



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 1273

Name in full Alfred Perry Age

Address Ward's St. Green Bay

Married Height 5ft 8 3/4 Weight 134

Single Color Fair Hair Brown Eyes Blue

Other distinguishing marks None

Nearest relative Mother (Julia)

Address Ward's St. (Green Bay)

Dependents None

Occupation Fisherman Present Wage \$4.50⁰⁰ per year

Previous service

Decorations

General Remarks

Date of Enlistment March 15/15

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

Alfred Perry

Declared before me this 29th day
of March 1915

Handwritten notes:
Mar 2/16
Ready for duration

Signature of official

DESCRIPTIVE REPORT ON ENLISTMENT.

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

1273

Name Alfred Perry

Apparent age _____ years _____ months. Height 5 feet 02 inches.

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

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Mrs. Julia Ward
Ward's Harbor, Green Bay | 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	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					years	days	years	days	
Service towards limited engagement reckons from <u>March 15/1915</u>									
Joined at <u>St. John's</u> on <u>March 15/1915</u>									
Total Service forfeited as above									
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days									
" " " Pension " _____ (") _____ " _____									

DESCRIPTIVE REPORT ON ENLISTMENT.

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

1273

Name **Alfred Perry**

Apparent age _____ years _____ months. Height **5** feet **9 1/2** inches.

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

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin **Mrs. Julia Ward**

Ward's Harbor, Green Bay | 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.	
(a)	(b)	(c) Present address.	(d) Initials of Officer verifying entry.

Particulars as to Children.

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES.

Corps in which served	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed for fixing the rate of pension		Service in Re-served not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					years	days	years	days	
Service towards limited engagement reckons from March 15/1915									
Joined at St. John's on March 15/1915									
<i>Embarked St. John's Harbor to L.A. 22-4-15</i> <i>Disembarked Boston 30-3-16</i> <i>Admitted 47 C.C.S. 45 N 1 Reg. 2-7-16</i> <i>Base depart 17-7-16</i>									<i>Embarked Southampton 28-3-16</i> <i>Re-embarked 15-4-18</i> <i>Transferred to lower camp 28-5-16</i> <i>Re-embarked 2-8-16</i>
<i>21/1/17</i> <i>Order of Honor's 21-1-17</i>									
<i>Entered Truck 1.10.</i> <i>Close to end of road - 1/2 mile SSW of L.A. 1/2 mile N of L.A.</i>									<i>Wounded 1-7-16</i> <i>Stable 6-7-16</i> <i>Admitted 60 44 Reg 21-7</i>
Total Service forfeited as above									
Total Service towards Engagement to 21-1-17 (date of discharge) 1 years 3/3 days									
" " " Pension " " " " " "									

A. Perry

1273

P. R. D.



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Alfred Perry, Regl. No. 1273
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
Dollars and Sixty Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{and} _{or} Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and} _{or} Persons
 concerned, viz. :

Identity Certificate	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
1240	Sunt	Mrs Richard Scovions,	Herring Cove N.B. Bay	60
			Total Allotment, \$	

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

<p>(Sig.) <u>[Signature]</u> Officer Commanding Company <u>St. John's, N.F.</u> <u>April 12 1915</u></p>	<p>(Sig.) <u>[Signature]</u> (Rank) <u>Private</u></p>
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To be used only for Special Reserve Recruits, and for Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY

Surname Perry OF Christian Name Alfred

Table 1.—GENERAL TABLE.

Birthplace:—Parish Wards Harbour County Green Bay

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>13</u> day of <u>Mar</u> 191 <u>5</u> at <u>St John's</u>		on _____ day of _____ 191____ at _____	
Declared Age	<u>21</u> years		_____ years	_____ days
Trade or Occupation	<u>Fisherman</u>		_____	_____
Height	<u>5</u> feet	<u>8 1/2</u> inches	_____ feet	_____ inches
Weight	_____	<u>134</u> lbs.	_____ lbs.	_____ lbs.
Chest Measurement	Girth when fully expanded... <u>32</u> inches		_____ inches	_____ inches
	Range of expansion... <u>34 1/2</u> inches		_____ inches	_____ inches
Physical Development	_____	_____	_____	_____
Vaccination Marks	Arm	_____	_____	_____
	Number	_____	_____	_____
When Vaccinated	<u>Never</u>		_____	_____
Vision	R. E.—V=	<u>No.</u>	R. E.—V=	_____
	L. E.—V=	<u>No.</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>L. Paterson</u>		_____	_____
(Rank)	<u>Capt.</u>		_____	_____
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St John's</u> on <u>15</u> day of <u>March</u> 191 <u>5</u>		at _____ on _____ day of _____ 191____	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>1st Regt.</u>	<u>1273</u>	_____	_____
Transferred to	_____	_____	_____	_____
Became non-effective by	_____	_____	_____	_____
(Signature)	on _____ day of _____ 191____	_____	on _____ day of _____ 191____	_____
(Rank)	_____	_____	_____	_____

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.: Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.

Date	Brief Details, and Signature
20. 3. 16.	<i>Fit for active service. Prof n</i>

TABLE IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation.	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
<i>St John's N.S.A.D.</i>					

FIELD SERVICE.

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form B. 213 or other official documentary sources.



REGIMENT } 1st. NEWFOUNDLAND REGT. Squadron,
or } Troop, Battery }
CORPS } or Company }

Regt. No. 1273 Rank Private

Name Perry, A.

Date January 21st., 1917.

Place 60th. F.A., Somme, France.

Cause of Death* Died of Wounds received in Action.

Nature and Date of Report T. Message, 22/1/17.

By whom made O.C., 60th. Field Ambulance.

* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation or exposure while on military duty, or from injury while on military duty.

Place Not yet received.

Burial Date do

By whom reported _____

State whether he leaves a will or not { (a) in Pay Book (Army Book 64) Not to hand.
(b) in Small Book (if at Base) do
(c) as a separate document do

All private documents and effects received from the front or hospital, as well as the Pay Book, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any information received as to verbal expressions by a deceased soldier of his wishes as to the disposal of his estate should be reported to the War Office as soon as possible.

A duplicate of this Report is to be sent to the Fixed Centre Paymaster at Home, or to the D.F.A.G., Indian Expeditionary Force, or Field Disbursing Officer, as the case may require, together with the deceased's Pay Book (after withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War Office with this Report.

Signature of Officer in charge of Section Adjutant-General's Office at the Base } The Birchall Capt. for Lt. Col.,
Officer i/c Records Reg. Inf. Sect. No.1,
3rd. Echelon, G.H.Q., B.E.F.

Station and Date 3rd. Echelon, 31/1/17.

PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

No. *1273*

Rank

Private.

Name

Perry A.

Died (a) *intestate*

at

France

on the *21st*

of *January*

191*7.*

Deserted at

on the

of

191 .

I Certify to the correctness of above in every particular.

{ *Commanding Squadron, Troop,
Battery or Company.*

STATEMENT OF ACCOUNT.

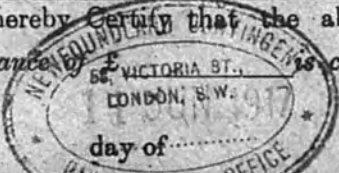
[Form 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month <i>21. 1. 17</i>	<i>22</i>	<i>10</i>	<i>7</i> ✓
	Cash issues (Date of each issue to be stated)				Pay days at _____ from _____ to _____			
		£	s.	d.	Proficiency, Service or good conduct pay days at _____ from _____ to _____			
	191				Messing allowance days at _____			
	"				from _____ to _____			
	"				Kit allowance			
	"				Amount produced by the sale of Effects from Form 2			
	Consolidated stoppage				Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
					Deferred Pay or Gratuity			
	Balance due by the Paymaster	<i>22</i>	<i>10</i>	<i>7</i>	Balance due to the Paymaster			
		£				<i>22</i>	<i>10</i>	<i>7</i>

I hereby Certify that the above account is correct in every particular, and that the

debtor balance is correctly chargeable against the Public (b).

Dated at



day of

191 .

Paymaster.

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B. 2090 or Army Form O. 1815.

(b) Words in Italics to be struck out when there is no debtor balance.

CHECKED.

Herry, A.

1273

Pay Sept.

November, 15th. 1917.

Rev. W.S. House,
Ward's Hr.,
Long Island, N.D.B.

Reverend Sir.-

With reference to your letter of October 18th., I have been directed by the Pensions & Disabilities Board, to point out the fact, that the late Pte. Alfred Perry did not contribute to the support of his mother while he was living, for his Allotment was payable to Mrs. Ralph Sceviour, his aunt. It will therefore be necessary to obtain from Mrs. Simms, definite evidence of the fact, that Mrs. Sceviour paid this Allotment over to her, as stated in your letter of Aug. 22nd.

Pending receipt of this evidence, this matter is held for abeyance, and will be further considered when the evidence is forth coming.

Yours faithfully,

Secretary.

PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

No. 1273

Rank

Private

Name Perry, A.

Died (a) Intestate

at

France

on the 21st of January 1917.

Deserted at

on the of 191 .

I Certify to the correctness of above in every particular.

Commanding Squadron, Troop,
Battery or Company.

STATEMENT OF ACCOUNT.

[FORM 1.]

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month.....				Balance Cr. last month.....	22	10	7
	Cash issues (Date of each issue to be stated)				Pay days at from to.....			
	191	£	s.	d.	Proficiency, Service or good conduct pay			
	"				days at from to.....			
	"				Messing allowance days at			
	"				from to			
	Consolidated stoppage				Clothing and kit allowance			
	Balance due by the Paymaster	22	10	7	Deferred Pay or Gratuity.....			
	£ 22 10 7				Balance due to the Paymaster.....			
		£	22	10		7		

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

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ _____ is correctly chargeable against the Public^(a)

Dated at this _____ day of _____

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed to this form, and sent to War Office with A.F.B. 4090 or Army Form O. 1815.
(b) Words in Italics to be struck out when there is no debtor balance.

W 1406t-626-100M. 4/15. Forms O. 1625
J.C. & Co., Grange Mills, S.W.) 27

CHECKED.
[Signature]

NEWFOUNDLAND CONTINGENT.
1917 *[Signature]* Paymaster.

PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

No. 1273

Rank

Private

Name Perry, A.

Died (a) Intestate

at

France

on the 21st of January

191 7.

Deserted at

on the of

191 .

I Certify to the correctness of above in every particular.

Commanding Squadron, Troop,
Battery or Company.

STATEMENT OF ACCOUNT.

[FORM 1.

Date	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month.....				Balance Cr. last month.....	22	10	7
	Cash issues (Date of each issue to be stated)				Pay days at from to			
		£	s.	d.	Proficiency, Service or good conduct pay			
	191				days at from to			
	"				Messing allowance days at			
	"				from to			
					Clothing and kit allowance			
					produced by the sale of Necessaries			
					al Clothing and Effects from Form 2...			
					t of Savings Bank balance, including			
					interest (if no balance, to be so stated)			
					Deferred Pay or Gratuity.....			
	Balance due by the Paymaster	22	10	7	Balance due to the Paymaster.....			
		£	22	10	7			

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ _____ is correctly chargeable against the Public^(a)

NEWFOUNDLAND CONTINGENT.

Dated at this _____ day of _____ 1917

1917 _____ Paymaster.

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed if not already sent to War Office with A.F.B. 1090 or Army Form O. 1815.
(b) Words in italics to be struck out when there is no debtor balance.

W 14067-626-300M. 4/15.
C. & Co., Grange Mills, S.W.)

Forms
O. 1625
27

CHECKED.
[Signature]

PAY LIST.

to

191

Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

No. 1873

Rank

Private

Name PERRY, A.

Died Intestate

at

France

on the 21st of January

1917.

Deserted at

on the

of

191

I Certify to the correctness of above in every particular.

Commanding Squadron, Troop,
Battery or Company.

STATEMENT OF ACCOUNT.

[FORM I.]

Date	Dr.	£	s.	d.		Cr.	£	s.	d.	
	Balance Dr. last month.....				Balance Cr. last month.....	21/1/17	22	10	7	
	Cash issues (Date of each issue to be stated)				Pay days at from to					
		£	s.	d.	Proficiency, Service or good conduct pay					
	191				days at from to					
	"				Messing allowance days at					
	"				from to					
	Consolidated stoppage.....				Clothing and kit allowance.....					
					Deferred Pay or Gratuity.....					
	Balance due by the Paymaster	22	10	7	Balance due to the Paymaster.....					
		£	22	10	7		£	22	10	7

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

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £..... is correctly chargeable against the Public.

Date of this

NEWFOUNDLAND CONTINGENT
191
A. O. M. [Signature]

(1) This form should be filled in by the paymaster, or when he has a will, in the name and the will should be attached to the form. (2) This form should be filled in by the paymaster, or when he has a will, in the name and the will should be attached to the form.

CHECKED

FIELD SERVICE.

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form B. 214 from other official documentary sources.



REGIMENT or CORPS } **1st. NEWFOUNDLAND REGT.** Squadron, Troop, Battery or Company }

Regtl. No. **1275** Rank **Private**

Name **Perry, A.**

Died { Date **January 21st., 1917.**

Place **60th. F.A., Somme, France.**

Cause of Death* **Died of wounds received in action.**

Nature and Date of Report **T. Message, 22/1/17.**

By whom made **O.C., 60th. Field Ambulance.**

* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation or exposure while on military duty, or from injury while on military duty.

Burial { Place **Not yet received.**

Date **do**

By whom reported _____

State whether he leaves a will or not { (a) in Pay Book (Army Book 64) **Not to hand.**
(b) in Small Book (if at Base) **do**
(c) as a separate document **do**

All private documents and effects received from the front or hospital, as well as the Pay Book, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any information received as to verbal expressions by a deceased soldier of his wishes as to the disposal of his estate should be reported to the War Office as soon as possible.

A duplicate of this Report is to be sent to the Fixed Centre Paymaster at Home, or to the D.F.A.G., Indian Expeditionary Force, or Field Disbursing Officer, as the case may require, together with the deceased's Pay Book (after withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War Office with this Report.

Signature of Officer in charge of Section Adjutant-General's Office at the Base } *H. Burchell* **Capt. for Lt. Col., Officer i/c Records Reg. Inf. Sect. No.1**

3rd. Echelon, G.H.Q., B.E.F.

Station and Date **3rd. Echelon, 31/1/17.**

Casualty Form Active Service.

Regiment or Corps Newfoundland

Regimental No. 1273

Rank Pte

Name Ferry B

Enlisted (a) 10.3.15

Terms of Service Duration

Service reckons from (a) 15.3.15

Date of promotion }
to present rank }

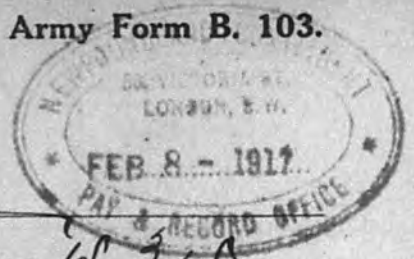
Date of appointment }
to lance rank }

Numerical position on }
roll of N.C.Os. }

Extended _____

Re-engaged _____

Qualification (b) _____



Certified true Copy

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embkd Southampton		28.3.16	
		Disembkd Queen		30.3.16	
	Unit joined	Battalion	France	15.4.16	B 213
	47 C.C.S.	Ad. P.W. Leg	France	2.7.16	E.D. 11963
	24 P.A.	do do	Etaples	3.7.16	H.A. 613
	Do.	Transf. Conv Camp	"	6.7.16	H.A. 703
	29 A.D.	Joined Base Depot	France	17.7.16	Non fall
	Unit joined	Battalion	Belgium	4.8.16	B 213. 5.8.16
	60 F.A.	Adm. Shell Wdr	Leg. France	21.1.17	2el. O.C. 60 F.A.
	O.C. 60 F.A.	Died of Wounds	France	21.1.17	Auth O.C. 60 F.A. 4207. 22.1.17

for O.C. Non Regular Infantry Section
W. J. D. Echelon

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



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Alfred Perry, Regl. No. 1273
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
Dollars and Sixty Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{and} _{or} Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and} _{or} Persons
 concerned, viz.:

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
1240	Aunt	Mrs. Rachael Scivious,	Herring Neck, N. D. Bay	60
		april 24/15		
Total Allotment, \$				

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

(Sig.) E. J. Sheppard

Officer Commanding
Company

(Sig.) Alfred Perry
(Rank) Private.

St. John's, N. F.
April 12 1915

May 9th.

7

Manager,

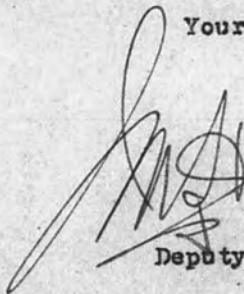
Sun Life Insurance Co.,

City.

Dear Sir:-

At the request of Mrs Rachael Scevicour of Herring Neck, I enclose certified extract from Casualty List, showing the death of No. 1273, Private Alfred Perry, Ward's Harbor, N.D.B.

Yours truly,



Lieut.
Deputy Paymaster.

DEPARTMENT OF MILITIA.

REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$114 ⁶³/₁₀₀

March 15 1921

Received from the First Newfoundland Regiment
the sum of one hundred and fourteen ⁶³/₁₀₀ Dollars.
on account of Pay. balance of Pay. Estate

Ch. No. 5414	Initials. E. W.
Pay Ledger 155	Initials. [Signature]
Gen. Ledger	Initials. [Signature]

Regtl. No. Rank

A. C. [Signature]

No. 1273

Rank Ste

Name Perry Alfred
br Wf Scott administrator of
Estate



Curbing Bay Isds

March 14th 1891

The Paymaster

Pay & Recd Office.

St-Johns Nf.

Sir:-

I am informed by P. J. Summers Esq. K.C. that there is an amount of \$114⁶³/₁₀₀ dollars to the credit of the estate of late Sir A. Perry #1273 R. N. Reg

Mr. Summers asks me to send my letter of advice to you, which I now do and will thank you for a cheque to me as administrator and I will place it with the Legatee in due course.

I beg to remain
yours faithfully

Wm John Sedgwick

Encls

Letter of advice to late A. Perry
which I return with cheque

March 21, 1921.

W.J. Scott, Esq.,
Curling,
Bay of Islands.

Dear Sir:

I enclose cheque for \$114.63
representing balance due estate of late Pte. Alfred
Perry, payable to you as Administrator of same.

Administration.

I also enclose Letters of

Yours truly,

Major
Paymaster.

Enc's. 2

1273 Private A Perry 207
D

No. 207-

WILL

No. 1273 Private A Perry.

Miss Felie Ward

Wards Horton

W D B

WILL.

In the event of
my death I give the
whole of my property
and effects to my Aunt
Mrs Rachel Serious

Herring Guck

Signature Newfoundland

Wm. Alfred Perry

No 1273, St. John's N.S.

March 28th 1916

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

The Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

NO STAMP REQUIRED

Dept. of Militia,
St. John's.

Sept 6th 1921

I beg to acknowledge receipt of
Memorial Plaque issued in respect of services of
the late No. *1273* Rank *PL*
Name *Alfred Perry*
Royal Newfoundland Regt.

Ken Simms (Sgd.)

Mother Relationship.
Address *Hardy St. Beaumont North*



AMOUNT PAID

Department of Militia

MEMORANDUM

1273

No. 243/1273

From
MINISTER OF MILITIA,
 ST. JOHN'S,
 NEWFOUNDLAND

To
 Chief Staff Officer
 Pay & Record Office
 Newfoundland Contingent
 58 Victoria Street
 London, S.W.1

Dec 6th 1919

59.

SUBJECT:

X

MEMORIAL SCROLL
 1273 PRIVATE ALFRED PERRY

REPLY

Dated 9th. January, 1920.

Please return ORIGINAL and retain DUPLICATE

Attached please is
 Memorial Scroll of the above mentioned
 deceased man. It is regretted that
 it has been accidentally partially
 destroyed, and I should be glad
 if you would endeavour to procure
 another. If this is not possible,
 kindly return the attached. X

Replaced Scroll is being
 mailed under separate registered
 cover, please.

A. J. Guinness
 Lt-Col.,
 Chief Staff Officer (London).

W. J. Readell

Lieut-Col.,
 Chief Staff Officer
 for Minister of Militia.

HT/MN

NEWFOUNDLAND CONTINGENT,
 PAY & RECORD OFFICE
 6518
 58 VICTORIA STREET
 LONDON, S.W.1

C.R. 1273

Extract from Telegram received from London, dated April
24th, 1918.

In answer your telegram April 23rd, 1273 Perry surname
next of kin unknown, try aunt Mrs. Rachel Scaviour,
Herring Neck.

C.R. 1273

Extract from Telegram despatched to Synoptical, London, dated
April 22, 1918.

Referring to your telegram of April 12th, what is surname
of next of kin of 1273 Perry.

C.R. 1273

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

Feb. 1st, 1917.

1273 Perry.

Died of wounds, shell-wound leg both amputated Field Ambulance

Jan. 21st, .

C.R. 1273

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

Feb.1st, 1917.

1273 Perry.

Died of wounds, shell-wound leg both amputated Field Ambulance

Jan.21st,.

C.R. 1273.

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P.&R.O.
July 17th. 1916.

1273, Pte A. Perry. ✓

1 Newfoundlands GSW R. Leg. Trans to Conv. Camp on 24
Gen. Hos. Etaples. 6th July 1916.

C.R. 1273

Extract of casualties received from War & Seafood Office,
London, dated July 12, 1916.

#1273 Pte. A. Perry. ✓

Gunshot wound Shell Right Leg slight.

Admitted 24th General Hospital, Staples, 3rd July 1916.

C.R. 1273

Extract of Casualties received from Pay & Record Office,
London, dated July 31, 1916.

(Extract from Army Form B 213, from O.C. 1st. Nfld. Regt.
dated 11/7/16.)

#1273 Pte. A. Perry. ✓

Wounded in Action 1/7/16.

C.R. 1273

Extract from Nominal Roll 3rd Draft to B.E.F. arrived
29, I.B.D. 30-3-16 Joined Battalion 15-4-16

#1273 Pte. A. Perry.

C.R. 1273

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

1273 Pte. A.Perry.

C.R. 1273

Extract from Nominal Roll Draft "E" Company Embarked

S.S. Stephens. April 22/15.

1273 Pte. Perry A.

C.R. 1273

Martin Perry was attested for General Service
with the NEWFOUNDLAND REGIMENT on ..**March.15th.1915**
Regimental No. **1273** was allotted to Pte **M. Perry**

AUTHORITY:

Record Officer

Dept. of Militia,

March 25th. 1919.

Casualty Form—Active Service.

Regimental No. 1257 ¹²⁷³ ~~1257~~ or Corps 1st Newfoundland
 Rank Pte Name A. Perry
 Enlisted (a) 15-3-15 Terms of Service (a) Duration Service reckons from (a) 15-3-15
 Date of promotion } Date of appointment } Numerical position }
 to present rank } to lance rank } roll of N.C.O.s }
 Extended _____ Re-engaged _____ Qualification (b) _____



Date	Report	Record of promotions, reductions, transfers, casualties, etc., during active service as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
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	Embark'd Southampton			28.3.16	
	Disembark'd BOUEN			30.3.16	
	47th Coy	France	France	15.4.16	
	47th Coy	France	France	2.7.16	6511963.
24	Leak W.	Do	Staples	3.7.16	HA 613.
20	Transf. Cowbaup.		Staples	6.7.16	HA 703.
29	SAO Joined Base depot		France	17.7.16	New Rec.
	47th Coy	France	Belgium	4.8.16	B 213 5.8.16
60	SA. Admitted Shell W th leg		France	21/1/17	Telegram O.C. 60 th F.A.
O.C. 60 th F.A.	Died of Wounds.		Somme France	21/1/17	Auth O.C. 60 th F.A. R. 4207, 22/1/17

H. Burchell
 CAPTAIN.
 for Officer in Charge No. 1 Regular Infantry Section

General Headquarters, 2nd Expedition.

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

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Regiment of First Newfoundland

Number of Sheet 1

Signature of O. C. Company J. G. Bernier

Printed and Sold by Gale & Polden, Ltd., Wellington Works, Aldershot. 2/6 per 100.20,712-s.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<u>1273</u>	Age on	<u>31</u> years <u>0</u> months	<u>Fisherman</u>	
Joined	Date	Date of Enlistment	<u>15-3-15</u>	Religion	
Joined	Date	Period of	with Colours <u>3¹/₂</u> years. with Reserve <u>3¹/₂</u> years.	<u>B. of E.</u>	
Joined	Date				
Joined	Date				

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<u>Edinburgh</u>	<u>1915 May 7</u>	<u>Pte</u>		<u>absent from tattoo until 5.15 am. 8.5.15</u>	<u>Corp. O'Loole</u>		<u>8.5.15</u>	<u>Lieut. Burton</u>	<u>forfeit 10 days pay under Rtd.</u>
<u>Newton</u>	<u>4/9/15</u>	<u>Pte</u>		<u>absent from tattoo till 2.15 pm Sept 9.</u>	<u>lo pl Burns</u>	<u>6 days Pay</u>	<u>11/9/15</u>	<u>lo apt. Cypre</u>	
<u>Newton</u>	<u>22/1/15</u>	<u>-</u>		<u>absent from tattoo under 11.15</u>	<u>Corp. Flynn</u>	<u>1 day C. 13</u>	<u>23/1/15</u>	<u>2/Lt. J. Bernier</u>	<u>J. G. 13</u>
<u>Newton on Apr.</u>	<u>1/3/16</u>	<u>Pte</u>		<u>absent from 9.15 Parade.</u>	<u>Cpl. R. Le Huff.</u>	<u>3 days. B.B.</u>	<u>2/3/16</u>	<u>Lt. J. Bernier.</u>	
				<u>Lieut. of Wounds</u>	<u>21 1/2</u>				

To be carried over