



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 1130

Name in full Herbert Rendell Parsons Age 19

Address 7 Hayward Avenue

Married Single Height 5' 6" Weight 115

Color Fair Hair Dark Brown Eyes Brown

Other distinguishing marks Scar below left knee cap

Nearest relative Mrs Elizabeth

Address 7 Hayward Avenue

Dependents none

Occupation Clerk Present Wage \$30.00 per month

Previous service _____

Decorations _____

General Remarks _____

Date of Enlistment February 3rd 1915

I, Herbert Rendell Parsons, do sincerely promise and swear that I will be faithful and bear true allegiance to His Majesty, and that I will faithfully serve His Majesty in any place where I may be needed (or in the Colony of Newfoundland, as the case may be), against all His enemies and opposers whatsoever, according to the condition of my service.

Declared before me this 24th day of February 1915
W. H. [Signature]
Ant Enslupe Capt

DESCRIPTION ON ENLISTMENT.

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

Reg. No. 1180

Name Herbert Randall Parsons
 Apparent age 19 years months. Height 5 feet 6 inches.
 Chest measurement { Girth when fully expanded inches.
 { Range of expansion inches.
 Distinctive marks Color: Fair, Hair: Dark Brown, Eyes: Brown
 Other distinguishing marks: Scar below left knee cap

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Mrs. Elizabeth Parsons, 7 Hayward Ave., St. Johns
 | Relationship

Particulars as to Marriage.

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.
 (c) Present address. (d) Initials of Officer verifying entry.

(a)	(b)	(c)	(d)

Particulars as to Children.

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES.

Corps in which served	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed for fixing the rate of pension		Service in Re-served 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>3/2/15</u>									
Joined at <u>St. John's</u> on <u>3rd February '15</u>									
		<u>Intervie</u>		<u>5/11/15</u>					
Total Service forfeited as above									
Total Service towards Engagement to (date of discharge) years days									
" " " Pension " (") "									

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Reg. No. 1130

Name Herbert Randall Parsons

Apparent age 19 years months. Height 5 feet 6 inches.

Chest measurement { Girth when fully expanded inches.
Range of expansion inches.

Distinctive marks Color: Fair, Hair: Dark Brown, Eyes: Brown

Other distinguishing marks: Scar below left knee cap

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Mrs. Elizabeth Parsons, 7 Hayward Ave., St. Johns

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(a) Christian and Surname of Woman to whom married and whether spinster or widow. (b) Place and date of marriage.
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Particulars as to Children.

Christian Names	Date and Place of Birth

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					years	days	years	days	
Service towards limited engagement reckons from <u>3/2/15</u>									
Joined at <u>St. John's</u> on <u>3rd February '15</u>									
<u>Embarked S.S. Stephens St John's 20-15</u>		<u>Embarked H.M.S. 8</u>	<u>Disembarked</u>	<u>Rep. and entrained for Cairo 31-8-15</u>	<u>Embarked for Gallipoli 13-9-15</u>				
<u>Landed Solva Bay north of 19-10-15</u>		<u>Admitted Hosp</u>	<u>halls 15-11-15</u>	<u>Admitted H.S. Helobonam</u>					
<u>Cos the Expressa 29-10-15</u>		<u>Admitted Ward</u>	<u>20-12-15</u>	<u>Admitted Hosp</u>	<u>24-2-16</u>	<u>Invalid to Cayland 10-13</u>			
<u>Embarked Southampton 16-7-16</u>		<u>Overboard</u>	<u>Cause</u>	<u>17-7-16</u>	<u>James Bath</u>	<u>24-7-16</u>			
<u>With Battalion 23-1-17</u>		<u>Admitted 2 CCS. D.A.H.</u>	<u>17-2-17</u>	<u>James Bath</u>	<u>23-2-17</u>				
<u>Transferred to Cayland 14-3-17</u>		<u>Admitted</u>	<u>14-3-17</u>	<u>Admitted</u>	<u>7-4-18</u>				
<u>March 10 17-3-17</u>		<u>for duty</u>	<u>R.K.F.O. 26-1-18</u>	<u>Admitted</u>	<u>Wardmouth 7-4-18</u>				
<u>Ret for duty discharged from Hospital</u>		<u>for duty</u>	<u>R.K.F.O. 25-6-18</u>	<u>Admitted</u>	<u>Wardmouth 7-4-18</u>				
<u>Retained for duty at depot</u>		<u>at depot</u>	<u>at depot</u>	<u>at depot</u>	<u>at depot</u>				
<u>at depot</u>		<u>at depot</u>	<u>at depot</u>	<u>at depot</u>	<u>at depot</u>				
<u>at depot</u>		<u>at depot</u>	<u>at depot</u>	<u>at depot</u>	<u>at depot</u>				
Total Service forfeited as above									
Total Service towards Engagement to <u>28-4-19</u> (date of discharge)					<u>4</u> years <u>85</u> days				
" " " Pension " " " " " " " " " "									

Demobilized St. John's 28-4-1919

H. R. Parsons.

C.R. 1130

P.R.O.

No. _____

Date Feb 21st 1916.

(1) To the Officer i/c Records,

58 Victoria St

Westminster

(Station.)



(2) The Officer Commanding,

Newfoundland Contingent

Ayr

(Station.)

(3) The Paymaster,

58 Victoria St

Westminster

(Station.)

Regimental No. 1130

Rank and Name Pte Parsons H R.

Regiment or Corps 1st Newfoundlands

has been granted a furlough from Feb 21st to April 2nd

His address while on leave will be:— Convalescent Entrench
6 negative tests complete
58 Victoria St

Westminster

This man has been furnished with a warrant to Victoria & given an advance of £1. (one pound)

I consider he is fit for*

Duty.	}	Duty.
		Light duty.

A. Hope Gosse Capt. R.A.M.C.T.

Officer in charge _____ Registrar R.A.M.C.T.
3rd London General Hospital,
WANDSWORTH, S. (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.

58, Victoria Street,
13/12/18.

Officer Commanding,
2nd. Battalion,
Royal Newfoundland Regiment.

Sir,-

I was in charge of the Pay Ledger Section on Thursday, December 12th. inst. at 2 p.m. when Private Parsons returned from lunch. He was drunk and unable to perform his duties. I reported his condition to Capt. Marshall on his return to his room at 4.00 p.m.

The above statements are corroborated by me.

W. P. Hunt

A. Wiley

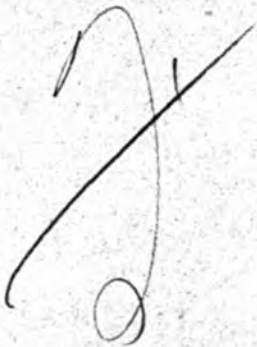
1130

CHARGE.

ROYAL NEWFOUNDLAND REGIMENT.

BATTERY, SQUADRON, TROOP OR COMPANY.

CHARGE against No. 1130, PTE. H. PARSONS.

Place.	Date of Offence.	Offence.	Names of witnesses.	Punishment awarded.	By whom awarded.
58, Victoria Street London.	<u>1918</u> Dec 12	DRUNKENNESS. 		DOCUMENTARY.	

NEWFOUNDLAND CONTINGENT.

CHIEF PAYMASTER & OFFICER I/C RECORDS

Commanding Battery,
Squadron, Troop or Company.

No.

WESTERN UNION

ANGLO-AMERICAN DIRECT UNITED STATES CABLEGRAM



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

TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

24/2/16.

To

E.F.M. ROBERT PARSONS,

7, HAYWARD AVENUE, ST. JOHN'S, (NEWFOUNDLAND)

PLEASE SEND 25 DOLLARS CARE BANK MONTREAL LONDON ON FURLOUGH
BETTER.

PARSONS.

*1130
Parsons.*

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 59, Victoria Street.

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.

158

WESTERN UNION

ANGLO-AMERICAN  DIRECT UNITED STATES
CABLEGRAM

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

TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

13/3/16.

To

E.F.M. ROBERT PARSONS,

7, HAYWARD AVENUE, ST. JOHN'S. (NEWFOUNDLAND)

NO ANSWER TO CABLE MONEY NEEDED URGENTLY.

HERBERT PARSONS.

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 88, Victoria Street, S.W.

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.

WESTERN UNION

ANGLO-AMERICAN DIRECT UNITED STATES CABLEGRAM



SENT

FOR STAMPS

Prefix 16 Code 12 1/2
 WORDS CHARGE

At _____
 To _____ By _____

VIA WESTERN UNION

THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.

11/2/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To **EFM R PARSONS**

7 HAYWARD AVENUE STJOHNS (Newfoundland)

PLEASE CABLE FIVE POUNDS THROUGH MINISTER MILITIA

H PARSONS

16 ✓
 2 1/2 ✓
 3 2 ✓
 8 ✓
 40 = 3 1/4 ✓

Charge to H.R. Parsons.

1130

CHARGED
 PAY BOOK
 Date 14/1/18 by *R.C.*

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.

pay

WESTERN UNION



ANGLO-AMERICAN DIRECT UNITED STATES CABLEGRAM

Prefix	Code
WORDS	CHARGE
17	22

SENT

At _____

To _____ By _____

FOR STAMPS

THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.

VIA WESTERN UNION

23/7/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To EFM ROBERT PARSONS

7 HAYWARD AVENUE STJOHNS (Newfoundland)

PLEASE CABLE TEN POUNDS THROUGH MINISTER MILITIA

URGENT

H PARSONS

charge of 2 → 1130 ✓

24/8/2
H 2/2
36
b

2/6/2

CHARGED TO
PAY BOOK
Date 27/7/18 by [Signature]

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.

No. _____

NEWFOUNDLAND CONTINGENT

N.F.P./55.

To: 1130 P/L H.R. Parsons
1st Royal M.D. Regt.

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

Feb 15th 1918

Herewith Postal draft value £500 being amount of remittance received.
from Ministry of Militia, St John's, Newfoundland.

Please acknowledge receipt hereon.

(Sig.) H. Parsons

(Date) February 15th 1918.

J. H. Marshall
Chief Paymaster & Officer in Charge Records.

Wand-1

MEMORANDUM.

From

W.A. Parsons
Capt Raul
H. Sans
Newfoundland Cont.

To

3rd London Genl. Hospital
Wandsworth.

From

To



ANSWER.

Pay & Record Office of Victoria St.

Wandsworth.

12-4-1918.

16-4-1918.

Re. 1130 Pte PARSONS, 7th R.
1st R. Newfoundland Batt.
admitted to your
Hospital 8. 4. 18.

This patient is
suffering from acute
Tonsillitis & an
operation for the
removal of his tonsils
is contemplated, please

Could you let
me have diagnosis
and condition of
this man, please?

W.A. Parsons
Capt Raul.

G. C. Hall
Capt Med

Registrar, R.A.M.C.F.
3rd London General Hospital,
WANDSWORTH, S. W.

Duplicate by post

Recommended seven days leave.
He's been furnished with rejoining warrant.

18.6.18

To be Discharged from Hospital to-morrow.

Unit.	Squadron, battery, or company.	Regtl. No.	Rank and Name.	
R Med.		1130	Plt	Parsons H.



Emmsley
Capt. Ramey

To Regt. Quartermaster:
58 Victoria St - SW
Considered fit to rejoin unit

Registrar, R.A.M.C.T.
3rd London General Hospital,
WINDSOR WORTH, S.W.

Delivered to 9.30 am
25/6/18. To report 7.20 PM
for duty on ex-hiping.

No. 10644/626

Heed
NEWFOUNDLAND CONTINGENT



N.F.P./79.

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

To:
Officer Commanding,
2/1st. Newfoundland Regt.
Ayr, N. B.

15th, October 1917

Russel St. Ayr. Oct 16 1917

ANSWER

Subject: 1130, Pte. H. R. Parsons

With reference to the following telegram from the Hon. the Minister of Militia, (5892) received 14/10/17,-

Receipt hereunder.

Officer Comdg. 2nd Battn.
1st Newfoundland Regiment

"Pay to 1130 Parsons £5.

Received the sum of Five
pounds on account of
cable remittance from Newfoundland.

Postal Draft
Cheque £5.0.0. is enclosed
for payment to this Soldier.
Kindly obtain his receipt
hereon.

H. R. Parsons
No. 1130 Rank Pte

H. R. Parsons
Major,
Chief Paymaster & O. i/c Records.



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Robert R Parsons, Regl. No. 430
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
 Dollars and sixty Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{and} _{or} Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and} _{or} Persons
 concerned, viz.:

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
897	Father	Robert Parsons	7 Hayward Ave	60
			Total Allotment, \$	

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

(Sig.) E. S. [Signature]
 Officer Commanding
 Company
St. John's
Mar 3rd

(Sig.) [Signature]
 (Rank) Private

Original

N.F.P./12.

NEWFOUNDLAND CONTINGENT

CANCELLATION OF ALLOTMENT

I, (No) 1130 (Rank) Private (Name) Parsons A. P.
hereby apply for cancellation of Allotment made by me on N.F.P./11
No. 830 dated March 27/15 in favour of
Mr Robert Parsons St. Johns Newfoundland.
for \$ — cts 60 per diem.

Such cancellation to take effect on the 31st day of
January 1918

2. I agree to accept all risks and consequences of this appli-
cation failing to reach Headquarters, St. John's, in time to become
operative at above nominated cancelling date; and that in the event
of such non-delivery, and thereby the allotment continuing to be
paid to the Allottee, I also agree to such further stoppage in the
Pay Books as may be necessary, or otherwise to refund such overpaid
amount or amounts.

confirming cable No. 261 21/2/18.

Dated at
London

paid 31st 1918

A. P. Parsons
Allotter.

W.M. W.M.
15/2/18

Approved and Witnessed:

O.C. " " Company.

To be made out in TRIPPLICATE and delivered at the Pay &
Record Office not later than date of cancellation, in
accordance with P.&R.O. C.L./10, 9/12/16.

Form P/K

2/Bn ~~1st~~ Royal

NEWFOUNDLAND REGIMENT



Statement of Account of No. 1130 Parsons #

"J" Company.

From 19-1-15 to 26-1-15

(both days inclusive)

Date	Pay Book Col. No.	Particulars	No. of days.	@ per day.	Dr.		Cr.		Dr.			Cr.				
					\$	c.	\$	c.	£	s.	d.	£	s.	d.		
		Cr.														
1		Pay	8	1 00			8	00								
2		Field Allowance		10				80								
3		Other Allowances														
4		Total Pay & Allowances ...					8	80					1	16	2	
5		Converted into Sterling @ \$4.86 2/3														
6		Balance from previous Pay Book														
7		Total Credits (in £ s. d.) ...											1	16	2	
		Dr.														
8		Forfeited Pay														
9		Allotments	8	6	4	80										
10																
11		Total Stoppages (in \$ c.) ...				4	80									
12		Converted into Sterling @ \$4.86 2/3							19	9						
13		Fines														
14		Clothing and Necessaries														
15		Arms and Accoutrements														
16		<i>Benach Damage</i>														
17		<i>Boots. Bark</i>														
18		Total Stoppages (in £ s. d.) ...											1	0	8	
19		Casual Payments														
20		1st Payment							12	6						
21		2nd "														
22		3rd "														
23		Total Cash Payments												12	6	
24		Balance from previous Pay Book														
25		Total Stoppages & Cash Payments											1	13	2	
26		Final Cash Payment														
27		Balance (debit)														
28		" (credit)												3	0	
PAY & RECORD OFFICE, 58, VICTORIA STREET, LONDON, S.W.																
Jan 31 st 1915																
£ 1 16 2																
£ 1 16 2																

PT 20.0 Noted W.A.B.

Jan 31st

1915

*J. Leyman 2/6
O.C. 7. Co.*

up

CERTIFICATE

N.F.P./94

to other Units, or on return to Newfoundland in accordance

Unit Royal Nfld Regt who was Repatriated
A 179 Cause Class A
MENT OF ACCOUNT

d	PARTICULARS	£		CR.		
		£	s	d	s	d
0 ✓	Balance Cr. from 21-12-17			2	16	8 ✓
	Pay 21 2 days @ \$1.05	222	60			
1 ✓	Field Allce 212 days @ \$.10	21	20			
		243	80	50	1	11 ✓
9 ✓	Other Allces days @ \$					
6 ✓	Other Credits:					
0 ✓	Ration allowance 16-7-18 To 21-7-18 6 days @ 2/1				12	6 ✓
4 ✓	Total Credits			53	11	11 ✓
	Balance due to Paymaster			5	7	3 ✓
4 ✓				58	18	4 ✓

unt and find it to be a correct extract from the Pay Book of

received in the Pay & Record Office London to 26/7/18
y be found necessary.

Chief Paymaster & Officer i/c Record

1130. Pl^o H. Parsons.

Attached P&RO. 26-1-18

Admitted Hospital 7-4-18

Discharged " 18-6-18.

26-1-18 to 6-4-18 = 71 dys.

18-6-18 to 28-6-18 = 41 "

= 112 dys. = 16 wks.

No of weeks on duty as probationer.

16.

AWD.

Capt. Marshall.

For your attention please

Clan II Clerk 6/7/18

Th

18745/1/P&A

C:
NE

Messrs. Woor & Co.
110, Victoria Street,
London, S.W.1.

20th November 8

1130, pte. H.R. Parsons,
Royal Newfoundland Regt.

With reference to your letter
13/11/18 (9757): It is regretted that no
action can be taken by this Office.
Pte. Parsons states that he made previous
arrangements with you for payment to be
made by the end of this year.

Major,
Chief Paymaster & O. i/c Records,

FM/S

WRK

WOOR & CO.

High-Class Tailors and Gentlemen's Outfitters
and Ladies' Outfitters

110 VICTORIA STREET.

LONDON, S.W. *Nov 13* 191*8*

AND AT CAMBRIDGE

The Paymaster
Newfoundland Pay Office
58 Victoria Street
S.W. 1

NEWFOUNDLAND CONTINENT, PAY & RECORD OFFICE.	
Ref. Nos KV	9757
Rec'd	13 NOV 1918
Ack'd	Ans'd
Ref. Nos. UOI	18745/1.

Dear Sir

We should feel greatly
obliged for a reply to our letter of the 8th inst.
re. Pt. Person etc. Thanking you for a reply.

Yours sincerely
Woor & Co
Taylor
Managers

F. A. WOOL, Proprietor

IRISH GOODS A SPECIALITY

No. 20635/2343/G.

MEMORANDUM.

From Chief Paymaster & O.i/c Rds:
58, Victoria Street, S.W.1.
To O.G.2/Br R.Nfld Regt:
Hazeley Down Camp.
Winchester.

From Officer Commanding,
2nd Bn. Royal Newfoundland Regt.
Hazeley Down Camp.
To The Chief Paymaster,
Royal Newfoundland Regiment,
ANSWER. London, S.W.

Pay & Record Office.

14th December 1918.

Dec. 16th 1918.

No. 1130. Pte H.R. Parsons.

This man who has been attached to this office since 26/1/18 has recently become troublesome and his work unsatisfactory, and as will be seen by accompanying A.F.B.252 was drunk whilst on duty, and is therefore returned to you for disposal. Will you kindly deal with the charge.

His documents are enclosed please.

It is hoped that you will be agreeable to this course, it being thought that the effect will be more salutary than my doing so, and then sending him back to his regiment.

H.R. Parsons
Major,
Chief Paymaster & O.i/c Records

Noted.

This will be done.

Received.

NEWFOUNDLAND CONTINENT,
PAY & RECORD OFFICE.
Ref: *H.R. Parsons*
10960
LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

HT/MJ.

Handwritten initials and a large scribble over the routing table.

C.
P.&
R.&C.
B.&E.
P.S.

20635/2343/C.

Chief Paymaster & O.i/c Rds:
58, Victoria Street, S.W.1.

O.C.2/En R.Mfld Regt:
Hazeley Down Camp.
Winchester.

Pay & Record Office.

14th December 8.

No.1130. Pte H.R.Parsons.

This man who has been attached to this office since 26/1/8 has recently become troublesome and his work unsatisfactory, and as will be seen by accompanying A.F.B.252 was drunk whilst on duty, and is therefore returned to you for disposal. Will you kindly deal with the charge.

His documents are enclosed please.

It is hoped that you will be agreeable to this course, it being thought that the effect will be more salutary than my doing so, and then sending him back to his regiment.

Major,
Chief Paymaster & O.i/c Records.

HT/MJ.

Parsons, H.

1130

Ray Sept

April 28, 1919

#1130 Pte. Herbert R. Parsons,

#7 Hayward Avenue,

City

Dear Sir:-

Please find enclosed "Discharge Certificate
No. 2127."

Yours truly

Captain,
Paymaster & Officer i/c Records

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 1130 Rank Pte Name Parsons Herbert
 Intended place of residence 7 Hayward Ave. St John's
 2. Occupation Black
 Classification of soldier B Medical Category E

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

Eligible for War Service Gratuity

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

Place ST. JOHN'S
 Date APR 14 1919
 for Mr H
 Comanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place and date ST. JOHN'S
APR 14 1919
H.P. Parsons
 Signature of soldier
M. Melonster
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place and Date ST. JOHN'S
14-4-19
H.P. Parsons
 Signature of soldier
W. J. Eaton
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 1-12-14 No of days on Military
 Discharged from service 14-4-19 Service 1610

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.

Place ST. JOHN'S
Ret Lt Col Capt
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date APR 14 1919

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed
 Place St John's, Nfld.
 Date April 28/1919
M. Howley Capt
 Officer i/c Records
 The Royal Newfoundland Regiment

26
31
48
85

12.6.2019/2019

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 1130 Rank Pfc Name Parsons, Herbert
 Date of Enlistment 1-12-14 Address St Johns District St Johns
 Occupation Clerk Classification for Discharge B Medical Category E
 Recommendation S.M.B. permanently unfit Disability Rating 40% 3 months

Passed to Demobilization Officer with following documents:—

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

Date 14-4-19 for H. Parsons
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am ✓ in a position to resume civilian occupation.

H. Parsons

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied McClouston

Date 14-4-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *Nil* to his home at *City* and Release Certificate No. *2111* issued.

Date *14-4-19* *Alfred Constan*
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to *28-4-19*

Date *14-4-19* *H. J. [Signature]*
Depot Paymaster.

Discharge approved for *14-4-19*

Forwarded with following documents to O.C Discharge Depot.

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

Date *14-4-19* *[Signature]*
Demobilization Officer.

APPROVED.

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

with following additional documents.

Eligible for War Service Gratuity

Date *APR 14 1919* *R.H. Sait Capt.*
O. C. Discharge Depot.

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

Date

Civil Re-establishment Committee



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

To resume former occupation
Clerk

A. Parsons

Signature of Man.

M. Clouston

Reg. No. 1130

Signature of the Vocational Officer or his Representative.

Place **ST. JOHN'S.**

Date **APR 14 1919**

191

The Royal Newfoundland Regiment

Class for Demobilization:—

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

Regimental No. *1130*

Name *Herbert Wendell Larson*

Address *Hayward Avenue*

Present Medical Category *E*

Recommended for:— { (a) ~~Immediate discharge~~

(b) Standing Medical Board.....

Members of Board {

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

L. Peterson
Senior Medical Officer

S.W. Burden
~~M. O. Depot~~

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

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

1. Unit and Corps..... *Royal Newfoundland* } 7. Former Trade or Occupation }
2. Regtl. No. *1130* : 3. Rank..... *Pte.* } 7a. If the soldier claims previous service in Army, he should state—
4. Name *PARSONS* }
(Surname) (Christian Names) (a) Former Regts. or Corps; with Regtl. Nos.
5. Age last birthday.....
6. Posted for duty on..... at..... in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When (d) Particulars of Pension or Gratuity (if any)
(b) Where
(c) Opinion of Court

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

Statement of Case.

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

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

11. Date of origin of disability. *Dysentery Nov. 1915.*
12. Place of origin of disability. *Sardesfeldes.*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *Treated 3 w/L.G.H. where tests were negative, and discharged, recovered while there. There was evidence of Tachycardia vide A.F.B. 178.*

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war *Yes*
 - (ii.) Previous active service.. .. *no*
 - (iii.) Climate in pre-war service *no*
 - (iv.) Ordinary military service before the war *no*
 - (v.) Serious negligence or misconduct on the man's part. } *no*
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } *N.A.*

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition? *He complains of Dysphroa. and pain over praecordial region on erection. States he was classed B. Category 2 yrs ago. and during last 11 mos. has been Pay Record office*

(A note should be made as to weight in all cases when it is likely to afford evidence of the progress of the disability.)

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

20. Do you recommend—

- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Repatriation

*W. H. Kelly Capt
Name*

Station .. *Hazely Down Camp*

Medical Officer in charge of case.

Date .. *Jan 21st 1919*

* 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

OPINION OF THE MEDICAL BOARD.

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a 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.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases 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.

21. Give diagnosis and particulars of:—

- (a) Any disability claimed or discovered. *Debility*
- (b) The present condition thereof.

Had enteric on Gallipoli. Complaining more & less since. Feels the heart on exertion, no accompaniment - in chest pulse 88

22. State whether the disabilities are:—

	(a) Attributable to	(b) Aggravated by
(i) Service during the present war	<i>Yes</i>
(ii) Previous active service
(iii) Climate in pre-war service
(iv) Ordinary military service before the war
(v) Serious negligence or misconduct on the part of the soldier	<i>No</i>

Give details:

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

Exposure

23. Is the disability in a final stationary condition? If not

- (a) How long is the present degree of disability likely to last?
- (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).

40% 3 months

(b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

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

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

Yes

Opinion of Military Member in case of disagreement.

OR

(b) In what other grade do the Board place him?
(c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

Yes

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures

[Signature]

President or Chairman.

Station *[Signature]*

Members.

Date *Apr 10/19*

[Signature]
[Signature]

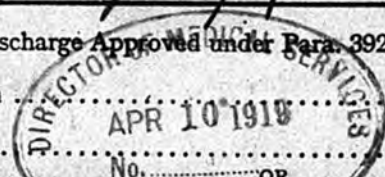
Discharge Approved under Para. 392 (xvi) King's Regulations.

Station

Only applicable in cases of Patients in Hospitals.

Date

Officer in charge, Central Hospital.



Discharge Approved under Para. 392 () King's Regulations.
or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station

O.C. Discharge Centre.

Date

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

MEDICAL HISTORY

OF

Surname Parsons Christian Name Herbert Rendell

Table 1.—GENERAL TABLE.

Birthplace:—Parish..... County.....

		SPECIAL RESERVE.		REGULAR ARMY.	
		Right	Left	Right	Left
Examined	on <u>1st</u> day of <u>Dec</u> 1914				
	at <u>St Johns.</u>				
Declared Age...	<u>18.</u> years				
Trade or Occupation....	<u>clerk.</u>				
Height	<u>5</u> feet <u>6.</u> inches				
Weight	<u>115</u> lbs.				
Chest Measurement	Girth when fully expanded... <u>29½</u> inches				
	Range of expansion... <u>33.</u> inches				
Physical Development...					
Vaccination Marks	Arm				
	Number				
When Vaccinated	<u>1911</u>				
Vision	R.E.—V= <u>1</u>			R.E.—V= <u>1</u>	
	L.E.—V= <u>1</u>			L.E.—V= <u>1</u>	
(a) Marks indicating congenital peculiarities or previous disease	(a)			(a)	
(b) Slight defects but not sufficient to Cause Rejection	(b)			(b)	
Approved by (Signature)	<u>Cluny Macpherson</u>				
(Rank)	<u>Capt.</u>				
	Medical Officer.			Medical Officer.	
Enlisted	at <u>St Johns.</u>				
	on <u>3</u> day of <u>Feb</u> 1915				
Joined on Enlistment	<u>1st Nfld. Regt - 1130</u>				
Transferred to...	<u>Royal Newfoundland</u>				
Became non-effective by.					
(Signature)	<u>[Signature]</u>				
(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 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				
LONDON GENERAL HOSPITAL WANDSWORTH.	20	12	15	21	2	16	<i>Syphilis</i>	64	<i>Case. Active venis (Dankmuller) Treated. Convalescent from syphilis. Still weak & has rheumatic Was not in mental backwardness Result. Marshall.</i>	<i>H. W. Wood Capt. R.A.M.C.</i>
DUNDEE WAR HOSPITAL	16	7	17	3	8	17	<i>Tonsillitis (acute)</i>	18	<i>Very acute. Covered with yellow patches discharge & negative for diphtheria. Discharge to duty</i>	<i>Henry Cape Rame</i>
<i>2nd London General Wandsworth.</i>	7	4	18	15	6	18	<i>do</i>	72	<i>Reported tick here Radical removal of tonsils</i>	<i>G. Chaff Capt. R.A.M.C.</i>

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
April 1915	"Luoc."
May 1915	"Vaccination"
17.6.16	Fit for Foreign Service. N.F.U.
18-1-19	Recommend Amputation Mr. J. D. D. D. D. Mr. J. D. D. D. D.

It is hereby certified that this soldier has been before the Standing Medical Board and has been classified as 15 for discharge on Demobilisation. Medical category

10.4.19
Date of S.M.B.



 Captain J. M. H.
 Discharge Department

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
S. J. G. S. R. F. D.	Feb 3 rd 1915	20 MAR 1915			
T.S. "Stephano"	20 MAR 1915	22 MAR 1915			
T.S. Ordeña	22 MAR 1915	30 MAR 1915			
Edinburgh Castle	30 MAR 1915				



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 *Herbert Rendell Parsons*

Regiment from which discharged *Royal Newfoundland*

Regimental number *1130*

Intended address *7. Hayward Avenue.*

Height on discharge *5* Feet *7*

Color of hair on discharge *Dark Brown*

Complexion *Fair.*

Color of eyes *Brown.*

Descriptive Marks *Scar below right knee Cap.*

Figure on discharge *Medium.*

Christian name of Father *Robert*

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 *St Johns 25-12-1896*

Nature and locality of civil employment required *—*

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

(Soldier's signature in full) *Herbert Rendell Parsons*

Station *St Johns* (Rank) *Plt.*
 Date *7-4-19*

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.



Medical Officer, Hospital.
 Unit, or Command Depot.

Station _____ Date _____

Casualty Form—Active Service.

Regiment or Corps NewfoundlandRegimental No. 1130 Rank Pte Name Parsons H.R.Enlisted (a) Feb. 3/15 Terms of Service (a) One Year Service reckons from (a) Feb. 3/15.Date of promotion } _____ Date of appointment } _____ Numerical position on } _____
to present rank } to lance rank } roll of N.C.Os. }Extended Duration of Re-engaged Aug. 15/15 Qualification (b) _____
War

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	Date	Remarks taken from Army Form B. 213, Army Form A. 86, or other official documents.
Date	From whom received				
		Embarked St. John's Nfld.		20/3/15	
		Disembarked Alexandria		1/9/15	
		Embarked for Gallipoli		13/9/15	
15/11/15	"Kildonan Castle"	Admitted, Pyrexia	H.S. "Kildonan Castle"	29/10/15	Auth. C 4411.
6/11/15	Comdt., Malta.	do	Tyne Hosp. Malta.	5/11/15	
27/12/15	"Nevassa"	Invalided to England	H.S. "Nevassa"	10/12/15	B 798.

(Signed) W.L. Jackson, Captain
for Major,
Officer i/c Records 11 & 12 Dists.
3rd. Echelon G.H.Q. M.E.F.

(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) e.g., Signaller, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

DUPLICATE
MAIL COPY
Posted 4 - MAY 1918



NEWFOUNDLAND CONTINGENT RECORD OFFICE

CANCELLATION OF ALLOTMENT

1. I, (No) 1130 (Rank) Pte. (Name) Parsons H.R.
hereby apply for cancellation of Allotment made by me on N.F.P./11
No. 830 dated March 27/18 in favour of
Mr Robert Parsons St. John's Newfoundland.
for \$ — cts 60 per diem.

Such cancellation to take effect on the 31st day of
January 1918

2. I agree to accept all risks and consequences of this appli-
cation failing to reach Headquarters, St. John's, in time to become
operative at above nominated cancelling date; and that in the event
of such non-delivery, and thereby the allotment continuing to be
paid to the Allottee, I also agree to such further stoppage in the
Pay Books as may be necessary, or otherwise to refund such overpaid
amount or amounts.

Dated at

London

Confirming Cable No. 261 21/2/18.

OK [Signature]

Jan 31st 1918

H. R. Parsons

Allotter.

Approved and Witnessed:

O.C. " " Company.

W.M. [Signature]
15/2/18

To be made out in TRIPPLICATE and delivered at the Pay &
Record Office not later than date of cancellation, in
accordance with P.&R.O. C.L./10, 9/12/16.

Application for Badge
1130 Herbert Parsons.

Wm. W. W. W.
W. W. W.

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

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

Christian name *Herbert Rendell* 2. Surname *Parsons*

3. Rank *Private* 4. Regtl. No. *1130*

5. Address in full to which future payments of gratuity are to be forwarded *7. Hayward Avenue, St. John's*

6. Date of enlistment in the Regiment *December 14th 1914*

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 dependents *not applicable*

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

11. Were you on active service only in Nfld, if so, give dates and particulars of such service *no*

12. Give total length of time which you served on active service, whether in Nfld. or Overseas *From Dec 14/14 to May 1/19*

*4 years
O.K.
[Signature]*

*Dec 14/14 to May 1/19
[Signature]*

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.

about \$120⁰⁰ from Pay & Record Office, St. John's

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

no

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

no

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

no

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

no
(b) If so, was such reversion in consequence of Misconduct or inefficiency?

not applicable

19. Are you now serving in the Regt.?

no If not give - (a) date of discharge

May 1/19 (b) Reason for discharge

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

France, Belgium & Gallipoli

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

no
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: *H.A. Hanson*
 Place of Residence: *7 Hayward Avenue, St. Johns*
 Declared before me at:

This *1st* day of *May* 19*17*
E.J. Pinski, Barrister
 Signature of Barrister of the
 Supreme Court, Stipendiary Magis-
 trate, Notary Public, Justice of the
 Peace, or Commissioner of affidavits.

POST DISCHARGE PAY.				
Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	<i>6 mos.</i>	<i>470⁰⁰</i>
.....
.....

Certified Correct.

Paymaster.

fe



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Robert P. Parsons, Regl. No. 130
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
2 Dollars and 75 Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{and} _{or} Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and} _{or} Persons
 concerned, viz. :

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
297	Father	Robert Parsons	St John's	60
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.) [Signature]
 Officer Commanding
 Company
St John's
 191

(Sig.) [Signature]
 (Rank) Private

ST. JOHN'S, APR 14 1919

Royal Newfoundland Regiment.

Billeting Account,

To Plt. A. Parsons

Billeting Soldiers as undermentioned

from Mar 24th /19 to Apr 14th /19

1130. Plt. A. Parsons ^{A.C.S.} 22 20

ACCOUNT	<u>Btm</u>
CH. NO.	<u>16267</u>
ISS. NO.	<u>Eu</u>
PAY LEAVE	
CEN. LEAVE	

Certified correct for \$ 22 . 20

A. M. Clouston ^{Capt.}
for Billeting Officer.
A. Parsons

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

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

1. Unit and Corps..... **ROYAL NEWFOUNDLAND**.....
2. Regtl. No..... **1130** 3. Rank..... **PRIVATE**.....
4. Name **PARSONS HERBERT**.....
(Surname) (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....
in category (or grade).....
7. Former Trade }
or Occupation }
- 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps ;
with Regtl. Nos.
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty?
9. If a Court of Inquiry was held on an injury state :—
(a) When (b) Date of Discharge ;
(b) Where (c) Cause of Discharge.
(c) Opinion of Court (d) Particulars of Pension or Gratuity
(if any)

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

Statement of Case.

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

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

DYSENTERY

11. Date of origin of disability. **NOVEMBER 1916**
12. Place of origin of disability. **DARDANELLES**
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

**TREATED 3RD LONDON GENERAL
WHERE TESTS WERE NEGATIVE AND
DISCHARGED. RECOVERED WHILE
THERE THERE WAS EVIDENCE OF
TACHYCARDIA**

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | YES | |
| (ii.) Previous active service.. .. . | | |
| (iii.) Climate in pre-war service | | |
| (iv.) Ordinary military service before the war | | |
| (v.) Serious negligence or misconduct on the man's part. } | | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

HE COMPLAINS OF DYSPNOEA AND PAIN OVER PRAECORDIAL REGION ON EXERTION. STATES HE WAS CLASSED B. CATEGORY TWO YEARS AGO AND DURING LAST ELEVEN MONTHS HAS BEEN IN PAY & RECORD OFFICE.

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

FORM 57R

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

(SGD) J. B. O'REILLY, CAPT.
 Medical Officer in charge of case.

Station

Date

* Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause

OPINION OF THE MEDICAL BOARD.

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a 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.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) *The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases 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.*

21. Give diagnosis and particulars of:—

- (a) Any disability claimed or discovered. **DEBILITY**
- (b) The present condition thereof.

HAD ENTERIC ON SALLIPOLO. COMPLAINING MORE OR LESS SINCE. FEELS THE HEART ON EXERTION. NO ACCOMPANIMENTS IN CHEST. PULSE 88

22. State whether the disabilities are:—

- (i) Service during the present war
- (ii) Previous active service.. .. .
- (iii.) Climate in pre-war service
- (iv.) Ordinary military service before the war
- (v.) Serious negligence or misconduct on the part of the soldier

(a) Attributable to	(b) Aggravated by
YES
.....
.....
.....
NO

Give details:

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

EXPOSURE.....

23. Is the disability in a final stationary condition? If not

- (a) How long is the present degree of disability likely to last?
- (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).

40% 3 months

(b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

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

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

YES

Opinion of Military Member in case of disagreement

OR

(b) In what other grade do the Board place him?

(c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

YES

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures:—

(SGD) H. S. FRASER

President or Chairman.

Station XT. JOHN'S

J. S. TAIT

Members.

Date APRIL 10th. 1919

L. PATERSON, MAJOR

Discharge approved under Para. 392 (xvi) King's Regulations.

Station APR 10 1919

(SGD) CLUNY MACPHERSON, MAJOR

Only applicable in cases of Patients in Hospitals.

Date No. OK

Discharge Approved under Para. 392 () King's Regulations. or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station

O.C. Discharge Centre.

Date

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 1130 Rank Pte. Name Parsons, Herbert

Intended place of residence 7. Hayward Avenue

2. Occupation Clerk

Classification of soldier B Medical Category E

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

Eligible for War Service Gratuity

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

Place ST. JOHN'S (sgnd) H. Mews, Lt.

Date APR 14 1919 for Commanding Discharge Depot
The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place and date ST. JOHN'S (sgnd) H. R. Parsons
APR 14 1919 Signature of soldier

" A. M. Clouston, Lt.
Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place and Date ST. JOHN'S (sgnd) H. R. Parsons
APR 14 1919 Signature of soldier

" W. J. Eaton
Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 1-12-14 No of days on Military

Discharged from service 14-4-19 Service 1610

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.

Place ST. JOHN'S R. H. Lait Capt.

Date APR 14 1919 Officer Commanding Discharge Depot
The Royal Newfoundland Regiment.

Date

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place

Date Officer i/c Records
The Royal Newfoundland Regiment

M-1130

October 20th., 1934.


Arthur News, Esq.,
Secretary for HOME AFFAIRS,
City.

Dear Sir:-

With reference to your communication of October 9th., addressed to Dr. Knight, making enquiry regarding the whereabouts of one, Herbert Parsons, I beg to advise you that although Mr. Parsons might have served with The Royal Newfoundland Regiment, he is not a pensioner, and consequently we would have no knowledge of his whereabouts.

The letter of The Mutual Life Assurance Company is returned to you.

Yours very truly,



Secretary.

BT:

RECEIPT.

C.R. 1130

I hereby certify that I have received the 1914-1915

STAR.

No 1130 Name H. P. Parsons

Witness H. Jones

Date Dec. 4/19

Place St. Johns.

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

The Royal Newfoundland Regiment.

Department of Militia,

St. John's Newfoundland.

Fold Here

1921
AUG 1
ST. JOHN'S
NEWFOUNDLAND



June 20th. 1921. 1917.

The accompanying King's Certificate, on his discharge,

(No. 439), is forwarded herewith to

Pvte Herbert R. Parsons

in respect of his service as No. 1130 Rank Pvte,

Name Herbert R. Parsons Corps Royal Nfld Regt.

Receipt of the same should be acknowledged hereon.

Received *The above*

Signature *H.R. Parsons* *H.R.*

Date *July 29th 1921*

Address *7 Raymond Ave*
St John's

C.R. 1130

RECEIPT FOR ISSUE OF
RIBAND OF 1914-15 STAR.

I certify that I have received an issue
of 3 inches of Riband of 1914-15 Star.

Name *Harrison*.....

Date *27/3/15*.....

Place *St John*.....

Please sign and return to Dept. of Militia...

CIRCULAR LETTER

St. John's,

March 13th 1919.

Riband of 1914-15 Star.

Please complete the following claim and return it to this Department. If possible, call at Room No. 3 for your issue.

W. F. Readell

Lieut. Colonel.

Chief Staff Officer.

CLAIM FOR ISSUE OF RIBAND

of 1914-15 STAR.

Department of Militia,

St. John's.

I hereby make claim for issue of Riband of 1914-15 Star.

I certify that I am entitled to this issue,

having served on* *Gallipoli*

from *Sept. 19* 1915 to *Nov.* 1915.

(Date) *27/3/19.* (NO) *1130.* (Rank) *Lt.* (Name) *H. Parsons*

(Place) *St. John's.*

*Fill in theatre of War where you served in Gallipoli, Mudros, Lemnos, or Western Egyptian Frontier.

D

CIRCULAR LETTER

St. John's,

March 15th 1919.

Riband of 1914-15 Star.

Please complete the following claim and return it to this Department. If possible, call at Room No. 3 for your issue.

W. I. Readell

Lieut. Colonel.
Chief Staff Officer.

CLAIM FOR ISSUE OF RIBAND
of 1914-15 STAR.

Department of Militia,
St. John's.

I hereby make claim for issue of Riband of 1914-15 Star.

I certify that I am entitled to this issue,

having served on* *Gallipoli*
from *Sept. 19* 1915 to *Nov.* 1915.

(Date) *27/3/19*. (NO) *1130*. (Rank) *Lieut.* (Name) *H. Parsons*
(Place) *St. John's*.

*Fill in theatre of War where you served in Gallipoli, Mudros, Lemnos, or Western Egyptian Frontier.

D

C.R. 1130

Extract from Daily Orders part II, Depot St. John's dated
16/4/19.

The discharge of the u/n on demobilization has been APPROVED
by G. C. Discharge Depot on 14-4-19.

#1130 Pte. H. R. Parsons.

C.R. 1130

Extract of Preliminary Report of a Medical Board held on
Thursday Afternoon April 10th/19. The following was the find-
ing.

RECOMMENDED DISCHARGE FROM THE ARMY.

1130, Pte. H. Parsons.

C.R. 1130

Extract from Daily Orders Part II Unit The Royal Newfoundland Regt.
St. John's, March 25th, 1919.

The undernoted returned from Overseas & reported at the
Depot 24-3-19.

1130 Pte. H.R.Parsons

C.R. 1130

Extract of telegram from Syn., London, to
Military March 15th/19.

Following has embarked "Baltic" Liverpool
for Halifax.

March 12th.

under A.F.B. 179.

#1130 Parsons.

C.R. 1130

Extract from Casualties received from Pay & Record Office
London, 16 Dec. 1918.

1130 Pte. H.R. Parsons.

P.&.R.O. Staff returned to duty with 2nd Bn., and is
struck off the strength as from 14-12-18.

C.R. 1130

Extract from Casualties received from P. & R. O. JUNE 18th 1918.

#1130 Pte. H. Parsons.

Ex. Third London General Hospital 18-6-18, is granted furlough to 9.30 a/m. 25-6-18, To report to the Pay and Record Office on the later date for duty. NOTE: Admitted to Hospital From Pay and Record Office 7/4/18.

Authority:- Memo from Hospital.

C.R. 1130

Extract from Telegram received from London, dated May 15,
1918.

Yours May 12th, #1130 Parsons Progressing favourably

C.R. 1130

Extract of Cablegram to P&O., London dated May 11th., 1928.

Please inform condition of:

1130 Parsons.

C.R. 1130

B

NEWFOUNDLAND CONTINGENT.

Extract of Casualties from P.&R.O., London dated 9th. Apr. 1918.

1130 Pte. H. Parsons

("Sick") P.&R.O. Staff, was admitted to the 3rd. London General Hospital
7/4/18.

Authority: Notification from 3rd. L.G.H.

C.R. 1730

Extract of telegram received from London, dated
November 28th, 1917.

In answer to your telegram Nov 25. No. 208

#1130 Parsons,

Depot.

C.R. 1130

Extract from Casualties received from P.&R. Office London,

Mar. 17th, 1917.

1130 Parsons.

Transferred to Depot from B.E.F. Classed permanent base.

C.R. 1130

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

1130 Pte. H.R. Parsons.

16-7-16.

Extract of Casualty List received from P.&R.O.

Feb. 22nd. 1916.

The following man has been discharged from the 3rd London Gen. Hospital as fit for duty, proceeds on furlough as defined below.

1130, Pte H.R. Parsons. ✓

Furlough 21/2/16 - 2/4/16.

544

G.R. 1130

SICK AND WOUNDED N.C.O'S AND MEN OF THE MEDITERRANEAN EXPEDITIONARY FORCE.

LIST NO. H. 4283.

MILITARY POLICE RECORD OFFICE ALDERSHOT.

1584	L.C.Martin J.H.	M. F. P.	Enteric Fever.	To Eng.per H.S. "Nevasa" ex.Imtarfa Mily:H.Malta 10th December 1915.
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LIST NO. H. 4283.

NAVAL FORCE RECORD OFFICE ADMIRALTY.

Z4359T	A.B.Atkinson W.	Nelson Bn.R.N.D.	Enteric Fever.	To Eng.per H.S. "Nevasa" ex.Mily: Hp.Imtarfa Malta 10 December 1915. do.
6417	P.O.Sharpe A.V.	R.N.Armd.Car.Dv. 11-Squad.	Enteric Fever.	do.
1213	Loading-Hand, Atkinson J.	Roy.Nav.Res. Trawler Sect.	Corneal Ulcer Rt.Eye, Slt.	Dis.to Conval:duty at Tigne Hosp.Malta 10 December 1915.

LIST NO. H. 4283.

INDIAN FORCE - INDIA OFFICE.

613	Naik Nalb.Bakhah	69-Punjabie.	Fract.Base of Skull, Sev.	Adm.Mily.Hp.Cotton- era Malta Ex.H.M. Transport "Tapoga" 11 December 1915.
2155	Sepoy Bija Ram	69- do.	Pneumonia Slt.	do.

LIST NO. H. 4283.

NEWFOUNDLAND CONTINGENT.

1130	Pte.Parsons H.R.	1-Newfoundland.	Enteric Sev. ✓	To Eng.per H.S. "Nevasa" ex.Tigne H.Malta 10th December 1915.
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✓

C.R. 1130

Extract of Casualties received from Pay & Record Office,
London, dated December 24, 1915.

#1130 Pte. H.R. Parsons.

? Dysentery

Transferred from Hospital/ in Malta to England for Nevasa
10th December 1915.

✓

C.R. 1130

Extract received from communication from O.C. to Regimental Pay-
master, Mfld. Contingent. dated Dec. 21st 1915.

I beg to forward herewith, as per instructions to Officer i/c
Military Hospitals, Active Service Paybook (A.B.64) receipt of
which please acknowledge.

No. 1130, Pte. Parsons, H.R.

C.R. 1130

Extract of Sick and Wounded N.C.Os. and Men of the Mediterranean Expeditionary Force, No: H. 3315, dated Nov. 25th. 1915.

1130 Pte. H.R. Parsons.

Newfoundland Contingent. **Entered**.....Adm. to
Hospital in Malta ex H.S. "Kildonan Castle" November 5th. 1915.

C.R. 1130

Extract from Nominal Roll of "D" Co. 1st Bn. Hfld. Regt
Embarked at Devenport for Active Service, 20-8-15.

1130 Pte. H.R. Parsons.

Disembarked Alexandria 31-8-15 Proceeded to Abbassia,
Cairo, same date Embarked Alexandria for Gallipoli
13-9-15.

C.R. 1130

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

#1130 Pte. H.R. Parsons.

C.R. 1130

Herbert R. Parsons was attested for General service
with the NEWFOUNDLAND REGIMENT on February 3rd 1915
Regimental No 1130 was allotted to Pte. Herbert R. Parsons.

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th, 1919.

Casualty Form—Active Service.



Regiment or Corps Newfoundland

Regimental No. 1130 Rank Plm Name Parsons H. R.

Enlisted (a) Feb 27/15 Terms of Service (a) 1 year Service reckons from (a) Feb 3/15

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N.C.Os. }

Extended Duration of re-engaged Aug 1/15 Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 218, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 218, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked St. John's, NFLD.		20/3/15.	
		Disembarked Alexandria		1/9/15.	
		Embarked for Gallipoli		13/9/15.	
15/11/15.	"Kildonan Castle"	Admitted, Pyrexia	H.S. "Kildonan Castle"	29/10/15.	Auth. C 4411.
6/11/15.	Comdt., Malta.	do	Tyne Hosp., Malta.	5/11/15.	
27/12/15.	"Nevassa"	Invalided to England	H.S. "Nevassa"	10/12/15.	B 798.

H. R. Parsons
 Captain
 for Major,
 Officer i/c Records 11 & 12 Dists.
 3rd. Echelon, G.H.Q. M.E.F.

(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) e.g., Signaller, Shoering Smith, etc., etc., also special qualifications in technical Corps duties.

Casualty Form—Active Service.

1917

Regiment or Corps 81 New Zealand Regimental Number 1130
 Rank Private Surname Parsons Christian Name Henry
 Religion C. E. Age on Enlistment 19 years — months.
 Enlisted (a) 3.2.15 Terms of Service (Duration of War) Service reckons from (a) 3.2.15.
 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 ...	<u>Southampton</u>		<u>16.7.16</u>
		Disembarked...	<u>Rouen</u>		<u>17.7.16</u>
	<u>55 D.R.D.</u>	<u>1st New Zealand Battalion</u>	<u>France</u>	<u>24 JUL 1916</u>	
		<u>H. P. W. 9/10/16</u>	<u>Duty</u>	<u>9.10.16</u>	<u>ED 4494</u>
			<u>With BATT</u>	<u>25. I. 17</u>	
	<u>2/21 CCS</u>	<u>Admitted D.A.H.</u>	<u>France</u>	<u>1/2/17</u>	<u>ED. 9539</u>
	<u>9 G. Hosp</u>	<u>Admitted D.</u>	<u>Rouen</u>	<u>8/2/17</u>	<u>Ha 6688</u>
	<u>29 P.B.D.</u>	<u>Joined Base Dep</u>	<u>Rouen</u>	<u>23/2/17</u>	<u>Non Roll</u>
	<u>do</u>	<u>Classified 'B' by</u>	<u>Rouen</u>	<u>5.3.17</u>	<u>W 3339</u>
		<u>Medical Board</u>			
	<u>do</u>	<u>Transferred to England</u>		<u>14.3.17</u>	<u>D.A.G. 1858/272</u>

Handwritten signature

CAPTAIN.

for Officer i/c No. 1 Regular Infantry Section

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement and enlistment will be entered.
 (b) Signaller, Shoemaking, &c.
 (B99130) W 15012-5136 J. P. & Co., Ltd. Forms B103/2. [P.T.O.]

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B (191)

Forms
B. 121.
39.

Regiment of *Newfoundland*

Number of Sheet

Signature of O. C. Company

W. March
Capt.



Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<i>1130 Parsons H.R.</i>	Age on	<i>19</i> years — months	<i>clerk</i>	
Joined	Date	Place and Date of Enlistment	<i>St John's 28 3 1915</i>	Religion	
Joined	Date	Period of	<i>with Colours 4 8/5 years.</i> <i>with Reserve 4 3/5 years</i>	<i>C. of E.</i>	
Joined	Date			Place of Birth	
Joined	Date				

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>Spada Camp</i>	<i>4/7/15</i>	<i>PLC</i>		<i>Absent Church parade</i>	<i>Cpl News</i>	<i>5 days C.B.</i>	<i>9/7/15</i>	<i>Capt. W. March</i>	<i>J.H.K.</i>
	<i>10/9/15</i>	"		<i>Inattention on parade</i>	<i>Mr Knight</i>	<i>4 days C.B.</i>	<i>10/7/15</i>	<i>do</i>	<i>J.H.K.</i>
<i>Baddeck Arch.</i>	<i>12/9/15</i>	"		<i>Smoking cigarette on parade after having been warned.</i>	<i>Coporal Fowlow</i>	<i>3 days C.B.</i>	<i>13/8/15</i>	<i>do</i>	<i>J.H.K.</i>
<i>Newton Park School</i>	<i>20/4/16</i>	"		<i>Absent from 7AM Parade</i>	<i>Coporal Simmonds</i>	<i>3 days C.B.</i>	<i>20/4/16</i>	<i>Lieut. G. Bain</i>	
<i>Newton on Dep.</i>	<i>21.4.16</i>	"		<i>Absent from Tattoo</i>	<i>Sgt. Simmonds</i>	<i>3 days C.B.</i>	<i>22.4.16</i>	<i>Lieut. Bain</i>	
<i>Newton on Dep Racecourse</i>	<i>Apr. 20 15.4.17</i>	"		<i>Absent from tattoo from till 10.45 p.m. same date</i>	<i>Cpl. Williams</i>	<i>2 days C.B.</i>	<i>1.5.16</i>	<i>Lieut. P. Bennett</i>	<i>475</i>
		"		<i>Absent from 10.45 A.M. Parade until 12.30 p.m. same date</i>	<i>Sgt. Winslow</i>	<i>3 days C.B.</i>	<i>16.4.17</i>	<i>Capt. March</i>	<i>Forfeits 1 day's pay</i>
<i>Apr.</i>	<i>7-12-17</i>	"		<i>Absent from Tattoo until apprehended by the Mil. Police in New Bridge street at about 10.40 p.m.</i>	<i>Lieut. A. Thompson M.P.R.</i> <i>Lieut. C. McArthur M.P.R.</i>	<i>2 days C.B.</i>	<i>10-12-17</i>	<i>Lt. Col. Whitaker</i>	<i>J.H.K.</i>
				<i>Demobilized</i>	<i>St John's</i>	<i>28</i>	<i>19</i>		

Army Form B. 121.

Brought forward

H. B. Camp. 20-2-19 pts

absent from fatigues party

immediately aft 1345 parade Cpl Kama 3 days CB. 21-2-19 Lt Col Sheppard

The Royal Newfoundland Regiment

1130

DEMOBILIZATION OF

Reg. No. 1130 Rank Pte Name Parsons, Herbert
 Date of Enlistment 1-12-14 Address St John's District St John's
 Occupation clerk Classification for Discharge B Medical Category E
 Recommendation S.M.B. permanently unfit Disability Rating 40% 3 months

Passed to Demobilization Officer with following documents:—

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

Date 14-4-19 for H. Parsons Jr.
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

H. Parsons

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$65.00
- (b) ~~Clothing~~ Supplied Chiltonston

Date 14-4-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *2111* to his home at *City* and Release Certificate No. *2111* issued.

Date *14-4-19* *A. M. Conston*
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to *28-4-19*.

Date *14-4-19* *H. J. [unclear]*
Depot Paymaster

Discharge approved for *14-4-19*

Forwarded with following documents to O.C Discharge Depot.

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

Date *14-4-19* *A. M. Conston*
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

APR 14 1919

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

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

Date *17/4/19* *A. H. G. [unclear]*
for officer i/c records