



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5828 Name Willis Rideout Corps S.A.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|--------------------------|
| 1. What is your name? | 1. <u>Willis Rideout</u> |
| 2. What is your full Address? | 2. <u>Self Cove</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>18</u> Years |
| 5. What is your Trade or Calling? | 5. <u>Mechanic</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, Willis Rideout 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.

Willis Rideout SIGNATURE OF RECRUIT.
20-7-18 Corps of Daymond Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Willis Rideout 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 Self Cove on this 20 day of July 1918
 Signature of Attesting Officer C. D. Dickson Lieut.

†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 2nd Company
 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).....



THE ROYAL NEWFOUNDLAND REGIMENT

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| 1. What is your name? | 1. <u>Willis Rideout</u> |
| 2. What is your full Address? | 2. <u>Hilt Cove</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>18</u> Years |
| 5. What is your Trade or Calling? | 5. <u>Mechanic</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, Willis Rideout 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.

Willis Rideout SIGNATURE OF RECRUIT.

20-7-18

Corps of Raymond Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Willis Rideout 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 20 day of July 1918

C. D. Dickson Signature of Attesting Officer

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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.....1918 } Approving Officer.
Place.....

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

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DESCRIPTIVE REPORT ON ENLISTMENT

5828.

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

Name Willie Rideout
 Apparent age 18 years months. Height 5 feet 4 1/2 inches
 Chest Measurement { Girth when fully expanded 37 inches
 { Range of expansion 5 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Albert Rideout
Felt Cove on D B | 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>20-7-18</u>									
Joined at <u>St. John's</u> on <u>July 20-1918</u>									
<u>Discharged July 27/19</u>									
		Admitted Field Street		23 3/8					
		Discharged do do		27 7/8					
		Admitted Barracks Hospital		4 3/8					
		Discharged do do		10 3/8					
		Admitted General Hospital		1 3/8					
		Discharged do do to Eskasoni		28 3/8					
		Discharged from Eskasoni		14 3/8					
		Admitted General Hospital		25 3/8					
		Discharged do do to Barracks Hospital		29 3/8					
		Transferred from Barracks Hospital to General Hospital		2 3/8					
		Transferred from General Hospital to Barracks Hospital		16 3/8					
		Discharged from Barracks Hospital July 27 1919		2 3/8					
Total Service forfeited as above.....					<u>Remobilization</u> <u>St. John's</u> <u>27-1-1919</u>				
Total Service towards Engagement to <u>27-1-1919</u> (date of discharge) years <u>19 1/2</u> days									
" " Pensions " " " " " " " " " " " "									

C.R. 5828

Extract from Daily Orders Part II Unit The Royal WFLA.
Regt., St. John's, Jan. 29th, 1919.

The Discharge of the Undernoted on demobilisation has been
confirmed by Officer L-3 Hospital Area noted above.

5828 Pte. Wm. Rideout.

27-1-19.

C.R.

2828

Extract of Daily Orders Part II, dated Jan. 3rd 1919.

The undernoted man's discharge on Demobilization has been approved by O.C. Discharge Depot on noted dates. He is removed from Depot Strength and transferred to Discharge Depot pending confirmation by Officer i/s Records.

5828 Pte. Willis Rideout.

Discharged 30-12-18

5828

C.R.

Extract from Daily Orders part II, depot St. John's dated
December 26th., 1918.

66

#5828 Pte. W. Ridout.

~~Admitted~~ Discharged from Barracks Hospital 24-12-18.

CP 5828

Extract from Daily Orders part II, Depot
St. John's dated December 18th., 1918.

~~Discharged~~ Transferred from General Hospital
to Barracks Hospital 16-12-18.

#5828 Pte. W. Ridout.

BC.

C.R. *S.B. 24*
OWNER No. *24*

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

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(NOT TRANSMITTED)

Signature of Sender _____ Address Dept. of Militia

Line Number	Rcd	By	Sent	Check

Dated **Dec. 7th, 1918.**

To **Mr. Albert Rideout.**

Tilt Cove, N.D.B.

Req
Request to inform you that your son #5828 Pte. Rideout
was operated on to-day Doing well.

J.R. Bennett,
Minister of Militia.

C.R. 5828

Extract from Daily Orders part 11, Depot. St. John's dated Dec. 4th., B

#5838 Pte. W. Ridout.

Transferred from Barracks Hospital to General Hospital

2-12-18.

C.R. 5828

Extract from Daily Orders part 11, Depot. St. John's
dated December 3rd., 1918.

HOSPITAL.

#5828 Pte. W, Ridout.

Dus charged from General Hospital 29-11-18
and admitted to Barracks Hospital 29-11-18.

C.R. 5828
Counter No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



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(NOT TRANSMITTED)

Signature of Sender _____ Address **Dept of Militia.**

Line Number	Rcd	By	Sent	by	Check

Dated **Nov. 25th, 1918.**

To **Mr. Albert Rideout,
Tilt Cove, N.D.B.**

Regret to inform you that your son No. 5828 Pte. Rideout, was admitted to General Hospital on Saturday Nov. 23rd, Case has been diagnosed Mastoid.

**J.R. Bennett,
Minister of Militia.**

FOR TYPEWRITER

C.R. 5828

Extract from Daily Orders, Part II, UNIT: The Royal Newfoundland Regiment, dated Nov. 25th. 1918.

HOSPITAL.

5828 Pte. W. R. Hildcut.

Admitted to General Hospital, 23/11/18.

C.R. 5828

Extract from Daily Orders Part 11 Unit the Royal Nfld.
Regt., St. John's Nov.15th, 1918.

5828 Pte. W. Rideout.

Admitted to Barracks Hospital 14-11-18.

MM.

C.R. 5828

Extract from Daily Orders, Part II, UNIT: The Royal New Zealand
Regiment, dated October 30th. 1918.

Hospital.

5828 Pte. W. Rideout.

Transferred from General Hospital to Escasoni, 28/10/18.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

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

(NOT TRANSMITTED)

Signature of Sender _____ Address _____

Line Number	Rcd	By	Sent	by	Check

Dated OCTOBER 26th., 1918.

To MRS. ALBERT RIDEOUT,

TILT COVE.

BEG TO INFORM YOU THAT # 5828 PTE. RIDEOUT, IS NOW CONVALESCENT.

J. R. Bennett,

Minister of Militia.

FOR TYPEWRITER

C.R. 5828

NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. Sent by Rec'd by Check No.

Place from

To



*I'm anxious to know
 about sons head no
 5828 private Rideouts
 Mrs Albert Rideout
 is now convalescent*

Counter No. 5828

NEWFOUNDLAND POSTAL TELEGRAPHS.



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(NOT TRANSMITTED)

Signature of Sender _____ Address St. John's Dept. of Militia

Line Number	Rcd	By	Sent	by	Check

Dated **Oct. 22, 1918.**

To **Mr. Albert Rideout.**
Tilt Cove, N.B.N.

Req to inform you that your son # 5828 Rideout, is now Convalescent

J. R. Bennett,
Minister of Militia.

FOR TYPEWRITER

C.R. 5828
Counter No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



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(NOT TRANSMITTED)

Signature of Sender _____ Address **St. John's Dept. of Militia.**

Line Number	Rcd	By	Sent	by	Check

Dated **Oct. 21, 1918.**

To **Mr. Albert Rideout,
Milt Cove, N.D.B.**

**beg to inform you that your son #5828 Pte. Rideout is
improving.**

J.R. Bennett,

Minister of Militia.

FOR TYPEWRITER

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

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(NOT TRANSMITTED)

Signature of Sender _____

Address St. John's Dept. of Militia

Line Number	Rcd	By	Sent	by	Check

Dated

Oct. 17th, 1918.

To

Mr. Albert Rideout,

Tilt Cove, N.D.B.

Reg to inform you that your son #5828 Pte. Rideout, is improving.

J. R. Bennett,

Minister of Militia.

FOR TYPEWRITER

FORM NO. -

C.R. 5828

NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No.

Sent by

Rec'd by

Check

No.

Teltrove

Place from

To

*J. R. Bennett
Minister of Melita*



*Please inform quickly
how son no 5828
Private Redout is*

Mrs Albert Redout

C.R. 5828
Counter No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



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(NOT TRANSMITTED)

Signature of Sender _____ Address **St. John's Dept of Militia.**

Line Number	Rcd	By	Sent	by	Check

Dated **Oct. 15, 1918.**
To **Mr. Albert Rideout,**
Tilt Cove, N.D.B.

Regret to inform you that #5828 Pte. Rideout, is still seriously ill.

J.R. Bennett,
Minister of Militia.

FOR TYPEWRITER

C.R. 5828

Extract from Daily Orders Part 11 Unit The Royal Field Regt.,
St. John's, Oct. 12/18.

Admitted to General Hospital¹¹ 10-18.

5828, Pte W Rideout

CR 5828
Counter No.

NEWFOUNDLAND POSTAL TELEGRAPHS.



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(NOT TRANSMITTED)

Signature of Sender _____ Address Militia Department

Line Number	Rcd	By	Sent	by	Check

Dated October 12th, 1918
To Albert Rideout, Tilt Cove, N.B.S.

Regret to inform you that your son No. 5828 Private
Rideout was admitted General Hospital yesterday suffering
Pleurisy, very dangerously ill.

J.R. Bennett,
Minister of Militia

FOR TYPEWRITER

C.R. 5828

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.,
St. John's, Oct. 12/18.

Discharged from Barracks Hospital 10-10-18.

5828 Pte. W. Rideout.

C.R. 5828

Extract from Daily Orders, Part 11, UNIT: The Royal Newfoundland
Regiment, dated October 12th 1918.

Hospital.

5828 Pte. W. Rideout.

Admitted to General Hospital, 9/10/18.

CR. 5828

Extract from Daily Orders Part 11 Unit The Royal Nfld. Regt.,
St. John's Oct. 5th, 1918.

5828 Pte. W. Rideout.

Admitted to Barracks Hospital 4-10-18.

C.R. 5828

Extract from Daily Orders part 11 Depot St. John's dated Sept. 30/19B

#5828 Pte. W. Ridout.

Discharged from 21 Field Street 27/9/18

~~Extract~~ from Daily Orders part 11, from Unit The Royal
Nfld. Regt. St. John's, dated July 23, 1918.

Attested for general service with the Royal Nfld. Regt.
July 20, 1918

#5828 Pte. Willis Rideout.

Rideout, Willis

5828

Aug 20th.

Jilt Cove

march th 14 1919

5828

Dear Sir

could you send me
a discharge ~~Base~~ ^{Page}
for the 6 mounts which
I served in the Regiment

yours truly

Willis Rideout

Jilt Cove

EPDB

~~Remobilization~~

EP

January 27th., 1919

#5828 Pte. Willis Rideout,
Tilt Cove,
H.D.B.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 751."

Yours faithfully,

Captain,
Paymaster & O. i/c Records

Enc'l 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5828 Rank Pvt Name W. Rideout
 Intended place of residence St. John's Swill

2. Occupation Mechanics
 Classification of soldier B Medical Category C

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

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 7/6-12-18
 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 27.12.18
 Signature of soldier W. Rideout
 Signature of witness W. Spinks Capt

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 Dec. 27th 1918
 Signature of soldier W. Rideout
 Signature of witness J. Raymond Sgt

STATEMENT OF SERVICE

7. Enlisted for service 30.7.18 No of days on Military
 Discharged from service 30.12.18 plus 8 days Service 92 Days

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 DEC 30 1918
 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 January 27/1919
 Officer i/c Records
 The Royal Newfoundland Regiment

22/32019/751

17
31
30
31
30
31
27
22

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5828 Rank Pte Name Rideout William
 Date of Enlistment 20.7.18 Address Full Cove District St. John's
 Occupation Mechanic Classification for Discharge B Medical Category E
 Recommendation S.M.B. Fitly prof't Disability Rating Less than 20%
 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 27.12.18

William Rideout
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

William Rideout

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable 4.00
 (b) Clothing Supplied Joseph H. H. Brown

Date 27-12-18

O. i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 438R to his home
 at Leit Cove and Release Certificate No. 652 issued.

Date 27-12-18 C.S. Dicks 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 7-1-19

Date 78-12-19 W. H. H. Capt.
 Depot Paymaster.

Discharge approved for 30.12.18

Forwarded with following documents to O.C Discharge Depot.

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

Date 27.12.18 C.S. Dicks Capt.
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer in Charge Records.
 Board of Pension Commissioners.

with following additional documents.

Date DEC 30 1918 R.H. Sait Capt.
 O. C. Discharge Depot.

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

Date Jan 6/1919

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

MEDICAL HISTORY

OF

Surname Rideout.

Christian Name Willis.

Table I.—GENERAL TABLE

Birthplace:—Parish Tilt Cove. N.D.B. County Newfoundland.

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	20	July, 1914		191
	at <u>S. Johns.</u>		at	
Declared Age	19.	years		days
Trade or Occupation	<u>Mechanic</u>			
Height	5	feet		inches
		<u>4 1/2</u> inches		
Weight		<u>135.</u> lbs.		lbs.
Chest Measurement	Girth when fully expanded		inches	
	<u>37.</u> inches			
Range of Expansion	inches		inches	
	<u>5.</u> inches			
Physical Development				
Vaccination Marks	Right	Left	Right	Left
When Vaccinated				
Vision	R.E.—V=	<u>6/6</u>	R.E.—V=	
	L.E.—V=	<u>6/6</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>Amund Peterson</u>			
(Rank)	Medical Officer		Medical Officer	
Enlisted	at <u>S. Johns.</u>		at	
	on	20 day of <u>July</u> 1914	on	day of 191
Joined on Enlistment	Corps	Regtl. No.	Corps	Regtl. No.
	<u>Royal N.F</u>	<u>5826.</u>		
Transferred to	<u>Regiment</u>			
Became non-effective by	on day of 191		on day of 191	
(Signature)				
(Rank)				

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:

Going back to school.

Willis Rudeant

Signature of Man.

Reg. No.

5 828

Charles A. ...

Signature of the Vocational Officer or his Representative.

Place

St. John's ...

Date

December 27th 1918

ROYAL NEWFOUNDLAND REGIMENT.

Medical Examination Held at Headquarters on July 20 1918

1. Name Willis Rideout Age (a) Declared 18
(b) Apparent

2. Do you know of anything wrong with you? no

What severe illnesses have you had? none.

*Eyes brown
Hair fair
Marks*

3. Height 5-4 1/2 Weight 135

4. Eyesight (a) Left 6/6 (b) Right 6/6

5. Physical Defects (Examine after strenuous exercise) no

5828

6. Examination of Lungs no

Measurement (a) Expiration 32 (b) Inspiration 37

7. Examination of Heart no

8. Examination of Urine

9. Examination of Mouth—(Defective Speech)

- Teeth
- Throat
- Nose
- Ears—(Otorrhea)
- (Deafness)

no

10. Have you been successfully vaccinated, and when? yes 1 year ago, 1st arm

11. Name and address of next of kin Father Albert 1st Ave. HDB

REMARKS—

A 11

*Archibald
Sturges*

The Royal Newfoundland Regiment

Class for Demobilization:—

B

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 27.12.18

Regimental No. 5828

Name Ridout Willis

Address Gill side

Present Medical Category..... E

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

(b) Standing Medical Board.....

Members of Board {

R. H. Lint Capt.
O.C. Discharge Depot.

B. Peterson
Senior Medical Officer

D. W. Berden
M. O. Depot

Department of Militia, Newfoundland
Medical Department

Medical Report on an Invalid

NOTES:—

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

STATEMENT OF CASE

Station **St. John's, Hfld.,**
Date **December 23rd., 1918.**

1. Unit **Royal Newfoundland**
2. Regimental No. **8828**
3. Rank **Private**
4. Name **RIDGOUT, WILLIS**
5. Age last birthday **18**
6. Enlisted on **20th July 1918**
at **St. John's**
7. Former trade or occupation **Engineer**
8. Disability

(1) PLEURISY & PNEUMONIA
(2) MASTOID(RIGHT)

9. History **Admitted General Hospital 11/10/18 Pleurisy and Pneumonia Discharged 25/10/18. Developed Mastoid (acute) in Barracks Sent to General Hospital 25/11/18 for operation. Operated on and discharged 29/11/18.**

Operation ear quite healed. Hearing
impaired right ear. Temperature normal.
Pulse 90. Accompaniments in lungs

10. What is his present condition?

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

Department of Militia

Medical Department

Medical Report on an Invalid

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

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

STATEMENT OF CASE

Signature **(Sgd) A. C. TAIT**

Rank or Qualification **FOR M.O. DEPOT.**

Remarks if any by Officer i/c Hospital.

Place Signature

Date Rank

Opinion of the Medical Board

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

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

First had discharge from the army five years ago

15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market? **Less than 30%**
- (b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a full livelihood in the general labor market lessened by that portion of his disability to or incurred during service? **Less than 30%**
- (State in percentage.)

Remarks if any:—

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

Remarks if any:—

19. If fit subject for Hospital do you recommend admittance to

{	General Hospital,
	Naval and Military Con-
	vallescent Hospital, no
Jensen Tuberculosis Camp.	

20. We recommend discharge from retention in the Army **Permanently Unfit**

Remarks if any:—

(Sgd) W. S. FRASER
President

ARCH C. TAIT

Signatures

L. PATERSON, Major

Place **St. John's,**

Date **December 26th., 1918**

APPROVED

Station

Date



(Sgd) CLYDE MACPHERSON, Major

D. M. S. NEWFOUNDLAND.
Administrative Medical Officer



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 *Rideout, Willis*

Regiment from which discharged *Royal Newfoundland*

Regimental number *5828*

Intended address *Sick Cove.*

Height on discharge *5* Feet *25"*

Color of hair on discharge *Dark*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks *Operation scar behind right ear*

Figure on discharge *Medium*

Christian name of Father *Albert*

Christian name of Mother *Lucy*

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth *Sick Cove, April 4, 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) *Willis Rideout*

Station *St. John's*

Date *Dec 23/18.*


(Rank) *pt.*

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.

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

Station *St. John's, Nfld.*

Date *Dec. 23/18.*



Department of Militia, Newfoundland

Medical Department

Medical Report on an Invalid

1099

NOTES:—

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

STATEMENT OF CASE

Station **St. John's, Nfld.,**

Date **December 23rd., 1918.**

- | | |
|-----------------------------------|--|
| 1. Unit Royal Newfoundland | 5. Age last birthday 28 |
| 2. Regimental No. 5828 | 6. Enlisted on 20th July 1918 |
| 3. Rank Private | at St. John's |
| 4. Name RIDEOUT, WILLIS | 7. Former trade or Engineer
occupation |

8. Disability

- (1) PLEURISY & PNEUMONIA**
(2) MASTOID(RIGHT)

9. History **Admitted General Hospital 11/10/18 Pleurisy and Pneumonia Discharged 26/10/18. Developed Mastoid (acute) in Barracks Sent to General Hospital 23/11/18 for operation. Operated on and discharged 29/11/18.**

Operation ear quite healed. Hearing
improved right ear. Temperature normal.
Pulse 80. No accompaniment in lungs

10. What is his present condition?

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

Department of Military
Medical Department

Medical Report on an Invalid

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

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

Signature **(Sgd) A. G. TAIT**

Rank or Qualification **FOR H.O. DEPOT.**

Remarks if any by Officer in Hospital.

Place Signature

Date Rank

U.S. GOVERNMENT PRINTING OFFICE

Opinion of the Medical Board

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

13. For pension purposes, the disability x ~~may~~ be considered as aggravated by:—
due to
(a) ~~Service during this war.~~ (b) ~~Climate.~~ (c) Ordinary Military Service
Remarks if any:—

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

First had discharge from the war two years ago

15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market? **Less than 30%**
(b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a full livelihood in the general labor market lessened by that portion of his disability to or incurred during service? **Less than 30%**
(State in percentage.)

Remarks if any:—

16. Is the disability permanent?

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

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

Remarks if any:—

19. If fit subject for Hospital do you recommend admittance to } General Hospital,
Naval and Military Convalescent Hospital, **NO**
Jensen Tuberculosis Camp.

20. We recommend discharge from retention in the Army **Permanently Unfit**

Remarks if any:—

(Sgd) H. S. FRASER
President

ARTHUR C. TAIT

Signatures

L. PATERSON, Major

Place **St. John's,**

Date **December 26th., 1918**

APPROVED


Station

Date



(Sgd) CLYDE MACKENZIE, Major

D. W. S. NEWFOUNDLAND.
Administrative Medical Officer



Department of Militia, Newfoundland
Medical Department

Medical Report on an Invalid

NOTES:—

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

STATEMENT OF CASE

Station *St. Johns Nfld*

Date *Dec. 23rd 1918*

- | | |
|-----------------------------------|---|
| 1. Unit <i>Royal Newfoundland</i> | 5. Age last birthday <i>18</i> |
| 2. Regimental No. <i>5828</i> | 6. Enlisted on <i>20th July 1918</i> |
| 3. Rank <i>PLC</i> | at <i>St. Johns</i> |
| 4. Name <i>RIDEOUT, WILLIS.</i> | 7. Former trade or occupation <i>Engineer</i> |

8. Disability

I Pleurisy & Pneumonia
II Mastoid (Rt.)

9. History *Admitted General Hq. 11/10/18 Pleurisy & Pneumonia*
Discharged 29/10/18. Developed Mastoid (contd.) in barracks
Sent to Gen Hq. 23/11/18 for operation. Operated on +
discharged 29/11/18.

10. What is his present condition?

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

operation scar quite healed.
Hearing impaired Rt. ear.
T. normal. P. 80.
No accompaniment in camp.

Medical Report on an Inmate

11. Was sanatorium advised and refused?
operation

no

12. Do you recommend discharge as permanently unfit?

yes

STATEMENT OF CARE

Signature

Archibald
for No report

Rank or Qualification

Remarks if any by Officer i/c Hospital.

Place

Signature

Date

Rank

Opinion of the Medical Board

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

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

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

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

First had discharge from the Ser 2 years ago.

15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market? less than 20%

(b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a full livelihood in the general labor market lessened by that portion of his disability to or incurred during service? less than 20%

(State in percentage.)

Remarks if any:—

16. Is the disability permanent?

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

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

Remarks if any:—

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

20. We recommend discharge from retention in the Army permanently unfit

Remarks if any:—

Signatures.....

..... President

Place.....

Date.....

APPROVED

Station.....

Date.....



Clay Macpherson
Administrative Medical Officer

COPY

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:

Going back to school

(sgnd) Willis Rideout

Signature of Man.

Reg. No. 5828

(sgnd) C. B. Dicks, Capt.

Signature of the Vocational Officer or his Representative.

Place St John's

Date Dec. 27, 1918 191

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5828 Rank Pte Name **W. Rideout**

Intended place of residence **Tilt Cove**

2. Occupation **Mechanic**

Classification of soldier **B** Medical Category **G**

3. The above named man is discharged in consequence of **Demobilization**

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.

Place (sgnd) **C. G. DUFFY, Capt.**

Date **28-12-18** **Comanding 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) **Willis Rideout**

Signature of soldier

..... **27-12-18** " **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) **Willis Rideout**

Signature of soldier

..... **Dec. 27, 1918** " **J. Daymond, Sgt.**

Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service **20-7-18** No of days on Military
Discharged from service **30-12-18 plus 28 days** Service **192**

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** (sgnd) **R. H. TAIT, Capt.**

Officer Commanding Discharge Depot
The Royal Newfoundland Regiment.

Date **Dec. 30, 1918**

CONFIRMATION OF DISCHARGE

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

Place

Officer i/c Records

Date

The Royal Newfoundland Regiment

Reg. No. 5828 - Rank Pte Name Private Willis C
 Attested 20-7-18 Address Hilt base N.S.S.
 Allotment 60 Allottee Albert Pideout (Father)
 Date of Allotment 1-9-15 Returned from Overseas.....
 Embarked for Overseas..... Cause.....

Vacc	9-5-15.	
F. leave	24-7-18 to 1-8-18	Returned 26-7-18.
23-8-18	Admitted to	21 Filds Street
27-9-18	Discharged from	" "
4-10-18.	Admitted to	barracks Hoop.
10-10-18	Discharged from	" "
11-10-18	Admitted to	General Hoop.
28-10-18	Discharged from	General Hoop to Escason
14-11-18	Discharged from	Escason

23-11-18. Adm. to General Hospital
29-11-18 Discharged from Barracks Hosp & admitted
to Barracks Hosp.

2-12-18 Transferred from Barracks Hosp to General Hosp.
16-12-18 Transferred from General Hosp to Barracks
Hosp.

26-12-18 Rec Discharge as Permanently Unfit

27-12-18. PASSED TO DEMOBILIZATION OFFICER

30-12-18, DISCHARGE APPROVED ON DEMOBILISATION.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5828 Rank Plt Name Rideout William
 Date of Enlistment 20.7.18 Address Half Cove District Lwyke
 Occupation Mechanic Classification for Discharge B Medical Category SE
 Recommendation S.M.B. Permitly unfit Disability Rating less than 20%
 Passed to Demobilization Officer with following documents:—

N.F. P 36.....	B 268.....	B 121.....	1	N.F. Med.....	D.F. 1.....	1
B 178.....	W 3494.....	B 122.....		Board 1st.....	" 2.....	
B 178a.....	1 D 400A.....	1 B 1915.....	7	do 2nd.....	" 3.....	3
B 179.....	7 D 400B.....	Form L.....		do 3rd.....	" 4.....	
B 179a.....	D 400C.....	Form K.....	1	do 4th.....	" 5.....	
B 179b.....	B 103.....	ME 2.....			" 6.....	
B 179c.....	B 120.....	M 93.....	1			

Date 27.12.18

W. M. C. Capt.
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

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

William Rideout

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable £100.00.....

(b) ~~Clothing~~ Supplied Joseph H. A. Brown.....

Date 27-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 438 R to his home at 2nd Cove and Release Certificate No. 652 issued.

Date 27-12-18 C. S. Dicks 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 27-1-19

Date 27-12-18 W. H. Bowley Capt.
Depot Paymaster.

Discharge approved for 30.12.18

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	✓ 1	N.F. Med.	D.F. 1	✓ 1
F 178	W 3494	B 122	✓ 1	Board 1st	" 2	✓ 1
B 178a	✓ 1 D 400A	✓ 1 B 1915	✓ 2	do 2nd	" 3	✓ 2
B 179	✓ 1 D 400B	Form L	✓ 1	do 3rd	" 4	✓ 1
B 179a	D 400C	Form K	✓ 1	do 4th	" 5	
B 179b	B 103	ME 2	✓ 1	" 6		
B 179c	B 120	M 93	✓ 1			

Date 27.12.18 C. S. Dicks Capt.
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Date DEC 30 1918 R. H. Sait Capt.
O. C. Discharge Depot.

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

Date Jan. 6/1919 W. H. Bowley Capt.
A/S

