



MEDICAL REPORT

FINAL EXAMINATION

First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. ⁹⁸¹
951

Name in full Henry C. Roseworthy Age 19

Address 6 Wickford St.

Married Single Height 5.5 Weight 120

Color Fair Hair Light Brown Eyes Grey

Other distinguishing marks none

Nearest relative Harriet Roseworthy (Mother)

Address 6 Wickford St.

Dependents none

Occupation Cropper Present Wage \$30 per mt.

Previous service _____

Decorations _____

General Remarks _____

Date of Enlistment Feb 23

H. Charles Roseworthy 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.

Declared before me this 24th day of Feb. 1914

~~Robert Parsons~~
Charles Roseworthy
Ernest [unclear]

DESCRIPTIVE REPORT ON ENLISTMENT.

(To correspond with Entries on the Medical History Sheet.)
Applicable to all ranks.

Reg. No. 191

Name Henry G. Hecworth
 Apparent age 19 years months. Height 5 feet 5 inches.
 Chest measurement { Girth when fully expanded inches.
 { Range of expansion inches.
 Distinctive marks Color: Fair, Hair: Light Brown, Eyes: Grey

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Harriet Hecworth, 8 Wickford St., St. John's
 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	Regt. or Depot	Promotions, 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>23/1/15</u>									
Joined at <u>St. John's</u> on <u>23rd January '15</u>									
<u>Repatriated Med. Unfit</u> <u>4/2/16</u>									
Total Service forfeited as above									
Total Service towards Engagement to (date of discharge) <u> </u> years <u> </u> days									
" " " Pension <u> </u>									

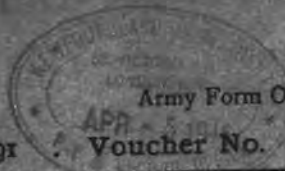
A. G. Roseworthy.

981

P.R. ①

68

12d



Army Form O. 1625

PAY LIST.

to

191

Voucher No.

NON-EFFECTIVE ACCOUNT

Regiment or corps *41 Newfoundland Regt*
 No. *981* Rank *Private* Name *Roseworthy C*
 Died (a) at _____ on the _____ of 191 .
 Deserted at _____ on the _____ of 191 .

I Certify to the correctness of above in every particular.

Chas. A. Aye Capt.

Commanding Squadron, Troop, Battery or Company.

STATEMENT OF ACCOUNT.

[FORM 1.

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month.....				Balance Cr. last month.....			
	Cash issues (Date of each issue to be stated)				Pay 13 days at <i>100</i> from <i>18/3</i> to <i>31/3</i>	<i>2</i>	<i>13</i>	<i>5</i>
					Proficiency, Service or good conduct pay			
					days at _____ from _____ to _____			
	<i>March 25/16</i>		<i>12</i>	<i>6</i>	<i>Field Messing allowance 13 days at 10p</i>			
	<i>March 31/16</i>		<i>14</i>	<i>3</i>	from <i>18/3</i> to <i>31/3</i>			<i>5 4</i>
				<i>12 6</i>	Clothing and kit allowance			
			<i>16</i>	<i>9</i>	Amount produced by the sale of Necessaries			
	<i>Allowment 13 days</i>				Personal Clothing and Effects from Form 2...			
	<i>Consolidated stoppage</i>		<i>112</i>	<i>0</i>	Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
					Deferred Pay or Gratuity.....			
	Balance due by the Paymaster			<i>17 3</i>	Balance due to the Paymaster.....			
		<i>£</i>	<i>2</i>	<i>18 9</i>		<i>£</i>	<i>2</i>	<i>18 9</i>

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ _____ is correctly chargeable against the Public^(a)

Dated at _____ this _____ day of _____ 191 . Paymaster.



(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with A.F.B. 2090 or Army Form O. 1815.
(b) Words in Italics to be struck out when there is no debtor balance.

65

PAY LIST.

to *Marso* 191*6*. Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps *1/1 The Buffs*
 No. *981* Rank *Private* Name *T. L. Roseworthy*
 Died ^(a) *embarked at Hendersonian* on the *14* of *April* 191*6*.
 Deserted at _____ on the _____ of _____ 191*6*.

I Certify to the correctness of above in every particular.

Commanding Squadron, Troop, Battery or Company.

STATEMENT OF ACCOUNT.

[FORM 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month.....				Balance Cr. last month.....			
	Cash issues (Date of each issue to be stated)				Pay days at _____ from _____ to _____			
		£	s.	d.	Proficiency, Service or good conduct pay			
	191				days at _____ from _____ to _____			
	"				Messing allowance days at _____			
	"				from _____ to _____			
	"				Clothing and kit allowance			
	<i>Allotment undercharged in paybooks 9/10</i>			<i>1 19 10</i>	Amount produced by the sale of Necessaries			
	Consolidated stoppage				Personal Clothing and Effects from Form 2...			
	Balance due by the Paymaster				Amount of Savings Bank balance, including interest (if no balance, to be so stated).			
					Deferred Pay or Gratuity.....			
					Balance due to the Paymaster.....	<i>1 19 10</i>		
		£		<i>1 19 10</i>		£		<i>1 19 10</i>

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ *1 19 10* is correctly chargeable against the Public^(a)

Dated at _____ this _____ day of *31 AUG 1916* 191*6* Paymaster.

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Form B. 2090 or Army Form O. 1815.
 (b) Words in Italics to be struck out when there is no debtor balance.

Roseworthy, C.

981

Ray Sept.

No 891



1ST NEWFOUNDLAND REGIMENT
ALLOTMENTS

I, *Charles Noalworthy*, Regl. No. *781* hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and *Seventy* Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and} _{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and} _{or} Persons concerned, viz.:

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
836	Mother	<i>Harriet Noalworthy</i>	<i>6 Michford Street</i>	70
Total Allotment, \$				

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. S. King*
Officer Commanding Company
St. John's
March 4th 15

(Sig.) *Charles Noalworthy*
(Rank) *Private*

STATEMENT OF ACCOUNT

No. 981

Name Roseworthy Co.

Date	Particulars	Ch.No.	Dr.	Cr.	Bal.
Apr 30	To Pay Today @ 1 1/2%			48 00	48 00
Apr 11	To Pay		18 00		33 00
30	" "		33 00		0
	Became due to Plan March 31/1916 @ 1-19-0		9 69		9 69
	w. S. Gratitude 1 m @ 7 1/2%			70 00	60 31
	P. W. Pay	6880	87 15		26 84
	Bonus		12 95		39 79
			157 79	118 00	39 79 Dr

Signed Aldoany S.S.M.

Dr Balance \$39 79

1 / 11 / 1920



1ST NEWFOUNDLAND REGIMENT

P. O. BOX No. 1242

TELEPHONE No. 361

CABLES AND TELEGRAMS TO
"PAYDEPT."
ST. JOHN'S, NEWFOUNDLAND

ALL COMMUNICATIONS TO BE
ADDRESSED TO THE
PAYMASTER

PAY DEPARTMENT

ST. JOHN'S, NEWFOUNDLAND,

.....191.....

Account of Pte.C.Noseworthy, Regtl.No.981.

From March 31st.1916 to April 30th.1916

Pay 30 days at 1.10	33.00	
Subsistence Allowance at 50	<u>15.00</u>	<u>48.00</u>

Payments.-

April 19th.1916	15.00	
Balance due at April 30th.1916	<u>33.00</u>	<u>48.00</u>

Received from the Paymaster the sum of thirty three dollars (33.00) in full settlement of balance due me by the First Newfoundland Regiment.

St.John's,Nfld.

C. Noseworthy



PAY LIST.

to

191

Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

21, Newfoundland Regt

No.

981

Rank

Private

Name

Roseworthy C

Died (a)

at

on the

of

191

Deserted at

on the

of

191

I Certify to the correctness of above in every particular.

Chas. H. Cope Capt.

Commanding Squadron, Troop,
Battalion or Company.

STATEMENT OF ACCOUNT.

[FORM 1,

Date	Dr.	£	s.	d.	Cr.	£	s.	d.	
	Balance Dr. last month.....				Balance Cr. last month.....				
	Cash issues (Date of each issue to be stated)				Pay 13 days at <u>100</u> from <u>18/3</u> to <u>30/3</u>	2	13	5	
		£	s.	d.	Proficiency, Service or good conduct pay				
	March 25/16	12	6	0	days at _____ to _____				
	March 30/16	14	3	0	Messing allowance 13 days at 10d				
					from <u>18/3</u> to <u>30/3</u>			54	
					Clothing and kit allowance				
					Amount produced by the sale of Necessaries				
	Allocation 13 days				Personal Clothing and Effects from Form 2...				
	Consolidated stoppage	1	12	0	Amount of Savings Bank balance, including interest (if no balance, to be so stated)				
					Deferred Pay or Gratuity.....				
	Balance due by the Paymaster				Balance due to the Paymaster.....				
		£	2	18	9				
						£	2	18	9

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ _____ is correctly chargeable against the Public^(a)

Dated at this day of

191

Paymaster.

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with A.F.B. 2090 or Army Form O. 1815.
(b) Words in Italics to be struck out when there is no debtor balance.



The Great War Veterans' Association of Newfoundland
(INCORPORATED)

MEMBER BRITISH EMPIRE SERVICE LEAGUE.
PUBLISHERS OF THE "VETERAN" MAGAZINE

TELEPHONE 609
CABLE "WARVETS"

DOMINION COMMAND
G.W.V.A. BUILDING
St. John's,
NEWFOUNDLAND

OFFICE OF:
SECRETARY-TREASURER

IN REPLY REFER
TO **HWQ-HMN-2674.**

February 13, 1926.

Major J. M. Howley, M.B.E.,
Archivist,
GENERAL POST OFFICE.

Dear Sir,-

I now enclose an application form from No. 981
Henry Charles Noseworthy, which speaks for itself.

I shall be glad to know particulars in this
connection, as he may be coming back for relief shortly.

P.D. Pay
W.S.G.

100.10

70.00

overpaid

Yours faithfully,

H. W. Hinton
Dominion Secretary.

Enclosure.

Office of the Archivist for Militia Records.

February 20th. 1926

The Secretary,

Great War Veterans' Association,

Dear Sir:-

I am in receipt of your letter of 13th. inst., enclosing Relief Application of H.C. Roseworthy.

The man's statement that he never received his gratuity is not correct.

He was discharged on April 30th. 1916, never having been in the war zone, and his service only entitled him to receive \$70.00 as war service gratuity.

When the War Service Gratuity regulations came into force, they superseded and included the former regulations re Post Discharge Pay, and of this latter, Roseworthy had already been paid the full amount - \$100.10; so that he was really paid more than he would have been paid as war service gratuity.

As a matter of fact after he had been paid off here, and account was received from the P.&R.O., London, showing that he was overdrawn there to the extent of £1.19.10, due to a short-charge in paybooks on account of his allotment.

Yours truly,

Archivist.

PAY LIST.

to 30th March

1916. Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps 2/1st Newfoundland

No. 981 Rank Private Name H.C. Noseworthy

Died (a) at on the of 191
 Embarked s.s. Scandinavian on the 4th of April 1916
 Deserted at on the of 191

I Certify to the correctness of above in every particular.

Commanding Squadron, Troop,
 Battery or Company.

STATEMENT OF ACCOUNT.

[FORM 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month.....				Balance Cr. last month.....			
	Cash issues (Date of each issue to be stated)				Pay days at from to			
	191				Proficiency, Service or good conduct pay			
	"				days at from to			
	"				Messing allowance days at			
	"				from to			
	Alotment undercharged in Pay Books \$ 9.70 <i>in error</i>	1	19	10	Clothing and kit allowance			
	Consolidated stoppage				Amount produced by the sale of Necessaries			
					Personal Clothing and Effects from Form 2...			
					Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
					Deferred Pay or Gratuity.....			
	Balance due by the Paymaster				Balance due to the Paymaster.....	1	19	10
		£	1	19		£	1	19
				10				10

I hereby Certify that the above account is correct in every particular, and that the ~~debts~~ ~~balance of £~~ ~~is correctly chargeable against the Public~~ **NEWFOUNDLAND CONTINGENT**

Dated at this day of 31 AUG 1916 1916



H. Marshall
 PAYMASTER & OFFICIAL RECORDS
 Paymaster.

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with A.F.B. 2090 or Army Form O. 1815.
 (b) Words in Italics to be struck out when there is no debtor balance.

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..... *Charles* 2. Surname..... *Roseworthy*
3. Rank..... *Private* 4. Regtl. No..... *981*
5. Address in full to which future payments of gratuity are to ~~fax~~ be forwarded..... *6 Wickford Street*
..... *St. John's*
6. Date of enlistment in the Regiment..... *January 17th 1915*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
..... *none*
8. Relationship of such dependents..... *not applicable*
9. Address in full of such dependent..... *not applicable*
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *not applicable*
11. Were you on active service only in Nfld. If so, give dates, and particulars of such service..... *no. I went overseas in March 1915*
12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *I served one year and ninety eight days*

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.....

Received \$ 87.15

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

Yes

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

no.

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

no

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

no

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

not applicable

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

April 30th 1916

Disability

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.....

no.

21. (a) Are you receiving treatment from the Civil Re-Establishment Com.?.....

no

(b). If so, are you in receipt of full pay and allowances from that Committee.....

not applicable

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

Signature of Applicant: *Charles X Roseworthy*
 Place of Residence: *6 Wickford Street, St. John's*
 Declared before me at: *St. John's Nfld.*
 This *28th* day of *February 1919*

Chas B Hunt
 Signature of Barrister of the *Notary Public*
 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	
<i>14.12.18</i>	<i>100.10</i>		<i>1 No.</i>	<i>70.00</i>	
			<i>less P.D.P.</i>	<i>100.10</i>	
				<i>30.10</i>	<i>02.</i>

Certified Correct, _____ Paymaster.

ORIGINAL FILED IN...

DECLARED BEFORE ME...

NOTARY PUBLIC...

POST DISCHARGE PAY...

DECLARED BEFORE ME...

NOTARY PUBLIC...

DECLARED BEFORE ME...

NOTARY PUBLIC...



No 891

1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Charles Woodworth, Regl. No. 781
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
Dollars and Seventy ^{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.:

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
836	Mother	Harriet Woodworth	St. John's	70
			Total Allotment, \$	

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

(Sig.) [Signature]
 Officer Commanding
 Company

(Sig.) Charles Woodworth
 (Rank) Private

March 4th 1895

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

COPY SENT TO
Adjutant Gen. [unclear]
MEDICAL HISTORY
 Dated MAR 30 1916



Surname Noseworthy Christian Name Henry Charles

Table 1.—GENERAL TABLE.

Birthplace:—Parish.....	SPECIAL RESERVE.		REGULAR ARMY.	
	County.....			
Examined	on <u>22</u> day of <u>Jan</u> 191 <u>5</u>	on	day of	191
	at <u>St Johns.</u>	at		
Declared Age.....	<u>19</u> years	days	years	days
Trade or Occupation.....	<u>Cooper.</u>			
Height	<u>5</u> feet	<u>5</u> inches	feet	inches
Weight		<u>120</u> lbs.		lbs.
Chest Measurement {	Girth when fully expanded...	<u>30</u> inches		inches
	Range of expansion..	<u>34</u> inches		inches
Physical Development... ..				
Vaccination Marks {	Right	Left	Right	Left.
	Arm			
Number				
When Vaccinated				
Vision	R. E.—V= <u>1910</u> <u>2/24</u>		R. E.—V=	
	L. E.—V= <u>2/24</u>		L. E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to Cause Rejection	(b)		(b)	
Approved by (Signature)	<u>Cluny Macpherson</u>			
(Rank)	<u>Capt.</u>			
	Medical Officer.			Medical Officer.
Enlisted	at <u>St Johns</u>	at		
	on <u>23</u> day of <u>Jan</u> 191 <u>5</u>	on	day of	191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>1st Mfld Regt.</u>	<u>251</u>		
Transferred to.. ..				
Became non-effective by.				
	on	day of	191	on
		day of		191
(Signature)				
(Rank)				

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.

Date	Brief Details, and Signature
15 th March 16.	<p>At present suffering from Cardiac Valvular Disease & unfit for foreign service.</p> <p style="text-align: right;">Infirmant, Capt. Stone</p>

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
St. John's Wfd	23 Jan 15	20 Mar 15			
T.S. "Stephens"	20 Mar 15	27 Mar 15			
T.S. ORDUNA	22 Mar 15	30 Mar 15			
Edinburgh Castle	30 Mar 15				

C.R. 981

Extract from Roll of Officers, N.C.Os. and Men Discharged
from the Royal Newfoundland Regiment.

Authority: Pay Office, St. John's.

<u>No.</u>	<u>Rank.</u>	<u>Name</u>	<u>Date.</u>	<u>Reason.</u>
981	Pte.	C. Noseworthy	Apr. 30th	Med. Unfit.

C.R. 981

Extract from list of men discharged from the Royal Newfoundland
Regiment on various dates.

#981 Pte. C. Nosworthy, discharged Apr. 30th 1916,
Medically unfit

C.R. 981

Extract from Nominal Roll of Draft embarked for
Overseas per S.S. Stephano March 20th 1915.

No. 7. Plateen.

981 Pte. C. Roseworthy.

C.R. 981

Henry C. Noseworthy was attested for General Service
with the NEWFOUNDLAND REGIMENT onJan. 23rd 1915.
Regimental No. 981 was allotted to Pte Henry C. Noseworthy

AUTHORITY:

Record Officer

Dept. of Militia,

March 25th, 1919.

Squadron, Troop, Battery and Company Conduct Sheet.

Forms
B. 121
22.

Regiment of *Newfoundland*

Signature of O. C. Company

Number of Sheet
W March
Cat

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay		
No.	<i>981 Noseworthy B.</i>	Age on	<i>19</i> years - months	<i>Cooper</i>			
Joined	Date	Place and Date of Enlistment	<i>St John Jan 23 1915</i>	Religion			
Joined	Date			<i>Methodist</i>			
Joined	Date	Period of	<i>with Colours 1 7/8 years</i>	Place of Birth			
Joined	Date		<i>with Reserve 1 3/8 years</i>	<i>St John's</i>			

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>Stabs. Camp.</i>	<i>12/15</i>	<i>Pte</i>		<i>Absent from Guard mounting at 7.45 pm</i>	<i>Cpl Mervell</i>	<i>2 days C.C.</i>	<i>13/15</i>	<i>Capt J March</i>	<i>2K</i>
<i>Troop on Regt</i>	<i>25/16</i>	<i>"</i>		<i>Absent from Tattoo until 10.30 pm</i>	<i>Sgt Brown Cpl Donnell</i>	<i>3 days C.C.</i>	<i>26/16</i>	<i>Ser Norris sh</i>	<i>Sen</i>
<i>"</i>	<i>10/15</i>			<i>Absent from Tattoo until Reville</i>	<i>Cpl Simpson</i>	<i>7 days C.C.</i>	<i>11/15</i>	<i>Capt 107 Renaco</i>	<i>St</i>
				<i>Medically Unfit</i>	<i>Capt. 4 7/16</i>				

To be carried over

COPY SENT TO
S. J. Dep.
Letter Memorandum No.
Dated APR 5 - 1916

DEPARTMENT OF VETERANS AFFAIRS

Dept. of Veterans Affairs
3100 Service Road

Ottawa Ont

Copy for H.O. FILE

Date Dec 26/62

Attention of

NAME NOSEWORTHY, Henry Charles.

SERVICE 981 ROY.NFLD C.P.C. No.
NUMBER REGT WW1 W.V.A. No. 214946

NAVY
ARMY X
R.C.A.F.

The DEPARTMENT has received information from

S.T.M.O. TEL MEMO. St. John's Nfld. Dec 19/62

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death Nov 24/62
Cause of Death
Place of Death General Hospital St. Johns Nfld.

Name and Address of next of kin (if known)

Copies to: W.S.R.
V. I.
~~PAF~~
DO.
H.O.

Destroy form if advice of death already received.

for
Chief, Central Registry

Box 45

Department of Veterans Affairs

Ottawa 4,

19

TO Supervisor,
War Service Records, Ottawa.

Mark Your Reply:

For attention of

For attention of

SUBJECT

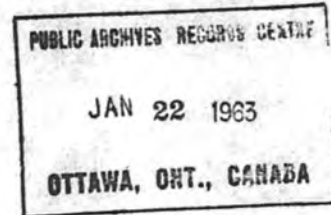
File No.

(1)

The Department is authorized to place a memorial on the grave of the above named. Therefore, will you kindly insert the particulars requested on this form and return it to this office.

Departmental Secretary.

- (1) Service number 981
- (2) Surname NOSEWORTHY
- (3) Christian names Henry Charles
- (4) Date of Birth not given
- (5) Religion Methodist
- (6) Unit of enlistment Royal Inf Mfld. Regt.
- (6a) Highest corresp. rank Pte.
- (7) Units overseas Royal Infld. Regt.
- (7a) Highest corresp. ranks Pte.
- (8) Rank on day of discharge Pte.
- (8a) Corresp. unit _____
- (9) Military honours Nil



(2)

Departmental Secretary,
OTTAWA.

The particulars have been added to this form and it is returned as requested.

Date

for Supervisor, War Service Records.