



Newfoundland Forestry Companies

ATTESTATION OF

No. 8458

Name Alpheus Pelley ps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|-------------------------------------|
| 1. What is your name? | 1. <u>Alpheus Pelley</u> |
| 2. What is your full Address? | 2. <u>Harry Hill St. St. John's</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>39</u> Years <u>3</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Lumberman</u> |
| 6. Are you Married? | 6. <u>Widower</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. What is your Religion? | 9. <u>Sa.</u> |
| 10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies? | 10. <u>Yes</u> { Name |
| | { Corps |

I, Alpheus Pelley 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.

Alpheus Pelley SIGNATURE OF RECRUIT.
G. D. Ellis Signature of Witness.

28/12/17

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Alpheus Pelley 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 serve His Majesty, His Heirs and Successors, in the United Kingdom, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 28 day of Dec 1917

Signature of Attesting Officer W. H. [Signature]

†CERTIFICATE OF APPROVING OFFICER.

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

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

Date 1917
 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 Alpheaus Pelley
 Apparent age 39 years 3 months. Height 5 feet 9 inches
 Chest Measurement { Girth when fully expanded _____ inches
 Range of expansion _____ inches
 Distinctive marks Dark Brown Hair Blue scar on left shoulder & left side scar over left eye.

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin George Pelley
Little Bay Islds | Relationship Father
A. B. 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.

<u>Ella Young</u> <u>Spinster</u>	(b) <u>Married Mr</u> <u>1907</u>	(c) <u>Deceased</u>	(d)
--------------------------------------	---	------------------------	-----

Particulars as to Children

Christian Names	Sex	Date and Place of Birth
<u>Edmund</u>	<u>Male</u>	<u>Mar 1909</u>
<u>Elizara</u>	<u>Female</u>	<u>" " 1910</u>
<u>Bertha</u>	<u>Female</u>	<u>" " 1911</u>
<u>Alpheaus</u>	<u>Male</u>	<u>" " 1913</u>

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 _____									
<u>Discharged</u>	<u>Alphonis</u>			<u>Oct. 30/1918</u>					
Total Service forfeited as above.....									
Total Service towards Engagement to _____ [date of discharge] _____ years _____ days									
Pensions " _____ [" "] " _____									

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 1

Forms
B. 121
39

Number of Sheets *Four*

Regiment of *4th Forestry Coy's*

Signature of O. C. Company *W. H. [Signature]*

Regimental No. and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>5458</i>	Age on	<i>39</i> years <i>3</i> months	<i>Timberman</i>	
Joined	Date	Place and Date of Enlistment	<i>Adgein 27/12/17</i>	Religion	
Joined	Date	Period of ^{with Colours} <i>307</i> years. _{with Reserve} <i>365</i> years.		<i>S.C.</i>	
Joined	Date			Place of Birth	

Place	Date of Offence	Rank	Cases of drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<i>Regimentally taught St John's 30th 76</i>					

COPIES SENT

TO	NO.
M. OF M.	
G. C. T. B. B.	
S. S. S. S.	
DATE	

23 SEP 1918

To be carried over

COPI

Descriptive Return of a Soldier discharged on account of Disability.

INSTRUCTIONS.—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Commissioners of Chelsea Hospital.

Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and the soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station," and "Date" should be in his own handwriting.

The Form will then be attached to the Proceedings of the man's Medical Board, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.

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

A Name in full *Pelley Alpheus*
 Regiment from which discharged *1st Bn. Forestry Corps*
 Regimental Number *8458*
 Where born (Parish, Town and County), and when *Harrold Str. N. D. B. 1874*
 Intended address *do*

Height on discharge *5* Feet *9* Inches
 Colour of Hair on discharge *Dark brown* Colour of Eyes *Blue*
 Descriptive marks *Scars of burns on R. chest* Complexion *Fair*
 Figure on discharge *Fairly erect*
 Christian name of Father *George*
 Christian name of Mother *Sarah*
 Wife's Maiden name in full *Ella Young*
 Date and Place of Marriage *1906 above address*
 Christian names of Children *Edman³ Clifford^{7th} Clara⁶ Alpheus⁴*
 Nature and locality of civil employment desired *Crooper above address*

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) *Alpheus Pelley*

(Rank) *Pte.*
Date *5.8.18*

Station *1st Bn. Forestry, Dunkeld*

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.

Sydney D. Fairweather Medical Officer i/c
Capt. R.A.M.C. Hospital.

Station *Dunkeld N.S.*

Date *5/8/18*

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

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

Medals

Other distinguishing marks

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

Station _____
Date _____

Officer in Charge
Records.

COPY.

This space to be left blank
for the Chelsea Number.



Proceedings on Discharge.

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

No. <u>8458</u>	Army Rank <u>Private</u>
Name <u>Pelley Alpheus</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
Corps <u>Newfoundland Forestry Corps</u>	
Battalion, Battery, Company, Depot, &c. <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)</small>	
Date of discharge <u>October 30th 1918</u>	
Place of discharge <u>St John's, Nfld.</u>	
1. <u>Description at the time of discharge.</u>	
Age <u>40</u> years — months Height <u>5</u> feet <u>9</u> inches Chest measure { girth when fully expanded _____ ins. { range of expansion _____ ins. Complexion <u>Fair</u> Eyes <u>Blue</u> Hair <u>Dark brown</u> Trade _____ Intended place of residence { <u>Harvey St.</u> (To be given as fully as practicable) { <u>Port of Spain Bay</u> { <u>Newfoundland</u>	Descriptive marks. <u>Scar of burns on Lt. Chest.</u>
<p>(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)</p>	
2. The above-named man is discharged in consequence of <u>being no longer physically fit for active service</u>	
<p>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</p>	
3. Military character:— <u>P.L.</u>	
4. Character awarded in accordance with King's Regulations:— _____ _____ _____ _____ _____	
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 459 was awarded in this case.	
Initials of Commanding Officer.	
Army Form B, 2068 has been issued to*	

To be filled in on the soldier quitting the Colours.

20-56
AS

* Strike out if not applicable.

[OVER.]

Medical Report on an Invalid.

Station Wfld. Forestry Corps
 Date Dunkeld 5/8/18

1. Unit Wfld Forestry Corps
 2. Regimental No. 8458
 3. Rank Pte
 4. Name Pelley Alphaeus
 5. Age last birthday 40
 6. Enlisted { on 29.12.17
 at St. John's Wfld
 7. Former Trade } Cook
 or Occupation }
 7A. If with previous service in Army, state—
 (a) Former Unit ;
 (b) Regimental No. ;
 (c) Date of Discharge ;
 (d) Cause of Discharge. } M/a

8. Disability in respect of which invaliding is Proposed.

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

- 1 Defective Teeth
 2 Haemoptysis

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. May 1918
 10. Place of origin of disability. Dunkeld

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

In May 1918 he says he began to be troubled with a cough & spat up yellow Phlegm. A month later he began to bring up blood which he thinks came from lungs as he had pain between his shoulders, med. His. Sheet state. War Hospital Perth 29.6.18 - 2.8.18 Haemoptysis. He states (later) that he felt something give way in his chest in June 1918 when lifting logs.

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.

aggravated by ordinary military service with strenuous exertion

not applicable

C. n/a
 1 a/n/a
 B. Constitutional & not aggravated by service during present war.

C/n/a

He is in a very good condition but he states that he has lost 25 lbs weight since coming over. Upper teeth deficient, no pain in stomach or elsewhere no physical signs of disease beyond prolonged expiratory sound over right apex behind & in left lung internal to lower angle of scapula.

13. What is his present condition?

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

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

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

not applicable

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

If so—(a) When?

(b) Where?

(c) Opinion?

n/a

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

n/a

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

n/a

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

No

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.

nil

20. Do you recommend—

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

Discharge as permanently unfit for further military service

A. D. Fairweather Capt R.A.M.C.

Officer in medical charge of case.

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

Station _____

Officer in charge of Hospital.

Date _____

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

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

Opinion of the Medical Board.

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

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

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

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

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

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

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

*Weight 162 lbs Pulse 138
no physical signs in lungs*

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

Yes

strenuous work

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

no

23. Is the disability permanent?

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

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

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

40% 3 months

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

27. Do the Board recommend—

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

Yes

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

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

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

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

Signatures:—

W. A. Fraser _____ President.

Station *St. John's*

J. Sinclair Lieut _____ } Members.

Date *Oct. 16. 18*

L. Paterson major _____ } Members.



Station _____

Cluny Macpherson major
Administrative Medical Officer

Date _____

B. W. S. NEWFOUNDLAND.

Ref attached. Nominal Roll, only
Shows this man as Repatriated.
Home address, Father, Pelley George.

Little Bay Islands

Nfld.

Capt Marshall.

P.L.S.

ALLOTT. CHEQUES.

SEPARATION ALLOWANCE.

Date Cheque No. amount

1918

January	4535	\$21.00 ✓
February	4957	\$16.80 ✓
March	5300	\$18.60 ✓
April	5749	\$18.00 ✓
May	6184	\$18.60 ✓
June	6619	\$18.00 ✓
July	307	\$18.60 ✓
August	728	\$18.60 ✓

Date Cheque No. amount

December 28th, 1917,

to June 30th, 1918	1226	\$120.00 ✓
July	111	\$ 20.00 ✓
August	254	\$ 20.00 ✓

Re No. 8458.

P. a. Kelley

*M. Howley, Capt
Paymaster*

COPY

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

MEDICAL HISTORY of

Surname Pelley Christian Name Alpheus

TABLE I.—GENERAL TABLE.

Birthplace ... Parish St. Mary's W. County Wfld.

Examined ... { on 28th day of Dec. 1917
 at Headquarters

Declared Age ... 39 years 3 mos. ~~days~~

Trade or Occupation ... Lumberman

Height ... 5 feet, 9 inches.

Weight ... 150 lbs.

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

Physical Development ... _____

Vaccination Marks { Arm ... Right
 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 (Signature) Ed. Lamont Paterson
 (Rank) Major Medical Officer.



Enlisted ... { at _____
 on _____ day of _____ 1917

Corps. <u>Forestry</u>	Regtl. No.
ROYAL NEWFOUNDLAND REGIMENT	<u>845-8</u>
Transferred to ...	

Became non-effective by _____

on _____ day of _____ 1917
 (Signature) _____
 (Rank) _____

Table II.—Only for Admissions to Hospital or to the Sick List

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing use. If subsequent given in
	Day	Month	Year	Day	Month	Year			
War Hosp. Perth.	29	6	18	2	8	16	Haematemesis		Rest, a little and has been

Sick List in the case of Warrant Officers treated in quarters.

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

Rest, Careful diet & nursing improved patient a little, but little further progress can be ~~now~~ expected until his power of mastication has been restored by adequate dental treatment

Off. Ernest Wood R. 10

COPY

Descriptive Return of a Soldier discharged on account of Disability.

INSTRUCTIONS.—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Commissioners of Chelsea Hospital.
Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and the soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.
The Form will then be attached to the Proceedings of the man's Medical Board, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.1.

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

A Name in full Pelley Alpheaus.
Regiment from which discharged Forestry.
Regimental Number 8458 ~~NEWFOUNDLAND~~
Where born (Parish, Town and County), and when Harriet St. N. D. B. Nfld.
Intended address do

Height on discharge 5 Feet 9 Inches
Colour of Hair on discharge Dark brown **Colour of Eyes** Blue
Descriptive marks Scars of burns on Rt. Chest. **Complexion** Fair
Figure on discharge Fairly erect
Christian name of Father George
Christian name of Mother Dorah
Wife's Maiden name in full Ella Young
Date and Place of Marriage 1906 Above address
Christian names of Children Edman Clifford Clara B Alpheaus
Nature and locality of civil employment desired Cooper Above address.



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) Alpheaus Pelley
Station Nfld forestry Dunkeld. **(Rank)** Private
Date 5.8.18

I certify that the above-named soldier signed the foregoing declaration in my presence, and that the above description and details are, to the best of my knowledge, correct.
Station Dunkeld Nfld. **Date** 5/8/18. **Medical Officer i/c Hospital.** Sgt. W. Fairweather

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

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

Medals

Other distinguishing marks

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

Station _____ **Officer in Charge**
Date _____ **Records.**

LAST PAY CERTIFICATE

OFFICE COPY N.F.P./94

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

Regtl No. 828 Rank 1st Lt Name Tolley R. Unit A Coy R.C.M.P. who was Repaired
 to Newfoundland on 1/1 Authority _____ Cause _____

DR. STATEMENT OF ACCOUNT CR.

PARTICULARS	£			s			d			PARTICULARS	£			s			d		
	£	s	d	£	s	d	£	s	d		£	s	d	£	s	d			
Balance Dr. from										Balance Cr. from <u>A Coy. 828/18</u>									
Allotment 21 days @ 60¢	1	2	60	12	11	9				Pay 21 days @ \$ 1. ⁵⁰	1	21	00	11	1	24			
Cash Payments:										Field Allow 21 days @ X 10¢	1	2	10						
1st Payment 6/10/18						10				Other Allowances days @ \$	1	2	10	14	14	11			
2nd Payment 13/9/18						10				Other Credits:									
3rd Payment 20/9/18						10				Balance from P.V.R.O.				14	16	4			
Other Debits:																			
A Coy.																			
Overcredited ship pay \$1.10 less allot. 60¢			50			2			1										
Total Debits				15	18	4				Total Credits				1	10	12	7		
Balance due by Paymaster				1	14	3				Balance due to Paymaster									
				1	14	3													
				3	16	3													

PERIOD: From 31.8.18 to 31.9.18

CHECKED

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1536/157 24 9 R

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

Simpson (Place) 20/11 (Date) 1918 R. J. Nugent 2/11 to _____ O.C. "A" Company.

Made up/checked 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, 191 Chief Paymaster & Officer i/c Records.

COPY

(3004) WL W0720/M2835. 13,000,0.0. 9/17. C. & Co.

Army Form C. 348.

Forms
G. 348
1900

MEMORANDUM.

From O.C., "A" Coy,
R. Nfld Regt.

To Chief Paymaster,
P.&R. Office.

From Chief Paymaster & O.i/c R.,
Newfoundland Contgt,
London, S.W. 1.

To O.C. 2nd Bn., R. Nfld R.,
Hazeley Down Camp,
Winchester.

ANSWER. 13740.

Hazeley Camp,

24th Aug., 1918

Pay & Record Office,

29th August, 1918

No. 8458 Pte. Pelley, A.,
of the Forestry Co's states
that his family home at Harry's
Hr., Notre Dame Bay, Nfld.,
have not received any money
from Feb. up to the 7th July,
and would like you to be kind
enough to enquire into the
matter.

Yours respectfully,

(Sd) M.J. NUGENT, 2/Lt.,

O.C. "A" Coy.
2nd Bn. R. Nfld Regt.

An enquiry has been
forwarded to the Minister of
Militia regarding the matter,
and reply will be ~~addressed~~^{addressed}
to you in due course.

Major,
Chief Paymaster & O. i/c Records

✓ 7/627

26/8/18

FM/JC

No 492.

F.C. 6.
~~NEWFOUNDLAND~~

Forestry Corps.

NEWFOUNDLAND CONTINGENT

ALLOTMENT

I, (No.) 8458 (Rank) Pte. (Name) Alpheaus, Pelley.

hereby agree, until further notification by me, and in required form, to make an Allotment of dollars and sixty. cents per diem, from my pay, to and for the benefit of the undermentioned Person and/or Persons. Such payments to be made on proof of identity of the Person and/or Persons concerned, viz.,

Whether Wife, Child, other Relative or Friend.	NAME (In Full)	ADDRESS	AMOUNT (Each Person) \$ c	
Brother	Temple Pelley,	Harry's Harbor N. E. B.		60
				60

This Allotment to take effect from and including Dec. 28th, 1917

NOTE:- This Form must be completed and signed by the Soldier, countersigned by the Officer Commanding his Company, and forwarded to the Chief Paymaster in accordance with P.&R.O. C.L. 10, 9/12/16.

(Sig.) C. H. Duley Lt.
Officer Commanding,
" B Company.

Dated at St. Johns.
Dec. 28 1917

(Sig.) Alpheaus Pelley
Allotter.

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

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

To the Superintendent,
Central Army Pension Issue Office,
33, Baker Street, London, W.1.

The Soldier named below has appeared before an Army Medical Board at this station, and his discharge from the Service as "no longer physically fit for War Service" has **this day** been approved. (The discharge will be confirmed for a date 14 days after the date on this notification—see A.C.I. 1623 of 1916.)

Soldier's surname Pelley, Christian names Alphas
(in full)
Regt. No. and Rank 8458 Pte Regt. or Corps 1st Div Infantry Corp
(If T.F. this should be stated)
His address on discharge will be Harry Harbour
Newfoundland

The Soldier states that* Separation allowance is being issued in respect of him.

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

Station Sunkeld.

Date 5/8/18

President of Board
(Approving Officer).

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

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

Telephone :
VICTORIA 147.

NEWFOUNDLAND CONTINGENT.

Memorandum addressed to the
CHIEF OF RECORDS,
quoted:



MEMORANDUM.

No. 13736/476/P.&.A.

C.F. 8458

From :
PAY AND RECORD OFFICE,
58, VICTORIA STREET,
LONDON. S.W.
29th August, 1918.

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

O.K.

SUBJECT :

8458 PTE. A. PELLEY,
Nfld Forestry Corps.

Reference Nos.

REPLY

Dated October 15, 1918 191

Please return **ORIGINAL** and retain **DUPLICATE.**

With reference to the following Memo. from the O.C., 2nd Bn., 24/8/18 (7627):

"8458 Pte. Pelley, A., of the Forestry Co's states that his family home at Harry's Hr., Notre Dame Bay, Nfld, have not received any money from Feb. up to the 7th July, and would like you to be kind enough to enquire into the matter."

Copy of F.C. 6, No. 492, is enclosed for reference. Kindly advise cause of non-payment, to enable reply to be sent to the O.C. concerned.

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

For your information a list of cheques sent on account of allotment of this soldier is ~~attached~~ *attached* appended.

J.P. O'Connell

Minister of Militia

*Referenced to
not necessary to
advise to O.C.
9944*

M

FM/JC