



FIRST NEWFOUNDLAND REGIMENT

Math

ATTESTATION OF

No. 2874 Name Thomas Oldford Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---|
| 1. What is your name? | 1. <u>Thomas Oldford</u> |
| 2. What is your full Address? | 2. <u>Bungay's Cove</u>
<u>Bonaville Bay</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>19</u> Years <u>3</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Fisherman</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> |

THE DISTRICT OF THE WAR

I, Thomas Oldford 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.

Thomas Oldford SIGNATURE OF RECRUIT.
Charles Cape Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Thomas Oldford 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 13th day of June 1916.
Signature of Attesting Officer Charles Cape

†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 1st.
If enlisted by special authority, such will be attached to the original attestation.
Date.....1916
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 Edgar Oldford
 Apparent age 19 years 3 months. Height 5 feet 6 inches
 Chest Measurement { Girth when fully expanded 41 inches
 Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Tobias Oldford, Bayview's Cove,
Bonaville Bay, | Relationship Father

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 _____									
Joined at _____ on _____									
Total Service forfeited as above.....									
Total Service towards Engagement to _____ [date of discharge] _____ years _____ days									
" " " Pension " _____ [" "] _____ " _____ "									



FIRST NEWFOUNDLAND REGIMENT

Math.

ATTESTATION OF

No. *2874* Name *Elias Clifford* Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---|
| 1. What is your name? | 1. <i>Elias Clifford</i> |
| 2. What is your full Address? | 2. <i>Bungay's Cove Bonavesta Bay</i> |
| 3. Are you a British Subject? | 3. <i>Yes</i> |
| 4. What is your age? | 4. <i>19</i> Years <i>3</i> Months |
| 5. What is your Trade or Calling? | 5. <i>fisherman</i> |
| 6. Are you Married? | 6. <i>No</i> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <i>No</i> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <i>Yes</i> |
| 9. Are you willing to be enlisted for General Service? | 9. <i>Yes</i> |
| 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. <i>Yes</i> |

I, *Elias Clifford* 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.

Elias Clifford SIGNATURE OF RECRUIT.
Chas. A. Ayrce Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, *Elias Clifford* 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 *13th* day of *June* 191*6*.

Signature of Attesting Officer *Chas. A. Ayrce 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 *1st*

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

Date.....191*6*

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 Elias Oldford
 Apparent age 19 years 3 months. Height 5 feet 6 inches
 Chest Measurement { Girth when fully expanded 41 inches
 Range of expansion 4 inches
 Distinctive marks.....

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Johas Oldford, Baysis Cove,
Bonavisita Bay | Relationship Father

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>13-6-16</u>									
Joined at <u>M. John's</u> on <u>June 13th 16</u>									
<u>Reached Liverpool Oct 30/18</u>									
	<u>M. John's</u>	<u>S. Section</u>	<u>Private</u>	<u>28th 8th</u>	<u>28th 8th</u>				<u>Contracted for 136s. 30th</u>
	<u>12-12-16</u>	<u>Wounded</u>	<u>4-2-17</u>	<u>Admitted to</u>	<u>6th 19th</u>	<u>19th 19th</u>	<u>19th 19th</u>	<u>19th 19th</u>	<u>19th 19th</u>
	<u>11-2-17</u>	<u>Admitted to</u>	<u>3 London</u>	<u>General Hospital</u>	<u>12-5-17</u>	<u>12-5-17</u>	<u>12-5-17</u>	<u>12-5-17</u>	<u>12-5-17</u>
	<u>26-6-17</u>	<u>Contracted for</u>	<u>136s. 22th 7th</u>						<u>136s. 22th 7th</u>
	<u>13-4-18</u>	<u>Admitted to</u>	<u>57 St. John's</u>	<u>to 4th 18th</u>	<u>13-4-18</u>	<u>13-4-18</u>	<u>13-4-18</u>	<u>13-4-18</u>	<u>13-4-18</u>
	<u>18th 18th</u>	<u>Transferred to</u>	<u>3 London</u>	<u>General Hospital</u>	<u>1-8-18</u>	<u>1-8-18</u>	<u>1-8-18</u>	<u>1-8-18</u>	<u>1-8-18</u>
	<u>16-8-18</u>	<u>Admitted to</u>	<u>6th 19th</u>	<u>General Hospital</u>	<u>16-8-18</u>	<u>16-8-18</u>	<u>16-8-18</u>	<u>16-8-18</u>	<u>16-8-18</u>
	<u>6-9-18</u>	<u>Admitted to</u>	<u>6th 19th</u>	<u>General Hospital</u>	<u>6-9-18</u>	<u>6-9-18</u>	<u>6-9-18</u>	<u>6-9-18</u>	<u>6-9-18</u>
	<u>12-10-18</u>	<u>Admitted to</u>	<u>6th 19th</u>	<u>General Hospital</u>	<u>12-10-18</u>	<u>12-10-18</u>	<u>12-10-18</u>	<u>12-10-18</u>	<u>12-10-18</u>
Total Service forfeited as above.....					<u>Discharged Medically unfit 30-10-18</u>				
Total Service towards Engagement to <u>30-10-18</u> (date of discharge)					2 years <u>140</u> days				
Pension				



This Form is to be used in connection with Pamph. M. E. (1)
N. F. 1915

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of
aged

Elias Oldford

conducted at

B. L. B.

Date:

19
June 27/16

Recruiting Officer:

NO OF
TEST

FINDING

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13
- 14
- 15
- 16
- 17
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- 31
- 32
- 33
- 34
- 35
- 36
- 37
- 38
- 39

1 no
 2 no
 3 no
 4 no
 5 no
 6 no
 7 no
 8 yes
 9 eyes
 10 Pro - No
 11 n
 12 n
 13 n
 14 n
 15 n
 16 n
 17 n
 18 n
 19 n
 20 40 lb 49 st.
 21 n
 22 n
 23 n
 24 n
 25 n
 26 n
 27 n
 28 n
 29 n
 30 n
 31 n
 32 n
 33 no
 34 5'-6"
 35 146 lbs
 36 37-41"
 37 \$40 per month
 38 presents. Tobias Oldford
 39 none

W. W. Burden

2874

Signature of Medical Examiner: W. W. Burden, Lieut.

Signature of Applicant: [Handwritten initials]

E Oldford

C.R. 2874

AKO

R E M I N D E R

PASSED FOR INFORMATION	
BRANCH	NOTED BY
PAY LEDGERS	<i>Wth</i>
NOM. ROLL	<i>ast</i>
ALLOTMENTS	<i>—</i>
SEP ALLOC.	<i>—</i>
PENSIONS	<i>—</i>
RECORDS Ledgers Nom. Roll	<i>[Signature]</i>
POSTAL	<i>—</i>

Please initial all documents FIRST and this Sheet afterwards. Finally return to CENTRAL REGISTRY for filing.

2874

Y. [unclear]

b3 [unclear] on

Y. [unclear]

2

FORM K

No. 2409



3 / 1ST. NEWFOUNDLAND REGIMENT 11

ALLOTMENTS

Elias Oldford, Regl. No. *2874*

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and *60* 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 *August 1/6.*

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<i>2703</i>	<i>mother</i>	<i>Mrs Elizabeth Oldford</i>	<i>Banyans Cove B.B.</i>	<i>60</i>
<i>Commencing 1/9/16</i>				
				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.) *Charl. Anre Capt*
Officer Commanding Company
John
July 27 1916

(Sig.) *Elias Oldford*
(Rank) *PC*

WESTERN UNION

ANGLO-AMERICAN DIRECT UNITED STATES
CABLEGRAM



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

TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

E.F.M.

14/6/17.

TO MR HERBERT CHAULK,

BUNYANS COVE
BONAVISTA BAY (NEWFOUNDLAND).

PLEASE CABLE FIVE POUNDS 2874 OLDFORD NEWFOUNDLAND REGIMENT
CARE BANK MONTREAL LONDON.

E. OLDFORD.

CHARGE TO ACCOUNT OF 2874 PTE E. OLDFORD.

21
22

42 1/2

102

52 1/2

4-42 1/2

CHECKED.
G. R.
15/10/17.

PAY BANK OF CANADA
Date _____

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.

No 24
Vouch 390
Chq No 629934

Perham Down Camp
Ludgershall Bants
Aug 22/18

To the Chief Paymaster:-

Dear Sir:-

Would you
oblige me if any money would arrive
at Pay Office for me from Home would
you please keep it till
I call for it.

Yours Sincerely
2874 Pte Chalford. E.

629
26th Aug. 1918

1/11/18
RECEIVED
P.S.

2.927

Chief
THE REGIMENTAL PAYMASTER,
Newfoundland Contingents,
Victoria Street, S.W.1.



I beg to forward the attached application from No. 2874,

Pte. Oldford. Newfoundland Regiment,

for an advance of Pay £2-0-0

to be ~~sent to~~ handed to him.



[Handwritten signature]
£2-0-0 24/5/18
[Handwritten signature]
Receipt No. 7753
[Handwritten signature]

The King George Hospital,
Stamford Street, S.E. 1.

May 24th. 1918.

Major, R.A.M.C.,
Adjutant and Registrar
for Officer Commanding.



May 24

Sir

43 Ward
King George
Hospital
Stamford St
London E

Please furnish me the
hospital stamp as to
enable me to draw some
of my money from my office.



and Obliged

Yours sincerely

2874

W. E. Eldford

Newfoundland

FILE	BRANCH
INITIALS	

No. 21

Date 28/5/18 191

(1) To the Officer i/c Records,

58 Victoria St. W. (Station).

(2) The Officer Commanding, District
Newfoundland Regt.
Hazelton Barracks, Hazelton (Station).

(3) The Paymaster,
~~_____~~ (Station).

Regimental No. 2874

Rank and Name Pte Bedford G.

Regiment or Corps 1/ Newfoundland

has been granted a furlough from transferred to day to 3rd Aida G.P.

His address while on leave will be: Wanawana

I consider he is fit for ~~Duty.~~ Light duty.



W. B. King
Officer in charge _____ Hospital,
CAPT. R.A.M.C.
_____ (Station).

* Strike out that which is inapplicable.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the Office.



2874
Pte Claford.
R. Newfoundland P.S.

Pte Claford has permission
to draw the sum of
£1⁰⁰ from his Credit
subject to your approval.

Approved
S. C. Hall
Capt. M.D.

heard
2nd Lt. Claford
408 P

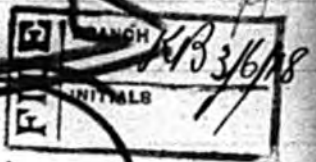


O.K. £1-0-0 l.f.b.
31/5 Recept No 7509

MB 31/5



2874 Oldford. C. Pte.
Rajal Newfoundland
Regt.



Please oblige by giving me
£1, (one pound) of my credit.

2874
Pl. C. Oldford
June 3rd 1918
approx
all
copy
JK

1-0-0
Receipt No 75451
3-JUN-1918

No. ¹⁰⁶²¹~~10455~~/7

NEWFOUNDLAND CONTINGENT

N.F.P./48.

Pay & Record Office,
58, Victoria Street,
London, S.W. 1,

To: Officer in Charge,
Military Hospital,
Rochester Row.

1st July 1918

With reference to request of (No.) 2874 (Rank) Pte.
(Name) E. Oldford Cheque No. 8272 for
£ 1:0:0 is enclosed for payment to this Soldier as may
be deemed fit.

Kindly complete Receipt Form on back of cheque before
presenting at a Bank.

Received £1-0-0
E. Oldford

Chief Paymaster & Officer i/c Records.

Admitted 28.5.18.

Only for use with Men returned from an Expeditionary Force or from Garrisons Abroad.

Army Form W. 3016.
(In Books of 200.)

No. _____ Date 11 June 1918.

(1) To the Officer i/c Records, 58 Victoria St. S.W. _____ (Station).

(2) The Officer Commanding, R. Med Coy.
Hagleydown, Winchester _____ (Station).

(3) The Paymaster, 58 Victoria St. _____ (Station).

Regimental No. 2874.

Rank and Name Plé. Oldford. E

Regiment or Corps 1st Roy. Med.

has been granted a (through from) W. 1st Regt. transferred on 11/6/18

His address while on leave will be: 15 - Military Hospital
Rochester Row.

I consider he is fit for*
* Strike out that which is inapplicable.
(a) Duty.
(b) Light Duty, and likely to be fit for Service Overseas within three months.
(c) Light Duty, and not likely to be fit for Service Overseas within three months or requiring special medical treatment.
(d) Service at home, but unlikely ever to be fit for Service Overseas.

Officer in charge W. 1st Regt. 7.11.18 Hospital,
3rd London _____
WANDSWORTH, S.W. (Station).

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office. In the case of men of the Royal Engineers two copies of A.F. W. 3016 will be sent to the Officer in charge R.E. Records and one to the Paymaster, instead of one copy to the Officer i/c Records, the Paymaster, and O.C. shown in the Schedule.

June 29, 1918

Military Hosp.
Rochester Row
Hard A 3

Newfoundland Pay Master

Dear Sir

Please forward
me \$ one pound of
my credit for necessary
comforts while in hospital

Yours sincerely
E. Oldford
Newfoundland Inf



2874

URGENT.
OFFICE

✓ 5994

Countersigned

Armstrong
Major R.A.M.C.
No. 0210

10621/T/2/7/18

10 40

M. F. 1-0-Shop

July 1st/18

PS.

10623
10620/7

Military

1st July

8

Rochester Row.

2874

Pte.

E. Oldford

1:0:0

prnt E. Oldford Military Hospital
no ~~74~~ ^{was} 74 A3
1st Royal H~~Q~~ ~~2~~ ~~Q~~
Regt London Dist



5692 E. Oldford

Countersigned

Armsstrong
Major R.M.C.
Registrar for
etc

OK

L-1-0-0 kept
756
18

Pay

WESTERN UNION

ANGLO-AMERICAN DIRECT UNITED STATES

CABLEGRAM



Prefix _____	Code _____	At _____	FOR STAMPS
WORDS <u>12</u>	CHARGE <u>2 1/2</u>	To _____ By _____	
VIA WESTERN UNION			THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.

8/6/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To EFM TOBIAS OLDFORD

BUNYANS COVE BONAVISTA BAY (Newfoundland)

CABLE FIFTEEN POUNDS THROUGH MILITIA

2874 OLDFORD

Handwritten: $17 \frac{1}{2}$
 $\frac{24}{6}$
 $\frac{30}{2/6}$

Stamp: CHARGED 11/7/18

Handwritten: $2/6$

CHARGED
 PAY BOOK 1st with
 Date 11/18 by STAS

Authorized.

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.

Military Hospital
Rochester Row
London

To Paymaster

Newfoundland Pay Office

Sir please oblige me
by sending me the sum
of £7 one pound of my credit
for the purpose of buying
necessary comforts while in
Hospital

Yours sincerely
E. Stoddard

no 2874

B. Gay



OK. = 1-0-0 h.c.

→ 2/11/18

Receipt No. 8266

MILITARY HOSPITAL.
ROCHESTER ROW, S.W. 1.

23 JUL 1918

Forwarded please

Amusing
Major Raine
Registrar for OC
The Hosp
Rochester Row

2/8/18

London G Hospital
Ward 3

Mr. [unclear]

Wandsworth Post

Pay Rent to
257th St. [unclear]
at 1 [unclear]
from my
fund of my [unclear]

3RD LONDON GENERAL HOSPITAL
No. _____
2 - AUG 1918
WANDSWORTH, S.W. 18.

257th St E Cliford
3 London G. Hospital
Ward 3
Wandsworth

BRAND
INITIALS
[Signature]

[Handwritten signature]

O.P. S.W. 18
\$1.00
2/8/18
Receipt no. 8408

Re-admitted 1-8-18

Only for use with Men returned from an Expeditionary Force or from Garrisons Abroad.

Army Form W. 3016. (In Books of 200.)

No. _____ Date 14/8/18

* (1) To the Officer in Charge of the Records 53 Victoria Street

* (2) The Officer Commanding Perham Barracks

* (3) The Paymaster 53 Victoria Street Station.

* Strike out that which is inapplicable.

Regimental No. 2874

Rank and Name Private Oldford E

Regiment or Corps R.F.C.

has been granted a furlough from Aug 4th to Aug 20th

His address while on leave will be 53 Victoria St
St

I consider he is fit for ~~II. COMMAND DEPOT.~~

* Strike out that which is inapplicable. ~~III. EMPLOYMENT~~

Officer in charge _____ Hospital.

W. W. WOODS
WINDSWORTH, S.W.

Four copies to be made, and one copy sent to each of the following: (1) The Officer in Charge of the Records, (2) The Officer Commanding, (3) The Paymaster, and (4) the Officer in Charge of the Hospital.

In the case of men of the Royal Flying Corps, Royal Engineers and Army Medical Corps, two copies of Army Form W. 3016 will be sent to the Officer in Charge of the Hospital, and one to the Paymaster, instead of one to each of the three above-named Officers.

11577/8

Officer Commanding,

Military Hospital,

18th, July 1918

Rochester Row, S. W.

Letter 14/7/18 (8412) from No. 2874, Pte. E. Oldford for approval or otherwise, please.

No. 2874

*MS
19/7/18*

No. 973

pay

ANGLO-AMERICAN

WESTERN UNION



DIRECT UNITED STATES

CABLEGRAM

Prefix		Code		At		For STAMPS		
WORDS		CHARGE		To		By		
14		2/12		VIA ANGLO.				THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.

2/8/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To EFM MRS T OLDFORD
BUNYANSCOVE BONAVIDA (Newfoundland)

PLEASE CABLE FIVE POUNDS THROUGH MINISTER MILITIA

OLDFORD ✓

charge a/c 2874

CHARGED
PAY BOOK
Date 7/8/18 by *W.R.*

28
7
35
2/11

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.

A B 64 Lod in France

No. 2874 Rank Pte. Name D. Oldford

Pay	F.A.	Wks	Total	N.P.P. 1/32
100	10		110	✓
Less Allotment			60	
Net Rate			50	

DEBITS	Date	£	s	d	CREDITS	Period		Days	Rate	£	s	d
						From	To					
Balance					Balance		15 ² / ₁₈					1 5 10 ✓
Acquittance Rolls		1	13	00 ✓	Pay @ Net Rate	16 ² / ₁₈	14 ² / ₁₈	180	50	90	00	18 9 10 ✓
Hospital Advances		1	14	9 ✓								
A.B. 64.					P. Allowance	14 ² / ₁₈	20 ² / ₁₈	7	2/1			14 7 ✓
P.&R.C. Payments		7	0	0 ✓								
How stop.		5	10	11 ✓								
				5 50 ✓								
Cash 85-21	14 ² / ₁₈	4	0	0 ✓	£ 4.6.2 ✓							

20.10.32 ✓

£15.18.8
5 5
16.4.1 ✓

[Signature]
14/8/18

EXTRACT OF TELEGRAM.

"Despatched 5/11/18, (1338):

"Military St. John's."

"Reference your telegram 31st October- Last Pay Certificate- September 20th-
"debit balance- 2874- Oldford- £1.3.1.

Synoptical."

AL
14¹¹/₁₈



LAST PAY CERTIFICATE

N.F.P./94

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 28/5/17.

Regt. No. 2874 Rank Pt. Name E. Deaford Unit R Med who was repatriated to hfd on 23/9/18. Authority _____ Cause _____

Draft No. 239/18

STATEMENT OF ACCOUNT

DR.		PARTICULARS					CR.				
		£	£	s	d	PARTICULARS					
PERIOD: From 7.9.18 To 28.9.18	Balance Dr. from <i>Plaf. 20/9/18</i>			12	5	Balance Cr. from					
	Allotment 22 days @ 60	13	20	1	2	Pay 22 days @ \$1.00			22	00	
	Cash Payments:			2	14	Field Allow 22 days @ \$1.10			2	20	
	6.9.18				10				24	20	
	12.9.18				10	Other Allowes days @ \$			4	19	
	20.9.18				10	Other Credits:				5	
	Other Debits:										
	Barrack Damage										
	Misc. Stoppage				2						
						6					
Total Debits			6	2	6	Total Credits			4	19	
Balance due by Paymaster						Balance due to Paymaster			1	3	
			6	2	6				6	2	

719/35
1660/162
15/10/18

C.S.
15/10/18

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of

(Place) _____ (Date) 191

Made up/Checked in accordance with information received in the Pay & Record Office London to 27/9/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

15/10 1918

Chief Paymaster & Officer i/c Records.

Oldford, Elias.

2874

Hay & Capt.

LAST PAY CERTIFICATE ORIGINAL

N.F.P./94

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 28/5/17.

Regtl No. 2874 Rank Pte Name E. Oldford. Unit Royal Nfld. Regt. who was Repatriated
to Newfoundland on 29/9/18 Authority _____ Cause _____

DR. STATEMENT OF ACCOUNT

DR.	PARTICULARS					£	s	d	CR.				
	£	s	d	£	s				d				
	Balance Dr. in <u>Accountant's Ledger</u>								Balance Cr. from				
	H. Coy. <u>30/8/18</u>												
	Allotment 22 days @ 60					13	20		Pay 22 days @ £ 1.00				
	Cash Payments:								Field Allowance 22 days @ £ .10				
	6-9-18								22 00				
	13-9-18								2 20				
	20-9-18								24 20				
	Other Debits:								Other Allowances days @ £				
	Barrack Damages.								Other Credits:				
	Misc. Stoppages.												
	Total Debits								Total Credits				
	Balance due by Paymaster								Balance due to Paymaster				
						6	2	6					
						6	2	6					

Pay Book

CHECKED
[Signature]
15/10/18

PERIOD: From 7-9-18 To 28-9-18

I have carefully examined this Statement of account and find it to be a correct extract from the Pay Book of

----- (Place) ----- (Date) 191

Made up/checked in accordance with information received in the Pay & Record Office London to 27/9/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,
15th October, 1918/191

[Signature]

Chief Paymaster & Officer i/c Records.

DUPLICATE
MAIL COPY

No. 15531

NEWFOUNDLAND

POSTED OCT 1918

P. 54

399

To: The Hon. the Minister of Militia,
St. John's,
Newfoundland.



MEMORANDUM OF STOPPAGES/STIPEND

MISC! STOPPAGES.

Pay & Record Office, London, S. W. 1.

No.	Rank & Name	Particulars and Authority	Pay
2874	Pte Oldford, E	Pay for loss 1 table Knife, Millbank Hosp. during month of September 1918. V7106	5

CHECKED
[Signature]
26/9/18.

Pay & Record Office,
83, Victoria Street,
London, S.W. 1.

26th, September 1918

Chief Quartermaster & Officer in Charge

and credited to Pay & Record Office, London, S. W. 1.

ORIGINAL TO BE KEPT IN THE OFFICE AND RETURNED INTACT TO CHIEF QUARTERMASTER & OFFICER IN CHARGE, NEWFOUNDLAND CONTINGENT, 58 VICTORIA STREET, LONDON, S.W. 1.

LAST PAY CERTIFICATE

DUPLICATE
MAIL COPY

N.F.P./94

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 28/5/17.

Regtl No. 2874 Rank Pte Name E. Oldford. Unit Royal Nfld. Regt. ^{11 OCT 1918} who was Repatriated
to Newfoundland on 29 9/ 18 Authority _____ Cause _____

DR. STATEMENT OF ACCOUNT

		PARTICULARS					PARTICULARS					CR.				
		£	s	d	£	s	d	£	s	d						
PERIOD: From <u>7-9-18</u> To <u>28-9-18</u>	Balance Dr. from <u>1st Pn Ledger</u>				12	5					Balance Cr. from					
	Alotment <u>22 days @ 60</u>				2	11					Pay <u>22 days @ \$ 1.00</u>	22	00			
	Cash Payments:	13	20		2	14	3				Field Allice <u>22 days @ \$.10</u>	2	20			
	<u>6-9-18</u>				10	0						24	20	4	19	5
	<u>13-9-18</u>				10	0				Other Allices <u>days @ \$</u>						
	<u>20-9-18</u>				10	0				Other Credits:						
	Other Debits:															
	<u>Barrack Damages.</u>						6									
	<u>Misc. Stoppages.</u>					2	5									
		Total Debits				6	2	6				Total Credits			4	19
	Balance due by Paymaster										Balance due to Paymaster			1	3	1
					6	2	6							6	2	6



I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of _____

(Place) _____ (Date) 1918

Made up/Checked in accordance with information received in the Pay & Record Office London to Comptrolr 18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

15th October, 1918.

Chief Paymaster & Officer i/c Records.



THE ROYAL NEWFOUNDLAND REGIMENT
HEADQUARTERS

St. John's, Newfoundland,

October 17th 1918

191

From Assistant Adjutant
Depot

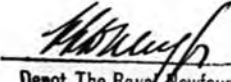
To Paymaster & Officer i/c Records.
Militia Dept.

2874, Pte. Oldford, E.

Above noted man has been recommended for discharge as permanently unfit, and Electric Treatment and Massage, by Medical Board, held on Wednesday, October 16th. I am sending him herewith for your attention, and necessary action, please, and have given him verbal instructions to report to the D.M.S. for his attention, after he has finished his business with you.

WFC

Copy for D.M.S.


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

2874

12th October,

6

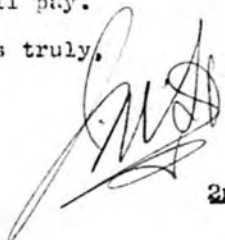
Mrs. E. Oldford,

Bunyan's Cove, B.B.

Dear Madam:-

Referring to your letter of October 8th 1916, to Hon. P. D. McGrath, I beg to state that you are laboring under a false impression with regard to your son's pay. The amount which you receive is the amount that he has allotted to you, namely 50g a day. Those people who receive more than you are those to whom their sons have allotted a larger amount. Your son himself receives ^{the} difference between the 50g a day allotted to you, and his full pay.

Yours truly,



2nd. Lieut. & D/Paymaster

See August
pay sheet.

Buynans Cove
Oct 5th /16

I should think my
boy should get the
full amt the same
as the others unless
there be some reason
for it. Now Sir if
you will please
let me know
why this is
You will
Greatly oblige
Yours truly
Mrs E. Olders

Mr. P. J. McGeath
St Johns
Dear Sir.

Please excuse me for
writing you, but could
you let me why it
is that my son Private
Charles Olders does not
get the full amt
of money due each
Soldier who goes to
the War. I understand
that the amt paid
was \$18.00 and some
odd cts. But I
advice that my
Order is \$16.50

1816

P.M.

2874th Oldford

Please issue cheque for Post
Discharge Pay for 60 days to above
soldiers.

W. T. Rudee

7/12/11 60 days @ 1.10 = 66.00 ^{1st Lt.}

Deduction for bonus
already paid.

14.90

\$ 51.10

1918 - 1919

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 15⁰⁰ -

Oct-12th - 1918

Received from the First Newfoundland Regiment
the sum of Fifteen $\frac{00}{100}$ Dollars.
on account ~~balance~~ of Pay. *C. Clifford*

Ch. No.	3885	Initials.....	<i>kw</i>
Pay Ledger.....	308	Initials.....	<i>wk</i>
Gen. Ledger.....		Initials.....	

Regtl. No. Rank

C. Clifford

No. 2874

06-
Rank Oldford E.

Name

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 51 $\frac{10}{100}$

7/12/18 19

Received from the First Newfoundland Regiment
the sum of Fifty One ———— $\frac{10}{100}$ Dollars.
on account of Pay.
balance

E. Goldford.

Ch. No. 6481	Initials. EW
Pay Ledger 308	Initials. W
Gen. Ledger.....	Initials.....

Regtl. No. 2874 Rank



No. 2874

Rank. Pte

Name

E. Oldford

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 34 $\frac{10}{100}$

January 28 1919

Received from the First Newfoundland Regiment
the sum of Thirty four $\frac{10}{100}$ Dollars.
on account of Pay. P. D. P.
balance

Ch. No. 8884	Initials. J.P.
Pay Ledger. 381	Initials. awl.
Gen. Ledger.....	Initials.....

Regtl. No. 2874 Bank *pte*

E. Bedford

No. 2874.

Rank

Pt

Name

Claford E

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 35⁰⁰

Feb 13 1919

Received from the First Newfoundland Regiment
the sum of Thirty Two — ⁰⁰/₁₀₀ Dollars.
~~on account~~
balance of Pay Clothing

Ch. No.	9713	Initials.	EW.
Pay Ledger.	381	Initials.	WN
Gen. Ledger.		Initials.	

Regtl. No.

2874

Rank

C. A. Goldford

No. 2874 Rank R.

Name O. J. E.

756/A/3603.

Officer Commanding,
2nd Battn. Royal Newfoundland Regiment,
Hazeley Down Camp, Winchester.

The undermentioned man has been classified by the Standing Medical Board of this Depot as an unsuitable case for treatment at a Command Depot.

He will leave this Depot on Tuesday, and be granted three days' leave, reporting to you on the 6th instant. This leave has been granted to him as being marked 'II Command Depot' upon discharge from Hospital, he was only granted 7 days' leave, and had he been a suitable case for treatment at a Command Depot he would have had 7 days' leave on discharge from this Depot. The 3 days' is therefore given to make up the 10 days' leave which he would have had on discharge from Hospital had he not been marked for Command Depot.

Transfer documents will be forwarded in due course.

2874

Pte. Oldford E.

.?. Battn. P. N. F. L. D.

Perham Down Camp,
Andover.
2nd September 1918.

M. S. S. S.

Major,
Commanding, Southern Command Depot.

A 2874

October 17th 1918

From Assistant Adjutant
Depot

To Paymaster & Officer i/c Records.
Militia Dept.

3874, Pte. Olaford, E.

Above noted man has been recommended for discharge as permanently unfit, and Electric Treatment and Massage, by Medical Board, held on Wednesday, October 16th. I am sending him herewith for your attention, and necessary action, please, and have given him verbal instructions to report to the D.M.S. for his attention, after he has finished his business with you.

WFC

Copy for D.M.S.

Form 8

N **foundland Postal Telegraphs**

2874 *Oldford*

Office Stamp and Date

P. **SERVICE MESSAGE**

FEB 15 1911

Time rec. by Time sent by

From

To

Postal Casualty Clerk
Portlandford notices
will forward by
tomorrow's mail -
your message date
to Oldford Bunyan Cove

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 J. R. Bennett Address _____

Line Number	Rcd	By	Sent	Check
		J. R. Bennett		

Dated February 15, 1917.

To Mr. Tobias Oldford,

Bunyan's Cove, B.B.

Regret to inform you that Record Office, London, officially reports No. 2874, Private Elias Oldford, has been admitted to Wandsworth suffering from gunshot wound in the wrist.

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

J. R. BENNETT,

Colonial Secretary.

FOR TYPEWRITER

N

COPY OF CODE TELEGRAM TO SYNOPTICAL, LONDON.

June 19, 1917.

Relatives anxious for news of 3365 Harris
 1286 Young What is address of Report by
 telegraph present condition of 2328 Bursey
 2361 Hallern 446 Motty 47 Madigan 2874
Oldford 320 Green

COLONIAL SECRETARY.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

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

(NOT TRANSMITTED)

Frederick M. Shickling
Frederick M. Shickling

Signature of Sender _____

Address _____

Line Number	Rcd	By	Sent	by	Check

Dated

June 23, 1917

To

Mr. Tobias Oldford,

Bunyan's Cove, B.B.

Replying to my enquiry Record Office London today reports Number twentyeight seventyfour Private Elias Oldford now on furlough

COLONIAL SECRETARY

Bunyan's Cove
11
Dec 13 1917

34
0

To Mr. R. A. Squires
Colonial Secretary

Dear Sir:—

I had a
message from my son Pte
Elias Oldford to day,
saying he was going to
France again, he has
been wounded ever since
February, had his arm
broken. The last letter
I had from him, in October
he just came out of Hospital
then, and I cannot see
how it is that thus can
get home with flesh wounds
would you please try

and let me know more
particulars about it. Dear
Sir we cannot understand
what he is going to
France again for, please
answer as quick as
possible and let me
know,

I remain

yours truly

Mrs Tobias Oldford
Bungay Cove
B. Bay.

Oldford's number is

2874.

I would like for him to
come home now.

18th December, 1917.

Dear Madam,

I am in receipt of your letter of the 13th instant, and note what you say with respect to your son No. 2374, Private Elias Oldford, who is being again drafted to France after discharge from Hospital.

As regards the return of wounded men to the firing line, I can only say that this is of course a matter which is regulated entirely by the Regimental Authorities in England, and so far as I am aware a definite course of procedure is invariably followed.

I do not think it is correct that a man upon discharge from Hospital is rushed over to France for further participation in the fighting, because after discharge from Hospital a Soldier is always given a certain amount of leave, and is subsequently drafted to the Depot for light duties until such time as he is sufficiently recovered to pass the medical board. Unless his condition is then such as to warrant it, I do not think it would be possible for him to be drafted to the Front.

As regards the matter of your son obtaining leave to return home, I can only say that this is entirely in the hands of the Commanding Officer, and to him your son should apply for the necessary furlough.

Yours faithfully,

Mrs. Tobias Oldford,
Bunyan's Cove, B.B.

Colonial Secretary.

NEWFOUNDLAND POSTAL TELEGRAPHS.

Counter No. _____

Cable Connection with all the World

C.R. 2874



All Messages Sent are Subject to the Following Conditions:

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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 Militia

Line Number	Rcd	By	Sent	by	Check

Dated April 20th, 1918

To Tobias Olaford, Bunyan's Cove, B.S.

Regret to inform you that Record Office, London, officially reports No. 2874, Private alias Olaford at King George Hospital B.S.W. chest right arm severe

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

J.R. Bennett

Minister of Militia.

Acting

FOR TYPEWRITER

3 answers cov
ANSWERED
G.B.
JUL 1 8 18918

P. I. Rendell

Dear Sir,

I am sorry that I have
to Reske to you to see
where you can return my
Coy home private Elias Clifford
No 2874 have been over
there this last two years
and have been wounded
the second time I would
like for you to try and
get him home because
he are the only help.

We had I think it is
time for him to have
sell home and let some
of these Trappers young men
whats are walken around
here and laugh at us
what have got them over
them fighting for them
let some of them take
his place because I think
we have done his but
for me and country,
its in pretty hard on
us be so well please and
do the best you can
please to answer this

I remaine your truly
Mrs Tobias Oldford
Kumians Cove 7673

C.R. 2874

July 10th 1918.

Mrs. Tobias Oldford,
Bunyans Cove, B. B.

Dear Madam:

I beg to acknowledge receipt of your letter of the 4th inst., in which you request that your son, #2874 Pte. Elias Oldford, be returned to you, he having done two years Active Service, and been twice wounded. I may say that we have wired the Authorities on the other side, making application on behalf of your son, and asking that his case may be given favourable consideration.

Upon receipt of a reply from them, we shall again communicate with you.

Yours faithfully,

Captain,
for Chief Staff Officer.

Naval and Military Convalescent Hospital.

C.R. 2874

St. Johns, Dec 7th 1918.

Dear Col Reuben.

2874 is Plt Oldford states that
he has Post-discharge pay due.
him - but as he is in hospital
he is unable to get it without any
permission - As he is getting
leave to spend Xmas at home.
I think he might receive part or
the whole of amount due.

Yours faithfully

W. Parsons.

U.S. Naval Conv. Hospital


COPY.

This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. <u>2874</u>	Army Rank <u>Private</u>
Name <u>Oldford Elias</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
Corps <u>ROYAL NEWFOUNDLAND REGIMENT.</u>	
Battalion, Battery, Company, Depot, &c. _____ <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)</small>	
Date of discharge <u>October 30th 1918</u>	
Place of discharge <u>St. John's, Nfld.</u>	
1. <u>Description at the time of discharge.</u>	
Age <u>20</u> years <u>8</u> months Height <u>5</u> feet <u>6</u> inches Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins. Complexion <u>fair</u> Eyes <u>brown</u> Hair <u>dark</u> Trade <u>Fisher man</u> Intended place of residence { <u>Bunyas Cove</u> (To be given as fully as practicable) { <u>B.P.</u>	Descriptive marks. <u>Two scars left wrist</u> <u>scars right arm and chest</u> 
2. The above-named man is discharged in consequence of <u>being no longer musically fit for war service on account of wounds received in action</u>	
<small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small>	
3. Military character:—	
4. Character awarded in accordance with King's Regulations:—	
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.	
Initials of Commanding Officer.	
Army Form B. 2088 has been issued to*	

18
77
31
70
30
120

To be filled in on the soldier quitting the Colours.

* Strike out if not applicable.

[OVER.]

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

{ _____

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 _____ Bn. _____ 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 _____ E. S. Edford (Signature of Soldier.)

(Date) 13/11/18 _____ Widewell Coy (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 -
E. Oldford

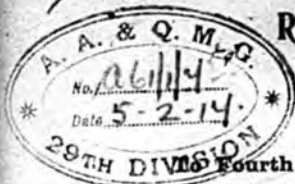
Witness W. Newbury Coy.

12th
Statements of witnesses
to be pinned here at
back.

REPORT ON SELF-INFLICTED WOUNDS.

(To be made by O.C. Unit).

HEADQUARTERS,
88th INFANTRY BDE.



Fourth Army "A" (through 58th Brigade and 29th)

(N.B.—No separate forwarding minute is necessary).

Number, Rank, Name and Unit of man wounded.	(a) 2574 Pte. E. OLDFORD (b) 736 Pte. J. CRANE	Date of Casualty. Newfoundland Regt 4. 2. 17.
Nature, Location, and Severity of Wound. (N.B.—Field Ambulance to be notified at once if wound is believed to be self-inflicted).	(a) Bomb wound multiple. (b) Bomb wound head	
Circumstances of the case giving particulars as to how, where and when the casualty occurred. Any facts showing negligence or intention to wound should be stated here. Statements of witnesses should be recorded separately, but attached to this form. (For instructions as to evidence see back).	(a) was ordered to dig out some bombs that were frozen in the mud near bullet, a bomb was touched with entrenching implement and exploded. Pte Oldford heard the bomb working & tried to get round the hut but was too late. (b) happened to walk round the corner of the hut as bomb exploded.	
Opinion of O.C. Unit as to whether the wound was caused (a) Wilfully; (b) Negligently; (c) Accidentally, i.e., no blame attaching to the man; and remarks if any.	I consider the wounds of above two men purely accidental & attach no blame to them J. Forbes Robertson, Lt. Col. 4. 2. 17. 1916. Commanding 1 st Newfoundland Regt	
Opinion of Brigadier and orders to disciplinary action (N.B.—Field Ambulance to be notified at once of Brigadier's decision).	accidental. disciplinary action not necessary. J. P. Leahy, Brigadier-General, Feb 5 th 1917. Commanding 29 th Brigade.	
Orders and remarks (if any) by Divnl. Commander.	I do not consider this a self-inflicted wound: the man was doing his duty. W. J. Williams, Brigadier 6 th Feb 1917. Commanding 29 th Division.	

(Further space for remarks at back).

COPY

Casualty Form—Active Service.

Regiment or Corps ROYAL NEWFOUNDLAND REGIMENT

Rank S/C Surname Oldford Christian Name E.
 Religion Meth. Age on Enlistment 20 years — months
 Enlisted (a) at St. John's Terms of Service (a) Duration Service reckons from (a) 9.5.16
 Date of promotion to present rank..... Date of appointment to lance rank.....
 Extended {.....} Re-engaged {.....} Qualification (b).....
 or Corps Trade and rate.....
 Occupation Seaman Sgd. Jm. March Major Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked ...		3.2.18	
		Disembarked..		6.2.18	
		<u>Joined Battalion</u>		22.2.18	
		<u>Wounded in Action</u>		13.4.18	<u>B. 213 22/4/18</u>
	<u>57 F. A.</u>	<u>Ad. Sw. Chest Arms Trans to 10 CCS.</u>		13.4.18	<u>E.D. 164 14/4/18</u>
	<u>55 Gen Hosp.</u>	<u>Boulogne</u>		14/4/18	<u>H.A. 22018</u>
	<u>H/5 Pieter-d-Bornick Trans to England</u>			18.4.18	<u>N. 3083</u>
		<u>Sgd. W. F. Filgate</u>			
		<u>for Lt Col.</u>			
		<u>O/C No 1 Inf. Section</u>			
		<u>G.H.Q. 3rd Echelon</u>			

(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, etc. W. 8527—M3258 1906m 7/17 (2055) C. P. & S., Ltd. Forms B. 103 B. 103A. [P.T.O.]

COPY.

Army Form B. 103.

Regimental Number... 2874

Casualty Form—Active Service.

Regiment or Corps... ROYAL NEWFOUNDLAND REGIMENT.

Rank... P6 Surname... Oldford Christian Name... Lucas
 Religion... Evangelical Age on Enlistment... 19 years... 3 months
 Enlisted (a)... at home Terms of Service (a)... Duration Service reckons from (a)... 13.6.16
 Date of promotion to present rank... Date of appointment to lance rank...
 Extended { } Re-engaged { } Qualification (b)...
 or Corps.Trade and rate...
 Occupation... Signature of Officer...



Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 96, 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. 96, or other official documents.
Date	From whom received				
			Embarked... <u>St. Leonards</u>	<u>30.11.16</u>	
			Disembarked... <u>Rouen</u>	<u>1.12.16</u>	
	<u>Wrist</u>	<u>joined Battalion</u>	<u>France</u>	<u>12.12.16</u>	<u>P6 213</u>
		<u>with</u>	<u>Batt.</u>	<u>23.1.17</u>	
	<u>517 A.</u>	<u>Adm. G. W. L. Wrist + the 1st Acc.</u>	<u>Cherbourg C.C.S.</u>	<u>4.2.17</u>	<u>85.9821</u>
<u>H/S</u>	<u>Essentially</u>	<u>Castle Down to England</u>	<u>via 4th Division</u>	<u>11.2.17</u>	<u>W 3083</u>
		<u>Off. H. Burchell Capt</u>			
		<u>for 61/100 + Regular Infantry Section</u>			
		<u>11.19.17</u>			

(e) 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.
 (f) Signaller, Shoeing-Smith, &c. W. 5527—M2006 10000 7/12 (2620) C. P. & S., Ltd. Forms B./103 B./104. (P.Y.O.)

Casualty Form—Active Service.

Regiment or Corps Royal Newfoundland

B

Rank Private Surname Oldford Christian Name D. W.

Religion Methodist Age on Enlistment 20 years — months.

Enlisted (a) 1st Feb Terms of Service (a) Enlist Service reckons from (a) 9-1-16

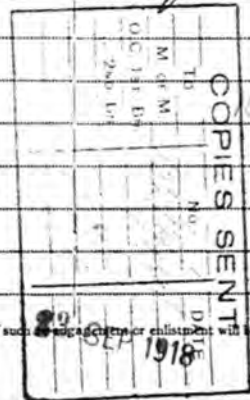
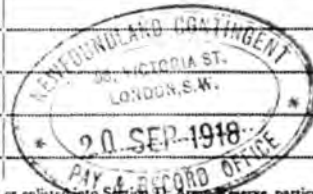
Date of promotion to present rank _____ Date of appointment to lance rank _____

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

Seaman (P)

J. W. Macdonald 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 ...	<u>3 FEB 1918</u>	
			Disembarked...	<u>6 FEB 1918</u>	
			Wounded in Action		
	<u>579a</u>	<u>as per Chest's blue trans</u>		<u>10-6-05</u>	<u>13/4/18 B 213 14/8</u>
	<u>55 Cap. H.P.</u>			<u>14/4/18</u>	<u>Ed. 164 14/4/18</u>
		<u>Transferred to England</u>		<u>14/4/18</u>	<u>RA 22018</u>



(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, Sholing-Smith, &c.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
No. 1 Wing Southern Command Depot Perham Down nr. Andover Hants.	<i>Joined</i>			20.9.18.	180.80.21.8.18.
	<i>Posted 2nd R. Newfoundland R. Winchester</i>			6.9.18.	180.91.3.9.18.
	<i>Unavailable for Command Depot</i>				

L.

No. 1 Wing Southern Command Depot
Perham Down nr. Andover Hants.

Casualty Form—Active Service.

Regiment or Corps *Newfoundland*.....

Rank *O/C*..... Surname *Oldford*..... Christian Name *Walter Elias*.....

Religion *Methodist*..... Age on Enlistment *19*..... years..... months

Enlisted (*at St. John's*) Terms of Service (*a*) *Duration*..... Service reckons from (*a*) *1896*.....

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

Extended {.....} Re-engaged {.....} Qualification (b) *.....
or Corps Trade and Rate *RECORD OFFICE*.....

Occupation..... *Chaplain* Signature of Officer.



Date	Report From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.21, 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.21, Army Form A.36, or other official documents.
			Embarked <i>Shampton</i>	<i>22.7.17</i>	
			Disembarked... <i>Rouen</i>	<i>24.7.17</i>	
			Joined Battalion <i>.....</i>		
<i>26.7.17.</i>	<i>79 I.B.D.</i>	<i>Classified "P.B." by Medical Board</i>	<i>Rouen</i>	<i>26.7.17</i>	<i>Tom Hall</i>
	<i>do</i>	<i>Transferred to England</i>		<i>7.8.17</i>	<i>Auth. M.T.S. 1858/297.</i>



Salvage
Major
O. 1/c No. 1 Reg. Infantry Section
G. H. O. 3rd Echelon.

COPIES SENT
TO
M.G.M.
O.C. 1st Lt.
2ND BN.
DATE
23 SEP 1917

COPY

Casualty Form—Active Service.

Regiment or Corps... ROYAL NEWFOUNDLAND REGIMENT
 Rank... Pt. 6 Surname... Aldford Christian Name... G.
 Religion... Meth Age on Enlistment... 19 years... months
 Enlisted (a)... St. Johns Terms of Service (a)... Duration Service reckons from (a)... 25.4.16
 Date of promotion to present rank... Date of appointment to lance rank...
 Extended { } Re-engaged { } Qualification (b)...
 or Corps Trade and rate...
 Occupation... Off. A Kaley Capt. 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 ... <u>St. John's</u>	<u>27.7.17</u>	
			Disembarked... <u>Rouen</u>	<u>24.7.17</u>	
			<u>Toronto</u> <u>Batta</u>		
<u>26.7.17</u>	<u>3rd F.B. Co.</u>	<u>Classified P. B. by Medical Board</u>	<u>Rouen</u>		<u>Auth. R. U. G.</u>
	<u>-R.O.-</u>	<u>trans. to England</u>		<u>7.8.18</u>	<u>1858/178</u>

(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. 8527—M2008 1600s 7/17 (2622) C. P. & L. Ltd. Forms B, 103 N/1659. I.P.T.O.

Casualty Form—Active Service.

Regimental Number **C.R. 2874**



Regiment or Corps 2/1 Newfoundland Reg.
 Rank pte Surname Oldford Christian Name Clive **2170**
 Religion C of E. Age on Enlistment 19 years 3 months.
 Enlisted (a) St John's Terms of Service (a) duration Service reckons from (a) 13/6/16
 Date of promotion to present rank _____ Date of appointment to lance rank _____
 Extended { } Re-engaged { } Qualification (b) _____
 or Corps Trade and Rate _____

Signature of Officer i/c Records.

Date	Report From whom received	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
		Embarked S'hampton Embarked ...		30 NOV 1916	
		Disembarked Rouen Disembarked ...		1-DEC 1916	
	<u>Unit</u>	<u>Joined Battalion</u>	<u>France</u>	<u>12/2/16</u>	<u>B213</u>
	<u>57 FA.</u>	<u>Adm. Gvt. & Unit & Signal Coy</u>	<u>With BATT 28. INF</u>	<u>4/2/17</u>	<u>ED 9821</u>
	<u>Grantully Co</u>	<u>Invalided to Eng. ex Aust. G. H. Rouen</u>		<u>11/2/17</u>	<u>W 3083</u>



W Barshell CAPTAIN.
 i/c Officer i/c No. 1 Regular Infantry Section
 General Headquarters, 3rd Echelon.

(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, Shooting-Smith, &c.

Medical Report on an Invalid.

Station Stuyvesant Club.
Date 16.9.18

- 1. Unit Royal West Regt.
- 2. Regimental No. 2874
- 3. Rank Pte.
- 4. Name OXFORD, Elias.
- 5. Age last birthday 24 yrs.
- 6. Enlisted { on 12 June 1916
{ at Stuyvesant Club.
- 7. Former Trade } Furberman
or Occupation }
- 7a. If with previous service in Army, state—
(a) Former Unit;
(b) Regimental No.; na.
(c) Date of Discharge;
(d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

Saw Right Arm.

COPIES SENT		DATE
No.		
M. OF M.	<u>15272</u>	
O.R. 1ST BTL.		
2ND BN.		
		<u>23 SEP 1918</u>

Statement of Case.

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

- 9. Date of origin of disability. 13 April 1918.
- 10. Place of origin of disability. Almentier.
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.
As state that he was wounded in right upper arm with a bullet. Says sees no entrance wound. Paralysis of muscles of hand & collection of fingers. Was in 3rd London General Hospital on the occasion the sent to Command Depot. from which returned to unaccountable. On joining depot refused message treatment for arm.
- 12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
(a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
wounded in active service.
na.
na.
(b) constitutional or hereditary, and not aggravated by service during the present war.
(c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

The right hand is blue. The fingers are contracted can be easily straightened possibly. Wasting of the nerves and hypertrophy of eminences. Unable to carry out his life. Recommended massage and electrical treatment and exercise as deep as when he refused; therefore recommended for discharge.

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

14. If the disability is an injury, was it caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

na.

15. Was a Court of Inquiry held on the injury?

- If so—(a) When?
- (b) Where?
- (c) Opinion?

na.

16. Was an operation performed? If so, what?

Yes. Excision.

17. If not, was an operation advised and declined?

na.

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

na.

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

na.

20. Do you recommend—
 (a) Discharge as permanently unfit, or
 (b) Change to England?

Discharge as permanently unfit for military service.
 M.K. / Cap. Ross.

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except †

Station _____

Officer in charge of Hospital.

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.

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



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 *Oldford Elias*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *2874*
 Intended address *Bungay's Cove B. T.*
 Height on discharge *5* Feet *6*.
 Color of hair on discharge *Dark*
 Complexion *Fair*
 Color of eyes *Brown*
 Descriptive Marks *Wounds both arm & chest.*
 Figure on discharge *medium*
 Christian name of Father *Johas*
 Christian name of Mother *Elizabeth*
 Wife's maiden name in full
 Date and place of marriage
 Christian names of children
 Place and date of soldier's birth. *Bungay's Cove B. T. Feb. 28. 1895.*
 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) *E. Oldford*

(Rank) *Plt*

Station *Sgt*

Date *Oct 15/18*

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.

Boherty Capt
 Medical Officer, Hospital,
 Unit, or Command Depot.

Station *Sgt*

Date *Oct 15/18.*

Medical Report on an Invalid.

Station Haystack Down Camp
 Date 16/9/18

- | | |
|--|--|
| <p>1. Unit <u>Royal Nfld</u>
 2. Regimental No. <u>2874</u>
 3. Rank <u>Pte</u>
 4. Name <u>Oldford Elias</u>
 5. Age last birthday <u>20</u>
 6. Enlisted { on <u>St. John's</u>
 { at <u>12/June 116</u></p> | <p>7. Former Trade } <u>Fisherman</u>
 or Occupation }
 7A. If with previous service in Army, state—
 (a) Former Unit;
 (b) Regimental No.; <u>Na</u>
 (c) Date of Discharge;
 (d) Cause of Discharge.</p> |
|--|--|

8. Disability in respect of which invaliding is Proposed.
 (Other disabilities should be reported upon in answer to question No. 19).

G. S. W.
Right arm

Statement of Case.

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

9. Date of origin of disability. Armentieres
10. Place of origin of disability. 13/4/18
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.
- He states that he was wounded in right upper arm with a bullet large scars over entrance an exit wounds paralysis of muscles of hand with contraction of fingers was in 3rd Lon. Gen. Hosp. on three occasions the sent to Command Depot from which he returned as unscathed on joining Depot refused massage treatment for arm.
12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
- | | |
|--|---|
| <p>(a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).</p> <p>(b) constitutional or hereditary, and not aggravated by service during the present war.</p> <p>(c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.</p> | <p><u>wounded on Active Service</u></p> <p><u>Na</u></p> <p><u>Na</u></p> |
|--|---|

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

They right hand is blue fingers are contractive can be easily straightened possibly wasting of thumb and index. Manual embleces unfit to carry and use rifle recommended massage and electrical treatment at depot which he refused therefore recommended for discharge.

14. If the disability is an injury, was it caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

Y

15. Was a Court of Inquiry held on the injury?

If so—(a) When?

(b) Where?

(c) Opinion?

na

16. Was an operation performed? If so, what?

yes

17. If not, was an operation advised and declined?

na

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

na

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

na

20. Do you recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

Discharge as permanently unfit for military service

J.M.K. Capt. Rame

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except †

Station _____

Officer in charge of Hospital.

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.

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

Opinion of the Medical Board.

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

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

(iii.) The rates of pension vary directly according to whether the disability is, (a) caused or aggravated by service in the present war, (b) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

(iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

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

1. (a.) State whether the disability is clearly attributable to—

(i.) Service during the present war;

(ii.) Climate;

(iii.) Ordinary military service;

(iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or

(v.) Whether it is constitutional or hereditary.

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

*Also two scars, left wrist, loss of power & feeling in little finger
yes*

Y.S.W.

22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which?

23. Is the disability permanent?

no

24. If not permanent, how soon do the Board recommend re-examination?

25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.

80% 6 months

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

27. Do the Board recommend—

(a) Discharge as permanently unfit, or

(b) Change to England?

yes

28. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic training) is desirable in a—

(a) Sanatorium;

(b) Hospital;

(c) Convalescent home;

(d) Asylum; or

(e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

would derive benefit from elec. treatment & massage

29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended?

30. Does the man require the constant attendance of another person?

Signatures:—

Station St John's

Date Oct 16/18

W. Fraser President.

J. Sinclair Tailor Members.

J. Paterson Major Members.

Approved

Station _____

Date _____

Cluny Mackintosh Major
Administrative Medical Officer.



Medical Report on an Invalid.

Station Hazely Down Camp
 Date 16/9/18

1. Unit Royal N F Lk
 2. Regimental No. 2874
 3. Rank Plt

7. Former Trade } Fisherman
 or Occupation }

4. Name Colclford Elias

7A. If with previous service in Army, state—

(a) Former Unit;
 (b) Regimental No.;

5. Age last birthday 20

(c) Date of Discharge;

6. Enlisted { on St Johns N F
 at 12/ June/16

(d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

Eg. S W.
Right arm



Statement of Case.

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

9. Date of origin of disability. Armenians
10. Place of origin of disability. 13/ April/18
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.
he states that he was wounded in right upper arm with a bullet large scars over entrance an exit wounds paralysis of muscles of hand with contraction of fingers was in 3rd of Sep Hosp on three occasions then sent to command depot from which he returned as invalid on joining depot refused massage treatment for arm
wounded on active service
N 4
N 4
12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
 (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
 (b) constitutional or hereditary, and not aggravated by service during the present war.
 (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

the right hand is blue fingers are contractive can be easily straightened passively washing of theis and Hypo Themas. amblyopia unfit. to carry and use rifle recommended massage and electrical treatment at depot which he refused therefore recommended for discharge

14. If the disability is an injury, was it caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

15. Was a Court of Inquiry held on the injury?

- If so—
- (a) When?
 - (b) Where?
 - (c) Opinion?

N A

16. Was an operation performed? If so, what?

yes

17. If not, was an operation advised and declined?

N A

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

N A

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

col d

20. Do you recommend—
(a) Discharge as permanently unfit, or
(b) Change to England?

discharge as permanently unfit for military service

MR. Cap Bone

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except †

Station _____

Officer in charge of Hospital.

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.

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

Opinion of the Medical Board.

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

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

(iii.) *The rates of pension vary directly according to whether the disability is, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

(iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

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

Also two scars left from loss of power & feeling in little finger.

1. (a.) State whether the disability is clearly attributable to—

- (i.) Service during the present war;
- (ii.) Climate;
- (iii.) Ordinary military service;
- (iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or
- (v.) Whether it is constitutional or hereditary.

Yes

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

G.S.N.

22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which?

No

23. Is the disability permanent?

24. If not permanent, how soon do the Board recommend re-examination?

25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.

80% 6 months

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

27. Do the Board recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

yes

28. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic training) is desirable in a—

- (a) Sanatorium;
- (b) Hospital;
- (c) Convalescent home;
- (d) Asylum; or
- (e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

Would benefit from elec. treatment & massage

29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended?

30. Does the man require the constant attendance of another person?

Signatures:—
 Station *Sophus*
 Date *Oct 16/18*

[Signature] President.
[Signature] Members.
[Signature] Members.

Approved
 Station
 Date



[Signature] Administrative Medical Officer.

To be used for recruits enlisting direct into the Regular Army only.
 Army Form B. 178^a to be used for Special Reserve recruits
 and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Oldford Christian Name Elias

TABLE I.—GENERAL TABLE.

Birthplace ... Parish _____ County _____

Examined ... { on 12th day of June 1916
 at St. Johns Inf.

Declared Age ... years _____ days.

Trade or Occupation ... _____

Height ... feet, _____ inches.

Weight ... lbs. _____

Chest Measurement { Girth when fully Expanded _____ inches.
 Range of Expansion _____ inches.

Physical Development ... _____

Vaccination Marks { Arm ... _____ Right _____ Left _____
 Number _____

When Vaccinated ... _____

Vision ... { R.E.—V= _____
 L.E.—V= _____

(a) Marks indicating congenital peculiarities or previous disease ... { (a) _____

(b) Slight defects but not sufficient to cause rejection ... { (b) _____

Approved by (Signature) _____
 (Rank) _____ Medical Officer.

Enlisted ... { at _____
 on _____ day of _____ 191 _____

Corps.	Regtl. No.
ROYAL NEWFOUNDLAND REGIMENT.	2874

Transferred to ... _____

Became non-effective by _____
 on _____ day of _____ 191 _____

(Signature) _____
 (Rank) _____



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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3 London Gen Wandsworth	12	2	17	11	6	17	Gsw VIII H L. Alna	119	Wounded in France 14.9.17 Abscess formation Operation removed Abscess & Dressings Disposed + Furlough.	Ed. G. Hall Capt. L.M.S.
Mil Hosp. Dept.	21	10	17	27	10	17	Gsw	6	A small Abscess had formed on back of left Wrist at site of the wound; this was opened under ethyl. Chloride & rapidly healed up.	Ed. M. Johnston Capt. R.M.S.
King Geo. Hosp. Stamford St. S.S.	18	4	18	28	5	18	Gsw. Rt Chest & Rt Arm	140	wounded 13.11.18. Best superficial entry point wounds. Excised unable to move little finger. Necrosis of skin surrounding wd. No penetration signs. No Chest Symptoms Transf. to 3rd London Gen. Hosp. Improving	Ed. T. D. Drake-Brockman M. Col. L.M.S.
3 Lon Gen Wandsworth	28	5	18	11	6	18	Ditto Gonorrhoea		10.6.18 Urthral discharge appeared trans to Rochester Row Mil Hospital	Ed. G. Hall Capt. L.M.S.
Mil Hospital Rochester Row	11	6	18	27	7	18	Gonorrhoea	147	Irrigation Potassium Permanganate Wounds in Chest and Arm healed	Ed. A. Allport Capt. R.M.S.
2 Lon Gen. Ladbroke	27	7	18	1	8	18	Ed. Gsw.	5	Sent here for disposal	Ed. G. Hall Capt. L.M.S.
3 Lon Gen. Wandsworth	1	8	18	14	8	18	Ditto	13	re-admitted for further treatment	Ed. G. Hall Capt. L.M.S.

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

Date	Brief details, and signature
25.7.16	1st Inoculation L.P.
1.8.16	2nd " L.P.
7.8.16	3rd " L.P.
20/8/16	vacc L.P.
6.10.16	Dental Treatment Complete H.F.W.
13.11.16	Fit for Foreign Service H.F.W.
Commonwealth Report.	Arrived—22.8.18
	Discharged—6.9.18
	Category—Unsuitable
11.9.18	Boarded Hyde Down Camp. Marked "E" Caty.
	(Auth. Mason. Letter)
	Sgd J.S.P. Knight
	Capt Same.

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

110

30
73

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

MEDICAL HISTORY

Surname Oldford OF Christian Name Chas

Table 1.—GENERAL TABLE.

Birthplace:—Parish..... County.....

	SPECIAL RESERVE.		REGULAR ARMY.																
Examined	on	12 day of June 1916	on	day of 191															
	at	St Johns 167	at	LONDON, S.W.															
Declared Age...		19 years 3 mos days		years days															
Trade or Occupation...		Highwayman																	
Height		5 feet 6 inches		feet inches															
Weight		146 lbs.		lbs.															
Chest Measurement	Girth when fully expanded...	41 inches	41 inches	41 inches															
		Range of expansion..			4 inches	4 inches													
Physical Development...																			
Vaccination Marks	Arm		Right																
	Number		Left																
When Vaccinated			Right																
Vision	R.E.—V=	6/9	R.E.—V=																
	L.E.—V=	6/6	L.E.—V=																
(a) Marks indicating congenital peculiarities or previous disease	<table border="1"> <thead> <tr> <th colspan="3">COPIES SENT</th> </tr> <tr> <th>To</th> <th>No.</th> <th>DATE (a)</th> </tr> </thead> <tbody> <tr> <td>M. G. M.</td> <td>1544</td> <td>23 SEP 1918</td> </tr> <tr> <td>O.C. 1st Div.</td> <td></td> <td></td> </tr> <tr> <td>2nd Lt.</td> <td></td> <td></td> </tr> </tbody> </table>		COPIES SENT			To	No.	DATE (a)	M. G. M.	1544	23 SEP 1918	O.C. 1st Div.			2nd Lt.				
COPIES SENT																			
To	No.	DATE (a)																	
M. G. M.	1544	23 SEP 1918																	
O.C. 1st Div.																			
2nd Lt.																			
(b) Slight defects but not sufficient to Cause Rejection																			
Approved by (Signature)	<i>Samuel Peterson</i>																		
(Rank)	Major																		
	Medical Officer.		Medical Officer.																
Enlisted	at	St Johns	at																
	on	12 day of June 1916	on	day of 191															
Joined on Enlistment	Corps.	1 st Newfed Regt	Corps.																
	Regtl. No.	2874	Regtl. No.																
Transferred to..	ROYAL NEWFOUNDLAND REGIMENT.																		
Became non-effective by.	on	day of 191	on	day of 191															
(Signature)																			
(Rank)																			

Table II.—Only for admission to hospital or to the sick list in case of Warrent 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 cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3 rd LONDON GENERAL HOSPITAL WANDSWORTH.							G. S. W. VIII 4 X Ulma		Wounded in France 4. 2. 17 Abscess formation & formation abscess sequela. Incised (superficial) Furlough.	G. C. Hall Capt. Med.
MILITARY HOSPITAL AYR	21	10	17	27	10	17	G. S. W.	6	a small abscess had formed on back of left wrist at site of the wound: this was opened under ethyl chloride & rapidly healed up.	W. J. M. M. Capt. Med.
	18	4	18	28	5	18	G. S. W. Rt Chest & Rt arm	10	Wounded. 13-4-18. Chest superficial entry & exit wounds. Excised. Unable to move little finger. Necrosis of skin surrounding wd. No penetration signs. No chest symptoms. Transf. to 3 rd London General Hospital.	
3 rd London General Hospital Wandsworth	28	5	18	11	6	18	ditto Gun wound	14	Improving 10. 6. 18. Urthral discharge appeared Transferred to Rochester Row. Mil. Hosp.	Lt. Colonel J. M. S. G. C. Hall Capt. Med.
Misty Hill Rochester Row	11	6	18	27	7	18	Zonitiform	17	Organization of mucous membrane, & excise wounds in chest & arm treated.	W. J. M. M.
2 nd London General Hospital St. Mark's Coll. King's Road, Chelsea S.W.	27	7	18	1	8	18	G. S. W.	5	Sent here for disposal.	W. J. M. M. Warrant Officer
3 rd LONDON GENERAL HOSPITAL WANDSWORTH.	1	8	18	14	8	18	ditto	13	Re-admitted for further treatment	G. C. Hall Capt. Med.

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	
25-7-16	1 st Inoculation	J.F.D. J.P.
1-8-16	2 nd "	J.P.
7-8-16	3 rd "	J.P.
26/8/16	Dose.	J.P.
6-10-16	Dental treatment complete. <i>H.F.W.</i>	
13-11-16	Fit. for Foreign Service. <i>H.F.W.</i>	
15-9-18	Boarded Hazelton Com. marked E category. <i>(authority 110711 letter)</i> <i>111111</i> Cat. Recd. <small>COMMAND DEPT.</small>	
		22 8 18
		6 9 18
		unsuitable.

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

Reg. No. 2874 Rank Pte Name Oldford G.

Attested Address Bunyan Lane

Allotment Allottee

Date of Allotment Returned from Overseas 12-10-18

Embarked for Overseas Cause Discharge

16-10-18

See list - Permanently unfit -
Electric treatment and Massage

Report on Wounds or other Injuries, received otherwise than in Action.

114
Gen. No.
4369.

36275

Certificate of Medical Officer.

No. 2874 P. OLDFORD, E. 1/ Newfoundland

was admitted to hospital on the 4-2-17 suffering from G.S.W. Wrist (L) Thigh (L)

†Here insert "trivial" or "serious."

‡Here insert "will" or "will not."

*Here insert "claims" or "does not claim."

The disability is of a † serious nature, and in all probability ‡ will interfere with his future efficiency as a soldier.

*He claims that he was in the performance of military duty at the time of the accident.

(If the soldier makes no claim that he was on duty at the time, the certificate below should be signed by him.)

Station 34 CCS

Date 4-2-17

Medical Officer in Charge.

Certificate to be signed by soldier.

I, _____ hereby declare that the injury sustained by me on the _____ did not occur while I was in the performance of military duty.

{ Soldier's
Signature.

Station _____

{ Signature
of Medical
Officer.

Date _____

Certificate of Commanding Officer.

(This certificate will be completed only in cases of trivial injury where the soldier claims to have been injured while on duty.)

†Here insert "occurred" or "did not occur."

I certify that the injury to the above-named soldier † _____ while he was in the performance of military duty.

‡ If on duty, state (a) The date of the injury. (b) The place where it occurred. (c) The nature of the duty. (d) Whether the soldier was in any way to blame.

The soldier has been so informed.

Station _____

Date _____

Commanding _____

This Army Form will be attached to the Medical History Sheet, on which it will be recorded whether the soldier was on duty, and whether he was to blame.

Report on Wounds or other Injuries, otherwise than in Action.



114
Gen. No. 4269

Certificate of Medical Officer.

No. 2274 Pte. Clifford T. 1st R Fls. 29th Div
was admitted to hospital on the 4-2-17 suffering
from Lion shot wound left wrist & left thigh

The disability is of a † Serious nature, and in all probability
† will interfere with his future efficiency as a soldier.

*He Claims that he was in the performance of military
duty at the time of the accident.

(If the soldier makes no claim that he was on duty at the time, the certificate below should be signed by him.)

Station XIV Corps M.D.S. W.S. Gouman
Date 4-2-17 Carpet Room
Medical Officer in Charge.

Certificate to be signed by soldier.

I, _____ hereby declare that the
injury sustained by me on the _____ did not occur
while I was in the performance of military duty.

Station _____
Date _____
} Soldier's
} Signatures.
} Signature
} of Medical
} Officer.

Certificate of Commanding Officer.

(This certificate will be completed only in cases of trivial injury where the soldier claims to have been injured while on duty.)

I certify that the injury to the above-named soldier † _____
while he was in the performance of military duty.

† Here insert
"occurred" or
"did not occur."

† If on duty, state
(a) The date of the
injury.
(b) The place where
it occurred.
(c) The nature of
the duty.
(d) Whether the
soldier was in any
way to blame.

The soldier has been so informed.

Station _____
Date _____ Commanding _____

This Army Form will be attached to the Medical History Sheet, on which it will be recorded whether the soldier was on duty, and whether he was to blame.



3 1ST. NEWFOUNDLAND REGIMENT 11

ALLOTMENTS

I, Elias Oldfors, Regl. No. 2874

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and 60 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 August 1/16.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>2703</u>	<u>mother</u>	<u>Mrs Elizabeth Oldfors</u>	<u>Bunyas Ave B.B.</u>	<u>60</u>

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.) Charl. Arne Capt
 Officer Commanding
Co Company
Adolphus
July 27 1916

(Sig.) Elias Oldfors
 (Rank) Private

✓
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, M.Y. & RECORD OFFICE, ST. JOHN'S.

- Christian name *Elias*..... 2. Surname *Oldford*.....
3. Rank *Private*..... 4. Regt. No. *2874*.....
5. Address in full to which future payments of gratuity are to be forwarded..... *Bungay's Cove*
Boisvert's Bay
6. Date of enlistment in the Regiment..... *13th June 1916*
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..... *Not applicable*
12. Give total length of time which you served on active service, whether in Nfld, or Overseas..... *From June 13th 1916 to October 31st 1918*

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.....

\$85.90 Post pay:

Sergeant Newbury.

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.....

None

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.....

No

Oct. 30th 1918

Disability caused by wounds

20. Did you at any time serve on the front in an actual theatre of war? If so give particulars of places, and dates of such service.....

From Oct. 21st 1916 to April 17th 1918 in France & Belgium (except about two months in hospital in England recovering from wounds.

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

Yes

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

Before Board of Enquiry: their decision was 'Yes' known to me.

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:

Elias Oldford

Place of Residence:

Bunyan's Cove, Bonaville, Que.

Declared before me at:

Samuel Lohuis

This *thirteenth* day of *March* 1918.

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

*John Jewell
Barrister at Law
&
Notary Public*

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	<i>5.00</i>	<i>350.00</i>
.....
.....

Certified Correct.

Paymaster.

Handwritten mark

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.
 (65) W.017/2124 1000m 6/10s 53 58
 Forms B. 121 29.

Regiment of *Newfoundland*

Number of Sheet _____

Signature of O. C. Company _____

Regimental Number and Name No. <i>2874</i> <i>Oldford Pte</i>		Enlistment Age on _____ years _____ months		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
Place and Date of Enlistment <i>St Johns</i> <i>13-6-16</i>		Religion			
Period of with Colours <i>2 1/2</i> years. with Reserve <i>3 1/2</i> years.		Place of Birth			
Joined _____ Date _____	Joined _____ Date _____	Joined _____ Date _____	Joined _____ Date _____		

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order discharging with trial	By whom awarded	REMARKS
<i>Barry Camp</i>	<i>12/7/17</i>	<i>Pte</i>		<i>Absent from latrine until 10.30 pm</i>	<i>Sgt Butcher</i>	<i>4 days S.C.</i>	<i>13/7/17</i>	<i>Capt H. H. Mulry</i>	<i>H.M.</i>
<i>Barrs Camp</i>	<i>26/8/17</i>	<i>"</i>		<i>Absent from 8.30 am Church Parade</i>	<i>Pte Kelly</i>	<i>2 days C.C.</i>	<i>27/8/17</i>	<i>S. Lewis Pte</i>	<i>S.S.</i>
<i>Dundee</i>	<i>14/9/17</i>	<i>"</i>		<i>Absent from Latrine 14/9/17 until 11 a.m. 16/9/17</i>	<i>Pte Daws</i>	<i>2 days C.C.</i>	<i>14/9/17</i>	<i>Pte Lewis</i>	<i>Penalty 2 days pay by R.W. S.S.</i>
<i>Chapel</i>	<i>24/10/17</i>	<i>"</i>	<i>1</i>	<i>Absent in Chapel S.S. about 9.15 p.m.</i>	<i>Company</i>	<i>14 days detention</i>	<i>27/10/17</i>	<i>Major Mearns</i>	<i>S.S.</i>
<i>Leburns</i>	<i>1-12-17</i>	<i>"</i>		<i>Absent from latrine until Reveille 2/12/17</i>	<i>Pte Taylor</i>	<i>4 days C.C.</i>	<i>2/12/17</i>	<i>Pte J. Seymour</i>	<i>2nd days pay.</i>
				<i>Medically Unfit</i>	<i>St Johns</i>	<i>30 10/18</i>			



COPIES SENT
 TO
 M of M
 O.C. 1st Bn
 2nd Bn
 SEP 1918

To be carried over

Army Form B. 121.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121

W. P. Collier & Sons Ltd., Printers, Old Bailey, E.C.

Forms
B. 121.
29.



Number of Sheets

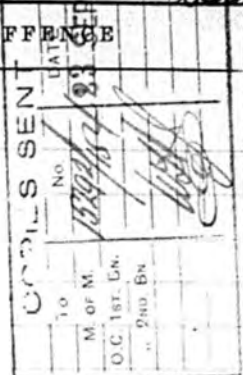
Regiment of

Newfoundland

Signature of O. C. Company

J. J. J. J. J.
Capl

Regimental Number and Name <i>2674 Oldford Co.</i>		Enlistment Age on <i>19</i> years <i>3</i> months		Trade <i>Fisher</i>		Good Conduct Badges, Service Pay or Proficiency Pay	
Place and Date of Enlistment <i>Depot 5/9/16</i>		Place of Birth <i>Bunyas Cove</i>		Religion <i>Methodist</i>		 	
Joined _____ Date _____	Joined _____ Date _____	Period of { with Colours _____ years.	Period of { with Reserve _____ years.	Place of Birth			

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
									

NEWFOUNDLAND CONTINGENT
22 VICTORIA ST.
LONDON, S.W.
30 SEP 1916
PAY & RECORD OFFICE

To be carried over

Army Form B. 121.



REGIMENTAL CONDUCT SHEET.

Regiment of ROYAL NEWFOUNDLAND REGIMENT

Number of sheets } _____
 (in words) } _____
 Signature of C.O. or Adjutant } _____

Regimental Number) 2874 Oldford Co.
 and Name)

Attested _____ 19 _____ Joined _____ 19 _____

Place	Date of Offence	Rank	Case of Discipline	OFFENCE	Names of Witnesses	PUNISHMENT awarded	Date of award, or of order disposing with trial	By whom	Date of Commencement	Date of Expiration	REMARKS
Barry Camp.	12.7.17	P6.		Absent from tattoo until 10 ³⁰ P.M.	Sgt Butcher	4 days C.C.	13.7.17	Capt A. S. Kelly			P.M.
-R.D.-	26.8.17	"		Absent from 8.30 am Check Parade	Pvt. Tilley	2 days C.C.	27.8.17	Sgt. Tressie			G.I.
Rundeel	12.9.17	"		Absent from tattoo 15.9.17 until 11 P.M. 16.9.17	Pvt. Davos	2 days C.C.	16.9.17	Sgt. Tressie			Forfeit 2 days pay by Rev. G.I.
Aylr.	24.11.17	"	I	Drunk in High St. About 9.15. P.M.	Documentary	48 hrs. detention	27.11.17	Major March			G.I.
Sturbum	1.12.17			Absent from tattoo until Reveille 2/12/17	Sgt Taylor	4 days C.C.	2/12/17	P. F. Seymour			Forfeit 1 days pay.

To be carried over

No. 2874 Name *Bedford E.* Sqn., Batty., or Company } # Corps ROYAL NEW ZEALAND INFANTRY
 Date of enlistment } Date of last entry in Company Conduct Sheet } 1/12/17 No. and date of last drunk } 24/11/17 Period not reckoning towards freedom from extra fine } Sheet No. Signature O.C. Company, etc. } *Off. Fredk. G.* G.C. Badges } Service or Proficiency Pay } Character

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

Army Form B. 122

No. 2874 Name *Edford Elias*

Sqn., Batty.,
or Company } *C*

Corps

Date of
enlistment } *2/14/16*

G.C.
Badges } *1*

Service or
Proficiency Pay } *Good*

Date of last entry in
Company Conduct Sheet } *None*

No. and date
of last drunk } *None*

Period not reckoning towards
freedom from extra fine } *None*

Sheet No.

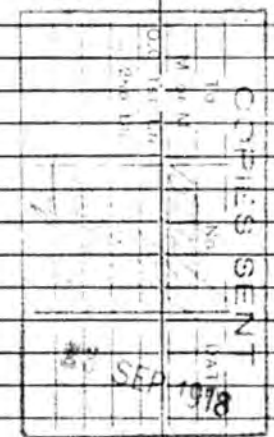
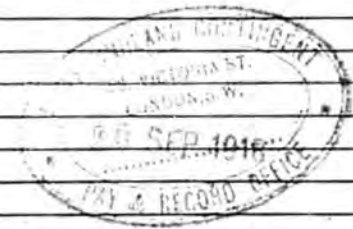
Signature O.C.
Company, etc. } *J. Robertson Lt.*

Character

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>was awarded to England</i>					
				<i>W. P. J.</i>					

No. 2874 Name *Oldford, Elias* Sqn., Batty., or Company } *C A* Corps *2/1 hfd Regt.* Date of enlistment } *29/4/16* G.C. Badges } Service or Proficiency Pay }
 Date of last entry in Company Conduct Sheet } *Clean* No. and date of last drunk } Period not reckoning towards freedom from extra fine } Sheet No. *1* Signature O.C. Company, etc. } *Robertson* Character *good*

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>Invalided to England</i>	<i>11.2.17 H.G.</i>				



Discontinued
Feb 6/17
R.J.D.

Army Form B, 199

No. *2874* Name

Oldford

Sqn., Batty.,
or Company } *H*

Corps *Newfoundland*

Date of enlistment

G.C. Badges

Service or Proficiency Pay

Date of last entry in Company Conduct Sheet } *1/12/17*

No. and date of last drunk } *24/11/17*

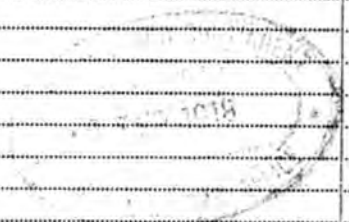
Period not reckoning towards freedom from extra fine

Sheet No.

Signature O.C. Company, etc. } *[Signature]*

Character

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



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[Handwritten signature]

[Handwritten notes]

ARMY FORM B. 122

C.R. 2874

Extract from Daily Orders Part 11 Unit The Nfld.

Regt. Station G.H.Q., 3rd Echelon, Aug.11/17

2874 Pte. E. Oldford.

Classified P.B. by Medical Beard at 29.L.B.D. Rounse

26/7/17

2874

Extract from Daily Orders Part 11 Unit the New-
foundland Regt. Station G.H.Q., 3rd Echelon,
Aug. 11th, 1917.

2874 Pte. E. Oldford.

Transferred to England "P.B." 7/8/17. Auth. D.A.G.,
1858/272 24/7/16.

C.R. 2874
Bunyan's Cove
Oct ^{13 03} 2 1919

Mr. A. E. Hickman.

Minister of Militia

Dear Sir:

As I see
by the Papers
that the general
service riband has
been given to
officers and men
of the Royal
h F I D regt
has I am entitle
to one of these
ribands I would
wish to have it
send to me
as I am not
in the place
that I can call
for it

I remain
yours Truly

Ex. Pte. Elias O. Edford
regt. no 2874
discharge badge no 896

sent out 6/10/19
W.P.

C.R. 2874

Extract from Division I Roll of Names. Regt. Draft No. 14
Sgt. Carl Lee Depot, 51st Div. U.S.A. Embarked Southampton,
30-11-16.

2874 Pte. E. Oldford.

C.R. 2874

Extract of Casualties from Pay & Record Office, London.

Dated Aug. 15th/17.

The following man classified "P.B." by authority of Medical Board held at Rouen, 26/7/17, was transferred to England 7/8/17, reported at 58, Victoria Street 11/8/17, and was transferred to the Depot same date.

#2874, Pte/ Oldford.

Authority:
For transfer to England.
D.A.G. 1858/272, 24/7/16
See 3rd Echelon Order No. 36c of 11/8/17.

C.R. 2874

Extract from Code Telegram received from Major Timewell,
dated February 14, 1917.

#2874 Pte. Oxford

At Wandsworth G.S.W. Wrist

Bungay Cove.
July 11th/17

~~Lobias~~

To. Hon Mr. Bennett.
Colonial Secty.
St Johns.

34

My dear Sir.

As I have not heard from my son Pli Elias Oloford. who is now wounded, and has been in Hospital Wansworth for over three months I am a bit anxious to know how he is. So I shall be very pleased if you can find out. how he is faring. Please let me know immediately

Yr oblige. Yours truly
Lobias Oloford.

I have not heard from him for two months.

C.R. 2874

Extract from Nominal Roll Draft (All Ranks) to 1st Bn.
B/E.F. Embarked Southampton.

2874 Pte. E. Oldford.

30-11-16.

C.R. 2874

Extract from Nominal Roll Embarized St. John's for Overseas,
18, 8/16.

2874 E. Oldford.

C.R. 2874

Extract from Nominal Roll of Draft No. 27, embarked Southampton 22/7/17
from 2a/1st Newfoundland Regiment Barry Camp, to 1/1st Newfoundland
Regiment B.E.F.

2874 Pte. Oldford, E.

MP

C.R. 2874

Extract from Nominal Roll, Draft No. 56, 300 Other Ranks
from 2nd., (Reserve) Battn. Royal Newfoundland Regiment
and proceeded to join the 1st., Battalion Royal Nfld.,
Regt., E. E. F., Embarked Southampton 4/2/18.

#2874 Pte. E. Oldford.

C.R. 2874

Extract of Casualties from Pay and Record Office, London dated
12th June 1918.

The undermentioned was transferred from the 3rd London General
Hospital, 11/6/18, to Rochester Row Military Hospital, S.W.

2874 Pte. E. Oldford.

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

C.R. 2874

Extract from Casualties received from P.&R.O.London, (No date given)

#2874 Pte E Olford.

Was transferred from the King George Hospital, to the 3rd. London
General Hospital, on 28/5/18.

C.R. 2874

Extract from Daily Orders part 11, from Unit The Royal
WFLd. Regt. in the field, dated May 4th, 1918.

#2874 Pte. D. Oldford.

Invalided to United Kingdom (W) April 18, 1918.

C.R. 2874

Extract from Casualties received from P & R office
London, dated 3-8-18.

The Undermentioned was transferred from 2nd to the 3rd.
London G. Hospital on 1/8/18

2874 Pte. Oldford, E.

C.R. 2874

Elias Oldford was attested for General Service
with the NEWFOUNDLAND REGIMENT on ...June 13th 1916
Regimental No. 2874 was allotted to pte E. Oldford

AUTHORITY:

Record Officer

Dept. of Militia;

March 25th. 1919.

C.R.

2874

Extract from Telegram to Military St. John's from Synoptical, London
dated 5th. November 1918.

Debit balance 2874 Oldford $\text{£}1, 3, 1$

C.R. 2874

Extract from DAILY ORDERS, Part 11, Unit: The Royal Newfoundland
Regiment, dated November 2nd, 1918.

STRENGTH DECREASES.

2874 Pte. E. Oldford.

Having been found Medically Unfit is discharged from 30/10/18.

C.R. 2874

Extract from Daily Orders part 11 Depot,

Extract from Daily Orders part 11, Dated Nov. 2nd., 1918 No. 196. Depot.

#2874 Pte. E. Oldford.

Having been found medically UnFit ~~xxx~~ is discharged from

30/10/18.

C.R. 2874

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

2874 Pte. E. Oldford,

Discharged 30-10-18, Medically unfit

C.R. 2874

Official Report.

Extract from ~~LET~~ to O.C. Depot from Director of Medical Services
dated October 17th 1918.

At a Medical Board held on Wednesday, October 16th., the
following was a finding:-

2874 Pte. E. Oldford.

Recommended Discharge - Permanently Unfit.

Electric treatment and massage.

C.R. 2874

Extract from Daily Orders Part 11 Unit The Royal Wfld. Regt.,
St. John's, Oct 14, 1918.

The undernoted Man returned from Overseas and reported at
Depot from 12-10-18.

2874 Pte. E. Oldford.

C.R. 2874

Extract from Telegram from Synoptical
London dated September 25th 1918.

2874 Olaford.

The above mentioned embarked by Government
Transport September 23rd. at London
arriving at Montreal,

BEING SENT HOME FOR DISCHARGE.

C.R. 2874

Extract from Orders By Lt. Col. B.J. Barton, D.S.O.
Commanding 2nd Bn. Royal Nfld. Regt., 6-9-18.

The following having reported back from the 1st Battn. as
taken on the strength and posted to "H" Company.

2874 Pte. Oldford E.

52

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.....

C.R. 2874

Extract from Orders By. Lt.Col.J.B. Barton, D.S.M. Commanding
2nd Bn. Royal Mfld.Regt.17-8-18.

The following having reported back from the 1st Bn. is posted
to "H" Company.

2854 Pte. Olford.

from 16-8-18.

C.R. 2874

Extract from Casualties received from P & R Office London,
Aug.15-18.

The Undermentioned man was dsicharged from 3rd London General
Hospital S.W. on the 14-8-18 and granted furlough to 20-8-18
(in accordance with A.C.I.819 of 1918):

2874 Pte.Oldford,E. 11 Commd Depot.

Authority:-

A.F.W.3016 from 3rd L.G.H.

2874

RECEIPT.

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. 2874... NAME... *John Smith*

DATE. *9. 22*
PLACE. *Humanis. etc.*

RECEIPT FOR ISSUE OF
RIBAND OF BRITISH WAR MEDAL-1914-1919.

C.R. 2874

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

Elias. Oldford.
NAME.....

(Date) Oct, 8, 1919
.....

(Place) Bunyans Cove
.....

Please ^{sign} ~~sign~~ & return to Dept. of Militia.

C.R. 2874
Millertown

Aprth 25 1920

Milita. Department

I have been inform
that there has
been a issue of
a victory ripon
if i am intitle
to the ripon please
send it to my
home Bunyan's Cove
Bonavinta Bay

I remain

your Truly
Elias Oldford

No. 2874.

This space to be left blank
for the Chelsea Number.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. <u>2874</u>	Army Rank <u>Private</u>															
Name <u>Oldford Elias</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>																
Corps <u>ROYAL NEWFOUNDLAND REGIMENT.</u>																
Battalion, Battery, Company, Depot, &c. _____ <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)</small>																
Date of discharge _____																
Place of discharge _____																
1. <u>Description at the time of discharge.</u>																
Age <u>19</u> years <u>3</u> months Height <u>5</u> feet <u>6</u> inches Chest measure- ment { girth when fully expanded _____ ins. range of expansion _____ ins. Complexion _____ Eyes _____ Hair _____ Trade _____ Intended place of residence { _____ (To be given as fully as practicable) _____	Descriptive marks. <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td colspan="3" style="text-align:center;">COPIES SENT</td></tr> <tr><td>To</td><td>No</td><td>DATE</td></tr> <tr><td>M or M</td><td><u>1500/17</u></td><td></td></tr> <tr><td>O.C. The Co.</td><td></td><td></td></tr> <tr><td>at 2nd</td><td><u>W.H.</u></td><td></td></tr> </table>	COPIES SENT			To	No	DATE	M or M	<u>1500/17</u>		O.C. The Co.			at 2nd	<u>W.H.</u>	
COPIES SENT																
To	No	DATE														
M or M	<u>1500/17</u>															
O.C. The Co.																
at 2nd	<u>W.H.</u>															
<p>(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)</p>																
2. The above-named man is discharged in consequence of _____																
<p>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</p>																
3. Military character :— _____																
4. Character awarded in accordance with King's Regulations :—																
_____ _____ _____ _____ _____ _____ _____																
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.																
Initials of Commanding Officer. _____																
Army Form B. 2088 has been issued to* _____																

To be filled in on the soldier quitting the Colours.

* Strike out if not applicable.

DEPARTMENT OF VETERANS AFFAIRS

P.A.

To ● Copy for H.O. File

Ottawa, Ont.
Date April 12, 1967.....

Attention of

NAME OLDFORD, Elias

SERVICE 2874 ROY.NFLD C.P.C. No. 260311
NUMBER REGT? WWI W.V.A. No.NAVY
ARMY X
R.C.A.F.

The DEPARTMENT has received information from

.....S.P.M.E.....C.P.C..St. John's Nfld. April 6, 1967.....
(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death.....March 29, 1967.....
Cause of Death.....
Place of Death.....St. John's General Hospital.....Name and Address of next of kin (if known).....
.....Copies to: W.S.R.
V. I.
~~X.P.A.K.~~
~~X.D.R.~~
H.O.

} Destroy form if advice of death already received.

E. C. Richards
for
Chief, Central Registry