



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5279 Name Arthur Rice Corps RC

Questions to be put to the Recruit before Enlistment

- | | |
|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| 1. What is your name? | 1. <u>Arthur Rice</u> |
| 2. What is your full Address? | 2. <u>Cape Bonaventure Georges Bay</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>19</u> Years |
| 5. What is your Trade or Calling? | 5. <u>Internan</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? | <u>Yes</u> |

I, Arthur Rice 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.

Arthur Rice SIGNATURE OF RECRUIT.
R. Bayley Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Arthur Rice 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 21 day of May 1918
 Signature of Attesting Officer C. Dicks, 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 May 20 1918
 Place St. John's 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)

DESCRIPTIVE REPORT ON ENLISTMENT

5279

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

Name Arthur Rice

Apparent age 19 years months. Height 5 feet 10 1/2 inches

Chest Measurement { Girth when fully expanded 36 inches
 { Range of expansion 4 inches

Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Patrick Rice
Capt. Brayle Ferry Street Relationship Yatter

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or L'epot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pny		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards (lighter) engagement reckons from <u>21-5-18</u>									
Joined at <u>Stoke's</u> on <u>21-1-1918</u>									
<u>Discharged August 11/11/1919</u>									
<u>Embarked Stoke's S.S. Columella to Halifax N.S. 22-7-18</u>									
<u>To left for demobilization 24-6-1919</u>									
<u>Arrived home 1-7-1919</u>									
<u>Demobilization Stoke's 11-8-1919</u>									
Total Service forfeited as above.....									
Total Service towards Engagement to <u>11-8-1919</u> (date of discharge) <u>1</u> years <u>83</u> days									
Pensions " " " " " " " " " " " "									

C.R. 5279

**Extract from Daily Orders Issued By Major E.S. Sullivan,
Commanding Newfoundland Forestry Companies 6-18-18.**

**The undermentioned having proceeded for duty
from 2nd, Bn. Royal Wfld. Regt. is attached to the
strength for rations from this date, and posted to
"G" Company**

5279 Pte. A. Rice.

C.R. 5279

Extract from Daily Orders Part II Royal Newfoundland Regt.
Depot St. John's dated Aug. 21st 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by officer i/c Records from noted date 12-8-19.

5279, Pte. Arthur Rice.

C.R. 5279

Extract from Daily Orders Part II Royal Newfoundland Regiment
Depot St. John's dated July 19th 1919.

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

28-7-19.

5279, Pte. A. Rice.

C.R. 5279

Extract from Daily Orders Report Unit The Royal Nfld.
Regt. St. John's, July 3rd, 1919.

Reported at Headquarters 1-7-19 at "Cassandra" which sailed
5279 Pte. A. Rice.

Reported at Headquarters 1-7-19 at "Cassandra" which
sailed Glasgow June 24th, 1919.

Extract from Daily Orders Report Unit The Royal Nfld.
Regt. St. John's, July 3rd, 1919.

C.R. 5279

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

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

#5279 Pte. Arthur Rice.

C.R. 5279

Extr ct from Daily Orders part 11, from Unit The Royal
Hfld. Regt. St. John's, dated May 22, 1918.

#5279 Pte. Arthur Rice.

Attested for General Service with the Royal Hfld. Regt.
from 21~~5~~5/18 to report 30.5.18.

A. L. Rice

C.R. 5279

1870

No. 15878/1646

N.F.P. /79.

From: NEWFOUNDLAND CONTINGENT

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

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

September 30th, 1918

Oct 3 1918

Subject: 5279, Pte. A. Rice,

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

"Pay to 5279, Pte. A. Rice, £2.0.0.

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

W. J. Rice
Chief Paymaster & O. i/c Records.

Receipt hereunder.

H. Barton LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.,
Officer Commdg. Batt'n
Royal Newfoundland Regiment

Received the sum of Two
pounds on account of
cable remittance from Newfoundland.

A. Rice

No. 5179 Rank Pte

Witness P. W. Johnson
CSW

19927/2246/P&A

SUSPENSE CLEARED

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

Officer Commanding,
2/Bn.R.Nfld.Regt.
Hazeley Down Camp,
Winchester.

WF/BC

Pay and Record Office.

4th December 8.

POSTAL DRAFT. £2:0:0.

Reference your memo 30/11/18
(10351) : Date has been
amended and draft is returned
for payment.

312

049301
FC

Major.
Chief Paymaster & O.I/c. Record

5209. R. New, A

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

The attached Postal Draft is void owing to it not being cashed within the specified time. Will you kindly renew it, please.

Hazelkey Down Camp,
Winchester,
Nov. 30th 1918.

NEWFOUNDLAND CONTINGENT, PAY & RECORD OFFICE.	
Ref. Nos. IN	10351
Ack'd	Ans'd
Ref. Nos. OUT	19927/2246
BY <i>M. J. Baxton</i>	
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.	
P. & A.	
R. & C.	
B. & E.	
P. S.	

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

The attached Postal Draft is void owing to it not being cashed within the specified time. Will you kindly renew it, please.

Hazelkey Down Camp,
Winchester,
Nov. 30th 1918.

NEWFOUNDLAND CONTINGENT, PAY & RECORD OFFICE.	
Ref. Nos. IN	10351
ACK'D	Ans'd
Ref. Nos. OUT	19927/2246
BY <i>M. J. Baxton</i>	
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.	
P. & A.	
R. & C.	
B. & E.	
P. S.	

No. 6829/1077

N.F.P./79.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
2nd Batt. Ryl. Nfld. Regiment
Winchester

6th May 1919

5279 Pte. A. Rice

With reference to the following
telegram from the Minister of
Militia / / (171)

"Pay to- 5279 A. Rice

£3. 0. 0.

Cheque £3. 0. 0. is enclosed
for payment to this Soldier.

Kindly obtain his receipt
hereon.

Chief Paymaster & O. i/c Records.

RECEIVED
MAY 12 1919
WINCHESTER

May 12 1919

Receipt hereunder.

J. Seymour
LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

Received the sum of £3. 0. 0.

Three pounds. in respect of
telegraphic remittance from the
Minister of Militia.

A. Rice
No. 5279 Rank Plt.

Witness *Geo. Perry*

No. 8368/1571

P.D. 100150
25

N.F.P. / 190.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
2nd Batt. ⁴yl. Nfld. Regiment
WINCHESTER HANTS.

5th June 1919

June 6th 1919.

5279 Pte. A. Rice

Receipt hereunder.

With reference to the following telegram to the Minister of Militia / / 19 (219):

J. Heyman for LIEUT. COLONEL,
OFFICER COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

"Pay to- 5279 A. Rice
£2. 0. 0.

Cheque £ 2. 0. 0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Received the sum of £ 2. 0. 0
Two Pounds in respect of telegraphic remittance from the Minister of Militia.

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

A. Rice
No. 5279 Rank Pte

Witness: H. White

No. 2426/812.

N.F.P./79.

FROM NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
2nd/Bn. Ryl Nfld Regt.

Winchester

12th February 1919

Feb. 14th 1919

5279. Pte Rice. A.

With reference to the following
telegram from the Minister of
Militia / / (15.)

Receipt hereunder
Exam'd LIEUT. COLONEL,
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.
Officer Commdg. 2nd Batt'n.

"Pay to-5279. Rice. A.

£4.0.0.

Received the sum of £4.0.0.

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

Four Pounds in respect of
telegraphic remittance from the
Minister of Militia.

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

A. Rice
No. 5279 Rank Pte.

Witness Geo. Perry

Rice, A

5279

Ray Sept.

8

August 14, 1919

#5279 Pte. Arthur Rice,
Cape Broyle.

Dear Sir:-

Please find enclosed Discharge Certificate #3748.

Yours truly,

Captain & Paymaster.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5779 Rank Pvt Name Rice R
 Intended place of residence Cape Broyle Newfoundland

2. Occupation Fisherman
 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 15 1919

Mrs. H.
 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 JUL 14 1919

R. Rice
 Signature of soldier

W. M. Johnston
 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 JUL 14 1919

R. Rice
 Signature of soldier

James O. Newman
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 21-5-18 No. of days on Military
 Discharged from service JUL 28 1919 Plus 14 days Service 448

APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S

Date JUL 28 1919

D. R. Cooper Capt
 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 August 11/1919

W. Bowley Capt
 Officer in Charge
 The Royal Newfoundland Regiment

OSB 5079/3748

11
20
31
11
83

The Royal Newfoundland Regiment

Class for Demobilization:—

E.

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

July 12/19

Regimental No. *5279*

Name

Rice Arthur

Address

Cape Breton

Present Medical Category

A1

Recommended for:— (a) Immediate discharge

(b) ~~Standing~~ Medical Board

A. R. Coope Capt.
O.C. Discharge Depot.

Members of Board

W. Parsons
Senior Medical Officer

J. W. Borden

M.O. Depot

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 52774 Rank Private Name Reverie
 Date of Enlistment 21.5.48 Address Cape Breton District St. John's
 Occupation Instrument Classification for Discharge K Medical Category A I
 Recommendation S.M.B. Disability Rating

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 July 1949O. C. Discharge Depot. St. John's

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable. \$60.00(b) Clothing SuppliedDate 14-7-49

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. P2431 to his home at Bope Broyle and Release Certificate No. 3566 issued 15-7-19

Date 15-7-19

Alfred Tomlinson
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 11-8-19

Date 15-7-19

H. M. News
Depot Paymaster.

Discharge approved for 28-7-19

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	400B	Form L	do 3rd	" 4
B 179a	400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 15-7-19

Alfred Tomlinson
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 11th 28 1919

A. R. Cooper 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 resume former Occupation.

A. P. Rio

Signature of Man. *6*

W. M. Loush

Reg. No. *5279*

Signature of the Vocational Officer or his Representative.

Place

ST. JOHN'S.

Date

14-7-18

191

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

MEDICAL HISTORY

Surname Rice OF Christian Name Arthur

Table I.—GENERAL TABLE.

Birthplace:—Parish Cape Breton County Nfld

	SPECIAL RESERVE		REGULAR ARMY	
	Right	Left	Right	Left
Examined	on <u>21</u> day of <u>May</u> 191 <u>8</u>		on _____ day of _____ 191 <u> </u>	
	at <u>S. Johns</u>		at _____	
Declared Age	<u>19</u> years _____ days		_____ years _____ days	
Trade or Occupation	<u>Fisherman</u>		_____	
Height	<u>5</u> feet <u>10 1/2</u> inches		_____ feet _____ inches	
Weight	<u>145</u> lbs.		_____ lbs.	
Chest Measurement	Girth when fully expanded... <u>36</u> inches		_____ inches	
	Range of Expansion... <u>4</u> inches		_____ inches	
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R. E.—V= <u>6/15</u>		R. E.—V=	
	L. E.—V= <u>6/15</u>		L. E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Laurel Peterson</u>			
(Rank)	<u>Major</u>			
	Medical Officer.		Medical Officer.	
Enlisted	at <u>S. Johns</u>		at _____	
	on <u>21</u> day of <u>May</u> 191 <u>8</u>		on _____ day of _____ 191 <u> </u>	
Joined on Enlistment	<u>The Royal</u>	<u>5279</u>	_____ Corps	_____ Regtl. No.
	<u>Nflders</u>			
Transferred to				
Became non-effective by	on _____ day of _____ 191 <u> </u>		on _____ day of _____ 191 <u> </u>	
(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 *Arthur Price*

Regiment from which discharged **Royal Newfoundland**

Regimental number *5279*

Intended address *Cape Booye*

Height on discharge *5 Feet 10 1/2*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Gray*

Descriptive Marks *—*

Figure on discharge *Medium*

Christian name of Father *Catuck*

Christian name of Mother *Bona*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Cape Booye - 12-4 age 20 - 1899*

Nature and locality of civil employment required

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

(Soldier's signature in full) *A Price*

(Rank) *Pte*

Station *St. Johns*

Date *July 5th 1919*

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

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 New South Wales*
2. Regtl. No. *5277* 3. Rank. *plc*
4. Name *Rice* *Arthur*
(Surname) (Christian Names)
5. Age last birthday *20*
6. Posted for duty on at
in category (or grade)
7. Former Trade or Occupation } *Yeoman*
- 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps ;
with Regtl. Nos.
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty ?
9. If a Court of Inquiry was held on an injury state :—
(a) When (b) Date of Discharge ;
(b) Where (c) Cause of Discharge.
(c) Opinion of Court (d) Particulars of Pension or Gratuity
(if any)

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 a (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. *nil*
12. Place of origin of disability. *nil*
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. *nil*

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

He complains of no Disability

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, 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 ?
(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 ?

Repatriation

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.*

W.S. Proctor *Captn Raine*

Medical Officer in charge of case.

Station *Bozley Down*

Date *10/4/19*

* 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

Rice

Thrup. treated in Camp
the hospital was free.
Rec. Lumps to Fr. Br.
necessary to recovery.

W. S. W.

August 16, 1919

Mr. Arthur Rice,
Cape Broyle,
Ferryland Dist.

Dear Sir:-

Referring to your application I enclose cheque for
Seventy dollars (\$70.00), being amount of first payment due
you on account of 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 26th. 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 Gothar 2. Surname Rice
3. Rank Pte. 4. Regtl. No. 5279
5. Address in full to which future payments of gratuity are to be forwarded Cape Broyle, Ferryland
6. Date of enlistment in the Regiment May 21/18
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
8. Relationship of such dependents.....
9. Address in full of such dependents.....
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....
11. Were you on active service only in field, if so, give dates and particulars of such service..... Overseas
12. Give total length of time which you served on active service, whether in field or overseas..... From May 21/18 to July 15/19

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.

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

No.

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

No.

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

No.

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

No.

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

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

No.

Temporary

Demobilization

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

No.

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

No.

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

Arthur Price

Signature of Applicant:

Place of Residence:

Cape Breton, P. E. I.
S. John's, Nfld.

Declared before me at:

This

18th day of *July* 19*19*....

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

John McCarthy

POST DISCHARGE PAY.				Net amount due
Date paid	to	for	War Service Certificate	
.....
.....
.....
Certified correct.			Registrar

ST. JOHN'S,

July 15/19

Royal Newfoundland Regiment.

Billeting Account,

To Pte. A Rice

Billeting Soldiers as undermentioned

from July 1/19 to July 13/19

\$279 Pte. A. Rice 13 80

ACCOUNT	- B + m
GH. NO.	3036 INITIALS - EW
IND. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

1380

Certified correct for \$

W. Blouin

Billeting Officer.

Arthur Rice

Colts.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of The Royal Field

Number of Sheet 021

Signature of O. C. Company C. S. Dicks / [Signature]

Regimental Number and Name
No. 1279 Kici Arthur
Joined _____ Date _____
Joined _____ Date _____
Joined _____ Date _____
Joined _____ Date _____

Enlistment
Age on 19 years months
Place and Date of Enlistment St. John's
12-5-16
Trade Fisherman
Religion R.C.
Period of with Colours 83 years.
 with Reserve 36 years. Place of Birth Cape Breton

Good Conduct Badges, Service pay or proficiency pay

Place	Date of Offence	Rank	Case of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<u>Nazareth, N. Camp</u>	<u>16.9.18</u>	<u>Pte</u>		<u>Duty on Parade 10</u> <u>(Worn shoes, duty boots, belt)</u>	<u>Pt. Summers</u>	<u>3 days CB</u>	<u>17.9.18</u>	<u>Capt M. Long</u>	<u>17th</u>
				<u>Demobilized</u>	<u>St. John's</u>	<u>11/19</u>			

To be carried over.

Army Form B. 121.

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 5271 Rank Pvt Name Rice A
 Date of Enlistment 21.5.18 Address Cape Breton District England
 Occupation fisherman Classification for Discharge Medical Category A I
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

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

Date July 17/19 O. C. Discharge Depot. H. M. W. H.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

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

Particulars passed to Vocational Officer for information and action.

Date Eligible for War Service Credits

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable. #60.00
- (b) Clothing Supplied Amble Croston

Date 14-7-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. P24.31 to his home at Bope Broyle and Release Certificate No. 3566 issued Chas. Conner

Date 15-7-19 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 11-1-19

Date 15-7-19 Depot Paymaster

Discharge approved for 28-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1	
F 178	W 3494	B 122	Board 1st	" 2	1
B 178a	D 400A	1915	do 2nd	" 3	2. Form B
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 15-7-19 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

JUL 20 1919

Date N.R. Cooper Capt.
 O. C. Discharge Depot.

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

Date Aug 7/19

Reg. No. *1279* Rank *Pvt* Name *Lill, A*
Attested Address *Cape Broyle*
Allotment Allottee ..
Date of Allotment Returned from Overseas *JUL 1 1919*
Returned on S.S. *Castandra* Cause *discharge*

157 19
227 19
PASSED TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED ON DEMOBILISATION.

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class F., or P. (T), of the Reserve.
In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service for 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*
2. Regtl. No. *5279* 3. Rank..... *Pvt*
4. Name..... *Kic* *Arthur*
(Surname) (Christian Names)
5. Age last birthday..... *20*
6. Posted for duty on..... at.....
in category (or grade).....
7. Former Trade or Occupation } *Fisherman*
- 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps ; with Regtl. Nos.
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 (if any)
(b) Where
(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. *nil*
12. Place of origin of disability. *nil*
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. *nil*

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. } .. .. . | ..... | ..... |

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

He complains of no Disability

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?
(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?

Reputation

20. Do you recommend—
- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?

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

W. E. Procmier *Coffey*
Name

Station *Razley Barr*

Medical Officer in charge of case.

Date *6/4/19*

* 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