



FIRST NEWFOUNDLAND REGIMENT

No. 3666 Name Peter Peacks Corps Co. 6.

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Peter Peacks.
2. What is your full Address? 2. Kellybrews
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 19 Years Months
5. What is your Trade or Calling? 5. Miner
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. Yes
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? II. Yes

I, Peter Peacks 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.

Peter Peacks SIGNATURE OF RECRUIT.
Edward Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Peter Peacks 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
 on this 23 day of April 1915
 Signature of Attesting Officer Edward

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Peter Leach
 Apparent age 19 years months. Height 5 feet 8 inches
 Chest Measurement { Girth when fully expanded 37 inches
 Range of expansion 5 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Richard Leach
Fellyn | Relationship Sark

Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow.		(b) Place and date of marriage.	
(a)	(b)	(c)	(d)

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from									}
Joined at on									
Total Service forfeited as above.....									

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



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3666 Name Peter Peach Corps Co. 6

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Peter Peach
2. What is your full Address? 2. Kellynews
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 19 Years Months
5. What is your Trade or Calling? 5. None
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. Yes
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? II. Yes

I, Peter Peach 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.

Peter Peach SIGNATURE OF RECRUIT.
W. Edward Signature of Witness.

8-13-17

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Peter Peach 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.....

on this 13 day of August 1915
Signature of Attesting Officer W. Edward

†CERTIFICATE OF APPROVING OFFICER.

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

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

Date.....191.....
Place..... } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Peter Leask
 Apparent age 19 years months. Height 5 feet 8 inches
 Chest Measurement { Girth when fully expanded 37 inches
 Range of expansion 5 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Julian Leask
Tellyreir | Relationship Father
 Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>23-4-17</u>									
Joined as <u>Private</u> on <u>April 23rd 17</u>									
<u>June 19/19 discharged</u>									
		<u>Embarked for 156th B.I.</u>		<u>20-11-17</u>					
		<u>Disembarked</u>		<u>7-11-17</u>					
		<u>Admitted to 24th Coy. S.W. Coy.</u>		<u>20-11-17</u>					
		<u>Rejoined unit in the field</u>		<u>5-2-18</u>					
		<u>Leave to det.</u>		<u>3-4-18 to 17-11-18</u>					
		<u>Went to Camp</u>		<u>24-1-19</u>					
		<u>Rejoined unit</u>		<u>29-1-19</u>					
		<u>Arrived in field</u>		<u>from 18.3.22-19</u>					
		<u>Demobilization</u>		<u>22-5-19</u>					
		<u>Arrived Newfoundland</u>		<u>1-6-19</u>					
		<u>Demobilization</u>		<u>29-6-19</u>					

Total Service forfeited as above.....

Total Service towards Engagement to 29-6-19 (date of discharge) 2 years 68 days
 " " Pensions " " " " " " " "

C.R. 3666

Extract from Daily Orders Part 11 Unit The Royal Wfld.
Regt. June 30, 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from 29-6-19.

3666 Pte. Peter Peach.

C.R. 3666

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, June 19th, 1919.

The discharge of the undernoted on demobilization has been
APPROVED by O.C. Discharge Depot with effect from 15-6-19.

3666 Pte. Peter Peach.

C.R. 3666

Extract from Daily Orders Part A1 Depot, St. John's,

Date June 18th 1919.

3666, Pte. P. Peach.

Reported at Headquarters 1/6/19. ex "Corsican"
which sailed Liverpool May 22/1919.

C.R.

3666

Extract from Nominal Roll from 1st. Battalion

Royal Newfoundland Regiment dated 30-4-19.

The undermentioned of the 1st. Battalion left
Rouen Camps 22/4/19, embarked at Havre 22/4/19,
disembarked at Southampton 23/4/19 and reached
Hazeley Down Camp 23/4/19.

#3666 Pte. P. Peach.

C.R. 3666

Extract from War Office List No. H.A. 34415.

Dis. to Camp. Adjutant ex 1 Sty. H. Rouen 24 Jan. 1919.

3666 Dvr. R. Peach.

Urethritis.

C.R. 3666

Extract of DAILY ORDERS, PART 11, Nov. 21/11/18.

Royal Newfoundland Regiment.

Leave to U.K. from 3/11/18 to 17/11/18.

#3666 Pte. P. Peach.

C.R. 3666

April 8, 1918.

Mr. Richard Peach,
Kelligrews.

Sir,

The Record Office, London, reports that #3666,
Pte. Peter Peach, rejoined his Regiment on Feby., 5th.

I have the honour to be,

Sir,

Your obedient servant,



Major,

Chief Staff Officer.

WFR/JMF.

C.R. 3666

Es

Extract from Telegram received from London dated
March 29, 1918.

#3666 Peach rejoined Regiment in France February 5th.

OR. 3666

Copy of telegram received from Synoptical, London,
dated March 4th, 1918.

#3666 Pte . Peach.

Rejoined 1st. Battalion.

C.R. 3666

Extract of Casualties received from Pay & Record Office,
London, dated January 28, 1918.

#3666 Pte. P. Peach. ✓

Dis. to Base Depot, Rouen, Class "A" ex Con. Dep.

January 17, 1918.

C.R. 3666

Extract of Casualties received from Pay & Record
Office, London, dated December 15, 1917.

#3666 Pte. P. Peach. ✓

Gunshot wound left arm.

Admitted 11th Con. Dep. Richy ex 2 Cob. Dep. 6th
December 1917.

C.R. 3666

Extract from Casualties.....List No. H.A. 17286.

3666 Pte. P. Peach.

1/1816.R. Adm. 11 Gen. Dep. Buchy ex 2 Gen. Dep. 6 Dec.17.

G.S.W. L. Arm.

NEWFOUNDLAND POSTAL TELEGRAPHS. ✓



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

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

(NOT TRANSMITTED)

Signature of Sender

Address

Line Number	Recd	By	Sent	by	Check
-------------	------	----	------	----	-------

Dated

28th November, 1917.

To

Mr. Richard Peach,
Kelligrews.

Regret to inform you that Record Office, London,
officially reports
No. 3666, Private Peter Peach, at 11th Stationary Hospital
Rouen, November 21, Gunshot Wound Left Arm Mild.

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

R. A. SQUIRES,
Colonial Secretary.

FOR TYPEWRITER

C.R. 3666

3666 Pte. Peter Peach.

Extract of casualty list received November 28th, 1917.

Gunshot wound left arm, mild.

At 11th Stationary Hospital Rouen November 21.

C.R. 3666

Extract of Casualt received from Pay & Record
Office, London, dated December 4, 1917.

#3666 Pte. P. Peach. ✓

Wounded 20/11/17.

C.R.

3666

Extract from Memorial Roll Draft No. 32: 111 Other Banks from 2/1st
Newfoundland Regt., Ayr, to 1/1st H.K.L. Regt., B. E. F. Embarked
Southampton 6/11/17.

3666 Pte. Peach, P

M.P.

C.R. 3666

Extract from Nominal, Roll, embarked St. John's for Overseas 19-5-17

#3666 Pte. P. Peach.

3666

C.R.

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt., St. John's, Apl. 23rd, 1917.

3666 Pte. P. Peach.

Attested this day, posted F. Company and assigned
number as shown.

S. Leach

C.R. 3666

~~*S. L. D.*~~

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 } *Fisherman*
2. Regtl. No. *3666* 3. Rank. *Pte* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Peach* *Peter* (a) Former Regts. or Corps ; with Regtl. Nos.
- (Surname) (Christian Names)
5. Age last birthday. *21*
6. Posted for duty on *Apr 1/17* at *St Johns* 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. *Dec 1917*

12. Place of origin of disability. *Caribai*

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.

He states that he was struck by rifle bullet in forearm - treated C.S. cured.

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | <i>Yes</i> | ..... |
| (ii.) Previous active service.. .. . | <i>No</i> | ..... |
| (iii.) Climate in pre-war service | <i>No</i> | ..... |
| (iv.) Ordinary military service before the war | <i>No</i> | ..... |
| (v.) Serious negligence or misconduct on the man's part. } | <i>No</i> | ..... |

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 when 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.)

na
Two small scars on
internal surface of
superficial healed & cured
by drainage

16. Was an operation performed? If so, when and what was its nature?

na

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

na

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?

na

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?

na

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
op W R W
Capt R. A. M. G.

Station *Hazeley D. Camp*

Medical Officer in charge of case.

Date *1/19*

* 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

The Royal Wld. Regiment

DEMOBILIZATION

No 366 Rank

Name Leach J

Warned for demobilization on

JUN 14 19

10001/307

Royal Nfld. Regt.

B.E.F.

24th June 8

3666, Pte. P. Peach

5653

Pay to 3666 Peach £8:4:5



to Receipt
25/6/18



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

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

Examination of *Peter Peach*
aged *19 years* conducted at *Dallas*
Date: *April 28 1919* Recruiting Officer:

NO OF TEST	FINDING
1	<i>no</i>
2	<i>no</i>
3	<i>no</i>
4	<i>no</i>
5	<i>no</i>
6	<i>no</i>
7	<i>no</i>
8	<i>no</i>
9	<i>no - no</i>
10	<i>n</i>
11	<i>n</i>
12	<i>n</i>
13	<i>n</i>
14	<i>n</i>
15	<i>n</i>
16	<i>n</i>
17	<i>n</i>
18	<i>n</i>
19	<i>6 both.</i>
20	<i>n</i>
21	<i>n</i>
22	<i>n</i>
23	<i>n</i>
24	<i>n</i>
25	<i>n</i>
26	<i>n</i>
27	<i>n</i>
28	<i>n</i>
29	<i>n</i>
30	<i>n</i>
31	<i>n</i>
32	<i>n</i>
33	<i>no</i>
34	<i>5ft 8</i>
35	<i>132 lbs</i>
36	<i>32-37</i>
37	<i>50 for mount</i>
38	<i>Father Richard Kellygreen</i>
39	<i>none</i>

[Large handwritten scribbles and illegible markings in the center of the table area.]

Di

Signature of Medical Examiner:

[Handwritten signature]

No. 3212



4/ 1ST. NEWFOUNDLAND REGIMENT 6

ALLOTMENTS

I, Peter Beach, Regl. No. 3666

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.:

Allotment begins June 17/17.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3341	Father	Richard Beach	Kelligrews	60
			Total Allotment, \$	60

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.) Chas. R. Cope
Officer Commanding 4. Company
St. John's, N.H.

(Sig.) Peter X Beach
^{His}
Private 72
Company Han

May 4th 1917



41 1ST. NEWFOUNDLAND REGIMENT 6

ALLOTMENTS

I, Peter Beach, Regl. No. 5666

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.:

Allotment begins June 1st/17.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3341	Father	Richard Beach	Kelligrews	60
			Total Allotment, \$	60

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.) Chas. R. Ayles
 Officer Commanding
 St. John's 4th Company
Major 1917

(Sig.) Peter Beach
 (Rank) Private

To. ~~Perad~~ Beach

~~Beligrews~~

~~Newlyd.~~

Cable per pounds through
Melita

3666 Pl. P. Beach

240

Seach, S

3666

Hay sept.

June 29, 1919

#3666 Pte. Peter Peach,

Kalligrews, C.B.

Dear Sir:-

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

Yours truly

Paymaster & Officer i/c Captain,
Records.

25333

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 *Peter* 2. Surname *Arch*

3. Rank *Pvt* 4. Regtl. No. *3666*

5. Address in full to which future payments of gratuity are to be forwarded *Kellegrew, G. B.*

6. Date of enlistment in the Regiment *Apr. 14/17*

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

8. Relationship of such dependents.....

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

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 field, if so, give dates and particulars of such service. *Overseas*

12. Give total length of time which you served on active service, whether in field or overseas. *From Apr. 14/17 to June 11/19*

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.....

..... *No*

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

..... *No*

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

..... *No*

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

..... *No*

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

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

..... *No*

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 + Germany from Oct. 12/17 to Sept 1919. Cambrai.

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:

Hub Beach
Peter Beach

Place of Residence:

Kelligrews, C. B.

Declared before me at:

A. Johns, Wfed

This

14th day of *June* 19. *19...*

Signature of Berrister of the
Supreme Court, Stipendiary Magis-
trate, Notary Public, Justice of the
Peace, or Commissioner of affidavits.

John McCarthy

POST DISCHARGE PAY.

Date paid	Soldier.	Wid	Dependent	War Service Credit.	Net amount due
.....	<i>5 mos</i>	<i>250</i>
.....
.....

Certified correct.

Paymaster

June 29, 1919

#3666 Pte. Peter Peach,

Kelligrows, C.B.

Dear Sir:-

Please find enclosed Discharge
Certificate No. 2465.

Yours truly

Captain,
Paymaster & Officer i/o Records.

6.19

The Royal Newfoundland Regiment

Class for Demobilization: 86

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 13.6.19

Regimental No 3666

Name Ernest Leitch Rank

Address Killigrew

Present Medical Category A1

Recommended for:— (a) Immediate discharge

(b) Standard Medical Board

Members of Board

R. H. Lat
O.C. Discharge Depot.

L. Peterson
Senior Medical Officer

J. W. Burden
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 3666 Rank Pte Name Beach, Peter
 Date of Enlistment 23-4-17 Address Kelligrews District S. Main
 Occupation Miner Classification for Discharge 4 Medical Category A1
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. P136	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 14-6-19 O. C. Discharge Depot. H. M. W. P.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am Le in a position to resume civilian occupation. Peter Beach
Int. New man

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 Mildonstr

Date 14-6-19 O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 71776 to his home at Kelliferry and Release Certificate No. 2767 issued.

Date 14-6-19

J.A. Snowball
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 29-6-19

Date 14-6-19

J.A. Snowball
for Depot Paymaster.

Discharge approved for 15-6-19
Forwarded with following documents to O.C. Discharge Depot.

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
B179c	B 120	M 93		

Date 14-6-19

J.A. Snowball
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:-

Officer in Charge Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date JUN 15 1919

R.H. Sait Capt.

O. C. Discharge Depot.

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

Date

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

MEDICAL HISTORY

OF

Surname

Leach

Christian Name

Peter

Table I.—GENERAL TABLE.

Birthplace:—Parish

Kelligrews

County

C. B.

SPECIAL RESERVE.

REGULAR ARMY.

Examined	on <i>23rd</i> day of <i>April</i> 191 <i>7</i>	on	191
	at <i>Headquarters</i>	at	
Declared Age	19 years — days	years	days
Trade or Occupation	<i>Miner</i>		
Height	<i>5</i> feet <i>8</i> inches	feet	inches
Weight	<i>132</i> lbs.	lbs.	lbs.
Chest Measurement	Grith when fully expanded	<i>37</i> inches	inches
	Range of Expansion	<i>5</i> inches	inches
Physical Development			
Vaccination Marks	Right	Left	
	Number		
When Vaccinated			
Vision	R.E.—V= <i>4/6</i>	R.E.—V=	
	L.E.—V= <i>4/6</i>	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)	<i>W. G. Proemier.</i>		
(Rank)	<i>Lieut.</i>		
	Medical Officer.		Medical Officer.
Enlisted	at <i>St Johns</i>	at	
	on <i>23rd</i> day of <i>April</i> 191 <i>7</i>	on	day of 191
	Corps.	Regtl. No.	Corps. Regtl. No.
Joined on Enlistment	<i>4/11/17</i>	<i>2nd</i>	<i>3666</i>
Transferred to			
Became non-effective by			
	on day of 191	on	day of 191
(Signature)			
(Rank)			



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.

Teach T.

Signature of Man.

Reg. No. *3666-*

J. H. Snowdapt.

Signature of the Vocational Officer or his Representative.

ST. JOHN'S.

Place

Date

14-6-19

191



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 *Peter Beach*

Regiment from which discharged *Royal Newfoundland*

Regimental number *3666*

Intended address *Kelligrews*

Height on discharge *5* Feet *8*

Color of hair on discharge *Black*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *scar left arm*

Figure on discharge *medium*

Christian name of Father *Richard*

Christian name of Mother *Mary*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *Kelligrews, May 14th, 1897*

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) *Peter Beach*

Pte

(Rank)

Station **ST. JOHN'S.**

Witness W. Glendunbury.
Date *12-6-19*

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.



Station

Date

Casualty Form—Active Service.

Regiment or Corps Newfoundland A
 Rank Pte Surname Black Christian Name Peter
 Religion C of E Age on Enlistment 19 years 0 months.
 Enlisted (a) 23. 4. 17 Terms of Service (a) duration Service reckons from (a) 23. 4. 17
 Date of promotion to present rank _____ Date of appointment to lance rank _____
 Extended { _____ } Re-engaged { _____ } Qualification (b) _____
 or Corps Trade and Rate _____
Occ. Mines Harold Knight Sr. Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
			Embarked <u>St. John's</u>		<u>6/1/17</u>
			Disembarked <u>Halifax</u>		<u>7/1/17</u>
			Joined Battalion <u>14/1/17</u>		
<u>20 NOV 1917</u>	<u>OC</u>	<u>WOUNDED IN ACTION</u>	<u>20 NOV 1917</u>		<u>A.F.B. 213.</u>
<u>21/1/17</u>	<u>37 TA</u>	<u>ad GSW am trans</u>	<u>5 CES</u>	<u>20/1/17</u>	<u>E.D. 3827</u>
	<u>11 strength</u>	<u>290</u>	<u>Halifax</u>	<u>21/1/17</u>	<u>42 41502</u>
	<u>2-course</u>			<u>25/1/17</u>	<u>42 16694</u>
	<u>8:4 PM</u>	<u>Joined Base Depot</u>	<u>Halifax</u>	<u>17-18</u>	<u>Red</u>
	<u>Plung</u>	<u>Remained over</u>	<u>Sped</u>	<u>22-28</u>	<u>B.213 9/18</u>
		<u>Leave out. 3/1/18 to 17/1/18</u>			<u>B.213 4/1/18</u>
	<u>64 CES</u>	<u>Ad. V.D.G.</u>		<u>27/1/18</u>	<u>E.D. 9880</u>
	<u>144 CES</u>			<u>30/1/18</u>	<u>E.D. 141</u>
		<u>Discharged 12/1/15</u>		<u>B.213</u>	<u>1/2/19</u>

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, &c.

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 } *Fisherman*
 2. Regtl. No. *3666* 3. Rank... *Pvt* 7a. If the soldier claims previous service in Army, he should state—
 4. Name *Prach Peter* (Surname) (Christian Names) (a) Former Regts. or Corps ; with Regtl. Nos.
 5. Age last birthday... *21*
 6. Posted for duty on *Apr 1/17* at *St Johns* 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."
G.S.W. left forearm
Cambrai (Dec 1917)
 11. Date of origin of disability.
 12. Place of origin of disability.
 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.
He states that he was struck by Bullet (Rifle) in forearm. treated CES cured.

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

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.)

2 small scars, internal
 superficial healed and covered. no disability
 forearm.

16. Was an operation performed? If so, when and what was its nature? na
17. If not, was an operation advised and declined? na
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? na
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? na

Repatristion

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.

Station Hazeley D. Camp
 Date 29-4-19

W. J. Proemier Capt R.A.M.C
 Medical Officer in charge of case.

* 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

ST. JOHN'S, July 15th 1919

Royal Newfoundland Regiment.

Billeting Account,

To H. P. Peach

Billeting Soldiers as undermentioned

from June 1st 1919 to June 15th 1919

A.C.

3666 H. P. Peach 15 50

ACCOUNT	<u>134m</u>
CH. NO.	<u>2999</u>
IND. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

Certified correct for \$ 15.50

R.J.

McBlown
Billeting Officer.

P. J. ...

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121
39.

Number of Sheet *1st*

Regiment of 1st Newfoundland.

Signature of O. C. Company *Chas. A. [Signature]*

Regimental Number and Name	
No.	<i>3666 Peach Peter.</i>
Joined	Date
Joined	Date
Joined	Date
Joined	Date

Enlistment		Trade
Age on	<i>19</i> years — months	<i>Miner.</i>
Place and Date of Enlistment	<i>St. John's.</i>	Religion
	<i>23.4.17</i>		C.P.C.
Period of	with Colours <i>68</i> years.	Place of Birth
	with Reserve <i>365</i> years.	

Good Conduct Badges, Service pay or proficiency pay

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>Demobilized St. John's, 29th 6/19</i>									
To be carried over									

A3666

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 3666 Rank Private Name Peach Peter
 Date of Enlistment 23-4-17 Address Kellegneys District St. John's
 Occupation Miner Classification for Discharge 1/4 Medical Category A1
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

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

Date 14-6-19 J. M. H.
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am Private in a position to resume civilian occupation. Peter X Peach
W. J. Newman

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$100.00
- (b) Clothing Supplied _____

Date 14-6-19 _____
 O i.c. Re-clothing _____

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. to his home at Kellifreys and Release Certificate No. 2767 issued.

Date

14-6-19

J.A. Snowball
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

Date

14-6-19

14-6-19
J.A. Snowball
Depot Paymaster.

Discharge approved for

15-6-19

Forwarded with following documents to O.C. Discharge Depot.

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
B179c	B 120	M 93.		

Form B

Date

14-6-19

J.A. Snowball
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date

JUN 15 1919

R. J. ...

O. C. Discharge Depot.

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

Date

June 24/19

J. M. ...
for records

Reg. No. *3666* Rank *Plt* Name *Presch, P.*

Attested Address *Kellig news*

Allotment Allottee

Date of Allotment Returned from Overseas *29-5-19*

Returned on S.S. *Corican* Cause *Discharge*

14.6.19.
15.6.19.

PASSED TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED ON DEMOBILISATION.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 3666 Rank PLT Name Peach, Peter
 Intended place of residence Kelligrews H^{rs} Main

2. Occupation Miner
 Classification of soldier Medical Category

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 JUN 14 1919
 *[Signature]*
 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
JUN 14 1919
 *[Signature]*
 Signature of soldier
 *[Signature]*
 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
JUN 14 1919
 *[Signature]*
 Signature of soldier
 *[Signature]*
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 23-4-17 No of days on Military
 Discharged from service 13-6-19 plus 14 days Service 798.....

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
 Date JUN 15 1919
 *[Signature]*
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed
 Place St. John's, Nfld
 Date June 29/1919
 *[Signature]*
 Officer i/c Records
 The Royal Newfoundland Regiment

[Handwritten note] a 462079/2465