



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4067 Name Isaac Power Corps Herb.

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Isaac Power
2. What is your full Address? 2. Bonaville
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 18 Years 4 Months
5. What is your Trade or Calling? 5. Fireman
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. Yes
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, Isaac Power 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.

Isaac Power SIGNATURE OF RECRUIT.
Ed. Edward Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.
I, Isaac Power 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 Herb. on this 5 day of Nov 1911.
Signature of Attesting Officer W. J. ...

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

Date 1911 }
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).....

4067

26
27
28
29
30
31
32

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Isaac Tower
 Apparent age 18 years 4 months. Height 5 feet 8 inches
 Chest Measurement { Girth when fully expanded 36 1/2 inches
 Range of expansion 3 1/2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Stephen Tower
Donorante | Relationship Father
1213 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>5-11-17</u>									
Joined at <u>St. John's</u> on <u>November 5-17</u>									
<u>Discharged May 5, 1919</u>									
<u>Embarked at St. John's Nfld. November 11-17</u>									
<u>Attached Forestry Corps on probation</u>									
<u>to Newfoundland for demobilization</u>									
<u>Arrives Newfoundland 7-2-1919</u>									
<u>No Active Service</u>									
<u>Demobilization at St. John's</u>									
<u>5-5-19</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 5-5-19 (date of discharge) 1 years 185 days
 " " Pensions " " " " " " " " " " " "



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 ... **April 12TH 1919**

- | | | | |
|-------------------|---------------------------|-------------------------------|--------------------|
| 1. Unit | Royal Newfoundland | 5. Age last birthday | 19. |
| 2. Regimental No. | 4067. | 6. Enlisted on | Nov./18. |
| 3. Rank | PTE. | at | St. John's. |
| 4. Name | Power L. | 7. Former trade or occupation | FISHERMAN. |
| | | 8. Disability | FLAT FEET. |

9. History

WAS DISCHARGED FROM NAVY/MR.FEB/17. JOINED REGT. IN NOV. WENT OVERSEAS BUT WAS TRANSFERRED TO FORESTERS. OWING TO FLAT FEET.

10. What is his present condition?

GOOD CONDITION IN ALL RESPECTS, EXCEPT FOR HEET, FEET PAIN ON LONG WALKS.

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

11. Was sanatorium advised and refused? **NO.**
operation

12. Do you recommend discharge as permanently unfit? **YES.**

Signature .. **S.G. KEAN.**

Rank or Qualification .. **CAPT.**

Remarks if any by Officer in 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 **MAY** 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.

VERY FLAT BUT NOT MUCH WORSE THAN WHEN JOINED UP.

15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market?
LESS THAN 5%.
- (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.)
LESS THAN 5%.

Remarks if any:—

16. Is the disability permanent?
17. Has the disability been aggravated by (a) Intemperence (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

Remarks if any:—

I. S. FRASER.....
President

Signatures **I. S. TAIT**.....

I. PATERSON: MAJOR.....

Place **ST. JOHN'S**.....

Date **APRIL 15TH, 1919**.....

APPROVED

Station

Date



(SGD) CLUNY MACPHERSON.... MAJOR....
Administrative Medical Officer

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4067 Rank Pte Name Power, Isaac

Intended place of residence Bonavista

2. Occupation Fisherman

Classification of soldier B Medical Category E

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

Eligible for 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 (sgnd) H. Mews, Lt.

Date APR 19 1919 for Commanding Discharge Depot
The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and Date ST. JOHN'S I ^{his} Power
APR 19 1919 mark Signature of soldier

(sgnd) A. M. Clouston, Lt.
Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date ST. JOHN'S (sgnd) Isaac X Power
APR 19 1919 mark Signature of soldier

" James Newman, Sgt.
Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 5-11-17 No of days on Military

Discharged from service 21-4-19 plus 14 days Service 547

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 R. H. [Signature]
Officer Commanding Discharge Depot

APR 21 1919
The Royal Newfoundland Regiment.

Date

CONFIRMATION OF DISCHARGE

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

Place

Date Officer i/c Records
The Royal Newfoundland Regiment

C.R. 406⁷

Extract of Preliminary Report of a Medical Board held on
Thursday Afternoon April 15th. The following was the find-
ing.

Recommended Discharge from the Army.

4069, Pte. I. Power.

C.R. 4067

Extract from Daily Orders part I¹, Depot
of the Newfoundland Forestry Corps, St. John's
dated May 9th. 1919

The discharge of the undernoted on demobilization
has been CONFIRMED by Officer i/c Records on noted
date.

F4067 Pte. Isaac Power.

5-5-19

C.R. 4067

Extract from Daily Orders Part II Newfoundland Forestry
Companies Dated April 25th 1919. Depot St. John's.

.....

The discharge of the undernoted on demobilization has been
APPROVED by O.C. Discharge Depot from noted date.

21/4/19.

4067, Pte. Isaac Power,

C.R. 4067

Extract from Daily Orders Part II,
Depot St. John's dated 11-2-29.

The undernoted returned from Overseas
and reported at Depot 7-2-19.

#4067 Pte. Isaac Power.

C.R.

4067

Extract from Nominal Roll of Foresters by S.S.
"Gorseian" Feb. 1st, 1919.

4067 Power.

C.R. 4067

Extract of DAILY ORDERS BY MAJOR M.S. SULLIVAN
COMMANDING NEWFOUNDLAND FORESTRY COMPANIES.

18/11/18.

The undermentioned having completed his trial with this
Unit is attached to the strength from 25/10~~th~~/18. and
posted to C. Co'y:

#4067 Pte. T. Power.

C.R. 4067

Extract from Orders by Lt. Col., B. J. BARTON, D. O.S. O.
Commanding Bnd., Battalion the Royal Newfoundland Regiment
dated 13/10/18.

THE UNDERMENTIONED WHO PROCEEDED TO JOIN THE NEWFOUNDLAND
FORESTRY COMPANIES ARE STRUCK OF THE STRENGTH OF THE
BATTALION AS FROM 33-10-18.

#4067 Pte. J. Power.

C.R. 4067

Extract from Daily Orders By. Lt. Col. B.J. Burton ,D.S.O.
Commanding 2nd Bn. Royal Welch Regt. 30-9-18.

The following man is attached to the Forestry Corps on one
months probation from 29-9-18.

4067 Pte. J. Power.

C.R. 4067

Extract from Nominal Roll Embarked St. John's for Overseas,
per S.S. "Florizel" Dec:11,1917.

#4067 PTE. J. POWER.

C.R. 4067

Extract from Daily Orders Part II Unit The Royal
Hfld. Regt., St. John's, Nov. 5th, 1917.

4067 Pte. I. Powers,

Attested with the Hfld. Regt., for General Service with
effect from Nov. 5th, 1917.

J. Power

C.R. 4067

P.R.O.

TO, - The Chief Paymaster,
 Royal Newfoundland Regiment,
 53 Victoria Street,
 London, S.W.

Sir:-
 Please charge the amounts set opposite my name to my account and pay it to the N.W.C.A. "Prisoners of War Fund" in quarterly instalments for the period of one year.
 Commencing on the 1st July 1918.

Regtl. No.	Rank	Name	Amount	Signature:
4967	Pte	Power <i>[initials]</i>	\$12 ⁵⁰ / ₁₀₀	

I have the honour to be, Sir,
~~_____~~,
 Your obedient servant.

[Signature]
 P. Power

Date 29-6-18

LAST PAY CERTIFICATE

N.F.P./94.

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

Regtl No. 4067 Rank Pte. Name Powers J. Unit R. Newfoundland Regt who was transferred
to Forestry Co. B on 15/11/18 Authority J. Cause

STATEMENT OF ACCOUNT

CR.

PARTICULARS	DR.				CR.				
	£	s	d	£	s	d	£	s	d
Balance Dr. from				Balance Cr. from					
Allotment 28 days @ 50 ⁺	114	00	12	Pay 28 days @ \$10 ⁰⁰			128	00	
Cash Payments:			17	Field Allowance 28 days @ \$10 ⁰¹			12	80	
				Other Allowances days @ \$			30	80	16
1510			13						6
Other Debits:			9	Other Credits:					
7154 No. 344									
Total Debits				Total Credits					
Balance due by Paymaster				Balance due to Paymaster					
			16				16	6	7

PERIOD: From 28.9.18 to 25.10.18

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

Winnipeg (Place) Oct 25 1918 (Date)

Leoburn (Signature)
O.C. "F" Company.

Made up/Checked in accordance with information received in the Pay & Record Office and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

Chief Paymaster & Officer i/c Records.



LAST PAY CERTIFICATE

N.F.P./94

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

Regtl No. 4067 Rank Pte. Name Power J. Unit R. Nfld. Reg. who was transferred
to Forestry Co. on 25/10/18 Authority J. Cause

STATEMENT OF ACCOUNT

DR.	PARTICULARS					CR.				
	\$	£	s	d	\$	£	s	d		
PERIOD: From <u>28.9.18</u> To <u>25.10.18</u>	Balance Dr. from					Balance Cr. from				
	Allotment 28 days @ 50¢					Pay 28 days @ \$ 1.00				
	Cash Payments:					Field Allow 28 days @ \$ 10.4				
	1510					Other Allowances days @ \$				
	Other Debits:					Other Credits:				
	Total Debits					Total Credits				
	Balance due by Paymaster					Balance due to Paymaster				
	16 6 7					16 6 7				

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

W. J. C. Coy.
(Place) W. J. C. Coy. Oct 28 1918
(Date)

L. G. Murphy Capt.
O.C. "F" Company

Made up/checked in accordance with information received in the Pay & Record Office to and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

Chief Paymaster & Officer i/c Records



N^o 3842 ^A



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Isaac Power, Regl. No. 1067

hereby agree, until further notification by me, and in similar official form to make an Allotment of
Dollars and Fifty 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 December 17

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3261	mother	ms Stepler (Elyza) Power	Bonaville	50
Total Allotment, \$				50

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.) [Signature]
 Officer Commanding
 Company
[Signature]
 191

(Sig.) Isaac Power
[Signature]
 (Rank) Pte

FORM K

No 3842



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Isaac Power, Regl. No. 1067

hereby agree, until further notification by me, and in similar official form to make an Allotment of Twenty Dollars and Eighty 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 December 17

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT - (each person)
3261	mother	Mr Stephen (Elya) Power	Bonaville	50
			Total Allotment, \$	50

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.) Isaac Power
Officer Commanding
Company
Stephen J
Mr 22 1917

(S) Isaac Power
newfoundland
(Rank) Pte

Power Source

21067

Pay Dept

Nov 14th / 1919
Bona Vista

Dear Sir

7475

Will you kindly find out
the reason my money is not
coming home monthly it is
over a month now since I
got one pay. and I only got
one pay yet I trust you that
you will try your best to
get it

yours truly, ~~George Power~~
No. 700 X
Regt. No. 4067

Has all regimental gratuity been paid?

Yes paid in cheques

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4067 Rank Pvt Name D. Back Isaac
 Intended place of residence Bonaville

2. Occupation Fisherman
 Classification of soldier B Medical Category F

3. The above named man is discharged in consequence of.....
DEMOBILIZATION
 Eligible for 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
 Date APR. 19 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 and date ST. JOHN'S
APR 19 1919
 Signature of soldier [Signature]
 Signature of witness [Signature]

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.
 Place and Date ST. JOHN'S
19-4-19
 Signature of soldier [Signature]
 Signature of witness [Signature]

STATEMENT OF SERVICE

7. Enlisted for service 5-11-17 No of days on Military
 Discharged from service 21-4-19 plus 14 days Service 547

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
APR 21 1919
 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, Nfld
May 5 1919
 Officer i/c Records
 The Royal Newfoundland Regiment.

A.F.B. 2079/2179

May 5th., 1919

#4067 Pte. Isaac Power,

Bonavista.

Dear Sir:-

Please find enclosed "Discharge Certificate
No. 2179."

Yours truly

Captain,
Paymaster & O.i/c Records

RECEIVED BY THE
REWARD BOND

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. *4067*

Name *Isaac Lower*

Address *Bonaville*

Present Medical Category..... *E*

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

(b) Standing Medical Board.....

Members of Board {

R.H. Lait Capt

O.C. Discharge Depot.

Robson

Senior Medical Officer

Geo Burden

M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 17 Rank Plt Name Poore Isaac
 Date of Enlistment 5.11.17 Address Bonaville District Bonaville
 Occupation Labourer Classification for Discharge B Medical Category F
 Recommendation S.M. Permanently unfit Disability Rating Less than 57a
 Passed to Demobilization Officer with following documents:—

N.F. P36	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 <u>3</u>
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 17.4.19

O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

Isaac x Poore
his Wife
Isidoreman

Particulars passed to Vocational Officer for information and action.

Date 19-4-19

Ambleton St

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable Also

(b) Clothing Supplied

Date 19-4-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 1824 to his home at Romania and Release Certificate No. 2166 issued.

Date 19-4-19

J.A. Snowfield
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 5-5-19

Date 19-4-19

H. M. H.
Depot Paymaster.

Discharge approved for 21-4-19

Forwarded with following documents to O.C Discharge Depot.

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

Date 19-4-19

J.A. Snowfield
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

APR 21 1919

Date

R.H. Salt
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:

I have decided to resume my former employment as Fisherman.

Isaac Power
Signature of Man.

Reg. No. *4067*

W. C. Matthews
Signature of the Vocational Officer or his Representative.

Place

St. John's

Date

April 19 1919

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 resume former occupation
Fishing

Power + Isaac
Signature of Man.

Reg. No. 4067

J. A. Crawford
Signature of the Vocational Officer or his Representative.

Place **ST. JOHN'S**

Date **APR 19 1919**

191

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

MEDICAL HISTORY

Surname Cover OF Christian Name James

Table I.—GENERAL TABLE.

Birthplace:—Parish Bonaville County Nya.

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	5	Nov 1917		191
	at	St. Johns	at	
Declared Age	18	years 4 days	years	days
Trade or Occupation	Fisherman			
Height	5	feet 8 inches	feet	inches
Weight		129 lbs.		lbs.
Chest Measurement	Girth when fully expanded...		inches	
	Range of Expansion...		inches	
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm	1 Scar		
When Vaccinated				
Vision	R.E.—V=	6/30	R.E.—V=	
	L.E.—V=	6/30	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)	<i>Laminé Paterson</i>			
(Rank)	Major			
	Medical Officer.			Medical Officer.
Enlisted	at	St. Johns	at	
	on	5th day of Nov 1917	on	day of 191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	1st Nya Regt.	4067		
Transferred to				
Became non-effective by	on	day of 191	on	day of 191
[Signature]				
[Rank]				

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

Date	Brief Details, and Signature
6-11-17	Vacc 20
10-11-17	A.P.B. 20
21-11-17	" 20
26-11-17	3/3 20
28 JUN 1918	<p>Boarded at Hazelton Down Camp — Marked ⁽²⁰⁾ BI</p> <p>W. Bonous Major Ramec</p> <p>MIK — Capt Ramec.</p> <p>It is hereby certified that this soldier has been before the Standing Medical Board and has been classified as <u>B</u> for discharge on Demobilisation. Medical category <u>5</u></p> <p><u>15.4.19</u> Date of S.M.B.</p> <p><u>J. M. News</u> Captain Discharge Agent Lepat-Newfoundland</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



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 *Isaac Power*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4067*

Intended address *Bonavista*

Height on discharge *5* Feet *9*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *—*

Figure on discharge *medium*

Christian name of Father *Stephen*

Christian name of Mother *Eliza*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Bonavista, June 24th, 1900*

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) *Isaac Power*

Witness *Ch W Underhay* (Rank) *Pte*

Station *ST. JOHN'S.*

Date *17-4-19*

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

Station

Date





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 *April 12th 19*.....

- | | |
|-----------------------------------|--|
| 1. Unit <i>Royal Newfoundland</i> | 5. Age last birthday <i>19</i> |
| 2. Regimental No. <i>4067</i> | 6. Enlisted on <i>Nov/17</i> |
| 3. Rank <i>Pte</i> | at <i>St Johns.</i> |
| 4. Name <i>Pomer J.</i> | 7. Former trade or occupation <i>fisherman</i> |
| | 8. Disability <i>flat feet.</i> |

9. History *was discharged from Navy in Feb/17.
 joined Reg. in Nov. was over seas
 was transferred to frontier
 owing to flat feet.*

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.)

*Good condition
in all respects
except for feet
feet pain on long walks*

11. Was sanatorium advised and refused?
operation

No

12. Do you recommend discharge as permanently unfit?

No

Signature

J. G. Keane

Rank or Qualification

Capt.

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 may 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.

*Very flat but not much worse than
when joined up*

15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market? *less than 5%*
(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? *less than 5%*
(State in percentage.)

Remarks if any:—

16. Is the disability permanent?

17. Has the disability been aggravated by (a) Intemperence (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

Remarks if any:—

[Signature]
..... President

Signatures..... *[Signature]*
..... *[Signature]*

Place..... *[Signature]*

Date..... *Apr 15/19*

APPROVED

Station.....

Date.....



[Signature]
Administrative Medical Officer

May 9th., 1919

#4067 Pte. Isaac Power,

Benavista, B.B.

Dear Sir:-

Referring to your application I enclose
cheque for Seventy dollars (\$70.00), being amount
of first payment due you on account of the "War
Service Gratuity."

Yours truly

Paymaster & O.i/c Records

Capt.

18858

DEPARTMENT OF MILITIA.
WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

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

Christian name *Base* 2. Surname *Power*

3. Rank *Cte* 4. Regtl. No. *4067*

5. Address in full to which future payments of gratuity are to be forwarded. *Bonavista, B.B.*

6. Date of enlistment in the Regiment. *Nov. 10/17*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. *No.*

8. Relationship of such dependents. *No.*

9. Address in full of such dependents. *No.*

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *No*

11. Were you on active service only in Hfld. If so, give dates and particulars of such service. *Overseas*

12. Give total length of time which you served on active service, whether in Hfld. or Overseas. *From Nov. 10/17 to Apr. 14/19 date of temporary discharge*

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?

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

Yes

Apr. 14/19
Temporary

(b) Reason for discharge
Demobilization

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.

No

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.

Signature of Applicant:

his Isaac X Power

Place of Residence:

Bonivista, P.B.

Declared before me at:

M. John's, Hfd

This

14th

day of

April

19...

1919

John M. Coffey

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 Dependent.	War Service Gratuity.	Net amount due
.....	<i>4 mos.</i>	<i>280 00</i>
.....
.....

Certified correct.

Barrister

[Signature]

Forms
C 348
1660

MEMORANDUM.

From

From

To

To

4567 Pte Power!

ANSWER.

4/4/18.

191

191

Flat foot 3" deep.
Sweeney.



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Isaac Power, Regl. No. 4067

hereby agree, until further notification by me, and in similar official form to make an Allotment of
 Dollars and Eighty 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 December 17

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)	
<u>5267</u>	<u>mother</u>	<u>Mrs Stephen (Elya) Power</u>	<u>Bonaville</u>		<u>50</u>
Total Allotment, \$					<u>50</u>

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.) Henry J

Officer Commanding
Company

(Sig.) Isaac Power

(Rank) Pte

Stephen Power
1917

SEPARATION ALLOWANCE.

Claimant *Eliza Power*..... *mother.*
On account of *Isaac Power*..... No. *4067*.. Rank. *Pt*...

Decision.. *Refused*
Husband not totally incapacitated
.....
.....

Date *May 9/1921*

M Bowley Major

Instructions.....
.....
.....

Allotment of *50* \$ per day payable to *Mrs Eliza Power*
his *mother* from *1/12/17* to *5/1/19*
Discontinued on account of *being discharged.*

R. H. Summey

12. State value of real property belonging to you and your husband
Only property is House
13. State value of personal property belonging to you and your husband

14. If husband is dead state value of real and personal property left by him.

15. Actual amount contributed by soldier during the year prior to enlistment
One hundred dollars
16. Was this amount contributed weekly or monthly
yearly
17. Did this amount include payment of son's board, etc.
No
18. State your son's trade or occupation prior to enlistment
Working with N. Scotia Steel Coy
19. State amount of his wages per week
Seventeen dollars
20. State name and address of his last employer
*Charles Homes
Sydney Mines C.B.*
21. State amount of monthly support from son since enlistment

22. State amount of allotment received by you from son since enlistment
Fifteen dollars + Fifty a month
23. State from what date did you receive allotment?
Jan'y 9th, 1918.
24. Actual amount contributed by other children
Weekly _____ Monthly _____
Nothing
25. Are any of these children in the employ of you or your husband?
One
26. If not receiving support from other children, state cause. Explain fully
Two of them are working for themselves remainder is home to young to work.
27. With whom are you residing at present?
With husband.

(28) Have you made a previous claim for Separation Allowance. If not, why? Give particulars?

Yes.

(29) Are you already in receipt of any payment from any Patriotic Fund? If so, how much?

No

(30) Are you already in receipt of Separation Allowance from any source? If so, how much?

No

(31) Was the soldier at the time of his enlistment an employee of the Rfld. Government?

No

(32) In what capacity and in what place?

(33) Is he in receipt of a salary as such while serving in the Royal Newfound-land Regiment? If so, how much?

No

I herewith make this solemn Declaration con-
-scientiously believing the same to be true and knowing it to be
of the same force and effect as if made under Oath, and in virtue
of the evidence Act.

Signature of Applicant *Eliza Power*

Place of Residence *Bonarista*

Declared and subscribed before me at *Bonarista* this
day of *North 9th* 1921

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

Eliza Power
John Cooper J.P.

This application must be signed by two responsible
parties one of whom must be a Clergyman, the other a representative
of your local Patriotic Fund Committee, certifying that to the
best of their knowledge after careful investigation the above
statements are correct and the soldier first above mentioned is the
sole support of the applicant.

Signature of member of the
Patriotic Fund Committee

Charles Lench
Heber G. Wiffen

BONAVISTA, Newfoundland.

April 8th 1921

This is to certify that Stephen Power of Bonavista is suffering from partial ankylosis of left knee joint following attack of Tuberculosis 23 years ago. He has been partially incapacitated since that time and will permanently continue so.

Sd.

C. A. Forbes, M.D.

SEPARATION ALLOWANCE.

NEWFOUNDLAND ROYAL NAVAL RESERVE.

Applicant Mrs Eliza Power
Address Bonwanta BB
On account of Seas Power Official No. 2321X
James Power.
Relationship Mother

ALLOTMENT.

From _____ to _____ payable to _____

Remarks _____

DECISION.

CLAIM APPROVED REFUSED

Reason _____

Date _____

NEWFOUNDLAND ROYAL NAVAL RESERVE
(Increase in Separation Allowance.)

NOTICE

MOTHER

THIS STATUTORY DECLARATION is to be filled in correctly in every detail, and a complete reply must be given to each question.

Each statement is considered as being made on Oath, and the form is to be signed before a Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace.

- (1) Name of Reservist
(If more than one give all names)
Isaac Power. R James Power 2321 X
- (2) Name of applicant, and age Heliza Power 43 yrs
- (3) State whether you are the natural mother, stepmother or foster-mother.
Natural
- (4) Name of applicant's husband and his age.
Stephen Power 54 yrs
- (5) If he is not supporting you state the reason
Same for 23 years.
- (6) If you are a widow, state date of your husband's death.
- (7) Have you married again since death of the above mentioned husband?
- (8) State names, ages of your other children, whether married or single or widowers.

Name.	Age	Occupation	Married or single
Susie Power	24 year	general servant	"
Rizzie do	18 "	"	"
Alce do	16 "	at school	"
Naomi do	14 "	"	"
Emal do	12 "	"	"

- (9) Have any of the children mentioned in "8", volunteered for service during the great war 1914 - 1918? If so state names, and where possible give official numbers and the units in which they enlisted, with dates of enlistment.
No

Name Isaac Pauer Enlisted in 1915 Official Number 1700 X Date

January 27th
Reg No 4067 Rank Pvt.

Enlisted in land forces Nov 5th 1917 at St Johns Nfld.

(10) State amount earned by
(a) Yourself Nothing
(b) Your husband About three hundred dollars per year

(11) State amount and source of any other income. _____

(12) State actual amount contributed by Reservist during the year prior to his enrollment (If more than one state amount for each separately). Isaac about one hundred dollars
R. James about one hundred & fifty dollars

(13) Did this amount include the cost of his board, etc? No

(14) State his occupation before enrollment, and his wages per month and the name of his last employer. Fisherman, about thirty dollars per month
Nova Scotia Steel Works (Sydney)

(15) State amount received as allotment and Separation Allowance, on his account since his enrollment. allotment \$136.⁰⁰/₁₀₀
No Separation allowance

(16) From what date have you received this amount? March 1915

(17) State amount contributed by your other children per week. Nothing

(18) If not receiving support from other children, state cause one in U.S.A.
1 servant at home
3 at school.

(19) Have you received Separation Allowance on account of ~~XXX~~ any son who may have enlisted in the land forces No separation allowance

(20)

If so, state his name and the unit in which he served giving his official number

Isaac Pamer
Unit Nfld. Reg.
4067

I make this solemn declaration conscientiously believing it to be true and knowing it to be of the same force and effect as if made under oath.

Signature..... *Eliza + Pamer*

Address..... *Reservist*

Declared before me at..... *Roburata*..... this..... *twentieth*..... day of..... *March*..... 1921.

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

We, the undersigned, have reviewed the replies given in the foregoing declaration and to the best of our knowledge they are correct, and the applicant is mainly and totally dependent on the Reservist first mentioned.

Signature of Clergyman..... *Charles Lenck M. Minister*

Signature of Member of Patriotic Fund Committee..... *John A. Rowsett*

JWH/LM

May 11, 1921.

Mrs. Stephen Power,
Bonavista.

Dear Madam:

With reference to your application for Separation Allowance, I have been directed to state that same cannot be granted, because your husband is not totally incapacitated, and consequently you cannot be considered to have been totally dependent upon your son Isaac, during his period of service.

Yours truly,

Major

Paymaster.

Jan 5th 19/8

4067

Bonausta

Dayes-bone

Dear Sir

I am writing you those
few lines to you
in wanting to
know about my
son allotment
& some power.

he called the
last week in
October & don't

rightly know what
day of the month

but it's over
2 months and I
haven't received

any money from
him. yet please let me
know how he fixed it.

Before he went
across because I am
a lame man and
my two sons are gone
from me and I would
like to get help from
them James Power are
in the navy and
I have Power are in the
Army answer this
note if you please
and let me know
yours truly

Mr Stephen Power

Bonarista
Baylys - love

50¢ per
day from Oct 1st 17

4067

January 10th. 1918.

Mr. Stephen Power,
Bayly's Cove,
B.B.

Dear Sir:

With reference to your request of January 5th. regarding that allotment of your son, Pte. Isaac Power, I beg to inform you that he declared an allotment of 50¢ per day in your favour, commencing from Dec. 1st. 1917, therefore the first cheque was mailed you on January 7th. in payment for December month.

In future all cheques will be mailed to you on the 7th. of the month in payment for the preceding month.

Yours truly,

Capt. & Paymaster.

4067

Sept. 3, 1919

James Power,
Bonavista.

Dear Sir:

With reference to your letter of August 2nd. enclosed are two forms of claim for War Service Gratuity, one to be completed by you, the other by Isaac, and signed by a Magistrate or Justice of the Peace, and returned to this Department.

Yourstruly,

Capt.
For Paymaster

ST. JOHN'S, Apr 19 /19

Newfoundland Forestry Companies

Billeting Account,

To Mr. J. Power

Billeting Soldiers as undermentioned

from Feb 8th /19 to Apr 10th /19

A.C.S.

4067. Mr. J. Power 64 20

ACCOUNT	<u>B. F. M. J.</u>
SER. NO.	<u>16566</u>
IND. LEADER	<u>UNIT 512</u>
PAY LEADER	<u>UNIT 512</u>
ORG. LEADER	<u>UNION</u>

Certified correct for \$ 64

J.P. Power
R.J. Power
Unit 512

Alphonse St.
Billeting Officer.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of

1st Newfoundland

Number of Sheets

side

Signature of O. C. Company

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>4067 Power Isaac</i>	Age on <i>18</i> years + months		<i>Sickerman</i>	
Joined _____ Date _____		Place and Date of Enlistment } <i>St John 5-11-17</i>		Religion	
Joined _____ Date _____				<i>Meth.</i>	
Joined _____ Date _____		Period of } with Colours <i>185</i> years. with Reserve <i>1365</i> years.		Place of Birth	
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>Hogley Brown Camp.</i>	<i>20/7/18</i>	<i>Pte.</i>		<i>neglect of duty.</i>	<i>Private Banks + Corp C. B.</i>		<i>20/7/18</i>	<i>Lieut. P. G. A. Rendel.</i>	
<i>Demobilized St. John's, 5-5-19</i>									

To be carried over

Army Form B. 121.

24067

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4067 Rank PLC Name Power Isaac
 Date of Enlistment 5.11.17 Address Bonaville District Bonaville
 Occupation fisherman Classification for Discharge B Medical Category E
 Recommendation S.M.B. Permanently unfit Disability Rating less than 50%
 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. <u>3</u>
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 17.4.19 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.
Isaac Power
fisherman

Particulars passed to Vocational Officer for information and action.

Date 19-4-19 Mildon St.

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable. \$60.00
- (b) Clothing Supplied Mildon St.

Date 19-4-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. to his home at *Romania* and Release Certificate No. *2160* issued.

Date *19-4-19* *J.A. Snowfield*
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to *5-5-19*

Date *19-4-19* *H.M. [unclear]*
Depot Paymaster.

Discharge approved for *21-4-19*

Forwarded with following documents to O.C Discharge Depot.

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

Date *19-4-19* *J.A. Snowfield*
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-
Officer i/c Records.
Board of Pension Commissioners.
with following additional documents.

Eligible for War Service Gratuity

Date *APR 21 1919* *R.H. [unclear]*
O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.
Date *April 28. 1919* *James [unclear]*
for of Records

230

NEWFOUNDLAND POSTAL TELEGRAPHS



CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 29 Sent by WS Rec'd by Am Check 9/4 No. _____

Place from Bonaville

To Capt Sait
St Johns



Kindly extend my leave
till 9th inst wire
answer.

4067 Isaac Power.

hr. ext. to month April joined
7.4.19

The Royal Newfoundland Regiment

CIVILIAN RE-ESTABLISHMENT ON DEMOBILIZATION

No. 4111 Rank Pvt Name James Isaac
 Former Occupation fishery Address Bonaville District Bonaville
 Class B Medical Category F Disability Rating 100%
O.C. Discharge Depot.

Above noted man states he has no employment in prospect on his discharge. His personal wish is to obtain a position as fisherman. His case has therefore been referred this day to the Vocational Officer for action, and his discharge is therefore held in abeyance.

Date 19-4-19

To be forwarded Orderly Room in Duplicate.

A. McInerney
 Demobilization Officer