



FIRST NEWFOUNDLAND REGIMENT.

ATTESTATION OF

No. 1874 Name Bernard Payne Corps _____

Questions to be put to the Recruit before Enlistment.

1. What is your name? Bernard Payne 1. _____
2. What is your full Address? St James 2. _____
3. Are you a British Subject? Yes 3. _____
4. What is your Age? 18 Years _____ Months. 4. _____
5. What is your Trade or Calling? Lighterman 5. _____
6. Are you Married? No 6. _____
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so, which? 7. _____
8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
9. Are you willing to be enlisted for General Service? 9. No
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? 10. { Name _____
Corps _____
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? 11. Yes

I, Bernard Payne 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.

Bernard Payne SIGNATURE OF RECRUIT.
E. Seph. 28 1915 Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Bernard Payne 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 Johns
 on this 26 day of September 1915
 Signature of the Attesting Officer. St James Lewis

† Certificate of Approving Officer.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the:
 If enlisted by special authority, such will be attached to the original attestation.
 Date _____ 1915
 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, the 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.

1874.

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

Name Bernard Payne

Apparent age 16 years 0 months. Height 5 feet 5 1/2 inches.

Chest measurement { Girth when fully expanded 35 inches.
Range of expansion 2 1/2 inches.

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin John Payne | 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 | Promotions, Reductions, Casualties, &c. | Army Rank | Dates | Service not allowed to reckon for fixing the rate of pension | Service in Reserve not allowed to reckon towards G. C. Pay | Signature of Officers certifying correctness of entries |
|--|---------------|---|-----------|----------------|--|--|---|
| | | | | | years days | years days | |
| Service towards limited engagement reckons from _____ | | | | | | | |
| Joined at _____ on _____ | | | | | | | |
| <u>Discharged</u> | | <u>At this</u> | | <u>11/4/17</u> | | | |
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| Total Service forfeited as above | | | | | | | |
| Total Service towards Engagement to _____ (date of discharge) _____ years _____ days | | | | | | | |
| " " " Pension " _____ (") _____ " _____ " | | | | | | | |



FIRST NEWFOUNDLAND REGIMENT.

ATTESTATION OF

No. 1872 Name Bernard Payne Corps _____

Questions to be put to the Recruit before Enlistment.

1. What is your name? Bernard Payne 1. _____
2. What is your full Address? _____ } 2. St James
3. Are you a British Subject? _____ 3. Yes
4. What is your Age? _____ 4. 18 Years _____ Months.
5. What is your Trade or Calling? _____ 5. Lighterman
6. Are you Married? _____ 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7. No
8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
9. Are you willing to be enlisted for General Service? 9. No
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? } 10. { Name _____
Corps _____
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? } 11. Yes

I, Bernard Payne 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.

E. S. 28th Nov SIGNATURE OF RECRUIT.
[Signature] Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Bernard Payne 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 Johns on this 28 day of September 1915.
Signature of the Attesting Officer. [Signature]

† Certificate of Approving Officer.

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

If enlisted by special authority, such will be attached to the original attestation.
Date 1915
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, the 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.

1874 2439

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

Name Bernard Payne.

Apparent age 18 years _____ months. Height 5 feet 5 1/2 inches.

Chest measurement { Girth when fully expanded 35 inches.
Range of expansion 25.4 inches.

Distinctive marks /

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin John Payne | 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 | Promotions, Reductions, Casualties, &c. | Army Rank. | Dates | Service not allowed to reckon for fixing the rate of pension | Service in Reserve not allowed to reckon towards G. C. Pay | Signature of Officers certifying correctness of entries |
|--|--------------|---|------------|-------|--|--|---|
| | | | | | years days | years days | |
| Service towards limited engagement reckons from <u>28-9-15</u> | | | | | | | |
| Joined at <u>M. S. S. Co's</u> on <u>September 28/15.</u> | | | | | | | |
| <u>Embarked M. S. S. Co's train to Quebec</u> | | | | | <u>27-15.</u> | | <u>Left Quebec for C. S. 28-16</u> |
| <u>Joined Battalion 15th with Battalion</u> | | | | | <u>4-7-16</u> | | <u>Wounded 9-11-16</u> |
| <u>Admitted 5th Hospital Town 4th S. as face</u> | | | | | <u>21-11-16</u> | | <u>Invited to England 25-16</u> |
| <u>Admitted 3rd H. Wardsmouth 2nd H. Wards</u> | | | | | <u>21-11-16</u> | | <u>Arrived England 25-16</u> |
| <u>Kept on stand for discharge</u> | | | | | <u>3-3-17</u> | | <u>Arrived C. S. 17-17</u> |
| <u>Discharged Medically</u> | | | | | | | <u>17-17</u> |
| <u>Discharged Medically</u> | | | | | | | <u>4-4-1917</u> |
| Total Service forfeited as above | | | | | | | |

Total Service towards Engagement to 4-4-17 (date of discharge) 1 years 189 days

" " " Pension " (") " " "

Regimental Number 1874

Company J.

THE
1ST NEWFOUNDLAND REGIMENT.

I hereby enlist for service at home or abroad in the King's Forces under the following conditions:

For the duration of the present war, or until my discharge.

Subject to the Army Act, the King's Regulations, and to such ordinances as may apply or may be made to apply to the British Regular Army.

Subject to the Newfoundland Volunteer Act, 5 George V., Chapter IV.

Signed Bernard Danyl

Witness James J. Sullivan

Dated at Newton Park School

March 27th 1916

C.R. 1874

The Honourable
The Colonial Secretary.

For necessary action.

29 November 1910.

Governor.

No. 677.

Code Telegram from Capt. Timewell.

(recd. 29 Nov. 1910)

Wandsworth, gunshot wound right eye:

1874 Payne.

C.R. 1874

Bernard Payne was attested for General
Service with the NEWFOUNDLAND REGIMENT ON September 28th 1915
Regimental No. 1874 was allotted to Ptes. Bernard Payne

AUTHORITY:

Record Ledger;

Dept. of Militia.

March 25th 1919

No. 1874 Name Payne, B.Sq., Batty.,
or Company } F.Corps 1st. NewfoundlandDate of enlistment } 28.9.15G.C. }
Badges }Service or
Proficiency Pay }Date of last entry in
Company Conduct Sheet }No. and date }
of last drunk }Period not reckoning towards }
freedom from extra fine }

Sheet No.

Signature O.C. }
Company, etc. }

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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Army Form B. 122

C.R. 1874

Extract from Nominal Roll of Royal Nfld. Regt. Draft No.3.
from 2nd Bn, Depot, to 1st Bn., B.E.F. Embarked 28-3-16.

1873 Pte. B. Payne.

1874

- C.R. 1874

Extract from Recinal Roll Antoinet St. John's 27/10/18 for Overseas

1874 Pte. B.

Payne
~~Boin~~

C.R. 1874

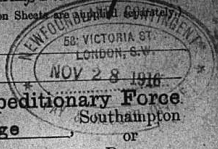
Extract from Nominal Roll 3rd Draft to B.F.F. arrived
29. I.B.D. 20-3-16 Joined Battalion 15-4-16

#1874 Pte. B. Payne.

C. 2.—Casualties.

COLONIAL CONTINGENTS ONLY.

C.R. 1874
 Army Form W. 4026A
 (Continuation Sheets are supplied separately)



3rd London General Hospital, at **Wandsworth**

affiliated to

NOMINAL ROLL of Sick and Wounded from the * **France** **Expeditionary Force**

admitted on **26/11/16** from Hospital Ship **St. George** Southampton or Dover.

* Here insert which Expeditionary Force.

The nature of the casualty is required for telegraphing details overseas. If the details given are insufficient, reference back to the hospital for further information is rendered necessary. The following instructions should therefore be carefully followed in all Colonial cases:

- (a) In the case of sickness, the nature and degree should be stated, e.g., enteric, slight.
- (b) In the case of wounds, the nature of the wound, the part of the body affected, and the severity of the injury should be stated, e.g., gunshot, skull, severe.

If a limb has been amputated the fact should be recorded.

NOTE.—These rolls should be forwarded direct to the War Office, Alexandra House, Kingsway, W.C., *not later than the day after admission*; envelopes to be marked C. 2, Casualties: rolls are not to be telegraphed in advance. The duplicate of the rolls should be sent to the Officer in charge of Records of the Colonial Contingent concerned.

Admissions to the outlying sections of the hospital should be shown separately. If the distance of these sections should render it impossible to forward the rolls the day after the admissions, the sections should be instructed to send lists (on these Army Forms) direct to the War Office, and to the Colonial Contingent Record Office concerned.

| Regtl. No. | Rank | Name (Surname first) | Corps (Batta. numbers to be shown, also full title of Colonial Unit) | Casualty (See note in large type above). |
|---|------|-------------------------|---|---|
| 1874 | Pte | Payne B. | 1st Newfoundland | G.S.W.R. Eye |
| (Sgd) Horace Fagan, Capt, R.A.M.C.T., Registrar, R.A.M.C.T., 3rd London General Hospital, Wandsworth, S.W. | | | | |

C.R. 1874

Extract of Casualties received from Pay & Record Office,
London, dated November 29, 1916.

#1874 Pte. B. Payne. ✓

Admitted 5th General Hospital, Rouen, 21st November 1916.

G.W. 11 (1) 11 (3) sev.

C.R. 1874

NO. 1874. PAYNE.

EXTRACT OF CASUALTY LIST RECEIVED FROM THE PAY & RECORD OFFICE
LONDON DATED NOV. 29, 1916.

"5 GEN. HOS. ROUEN G.S.W. "



90 ✓

COPY OF TELEGRAM.

Dated

To **November 29, 1916.**

Mr. John Payne,

Rames.

Regret to inform you that the Record Office,

London, officially reports ~~No. 1874, Private Bernard~~
Payne, has been admitted to Wandsworth suffering from

gunshot wound in the right eye.

Upon receipt of further information I shall immedi-
ately wire you and trust that the next report will
be of his convalescence.

J. R. BENNETT,

Colonial Secretary.

C.R. 1874

Extract of Casualties from list of sick and wounded N.C.Os and
men of the Expeditionary Force - France, received from Pay and
Record Office, London, dated Dec.4th 1916.

1874 Pte. Payne, B.

G.W.11 (1) 11 (3) R.....To Eng. per H.S. "St.George" ex 5 Gen.
H.25th Nov 16.

C.R. 1874

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P.&.R.O.
December 6th. 1916.

1874, Pte B. Payne. ✓

Wounded 19/11/16.

C.R. 1874

Extract from roll of Officers
N. C. O's and men DISCHARGED
from the Royal Newfoundland
Regiment.

| Regtl.# | rank | name | date | reason. |
|---------|------|---------------|--------|-------------|
| 1874 | Pte. | Payne Bernard | 4/3/17 | MED. UNFIT. |

A. B. Payne

C.R. 1874

P & P. O.



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Bernard Payne, Regl. No. 1874
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
 Dollars and fifty 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 | Whether Wife, Child, other Relative or Friend | NAME (in full) | ADDRESS | AMOUNT (each person) | |
|-------------------------|---|-------------------|--------------|-------------------------|-----------|
| <u>1666</u> | <u>Father</u> | <u>John Payne</u> | <u>Rawca</u> | | <u>50</u> |
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| | | | | Total Allotment, £ | |

Oct 30 / 1915

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.

Officer Commanding

Company

(Sig.)

(Rank)

1915

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 1874, Pte. Payne, B.

(Substituting A.F.O. 1325) N.F.P/Ka

Company. From 23/12/16 To 2/3/17 (Dates inclusive)

Embarked per S.S. SCOTIAN

From Liverpool Date 2/3/17

DR. Classification (See procedure) **A**

Draft No. 29 CR.

| Date | Pay Book Col. | Particulars | Rate | Dys | £ | ¢ | £ | s | d | Date | Pay Book Col. | Particulars | Rate | Dys | £ | ¢ | £ | s | d | |
|---------|---------------|---------------------------|------|-----|----|----|----|-----|---|------|-------------------------|--------------------------|------|-----|----|----|----|----|----|---|
| | 8 | Forfeited Pay | | | | | | | | | 1 | Pay | 1 00 | 70 | 70 | 00 | | | | |
| | 9 | Allotments | 50 | 70 | 55 | 00 | | | | 2 | Field Allowances | 10 | 70 | 7 | 00 | | | | | |
| | 10 | | | | | | | | | 3 | Other Allowances | | | | | | | | | |
| | 11/12 | Total Stoppages | | | 35 | 00 | 7 | 310 | | 4/5 | Total @ \$4.86 2/3 | | | 77 | 00 | 15 | 16 | 5 | | |
| | 13 | Fines | | | | | | | | 6a | | | | | | | | | | |
| | 14 | Clothing & Necessaries | | | | | | | | | Credit Balance 22/12/16 | | | | | | 24 | 19 | 9 | |
| 19/2/17 | 13 | Barrack Damages | | | | | | | | | | | | | | | | | | |
| | 17 | Hospital Stoppages | | | | | 1 | 17 | 6 | | | | | | | | | | | |
| | 17a | Miscellaneous Stoppages | | | | | | | | | | | | | | | | | | |
| | 19 | Casual Payments | | | | | | | | | | | | | | | | | | |
| | 20 | 1st Payment | | | | | | | | | | | | | | | | | | |
| 31/1/17 | 21 | 2nd " P & R.O. | | | | | 6 | 10 | 0 | | | | | | | | | | | |
| 19/2/17 | 22 | 3rd " do. | | | | | 25 | 0 | 0 | | | | | | | | | | | |
| | 23 | Final " | | | | | | | | | | | | | | | | | | |
| | 24 | Balance Debit Last Period | | | | | | | | | | | | | | | | | | |
| | 28 | " Due by Paymaster | | | | | 2 | 410 | | | 27 | Balance Due to Paymaster | | | | | | | | |
| | | | | | | | 40 | 13 | 2 | | | | | | | | £ | 40 | 16 | 2 |

CHECKED
[Signature]

NEWFOUNDLAND CONTINGENT
63, VICTORIA ST.,
LONDON, E.W.
* 1 MAR 1917 *
PAY & RECORD OFFICE

191

CERTIFIED CORRECT
NEWFOUNDLAND CONTINGENT

PAYMASTER & OFFICER

NEWFOUNDLAND CONTINGENT

No. _____

To Paymaster & Officer i/c Records,
Newfoundland Contingent,
58, Victoria Street,
London, S.W.

Please remit per Postal Money Order to:

1874 Pli B. Payne. who is going on
leave to day

the sum of _____ pounds 16 shillings, on
account of any balance that may be due to me.

Regtl. No. 1689 Rank PliName R WalshApproved Newbold~~Officer i/c~~8th L. Co Hospital.Dated at WandsworthFebruary 1917

7
P.O. 2545
@

(9 38 41) W 1 751-6539/1 75,000(6) 10/15 H W V(M 531)
16.92-191 75,0.0 1/16

Forms/W. 320/1

Army Form/W. 3201

(In pads of 50)



ONLY FOR USE IN THE CASE OF SOLDIERS RETURNED FROM AN
EXPEDITIONARY FORCE, OR FROM GARRISONS ABROAD.

¹⁰⁵ Inf. (Regiment).

No. 1874., Rank Plé, Name Payne. B.

is discharged from Hospital with orders to proceed to ~~his~~ home

(Address 58 Victoria St.
P. W.)

and there await further instructions as to his discharge from the
Service.

Place Wandsworth.

Date 19/2/17.

Officer Commanding,
H. Sagan
Capt. R.A.M.C.(F)
Registrar, Hosp. MIC.T.
3rd London General Hospital,
WANDSWORTH. S. W.

Admitted 26-11-16 Army Form W. 3202.

ONLY FOR USE IN THE CASE OF SOLDIERS RETURNED FROM AN EXPEDITIONARY FORCE, OR FROM GARRISONS ABROAD.

1st Bnld Regiment.

*The Officer Commanding Bnld Contingent. Ayr

The Officer in Charge of Records 58 Victoria St.

The Regimental Paymaster 58 Victoria St. S.W.

With reference to No. 1874 Pte Payne B. of the above Regiment, who appeared before a Medical Board and was approved by

the D.D.M.S., London Command, on the 10-1-14 for discharge from the Service as permanently unfit, please note that this man has been sent to his home on warrant with orders to await instructions as to his final discharge; he has been given £1 (one pound) advance and a suit of plain clothes.

He proceeded to 58 Victoria St. S.W.

on [date] 19-2-14

H. Jagan Officer Commanding
Capt. R.A.M.C.D. Registrar, R.A.M.C.H. Hospital.

Place Wandsworth 3rd London General Hospital,
WANDSWORTE, S. W.

Date 19-2-14

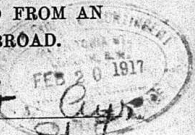
* In case of Territorial Force "Officer Commanding the Administrative Centre."

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

Admitted
26-11-16

Army Form W. 3202.

ONLY FOR USE IN THE CASE OF SOLDIERS RETURNED FROM AN
EXPEDITIONARY FORCE, OR FROM GARRISONS ABROAD.



1st Infld Regiment.
*The Officer Commanding Infld Contingent, Cyprus
The Officer in Charge of Records 58 Victoria St
The Regimental Paymaster 58 Victoria St. S.W.

With reference to No. 1874 Pte Payne B.
of the above Regiment, who appeared before a Medical Board and was approved by
the D.D.M.S., London Command, on the 10-1-14
for discharge from the Service as permanently unfit, please note that this man has
been sent to his home on warrant with orders to await instructions as to his final
discharge; he has been given £1 (one pound) advance and a suit of plain clothes.

He proceeded to 58 Victoria St S.W.
on [date] 19. 2. 14.

H. Jagan Officer Commanding
3rd London General Hospital, WANDSWORTH, S.W.
Place Wandsworth
Date 19. 2. 14.

* In case of Territorial Force "Officer Commanding the Administrative Centre."
Four copies to be made, and one copy sent to each Officer mentioned above, and one copy filed in the Office.

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

MEDICAL HISTORY

Surname Rayne

OF
Christian Name Edward

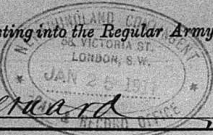


Table I.—GENERAL TABLE.

Birthplace:—Parish _____

County Newfoundland

| | SPECIAL RESERVE. | | REGULAR ARMY. | |
|---|--|-------------|------------------------|------------|
| | Right | Left | Right | Left |
| Examined | on <u>25</u> day of <u>Sept</u> 191 <u>5</u> | | on day of 191 | |
| | at <u>St John's Nfld</u> | | at | |
| Declared age | <u>18</u> years days | | years days | |
| Trade and occupation | <u>Fisherman</u> | | | |
| Height | <u>5</u> feet <u>5 1/2</u> inches | | feet inches | |
| Weight | <u>124</u> lbs. | | lbs. | |
| Chest Measure. { Girth when fully expanded .. | <u>35</u> inches | | inches | |
| | Range of expansion .. | | <u>2</u> inches inches | |
| Physical development | | | | |
| Vaccination marks { Arm | | | | |
| | Number | | | |
| When vaccinated | | | | |
| Vision/ | R.E.—V.= <u>6/9</u> | | R.E.—V.= | |
| | L.E.—V.= <u>6/9</u> | | L.E.—V.= | |
| (a) Marks indicating congenital peculiarities or previous disease | (a) | | (a) | |
| (b) Slight defects but not sufficient to cause rejection | (b) | | (b) | |
| Approved by (Signature) <u>Sgt</u> <u>Louise Peterson</u> | (Rank) <u>Apt</u> | | Medical Officer. | |
| Enlisted | at <u>St John's</u> | | at | |
| | on <u>25</u> day of <u>Sept</u> 191 <u>5</u> | | on day of 191 | |
| Joined on enlistment | Corps | Regtl. No. | Corps | Regtl. No. |
| | <u>1st Nfld Regt</u> | <u>1874</u> | | |
| Transferred to | | | | |
| Became non-effective by | on day of 191 | | 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 | | | | |
| <p><i>3rd London General Hospital Maudsworth, S.W.</i></p> | 26 | 11 | 16 | | | | <p><i>G.S.W. Rt. Eye L. Frontal Bone</i></p> | | <p><i>Board held. See overhead Disability — G.S.W. R. Eye L. Frontal Bone Cause — G.S.W. on Active Service</i></p> <p><i>Capacity for carrying a hindknot Reduced by one half.</i></p> | <p><i>Sgt. N. Dejan Captain M.C. 3rd London General Hospital Maudsworth, S.W.</i></p> |

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, &c.; Examination 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 |
|----------|---|
| 19.11.15 | Vacc. <i>Sgt A.P. Graham L.A.M.C.</i> |
| 9.12.15 | T.V.I. <i>A.P. Graham L.A.M.C.</i> |
| 10.1.17 | <p>Board held — 10.1.17</p> <p>Found — Permanently unfit.</p> <p>Board — Approved, 10.1.17</p> <p><i>Sgt A. Nagai Capt R.A.M.C.</i></p> <p><i>3rd London General Hospital</i></p> <p><i>Wandsworth L.W.</i></p> |

Table IV.—SERVICE TABLE.

| Station or Troopship | Date of arrival or embarkation | Date of departure or disembarkation | Station or Troopship | Date of arrival or embarkation | Date of departure or disembarkation |
|-------------------------|--------------------------------|-------------------------------------|----------------------|--------------------------------|-------------------------------------|
| <i>St John's Africa</i> | | | | | |

Certified True Copy
S.A.S.

Army Form B.179



Medical Report on an Invalid.

3rd London General Hospital
Station Wandsworth

Date 5 January 1917

1. Unit 1st Newfoundland

5. Age last birthday 19

2. Regimental No. 1874

6. Enlisted { on 25 Sept 1915
at St John's Newfoundland

3. Rank Private

7. Former Trade or Occupation { Fishing

4. Name Payne B.

8. Disability.

G.S.W. Right Eye. L. Frontal bone

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.

20 November 1916

10. Place of origin of disability.

Somme

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Wounded by a bursting shell.
Treated at No 5 General Hospital, Rouen.
Wounded 1 over frontal bone (L) Wounded 1 "Long.
" " " At eye quite destroyed.
Socket very septic on admission but clean now.
Wound was very septic but healed now.

12. (a) Give your opinion as to the causation of the disability.

Active Service

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3).

G.S.W.

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.

Rt. Eye.
L. Y. 1/4
Wound over left frontal bone, now...? healed.

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

(a) In action?

(b) On field service?

(c) On duty?

(d) Off duty?

} Yes

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

If so—(a) When?

(b) Where?

(c) Opinion?

✓

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

Yes

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

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?

19. Do you recommend

(a) Discharge as permanently unfit,

(b) Change to England?

Yes

Lt. Col. S. M. Clark, M.D., U.S.A.
Officer in medical charge of case.

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

London General Hospital
Station Wandswoth St. S.W. A. E. Bruce Portey

Date 9 July 1917 Lt. Col. S. M. Clark, M.D., U.S.A.
Officer in charge of Hospital.

* 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.

Answers.—(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 Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them 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 attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1913).

(iv.) In answering question 20 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.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii) ordinary military service.

Active Service

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

G.S.M.

21. Has the disability been aggravated by

(a) Intemperance?

No
No

(b) Misconduct?

22. Is the disability permanent?

Yes

23. If not permanent, what is its probable minimum duration?

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

Lessened by one half

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{2}$, $\frac{1}{3}$, $\frac{1}{4}$, or total incapacity.

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

Vide 16

26. Do the Board recommend

(a) Discharge as permanently unfit, or

(b) Change to England?

Yes

Signatures:—

3rd London General Hospital
Station Wandsworth Sd.

Date 10.1.17.

W. E. Dyke, Major, R.A.M.C. President.
F. J. M. Litchner, Capt. R.A.M.C.
A. J. B. Howard, Esq. Members.

3rd London General Hospital
Station Wandsworth Sd.

Date 10.1.17

W. E. Dyke, Major, R.A.M.C.
Administrative Medical Officer.

(On leaving Corps or Station where invalided.)

Transfer { Date _____
 Station _____ } Conveyance _____
 or Name of Vessel _____
 Embark- { Date _____
 ation Port _____ } Officer in medical charge _____

Brief remarks on case during transit, and state on transfer for final disposal.

Re-transferred { Date _____
 Hospital or Station _____ } Officer in medical charge _____

(At Station or Hospital where finally disposed of.)

Station and Hospital _____
 Arrived from _____ Date _____

| If admitted Date | If under treatment | | Disease | How finally disposed of | Date of Discharge, &c. |
|---------------------|--------------------|----|---------|-------------------------|------------------------|
| | From | To | | | |
| | | | | | |

Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

Date of final Medical Board, or decision } _____

Administrative Medical Officer.

Army Form B. 179.

MEDICAL REPORT ON AN
 INVALID.

Station 1st
 Corps 1st Westphalian
 Regimental No. 1874
 Rank Capt
 Name Maxime P.
 Disability 9th. 9th approx. fracture lower
 Date 10 June 1919
 Hospital or Station transferred to for final disposal }
 Date of final disposal }
 How finally disposed of }

The original Report is invariably to accompany the discharge documents of Invalids.
 21. 88579. V. 4. 1898 473E E. 15. W. S. L.
 Form B. 179.
 11.

NEWFOUNDLAND.
REPORT OF MEDICAL BOARD
ON SOLDIER OR NAVAL RESERVIST RETURNED
FROM OVERSEAS

Station ST. JOHN'S NFLD. Date MARCH 21ST., 1917.
 No. 1874 Age 19 Height 5ft 7½"
 Rank PRIVATE Complexion FRESH
 Name PAYNE, BERNARD Eyes HAZEL Hair BROWN
 Unit 1ST NFLD. REGT.
 Address RAMEA, NFLD. Former Trade FISHING
 Enlisted at ST. JOHN'S NFLD. on SEPT. 28TH., 1915.
 Disease or disability G.S. W. RIGHT EYE. LEFT FRONTAL BONE

Present condition

*Wears artificial (right) eye
 Small scar over left forehead, quite healed*

Estimated disability

~~20%~~ 40% N.S.F

Recommendation of Medical Board

Discharge

Class

Members of Board

Approving Medical Officer.



*J. J. [Signature]
 W. Burden
 Major Peterson
 Chas Macpherson
 Major*

Casualty Form—Active Service.

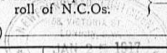
Regiment or Corps *2nd Newfoundland*

Regimental No. *1874* Rank *Pte* Name *Payne Bernard*

Enlisted (a) *28.9.16* Terms of Service (a) *War* Service reckons from (a) _____

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

Extended _____ Re-engaged _____ Qualification (b) _____



| 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. 36, or other official documents. |
|--------|--------------------|--|-------|------|--|
| Date | From whom received | | | | |

| | | | | | |
|--|----------------------------|--|---------------|-----------------|--|
| | | <i>Embarked Southampton</i> | | <i>28.3.16</i> | |
| | | <i>Disembarked Rouen</i> | | <i>30.3.16</i> | |
| | <i>Unit</i> | <i>Joined Battalion</i> | <i>France</i> | <i>15.4.16</i> | <i>D 2 B</i> |
| | | <i>With do</i> | <i>do</i> | <i>4.7.16</i> | <i>"</i> |
| | <i>"A.S. & George"</i> | <i>To England w/ 5th Gen Hosp Rouen</i> | | <i>25.11.16</i> | <i>W 3083</i> |
| | | <i>P.S.W. Face & Eye</i> | | | |
| | | | | | <i>Capt. J.W. Burchell</i> |
| | | | | | <i>for the No 1 Regular Infantry Section</i> |
| | | | | | <i>3rd Echelon</i> |

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g., Signaller, Shooting Smith, etc., etc., also special qualifications in technical Corps duties.

Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man fit for General Service



No. 1874

Rank

Name (surname first)

Payne, Bernard

Regiment

1st New Zealand

1. State what special qualifications you have for employment in civil life.

Fishing was my employment in Civil life and I could do it again if required too?

2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed?

I wasn't employed by anyone was working on my own

3. What is the nature and locality of the employment you desire?

I will go on the Fishing trade again

4. What is the name of your Approved Society?

No

5. Have you been employed whilst with the Colours? If so, in what capacity?

No

Date

9 July 17

Signature

Sgt B. Payne

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 4 (ii), item 3, of Army Council Instruction No. of 1916.

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

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 Commissioners of Chelsea Hospital.

Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.

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



A Name in full Payne Bernard
Regiment from which discharged 1st Newfoundland
Regimental Number 1874
Intended address Samea, Newfoundland
Samea (County) and when Samea Apr. 1898
Height on discharge 5 Feet 7 1/2 Inches
Colour of Hair on discharge Brown
Figure on discharge Loss of R. eye, Hurdy build
Christian name of Father John
Christian name of Mother Mariet
Wife's Maiden name in full Mariet
Date and Place of Marriage
Christian names of Children
Nature & Locality of Civil employment desired. Fishing in Newfoundland

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) Bernard Payne

Station Woodswoth Id. **Date** 8.1.17
(Rank) Pte.

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.
3rd London General Hospital J. L. Smith Medical Officer i/c
5th London General Hospital Hospital.
Station Woodswoth Id. **Date** 8.1.17

| B Period of Service and in what Corps ... | Regiment | Years | Days | All Service Abroad with Stations | Years | Days |
|---|--|-------|------|----------------------------------|-------|------|
| | | | | | India | |
| | | | | S. Africa | | |
| Disallowed ... | | | | | | |
| Service towards Pension ... | | | | | | |
| Date inclusive to which pay has been issued | Sum due on account of advance of Pension } | | | | | |
| Sums due on account of public debts ... | | | | | | |

Rank on Discharge
Character (as on Certificate of discharge)
Where born, and on what date
Date and Place of first Enlistment
Trade on Enlistment
Cause of Discharge
Number of G.C. Badges **Medals**
Wounds, and Actions in which received

Other distinguishing marks
 I certify that the above details of service and other particulars are, to the best of my knowledge, correct.
Station _____ **Officer in Charge**
Date _____ **Records.**

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. Forms
 (102) W191e/M493 500m 2/16s 93 56 B. 121.
 40.

Regiment of 1st Newfoundland

Number of Sheet 2nd
 Signature of O. C. Company [Signature]

| | | | | | |
|----------------------------|--------------------------|--|--------------------------------|-----------------------------|---|
| Regimental Number and Name | | Enlistment | | Trade | Good Conduct Badges, Service Pay or Proficiency Pay |
| No. | <u>1874</u> <u>Hayne</u> | Age on <u>18</u> years <u>0</u> months | <u>Yiderman</u> | | |
| Joined | Date | Place and Date of Enlistment | Religion | | |
| Joined | Date | | <u>St. John's Sept 25 1875</u> | <u>Co. E.</u> | |
| Joined | Date | Period of | Place of Birth | | |
| Joined | Date | | | { with Colours _____ years. | <u>Banora</u> |
| | | { with Reserve _____ years. | | | |



| 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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To be carried over

Hayne, B.

1874

Hay Sept

N.F.P./54.

No.133.

From Pay & Record Office, London
To Minister of Militia, St. John's, Nfld.

#1874 Pte. B. Payne

Hospital Breakage 3rd L.G.H. 1 Clinical Thermometer Voucher
1682. 1s. 4½d.

Sept.16,1919

Mr Pte. Bernard Bayne,
Ramesa.

Dear Sir:-

Referring to your letter of July 12th.
I enclose Form to be completed by you in the
presence of a Magistrate of Justice of the Peace,
and it must be returned to this Department before
payments of war Service Gratuity can be made.

Yours truly

Captain & Paymaster.

Rama
July 12/19

J. M. Howley Esq.

Dear Sir

5841

I now drop you a few lines in reference to the blood money each and every soldier is suppose to receive for the length of time served in the Kings forces. For myself I have read the publications in the papers and have waited patiently to hear from head quarters about it. But up to date the last of our boys to return an home and each of them are getting their share of the blood money by getting paid so much per month. but now I begin to wonder when is mine. I was the first to come forward from this place on the 25th of Sept. 1915 and after serving 1 year and 189 days with the colours in the army or on the 4/4/1917 I was discharged being no longer physically fit for war service on account of wounds received in action. It seems to me I with others are unattended in reference to our share of the blood money I have been told by many that I would have to come to St. Johns or else I would never get it. but I don't see why this should be done as you have the date of enlistment and

also the date of discharge therefore you know
exactly just what due me in blood money and also
on clothes allowance and I would like for you to
forward as soon as possible.

There is also the pension I cant
understand I was to receive \$16.⁰⁰ per month this I did
for a while but during the winter past it was raised
a little up and down and now I am only to
receive \$15.⁰⁰ per month. my wounds to day are
exactly the same as when discharged and I haven't
yet had the pleasure of seeing through my artificial eye
then according to the publications of pensions it
should be \$16.⁰⁰ or 40% of the total pension for a disabled
soldier. I trust you will answer this at your
first convenience and give me full satisfaction
of my share of blood money and clothes allowance

Yours truly

Co. Private Bernard Boyer

Dec 1874

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 1874, Pte. Payne, B.
 Company. From 23/12/16 To 2/3/17 (Dates inclusive)

(Substituting A.F.O. 1325) N.F.P/Ka
 Embarked per S.S. SCOTIAN
 From Liverpool Date 2/3/17
 Draft No. 29 CR.

DR. Classification (See procedure) A

| Date | Pay Book Col. | Particulars | Rate | Dys | £ | s | d | Date | Pay Book Col. | Particulars | Rate | Dys | £ | s | d |
|---------|---------------|---------------------------|------|-----|----|----|----|------|---|--------------------------|------|-----|----|----|---------|
| | 8 | Forfeited Pay | | | | | | | 1 | Pay | 1 00 | 70 | 70 | 00 | |
| | 9 | Allotments | 50 | 70 | 35 | 00 | | | 2 | Field Allowances | 10 | 70 | 7 | 00 | |
| | 10 | | | | | | | | 3 | Other Allowances | | | | | |
| | 11/12 | Total Stoppages | | | 35 | 00 | 7 | 310 | 4/5 | Total 9 4.86 2/3 | | | 77 | 00 | 15 16 5 |
| | 13 | Fines | | | | | | | 6a | | | | | | |
| | 14 | Clothing & Necessaries | | | | | | | | Credit Balance 22/12/16 | | | | 24 | 19 9 |
| 19/2/17 | 13 | Magazine Damages | | | | | | | This account is in accordance with information received at the Pay & Record Office on 1/3/17 and is therefore subject to amendment if, and as may be found necessary. | | | | | | |
| | 17 | Hospital Stoppages | | | | | 1 | 17 6 | | | | | | | |
| | 17a | Miscellaneous Stoppages | | | | | | | | | | | | | |
| | 19 | Casual Payments | | | | | | | | | | | | | |
| | 20 | 1st Payment | | | | | | | | | | | | | |
| 31/1/17 | 21 | 2nd " P & R.O. | | | | | 6 | 10 0 | | | | | | | |
| 19/2/17 | 22 | 3rd " do. | | | | | 23 | 0 0 | | | | | | | |
| | 23 | Final " | | | | | | | | | | | | | |
| | 24 | Balance Debit Last Period | | | | | | | | | | | | | |
| | 28 | " Due by Paymaster | | | | | 2 | 410 | 27 | Balance Due to Paymaster | | | | | |
| | | | | | | | 40 | 16 2 | | | | | £ | 40 | 16 2 |

CHECKED.



191

CERTIFIED CORRECT
 NEWFOUNDLAND CONTINGENT.

O.C. " " Company.
 PAYMASTER & OFFICER IN CHARGE RECORDS

NEW FOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 1874, Pte. Payne, B.

(Substituting A.F.O. 1325) N.F.P/Ka

Company. From 23/12/16 To 2/3/17 (Dates inclusive)

Embarked per S.S. SCOTIAN

From Liverpool Date 2/3/17

DR. Classification (See procedure) A

Draft No. 29

CR.

| Date | Pay Book Col. | Particulars | Rate | Dys | £ | s | d | Date | Pay Book Col. | Particulars | Rate | Dys | £ | s | d |
|---------|---------------|---------------------------|------|-----|----|----|---------|------|---------------|--------------------------|------|-----|----|----|-----------|
| | 8 | Forfeited Pay | | | | | | | 1 | Pay | 1 00 | 70 | 70 | 00 | |
| | 9 | Allotments | 50 | 70 | 35 | 00 | | | 2 | Field Allowances | 10 | 70 | 7 | 00 | |
| | 10 | | | | | | | | 3 | Other Allowances | | | | | |
| | 11/12 | Total Stoppages | | | 35 | 00 | 7 310 | | 4/5 | Total 3 4.86 2/3 | | | 77 | 00 | 15 16 5 |
| | 13 | Fines | | | | | | | 6a | | | | | | |
| | 14 | Clothing & Necessaries | | | | | | | | Credit Balance 22/12/16 | | | 24 | 19 | 9 |
| | 15 | Arms & Accoutrements | | | | | | | | | | | | | |
| 19/2/17 | 13 | Barrack Damages | | | | | | | | | | | | | |
| | 17 | Hospital Stoppages | | | | | 1 17 6 | | | | | | | | |
| | 17a | Miscellaneous Stop | | | | | | | | | | | | | |
| | 19 | Casual Payments | | | | | | | | | | | | | |
| | 20 | 1st Payment | | | | | | | | | | | | | |
| 31/1/17 | 21 | 2nd " P | | | | | | | | | | | | | |
| 19/2/17 | 22 | 3rd " d | | | | | | | | | | | | | |
| | 23 | Final " | | | | | | | | | | | | | |
| | 24 | Balance Debit Last Period | | | | | | | | | | | | | |
| | 28 | " Due by Paymaster | | | | | 2 410 | | 27 | Balance Due to Paymaster | | | | | |
| | | | | | | | 40 16 2 | | | | | | | | £ 40 16 2 |

CHECKED.
[Signature]

NEW FOUNDLAND CONTINGENT
62, VICTORIA ST.,
LONDON, S.W.
1 MAR 1917
PAY & RECORD OFFICE

191

CERTIFIED CORRECT
NEW FOUNDLAND CONTINGENT.

[Signature]
O.C. " " Company
PAYMASTER & OFFICER IN CHARGE RECORDS

NEW FOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 1874, Pte. Payne, B.

(Substituting A.F.O. 1325) N.F.P/Ka

Company. From 23/12/16 To 2/3/17 (Dates inclusive)

Embarked per S.S. SCOTIAN

From Liverpool Date 2/3/17

DR. Classification (See procedure) A

Draft No. 29 CR.

| Date | Pay Book Col. | Particulars | Rate | Dys | £ | s | d | Date | Pay Book Col. | Particulars | Rate | Dys | £ | s | d | |
|---------|---------------|---------------------------|------|-----|----|-----|---|------|---------------|---|------|-----|----|----|---------|---|
| | 8 | Forfeited Pay | | | | | | | 1 | Pay | 1 00 | 70 | 70 | 00 | | |
| | 9 | Allotments | 50 | 70 | 35 | 00 | | | 2 | Field Allowances | 10 | 70 | 7 | 00 | | |
| | 10 | | | | | | | | 3 | Other Allowances | | | | | | |
| | 11/12 | Total Stoppages | | | 35 | 00 | 7 | 310 | 4/5 | Total @ \$4.86 2/3 | | | 77 | 00 | 15 16 5 | |
| | 13 | Fines | | | | | | | 6a | | | | | | | |
| | 14 | Clothing & Necessaries | | | | | | | | Credit Balance 22/12/16 | | | 24 | 19 | 9 | |
| | 15 | Arms & Accoutrements | | | | | | | | <p>This account is in accordance with information received at the Pay & Record Office tr / 13/17 and is therefore subject to amendment if, and as may be found necessary.</p> | | | | | | |
| 19/2/17 | 13 | Barrack Damages | | | | | | | | | | | | | | |
| | 17 | Hospital Advance | | | | | 1 | 17 6 | | | | | | | | |
| | 17a | Hospital Stoppages | | | | | | | | | | | | | | |
| | 17a | Miscellaneous Stoppages | | | | | | | | | | | | | | |
| | 19 | Casual Payments | | | | | | | | | | | | | | |
| | 20 | 1st Payment | | | | | | | | | | | | | | |
| 31/1/17 | 21 | 2nd " P & R.O. | | | 6 | 10 | 0 | | | | | | | | | |
| 19/2/17 | 22 | 3rd " do. | | | 23 | 0 | 0 | | | | | | | | | |
| | 23 | Final " | | | | | | | | | | | | | | |
| | 24 | Balance Debit Last Period | | | | | | | | | | | | | | |
| | 28 | " Due by Paymaster | | | 2 | 410 | | | 27 | Balance Due to Paymaster | | | | | | |
| | | | | | 40 | 16 | 2 | | | | | | £ | 40 | 16 | 2 |

CHECKED.
[Signature]

NEW FOUNDLAND CONTINGENT
58, VICTORIA ST.,
LONDON, E.C. 4
1 MAR 1917
PAY & RECORD OFFICE

191

CERTIFIED CORRECT
NEW FOUNDLAND CONTINGENT.

[Signature]
O. C. " " Company.
PAYMASTER & OFFICER IN CHARGE RECORDS

Oct. 13, 1919

#B374 Pte. Bernard Payne,
Ramon.

Dear Sir:-

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

Yours truly

Major
Paymaster.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claim War Service Gratuity under Order-in-Council dated January 26th, 1919.

A complete reply must be given to every question in this Declaration there must be no blanks and no omissions. 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

REGIMENTS, PAY & RECORD OFFICE, ST. JOHN'S.

Christian name..... *Bernard Payne*.....

3. Rank..... *Pvt.*..... 4. Regtl. No. *1874*.....

5. Address in full to which future payments of gratuity are to be forwarded..... *Rames. Bernard Payne*.....

6. Date of enlistment in the Regiment..... *Sept. 28th 1915*.....

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued immediately prior to your discharge.....

..... *John Payne. Rames*.....

8. Relationship of such dependents..... *Father*.....

9. Address in full of such dependents..... *Rames*.....

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..... *in France*.....

..... *1 year and one hundred & twenty eight days*.....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *as above*.....

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.

..... *None*

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.

..... *I am entitled but have received nothing*

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? *No*

19. Are you now serving in the Regt.? *No*... If not give - (a) Date of discharge *April 4, 1917*

(b) Reason for discharge *Physically unfit*

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.

..... *On the Somme and Belgium Front in Spring*

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.

..... *Nothing*

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.

..... such reversion in consequence of misconduct or
.....
19. Are you now serving in the Regt.?

Signature of Applicant: *Bernard Payne*

Place of Residence: *Ramen*

Declared before me at: *Burgeo*

This *9th* day of *October* 191*9*.....

Joseph Small J.P.
Signature of Berrister 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 |
|-----------|------------------|--------------------|--------------------------|-------------------|
| | | | | |
| | | | | |
| | | | | |

Certified correct.

Paymaster

V.



8th September, 1919.

Sir,

I beg to forward herewith letter under date 2nd instant from Ex-Pte. Bernard Payne, No 1874, regarding his War Service Gratuity and other matters. Will you kindly take the same into consideration and make direct reply to him in the premises.

I have the honour to be,
Sir,
Your obedient servant,

J. P. V. Bennett

Colonial Secretary.

File

Hon. A. E. Hickman,
Minister of Militia.

Ramona
Sept. 2nd / 19

Hon. J. R. Bennett

Colonial Secretary

Dear Sir

I own
dear you a word in reference to the blood money
each and every soldier was to receive for the
length of time serving in the King's force
For myself I have read the publications in the papers
and have waited patiently to hear from head quarters
about it. but long before this the last of our boys
from this place has returned home and each of them
are getting their share of blood money by getting
paid so much per month but now I begin to
wonder where is mine I was the first to rally
around the flag from this settlement on the 28th / Sept / 1898
and after serving a year + 189 with the colours in the
army or on the 4/4 / 1911 I was discharged medically
unfit for further service on account of wounds
received in action. It seems to me I am
unheeded in reference to my share of blood money
I have been told by many that I would have
to come to St. Johns or else I would never get it.

I can't see why this should be done as the date of my enlistment also date of discharge is now at head quarters and there is no trouble to find out what's due me on blood money and clothes allowance I have written once before about this but haven't any answer, therefore I now ask you to please give me full information of my share of the blood money and clothes allowance, and why I am unheeded so long in this matter and who gives this money out its due me and I know it, and trust as Col. Sully of this Colony you will give me full satisfaction on the matter. If I don't get the money due me or satisfaction at an early date I will have to come out more boldly as a warrior

Yours very truly

Ex Parte Bernard Payson ^{no} 1874



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Bernard Payne, Regl. No. 1874

hereby agree, until further notification by me, and in similar official form to make an Allotment of 145 Dollars and 50 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons concerned, viz.:

| Identity Certificate No. | Whether Wife, Child, other Relative or Friend | NAME (in full) | ADDRESS | AMOUNT (each person) |
|--|---|----------------|---------|----------------------|
| 1666 | Leather | Mr John Payne | Ramsay | 50 |
| Commences below 30 th 1915. | | | | |
| 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.) Kevin Hegan
 Officer Commanding
 G Company

(Sig.) Bernard Payne
 (Rank) Private

St John's, Nfld
October 30th 1915

STATEMENT OF ACCOUNT

No. 1874

Name Payne B

1931

| Date | Particulars | Ch. No. | Dr. | Cr. | Rel. |
|--------|---------------------------------------|---------|--------|--------|--------|
| May 2 | Balance due to PW | | | 10 90 | 10 90 |
| 20 | By Pay 18 days @ $\frac{10}{100}$ | | | 19 80 | 30 70 |
| 31 | " " " $\frac{18}{100}$ | | | 20 35 | 51 05 |
| Apr 4 | " " " do | | | 7 40 | 58 45 |
| | Ration allowance | | | 4 86 | 63 31 |
| | Bonus £60.00 | | | 12 95 | 76 26 |
| | Choking | | | 25 00 | 101 26 |
| Mar 2 | To Pay | | | | 163 36 |
| | | 146 | 37 95 | | |
| 28 | Receiv Bill | | 5 00 | | 58 31 |
| 31 | Attainment 29 days @ $\frac{28}{100}$ | | 14 50 | | 44 81 |
| Apr 9 | To Pay | | | | 4 86 |
| | | 160 | 38 95 | | |
| | War Service Privilege + 10% @ 70% | | | 280 00 | 284 86 |
| | Bonus | | | | 271 91 |
| | Kaplan's Damages 1 1/2% | | 12 95 | | 271 91 |
| | | | 33 | | 271 58 |
| Mar 1 | To Pay | | | | 201 58 |
| | | 11031 | 70 00 | | |
| Apr 1 | " " | | | | 131 58 |
| | | 13936 | 70 00 | | |
| May 1 | " " | | | | 61 58 |
| | | 18447 | 70 00 | | |
| June 1 | " " | | | | 4 86 |
| | | 21713 | 58 72 | | |
| | | | 376 40 | 381 26 | 4 86 |

Signed Alvany Sim

Ramee

April 22/17

J. M. Howley Esq

Sir Sir enclosed please find receipt
of all my pay and allowance received on the 15 inst.
And I have also got my discharge papers. but I
would be very pleased to get a discharge badge
if you can issue me one and I would be very
pleased to hear from you about it soon

Yours very truly

Bernard Payne No 1874

J. M. Howley
Esq
Ramee

U 161

Paymasters Dep: 1874

For Reply direct Pamea

J.C.G.

Nov 7th/75

Supt. of Army Dept.

Dear Sir

I beg to say about the 24th inst of Sept my adopted son Bernard Payne volunteered for the army and it was against my wish in the way he did so. First I may I took him when he was but three years old and brought him up as my own child, and this is the first year he have been clear of home. His wish was in the spring ~~to~~ to get a berth in a trading schooner, so to please him I done so aboard of Mr Moultons scho at Buzurg Somewhere about the last of Aug she went to St Johns with a cargo of fish and he volunteered without letting me know the least thing about it. Had he informed me his wish was to enlist I wouldnt have prevented him from doing so on conditions He is only seventeen years of age at present and for all the trouble I have had with him I wouldnt have let him went without helping me a while longer. I still have a family of eight to support alone

and I find it no easy matter to do it -
I wrote him just after he joined the army
and he replied, saying he would send me
all the money he possibly could for a while
longer. I have at present his own hand
writing to that effect. but I would like to
know if he has told head quarters about it -
I would not have wrote you, but he told
me on his last letter he would be home
before he would go farther, and now the
news have been brought on he was seen
at Port aux Basques last week after coming
through country on his way to Canada.

We have been awfully gut out on time not
having the chance to come home and see us
as others have had that privilege before they went
at present we do not know where he is and
would like for you to inform me. and would
also beg you to forward me a part of his
pay for family support - if this is not done I
will have a great battle to fight when it can
be easily avoided with his support; please also
inform me what amount his due him at end of
each month

Yours Very Truly

John Payne Jr.

Flamers
New Brunswick

50¢ per day

Parma ^{and}
Nov 23/15

The Paymaster of 1st Mfld Regiment

Dear Sir two

months know my adopted son Leonard Payne
joined the army. and I have been informed
from him that he would be sending the
greater part of his pay home to me
as he is only 17 years of age and I
have a claim on it for some time yet
he was the only help I had, and against
my wish he joined the army, but being
as he wrote me stating he would still
help me. I gave him consent to go on these
conditions. I still have a family of eight to
support - and it will be a fine battle for
me to do so without his help, I have his
own hand writing to that effect that he was
sending me all he could. and since he have
been from St. Johns I don't know even to write
him hoping you will attend to the matter
forward me at end of gray day what
remains over of what ~~is~~ allowed for him
for his service

and
J

Yours very truly

John Payne Jr
Parma

2nd. December

5

1874

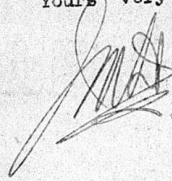
John Payne Esq,

Ramea.

Sir,-

Referring to your letter of November 23rd., I would say that I wrote you on November 18th, stating that Bernard Payne has allotted you 50s per day. First cheque will be mailed to you on the 7th of this month.

Yours very truly,



Deputy Paymaster.

J.M.H/B.M.W.

1874

Nov. 18, 1915.

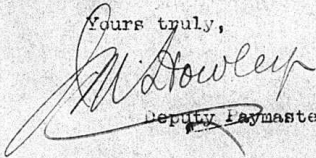
John Payne Jr. Esq.,
Rames.

Dear Sir.

Your letter of November 17th., has been referred to me. In reply I would say that Bernard Payne has allotted you \$50 per day.

Cheques will be forwarded each month the first payment being made on or about Dec. 7th.

Yours truly,


Deputy Paymaster.

No.



1st NEWFOUNDLAND REGIMENT

VOUCHER

In Acct. with #1874 Pte. B. Payne Voucher No. 29081.
Cheque No. 29081.

Reg'l A/c No. Name C.B. Folio No.

| Date | Req'n No. | Invoice No. | Particulars. | Amount. |
|---------|-----------|-------------|-----------------------|--------------|
| Mar. 22 | 335 | | Bonus 1 week @ \$1.85 | \$12 95 |
| | | | Civilian clothes | 25 |
| | | | | <u>37 95</u> |
| | | | | |
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| | | | | \$37 95 |

CERTIFICATION

Dissectⁿ Sheet No.
Recap. Sheet No. 335.

PAYMASTER

Checked by

RECEIPT

March 22nd., 1917.

Received from the 1st. NEWFOUNDLAND REGIMENT the sum of
Thirty Seven

and Ninety Five

March 1917.

\$ 37.95

[Sig.]

RECEIPT

April 7th, 1917

Received from the 1st. NEWFOUNDLAND REGIMENT the sum of

Thirty eight ----- Dollars

and Ninety five ----- Cents in Payment as above stated.

April 15. 1917

\$ 38.95

[Sig.] Bernard Payne

1874

June 22nd.1917.

Mr. B. Payne,

Ramaa.

Dear Sir:-

I enclose herewith cheque for £4.86 being
the amount due you as Retion money whilst on Furlough
in England.

Yours truly,

Licut.
Deputy Paymaster.

April 9th. 7

1874

Mr. B. Payne,

Ramea.

Dear Sir:-

I enclose cheque for \$38.95 being final payment at date of your discharge.

Kindly return attached voucher duly receipted, and also please sign and return the enclosed form.

Yours truly,

2nd. Lieut. D/Paymaster.

Dispatching
Office
Stamp.



Arrival
Office
Stamp.

No 673

From

4th Regiment

Registered Letter Addressed—

*Mr. Bernard Jayne
Ramaa*

Received by

[Signature]

1874

April 7th. 1917

Mr. Bernard Payne,

Ramea,

Dear Sir:-

I enclose certificate of discharge and character
certificate No. 44.

Yours truly,

Lt.
Deputy Paymaster

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. 1874 Army Rank Private

Name Payne Bernard
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps 1st Newfoundland Regiment

Battalion, Battery, Company, Depot, &c.
(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.)

Date of discharge

Place of discharge

1. Description at the time of discharge.

Age 19 years _____ months

Height 5 feet 7 1/2 inches

Chest measurement { girth when fully expanded _____ ins.
range of expansion _____ ins.

Complexion Fresh

Eyes Hazel

Hair Brown

Trade Fitterman

Intended place of residence { Home

(To be given as fully as practicable) Newfoundland

(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.)

2. The above-named man is discharged in consequence of Gunshot wound Right Eye, Left Frontal Bone.

(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.)

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*

Casualty Form—Active Service.

Regiment or Corps

21st. Newfoundland.

Regimental

C.R. 1874

Rank

Pls.

Name

Payne, Bernard.

2439

764

Enlisted (a) 28.9.15 Terms of Service (a) War. Service reckons from (a)

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

Extended Re-engaged Qualification (b)

| 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. 36, or other official documents. |
|--------|--------------------|--|-------|---------|---|
| Date | From whom received | | | | |
| | | Embark'd Southampton | | 28.3.16 | |
| | | Disembark'd ROUEN | | 30.3.16 | |
| | | Unit joined Battalion France | | 15.4.16 | B 213 |
| | | Met do do | | 24.7.16 | |
| | | As "St George" to England via S. Y. Boat | | 25/1/16 | W 3083 |
| | | gdw. face & L Eye | | | |



M. Burchell
CAPTAIN.
for Officer i/c No. 1 Regular Infantry Section
General Headquarters, 3rd Echelon.

Notification by President of Medical Board of Approval of a Soldier's Discharge under Paragraph 392 (xvi.) King's Regulations.

(To be completed and dispatched on the day on which the discharge is approved)



To the Officer i/c Records 58 Victoria St SW

The Soldier named below has appeared before an Army Medical Board at this station, and his discharge from the Service as "no longer physically fit for War Service" has **this day** been approved. (The discharge will be confirmed for a date ²¹ ~~N~~ days after the date on this notification—see A.C.I. 1623 of 1916.)

Soldier's surname Payne, Christian names Bernard
(in full)

Regt. No. and Rank 1874 Pte. Regt. or Corps 1st Newfoundlander
(If T.F. this should be stated)

His address on discharge will be Ramea, Newfoundland
(W. Coast)

This information is for the Central Army Pension Issue Office only.

The Soldier states that* no allowance is being issued in respect of him.

*Insert "separation," "dependants," "family," or "no," as the case may be. The space must not be left blank.

Army Form D. 400A. and Army Form B. 179 for the above-named Soldier are forwarded herewith.

3rd London General Hospital,
WANDSWORTH, S.W.

Station _____

Date 10/1/17

W. E. W. J. Ramea

President of Board
(Approving Officer)

A set of three forms will be made out for each soldier whose discharge is approved, and will be dispatched to the officers severally indicated.

Attention is drawn to the fact that Forms A, B and C of each set are not in identical terms.

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 Commissioners of Chelsea Hospital.

Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/o Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.

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



A Name in full Payne - Bernard
Regiment from which discharged 1st Newfoundland
Regimental Number 1874
Where born (Parish, Town and County), and when (same) Ramea, Newfoundland
Intended address Ramea, Newfoundland (West Coast) 11/1/1898
Height on discharge 5 Feet 7 1/2-Inches
Colour of Hair on discharge Brown **Colour of Eyes** Hazel
Descriptive marks Loss of R. eye **Complexion** Fair
Figure on discharge Sturdy build
Christian name of Father John
Christian name of Mother Harriet
Wife's Maiden name in full ---
Date and Place of Marriage ---
Christian names of Children ---
Nature and locality of civil employment desired Fishing on Newfoundland

PRESENT TO
C. G. J.
John
 No. 8911
 Dated JAN 25 1917

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) Bernard Payne (Rank) Rt
Station Wandsworth SW Date 8/1/17

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.

L. M. Smith Clark Medical Officer i/c
MS Ch. B. S. D. Hospital.
 Date 8/1/17

Station

| B Period of Service and in what Corps ... | Regiment | Years | Days | All Service Abroad with Stations | Years | Days |
|---|--|-------|------|----------------------------------|-------|------|
| | | | | | India | |
| | | | | S. Africa | | |
| Disallowed ... | | | | | | |
| Service towards Pension ... | | | | | | |
| Date inclusive to which pay has been issued | Sum due on account of advance of pension } | | | | | |
| Sums due on account of public debts ... | | | | | | |

Rank on Discharge
Character (as on Certificate of discharge)
Where born, and on what date
Date and Place of first Enlistment
Trade on Enlistment
Cause of Discharge
Number of G.C. Badges
Wounds, and Actions in which received

Medals

Other distinguishing marks

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.

Station _____ Officer in Charge
Date _____ Records.

Original

Medical Report on an Invalid



Station 3rd London General Hospital
WANDSWORTH, S. W.
 Date 5th Jan. 1917

1. Unit pt. Newfoundland
 2. Regimental No. 1874
 3. Rank Private
 4. Name Payne B.
 5. Age last birthday 19
 6. Enlisted { on 25th Sept 1915
 { at St. John's R. 'fld.
 7. Former Trade { Fishing
 or Occupation {

8. Disability.

G. S. W.

Pt. eye.

Statement of Case.

COPY SENT TO
 [Signature]
 [Signature]
 [Signature]
 No. 8011
 Dated JAN 25 1917

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. 20th Nov. 1916.10. Place of origin of disability. Somme.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Wounded by a bursting shell.
Treated at No. 5 Gen. Hosp. Rouen.

Wounded in over frontal bone (L). Wound 1" long.

" in Pt. eye quite destroyed. Reentered 21st Nov. 1916.

Socket very soft on exam. but clean wound.

Wound was very deep but healed well.

12. (a) Give your opinion as to the causation of the disability.

D. A. S.

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 2).

G. S. W.

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.

Rt. Eye Ameliorated -

L.V. = $\frac{6}{6}$.

Wounded over L. Throat has now healed

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

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

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

If so—(a) When?

(b) Where?

(c) Opinion?

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

Yes. - Amelioration of eye

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

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?

19. Do you recommend

- (a) Discharge as permanently unfit,
 or
 (b) ~~Change to England?~~ *Yes.*

L. M. Smith Clerk. MB ChB Ed.

Officer in medical charge of case.

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

3rd London General Hospital,
 Station WANDSWORTH, S.W.

Date

9th Jan 1917

H. E. Bruce Esq.

Officer in charge of Hospital.
 Lt. Col. R.A.M.C.T.

* Loss of teeth on, or immediately after, active service, should be attributed to that service, 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 Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them 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 attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Articles 1162 and 1165 Pay Warrant, 1913).

(iv.) In answering question 20 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.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

Active Service

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

G.S.W.

21. Has the disability been aggravated by

- (a) Intemperance? *No*
 (b) Misconduct? *No*
 (c) Any of the conditions mentioned in Question 20, and if so which?

22. Is the disability permanent? *Yes*

23. If not permanent, what is its probable minimum duration?

To be stated in months. *✓*

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

Lessened by one half

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{2}$, $\frac{1}{3}$, $\frac{1}{4}$, or total incapacity.

- 24a. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act? *No*

25. If an operation was advised and declined, was the refusal unreasonable? *vide 16*

26. Do the Board recommend

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

Signatures:—

3rd London General Hospital,
 WANDSWORTH, S.W.,
 Station

W.S. Wynter Maj. R.A.M.C. President.

F.J. Woodhead Capt. R.A.M.C.
R.P.S. Howard C.S. Members.

Date 10 1 17

3rd London General Hospital,
 Station WANDSWORTH, S.W.

W.S. Wynter Maj. R.A.M.C.
 Administrative Medical Officer.

Date 10 1 17

(On leaving Corps or Station where invalidated.)

Transfer { Date _____
 Station _____ } Conveyance _____
 or { Date _____
 Station _____ } Name of Vessel _____
 Embark- { Date _____
 ation { Port _____ } Officer in } _____
 medical charge }

Brief remarks on case during transit, and state on transfer for final disposal.

Re-transferred { Date _____
 Hospital or } _____ Officer in medical charge.
 Station }

(At Station or Hospital where finally disposed of.)

Station and } _____
 Hospital } _____
 Arrived from _____ Date _____

| If admitted | If under treatment | | Disease | How finally disposed of | Date of Discharge, &c. |
|-------------|--------------------|------|---------|-------------------------|------------------------|
| | Date | From | | | |
| | | | | | |

Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

Date of final Medical }
 Board, or decision }

Administrative Medical Officer.

Army Form B. 179.

MEDICAL REPORT ON AN
 INVALID.

Station Am
 Corps 1st Newfoundland
 Regimental No. 1874
 Rank Pvt.
 Name Payne B
 Disability g. S. W. Range of front
 Date 10/1/17

Hospital or Station }
 transferred to for }
 final disposal }

Date of final }
 disposal }

How finally }
 disposed of }

The original Report is invariably to accompany the
 discharge documents of Invalids.
 (4726.) W. 5530/2774. 500K. 9/15. C. P. Ltd.

Forms
 B. 179.
 31.

58 vic

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

MEDICAL HISTORY

OF

Surname Payne Christian Name Bernard

Table 1.—GENERAL TABLE.

Birthplace:—Parish..... County Wilt

| | SPECIAL RESERVE. | | REGULAR ARMY OFFICE. | |
|---|---------------------------|---|---------------------------|------------------|
| | on | day of | on | day of |
| Examined | on | <u>25</u> day of <u>Sept</u> 191 <u>8</u> | on | day of 191 |
| | at | <u>St John W. Rd</u> | at | |
| Declared Age | | <u>18</u> years | | |
| Trade or Occupation | | <u>Fisher</u> | | |
| Height | | <u>5</u> feet <u>5½</u> inches | | |
| Weight | | <u>124</u> lbs. | | |
| Chest Measurement | Girth when fully expanded | <u>35</u> inches | Girth when fully expanded | <u>35</u> inches |
| | | Range of expansion | | <u>2</u> inches |
| Physical Development | | | | |
| Vaccination Marks | Arm | | Arm | |
| | Number | | Number | |
| When Vaccinated | | | | |
| Vision | R. E.—V | <u>6/9</u> | R. E.—V | |
| | L. E.—V | <u>6/9</u> | L. E.—V | |
| (a) Marks indicating congenital peculiarities or previous disease | (a) | | (a) | |
| (b) Slight defects but not sufficient to Cause Rejection | (b) | | (b) | |
| Approved by (Signature) | <u>J. Mount Parker</u> | | | |
| (Rank) | <u>Capt</u> | | | |
| | Medical Officer. | | Medical Officer. | |
| Enlisted | at | <u>St John</u> | at | |
| | on | <u>25</u> day of <u>Sept</u> 191 <u>8</u> | on | day of 191 |
| Joined on Enlistment | Corps. | <u>1st Wilt Regt</u> | Corps. | |
| | Regtl. No. | <u>1874</u> | Regtl. No. | |
| Transferred to | | | | |
| Became non-effective by | | | | |
| | on | day of 191 | on | day of 191 |
| (Signature) | | | | |
| (Rank) | | | | |

COPY SENT TO
A. C. P. D.
No. 2011
Dated JAN 25 1917

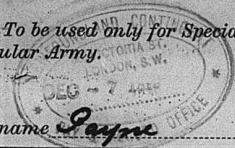


Table II.—Only for admission to hospital or to the sick list in case of Warrant officers treated in quarters.

| Name of Hospital. | Admitted to Hospital | | | Discharged from Hospital | | | Disease | Number Days in Hospital | Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In 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 | | | | |
| 3rd London General Hospital, WANDSWORTH, S.W. | 26 | 11 | 16 | | | | G. S. W. R Eye. L. Frontal bone. | | Board held - see overleaf Disability - G. S. W. R Eye, L. Frontal bone Cause - G. S. W. on Active Service Capacity for earning a livelihood assessed by me half | <i>H. Hagan Capt R.A.M.C.</i> 3rd London General Hospital, WANDSWORTH, S.W. |

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 |
|-------------|---|
| 19. 11. 15. | Dace R.P. Graham Lt. Reme. |
| 9. 12. 15 | T.V.I. R.P. Graham. Lt. Reme. |
| 10-1-17 | <p>Board held — 10/1/17 Found — Permanently unfit Board — Approved 10/1/17</p> <p>H. Tugan C/O R.A.M.C. 3rd London General Hospital, WANDSWORTH, S.W.</p> |

TABLE IV.—SERVICE TABLE.

| Station or Troopship | Date of Arrival or Embarkation | Date of Departure or Disembarkation. | Station or Troopship | Date of Arrival or Embarkation | Date of Departure or Disembarkation |
|----------------------|--------------------------------|--------------------------------------|----------------------|--------------------------------|-------------------------------------|
| St John's Hill | | | | | |

[Blank box for Chelsea Number]



Proceedings on Discharge.

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

| | | | | |
|---|---------------------------------------|--------------|--|------|
| No. | 1874 | Army Rank | Private | |
| Name | Layne Bernard | | | |
| <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small> | | | | |
| Corps | 1 st Newfoundland Regiment | | | |
| 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 | April 4 th 1917 | | | |
| Place of discharge | St. John's, Nfld. | | | |
| 1. Description at the time of discharge. | | | | |
| Age | 19 years | months | Descriptive marks. wear artificial right eye. small scar over left forehead. | |
| Height | 5 feet | 7 1/2 inches | | |
| Chest measurement | girth when fully expanded | | | ins. |
| | range of expansion | | | ins. |
| Complexion | Fresh | | | |
| Eyes | Hazel | | | |
| Hair | Brown | | | |
| Trade | Fisherman | | | |
| Intended place of residence | Ramea | | | |
| (To be given as fully as practicable) | Newfoundland | | | |
| <small>(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.)</small> | | | | |
| 2. The above-named man is discharged in consequence of <u>Gunshot wound</u> <u>Right Eye, Left Frontal Bone</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 :- | | | | |
| [Blank space for character details] | | | | |
| 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

Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man fit for General Service.

No. 1874 Rank Private
 Name (surname first) Payne, Bernard
 Regiment 1st Newfoundland



1. State what special qualifications you have for employment in civil life.

Fishing was my employment in civil life and I could do it again if required too

| | |
|-------------------------|-----------------|
| COPY SENT TO | |
| <i>[Signature]</i> | |
| Witness | No. <u>8011</u> |
| Dated <u>AN 25 1917</u> | |

2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed?

I wasn't employed by anyone was working on my own

3. What is the nature and locality of the employment you desire?

I will go on the Fishing trade again

4. What is the name of your Approved Society? *no*

5. Have you been employed whilst with the Colours? If so, in what capacity? *no*

Date January 24 1917

Signature B. B. Payne

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 4 (ii), item 3, of Army Council Instruction No. of 1916.

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.
(6-6) W3017/2124 1000m 6/15s 43 50Forms
B. 121.
32.Regiment of *1st Newfoundland*Number of Sheet *182/1*Signature of O. C. Company *A. J. Griffiths*

| Regimental Number and Name | | | Enlistment | | Trade | | Good Conduct Badges, Service Pay or Proficiency Pay | |
|----------------------------|-----------------|------|------------------------------|--|--------------------|--------------------|--|---------|
| No. | <i>B. Payne</i> | | Age on | <i>18</i> years - months | <i>Fishermen</i> | | COPY SENT TO <i>C. G. D.</i> <i>John</i> <i>0.80/11</i> JUN 1917 | |
| Joined | Date | | Place and Date of Enlistment | <i>St. John's</i> | Religion | | | |
| Joined | Date | | Period of | <i>Sept 28 1915</i> | <i>C of E</i> | | | |
| Joined | Date | | <i>with Colours</i> | <i>189</i> years. | Place of Birth | | | |
| Joined | Date | | <i>with Reserve</i> | <i>365</i> years. | <i>Namea</i> | | | |
| Place | Date of Offence | Rank | Cases of Drunkenness. | OFFENCE | Names of Witnesses | Punishment awarded | By whom awarded | REMARKS |
| | | | | <i>Medically Unfit 4 ¹¹/₁₇</i> | | | | |

To be carried over

Army Form B. 121.

THE CANADIAN PENSION COMMISSION

MEMORANDUM

R 4B

TO: Director of War Service Records.

OTTAWA, December 8, 1949.

FROM: The Canadian Pension Commission.

#1874 Bernard Payne.
Royal Nfld. Regt.

DEPARTMENT OF
VETERANS' AFFAIRS
DEC 12 1949
WAR SERVICE RECORDS
OTTAWA - CANADA

The marginally named

Died

July 21, 1928.

Next of Kin

Mrs. Elizabeth Payne (widow),
c/o Pension Medical Examiner,
Canadian Pension Commission,
P.O. Box H-242,
St. John's, Nfld.

In the opinion of the Commission,
death was not related to service with the forces.

E. Lahey *Noted WSR (4B)*

mb
Not on strength

for
Secretary.

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

I hereby acknowledge that I have received all my pay and allowances (including clothing allowances) and all just demands up to the present date.

Place Ramea Pat Bernard Payne Sig. of Soldier.

Date April 15/47 John Payne Sig. of Witness.
