



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF



No. 2218 Name Marick Perry Corps

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---------------------------------------|
| 1. What is your name? | 1. <u>Marick Perry</u> |
| 2. What is your full Address? | 2. <u>Kelligrews, C.B.</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>20</u> Years Months |
| 5. What is your Trade or Calling? | 5. <u>Fireman</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, Marick Perry 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.

Marick Perry SIGNATURE OF RECRUIT.

E. rank 3

R.P. Hallaway Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION:

I, Marick Perry do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 4th day of March 1916

Signature of Attesting Officer

R.P. Hallaway

†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 rank of

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

Date 1916

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)



REGIMENTAL NUMBER 2718

COMPANY D.

THE
1st NEWFOUNDLAND REGIMENT.

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

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

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

Subject to the Newfoundland Volunteer Act.

§ George V.

Chapter IV.

Signed W Perry

Witness W M Churchill

Dated at Accourse Bay

June 30 1916



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 2218 Name Marion Perry Corps

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. Marion Perry
- 2. What is your full Address? { 2. Kelloggman's C.B.
- 3. Are you a British Subject? 3. Yes
- 4. What is your age? 4. 20 Years Months
- 5. What is your Trade or Calling? 5. Domestic
- 6. Are you Married? 6. No
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7. No
- 8. Are you willing to be vaccinated or re-vaccinated? } 8. Yes
- 9. Are you willing to be enlisted for General Service? } 9. Yes
- 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... } 10. { Name
Corps
- 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? } 11. Yes

I, Marion Perry 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.

Marion Perry SIGNATURE OF RECRUIT.

E. March 3

R.P. Hallaway Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Marion Perry 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 H. John's on this 4th day of March 1916

Signature of Attesting Officer R.P. Hallaway

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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 1916 } Approving Officer.
Place

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‡ 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.

218

Name Walter Perry

Apparent age 20 years — months. Height 5 feet 7 inches

Chest Measurement { Girth when fully expanded 34 1/2 inches
 Range of expansion 3 1/2 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Wish Martin Kellegrens
C. B. | Relationship Adopted Father.

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>3-3-16</u>									
Joined at <u>St John's</u> on <u>March 3rd 16</u>									
<u>Diast of Wounds Oct 10 16</u>									
<u>Embarked St John's St. Seilian for Lt. 24 7/16</u>									
<u>Joined unit 21-7-16 admitted 21 C.C.S. Warwick 8 1/16</u>									<u>Embarked for I.S.E.S. 9 7/16</u>
<u>Involved to England 30 7/16 admitted 30 W. Gen. Corp. 1 7/16</u>									<u>admitted 9 1st Hoq. Coy. 14 4/16</u>
<u>Embarked Southampton 5 8/17</u>									<u>Further then attached depot 23 3/17</u>
<u>Disembarked Dover 5-8-17</u>									<u>Joined Battalion 28 8/17</u>
<u>Diast of Wounds 10-10-17</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>10-10-17</u> [date of discharge] <u>1</u> years <u>222</u> days									
" " " Pension " " " " " " " " " " "									

FIELD SERVICE.

C.R. 2216
Army Form B. 2090a.

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 A. 36, or from other official documentary sources.

REGIMENT } Newfoundland Squadron, Troop, } B. Coy.
OR CORPS } 2218 Battery or Company }
Regimental No. 2218 Rank Private

Surname Perry. Christian Names W.

Died { Date 10 2/10/17. Place France or Belgium.

Cause of Death* Killed in Action. See Wounds.

Nature and Date of Report B 213 d/12/10/17.

By whom made O.C. Unit.

* 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 _____ Date _____
By whom reported _____

State whether he leaves { (a) in Pay Book (Army Book Not received (b) in Small Book (if at Base) Not received
a Will or not { (c) as a separate document Not received

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.S., 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.

Station and Date G.H.Q. 3rd. Echelon Signature of Officer in charge of Section G.T. [Signature]
15/10/17. Adjutant-General's Office at the Base } Subst. for Mjr.

Officer i/c No.1 Infantry Section.

C.R. 2218

Extract from Nominal Roll of RFLd. Regt. Draft No. 8.
Embarked Southampton, 9-7-16. From 2nd In. Depot to
1st Bn. B.E.F.

2218 Pte. W. Perry.

C.R. 2218

Extract from Medical Bill of H.H. & Sgt. Staff No. 13
from 1st En. Depot, to 1st En. B.M.P. Hospital Holms-
stone, 5-9-17.

2218 Pte. W. Perry.

No. 2218 Pte. Perry.

Extract of casualty list received from the Pay & Record Office,
London, dated Oct. 20th.

"Died of wounds on Oct. 10th."

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 A. 36, or from other official documentary sources.

DUPLICATE

REGIMENT OR CORPS } Newfoundland Squadron, Troop, Battery or Company } B Coy.

Regimental No. 2218 Rank Private

Surname Perry. Christian Names W.

Died { Date 2/10/17. Place France or Belgium.

Cause of Death* Killed in Action. See Report

Nature and Date of Report B 213 d/12/10/16.

By whom made G.C. Unit.

* 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 _____ Date _____
By whom reported _____

State whether he leaves a Will or not { (a) in Pay Book (Army Book 64) _____ (b) in Small Book (if at Base) _____
Not received Not received
(c) as a separate document. Not received

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.

Station and Date B.H.C. 3rd. Battalion Signature of Officer in charge of Section J.T. Hoyle
Date 15/10/17. Adjutant-General's Office at the Base } 2nd Lt. for Mjr.,

Officer i/c No.1 Infantry Section.

C.R. 2218

Extract of Casualties received from Pay & Record
Office, London, dated December 8, 1916.

#2218 Pte. W. Perry.

Dysentery.

To England ex. 9 General Hospital November 30, 1916.

✓

C.R. 2218

Extract of Casualty List received from P.&.R.O.
December 4th 1916.

2218, Pte W. Perry. ✓

Admitted 3rd London General Hospital Wandsworth.
1st December 1916, Dysentery.

C.R. 2218

Extract from Nominal Roll Embarked St. John's for overseas.
Mar. 23, 1916.

2218 Pte. W. Perry.

C.R. 2218

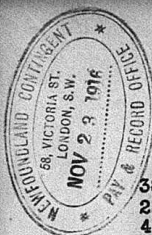
Warwick Perry was attested for General Service with
the NEWFOUNDLAND CONTINGENT on March 3rd 1916
Regimental No. 2218 was allotted to Pte W^c Perry

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th 1919



C.R. 2218

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

SHREWSBURY RECORD OFFICE

38684 Pte. Wakeley, A. 17/R.W.I. 5/LB.D.
 23209 Pte. Howells, G. 9/R.W.F. 5/LB.D.
 46911 Pte. Wilkinson, T. 21/Ches. 4/LB.D.
 44114 Pte. Sidebottom, J. 2/S.W.B.
 29660 Pte. Greenwood, W.E. 9/R.W.Fus.
 39531 Pte. Brown, E. 2/S.W.B.
 26529 Pte. Davies, A. 2/S.W.B.
 42223 I/C. Williams, E. 2/S.W.B.
 36027 Pte. Brown, V. 2/S.W.B.
 26436 Pte. Greig, J. 6/K.S.L.I.
 24651 Pte. Preece, T. 1/K.S.L.I. 4/LB.D.
 26260 Pte. Jordan, L. 6/K.S.L.I.

LIST NO. H.A. 4251
 Adm. 9 Gen. Hos. Rouen. 14th. Nov. 16.
 -do-
 -do-
 -do-
 ? Dysentery. -do-
 ? Dysentery. -do-
 Dysentery.....To Eng. ex 9 Gen. Hos. 14th. Nov. 16.
 -do-
 -do-
 ? Dysentery.....Trans. to Con. Camp ex 9 Gen. Hos. Rouen. 14th. Nov. 16.
 ? Dysentery. -do-
 NYD.....Adm. 9 Gen. Hos. Rouen. 15th. Nov. 16.
 Bronchitis.....To Eng. ex 9 Gen. Hos. 15th. Nov. 16.

TERRITORIAL FORCE SHREWSBURY RECORD OFFICE

3851 Pte. Goodwin, W. 2/Lions. 4/LB.D.
 1841 Pte. Alderson, M. Shrop. Yeo. att. 5/Ches.
 15561 Pte. Rogers, W. 6/Welsh.

LIST NO. H.A. 4251.
 NYD.....Adm. 9 Gen. Hos. Rouen. 14th. Nov. 16.
 Aneurism, S. Clav. To Eng. ex 9 Gen. Hos. 14th. Nov. 16.
 Nephritis.....Adm. 9 Gen. Hos. Rouen. 15th. Nov. 16.

CAVALRY RECORD OFFICE YORK.

353 Pte. Ward, H. 4/Hussars.
 28136 ,, Lewis, H. 20/Hussars 5/G.B.

LIST NO. H.A. 4251.
 Dysentery.....To Eng. ex 9 Gen. H. 15th Nov. 16.
 NYD.....Adm. 9 Gen. H. Rouen. 14th Nov. 16.

NEWFOUNDLAND CONTINGENT.

2218 Dvr. Berry, W. 1/Newfoundland.

LIST NO. H.A. 4251.
 ? Dysentery..... Adm. 9 Gen. H. Rouen. 14th Nov. 16.

SOUTH AFRICAN RECORD OFFICE.

991 Bdr. Attwood, W. 93/S. Bty. S.A.H.A.

LIST NO. H.A. 4251.
 Pleurisy.....To Eng. ex 9 Gen. H. 15th Nov. 16.

W. Perry.

2218

P. T. P. G.

FIELD SERVICE.

G.O.C. Form B 2090A.

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay and receipt of notification of death on Army Form B. 213 or Army Form A. 36, or from other official records as may require.

REGIMENT (OR CORPS) Newfoundland Squadron, Troop, Battery or Company } B. Coy. N.F.F. 38. No. 14307/153
 Regimental No. 2218 Rank Private DATED 21 DEC 1917

Surname Perry. Christian Names W.

Died { Date 10/10/17. Place France or Belgium.
 Cause of Death* Killed in Action. *See above*

Nature and Date of Report B 213 d/12/10/17.
 By whom made O.C. Unit.



* 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 _____ Date _____
 By whom reported _____

State whether he leaves { (a) in Pay Book (Army Book 64) Not received (b) in Small Book (if at Base) Not received
 a Will or not { (c) as a separate document Not received

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Station and Date | G.H.Q. 3rd. Echelon signature of Officer in charge of Section G.H.Q. 3rd. Echelon 2nd. Lt. for Mjr.,
15/10/17. Adjutant-General's Office at the Base |

Officer i/c No.1 Infantry Section.

NEWFOUNDLAND POSTAL TELEGRAPHS.

Cable Connection with all the World



All Messages Sent are Subject to the Following Conditions:

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

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

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

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

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

(NOT TRANSMITTED)

Signature of Sender

Fred A. Murray

Address

Line Number	Rcd	By	Sent	by	Check

Dated December 5, 1916.

To Mr. Uriah Martin,
Kelligrews.

Regret to inform you that the Record Office,
London, officially reports No. 2218, ~~Private Warwick Perry~~,
is at Wandsworth suffering from dysentery.

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

J. R. BENNETT,

Colonial Secretary.

2218 Perry

NEWFOUNDLAND POSTAL TELEGRAPHS.



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

(NOT TRANSMITTED)

Signature of Sender _____ Address _____

Line Number	Rcd	By	Sent	by	Check

Dated October 20, 1917.

To Mrs. Uriah Martin,
Kelligrews.

Regret to inform you Record Office, London, today reports No. 2218, Private Warwick Ferry, said of wounds October tenth.

R.A. SQUIRES
Colonial Secretary.

NOTE FOR OPERATOR

This message is not to be sent until receiving office notifies that message to Rev. Canon Colley, Fox Trap, has been delivered and acted upon.

FOR TYPEWRITER

NEWFOUNDLAND POSTAL TELEGRAPHS.**Cable Connection with all the World****All Messages Sent are Subject to the Following Conditions:**

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

(NOT TRANSMITTED)

Signature of Sender _____

Address _____

Line Number	Rcd	By	Sent	by	Check

Dated _____

October 20, 1917.

To _____

Rev. Canon Colley,

~~For Trap~~ Kelligrews -

Regret to inform you Record Office, London,
today reports No. 2218, Private Warwick Perry,
foster son of Mrs. Uriah Martin, Kelligrews,
died of wounds on October tenth. Please inform
relatives.

R.A. SQUIRES

Colonial Secretary

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Counter No.

FOUNDLAND 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)

J. M. Shilling

Signature of Sender

Address

See page 100

Line Number	Rcd	By	Sent	by	Check

Dated 24th October, 1917.

To Mr. William F. Howell,

Cutwell, N.D.B.

2217

Next of kin late Private Warwick Perry is Mrs. Uriah Martin Kelligrews.

R. A. SQUIRES,

Colonial Secretary.

Copy

9 95



NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 3 Sent by WS Rec'd by _____ Check 13 No. 38

Place from Cutwell 27

OCT 24 1917

To R A Squires

Colt Secty
St Johns

Please Inform me
who is nearest kin of
warwick Perry killed in
action.

Wm S Howell

Rec'd 10.30 pm 'phone M.
Martin -

C. 2.—Casualties.

COLONIAL CONTINGENTS ONLY.

Army Form W. 3026A.

(Continuation Sheets are supplied separately.)

The Manor (County of London) War HOSPITAL, at Epsom, Surrey.

Affiliated to

NOMINAL ROLL of Sick and Wounded from the 3rd London Expeditionary Force
admitted on ~~Southern Hospital~~ Southampton
from Hospital Ship ~~or~~
Dover.


* Here insert which Expeditionary Force.

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

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

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

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

Regtl. No.	Rank	Name (Surname first)	Corps (Battn. numbers to be shown, also full title of Colonial Unit)	Casualty (See note in large type above).
2218	Pte	Perry, W.	1st Newfoundland.	DYSENTERY.
<p><i>Samuel GEE</i></p> <p>Major, R.A.M.C. for o/c. The Manor, (County of London) War Hospital, Epsom.</p> 				

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

MEDICAL HISTORY

Surname Perry

OF Christian Name Warick



Table I.—GENERAL TABLE.

Birthplace:—Parish

County

	SPECIAL RESERVE.		REGULAR ARMY	
	Right	Left	Right	Left
Examined	on <u>2</u> day of <u>March</u> 191 <u>6</u>	on	day of	191 <u>1</u>
	at <u>St. John's, Hfld.</u>	at	at	at
Declared Age.....	<u>20</u> years	days	years	days
Trade or Occupation				
Height	<u>5</u> feet	<u>7</u> inches	feet	inches
Weight		<u>122</u> lbs.		lbs.
Chest Measurement {	Girth when fully expanded...	<u>34 1/2</u> inches		inches
	Range of expansion.....	<u>3 1/2</u> inches		inches
Physical Development.....				
Vaccination Marks {	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V= <u>6/6</u>		R.E.—V= <u> </u>	
	L.E.—V= <u>6/6</u>		L.E.—V= <u> </u>	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
	(b)		(b)	
(b) Slight defects but not sufficient to Cause Rejection				
Approved by (Signature)	<u>J. W. Burden</u>			
(Rank)	<u>Lieut.</u>			
		Medical Officer.		Medical Officer.
Enlisted	at	at	at	at
	on	day of	on	day of
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>1st Hfld Regt.</u>	<u>2218</u>		
Transferred to				
Became non-effective by	on	day of	on	day of
(Signature)				
(Rank)				



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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of further 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				
8th LONDON GENERAL HOSPITAL WANDSWORTH.	1	12	16	24	JAN	1917	Dysentery	54	Frankin - Looks ill. Headaches. Improvment. Date of negative tests: 6. 12. 16. 24. 22. 16. Date from which the patient may be considered convalescent 8. 1. 17. Pt. is on ordinary diet. Stools are normal.	H. Hagan Capt R.A.M.C.
Gloucester War Hospital of Son	24	1	17	13	MAR	1917			Convalescence 8-1-17 1st 31-1-17 {Panobin } Negative 2nd 21-2-17 {Baillanz } Suggest Heart Normal. Fit for duty	D. E. Ford.

M 8

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
5.5.16.	1st inoculation <i>Dr. J. G.</i>
17.6.16.	<u>T.A.B.</u> <i>H. J. W.</i>
24.6.16	vaccinated successful <i>H. J. W.</i>
6.7.16.	Fit for foreign service. <i>H. J. W.</i>
<p><u>T.A.B.</u> 4 MAY 1917</p> <p> 2 18 MAY 1917 <i>[Signature]</i> Capt. R.A.M.G.</p>	

TABLE IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
<i>St. John Bay</i>	<i>22/3/16</i>	<i>9/4/16</i>			

Permitted

1-12-16.

Army Form W. 3016.

No. _____

Date Jan 24th 1917

(1) To the Officer i/c Records,

58 Victoria St
S.W. (Station).

(2) The Officer Commanding,

Infld Contingent
Ays (Station).

(3) The Paymaster,

58 Victoria St
S.W. (Station).

Regimental No. 2218

Rank and Name Plt. Perry W.

Regiment or Corps 1st Infld

has been granted a furlough transferred on Jan 24th

His address while on leave will be:-

The Manor
County of London War Hospital
Epsom.

I consider he is fit for Duty
Light duty

Worcester Jagan Capt. R.A.M.C.(F)
Registrar, R.A.M.C.T.
3rd London General Hospital,
WANDSWORTH, S.W.

Officer in charge _____ Hospital,

(Station).

* Strike out that which is inapplicable.

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

No 1998



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Marick Perry, Regl. No. 2218
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
Dollars and 65 Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons
 concerned, viz.:

Allotment begins March 22nd 1916.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
1941	Mother	Mr Tommy Martin	Kellegrens C. B.	65
			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. D. Halpin
for Officer Commanding
4. Company
St. John's
March 21st 1916

(Sig.) Marick Perry
 (Rank) Private

N^o 1998



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Marick Perry, Regl. No. 2218
 hereby agree, until further notification by me, and in similar official form to make an Allotment of
 Dollars and 65 Cents, per diem, from my Pay,
 to, and for the benefit of the undermentioned Person ^{and}_{or} Persons, such payment to be made on proof
 of identity of, and production of the relative Identity Certificates by the Person ^{and}_{or} Persons
 concerned, viz.:

Allotment begins March 27th 1916.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)	
1941	Mother	Mrs Fanny Martin	Kellegrens C. B.	6	65
Total Allotment, \$					

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
 payments on application.

W. Hallaway
 Lt. Company
 Officer Commanding

(Sig.) Marick Perry
 (Rank) Pvt.

March 27th 1916

Office Copy

PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

Royal Newfoundland Ferry Co

No. 2218

Rank

Private

Name

James W

Died

Intestate

at

France

on the

10th of October

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	10	10	0
	Cash issues				Pay days at from to			
	(Date of each issue to be stated)				Proficiency, Service or good conduct pay			
		£	s.	d.	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	4	19	0	Balance due to the Paymaster			
		£	4	19		£	4	19

CHECKED. 4/9/18

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ 4 19 0 is chargeable against the Public.

Dated at this day of SEP 1918 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 the G.O.C. with Army Form B. 2090 or Army Form O. 1315.
- (b) Words in Italics to be struck out when the account is a debtor balance.

NEWFOUNDLAND CONTINGENT

N.F.P/33.

Temporary A/c.

Regtl No. 2218 Rank Pte

Name H. Perry

Pay	F. Allow	Working	Total
1	10		110
Less Allotment			65
Net Rate			45

Date	DEBITS	£ s d			CREDITS	£ s d		
		£	s	d		£	s	d
1917	Balance	1	1	0	Balance	27	11	0
	<u>P.M. ADVANCES:</u>					6	12	7
	A.B. 64				<u>Pay @ Net Rate:</u>			
	Acquittance Rolls	1	1	6	28/10/16 to 12/1/17 = 137 days			
	Hospital Advances	2	8	0	45 = \$ 61.65	12	13	4
	<u>STOPPAGES:</u>				13/1/17 to 23/1/17 = 10 days			
	hospital dys =				30-20 = £ 1-0-0	1	0	0
	Forfeited Pay dys =				1/1 to 1/1 = days			
	Miscellaneous				2 = \$	2	0	0
	Cables							
	<u>P. & R.O. PAYMENTS:</u>	1	16	0				
	Sundry Bills							
	Cash	5	5	6				
	<u>Leeds Bank</u>	15	0	0				
	Cash 12/3/17							
						20	9	0

Ferry, Warwick

2218

Sept

ORIGINAL

Army Form O. 1625.

PAY LIST.

to

191 Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps

ROYAL NEWFOUNDLAND REGIMENT.

No. 2218

Rank Private

Name Perry, W.

Died (a) *Intestate* at *France*

at *France*

on the 10th of October 1914.

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 10.10.14.....	4	19	0
	<i>Cash issues</i> (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			
	Consolidated stoppage							
	Balance due by the Paymaster	4	19	0	Balance due to the Paymaster			
		£	4	19	0			
						£	4	19
								0

This account is in accordance with advices received at the Pay & Record Office to 519118 and may therefore be subject to amendments if and as may be revealed by subsequent advices.

CHECKED. 4/9/16

I hereby Certify that the above account is correct in every particular, and that the Debtor balance of £

Debtor balance of £

Dated at

this

day of

NEWFOUNDLAND CONTINGENT 55, VICTORIA ST. LONDON, S.W. 1. 4 - SEP 1918

191

NEWFOUNDLAND CONTINGENT

CHIEF PAYMASTER & OFFICER IN CHARGE RECORDS

- (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 by Army Form B. 2090 or Army Form O. 1815.
- (b) Words in Italics to be struck out when there is no debtor balance.

ORIGINAL.

Army Form O. 1625.

PAY LIST.

to

191 . Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps ROYAL NEWFOUNDLAND REGIMENT.

No. 2218

Rank Private

Name Perry. W.

Died (a) Intestate at France

on the 10th of October 1914.

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 10.10.14.....	4	19	0
	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			
	"							
	Consolidated stoppage							
	Balance due by the Paymaster	4	19	0	Balance due to the Paymaster			
		£	4	19	0			
						£	4	19
								0

This account is in accordance with advices received at the Pay & Record Office to 5/9/18 and may therefore be subject to amendments if and as may be revealed by subsequent advices.

CHECKED. 4/9/18



NEWFOUNDLAND CONTINGENT. CHIEF PAYMASTER & OFFICER IN CHARGE OF RECORDS. W. H. M. M. M. M. M.

I hereby Certify that the above account is correct in every particular, and that the Debtor balance of £ ... is correct and chargeable against the Public. Dated at this day of 4 - SEP 1918 191 . (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 Form B. 2090 or Army Form O. 1815. (b) Words in Italics to be struck out when there is no debtor balance.

DUPLICATE MAIL COPY

Army Form O. 1625.

PAY LIST.

to 191 . Voucher No.

~~Posted~~
NON-EFFECTIVE ACCOUNT:

Regiment or corps **ROYAL NEWFOUNDLAND REGIMENT.**
 No. **2218** Rank **Powale** Name **Perry, W.**
 Died ^(a) **Intestate** at **France** on the **10th** of **October** 191**4**.
 Deserted at _____ on the _____ of _____ 191**1**.

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 10.10.14	4	19	0	
	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 _____				
	101				Messing allowance days at _____ from _____ to _____				
	"				Kit allowance				
	"				Amount produced by the sale of Effects from Form 2				
	"								
	Consolidated stoppage								
	Balance due by the Paymaster	4	19	0	Balance due to the Paymaster				
		£	4	19		£	4	19	0

This account is in accordance with advices received at the Pay & Record Office to **5/9/18** and may therefore be subject to amendments if and as may be revealed by subsequent advices.

CHECKED.

4/9/18

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ _____ is not recoverable against the Public.

Dated at _____

this _____ day of _____ 191**1**



 CHIEF PAYMASTER & OFFICER IN CHARGE RECORDS.
Paymaster.

- (a) Here state whether the soldier died testate or intestate or under 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.

DUPLICATE MAIL COPY

Army Form O. 1625.

PAY LIST.

to **191** Voucher No.

NON-EFFECTIVE ACCOUNT:

Regiment or corps **ROYAL NEWFOUNDLAND REGIMENT.**
 No. **2218** Rank **Powale** Name **Perry, W.**
 Died ^(or Intestate) at **France** on the **10th** of **October** 191**7**.
 Deserted at _____ on the _____ of _____ 191**7**.

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 10.10.17	4	19	0
	<i>Cash issues</i> (Date of each issue to be stated)	£	s.	d.	Pay days at _____ from _____ to _____			
	101				Proficiency, Service or good conduct pay days at _____ from _____ to _____			
	"				Messing allowance days at _____ from _____ to _____			
	"				Kit allowance			
	"				Amount produced by the sale of Effects from Form 2			
	Consolidated stoppage							
	Balance due by the Paymaster	4	19	0	Balance due to the Paymaster			
		£	4	19		£	4	19

This account is in accordance with advices received at the Pay & Record Office to **5/9/18** and may therefore be subject to amendments if and as may be revealed by subsequent advices.

CHECKED.
2/6
4/9/18



NEWFOUNDLAND CONTINGENT.
 191 *W. J. ...*
CHIEF PAYMASTER & OFFICER IN CHARGE
Paymaster.

I hereby Certify that the above account is correct in every particular and that the debtor balance of £ _____ is as shown and payable against the attached.

Dated at _____ this _____ day of _____ 191**8**

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

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

LM

April 27, 1920

From: Paymaster & O i/c Records

To : Board of Pensions Commissioners for Mfld.

Re No. 2218, W. Perry

**The amount paid in continuance of the above man's
allotment is \$507.65**

Paymaster Major



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

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

Examination of Edward Perry
aged 20 conducted at C.R. 19
Date: Mar 2/16 Recruiting Officer:

NO OF TEST FINDING

- 1 no
- 2 no
- 3 no
- 4 no
- 5 no
- 6 yes
- 7 yes
- 8 yes
- 9 no
- 10 n
- 11 n
- 12 n
- 13 n
- 14 n
- 15 n
- 16 n
- 17 n
- 18 n
- 19 1/6 both
- 20 n
- 21 n
- 22 n
- 23 n
- 24 n
- 25 n
- 26 n
- 27 n
- 28 n
- 29 n
- 30 n
- 31 n
- 32 n
- 33 no
- 34 5-7"
- * 35 31-34 1/2
- * 36 1.33 H.
- 37 10:00 pm week
- 38 Walden - Julia - E. D. Boy
- 39 none

2218

74

Signature of Medical Examiner:

J. W. Borden

In replying the date of this letter should be quoted

B.



July 17, 1919.

Sir:

As the estate of Pte. W. Perry, #2218, consists only of the amount due from the Pay & Record Office, I have the honour to authorize you to pay the amount, viz: \$34.53, to Mrs. Fanny Martin. Please give her a cheque for the amount due.

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

Fanny Martin
J. C. B.
Deputy Minister of Justice.

Capt. J. M. Howley, M.B.E.,
Paymaster Royal Nfld. Regt.

<i>Estates</i>	
ACCOUNT	_____
CH. NO. <i>516</i>	INITIALS <i>J</i>
IND. LEDGER <i>156</i>	INITIALS <i>J</i>
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

Receipt for Army Book 64

No. 2218 Name W. Perry

To Certify that I have received the AB 64 of the above
named Soldier.

5

her
Name Fanny Martin
mark

Date 27th Aug. / 20
Place Kellagrews

Witness
W. J. Rendell

H.B. For completion and return to the Department of Militia
insert in corner of envelope "AB 64"

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.

.....1921

I beg to acknowledge receipt of
Memorial Plaque issued in respect of services of
the late No. ... *2218* ... Rank ... *1st Lt*
Name ... *Harrick Perry* ...
Royal Newfoundland Regt.

... *Fanny Martin* ... (Sgd.)

Mother by adopt Relationship.

Address ... *Fanny Martin*
Leahy Tickle

1931



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

Signature

Date

Address

Regiment or Corps 1st Newfoundland Regt.

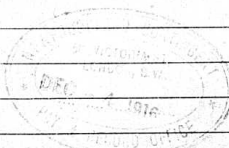
C.R. 1376

Rank Pte Surname Perry Christian Name W.
 Religion C of E Age on Enlistment 20 years — months.
 Enlisted (a) Jan 3/16 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.

Date	Report From whom received	Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B. 213, Army Form A. 38, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 38, or other official documents
		Embarked ...	<u>Southampton</u>	<u>9/7/16</u>	
		Disembarked ...	<u>Rouen</u>	<u>10/7/16</u>	
	<u>Unit</u>	<u>Joined Battalion</u>	<u>France</u>	<u>21.7.16</u>	<u>A 213.</u>
	<u>88 FA.</u>	<u>Adm Divan hoca transf</u>	<u>21 CCL</u>	<u>8-11-16</u>	<u>ED 5620</u>
	<u>39 CCL</u>	<u>Sus Opentry</u>	<u>France</u>	<u>9-11-16</u>	<u>ED 6091</u>
	<u>9 Gen Hosp.</u>	<u>Do Do</u>	<u>Rouen</u>	<u>14-11-16</u>	<u>AA 4251</u>
	<u>AS</u>	<u>"Western Australia" Invalided to England</u>		<u>30/11/16</u>	<u>W 3083</u>



J. H. Burchell
 CAPTAIN.
 i/c Officer i/c No. 1 Regular Infantry Section
 General Headquarters, ...

(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.

Casualty Form Active Service.

Regiment or Corps Newfoundland

Rank Private Surname Ferry Christian Name Horick

Religion Church of England Age on Enlistment 20 years - months.

Enlisted (at home) Terms of Service (a) Duration Service reckons from (a) 27.11.16

Date of promotion to present rank _____ Date of appointment to lance rank _____

Extended { _____ } Re-engaged { _____ } Qualification (b) _____
or Corps Trade and Rate _____

James Capt. Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 25, or in other official documents. The authority to be quoted in each case.		Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 25, or other official documents
Date	From whom received					
				Embarked <u>Hampton</u>	<u>5-8-17</u>	
				Disembarked... <u>Rouen</u>	<u>7-8-17</u>	
				Joined Battalion	<u>28 AUG 1917</u>	<u>B 213</u>
<u>12-10-17</u>	<u>O.C. Unit</u>			<u>Med of Wounds</u>		<u>10-10-17</u>

Officer in Charge
 General Headquarters, 1st and 2nd Divisions.

(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.

Casualty Form - Active Service.

Regiment or Corps **Newfoundland**

Rank **Private** Surname **Ferry** Christian Name **Warwick**

Religion **W.P.** Age on Enlistment **27** years **3** months

Enlisted (a) **W. P. H.** Terms of Service (a) **Station** Service reckons from (a) **2-7-16**

Date of promotion to present rank Date of appointment to lance rank

Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and rate

Occupation Signature of Officer **J. W. Marsh**



CERTIFIED TRUE COPY

Report		Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B.215, Army Form A. 38, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 215, Army Form A. 46, or other official documents.
Date	From whom received				
			Embarked Shannon	5.8.17	
			Disembarked Lobau	7.8.17	
			Joined Battalion	28.8.17	D 213
12.10.17	O.C. Unit	Sold of Wounds		10.10.17	D 213
			2nd Lt. of Royal		
			of Infantry Section No. 1		
			P. H. D. 2nd Battalion		

Em

(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.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

V. F. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.
 (8-6) W-017/2124 1000m G/1853-58 56

Forms
 B. 121.
 29.

Regiment of *2/1st Newfoundland Regiment*

Signature of O. C. Company

Number of Sheet *1*

*W. Rendell Cap
 Cmdr of Coy*

Regimental Number and Name		Enlistment	Trade	Good Conduct Badges, Service Pay or Proficiency Pay	
No. <i>2015</i>	<i>Lacey D.</i>	Age on <i>20</i> years months	<i>Yeoman</i>		
Joined _____	Date _____	Place and Date of Enlistment <i>At this Regt. Mar. 8th 1916</i>	Religion <i>C. of E.</i>		
Joined _____	Date _____	Period of $\left\{ \begin{array}{l} \text{with Colours } 1222 \text{ years.} \\ \text{with Reserve } 362 \text{ years.} \end{array} \right.$	Place of Birth <i>Kellycove, N. Ireland</i>		
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
		<i>Pt</i>		<i>Died of Hoards</i>	<i>10 ¹⁰/₁₇</i>				

To be carried over

C.R. 2218

Jan 11th, 1921

Mrs. Elizabeth Alcock
Kellgrove

Dear Madam:-

Will you kindly inform me if No. 2218
Warrick Perzy, deceased, has any brothers or sisters
living. If so what are their names and ages. If he
has not, perhaps he has an uncle or aunt, in which case,
will you please let me have their names.

Yours faithfully,

W. C. Perzy
Lieut.