Recruiting Form A, 1915



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 1488.

Name in full Raphael Nardini, Age 19
Name in full Raphael Nardini, Age 19 Address Ofain River 5t, George. Married Height St. Weight 32 Single Color Fair Hair Light. Eyes Blue.
Married Height 54 7 km Weight 137
Single
Color Pair Hair Light, Eyes Blue
Other distinguishing marks
Nearest relative Lather (Josephine) Address Lyain River
Address
Dependents
Occupation Blech, Present Wage \$4000 forms
Previous service
Decorations
General Remarks Date of Enlistment April 24-21915
Date of Polistment Shail 24 - 1915
Date of Elinistinoite
on the contract of the contrac
I, Raphael Vardinia, do sincerely pro-
mise and swear that I will be faithful and bear true allegiance to His Majesty, and that I will faithfully serve His Majesty in any place where I may be needed (or in the Colony of
Newfoundland, as the case may be), against all His enemies and opposers whatsoever, according to the condition of my service.
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DESCRIPTIVE REPORT ON ENLISTMENT.

Applicable to all ranks. To correspond with entries on the Medical History Sherman 1488

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DESCRIPTIVE REPORT ON ENLISTMENT.

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

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THE

1st NEWFOUNDLAND REGIMENT.

I hereby enlist for service at home or abroad in the King's Forces under the following conditions:

> For the duration of the present war, or until my discharge.

> Subject to the Army Act, the King's Regulations, and to such ordinances as may apply or may be made to apply to the British Regular Army.

> Subject to the Newfoundland Volunteer Act, 5 George V., Chapter IV.

Signed Mardini
Witness Shober for

Dated at

2 FEB 1916

Place	Date of offence	Rank	Cases of Drunken- ness		Offence		Sheet No.	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remark
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C.R. 1488 Rardinis Hosig Oct 26 1919 Har Ler I can't so just how and hust tell & the I would rotas much sur receivelying as Jane Sio Speaker If there is any thinghermiting is Colicerund I. Will gladly do it Phase, let me be ready to go we two beeks time your bredient Servant Jardini.

E.R. 1488

Extract from Haminal Roll of Hild. Regt. Imbarked 12-3-16 Developort, for Egypt transferred to B.B.F. & disembarked Horsellies #5-4-16

> £ 1488 1495 Pte. R. Nardini.

C.R. 1488

List of men discharged from the Royal Newfoundland Regiment of various Dates.

1488 Pte.Nardini Raphael, discharged Mar. 28th 1917, Medically unfit

Extract from Roll of Officers N. C. O.'s and men DISCHARGED from the Royal Newfoundland Regiment.

Regtl. # rank name date reason.

1488 Pte. Nardind 28/3/178ed. Pte.

Nardindi 28/3/17Med. Unfit.

C.R. 1488

Extract from Daily Orders Part 11 Unit The Reyal Bfld. Regt., St. Schn's, March 14/17.

1488 Pte. Nardini.

Attached to the Strength from March 14th, 1917.

Extract from Telegram received from London, dated February 19,1918.

Scandinavian. for repatriation. #1488 Pte.Nardine.

2 Dec. 1916.

Dear Mr. Martyn.

I hope that gord news as to his health has been received from No. 1488 Ptc. R. Mardini.

The rumour which you mention- that no more drafts of discharged soldiers will be leaving Scotland until next Spring has no foundation as iar as I know. I have received a telegram that seven lads have been invalided home by the Scotlan but R. Mardini is not among them.

The rule with regard to furligh is this: Air men discharged from Hospital are marked according to their health. A & B classes are fit for full duty, C & D classes are fit only for light duty or home defence.

If Nardini is classified in C or D the Doctor may certify that he would benefit by a sea voyage or by a change home. If he is in A or B furlough is not permitted. But parents and relatives have the satisfaction of knowing that the young soldier is in good health and strength

Yours sincerely,

Chas C. Martyn Esq. Bay St. George Hotel, Stephenville Crossing.

endor want

CARLE ADDRESS:

'CARIBOU' NEWFOUNDLAND,

PROPRIETOR

CHAS. C. MARTYN

Bay St. George Hotel

STEPHENVILLE CROSSING.

28th hor-1916

His Excellency Sir le & Davidson K. lo. M. G. Government House St. John's h.J.

His rumoured here that no more drafts of discharged Soldiers will be leaving Soldiers will be leaving Soldiers with he harden has been expecting her Son Its R. harden 18.1488 wounded on! July last for the past Six or light weeks shy is somewhat auxious to find out if this rumour is cornect so that she my govern herself with regard to the Mails for Lunas. If your Excellency could evelighten me on the above matter I would be greatly obliged

and remain

yours very obediently

Plean with a wice letter, king that food her, des to be best to be see from the self. HE Por ruman hoch for menting - Root []- her us full gate anthough 1 Know - 1 4 mars & title Seven las her ben Alexania & Now At R. Mar don is But a the well with Then. furboreh as well stone

G.

15th August, 1916.

Dear Madam,

I am in receipt of your letter of the 13th instant, regarding furlough for Private R. Nardini. I beg to say that this matter is one beyond the authority of the Government Officers here, as all our boys of the Newfoundland Regiment are under the authority of the English war Office, furlough can only be granted through that source, but I have no doubt that if he applied they would take his case into consideration. I really do not know whether they have to pay their own way out when furlough is granted, but I think it is very likely that such is the case.

Yours truly.

Colonial Secretary.

Mrs. R.J.McIseac, Nardini's Station, District of St. George.

Sardius State and 18 1/18 J. R. Buyed - 6sg/. Colonial Fierelary It Johns Dear Mr. Bennelt:bruble yn. a acking yn Boli, R. Hardin gelling Hurlough. as he is wounded

in the Right auce 4 4000 au his Lister; + Anstackie only had a note some I Sick. So I am writing him siever, he went whitely I this child not give you domich will, I stirtled his to please the as Shi Should lik him to likyn, to give me, you come trone on Feelongh very much, git should be paidle. ou early reply, 2 as soon Ida, of sauce, & where they, glet Furlong h; do as convenient phase. they have to pay there own way, n is it a pass they get in will grally Obligens buly PS a sull PS adult ms RIMY gardinise

C.R. 1488

Ralph Nardini

vas attested for General Service

with the NEWFOUNDLAND REGIMENT on ... April 24th 1915. Regimental No. 1488 was allotied to Pto R. NARDINI.

AUTHORITY:

Rocerd Diffeor

Dopt. of Militia;

March 25th, 1919.

20/60



CASUALTIES:

O. C., 3rd LONDON GENERAL HOSPITAL,

Reports, 5th October 1916,

"No. 1488, Pte. Nardini, R., is discharged

"from Hospital with orders to proceed to

"58, Victoria Street, and there await further

"instructions as to his discharge from the

"Service."

Authority:A.F. W.3201 from
O.C., 3rd L.G.H.

Extract of Casualties received from Pay & Record Office. London, dated July 51,1916. (Extract from Army Form B 215 from 6.C. let. Efid.Reg.t dated. 11/7/16.)

#1488 Pte. R. Nardini;

Wounded in Action 1/7/16.

Extract of Casualty List received from P.&.R.O. July 17th. 1916.

From Officer Commanding 3rd London General Hosp tal.

To Officer i/c Records Newfoundland Contingent, 58, Victoria
Street, S.W.

1487 Pte S. Bolding. Lat Nfld.

TO BROOKLANDS. 13/7/16.

in accordance with your Memo of the 30th June, I beg to inform You that the undermentioned men was thrusterred to the Convalescent Home named out the date specified.

FOUNDLAND POSTAL TELEGRAP



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

resulting from the non-transmission of non-delivery of the pressage, or the control of the non-transmission of non-transmission, non-delivery, delay, or error shall have occurred.

The control of the N.P. T. over the Message shall be deemed to have nitrely cleased for the purposes of these Conditions at any point where, in the course of the transit of the Message is 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 Telegraphic got on 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

Check Line Number Red Sent

Dated

7 July, 1916.

To

Mrs. Josephine Mardini, Main River. St. George's.

Regret to inform you 1488 Private Ralph Nardini reported Wandsworth Hospital wounded right arm, not serious.

J. R. Bennett.

COLONIAL SECRETARY.

Extract of Casualties received from Pay & Record Office, London, dated July 6,1916.

#1488 Pte. R. Nardini. 1

Cunshot wound right arm.

Admitted Srd London General Hospital, Wardsworth. July 5,1916.

Copy of Cablegram to Governor St. John's Nfld. from P.&.R.O. 6/7/16.

1488, Nardini.

At Wandsworth Gunshot Wound Right Arm.

Extract from Casualties Received from Pay & Record Office Mendon, July 6th, 1916.

Adm. t 3rd London General Hospital July.5th.

1488 Pte. R. Nardini.

WYCHAUG BENMATENETS

Extract from Nominal Roll Embarked St. John for Overseas per S.S. CALGARIAN" June 19, 1915."F"

1488 Pte. R. Nardini.

P. + B. B



Proceedings on Discharge.

When forwarded for confirmation the documents	named on page 4 should be enclosed.)
No. 1488, Army Rank The	ivate
Name Nardini Kapha	ul
(The name must agree strictly with that on enlistment, unless ch	anged subsequently by authority.)
corps / lwfoundland	egiment,
Battalion, Battery, Company, Depôt, &c.	COPY SENT TO
(If attached to the Regular Establishment of the Special Reserve or Perm Staff of the Army, it should be	anent Staff of the Territorial Force, &c., or to General
Date of discharge	SO STATED.
Place of discharge	FEB 1 6 1917
1. Description at the time of	DATED
Age 20 years months	Descriptive marks.
Height feet 7 inches	
Chest (girth when fully expanded ins	
measure- ment range of expansion ins.	
Complexion	
Eyes / Sall	
Trade Clerk	
Intended place of (Nardinil Prailing	
residence A George 1	
(To be given as fully as practicable) **Rewfoundland**	•
(The measurements and description should be carefully taken on the sent home from abroad for discharge, the age and intended place of reside who confirms the discharge at home.)	ne day the man leaves his unit, but in the case of men ence should be left blank to be filled in by the Officer
	9.11
2. The above-named man is discharged in consequence o	Juntar would
1. Right Uluar & med	ias nerves.
(APP - CARROWN COD)	
and the second s	
(The cause of discharge must be worded as prescribed in the Ki discharge certificate. If discharged by superior authority, the No. and	ing's Regulations and be identical with that on the date of the letter to be quoted.)
(3. Military character :	
4. Character awarded in accordance with King's Regulation	ons:—
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T page	
4. Character awarded in accordance with King's Regulation of the control of the c	
Certified that the above is an accurate copy of the character given by D. 489 was awarded in t	y me on Army Form B. 2067° and that Army Form this case.
	Initials of Commanding Officer.
Army Form B. 2088 has been issued to*	
W raturage tan one also M &C I d Forms	

Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man fit for General Service.

o. 1488	Rank Provale
me (surname first) Narding	- Rappael
egiment M. Rewfoun,	

State what special qualifications you have for employment in civil life.

Good knowledge of ordinary clinical works.

	COPY SENT TO
8	O.C. H,Q,
1	ST, JOHNS, N.F.L.D.
2	N.E.P.38. No. 76,77
,	NED 38 No. 4647
V	

2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed?

> Worked for Father A. Lardine, since leaving school a year ago.

3. What is the nature and locality of the employment you desire?

Uncertain, awing to Right Land being of no use for writing.

4. What is the name of your Approved Society?

5. Have you been employed whilst with the Colours? If so, in what capacity?

20

Date 2 W Oct 1916. Signature A Max dimi

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

Jempot ary victoria si. 1000 (1000) (

To be used (a) for recruits enlisting direct into the Regular Army and (b) for men of the Territorial Force when they are admitted to Hospital.

Army Form B. 1784 to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Nardi	ni Christian Name Ma	phael.
	TABLE I.—GENERAL TABLE.	
Birthplace Parish	County	
	(onday of	191
Examined	$\left\{ \mathrm{at}\underline{}\right\}$	1
Declared Age	years	days.
Frade or occupation		
Height		inches.
Weight	COPY SENT TO	lbs.
Chest Girth when fully Expanded Measurement Range of Expansion	O.C. H.Q.	inches.
Physical Development	10 1 1 No 14	04//
$egin{array}{lll} { m Vaccination} & { m Arm} & \ { m Marks} & { m Number} & \end{array}$		917 Left
When Vaccinated		
Vision	\{\begin{align*} \text{R.EV} = \\ \text{L.EV} = \end{align*}	
(a) Marks indicating congenital peculiarities or previous disease	{(a)	
b) Slight defects but not sufficient to cause rejection	{(b)	
Approved by (Signature)	Ţ.	
(Rank)		Medical Officer
Enlisted	at	191
	(onday of	Rea. No.
Joined on Enlistment	1st hewfoundland	1488
Transferred to		
Became non-effective by		
	onday of	191
(Signature)		e Nilliania.
(Rank)		m (arginis its anaromos
(4887.) W. 13090/4672 200m. 11/15.	A. J. W. & Co., Ltd. B 178	P.T.0

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

Name of Hospital		Admitted to Hospit		Admitted to Hospital			charged f Hospital	rom	Disease	Number of days	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown.	Signature of Medical Officer		
	Day Month Year		Day	Day Month Year		_ Disease	in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer					
ondon General Hospi ANDSWORTH, S.W.	al,	7	16	., .,			4. Sh. R. ulnar 4 media media menors		Brand held - see werteng .					
		7					A. 1.1.1.1.		Timber - ESW Rul - Comment					
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		100						The state	Total Inability for earning a livelition	Capt Ramo				
									as present.	rd London General Hos				
										WANDSWORTH, S.W.				
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72 <u></u>		-		a second refer			www.	A. 140		• 666				

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and Signature
Box	and held 4/10/16
For	and held 4/10/16
Bi	and Remonently unfit
	System don Control Hoperation
	Bython don lone call copical,
	WARADSWORTH, S.W.
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	[8
	<u>* </u>
	2,

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure of disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation
		_/)		* 1 5000
		<i>-</i>			
					A
<u> </u>					

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

MEDICAL HISTORY

Hourname nardini

Christian Name Raphael

Table 1.-GENERAL TABLE. newfoundland County SPECIAL RESERVE REGULAR ARMY. 26 day of April 1915 50 Johns days days years club Trade or Occupation 1/ inches inches lbs. 35 3x inches Chest Heasure-Range of expansion.... inches inches Physical Development... Right Right Left. never When Vaccinated R.E.-V= (a) (a) Marks indicating congenital peculi-arities or previous disease (4) (6) (b) Slight defects but not sufficient to Cause Rejection Gred W. Byrden Lient. Approved by (Signature) (Rank) Medical Officer Medical Officer 5'6 Johns Enlisted day of Regtl. No. Joined on Enlistment Transferred to .. Became non-effective by day of 191 191 (Signature) (Rank) P.T.Q.

				T	able II.—Only for admis	sions to hospi	tal or to the sick li	st in the case of Warrant Officers treated in quarters	
Name of Hospital.	Admit Hosp	1000000	Discharg Hosp Day Mor	1	Disease	Numb Days i Hospit	er Remarks bearing n syphilis, admissi al of trea	on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of one and m-admissions to hospital will be shown. The subsequent progress, including particulars used out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
Madre Cont Hiptil	157	16			Milia I nerve.	18	Spare stables Grate Potal	Century his arm to by asclass. That is a detire beroise trastity to earning a livelitora at frescrit	Thasen Jenend Suspital,
ard SCOTAISH GENER	AL 2 (NO	Y 1916	VIII 31 1		G.S.W. R. fream.	7,3		evidence only of parhal injury to alman nearly improved as to movements of hand finglish pequires massage of use of hand.	Att Edward Capt.
4									[P.T.O.

Name of Hospital.	-	dmitte Hospi Month	30.00		ospital	+	I	lisense		Number Days in Hospital	Remarks bearing syphilis, admiss of tre	on the cause, nature or treatmeters and re-admissions to hospital thient out of hospital, transfers,	ent of the case likely il will be shown. Th , &c., will be given in	to be of interest or of the subsequent progre to the special syphilis	future use. In cases of se, including particular case sheet.	Signature of M	edical Officer
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Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.: Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.

gical Ap	phances; rart	iculars of Deni	ai Treatment, &c.		
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10210). W.11751/G.8880, 1,800 Bbs. 11/18. C.F. ta admitted 5. 7. 164rmy Form W. 3202. ONLY FOR USE IN THE CASE OF SOLDIERS RETURNED FROM AN EXPEDITIONARY FORCE, OR FROM GARRISONS ABROAD. 10th gold Contingent Regiment oc The Officer Commanding Wed Cart aux The Officer in Charge of Records 58 Vetoria & & W The Regimental Paymaster 58 Victoria 11- 2.W With reference to No. 1488. PE. Nordin of the above Regiment, who appeared before a Medical Board and was approved by the D.D.M.S., Zenchaw. Command, on the 10 for discharge from the Service as permanently unfit, please note that this man has been sent to like bone on warrant with orders to await instructions as to his final discharge; he has been given £1 (one pound) advance and a suit of plain electrons. He proceeded to 58 Vietoria & 944 5th (Oct 1916 on [date]_ Horace Fagan Capt RA.MS(TF) fficer Commanding Registrar, R.A.M.C.T. Place Wando wow Srd London General Hospital, erritorial Force "Officer Commanding the Administrative Centre." Four copies to be made, and one copy sent to each Officer mentioned above, and one copy filed in the Office.

Notification by President of Medical Board of Approval of a Soldier's Discharge under Paragraph 392 (xvi.) King's Regulations.

(To be completed and dispatched on the day on which the discharge is approved.)

To the Officer i/c Records 5 Victoria St. Sw

The Soldier named below has appeared before an Army Medical Board at this etation, and his discharge from the Service as "no longer physically fit for War Service" has this day been approved. (The discharge will be confirmed for a date 14 days after the date on this notification—see A.C.I. 1623 of 1916.)

Soldier's surname	THE PERSON NAMED IN	, Christian names_ (in full)	capicace
Regt. No. and Rank	1488 P	Regt. or Corps	* Newfoundland
tour training and the same of		divis Cros	
His address on disc	enarge will be very	N	refoundland

This information is for the Central Army Pension Issue Office only. The Soldier states that ______ being issued in respect of him.

C

*Insert "separation," "dependants," "family," or "no," as the case may be. The space must not be left blank.

n

Army Form D. 400A, and Army Form B. 179 for the above-named Soldier are forwarded herewith.

3rd London General Hospital, Station WANDSWORTH, S.W.

Date 4/10/16

Suhie Machin hay or President of Bohroung Officer).

allowance is

A set of three forms will be made out for each soldier whose discharge is approved, and will be dispatched to the officers severally indicated.

Attention is drawn to the fact that Forms A, B and C of each set are not in identical terms,

Modical Report on an Invalid.

Station Mandaworth All.

Date Deptember of Mandaworth All.

1. Unit / Nawfoundand

2. Regimental No. 1488

3. Rank

4. Name Nardmi A. Disability.

At Ulnar , Media , merves

Statement of Case.

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

9. Date of origin of disability.

1.7.16

10. Place of origin of disability.

France

11. Give concisely the essential facts of the Sall of right forearm with history of the disability, noting entries on the Medical History Sheet bearing on the case. Slight dawage to alwa, and lembers, (Severe) of ulwar nerve and slight of medical states of ulwar nerve and slight of medical states.

nerve .

12. (a) Give your opinion as to the causation of the disability.

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3). active Service

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Company South			
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		1 250	
14. If the disability is an injury,			
caused caused	7.		
	411	10 No. 3	
(a) In action ?	THI.		
(b) On field service?	ges		
(e) On duty?	111		
. (a) On daty?	ges		
(d) Off duty?			
			J
15. Was a Court of Inquiry held injury?	on the		
j, 1			
If so—(a) When ?			
(I) WII 0			
(b) Where?		\neg	
(c) Opinion ?			
	/		
16. Was an operation performed?	If so, Naue		
what?			
$\sim 10^{-1}$			
17. If not, was an operation advise declined?	ed and		
18. In case of loss or decay of teeth.	Is the		
loss of teeth the result of v	rounds,		
loss of teeth the result of v injury or disease, directly attril to active service?	Duta Die		
19. Do you recommend	1	,	
	061		
(a) Discharge as permanently	unfit, ges		
(b) Change to England?	0		
	Sas		
	11/ 100		201-
	1/1/1	1	MARROLL
	No. ved	na ca	MINION C.
		Officer in medical	charge of case.
I have satisfied myself of	the general accuracy	of this report, and o	oncur therewith,
exgept† 0	Also		
The Amend health o	001	11 1	Y
Station Mandemont In	1 alle	1 Torses Yo	ald .
Station J. S. W.		Officer in LA	The ortale on
Date / 10 · 1	_ 0/1	2011	A TONAL CONTRACTOR
· Loss of teeth on, or immediately after, active	service, should be attributed th	ereto, unless there is evidence	eneral storfulal
	other cause.	/	
i. 190		s to be made.	

13. What is his present condition?

Weight should be given in all cause thatteent had had uline to when it is theoly to agric widence of median nerves of the right arm injured, and the arm is useless

Opinion of the Medical Board.

Notes.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1913).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii) ordinary military prvice.

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

Active Service

21.	Has	the	disability	been	aggravated	by

- (a) Intemperance?
- (b) Misconduct ?
- 22. Is the disability permanent?
- 23. If not permanent, what is its probable minimum duration?
- To be stated in months.
- 24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

In defining the extent of his inability to earn a livelihood, estimate it at \(\frac{1}{4}\), \(\frac{1}{3}\), \(\frac{1}{4}\), or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable?

26. Do the Board recommend

Date

(a) Discharge as permanently unfit,

(b) Change to England?

Jes

Signatures :-

Sidney Martin Majo Melle A Deloward Col

tal at Fresent

Station Nation State.

Administrative Medical Officer.

Members.

Date 4 October 191

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Date of fina Board, or		Date of final disposal How finally disposed of S		Administrative M	edical Officer.

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 Commissioners of Chelsen Hospital.

Statement A should be completed in the Hospital as which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/o Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsees, London, S.W.

	uent to the date of	ACCOUNT.	Name of the last o			
Name in full Wardin	u / Alay	rhae	\mathcal{L}_{-}			
Regiment from which discharged /	I New for	ud	lau	4		
Regimental Number 14/88	, ,	-				
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Wife's Maiden name in full		- 1	` . ,			
Date and Place of Marriage						
Christian names of Children		1				
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0.4						
I declare that I and the soldier referr	ed to above, and	that all	the parti	culars contained in the a	bove St	atement
are, to the best of my howledge correct	and Wardi	us'.	/)		
(Soldier's Signature in full) Hall		(Ran	k) Ym	water		
- Alla di matt		Date	1	10.16		
I certify that the above-named sol	dier signed the fo	regolag			that th	ie above
description and details are to the best of	my knowledge, c	orreg	- M	//		
golf de de la conse	Nachita 0		164	Colity of 1 Med		fficer i'c
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Period of Service and in what Corps Disallowed Service towards Pension Dateinclusive to which pay has been issued Sums due on account of public debts	Regiment	Years	Sum d	India S. Africa ue on account		
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I certify that the above details of serv	rice and other particulars are, to the best of my knowledge, correct.
Station	Officer in Charge
Date	Records.
	FoveB

information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man fit for General Service.

No. 1488

Name (surname first) Mardini - Balkael

Regiment / Mardinia

1. State what special qualifications you have for employment in civil life.

Good knowledge of ordinary chrical work

2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed?

Worked for Father a. Wardini; Since leaving school a year ago.

3. What is the nature and locality of the employment you desire?

Uncertain, owing to right hand being of no use for writing.

4. What is the name of your Approved Society?

5. Have you been employed whilst with the Colours? If so, in what capacity?

WO.

Signature

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

LONDON, S.W. OCT 1 7 1916

WEDUNDLAND CONTING 58, VICTORIA ST.

Army Form D. 400A.

C 10

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 Commissioners of Chelsea Hospital.

Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital,

Chelsea, London, S.W. Changes occurring in the description subse			to pension	n should be noted in	red ink.	
		ghace.	1	V +	Y. J	
Regiment from which discharged	: News	omala	up			
Regimental Number 1488	. 0	0		. 9.	, ,	11-
Intended address	dones	6200	sin	J, Luv	forma	ing
			-	U		
Height on discharge 3	Feet	7 Inc	hes			
Colour of Hair on discharge	W. bonn	_/ _		of Eyes gr	ey .	
Figure on discharge	nedium		0010			
Christian name of Father	Inton	The same of the sa				_
Christian name of Mother	wenh			COPY SENT	ro	
Wife's Maiden name in full				, O.C.	H.Q.	
Date and Place of Marriage				STAJOHI	NS, N.F.L.D	
Christian names of Children				Mell	11/1/19	
Christian names of Christian	-			14.7 P.38. N	0.464	
					1 6 1917	-1
I declare that I am the soldier refer	rod to above	and that all	the part	DATED	- the above St	ator en
are, to the best of my knowledge, correct	t.	and that this	the part	Tourist Contained		
(Soldier's Signature in full)			. Dr	- 10	. And	
+			nk) PG	1/ . //-	apraec	
Station Words worth			te 3/10/		es dim	
I cortify that the above-named so	ldier signed th	he foregoing	declara	tion in my presen	ce, and that th	he abov
description and details are, to the best of	of my knowled	ge, correct.	1	10//	Z _{M-3:10}	æ
				1 1.00	- Medical O	HILLER U.
- 7.7 7 C	Figanital	_	.6.	Carl Park	//	
3rd London General	Hospital,		. 6.	Capo	H	Iospita
3rd London General WANDSWORTH	Hospital, , S.W.		Date	3/18/16	· H	
WANDSWORTH	Hospital,	Years	Date Days	3/18/16 AMService Abroad with	•	
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Station WANDSWORTH Period of Service and in what Corps Disallowed	Regiment		Sum d	India S. Africa ue on account	•	Iospita

I certify tha	t the above details of	service and other particulars are, to the best of my kno	wledge, correct.
Station .	Property and American		Officer in Charge
Date			Records.
, D u m			[OVER

Army Form B. 179.

Report on an Invalid.

3rd London General Hospital, WANDSWORTH, S.W. Station

1. Unit 1st Newfoundland

2. Regimental No. 1488

8. Rank

4. Name Nardini - R.

5. Age last birthday 20

on april 27 th 1915 at 81. Johns. Newfielid

7. Former Trade | blerk.

8. Disability.

S.S.W X. Rulnard media newes.

Statement of Case.

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

9. Date of origin of disability. 1/7/16

10. Place of origin of disability. France -

O.C. H,Q. ST./JOHNS, N.F.L.D. DATED FEB 1 6 1917

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. utt shjel damage do whoa, and lesens

(severe) of ulnar news and object of median

hene.

12. (a) Give your opinion as to the causa- Rcdwe Sem'ce tion of the disability.

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 8).

8.5. W

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability. Yell ann my	and median herves golde and the arm is
useless.	
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14. If the disability is an injury, was it caused	
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(b) On field service? 7	en de la comunidad de la completa del la completa de la completa del la completa de la completa del la completa de la completa de la completa del la complet
(e) On duty?	
(d) Off duty?	
injury? ************************************	
If so—(a) When?	
(b) Where?	
(c) Opinion?	
16. Was an operation performed? If so, what?	none
17. If not, was an operation advised and declined?	
18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?	
19. Do you recommend	
(a) Discharge as permanently unfit, or (b) charge to England?	· yes.
And the second second	- L. C. Colot Copo Brane
·	Officer in medical charge of case.
I have satisfied myself of the general except	neral accuracy of this report, and concur therewith,
3rd London General Hospi Station WANDSWORTH, S.W.	tal Mex Leve Gold
Date 1/10/16	Officer in cherge pfalla girli.
	ould be attrib Coundant State London vicence Honnian to some

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

Opinion of the Medical Board.

Notes.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

- (ii.) Expressions such as "may," "might," "probably," &c., should be avoided.
- (iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1918).
- (iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.
- (v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

leo

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Total at present

- (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.
 - (b) If due to one of these causes, to what specific conditions do the Board attribute it?

Shr.

21.	Has	the	disability	been	aggravated	by
-----	-----	-----	------------	------	------------	----

- (a) Intemperance?
- (b) Misconduct?
- (c) Any of the conditions mentioned in question 20, and if so, which?
- 22. Is the disability permanent?
- 23. If not permanent, what is its probable minimum duration?
- To be stated in months.
- 24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at prosent? the
- In defining the extent of his inability to earn a livelihood, estimate it at \(\frac{1}{4}\), \(\frac{1}{4}\), \(\frac{1}{4}\).
- 24A. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?
- 25. If an operation was advised and declined, was the refusal unreasonable?
- 26. Do the Board recommend
 - (a) Discharge as permanently unfit,

(b) Change to England?

Signatures:

3rd London General Hospital, WANDSWORTH, S.W. Date

Members.

Approved on General Hospital, Station_ WANDSWORTH, S.W.

Administrative Medical Officer.

Date_ Gel

	Date		State Control of the State Con	8 Of Bussole	/ Conveyan		
Transfer]	Station_			— Name	Vessel	ar Christian Agent	1015 SUPE
Empark-	Date			of	Office		A Service True
ation (F	ort	Brief remarks	on case during t	ransit, and state	on transfer for		
	(Da	.te			10 20 - 10 M	44	
Re-transfer	1103	pital or }				Officer in me	edical charge.
		(At Stat	ion or Hosp	oital where	finally disp	posed of.)	
Station and Hospital	}						
Arrived from	m			D :	ate		
If admitted		ment		Disease		How finally disposed of	Date of Discharge, &c.
Date	From	То			Street St.		
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Date of fina Board, or						e concurred i	6
Board, or	decisio	on)			Admi	nistrative Me	dical Officer.
Wr. W8530/2774 500M 9-15 M.&C.Ld. Forms B. 179. 84		Date of final disposal How finally disposed of	Hospital or Station transferred to for final disposal		Regimental No. 14 88 Rank Ple Name Nardini	Station Corps	

Sta Victoria

2/1st NEWFOUNDLAND REGIMENT.

	furth war unlikely to be fit for Service with the
Expeditionary Force for	months, on account of
G. S.W. NO	har 1 nedian
	herves
And the second s	•
• • • • • • • • • • • • • • • • • • •	·

I recommend that he be posted to the Depôt at St. John's, Newfoundland.

that Incapacity
5. 2.17

I|C. 2|1st Newfoundland Regt.

Temp a/c. Haphael Mardini Dato P.H.As. otc. Amount PAY Amount. Credit Balanco /// Dr.Dalanco Exchange Hospital. 191 From days. From days Tomp. a/c.

ALLOT

Nº 1435



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

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oncerned, viz. :	duction of the relative lucinity	Octinicates by the reison	or recomb
Identity Whether Wife, Child	<u> </u>		Amount
other Relative or Friend	NAME (in full)	Address	(each person)
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		Total Allotment, \$	

Officer Commanding

Company

NEWFOUNDLAND CONTINGENT (Substituting A.F.O 1325) N.F.P/Ka STATEMENT OF ACCOUNT OF NO. 1488 Pt. R. Mardine All CO. Embarked per S.S. Acandinavian (Dates inclusive) 4 Company. From Twalboll Date 16/1/1/ Classification (See procedure) DR. Draft No. Rate Dys & & £ s d Date Book Pay Book Col. Particulars Rato Dys Date Particulars Pav Forfeited Pay Field Allowances 10 28 2 80 Allotments Other Allowances 10 Total 9 \$4.86 2/3 /12 28 30 80 11/12 Total Stoppages 13 Fines Clothing & Necessaries Arms & Accoutrements Larrack Damages Lospital Stoppages Miscellaneous Stoppages Book 19 Casual Payments Casual Payments
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2nd " 27th 1917
3rd " 107th 1917 Final Balance Debit Last Period Due by Paymaster Balance Due to Paymaster Race Course ays CERTIFIED CORRECT.

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4/	i n e e e	21665	57	05				
			383	20	383	20	-0	

7/1921

Army Form B. 2088 has been issued to*

*Strike out if not applicable.

NEWFOUNDLAND CONTINGENT (Substituting A.F.Q-1325) N.F. P/Ka STATEMENT OF ACCOUNT OF No. 1488 Pts. R. Mardini Embarked per S.S. Scandinium. # Company. From 20/1/17 To 16/2/17 (Dates inclusive) From awallood Date 16 MIN. * FEB 1 6 1917. Classification (See procedure) DR. Draft No. Rate Dys & & Particulars Particulars Rato Dvs Date Forfeited Pav Pav 50 + 18 14 Field Allowances Allotments Other Allowances 10 Total 9 \$4.86 2/3 11/12 Total Stoppages 504 28 14 00 13 Fines Clothing & Necessaries 14 Arms & Accoutrements Larrack Damages Lospital Stoppages Miscellaneous Stoppages This account is in 178 accordance with information Casual Payments received at the Pay & Record Office to 16/2/14 and is therefore subject to amend-1st Payment 2nd ment if, and as may be found necessary. 3rd Final Balance Debit Last Period Balance Due to Paymaster Due by Paymaster Race-Course ays CERTIFIED CORRECT.

NEWFOUNDLAND CONTINGENT (Substituting A.F.Q-1325) N.F. P/Ka STATEMENT of ACCOUNT of No. 1488 Ptc. R. Mardini Embarked per S.S. Scandinium. From 20/1/17 To 16/2/17 (Dates inclusive) w The Company. From awallood Date 16/9/11. Classification (See procedure) Draft No. CR. DR. Particulars Pay Book Rato Dvs Rate Dys .2 Particulars Date Pay Forfeited Pav Field Allowances Allotments Other Allowances 10 Total 9 \$4.85 2/3 Total Stoppages 13 Fines Clothing & Necessaries Arms & Accoutrement Larrack Damages Lospital Stoppages Miscellaneous Stopi 178 Casual Payments 1st Payment 2nd 3rd Final Balance Debit Last Period Balance Due to Paymaster Due by Paymaster CORRECT. CERTIFIED

NEWFOUNDLAND CONTINGENT (Substituting A.F.O-1325) N.F. P/Ka STATEMENT of ACCOUNT of No. 1418 Ptc. R. Mardini Embarked per S.S. Scandinguan' H Company. From 20/1/17 To 16/2/17 (Dates inclusive) From awallood Date 16/111. * FEB 1 6 1917. Classification (See procedure) DR. Draft No. CR. Rate Dvs & Particulars Rato Dvs Particulars Date Forfeited Pav Pav 504 28 14 Field Allowances 64 Allotments Other Allowances 10 Total 9 \$4.85 2/3 Total Stoppages 11/12 14 00 13 Fines Clothing & Necessaries 14 Arms & Accoutrements 15 Larrack Damages Lospital Stoppages Miscellaneous Stoppages This account is in 178 accordance with information Casual Payments 19 received at the Pay & Record Office to 16 /2 /17 and is therefore subjout to amend-1st Payment 2nd ment if, and as may be found necessary. 3rd Final Balance Debit Last Period Balance Due to Paymaster Due by Paymaster 28 CERTIFIED CORRECT.

April 30,1919

#1488 Pte. Kaphiel Nardini.

Mardini Post Office.

Main River.

Bay st. George.

Dear Sir :-

Referring to your application I enclose cheque for Seventy dollars (\$70.00), being amount of first payment due you on accout of the "War Bervice Gratuity."

Paymaster & .i/c Records

.10988

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 beclaration there must be no blanks and no delines, 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
CONTRACTOR OF TOWNIS
Christian name. Haphiel2, Surname. Jandinu. 3. Rank. Stivata
3. Renk. X/WW. and to be
6. Address in full to which future payments of gratuity are to be forwarded. Marshiel Mardani. Marshie port office.
Main Diver Say St Grange mfs.
6. Date of enlistment in the Regiment. april 24th 1915
7. Name of dependent, if any, to whom Separation Allowance is being
or was being issued innedictely prior to your discharge
. Dra. Seperation allowance was baid to my person
8. Relationship of such dependents
9. Address in full of such dependents
as Mo . Auch pay was made my af.
10. Is said dependent, now, or was said dependent at my tire in receip!
of Separation Allowance on account of another soldier?
Il were you an active service only in Mfld, II so, give dates and
particulars of such service
not
12. Give total length of time which you served on active service,
whether in Hild. or Oversees. I formed Regiment (Noyal Me)
in april 2170 1915 answarouseharges 20 that essily from
be amdeh.

13. Have you had more than one enlistment? If so, give particulars
of discharge and re-culistments, and under what regimental numbers.
Only One Entestment as States

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 Northing herewas
15. Have you been issued with a War Service Badge? Med.
16. Have you, during the present war, served in the I perial Dorces. Mo
17. Are you entitled to receive, or have you received my Gratuity
in the nature of Post Discharge Pay from the Experial Forces? If
so, state mount received, or to which you are entitled. Nathring
. I Served saly in The Royal rife Regiment
18. Did you revert Oversees to a rank lower than the substantive
renk held by you on your arrival in England?
(b) If so was such reversion in consequence of hisconduct or
inefficiency? Not applicable
19. Are you now serving in the Rotte? . Man. In not give?- (:) date
of discharge Much 28. 1917(b) Rocson for discharge Counded
and Bronounced unfet for military Service
ye way a wife
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
Beaugant Hamel / 120
Seamount - Hamel (Monder there).
/ / / / / / / / / / / / / / / / / / / /
21.(a) Are you receiving treatment from the givil Re-Establishment
Con.(b) If so are you in receipt of full pay and allowences from that Cormittee
And I take this solum deeleration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if

Nº 1435



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

hereby a		CONTROL OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY AD	ilar official form to make an	
to and f			Persons, such payment to be m	
	tity of, and produ		ity Certificates by the Person	
Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	Address	AMOUNT (each person)
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1		matoun	Bay si Gent	12
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		es es estados e	Total Allotment,	50
NOTE.		Commanding Company and ha	ding Company, signed by the Volunded to the Paymaster as authorit	
(Sig.)			sig.) Raphael ?	Hardis
1	gra	ficer Commanding Company (1	Rank) Phi	<u>.</u>
	Office	12' 1915		

Son How ley

1 0 Department of Milita

1865 St Soms Jam Yein informed There's was Galuly Proney Que which & havent received amy yetwill you Rindly fend the the formed to fill out which I will fill out and returned you by first Mail and also The Poplale discharge Pay and Money and the for cloth Rindly O Hadge yours truly 1488/ P/E Kalph Nadinis Spiether Rough goorge

Mecember 31st, 1918

#1488 Pte.R.Nerdini.

Nardini's Crossing,

Bay St.George.

Dear Sir:-

Referring to your letter of December 20th., I beg to state that I have not yet been authorized to pay Sixty dollars (\$60.00) Clothing Allowance to men discharged previous to November 26th., 1918.

The matter is, I understend, under con--sideration at the present time, and if it should be allowed, I shell forward you cheque for the balance in due course.

Yours faithfully,

Paymester & Officer i/c Records.

Commanding Office April 3 hd 1917 Ufed Regiment, W. Johns, Den air I hereby desire to make application for the "Truperial Silver Was Badge for which I see holice to.
Then of all remks he The Trade Review. Jours Very Lruly No 1488 Trivele Raphael Mardini

Mardinio Chosenia

Misorley & Reinfoundland

DEPARTMENT OF MILITIA.

REGIMENTAL PAY BRANCH.

PAY VOUCHER.

	May 14 19 19
Received from the First	Newfoundland Regiment
the sum of ten	Too Dollars.

balance of Pay. Clothing

Ch. No. 98 Titules.

Pay Ledger 84 Initials.

Gen. Ledger. Initials.

Regtl. No.



Mo. 1488. Rank PV.
Mardin. R.

1977 Cardin May 9/19 Cept Im Howley bear Of Please let me Know for clothing, which is 45.00 Oas I was discharged in 1919 Hobligs Jaurstuly Ri. R Kardini Mardines ned J.C.R.

May 19, 1919

Pte. R. Nardini, Nardini's, Bay St. George.

I enclose herewith cheque for \$10.00, balance of Pay due you.

IM/ Enc. 1 Capt. Paymaster.

一声





Ist NEWFOUNDLAND REGIMENT

VOUCHER

Reg'l Ac	No	Na	ime	C.B	. Foli	No.	
Date	Req'n No.	Invoice No.	Particulars.			Amou	ı nt.
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Rece	ined	from	the 1st. NEWFOUNDLAND REC				
			Cents in Pay				



Ist NEWFOUNDLAND REGIMENT

VOUCHER

leg'l	Alc	No	Na	me	C.B.	Foli	o No.		
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Recap.	Sheet	No	331		How	le.	MASTEI	R	
			1	RECEIPT					
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Fift	een-						D	ollars	
and -				Cents in	n Payment	as al	ove st	ated.	
				1917	4	1	1		

Casualty Form-Active Service. Terms of Service (a)_ Service reckons from (a) Date of promotion Date of appointment) Numerical position on to lance rank to present rank roll of N.C.Os.FFR Extended _____ Qualification (b) Re-engaged Report Record of promotions, reductions, transfers, Remarks casualties, etc., during active service, as taken from Army Form B. 213, Army Form A. 36, or other reported on Army Form B. 213, Army Form Place Date From whom Date A. 36, or in other official documents. The received official documents. authority to be quoted in each case

Casualty Form-Active Service

		Casualty Porm-			
		Regiment or Corps New 188 Rank Ples N	foundle	and	6 1
	CP	1188	R	Nano	and a
Regim	ental. Vol.	Rank W	ame		
Enliste	ed (a) 4/4	Terms of Service (a)	Serv	ice reckon	s from (a)
Date of	of promotion resent rank	Date of appointment to lance rank	nt}	- Numeri roll o	cal position on }
Extend	ded	Re-engaged	Qualification	(b)	
	Report	Record of promotions, reductions, transfers,			Remarks
Date	From whom received	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	Date	taken from Army Form B. 213, Army Form A. 36, or other official documents.
,		Usembaker Marsens	3.4.	16	
		Admitto G.S. W. R. Am trans			
hmy		COPY SENT TO O.C. H.Q. ST JOHNS, N.F.L.D. MER38, No. J. L. J. DATED FEB 1 6 1917		Al FOR	CAPTAIN. O.IIC INFANTRY RECORDS G. H. Q.; 300 ECNELON

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Son [523] W13871/604	as Ltd., Printers, (400m 3/15x-1 9	Old Bailey, E.6 3 56	C. Form B. 12 89.	ī.	1st He	w foundland		Signature of O. C. Company	er of Sheet
No. H S Joined Join	Pardini Date NFL Date (NFL) Date	Napha Ofr 24	90/±-6/900200	(with Colours / 20/ years. Place	lerk.	Good Conduct Badges, Service Par COPY SENT TO OC. H.G STAN HNS.	2. N.F.L.P.	7 . 0.0	INS, N.F.L.D.
Place	Date of Offence	Rank	Cases of Drunk- enness,	OFFENCE	Names of Witnesses	Punishment awarded FEB 1	Date of award or of order maceusian with trial	By whom awarded	REMARKS
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				To be carried over			4 8		

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B 121.

No.	s Ltd., Printers, 6 8 800m 6/16x6 ental Number a	i, Kafi	had	Place and Date) (Atlant Relig	lerk	foundland Good Conduct Badges, Service Pa	y or Proficien	Signature of O. C. Company, oy Pay WARD CONTINUES OF VICTORIA ST. LONDON, S.W. FEB 1 6 1917	<u>XYBEmister.</u>
ned ,	Date Date Date Date Offence	, , , ,		(with Colours years. Phace	of Birth M. Baylo Georg Names of Witnesses		Date of award or of order dispensing with trial	By whom awarded	REMARKS
		The.	eaness,		,				*
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									<i>*</i> .
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	2						<u> </u>	V.	
XX			-	•					_
	1.								

Forms B. 178A

Take used only for Special Reserve Recruits, and for Special Reservists enlighing into the Regular Army

MEDICAL HISTORY

OF Christian Name

aphoet

Table I. - GENERAL TABLE.

(1) - [- 1] - [- 1	SPECIAL	RESERVE.	PROTES	
	SPECIAL	RESERVE.	REGULA	B ARMY.
xamined	on day of	191	on day of	191
**	at .		at	
eclared age	years	days	years	days
rade or occupation				
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easure. Range of expansion		inches		inches
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sion	L.E.—V.=		R.E.—V.= L.E.—V.=	
(a) Marks indicating congenital	(a)		(a)	
(a) Marks indicating congenital peculiarities or previous disease			tilly to	
	(6)		(0)	
(b) Slight defects but not sufficient				
(b) Slight defects but not sufficient to cause rejection				
Approved by (Signature)				
(Rank)		Medical Officer.	``	Medical Officer.
		Medical Officer.	`	Medical Officer.
(Rank)	1	Medical Officer.	at	Medical Officer.
	on day of	191	on day of	191
(Rank)	.			
(Rank)	on day of	191	on day of	191
(Rank)	on day of	191	en day oż Corps	191
(Rank)	on day of	191	on day of	191
(Rank)	on day of	191	en day oż Corps	191
(Rank)	on day of	191	en day oż Corps	191
(Rank)	on day of	191	en day oż Corps	191
(Rank)	on day of	191	en day oż Corps	191
(Rank)	on day of Corps "Afth Legt	191 Regu. No.	on day of Corps	191 Regit: No.

Table II.—Only for admissions to hospital or to the sick list in the case of Carrant Officers treated in quarters.									
Name of hospital	\$100 d (4)	dmitte hospit Month	i to al Year		harged from hospital Month Year	Disease	Number of days in hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admission is benefits will be shown. The subsequent progress, including particulars of treatment out of Phospial, bundless, do., will be given in the special syphilis case about	Signature of Medical Officer
Remended to Manufacture to	Ş	7	16			ISW St Ulnas or medias nerves	•	Board held - See presled Diability - 9. IN. of Mus! a media! nerves, causing his arm to be usule is. Cause - I. L.W. on active Service Notal hatcher for earning a livelihood at. phesent.	St. Bingley Capt of the C. S. Souson Several Rospital Wandworth Luc.
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					(1)			and the second	

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, &c.; Examination for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.

Date	Brief Delails, and Signature
	Sound held H10.16 Sound Permanenty Unfit Sound Approved 11.10.16 Sound Supposed 11.10.16
•	19 Toward Theworld Sul,

Table IV.—SERVICE TABLE.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation
				1	
1.					
400 400					

CERTIFICATE TO BE SIGNED BY THE SOLDIER ON DISCHARGE.

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date.

Place of andiris N. Nardinisig. of Soldier).

Date edinis 4 - M. Leitch (Big. of Witness).

:-:-:-:-:-:-:-:-:-:-:-:

NEWFOUNDLAND.

CLAIM FOR PENSION

PENSION No /20.

EUROPEAN WAR.

NOTICE:—This Certificate is to be completed and returned IMMEDIATELY you receive it or payment of your pension will be delayed.

Name in full	I hereby solem	ınly declare t	hat my name is	ORA of	appael
· · · · · · · · · · · · · · · · · · ·	. fas	dine	1 10 10 10 10 10 10 10 10 10 10 10 10 10		and that I was
Fill in rank and force	a (rank) A		(1st. Nfld. Reg.) (In N. R.) (In N. R.) (In from the Colon	U	
Fill in place giving full postal address	I am residing at (S	street and nu	nber) Mas	deris	X ing
	and request my nex	Haro	eque be sent to this		nark of Pensioner.
	It is only during MUST be complete		hs January and J	uly that the fo	llowing certificate
	This is to certi	fy that the f	oregoing declaration	on and signature	e (or mark) were
	made by the above		of aug		7, and I believe
To be signed by a Police. Magistrate or Notary Public or Justice of the Peace, or Clergyman,	him to be the perso	00	ina I	A Signat	
		1	Mosad Sland		or position.
		/6	arams	Postal	Address.
Add any Remarks					
		100			

Date_

Descriptive Return of a Soldier discharged on account of Disability.

The TRUE ONE.—This form is to be completed in the case of every disclared soldier whose claim to pension, on account of disability like to be submitted for the consideration to the Complete Heaville He

confirming this declaration. The "Rank," "Sta The Form will then be attached to the Pro- received by him, and will be forwarded by him Chelees, London, S.W. Changes occurring in the description subsec-				e Records wher Royal Hospital
A Name in full Wardinian Regiment from which discharged / Regimental Number /### Intended address Nardinia	Newfound		FEB 1 6 19	1) "
Height on discharge Colour of Hair on discharge Figure on discharge Christian name of Father Christian name of Mother Wife's Maiden name in full Date and Place of Marriage Christian names of Children I declare that I am the soldier rely are, to the best of my knowledge, owner (Soldier's Signature in full)	to frewere	that all the par	r of Eyes Isref	ve Statemen
Station Walland VIA I certify that the above-named soldescription and details age, to the best in a state of the state of	my knowledge, to	Date 3.	tion in my presence, and the	at the aboveal Officer i, Hospital
	Regiment	Years Days	All Service Abroad with Stations	cars Days
B Period of Service and in what Corps			India S. Africa	
Disallowed				4
Service towards Pension				
Dateinclusivetowhich payhasbeenissued Sums due on account of public debts			iue on account }	
Rank on Discharge Character (as on Certificate of disch Where born, and on what date Date and Place of first Enlistment Trade on Enlistment Cause of Discharge Number of G.C. Badges Wounds, and Actions in which recei		Medals		•
Other distinguishing marks	P -			
I certify that the above details of s	ervice and other p	articulars are, t	o the best of my knowledge,	correct.
Station			Offic	er in Charg

[OVER

2/1st NEWFOUNDLAND REGIMENT.

Ple nardi	ni R. furth war ly to be fit for Service with the
No. 1488 is unlike	ly to be fit for Service with the
Expeditionary Force for	months, on account of
9-5.W At	Ulnar 7
Median	
•	

I recommend that he be posted to the Depôt at St. John's, Newfoundland.

Flat Incapacity

Williamster

Gapt. R.A......

5. 2. 17

IC. 2|1st Newfoundland Regt.

Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man fit for General Service.

No. 1488 FEB 1 6 1917 Name (surname first) Nardini , Raphae Regiment / Newfoundland

1. State what special qualifications you have for employment in civil life.

Good knowledge of ordinary clinical work

State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed?

Worked for latter . a. Wardini, swee School a year ago

3. What is the nature and locality of the employment you desire?

Mucestain, owing to Light, hand being of no use for writing

4. What is the name of your Approved Society?

5. Have you been employed whilst with the Colours? If so, in what capacity?

Date 2. 10.11

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

NEWFOUNDLAND.

REPORT OF MEDICAL BOARD

ON SOLDIER OR NAVAL RESERVIST RETURNED FROM OVERSEAS

Station

L

ST. JOHN'S NFLD.

Date MARCH 14TH., 1917

No.

1488

Age 20

Height 5ft. 7"

Rank

PRIVATE

Complexion

NARDINI, RAPHAEL

Eyes GREY HairL. BROWN

1ST NFLD.) REGT.

Address NARDINI'S CROSSING

Former Trade CLERK

Enlisted at ST. JOHN'S NFLD.

on APRIL 27TH., 1915

Disease or disability G.S.W. X R. ULNAR AND MEDIAR NERVES

Present condition G.S.W. Right forearm. 2 cears of S.W. 4 3 & speration. Atm torearm three in appearance. Can move wrist officials well. Muscles of Land & themat much wasted. Cannot grap was any otherself. &

Estimated disability

40 %

Recommendation of Medical Board

Dischirge

Class

Members of Board

Approving Medical Officer.

Cleving Macpherson, Mijor.

Army Form B. 179. on an Invalid Medical Report Station Date s New boundland 5. Age last birthday 2. Regimental No 3 Rank 7. Former Trade { or Occupation { 4. Name 8. Disability. I Illuat & Média Merves Statement of Case. Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease. 1.7.16 9. Date of origin of disability. France 10. Place of origin of disability. 11. Give concisely the essential facts of the I SW. of Right forearme history of the disability, noting entries on the Medical History Sheet bearing on the case. with slight damage to alea, a lesion (severe) uluar nerve & slight of medias nerve. active Service (a) Give your opinion as to the causation of the disability. (b) If you consider it to have been caused by active service, climate, or ordinary military service, ex-plain the specific conditions to which you attribute it (See notes on page 3).

13. What is his present condition? Weight should be given in all cases when it is likely to afford evidence of fatient, has his always the progress of the disability.
medial nerves of the right arm injured
and the arm is useless.
14. If the disability is an injury, was it caused
(a) In action?
(b) On field service?
(c) On duty ?
(d) Off duty?
15. Was a Court of Inquiry held on the injury?
If so—(a) When ?
(b) Where?
(c) Opinion?
16. Was an operation performed? If so, Nove
17. If not, was an operation advised and declined?
18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly attributable to active service?
19. Do you recommend
(a) Discharge as permanently unfit,
(b) Change to England?
See a.
L'Cleleste Capt Salve CS.
Officer in medical charge of case. Yhave satisfied myself of the general accuracy of this report, and concur therewith,
Station Wandworth In. Albeakarce Gould
Date 1.10.16 Officer if one for the or first.
Loss of teeth on, or immediately after, active service, should be attributed thereto, britishers is evidenthan it is in a
† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

Notes.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

- (iii) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1913).
- (iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.
- (v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.
- (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii) ordinary military service.

active Service,

	to what specific conditions do the Board attribute it?
	21. Has the disability been aggravated by
	(a) Intemperance?
	(b) Misconduct?
	22. Is the disability permanent?
	23. If not permanent, what is its probable minimum duration?
	To be stated in months.
	24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?
	In defining the extent of his inability to earn a livelihood, estimate it at \$\frac{1}{4}\$, \$\frac{1}{2}\$, or total incapacity.
	25. If an operation was advised and declined, was the refusal unreasonable?
	26. Do the Board recommend
	(a) Discharge as permanently unfit,
	(b) Change to England (
gr <u>e</u> to	uden heneral hospital Sidney Martin May Ad M. C. President.
	Station Wandswork Sw. 1. FWelhered Capt All Members.
	Date 4. 10. 16 A. Howard, CS.
	Station Wandsworth Sul, Sidney Wartin Major fale C.
	Date 4 October 1916 Administrative Medical Officer.

(On leaving Corps or Station where invalided.)

Transfer (Date		leaving Con		Conveyance		<u> </u>	
	Station_			Name	Vessel		12 (24 M) A	
Embark-	Date			of	Officer i	n)		
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Re-transfer	$\operatorname{red}_{\operatorname{Hom}}^{\operatorname{Dat}}$	oital or }				entral distribution	2007 E	
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		(At Sto	ation or Ho	spital where fi	nally dispose	ed of.)	r	
Station and Hospital	}							
Arrived from				Da	te		and the state of	
If admitted	If w					1.44	1 2 4 5 3 9 kg 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Date	From	To		Disease		ow finally sposed of	Date of Discharge, &c.	
	***						Helasificació de la	
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Date of fina Board, or	l Medica decision	al } ·	\(\)	uestions 22, 23	Adminis	strative M	edical Officer.	
English St. 179. Wh. 1896 4752 5-15 W B & L Forms 179. St. 179.	The original Report is invariably to accompany the	disposal } How finally disposed of }	Hospital or Station \ transferred to for \ final disposal Data of final \	Disability Italy of Water of medical of Date H. 10.16	Regimental No. 1488	Station Ly Mourtum Man A	MEDICAL REPORT ON AN INVALID.	

To be use f(a) for recruits enlisting direct into the Regular Army and (b) for member the Territorial Force when they are admitted to Hospital.

Army Form B, 1784 to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Mardini	Christian NameRay	thack.
	TABLE I.—GENERAL TABLE.	
Birthplace Parish_//	lewfoundland County	
Examined	on 96 day of April.	191 చ
Declared Age		days. 🔩
Trade or occupation	Clerk.	
Height		inches.
Weight	/3	12lbs.
Chest Girth when fully Expanded Measurement Range of Expansion	35	inches.
Physical Development		THOUSE THE PARTY OF THE PARTY O
Vaccination Arm	Right	Left
When Vaccinated	here	
Vision	R.EV= 6	
(a) Marks indicating congenital peculiarities or previous disease	{(a)	
(b) Slight defects but not sufficient to cause rejection		
Approved by (Signature)	Fred W. Burde	
(Rank)	Lieut	Medical Officer.
	11 00	in the second of the second
Enlisted	on 24 th day of April	L. 1915
Joined on Enlistment	Newfld Rgr	Re n'. No.
Transferred to		
Became non-effective by		
	onday of	191
(Signature) (Rank)	Control of the contro	- p'
,5506) W. 14971/M. 89. 750m. 1/16.	C. P., Ltd. Forms B. 178	P.T.O.

Table II.—Only for Admissions to Hospital or to the Sic

Name of Hosp		Admitted to Hospital		Discharged from Hospital		from l	Disease	Number of days	R
Name of Hosp	Day	Month	Year	Day	Month	Year		in Hospital	
don Gen Hay	6. 5	7	16.				ISW. At What + median herver.	•	
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engistas de la companiona warming a section of the land of the state of the section of the s List in the care of Warrant Officers treated in quarters. marks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future uses. 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 Board held - See overleaf. F.S.W. TH. What I mem to Syr. EH Burgly capthame. J. S.W. Pt. What & median (nability be uneless. G.S. W on active Service. Inabelity for earning a livelihor at present ordence only of Partial laying to What 27.12.16 Much of hand & fingers

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

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ne 7	Second	•	1000		
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-	Tr	able IV.—S	ervice Table.		
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Station or Troopship	Date of arrival or	Date of departure or		Date of arrival or	Date of departure or
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4 old	Date of arrival or	Date of departure or		Date of arrival or	Date of departure or
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~nfld.	Date of arrival or embarkation	Date of departure or disembarkation		Date of arrival or embarkation	Date of departure or disembarkatio
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