



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4001 Name Alfred White Corps 1st Lt.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. |
| 2. What is your full Address? | 2. |
| 3. Are you a British Subject? | 3. |
| 4. What is your age? | 4. <u>21</u> Years <u>1</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Postman</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... | 10. { Name |
| | { Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes</u> |

I, Alfred White 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.

SIGNATURE OF RECRUIT.

Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Alfred White 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..... on this..... day of..... 191

Signature of Attesting Officer

†CERTIFICATE OF APPROVING OFFICER.

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

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

Date..... 191

Place.....

} 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 Alfred Noble

Apparent age 31 years 1 months. Height 5 feet 5 inches

Chest Measurement { Girth when fully expanded 37 1/2 inches
 Range of expansion 3 1/2 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Alfred W. Marshall
Springdale, N.D. Hwy. | Relationship Wife

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 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 _____									
Joined at _____ on _____									
Total Service forfeited as above.....									

Total Service towards Engagement to _____ [date of discharge] _____ years _____ days

" " Pensions " _____ [" "] " _____ "

4041



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4041 Name Albert Wohl Corps S.A.

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Albert Wohl
2. What is your full Address? 2. Springdale N.D. Bay.
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 21 Years 1 Months
5. What is your Trade or Calling? 5. Seaman
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

I, Albert Wohl 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.

41 31-10-17 SIGNATURE OF RECRUIT.
R. H. P. Bell Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Albert Wohl 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 31 day of Oct. 1917
 Signature of Attesting Officer W. H. P. Bell

†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 Oct. 31 1917 } Approving Officer.
 Place St. John's

† 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 Albert Noble
 Apparent age 21 years 1 months. Height 55 feet 5 inches
 Chest Measurement { Girth when fully expanded 37 1/2 inches
 Range of expansion 3 1/2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Elizabeth Marshall
Springdale N.D. Bay. | Relationship Mother

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>31-10-17</u>									
Joined at <u>St John's</u> on <u>October 31-17.</u>									
<u>Embarked April 12/1919</u>									
<u>Embarked St. John's N.S. Massachusetts 11-12-17.</u>									<u>Admitted 3 Scotland General Hosp. Hobart Glasgow. 31-12-17.</u>
<u>Embarked for R.C.F. 25 7/8. Overland 29 9/8</u>									
<u>Admitted 3 Gen. Hosp. Boulton 4th Div. Wash. 30-9-18</u>									<u>Admitted 3 London General Hospital 2-10-18.</u>
<u>Furlough from post to Winchester 22-11-18</u>									
<u>Embarked for discharge 30 '19</u>									<u>Arrive Newfoundland 7-2-1919</u>
<u>Demobilization St. John's 12-4-19</u>									

Total Service forfeited as above.....

Total Service towards Engagement to 12-4-19 [date of discharge] 1 years 164 days
 " " Pensions " " " " " " " " " " " "

C.R.

No. 4041 Name *Plé Noble, A.*

Sqn., Batty.,
or Company

B

Corps *Royal Newfold*

Date of
enlistment

31.10.18

O.C.
Badges

Service or
Proficiency Pay

Date of last entry in
Company Conduct Sheet

No. and date
of last drunk

Period not reckoning towards
freedom from extra fine

Sheet No.

Signature O.C.
Company, etc.

J. M. Curran Capt.

Character

Army Form B. 123.

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
									<i>10th 29/12/18</i>
									<i>Conf</i>
									<i>7/18</i>

C.R.

4041

Extract of Daily Orders Part II Royal Newfoundland Regiment.
Depot St. John's dated April 24th/19.

The discharge of the undernoted on Demobilization has been
CONFIRMED by Officer i/c Records from noted date.

4041 Pte. Albert Noble.

12/4/19.

C.R. 4041

Extract of Daily Orders Part II Royal Newfoundland
Regiment Depot St. John's dated March 31st/19.

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

#4041 Pte. Thos. Noble.

29/3/19.

C.R. 4041

Extract from Daily Orders part II, by Lieut. Col.. B.J. BARTON
D. S. O. Officer Commanding 2nd., Battalion dated 23-11-18.

4041 Pte. A. NOBLE.

The a/m having reported back from the 1st. Battalion is
taken on the strength and posted to "H" Co. as from 22-11-18.

C.R. 4041

Extract from Daily Orders War Office Unit The Royal Rifle
Regt. St. John's, 11-3-19.

The undersigned returned from Overseas and reported to
Depot 7-24-19.

Repatriated on A.F. 2179.

4041 Pte, Albert Noble.

C.R. 4041

Extract from Nominal Roll of the Royal Nfld. Regt.
Embarked S.S. Corsican, Jan. 30, 1919.

4041 Noble.

C.R. 4041

Extract from Casualties from Pay & Record Office, London,
dated/4th. Nov. 1918.

The undermentioned was discharged from the 3rd London General
Hospital on 18/11/18 and granted furlough to 22/11/18. ~~All are~~ marked
Fit for 1 Duty

4041 Pte. A. Noble.

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

C.R. 4041

Extract from War Office List. No. C. 1716 dated 16-10-18.

&&

4041 Pte. A. Noble.

WOUNDED 29-9-18.

BC.

C.R. 4041

Oct 16th, 1918

Mrs. Eliza Marshall
Springdale

Dear Madam:-

I have to inform you that additional information concerning No. 4041, Private Albert Noble, has been received through the Visiting Committee of the Newfoundland War Contingent Association, to the effect that he is now progressing favourably.

Yours faithfully,

Lient. Col.,

Chief Staff Officer.

C.R. 4041
Counter No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

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

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

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

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

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

(NOT TRANSMITTED)

Signature of Sender _____ Address _____ Dept of _____

Line Number	Rcd	By	Sent	by	Check

Dated Oct 5th, 1918

To Eliza Marshall, Springdale, N.D.B.

Regret to inform you that Record Office, London, officially reports No. 4041, Private Albert Noble at 3rd London General Hospital Wandsworth suffering from G.S.W. right shoulder

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

J. P. Bennett

Minister of Militia.

FOR TYPEWRITER

C.R. 4041

Extract from Casualties from Psy & Record Office,
London,

Admitted 3rd London General Hospital, 2-10-18.

4041 Pte. A. Noble.

G.S.W. R. Shoulder.

MM.

R. 4041

Extract of Telegram received from Synoptical London,
dated January 4th, 1918.

#4041 Pte. Noble. ✓

Suffering from

Mumps. Admitted 3rd Scottish General Hospital,
Glasgow from "Missenabie" December 31, 1917.

C.R. 4041

Extract from Wounded and Sick H.C.Os. and Men of the Expeditionary Force -
France, dated 3rd. October 1918.

List No: H.A. 29678.

4041 Pte. A. Noble

1/Royal Newfoundland Regiment..... G.S.W. R.Arm..... Adm. 3rd Can.
Gen. Hes. Boulogne 30th. Sept. 1918.

C.R.

4041

Extract from Casualties from Pay and Record Office
dated 4th., January, 1918.

Admitted

To 3rd., ^{Scottish} ~~London~~ General Hospital, Stobhill, Glasgow
31/12/17.

#4041 Pte. A . Noble.

The above mentioned was admitted from H.M.T. "missanable"
on arrival at Glasgow Docks. 31/12/17.

MUMPS

AUTHORITY: * A.F.W. 3026A.

C.R. 4041

Extract of Nominal Roll Draft (All Ranks) to 1st
Bn. B.E.F. Embarked Folkestone 2

4041 Pte. A.Noble.

. 25-5-18.

C.R. 4041

NEWFOUNDLAND CONTINGENT.

Extract of Nominal Roll of Draft No. 46, - 180 Other Ranks from 2nd., Bn., Depot
Winchester, to 1st. Batin., The Royal Newfoundland Regiment, B.S.F. Embarked
Folkestone 23/3/18.

4041 Pte. A. Noble.

A.Ps. B. 103 (one
for each soldier)
sent to 3rd. Echelon
B.S.F.

C.R. 4041

Extract from Menial Roll Embarked St. John's for Overseas,
per S.S. "Florissel" Dec. 11, 1917.

#4041 PTE. A. MOBLE.

C.R. 4041

Extract from Daily Orders Part II Unit The Royal Hfld.
Regt., St. John's, Nov. Oct. 31st, 1917.

4041 Pte. A. Noble.

Attested for General Service with the Hfld. Regt., with
effect from Oct. 31st, 1917.

Hobb, A.

C.R. 4041

P.F.R. O.



1st. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, V Noble, Regl. No. 4041

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and 25 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 Nov 1st 1917

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3081	Mother	Mr (Jas Eliza)	Lewis Hall Springdale H. St. J.	60
			Total Allotment, \$	60

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.) W. M. Lawley
Officer Commanding
J. P. Lewis Company
9-11-1917

(Sig.) V Noble
(Rank) Sgt
Walter S. Pollock



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, J Noble, Regl. No. 40111

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and 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 Wed 15/11/11

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>3081</u>	<u>mother in law</u>	<u>Etha Jones</u>	<u>Ladbrough</u>	<u>60</u>
			<u>Hampden</u>	
			<u>St John's</u>	
Total Allotment, \$				<u>60</u>

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
Company
9-11-11

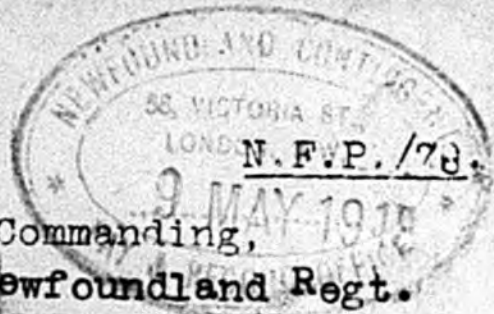
(Sig.) [Signature]
(Rank) [Rank]

Np. 6896/543

C

038367

NEWFOUNDLAND CONTINGENT



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

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

Subject: 4th May 1918

May 8th 1918

Subject: 4041, Pte. A. Noble,

With reference to the following telegram (3922) from the Hon. Minister of Militia, received 1/5/18

Pay to 4041 Noble £4:19:0

Draft £4:10:0 is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

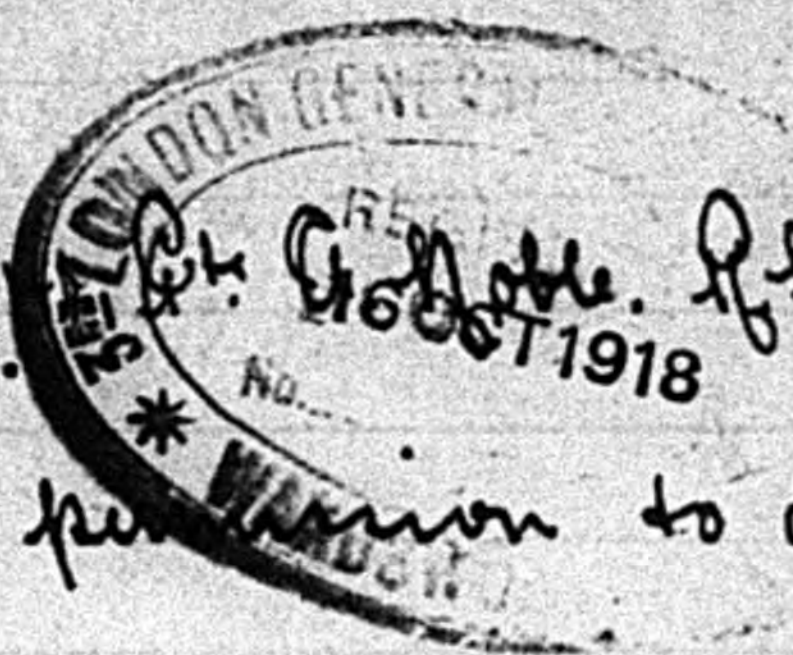
J. A. Anderson

Chief Paymaster & O. i/c Records.

Receipt hereunder.
Cham
LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
1st Newfoundland Regiment

Received the sum of four
four pounds ten shillings on account of
cable remittance from Newfoundland.

A. Noble his witness
No H041 Rank Rh



No. 40

Mr. G. Noble. R.F.C.W.
1600

It is permitted to draw

the sum of £1. (one pound)

please. OK for £1.00

16.10.18

Approved
W. J. Wilson

Received
4195

BRANCH	W. J. Wilson
INITIALS	P. J. J.

gistra R.A.M.
S. W.

3rd London

Wandsworth

To the Paymaster

4041 Pt of

Permission to draw

one pound on account



Handwritten notes on the left side, including "18/10/18" and "1918".

Approved

9227

Registrar
 BRANCH
 INITIALS
 M. J. P. L. P.

3rd London General Hospital
Wandsworth, S.W.

ST. GEORGE'S GENERAL HOSPITAL
8 - NOV 1918
WANDSWORTH, S.W. 18.

OK F. 1-0-0
Receipt 9364
7/11/18 C.W.B.

Chief Paymaster & Officer
R.N.F. I.D. Regt
58 Victoria Street
London S.W. 1

Please remit to 4041 A. Noble Pte
the sum of (one pound) £1 On account
of any balance that may be due to me

~~KA~~
7/11/18

4041 Pte A. Noble
R.N.F.I.D. Regt

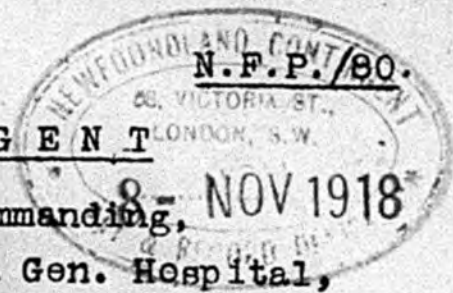
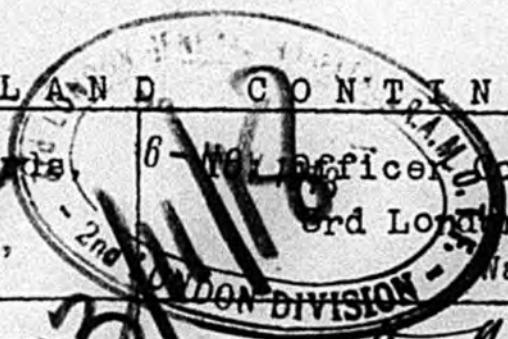
Approved
[Signature]
P. J. L.

Greater

No. 17861/353

From: NEWFOUNDLAND CONTINGENT

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



6 NOV 1918
Officer Commanding,
3rd London Gen. Hospital,
Wandsworth,

4th November 1918

6th November 1918

Subject: 1041, Pte. A. Noble,

ANSWER.

With reference to the following telegram (9442) from the Hon. Minister of Militia, received

Pay to 1041 Noble £2:0:0

Kindly advise whether this amount should be remitted to you for payment to this Soldier, retained to credit of his account, or otherwise dealt with.

A. A. Minwell
Chief Paymaster & O. i/c Records.

Kindly place this remittance to credit of Pte Noble's a/c.

W. H. ...
for O.C.

3rd LONDON GENERAL HOSPITAL,
WANDSWORTH, S. W.

pay
WESTERN UNION
ANGLO-AMERICAN  DIRECT UNITED STATES
CABLEGRAM

Prefix _____		Code _____		At _____		FOR STAMPS	
WORDS	CHARGE	To _____	By _____	THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.			
150	2 1/4	VIA WESTERN UNION					

17/10/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To EFM MRS JAMES MARSHALL

SPRINGDALE NOTREDAMEBAY (Newfoundland)

CABLE SEVEN POUNDS THROUGH MINISTER MILITIA IMMEDIATELY

4041 NOBLE

Charge/c →

30 1/2
27 1/2

27 1/2

CHARGED
PAY LEDGER
Date *2-4/10/18* by *N.R.*

CHECKED.
2.4-10/18

Authorised.

NOT TO BE TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature _____

Address _____

58 Victoria St. S.W. 1.

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

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

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

Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

T + T Right Shoulder

11. Date of origin of disability.
12. Place of origin of disability.
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

*T + T wound healed
No Disability*

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? }

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.)

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

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

Refusal
Hobbs

ROYAL NEWFOUNDLAND REG.

Medical Officer in charge of case.

Station

Date

* 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.

Kobbe, A

4041

Ray sept.

April 12, 1919

#4041 Pte. Albert Noble,

Springdale,

Willingate Dist.

Dear Sir :-

Please find enclosed "Discharge Certificate
No. 1859."

Yours truly

Captain,
Paymaster & U.I.C. Records

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4041 Rank Pte Name Albert Noble
 Intended place of residence Springdale, Twillingate
 2. Occupation Fisherman
 Classification of soldier E Medical Category A.I.

3. The above named man is discharged in consequence of DEMOBILIZATION

Eligible for War Service Gratuity

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.
 Place ST. JOHN'S
 Date MAR 27 1919
H. Mrs. [unclear]
 Comanding 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.
SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT
 Place and date ST. JOHN'S
27-3-19
Albert Noble
 Signature of soldier
J. A. [unclear]
 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
27-3-19
Albert Noble
 Signature of soldier
E. [unclear] Agt.
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 31-10-17 No of days on Military
 Discharged from service 29-3-19 plus 14 day Service 529

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
 Date MAR 29 1919
R. H. [unclear]
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place St John's Nfld
 Date April 12/1919
[Signature]
 Officer i/c Records
 The Royal Newfoundland Regiment

C.F.B. 597/1819

31
31
31
28
31
12
164

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

MEDICAL HISTORY


Surname Noble OF Christian Name Albert

Table I.—GENERAL TABLE.

Birthplace:—Parish Springdale N.S. Bay. County Nfld

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	at	on	at
Examined	on <u>21st</u> day of <u>Oct</u> 191 <u>7</u>	at <u>St. Johns</u>	on	day of 191
Declared Age	<u>21</u> years	<u>1</u> Year	years	days
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet	<u>5</u> inches	feet	inches
Weight		<u>134</u> lbs.		lbs.
Chest Measure-ment	Girth when fully expanded....			inches
	<u>37 1/2</u> inches			inches
Physical Development	Range of Expansion..			inches
	<u>3 1/2</u>			inches
Vaccination Marks	Right	Left	Right	Left
	<u>/</u>	<u>1 Seal</u>		
When Vaccinated				
Vision	R.E.—V= <u>6/2</u>	L.E.—V= <u>6/2</u>	R.E.—V=	L.E.—V=
	<u>36</u>			
(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>Laminé Paterson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St. Johns</u>	at		
	on <u>31</u> day of <u>Oct</u> 191 <u>7</u>	on	day of	191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
Transferred to	<u>ROYAL NEWFOUNDLAND REGIMENT.</u>			
Became non-effective by	on	day of	191	on
	day of	191	on	day of
[Signature]				
[Rank]				

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In case of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3rd SCOTTISH GENERAL	31	12	14	4	2	18	28 Mumps.	36	Admitted direct to Civil Isolation Hosp. Belvidere Glasgow from H. & T. "Missanabie" on 31-12-14 to nylon unit.	R. Ernest Donlin Capt Ramey
 3 MAR 1918				23	3	18	Measles	20	Recount. Discharged to duty	H. G. Lawton Capt Ramey
3rd LONDON GENERAL HOSPITAL WANDSWORTH	2	10	18	13	11	18	CSW. Rt Shoulder	22	CSW. Rt. Shoulder (T+T) no injury to important structures	S. Thompson Capt Ramey

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4041 Rank Pte Name Albert Noble
 Date of Enlistment 31-10-17 Address Springdale District Lewisporte
 Occupation Fisherman Classification for Discharge F Medical Category A 2
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	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 26-3-19

H. M. H.
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Albert X Noble
Mark

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$165.00

(b) Clothing Supplied Overseas Call

Date 27-3-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 6011 G 472 to his home Springdale and Release Certificate No. 1803 issued.

Date 27.3.19 [Signature]
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 12-4-19

Date 27-3-19 [Signature]
Depot Paymaster.
SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT.

Discharge approved for 29.3.19
Forwarded with following documents to O.C Discharge Depot.

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

Date 27.3.19 [Signature]
Demobilization Officer.

APPROVED.

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

Eligible for War Service Gratuity

Date MAR 29 1919 [Signature]
O. C. Discharge Depot.

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

May 9th., 1919

#4041 Pte. Albert Noble,
Springdale, B.S.B.

Dear Sir:-

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

Yours truly

Paymaster & O.I/c Records

Captain.

15700

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 question are not applicable, the words "NOT APPLICABLE" must be written out.

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

Christian name *Albert* 2. Surname *Wolfe*

3. Rank *Cpl* 4. Regtl. No. *4041*

5. Address in full to which future payments of gratuity are to be forwarded. *Springdale, Notre Dame Bay*

6. Date of enlistment in the Regiment. *October 31 1917*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. *No*

8. Relationship of such dependents. _____

9. Address in full of such dependent. _____

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *No*

11. Were you on active service only in Nfld. If so, give dates, and particulars of such service. *Overseas*

12. Give total length of time which you served on active service, whether in Nfld. or Overseas. *From October 1917 to March 27/19 date of temporary discharge*

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.....
.....
.....
.....
.....
.....
.....
.....
.....

Clothing allowance

Board allowance

\$ 60 —
374.96
391.36
No

15. Have you been issued with a War Service Badge?.....
.....
.....
16. Have you, during the present war, served in the Imperial Forces.....
17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.....
.....

No

No

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?.....
.....
(b). If so, was such reversion in consequence of misconduct or inefficiency?.....

No

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

*ant 17/19
Mar. 27/19
Temporary*

*No
Delegation*

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 - from March 1918
to Sept 1918. Effres,*

21. (a) Are you receiving treatment from the Civil Re-Establishment Com.?
(b). If so, are you in receipt of full pay and allowances from that Committee.....
.....
.....
.....
.....
.....
.....

No

No

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.

his

Signature of Applicant:

Albert X Noble
Mark

Place of Residence:

Springdale Notre Dame Bay

Declared before me at:

A. John's, Ufld

This

27th

day of

March 1919

John McCaffrey

Signature of Barrister of the
Supreme Court, Stipendiary Magistrate,
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
.....	James	280 00
.....
.....

James

280 00

Certified Correct.

Paymaster.

2

The Royal Newfoundland Regiment

Class for Demobilization: 7c

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 25.3.19

Regimental No. 4041

Name Albert Noble

Address Springdale 1013

Present Medical Category A1

Recommended for:— (a) Immediate discharge
(b) ~~Standing Medical Board~~

Members of Board { R. H. East Capt.
O.C. Discharge Depot.
J. Paterson
Senior Medical Officer
D. W. Burdett
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

Discharged *Wt*
Albert Noble Robinson
made Signature of Man.

Charles C. Call

Signature of the Vocational Officer or his Representative.

Reg. No. *4041*

Place *St Johns*

Date *27-3-19* 191

Confidential Information

For the use of the Civil Re-establishment Committee.

Report No.	Class	No. of C.R.C. File	No. of H. Q. File
------------	-------	-----------------------	----------------------

Name..... Hoble Albert No. 4041 Rank..... Pl. R. N. R. or Regiment.....

Home Address..... Springdale, Thollungal Address.....

Age 22 Height 5 ft. 5 ins. Complexion Fair Eyes Brown Hair Brown Character.....

Date of enlistment..... 31-10-17 Where enlisted..... ST. JOHN'S Where seen service..... France

Ship returned by..... Corsican Date of return..... 7-2-19 How Long..... 1 yr 5 mos.

Birthplace..... Springdale Date of discharge..... 29-3-19 Religion..... S. A.

Name and address next of kin..... Father Mother Mrs Jas Marshall Springdal
Thollungal

Cause of disability.....

Condition which prevents the soldier from earning a full livelihood.....

Degree of incapacity (Please state in fractions) Eng. Board..... Newfoundland Board.....

Probable duration of incapacity.....

Is final disability likely to prevent return to previous occupation?.....

Recommendation of Newfoundland Board.....

Members of Board.....

INFORMATION TO BE FURNISHED BY SAILOR OR SOLDIER.

DEPENDENTS	NAME	AGE	WHERE-IF EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1					
2					
3					
4					
5					

Occupation prior to enlistment..... Fisherman

Regular trade or profession.....

Average earnings previous to enlistment..... \$ 3.00 yr. Any other income.....

Name and address of last employer..... Self

If in receipt of sick benefits or other insurance—name of society..... Amt. per mo. \$.....

At what age left school?..... 4 yr. What grade, standard, &c., was he in?.....

Has he had any further education since leaving school, if so what?.....

Whether given Vocational Training while in Hospital in England. If so, what subjects?.....

If unable to follow previous occupation, name preference.....

References.....

Witness..... E. Wilex Sgt. I declare that the above statement is correct.

Date..... 27-3-19 Signature..... Albert X Hoble
Maak.

Recommendation by Interviewer as to classes likely to be of use, and general remarks:

PENSION—Class..... Amount per month, \$..... Period granted for..... Dating from.....

First Payment date.....



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. J. 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 *Albert Lobley*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4041*

Intended address *Springdale C.B.*

Height on discharge *5 Feet 5*

Color of hair on discharge *Dark Brown*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks *Scar Right Shoulder*

Figure on discharge *Medium*

Christian name of Father *—*

Christian name of Mother *Elyia*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Salt Lake 29-10-1896*

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) *Albert X Lobley* *He*
mark (Rank)

Station **ST. JOHN'S.** Date *24-3-19*
Walter McDonald

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

Station _____ Date _____



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

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

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

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

Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

Right Shoulder.

11. Date of origin of disability.
12. Place of origin of disability.
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

Two wounds healed. He complains of no disability.

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? }

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.)

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

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

Rehabilitator
W. J. ...
 ROYAL NEWFOUNDLAND REG.

Station ..
 Date ..

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

Army Form B. 103.

Regimental Number *40.F.F.I.*

Casualty Form - Active Service.

Regiment or Corps *21. Royal Newfoundland*

Rank *Lie* Surname *Noble* Christian Name *Albert*

Religion *S.A.* Age on Enlistment *21* years *1* months

Enlisted (a) *31. 10. 17* Terms of Service (a) *Duration* Service reckons from (a) *31. 10. 17*

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

Extended { } Re-engaged { } Qualification (b)
or Corps Trade and rate

Occupation *Fisherman* *J. M. Cullison* Signature of Officer



Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked	<i>25-5-18</i>		
		Disembarked	<i>27-5-18</i>		
		Joined Battalion	<i>31-5-18</i>		
		Wounded in Action	<i>29-9-18</i>		
	<i>36 CCS</i>	<i>Wounded</i>	<i>- " -</i>	<i>8.2.1917</i>	
	<i>36 CCS</i>	<i>As Capt R. Thom</i>	<i>Calaque</i>	<i>30/9/18</i>	<i>FA 29678</i>
	<i>36 CCS</i>	<i>Transferred to England as 36 CCS</i>	<i>Calaque</i>	<i>2/10/18</i>	<i>Ed 30823</i>
		<i>(Dover House)</i>	<i>O 1/2 No 1 Infantry Section,</i>		<i>Calaque</i>
			<i>3rd Echelon, G.H.Q., B.E.F.</i>		

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) Signaller, Shoeing-Smith, &c.
W 2225 312731-20-000 217 (2661), C. P. & S., Ltd., Form B.103 5/1907. P.T.O.



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, A Noble, Regl. No. 4041,

hereby agree, until further notification by me, and in similar official form to make an Allotment of 2 Dollars and 50 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 Nov. 1st / 17

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3081	Mother	Mrs (Jas Eliza)	Hans Lall	60
			Springdale H. S. C. Bay	
Total Allotment, \$				60

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.) Whaley Jr
 Officer Commanding
 Company
J. J. Jones
 9-11-1917

(Sig.) A Noble
 (Rank) Private
William Richard

Springdale Jan 17 1919

Hon J R Bennett

* Dept of Militia ³⁷⁷⁵

Dear Sirs

I wish to inform you that I did not get my allotment for December from (4040) pts about Noble Will you kindly see to the matter and write me accordingly

Yours truly Mrs James Marshall
(Mother)

Cheques for Nov & Dec sent to the above address

LC

ST. JOHN'S, Mar 29th /19

Royal Newfoundland Regiment.

Billeting Account,

To H. A. Noble

Billeting Soldiers as undermentioned

from Feb 18th /19 to Mar 29th /19

4041. H. A. Noble 39 30

A.C.S.

ACCOUNT	<u>Btm</u>
OH NO	<u>14573</u>
INITIALS	<u>EW</u>
DATE	<u>30</u>
BY	<u>[Signature]</u>

Certified correct for \$ 39 30

R.S.
J. A. Lawrence
Billeting Officer.
[Signature]
[Signature]

Trans. Rec

ACC	
CH. NO	<i>19213</i>
IND. LEDGER	
PAY LEDGER	
GEN. LEDGER	

April 30th. 1919

The Department of Militia,

The sum of Fifty Dollars \$ ²⁵ ~~50~~.00 is due

Mr George Neble, Springdale-East, N.D.B. for driving 4041 Pte.

~~A. Neble & 2102 Pte. H. Ross~~ from Millertown Jr. to Springdale.

Certified correct for \$50.00

J. A. Snow

Demobilisation Officer
Discharge Depot-Newfoundland



Vouchers attached.

May 10, 1919

Mr. George Noble,
Springdale, East, N. B. B.

Dear Sir:

I enclose herewith cheque for \$25.00
amount due you for driving Pte. A. Noble from Millertown
Jct. to Springdale.

Yours truly,

Capt.
Paymaster.

824

No. 6472

TRAVELLER'S WARRANT

Date 27-3-19 The Royal Newfoundland Regiment

125-00

Airman

Please issue 1st Class Passage and Meals for

No. 4641 Rank Private Name Wohl Albert

From St. John's To St. John's

The Royal Newfoundland Regiment
DEPOT ST. JOHN'S, N.F.

PLEASE QUOTE THIS WARRANT NUMBER
ON STATEMENT AND MEAL CHECKS

[Signature]

SIGNATURE OF ISSUING OFFICER

Lieut.
Detachment Officer
The Royal Newfoundland Regiment

pay to George Noble

Springdale East

\$25.00

ROYAL NEWFOUNDLAND REGIMENT

DR.

To Titus Morey,
Port Anson,
Sunday Cove Island

To Passage and Meals for 4041 Pte. Noble \$27.00

N.C.S.

E

As per B/P attached

ACCOUNT	<i>Trans</i>
ON NO	<i>12938</i>
IND LSC	
PAY LSC	
GEN LSC	

OK.

Adm

Stm

Adm

DISTRICT OFFICER
NEWFOUNDLAND
MAR 14 1919
COMMANDING

Adm

Assistant Adjutant General
Discharge Department

E

MAR 11 1919

No. 4072

TRAVELING WARRANT

Date 10/2/19

The Royal Newfoundland Regiment

Please issue 1st Class Passage and Meals for

No. 4072 Rank Private Name W. J. [unclear]

From - ST. JOHN'S - To [unclear]

The Royal Newfoundland Regiment
DEPOT ST. JOHN'S, N.F.

PLEASE QUOTE THIS WARRANT NUMBER
ON STATEMENT AND MEAL CHECKS

[Signature]
SIGNATURE OF ISSUING OFFICER.

Port Anson
Sandy Cove Island
Feb 22th 1919

to the royal Newfoundland reg
Depot st. Johns N.F.

Passage and meals
twenty seven Dollars \$ 27 00

T. C. D.

Titus May

Port Anson
Sandy Cove Island

March 27, 1919

Mr. Titus Morey,
Port Anson, Sunday Cove Island,
Nfld.

A.C.

Dear Sir:

I enclose herewith
cheque for \$27.00, amount due you for passage &
meals supplied #4041, Pte. Noble.

Yours truly,

Eapt.
Paymaster

C.R. 4041

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

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

Name *Ex pte C. Noble*

Date *Nov 20 1919*

Place *Springdale*

Twillingate Dist

1901

The accompanying Medal and Ribbon are hereby forwarded to you

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

Received

Signature

Date

Address

OCT 17

1921.

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

is/are forwarded herewith to

Albert Noble



in respect of his service as No. 4041 Rank Pte.

Name A. Noble ~~Royal Nfld. Regt.~~
~~Nfld. Forestry Corps.~~

Receipt of the same should be acknowledged hereon.

Received Victory medal and British war medal

Signature Pte Albert Noble 4041

Date October 18th

Address Springdale Halls Bay

[P.T.O.]

Receipt for Army Book 64

No. 4041 Name W. A. Noble

To Certify that I have received the AB 64 of the above
named soldier.

Name Albert Robly

Date August 11th

Place Springdale

Quart. Fillingate

N.B. For completion and return to the Department of Militia
insert in corner of envelope "AB 64"



SECRET.

C.R. 4041

FOR ISSUE OF RIBAND OF VICTORY MEDAL 1914-1919.

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

NO. 4041... NAME Albert Noble.

DATE Jan 27 1920
PLACE Springdale

Trillickgate Dist.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Number of Sheet one.

Regiment of 1st Newfoundland

Signature of O. C. Company [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>Koble A.</u>	Age on	<u>21</u> years <u>1</u> months	<u>Fisherman</u>	
Joined	Date	Place and Date of Enlistment	<u>St. Johns</u> <u>31-10-17</u>	Religion <u>S.A.</u>	
Joined	Date	Period of	} with Colours <u>164</u> years. } with Reserve <u>1</u> <u>365</u> years.	Place of Birth	

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order disposing with trial	By whom awarded	REMARKS
				<i>Demobilized St. Johns, 12 ⁴/₁₉</i>					

To be carried over

31

Army Form B. 121.

54041

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4041 Rank Pte Name Albert Noble
 Date of Enlistment 31-10-17 Address Springdale District Lewisville
 Occupation Fisherman Classification for Discharge F Medical Category A I
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

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

Date 26-3-19

H. Mears Lt.
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

Albert Noble
His Mark

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable. \$160.00

(b) ~~Clothing~~ Supplied

Approved Cash
[Signature]

Date 27-3-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R10115472* to his home at *Springdale* and Release Certificate No. *1803* issued.

Date *27.3.19*

Robertson
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 *12-4-19*

Date *27-3-19*
SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT.

H. H. H. H.
Depot Paymaster.

Discharge approved for *29.3.19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36.	B 268.	B 121.	N.F. Med.	D.F. 1.	
F 178.	W 3494.	B 122.	Board 1st.	" 2.	<i>1</i>
R 178a.	D 400A.	B 1915.	do 2nd.	" 3.	<i>2</i>
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 *27.3.19*

J.A. Crawford
Demobilization Officer.

APPROVED.

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

with following additional documents.

Eligible for War Service Gratuity

Date **MAR 29 1919**

R.H. Sait Capt.
O. C. Discharge Depot.

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

Date *Apr 11 1919*

W. H. H. H.
W. H. H. H.

EXTRACT FROM STATEMENT OF A/G TO 31-1-19 FROM PAY OFFICE

LONDON

4041 Pte Noble A. Dr Bal, £1:11:3

THIS TRANSFERRED TO PAY OFFICE 7-4-19

Reg. No. *4041* Rank *Alie* Name *Kohle. A.*

Attested Address *Springdale N.S.S.*

Allotment Allottee

Date of Allotment Returned from Overseas *4-2-19.*

Returned on S.S. Cause *Discharge*

MAR 27 1919 PASSED TO DEMOBILIZATION OFFICER

29.3.19

DISCHARGE BY DEMOBILIZATION OFFICER