



FIRST NEWFOUNDLAND REGIMENT

4099

ATTESTATION OF

No. 4099 Name Cecil H. Reid Corps Cof. E.

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Cecil H. Reid
2. What is your full Address? 2. Charlottetown, P.E.I.
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 18 Years — Months
5. What is your Trade or Calling? 5. Telegraph Operator
6. Are you Married? 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? 7. No
8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
9. Are you willing to be enlisted for General Service? 9. Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?..... 10. { Name
Corps
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? 11. Yes

I, Cecil H. Reid 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.

9.12.17 Cecil H. Reid SIGNATURE OF RECRUIT.
Robert Reid Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Cecil H. Reid 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.....
on this..... day of..... 1917
Signature of Attesting Officer W. H. [Signature]

†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..... 1917
Place..... } Approving Officer.

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.
‡ Here insert the "Corps" for which the Recruit has been enlisted.

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Cecil H. Reed

Apparent age 17 years — months. Height 5 feet 5 inches

Chest Measurement { Girth when fully expanded 34 inches
Range of expansion 4 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Charles | Relationship Father

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>12-11-17</u>									
Joined at <u>St John's</u> on <u>November 12-17</u>									
<u>Discharged July 18-19</u>									
<u>Embarked St John's Nfld. Newfoundland 11-12-17</u>									
<u>Joined Bath 8-10-18. Admitted 64 Coy. Sikh</u>					<u>29-11-18</u>				<u>Embarked for Bath 10-18</u>
<u>Admitted to General Hospital Dame Carriers 7-12-18</u>									<u>Admitted to 44 Coy. Buffs 2-17-18</u>
<u>Kept telegraph Buffs 22-12-18. Rejoined unit</u>					<u>14-1-19</u>				<u>Admitted 3rd Coy Buffs 2-19</u>
<u>Went to duty 11-2-19. Rejoined unit</u>					<u>11-2-19-19</u>				<u>Transferred to Power 22-19</u>
<u>Arrives Hamilton 23-19. To Newfoundland for demobilization</u>					<u>22-19</u>				
<u>Arrives Newfoundland 1-6-19</u>									
<u>Demobilization St John's</u>									<u>18-7-19</u>
Total Service forfeited as above.....									

Total Service towards Engagement to 18-7-19 [date of discharge] 1 years 249 days

" " Pensions " " " " " " " " " " " "

C.R. 4099

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.
St. John's, July 23/19.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i/c Records from 18-7-19.

4099 Pte. Cecil Read.

C.R. 4099

Extract from Daily Orders Part 11 Unit The Royal Nfld.

Regt. St. John's, July 5th, 1919.

The discharge of the undernoted on demobilization has been
APPROVED by O.C. Discharge Depot with effect from 2-7-19.

4099 Pte. C.Read.

C.R. 4099

Extract from Daily Orders Part 11 Depot. St. John's,

Date June 18th 1919.

4099, Pte. C Reid.

Reported at Headquarters 1/6/19. RE "Corsican"
which sailed Liverpool May 22/1919.

C.R. 4099

Extract from Nominal Roll 1st. Battalion
Royal Newfoundland Regiment dated 30-4-19.

The undermentioned of the 1st. Battalion
left Rouen Camps 22/4/19; embarked at
Havre 22/4/19; disembarked at Southampton
23/4/19 and reached Hazeley Down Camp
23/4/19.

#4099 Pte. C. Reid.

C.R. 4099

WOUNDED & SICK N.C.Os. & MEN OF THE EXPEDITIONARY FORCE - FRANCE.



222

L O N D O N - I N F A N T R Y R E C O R D O F F I C E .

LIST NO A34884.

880859 Pte. Hobday W. 34/Lond.R.
107278 Sjt. Chatterton W.H. 43/Roy.Fus.
116071 Pte. Swain J. 4/Roy.Fus.
, 9478 Pte. Bryen E.W. 20/K.R.R.C.

GSW, Head penet. S.W. Adm. 8 Sty. H. Wimereux 5 Feb. 19.
V.D.S. Mild. Adm. 8 Sty. H. Wimereux 11 Feb. 19.
V.D.S. Mild. Adm. 8 Sty. H. Wimereux 11 Feb. 19.
V.D.S. Mild. Adm. 8 Sty. H. Wimereux 11 Feb. 19.

B O A R D O F T R A D E .

LIST NO. H.A. 34884.

Mr. McIntosh L. H.L.S. "sedgepool" Merchant Marines.

Synov. Knee Mild. Adm. 8 Sty. H. Wimereux 9 Feb. 19.

N E W F O U N D L A N D E X P E D I T I O N A R Y F O R C E .

LIST NO. H.A. 34884.

4099 Pte. Reid C.H. 1/R.N'Fd. Inf.

Influenza. Dis. to Duty ex 3 Sty. H. Rouen 11 Feb. 19.

S O U T H A F R I C A N - R E C O R D O F F I C E .

LIST NO. H.A. 34884.

11331 Dvr. Stewe P.H. 1/S.A. Inf.

V.D.S. Mild. Adm. 8 Sty. H. Wimereux 10 Feb. 19.

C A V A L R Y - C A N T E R B U R Y .

LIST NO. H.A. 34884.

9584 Pte. Ford H.J. 4/Drag. Gds.

V.D.S. Mild. Adm. 8 Sty. H. Wimereux 11 Feb. 19.

R O Y A L A R M Y O R D N A N C E C O R P S .

LIST NO. H.A. 34884.

651516 Pte. Coppang G. 154/Lab. Co. late R.A.O.C.

Def. Vision. Adm. 4 Sty. H. Longuenesse 11 Feb. 19.

Extract from War Office List No. H.A. 34667.

4099
C.R.

ADMITTED 3 STY. H. ROUEN 2 FEB. 1919.

4099 PTE. G. REID.

N.Y. D. MILD.



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

C.R. 4099

INFANTRY RECORD OFFICE . . . P E R T H . . .

No.H.A.33510

ADM 6 CON DEP ETAPLES 22 DEC'18

42231	Pte Stewart P	.....	6/7 Gordons Rec Co	..Tender Scar Thumb.
41060	" Morrison C.		6 Camerons	Influenza.
50495	Cpl Edwards C.F		11 "	ICT Foot R.
49877	Pte Tyre D.		11 "	Influenza.
21964	" James J	.....	2 A & S Hrs	..... Debility.
21035	" Clunie A	... ..	8 R Hrs	..... Influenza.
42339	" Craig J		8 Seaforths	"
141236	" Chalmers G		51 Bn MGC (10 Gors.)	"
9710	" Gray H		1 Gordons HQ	ICT Foot R.&.L.
203461	Pte.Campbell F.		8 Seaforths.	Influenza.

DIS TO BASE DEP CLASS A EX 6 CON DEP ETAPLES 22 DEC'18

27991	Pte Francis T	.....	7 Seaforths	..... ICT Foot L
16100	Sgt McLeay J		4 Cam Hrs	ICT Toe R.
24089	Pte.Wilson R.N.		7 Seaforths.	Influenza.

22

CAVALRY . . . C A N T E R B U R Y . . .

No.H.A.33510

ADM 6 CON DEP ETAPLES 22 DEC'18

12297	Pte Wilston D	.....	9 Lancers	..... Alve Abscess.
39766	" Mather C.		3 Hussars	..... Contus Abd Wall.

NEWFOUNDLAND EXPEDITIONARY FORCE

No.H.A.33510

ADM 6 CON DEP ETAPLES 22 DEC'18

X	4099	Pte Read C	1 R Newfoundlands..	Influenza.
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C.R. 4099

Extract from Casualties List No. H. 133280.

4099 Pte. C. Read.

Admitted 20 Gen. H. Dames Caniers 7 Dec, 18.

Influenza mild.

C.R. 4099

Extract from Nominal Roll of Draft No. 85 and 81 Other
ranks from 2nd., Em. R. Mld. R. to 1st., Battalion
Newfoundland regiment B. E. F. Embarked Southampton
1/10/18.

Conducting Officer R/Lieut. W.G. Nunn.

#4099 Pte. C H Read.

BC.

C.R. 4099

Extract from Nominal Roll Draft (All Ranks) to 1st
Bn. B.E.F. Embarked Southampton.

4099 Pte. C.H. Read.

1-10-18.

C.R. 4099

Extract from Nominal Roll, embarked St. John's for Overseas per
S.S. FLORIZEL DECEMBER 11th 1917.

#4099 PTE. C. H. REID

C.R. 4099

Extract from Daily Orders Part 11 Unit The Royal
Hfld. Regt., St. John's, Nov. 13th, 1917.

4099 Pte. C.H. Reid.

Attested for General Service with the Hfld. Regt., posted
to "G" Coy, with effect from Nov. 12th, 1917.

G. H. Read

CR 4099

P. V. R. O.

Medical Report on an Invalid.

Station Wagley D CampDate 1. 5. 19

- | | |
|---|--|
| <p>1. Unit <u>Royal Newfed</u></p> <p>2. Regimental No. <u>4099</u></p> <p>3. Rank <u>Pvt</u></p> <p>4. Name <u>Reid Co.</u></p> <p>5. Age last birthday <u>19</u></p> <p>6. Enlisted { on <u>4. 7. 17</u>
at <u>St Johns</u></p> | <p>7. Former Trade } <u>Operator</u>
or Occupation }</p> <p>7A. If with previous service in Army, state—</p> <p>(a) Former Unit;</p> <p>(b) Regimental No.;</p> <p>(c) Date of Discharge;</p> <p>(d) Cause of Discharge.</p> |
|---|--|

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

nil

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. *nil*
10. Place of origin of disability. *nil*
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. *nil*
12. Give your opinion as to the causation of the disability, stating whether in your opinion it is— *nil*
- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
- (b) constitutional or hereditary, and not aggravated by service during the present war.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

He employs good dentures

14. If the disability is an injury, was it caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

n

15. Was a Court of Inquiry held on the injury?

- If so—
- (a) When?
 - (b) Where?
 - (c) Opinion?

n

16. Was an operation performed? If so, what?

n

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

n

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

n

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

v

Repatriation

20. Do you recommend—
(a) Discharge as permanently unfit, or
(b) Change to England?

not it
Major D. D. P.

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except †

Station *V. D. Camp*

Officer in charge of Hospital.

Date *1. 5. 19*

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

† Delete this word if no exceptions are to be made.

SIGNALLER'S RECORD SHEET.

Rgtl. No. 4099 Rank Pte Name & Initial Reed E.
 Unit Royal Newfoundland Regt.

STANDARD TESTS. (Details overleaf.)

No.	Map Reading		Electrical Instrument		Signal Training	
	Date	Officer's Sig.	Date	Officer's Sig.	Date	Officer's Sig.
1						
2						
3						
4						
5						
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26						
27						
28						
29						
30						

Qualified in all
 Standard Tests,
 J. M. H. Capt
 SEP 5 1918

CLASSIFICATION TESTS.

Instrument	Flag	Buzzer	Lamp	Shutter	Semaphore	Date
Sending	98%	100%	98%	98%	%	
Reading	98%	100%	99%	99%	%	

* R.A. Signaller only.
 Classified as 1st Class Signaller at Signal School, Devon Camp
 Date _____ Signature of Classifying Officer J. M. H. Capt
 Reclassified as _____ Class Signaller at _____
 Date _____ Signature of Classifying Officer _____

Courses

Other qualifications

NOTE.—This Sheet is to be used as an Office Record during training, and on completion pasted in the Signaller's A.B. 64.

MAP READING. STANDARD TESTS.

No. of Test.	DESCRIPTION OF TEST.
1.	Point out on a map the conventional signs of objects enumerated.
2.	From a map to point out on the ground points and objects selected on the map, and <i>vice versa</i> .
3.	Measure shortest distance from point A to B on a map according to scale.
4.	Set a map without a compass (a) by the ground. (b) by the sun and stars.
5.	Describe a point on a squared map by means of a map reference, and <i>vice versa</i> .
6.	Measure on a map the distance from one point to another by road.
7.	Set a map by compass.
8.	Determine if a point A is visible from point B by studying contours, but without drawing a section.
9.	Take a bearing with a protractor off a map.
10.	Convert a magnetic bearing into true bearing, and <i>vice versa</i> .
11.	Take a bearing with a compass and measure it on a map with protractor.

SIGNAL TRAINING. STANDARD TESTS.

1.	Accept a message including counting and filling in preamble.
2.	Fill in Sent Column on message form.
3.	Fill in Signal Register.
4.	Fill in Received Column on message form.
5.	Send and receive a verbal message on the telephone.
6.	Call up with (a) flag, known and unknown station. (b) buzzer. (c) ringing phone.
7.	Put through a call on a 4 plus 3 switch unit.
8.	VISUAL. Carry out duties of reader. (For R.A. Signallers includes Semaphore.)
9.	" " " caller. " " "
10.	" " " writer. " " "
11.	" " " answerer. " " "
12.	" " " answer-reader. " " "
13.	" " " sender. " " "
14.	LUCAS LAMP. Set up and align.
15.	" Replace cells.
16.	" Connect up cells.
17.	" Trace the electric circuit with a view to locating a fault.
18.	" Change a bulb.
19.	" Change nightshades.
20.	" Test flexible cord.
21.	TELESCOPE. Set up on stand and align.
22.	" Focus on a blue flag unreadable to the unaided eye and read a message.
23.	HELIOGRAPH. Set up and align with vane.
24.	" Change to duplex and align.
25.	" Regulate the beat.

ELECTRICAL INSTRUMENTS TESTS.

CELLS.	MISCELLANEOUS.
1. Render active.	
2. Connect in series and parallel.	
TELEPHONE D. III.	
3. Connect and insert cells and cell connections.	14. Connect up Fullerphone and Telephone on same circuit so that they may be used at the same time without interruption.
4. Test instrument.	15. 4 plus 2 Buzzer Unit. Connect up.
5. Localise and remedy the following faults:— (a) Adjustment of buzzer. (b) Dirty key contact. (c) Dirty Pressel switch contact. (d) Receiver discs and washers. (e) Microphone capsule.	LINEMAN'S DUTIES.
6. Connect up earth return, metallic return, and use of condenser terminal.	16. Identify lines by labels.
FULLERPHONE.	17. Draw and explain a simple circuit diagram.
7. Connect and insert cells and cell connections.	18. Draw and explain a simple route diagram.
8. Test instrument.	19. Make a reef knot, barrel hitch and clove hitch.
9. Localise and remedy the following faults:— (a) Adjust No. 1 or (A) contact of armature. (b) Adjust No. 2 or (B) contact of armature. (c) Dirty contacts.	20. Joint and insulate (a) D. II. } Single or (b) D. III. } Twisted. (c) D. V. } (d) D. twin Mk. III.
VIBRATOR, R.A.	21. Make simple joint in enamelled wire or single airline.
*10. Connect up hand set and cell connections.	22. Lay cable (a) in open country. (b) in trenches.
*11. Test instrument.	23. Tap in on (a) metallic circuit, (b) earth circuit, and determine on which side the fault is.
*12. Localise and remedy the following faults:— (a) Adjustment of buzzer. (b) Dirty key contact. (c) Dirty Pressel switch contact. (d) Receiver disc and washers. (e) Microphone capsule.	24. Test with Q. and I. detector— (a) cells; (b) a circuit, for disconnection earth and contact; (c) In order to pick up wires in a rope.
13. Connect up earth and metallic return.	

* R.A. only.

This space to be pasted in A.B. 64.

No. 5180/388

✓ c

#027562

NEWFOUNDLAND CONTINGENT



From:

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

To:

Officer Commanding,
2/Bn Royal Newfoundland Regt.
Winchester.

4th April 1918

April 6 1918

Subject: 4099, Pte. C. H. Read

With reference to the following telegram (3099) from the Hon. Minister of Militia, received 4/4/18

Pay to 4099 Read £3:0:0

Draft £3:0:0 is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

A. H. [Signature]
Chief Paymaster & O. i/c Records.

Receipt hereunder.

[Signature] Officer Comdg. Battn
1st Newfoundland Regiment
LIEUT. COLONEL.

Received the sum of Three Pounds on account of cable remittance from Newfoundland.

C. Read
No. 4099 Rank Plt

No. 10931/1057

N.F.P./79.

NEWFOUNDLAND CONTINGENT

From:

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

To: *[Signature]*
Officer Commanding,
2/Bn. Royal Newfoundland Regt.,
Winchester.

8th, July 1918

Subject: 4099, Pte. C. H. Reid C

With reference to the following telegram (6093) from the Hon. Minister of Militia, received

"Pay to 4099. Reid £2. 0. 0

Draft £ 2.0.0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

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

July 13 1918

Receipt hereunder.

[Signature] LIEUT. COLONEL.
~~COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.~~
Royal Newfoundland Regiment

Received the sum of Two

Pounds on account of cable remittance from Newfoundland.

C. Reid
No. 4099 Rank Private
Witness 1227 J. Murphy
[Signature]

No. 223/10/P&A. *hospital*

N.F.P./80.

From: NEWFOUNDLAND
Chief Paymaster & O.i/c Records,
Newfoundland Contingent,
58, Victoria Street,
London, S.W. 1.

CHIEF PAYMASTER & OFFICER I/C RECORDS.
NEWFOUNDLAND CONTINGENT,
58 VICTORIA STREET,
LONDON, S.W. 1.
1/Bn. Royal Newfoundland Regt.,
B. E. F. France.

5th January, 1919

24 - 1 1919

Subject: 4099, Pte. C. H. Reid,

ANSWER.

With reference to the following telegram (119) from the Hon. Minister of Militia, received

4099 Pte C. H. Reid

"Pay to 4099 Reid, £4.2.0.

The above soldier wishes this amount forwarded for payment please.

Kindly advise whether this amount should be remitted to you for payment to this Soldier, retained to credit of his account, or otherwise dealt with.

F. G. Mathias LIEUT. COL
COMMANDING 1st Bn. ROYAL NEWFOUNDLAND REGIMENT

F. H. Marshall
Chief Paymaster & O. i/c Records.

No. 2834/1.

From:

NEWFOUNDLAND

CONTINGENT

N.F.P./80.

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

To: Officer Commanding,
3 Sty. H. Rouen.

19th February 1919

4099. Pte. Read C.

With reference to the following telegram from the Minister of Militia, / / (34)

"Pay to- 4099. Read.

£3.0.0.

Kindly advise whether this remittance should be

- (1) forwarded to you for payment to this Soldier;
- (2) retained to credit of his account; or
- (3) otherwise dealt with.

A. J. ...
Chief Paymaster & O. i/c Records

*discharged to duty
11-2-19,*

191

*D.A.G. G.H.A.
3 Echelon*

*Passed to you please
This man was discharged
to duty 11-2-19.*

Alvin Rose
Major for Lieut. Col. R.A.M.C.
In Charge No. 3 Stationary Hospital



ASSISTANT & OFFICER I/C. RECORDS
NEWFOUNDLAND CONTINGENT
68, VICTORIA STREET,
LONDON, S.W. 1.
ENGL.

Ref. Rev.
4099 Ste. Reis

This man wishes this amount retained
to the credit of his account please

A. S. Newman
Capt 18476
LIEUT. COL
COMMANDING 1st Bn. ROYAL NEWFOUNDLAND REGIMENT.

Deposited
18/3/19



Forward to you please
with the Battalion

Pt. Berlin

the man being

No. 2834/1.

From:

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

NEWFOUNDLAND

CONTINGENT

N.F.P./80.

To: Officer Commanding,
3 Sty. H. Rouen.

19th February 1919

4099. Pte Read C.

With reference to the following telegram from the Minister of Militia, / / (34)

"Pay to- 4099. Read.

£3.0.0.

Kindly advise whether this remittance should be

- (1) forwarded to you for payment to this Soldier;
- (2) retained to credit of his account; or
- (3) otherwise dealt with.

Chief Paymaster & O.i/c Records

*discharged to duty
11-2-19,*

191

*D.A.C. 9 HQ.
3 Echelon*

*Passed to you please
This man was discharged
to duty 11-2-19.*

Attn Rose
Major *R.A.M.C.*
In Charge No. 3 Stationary Hospital



ASST. & OFFICER I/C. RECORDS
NEWFOUNDLAND CONTINGENT
10, VICTORIA STREET,
LONDON, S.W. 1.
ENGL.

Ref. Rev.
4099 Ste Reis

NEWFOUNDLAND CONTINGENT
10, VICTORIA STREET
LONDON, S.W. 1
11 MAR 1919
PAY & RECORD OFFICE

This man wishes this amount retained
to the credit of his account please

A. S. Newman
Capt Rtdy
LIEUT. COL.
COMMANDING 1st Bn. ROYAL NEWFOUNDLAND REGIMENT.

Deposited
18/3/19

Ernest
Berry

1umped to you please
with the Battalion

O.E. M. Berlin

Lead, L

4099

Ray Sept.

July 21, 1919

#4099 Pte. Cecil Read,
Chamel.

Dear Sir:-

Please find enclosed Discharge Certificate #4099.

Yours truly

Captain & Paymaster.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4099 Rank Pfc. Name Read C
 Intended place of residence Channel

2. Occupation Telegraph Operator
 Classification of soldier E Medical Category A 1

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 JUL 2 1919

H. M. [Signature]
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place, ST. JOHN'S
 Date 2-7-19

C. Read
 Signature of Soldier

[Signature]
 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, ST. JOHN'S
 Date 2-7-19

C. Read
 Signature of soldier

James Sheroman
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 12-11-17 No. of days on Military
 Discharged from service 4-7-19 Plus 14 days Service 614

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.

Place, ST. JOHN'S
 Date JUL 4 1919

Red [Signature] Major
 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
 Date July 18/1919

[Signature]
 Officer i/c Records
 The Royal Newfoundland Regiment

a 713 2079 / 3112

The Royal Newfoundland Regiment

Class for Demobilization:—

16

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *30.6.19*

Regimental No *4099*

Name *Head Cecil*

Rank *Pte.*

Address *Channel*

Present Medical Category *A7*

Recommended for:— (a) Immediate discharge

(b) ~~Standard Medical Board~~

Members of Board

R H Last Major
O.C. Discharge Depot.

H Peterson
Senior Medical Officer

D W Burden
~~M. O. Depot~~

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 4099 Rank Pvt. Name Read C
 Date of Enlistment 12-11-17 Address Channel District St. John's
 Occupation Telegraph Operator Classification for Discharge E Medical Category A1
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. 136	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 30-6-19

O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

C. Read

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.50

(b) Clothing Supplied _____

Date 2-7-19

O i.c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. B211D to his home at Channah and Release Certificate No. 3086 issued.

Date

2-7-19

J.A. Newbatt
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 18-7-19

Date

2-7-19

H. J. [unclear]
Depot Paymaster.

Discharged approved for

4-7-19

Forwarded with following documents to O.C. Discharge Depot.

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
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
B179c	B 120	M 93		

2 Form B

Date

2-7-19

J.A. Newbatt
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer in Charge Records,
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date

JUL 4 1919

R.H. Sait MAJOR
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 resume former Occupation.

C. Read

Signature of Man.

Reg. No. 4099

J. H. Knowlton

Signature of the Vocational Officer or his Representative.

ST. JOHN'S.

Place

Date JUL -2 1919

191

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

MEDICAL HISTORY

Surname Reed OF Christian Name Leslie H.

Table I.—GENERAL TABLE.

Birthplace:—Parish Channah County Windsor

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	12 th	Nov		
	at	St. Johns.	at	
Declared Age	18	years		
Trade or Occupation	Telegraph Operator			
Height	5	feet		
Weight		126 lbs.		
Chest Measurement	Girth when fully expanded			
	34	inches		
Physical Development	Range of Expansion			
	4	inches		
Vaccination Marks	Right	Left	Right	Left
	/	/		
When Vaccinated				
Vision	R.E.—V	6/4	R.E.—V	
	L.E.—V	1/2	L.E.—V	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Samuel Paterson</u>			
(Rank)	Major			
	Medical Officer.			
Enlisted	at	St. Johns	at	
	on	12 th day of Nov	on	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
Transferred to	1st Wfla	Regt!		4099
Became non-effective by	on	day of	on	day of
		191		191
[Signature]				
[Rank]				



Descriptive Return of a Soldier Discharged on Account of Disability

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

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

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

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

Name in full *Cecil Reed*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4099*

Intended address *Channel*

Height on discharge *5 Feet 10*

Color of hair on discharge *Light brown*

Complexion *Fair*

Color of eyes *Gray*

Descriptive Marks *—*

Figure on discharge *medium*

Christian name of Father *Jack*

Christian name of Mother *Lillian*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Channell 23-4-age 17-1902*

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) *Cecil H Reed*

(Rank) *DE*

Station *St Johns*

Date *June 30-6-19*

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.

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

Station

Date

Medical Report on an Invalid.

Station Hazelton
 Date 1-5-19

1. Unit Royal Newfoundland Former Trade } Operator
 or Occupation }
 2. Regimental No. 4099
 3. Rank Pte
 4. Name Reid C.
 5. Age last birthday 19
 6. Enlisted { on 4-7-17
 at St John's
- 7A. If with previous service in Army, state—
 (a) Former Unit;
 (b) Regimental No.;
 (c) Date of Discharge;
 (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.
 (Other disabilities should be reported upon in answer to question No. 19).

nil

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. nil
10. Place of origin of disability. nil
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. nil
12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3). nil
 - (b) constitutional or hereditary, and not aggravated by service during the present war. nil
 - (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

He complains of no disability

14. If the disability is an injury, was it caused—

na

(a) In action?

(b) On field service?

na.

(c) On duty?

(d) Off duty?

15. Was a Court of Inquiry held on the injury?

na

If so—(a) When?

(b) Where?

(c) Opinion?

16. Was an operation performed? If so, what?

na

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

na.

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

na.

20. Do you recommend—

- (a) Discharge as permanently unfit, or
(b) Change to England?

Repatration

M. J. J.
May 1919

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except †

Station *Hazley Down*

Officer in charge of Hospital.

Date *1-5-19*

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

† Delete this word if no exceptions are to be made.

Casualty Form—Active Service.

Regiment or Corps *Royal Newfoundland*
 Rank *Plt* Surname *Reed* Christian Name *H. Cecil A. Reed*
 Religion *C of E* Age on Enlistment *18* years months
 Enlisted (a) *12-11-17* Terms of Service (a) *Duration* Service reckons from (a) *12-11-17*
 Date of promotion to present rank Date of appointment to lance rank

Extended Re-engaged Qualification (b)
 Occupation *Operator* or Corps Trade and rate Signature of Officer *H. Reed*

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked ...	1 OCT 1918		
		Disembarked	4 OCT 1918		
	<i>64 CCS</i>	<i>James Reed</i>	<i>8/10/18</i>	<i>29/11/18</i>	<i>E.O 9880</i>
	<i>44 CCS</i>	<i>"Influenza"</i>		<i>2/12/18</i>	<i>E.O 141</i>
	<i>20 Gen Hp</i>	<i>Dames Barrero</i>		<i>4/12/18</i>	<i>HA 32800</i>
<i>3.1.19</i>	<i>06.10.18.19</i>	<i>James Reed</i>	<i>Ronen</i>	<i>1.1.19</i>	<i>Roll</i>
		<i>Rejoined unit 14/1/19</i>		<i>B213 15/1/19</i>	
	<i>3 Stab Hop Ronen</i>	<i>Adm. Influenza</i>		<i>2/1/19</i>	<i>H1 34667</i>
		<i>Discharged to Duty</i>		<i>11.2.19</i>	<i>B213 - 15/2/19</i>
		<i>Arrived in UK</i>		<i>9/3/19</i>	

(a) In the case of a soldier who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shosong-Smith, Ltd.

sent to Ken, Jack Reed, Clarendon, Newfoundland

July 24, 1919

#4099 Pte. Cecil Reed,
Channel,
Port au Basque.

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

Captain & Paymaster.

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..... *Leil* 2. Surname..... *Reid*

3. Rank..... *Private* 4. Regtl. No. *4099*

5. Address in full to which future payments of gratuity are to be forwarded..... *Port au Basque Channel*

6. Date of enlistment in the Regiment..... *5th Oct. 1914*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge..... *None*

8. Relationship of such dependents..... *—*

9. Address in full of such dependents..... *—*

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

11. Were you on active service only in field, if so, give dates and particulars of such service. *France Belgium Germany*

12. Give total length of time which you served on active service, whether in field or Overseas..... *One year & eight months*

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

..... *No*

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

..... *No*

15. Have you been issued with a War Service Badge? *No*

16. Have you, during the present war, served in the Imperial Forces? *No*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *No*

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *No*

(b) If so, was such reversion in consequence of Misconduct or inefficiency? *No*

19. Are you now serving in the Regt.? *No*... If not give? - (a) Date of discharge *2nd July 1919*. (b) Reason for discharge. *Demob.*

.....

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

..... *France Belgium Ypres Leidinghem*

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.

4099

August 30, 1919

C.A. Read,
C/o Wireless Station,
Quebec.

Dear Sir:

With reference to your
letter of July 20th. I beg to advise you
that your War Service Gratuity was paid to
J.J. Collins, as per order.

Yours truly,

Capt.
For Paymaster

ST. JOHN'S, July 2nd /19

Royal Newfoundland Regiment.

Billeting Account,

To H. C. Read

Billeting Soldiers as undermentioned

from June 1st /19 to July 4th /19

4099 H. C. Read 35 40

ACCOUNT	<u>B. & M.</u>
GR. NO.	<u>2013</u>
INITIALS	<u>[Signature]</u>
GEN. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

Certified correct for \$ 35 40

N.Y.

[Signature]
Billeting Officer
C. Read

Receipt for Army Book 64

No. 4099 Name *Read*

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

Name *P. Read*
Pvt H. P. Read

Date *Sept 20/20*

Place *Channel*

Letter from

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

H. P. 13 1/2

Receipt for Army Book 64

No. 4099

Name C. H. Reader

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

Name C. H. Reader
per H. J. Read

Date Oct. 20/20

Place Channel

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

13 1/2
M

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Number of Sheet ONE

Regiment of 1st Newfoundland

Signature of O. C. Company [Signature]

Regimental Number and Name	
No.	<u>4099 Read. G. H.</u>
Joined	Date
Joined	Date
Joined	Date
Joined	Date

Enlistment	
Age on	<u>18 years - months</u>
Place and Date of Enlistment	<u>St. Johns 12-11-17</u>
Period of	with Colours <u>249 years.</u>
	with Reserve <u>365 years.</u>

Trade	<u>Operator</u>
Religion	<u>C of E.</u>
Place of Birth	

Good Conduct Badges, Service pay or proficiency pay

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<u>Hazelton Down Camp</u>	<u>23/1/18</u>	<u>Pte.</u>		<u>Loss of equipment belt</u>	<u>Cpl. Delaney</u>	<u>Pay for deficiency</u>	<u>23/1/18</u>	<u>Lt. Col. Berners D.S.O.</u>	<u>[Signature]</u>
"	<u>2/6/18</u>	"		<u>Inattention on Parade</u>	<u>Cpl. Watts</u>	<u>2 days C. B.</u>	<u>4/6/18</u>	<u>Capt Emerson</u>	
"	<u>10.7.18</u>	"		<u>Talking while marching at attention</u>	<u>" Gosse</u>	<u>3 " C. B.</u>	<u>11.7.18</u>	<u>1/Lt Power.</u>	<u>A. F. P.</u>
"	<u>21-7-18</u>	"		<u>Absent from Church parade</u>	<u>" watts</u>	<u>3 days CB</u>	<u>22.7.18</u>	<u>Capt M. Long</u>	<u>M.H.</u>
"	<u>23/1/18</u>	"		<u>Disly on parade</u>	<u>" watts</u>	<u>4 days CB</u>	<u>23/1/18</u>	<u>1/Lt Gasland</u>	<u>M.H.</u>
<u>Demobilized St. Johns, 18/7/19</u>									

To be carried over

The Royal Newfoundland Regiment

4099

DEMOBILIZATION OF

Reg. No. 4099 Rank Pr. Name Read, C
 Date of Enlistment 12-11-17 Address Channel District St. John's
 Occupation Telegraph Operator Classification for Discharge E Medical Category A1
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. 136	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 30-6-19 O. C. Discharge Depot. [Signature]

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

C Read

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.50

(b) Clothing Supplied _____

[Signature]

Date 2-7-19 O i.c. Re-clothing _____

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. P2110 to his home at Sharnel and Release Certificate No. 308.6 issued.

Date 2-7-19

J.A. Newbapt
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 15-7-19

Date 15-7-19

J.A. Newbapt
Depot Paymaster.

Discharge approved for 4-7-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. P136	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
B179c	B 120	M 93		

2 Form B

Date 2-7-19

J.A. Newbapt
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—
Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

JUL 4 1919

Date

R.H. Lunt MAJOR
O. C. Discharge Depot.

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

Date July 18/1919

J.A. Newbapt
for Records

Reg. No. *4099* Rank *Pte* Name *Reid, C.A.*

Attested Address *Channel*

Allotment..... Allottee

Date of Allotment..... Returned from Overseas *29-5-19*

Returned on S.S. *Corsican* Cause *Discharge*

29.19
27 19

PASSED TO DEMOBILIZATION OFFICER.

DISCHARGE APPROVED ON DEMOBILISATION.

M-4099

October 31st., 1934.

TO WHOM IT MAY CONCERN:

This is to certify that M-4099 -
CECIL H. READ, of Channel, Nfld., enlisted
with The Royal Newfoundland Regiment on
November 12th., 1917, and was discharged,
under demobilization, on March 18th., 1919,
having served one year and 249 days.

A handwritten signature in dark ink, appearing to be the name of the secretary, written in a cursive style.

SECRETARY.

March 12, 1935.

The following is the War Service Record of:

C. H. READ, ex-Private #4099, Royal Nfld. Regt.

Enlisted November 12, 1917.

Honourably discharged, July 18, 1919.

Embarked for United Kingdom 11-12-17;
embarked for B. E. F. 1-10-18; rejoined Battalion
3-10-18; admitted #64 C. C. S 29-11-18; admitted
#44 C. C. S., Influenza, 2-12-18; rejoined Unit
14-1-19; admitted 3rd. Stationery Hospital Rouen,
2-2-19; discharged to duty and rejoined Unit 11-2-19;
Transferred to Rouen 22-4-19; arrived Winchester
23-4-19. Embarked for Newfoundland 22-5-19; de-
mobilization St. John's, 18-7-19.

CLERK to DEPT. OF WAR PENSIONS.