



Newfoundland Forestry Companies

ATTESTATION OF

No. 107 Name Edward O'Brien Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---|
| 1. What is your name? | 1. <u>Edward O'Brien</u> |
| 2. What is your full Address? | 2. <u>14 Planty Road</u> |
| 3. Are you a British Subject? | 3. <u>Yes.</u> |
| 4. What is your age? | 4. <u>15 1/2</u> Years Months |
| 5. What is your Trade or Calling? | 5. <u>Leamster</u> |
| 6. Are you Married? | 6. <u>Yes.</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. What is your Religion? | 9. <u>Roman Catholic</u> |
| 10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies? | 10. <u>Yes.</u> } Name
Corps |

I, Edward O'Brien 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.

Edward O'Brien (SIGNATURE OF RECRUIT.)

J. J. Barrett Signature of Witness.

to 7/5/17

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I 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 serve His Majesty, His Heirs and Successors, in the United Kingdom, 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 1917

Signature of Attesting Officer J. J. O'Leary Capt

†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 F. Forestry Coy's

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

Date 11/5/17 1917

Place St. John's

J. J. O'Leary Capt } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Edward O'Brien
 Apparent age 45 years months. Height 5 feet 7 inches
 Chest Measurement { Girth when fully expanded inches
 Range of expansion inches
 Distinctive marks Grey eyes Grey hair operation cut right side

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Helena O'Brien, 14 Plank Road, St. John's | 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.

<u>Helena Le Drew Spinster</u>	<u>Spinster</u> <u>St. Patrick's</u> <u>St. John's</u>	(c) <u>14 Plank Rd</u> <u>St. John's</u>	(d) <u>J.A.B.</u>
--------------------------------	--	--	----------------------

Particulars as to Children

Christian Names	Age	Date and Place of Birth
<u>Nicholas O'Brien</u>	<u>18 yrs</u>	<u>St. John's</u>
<u>Patrick O'Brien</u>	<u>15 "</u>	<u>"</u>
<u>Edward O'Brien</u>	<u>7 "</u>	<u>Baginbulla</u>
<u>Minnie O'Brien</u>	<u>20 "</u>	<u>St. John's</u>
<u>Alice O'Brien</u>	<u>13 "</u>	<u>St. John's</u>
<u>Fizzie O'Brien</u>	<u>2 "</u>	<u>St. John's</u>

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 _____									
Joined at _____ on _____									
<u>Discharged St. John's July 26/1918</u>									
Total Service forfeited as above.....									

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



Newfoundland Forestry Companies

ATTESTATION OF

No. 8107 Name Edward O'Brien Corps

Questions to be put to the Recruit before Enlistment

- | | |
|--|--------------------------------|
| 1. What is your name? | 1. <u>Edward O'Brien</u> |
| 2. What is your full Address? | 2. <u>14. Plank Road</u> |
| 3. Are you a British Subject? | 3. <u>Yes.</u> |
| 4. What is your age? | 4. <u>45</u> Years |
| 5. What is your Trade or Calling? | 5. <u>Leamster</u> |
| 6. Are you Married? | 6. <u>Yes.</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. What is your Religion? | 9. <u>Roman Catholic</u> |
| 10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies? | 10. <u>Yes.</u> { Name |
| | Corps |

I, Edward O'Brien 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.

Edward O'Brien SIGNATURE OF RECRUIT.

J. J. Barrett Signature of Witness.

to 7/5/17

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, 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 serve His Majesty, His Heirs and Successors, in the United Kingdom, 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 J. J. Barrett

†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 } Approving Officer.
Place..... }

† 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).....

E. D. Green.

C.R. 8107

LRD

6

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

MEDICAL HISTORY

Surname O'Brien OF Christian Name Edward

Table I.—GENERAL TABLE.

Birthplace:—Parish 14 Clark Rd. St. Johns County

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>7</u> day of <u>May</u> 19 <u>17</u>	on	day of	19 <u>1</u>
	at <u>St. Johns</u>	at		
Declared Age	<u>48</u> years	days	years	days
Trade or Occupation	<u>Seamster</u>			
Height	<u>5</u> feet	<u>7</u> inches	feet	inches
Weight		<u>146</u> lbs.		lbs.
Chest Measurement	Grith when fully expanded		inches	
	Range of Expansion		inches	
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V=		R.E.—V=	
	L.E.—V=		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>W.E. Procurier</u>			
(Rank)	<u>Lieut.</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St. Johns</u>	at		
	on <u>7</u> day of <u>May</u> 19 <u>17</u>	on	day of	19 <u>1</u>
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>1st. Forster</u>	<u>8107</u>		
Transferred to				
Became non-effective by				
(Signature)	on	day of	19 <u>1</u>	on
(Rank)			day of	19 <u>1</u>

COPY SENT TO
O.C. H.Q.
ST. JOHNS, N.F.L.D.
N.F.P.38, No. 9587
DATED 18 JAN 1918

ist in case of Warrant Officers treated in quarters.

on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of
ns and re-admissions to hospital will be shown. The subsequent progress, including particulars
tment out of hospital, transfers, etc., will be given in the special syphilis case sheet.

Signature of Medical Officer

J. J. Meade
CAPTAIN, R.A.M.C.

STATEMENTS OF ACCOUNTS.

Army Form No. 3296.

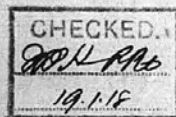
No. 8107 Rank Pvt. Name O'Brien E
 Company etc. B Co Newfoundland Forestry Coy
 From 19-1-18 to 19-1-18 (dates)

Date.	Debits.	Date.	Debits.
	1 day allot 50 <i>b.h.</i> / 3 3		1 day pay 100 / 1-1/2 <i>h</i> allowance 10 / <hr/> 1-10 /
	Casual Pay 1 3		. 4 6 /
	<i>Dist income</i> <i>Cont fund</i> Creditor Bal. 19 6		Debtor Bal.
	Total. £ 4 6		Total. £ 4 6

Station. DunReid
 Date. 16-1-18

Certified Correct.

J. H. Crowe
capt.
 Paymaster.



5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class _____

6. Campaigns, Medals and Decorations

Four horizontal lines for listing campaigns, medals, and decorations.

Certificate of education

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place) _____

(Date) _____ Commanding _____ Battrn. _____ Regiment.

8. 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, subject to the reservations of the claims noted on the 3rd page.

(Place) St. Johns Edward O'Brien (Signature of Soldier.)

(Date) July 27th. 1918 J. Holland (Signature of Witness.)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. Additional certificate in the case of a soldier who takes his discharge at his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier.)

10. Statement of service.

Service towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service " " _____ (the date of confirmation of discharge) " " _____

Total " " _____

11. Confirmation of discharge.

The discharge of the above-named man is hereby confirmed for _____ (date)

(Place) _____

Signature _____

(Date) _____

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

No Reservations

his
Edward X O'Brien
mark

Witness Holland

C.R. 8107

No.	Rank.	Name.	Attested.	S.M.B. St. John's.	Report of Medical Board.	Disability.
8107	Private.	O'Brien. Ed.	7/5/17.	19/2/18.	<p data-bbox="788 285 918 301"><u>Section 10.</u></p> <p data-bbox="788 327 1216 425">Complains of pain in lower abdomen and in left testicle. He has haemorrhoids. His left testicle is atrophied. He has a scar over appendix healed.</p> <p data-bbox="788 446 1216 524">Disability cannot be considered as aggravated by or due to service during this war, climate or ordinary military service.</p> <p data-bbox="788 544 1216 560">Disability total while in hospital.</p> <p data-bbox="788 586 1216 601">Recommended for General Hospital.</p>	Haemorrhoids.

COPY

8107

June 24th., 1918.

From:- D. M. S.

To:- O. C. Depot.

8107. Pte. E. O'Brien

The marginally noted man was admitted to the
St. John's General Hospital June 24th., 1918.

CLUNY MACPHERSON,

Major, D. M. S.

Per

JUL 26 1918

St. John's,.....

Newfoundland Forestry Companies,

Billeting Account,

ACCOUNT

CH. NO.

IND. LEDGER

PAY LEDGER

Board Messonia

J.M.T. Pk E O'Brien

34

INITIALS

INITIALS

INITIALS

14 Plank Rd.

Billeting Soldiers as undermentioned

from *July 19/18* to *July 26/18*

8107 Pk E. O'Brien 6.00

*Paid his Edward O'Brien
with Holland*

Certified correct for \$6.00

[Signature]
Billeting Officer.

G.H.T.

St. John's, JUL 19 1918

Newfoundland Forestry Companies,
Billing Account,

To Mr E. O'Brien
Plants Dept.

Billeting Soldiers as undermentioned

from JUL 12 1918 to JUL 19 1918

8107 Pts E. O'Brien 6.00

Paid

Pte ^{his} E. O'Brien
July 20/18

ACCOUNT	1922	INITIALS
CH. NO.		
IND. LEDGER		INITIALS
PAY LEDGER		INITIALS
REV. LEDGER		INITIALS

Don't mess up

Certified correct for \$6.00

A B Dickson
Billing Officer.

E. N. S.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 7³⁰/₁₀₀

May 2nd 1918

Received from the First Newfoundland Regiment
the sum of Seven ³⁰ Dollars.

on account
balance of Pay, to 30/4/18

his
EX. M' Brien
mark.

Regtl. No. Rank

Ch. No. <u>117^d</u>	Initials <u>EW</u>
Pay Ledger <u>18</u>	Initials <u>EW</u>
Gen. Ledger <u>Key</u>	Initials <u>EW</u>

EW

No.

8107

Rank

Pte

Name

E. O'Brien

Newfoundland & Labrador

1918-1919


DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER

\$ 66 ³⁰/₁₀₀

July 26th 1918

Received from the First Newfoundland Regiment
the sum of Sixty Six ³⁰/₁₀₀ Dollars.
~~on account~~
balance of Pay.

Edward ^{his} O'Brien 
mark

Ch. No. 36	Initials <i>JO</i>
Pay Ledger	Initials
Gen. Ledger <i>AP</i>	Initials <i>Q</i>

Regtl. No. Rank

No. 8107

Rank *Al*

Name

O'Brien E.

DEPARTMENT OF MILITIA.

Forestry

REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ *15⁰⁰/₁₀₀*

Feb. 13th 19

Received from the First Newfoundland Regiment
the sum of *Fifteen* Dollars.
on account of Pay.
balance

his
E. O. Brien
mark.

Regtl. No. Rank *Pte*

Ch. No. <i>798</i>	Initials <i>EW</i>
Pay Ledger <i>EW</i>	Initials <i>EW</i>
Gen. Ledger <i>EW</i>	Initials <i>EW</i>



No. 8107 Rank Pte

Name E O'Brien

D

DEPARTMENT OF MILITIA.
Roosty **REGIMENTAL PAY BRANCH.**

PAY VOUCHER.

\$10⁰⁰/₁₀₀

Feb 28th 1918

Received from the *First Newfoundland Regiment*
the sum of *ten* Dollars.
on account of Pay. *04*
balance

Pte. E. O. Brian
mark.

Ch. No.	<i>868</i>	Initials	<i>EW.</i>
Pay Ledger	<i>10</i>	Initials	<i>bleb</i>
Gen. Ledger	<i>Pay</i>	Initials	<i>RS</i>

Regtl. No. *101* Rank *Private*

No. 8107

Rank

Pte.

Name

E. O'Brien

DEPARTMENT OF MILITIA.

Romster

REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ ³⁰ 9-100

June 21 1918

Received from the First Newfoundland Regiment
the sum of *nine* Dollars.

on account of Pay to *31/5/18*
balance

Pte *EX O'Brien*
mark

Ch. No. <i>1288</i>	Initials <i>EW</i>
Pay Ledger <i>188</i>	Initials <i>EW</i>
Gen. Ledger <i>188</i>	Initials <i>EW</i>

Regtl. No. Rank

No.

8707

Rank

Pte

Name

E O'Brien



Forestry Coys

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 35⁰⁰/₁₀₀

Feb 14 1919

Received from the First Newfoundland Regiment
the sum of Thirty Five ⁰⁰/₁₀₀ Dollars.

~~Account~~
balance of Pay. Clothing

his
Edgard X O'Brien
mark

Ch. No. 423	Initials. EW
Pay Ledger. 10	Initials. wn
Gen. Ledger.....	Initials.....

Reg. No. 11.

Rank
Wit. G. Walsh.

No. 8107.

Rank

Pt-

Name

O'Brien-E.

DEPARTMENT OF MILITIA.

Forestry

REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$10.⁰⁰

June 29~~th~~ 1918

Received from the First Newfoundland Regiment
the sum of *Ten* Dollars.

on account
balance of Pay.

Cheque Mailed 27/18

Ch. No. <i>15324</i>	Initials <i>ew</i>
Pay Ledger <i>P</i>	Initials <i>ew</i>
Gen. Ledger <i>Ry</i>	Initials <i>ew</i>

Regtl. No. Rank

DEPARTMENT OF MILITIA.

Forestry.

REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$10.⁰⁰

June 29th 1918

Received from the First Newfoundland Regiment
the sum of *Ten* Dollars.

on account
balance of Pay.

Cheque Mailed 27/18

Ch. No. <i>13324</i>	Initials <i>ew</i>
Pay Ledger <i>By</i>	Initials <i>ew</i>
Gen. Ledger <i>By</i>	Initials <i>ew</i>

Regtl. No. Rank

No. 8107 Rank Pte.

Name E. O'Brien

G. Hospital

Forestry

**DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.**

PAY VOUCHER.

\$ *210⁰⁰*

Oct 26 1919

Received *from the First Newfoundland Regiment*
the sum of two hundred & ten Dollars.

~~on account~~ *of Pay. W.L.G.*
balance

J. O'Brien

Ch. No.	<i>674</i>	Initials.	<i>EW</i>
Pay Ledger	<i>14</i>	Initials.	<i>WR</i>
Gen. Ledger		Initials.	

J. O'Brien

Regtl. No. *Witness* Rank
W. Newburn

6

No. 8707 Rank Pl

Name O'Brien E

STATEMENT OF ACCOUNT

No. 8107

Name Breen Co

PAY LEDGER 9 14

Date 8/1/21 by [Signature]

1918

Date	Particulars	Ch. No.	Dr.	Cr.	Bal.
Jan 31	By Pay 12 days @ 1.50			18 20	18 20
Feb 28	" " 28 " do			30 80	44 00
Mar 31	" " 31 " do			34 10	78 10
Apr 30	" " 30 " do			33 00	111 10
May 31	" " 31 " do			34 10	145 20
June 30	" " 30 " do			33 00	178 20
July 26	" " 26 " do			28 60	206 80
	Bonus			13 70	220 50
	Clothing			25 00	245 50
	do			35 00	280 50
Jan 31	To allotment 12 days @ 80.4		9 60		270 90
Feb 14	To Pay	798	15 00		255 90
28	" Allotment		20 40		235 50
"	To Pay	868	10 00		225 50
Mar 31	To allotment		24 80		240 70
Apr 30	" "		24 00		186 70
May 3	To Pay	1174	7 30		199 40
31	" Allotment		24 80		124 60
June 1	To Pay				
29	" "	1288	9 30		185 30
June 30	" "	1324	10 00		125 30
July 26	" "		24 00		191 30
			66 20		35 00
Feb 14	To Pay		35 00		
	War Service Protective				
	4 mos @ \$100.00				
	Bonus		13 70	400 00	400 00
Mar 1	To Pay	619	56 30		386 80
	Pa	1152	30 00		330 00
Oct 26	To Pay	674	210 00		300 00
	Sh	1956	90 00		90 00
			680 50	680 50	

Signed A. Looney SSM



Department of Militia, Newfoundland.
Medical Department.

Medical Report on an Invalid.

COPY

NOTES:—

- (a) This report is solely concerned with Pensions.
- (b) A single copy only is required.
- (c) "Aggravated" being now a technical term, carrying right to pension, discrimination in its use is essential.
- (d) Be as brief as possible compatible with lucidity.
- (e) Avoid dubiety—"perhaps" "possibly" "might" and the like.
- (f) Only sufficient clinical data need be given to establish the degree of disability and assist the Board in arriving at a decision.

Statement of Case

Station February 19th., 1918.
Date St. John's, Nfld.

- | | |
|----------------------------------|---|
| 1. Unit <u>1st. Newfoundland</u> | 5. Age last birthday. <u>49</u> |
| 2. Regimental No. <u>8107</u> | 6. Enlisted on <u>May 7th., 1917</u> |
| 3. Rank. <u>Private</u> | at <u>St. John's</u> |
| 4. Name. <u>O'Brien, E.</u> | 7. Former trade or occupation <u>Teamster</u> |

8. Disability

HAEMORRHOIDS

9. History He has had piles for years. He states he strained himself in Scotland and since then haemorrhoids have been worse

10. What is his present condition?

(This is the important question. Be brief—the clearer the case the less need be written. Read note f above.)

Complains of pain in lower abdomen and in left testicle. He has hemorrhoids. His left testicle is atrophied. He has a scar over appendix healed.

11. Was sanatorium advised and refused?
operation

12. Do you recommend discharge as **Yes**
permanently unfit?

Signature (Sgd) F. W. BURDEN.....

Rank or Qualification

Remarks if any by Officer in Charge Hospital.

Place Signature

Date Rank

Opinion of the Medical Board.

In para. 13, the President should write "may" or "cannot" at x
Erase inapplicable words.

13. For pension purposes, the disability x **Cannot** be considered as aggravated by:—
due to
(a) Service during this war. (b) Climate. (c) Ordinary Military Service
Remarks if any:—

14. Does the Board concur in preceding report? (see Sect. 10) If not give differing opinion and additional findings. **Yes**

ADMITTED ST. JOHN'S GENERAL HOSPITAL JUNE 24th., 1918.

15. At present his capacity for earning a full livelihood in the general labor market is lessened by:—
(Here the president should write in Total, 4-5, 3-5, 2-5, 1-5).

Remarks if any:—

16. Is the disability permanent?

17. Has the disability been aggravated by (a) Intemperance. (b) Misconduct.

18. The refusal of operation sanatorium is:— (a) Reasonable. (b) Unreasonable.

Remarks if any:—

19. If fit subject for Hospital do you recommend admittance to

General Hospital, Yes
Naval and Military Convalescent Hospital,
Jensen-Tuberculosis Camp.

20. We recommend discharge from retention in the Army

Remarks if any:—

(SGD) N. S. FRASER

President

J. S. TAIT

Signatures.

L. PATERSON, Major

Place St. John's,

Date February 19th., 1918 ..

APPROVED

Station

Date



(SGD) CLUNY MACPHERSON, Major

Administrative Medical Officer.

February 22nd., 1918.

From:- D. M. S.
To:- O. C. Depot.

8107. Pte. O'Brien, E.

Admission Card to Hospital has been sent to Eli Whiteway, Esq., Admitting Officer, who will call for him at the address given, 14 Plank Road, as soon as there is a vacancy in the Hospital.

Major, D. M. S.



ROYAL NEWFOUNDLAND REGIMENT
HEADQUARTERS

ST. JOHN'S, NEWFOUNDLAND.

February 22nd. 1918.

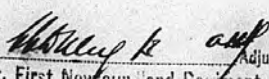
From Officer Commanding,
Depot.

To Director of Medical Services,
Department of Militia.

8107 Pte. O'Brien, E.

Above mentioned man was recommended for admission
to the General Hospital by Medical Board held on February
19th. 1918.

I am sending him herewith for your attention and
necessary action, please.


Adjutant
Depot, First Newfoundland Regiment,
St. John's, Nfld.

8107

June 24th., 1918.

From:- D. M. S.

To:- O. C. Depot.

8107. Pte. E. O'Brien

The marginally noted man was admitted to the
St. John's General Hospital June 24th., 1918.

CLUNY MACPHERSON,

Major, D. M. S.

Per

July 13th., 1918.

From:- The Director of Medical Services.
To:- O. C. Depot.

8107. Pte. O'Brien. E.

1968. Pte. Cook. H. H.

The marginally noted men have been recommended for discharge from the St. John's General Hospital, and should report to you to-day for further orders.

Majoy, D. M. S.



Depot 8107. ^{M.F.A.3}

DEPARTMENT OF MILITIA

ADDRESS REPLY TO
DEPARTMENT OF MILITIA
AND QUOTE NO.

8107

ST. JOHN'S, NEWFOUNDLAND.

June 24th., 1918.

From:- D. M. S.

To:- O. C. Depot.

8107, Pte. E. O'Brien

The marginally noted man was admitted to the
St. John's General Hospital June 24th., 1918.

CLUNY MACPHERSON,

Major, D. M. S.

Per *A. W. B.*

St. John's, Newfoundland.

August 2nd, 1916.

The C.C.

Newfoundland Forestry Companies.

Headquarters.

Sir;

The undermentioned men have been discharged on the dates given.

Kindly note and post in Daily Orders Part II.

I have the honour to be,

Sir;

Your obedient servant.

(SOD) J.M. HOWLEY.

Captain & Paymaster & Officer i/c Records.

No.	Pte.	Name	Date	Req	Unfit.
No. 8027.	Pte.	peddle.A.	July 16th, 1916.		
No. 8019.	"	Piercey.R.	do		do
No. 8218.	"	Felix.J.	9th.		do
No. 8196.	"	Mercer.H.	do		do
No. 8123.	"	Gough.J.	23rd.		do
No. 8137.	"	Hutchings.A.W.	do		do
No. 8107.	"	O'Brien.E.	do		do
No. 8053.	"	Avery.Wm.	16th.		do
No. 8268.	"	Janes.A.A.	2nd.		do

St John's, Newfoundland.

July 13th., 1918.

From ; The Director Medical Services
To O.C. Depot

8107. Pte. O'Brien, E.

1968. Pte. Cook. H.H.

The marginally noted men have been recommended for discharge from the St John's General Hospital, and should report to you to-day for further orders.

(Sgnd). Cluny Macpherson.

Major. D M S.

July 28th, 1918

From Officer Commanding,
Depot

To Paymaster and Officer i/c Records,
Militia Department

8107 Pte. E. O'Brien

The above noted man has been recommended for discharge from the General Hospital, and discharge from the Army as permanently unfit, by Medical Board held on Friday, July 12th.

I am sending him herewith for your attention and necessary action, please.

COPY



Descriptive Return of a Soldier Discharged on Account of Disability

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

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

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

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

Name in full **O'BRIEN EDWARD**

Regiment from which discharged *1st. Newfoundland*

Regimental number **8107**

Intended address **14 PLANK ROAD**

Height on discharge **5** Feet **6 $\frac{3}{4}$ "**

Color of hair on discharge **GREY**

Complexion **FAIR**

Color of eye **BLUE**

Descriptive Marks

Figure on discharge **MEDIUM**

Christian name of Father **PATRICK**

Christian name of Mother **ALICE**

Wife's maiden name in full **LENA**

Date and place of marriage **ST. JOHN'S JUNE 15th., 1899**

Christian names of children **NICHOLAS MINNIE ALICE LIZZIE EDWARD PATRICK**

Place and date of soldier's birth. **ST. JOHN'S JUNE 5th., 1868**

Nature and locality of civil employment required

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

(Soldier's signature in full) **EDWARD O'BRIEN** WITNESS: **H. A. HOUSE**

(Rank) **PTE**

Station **ST. JOHN'S NFLD.** Date **FEBRUARY 16th., 1918.**

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.

(SGD) **F. W. BURDEN**

Medical Officer i/c Hospital.
Unit, or Command Depot.

Station **ST. JOHN'S NFLD.** Date **FEBRUARY 16th., 1918.**

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 *Edward* 2. Surname *O'Brien*
3. Rank *Pte* 4. Regtl. No. *8107*
5. Address in full to which future payments of gratuity are to ~~fax~~ be forwarded *14 Blank Road, St. John's*
6. Date of enlistment in the Regiment *May 7/17*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *Lea O'Brien*
8. Relationship of such dependents *Wife*
9. Address in full of such dependent *14 Blank Rd,*
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 May 7/17 to July 26/18*

✓

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 \$60 -

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?.....

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

No *July 26/18* *Being no longer physically fit for active service*

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.....

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

his

Signature of Applicant: *Edward X O'Brien*

Place of Residence: *144 Blank Rd. St. John's*

Declared before me at: *St. John's, Nfld*

This *6th* day of *March 1919*

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of affidavits. *John M. Cooney*

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	<i>1.00</i>	<i>100.00</i>
.....
.....

Certified Correct.

Paymaster.



THE ROYAL NEWFOUNDLAND REGIMENT
HEADQUARTERS

St. John's, Newfoundland,

July 33th, 1918 191


From Officer Commanding,
Depot

To Paymaster and Officer i/c Records,
Militia Department

8107 Pte. E. O'Brien

The above noted man has been recommended for discharge from the General Hospital, and discharge from the Army as permanently unfit, by Medical Board held on Friday, July 12th.

I am sending him herewith for your attention and necessary action, please.


Ass't Adjutant
Depot The Royal Newfoundland Regiment
St. John's, Nfld.



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, this subsequent identification depends on his confirming this declaration. The "Rank," "Station," and "Date" should be in his own handwriting.

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

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

Name in full *6 Brien Edward*
 Regiment from which discharged *1st. Newfoundland Forestry Co*
 Regimental number *8107*
 Intended address *14 Park Rd St Johns.*
 Height on discharge *5* Feet *6 3/4* in
 Color of hair on discharge *Grey*
 Complexion *Fair*
 Color of eye *Blue*
 Descriptive Marks *none*
 Figure on discharge *medium*
 Christian name of Father *Sabuck*
 Christian name of Mother *Alice*
 Wife's maiden name in full *Lena*
 Date and place of marriage *St Johns June 10 1899.*
 Christian names of children *Nickolas Minnie Alice Lizzie Edward Sabuck*
 Place and date of soldier's birth. *St Johns June 5 1868*
 Nature and locality of civil employment required

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

(Soldier's signature in full) *Edward X Brien*
 Station *St Johns* Date *Feb 14/18*
 Witness *Staphouse* (Rank)

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.

Staphouse
 Medical Officer i/c Hospital.
 Unit, or Command Depot.

Station *St Johns N.* Date *Feb 14/18*