



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 3331 Name Martin Francis Power Corps RR

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

- |  |                                      |
|--|--------------------------------------|
| 1. What is your name? .....  | 1. <u>Martin Francis Power</u>       |
| 2. What is your full Address? .....  | 2. <u>Bay St. W. St. John's Nfld</u> |
| 3. Are you a British Subject? .....  | 3. <u>yes</u>                        |
| 4. What is your age? .....   | 4. <u>17</u> Years <u>1</u> Months   |
| 5. What is your Trade or Calling? .....  | 5. <u>carpenter (apprentice)</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 <u>yes</u><br>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, Martin Francis 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.

8 Dec 13/16 Martin Francis Power SIGNATURE OF RECRUIT.  
Harold Knight Signature of Witness.

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

I, Martin Francis 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 St. John's on this 13 day of December 1916

Signature of Attesting Officer Chas R. Aye Capt

### † CERTIFICATE OF APPROVING OFFICER.

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

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

Date.....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).....



3331



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 3331 Name Martin Francis Power R.L.

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

- |  |  |
|--|--|
| 1. What is your name? .....  | 1. <u>Martin Francis Power</u>                   |
| 2. What is your full Address? .....  | 2. <u>Broad Wither Ben</u><br><u>Fredericton</u> |
| 3. Are you a British Subject? .....  | 3. <u>yes</u>                                    |
| 4. What is your age? .....   | 4. <u>18</u> Years <u>1</u> Months               |
| 5. What is your Trade or Calling? .....  | 5. <u>carpenter (apprentice)</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, Martin Francis 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.

8 Dec 13/16 Martin Francis Power SIGNATURE OF RECRUIT.  
Harold Knight Signature of Witness.

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

I, Martin Francis 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 fully entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St Johns on this 13 day of December 1916  
Signature of Attesting Officer Chas. S. Ayrce Capt.

### †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; .....

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:  
via:—(Name).....re-enlisted in the (Regiment).....on the (Date).....





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

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

Examination of *Arthur Francis Power.*

aged *18 yrs. 1 month* conducted at *A L B*

Date: *Dec 13/14* Recruiting Officer:

NO OF TEST FINDING

- 1 *no*
- 2 *no*
- 3 *no*
- 4 *no*
- 5 *no*
- 6 *no*
- 7 *yes*
- 8 *yes*
- 9 *no no*
- 10 *n*
- 11 *n*
- 12 *n*
- 13 *n*
- 14 *n*
- 15 *n*
- 16 *n*
- 17 *n*
- 18 *n*
- 19 *6/12 I. / 6/9 K.*
- 20 *n*
- 21 *n*
- 22 *n*
- 23 *n*
- 24 *n*
- 25 *n*
- 26 *n*
- 27 *n*
- 28 *n*
- 29 *n*
- 30 *n*
- 31 *n*
- 32 *n*

*3331*

33 *2 yrs. left 2 scars*  
34 *5'6 1/2*  
35 *119 1/2*  
36 *32" 36"*

37 *\$20.00 per month*  
38 *Brother John Joseph Power Mount Cashel*  
39 *none*

Signature of Medical Examiner:

*D. W. Borden*

C.R. 3331

Extract from Nominal Roll of RFLA, Regt. Draft No. 86  
from 2nd Bn. Depot, to 1st Bn. B.E.F. Embarked Folkestone  
26-5-18.

3331 Pte. M.F. Power.

CR 3331

Extract of DAILY ORDERS PART II ROYAL NEWFOUNDLAND  
REGIMENT DEPOT ST. JOHN'S DATED 20/3/19.

-----

The Discharge of the undernoted on Demobilization has  
been CONFIRMED by Officer i/c Records onnoted date.

3331 Pte. Martin Power.

18/3/19.

C.R. 3331

Extract from Daily Orders part II, Depot  
St. John's dated Mar. 6th., 1919.

The discharge of the undernoted on demobilization  
has been APPROVED by C. C. Discharge Depot on 4-3-19.

#3331 L/C. Martin Power.



CR 3331

Extract from Daily Orders East 11 Unit The Royal WFLA,  
Regt. St. John's, 11-2-19.

The Underwater Returned from Overseas and Reported to  
Regt 7-2-19.

Reprinted on A.F. 2179.

3331 Pte. Martin Power.

C.R. 3331

Extract from telegram from synoptical to "11. dated Feb. 2nd., 1919.

CABLE THREE CORNICAN.

---

in answer to your telegram Jan. 14th., soldiers require special attention on arrival at Newfoundland.

3331 Powe<sup>r</sup>

middle ear disease.

C.R. 3331

Extract from Nominal Roll of the Royal NZIA. Regt.  
St. John's, Embarked S.S. Cornican, Jan. 30th, 1919.

3331 L/Dpl. Power.

3331

Jan. 7th, 1919

Mrs. Cullen  
23 Henry Street  
C I T Y

Dear Madam:-

With further reference to your enquiry to this Office concerning No. 3331, Private M.F. Power, I beg to say that this Department has been prosecuting enquiries through the Record Office London, as to why this soldier has not written home. We have received communication from the Chief Paymaster in reply which states that Private Power was interviewed and questioned, and he states that he wrote home two months ago; and that he was then about to write again.

I trust this last letter will be received.

Yours faithfully,

Lient. Col.,

Chief Staff Officer.

---

1 Mrs. Bullen  
25 Henry St.

---

C.R. 3331 pte. M. J. Power  
Dept Wmchert and Son  
York

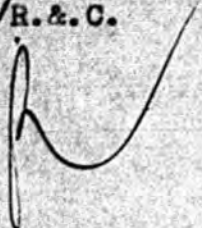
C.R. 3331

Extract from Telegram to Synoptical, Nov. 19th, 1918//

Inform whereabouts 3331 Power has not written for nine months  
please take necessary steps(Stop)

MM.

19098/2130/R.&C.



Officer Commanding,  
2/Bn. R. Newfoundland R.,  
Hazeley Down Camp,  
Winchester, Hants.

Pay & Record Office,

21st November, 8

3331 PTE. M.F. POWER.

Following is extract of telegram dated 19/11/18 (10000) from the Minister of Militia.

"3331- Power- has not- written  
"- for- nine months- please  
"take necessary action-"

Passed for your attention,  
please.

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

3331  
Vice

Versa

Dec. 2nd, 1918:

This man states that  
he wrote home two months  
ago.

He is writing again  
this week.

(Sgd) B. J. BARTON. Lt. Col.

HB/JC

C.R. 3331

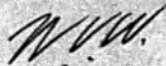
Nov. 21, 1916.

Mrs. Cullen,  
#23 Henry Street,  
City.

Dear Madam:-

In answer to your enquiry concerning No. 3331, Private Martin F. Power, I beg to inform you that we have been advised by Pay & Record Office, London, that his health is good and he is now at Depot, Winchester. He has been advised to write you.

Yours faithfully,



Lieut.

Casualty Officer,  
for  
Minister of Militia.



C.R. 3331

Extract from Orders, Part 11, by Lt. Col., B.J. Barton, D.S.O.,  
Commanding Royal Newfoundland Regiment, dated 19/10/18.

The following having reported back from the ~~1st~~ Battn.  
is taken on the strength and posted to "H" Company.

3331 Pte. M. Power

from 11/9/18.

C.R. 3331

NEWFOUNDLAND CONTINGENT.

Extract of Casualties from P.E.R.O.; London dated <sup>1</sup>Apr. 18th. 1918 .

3331 Pte. M. Power

was transferred from the Alexandra Hospital, Cosham, to the 3rd. London  
General Hospital on 16/4/18.

Authority: O.C., 3rd. L.G.H.

C.R. 3331

Extract from Casualties received from P.&.R. Office Spt. 3, 1918.

3331 Pte. M. Power.

Discharged 3rd London General Hospital. Wandsworth, Furlough  
8/9/18-11/9/18. Classified 1 Duty.

C.R. 3331

Extract from Daily Order part 11, from Unit The Royal  
Nfld. Regt. in the field. dated 22-6-18.

#3331 Pte. M.F. Power.

Invalided to England 9-6-18 (Sick)

C.R. 3331

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

LIST NO H. A. 24606



NEWFOUNDLAND CONTINGENT

ADM 24 GEN H. ETAPLES 6th JUNE'18.

68176 Pte. James, M. RAMC.St.Jab.Hpl. N Y D

DIS TO 3 EMP BASE DEP EX 24 GEN H. ETAPLES 6th JUNE'18.

54864 Pte. Griffiths, D J. RAMC.138.Fld.Amb.

ADM 26 GEN H. ETAPLES 6th JUNE'18.

200456 Pte. Gibson, G C. 1/5.Kgs.L'pools. P.U.O.  
423132 Pte. Rawding, C H. RAMC.59 O O S. Debility.Mild.  
42392 L/O. Smith, F. RAMC.att AID.Etaples. Influenza.Mild.

DIED IN 26 GEN H. ETAPLES 6th JUNE'18.

301279 Pte. Jack, M C. RAMC.2/1 Highd.F A. Ac.Bron.Pneumonia.  
DUE TO ACTIVE SERVICE.

DIS TO DUTY EX 81 GEN H. MARSEILLES 5th JUNE'18.

102009 Pte. Heyworth, JH. RAMC.81/Gen Hospl.  
18923 Sgt. James, A. RAMC.81/ Do.

ADM 81 GEN H. MARSEILLES 5th JUNE'18.

68209 A/Sgt.Pearson, J. RAMC.Lahore.Indian. Pyelitis.Slt.  
Gen.Hospl.

NEWFOUNDLAND CONTINGENT.

LIST NO H. A. 24606

ADM 24 GEN H. ETAPLES 6th JUNE'18.

X 3331 Pte. Power, M. . . 1/Newfoundland. . . Mastoiditis.Mild.

1310A

C.R. 3331

June 13 18

Dear

Mr. Power:-

I regret to have to inform you that a report has this day been received from the Record Office of the Royal Newfoundland Regiment, London, to the effect that

3331, Private Martin P. Power is at Wandsworth suffering from inflammation of ear.

I trust that later reports will bring news of his convalescence.

Any further information received at this Office as to his condition will be at once notified to you.

Yours faithfully,

Lieut. Col.

Chief Staff Officer  
Minister of Militia.  
for

Mr. John Power  
Mount Cashel



C.R. 3331  
NEWFOUNDLAND CONTINGENT.

Extract of Nominal Roll of Draft No. 46,-- 120 Other Ranks from 2nd. Bn.,  
Depot, Winchester to 1st. Battn., Royal Newfoundland Regiment, B.E.F.,  
Embarked Folkestone 25/5/18.

3331 Pte. M.F.Power.

A.P.S. B. 103 (one  
for each soldier)  
sent to 3rd. Ech-  
elon, B.E.F.



C.R. 3331

Extract of Nominal Roll Draft (All Ranks) to 1st  
Bn. B.E.F. Embarked Folkestone 8

3331 Pte. F.F.Power.

25-5-18.

C.R. 3331


May 16th, 1918.

John J. Power Esq.,  
Mount Cashel,  
C I T Y.

Sir:-

Notification has been received by mail, that  
your brother #3331 Pte. Martin F. Power, was admitted  
Alexandria Hospital, Cosham 14/3/18, suffering from ear  
Abscess.

Yours faithfully,



Major,

Chief Staff Officer.

C.R. 3331

Extract from Casualties received from Pay & Record Office,  
London, dated May 9, 1918.

#3331 Pte. M. Power. was discharged from the 3rd London  
General Hospital 8/5/18 and instructed to report  
to Officer Commanding 2nd Battalion Royal Nfld. Regt.  
Hazley Down Camp, same date.

Extract from Casualties received from P & R. Office London,  
Mar. 22, 1918.

IN ALEXANDRIA HOSPITAL, Cosham.

3331 Pte. Power, M.

Mastoid, Adm. 14-3-18.

C.R. 3331

Extract from Casualties received from Pay & Record Office  
London, dated March 16, 1918.

#3331 Pte. Martin Power. ✓

Mastoid (Acute)

Admitted 3rd London General Hospital, Wandsworth, S.W.

14 /3/18.

C.R. 3331

Extract from Casualties Admitted Alexandra Hospital, Cosham, 14/3/18  
from 2nd Battalion. Dated 16th. March 1918.

3331 Pte. Martin Power

R. Nfld. R.....Mastoid (acute.)

C.R. 3331

Extract from Officers and men Embarked St. John's 31-7-17

Sailed Halifax S. S. NORMLAND 17-6-17.

4

#3331 Pte. M. Power.

C.R. 3331

Extract from Daily Orders Part 11 Unit The Royal Nfld.  
Regt., St. John's, Dec. 13th, 1916.

3331 Pte. Martin F. Power.

Attached to the Strength from Dec. 13th, 1916.



C.R. 3331

Extract from Preliminary Report of Medical Board held on Friday  
Feb. 21st 1919.

3331 Egt. M. Power.

Recommended Discharge *from the Army* as ~~Permanently Unfit.~~ E.

BRANDFORD BOND

STRAITHOSE QUALITY

<sup>54</sup>  
M. S. Power.

CR. 333

~~SRD~~

**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 P., 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 Newfoundland* } Former Trade  
2. Regtl. No. *3301* } or Occupation  
3. Rank..... *PL* }  
7a. If the soldier claims previous service in Army, he should state—  
4. Name ..... *POWER* ..... (a) Former Regts. or Corps ;  
(Surname) (Christian Names) with Regtl. Nos.  
5. Age last birthday.....  
6. Posted for duty on..... at.....  
in category (or grade).....  
8. If the disability is an injury was it caused  
(a) in action (b) on field service  
(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  
(b) Where (if any)  
(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."  
*Right - Mastoiditis.*
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.  
*Complained of pain in right ear sent to hospital with mastoiditis radical cure, later sent to France when ear started again discharging evacuated to England where again operated on at 3<sup>rd</sup> L.H. cured.*

14. State whether the disabilities are

(a) attributable to

(b) aggravated by

(i) Service during the present war

(ii) Previous active service

(iii) Climate in pre-war service

(iv) Ordinary military service before the war

(v) Serious negligence or misconduct on the man's part.

no  
no  
no  
no  
no

14 (a). If not due to any of these causes, to what specific condition do you attribute it?

N.A.

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.)

Bar behind right ear, no pain and no discharge.

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

16. Was an operation performed? If so, when and what was its nature?

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

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?

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?

20. Do you recommend—

(a) Discharge as permanently unfit?

(b) Change to United Kingdom?

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

Repatreated  
J. H. H. H. H.

ROYAL NEWFOUNDLAND REG.

Station Angley Camp

Date 8 JAN 1919

Medical Officer in charge of case.

\* 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



3rd London General Hospital  
Wandsworth

To the Chief Paymaster

Please Permit to 3331 The M. Tower  
the sum of 1£ One pound.

on account any Balance Due Me.

3/8/1918  
1-0-0  
The Chief Paymaster



Approved  
I shall  
Capt  
8/8/18

No 5 P 145

Newfoundland Contingent

To Chief Paymaster & Officer  
Newfoundland Contingent  
58 Victoria  
London S.W. 1



FILE CRANK K B G  
17

Please remit to 3<sup>rd</sup> London Gen

Wandsworth

Sum of one pounds 1 s (£)

O.K.  
6/9/19

#1-0-8 sup.  
Recpt No

8022

dated 6/7/15

No. 3331 Rank Sgt Name Mr. Lower  
office of & Challenger  
Hosp

Wm. 10712/251

NEWFOUNDLAND CONTINGENT

From:

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

To: Officer Commanding,

3rd London Gen. Hospital,  
Wandsworth.

3rd July 1918

191

ALLOTMENT

No. 3331, Pte. M. Power,

With reference to the enclosed application for cancellation of Allotment of the above-named, 2/7/18 (6000), kindly ascertain and advise:-

1. Whether the Allotment is payable to a dependent as a sole or contributory means of support?
2. Whether Separation Allowance (in addition to Allotment) is being paid to any person in Newfoundland or elsewhere on his behalf, and if so, to whom?
3. The reason for cancellation.

Should the Soldier's reply to "2" be in the affirmative he should be informed that Allotment may not be cancelled without reference to the Minister of Militia in Newfoundland, to whom reason for cancellation will require to be submitted.

*R. A. Munnell* Major,  
Chief Paymaster & O. i/c Records.



*No*

*No*

*Has not sufficient funds at his disposal at the present time*

*H. Logan Hooper*

Registrar, R.A.M.C.  
3rd London General Hospital,  
WANDSWORTH, S.W.

*OK C*  
*Th*



11663

CHIEF PAYMASTER & OFFICER I/C RECORDS.  
NEWFOUNDLAND CONTINGENT,  
83, VICTORIA STREET,  
LONDON, S.W. 1.  
ENGLAND.

Officer Commanding,  
3rd. London General Hospital,  
Wandsworth, S. W. 18.

HOSPITAL, R.A.M.C.  
Office in Charge Pay & Records  
Newfoundland Contingent  
Victoria Street, S.W.  
2nd LONDON DIVISION

3331, PTE. M. POWER.

Reference reverse: Allotment will  
be cancelled from 31/7/18 if the enclosed  
forms are completed and returned  
immediately, please.

With reference to the  
preceding Minute, please  
find Forms duly completed  
and returned herewith.

*[Signature]* Major,  
Chief Paymaster & O i/c Records.

*[Signature]*  
A/Major R.A.M.C.(T)  
for O.C. 3rd London General  
Hospital.

London, S. W. 1  
11/7/18.

|                         |        |
|-------------------------|--------|
| NEWFOUNDLAND CONTINGENT |        |
| PAY & RECORDS OFFICER   |        |
| RECEIVED                | ✓ 6349 |
| DATE                    |        |
| BY                      |        |
| ACCT.                   |        |
| BRANCH                  |        |
| TOTAL                   |        |
| PAID                    |        |
| BAL.                    |        |
| REMARKS                 |        |

*[Signature]*

10712/251

3rd, July 8

3rd. London General Hospital,  
Wandsworth.

3331, Pte. M. Power.

5th, July 8

2/7/18 6000

No.

No.

Has not sufficient funds at his  
disposal at the present time.

(sd) H. Fagan, Major,  
Registrar R. A. M. C. T.  
3rd. London General Hospital,  
Wandsworth, S. W.

11063

CHIEF PAYMASTER & OFFICER I/C  
NEWFOUNDLAND CONTINGENT  
55, VICTORIA STREET,  
LONDON, S.W. 1  
ENGLAND.

SENSE | CLEARED

Officer Commanding,  
2nd. London General Hospital,  
Handsworth, S. W. 18.

3331, PTE. M. POWER.

Reference reverse: Allotment will  
be cancelled from 31/7/18 if the enclosed  
forms are completed and returned  
immediately, please.

Major,  
Chief Paymaster & O I/c Records.

London, S. W. 1  
11/7/18.

(Sd) H. P. ...  
...  
...  
...

11643/279

3rd London Gen. Hospital,  
Wandsworth.

19th July 8

3331, Pte. M. F. Power

6465

Pay to 3331 Power £10:0:0

*No Receipt*

*RB  
22/7/18*

Ward 3  
3rd Lon Gen.

Wandsworth 2/7/18

London Sw 18

Chief Paymaster &c Records  
of the Contingent  
58 Victoria St  
London Sw 1

Dear Sir

Kindly, cancell my  
allotment & the full amount to be payable  
to me from any date that is necessary  
for change ment.

The receiver his my brother John Joseph  
Power Mount Washet St Johns  
& oblige

Wm W Power 3331

927980

10712  
25

|                         |  |
|-------------------------|--|
| NEWFOUNDLAND GOVERNMENT |  |
| PAY & REPLY OFFICE.     |  |
| No. 6000 ✓              |  |
| Rec'd - 3 JUL 18        |  |
| ACK'D                   |  |
| Tel. Nos. 1-11          |  |
| 11/163                  |  |
| CASH                    |  |
| ✓                       |  |
| P. & C.                 |  |
| S. & F.                 |  |
| S.S.                    |  |

|                                   |
|-----------------------------------|
| ENTERED                           |
| PAY LEDGERS <i>6th</i>            |
| NUM. COLL.                        |
| ALLO. UNDER <i>65</i>             |
| NEW <i>65</i> FUNDLAND CONTINGENT |
| EXAMINED                          |

**ORIGINAL.**

N.F.P./12.

CANCELLATION OF ALLOTMENT

1. I, (No) 3331 (Rank) Plc. (Name) Power, Martin F.  
 hereby apply for cancellation of Allotment made by me on N.F.P./11  
 No. 3313 dated February 1st /17 in favour of  
John Joseph Power (Brother)  
 for \$      cts 50 per diem.  
 Such cancellation to take effect on the Thirty First day of  
July August 1918

2. I agree to accept all risks and consequences of this appli-  
 cation failing to reach Headquarters, St. John's, in time to become  
 operative at above-nominated cancelling date, and that in the event  
 of such non-delivery, and thereby the Allotment continuing to be  
 paid to the Allottee, I also agree to such further stoppage in the  
 Pay Books as may be necessary, or otherwise to refund such overpaid  
 amount of

|                                    |
|------------------------------------|
| 288 LONDON GENERAL HOSPITAL        |
| No. <u>    </u>                    |
| Dated at <u>14 JUL 1918</u>        |
| <u>14 WANDSWORTH, S.W. 18, 191</u> |

*M Power*

Approved and Witnessed:

*G Hall*

O.C. Regiment, R.F.W.C.

3rd London General Hospital

N.B. To be made out and delivered to the Pay & Record Office not later than the date of cancellation, in accordance with P. & R.O. C.L./10, 9/12/16.

|               |                 |                    |
|---------------|-----------------|--------------------|
| Allotter      |                 |                    |
| COPIES SENT   |                 |                    |
| TO            | No.             | DATE               |
| M. of M.      | <u>11400/93</u> | <u>15 JUL 1918</u> |
| O.C. 1ST. BN. |                 |                    |
| " 2ND. BN.    |                 |                    |
|               |                 |                    |
|               |                 |                    |

3rd London Gen. Hosp

Wandswoth

Aug. 3/8/18

To the Chief Paymaster

Please Remit to 3331 Pte  
M. Power the sum of £  
on account any Balance  
that may be due me

# 3331

approved

D. H. £1-0-0 sup

8415 Summary

3/8/18

Recd to

Cupbearer

WANDSWORTH, S.W. 8.  
2 AUG 1918  
39 LONDON GENERAL HOSPITAL

KB6/7/18  
1/15

No.

879

*Pay*

# ANGLO-AMERICAN

WESTERN UNION  DIRECT UNITED STATES  
CABLEGRAM

|              |  |            |          |            |  |  |
|--------------|--|------------|----------|------------|--|--|
| Prefix _____ |  | Code _____ |          | At _____   |  | FOR STAMPS   |
| WORDS        | CHARGE                                       | To _____   | By _____ | SENT       |  |  |
| 130          | 2 1/2  |            |          | VIA ANGLO. |  | THIS FORM WILL BE ACCEPTED AT ALL<br>POST OFFICE TELEGRAPH STATIONS. |
| 12/7/18      | TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY. |            |          |            |  |  |

To EFM J ENNIS

MOUNT CASHEL STJOHNS (Newfoundland)

CABLE TEN POUNDS THROUGH MILITIA

3331 POWER

*Chge 9/c* →

*13 1/2*  
*2 1/2*  

---

*2 8 1/2* ✓



Authorised.

NOT TO BE  
TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature \_\_\_\_\_

Address

58 Victoria St. S.W. 1.

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.



18021/1/R.&C.

195<sup>30</sup>/9193

Officer Commanding,  
Details, R. Nfld Regt.,  
Kinnell Park Camp,  
Abergele, N. Wales.

Pay & Record Office,

7th November, 8

5447 PTE. POWER.

Following is an extract of  
telegram 5/11/18 (9576) received  
6/11/18 from the Minister of  
Militia:

"Following for- 5447- Power-  
"baby- dangerously ill- wife-  
"well-"

*Depot.*

Will you kindly convey this  
information to the above named  
man?

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

HB/JC

*Copy to HQ*  
4/12/18  
Army Form C 348.

**CHIEF PAYMASTER & OFFICER IN CHARGE RECORDS,  
NEWFOUNDLAND CONTINGENT MEMORANDUM.  
59, VICTORIA STREET,  
LONDON, S.W. 1.  
ENGLAND.**

From **Officer Commanding,  
2nd Bn. Royal Newfoundland Regt.  
Hazeley Down Camp.**

**Officer Commanding,  
2/Bn. R. Newfoundland R.,  
Hazeley Down Camp,  
Winchester, Hants.**

To **The Chief Paymaster,  
Royal Newfoundland Regiment,  
London, S.W.**

ANSWER.

Pay & Record Office,

21st November, 1918

Nov. 2nd

1918.

3331 PTE. M.F. POWER.

Following is extract of telegram dated 19/11/18 (10000) from the Minister of Militia.

"3331- Power- has not- written  
"- for- nine months- please  
"take necessary action-"

Passed for your attention,  
please.

*A. J. M. Power*  
Major,  
Chief Paymaster & O. i/c Records.

This man states that he wrote home two months ago.

He is writing again this week.

NEWFOUNDLAND CONTINGENT  
PAY & RECORD OFFICE  
REC'D 105 11 ✓ 1049  
REC'D BY DEPT. 115  
*D. J. Barton*  
COLONEL  
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

HB/JC

*Handwritten mark*

RECEIVED  
F. & C.  
F. & C.  
F. & C.



3rd London Gen. Asst.

To the Chief Paymaster & Officer  
Please Permit to No 333  
To Mr Towers of the  
of one Pound. 1 £  
On account of any Balance that  
may be due me.



Approved  
G. C. Hall  
Capt

|         |            |
|---------|------------|
| FILE    | BRANCH     |
| INITIAL | KB 22/1/18 |

Handwritten initials or signature.

£1-0-0  
8028

Power, L

3331

May 20th.

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 3331 Rank Private Name Powell M  
 Intended place of residence 1 Hamilton St. St John  
 2. Occupation Carpenter  
 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 .....  
 Date MAR 4 1919 .....  
 for M. Powell  
 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. SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT.

Place and date ST. JOHN'S .....  
4-3-19 .....  
Martin Powell  
 Signature of soldier  
Edwards Cph  
 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 .....  
4.3.19 .....  
M. Powell  
 Signature of soldier  
W. J. Eaton  
 Signature of witness

### STATEMENT OF SERVICE

7. Enlisted for service ..... 13.12.16 ..... No of days on Military  
 Discharged from service ..... 4.3.19 Plus 14 days ..... Service 826

### 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. Sait Capt  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment  
 Date MAR 4 1919 .....

### CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed  
 Place St John's Nfld .....  
 Date March 18/1919 .....  
M. Bowley Capt  
 Officer i/c Records  
 The Royal Newfoundland Regiment

QD B 2079/1383

19  
31  
28  
18  
96

March 18, 1919

#3331 Pte. Martin F. Power,

#1 Hamilton St.,

City

Dear Sir :-

Please find enclosed "Discharge Certificate  
No. 1383."

Yours truly,

Captain,  
Paymaster & Officer i /c Records

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 333 Rank Plt Name James M. Power  
 Date of Enlistment 13.12.16 Address St John District St John  
 Occupation Carpenter Classification for Discharge B Medical Category E  
 Recommendation S.M.B. Supernumerary Disability Rating 1590  
 Passed to Demobilization Officer with following documents:—

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

Date 5-3-19 for H. M. S. H. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

M. Power

Particulars passed to Vocational Officer for information and action.

Date 4-3-19 Joseph A. Lawrence

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$100.00  
 (b) Clothing Supplied Joseph A. Lawrence

Date 4-3-19 O i/c. Re-clothing.



3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. \_\_\_\_\_ to his home  
at \_\_\_\_\_ and Release Certificate No. 1378 issued.

Date 4-3-19

C. B. Deeks Capt.  
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 18-3-19

Date 4-3-19

K. M. W. H.  
Depot Paymaster.

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACT, 1916.

Discharge approved for 4.3.19

Forwarded with following documents to O.C Discharge Depot.

|           |        |        |           |        |                 |
|-----------|--------|--------|-----------|--------|-----------------|
| N.F. P/36 | B 268  | B 121  | N.F. Med  | D.F. 1 | 1 <u>2.1.19</u> |
| 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 4.3.19

C. B. Deeks Capt.  
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 MAR 4 1919

R. H. Sait Capt.  
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 learn Tailoring

Martin Power

Signature of Man.

*[Signature]*

Signature of the Vocational Officer or his Representative.

Reg. No. 3331

Place

St Johns

Date

March 4 1919

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

# MEDICAL HISTORY

Surname

*Powers*

OF

Christian Name

*Martin Francis*

Table 1.—GENERAL TABLE.

Birthplace:—Parish

County

|   | SPECIAL RESERVE.                      |                         | REGULAR ARMY. |                  |
|---|---------------------------------------|-------------------------|---------------|------------------|
|   | on                                    | at                      | on            | at               |
| Examined  | 13 <sup>th</sup> day of December 1916 | St John's I.S.          | day of        | 191              |
| Declared Age  | 18 years 1 month days                 |                         | years         | days             |
| Trade or Occupation   | Carpenter                             |                         |               |                  |
| Height  | 5 feet 6 1/2 inches                   |                         | feet          | inches           |
| Weight  | 119 lbs.                              |                         |               | lbs.             |
| Chest Measurement   | Girth when fully expanded             | 36 inches               |               | inches           |
|   | Range of expansion                    | 4 inches                |               | inches           |
| Physical Development  |                                       |                         |               |                  |
| Vaccination Marks   | Right                                 | Left                    | Right         | Left             |
|   | Arm                                   | 2 scars                 |               |                  |
| When Vaccinated   | 2 years ago                           |                         |               |                  |
| Vision  | R.E.—V=                               | 4/9                     | R.E.—V=       |                  |
|   | L.E.—V=                               | 4/12                    | 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>L. Amos Storer</i>                 |                         |               |                  |
| (Rank)  | Major                                 |                         |               |                  |
|   | Medical Officer.                      |                         |               | Medical Officer. |
| Enlisted  | at                                    | St John's               | at            |                  |
|   | on                                    | 15 day of December 1916 | on            | day of 191       |
|   |                                       | Corps.                  |               | Corps.           |
|   |                                       | Regtl. No.              |               | Regtl. No.       |
| Joined on Enlistment  | 1st Newfoundland Regiment             |                         |               |                  |
|   |                                       | 3331                    |               |                  |
| 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.

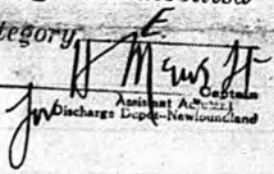
| Date                          | Brief Details, and Signature  |
|-------------------------------|---|
| 10-1-17<br>14-1-17<br>24-1-17 | $\left. \begin{array}{l} \text{TAB.} \\ \hline 3 \\ \hline \end{array} \right\} \begin{array}{l} \text{LP} \\ \text{LP} \\ \text{LP} \end{array}$                                   |
| 19-12-17                      | Vacc. LP  |
| 8/1/19                        | Recommended for treatment   |
|                               | ROYAL NEWFOUNDLAND REG.   |
|                               | It is hereby certified that this Officer has been before the Standing Medical Board and has been classified as <u>75</u> for discharge on Demobilisation. Medical category <u>E</u> |
|                               | <u>22.2.19</u><br>Date of S.M.B.  |
|                               | <br>J. H. Mears<br>Captain<br>Assistant Adjutant<br>Discharge Depot—Newfoundland                |

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 |
|-----------------------|--------------------------------|--------------------------------------|----------------------|--------------------------------|-------------------------------------|
| Lt Colonel<br>Windsor | 31-1-17<br>3-2-17              | 3-2-17                               |                      |                                |                                     |

**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 P., 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 Newfoundlands* } Former Trade  
or Occupation }
2. Regtl. No. *335* 3. Rank..... *Plt* 7a. If the soldier claims previous service in Army, he should state—  
(a) Former Regts. or Corps; with Regtl. Nos.
4. Name..... *POWELL*  
(Surname) (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....  
in category (or grade).....
8. If the disability is an injury was it caused  
(a) in action (b) on field service  
(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  
(b) Where (if any)  
(c) Opinion of Court

**NOTE.**—The foregoing particulars are to be filled in and A.F.B. 179 b (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.

*radical cure, later sent to France, when ear again started to England, where again operated. on at 3 prof. G.H. cured.*

*Complained of pain in Rt ear, sent to Gosham with mastoiditis. Discharging, evacuated again operated on at*

14. State whether the disabilities are
- |  |                     |                   |
|--|---------------------|-------------------|
| (i.) Service during the present war .. .. .                        | (a) attributable to | (b) aggravated by |
| (ii.) Previous active service .. .. .                              | no                  | yes               |
| (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 A.*

In all cases such as facial injuries, eye, ear, nose and throat, discharges, etc., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition? *Scar behind right ear. no pain and not discharge.*  
*(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)*

16. Was an operation performed? If so, when and what was its nature?

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

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?

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?

*Repatment*

20. Do you recommend—

- (a) Discharge as permanently unfit?  
 (b) Change to United Kingdom?

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

*Produce no*  
 ROYAL NEWFOUNDLAND REG

Station *Asst. Surgeon General*  
 Date *6/18/1917*

Medical Officer in charge of case.

\* 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.

OPINION OF THE MEDICAL BOARD.

NOTES.—(1) 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.

21. Give diagnosis and particulars of:—

- (a) Any disability claimed or discovered. *mastoiditis (right)*  
 (b) The present condition thereof.

*No discharge now. Late Complaint of pain in the side of the head. Deaf in right ear*

22. State whether the disabilities are:—

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

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it? .. .. . *no*

23. Is the disability in a final stationary condition? If not

- (a) How long is the present degree of disability likely to last?  
 (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 24.

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). 15%
- (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?

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

Opinion of Military Member in case of disagreement.

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: \_\_\_\_\_

Station S. Johns \_\_\_\_\_

Date Feb. 21/19 \_\_\_\_\_

President or Chairman.

Members.

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

Station FEB. 21. 1919 \_\_\_\_\_

Date \_\_\_\_\_

Officer in charge, Central Hospital.

Only applicable in cases of Patients in Hospitals.

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 \_\_\_\_\_

Date \_\_\_\_\_

O.C. Discharge Centre.





## 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 *Martin Power*

Regiment from which discharged *Royal Newfoundland*

Regimental number *3331*

Intended address *S. Johns*

Height on discharge *5* Feet *7*

Color of hair on discharge *Black*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks

Figure on discharge *Medium*

Christian name of Father *Martin*

Christian name of Mother *Hannah*

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

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

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

Place and date of soldier's birth *Boston 20.5. 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)

*M. Power*

Station

*S. Johns*

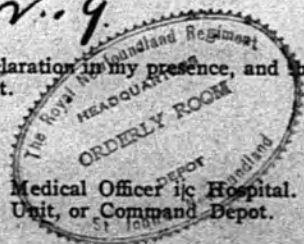
Date

*18.2.09*

(Rank)

*Private*

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.



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

Station

Date

**Casualty Form—Active Service.**

Regiment or Corps *2nd Inf. Bn. Royal Newfoundland*

Rank *Plt.* Surname *Cowan* Christian Name *Martin Francis*

Religion *R.C.* Age on Enlistment *18* years *1* months

Enlisted (a) *12.1.16* Terms of Service (a) *Duration* Service reckons from (a) *12.1.16*

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

Extended { ..... } Re-engaged { ..... } Qualification (b) .....

or Corps Trade and Rate .....

Signature of Officer *Carpenter R.M. Gussner*



| Report             | Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 35, 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.35, or other official documents. |
|--------------------|--|-------------------------|------------------|--|
| From whom received |  |                         |                  |  |
|                    |  | Embarked ...            | <i>25.5.18</i>   |  |
|                    |  | Disembarked...          | <i>31.5.18</i>   |  |
|                    | <i>W.M. of St. Peter's Master's Lane</i>   | <i>24 June 18</i>       | <i>9/6/18</i>    | <i>60 2059</i>   |
|                    | <i>Elizabeth To England</i>  |                         |                  | <i>203053</i>  |
|                    | <i>R.F. Filgate</i>  | <i>Wagon Co.</i>        |                  |  |
|                    | <i>Officer</i>   | <i>Infantry Section</i> |                  |  |

*[Handwritten signature]*

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 question 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..... *Martin* 2. Surname..... *Power*

3. Rank..... *Pte* 4. Regtl. No..... *3331*

5. Address in full to which future payments of gratuity are to be forwarded..... *Perryland, St. of Peryland,*

6. Date of enlistment in the Regiment..... *Dec 13/16*

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.....

9. Address in full of such dependent.....

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 Nfld. If so, give dates, and particulars of such service..... *Overseas*

12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *from Dec 13/16 to Mar 4/19 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.....

*Gl. Bonus allowance \$60 -  
P. & Board Money 40 -*

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 Regt.?..... If not give:- (a) Date of discharge..... (b) Reason for discharge.....

*May 4/19  
Temporary  
De-mobilization*

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, From May 25/18 to June 9/18.*

21. (a) Are you receiving treatment from the Civil Re-Establishment Com.?.....

*No*

(b). If so, are you in receipt of full pay and allowances from that Committee.....

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:

*Martin Power*

Place of Residence:

*Ferryland, Wis., Pennsylvania*

Declared before me at:

*St. John's, Wis.*

This

*13th*

day of

*March*

19*19*

*John M. McCarthy*  
*J.P.*

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

POST DISCHARGE PAY.

| Date paid | Paid<br>Soldier | Paid<br>Dependent | War Service<br>Gratuity | Not amount<br>due. |
|-----------|-----------------|-------------------|-------------------------|--------------------|
|-----------|-----------------|-------------------|-------------------------|--------------------|

*5 mos.*

*350.00*

Certified Correct.

Paymaster.



LM-

May 26, 1920

Martin Power,  
1, Hamilton Street,  
CITY

3331

Dear Sir:

I enclose cheque for Seventy-Five cents (75¢) representing balance found to be due you, on the closing of the books of the London Pay & Record Office.

Yours truly,

Major  
Paymaster

Enc.

FEB 28 1919

ST. JOHN'S,

# Royal Newfoundland Regiment.

Billeting Account,

To Pt. M. Power

Billeting Soldiers as undermentioned

from Feb 21<sup>st</sup> /19 to Feb 28<sup>th</sup> /19

3331 Pt. M. Power

7 20

Certified correct for \$ 7.20

A-7 J. H. Snow  
Billeting Officer.



# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121

Forms  
R 121  
29.

Number of Sheet First

Regiment of 1st. Newfoundland

Signature of O. C. Company Chas. Ayels

|                            |                  |            |                              |       |   |          |   |                |
|----------------------------|------------------|------------|------------------------------|-------|---|----------|---|----------------|
| Regimental Number and Name |                  | Enlistment |                              | Trade | Good Conduct Badges, Service pay or proficiency pay |          |   |                |
| No.                        | Power, Martin G. | Age on     | 18                           | years |   | 1        | months  | Carpenter.     |
| Joined                     |                  | Date       | Place and Date of Enlistment |       |   | Religion | Period of { with Colours <sup>296</sup> years. with Reserve <sup>365</sup> years. | Place of Birth |
| Joined                     |                  | Date       | St. John's, N.F.             |       |   | R.C.     |   |                |
| Joined                     |                  | Date       | 13.12.16.                    |       |   |          |   |                |

| 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                   |
|---|--------------------------|------|----------------------|--|--------------------|--------------------|---|-------------------|---------------------------|
|   | Apr. 29.6.17             | Plt. |                      | Untidy kit.  | Sgt. Gardner       | 2 days C.B.        |   | Capt. Robertson   |                           |
|   | Racecourse 24.7.17       | "    |                      | In bed after headache  | Sgt. Wainor        | 3 days C.B.        | 24.7.17   | Capt. St. Ruedell | see 11                    |
|   | Newton on. Apr 10.11.17  | "    |                      | Absent from tattoo Roll call not reported 11.45pm                                | Cop. Ruedell       | 3 days C.B.        | 13.11.17  | Tom Eamon Lt      |                           |
|   | Ayels Down Camp 20/5/18  | "    |                      | Absent from 12 Mid. until 8.55 am 21.5.18  | Sgt. Rose          | Admonished         | 27/5/18   | Capt. Eamon       | Forfeit 1 day pay by R.W. |
|   | Ayels Down Camp 19-12-18 | "    |                      | Absent from tattoo unit area by the Military Police in presence at 22.12 o'clock | Documenary         | 8 days C.B.        | 20.12.18  | H. Col. Boston.   |                           |
|   |                          |      |                      | ① Not complying with an order given by the military Police                       |                    |                    |   |                   |                           |
|   |                          |      |                      | ② Violently resisting arrest.  |                    |                    |   |                   |                           |
| Demobilized St. John's, 18 <sup>3</sup> / <sub>19</sub> |                          |      |                      |  |                    |                    |   |                   |                           |
| To be carried over                                      |                          |      |                      |  |                    |                    |   |                   |                           |

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 P., 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 NEWFOUNDLAND**..... 7. Former Trade }  
or Occupation }
2. Regt. No. **3331** 3. Rank... **PTE.**..... 7a. If the soldier claims previous service in Army, he should state—
4. Name **POWER MARTIN**..... **HARRY HAGE** (a) Former Regts. or Corps ;  
(Surname) (Christian Names) with Regt. Nos.
5. Age last birthday.....
6. Posted for duty on..... at.....  
in category (or grade).....
8. If the disability is an injury was it caused  
(a) in action (b) on field service  
(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  
(b) Where (if any)  
(c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 b (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."

### RT. MASTOIDITIS.

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.
- COMPLAINED OF PAIN IN RIGHT EAR. SENT TO COSHAM WITH MASTOIDITIS. RADICAL CURE. LATER SENT TO FRANCE WHEN EAR AGAIN STARTED DISCHARGING. EVACUATED TO ENGLAND, WHERE AGAIN OPERATED ON AT 3RD. L.G.H. CURED.**

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

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition? **SCAR BEHIND RIGHT EAR NO PAIN & NO DISCHARGE**

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

16. Was an operation performed? If so, when and what was its nature?
17. If not, was an operation advised and declined?
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?
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?

20. Do you recommend— **REPATRIATION.**

- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?

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

**J. B. O'RIELLY, M.O.**

Medical Officer in charge of case.

Station .....

Date .....

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

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.

21. Give diagnosis and particulars of:—

(a) Any disability claimed or discovered. **MASTOIDITIS. (RIGHT)**

(b) The present condition thereof.

**NO DISCHARGE NOW. STILL COMPEAINS OF PAIN IN SIDE OF HIS HEAD. DEAF IN RIGHT EAR.**

22. State whether the disabilities are:—

(i) Service during the present war .. . .

(a) Attributable to

**NO.**

(b) Aggravated by

**YES.**

(ii.) Previous active service.. .. .

(iii.) Climate in pre-war service .. .. .

(iv.) Ordinary military service before the war .. .. .

(v.) Serious negligence or misconduct on the part of the soldier .. .. .

**NO.**

Give details:

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

**N.A.**

23. Is the disability in a final stationary condition? If not

(a) How long is the present degree of disability likely to last?

(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?

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?

YES.

Opinion of Military Member in case of disagreement.

OR

(b) In what other grade do the Board place him?

NO.

(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:—

H.S. FRASER.

President or Chairman.

J.S. TAIT.

Members.

L. PATERSON. MAJOR

Station ..... ST. JOHN'S. ....

Date ..... FEB. 21ST. 1919. ....

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

Station ..... FEB 21 1919 .....  
 Date ..... No. ....

(SGD) CLAUDE MACPHERSON. MAJOR

applicable in cases of Patients in Hospitals.

Officer in charge, Central Hospital.

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 .....

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. ... 3831 ... Rank ... Pte ... Name ... Power, M.

Intended place of residence ... 1 Hamilton Street, St. John's

2. Occupation ... Carpenter

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 ... MAR 4 1919

Date ... ST. JOHN'S ... *M. Power*  
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 ... (sgnd) Martin Power

Signature of soldier

... MAR 4 1919 ... " ... C. B. Dicks, Capt.

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) M. Power

Signature of soldier

... MAR 4 1919 ... " ... W. J. Eaton, HQMS

Signature of witness

### STATEMENT OF SERVICE

7. Enlisted for service ... 13-12-16 ... No of days on Military

Discharged from service ... 4-3-19 plus 14 days ... Service ... 826

### 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. Dait*

Date ... MAR 4 1919

Officer Commanding Discharge Depot  
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

53331

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 30351 Rank *Plt* Name *James M. Rowe*  
 Date of Enlistment *13.12.16* Address *St John's* District *St John's*  
 Occupation *Warranted* Classification for Discharge *B* Medical Category *1*  
 Recommendation S.M.B. *Physically unfit* Disability Rating *15%*  
 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   |           | " 6    |
| B 179c    | B 120  | M 93   |           |        |

Date *5-3-19* *H. Mews H*  
 O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am *not* in a position to resume civilian occupation.

*M. Rowe*

Particulars passed to Vocational Officer for information and action.

Date *4-3-19* *Joseph A. Lawrence*

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable *\$60.00*
- (b) Clothing Supplied *Joseph A. Lawrence*

Date *4-3-19* O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. \_\_\_\_\_ to his home  
at \_\_\_\_\_ and Release Certificate No. 1378 issued.

Date 4-3-19 ..... *C. B. Dickins Capt.*  
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 18-3-19

Date 4-3-19 ..... *H. M. Mars Lt.*  
Depot Paymaster.

FOR USE IN ADJUSTMENT OF OVERSEAS PAY ADVT.

Discharge approved for. 24-3-19

Forwarded with following documents to O.C Discharge Depot.

|            |         |         |            |         |   |
|------------|---------|---------|------------|---------|---|
| N.F. P/36. | B 268.  | B 121.  | N.F. Med.  | D.F. 1. |   |
| B 178.     | W 3494. | B 122.  | Board 1st. | " 2.    | 1 |
| B 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 4.3.19 ..... *C. B. Dickins Capt.*  
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 MAR 4 1919 ..... *R. H. Sait Capt.*  
O. C. Discharge Depot.

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

Date March 7/1919 ..... *W. A. S. Sait Capt.*  
i/c Records



# The Royal Newfoundland Regiment

## CIVILIAN RE-ESTABLISHMENT ON DEMOBILIZATION

No. .... 3331 ..... Rank *Private* ..... Name *Power M* .....  
 Former Occupation *Carpenter* ..... Address *1 Hamilton St* District *St. John's* .....  
 Class ..... *B* ..... Medical Category ..... *E* ..... Disability Rating ..... *15%* .....  
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.....  *Sailor* ..... His case has therefore been referred this day to the Vocational Officer for action, and his discharge is therefore held in abeyance.

Date ..... *4.31.19* *Confirmed* ..... *Geo. S. Barry* ..... *Joseph A. Lawford* ..... *Capt* .....  
 To be forwarded Orderly Room in Duplicate ..... Demobilization Officer



Reg. No. *3331* Rank *Plt* Name *Power Martin F.*

Attested ..... Address *Mount Cashel*

Allotment..... Allottee .....

Date of Allotment..... Returned from Overseas..... *2-19*

Embarked for Overseas ..... Cause *Discharge*

*11-2-19. Lic. Dis. from the Army. E.*

**MAR 4 1919 PASSED TO DEMOBILIZATION OFFICER**

*d. 3 19* **DISCHARGE APPROVED ON DEMOBILICATION.**

EXTRACT FROM STATEMENT OF A/C TO 31-1-19 FROM PAY  
& RECORDS OFFICE LONDON

3331 Pte Power, N.      Cr Bal      3:3

This transferred to Pay Office 7-4-19

C.R. 3331

Dear Sir

The address of  
Pirate Martin Power, is

230 17<sup>th</sup> St

Brooklyn

New York

His Brother's address is  
unknown to me. at Present  
his last address was Mount  
Crosby

Mrs. M. J. Williams  
Bay Bells

C.R.

3331

July 5th, 1922

Mrs. Michael Williams,  
Bay Bulls.

Dear Madam:-

This Department will be greatly obliged if you can supply the address of John Power, brother of No. 1150 James Power, deceased, and also the address of No. 3331 Martin F. Power, who is in the states

Yours faithfully,

Lieut.-Col.,

Chief Staff Officer