



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 2194 Name David Peddle Corps .....

### Questions to be put to the Recruit before Enlistment.

- |  |  |
|--|--|
| 1. What is your name? .....  | 1. <u>David Peddle</u> .....             |
| 2. What is your full Address? .....  | 2. <u>St. Michaels Bay, C.B.</u> .....   |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u> .....                      |
| 4. What is your age? .....   | 4. <u>23</u> Years <u>1</u> Months ..... |
| 5. What is your Trade or Calling? .....  | 5. <u>Seaman</u> .....                   |
| 6. Are you Married? .....  | 6. <u>No</u> .....                       |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? .....                             | 7. <u>No</u> .....                       |
| 8. Are you willing to be vaccinated or re-vaccinated? .....  | 8. <u>Yes</u> .....                      |
| 9. Are you willing to be enlisted for General Service? .....   | 9. <u>Yes</u> .....                      |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?....                                       | 10. { Name .....                         |
|  | { Corps .....                            |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... | 11. <u>Yes</u> .....                     |

I, David Peddle 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.

David Peddle SIGNATURE OF RECRUIT.

6 Feb. 27th 1916 David W. [Signature] Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, David Peddle 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. The said recruit has made and signed the declaration and taken the oath before me at St. Michaels Bay on this 27th day of February 1916.

Signature of Attesting Officer David W. [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 1st Newfoundland Regiment. If enlisted by special authority, such will be attached to the original attestation.

Date ..... 1916 } Approving Officer.  
Place .....

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

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

**DESCRIPTIVE REPORT ON ENLISTMENT**

*2194*  
Applicable to all ranks. To correspond with entries on the Medical History Sheet.

Name Erwin P. Riddle  
Apparent age 22 years 1 months. Height 5 feet 7 1/2 inches  
Chest Measurement { Girth when fully expanded 116 inches  
Range of expansion 5 inches  
Distinctive marks

**INFORMATION SUPPLIED BY RECRUIT**

Name and Address of next of kin Miss John Smith, Sparrows 1217, C.B.  
Relationship Mother  
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 29-2-16  
Joined at St John's on February 29-16  
Discharged July 5/19  
Embarked St John's N.S. division for Oct 19 1/2. Embarked for 1863 3/7. Admitted 88 St. Location 10 2/7  
Discharged to base 7/17. Admitted 12th Regt Queen 11/20 5/7. Invalider to hospital 11 2/7. Admitted 5th (P) Mad  
Rebaptized 12 2/7. Surpassed then attached depot Oct 22 1/7 to command depot 30 2/7. Admitted 14th Depot Apr 20 0/7  
Embarked for 1863 3/7. Disembarked for Queen 26-4-18. Joined 13th Regt 15-5-18. Admitted 24 1/7  
13th (Light) Coy 3-5-18. Dec to Regt Queen 11-7-18. Joined 13th Regt on the field 17-7-18. Admitted (Vol) 24 9/18  
Admitted 7th Coy 13th Brigade 27 7/18. Promoted to Captain 27-11-18. Order to demobilize 28 1/7-18. Admitted for discharge 12 2/7  
Arrived home from abroad 21-12-18.  
Demobilization St John's 5-2-1919

Total Service forfeited as above.....

Total Service towards Engagement to 5-2-1919 (date of discharge) 2 years 343 days  
" " " Pension " " " " " " " " " " " " " " " " "



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 2194 Name David Paddle Corps

### Questions to be put to the Recruit before Enlistment.

- |  |  |
|--|--|
| 1. What is your name? .....  | 1. <u>David Paddle</u>                   |
| 2. What is your full Address? .....  | 2. <u>Spaniards Bay, C.B.</u>            |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u>                            |
| 4. What is your age? .....   | 4. <u>23</u> Years <u>1</u> Months       |
| 5. What is your Trade or Calling? .....  | 5. <u>Seaman</u>                         |
| 6. Are you Married? .....  | 6. <u>No</u>                             |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? .....                             | 7. <u>No</u>                             |
| 8. Are you willing to be vaccinated or re-vaccinated? .....  | 8. <u>Yes</u>                            |
| 9. Are you willing to be enlisted for General Service? .....   | 9. <u>Yes</u>                            |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? .....                                     | 10. <u>Yes</u> Name .....<br>Corps ..... |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... | 11. <u>Yes</u>                           |

FOR THE DURATION OF THE WAR

I, David Paddle 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.

David Paddle SIGNATURE OF RECRUIT.

6 Feb. 27th 1916 David W. Agre Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, David Paddle 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 Spaniards Bay on this 27th day of February 1916

Signature of Attesting Officer David W. Agre

### †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 David Reddle  
 Apparent age 22 years 1 months. Height 5 feet 7 1/2 inches  
 Chest Measurement { Girth when fully expanded 40 inches  
 Range of expansion 5 inches  
 Distinctive marks \_\_\_\_\_



## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs John Smith, Spanish Way, C.B.  
 | Relationship Mother

### Particulars as to Marriage

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

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

### Particulars as to Children

Christian Names	Date and Place of Birth

## STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from _____									
Joined at _____ on _____									
Total Service forfeited as above.....									
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days									
" " " Pension " _____ [ " " ] _____ " "									



This Form is to be used in connection with Pamph.

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 *David Peable*

aged *23* conducted at *Grand Falls*

Date: *Feb 21/16* Recruiting officer:

NO. OF TEST FINDING *Recommended.*

- 1 *no defect* ✓
- 2 " ✓
- 3 " ✓
- 4 " ✓
- 5 " ✓
- 6 " ✓
- 7 " ✓
- 8 " ✓
- 9 " ✓
- 10 " ✓
- 11 " ✓
- 12 *feet slightly flattened. OK.*
- 13 " ✓
- 14 " ✓
- 15 " ✓
- 16 " ✓
- 17 " ✓
- 18 " ✓
- 19 " *6/6 Both eyes* ✓
- 20 " ✓
- 21 " ✓
- 22 " ✓
- 23 " ✓
- 24 " ✓
- 25 " ✓
- 26 " ✓
- 27 " ✓
- 28 " ✓
- 29 " ✓
- 30 " ✓
- 31 " ✓
- 32 " ✓
- 33 " ✓

*2194*

*iv*

*no*  
*5' 7 1/2 141 lbs.*  
~~*36 3/4*~~ *35-40*  
*1050 per day*  
*Mother*  
*no one*

*JW*

Signature of Medical Examiner: *A. B. Chamberlain*  
*J. W. Borden*

1255  
Medical Report on an Invalid.

Station Hazeley Down Camp.Date Dec. 11th. 1918.

- |                                    |  |
|------------------------------------|--|
| 1. Unit <b>Royal Newfoundland.</b> | 7. Former Trade }<br>or Occupation }         |
| 2. Regimental No. <b>2194.</b>     | 7A. If with previous service in Army, state— |
| 3. Rank <b>Pte.</b>                | (a) Former Unit;                             |
| 4. Name <b>Peddle. David</b>       | (b) Regimental No.;                          |
| 5. Age last birthday               | (c) Date of Discharge;                       |
| 6. Enlisted { on                   | (d) Cause of Discharge.                      |
| { at                               |  |

**8. Disability in respect of which invaliding is Proposed.***(Other disabilities should be reported upon in answer to question No. 19).***D.A.H.**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.
10. Place of origin of disability.
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. **Went to France June 1916. Contracted acute Nephritis, for which treated & cured at Wandsworth. Went to France again April 1918. Boarded Rouen Nov 1918. Marked B category, transferred to England he says on account of D.A.H.**
12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
- attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
  - constitutional or hereditary, and not aggravated by service during the present war.
  - attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

13. What is his present condition? **He now complains of shortness of breath after long marches, otherwise no disability. No bruit to be heard in heart which is regular.**  
*Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.*
14. If the disability is an injury, was it caused—  
 (a) In action?  
 (b) On field service?  
 (c) On duty?  
 (d) Off duty?
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?
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. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.
20. Do you recommend—  
 (a) Discharge as permanently unfit, or  
 (b) Change to England?

**Repatriation.**

**J. ST. P. Knight. CAPT. RFLD. REGT.**

Officer in medical charge of case.

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

Station \_\_\_\_\_

Officer in charge of Hospital.

Date \_\_\_\_\_

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

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

Opinion of the Medical Board.

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

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

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

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

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

**Scar in right leg from G.S.W. 1916  
no disability. No Alburnen.**

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

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

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

**Exposure & Strain of Military Service.**

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

23. Is the disability permanent?

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

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

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

**Less than 20 %.**

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

27. Do the Board recommend—

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

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

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

29. With reference to Army Council Instruction No. 1275 of 1917, is any surgical appliance recommended?

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

Signatures:—

**H.S. FRANKS.** \_\_\_\_\_ President.

Station **ST. JOHN'S.** \_\_\_\_\_

**ARCH.C. TAIT.** \_\_\_\_\_

Date **Jan 14 1919** \_\_\_\_\_

**L.PATERSON. MAJOR.** \_\_\_\_\_

Approved \_\_\_\_\_

Station \_\_\_\_\_

**(Sgd.) Cluny Macpherson. Major.** \_\_\_\_\_

Date \_\_\_\_\_

Administrative Medical Officer.





Medical Report on an Invalid.Station Hasley Down Camp.Date Dec. 11th, 1918.

- |   |  |
|---|--|
| 1. Unit <b>Royal Newfoundland.</b><br>2. Regimental No. <b>2194.</b><br>3. Rank <b>Pte.</b><br>4. Name <b>Peddle.</b><br>5. Age last birthday<br>6. Enlisted { on<br>at | 7. Former Trade }<br>or Occupation }<br>7A. If with previous service in Army, state—<br>(a) Former Unit;<br>(b) Regimental No.;<br>(c) Date of Discharge;<br>(d) Cause of Discharge. |
|---|--|

**8. Disability in respect of which invaliding is Proposed.***(Other disabilities should be reported upon in answer to question No. 19).***D.A.H.**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.
10. Place of origin of disability.
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. **Went to France June 1916. Contracted acute Nephritis, for which treated & cured at Wandsworth. Went to France again April 1918. Boarded Reven Nov 1918. Marked B category, transferred to England he says on account of D.A.H.**
12. Give your opinion as to the causation of the disability, stating, whether in your opinion it is—
- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
  - (b) constitutional or hereditary, and not aggravated by service during the present war.
  - (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

13. What is his present condition? **He now complains of shortness of breath after long marches, otherwise no disability. No bruit to be heard in heart which is regular.**  
*Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.*
14. If the disability is an injury, was it caused—  
 (a) In action?  
 (b) On field service?  
 (c) On duty?  
 (d) Off duty?
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?
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. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.
20. Do you recommend—  
 (a) Discharge as permanently unfit, or **Repatriation.**  
 (b) Change to England?

J. ST. P. Knight. CAPT. NFD. REGT.

Officer in medical charge of case.

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

Station \_\_\_\_\_

Officer in charge of Hospital.

Date \_\_\_\_\_

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

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

Opinion of the Medical Board.

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

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

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

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

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease. **Scar in right leg from G.S.W. 1916 no disability. No Albumen.**

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

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

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

**Exposure & Strain of Military Service.**

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

23. Is the disability permanent?

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

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

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

**Less than 20 %.**

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

27. Do the Board recommend—

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

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

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

29. With reference to Army Council Instruction No. 1275 of 1917, is any surgical appliance recommended?

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

Signatures:—

N.S. FRASER.

President.

Station ST. JOHN'S.

ARCH.C. TAIT.

Members.

Date Jan. 14th 1919.

L.PATERSON. MAJOR.

Approved JAN 14 1919

(Sgd.) Cluny Macpherson. Major.

Station No. ....

Administrative Medical Officer.

Date NEWFOUNDLAND

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 2194 Rank Pte Name Peddle, David  
 Intended place of residence New Harbour

2. Occupation Lumberman  
 Classification of soldier B Medical Category E

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

**ELIGIBLE for POST DISCHARGE PAY**

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

Place ST. JOHN'S (sgnd) G. C. Duley, Capt.  
 Date Jan. 20, 1919 for Commanding Discharge Depot  
 The Royal Newfoundland Regiment

### CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date ST. JOHN'S (sgnd) D. Peddle  
20-1-19 Signature of soldier  
 " C. B. Dicks, Capt.  
 Signature of witness

### CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date ST. JOHN'S (sgnd) D. Peddle  
20-1-19 Signature of soldier  
 " C. B. Dicks, Capt.  
 Signature of witness

### STATEMENT OF SERVICE

7. Enlisted for service 21-2-16 No of days on Military  
 Discharged from service 22-1-19 plus 14 days Service 1081

### 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 (sgnd) R. H. Tait, Capt.  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment.  
 Date Jan. 22, 1919

### CONFIRMATION OF DISCHARGE

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

Place .....  
 Date .....  
 Officer i/c Records  
 The Royal Newfoundland Regiment

C.R. 2194

WOUNDED & SICK N.C.O's & MEN OF THE BRITISH EXPEDITIONARY FORCE - FRANCE & ITALY.

## ADMIRALTY.

LIST NO H.A. 23977.

1945 M.B. Chf. P.O. R.N.R. H.M.M. 367. N.Y.D. Sick. Slt. ..Adm. 79 Gen.H. Taranto 21 May 18.  
 C M M Sell, W.H. R.M.L.I. 3rd. -dt- .....Adm. 79 Gen.H. Taranto 21 May 18.  
 20219 Pte. Hutton, W. R.M. Batt. Madros. ....Dis. ex 79 Gen.H. Taranto 21 May 18.  
 9037 Stkr. O'Keefe, E. R.N.R. HMS. Cyclaman.



## NEWFOUNDLAND EXPEDITIONARY FORCE.

LIST NO H.A. 23977.

2194 Pte. Peelle, D. 1/Newfl'd. Influenza.....Adm. 74 Gen.H. Trouville 23 May 18.

## SOUTH AFRICAN-RECORD OFFICE.

LIST NO. H.A. 23977.

1477 Gnr. Jackson, J.E. S. Afr. Hvy. Arty. Gas Shell Must. Adm. 74 Gen.H. Trouville 23 May 18.

## RECORD OFFICE - C O R K.

LIST NO H.A. 23977.

4905 Pte. O'Neill, T. 1/5 R. Ir. Regt. Pyrexia.....Adm. 74 Gen.H. Trouville 23 May 18.  
 Malarial.  
 7278 Pte. Sinnott, R. 5/R. Ir. Regt. Myalgia.....Adm. 74 Gen.H. Trouville 23 May 18.  
 18119 Pte. Green, P. 2/Leins. Regt. GSW Head. R. Arm. Adm. 83 Gen.H. Boulogne 24 May 18.  
 & L. Knee.  
 5566 Pte. Clarke, P. 2/Leins. Regt. Gassed (Shell) wd. Adm. 83 Gen.H. Boulogne 24 May 18.  
 6016 Pte. Lennox, D. 2/R. Ir. Regt. Tr. Fever.....Adm. 74 Gen.H. Trouville 23 May 18.

## RECORD OFFICE - D U B L I N.

LIST NO H.A. 23977.

11682 Sgt. Reynolds, H.G. 1/R. Dub. Fus. P. U. O. Sk. Slt. Adm. 83 Gen.H. Boulogne 24 May 18.  
 23340 Pte. Ryan, G. 1/R. Dub. Fus. GSW Groin.....Adm. 74 Gen.H. Trouville 23 May 18.


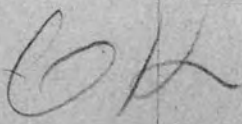
1212

No. of Paper 1464

## PERSONAL EFFECTS.

C.R. 2194

Name Peddle D.No. 2194Rank PrivateRegiment ROYAL NEWFOUNDLAND REGIMENT.

Article	Where stored	Notified by
1 Package containing personal effects.		
	Final Disposal	
		

Remarks:— Casualty Advice;— Repatriated 12-12-18Next of Kin:— Mother:— Miss John Smith,  
Spaniards Bay,  
C. B.

C.R. 2194

Extract from Merinal Roll of RFLA. Regt. Embarked Southampton,  
from 2nd Bn. Depot, to 1st Bn. B.R.F. (Draft No. 11)

3-10-16.

2194 Pte. E. Peddie.

C.R. 2194

Extract from Daily Orders part II, Depot St. John's dated Feb. 7/1919.

The discharge of the undernoted on demobilisation have been APPROVED  
by Officer i/c Records on 5-2-19.

#2194 Pte. David Peidle.



C.R. 2194

SICK AND WOUNDED N.C.O's AND MEN OF THE EXPEDITIONARY FORCE - FRANCE.

LIST No.H.A.31944.

INFANTRY RECORD OFFICE - P/E R T H.

27816 Pte.Paddock,G.	9-B.Watch.	Trans:to Terlinothun Dtl.Camp."Fit" ex 1 Con:Dep.Boulogne. 18th Nov'18.
203525 " Fulton,W.	5-Camerons.	Trans:to Terlinothun Dtl.Camp."Fit" ex 1 Con:Dep.Boulogne 18th Nov'18.
S/29279 " Harlow,J.T.	14-A & S.Hrs.	Trans:to Terlinothun Dtl.Camp."Unfit" ex 1 Con:Dep. Boulogne.18th Nov'18.
202759 Piper,Jones,J.	4/5-E.Watch.	Trans:to Terlinothun Dtl.Camp."Unfit" ex 1 Con:Dep. Boulogne.18th Nov'18.

TRANS: TO BASE DEP: CALAIS "FIT" EX 1 CON: DEP: 18th NOVEMBER 1918.

350561 Pte.Coogrove,J.	9-E.Watch.	
236091 " Blair,F.	1/4-Gordons.	
43180 " Mallais,J.	1/8-A & S.Hrs.	
19885 " Burt,A.	1/5- do.	
255045 Cpl.Muir,A.	1-B.Watch.	
292739 L/C.Critchley,A.	9- do.	
301211 pte.MacDonald,J.	1/8-A & S.Hrs.	
203269 " Harper,W.	1/5-Gordons.	
17103 " Autocherlorie,T.	1/8-A & S.Hrs.	
40760 L/C.Fowler,W.	5-Camerons.	
9568 Sgt.Dalgleish,R.	14-A & S.Hrs.	
25187 pte.Davidson,P.	4/5-B.Watch.	
20786 L/C.Graham,J.	6-Camerons.	
25655 Pte.Robertson,A.	8-B.Watch.	
14340 Sgt.Dickie,J.C.	5-Camerons.	
43594 Pte.Gerratt,T.	8-B.Watch.	
13637 " Ferguson,J.	6-Camerons.	
346039 " Telfer,N.	A & S.Hrs.att.218- Div.Emp.Coy.	Trans:to Base Dep.Calais."Unfit" ex 1 Con:Dep.18.Nov'18.

NEWFOUNDLAND EXPEDITIONARY FORCE.

LIST No.H.A.31944.

2194 Pte.Peddle,D.	1-R.Newfoundlands.	Trans:to Terlinothun Dtl.Camp."Unfit" ex 1 Con:Dep. Boulogne.18th Nov'18.
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1946

C.R. 2194

Extract from Casualties received from Pay & Record Office,  
London, dated May 15, 1918.

#2194 Pte. D. Peddle

N.Y.D.

Admitted 24th General Hospital, Etaples 3rd May 1918.

C.R. 2194

Extract from Nominal Roll to B.E.F. embarked  
Southampton, 23-4-18

#2194 Pte.D.Peddle.

No 3

foundland Postal Telegraphs

2194 Paid

Place Stamp and Date

Prefix SERVICE MESSAGE

MAR 15 1897 P 107

Time received Time sent

From

To

Postal Casualty Clerk

Your date Smith  
Spaniards Bay undelivered  
party lives six miles in  
country - will cost dollar to  
press.

# 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 Message 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

March 15, 1917.

To

Mrs. John Smith,

Spaniard's Bay, C.B.

Regret to inform you that Record Office, London, officially reports No. 2194, Private David Peddle, has been admitted to Wandsworth suffering from inflammation of the kidneys.

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

J. R. BENNETT,

Colonial Secretary.

FOR TYPEWRITER

2194 Peddle

C.R. 2194

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

Mar. 15th, 1917.

Wandsworth.

2194 Peddle.

Nephritis.

C.R. 2194

Extract from Nominal Roll Embarked St. John's for Overseas,  
per S.S. Sicilian" Sept. 19, 1916.

2194 Pte. Peddle, D.

NEWFOUNDLAND CONTINENTAL  
 25, VICTORIA ST.  
 LONDON, E.C. 1  
 JUL 1918  
 # RECORD OFFICE

C.R. 2194

SICK AND WOUNDED R.C.C.O.'S AND MEN OF THE EXPEDITIONARY FORCE - FRANCE

R O A L E N G I N E E R S - T R A N S P O R T A T I O N B R A N C H

LIST No H. A. 26577

WR/509406 Pnr. Daubney. G. R.E. I.W.T. Dis to Duty Class A ex 4 Con Dep Havre 28th June'18  
 WR/509546 Spr. Beasley. I. R.E. I.W.T. Dis to Duty Class A ex 4 Con Dep Havre 28th June'18

ADM. 4, CON. DEP. HAVRE, 28th JUNE'18

250808 Pnr. Davies. R. R.E. R.T.E. Influenza . . . . .  
 WR/506093 Spr. Woodward. A. R.E. I.W.T. -do-  
 WR/504397 " Cook. G. R.E. -do- -do-  
 WR/505426 " Perks. E. R.E. -do- -do-  
 WR/504441 " Collison. H. R.E. -do- -do- . . . . .  
 WR/505352 " Baker. J. R.E. -do- -do- . . . . .  
 WR/505923 " Burchett. P. R.E. -do- -do- . . . . .  
 268355 " Carney. J.L. 1/6 W Ridings Nervous Debility . . . Adm 13 Con Dep Trouville 25th June'18  
 att DO RE  
 297914 Sap. Headdon. H.W. R.E. 510 R.C.C.O. Cont Foot R . . . Adm 13 Con Dep Trouville 25th June'18

1423

NEWFOUNDLAND EXPEDITIONARY FORCE

LIST No H. A. 25577

2194 Pte. Peddle. D. 1 Royal Newfoundlands Influenza . . . Adm 13 Con Dep Trouville 25th June'18

CAVALRY - CANTERBURY

LIST No H. A. 25577

9105 Pte. Kehoe. W.J. 3 Hussars Ac Rheumatism . . . Adm 13 Con Dep Trouville 25th June'18



C.R. 2194

WOUNDED & SICK N.C.O.s & MEN OF THE EXPEDITIONARY FORCE . . . FRANCE,



INFANTRY RECORD OFFICE - L I C H F I E L D (PART 1). LIST NO. H.A. 26305.

DIS.	TO REIN.	CALAIS CLASS	"A"	EX	13	CON.	DEP.	11	JULY	1918.
57470	Pte. Lewson, F.			1/	Line.R.					
71965	Pte. Mitchell, P.			1/	N. & D.R.					
94309	Spr. McParadon, J.			1/	Co. RE. att. H. & D.R.					
265369	Pte. Pepper, E.H.			1/7	H. & D.R. att. 139/Bde.HQ.					

1501

INFANTRY RECORD OFFICE - L I C H F I E L D PART TWO). LIST NO. H.A. 26305.

DIS.	TO REIN.	CALAIS CLASS	"A"	EX	13	CON.	DEP.	11	JULY	1918.
241972	L/C. Turner, H.			1/	N. Staff.R.					
235462	Pte. Chester, C.			6/	Leicc.R.					
41371	Pte. Radley, H.			6/	Leicc.R.					
201615	Pte. Allen, P.J.			1/5	S. Staff.R.					

INFANTRY RECORD OFFICE - P E R T H. LIST NO. H.A. 26305.

DIS.	TO REIN.	CALAIS CLASS	"A"	EX	13	CON.	DEP.	11	JULY	1918.
260023	Pte. Goodwin, R.			1/	Gord.R.					
9913	CSM. Reid, W.			1/	R. Hghrs.					
12612	Pte. Smith, A.			2/	Sea. Hghrs.					
12227	Pte. Smith, T.			5/	A. & S. Hghrs.					
515105	Pte. Davy, E.E.			14/	Lond.R.					

NEWFOUNDLAND EXPEDITIONARY FORCE. LIST NO. H.A. 26305.

DIS.	TO REIN.	ROUEN CLASS	"A"	EX	13	CON.	DEP.	11	JULY	1918.
2194	Pte. Peddle, D.			1/	R. New'ld.R.					

C.R. 2194

Extract from Daily Orders part 11, Depot St. John's dated Dec. 33rd. 1918

The u/a returned from Overseas and reported to Depot 21-12-18.

#2194 Pte. D. Peddle.

C.R. 2194

Extract from Nominal Roll of Repatriation Draft No. 79 per S.S. CORICAN  
which embarked at Tilbury Docks, 12/12/18.  
From the 2nd., Battalion of the Newfoundland Regiment

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#2194 Pte. D. Peddle.

C.R. 2194

Extract from CASUALTIES from P.&R.O., London, dated 4/12/18.

The following has reported to 2nd Bn. from Base Depot,  
Rouen, 28/11/18.

2194 Pte. D. Peddle

Authority: Mess from Medical Officer, 2/Battalion.

C.R. 2194

Extract from Daily Orders Part II Unit The Royal WFLA.  
Regt., France, 30-11-18.

2194 Pts., D. Peddle.

To England "B" 27-11-18.

## NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

C.P. 2194

## 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.

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

(NOT TRANSMITTED)

Signature of Sender \_\_\_\_\_

Address \_\_\_\_\_

Dept of Militia

Line Number	Red	By	Sent	by	Check

Dated

Nov. 2nd, 1918

To

Mrs. John Smith, Spenser's Bay, C.B.

Re:

~~REGENT~~ to inform you that Record Office, London,officially reports **Mo. 2194, Private David Peddle**

now convalescent at Boulogne Oct. 13th

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

J. R. Bennett

Chge Dept of Militia.

Minister of Militia.

FOR TYPEWRITER

C.R.

2140

Extract of Orders by Lt.Col. B.J.Barton B.S.O. Commanding  
2nd Battalion Royal Newfoundland Regiment. NOV 28 1918

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

2140 Pte.D.Peddle. as from 28/11/18

C.R. 2194

Extract from Daily Orders part 11, Depot St. John's  
dated January 23rd., 1918.

The undernoted discharge on demobilization have been  
APPROVED by C. C. Discharge depot from noted date:-

#2194 Pte. E. Peddle.

22-1-19.



C.R. 2194

Extract from Medical Board <sup>held</sup> Jan. 14th, 1919.

2194 Pte. D. Peddle.

Recommended Discharge as Permanently Unfit

C.R. 2194

Extract from Confirmation of Cable received  
Synoptical London, 28-10-18.

Reference your telegram 17th October 2194 Peddle  
convalescent October 13th.

(Original Not received)

16941/3/R.&.C.

2194

O.C. No. 7 Staty. Hospl.,  
B. E. F.

Officer Commanding,  
7th Stationary Hospl.,  
B. E. F.

C.P. & O. 1/c Records,  
Newfoundland Contingent.

Pay & Record Office,

21st October, 8

24- 10- 1918.

2194 PTE. D. PEDDLE,  
R. Newfoundland Rgt.

This man was discharged  
to No.1 Convalescent Depot  
on the 13th inst.

The following extract of  
telegram (8961) received 18/10/18  
from the Hon. Minister of Militia  
of Newfoundland is quoted, ~~please~~.

"Please inform- condition  
"of- 2194- Peddle-"

Will you give me any inform-  
ation to enable me to reply,  
please?

(Sgd) ? L Lt.Col.  
O.C. No. 7 Stationery Hospl.

Major,  
Chief Paymaster & O. 1/c Records.

9308

28/10/18

HB/JC

C.R. 2194

Extract from Telegram to Synoptical, London, dated October 17th 1918.

Inferm condition of:

2194 Peddle.

## NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 19 Sent by ma Rec'd by \_\_\_\_\_ Class 17 No. \_\_\_\_\_

Place from Spaniards Bay

To Hon W W Halford

Calcutta

OCT 16 1918

Please ascertain present condition  
 my son ~~of~~ David Peddle  
 no 2194 at 7th Stationary  
 Hospital Boulogne gassed  
 Mrs John Smith

C.R. 2194

Oct. 16th 1918

Mrs. John Smith  
Spaniard's Bay

Dear Madam:-

With reference to your wire of 16th inst. enquiring as to the condition of your son, No. 2194, Private David Pedale, I am instructed to state that a message will be cabled to the Record Office, London concerning this soldier, and the reply, when received, will be notified to you.

Yours faithfully,

*W. H. W.*  
Lieut.-Col.,

*W. H. W.*  
Chief Staff Officer.

C.R. 2194

Extract from Casualties ~~xxxxxxxxxxxx~~ List No. H.A. 30590

2194 Pte. Peddle, D.

1/Hfld. R. Adv. to Con. Dep. Boulogne 13th Oct '18. Wounded.

MM.

C. R. No. 144

# NEWFOUNDLAND POSTAL TELEGRAPHS.



## Cable Connection with all the World

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

(NOT TRANSMITTED)

Signature of Sender \_\_\_\_\_

Address \_\_\_\_\_

Dept of Militia

Line Number	Red	By	Sent	by	Cheek

Dated Oct 8th, 1918

To Mrs John Smith, Spaniard's Bay

Regret to inform you that Record Office, London, officially reports No. 2194, Private David Paddle at 7th Stationary Hospital Boulogne Sept. 27th suffering from gas poisoning severe

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

J.R. Bennett

Minister of Militia.

FOR TYPEWRITER



C.R. 2194

Extract from Casualties Lieut. No. H.A. 29677.

2194 Pts. D. Peddle.

L/Nfld. R. Adm. 7 Sty. H. Boulogne 27 Sept. 18.

"W" Gas Pois. Sev.

M.M.

*Sept 1914*

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178<sup>A</sup> to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

### MEDICAL HISTORY of

Surname Leslie Christian Name D.

**TABLE I.—General Table.**

Birthplace { Parish \_\_\_\_\_  
County \_\_\_\_\_

Examined { on \_\_\_\_\_ day of \_\_\_\_\_ 191\_\_\_\_  
at \_\_\_\_\_

Declared Age \_\_\_\_\_ years \_\_\_\_\_ days.

Trade or Occupation \_\_\_\_\_

Height \_\_\_\_\_ feet \_\_\_\_\_ inches.

Weight \_\_\_\_\_ lbs.

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

Physical Development \_\_\_\_\_

Vaccination Marks { Arm \_\_\_\_\_ RIGHT | LEFT  
Number \_\_\_\_\_

When Vaccinated \_\_\_\_\_

Vision { R.E.—V— \_\_\_\_\_  
L.E.—V— \_\_\_\_\_

(a) Marks indicating congenital peculiarities or previous disease—  
\_\_\_\_\_

(b) Slight defects but not sufficient to cause rejection—  
\_\_\_\_\_

Approved by \_\_\_\_\_  
Rank \_\_\_\_\_  
Medical Officer.

Enlisted { at \_\_\_\_\_  
on \_\_\_\_\_ day of \_\_\_\_\_ 191\_\_\_\_

	Corps	Regtl. No.
Joined on enlistment		
Transferred to	<i>1 New Forest</i>	<i>2194</i>

Became non-effective by \_\_\_\_\_  
on \_\_\_\_\_ day of \_\_\_\_\_ 191\_\_\_\_  
(Signature) \_\_\_\_\_  
(Rank) \_\_\_\_\_

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

Date	Brief Details, and Signature
<i>19/10/17</i>	<i>Coleman</i>
<i>28.7.18</i>	<i>WKS</i> <i>2 APR 1914</i> <i>Corporal</i>



**TABLE IV.—Service Table.**

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

TABLE II.—Only for admissions 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 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				
H. C. D. Ripon	31	7	17	19	10	17	Nephritis	80.	Col. A.M.	<i>[Signature]</i> M.C. R.A.M.C. M.O. 1/6 Northern Coy. 1st
	27	JAN	1918	2	18		Myalgia	19	Reassured. Discharged to duty	<i>[Signature]</i> Capt. <u>Kearse</u>



No. *2194* Name *Peddle D* Sqn., Batty., or Company *'A' Corps 1st Newfoundland* Date of Appointment *Feb 29/16* G.C. Badges *[blank]* Service or Proficiency Pay *[blank]*  
 Date of last entry in Company Conduct Sheet *[blank]* No. and date of last drunk *[blank]* Period not reckoning towards freedom from extra fine *[blank]* Sheet No. *one* Signature O.C. Company, etc. *J. [unclear] Capt* Character *Good*

Place	Date of offence	Rank	Case of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
<i>in the field</i>	<i>1/4/16</i>	<i>Pvt</i>		<i>Going 20 Rds S.A.A.</i>	<i>Sgt Cheamane</i>		<i>3-11-16</i>	<i>Major Robinson</i>	<i>deprived 10 days pay, 1916</i>
<i>[unclear]</i>	<i>12/4/17</i>			<i>[unclear]</i>	<i>[unclear]</i>				<i>[unclear]</i>

C.R. 2194

David Peddle was attested for General  
Service with the NEWFOUNDLAND REGIMENT ON February 29th 1916  
Regimental No. 2194 was allotted to Ptes D. Peddle

AUTHORITY:

Recrd Ledger;

Dept. of Militia.

March 25th 1919

D Peddle

2194

PT R Q

No 2607



## 1ST NEWFOUNDLAND REGIMENT

## ALLOTMENTS

I, David Piddle, Regl. No. 2194hereby agree, until further notification by me, and in similar official form to make an Allotment of  
Dollars and 60 Cents, per diem, from my Pay,to, and for the benefit of the undermentioned Person <sup>and</sup>/<sub>or</sub> Persons, such payment to be made on proof  
of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup>/<sub>or</sub> Persons  
concerned, viz.:Allotment begins May 1st

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>2006</u>	<u>mother</u>	<u>Mrs John Smith</u>	<u>St. John's Bay</u>	<u>60</u>
		<u>commencing 21/7/16.</u>		
			Total Allotment, £	

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

(Sig.) R.P. Hallaway  
 for Quart.  
 Officer Commanding  
 H. Company  
St. John's  
April 19<sup>th</sup> 1916

(Sig.) David Piddle  
 (Rank) Private

LAST PAY CERTIFICATE

OFFICE COPY N.F.P./

To be rendered for all ranks on discharge, transfer to other Units, or on return to Newfoundland in accordance with G.L./19, 26/5/17.

Regt. No. 2104 Rank Pte. Name Peddie D. Unit R.Nfld. Regt. who was repatriated  
to Newfoundland on 12 12 / 18 Authority Draft 79 Cause \_\_\_\_\_

STATEMENT OF ACCOUNT

DP.	PARTICULARS	\$			£			PARTICULARS	\$			£		
		¢			s	d					s	d		
PERIOD. FROM 10/5/18 TO 12/12/18	Balance Cr. from 10/5/18			2	8			Balance Cr. from						
	Allotment 216 days @ 60	129	60	26	12	7		Pay 216 days @ \$1.00	216	00				
	Cash Payments: P.&.R.O.			12	15	0		Field Allow 216 days @ \$1.00	21	60				
	Acq. Rolls			7	19	4			237	00	48	16	5	
	Depot				10	0		Other Allowes days @ \$						
					2	11								
	Other Debits							P.A. V. 1551				1		6
								Other Credits:						
	Total Debits			43	2	6		Total Credits			50	0	11	
	Balance due by Paymaster			1	18	5		Balance due to Paymaster			50	0	11	
			50	0	11									

*Copy Sent  
Maj. M. 1255/4  
21-1-19*

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

191

Place \_\_\_\_\_ (Date) \_\_\_\_\_ G.C. \_\_\_\_\_ Company \_\_\_\_\_  
 and is therefore subject to amendment if and as may be found necessary. London to 8/1/19

Pay & Record Office, London,

Chief Paymaster & O. i/c Records.

8 : 1 : 1919



LAST PAY CERTIFICATE

N.F.P./94.

to be rendered for all ranks on discharge, transfer to other Units, or on return to Newfoundland in accordance with C.L./19, 25/3/17.

S.S. No. 2194 Rank Pte Name Peddie D Unit Rayford Regt who was repatriated  
Newfoundland on 12/12/18 Authority Draft 79 Cause

STATEMENT OF ACCOUNTS

PARTICULARS				PARTICULARS				CR.			
	£	s	d		£	s	d		£	s	d
Balance Dr. from 10/5/18			2 8	Balance Cr. from 10/5/18							
Allotment 216 days @ 60 <sup>c</sup>	129 60	26	12 7	Pay 216 days @ \$1 <sup>00</sup>	216 00						
Cash Payments: <u>R.R.O.</u>			12 15 0	Field Allow 216 days @ \$0 <sup>10</sup>	21 60				48	16	5
<u>Acquittance</u>			7 19 4		237 60						
<u>Depos.</u>			10 0	Other Allowances days @ \$					1	4	6
			2 11	<u>Ra. V 1584</u>							
Other Debits				Other Credits:							
Total Debits			48 8 6	Total Credits					50	0	11
Balance due by Paymaster			1 18 5	Balance due to Paymaster					50	0	11
			50 0 11						50	0	11

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

191

This Statement is issued in accordance with information received in the Pay & Record Office and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

Jan 8 1919

Chief Paymaster & O. i/c Records.

PERIOD: FROM 8/12/18 TO 8/12/19  
 J.E.H.

LONDON Company  
 to 8/1/19

NEWFOUNDLAND CONTINGENT

STATEMENT of ACCOUNT of No. 2194 Pt Puddle F

(Substituting A.F. O. 1625). N.F.P./36.

F Company. From 14.8.17 To 17.8.17 (Dates inclusive).

Embarked per S.S. \_\_\_\_\_

DR. Classification (See Procedure).

From \_\_\_\_\_ Date \_\_\_\_\_

Draft No. \_\_\_\_\_ CR.

Date	Pay Book Col.	PARTICULARS	Rate	Dys	£	s	d	Date	Pay Book Col.	PARTICULARS	Rate	Dys	£	s	d	
	8	Forfeited Pay	60	14	8	40			1	Pay	100	14	14	00		
	9	Allotments							2	Field Allowance	10	14	1	40		
	10								3	Other Allowances						
11/12		Total Stoppages			8	40	1	14	6	4/5	Total @ 4.86 2/3			8	3	3
13		Fines							6	Balance Credit Last Period						
14		Clothing & Necessaries							6a	<u>OTHER CREDITS:</u>						
15		Arms & Accoutrements								Ration Allowance,						
16		Barrack Damages								/ / 17 to / / 17 4.						
17		Hospital Stoppages								= days @ /						
17a		Miscellaneous Stoppages														
19		Casual Payments					12	6								
20		1st Payment					12	6								
21		2nd "														
22		3rd "														
23		Final "														
24		Balance Debit Last Period														
28		" Due by Paymaster					3	9		27	Balance Due to Paymaster					
					3	3	3						3	3	3	

Darry Camp Carmonette  
15<sup>th</sup> Aug 1917.

CERTIFIED CORRECT.

W. G. S. Johnson  
 O.C. "F" Company.

**NEWFOUNDLAND CONTINGENT**

STATEMENT of ACCOUNT of No. 2194 Pte Paddle F

(Substituting A.F. O.1825). N.F.P./36.

F Company. From 4.8.17 To 17.8.17 (Dates inclusive).

Embarked per S.S. \_\_\_\_\_

DR. Classification (See Procedure).

From \_\_\_\_\_ Date \_\_\_\_\_

Draft No. \_\_\_\_\_ CR.

Date	Pay Book Col.	PARTICULARS	Rate	Dys	¢	¢	£	s	d	Date	Pay Book Col.	PARTICULARS	Rate	Dys	¢	¢	£	s	d
	8	Forfeited Pay	60	14	8	40					1	Pay	100	14	14	00			
	9	Allotments									2	Field Allowance	15	17	14	00			
	10										3	Other Allowances			14	00			
	11/12	Total Stoppages			5	40	1	14	6		4/5	Total @ 4.86 2/3			15	40	3	3	3
	13	Fines									6.	Balance Credit Last Period							
	14	Clothing & Necessaries									6a	<u>OTHER CREDITS:</u>							
	15	Arms & Accoutrements										Ration Allowance,							
	16	Barrack Damages										/ /17 to / /17 ¼							
	17	Hospital Stoppages										= days @ /							
	17a	Miscellaneous Stoppages																	
	19	Casual Payments					12	6											
	20	1st Payment					12	6											
	21	2nd "																	
	22	3rd "																	
	23	Final "																	
	24	Balance Debit Last Period																	
	28	" Due by Paymaster					3	9			27	Balance Due to Paymaster							
							3	3	3										

Bony Camp Carnaudie

CERTIFIED CORRECT.

1st Aug 1917

Ymacness Tolson  
S.O. "F" Company.

NEWFOUNDLAND CONTINGENT

AUG 27 1917

STATEMENT of ACCOUNT of No. 2194 The Paddle F

(Substituting A.F. O.1625). N.F.P./36.

F Company. From 4.8.17 To 17.5.17 (Dates inclusive).

Embarked per S.S. \_\_\_\_\_

DR. Classification (See Procedure).

From \_\_\_\_\_ Date \_\_\_\_\_

Draft No. \_\_\_\_\_ CR.

Date	Pay Book Col.	PARTICULARS	Rate	Dys	¢	¢	£	s	d	Date	Pay Book Col.	PARTICULARS	Rate	Dys	¢	¢	£	s	d
	8	Forfeited Pay	60	14	8	40					1	Pay	1 <sup>00</sup>	14	14	40			
	9	Allotments									2	Field Allowance	"	14	14	40			
	10										3	Other Allowances	"	14	14	40			
11/12		Total Stoppages			8	40	1	14	6		4/5	Total @ 4.86 2/3			15	40	3	3	3
13		Fines									6	Balance Credit Last Period							
14		Clothing & Necessaries									6a	<u>OTHER CREDITS:</u>							
15		Arms & Accoutrements										Ration Allowance,							
16		Barrack Damages										1/17 to 1/17 %.							
17		Hospital Stoppages										= days @ 1							
17a		Miscellaneous Stoppages																	
19		Casual Payments					12	6											
20		1st Payment					12	6											
21		2nd "																	
22		3rd "																	
23		Final "																	
24		Balance Debit Last Period																	
28		" Due by Paymaster					3	9			27	Balance Due to Paymaster							
							3	3	3										

Berry Camps Carmouche

CERTIFIED CORRECT.

15<sup>th</sup> Aug 1917.

Macross Johnson  
O.C. "F" Company.

16941/3/R.&C.

CHIEF PAYMASTER & OFFICER IN CHARGE RECORDS  
NEWFOUNDLAND CONTINGENT  
58 VICTORIA STREET,  
LONDON, S.W. 1,  
ENGLAND.

MEMORANDUM.

13/10/18  
1CC  
Copy to [unclear]  
29/10/18  
[Signature]

From O.U. No. 7 Stationary Hospl.  
B.E.F.

To Officer Commanding,  
7th Stationary Hospl.,  
B. E. F.

To Chief Paymaster & Officer  
i/c Records  
Newfoundland Contingent  
58 Victoria St. S.W. 1.

Pay & Record Office,

21st October, 1918

24-10-1918. 101

2194 PTE. D. PEDDLE,  
R. Newfoundland Bat.

This man was discharged to  
No. 1 Convalescent Depot on  
the 13th inst.

The following extract of  
telegram (8961) received 18/10/18  
from the Hon. Minister of Militia  
of Newfoundland is quoted, please

"Please inform- condition  
"of- 2194- Peddle-"

Will you give me any inform-  
ation to enable me to reply,  
please?

[Signature]  
Lieut Colonel RAMC.,  
O.C.No. 7 Stationary Hospl.

[Signature] for Major,  
Chief Paymaster & O. i/c Records.

NEWFOUNDLAND CONTINGENT,  
PAY & RECORD OFFICE.  
PROCESSED BY 9308  
Rec'd 28 OCT 1918  
Ack'd [unclear]  
Dist. Nos. [unclear]

HB/JC

Table with columns for dates and names, mostly blank or illegible.

NEW FOUNDLAND CONTINGENT

N.F.P/33.

Temporary a/c.

Regtl No. *2194* *Stk*

Name *Peddle D*

Pay	R. Alice Working	Total
<i>1-</i>	<i>10</i>	<i>11<sup>00</sup></i>
Less Allotment		<i>60.</i>
Net Rate		<i>50.</i>

Date	DEBITS	£ s d	CREDITS	£ s d
<i>1/17</i>	Balance	<i>1/1</i>	Balance	<i>22/17/1</i>
	<u>P.M. ADVANCES:</u>		<u>Pay &amp; Net rate:</u>	
	A.B. 64.		<i>to 4/6/17 = 16<sup>4</sup> days</i>	<i>29 50</i>
	Acquittance rolls	<i>2 6</i>	<i>to 12/6/17 = 10 days</i>	<i>16 17 00</i>
	Hospital Advances	<i>2 12 6</i>	<i>to 12/6/17 = 10 days</i>	<i>1 0 00</i>
	<u>STOPPAGES:</u>		<i>to 8/6/17 = 4 days</i>	
	hospital dys =		<i>to 16/17 = 10 days</i>	
	Forfeited Pay dys =		<i>to 16/17 = 10 days</i>	
	Miscellaneous		<i>to 16/17 = 10 days</i>	
	Cables		<i>to 16/17 = 10 days</i>	
	<u>P.A.R.O. PAYMENTS:</u>		<i>to 16/17 = 10 days</i>	
	Sundry Bills		<i>to 16/17 = 10 days</i>	
	Cash		<i>to 16/17 = 10 days</i>	
	<i>Cash</i>	<i>4/18 - -</i>	<i>to 16/17 = 10 days</i>	<i>23 8 3</i>
	<i>17/18 - -</i>	<i>to 16/17 = 10 days</i>	<i>to 16/17 = 10 days</i>	<i>23 6 8</i>
	<i>19/18 - -</i>	<i>to 16/17 = 10 days</i>	<i>to 16/17 = 10 days</i>	<i>23 14 11</i>
	<i>22/18 - -</i>	<i>to 16/17 = 10 days</i>	<i>to 16/17 = 10 days</i>	
	<i>24/18 - -</i>	<i>to 16/17 = 10 days</i>	<i>to 16/17 = 10 days</i>	
	<i>10 =</i>	<i>to 16/17 = 10 days</i>	<i>to 16/17 = 10 days</i>	
	<i>10 =</i>	<i>to 16/17 = 10 days</i>	<i>to 16/17 = 10 days</i>	
		<i>to 16/17 = 10 days</i>	<i>to 16/17 = 10 days</i>	

Saddle, L.

2194

Sept

February 5th., 1919

#2194 Pte. David Peldle,

New Harbor

Trinity Dist.

Dear Sir:-

Please find enclosed "Discharge  
Certificate No 833."

Yours truly,

Captain,  
Paymaster & Officer i/c Records

Enc '1 l.



# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 2194 Rank Plt. Name Peddle David S.  
 Intended place of residence Low Harbour.

2. Occupation Lumberman  
 Classification of soldier B Medical Category C

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

ELIGIBLE for POST DISCHARGE PAY

4. His accounts are <sup>not</sup> correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations. Overseas pay account subject to adjustment at # 94 not received.

Place ST. JOHN'S Commanding Discharge Depot  
 Date JAN 20 1919 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 20-1-19  
D. Peddle Signature of soldier  
W. J. Eaton Capt 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 20-1-19  
D. Peddle Signature of soldier  
W. J. Eaton Capt Signature of witness

### STATEMENT OF SERVICE

7. Enlisted for service 21-2-16 No of days on Military  
 Discharged from service 22-1-19 Plus 14 days Service 1081 days  
1081

### APPROVAL OF DISCHARGE

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

Place ST. JOHN'S R. H. [Signature] Capt  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment.

Date JAN 22 1919

### CONFIRMATION OF DISCHARGE

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

Place St. John's Nfld M. Howley Capt  
 Date February 5, 1919 Officer in Charge  
 The Royal Newfoundland Regiment

AB B 10791833

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 2194 Rank RtE Name Peddie David  
 Date of Enlistment 21.2.16 Address New St District Trinity  
 Occupation Labourer Classification for Discharge B Medical Category E  
 Recommendation S.M.B. David Humphreys Disability Rating Less than 20%  
 Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	2	N.F. Med.	D.F. 1		
B 178	W 3494	B 122	1	Board 1st	" 2		
B 178a	1 D 400A	B 1915		do 2nd	" 3	3	
B 179	2 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 20.1.19

*W. Bailey Capt.*  
O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

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

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

Date 20.1.19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 550 R to his home  
at 17th St. London and Release Certificate No. 883 issued.

Date 20-1-19

W. Dicks Capt.  
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 5-2-19

Date 20-1-19

W. Dicks Capt.  
Depot Paymaster.

business pay etc to be repaid

Discharge approved for 22 1.19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	2 N.F. Med.	D.F. 1	
F 178	W 3494	B 122	1 Board 1st	" 2	1/2
R 178a	D 400A	B 1915	do 2nd	" 3	2
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 22 1.19

W. Dicks Capt.  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer in Records.  
Board of Pension Commissioners.

with following additional documents.

**ELIGIBLE for POST DISCHARGE PAY**

JAN 22 1919

Date .....

R. St. John 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

Surname Biddle OF Christian Name David

Table I.—GENERAL TABLE.

Birthplace:—Parish		County			
		SPECIAL RESERVE.		REGULAR ARMY	
Examined	on <u>21</u> day of <u>February</u> 191 <u>6</u> at <u>St Johns, hfd</u>	on	day of	191	
Declared Age	<u>23</u> years	days	years	days	
Trade or Occupation					
Height	<u>5</u> feet <u>7 1/2</u> inches	feet	inches		
Weight	<u>141</u> lbs.		lbs.		
Chest Measurement	Girth when fully expanded... <u>40</u> inches		inches		
	Range of expansion... <u>5</u> inches		inches		
Physical Development					
Vaccination Marks	Right	Left	Right	Left	
	Arm				
When Vaccinated					
Vision	R.E.—V= <u>4/6</u>		R.E.—V=		
	L.E.—V= <u>6/6</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>Lemo &amp; Parsons</u>				
(Rank)					
Enlisted	at <u>St Johns</u> on <u>21</u> day of <u>Feb</u> 191 <u>6</u>	at	day of	191	
	Corps.	Regtl. No.	Corps.	Regtl. No.	
Joined on Enlistment	<u>15th hfd Reg</u>	<u>219d</u>			
Transferred to					
Became non-effective by					
(Signature)	on	day of	191	on	day of
(Rank)					





List in case of Warrant Officers treated in quarters.

the cause, nature or treatment of the case likely to be of interest or of further use. In cases of 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

Reported sick in France 10.12.16  
Chest of Alkamen since 24.5.17  
Furlough.

G. E. Hall  
Capt R.M.S.

[P.T.O.]

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
30/6/16	1 <sup>st</sup> Inoculation <i>JD</i>
10/7/16	2 <sup>nd</sup> " " <i>JD</i>
18.8.16.	Successful Vaccination <i>H. H. W.</i>
22.9.16.	3 <sup>rd</sup> Inoculation. <i>Parat. H. H. W.</i>
29.9.16.	Fit for foreign service. <i>H. H. W.</i>
11. Dec. 1918.	Highly Dist. Corp. Recommended Repatriation <i>11/12/18</i> <i>Cap. H. W.</i>

It is hereby certified that this soldier  
has been before the Standing Medical  
Board and he has been classified as  
B for discharge on Demobilisa-  
tion. Medical category E  
14.1.19  
Date of S.M.B. *H. W. L.* Captain  
Assistant Adjutant  
Discharge Dept. Newfoundland

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

## Medical Report on an Invalid.

Station Hazeley HouseDate 10-12-181. Unit Royal W.L.B.2. Regimental No. 21943. Rank Pvt4. Name Reddells David5. Age last birthday 256. Enlisted  $\left\{ \begin{array}{l} \text{on} \\ \text{at} \end{array} \right. \left. \begin{array}{l} \text{21 Feb 1916} \\ \text{St Johns}$ 7. Former Trade or Occupation Sunderman

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

(a) Former Unit;

(b) Regimental No.;

(c) Date of Discharge;

(d) Cause of Discharge.

## 8. Disability in respect of which invaliding is Proposed.

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

D. G. H.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.

10. Place of origin of disability.

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

went to France June 1916.  
contracted acute Nephritis  
which treated and cured at  
3rd L. G. H. went to France again April 1918  
Boarded at Rouen Nov 1918 marked B  
Calvy Transferred to England to serve  
on account of D.G.H. vide Att Report.

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

(a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).

(b) constitutional or hereditary, and not aggravated by service during the present war.

(c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &amp;c.



13. What is his present condition?

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

*As now complains shortness of breath after long marches otherwise no disability re injury to be heard in heart which is regular*

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

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

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

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

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

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

20. Do you recommend—

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

*Reparation*  
*W. H. C. [Signature]*

\_\_\_\_\_  
Officer in medical charge of case.

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

Station \_\_\_\_\_

\_\_\_\_\_  
Officer in charge of Hospital.

Date \_\_\_\_\_

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

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

## 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 work at Papermaking

*D. Peddle*  
Signature of Man.

Reg. No. \_\_\_\_\_

*Oddie Caff*  
Signature of the Vocational Officer or his Representative.

Place

*St Johns*

Date

*20-1-19*

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## Medical Report on an Invalid.

Station Hazelton, Iowa Camp  
 Date Dec 11th 1918.

1. Unit Royal Newfoundland  
 2. Regimental No. 219th  
 3. Rank Pte  
 4. Name PEDDLE  
 5. Age last birthday 25 yrs.  
 6. Enlisted { on 21 Feb. 1916.  
 { at St John's

7. Former Trade or Occupation Lumberman.  
 7A. If with previous service in Army, state—  
 (a) Former Unit;  
 (b) Regimental No.;  
 (c) Date of Discharge;  
 (d) Cause of Discharge. } n.a.

## 8. Disability in respect of which invaliding is Proposed.

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

? D. A. H.

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.  
 10. Place of origin of disability.

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

Went to France June 1916. Contracted acute nephritis, for which treated and cured at Wandsworth. Went to France again Apr 1918. Boarded Queen, Nov. 1918, marked B. Category, transferred to England, he says, on account of D. A. H.  
 note A to report

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—  
 (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).  
 (b) constitutional or hereditary, and not aggravated by service during the present war.  
 (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

*He now complains of shortness of breath, after long marches, otherwise no disability, no bruit to be heard in heart which is regular.*

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.*

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

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

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

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

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

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

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

*Repatriation*

*M. C. [Signature]*

\_\_\_\_\_  
Officer in medical charge of case.

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

Station \_\_\_\_\_

\_\_\_\_\_  
Officer in charge of Hospital.

Date \_\_\_\_\_

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

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

Opinion of the Medical Board

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

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

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

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

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

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

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

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

*Scar right leg from S.S.W in 1916 no disability Waldman*  
yes

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

23. Is the disability permanent?

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

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

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

*less than 20%*

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

27. Do the Board recommend—

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

*yes*

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

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

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

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

*[Signature]*

President.

Station *[Signature]*

Date *[Signature]*

*[Signature]*

Members.

Date *[Signature]*

*[Signature]*

Approved. JAN 14 1919

Station No. \_\_\_\_\_

*[Signature]*  
Administrative Medical Officer. *[Signature]*

Date \_\_\_\_\_



LAST PAY CERTIFICATE

**ORIGINAL**

N.P.F. /

To be rendered for all ranks on discharge, transfer to other Units, or on return to Newfoundland in accordance with C.L.,/19, 26/5/17.

Regt No. 2194 Rank \_\_\_\_\_ Pte. Name Peddle D. Unit R.Nfld.Regt. who was repatriated  
to Newfoundland on 12/12/18 Authority Draft 79 Cause \_\_\_\_\_

STATEMENT OF ACCOUNT

DP.	PARTICULARS	\$			CR.		
		£	s	d	£	s	d
PERIOD FROM 10/5/18 TO 12/12/18	Balance Dr. from 10/5/18		2	8	Balance Cr. from		
	Allocation 216 days @ 80	129	60		Pay 216 days @ \$ 100	216	00
	Cash Payments: P.&R.O.		12	15	Field Allice 216 days @ \$100	21	60
	Acq. Rolls		7	19	Other Allces days @ \$	237	60
	Depot			10			48
				2			16
							5
	Other Debits			11	<i>R.A. V. 158d</i>		
					Other Credits:		
							6
	Total Debits		49	2	Total Credits		50
	Balance due by Paymaster		1	18	5	0	11
			50	0	11	50	0
						11	


  
 PERIOD FROM 10/5/18 TO 12/12/18

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

(Place) \_\_\_\_\_ (Date) 1919  
 made up in accordance with information received in the Pay & Record Office London O.C. "Company" 15871/19  
 and is therefore subject to amendment if and as may be found necessary.  
 Pay & Record Office, London,  
8 : 1 : 1919

Chief Paymaster & O. i/c Records

*R.A. V. 158d Maj.*



## 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

*David Piddle.*

Regiment from which discharged

*1st. Newfoundland*

Regimental number

*2194.*

Intended address

*Newbr. N.B.*

Height on discharge

*5 Feet 7 1/2.*

Color of hair on discharge

*Dark.*

Complexion

*Fair.*

Color of eye

*Grey.*

Descriptive Marks

*Slight scar on R. cheek.*

Figure on discharge

*Tall.*

Christian name of Father

*James.*

Christian name of Mother

*Selena.*

Wife's maiden name in full

—

Date and place of marriage

—

Christian names of children

—

Place and date of soldier's birth.

*Spaniards Bay 1893.*

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)

*David Piddle*

(Rank)

*Plt.*

Station

*St. John's*

Date

*13.1.19*

I certify that the above-named soldier signed the foregoing declaration in my presence, and that the above description and details are, to the best of my knowledge correct.



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

Station

Date

**Casualty Form - Active Service.**

Regiment or Corps Royal Newfoundland  
 Rank Plt Surname Peddie Christian Name David  
 Religion Salvation Army Age on Enlistment 23 years 1 months  
 Enlisted (a) St John's Terms of Service (a) Duration Service reckons from (a) 29.2.16  
 Date of promotion to present rank ..... Date of appointment to lance rank .....  
 Extended  Re-engaged  Qualification (b) .....  
 or Corps Trade and rate .....  
 Occupation Rumberman Signature of Officer J. P. ...

Report		Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 219, Army Form A. 36, or other official documents.
Date	From whom received			
		Embarked	23-4-18	
		Disembarked	26-4-18	
		Joined Battalion	1-5-18	
3-4-18	24 Gt 7th Gt 13th Gt 2nd S.B.D	<del>same regt</del> " " " " " " Arrived	—	5.5.18 W 3291 no 3304 no 3307 no 3309 no 3310 no 3311 no 3312 no 3313 no 3314 no 3315 no 3316 no 3317 no 3318 no 3319 no 3320 no 3321 no 3322 no 3323 no 3324 no 3325 no 3326 no 3327 no 3328 no 3329 no 3330 no 3331 no 3332 no 3333 no 3334 no 3335 no 3336 no 3337 no 3338 no 3339 no 3340 no 3341 no 3342 no 3343 no 3344 no 3345 no 3346 no 3347 no 3348 no 3349 no 3350
		Joined Battalion	Field	17.7.18
	76 Fd	Weymouth	3 Assault	24/9/18
	7th Prov. Coy	Weymouth	3 Assault	27/9/18
	1st Coy	Weymouth	3 Assault	13/10/18

(4) In the case of a man who has re-engaged for an extended period under D, Army Reserve, particulars of such re-engagement or re-enlistment will be entered.

(5) Signaller, Shipping Smith, &c.



Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B-218, Army Form A-30, or by other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B-218, Army Form A-30, or other official documents.
Date	From whom received				
	<i>D. I. O.</i>	<i>Received</i>	<i>Rowen</i>	<i>21/1/18</i>	<i>Plac.</i>
	<i>2 M. B. O.</i>	<i>B. 2. M. B. O.</i>	<i>"</i>	<i>23/1/18</i>	<i>Row</i>
		<i>2 England B</i>	<i>Kilmer</i>	<i>27/1/18</i>	<i>Plac.</i>
			<i>Whit</i>		<i>Leabt</i>
			For Officer in Charge No 1 Infantry Section		✓
			3rd Echelon. General Headquarters		

No 2 Medical Board Base Depot.

INSTRUCTIONS FOR MEN PROCEEDING TO ENGLAND.

No. 2194 Rank. Pte Name. Peddie D. \_\_\_\_\_  
Unit. 1st Newfoundlands

You will proceed to ENGLAND today the 27-11-18, reporting to the M.L.C. S/S "St George" on the Right bank of the River opposite Quai de Havre at 0830

On arrival at SOUTHAMPTON you will report to the Embarkation Officer for the necessary warrant to convey you to Winchester where you will report to the O.C. Depot of your Unit.

The unconsumed portion of the current day's rations and THREE day's rations will be carried on the person.

AUTHORITY. D.A.S. C.R. No. 1858/272 dated 24-7-18

REASON. "B" Personnel

*W. Owen*

27/11/1918.

Captain

Commanding No 2 Medical Board Base Depot.

Rank *Pte* Regiment or Corps *1st Rfd*  
 Surname *Peddle* Christian Name *D E* *1708*  
 Religion *S.A.* Age on Enlistment *23* years *1* months.  
 Enlisted (a) *Feb 27/16* Terms of Service (a) *Duration of war* Service reckons from (a) \_\_\_\_\_  
 Date of promotion to present rank \_\_\_\_\_ Date of appointment to lance rank \_\_\_\_\_  
 Extended { } Re-engaged { } Qualification (b) \_\_\_\_\_  
 or Corps Trade and Rate \_\_\_\_\_

Signature of Officer i/c Records.

Report		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 Southampton	OCT 1916	
		Disembarked	OCT 1916	
	Joined Battalion	14 OCT 1916		
	<i>88 F.A.</i>	<i>Admitted Sciatica transf 88th BARS</i>	<i>10/1/17</i>	<i>ED 8666</i>
	<i>11 Stat. H.</i>	<i>Ad. do Myalgia</i>	<i>Rouen 24.1.17</i>	<i>H.A. 6241</i>
	<i>29 S.C.D.</i>	<i>Joined Base Dep.</i>	<i>Rouen 26/2/17</i>	<i>Norm Coll</i>
	<i>12 S. Hosp. 1</i>	<i>Intd. N.Y.D. pl.</i>	<i>Rouen 5.3.17</i>	<i>H.A. 7383</i>
	<i>Wardle</i>	<i>invalidated to England</i>	<i>11.3.17</i>	<i>W-3063</i>
	<i>12 S. Hosp. Rouen (W.ephates)</i>			
		<i>H. Burchell</i>		<i>CAPTAIN.</i>
		for Officer i/c No. 1 Regular Infantry Section		
		General Headquarters, 3rd Echelon.		
		<i>MAR 27 1917.</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) Signaller, Shoeing-Smith, &c.

[P.T.O.]



3/2

# 1ST NEWFOUNDLAND REGIMENT

## ALLOTMENTS

I, *David Peddle*, Regl. No. *2194*

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and *60* Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup>/<sub>or</sub> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup>/<sub>or</sub> Persons concerned, viz :

Allotment begins *May 1st*

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<i>2006</i>	<i>mother</i>	<i>Mrs John Smith</i>	<i>Yanville Bay</i>	<i>60</i>
Total Allotment, \$				

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

(Sig.) *R.P. Holloway*  
*for* *Lieut.*  
 Officer Commanding  
*H.* Company  
*St. Johns*  
*April 19th* 191*6*

(Sig.) *David Peddle*  
 (Rank) *Ho.*

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..... *David* ..... S. Surname..... *Peddie* .....
3. Rank..... *Private* ..... 4. Regtl. No. *2194* .....
5. Address in full to which future payments of gratuity are to be forwarded..... *New Hr. Trinity Bay* .....
6. Date of enlistment in the Regiment..... *Feb 28<sup>th</sup> 1916* .....
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....  
*not applicable* .....
8. Relationship of such dependents..... *not applicable* .....
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?.....
11. Were you on active service only in field, if so, give dates and particulars of such service... *not applicable* .....
12. Give total length of time which you served on active service, whether in field or Overseas... *Two years and eleven months* .....

13. Have you had more than one enlistment? If so, give particulars of discharge and re-enlistments, and under what regimental numbers.

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.

15. Have you been issued with a War Service Badge? *no*

16. Have you, during the present war, served in the Imperial Forces. *no*

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

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

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

19. Are you now serving in the Regt.? *no* ... If not give - (a) date of discharge *Jan. 22<sup>nd</sup> 1919* (b) Reason for discharge *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.

*Somme Belgium*

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. *'A' no - 'B' 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: *David Piddie*  
 Place of Residence: *New H. Trinity Bay*  
 Declared before me at: *St Johns*  
 This *1<sup>st</sup>* day of *April* 19*69*

*Robert A. Cloop,*  
 Signature of Barrister of the  
 Supreme Court, Stipendiary Magis-  
 trate, Notary Public, Justice of the  
 Peace, or Commissioner of affidavits.

POST DISCHARGE PAY.				
Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	.....	.....	<i>5.00</i>	<i>350.00</i>
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
Certified Correct.			Paymaster.	

Reg. No. 2194 Rank pte Name Peddy L.

Attested ..... Address Spamant Bay

Allotment ..... Allottee .....

Date of Allotment ..... Returned from Overseas 21.12.18

Embarked for Overseas ..... Cause Discharge

G. Leave from 21-12-18 to 6-1-19  
14-1-19 Rec Dis Permanently unfit

20-1-19 PASSED TO DEMOBILIZATION OFFICER

22-1-19 DISCHARGE APPROVED ON DEMOBILISATION.



Fold Here

---

**ON HIS MAJESTY'S SERVICE**

To the Officer in Charge of Records,

*Royal Nfld. Regt.*

*Dept. of Militia,*

*ST. JOHN'S, Nfld.*



---

Fold Here

Oct 11 1921.

The accompanying Victory Medal and/or British War Medal  
is/are forwarded herewith to

David Peddle

in respect of his service as No. 2194 Rank Pte.

Name D. Peddle

Royal Nfld. Regt.  
584. General Corps.

Receipt of the same should be acknowledged hereon.

Received Dec 15 - 1921

Signature David Peddle

Date \_\_\_\_\_

Address 6. First Avenue Grand Falls

[P.T.O.]

Fold Here

---

**ON HIS MAJESTY'S SERVICE**

To the Officer in Charge of Records,

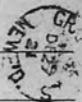
Royal Nfld. Regt.,

Dept. of Militia,

St. John's, Nfld.

---

Fold Here



June 30th., 1921. 1919.

The accompanying King's Certificate, on his discharge,

(No. 795), is forwarded herewith to

Private David Peddle

in respect of his service as No. 2194 Rank Pvt.

Name David Peddle Corps Royal Nfld. Regt

Receipt of the same should be acknowledged hereon.

Received Dec 15 - 1921

Signature David Peddle

Date \_\_\_\_\_

Address 6 First Avenue Falls  
Grand Falls

## Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. & A. Griffith & Son Ltd., Printers, Old Bailey, E.C.  
(804) W/1011/2124 1000m 6/13s 22 50Forms  
B. 121.  
22.

Number of Sheet \_\_\_\_\_

Regiment of

Newfoundland

Signature of O. C. Company \_\_\_\_\_

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<u>2194</u> <u>peddle pte</u>	Age on	years months	Religion	
Joined	Date	Place and Date of Enlistment			
Joined	Date	Period of	{ with Colours <u>2</u> <u>3</u> <u>65</u> years. with Reserve <u>3</u> <u>65</u> years.	Place of Birth	
Joined	Date				

Place	Date of Offence	Rank	Case of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<u>Berry Camp</u>	<u>11/7/17</u>	<u>pte</u>		<u>W. Brunk</u> <u>(1) having obscene language in town</u> <u>(2) giving an officer a false name and number</u>	<u>pt. H. Jones</u> <u>pt. H. Lee</u>	<u>7 days R.L.</u>	<u>12/7/17</u>	<u>L. Col. Whitaker</u>	<u>assg.</u>
<u>Gloucester</u>	<u>27/12/17</u>	<u>-</u>		<u>Deficient of Swaggs case</u> <u>Resisting to obey an order</u>	<u>Com. Clarke</u>	<u>pay for 5 days</u>	<u>28/12/17</u>	<u>General Mayn</u>	
<u>Hazelton</u> <u>Hospital</u>	<u>13-2-18</u>	<u>-</u>		<u>When ordered by the ward master to go to fatigue case I went down out</u> <u>Breaking arrest, while under arrest absent from hospital from 2<sup>30</sup> p.m. to 3<sup>30</sup> p.m. 14/2/18</u> <u>Demobilized 5<sup>2</sup> 79</u>	<u>Documentary</u>	<u>10 days R.L.</u>	<u>14/2/18</u>	<u>L. Col. Barnes</u>	
				<u>To be carried over</u>					

Army Form B. 121.

## Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

 W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.  
 [and] W34012/71154-1000ms 4/15ms 63 50

 Forms  
 No. 111.  
 52.

 Regiment of 1<sup>st</sup> West Lancs

 Signature of O. C. Company W. H. Edger  
*Major*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay		
No.	<u>2194 Reddle J.</u>	Age on	23 years 1. months	Cumberlan			
Joined _____ Date _____		Place and Date) _____ of Enlistment) <u>St. Leonards</u>		Religion			
Joined _____ Date _____		Period of {		Place of Birth			
Joined _____ Date _____		with Colours    years.		<u>Spainy Co. Lincs.</u>			
Joined _____ Date _____		with Reserve    years.					

Place	Date of Offence	Rank	Case of Dismissal	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<u>Ripon</u>	<u>24/8/17</u>	<u>Pte</u>		<u>Absent from marching practice at 5.15 pm.</u>	<u>CSM Austin, Pte Paley.</u>	<u>10 days C.B.</u>	<u>24/8/17</u>	<u>Lt. Col Edger.</u>	<u>17 OCT 1917</u>
				<u>Corralped G. Harvey Capt O.C.</u>	<u>Dooby</u>				
<u>No. 7 COMPANY, NORTHERN COMMAND DEPOT, RIPON.</u>									

To be carried over

## The Royal Newfoundland Regiment

### DEMobilIZATION OF

Reg. No. 2194 Rank PLG Name Peddle David  
 Date of Enlistment 21.2.16 Address New St District Trinity  
 Occupation Leatherboarder Classification for Discharge B Medical Category F  
 Recommendation S.M.B. PLG Disability Rating Less than 20%  
 Passed to Demobilization Officer with following documents:-

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1
B 178	W 2494	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 20.1.19

*W. M. Cap*  
O. C. Discharge Depot.

### PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

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

*D Peddle*

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 Joseph A Snowling

Date 20-1-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 5502 to his home at New Haven and Release Certificate No. 883 issued.

Date 20-1-19 W. Dickson  
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 5-2-19 <sup>ret.</sup>

Date 20-1-19 W. Dickson  
overseas pay etc to be repaid Depot Paymaster.

Discharge approved for 22-1-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	2 N.F. Med.	D.F. 1	
F. 178	W 3494	B 122	1 Board 1st	" 2	1/2 Form B
B 178a	D 400A	B 1915	do 2nd	" 3	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 22-1-19 W. Dickson  
Demobilization Officer.

APPROVED

Documents as above forwarded to:-

- Officer in Records.
- Board of Pension Commissioners.

with following additional documents.

**ELIGIBLE for POST DISCHARGE PAY**

JAN 2 1919

Date JAN 2 1919 R.H. [Signature]  
O. C. Discharge Depot.

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

Date Janey 23/19 [Signature]  
[Signature]