



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. H 810 Name Edward Myers Corps R.C.

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Edward Myers
2. What is your full Address? 2. St. John's
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 22 Years 7 Months
5. What is your Trade or Calling? 5. Labourer
6. Are you Married? 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7. No
8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
9. Are you willing to be enlisted for General Service?..... 9. Yes
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. Yes

Edward Myers 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.

A Edward Myers SIGNATURE OF RECRUIT.
30.4.18 Frank G. Gurney Signature of Witness.

Edward Myers 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 30 day of April 1918
Signature of Attesting Officer James J. J. J.

†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 April 30 1918
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 Edward Myers
 Apparent age 22 years 0 months. Height 5 feet 4 inches
 Chest Measurement { Girth when fully expanded 35½ inches
 Range of expansion 3½ inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Helen Myers
Sumner St | Relationship Sister
St Johns 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>30-4-1918</u>									
Joined at <u>St. John's</u> on <u>April 30 1918</u>									
Discharged June 29 1919									
<u>Embarked St. John's train to Halifax N.S. 11-6-1918.</u>									
<u>Embarked for B.C. I. 26-10-18.</u>									
<u>Disembarked France 26-10-18.</u>									
<u>Joined Battalion. 3-11-1918.</u>									
<u>Transferred from Rowers 22-4-19. Arrived Newcastle 23-4-1919</u>									
<u>to Newfoundland for demobilization 22nd. Arrived Newfoundland 1-6-19</u>									
<u>Demobilization St. John's 29-6-1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 29-6-1919 [date of discharge] 1 years 61 days
 " " Pensions " " " " " " " " " " " "

C.R. 4810

Extract from Daily Orders Part 11 Unit The Royal Hfld. Regt.
Regt. St. John's, June 30th, 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from 29-6-19.

4810 Pts. Edward Myers.

C.R. 4810

Extract from Daily Orders Part 21 Unit The Royal Nfld. Regt.
St. John's, June 16th, 1919.

The discharge of the undernoted on demobilization has been
APPROVED by C.O. Discharge Depot with effect from 15-6-19.

4810 Pts. Ed. Myers.

C.R.

4810

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

4810 Pte. Ed. Myers.

Reported at Headquarters 1-6-19 Ex "Gersican" which sailed
Liverpool 22-5-19.

C.R. 4810

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.

#4810 Pte. E. Meyers.

C.R. 4810

Extract from Daily Orders Part 11 Unit The Royal Wfld.
Regt. 1st Bn. 3-11-18.

The following joined the Battn. 3-11-18.

4810 Pte. E. Myers.

B. Coy.

C.R. 4810

Extract from Memorial Roll re-impounded Draft No. 55, Impounded Folioton,
25/10/18, from 2nd Batta, Royal Newfoundland Regiment, Stanley Barracks,
Windsor, to 1st Batta, Royal Newfoundland Regiment B.N.F.

4810 Pte. Myers, E.

11.

C.R. 74810

Extract from Daily Orders Part 11. from Unit The Royal Nfld.
Regiment. St. John's, dated June 14th 1918.

4810 Pte E. Myers

Embarked for Overseas with draft 11-6-18.

C.R. 4810

Extract from Daily Order: part 11, from Unit The Royal ⁴fld.
Regt. St. John's, dated May 1st, 1918.

#4810 Pte. Edward Mylers.

Attested for General Service with the Royal ⁴fld. Regt.
from 30/4/18.

E. Myers.

C.R. 4810

P. + P. 0

To:- The Chief Paymaster,
Royal Newfoundland Regiment,
55 Victoria Street,
London, S.W.

Sir:-

Please charge the amount 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.

Regt. No.	Rank	Name	Amount	Signature
1810	Lt	Myers E	\$250	E. Myers

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

E. Myers

Date

July 1/18

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 Air Force Band*
2. Regtl. No. *4810* 3. Rank. *Plt*
4. Name *M. J. Edwards*
(Surname) (Christian Names)
5. Age last birthday. *24*
6. Posted for duty on *Apr 28/18* at *St. Johns*
in category (or grade).....
7. Former Trade or Occupation } *Moulder*
- 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps ; with Regtl. Nos.
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 a (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

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

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

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

Handwritten marks: A large bracket on the right side of items (i) through (v) groups them under a single column. There are also some scribbles and initials next to item (v).

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.)

Handwritten: He complains of no disability

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

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

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

Handwritten: Repatriation
 Sign: W. J. P. [unclear]
 Sign: [unclear] Capt R. [unclear]

Station .. *Hazeley Barr* ..
 Date *30/11/19* ..

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

L
Myers, E

4810

Ray Dept.

June 29, 1919

#4810 Pte. Edward Myers,
#27 Gaudihey Street,
City.

Dear Sir:-

Please find enclosed Discharge
Certificate No. 2430.

Yours truly

Paymaster & Officer i/c **Captain.**
Records.

The Royal Newfoundland Regiment

48 10

PROCEEDINGS ON DISCHARGE

1. No. 4810 Rank PL Name Myers E
 Intended place of residence St. John's

2. Occupation Laborer
 Classification of soldier E Medical Category A 2

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 12 1919 *H. Mousbrant*
 for 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
JUN 12 1919
E. Myers
 Signature of soldier
W. E. Constan
 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 and Date ST. JOHN'S
JUN 12 1919
E. Myers
 Signature of soldier
James O. Newman
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 80-4-18 No of days on Military
 Discharged from service JUN 15 1919 Flu 14 days Service 426

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S
JUN 15 1919
R.H. Sait Capt
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed
 Place John's Head
 Date June 29/1919
R. Bowley Capt
 Officer i/c Records
 The Royal Newfoundland Regiment

a FB 2079/2430

The Royal Newfoundland Regiment

DEMOBILIZATION OF

4810
 Reg. No. ~~4410~~ Rank *PLC* Name *Myers E*
 Date of Enlistment *30. 4. 18* Address *St John's* District *St John's*
 Occupation *Laborer* Classification for Discharge *E* Medical Category *A I*
 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	1
B 178	W 3494	B 122	Board Ist.	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	3
B 179	D 400H	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 108	ME 2		" 6	
B 179c	B 120	M 93			

Date *10. 6. 19* *E Myers*
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am..... in a position to resume civilian occupation *E Myers*
not in Newfoundland

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 *Chilwell*

Date *12-6-19*

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. _____ to his home at St Johns and Release Certificate No. 12652 issued.

Date 12-6-19 J.A. Crawbatt
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 29-6-19

Date 12-6-19 J.A. Crawbatt
Depot Paymaster.

Discharge approved for 15-6-19
Forwarded with following documents to O.C. Discharge Depot.

N.P. 136	B 268	B 121	N. F. Med	D. F. 1
B 178	W 349A	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 Form B

Date 12-6-19 J.A. Crawbatt
O. C. Discharge Depot.

APPROVED.

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

with following additional documents.

Eligible for War Service Gratuity
R.H. Sait Capt.

Date JUN. 15. 1919
O. C. Discharge Depot.

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

The Royal Newfoundland Regiment

Class for Demobilization: 16

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date: 10.6.19

Regimental No. 24818

Name: M. J. Jones

Rank: Li

Address: 27. Ambley St.

Present Medical Category: A1

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

Members of Board {

R. H. [Signature]
O.C. Discharge Depot.

[Signature]
Senior Medical Officer

[Signature]
M. O. Depot

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

Ayers E.

Signature of Man.

Reg. No. *H410*

J. A. Crawford

Signature of the Vocational Officer or his Representative.

Place

ST. JOHN'S

Date *12-6-19*

191

The Royal Nfld. Regiment

DEMOBILIZATION

No. 4810 Rank _____

Name Myer C

Warned for demobilization on

JUN 12 1919

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

MEDICAL HISTORY

Surname Myers OF Edward Christian Name

Table I.—GENERAL TABLE.

Birthplace:—Parish S. Plus County Nfld

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	30	April		1918
Declared Age	at <u>S. Plus</u>		at	
Trade or Occupation	<u>labourer</u>			
Height	<u>57</u> years			
Weight	<u>120</u> lbs.			
Chest Measurement	Girth when fully expanded	<u>38 1/2</u> inches		
	Range of Expansion	<u>3 1/2</u> inches		
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm			
When Vaccinated				
Vision	<u>6/24</u>		R.E.—V=	
	<u>6/24</u>		L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Lammus Robinson</u>			
(Rank)				
Enlisted	at <u>S. Plus</u>		at	
Joined on Enlistment	on <u>30</u> day of <u>Apr</u>		on	day of
Transferred to	Corps. <u>1st Royal Nfld Regt</u>	Regtl. No. <u>4810</u>	Corps.	Regtl. No.
Became non-effective by	on	day of	on	day of
(Signature)				
(Rank)				



Descriptive Return of a Soldier Discharged on Account of Disability

INSTRUCTIONS—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. i. c. Records together with the remainder of the man's documents.

Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

Name in full *Edward Myers*

Regiment from which discharged **Royal Newfoundland**

Regimental number *4810*

Intended address *Saddly St. St Johns.*

Height on discharge *5* Feet *5*

Color of hair on discharge *Dark*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks _____

Figure on discharge *Medium*

Christian name of Father _____

Christian name of Mother _____

Wife's maiden name in full *Annie*

Date and place of marriage *St Johns Nfld. 11th June 1918*

Christian names of children *Catherine*

Place and date of soldier's birth *Hr. Main 7th Sept. 1896*

Nature and locality of civil employment required _____

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

(Soldier's signature in full) *Edward Myers*

Pte.
(Rank)

Station _____

Date *10/6/19*

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



Station _____

Date _____

Casualty Form—Active Service.

Regiment or Corps ROYAL NEWFOUNDLAND REG.

Rank Pte Surname Myers Christian Name Edward
 Religion R. C. Age on Enlistment 22 years 7 months
 Enlisted (a) 30/4/8 Terms of Service (a) DURATION Service reckons from (a) 20/4/8
 Date of promotion to present rank Date of appointment to lance rank

Extended () Re-engaged () Qualification (b)
 or Corps Trade and Rate
 Occupation Labourer J. M. Egan Capt. Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, etc., 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 ...	<u>25 OCT 1918</u>		
		Disembarked...	<u>3 NOV 1918</u>		
		Joined Battalion			
		<u>Arrived in UK</u>		<u>23/4/19</u>	

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, etc. (17591.) P.T. W 1257—P. 1127, 1,000,000. G.P.O. Form B. 103. (E. 1256.)

P.T.O.

next of kin sister Helen Myers, Lime St. St. Johns. Nfld.

Note.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (vi. 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 } *Moulder*
2. Regtl. Nott. *81A* 3. Rank *plc* 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps ; with Regtl. Nos.
4. Name *Myers Edward*
(Surname) (Christian Names)
5. Age last birthday *24*
6. Posted for duty on *apl 25/10 81 25 mo*
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 (b) Where (d) Particulars of Pension or Gratuity (if any)
(c) Opinion of Court

Note.—The foregoing particulars are to be filled in and A.F.B. 179 n (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 | } na. | |
| (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.)
- na. 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 ?

Repatriation

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

W.E. Procmier. Capt. Ranc.

Station Hazely Down

Date 30/4/19

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.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

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

- Christian name *Edward* 2. Surname *Myers*.....
3. Rank *Plt* 4. Regtl. No. *4510*.....
5. Address in full to which future payments of gratuity are to be forwarded..... *27 1/2 Caddis St. St. John's*.....
6. Date of enlistment in the Regiment..... *Apr 29/18*.....
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 field, if so give dates and particulars of such service..... *Overseas*.....
12. Give total length of time which you served on active service, whether in field or overseas..... *From Apr. 29/18 to June 12/19*..... 1.2.....

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.

.....

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

..... *No.*

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

..... *No.*

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

..... *No.*

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.*

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

..... *June 17/19*

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 Oct 1918 to April 1919*

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.....

..... *Yes*

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.

his

Signature of Applicant:

Edward X Myers

Place of Residence:

27 1/2 Cuddihy St. St. John's

Declared before me at:

St. John's, Nfld.

This

12th

day of

June

19*19*

John M. Cahill

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

POST DISCHARGE PAY.

Date paid	Paid Soldier.	Paid Dependent	War Service Gratuity.	Net amount due
.....
.....
.....

Certified correct.

Paymaster



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Edward Myers, Regl. No. 4810
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
Dollars and Seventy 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 1-6-18

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
4198	Uncle	John Duggan, H. Train,	B. Bay	70
Total Allotment, \$				70

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

(Sig.) [Signature]
 Officer Commanding
 'A' Company

(Sig.) [Signature]
 (Rank) pte.

St. John's
8-6-1918

Royal Newfoundland Regiment
(Separation Allowance Branch)
(Information for Board of Review).

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 as being made on Oath and the form is to be signed before a Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace and return to:

THE PAYMASTER,
 Separation Allowance Branch,
 St. John's, Nfld.

1. Name in full of soldier. Rank. Regt. or Unit. Regt. No.
 Edward Myers Private Royal Nfld Regiment 4810
2. Age of soldier. Married or single.
 22 yrs Sep 1915 Married
3. Name in full of wife.
 Anastasia Fedimer
4. Address in full.
 22 Broadview Street
5. Date of marriage.
 10th June 1918
6. Place of marriage.
 Catholic Cathedral St John's Nfld.
7. Did marriage take place since soldier's enlistment?
 Yes
8. Was Commanding Officer's permission obtained? If not, why?
 Yes Permission from Capt of Trade
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 permanent domestic basis?
10. Were you living with your husband immediately prior to his enlistment? If not, how long have you been separated?
 No.
11. Is Separation a legal one.

A. J. G.
 210
 1918

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 monthly.

No allotment

15. From what date have you received Allotment?

16. Names of children. Age last Birthday. Names of children. Age last Birthday.

No children

18. Are you already in receipt of separation allowance from any source? If so, state amount.

No

18. Are you in receipt of payment from any Patriotic fund? If so, how much.

No

19. Have you made a previous claim for Separation Allowance? If not, Why? Give particulars.

No

20. Was your husband at the time of his enlistment an employee of the Nfld. Government?

No

21. In what capacity and in what place?

22. Is he in receipt of a salary as such, while serving in the Nfld. Regt., if so, how much?

No

I herewith make this solemn declaration conscientiously believing the same to be true and knowing it to be of the same force and effect as if made under Oath and in virtue of the Evidence Act.

Signature of Applicant

Maritain Myers

Place of Residence

29. Goodwin Street

Declared and subscribed before me at G. John's, U.F.C.³⁻
this 29th day of June 1918

Signature of Barrister of the
Supreme Court, Stipendiary Magistrate,
Notary Public or Justice of the Peace. John McCarthy
J.P.

This Application must be signed by two responsible parties
one of whom must be a clergyman, the other a representative of your
Local Patriotic Fund Committee, certifying that to the best of their
knowledge, after careful enquiry, the above statements are correct.

Signature of Clergyman.....(Rev.)... John J. Conway, Palace St. Ph.

Signature of Member of
Patriotic Fund Committee... Thomas
Judge J. J. O'Connell - St. Ann's

N.B. Marriage Certificate must accompany this application, and
will be returned after careful perusal. If marriage is after en-
listment, Commanding Officer's permission in writing must be forward-
ed.

Approved
[Handwritten initials]

Winchester

July 23rd 1918

Capt J J O'Grady

Dear Sir

I received a letter from my wife saying she was down to you about my allotment and she couldn't get it without a word from me. I was married a day before I left and I couldn't make any arrangement about it. I had my allotment made over to John Duggan my Uncle. But would you kindly alter it and give the same amount to my wife. Her address
Anastasia Myers

No 6 Wickford Street

~~My~~ Present
Address

32 Goodwin Street

~~My~~

Please oblige

yours truly

4810. Pte. Edward Myers.

August 30th.1918.

Pte. Myers,
No.4810, Royal Mfld. Reg't.,

C/o Pay & Record Office,
58, Victoria Street,
LONDON, S.W.,-1-
England.

Dear Sir:

With reference to your letter of July 23rd. to Capt. O'Grady, I beg to inform you that if you wish to have your present allotment in favour of your uncle cancelled, and a new one declared in favour of your wife, the proper procedure is for you to apply to your Commanding Officer and he will have it done for you on the proper form.

I would suggest that you have this done immediately on receipt of this letter, so that you may be able to make payment to your wife as soon as form is received.

Yours truly,

Lieut.

For Paymaster

St. _____ in's,

MAY 1 0 1918

(Date)

1st Newfoundland Regiment
BILLETING ACCOUNT

To *M^{rs} E. Myers*
Lincoln St

Billeting soldiers as undermentioned

from *Apr 30th / 18* to *May 8th / 18*

<i>4810 Pte. E. Myers</i>	<i>7</i>	<i>80</i>
<i>March 2 days</i>		

C. B. Dicks

Certified correct for \$ *7. 80*

W. S. B.

miss Myers ^{RJ}

C. B. Dicks Lieut
Billeting Officer

ST. JOHN'S, JUN 13 1919

Royal Newfoundland Regiment.

Billeting Account,

To M^{rs} E. Myers

27 1/2 Cuddy Street

Billeting Soldiers as undermentioned

from June 1st /19 to June 15th /19

4410. W. E. Myers 15 50

ACCOUNT	<u>B. B. H.</u>
CH. NO.	<u>20274</u>
ISS. DATE	<u>1919</u>
AMOUNT	<u>50</u>

Certified correct for \$ 15 - 50

E. X. Myers R.J.
Major
Newfoundland

Ambleton
for Billeting Officer.

1931

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S, Nfld.

Fold Here

OCT 5 1921

1921.

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

is/are forwarded herewith to

Edward Myers

in respect of his service as No. **4810** Rank **Pte.**

Name **E. Myers**

Royal Nfld. Regt.

~~Private~~ ~~Camps.~~

Receipt of the same should be acknowledged hereon.

Received

Medals O.K.

Signature

Mrs Myers (Wife)

Date

16/1/22

Address

27 1/2 Gundry St.

[P.T.O.]

The Royal Newfoundland Regiment

DEMobilIZATION OF

4810
 Reg. No. 4810 Rank Plt Name James E
 Date of Enlistment 30.11.18 Address St Johns District St Johns
 Occupation Laborer Classification for Discharge 1 Medical Category AI
 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 10.6.19

for J. M. Lewis St.
 O. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

in employment
with McEvoy

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied _____

Date 12-6-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. _____ to his home at St. John and Release Certificate No. 2052 issued.

Date 12-6-19 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 _____

Date 12-1-19
J. A. Snowball
Depot Paymaster.

Discharge approved for 15-6-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. 136	B 263	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	do 5th	" 6
B179c	B 120	M 93		

2 Form B

Date 12-6-19 J. A. Snowball
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Charge Records,
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUN 15 1919 R. J. A. Snowball
O. C. Discharge Depot.

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

Date June 20 1919

#610. Rank *Private* Name *Myers, Ed*

Address *Lincoln St.*

Allottee

Alien *Louisian* Returned from Overseas *29.1.19*

d on S.S. Cause *Discharge*

10-6-19
#614

PASSED TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED ON DEMOBILIZATION.