

4537



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 4537 Name Richard Pilgrim Meth

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

- |  |                                    |
|--|------------------------------------|
| 1. What is your name? .....  | 1. <u>Richard B. Pilgrim</u>       |
| 2. What is your full Address? .....  | 2. <u>S. Anthony Bay</u>           |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u>                      |
| 4. What is your age? .....   | 4. <u>20</u> Years <u>0</u> Months |
| 5. What is your Trade or Calling? .....  | 5. <u>fisherman</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, Richard B. Pilgrim 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.

Richard Bichel Pilgrim SIGNATURE OF RECRUIT.  
Jas W. Pittman Signature of Witness.

27-4-18

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

I, Richard Pilgrim 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 given as replied to, and the said recruit has made and signed the declaration and taken the oath before me on this 27th day of April 1918

Signature of Attesting Officer J. James

### 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 compiled with. I accordingly approve, and appoint him to the post .....

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

Date.....191

Place.....

} Approving Officer.

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.

‡ Here insert the "Corps" for which the Recruit has been enlisted.

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Richard P. Pilgrim  
 Apparent age ..... years ..... months. Height 5 feet 4 inches  
 Chest Measurement { Girth when fully expanded 33 1/2 inches  
 { Range of expansion 1 1/2 inches  
 Distinctive marks .....

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Annice P. Pilgrim  
St. Anthony High | Relationship Mother  
 Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or L'epot	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>22-4-18</u>									
Joined at <u>St. John's</u> on <u>April 22-1918</u>									
<u>Discharged Depot 22-11-1919</u>									
<u>Embarked St. John's N. Y. D. 20<sup>3/4</sup> 29</u>									
<u>Embarked for France 23-11-18</u>									
<u>Disembarked France 28-11-18</u>									
<u>Admitted to Her Majesty's Queen's No. 40. 20<sup>3/4</sup> 29</u>									
<u>Admitted Bermuda, Brit. Corp. 23<sup>3/4</sup> 29</u>									
<u>Admitted Bermuda, Brit. Corp. 23<sup>3/4</sup> 29</u>									
<u>Admitted Bermuda, Brit. Corp. 23<sup>3/4</sup> 29</u>									
<u>Admitted Bermuda, Brit. Corp. 23<sup>3/4</sup> 29</u>									
<u>Demobilization St. John's 22-9-1919</u>									

Total Service forfeited as above.....

Total Service towards Engagement to 22-9-19 (date of discharge) 1 years 154 days

Pensions .....

# NEWFOUNDLAND POSTAL TELEGRAPHS.



## Cable Connection with all the World

C.R. 4537

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

(NOT TRANSMITTED)

Signature of Sender \_\_\_\_\_ Address Dept of Militia.

Line Number	Rcd	By	Sent	by	Check

Dated April 14th, 1919

To Mrs. Annie C. Pilgrim St. Anthony's Bight

Regret to inform you that Record Office, London, officially reports No. 4537, Private Richard Pilgrim at 6th General Hospital Rouen April 6th still dangerously ill.

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

J R Bennett  
Minister of Militia.  
Chge Dept of Militia.

**FOR TYPEWRITER**

R. 4337

C.P.

No. 4537 Name Pilgrim, R. Sqn. Batty. D. Corps Newfoundland Date of enlistment 22/4/18 G.C. Radio Service or Proficiency Pay Good  
 Date of last entry in Company Conduct Sheet 1/11/19 1/11/19 1/11/19 1/11/19 Sheet No. 27 Signature G.C. [Signature] Company, etc. [Signature] Character Good

Place	Date of offence	Rank	Case of Penance	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
<u>Field</u>	<u>1/11/19</u>	<u>Rt</u>		<u>Deficient of 240 yards field during tank exercise</u>	<u>1st Woodman</u>	<u>admonished</u>	<u>6/11/19</u>	<u>[Signature]</u>	<u>1st Lt. Coy justifying</u>

P.T.O.

Army Form B. 122.

C.R. 4337

Extract from Daily Orders Part II Unit The Royal Field.  
Regt. St. John's: Nov. 15th, 1919.

The discharge of the undernoted on demobilisation has been  
CONFIRMED by Officer i/c Records

4537 Rd. Pilgrim

22-9-19.

C.R. 4537

Extract from Daily Orders Part 11 Unit The Royal Rifles.  
Regt., St. John's, Nov. 13th, 1919.

The discharge of the undernoted has been CONFIRMED by Officer  
i/c Records.

4537 Rd. Pilgrim,

22--9119.

CR.

4537  
4537

Extract from Preliminary Report of a Medical Board held on  
Thursday Evening August 28th 1919. The following was the  
finding.

4537 Pte. R. Pilgrim.

Recommended Discharge from the Army.

ADMISSION TO SANATORIUM.

C.R. 4537

Extract from casualties from Pay & Record Office, London  
dated 16/8/19.

- 4537 Pte. R.B. PILGRIM was discharged from Bermondsey  
Military Hospital, Ladywell Road, 12/8/19, and re-  
ported at the P.& R.O. He was marked for repatriation  
and proceeded to Liverpool same day.

Authority:

Chief Staff Officer (LONDON).



C.R. 4537

Extract from Nominal Roll of Repatriation Draft #94.  
per S.S. "Baltic," Liverpool to Halifax. 12 Aug.1919.

Due to sail 13-8-19.

4537 Pts. R.B. Pilgrim.

C.R. 4537

extract from List of Soldiers embarked August 13th 1919.  
for Halifax.

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4537, Pte. Richard Pilgrim.

C.R. 4537

Extract from telegram received from Synoptical, London,  
Aug. 18th, 1919.

Following have embarked Liverpool Aug. 18th to Halifax.

4537 Pilgrim.

C.R. 4537

Extract from Daily Orders part 11, from Unit The Royal  
Hfld. Regt. St. John's, dated July 25, 1918.

The following man embarked for overseas on H.M.S.  
"Columbelle" July 22, 1918.

#4537 Pte. Richard Pilgrim.

NEWFOUNDLAND CONTINGENT  
MEMORANDUM

C.R. 4537

NOB4(2)/ R.S.O.

FROM  
PAY & RECORD OFFICE  
58 Victoria Street  
London, S.W.

TO  
Officer Commanding  
Bermoney Mil. Hospital,  
Ladywell Road, S.E. 13

8th July 1919.

11th July, 1919.

REPATRIATION

IT being desirable to repatriate the remainder of this contingent so soon as possible and opportunities being uncertain, will you kindly state, so far as may be practicable, the date on which the following may be discharged from hospital, and be ready to embark?

Reference preceding minute This man will soon be discharged from the service. He will be instructed to report to you in the course of a few days. The correct date will be given you by telephone.

(Sgd.) W.S. Goss.  
Capt. for Major.  
Registrar.

4537 Pts. R. Pilgrim

(In. Ref. No. 4636)

It may be added that in the absence of direct transport to Newfoundland there will be no alternative but to travel via Canada, and the men's ~~present~~ physical condition should be considered accordingly, also kindly state whether any treatment may be necessary during the voyage to Canadian port, thence overland the short sea journey to Newfoundland and thence again per rail to St. John's.

Note. Pilgrim can be discharged Hospital at any time, but as a T.B. case will be detained in hospital until next draft ready to proceed

Newfoundland Contingent  
H.H. Batson, 2/Lt.  
for Chief Staff Officer.

(Sgd.) H. A. Timewell.  
Major,  
Chief Staff Officer, (London)

*For Original see File M-9-26*

## NEWFOUNDLAND POSTAL TELEGRAPHS



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(NOT TRANSMITTED)

Signature of Sender

Address Dept of Militia.

Line Number	Rcd	By	Sent	by	Check

Dated June 26th. 1919

To Annie S. Pilgrim, St. Anthony's Bight

Regret to inform you that Record Office, London officially reports No. 4537, Private Richard Pilgrim admitted to Hermandsey Military Hospital Ladywell Road, S.W. May 5th suffering from tuberculosis

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

FOR TYPEWRITER

C.R. 4537

Extract from telegram from Syn., London to Military  
dated June 25th 1919.

Bermondsey Military Hospital Ladywell Road, S.E. reports today  
4537, Pilgrim admitted May 5th suffering from T.B.

-----

C.R. 4537

Extract from telegram from Military to Syn., London  
dated June 10th 1919.

Inform condition #4537, Pilgrim.



C.R. 4537

COUNTY NO. \_\_\_\_\_

# NEWFOUNDLAND POSTAL TELEGRAPHS.



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(NOT TRANSMITTED)

Signature of Sender Noah Simms J.P. Address St. Anthony.

Line Number	Rcd	By	Sent	by	Check

Dated

June 7th, 1919

To

Minister of Militia

Wire information concerning private S. Allan and

4537 Richard B. Pilgrim of this place.

Noah Simms.

## C. 2.—Casualties.

## COLONIAL CONTINGENTS ONLY.

 465 C.R. 45-37  
 Army Form W. 3026A  
 (Continuation of Form W. 3026A supplied separately.)  
 26.13.19

BERMONDSEY MILITARY HOSPITAL, at Ladywell, S. 26.13.19

Affiliated to \_\_\_\_\_

 NOMINAL ROLL of Sick and Wounded from the \* FRENCH Expeditionary Force  
 admitted on 5/5/19 from Hospital Ship \_\_\_\_\_, disembarked at \_\_\_\_\_

\* Here insert which Expeditionary Force.

NOTE.—Two copies of these Rolls to be forwarded, not later than the day after admission :

- (i) One copy direct to the War Office, **FINSBURY COURT, FINSBURY PAVEMENT, E.C.2.**  
 (ii) The other direct to the O. I/c of Records of the Colonial Contingent concerned.

\* 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, alight.  
 (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.

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).
4537	Pte	Pilgrim, R.	R. Nfld R.	T.B.

## NEWFOUNDLAND POSTAL TELEGRAPHS.

C.R. 4537



Cable Connection with all the World

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(NOT TRANSMITTED)

Signature of Sender

Address Dept of Militia.

Line Number	Red	By	Sent	by	Check

Dated April 24th, 1919

To Mrs. Annie E. Pilgrim, St. Anthony's Bight

Regret to inform you that Record Office, London,  
officially reports No. 4537, Private Richard Pilgrim  
at 6th General Hospital Rouen April 13th still dangerously  
ill.

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

J.R. Bennett

Chgo Dept of Militia.  
Minister of Militia.

FOR TYPEWRITER

C.R. 4537

Extract from telegram from Syn. to Mil. dated April 23rd. 1919.

6th., General Hospital, Rouen, April 13th., still dangerously  
ill 4537 Pilgrim.

C.R. 4537

Extract from Casualties.....List No. H.W. 3020

4537. Pte. Pilgrim. R.

Ac. Endocarditis

Dang.illNo change in 6 Gen H. Rouen W/E. 13 April 19.

C.R. 4537.

Extract from Casualties.....List No. H.W. 3020

4537 Pte. R.Pilgrim

Pul. Tuberculósis

Dang.illNo change in 6 Gen H. Rouen W/E. 13 April 19.

C.R. 4537

Extract from telegram from Syn. to MIL. Dated April 12, 1918.

6th. General Hospital Rouen April 6th. still dangerously  
ill. 4537 Pilgrim.

## NEWFOUNDLAND POSTAL TELEGRAPHS.



CR 4537

**Cable Connection with all the World**

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**(NOT TRANSMITTED)**

Signature of Sender \_\_\_\_\_ Address **Dept of Militia.**

Line Number	Recd	By	Sent	by	Check

*Dated* **April 7th, 1919**

*To* **Annie E. Pilgrim, St. Anthinys Bight**

Regret to inform you that Record Office, London,  
officially reports **No. 4537, Private Richard Pilgrim**  
at 6th General Hospital Rouen March 30th dangerously ill  
**no change**

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

**J.R. Bennett**

**Chge Dept of Militia.**

Minister of Militia.

**FOR TYPEWRITER**



C.R. 4537

Extract from telegram from Syn. to Mil. dated Apr. 8/1919.

6th., General Hospital, Rouen March 30th., dangerously  
ill, no change, 4537 Pilgrim.

C.R. 45-37

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

PROGRESS REPORTS RECEIVED BY POST. IN CERTAIN CASES THE SAME INFORMATION OR A LAT'R REPORT MAY ALREADY HAVE BEEN RECEIVED BY TELEGRAM AND COMMUNICATED TO RECORD OFFICES. CARE SHOULD BE TAKEN TO CHECK THIS BEFORE NOTIFICATION

No. TEL RECORD OFFICE - EXETER.  
.....  
21004 Pte. Ingram F.L. 6/Dors.R.

LIST NO.H.W.3004.

Nephritis.....Dangerously ill Improving in 6 Gen.H.Rouen w/e 6 Apr. 19.

INFANTRY RECORD OFFICE - HANWELL.  
.....  
Pte. Taylor A. 25/Mr.R.

LIST No.H.W.3004.

Old GSW.Leg...Dangerously Improving in 6 Gen.H.Rouen w/e 6 Apr.18.

INFANTRY RECORD OFFICE - LONDON.  
.....  
Pte. Collins T.G. 43/GB.R.Fus.

LIST NO.H.W.3004.

GSW,Chest Acc.Dangerously ill No Change in 6 Gen H.Rouen w/e 6 Apr 19

NEW FOUNDLAND CONTINGENT.

LIST NO.H.W.3004.

.....  
4537 Pte. Pilgrim R. 1/R.New.R.

Pul.Tubercol..Dangerously ill No Change in 6 Gen.H.Rouen w/e 6th April 1929.



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C.R. 4537

Extract from Casualties.....List No.H.A. 35601. 28/3/19

4537 Pte. R. Pilgrim

Adm. 6. Gen. Hos. Rouen 20th, March'19.

N.Y.D.

C.R. 4537

Extract from Casualties received from Pay & Record  
Office, Mar. 26th 1919.

4537 Pte. R. Pilgrim

Was Admitted No. . . General Hospital Rouen 24-3-19  
Dangerously ill <sup>of pulmonary</sup> Tuberculosis

# NEWFOUNDLAND POSTAL TELEGRAPHS.



C.R. 4537  
**Cable Connection with all the World**

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**(NOT TRANSMITTED)**

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

Address \_\_\_\_\_

**Dept of Militia.  
 Mech**

Line Number	Rcd	By	Sent	by	Check

**Dated** March, 26th, 1929

**To** Mrs. Annie E. Pilgrim, St. Anthony's Bight

Regret to inform you that Record Office, London, officially reports **No. 4657, Private Richard Pilgrim at 6th General Hospital Rouen March 25rd dangerously ill suffering from pulmonary tuberculosis**

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

J.R. Bennett

Minister of Militia.

Chgo Dept of Militia.

**FOR TYPEWRITER**

C.R! 4537

Extract from Casualties....List No.P.172967

4537 Pte. R. Pilgrim

O.C? 6 Gen. Hos. Rouen telegraphs March 23rd,.19.

Pulmonary Tuberculosis, Dangerously ill.

C.R. 4537

Extract from Nominal Roll of draft No. 56, from the 2nd., Battalion  
of the Royal Newfoundland Regiment, Winchester to the 1st., Battalion  
of the Royal Newfoundland Regiment, B.E.F., Embarked Southampton  
23/11/18.

---

#4537 Pte. R. B. Pilgrim.

C.R. 4537

Extract from Daily Orders part 11, from Unit The Royal Rifles, Regt  
Cdnad 25, 1918.

#4537 Pte. Richard Pilgrim.

Attested for General Service with the Royal Rifles, Regt. from  
22/4/18 *[Signature]*



20. 3. 19

Lying.

Sitting.

~~Able to Walk.~~

Diagnosis

*Pulmonary Tubercle*

With Simple  
Compound Fracture of

Slight.

Severe.

Notes

6161 1919 - 4

Sgd.

(The parts not applicable should be struck out.)



*AD*

A

No. 6 General Stationary Hospital at Rouen

Regt. No. 4534 Date 4-5-19

Name The Pilgrim

Regt. or Corps 1st Roy. of Flats

Name of Ship L 109684

A S  
M

POST OFFICE TELEGRAPHS.  
**FOREIGN AND COLONIAL TELEGRAMS ONLY.**  
 (Telegrams for North America, Central America or West Indies excepted.)

 Counter  
 Number ..... 4537

Prefix.	Words.	Code.	Charge.			Sent	Date Stamp.
			k	s	d.		
Office of Origin and Service Instructions.						At.....M.	<b>For Postage Stamps.</b> <i>To be affixed by the Sender. Any Stamp for which there is not room here should be affixed at the back of this form.</i> <i>(A Receipt for the Charges on this Telegram can be obtained, price One Penny.)</i>
						To.....	
						By.....	

**Notice.**—The following Telegram is accepted by the Postmaster-General for transmission subject to the Regulations as to Foreign Telegrams made pursuant to the Telegraph Acts, 1863 to 1911, provided that the *Request* at the foot of the Telegram is previously signed by the Sender.

The Sender's Name and Address, or either of them, if to be telegraphed, must be written at the end of the text of the Telegram.

TO

COMMANDING SIXTH GENERAL HOSPITAL  
 FRANCE

TELEGRAPH PRESENT CONDITION 4537 PILGRIM ROYAL NEWFOUNDLAND  
 REGT.

SYNOPTICAL.

I request that the above Telegram may be forwarded [via\* \_\_\_\_\_] subject to the Conditions which are printed on the back hereof, and by which I agree to be bound.

Signature and Address of Sender (not to be telegraphed) \_\_\_\_\_

\* This space is to be filled up only if there are alternative routes. For routes, see the Table of Charges for Foreign Telegrams in the Post Office Guide.

N.F.P./86.

NEWFOUNDLAND CONTINGENT

TELEGRAM ~~full text~~/extract from MINISTER OF MILITIA,

No. \_\_\_\_\_ Dated 0 6 19 226 ), received 1 / 6 / 19

Decoded by J. S. \_\_\_\_\_ Checked by A.S.H. \_\_\_\_\_

Branch Rcds \_\_\_\_\_ Acted upon (Initial) \_\_\_\_\_

Acknowledged per No. \_\_\_\_\_ Dated / /

---

Please inform-condition of-1850-Pilgrim-4537-Pilgrim-

1  
N.F.P./88.

NEWFOUNDLAND CONTINGENT

TELEGRAM full text/extract from MINISTER OF MILITIA,

No. \_\_\_\_\_ Dated 10 / 8 / 19 (226), received 11 / 8 / 19

Decoded by J. S. \_\_\_\_\_ Checked by A.S.H. \_\_\_\_\_

Branch Rods \_\_\_\_\_ Acted upon (Initial) \_\_\_\_\_

Acknowledged per No. \_\_\_\_\_ Dated / / \_\_\_\_\_

Please uniform-condition of-1850-Pilgrim-4537-Pilgrim-

1850 p/a Pilgrim by K. B. was Insp. Paslay

4537 p/e R.B. Pilgrim 6th Gen Insp. Rowen

**MESSAGE FORM.** Series No. of Message \_\_\_\_\_

In CALL            v _____  Out            v _____	Recd. At _____ By _____ Sent At _____ By _____	Army Form C 2128 (pads of 100).  Date Stamp.
PREAMBLE		
M.M. } Delivery _____ v Offices } Origin _____		
PREFIX	Words	

TO | COMMANDING DYKEBAR WAR HOSPITAL  
PAISLEY

FROM | \_\_\_\_\_  
 & place

Originator's Number <u>397</u>	Day of Month <u>13/8/19</u>	In reply to Number
-----------------------------------	--------------------------------	--------------------

<u>TELEGRAPH</u>	<u>PRESENT</u>	<u>CONDITION</u>	<u>1850</u>
<u>PILGRIM</u>	<u>ROYAL</u>	<u>NEWFOUNDLAND</u>	<u>REGT.</u>
		<u>SYNOPTICAL</u>	

TIME OF ORIGIN	TIME OF HANDING IN (For Signal use only).
----------------	--

Originator's Signature  
 (Not Telegraphed)

**POST OFFICE TELEGRAPHS.  
FOREIGN AND COLONIAL TELEGRAMS ONLY.**

(Telegrams for North America, Central America or West Indies excepted.)

Counter Number .....

**A S M**

Prefix.	Words.	Code.	Charge.			Sent	<p align="center"><b>For Postage Stamps.</b></p> <p><i>To be affixed by the Sender. Any Stamp for which there is not room here should be affixed at the back of this form.</i></p> <p><i>(A Receipt for the Charges on this Telegram can be obtained, price One Penny.)</i></p>	Date Stamp.
			s	e	d.			
Office of Origin and Service Instructions.						At.....M.		
						To.....		
						By.....		

Notice.—The following Telegram is accepted by the Postmaster-General for transmission subject to the Regulations as to Foreign Telegrams made pursuant to the Telegraph Acts, 1863 to 1911, provided that the Request at the foot of the Telegram is previously signed by the Sender.

The Sender's Name and Address, or either of them, if to be telegraphed, must be written at the end of the text of the Telegram.

**TO**

**COMMANDING SIXTH GENERAL HOSPITAL  
FRANCE**

**TELEGRAPH PRESENT CONDITION 4537 PILGRIM ROYAL NEWFOUNDLAND REGT.**

**SYNOPTICAL.**

I request that the above Telegram may be forwarded [via\* \_\_\_\_\_] subject to the Conditions which are printed on the back hereof, and by which I agree to be bound.

Signature and Address of Sender (not to be telegraphed) .....

\* This space is to be filled up only if there are alternative routes. For routes, see the Table of Charges for Foreign Telegrams in the Post Office Guide.

NEWSPAPER  
POSTAGE  
NO. 215 IN 4199  
CO. 13 JUN 19

POST OFFICE  TELEGRAPHS.

Office Stamp.



This Form must accompany any inquiry respecting this Telegram.

Office of Origin and Service Instructions.

Charges to pay } s. d.

Paisley T

Handed in at

10 50a

Received here at

12 7 p

TO

~~Optical~~ Ldu Sw

Pilgrim slowly and steadily improving mentally and physically

Dykebar War Hospital



POST OFFICE



TELEGRAPHS.

NEWFOUNDLAND LIGHT POST  
PAY & RECEIPT OF

4224

JUN 19 19

Office Stamp.



This Form must accompany any inquiry respecting this Telegram.

Office of Origin and Service Instructions.

Charges to pay s. d.

Rouen Camps  
Mo

Handed in at

633

Received here at

740/2

TO

Synoptical London SW

13

aaa

6537

Pilgrim

Royal Newfoundland Regret  
evacuated to UK 4/5/19 per  
no 6 ambulance train  
6 General Hospital Rouen

The Secretary,  
War Office (C.2.Cas.),  
Finsbury Court,  
Finsbury Pavement, E.C.2.

Sir: 4537 Pte. R.B. Pilgrim. R. Newfoundland Regt.

The following exchange of telegrams are quoted. please.

"To- Synoptical- London- 10/6/19- (226)

"Please inform- condition of- 1850- Pilgrim- 4537-  
"Pilgrim-

"(Sgd) Military-"

"To- Comdg- Sixth- General- Hospital- France-

"Telegraph- present- condition- 4537- Pilgrim- Royal-  
"Newfoundland- Regiment-

"(Sgd) Synoptical-"

"To- Synoptical- London- 14/6/19- (4224)

"13- aaa- 4537- Pilgrim- Royal- Newfoundland- regret-  
"evacuated- to- U.K.- 4/5/19- per- No.6- Ambulance-  
"Train- (Sgd) 6- General- Hospital- Rouen-"

With regard to the latter telegram, no information as to the transfer of the above-named soldier to U.K. has ever been received by this Office. It would therefore be greatly appreciated if you would inform me of his whereabouts, to enable a reply to be telegraphed to the Minister of Militia, Newfoundland.

Please treat this matter as urgent.

I am, Sir,  
Your obedient servant,

HB/JC

Major,  
Chief Staff Officer (London).

To be attached to Page 2 of A.F. B. 179A. A.F. B. 179P. (Additional).

The answer to this question 16 should be copied from A.F. B. 179A and signed by the Officer in Medical charge of the case and the Officer in charge of Hospital before the papers are despatched from the Hospital.

16. Was an operation performed?

If so, what?

*Laparotomy for Tub. Peritonitis 23.11.19*

Date.....

*July 11.19*

.....  
Officer in Medical charge of case.

*W. H. ...*

To be detached and handed to the man on his discharge from the Hospital.

.....  
Officer in charge of Central Hospital.

TO:- O.C. 3rd London General Hospital,  
Wandsworth.

From:- O i/c, Bermondsey Military Hospital,  
Ladywell Road, S.E.13.

4537 Pte. Pilgrim, R.

With reference to our telephonic  
communication of this morning. The above named  
man has been instructed to report to you for an  
Invaliding Board.



*H. W. Marriott Jones*

Lt. Col. R.A.M.C.

O. i/c Bermondsey Military Hospital.

No. 15681/1648.

N.F.P./79.

NEWFOUNDLAND CONTINGENT

From:

Chief Paymaster & O. i/c Records,  
Newfoundland Contingent,  
Pay & Record Office,  
58, Victoria Street,  
London, S.W. 1.

To:

Officer Commanding,  
2nd. Bn. Royal Nfld. Rgt.,  
Winchester.

September 30th, 1918

Oct-3 1918

Subject: 4537, Pte. R.B. Pilgrim.

With reference to the following telegram (8402) from the Hon. Minister of Militia, received  
/ /

"455 Pay to 4537, Pte. R.B. Pilgrim £4.0.0.

Draft £ 4.0.0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

*Richard B. Pilgrim*  
Chief Paymaster & O. i/c Records.

Receipt hereunder.

*R. B. Pilgrim* LIEUT. COLONEL,  
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.  
Officer Commdg.        Batt'n  
Royal Newfoundland Regiment

Received the sum of four

pounds on account of cable remittance from Newfoundland.

Richard B. Pilgrim  
No. 4537 Rank Pte

Witness Poul Jensen  
CPM



NEWFOUNDLAND CONTINGENT  
PAY & RECORD OFFICE  
Ref. No. 4363  
JUN 1919  
ACKD  
JUN 21 1919  
JUN 21 1919

The Chief Staff Officer,  
Newfoundland Contingent,  
58, Victoria Street, S.W.1.

With reference to your letter of 17th June, 1919(8797/174/R & C) relating to 4537 Private PILGRIM, R. B. R. NEWFOUNDLAND REGIMENT, please note that this man disembarked at Southampton ex H.S "Goorka" on 5th May, 1919 and he was sent for admission to the Bermondsey Military Hospital on the 5th May, 1919. The fact of his admission to Bermondsey Hospital does not appear to have been notified to this Department and a communication has therefore been sent to the Officer Commanding the Hospital enquiring whether Pte. Pilgrim was actually admitted, and if so, that the requisite report may be furnished to this office.

In the meantime, will you kindly state whether your record office received direct from the Hospital a copy of Army Form W.3026A containing the report. Assuming Pte. Pilgrim to have been admitted, it seems that the Hospital failed to notify this Department and also your office.

*B Grinstead*

*AW 3026A from hospital received 24/6/19  
No previous notification of the man's  
admission to hospital in UK received*

War Office,  
Finsbury Court,  
Finsbury Pavement, E.C.2.

*25/6/19*

20<sup>th</sup> June, 1919.

*A. 4537 Pilgrime*



# Department of Militia, Newfoundland

## Medical Department

### Medical Report on an Invalid

#### NOTES :

- (a) This report is solely concerned with Pensions.
- (b) A single copy only is required.
- (c) "Aggravated" being now a technical term, carrying right to pension, discrimination in its use is essential.
- (d) Be as brief as possible compatible with lucidity.
- (e) Avoid dubiety—"perhaps," "possibly," "might" and the like.
- (f) Only sufficient clinical data need be given to establish the degree of disability and assist the Board in arriving at a decision.

#### STATEMENT OF CASE

Station..... *St Johns* .....

Date..... *Aug 30<sup>th</sup>/19* .....

1. Unit *Royal Newfoundland*

5. Age last birthday *30*

2. Regimental No. *4537*

6. Enlisted on *April 1918*

3. Rank *Pte*

at *St Johns.*

4. Name *Pilgrim R.*

7. Former trade or occupation *Lumberman*

8. Disability *Pulmonary T.B.c  
Tubercula peritonitis*

9. History *Reported sick 30<sup>th</sup> March 1919. was then in France. was sent to Brompton Hoop, London Invalided Home Aug 24/1919.*

10. What is his present condition ?

(This is the important question. Be brief—the clearer the case the less need be written. Read note f above).

Small physique. Poorly nourished.  
Exam. chest. Reveals  
dulness Rt. apex. & a  
few moist rales. also  
a few Rales. base left-  
lung. N. f. much  
increased on R. side.  
Papers show. T.B. in Sputum.

11. Was sanatorium advised and refused ?  
operation

Scan over. appendix. Still  
suppurating. Had exploratory  
Laparotomy in Nov 1919.

12. Do you recommend discharge as permanently unfit ?

Miliary Tubercles found on  
Peritoneum.  
Heart. ~~no~~ ~~traces~~ but -  
they fast -

Signature

*S. H. Keane*

Rank or Qualification

*Capt.*

Remarks if any by Officer in Charge Hospital.

Place

Signature

Date

Rank



## Opinion of the Medical Board

In para. 13, the President should write "may" or "cannot" at x  
Erase inapplicable words

13. For pension purposes, the disability x be considered as aggravated by :—  
due to

- (a) Service during this war. (b) Climate. (c) Ordinary Military Service  
Remarks if any :—

14. Does the Board concur in preceding report? (see Sect. 10). If not give differing opinion and additional findings.

*Yes weight 120 lbs pulse. 112 Bronchial breathing  
have a front both chests-*

15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market? *100%*

(b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a full livelihood in the general labor market lessened by that portion of his disability to or incurred during service? *100% while a soldier*

(State in percentage.)

Remarks if any :—

16. Is the disability permanent? *yes*

17. Has the disability been aggravated by (a) Intemperance  (b) Misconduct

18. The refusal of operation sanatorium is :— (a) Reasonable  (b) Unreasonable

Remarks if any :—

19. If fit subject for Hospital do you recommend admittance to General Hospital  
Naval and Military Con-  
valescent Hospital,  
Jensen Tuberculosis Camp.

20. We recommend discharge from ~~retention in~~ the Army *yes*

Remarks if any :—

*R. G. [Signature]*  
 \_\_\_\_\_ President  
 Signatures *J. G. [Signature]*  
*P. O. [Signature]*  
 \_\_\_\_\_

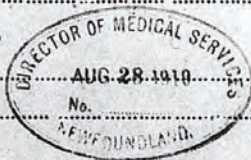
Place *S. Johns* .....

Date *Aug 28 1919* .....

APPROVED

Station *AUG 28 1919* .....

Date .....



*Clayton [Signature]*  
 \_\_\_\_\_  
 Administrative Medical Officer. *Meyer*

KIT INVENTORY  
of

PTE. RICHARD PILGRIM.  
-----

Received from: John C. Oke.

Received into: Pensions. Depart.

PERSONAL EFFECTS

1 Trench Coat  
1 Hat  
2 top Shirts  
2 suits Underwear  
1 suit clothes  
1 extra Vest  
3 Collars  
1 Towel  
1 Cap  
2 Brushes  
2 prs Socks  
1 Purse, containing \$5.48  
Discharge Papers  
1 Personal Letter  
1 Military Cap  
Khaki uniform, shirt and pr. socks used on corpse.

RECEIVED EFFECTS AS ABOVE NOTED  
DATE ..Oct. 31st, 1919.

Signed: W.H. Parsons,

Sec. B.P.C.

2053

Pilgrim, R.

C.R. 4537

P.R.O.

No. **16715** (To be inserted in the Central Hospital.)

Army Form O. 1823A.  
(In pads of 200)

ADVANCES TO BE PAID TO MEMBER(S) of the R. Newfoundland Regiment.  
\_\_\_\_\_ Hospital. \_\_\_\_\_ Month \_\_\_\_\_

N.B.—A Separate form should be filled for each Regiment or Corps to soldiers of which advances are made.

Regtl. No.	Rank.	Name.	Company or Squadron or Battery	Bn.	Date.	Amount.	For use in Regimental Pay Office only.		Soldier's Signature.
							Ledger Clerk.	Check'g Clerk.	
4 5 3 4	PLC	Pilgrims, R.			8/8/19				R. Pilgrims

**BRANDSEY MILITARY HOSPITAL**  
REGISTRAR & ADM. OFFICER  
2 AUG 1919  
OFFICE  
2 BRANDSEY ROAD, LETCHAM, S.E.13

NOTIFIED PER N.F.P. FORM  
H.Q. No. 10484  
503  
W.G. 2/8/19

8/8/19  
N.F.P.

NEWFOUNDLAND CONTINGENT  
55 VICTORIA ST.  
LONDON, S.W. 1  
14 AUG 1919

Certified Correct. (Please complete and return the counterfoil to \_\_\_\_\_ Major, R.A.M.C.

Medical Officer in Charge.

To Regimental Paymaster \_\_\_\_\_

Pilgrim, L

4537

May 20<sup>th</sup>.

Sept. 22, 1919

#4537 Pte. Richard Pilgrim,  
St. Anthony Bight,

Dear Sir:-

Please find enclosed Discharge Certificate #3838.

Yours truly,

Captain & Paymaster.

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 4537 Rank Clt Name Richard Pilgram  
 Intended place of residence St. Anthony, Bight  
 2. Occupation Fisherman  
 Classification of soldier B Medical Category E

3. The above named man is discharged in consequence of  
**Eligible for DEMOBILIZATION War Service Gratuity**

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.  
 Place, ST. JOHN'S ..... D.R. Cooper, Capt  
 Date Sept 1st 1919 ..... Commanding Discharge Depot  
 The Royal Newfoundland Regiment

### CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.  
 Place, ST. JOHN'S ..... R. Pilgram  
 Date Sept 1st 1919 ..... Signature of soldier  
 Signature of witness J.H. Knowles Lt

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

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.  
 Place, ST. JOHN'S to enter Hospital ..... R. Pilgram  
 Date ..... Signature of soldier  
 Signature of witness R. Tilley Lt

### STATEMENT OF SERVICE

7. Enlisted for service Apr. 22nd 1918 No. of days on Military  
 Discharged from service Sept 8th 1919 Plus 14 days Service 519

### APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.  
 Place, ST. JOHN'S .....  
 Date ..... Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment

### CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed  
 Place, ST. JOHN'S ..... M. Howley Capt  
 Date September 23/1919 ..... Officer i/c Records  
 The Royal Newfoundland Regiment

2073 219/15838

9  
31  
30  
31  
31  
2  
154

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 537 Rank Pte Name Clayton R  
 Date of Enlistment 2.11.18 Address S. Matthews District P. B. Bades  
 Occupation Tramwayman Classification for Discharge B Medical Category E  
 Recommendation S.M.B. Personnel Dept. Disability Rating 100% Whole on Hosp  
 Passed to Demobilization Officer with following documents—

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1	
B 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2	<u>1835.A.1</u>	" 6	
B 179c	B 120	M 93	<u>3826.A.1</u>		

Date: 9.1.19

A. C. Discharge Depot.  
Capt

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

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

## Eligible for War Service Gratuity

Particulars passed to Vocational Officer for information and action.

Date: .....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable £ 60 00

(b) Clothing Supplied .....

Date: .....

O i/c. Re-clothing.



3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. .... to his home  
 at *Manhattan* ..... and Release Certificate No. *3827* issued.

Date *Sept 15 1919* ..... *J. A. Howells*  
 Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection  
 therewith settled. He has received pay and allowances to *29.19* .....

Date *Sept 15 1919* ..... *L. K. Coobe Capt*  
 Depot Paymaster.

Discharge approved for *Sept 8<sup>th</sup> 1919* .....

Forwarded with following documents to O.C Discharge Depot.

N.F. Pj36.....	B 268.....	B 121.....	N.F. Med.....	D.F. I.....
F 178.....	W 3494.....	B 122.....	Board 1st.....	" 2.....
B 178a.....	D 400A.....	B 1915.....	do 2nd.....	" 3.....
B 179.....	D 400B.....	Form L.....	do 3rd.....	" 4.....
B 179a.....	D 400C.....	Form K.....	do 4th.....	" 5.....
B 179b.....	B 103.....	ME 2.....	<i>1835 A. 1</i>	" 6.....
B 179c.....	B 120.....	M 93.....	<i>2036 A. 1</i>	

Date *Sept 15 1919* ..... *J. A. Howells*  
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:—  
 Officer in Records.  
 Board of Pension Commissioners.  
 with following additional documents.

Date .....  
 O. C. Discharge Depot.

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

Date .....

## Civil Re-establishment Committee



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

To enter Hospital

R Pilgrim

Signature of Man.

Reg. No. 4587

Signature of the Vocational Officer or his Representative.

Place

Date

191

9



Department of Militia, Newfoundland  
Medical Department

*Medical Report on an Invalid*

NOTES :

- (a) This report is solely concerned with Pensions.
- (b) A single copy only is required.
- (c) "Aggravated" being now a technical term, carrying right to pension, discrimination in its use is essential.
- (d) Be as brief as possible compatible with lucidity.
- (e) Avoid dubiety—"perhaps," "possibly," "might" and the like.
- (f) Only sufficient clinical data need be given to establish the degree of disability and assist the Board in arriving at a decision.

STATEMENT OF CASE

Station..... **St. John's**.....

Date..... **August 26th, 1919**.....

- |                   |                           |                               |  |
|-------------------|---------------------------|-------------------------------|--|
| 1. Unit           | <i>Royal Newfoundland</i> | 5. Age last birthday          | <b>30</b>  |
| 2. Regimental No. | <b>4537</b>               | 6. Enlisted on                | <b>April 1918.</b>                                 |
| 3. Rank           | <b>Private</b>            | at                            | <b>St John's</b>                                   |
| 4. Name           | <b>Pilgrim R.</b>         | 7. Former trade or occupation | <b>Lumberman</b>                                   |
|                   |                           | 8. Disability                 | <b>Pulmonary T.B.C.<br/>Tubercular Peritonites</b> |

9. History **reported sick March 20th, 1919., was then in France, was sent to Bermunsey Hospital, London. Invalided Home August 24th, 1919.,**

10. What is his present condition ?

Small Physique poorly nourished.

(This is the important question. Be brief—the clearer the case the less need be written. Read note f above).

Exam, Chest, Reveals dulness right apex, ~~S.A.~~ Few moist rales, also a few rales hse left lung, ~~S.V.F.~~ Much increased on right side. Paper show T. B. in Sputum. Scar over appendix, Still suppurating. Had exploratory Laparotomy in March 1919.

Miliary Tubercles found on Peritoneum. Heart no murmur but very fast.

11. Was sanatorium advised and refused ?  
operation

12. Do you recommend discharge as permanently unfit ?

Signature S. G. KEAN.....

Rank or Qualification .....CAPTAIN.....

Remarks if any by Officer i | c Hospital.

Place ..... Signature .....

Date ..... Rank .....

## Opinion of the Medical Board

In para. 13, the President should write "may" or "cannot" at x  
Erase inapplicable words

13. For pension purposes, the disability x be considered as aggravated by:—  
due to
- (a) Service during this war. (b) Climate. (c) Ordinary Military Service  
Remarks if any:—
14. Does the Board concur in preceding report? (see Sect. 10). If not give differing opinion and additional findings.

**Yes Weight 120 Pounds, pulse 112. Bronchial Breathing,  
back and front both chest.**

15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market?
- (b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a full livelihood in the general labor market lessened by that portion of his disability to or incurred during service?

(State in percentage)

100% While in Hospital

Remarks if any:—

16. Is the disability permanent? **Yes**
17. Has the disability been aggravated by (a) Intemperance (b) Misconduct
18. The refusal of operation sanitorium is:— (a) Reasonable (b) Unreasonable

Remarks if any:—

19. If fit subject for Hospital do you recommend admittance to General Hospital  
Naval and Military Convalescent Hospital,  
Jensen Tuberculosis Camp.

20. We recommend discharge from confinement in - - the Army **Yes**

Remarks if any:—

..... N. S. FRASER .....  
President

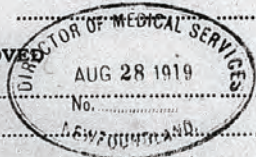
Signatures..... J. S. TAIT .....

..... L. PATERSON, MAJOR .....

Place ..... St. John's .....

Date ..... Aug. 28th, 1919, .....

APPROVED.....  
Station.....  
Date.....



.....  
Administrative Medical Officer.

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

# MEDICAL HISTORY

Surname Pelgrim OF Christian Name Riadara

Table I.—GENERAL TABLE.

Birthplace:—Parish St. Anthony's County Nfld.

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	day of	191
Examined	on <u>27</u>	day of <u>Apr</u>	on	day of
	at <u>S. Johns</u>		at	
Declared Age	<u>30</u> years	— days	years	days
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet	<u>4</u> inches	feet	inches
Weight		<u>124</u> lbs.		lbs.
Chest Measurement	Girth when fully expanded	<u>38 1/2</u> inches		inches
	Range of Expansion	<u>4 1/2</u> inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arms			
	Number			
When Vaccinated				
Vision	R. E.—V=	<u>6/10</u>	R. E.—V=	
	L. E.—V=	<u>6/10</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>Samuel Paterson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.			Medical Officer.
Enlisted	at <u>S. Johns</u>		at	
	on <u>27</u> day of <u>Apr</u>	191 <u>8</u>	on	day of
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment	<u>The Royal</u>	<u>4537</u>		
	<u>Nfld. Regt.</u>			
Transferred to				
Became non-effective by	on	day of	on	day of
		191		191
[Signature]				
[Rank]				





# Descriptive Return of a Soldier Discharged on Account of Disability

INSTRUCTIONS—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. i c Records together with the remainder of the man's documents.

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

Name in full *Richard Bickel Pilgrim*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4537*

Intended address *St Anthony Bight.*

Height on discharge *5* Feet *7*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *Operation Appendicitis*

Figure on discharge *medium*

Christian name of Father \_\_\_\_\_

Christian name of Mother *Annie.*

Wife's maiden name in full \_\_\_\_\_

Date and place of marriage \_\_\_\_\_

Christian names of children \_\_\_\_\_

Place and date of soldier's birth *St Anthony, Dec 15<sup>th</sup>, 1899.*

Nature and locality of civil employment required \_\_\_\_\_

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full) *RB Pilgrim*

*RtE*  
(Rank)

Station *JOHN'S.*

Date *26-8-19*

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



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

Station

Date



FORM K

No. 4215 A



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Richard B Pilgrim, Regl. No. 4537

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

Allotment begins 1st June 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3982	mother	Mrs Henry (Annie) Pilgrim	St Anthony Bight, St Barbe	
Total Allotment, \$				70 <sup>9</sup>

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

Sig.) [Signature]  
 Officer Commanding  
A Company

(Sig.) Richard B Pilgrim  
 (Rank) Pte

[Signature]  
May 23<sup>rd</sup> 1918

No. 4215



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Richard B Pilgrim, Regl. No. 4527

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and Seventy 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 1st June 1918

Table with 5 columns: Identity Certificate No., Whether Wife, Child, other Relative or Friend, NAME (in full), ADDRESS, AMOUNT (each person). Row 1: 3982, mother, Mrs Henry (Annie) Pilgrim, St Anthony's Bight, St Barbe. Total Allotment, \$ 70.

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. James ... Officer Commanding Company

(S) Richard B Pilgrim (Rank) Pte

may 23 1918

C. 2.—Casualties.

BERMONDSEY MILITARY HOSPITAL  
**COLONIAL CONTINGENTS ONLY.**

Army Form W. 3026A.

(Continuation Sheets are supplied separately.)

Bermondsey Military

No. 4023  
 HOSPITAL, at  
 Date Admitted to

Ladywell Road, S.E. 13.

NOMINAL ROLL of Sick and Wounded from the French Expeditionary Force  
 admitted on May 5th, 1919. from Hospital Ship \_\_\_\_\_, disembarked at  
 \* Here insert which Expeditionary Force.

NOTE.—Two copies of these Rolls to be forwarded, not later than the day after admission :

(i) One copy direct to the War Office, Alexandra House, Kingsway, W.C.2.

(ii) The other direct to the O. i/c of Records of the Colonial Contingent concerned.

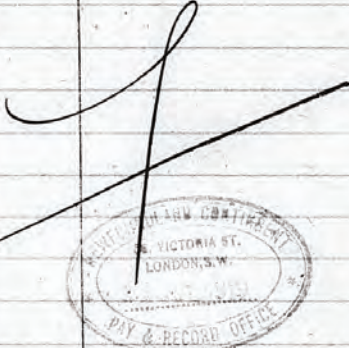
\* The nature of the casualty is required for telegraphing details overseas. If the details given are insufficient, reference back to the hospital for further information is rendered necessary. The following instructions should therefore be carefully followed in all Colonial cases :

(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.

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)
4537	Pte.	Pilgrim, R.B.	R.Newfoundland Rgt.	T.B.
				
				Major, R.A.M.C. Registrar.

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class F., or P. (T), of the Reserve.  
In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

## Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. *Royal Newfoundlanders* 7. Former Trade or Occupation } *Labourer.*
2. Regt. *4537* 3. Rank. *Sgt.* 7a. If the soldier claims previous service in Army, he should state—
4. Name *William Richard* (Surname) (Christian Names) (a) Former Regts. or Corps; with Regt. Nos.
5. Age last birthday. *21*
6. Posted for duty *Apr. 22/18* at *Newfoundland* in category (or grade) *A1.*
8. If the disability is an injury was it caused  
(a) in action (b) on field exercise  
(c) on duty (d) off duty? (b) Date of Discharge;  
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—  
(a) When (d) Particulars of Pension or Gratuity (if any)  
(b) Where  
(c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179a (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

### Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability.

12. Place of origin of disability.

13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

*Sublet & Mary Christensen 44  
March 1918  
France*

*Has had flaccid paralysis off 4th  
since Nov. 1918. Caused in winter  
difficulty till March 1919 when  
he reported sick with angina &  
wasting. Admitted 6-22-19  
Caused in March 20-19 with report of  
Sublet at R. 4537 & T. 13, 14/19  
Had paraparesis in March 23 for 1st time  
Paralysis: Involuntary loss of Sublet and admitted Bermuda M.H. 5N 19*

OPINION OF THE MEDICAL BOARD.

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a 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.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases 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.

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war .. .. . *Yes*
  - (ii.) Previous active service .. .. . *No*
  - (iii.) Climate in pre-war service .. .. . *No*
  - (iv.) Ordinary military service before the war .. .. . *No*
  - (v.) Serious negligence or misconduct on the man's part. } .. .. . *No*
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? .. .. .

In all cases such as failed operation, eye, ear, nose and throat, dislocation, etc., a specialist's report is to be obtained with radiographs where possible; and in cases of amputation the extent, position, should be stated.

15. What is his present condition?  
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

*Weight 8 st 6 to lbs.  
(40 & 2 1/2 lbs more admission)*

*Weakness & Pallor,  
Lungs  
Deposits of R. Apical  
Infiltration Consolidation  
T.B. in Pleura  
18.11.19  
Pneumonia*

16. Was an operation performed? If so, when and what was its nature? .. .. . *Yes*
17. If not, was an operation advised and declined? .. .. . *Yes*
18. \*In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable? *Not applicable.*
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions? .. .. . *nil*

*Small indurated thickening  
across spine in abdomen  
Had a discharge - Scars in Groin  
connected with ~~leg~~ wound  
Laparotomy for Int. Pneumonia  
Pneumonia spread through whole body  
Found multiple abscesses*

21. Give diagnosis and particulars of:—

- (a) Any disability claimed or discovered. *Tubercle of lung & pleurisy*
- (b) The present condition thereof.

*Consolidation of both apices - (Right Left)  
T.B. in Spine - Heart rapid.  
Abdomen nil of note except laparotomy scars  
as the whole muscles rigid.*

22. State whether the disabilities are:—

- |  | (a) Attributable to | (b) Aggravated by |
|--|---------------------|-------------------|
| (i) Service during the present war .. .. .                               | <i>Yes</i>          | .....             |
| (ii) Previous active service .. .. .                                     | <i>No</i>           | .....             |
| (iii) Climate in pre-war service .. .. .                                 | <i>No</i>           | .....             |
| (iv.) Ordinary military service before the war .. .. .                   | <i>No</i>           | .....             |
| (v.) Serious negligence or misconduct on the part of the soldier .. .. . | <i>No</i>           | .....             |
- Give details: .. .. .

20. Do you recommend—

- (a) Discharge as permanently unfit?  
(b) ~~Change to limited engagement.~~

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

*Yes*  
*W. J. ... ..*  
Medical Officer in charge of case.

Station *Barrack Street, Belfast*  
Date *12.11.19*

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

- 22 (a). If not due to any of these causes, to what specific condition do the Board attribute it? .. .. . *✓*

23. Is the disability in a final stationary condition? If not .. .. . *No*

(a) How long is the present degree of disability likely to last? .. .. . *impossible to state.*

(b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a. *✓*

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

100%

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

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

Grade IV

Opinion of Military Member in case of disagreement.

OR

- (b) In what other grade do the Board place him?  
 (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

*yes*

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require:—

- (a) An attendant for his journey home?  
 (b) Transport from railway station to his home?  
 (c) The constant attendance of another person in his own home?

Signatures:—

*W. G. Colson* President or Chairman.

Station ..... *3rd London General Hospital* ..... *G. P. R. M. A. Capt. R. A. M. (SR)* ..... } Members.  
 Date ..... *July 14<sup>th</sup> 1919* .....

Discharge Approved under Para. 392 (xvi) King's Regulations

Station ..... *H. S. W. ...* ..... } Only applicable in cases of Patients in Hospitals.

Date ..... *Lt. Col. R. ...* ..... } *St. Helier Bernonsey Military Hospital*

OR

Discharge Approved under Para. 392 ( ) King's Regulations.  
 or Transfer Approved to Class of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station ..... O.C. Discharge Centre.

Date .....

*Temporary*

MEDICAL HISTORY of—

A.F. B.178

Regional No. \_\_\_\_\_

Regimental No. \_\_\_\_\_

Region \_\_\_\_\_

Surname Pilgrim

Christian Names R.

TABLE I.—General Table.

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

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

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

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

Height \_\_\_\_\_ feet \_\_\_\_\_ inches. Weight \_\_\_\_\_ lbs.

Colour of Hair \_\_\_\_\_ Complexion \_\_\_\_\_

          "    Eyes \_\_\_\_\_

Chest Measurement { Girth when fully expanded \_\_\_\_\_ inches.  
                          Range of expansion \_\_\_\_\_ inches.

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

Vaccination Marks { Arm,                  Right.                  Left  
                        (Number                  |                  |

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

Vision { R.E.—V= \_\_\_\_\_ With Glasses { R. \_\_\_\_\_  
          L.E.—V= \_\_\_\_\_                  L. \_\_\_\_\_

Identification Marks, such as Tattoo, Moles, Scars, etc. :—  
\_\_\_\_\_

Defects or Ailments :—  
\_\_\_\_\_

Examined and found—

- Fit for Grade** { I.  
                      II.  
                      III.  
                      IV.

(Strike out those which do not apply.)

Signature \_\_\_\_\_  
Chairman of Medical Board.

Re-examined for posting at \_\_\_\_\_  
On \_\_\_\_\_ day of \_\_\_\_\_ 191  
Enlisted { at \_\_\_\_\_  
              on \_\_\_\_\_ day of \_\_\_\_\_ 191.

Joined on enlistment { Corps. \_\_\_\_\_ Regtl. No. \_\_\_\_\_  
                                Roy Newfoundland H 537

Transferred to { \_\_\_\_\_

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

Date	Brief details and Signature

Special Remarks : state if a discharged Soldier

TABLE IV.—Service Table.

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

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





# The Royal Newfoundland Regiment

Class for Demobilization:—

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date .....

Regimental No. 4537 .....

Name Alquin R St. .....

Address St Anthony .....

Present Medical Category E .....

Recommended for:— (a) ~~Immediate discharge~~ .....

(b) Standing Medical Board .....

Members of Board

D. R. Cooper C.M.C.  
O.C. Discharge Depot.

W. Paterson  
Senior Medical Officer

Geo Burden  
M.O. Depot

**NATIONAL HEALTH INSURANCE.**

**NOTIFICATION OF DISCHARGE OF TUBERCULOUS PATIENT.**

For use in all Tuberculous Cases, irrespective of actual cause of discharge, except uninsured officers and uninsured nurses.

To the SECRETARY, NATIONAL HEALTH INSURANCE COMMISSION. ( ENGLAND.  
SCOTLAND.  
IRELAND.  
WALES. ) See Footnote\*  
overleaf.

Sir,  
The patient of whom particulars are given below is leaving the Service suffering from tuberculosis on \_\_\_\_\_ A medical report is furnished overleaf. (See Note \*)

(1) Name in full { Surname Gilpin  
Christian Names Richard

(2) Number, Rank, and Regiment 4534. Pk. Coy. Newfoundlanders.

(3) Intended place of residence on discharge (address in full) { L. Anthony. Digh. St. Barbos.  
District. Newfoundland.

(4) Were insurance deductions made from Army pay? \_\_\_\_\_

(5) For use if answer to (4) is in affirmative.  
Is applicant a Member of an Approved Society? \_\_\_\_\_

If so, state—  
(i) Name and Number of Approved Society { \_\_\_\_\_ Number \_\_\_\_\_  
(ii) Name and Number of Branch (if any) { \_\_\_\_\_ Number \_\_\_\_\_  
(iii) Membership Number in Insurance Book \_\_\_\_\_  
(iv) Has Applicant ever received a Medical Card? \_\_\_\_\_

If so, by what Insurance Committee was it issued? \_\_\_\_\_

(6) For use if answer to (4) is in negative.  
Will applicant's total income from all sources on return to civil life (including prospective pension) † be more than £160 per annum? \_\_\_\_\_

Signature of Officer in charge of Military Hospital { \_\_\_\_\_

Date \_\_\_\_\_ Hospital \_\_\_\_\_ Address \_\_\_\_\_

For use only where Residential treatment is considered essential (see (5) overleaf).

**PART A.**  
(To be signed by applicant.)  
I hereby apply for Sanatorium treatment, and I declare that the particulars above are correctly stated. I undertake to conform to the rules of any institution into which I am received for treatment.  
Signature of Applicant: \_\_\_\_\_  
Date \_\_\_\_\_  
See Footnote § below]

**PART B.**  
For use if applicant refuses to sign Part A.  
The patient, for whom I consider residential treatment to be essential, refuses to sign Part A.  
Initials of Medical Officer { \_\_\_\_\_

**PART C.**  
For use if applicant has signed Part A.  
The patient † is being granted furlough.  is not being granted.  
Initials of Medical Officer { \_\_\_\_\_  
N.B.—Delete inappropriate words.  
N.B.—If furlough is being granted and patient is proceeding temporarily to an address other than that given at (3) above, particulars of the temporary address, and duration of stay there, should be given in a covering letter.

† Enter in the case of insured officers, the date when Commission will be relinquished, and, in other cases, the date when the discharge from the Army will take effect.  
‡ Enquires from a patient as to the likelihood of a pension being awarded him, should be dealt with as indicated in Paragraph 7 of A.O.I. 2176 of 1916.  
§ Article 4 of the Royal Warrant relating to Pensions provides as follows:—  
"Half the pension and allowances (if any) awarded . . . may be subject to the condition that the disabled man "shall undergo medical treatment at a sanatorium, hospital, convalescent home, or otherwise, for any period during "which it may be certified that such treatment is necessary in his interests."  
Article 6 (5) of the Royal Warrant provides for additional allowances being made to dependents of a pensioner during his treatment in a sanatorium.

MEDICAL REPORT.

Age

20

Period of Service.

1 Year

Duration of illness since onset of first definite symptoms.

Since Nov. 1918.

Nature and duration of treatment hitherto given.

Laboratory for Tubercular Bacteriology. <sup>Handwritten</sup>  
No 6 Grosvenor Road  
PRESENT CONDITION. Primary Miliary Tuberculosis

(1) General—

Temperature range. normal Present weight. 84 1/2 lb

Cough. (T. 49.8 max temp) + slight Highest known weight, if ascertainable. 121 lb

Sputum, amount. small Height. 5 ft. 3 in

„ character. None found Sweats. not now

Haemoptysis. nil Dyspnoea. +

Able to get about, or ~~confined to bed.~~ no

Result of bacteriological examination.

T.B. in sputum - { 23. 11. 19  
15. 1. 19

(2) Condition of organs affected by tuberculosis—

(a) Lungs.

R. apex consolidated

(b) Other organs.

Cerebrum  
Chronic Toxic - Bacteriemia  
at Laboratory Tuberculum found stained  
with tubercle.

(3) Complications present.

(4) Other diseases present.

None seen & discharge of serum  
which is hard healed

(5) Residential treatment <sup>is,</sup> ~~is not,~~ in my opinion, essential.

Remarks.

No pyrexia now - v. little cough  
but increasing in weight - no discharge.

Date

Jul 11. 19

Signature

[Signature]

† Delete "is" or "is not," as the case may be.

\* This form should be addressed and forwarded to the Commission for that part of the United Kingdom in which the applicant's intended place of residence is situated, at least 10 days before the date of discharge. [See (3) overleaf.] The addresses of the four Commissions are respectively:—ENGLAND: Buckingham Gate, London, S.W.1; SCOTLAND: Princes Street, Edinburgh; IRELAND: Pembroke House, Upper Mount Street, Dublin; WALES: City Hall, Cardiff. Postage need not be prepaid. N.B.—For the purposes of the Insurance Acts Monmouthshire is in Wales.

# STATEMENT BY A SOLDIER CONCERNING HIS OWN CASE.

NOTE.—This Form is to be filled in by every soldier prior to the compilation of Army Form B 179a, whether a patient in hospital or not, and attached thereto. The questions are to be answered in the soldier's own words, and the Form is to be signed by him and the signature witnessed. In the event of the soldier being unable to write he should affix his mark, such act being witnessed.

Regimental No. *# 537*.....Rank..... *Pvt.*.....Name: *J. J. Quinn*..... *Richard*.....  
(Surname) (Christian Names)Unit and Corps } *Co. 1st Infantry*

Note.—Before answering the questions below, the soldier is to note that

- (a) The statements made by him will be checked by official records.  
 (b) In answering Question 2 any special matters which in his opinion caused any unfitness from which he may be suffering or which aggravated it should be clearly stated.

If the soldier is unable to read, the above notes are to be read to him by an officer.

1. (a) In what countries have you served during this war, and for what periods?

*France 6 months*  
*Germany 10 weeks*

(b) In what capacity?

*Soldier*

2. If you are suffering from any disease, wound, or injury, state what it is, the date upon which it started, and what, in your opinion, was the cause of it.

(If more space is required a sheet of foolscap should be used, and firmly attached to this form.)

*Tubercle of Lung.*  
*Exposure to hardships while*  
*on active service*

3. Give the names of any hospitals where you have been treated for the above disease, wound or injury during the present war.

6 Gen Hosp. France  
Permonday Mil. Hosp  
Kadywell

4. Did you suffer from the disease or injury mentioned in above answer to Question 2, or anything like it, before joining the Army? If so, give details and dates.

No

5. Give the names (and addresses if you know them) of any hospitals you were in or doctors who attended you before you joined the Army.

No

6. Give the name of your National Health Approved Society, and (if possible) your Membership Number.

—

7. What is the name and address of your last employer before joining the Army?

Lumbering works H. N. D. Company.  
St. Barbodisvil.

8. (a) What was your occupation before joining the Army?

Labourer.

(b) What was your trade before joining the Army?

(To be checked by A.F.B.64 or A.F.B.103.)

The above statement has been read over to me; I agree to it, and have nothing further to add.

Station Permonday Mil. Hosp.

Signed (Soldier)

R. Pilgrim

Date July 12<sup>th</sup> 1919

Signed

W. C. Day Sister  
Witness.

DEPARTMENT OF MILITIA.  
WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th, 1919.

A complete reply must be given to every question in this Declaration there must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

1. Christian name..... *Richard B. Pelgrim*
2. Rank..... *Plt.*..... 4. Regtl. No. *4537*
5. Address in full to which future payments of gratuity are to be forwarded..... *St. Anthony High St. Barb.*
6. Date of enlistment in the Regiment..... *Apr. 22/18*
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
8. Relationship of such dependents.....
9. Address in full of such dependents.....
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....
11. Were you on active service only in Mfld. If so give dates and particulars of such service..... *Overseas*
12. Give total length of time which you served on active service, whether in Mfld. or Overseas..... *From Apr. 22/18 to Sept. 1/19*..... *1 1/2*

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

*No*

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.

*No*

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

*No*

16. Have you, during the present war, served in the Imperial Forces?

*No*

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

*No*

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

*No*

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

*No*

19. Are you now serving in the Rest? If not give - (a) date of discharge

*No*

(b) Reason for discharge  
*Went 1/1/19  
Military  
Dues & obligation*

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service.

*France, Belgium & Germany*

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee.

*No*

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under Oath.

-3- R Pilgrim

Signature of Applicant:

Place of Residence:

Declared before me at:

This

2nd

day of

St. Anthony Heights  
St. John, N.H.  
Sept 1919

1919

John W. Cassidy

Signature of Barrister of the  
Supreme Court, Stipendiary Magistrate,  
Notary Public, Justice of the Peace,  
or Commissioner of affidavits.

POST DISCHARGE PAY.

Date paid	Paid Soldier.	Paid Dependant.	War Service Gratuity.	Net amount due
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

Certified correct.

Registrar



FORM K

No 4215



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Richard B Pilgrim, Regl. No. 4537

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

Allotment begins 1st June 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3982	mother	Mrs Henry (Annie) Pilgrim	St Anthony Bight, St Barbe	
			Total Allotment, \$	70 <sup>00</sup>

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

Sig.) James Stout
Officer Commanding
A Company
St Johns
May 23rd 1918

(Sig.) Richard B Pilgrim
(Rank) Pte

ORIGINAL

No. 10484

NEWFOUNDLAND CONTINGENT

N.F.P./E4

No. 503

To: The Minister of Militia,  
St John's,

" " Company.

MEMORANDUM OF STOPPAGES/~~CREDITS~~ <sup>NEWFOUNDLAND</sup> on account of  
Hospital Advances

NOTE:- Charge unier

Column

Credit Pay & Record Office London

Regtl No.	Rank & Name	Particulars & Authority	AMOUNT					
			£	s	d			
✓ 4537	Pte Pilgrim R	Casual payment whilst at Bermondsey Military Hospital 8.8.19 as per Vr 8076					10	
							10	

Pay & Record Office.  
58, Victoria Street,  
London, S.W. 1.

*A. C. Minshall Maj.*

August 19th

191

Chief Paymaster & O. i/c Records.

CERTIFIED that the above Stoppages/~~Credits~~ have been made  
in the Pay Book " " Co'y for Period / / to / /

Dated at \_\_\_\_\_

191

C.C. " " Company.  
\_\_\_\_\_ Battalion.

DUPLICATE.

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

10484

NEWFOUNDLAND CONTINGENT

N.F.F./54.  
503

To:

The Minister of Militia.  
St John's,

" " Company.

MEMORANDUM OF ~~NEWFOUNDLAND~~ ~~CREDITS~~ on account of

Hospital Advances

NOTE: - Charge under  
Credit Pay & Record Office London Column.

Regtl No.	Rank & Name	Particulars & Authority	AMOUNT					
			£	s	d	p	d	
4537	Pte Pilgrim R	Casual payment whilst at Bermondsey Military Hospital 8.8.19 as per Vr 8076						10
								10

*W.B.*

Pay & Record Office,  
58 Victoria Street,  
London, S.W. 1.

August 19th 1919.

*A.A. Minnowell Maj.*  
Chief Staff Officer (London),

~~XXXXXX~~

CERTIFIED THAT the above Stoppages/Credits have been made  
in the Pay Book " " Co'y for Period / / to / /

Dated at \_\_\_\_\_  
\_\_\_\_\_ 1919.

O.C. " " Company,  
Battalion.

Return ORIGINAL, retain DUPLICATE.

4537 Pilgrim

---

PM.

Please make one pay. W.S.F.

8/9/19

F.C.R.

W.S.F.

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 70<sup>00</sup>

Sept 8<sup>2</sup> 1919.

Received from the First Newfoundland Regiment  
the sum of Seventy Dollars.  
on account of Pay. W. S. G.  
balance

~~R. C. J.~~  
R. Pilgrim

Ch. No. 9197	Initials E. W.
Pay Ledger 433 1/2	Initials C. B. H.
Gen. Ledger	Initials

Regtl. No. 4537

Rank P. O.

Noted

✓

No. 4537

Rank *Pl*

Name *R. Pilgrim*

**Casualty Form—Active Service.**

Regiment or Corps **ROYAL NEWFOUNDLAND REG.**

Rank **Pte** Surname **Pilgrim** Christian Name **J.R. B.**  
 Religion **Methodist** Age on Enlistment **20** years **—** months  
 Enlisted (a) **22/4/18** Terms of Service (a) **DURATION** Service reckons from (a) **22/4/18**  
 Date of promotion to present rank \_\_\_\_\_ Date of appointment to lance rank \_\_\_\_\_  
 Extended ( \_\_\_\_\_ ) Re-engaged ( \_\_\_\_\_ ) Qualification (b) \_\_\_\_\_  
 or Corps Trade and Rate \_\_\_\_\_  
 Occupation **Fisherman** **W. Howe 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.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
			Embarked ...		
			Disembarked...	<b>28 NOV 1918</b>	
		Joined Barr			
	<b>Gen. H.</b>	<b>Adm: N.Y.D.</b>		<b>20.3.19</b>	<b>Hq. 356 01</b>
	<b>476 Rec</b>	<b>to N.Y. Dist</b>		<b>5.5.19</b>	<b>Memo.</b>
	<b>Londore</b>				
	<b>28.4.19</b>		<b>Captain for</b>		
			<b>O. i/c. No 1. Sub Section</b>		
			<b>Record Office, British Troops</b>		
			<b>in France &amp; Flanders.</b>		

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered. (b) Signaller, Shoeing-Smith, &c. (17581.) Ws. W 1287-P 1124. 1,000,000. 6/18. D & S. Form B. (3). (E. 1250.)

Next of Kin: **Mother: Annie E. Pilgrim: St. Anthony's Beach: N.S.L.D.**

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Form  
B 121.  
39.

Number of Sheet 521

Regiment of

Royal Newfoundland

Signature of O. C. Company

A. James

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>4537</u> <u>Pelgrim R. B.</u>	Age on	20 years months	<u>Fisherman</u>	
Joined		Place and Date of Enlistment	22.4.18	Religion <u>Meth.</u>	
Joined		Date	} with Colours <u>15</u> years. with Reserve <u>36</u> years.	Place of Birth	
Joined		Date		<u>St. Anthony's</u>	
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
<p><i>Demobilized St. John's, 22/7</i></p>									

To be carried over

Army Form B. 121.





3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. .... to his home  
 at Montgomery and Release Certificate No. 3827 issued.

Date Sept 12 1919 ..... J. A. Sawcuff  
 Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection  
 therewith settled. He has received pay and allowances to .....

Date 15 5 1919 ..... W. C. Cook  
 Depot Paymaster.

Discharge approved for Sept 8 1919 .....

Forwarded with following documents to O.C Discharge Depot.

N.F. P136	B 268	B 121	N.F. Med.	D.F. 1
F 178	W 3494	B 122	Board 1st	" 2
F 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date Sept 12 1919 ..... J. A. Sawcuff  
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.  
 Board of Pension Commissioners.

with following additional documents.

Date .....  
 O. C. Discharge Depot.

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

Date Sept 8 1919 ..... W. C. Cook

Reg. No. *4537* Rank *Pfc* Name *Pilgrim, P. Richard*  
Attested ..... Address *St. Anthony*  
Allotment ..... Allottee .....  
Date of Allotment ..... Returned from Overseas *5-8-19*  
Returned on S.S. *Train* Cause *Discharge*

*28 5-19* *St. M. O. Res. dis & Sanatorium*

*8-9-19* PASSED TO DEMOBILIZATION OFFICER

*8-9-19* DISCHARGE APPROVED ON DEMOBILISATION.

4537

May 7 23

Mrs. Annie E. Pilgrim  
St. Anthony Bight.

Dear Madam:

I have not received your reply to my letter of 15th March, requesting you to shorten the inscription for the headstone of No. 4537 Pte. R. Pilgrim. There is room on the Imperial headstone for only 66 letter spaces, - that is letters and spaces between words.

Your inscription reads as follows:

" A voice we loved is stilled  
" A place is vacant in our home  
" Which never can be filled".

Perhaps you would like the first line dropped; if you desire a new inscription will you please inform me as soon as possible, as the matter is urgent.

Yours very truly,

Lieut. Col.  
Chief Staff Officer.

W.F.H.  
Dear Sir

you requested  
of me to cross out the first  
line just put the words  
now to suit your self and  
that will please me  
and then send the verse  
to me if you please  
yours sincerely

Mrs Annie  
Pillgrim



C.R. 4537

DEPARTMENT OF MILITIA

ST. JOHN'S, May 7 1923  
NEWFOUNDLAND

Mrs. Annie E. Pilgrim,  
St. Anthony Bight.

Dear Madam:

I have not received your reply to my letter of 15th March, requesting you to shorten the inscription for the headstone of No. 4537 Pte. R. Pilgrim. There is room on the Imperial headstone for only 66 letter spaces, - that is letters and spaces between words.

Your inscription reads as follows:

~~" A voice we loved is stilled~~  
" A place is vacant in our home  
" Which never can be filled".

Perhaps you would like the first line dropped; if you desire a new inscription will you please inform me as soon as possible, as the matter is urgent.

Yours very truly,

Lieut. Col.

Chief Staff Officer.

C.R. 4537

Mar. 15 23.

Mrs. Annie E. Pilgrim,  
St. Anthony's Bight.

Dear Madam:-

I am asked by the Director of Graves Registration & Enquiry to request you to furnish another inscription for the headstone of 4537 ex-Pte. R. Pilgrim. The one you forwarded contains more than 66 letter spaces, which is the number there is room for on the headstone.

Will you please let me have your reply as soon as possible.

Yours Faithfully,

Lieut. Col.

Chief Staff Officer.

May 19. 1928  
St Anthony Bright

Dear

Sir I am sending  
you a answer  
to the letter witch  
you send and a veral  
witch contains only  
(6.2) letter for (4587). ex. pte  
R. Pilgrim

Yours faithfully

Mrs Annie E.  
Pilgrim



He gave his life for country's sake  
For duty's sake he fell  
We gave him up at duty's call  
Although we loved him well, (87)

He went from us at country's call  
For country gave his life, his all  
For freedom's sake. (68)

He left his home without a fear  
And counted not his own life dear  
For duty's sake. (64)

He loved his home  
And for it gave  
The sacrifice supreme ~~up~~

X He gave his life in Freedom's cause

Office of the Archivist for Militia Records.

November 20th, 1925

The Magistrate,  
St. Anthony,

Dear Sir:-

I am taking the liberty of forwarding to you by  
S.S. Prospero, the headstone for the grave of the late L. Pilgrim,  
No. 4537, Royal Wfld. Regiment.

May I solicit your good offices for the purpose of  
arranging for the erection of this stone.

Thanking you in anticipation.

Yours truly,

Archivist.