



FIRST NEWFOUNDLAND REGIMENT

4077

ATTESTATION OF

No. 4077 Name Bernard Morrissey Corps R.C.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---|
| 1. What is your name? | 1. <u>Bernard Morrissey</u> |
| 2. What is your full Address? | 2. <u>B. Regim C Bay</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>18</u> years <u>10</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, Bernard Morrissey, 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.

CL 6-11-17 Bernard Morrissey SIGNATURE OF RECRUIT.

R. J. [unclear] Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Bernard Morrissey, 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 6th day of Nov 1917.

Signature of Attesting Officer W. J. [unclear]

†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 6th Nov 1917.

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

Date Nov 6th 1917 Place St. John's } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Ernest Morrissey
 Apparent age 18 years 10 months. Height 5' feet 3" inches
 Chest Measurement { Girth when fully expanded 36 inches
 Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin James Morrissey
Ellen C. Bay | Relationship Father

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>6-11-17</u>									
Joined at <u>St. John's</u> on <u>November 6-17</u>									
<u>Discharged July 15, 1919</u>									
		<u>Embarked St. John's S.S. Transatlantic</u>		<u>11-12-17</u>				<u>Embarked for B.C.</u>	<u>25 5/18</u>
		<u>Disembarked France 27-5-18</u>		<u>joined B. M. Co. 31-5-18</u>				<u>Admitted 20 9/11</u>	
		<u>10 days Le Havre 19-6-18</u>		<u>Invalider to England 28-6-18</u>				<u>Admitted</u>	
		<u>3 London War Hosp. Brompton 28-6-18</u>		<u>Employed the</u>				<u>Admitted to Hosp.</u>	
		<u>Home for 2-8-18</u>		<u>Embarked for B.C. 1-10-18</u>				<u>Disembarked France 4 10/18</u>	
		<u>joined Battalion 8-10-18</u>		<u>transferred from Home 22 7/19</u>				<u>Arrived Home date 23 7/19</u>	
		<u>transferred for demobilization 22 7/19</u>		<u>Arrived Newfoundland 1-6-19</u>					
		<u>Demobilization St. John's</u>		<u>15-7-19</u>					
Total Service forfeited as above.....									

Total Service towards Engagement to 15-7-19 (date of discharge) 1 years 252 days
 " " Pensions " [" "] " " "

C.R. 4077

Extract from Daily Orders Part II Royal Newfoundland Regiment
Depot St. John's dated 17-7-19.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from noted date
17-7-19.

4077, Pte. Bernard Morrissey.

C.R. 4077

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, June 20th, 1919.

The Discharge of the undernoted on demobilisation has been
APPROVED by O/C. Discharge Depot with effect from 1-8-1919

4077 Pte. B. Morrissey.

C.R. 4077

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

Date June 18th 1919.

4077, Pte. B. Morrissey.

Reported at Headquarters 1/6/19. ex "Corsican"
which sailed Liverpool May 22/1919.

C.R. 4077

Extract from Nominal Roll from 1st. Battalion

Royal Newfoundland Regiment dated 30-4-19.

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

#4077 Pte. B. Morrissey.

C.R. 4077

Extract from Nominal Roll of Draft No. 53 and 21 Other
ranks from 2nd., Bn. R. Nfld. R. to 1st., Battalion
Newfoundland Regiment B. E. F. Embarked Southampton
1/10/18.

Conducting Officer 2/Lieut. W.G. Munn.

4077 Pte. B. Morrissey.

BC.

C.R. 4077

Extract from Daily Orders Part 11. By. Lt. Col. B.J.
D.S.O.

Barton, Commanding 2ND BN. ROYAL WFLD. REGT. dated 2-8-18.

The following having reported back from 1st. Battalion
is posted to "H" company from 2-8-18.

4077 Pte. Merrissey.

C.R. 4077

Extract of Casualties from Pay and Record Office, London dated
16th. July 1918.

4077 PTE. B. MORRISSEY

Discharged 3rd L.G.H. 15/7/18. Furlough to 24/7/18; Fit for i Duty.

Authority: A. Fs. W. 3016.

C.R. 4077
Counter No.

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 opt of Militia.

Line Number	Rcd	By	Sent	by	Check

Dated July 2nd, 1918

To James Morrissey, Tilton, C.B.

Regret to inform you that Record Office, London, officially reports No. 4077 Private Bernard Morrissey at Wandsworth suffering from bronchitis

(N.K. No 11 Alexander St City)

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

J.F. Robdell, Lieut. Col.

Chief Staff Officer.
Minister of Militia.
for

FOR TYPEWRITER

C.R. 4077

Ex ract from telegram received from London, dated July 1, 1918.

At Wandsworth. Bronchitis, #4077 Pte. Morrissey.

C. 2. Casualties.

1396

C.R. 4077

3rd London General HOSPITAL, at Wandsworth, S.W. 18.



Affiliated to _____

NOMINAL ROLL of Sick and Wounded from the * France Expeditionary Force
 admitted on 28/6/18 from Hospital Ship Newhaven,
 Southampton or Dover.

* Here insert which Expeditionary Force.

NOTE.—These rolls should be forwarded direct to the War Office, Alexandra House, Kingsway, W.C., not later than the day after admission; envelopes to be marked C. 2, Casualties; rolls are not to be telegraphed in advance.

Regtl. No.	Rank	Name (Surname first)	Corps	Disease or Injury (State whether sick or wounded, and whether slight, severe or dangerous)
X 4077	Pte	Morrissey, B.	R. Nfld R.	Bronchitis
		Major R. HARRIS, R.A.M.C.T.,		
		(Sgd) H. FAGAN,	Major, R.A.M.C.T., Registrar.	

NOTE.—Admissions to the outlying sections of the hospital should be shown separately. If the distance of these sections should render it impossible to forward the rolls the day after the admissions, the sections should be instructed to send lists (on these Army Forms) direct to the War Office.

C.R. 4077

Extract from Casualties received from the Pay and Record Office
London Dated 27th June 1918.

3 #4077 Pte. Morrisey E.

ADMITTED TO 20th GENERAL HOSPITAL D. MILES CAMIERS 19th /JUNE 1918

I N F L U E N Z A M I L D

C.R. 4077

Extract from Daily Orders Part 11 Unit The Royal Wfld.
Regt. France, dated 11-7-18.

6

4077 Pte. B. Merrisey.

Invalided to England ²⁸ 26-6-18. Sick.

C.R. 4077

Extract from Nominal Roll of MFLD. Regt. Draft No.46
from 2nd Bn. Depot, to 1st Bn. B.E.F. Embarked Folkestone
25-5-18.

4077 Pte. B. Morrissey.

C.R. 4077

Extract of Nominal Roll of Draft No. 46, - 1st Other Rank from 2nd. Bn., Depot
Winchester to 1st. Batta., The Newfoundland Regiment, B. C. F. Embarked Folkestone
25/5/18.

4077 Pte. B. Morrissey.

A.P. B.105 (one for
each soldier) sent to
3rd. Echelon, B.C.F.

C.R. 4077

Extract from Orders by Lieut. Col., B. J. BARTON
COMMANDING 2nd., Battalion of the Royal Newfoundland
Regiment.

4077 Pte. B. Morrissey.

A draft of 31 Other Ranks will be held in readiness
to join the 1st. Battalion. Those who have not already
been granted leave will proceed on Draft Leave from
3 p. m. 23rd. to mid-night 27th inst.,

C.R. 4077

Extract from Medal Roll Embroidered St. John's Coy Overseas,
par 8. "Blotinal" Dec. 11, 1917.

#4077 PTE. E. MORRISEY

C.R. 4077

Extract from Daily Orders Part II Unit The Royal
HFLA. Regt., St. John's, Nov. 6th, 1917.

57

4077 Pte. B. Morrissey.

Attested for General Service with the 1st HFLA. Regt.,
with effect from Nov. 6th, 1917.

B. Monissey

C.R. 4077

F.R.O.

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 } *Fisherman*
 2. Regtl. No. *4047* 3. Rank. *Pte* 7a. If the soldier claims previous service in Army, he should state—
 4. Name *Morrissey* (Surname) *D* (Christian Names) (a) Former Regts. or Corps; with Regtl. Nos.
 5. Age last birthday. *19*
 6. Posted for duty on. *5-1-18* at *St John's* in category (or grade).....
 8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty? (b) Date of Discharge;
 (c) Cause of Discharge.
 9. If a Court of Inquiry was held on an injury state:—
 (a) When (d) Particulars of Pension or Gratuity (if any)
 (b) Where
 (c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 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. *nil*
 12. Place of origin of disability. *nil*
 13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war
 - (ii.) Previous active service
 - (iii.) Climate in pre-war service
 - (iv.) Ordinary military service before the war
 - (v.) Serious negligence or misconduct on the man's part. }
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } *na*

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

He complains of no disability

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

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

Repatriciation

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

W. S. Crocumer . . . Capt. Rame

Medical Officer in charge of case.

Station *Hazley Down*

Date *28-4-19*

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

13411/1350..

2/Bn. Royal Newfoundland Rgt.
Winchester.

22nd, August

4Q77, Pte. B. Morrissey.

7496..

"Pay to, 4Q77, Morrissey, £1.10. 0,

1.10. 0,

No. 4077 Rank Pvt Name L. Morris

Pay	PTA	Wkg	Total	N.F.P/33
100	10		110	
Less Allotment			50	
Net Rate			60	

DEBITS	Date	£	s	d	CREDITS	Period		Days	Rate	\$	£	s	d
						From	To						
Balance					Balance		7/8						2 2 1 ✓
Acquittance Rolls					Pay @ Net Rate	8-18	15 7/8	38	20	1900	2	18	14 ✓
Hospital Advances		1	0	0 ✓									
A.B. 64. (45 francs)		1	13	0 ✓	P.A. 10 days ✓								1 0 10 ✓
P.&.R.O. Payments													7-4-0 ✓
Cash 8124	13/7/18	4	11	0									4-11-0 ✓

2-13-0

E.A.

No. *407* Name *Mc Marriosey* } *C* Corps *Royal Newfld* Date of enlistment } *6-4-18* } G.C. Badges } Service or Proficiency Pay }
 } *A* } *C* } *C* } *A* }
 } *Sq., Batty., or Company* } } } } }
 Date of last entry in Company Conduct Sheet } No. and date of last drunk } Period not reckoning towards freedom from extra fine } Sheet No. } Signature O.C. Company, etc. } Character
 } } } } } *J.S.M. Curran Capt* }

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

Army Form B. 122.

2016
18 18.

Morsey B.

4077

Day Dept

July 15, 1919

#4077 Pte. Bernard Morrissey,

Brigade.

Dear Sir:-

Please find enclosed Discharge Certificate #3027.

Yours truly,

Paymaster & U.i/c Records, Captain,

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4097 Rank Pte Name Morrison B
 Intended place of residence Bonjourn
 2. Occupation Driver
 Classification of soldier 2 Medical Category AI

3. The above named man is discharged in consequence of
DEMobilIZATION
Eligible for War Service Gratuity

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.
 Place, ST. JOHN'S
 Date JUN 17 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, ST. JOHN'S
 Date JUN 17 1919
 Signature of soldier
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.
 Place, ST. JOHN'S
 Date 17-6-19
 Signature of soldier
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 6-11-17 No. of days on Military
 Discharged from service 1-1-19 Plus 14 days Service 619

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge Records, The Royal Newfoundland Regiment, twenty-eight days from date.
 Place, ST. JOHN'S JUL 1 1919
 Date
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place, ST. JOHN'S
 Date July 15/1919
 Officer in Charge Records
 The Royal Newfoundland Regiment

A.F.B 2079/3027

The Royal Newfoundland Regiment

Class for Demobilization:—

A1

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

17.6.19

Regimental No

4077

Name

Morrissey, Bernard Rank *Pte*

Address

11 Alexander St (City)
Buies. (Home address)

Present Medical Category

A1

Recommended for:—

(a) Immediate discharge

(b) ~~Standard Medical Board~~

Members of Board

R.H. Sant Mejn
O.C. Discharge Depot.

Paterson
Senior Medical Officer

S.W. Borden
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4077 Rank Plt Name Morrissey B
 Date of Enlistment 6-11-17 Address Engus District PS9
 Occupation Fireman Classification for Discharge FE Medical Category A1
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. 136	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 19-6-19 O. C. Discharge Depot. [Signature]

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

B. Morrissey
W. J. L. L.

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 [Signature]

Date 17-6-19

O i.c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. R. 1851 to his home at Brigus and Release Certificate No. 2898 issued.

Date 17-6-19 J.A. Snowball
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 15-7-19

Date 17-6-19 J. H. Mins
Depot Paymaster.

Discharged approved for 1-7-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1
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
B179c	B 120	M 93		

2 **Fam B**

Date 17-6-19 A. H. D. Stork
O. C. Discharge Depot.

APPROVED.

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

with following additional documents.

Eligible for War Service Gratuity

Date JUL 1 1919 R.H. Sait 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.

Harrison B.

Signature of Man.

J. A. Chewcroft

Signature of the Vocational Officer or his Representative.

Reg. No. 4077-

Place **ST. JOHN'S.**

Date **17-6-18**

191

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

MEDICAL HISTORY

Surname Morrissey OF Christian Name Bernard

Table I.—GENERAL TABLE.

Birthplace:—Parish Brigus Co. Bay County Nfld.

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	6	Nov 1917		
	at	St. Johns.	at	
Declared Age	18	years 10		days
Trade or Occupation	Fisherman			
Height	5	feet 5		inches
Weight	136			lbs.
Chest Measurement	36			inches
	4			inches
Physical Development	Right	Left	Right	Left
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V=	6/10	R.E.—V=	
	L.E.—V=	6/10	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<i>Lammie Peterson</i>			
(Rank)	Major			
	Medical Officer.			Medical Officer.
Enlisted	at	St. Johns	at	
	on	6th day of Nov 1917	on	day of 191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	ROYAL NEWFOUNDLAND REGIMENT			
Transferred to	1st Nfld. Regt. 4077			
Became non-effective by	on	day of 191	on	day of 191
[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 future use. In case of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3 rd POMEROY GENERAL HOSPITAL WANDSWORTH.	6	12	18	7	12	18	Bronchitis	17	a few scattered rhinorrhoea, no other physical signs.	SMITH, J. G. M. D. M. O. T.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

A complete reply must be given to every question in this Declaration There must be no blanks and no dashes, if any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

- Christian name *Barnett* 2. Surname *Morrissey*
3. Rank *Pte* 4. Regtl. No. *4077*
5. Address in full to which future payments of gratuity are to be forwarded *11 Alexander St, St John's*
6. Date of enlistment in the Regiment *October 1917*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately 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 Separation Allowance on account of another soldier?.....
11. Were you on active service only in Nfld. If so, give dates and particulars of such service..... *Present*
12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *From Oct. 1917 to June 17/19*

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 Gratitude? 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..... *No*

17. Are you entitled to receive, or have you received any Gratitude 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?.....

19. Are you now serving in the Regt.?..... *No* If not give:- (a) date of discharge..... *June 17/19*

(b) Reason for discharge..... *Ill health* *Demobilization*

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

France, Belgium & Germany - From May 1918 to April 1919 - Ypres

21. (c) 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:

her
Barnett Morrison

Place of Residence:

11 Alexander St John's
St John's, Nfld.

Declared before me at:

This

18th, day of *June* 19*19*.

John McCarthy

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

POST DISCHARGE PAY.

Date paid	Paid Soldier.	Paid Dependent.	War Service Classify.	Net amount due
.....
.....
.....
Certified correct.			Paymaster	

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 } *Fisherman*
 2. Regtl. No. *4077* 3. Rank... *Pte* 7a. If the soldier claims previous service in Army, he should state—
 4. Name *Morrissey B.* (Surname) (Christian Names) (a) Former Regts. or Corps ; with Regtl. Nos.
 5. Age last birthday... *19*
 6. Posted for duty on *6.1.18* at *St. John's* in category (or grade).....
 8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty ? (b) Date of Discharge ;
 (c) Cause of Discharge.
 9. If a Court of Inquiry was held on an injury state :—
 (a) When (d) Particulars of Pension or Gratuity (if any)
 (b) Where
 (c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 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. *nil*
 12. Place of origin of disability. *nil*
 13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | } <i>na</i> | |
| (ii.) Previous active service.. .. . | | |
| (iii.) Climate in pre-war service | | |
| (iv.) Ordinary military service before the war | | |
| (v.) Serious negligence or misconduct on the }
man's part. | | |
- 14 (a). If not due to any of these causes, to what }
specific condition do you attribute it? } *na*

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

no complaints of no resicability

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

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

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

Repatriation
W. S. Proemier
Capitaine
Medical Officer in charge of case.

Station *Fagely D. Camp*
Date *29. 14. 19*

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



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 *Bernard Morrisey*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4077*

Intended address *Brigus.*

Height on discharge *5* Feet *7*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks *—*

Figure on discharge *medium*

Christian name of Father *James*

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 *Brigus. October 1st, 1899*

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) *Bernard X Morrisey* *Pte*

Station *St Johns* Witness *W J Underlay* (Rank)
Date *17-6-19*

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



Station

Date

MORRISEY

Casualty Form—Active Service.

Regiment or Corps... ROYAL NEWFOUNDLAND REGT

Rank... *Ote* Surname... *Morrisey* Christian Name... *Bernard*

Religion... *Roman Catholic* Age on Enlistment... *18* years... *10* months

Enlisted (a)... *St Johns* Terms of Service (a)... *DURATION* Service reckons from (a)... *6/11/17*

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

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

Occupation... *Fisherman* _____ Signature of Officer... _____

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...		1 OCT 1918	
		Disembarked...		4 OCT 1918	
		<i>James ...</i>		<i>9/10/18</i>	
		<i>Arrived in UK</i>		<i>93/4/19</i>	

Int ✓

FORM K

No 3803



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Bernard Morrissey, Regl. No. 4077
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
 _____ Dollars and Twenty Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons
 concerned, viz.:

Allotment begins December 1st 1917

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3225	Father	Das Morrissey	Brigus	6s
			Total Allotment, \$	6s

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

Sig.) [Signature]
 Officer Commanding
9 Company
St John's
Nov 24th 1917

Dts
 (Sig.) B. + Morrissey
namonsy
 (Rank) Otk

Casualty Form - Active Service.



Regiment or Corps *21st Royal Newfoundland*

Surname *Morrissey* Christian Name *D. Bernard*

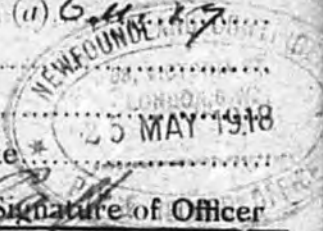
Religion *R.C.* Age on Enlistment *18* years *10* months

Enlisted (a) *6. 11. 17* Terms of Service (a) *Duration* Service reckons from (a) *6. 11. 17*

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

Extended [] Re-engaged [] Qualification (b)
or Corps Trade and rate

Occupation *Fisherman* Signature of Officer *H. M. Gulliver*



Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
			Embarked <i>25-5-18</i>		
			Disembarked <i>27-5-18</i>		
			Joined Battalion <i>3-5-18</i>		
	<i>H. Newhansen</i>	<i>England (Bronchitis)</i>		<i>28/6/18</i>	<i>sd 3rd 3</i>
			<i>For Officer in Infantry Section 107</i> <i>General Headquarters 1st Battalion</i>		

(*) In the case of a man who has re-engaged for, or enlisted into Section B, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoelag Smith, &c. W 2625 512733 20000 9/17 (35011) C. P. & S. Ltd., Form B.103 E/1907. P.T.O.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of

1st Newfoundland

Number of Sheets

one

Signature of O. C. Company

Whitely

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>4077</i>	Age on	<i>18</i> years <i>10</i> months	<i>Fisherman</i>	
<i>Whitney R.</i>		Place and Date of Enlistment	<i>St. John's</i>	Religion	
Joined	Date			<i>R.C.</i>	
Joined	Date			Place of Birth	
Joined	Date				
Joined	Date				
		Period of			
		} with Colours <i>252</i> years.			
		} with Reserve <i>1365</i> 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
	<i>J</i>								
				<i>Demobilized St. John's,</i>			<i>15th</i>		

To be carried over

24077

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4077 Rank Mr. Name Morrissey B
 Date of Enlistment 6-11-17 Address Burgess District P.S. 9
 Occupation Postman Classification for Discharge FE Medical Category A1
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. 136	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 19-6-19 for O. C. Discharge Depot. *[Signature]*

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

*B. Morrissey
 Postman
 Burgess*

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$ 20.00

(b) Clothing Supplied new cap

Date 17-6-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 711851 to his home at Burgas and Release Certificate No. 2598 issued.

Date 17-6-19 *[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 17-6-19

Date 17-6-19 *[Signature]*
Depot Paymaster.

Discharge approved for 1-7-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1	<i>[Signature]</i> Fam B
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	
B179c	B 120	M 93			

Date 17-6-19 *[Signature]*
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUL 1 1919 *[Signature]*
O. C. Discharge Depot.

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

Date June 30/19 *[Signature]*
for Records

Reg. No. *5077* Rank *PLC.* Name *Morrisey, P.*

Attested Address *Brigus*

Allotment Allottee

Date of Allotment Returned from Overseas *29-5-19*

Returned on S.S. *Corsican* Cause *Discharge*

19.6.19.

PASSED BY OFFICER

1.7.19.

DISCHARGE APPROVED BY MOBILISATION.