. B.', written in dark ink. The signature is slanted and appears to be written over a horizontal line.

May 29, 1919

Mr. Selby A. Morris,  
LOWER ISLAND COVE.

Dear Sir:

With reference to your letter of May 20th. I am enclosing herewith form of claim for War Service Gratuity, which kindly have completed and signed before a Magistrate or Justice of the Peace, and return to this Department.

Yours truly,

Lieut.  
For PAYMASTER.



June 5, 1919

#2790 Pte. Selby A. Morris,

Lower Island Cove,  
Bay de Verde.

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 & Officer i/c <sup>Captain,</sup> Records.

14298

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.

- 1. Christian name... *Alby*... Surname... *Morris*.....
- 2. Rank... *Private*..... 4. Regtl. No. *2 P. 90*.....
- 5. Address in full to which future payments of gratuity are to be forwarded... *Lower Island Cove Bay St. John's*.....  
*Verde District*.....
- 6. Date of enlistment in the Regiment... *May 2<sup>3</sup> 1916*.....
- 7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....  
*Mrs. Alby C. Morris*.....
- 8. Relationship of such dependents... *Wife*.....
- 9. Address in full of such dependents... *Lower Island Cove Bay St. John's*.....  
*Verde District*.....
- 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 Nfld. If so, give dates and particulars of such service..... *Served in France and Belgium Dec. 1914 to Dec. 1915*.....  
*Not Applicable*.....
- 12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *two years three hundred and twenty days*.....

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

*Not Applicable*

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.

*Not Applicable*

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

*No*

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

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

*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 Applicable*

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

*Apr. 10th 1919. (b) Mobilization*

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.

*France and Belgium. From Dec 20th 1916 to Dec 4th 1917.*

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.

*Not Applicable*

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.



DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claim 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 question 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... *Pelley* ..... 2. Surname... *Montia* .....

3. Rank... *private* ..... 4. Regtl. No. *2790* .....

5. Address in full to which future payments of gratuity are to be forwarded... *22 Goodwin St. St. John's* .....

6. Date of enlistment in the Regiment... *April 17 - 1916* .....

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

*allowance to Mary Montia* .....

8. Relationship of such dependents... *Wife* .....

9. Address in full of such dependent... *Lower Island Cove 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 Nfld. If so, give dates, and particulars of such service... *in France* .....

.....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *3 years* .....

.....

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

..... *No* .....

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

..... *No* .....

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

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

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

..... *No* .....

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

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

19. Are you now serving in the Regt.? *Yes* If not give:- (a) Date of discharge..... (b) Reason for discharge.....

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.....

*France Oct-21/16 to Nov 5/18*.....

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: *Jelly Marris*  
 Place of Residence: *22 Goodwin St, St. John's*  
 Declared before me at: *St. John's*  
 This *26* day of *March* 19*59*

*W. J. [Signature]*  
*T. [Signature]*

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

POST DISCHARGE PAY.			War Service Gratuity	Net amount due
Date paid	Paid Soldier	Paid Dependent		
.....	.....	.....	<i>5 wtd.</i>	<i>500.00</i>
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
Certified Correct.			Paymaster.	





Lower Island Cove.  
May 20<sup>th</sup> 9.

Dear Sir:-

Please send me a  
set of Gratuity Forms as I  
want to fill them in as  
soon as possible. Send  
them by return mail & oblige

Yours Truly

W. L. C. Morris  
Lower Island Cove  
Bay De Verde.  
A. J. A.

ST. JOHN'S, Mar 25<sup>th</sup> / 19

# Royal Newfoundland Regiment.

Billeting Account,

To Pte. S. Morris

Billeting Soldiers as undermentioned

from Feb 8<sup>th</sup> / 19 to Mar 27<sup>th</sup> / 19

A. C. S.

2790 Pte. S. Morris 49 80

REGIMENT	<u>17476</u>
CH. NO.	<u>17476</u>
IND. LEADER	<u>17476</u>
PL. LEADER	<u>17476</u>

B. Viner  
Er

Certified correct for \$ 49

R. J. J. P. Shaw  
Billeting Officer.

Sally Morris

C.R. 2790

Extract from Daily Orders Part II Unit The Royal Wilt.  
Regt. St. John's, 19-19.

The Undersigned returned from Overseas and reported  
to Depot 7-8-19.

Repatriated on A.F. 21/9.

2790 Pte. Sylvester Morris.

C.R. 2790

Extract from telegram from Syn. to Mil. dated Feb. 3rd., 1919.

Cable five Corsican

Wife and child of 2790 Morris.

Embarked at Liverpool Jan. 30th., 1919.

C.R. 2790

Extract from Medical Bill of the Royal Coll. Surg.  
selected by A. Currier, Jan. 20th, 1880.

2790 Morris.

C.R. 2790

Extract from Daily Orders part II, Depot  
St. John's dated 4-12-18. by Lieut. Col.,  
B.G. Barton, D. S. O. Officer Commanding  
2nd., Battalion of the Royal Newfoundland  
Regiment.

The undermentioned was married to Miss Mary Greatbatch  
26 Broom Street, Hanley Stoke on Trent with effect  
from 12-10-18

#2790 Pte. A. Morris.

C.R. 2790

Sept. 30th 18

Mr. Albert Morris

Lower Island Cove

Bay de Verde

Dear Sir:-

Your letter addressed to the Colonial Secretary, and enclosing cheques to the amount of \$127.20, out of which the sum of £25 is to be remitted to No. 2790, Private Selby Morris, has been handed to this Department for attention; and I beg to inform you that the Chief Paymaster is despatching the amount to Private Morris, and will return balance to you

Yours faithfully,

Lieut. Col.,

Chief Staff Officer.

C.R. 2790

Sept. 30th 18

The Honourable  
Colonial Secretary

Sir:-

I have the honour to acknowledge receipt of your letter dated 26th Sept. forwarding letter from Mr. Albert Morris of Lower Island Cove, covering cheques to the amount of \$127.20, out of which the sum of 225 is for despatch to No. 2790, Private Selby Morris.

The remittance is being made through the Paymaster, and the balance of the amount is hand will be returned to Mr. Morris.

I have the honour to be

Sir,

Your obedient servant

Minister of Militia.



C.R. 2790

Extract from CASUALTIES from P.&R.O., London, dated Feb. 28th.  
1918.

O.C., 3rd London General Hospital, S.W. 18, reports, 27/2/18:

DISCHARGED HOSP. 27/2/18, furlough to 8/3/18:

2790 Pte. S.A. Morris, fit for 1, Duty.

Authority: A.Fs. W. 3016 from 3rd L.G.H.

- C.R. 2790

Extract of Casualties received from pay & Record Office,  
London, dated February 28, 1918.

O.C. 3rd London General Hospital, S.W.18 reports 27/2/18.

#2790 Pte. S.A. Norris ✓

Discharged from Hospital 27/2/18 granted furlough to  
8/3/18. Fit for 1 Duty.

C.R. 2790

Extract from Daily Orders, Part 11, UNIT: The Royal N21A.  
Sgt., dated 52th. Dec. 1917.

STRENGTH.

2790 Pte. S. Morris.

Invalided to U.K. 17/12/17. WOUND 13.

C.R. 2790

Extract of Casualty list received December 22, 1917.

#2790 Pte. Selby A. Morris.

Nature of Wounds previously reported,

Admitted Wandsworth.

**WFOUNDLAND 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 transmission.

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

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

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

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

**(NOT TRANSMITTED)**

Signature of Sender \_\_\_\_\_ Address \_\_\_\_\_

Line Number	Rcd	By	Sent	by	Check

*Dated*

December 22, 1917.

*To*

Mr. Eleazer Morris,

Lower Island Cove,

Bay de Verde.

Record Office, London, today reports No. 2790,  
Private Selby A. Morris, has now been admitted to  
Wandsworth.

R.A. SQUIRES

Colonial Secretary

**FOR TYPEWRITER**

C.R. 2790

Extract of Casualty received from Pay & Record  
Office, London, dated December 21, 1917.

#2790 Pte. S.E. Morris. ✓

Gunshot wound right leg.

Admitted 3rd London General Hospital, S.W.18.

C.R. 2790

Extract of Casualties from the Expeditionary Force, admitted Hospital on ~~18~~  
19/12/17 from Hospital Ship.

Dated 21st. December 1917.

2790 Pte. S.E. Morris

1st Nfld. Regt.....G.S.W. R. Leg.....3rd London General Hospital, S.W. 18.

C.R. 2790

Extract of Casualties received from Pay & Record  
Office, London, dated December 16, 1917.

#2790 Pte. S.A. Morris. ✓

Wounded 4/12/17.



**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 transmission.

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

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

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

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

**(NOT TRANSMITTED)**

Signature of Sender \_\_\_\_\_

Address \_\_\_\_\_

Line Number	Rcd	By	Sent	by	Check

Dated

December 15, 1917.

To

Mr. Eleazer Morris,  
Lower Island Cove,  
Bay de Verde.

Regret to inform you that Record Office, London, officially reports No. 2790, Private Selby A. Morris, was at Twelfth General Hospital, Rouen, December seventh, suffering from severe gunshot wound right leg.

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

R. A. SQUIRES,

Colonial Secretary.

**FOR TYPEWRITER**

C.R. 2790

Extract of Casualty List recieved December 15th. 1917.

Pte Selby A. Morris.

At 12th General Hospital Rouen December 7th.

Gunshot wound left leg severe.

C.R. 2790

# 2790 Pte. Selby A. Morris.

Extract of Casualty list received December 15, 1917.

Gunshot wound right leg severe.

At 12th General Hospital, Rouen, December 7th.

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

C.R. 2790 ✓

NEW ZEALAND EXPEDITIONARY FORCE.

LIST No.H.A.17182

46189	Pte.Jensen,C.A.	2/C.I.B.NZ.12/Co.	S.W.Scalp.Mild.	. . . . .	Dis.to	Base	ex.12	Gen.H.Rouen	7th	Dec'17.
12/1082	L/C.Jamieson,W.	2nd Auckland N.Z.	Eczema.Mild.	. . . . .	Adm.25	Gen.H.Hardelot	ex.26	Gen.H.7th	Dec'17.	
23/1137	Pte.North,P.	1st N.Z.Rifle Bde.	Scabies.do.	. . . . .	Adm.25	Gen.H.Hardelot	ex.26	Gen.H.7th	Dec'17.	
46998	" McIntyre,R.	2nd Wellington.NZ.	Eczema.do.	. . . . .	Adm.25	Gen.H.Hardelot	ex.26	Gen.H.7th	Dec'17.	
6/4173	" Willetts,E.	2nd N.Z. M.G.Co.	Scabies.do.	. . . . .	Adm.25	Gen.H.Hardelot	ex.55	Gen.H.7th	Dec'17.	
14991	" Jenkins,W.	1st Canterbury.NZ.	do. do.	. . . . .	Adm.25	Gen.H.Hardelot	ex.55	Gen.H.7th	Dec'17.	
41816	" Jones,L.N.	1st Wellington.NZ.	Laryngitis.Mild.	. . . . .	Adm.25	Gen.H.Hardelot	ex.10	Conv.Dep.7th	Dec'17.	
40250	" Seely,A.A.	1st Canterbury.NZ.	Appendicitis.Mild.	. . . . .	Adm.25	Gen.H.Hardelot	ex.10	Conv.Dep.7th	Dec'17.	

NEWFOUNDLAND EXPEDITIONARY FORCE.

LIST No.H.A.17182

2790 Pte.Morris,S.E. 1st Newfoundland.B.GSW.Rt.Leg.sev. . . . . Adm.12 Gen.H.Rouen 7th Dec'17.

SOUTH AFRICAN RECORD OFFICE.

LIST No.H.A.17182

2251	Pte.Lawrence,J.A.	4th S.Afr.Inf."A"	GSW.Back.sev.	. . . . .	Adm.12	Gen.H.Rouen	7th	Dec'17.
11999	L/C.Trimmer,W.B.	2nd do."D"	do.Rt.Hand.Mild.	. . . . .	Adm.12	Gen.H.Rouen	7th	Dec'17.
12418	" Dawes,R.S.	2nd do."B"	do.Rt.Arm.do.	. . . . .	Adm.12	Gen.H.Rouen	7th	Dec'17.
8630	Pte.Lyle,A.M.	4th do."D"	do.Lt.Thigh.do.	. . . . .	Adm.12	Gen.H.Rouen	7th	Dec'17.
12167	" Nel,C.	2nd do."B"	do.Lt.Foot.sev.	. . . . .	Adm.12	Gen.H.Rouen	7th	Dec'17.
9920	" Hardaker,S.	4th do."B"	do.Lt.Hand.do.	. . . . .	Adm.12	Gen.H.Rouen	7th	Dec'17.

ARMY SERVICE CORPS.

LIST No.H.A.17182

M2/265414	Pte.Field,W.R.	ASC.Mt.att.245/S.B.Cont.Rt.Ribs.sk.sev.	. . . . .	Adm.12	Gen.H.Rouen	7th	Dec'17.
		R.G.A.					
T3/024034	Dvr.Tyler,E.B.	ASC.159th Co.20/Div.Contusion Back.do.	. . . . .	Adm.12	Gen.H.Rouen	7th	Dec'17.
252007	" Simpson,T.	do.515th Div.Trn.Bronchitis.sev.	. . . . .	Adm.12	Gen.H.Rouen	7th	Dec'17.
M2/264217	Pte.Fysh,F.H.	do.Mt.att.7/Motor.GSW.Lt.Leg.Mild.	. . . . .	Adm.12	Gen.H.Rouen	7th	Dec'17.
		M.G.Bty.					
20345	Cpl.Goldsmith,W.J.	do.173rd Co. Boils.Mild.	. . . . .	Adm.25	Gen.H.Hardelot	ex.3	Can.Gen.H.7th Dec'17.
425499	Pte.Sykes,W.	do.544th Co.H.T. Scabies.do.	. . . . .	Adm.25	Gen.H.Hardelot	ex.55	Gen.H.7th Dec'17.
T4/093076	Dvr.Alder,H.A.	do.3/Co.7/Div.Trn.Scabies.	. . . . .	Dis.to	Marlboro' Dtls.	Boulogne	ex.25 Gen.H.7th Dec'17.
M2/176595	Pte.Mackay,H.W.	do.Mt.76/Aux.Stm.Co.Sycosis.	. . . . .	Dis.to	Marlboro' Dtls.	Boulogne	ex.25 Gen.H.7th Dec'17.



ENTERED	
PAY LEDGERS	<i>W</i>
NUM. ROLL	
ALLOT. INDEX	<i>W</i>
REGISTER	<i>W</i>
EXAMINED	



N.F.P./12.

NEWFOUNDLAND CONTINGENT

CANCELLATION OF ALLOTMENT

1. I, (No) 2790 (Rank) Otc. (Name) Selby Morris  
 hereby apply for cancellation of Allotment made by me on N.F.P./11  
 No. 2435 dated Aug 1916 in favour of  
Sister, Rachel Ann, Morris  
 for \$ — cts 60 per diem.

Such cancellation to take effect on the Thirty first day of  
July 75 1918.

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

Dated at Hazelton Down Camp  
Winchester Hants. July 16 1918

Selby Morris  
 Allotter.

Approved and Witnessed:

J. E. T. Fox Captain  
 O.C. "N" Company.

NOTED
<u>J.R. Hopkins.</u>
C.Q.M.S.
Date <u>16/7/18</u> "N" Coy

N.B. - To be made out TRIPPLICATE and delivered to the Pay & Record  
 Office not later than the date of cancellation, in accordance  
 with P. & R.O. C.L./10, 9/12/16.

C.R. 2790

Extract from Nominal Roll of Draft No.15: Embarked Southampton  
12/12/16 from 2/1st Newfoundland Regiment to 1/1st Newfoundland  
Regiment B.E.F.

2790 Pte.Morris, S.A.

M.P.

C.R. 2790

Extracts from Nominal roll Embedded St. John's for Overseas,  
20/8-18.

2790 Pte. Morris S.

C.R. 2790

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 *Jelly Allan Morris*

Date *Nov<sup>th</sup> 12*

Place *Lower Island Cove*





# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.  
Forms B. 121.  
(685) - W2017/2124 1000m 6/15s 52 56

Regiment of Newfoundland.

Number of Sheet First.

Signature of O. C. Company J. Ledingham  
Cap.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<u>Morris Sd.</u>	Age on	<u>19</u> years <u>7</u> months	<u>Soldier</u>	
Joined	<u>Depot</u>	Date	<u>5/9/16</u>	Religion	
Joined	<u>Depot</u>	Date	<u>5/9/16</u>	<u>C.P.C.</u>	
Joined	<u>Depot</u>	Date	<u>5/9/16</u>	Place of Birth	
Joined	<u>Depot</u>	Date	<u>5/9/16</u>	<u>Lower Old Cove</u>	
		Period of	with Colours <u>2</u> <sup>323</sup> years. with Reserve <u>3</u> <sup>365</sup> years.		

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<u>Racecourse</u>	<u>23-10-16</u>	<u>Plen</u>		<u>Insulting to obey orders</u>	<u>Sgt. Moore</u>	<u>3 Days C.B.</u>	<u>24-10-16</u>	<u>2/Lt. Barnes</u>	<u>J.G.B.</u>
<u>Do</u>	<u>28-10-16</u>	<u>"</u>		<u>Throwing food about dining hall</u>	<u>4e Boland</u>	<u>2 days C.B.</u>	<u>30-10-16</u>	<u>Cap. Ledingham</u>	<u>J.</u>
<u>Hayley Down</u>	<u>19/4/18</u>	<u>"</u>		<u>Late on 2 P.M. parade</u>	<u>Serjt. Gardner</u>	<u>2 days C.P.</u>	<u>24/4/18</u>	<u>Cap. Morris</u>	<u>J.W.S.</u>
<u>Hayley Down Camp</u>	<u>31-4-18</u>	<u>"</u>		<u>Non-compliance with a Regimental order</u>	<u>Pte. A. Howell</u> <u>R.P.</u>	<u>5 days C.B.</u>	<u>1-5-18</u>	<u>Lieut. Jm. Irvine</u>	<u>T.P.P.</u>
<u>Hayley New Cove</u>	<u>28/8/18</u>	<u>"</u>		<u>General slackness unburying a soldier's i.e. dirty mess tin blankets not properly folded</u>	<u>Csm Walsh</u>	<u>3 days C.B.</u>	<u>29/8/18</u>	<u>Lieut. H. Lower</u>	<u>H.I.</u>
				<u>Demobilized St John's 10/19</u>					
				To be carried over					

Army Form B. 121.

22790

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 2790 Rank Private Name Morris Selby  
 Date of Enlistment 23.5.16 Address Lower Island Cove District B.D.V  
 Occupation Fisherman Classification for Discharge 6 Medical Category AI  
 Recommendation S.M.B. .... Disability Rating .....

Passed to Demobilization Officer with following documents:—

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

Date 24.3.19 ..... for H. News H O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

*23.5.16 to 5.7.17*

*Selby Morris*

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$60.00
- (b) Clothing Supplied J. H. Crawford

Date 25-3-19 ..... O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R915 to his home at Lower Dutton and Release Certificate No. 1702 issued.

Date 25.3.19 ..... P. Dicks Capt.  
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 16.4.19

Date 25-3-19 ..... H. Marsh  
Depot Paymaster.

Discharge approved for 27.3.19

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36.....	B 268.....	B 121.....	N.F. Med.....	D.F. 1.....
F 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 25.3.19 ..... J. H. Snow  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

- Officer i/c Records.
- Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date MAR 27 1919 ..... R. H. Sait Capt.  
O. C. Discharge Depot.

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

Date 27/3/1919 ..... R. H. Sait

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R915 to his home at Lower Denton and Release Certificate No. 1702 issued.

Date 25.3.19 ..... [Signature]  
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 10-4-19

Date 25-3-19 ..... [Signature]  
Depot Paymaster.

Discharge approved for 27.3.19

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
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 25.3.19 ..... [Signature]  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—  
Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date MAR 27 1919 ..... [Signature]  
O. C. Discharge Depot.

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

Date Mar 27/1919 ..... [Signature]

Reg. No. 2790 Rank. Pte Name Morris Selby A.

Attested ..... Address. Lower Island Cove

Allotment ..... Allottee .....

Date of Allotment ..... Returned from Overseas. 2-19

Returned on S.S. .... Cause. Discharge

MAR 24 1919

PASSED TO DEMOBILISATION OFFICER

29.3.19

DISCHARGE APPROVED ON DEMOBILISATION.