



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 2301 Name Herbert Roberts Corps \_\_\_\_\_

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

- |  |  |
|--|--|
| 1. What is your name? .....  | 1. <u>Herbert Roberts</u> .....          |
| 2. What is your full Address? .....  | 2. <u>Triston</u> .....                  |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u> .....                      |
| 4. What is your age? .....   | 4. <u>18</u> Years <u>5</u> Months ..... |
| 5. What is your Trade or Calling? .....  | 5. <u>Labourer</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, Herbert Roberts 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.

..... SIGNATURE OF RECRUIT.

R.P. Holloway Signature of Witness.

E. March 21/16

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

I, Herbert Roberts do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

### CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 23<sup>rd</sup> day of March 1916

Signature of Attesting Officer R.P. Holloway

### †CERTIFICATE OF APPROVING OFFICER.

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

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

Date.....191.....

Place..... } Approving Officer.

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

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

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Herbert Robert

Apparent age 18 years 5 months. Height 5 feet 5 1/2 inches

Chest Measurement { Girth when fully expanded 36 inches  
Range of expansion 3 inches

Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Robert

Triston Green Bay | 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 _____									
Joined at _____ on _____									
Total Service forfeited as above.....									
Total Service towards Engagement to _____ [date of discharge] _____ years _____ days									
" " " Pension " [ " " ] " " "									



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 2301 Name Herbert Roberts Corps

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

- |  |                                    |
|--|------------------------------------|
| 1. What is your name? .....  | 1. <u>Herbert Roberts</u>          |
| 2. What is your full Address? .....  | 2. <u>Triton</u>                   |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u>                      |
| 4. What is your age? .....   | 4. <u>18</u> Years <u>5</u> Months |
| 5. What is your Trade or Calling? .....  | 5. <u>Lumberman</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, Herbert Roberts 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.

..... SIGNATURE OF RECRUIT.

R.P. Holloway Signature of Witness.

E. March 21st

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

I, Herbert Roberts do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

### CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered, as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 21st day of March 1916

Signature of Attesting Officer R.P. Holloway

### †CERTIFICATE OF APPROVING OFFICER.

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

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

Date.....191..... } Approving Officer.

Place..... }

† 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.

2301.  
2448

Name Herbert Robert

Apparent age 18 years 5 months. Height 5 feet 5 1/2 inches

Chest Measurement { Girth when fully expanded 36 inches  
Range of expansion 3 inches

Distinctive marks

**INFORMATION SUPPLIED BY RECRUIT**

Name and Address of next of kin John Robert  
Triston Green Bay | 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.			
(a)		(b)		(c)		(d)	
(c) Present address.				(d) Initials of Officer verifying entry.			

**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>21-3-16</u>									
Joined at <u>St. John's</u> on <u>March 21<sup>st</sup> 16</u>									
<u>Embarked St. John's S. S. Lillian for U.K. 19<sup>th</sup> 76</u>									
<u>Embarked for B.C. 3<sup>rd</sup> 76</u>									
<u>Joined Battalion 14<sup>th</sup> 76</u>									
<u>Wounded 14<sup>th</sup> 77</u>									
<u>Admitted 87th S.M. 14<sup>th</sup> 77</u>									
<u>Invalided to England 19<sup>th</sup> 77</u>									
<u>Admitted 3rd L.P.A. Ward 19<sup>th</sup> 77</u>									
<u>Surgeon to 28<sup>th</sup> 77</u>									
<u>Re-admitted 3 London Gen. Hosp. Wandsworth 23<sup>rd</sup> 77</u>									
<u>Surgeon to 27<sup>th</sup> 78</u>									
<u>Attended depot 22<sup>nd</sup> 78</u>									
<u>Re-embarked for discharge 13-5-18</u>									
<u>Arrived Newfoundland 24-5-18</u>									
<u>Discharged medically unfit 1-6-18</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 1-6-18 (date of discharge) 2 years 73 days

" " " Pension " " " " " " " " " " " "

*Originals*

This space to be left blank for the Chelsea Number.



# Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 2301 Army Rank Private

Name Roberts Herbert  
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps 1st Batta Royal Newfoundland Regiment

Battalion, Battery, Company, Depot, &c.  
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge \_\_\_\_\_

Place of discharge \_\_\_\_\_

1. Description at the time of discharge.

Age <u>19</u> years _____ months	<p>Descriptive marks.</p> <p><i>Scar Back</i></p> <div style="border: 1px solid black; padding: 5px; width: fit-content;"> <p>COPY SENT TO O.C. H.Q. ST. JOHNS, N.F.L.D. N.F.P.38. No. <u>2911/12</u> DATED <u>22</u> FEB 1918</p> </div>	
Height <u>5</u> feet <u>9</u> inches		
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.		
Complexion <u>Fresh</u>		
Eyes <u>Blue</u>		
Hair <u>Fair</u>		
Trade <u>Fisherman</u>		
Intended place of residence (To be given as fully as practicable) { <u>Linton</u> <u>Notre Dame Bay</u> <u>Newfoundland</u>		
(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)		

2. The above-named man is discharged in consequence of Wounds received in action

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character :- \_\_\_\_\_

4. Character awarded in accordance with King's Regulations :- \_\_\_\_\_

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067\* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer. \_\_\_\_\_

Army Form B. 2088 has been issued to\*

This space to be left blank for the Chelsea Number.

[Blank box for Chelsea Number]

Army Form B. 268

A 2301

### Proceedings on Discharge



(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 2301 Army Rank Private

Name Roberts Herbert  
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps 1st Batta. Royal Newfoundland Regiment  
Battalion, Battery, Company, Depot, &c.  
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge \_\_\_\_\_

Place of discharge \_\_\_\_\_

1. Description at the time of discharge.

Description at the time of discharge.		Descriptive marks.
Age <u>19</u> years _____ months		<u>Scar Back</u>
Height <u>5</u> feet <u>9</u> inches		
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.		
Complexion <u>Fresh</u>		
Eyes <u>Blue</u>		
Hair <u>Fair</u>		
Trade <u>Fisherman</u>		
Intended place of residence { <u>Tyton</u> <u>Poker Name Bay</u> <u>Newfoundland</u>		
(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)		

2. The above-named man is discharged in consequence of Wounds received in action.

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character:—

4. Character awarded in accordance with King's Regulations:—

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067\* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer. \_\_\_\_\_

Army Form B. 2088 has been issued to\*

To be filled in on the soldier quitting the Colours.

This space to be left blank  
for the Chelsea Number.

Army Form B. 268.

## Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No.	2301	Army Rank	Private
Name	Skerber & Roberts		
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)			
Corps	The Royal Newfoundland Regt		
Battalion, Battery, Company, Depot, &c. (If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)			
Date of discharge	June 14 <sup>th</sup> 1918		
Place of discharge	St Johns. Nfld.		
1. Description at the time of discharge.			
Age	years	months	Descriptive marks.
Height	5	9	
Chest measurement	girth when fully expanded		Wound scars right shoulder
	range of expansion		
Complexion	fair		
Eyes	blue		
Hair	light		
Trade	fisherman		
Intended place of residence	In ton		
(To be given as fully as practicable)	NAD		
(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)			
2. The above-named man is discharged in consequence of <u>being no longer physically fit for war service on account of wounds received in action</u>			
(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)			
3. Military character :—			
4. Character awarded in accordance with King's Regulations :—			
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.			
			Initials of Commanding Officer.
Army Form B. 2088 has been issued to*			

To be filled in on the soldier quitting the Colours.

Embodied Mar 21/1916

This space to be left blank  
for the Chelsea Number.



## Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. <u>2301</u>	Army Rank <u>Private</u>
Name <u>Sherber &amp; Roberts</u> (The name must agree strictly with that on enlistment, unless changed subsequently by authority.)	
Corps <u>The Royal Newfoundland Regt</u> Battalion, Battery, Company, Depot, &c. (If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)	
Date of discharge <u>June 14<sup>th</sup> 1918</u>	
Place of discharge <u>St. John's, Nfld.</u>	
1. <u>Describe at the time of discharge.</u>	
Age _____ years _____ months	Descriptive marks.
Height <u>5</u> feet <u>9</u> inches	<u>Wound scars right shoulder</u>
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.	
Complexion <u>fair</u>	
Eyes <u>blue</u>	
Hair <u>light</u>	
Trade <u>fisherman</u>	
Intended place of residence <u>Ingon</u> (To be given as fully as practicable) <u>N.A.B.</u>	
(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)	
2. The above-named man is discharged in consequence of <u>being no longer physically fit for war service on account of wounds received in action</u>	
(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)	
3. Military character :—	
4. Character awarded in accordance with King's Regulations :—	
To be filled in on the soldier quitting the Colours.	
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.	
Initials of Commanding Officer.	
Army Form B. 2088 has been issued to*	

Embodied Mar 2/1916

\* Strike out if not applicable.



## Casualty Form—Active Service.

Regiment or Corps 1st BfldRegimental No. 2301Rank PteName Roberts HerbertEnlisted (a) 21/3/16Terms of Service (a) Duration of War Service reckons from (a) \_\_\_\_\_Date of promotion }  
to present rank }Date of appointment }  
to lance rank }Numerical position on }  
roll of N.C.Os. }

Extended \_\_\_\_\_

Re-engaged \_\_\_\_\_

Qualification (b) \_\_\_\_\_



Report		Record of promotions, reductions, transfers, casualties, etc., 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	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked Southampton		Oct 3/16	
		Disembarked Rouen		Oct 4/16	
		Joined Battalion		Oct 14/16	
		With "		23.1.17	
15.4.17	Unit	Wounded in Action	France	14/4/17	B 213
2.4.17	87th	Ad. Trans. Sh. W. R. Shldr	CCB	14/4/17	ED 3085
3.5.17	2nd. Str. Coy	Ad. do	Wimereux	17.4.17	Ad 8813
	"St Andrew"	Invalided to England		19.5.17	W 3083
					Adj. E. Adridge Major for G/C No 1 Reg Inf Sect. G/L 3rd Echelon

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) e.g., Signaller, Shoemaking Smith, etc., etc., also special qualifications in technical Corps duties.

P.T.O.

Regiment or Corps 1st Nfld  
Rank Pte Surname Roberts Christian Name Herbert 1132

Religion meth Age on Enlistment 18 years 5 months.

Enlisted (a) 2/3/16 Terms of Service (a) Duration of war Service reckons from (a) \_\_\_\_\_

Date of promotion to present rank \_\_\_\_\_ Date of appointment to lance rank \_\_\_\_\_

Extended { \_\_\_\_\_ } Re-engaged { \_\_\_\_\_ } Qualification (b) \_\_\_\_\_  
or Corps Trade and Rate \_\_\_\_\_

Signature of Officer i/c Records.

Report		Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B. 213, Army Form A. 38, 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. 38, or other official documents
Date	From whom received				
			Embarked Southampton	3 OCT 1916	
			Disembarked ROUEN	4 OCT 1916	
		Joined Battalion	14 OCT 1916		
			With BATT. 25. I. 17		
15-4-17.	Unit	Wounded in Action	France	14 APR 1917	B 213
16-4-17.	87 F.A.	Ad. 9 Trans. Ph. W. R. Alder	G.S.I.	14-4-17.	E.A. 3085
3-5-17.	2. Augt. 3. Hosp.	Ad. Do	Wipreun	17-4-17	H.A. 8813
	"St. Andrew"	Invalided to England		19-5-17.	W 3083
			<i>Salisbury</i>		
			MAJOR FOR		
			O. i/c No. 1 Reg. Infantry Section		
			G. B. O. 3rd		

*22*

COPY SENT TO  
O.C. H.Q.  
ST. JOHNS. N.F.L.D.  
No. 924/12  
DATED 22 FEB 1918



(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
(b) Signaller, Shoeing-Smith, &c.

*Temporary*

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178<sup>a</sup> to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY OF

Surname *Roberts* Christian Name *Herbert*

TABLE I.—General Table.

Birthplace { Parish .....  
County .....

Examined { on.....day of.....191  
at .....

Declared Age .....years.....days.

Trade or Occupation .....

Height.....feet.....inches

Weight.....lbs.

Chest Measurement { Girth when fully Expanded .....inches  
Range of Expansion .....inches

Physical Development .....

Vaccination Marks { Arm..... RIGHT | LEFT  
Number .....

When Vaccinated .....

Vision { R.E.—V— .....  
L.E.—V— .....

(a) Marks indicating congenital peculiarities or previous disease—  
.....  
.....

(b) Slight defects but not sufficient to cause rejection—  
.....  
.....

Approved by .....

Rank .....

Medical Officer.

TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

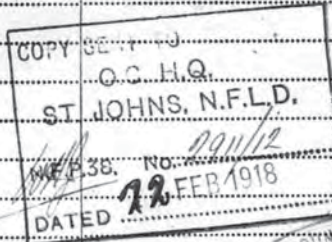

Date	Brief Details and Signature
17-1-18	Board held Permanently unfit Board approved 17/1/18 g.c. Hall apt for 3rd London General Hospital, WANDSWORTH, S.W.
	
	

TABLE IV.—Service Table.

	Station or Troopship		Date of arrival or embarkation	Date of departure or disembarkation
Enlisted { at..... on.....day of.....191..				
Joined on enlistment	Corps <i>17 Fed.</i>	Regtl. No. <i>2301</i>		
Transferred to				
Became non-effective by				
on.....day of.....191..				
(Signature).....				
(Rank).....				

**TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.**

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
5rd London General Hospital, WANDSWORTH, S.W.	23	11	17				G.S.H. Chest Empyema R.		<p>Board held - see overleaf</p> <p>Disability - G.S.H. Chest Empyema R.</p> <p>General condition poor.</p> <p>Cannot walk far without severe shortness of breath.</p> <p>Cause - G.S.W. on Active Service.</p> <p>Total - Inability to earn a livelihood at present 100%.</p>	<p><i>G. C. Hall</i> Capt 5rd London General Hospital, WANDSWORTH, S.W.</p>

*Original*

### Medical Report on an Invalid.

Station 3rd London General Hospital,

WANDSWORTH, S.W.

Date 16/1/18

- 1. Unit 1st Newfoundland
- 2. Regimental No. 2301
- 3. Rank PL
- 4. Name Roberts A.
- 5. Age last birthday 19
- 6. Enlisted { on 19/3/15  
at St John's

7. Former Trade } Fisherman  
or Occupation }

- 7A. If with previous service in Army, state—
- (a) Former Unit;
  - (b) Regimental No.;
  - (c) Date of Discharge; no
  - (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).*

G. Sw - Chest      Empyema. (R)



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. April 14<sup>th</sup> 1917
- 10. Place of origin of disability. Vimy Ridge.
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.
  - G Sw chest ap 14<sup>th</sup> 1917
  - Operation 3rd L. G. Hospital 21.5.17
  - Empyema (R) Much streptococci
  - 16.XI.17. Discharged on Furlough
  - 23.XI.17. Re-admitted E pain
  - in R chest at Empyema rate
  - to TB in Sputum.
- 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). G Sw Chest (R)
  - (b) constitutional or hereditary, and not aggravated by service during the present war. no
  - (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c. no

COPY SENT TO  
 O.C. H.Q.  
 ST. JOHNS, N.F.L.D.  
 No. 294/12  
 DATED 22 FEB. 1918

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.

Diminished movement R side Chest. Breath sounds not heard over Empyema Area.

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

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

Diminished expansion R Lung  
General condition of patient fair  
p. 100. cannot walk. dist. chest  
without shortness of breath. Chest  
Yes | very tender Two external adhesions  
2 | Scar across back HP  
-  
-

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

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

} no

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

Empyema

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

—

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.

—

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

For Re-classification

J. Hughes Capt R.A.M.C.

Officer in medical charge of case.

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

3rd London General Hospital  
Station WANDSWORTH, S.W.

H. E. Donnelly

Officer in charge of Hospital,  
Col. A.M.S.

Date 17-1-18.

Comdg. 3rd. London Gen. Hospital.

\*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.

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.

Diminished movement R side Chest. Breath sounds not heard over Empyema Area.

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

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

Diminished expansion R Lung  
General condition of patient fair  
yess. cannot walk. dist. chest  
with great shortness of breath. Chest  
yes | very tender Two catenaria adhesional  
2 | Scar across back HP  
-  
-

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

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

} no

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

Empyema

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

—

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.

—

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

For Re-amplication  
For Hughes Capt R.M.S.  
Officer in medical charge of case.

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

3rd London General Hospital,  
Station WANDSWORTH, S.W.

H. E. Domett O.M.  
Officer in charge of Hospital,  
Col. A.M.S. (T.F.)  
Comdg. 3rd. London Gen. Hospital,

Date 17-1-18.

\*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.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

(iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

1. (a.) State whether the disability is clearly attributable to—

- (i.) Service during the present war;
- (ii.) Climate;
- (iii.) Ordinary military service;
- (iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or
- (v.) Whether it is constitutional or hereditary.

Yes

—

no

no

(b.) If due to one of the first three of these causes, to what specific conditions do the Board attribute it?

g.s. he.

22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which?

—

Some disability will persist

23. Is the disability permanent?

—

24. If not permanent, how soon do the Board recommend re-examination?

25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

Degrees of disablement should be expressed in the following percentages:— 100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.

100

26. If an operation was advised and declined, was the refusal unreasonable?

27. Do the Board recommend—

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

Yes.

28. If discharge is recommended it should be stated whether further medical treatment (including orthopedic training) is desirable in a—

- (a) Sanatorium;
- (b) Hospital;
- (c) Convalescent home;
- (d) Asylum; or
- (e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

—

—

—

—

29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended?

no

30. Does the man require the constant attendance of another person?

no

Signatures:—

3rd London General Hospital,  
Station WANDSWORTH, S.W.

Date Jan. 17. 1918

John Reginald Capron President.  
H. Montagu Sanders Capron Members.

Approved London General Hospital,  
Station WANDSWORTH, S.W.

Date Jan 17. 1918

John Reginald Capron  
Administrative Medical Officer.



C.R. 2301

RECEIPT.

FOR ISSUE OF RIBAND OF VICTORY MEDAL 1914-1919.

I certify that I have received an issue of  
2 inches of Riband of Victory Medal-1914-1919.

NO. 2301 . . . . . NAME. Herbert Roberts

DATE. Feb the 2 / 9 / 20

PLACE. Graton West  
W D Bay

C.R. 2301

Extract of Casualties received from Pay & record Office,  
London, dated January 13, 1918.

FOR DISCHARGE:

#2301 Pte. H. Roberts. ✓

Ex. 3rd London General Hospital 18/1/18 is granted furlough  
to 27/1/18 with orders to report at 58 Victoria Street,  
on 23/1/18 for further orders. to be Repatriated.

Auth for Discharge A.Fs.B. 179.

Extract from Telegram received from London, dated  
May 14, 1918.

The following embarked per Government transport at  
Liverpool on March 13th, for Halifax, special duty.

#2301 Roberts.

Being sent home for discharge.

C.R. 2301

Extract from Daily Orders part 21, from Unit The Royal  
WFLS. Regt. St. John's, dated May 23, 1918

The following man is reported to Headquarters from Overseas  
on May 24, 1918.

#2301 Pte. H. Roberts.

C.R. 2301

Extract of Report from The Director of Medical Services to O.C. Depot dated  
June 1st., 1918.

At a Medical Board held on Friday, May 31st. -

2301 Pte. H. Roberts

Royal Wld. Regt..... Recommended Discharge--- Permanently unfit.

CR. 2301

Extract from Daily Orders part 11, from Unit The Royal  
Wfld. Regt. St. John's, dated June 17, 1918

#2301 Pte. H. Roberts.

Having been found medically Unfit is discharged from 14-6-18

C.R. 2301

Extract from Nominal Roll Embarked St. John's for Overseas,  
per S.S. "Sicilian" July 19, 1916.

2301 Pte. Roberts H.

C.R. 2301

Extract of Casualty List received from P.&R.O. London

Dated April 29th. 1917.

The following r/b O.C. Unit as "Wounded" 14.4.17. Report dated 15.4.17. No previous reports.

2301 Pte. H. Roberts.

1st. Nfld. Regt.



RECEIPT.

CR 2301

FOR ISSUE OF RIBAND OF VICTORY MEDAL/1914-1919.

I certify that I have received an issue of 2 inches  
of Riband of British Victory Medal-1914-1919.

DATE. *7 Feb. 9. 1920*  
PLACE. *Briton West  
A.P. Bay*  
NO. *2301* .. NAME .. *Herbert Roberts*

C.R. 2301

RECEIPT.

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

I certify that I have received an issue of 2 inches  
of Riband of British War Medal-1914-1919.

Name.....*Herbert Roberts*.....

Date.....*20 Nov 1919*.....

Place.....*Triton west: N.D. Bay.*.....

C.R. 2301

RECEIPT

FOR ISSUE OF BRITISH WAR MEDAL 1914-1919.

I certify that I have received an issue of 2 inches  
of Riband of British War Medal-1914-1919.

Name..... *H. Roberts*

Date..... *December 2nd, 1919*

Place..... *Champ Islands*

C.R. 2301

Extract from Nominal Roll of Nfld. Regt. Draft No.11 from  
2nd Bn. Depot, to 1st Bn. B.E.F. Embarked Southampton, 3-10-16.

2301 Pte. H. Roberts.

C.R. 2301

Herbert Roberts was attested for General  
Service with the NEWFOUNDLAND REGIMENT ON March 21st 1916  
Regimental No. 2301 was allotted to Pte. H. Roberts

AUTHORITY:

Record Ledger;

Dept. of Militia.

March 25th 1919

insert in corner of envelope "AB 64"

Receipt for Army Book 64

No. 2301 Name H Roberts

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

Name Pte Herbert Roberts

Date July 26/1920

Place Griton West. W. Bay

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

C.R. 2301

Extract from list of men of the Royal Newfoundland Regiment  
discharged on various dates.

2301 Pte. H. Roberts.

Discharged 14 - 6 - 18, Medically unfit

SYPHILIS CASE-SHEET.

Regtl. No. 2301. Rank and Name Pte Roberts - H Corps 2/ Newfoundland  
 Placed on Syphilis Register at Helsea on 16-2-18. No. in Register 1789.  
 Disease contracted at London. Primary sore appeared on (date) 28-1-18

CONDITION WHEN PLACED ON REGISTER.

Primary sore—character and site

Lymphatic glands Inguinal spirochlear posterior cerv. adenitis

Skin (nature and distribution of rash)

Mucous membranes Sore on mucous surface of prepuce

Other symptoms

COPIES SENT		
To	DATE	
M. of M.	<u>24/3/18</u>	<u>12/3/18</u>
O.C. 1st. Bn.		
" 2nd. Bn.		

Examination of exudate from sore—Spirochaeta Pallida (present or absent) Not taken 28-1-18  
 Examination of blood serum—(Method employed (original or modification) Original  
 Wassermann reaction (Result (positive or negative) Positive)

Station Helsea Date \_\_\_\_\_ Signature of M.O. [Signature]  
Capt. R.A.M.C.

Struck off Syphilis Register at \_\_\_\_\_ on \_\_\_\_\_  
 Cause of being struck off Register { (a) Recovered  
 (b) Transferred to Army Reserve  
 (c) Discharged from Army }  
 Station \_\_\_\_\_ Date \_\_\_\_\_ Signature of M.O. \_\_\_\_\_



N.B.—On completion of a course of treatment a red line to be drawn across the page, and the date when the next blood test is due to be entered in red ink below the line, e.g., "Blood test due 15.5.14."  
 The date and result of the blood test to be entered; and if negative, the date on which the next blood test is due to be also entered.

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Weight clothed, without boots—lbs.	Urine Normal (N) Albumen (Alb.)	WASSERMANN Reaction Method Modification (M.) Result Positive (+) Negative (-)	Treatment			Signature of M.O. (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialled)
						Arsenical Intravenous Injection. Dose in grammes	Mercurial Dose of Metallic Mercury in grains	Other Methods	
Hilsca	16-2-18	Admitted into Hospital							
	19-2-18	WASSERMANN. <i>negative</i>							
	23-2-18	<i>I.P. present.</i>							
	2-3-18								
	6-3-18		BB	N	.6	†			
	6-3-18		BB	N	.6	†			
	11-3-18	<i>Injec Neo Kharrivan</i>							
	11-3-18		BB	N	.9	†			
	14-3-18	WASSERMANN. + + +							
	18-3-18		BB			†			
	20-3-18	" " "							
	25-3-18	<i>discharged Hstp. to attend.</i>	EX	N	.6	†			<i>Spencer Coyne</i>
	1.4.18								
	1.4.18		BB	N	.6	†			
	8.4.18								
8.4.18		BB	N	.9	†				
15.4.18	WASSERMANN TEST RESULT <i>negative</i>							<i>de la Harpe</i>	

**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 Commissioners of Chelsea Hospital. Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital Chelsea, London, S.W.1.

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

**A Name in full** Roberts Herbert  
**Regiment from which discharged** 1 New Brunswick  
**Regimental Number** 2301  
**Where born (Parish, Town and County), and when** Triton - Notre Dame Bay Nfld 11/6/98.  
**Intended address** Triton Notre Dame Bay Nfld.  
**Height on discharge** 5 Feet 9 Inches  
**Colour of Hair on discharge** Fair **Colour of Eyes** Blue  
**Descriptive marks** scar back. **Complexion** Fresh  
**Figure on discharge** medium  
**Christian name of Father** John  
**Christian name of Mother** Charlotte  
**Wife's Maiden name in full** \_\_\_\_\_  
**Date and Place of Marriage** \_\_\_\_\_  
**Christian names of Children** \_\_\_\_\_  
**Nature and locality of civil employment desired** Fisherman.



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) Herbert Roberts  
 (Rank) pte  
 Station Wands worth Date 10-1-18

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.

John Hughes Medical Officer i/c Hospital.

Station 3rd London General Hospital, Date 10. 1. 18

WANDSWORTH, S.W.

**B Period of Service and in what Corps** ...

Regiment	Years	Days	All Service Abroad with Stations	Years	Days
			India COPY SENT TO O.C. H.Q. S. Africa ST. JOHNS, N.F.L.D.		
			N.F.P.38. No. <u>8911/2</u>		
			DATED <u>22 FEB 1918</u>		

Disallowed ...

Service towards Pension ...

Date inclusive to which pay has been issued

Sums due on account of public debts ...

Sum due on account of advance of Pension }

**Rank on Discharge**  
**Character (as on Certificate of discharge)**  
**Where born, and on what date**  
**Date and Place of first Enlistment**  
**Trade on Enlistment**  
**Cause of Discharge**  
**Number of G.C. Badges**  
**Wounds, and Actions in which received**

Medals

Other distinguishing marks

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.

Station \_\_\_\_\_ Officer in Charge  
 Date \_\_\_\_\_ Records.

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

# MEDICAL HISTORY

Surname Roberts OF Christian Name Herbert.

Table I.—GENERAL TABLE.

Birthplace:—Parish \_\_\_\_\_ County \_\_\_\_\_

	SPECIAL RESERVE.		REGULAR ARMY	
	Right	Left	Right	Left
Examined	on 18 <sup>th</sup> day of March 1914	at St. John's, Nfld.	on _____ day of _____ 1914	at _____
Declared Age	18 years 5 months		_____ years _____ days	
Trade or Occupation				
Height	5 feet 5 1/2 inches		_____ feet _____ inches	
Weight	128 lbs.		_____ lbs.	
Chest Measurement	Girth when fully expanded... 36 inches		_____ inches	
	Range of expansion... 3 inches		_____ inches	
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V= 6/9 6/6		R.E.—V=	
	L.E.—V=		L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to Cause Rejection	(b)		(b)	
Approved by (Signature)	<i>Lamont Paterson</i>			
(Rank)	Capt Medical Officer.			
Enlisted	at St. John's		at _____	
	on 18 <sup>th</sup> day of March 1914		on _____ day of _____ 1914	
Joined on Enlistment	Corps. 1 <sup>st</sup> Nfld. Reg.	Regtl. No. 2301	Corps. _____	Regtl. No. _____
Transferred to	Newfoundland			
Became non-effective by	on _____ day of _____ 1914		on _____ day of _____ 1914	
(Signature)				
(Rank)				



COPIES SENT		
To	No.	DATE
R.E.—M. OF M.	7473/26	12/5/18
L.E.—1 <sup>st</sup> BN.		
L.E.—2 <sup>ND</sup> BN.		



Table II.—Only for admission to hospital or to the sick list in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of further use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
<i>St. Andrew's Hosp. Sandown R.</i>	19	5	17	19	11	17	<i>G.S.W. R chest penicillin &amp; sand nit.</i>	<i>127</i>	<i>Wounded in France 14.4.17 U.S.17 Empyema opened phd of nit removed. Excellent result D + fresh!</i>	<i>g c Hall Capt. R.A.M.C.</i>
<i>Hilsea</i>	16	2	18	30	3	18	<i>(42) Syphilis (20) Gonorrhoea</i>	<i>42</i>	<i>Sores on penis. Wassermann positive. 606 + Hg. To continue course, vide A.F. J.1238. Fit to rejoin unit.</i>	<i>J. J. J. Capt. R.A.M.C.</i>

**Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.: Examination for Field or Foreign Service, Extension, Re-engagement, or prolongation of Service; Issue of Surgical appliances; Particulars of Dental Treatment, &c.**

Date	Brief Details, and Signature
1/7/16	1 <sup>st</sup> Inoculation <i>J.P.</i>
18/7/16	2 <sup>nd</sup> <i>J.P.</i>
18-8-16	Successful Vaccination <i>N.J.W.</i>
22-9-16	3 <sup>rd</sup> Inoculation Para T. <i>H.W.</i>
29-9-16	Fit for Foreign Service. <i>H.W.</i>

**TABLE IV.—SERVICE TABLE.**

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation



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

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

Examination of *Herbert Roberts*

aged *18* conducted at

Date: *Mar 18/16* Recruiting Officer:

NO OF TEST FINDING

- 1 *No*
- 2 *No.*
- 3 *No.*
- 4 *No.*
- 5 *No.*
- 6 *No.*
- 7 *Yes*
- 8 *Yes*
- 9 *No - NO*
- 10 *u*
- 11 *u*
- 12 *u*
- 13 *u*
- 14 *u*
- 15 *u*
- 16 *u*
- 17 *u*
- 18 *u*
- 19 *u* <sup>6</sup>/<sub>9</sub> *u* <sup>6</sup>/<sub>6</sub> *u*
- 20 *u*
- 21 *u*
- 22 *u*
- 23 *u*
- 24 *u*
- 25 *u*
- 26 *u*
- 27 *u*
- 28 *u*
- 29 *u*
- 30 *u*
- 31 *u*
- 32 *u*
- 33 *No.*
- 34 *128 lbs*
- 35 *5'5 1/2*
- 36 *#101 25/26*
- 37 *#101*
- 38 *parents Mrs J. H. Roberts, Milton Green Bay*
- 39 *parents paroch*

*2301* *2301*

*M. E.*

Signature of Medical Examiner: *J. W. Borden*

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.  
 [696] W9017/2124 1000m 6/15ss 53 50

Forms  
B. 121  
50.

Regiment of 1st. Newfoundland

Number of Sheet First  
 Signature of C. G. Company Chas. W. [unclear] Capt.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<u>2301 Roberts, Herbert</u>	Age on	<u>18</u> years <u>5</u> months	<u>Lumberman</u>	
Joined	Date	Place and Date of Enlistment	<u>St. John's</u> <u>21/3/16.</u>	Religion	
Joined	Date	Period of	{ with Colours <u>2</u> <sup><u>73</u></sup> years. with Reserve <u>2</u> <sup><u>56</u></sup> years.	Place of Birth	

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order (depending with trial)	By whom awarded	REMARKS
<u>Atkins</u>	<u>Jan 11/16</u>	<u>Private</u>		<u>Throwing wood on Sgt's Room</u>	<u>Cpl Eddy</u>	<u>2 days C.B.</u>		<u>Allyce Capt</u>	<u>[Signature]</u>
<u>Atkins</u>	<u>1/8/16</u>	<u>"</u>		<u>Insubordination</u>	<u>Sergeant Haddist</u>	<u>5 days C.B.</u>	<u>2/8/16</u>	<u>W. F. Kendall, Major</u>	<u>R.P.H.</u>
<u>Buttersea</u>	<u>20-1-18</u>	<u>"</u>		<u>Drunk and creating a disturbance, whilst on leave</u>	<u>Documentary</u>	<u>Admonished</u>	<u>27-1-18</u>	<u>Pt. Col. Benners. C.S.O.</u>	<u>32</u>
<u>Rise</u>	<u>28-1-18</u>								

Medically Unfit 1-6-1918.

COPIES SENT		
To	No.	DATE
M. OF M.	<u>7473/46</u>	<u>12/5/18</u>
O.C. 1ST. BN.		
" 2ND. BN.		

To be carried over

Army Form B. 121.

COPY

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.  
(1454) W3937/M2589 250m 7/17r 93 56

Forms  
B. 121.  
41.

Regiment of **ROYAL NEWFOUNDLAND REGIMENT.**

Signature of O. C. Company

Number of Sheet First  
Chas Rayne  
Capt.

Regimental Number and Name <b>2301 Roberts Herbert</b>		Enlistment Age on <b>18</b> years <b>5</b> months		Trade <b>Lumberman</b>	Good Conduct Badges, Service Pay or Proficiency Pay	
Place and Date of Enlistment <b>St Johns 21/3/16</b>		Religion <b>Methodist</b>				
Joined ..	Date	Period of	with Colours	years.		Place of Birth
Joined ..	Date		with Reserve	years.		
Joined ..	Date					



Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	By whom awarded	REMARKS
St Johns	June 12	Pte		Throwing wood in Sergeants room	Cpl Eddy	2 days CB.	CK Pine Capt	Shay
Ayr	1/8/16	"		Insubordination	Sgt Hoddinott	5 days CB	W H Kendall Major	RPH
Barbisea Rise	20/1/18	"		Drunk and creating a disturbance whilst on base.	Documentary	Admonished	Lt Col Bemers DSO	ES

To be carried over

Army Form B. 121.



CERTIFIED TRUE COPY

Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man fit for General Service.



No. 2301

Rank Private

Name (surname first) Roberts Herbert

Regiment 1st Newfoundland

1. State what special qualifications you have for employment in civil life.

Fisherman

2. State the name and address of your last, or any other employer before enlistment, etc. the nature of employment and how long you were employed?

Mrs John Roberts  
Quitor Notre Dame Bay  
Newfoundland

3. What is the nature and locality of the employment you desire?

1st Certain

4. What is the name of your Approved Society?

\_\_\_\_\_

5. Have you been employed whilst with the Colours? If so, in what capacity?

\_\_\_\_\_

Date 8/18

Signature Sgd Roberts Herbert

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 4 (ii), item 3, of Army Council Instruction No.....of 1916.

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

# 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 submitted for the consideration of the Commissioners of Chelsea Hospital.

Statement should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and the Board should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirmation of the 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, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W.

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



**A Name in full** *Roberts Herbert*  
**Regiment from which discharged** *1st Newfoundland*  
**Regimental Number** *2301*  
**Where born (Parish, Town and County), and when** *Tinton North Devon Bay 1/6/1880*  
**Intended address** *Tinton North Devon Bay 1/6/1880*  
**Height on discharge** *5 Feet, 9 Inches*  
**Colour of Hair on discharge** *Fair* **Colour of Eyes** *Blue*  
**Descriptive marks** *Scar Back* **Complexion** *Fresh*  
**Figure on discharge** *Medium*  
**Christian name of Father** *John*  
**Christian name of Mother** *Charlotte*  
**Wife's Maiden name in full** \_\_\_\_\_  
**Date and Place of Marriage** \_\_\_\_\_  
**Christian names of Children** \_\_\_\_\_  
**Nature and locality of civil employment desired** *Fisherman*

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) *Sgt Herbert Roberts* (Rank) *Pte*  
 Station *Wandsworth* Date *1-18*

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.

*via Lon. Genl. Hospital* *Sgt M. Hughes Capt R. Medical* Officer i/c Hospital.  
 Station *Wandsworth SW* Date *18-1-18*

B Period of Service and in what Corps ...	Regiment	Years	Days	All Service Abroad with Stations		
				Years	Days	
				India		
				S. Africa		
Disallowed ...						
Service towards Pension ...						
Date inclusive to which pay has been issued				Sum due on account of advance of pension }		
Sums due on account of public debts ...						

**Rank on Discharge**  
**Character (as on Certificate of discharge)**  
**Where born, and on what date**  
**Date and Place of first Enlistment**  
**Trade on Enlistment**  
**Cause of Discharge**  
**Number of G.C. Badges**  
**Wounds, and Actions in which received**

Medals

Other distinguishing marks

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.

Station \_\_\_\_\_ Officer in Charge  
 Date \_\_\_\_\_ Records.

COPY

Δ. 2301.

DEPARTMENT OF  
MILITIA

St John's, Nfld.,

June 15th, 1918

The O. C.,  
Royal Newfoundland Regiment,  
Headquarters

Sir:-

The undermentioned men have been discharged  
on the dates given.

Kindly note and post in Daily Orders Part II.

I have the honour to be,

Sir,

Your obedient servant

(sgnd) J. M. HOWLEY

Capt. & Paymaster &  
Officer i/c Records

631	Pte.	Robinson, R.	June 1st, 1918	Med. Unfit.
2398	"	O'Driscoll, J.	Do.	Do.
1252	"	Murphy, E.P.	Do.	Do.
2196	"	Stewart, A.	Do.	Do.
4352	"	Morris, E.	Do.	Do.
4142	"	Cooper, J.	Do.	Do.
3018	"	Hann, T.	Do.	Do.
1097	Cpl.	Hackett, D.M.	June 14th, 1918	Do.
1556	"	Tobin, W.	Do.	Do.
2301	Pte.	Roberts, H.	Do.	Do.
97	"	Dawe, G.	Do.	Do.
43	"	Yetman, A.	Do.	Do.

May 1st.,

8.

From Assistant Adjutant,

To Paymaster & Officer i/c Records.

1556. Pte. Tobin, W.

2311. " Roberts, H.

Marginally noted men have been recommended for discharge from the Army as permanently unfit by Medical Board held on May 31st., 1918.

I am sending them herewith for your attention and necessary action, please.

Reg. No. *2301* Rank *Pte* Name *Roberts, H.*

Attested..... Address *Briton T B B (8 Monroe St)*

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

Date of Allotment..... Returned from Overseas.....

Embarked for Overseas..... Cause.....

*Ret'd from O.S. 24-5-18.*

*Discharged from 14<sup>6</sup>/<sub>8</sub>, 109 1906*

No **2301** Name **Roberts, Herbert** Sgt., Batty.,  
or Company **'A'** Corps **1<sup>st</sup> Newfoundland** Date of enlistment **2/13/16** G.C. Badges   
 Date of last entry in Company Conduct Sheet **2/8/16** No. and date of last drunk   
 Period not reckoning towards freedom from extra fine   
 Sheet No. **one** Signature O.C. **J. Munn, Capt.** Service or Proficiency Pay   
 Character **Good.**

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
<i>In the field</i>	<i>6.11.16</i>	<i>PL</i>		<i>Deficient of men nations</i>	<i>Sgt Hadden</i>	<i>Pay for 6 weeks</i>	<i>7.11.16</i>	<i>Major John Robertson</i>	<i>R.H.J</i>

Original of passport  
 Army Form B. 122  
 7.5.61

Information to be obtained from a Soldier (Regular or Territorial) whom it is proposed to discharge or to transfer to the Reserve Section W or W(T) in substitution for a man fit for General Service.

No. 2301 Rank Pte

Name (surname first) Roberts Herbert

Regiment 1<sup>st</sup> Newfoundland

1. State what special qualifications you have for employment in civil life.

*fisherman*



COPY SENT TO  
O.C. H.Q.  
ST. JOHNS, N.F.L.D.  
N.F.P.38, No. 2015  
DATED 22 FEB 1918

2. State the name and address of your last, or any other employer before enlistment, etc., the nature of employment and how long you were employed?

*Mrs John Roberts  
Linton, Notre Dame Bay  
Newfoundland*

3. What is the nature and locality of the employment you desire.

*Not certain*

4. What is the name of your Approved Society?

5. Have you been employed whilst with the Colours? If so, in what capacity?

Date 8/1/1918

Signature Roberts Herbert

NOTE.—This Army Form will be given to all patients in Hospital to complete who are suffering from a disability sufficiently serious to make discharge or reclassification in a category from which men are being transferred to Class P. or P.(T.) of the Reserve probable. In the event of the man being brought before a Medical Board for discharge, this Army Form will be produced to the Board, together with other documents laid down in para. 3 (ii), item 3, of Army Council Instruction No. 1912, of 1916.

When the soldier who is to be brought before a Medical Board is not a patient in Hospital, and in substitution cases, these instructions will be carried out by the man's C.O.

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... *Herbert* ..... 2. Surname... *Roberts* .....

3. Rank... *Private* ..... 4. Regtl. No... *2301* .....

5. Address in full to which future payments of gratuity are to be forwarded... *Saiton* *west* .....

6. Date of enlistment in the Regiment... *March 19* *1916* .....

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....  
*Received from* .....

8. Relationship of such dependents... *none* .....

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 Mfld. If so, give dates and particulars of such service... *in Mpl. Reg. only* .....

12. Give total length of time which you served on active service, whether in Mfld. or Overseas... *2 years* .....



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

..... *only once* .....

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?.....

..... *yes* .....

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

..... *14 June 1918* (b) *wounded* .....

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....

..... *in Arras April 14 1917* .....

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

..... *no* .....

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

Signature of Applicant: *Herbert Roberts*  
 Place of Residence: *Tracyton Triton West Water Sound Bay*  
 Declared before me at: *St Johns*  
 This *10th* day of *July* 19*.19...*

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

*Wm Guinness Jr.*

POST DISCHARGE PAY.					
Date paid	Paid Soldier.	Paid Dependant.	War Service Gratuity.		Net amount due
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
Certified correct.				.....	Registrar

FORM K

No. 2017



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Herbert Roberts, Regl. No. 2301  
 hereby agree, until further notification by me, and in similar official form to make an Allotment of  
 Dollars and 60 Cents, per diem, from my Pay,  
 to, and for the benefit of the undermentioned Person <sup>and</sup>/<sub>or</sub> Persons, such payment to be made on proof  
 of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup>/<sub>or</sub> Persons  
 concerned, viz.:

Allotment begins May 1st.

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
2016	mother	Mrs John Roberts <i>Commencing 2/19/16</i>	Triton Greenbay	60
Total Allotment, \$				

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, countersigned by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

(Sig.) R. P. Hollaway  
*p*  
 Officer Commanding  
H. Company  
St. John's.  
April 19<sup>th</sup> 1916

(Sig.) Herbert X Roberts  
*Li*  
*med.*  
 (Rank) Pte.

LAST PAY CERTIFICATE

N.F.P./94.

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

Regtl No. 2301 Rank P.O. Name Roberts H. Unit Red Royal Rfla who was repatriated  
to Rfla on 13/5/18 Authority \_\_\_\_\_ Cause \_\_\_\_\_  
DR. \_\_\_\_\_

STATEMENT OF ACCOUNT

OR.

PERIOD: FROM	TO	PARTICULARS									
		£	s	d	£	s	d	£	s	d	
		Balance Dr. from previous pay books	3	5	6	Balance Cr. from					
		Allotment 28 days @ <u>100/-</u>	3	9	1	Pay 28 days @ <u>100/-</u>	28	00			
		Cash Payments:				Field Allowance 28 days @ <u>100/-</u>	2	80			
		<u>19/4/18</u>		10	0		30	80	6	6	1
		<u>26/4/18</u>		2	0	Other Allowances days @ <u>100/-</u>					
		<u>2/5/18</u>		2	0	Other Credits:					
		Other Debits:									
		Hospital Stoppage	4	6	3						
		Barrack Damages			6						
		Miscellaneous Stoppage		3	5						
		Total Debits				Total Credits					
		Balance due by Paymaster				Balance due to Paymaster			5	12	2
			11	18	9				11	18	9

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

Hazley Down Camp (Place) May 10<sup>th</sup> 1918 (Date)

F. Pymant (Signature)  
O.C. "2" Company.

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

Pay & Record Office, London,

13/4/18 to 10/5/18

481  
12/18

Fold Here

---

**ON HIS MAJESTY'S SERVICE**

To the Officer in Charge of Records,

*Royal Nfld. Regt.*

*Dept. of Militia,*

*ST. JOHN'S. Nfld.*

---

Fold Here

SEP 23 1921

1921.

The accompanying **Victory Medal** and/or **British War Medal**

is/are forwarded herewith to

**Herbert Roberts**

in respect of his service as No. **2301** Rank **Pte.**

Name **H. Roberts** **Royal Nfld. Regt.**

Receipt of the same should be acknowledged hereon.

Received **with the 4/9/21 medal**

Signature **Herbert Roberts**

Date **Oct-th 4 9.21**

Address **Ginton West - P. 19 Bay**

[P.T.O.]

Form 3.

# Newfoundland Postal Telegraphs

Office Stamp and Date

Prefix.....

SERVICE MESSAGE

MAY 22 1917

Time received.....by.....Time sent.....by.....

From

To

Postal Casualty Clerk  
Villey - Rd

notified  
yours yesterday Roberts  
undelivered. No chance  
to Briton at present. may be  
tomorrow.

# NEWFOUNDLAND POSTAL TELEGRAPHS.



**Cable Connection with all the World**

## All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

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

*John Roberts*

Address

*Trinity*

Line Number	Rcd	By	Sent	by	Check

Dated May 1, 1917.

To Mr. John Roberts,  
Triton, N.D.B.

Regret to inform you that Record Office, London, officially reports No. 2301, Private Herbert Roberts, was wounded on April fourteenth.

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

J. R. BENNETT,  
Colonial Secretary.

**FOR TYPEWRITER**



**NEWFOUNDLAND POSTAL TELEGRAPHS.****Cable Connection with all the World****All Messages Sent are Subject to the Following Conditions:**

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

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

May 21, 1917.

To

Mr. John Roberts,

Triton, N.D.B.

Record Office, London, today reports No.2301,  
Private Herbert Roberts, has been admitted  
Wandsworth.

J.R. BENNETT

Colonial Secretary.

**FOR TYPEWRITER**

Notification by President of Medical Board of Approval of a Soldier's Discharge under Paragraph 302 (xvi.) King's Regulations.

(To be completed and dispatched on the day on which the discharge is approved.)

To the Officer i/c Records \_\_\_\_\_

*St Helena St*



The Soldier named below has appeared before an Army Medical Board at this station, and his discharge from the Service as "no longer physically fit for War Service" has **this day** been approved. (The discharge will be confirmed for a date 14 days after the date on this notification, see A.C.I. <sup>1823</sup> of 1916.)

Soldier's surname Roberts., Christian names Herbert.  
(in full)

Regt. No. and Rank 2301. Pte Regt. or Corps 1/ NFW.  
(If T.F. this should be stated.)

His address on discharge will be Triton, Notre Dame Bay  
NFW.

This information is for the Central Army Pension Issue Office only.

The Soldier states that\* \_\_\_\_\_ allowance is being issued in respect of him.

\* Insert "separation," "dependants," "family," or "no," as the case may be. The space must not be left blank.

Army Form D. 400A. and Army Form B. 179 for the above-named Soldier are forwarded herewith.

Station 3rd London General Hospital, WANDSWORTH, S.W.

Date 17-1-18

*John Poynter Capt RMC*  
President of Board  
(Approving Officer).

A set of three forms will be made out for each Soldier whose discharge is approved, and will be dispatched to the officers severally indicated.

Attention is drawn to the fact that Forms A, B and C of each set are not in identical terms.

**Notification that a Soldier has been sent Home from Hospital to await Discharge under para. 392 (xvi.) King's Regulations. Admitted 23.11.17.**

Soldier's Regtl. No. 2301 Rank Pte. Name Roberts. H.  
(Surname first)

Corps or Regiment (also Unit if known) 1<sup>st</sup> Bn. Rfd.

To OFFICER in charge of RECORDS 58, Victoria St. S.W.

REGIMENTAL PAYMASTER 58, Victoria St. S.W.

The above-named man, who appeared before a Medical Board, and whose discharge as "no longer physically fit for war service," was approved by the President of the Board on the 17.1.18, has been sent to <sup>the address below</sup> ~~his home~~ on warrant to await instructions as to his final discharge; he has been given £1 (one pound) advance and a suit of plain clothes.

He proceeded on (date) January 18<sup>th</sup> 1918.

to (full address) 58, Victoria Street, S.W.

Place 3<sup>rd</sup> LONDON GENERAL HOSPITAL  
WANDSWORTH. Officer Comm.

Date 18.1.18. G. C. Hall Hospital.  
Capl. M. S.

Three copies to be made; one copy sent to each Officer mentioned above, and one copy filed in the Office Registrar, R.A.M.C.F.

3rd London General Hospital,  
WANDSWORTH, S.W.

From, O. J.,  
3rd. London General Hospital.

To, The O. C.,  
Records, 58 Victoria St W



In accordance with instructions contained in A. C. P. No. 2069 of 1916, I beg to report that:-

No. 2301 Pte H Roberts - 1 Refd.

will shortly be brought before a Medical Board and will probably be discharged from the Army or re-classified.

Duplicate documents will not be required, please.

*H. J. Gagan*  
Capt. R.A.M.C.

Only for use with Men returned from an Expeditionary Force or from  
Garrisons Abroad.

Army Form W. 3016.  
(In Books of 200.)

No. .... Date 19 Nov 1917 Admitted

(1) To the Officer i/c Records, 58 Victoria St 19/11/17

(2) The Officer Commanding, sw (Station) sw

(2) The Officer Commanding, 1st Nfld Contingent

Harry Forbes (Station) sw

(3) The Paymaster, 58 Victoria St

sw (Station) sw

Regimental No. 2301

Rank and Name Pte Roberts St

Regiment or Corps 1st Nfld

has been granted a furlough from 19 Nov to 28 Nov

His address while on leave will be: 58 Victoria St

London sw.

I consider he is fit for\*  
\* Strike out that which is inapplicable.  
i. Duty. I  
ii. Command Depot.  
iii. Employment.

Officer in charge air Registrar R.A.M.C. Hospital,  
3rd London General Hospital (Station).  
WANDS

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office. In the case of men of the Royal Flying Corps, Royal Engineers and Army Ordnance Corps two copies of A.F.W. 3016 will be sent to the Officer in charge Records concerned and one to the Paymaster, instead of one copy to the Officer i/c Records, the Paymaster, and O.C. shown in the Schedule.

*This man has been furnished with a warrant to Victoria and given an advance of £1. (one pound).*



**Notification that a Soldier has been sent Home from Hospital to await Discharge under para. 392 (xvi.) King's Regulations.**

Soldier's Regtl. No. 2301 Rank Pte. Name Roberts H.  
(Surname first)

Corps or Regiment (also Unit if known) 1st Nfld.

To OFFICER in charge of RECORDS 58, Victoria St. S.W.

REGIMENTAL PAYMASTER 58, Victoria St S.W.

The above-named man, who appeared before a Medical Board, and whose discharge as "no longer physically fit for war service," was approved by the President of the Board on the 17.1.18, has been sent to <sup>the address below</sup> ~~his home on warrant~~ to await instructions as to his final discharge; he has been given £1 (one pound) advance and ~~a suit of plain clothes.~~

He proceeded on (date) January 18<sup>th</sup> 1918

to (full address) 58, Victoria Street S.W.

Place WANDSWORTH. Officer Comm.

Date 18.1.18. G C Hall Hospital.  
Capt 4th

Three copies to be made; one copy sent to each Officer mentioned above, and one copy filed in the Registrar, R.A.M.C.F.

**NO EXTENSION OF THIS FURLOUGH IS PERMITTED.**

*N.B.—This Form is to be used for N.C.O.'s and men granted furlough from Hospitals during the period of the War.*

No. ....  
 Hospital at .....

**FURLOUGH**

No. *23* (Rank) Pk. (Name) *N. Roberts*

Unit *Royal Newfoundland Regt*

has been granted a furlough from *21/1/18*

to ~~leave on~~ *11.30 am 22/1/18* and leave to proceed to

*London* *at 58 Victoria St*

*at 11.30 am 22/1/18*

No advance is to be made to him on any account without previous reference

to the Paymaster at .....

(Station) *58 Victoria St*

(Date) *2/1/18*

I/c. *[Signature]* Hospital

[M2238] W11648/M1178 500m 12/16R-6 G&S E. 712. CHIEF PAYMASTER & OFFICER IN CHARGE RECORDS



NEWFOUNDLAND CONTINGENT.

No. 2301 Rank Pvt Name Roberts A.

Pay	F.A.	Wkg	Total
100	70		110
Less: Allotment			60
Net Rate			50

N.F.P./33. ✓  
✓  
✓

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£	s	d		
						From	To							
Balance					Balance	8-6-17						17	16	✓
Acquittance Rolls					Pay @ Net Rate	9 <sup>6</sup> / <sub>17</sub>	19 <sup>11</sup> / <sub>17</sub>	164	50	82.00	16	16	12	✓
Hospital Advances		2	19	6	Station Allowance	19 <sup>11</sup> / <sub>17</sub>	28 <sup>11</sup> / <sub>17</sub>	10	24			1	0	34 18-6
A.B. 34														
P. & R.O. Payments		5	0	0										
Brook Pa W.C.A.			1	6	(25-17-6)									
Cheque (7047)		25	0	0										

7-1-0

RECEIVED

CHECKED.  
*He*



No. 2301 Rank *Plt* Name *Roberts H.*

Pay	F.A.	Weg	Total
100	10		110
Less Allotment			60
Net Rate			50

DEBITS	Date	£	s	d	CREDITS	Period		Days	Rate	£	s	d	£	s	d	
						From	To									
<i>Over into 5 days. Ration allow</i>				10 0	Balance								15	6		✓
Balance					Pay @ net Rate											✓
Acquittance Rolls				<del>10 0</del>												✓
Hospital Advances				1 0 0				51	50	25	50	5	4	10		✓
A.S. 64													1	0	0	✓
P. & R.O. Payments																✓
10-0																7-10-4
<i>Cash 5279</i>				6 0 0												

*Ration allowance  
10 days @ 2/-  
6-0-4*

*H.C.*

*11/11/17*  
*29/11/18*  
*18 1/2*  
*18*  
*7-10-4*

ENCLOSURE

(300-) Wt. W6726/M2834 10,000,000. 9/17. G. & Co.

Army Form C. 348.

Forms  
6944/560/R. 348  
1918

MEMORANDUM.

Chief Paymaster & O.i/c Records,

From Newfoundland Contgt.,  
58, Victoria Street,  
S. W. 1.

To Officer Commanding,  
2nd Bn. Royal Newfoundland R.,  
Winchester.

From Officer Commanding  
2nd Bn. Royal Newfoundland Regt.

To The Chief Paymaster  
Royal Newfoundland Regt.

HA/NV

ANSWER.

Pay & Record Office,

Hazeley Down, Winchester.

4th May, 1918.

May 7th 1918. 191

2301 PTE. A. ROBERTS.

Reference your reply to my 6488/495 (3995) and to the attached (4032a) from O.C. "F" Coy.: please note that papers relating to this man are at this office, including his A.F. B.179.

As a matter of fact, copies were sent to Newfoundland on 22/2/18 when it was thought Roberts would be going. *rehabilitated.*

His name has been added to the waiting list for next draft and you will be duly informed when this is to be.

Any papers which you may have should be returned to this office, please.

*J. J. Anderson* Lieut

Chief Paymaster & O. i/c Records.

Noted.

NEWFOUNDLAND CONTINGENT.  
PAY & RECORD OFFICE.

Ref. Nos. *4151*

Rec'd **8 MAY 1918**

Ack'd \_\_\_\_\_

Ref. Nos. *out*

BRADLEY	
Comd	
P & A	
R. & C.	
B & F.	
P. S.	

Forms  
6488/495/R.&. Q. 348

MEMORANDUM.

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

From Officer Commanding  
2nd Bn. Royal Newfoundland Regt.

To  
Officer Commanding,  
2nd Bn. Royal Nfld Regt,  
Hazeley Camp, Winchester.

To the Chief Paymaster  
Royal Newfoundland Regiment  
London, S.W.

ANSWER.

Pay & Record Office,

Hazeley Down Camp, Winchester

26th April, 1918

May 2nd 1918. 191

2301 PTE. A. ROBERTS.

Will you please say if and when it is proposed to repatriate this man, who was recommended for discharge under A.F. B. 179 some months ago? See my No. 1059/73 of 21/1/18.

This man will be repatriated with next Draft. It is presumed his A.F.B179

is in your possession,

NEWFOUNDLAND CONTINGENT,  
PAY & RECORD OFFICE.

Ref Nos in *3995*  
3 MAY 1918

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

LIEUT. COLONEL  
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT

HA/JC

ACI	
BRANCH	
Comd.	
P & A.	
R. & C. ✓	
B. & E.	
P.S.	

6944/560/R.&C.

Chief Paymaster & O.i/o Records,  
Newfoundland Contgt.,  
58, Victoria Street,  
S. W. 1.

Officer Commanding,  
2nd Bn. Royal Newfoundland R.,  
Winchester.

HA/NV

Pay & Record Office,

4th May, 8.

2301 PTE. A. ROBERTS.

Reference your reply to  
my 6488/495 (3995) and to the  
attached(4032a) from O.C. "F"  
Coy.: please note that  
papers relating to this man  
are at this office, including  
his A.F. B.179.

As a matter of fact,  
copies were sent to Newfound-  
land on 22/2/18 when it was  
thought Roberts would be  
going. *rehabilitated*

His name has been added  
to the waiting list for next  
draft and you will be duly in-  
formed when this is to be.

Any papers which you may  
have should be returned to  
this office, please.

6488/495/R. & G..

Officer Commanding,  
2nd Bn. Royal Nfld Regt,  
Hazeley Camp, Winchester.

Pay & Record Office,

26th April, 8

2301 PTE. A. ROBERTS.

Will you please say if and  
when it is proposed to repatri-  
ate this man, who was recommend-  
ed for discharge under A.F. B.  
179 some months ago? See my  
No. 1059/73 of 21/1/18.

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

HA/JC

No. \_\_\_\_\_

Regtl. No. 2301

Rank <sup>A</sup> Pte

Name Roberts H

Regiment 1st A Coy

Date from 18-1-18

to 27-1-18

To proceed to Sick

REGIMENTAL OFFICE

I/c \_\_\_\_\_ Hospital

Station London

Date 18-1-18

Address whilst on furlough to which any orders will be sent.

Peck House

ONLY FOR USE IN THE CASE OF SOLDIERS RETURNED FROM AN EXPEDITIONARY FORCE, OR FROM GARRISONS ABROAD.

1. Infd. (Regiment):

No. 2301, Rank Plt, Name Robert H.

is discharged from Hospital with orders to proceed to his home

(Address 58 Victoria St.)

S.W.

and there await further instructions as to his discharge from the Service.

\_\_\_\_\_  
Officer Commanding,

Place Wandsworth

H. Jagan

Capt. R.A.M.C. Hospital.

Registrar, R.A.M.C.T.

Date 18/1/18

3rd London General Hospital,  
WANDSWORTH, S.W.



1059/73/Com. /JS

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

Officer Commanding,  
2/R, Newfoundland Regiment  
Winchester.

Pay & Record Office,

21st January 8

2301, Pte. H. Roberts.

Reference attached Police Report 20/1/18 etc. relating to this man. Roberts furlough has been cancelled, and he is ordered to report to you within reasonable time after arrival at Shawford to-morrow, Tuesday, by train due ~~at 10.15~~ *from*

He admits that he was drunk and states that it is the first time in his life, and appears very penitent. Under the circumstances of his being a wounded case for discharge, he has been told that provided he reports to you as ordered, he may be leniently dealt with by you, and might not be sent under escort, please.

Arrangements are being made to send Roberts home with next repatriation draft, no date fixed at present.

Major,  
Chief Paymaster & O.i/c Records

*Roberts papers were sent to you 22/1/17*



The Chief Paymaster,

58 Victoria Street, ACTED UPON

London, S.W. BY

DATE



1ST NEWFOUNDLAND REGIMENT	
PAY & RECORD OFFICE	
Ref. No. <i>1712</i>	
Rec'd. <i>19 FEB 1918</i>	
Acc'd.	
Ans'd.	
File No.	

Hazeley Down Camp,  
Winchester,  
Feb. 18th 1918.

The attached is passed to you.

*[Signature]*  
Karr

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

Application for Medical History sheet, and notice of admission to hospital.

In reply please quote

To Q.C.,

*21 Royal Newfoundland Regt  
Hazeley Down  
Winchester*

*P119*.....and also in any further reference to this patient.

No. 2301

Rank. R/16

Name. Roberts H.

Unit. 21 Royal Newfoundland Regt

(1). The marginally named was admitted to this hospital on 16/2/18.

(2). On discharge he will be instructed to report to you unless instructions to the contrary are received meanwhile.

(3). You are requested to kindly notify me on any change of station of this mans Unit, or of any Unit to which he may be posted or transferred whilst in hospital.

(4). Kindly inform me of any inaccuracy or deficiency in the particulars given in the margin, and if he is only attached to your Unit, please quote "permanent unit".



17 (5)	Kindly attach hereto the ORIGINAL Medical History Sheet, vide A.C.I. No. 302 of 1917, and return early.
Ref. No.	<u>1712</u>
Rec'd.	<u>19 FEB 1918</u>
Ack'd.	
Ans'd.	

BRANCH  
*Ros*  
ACTED UPON

Lieut. Colonel, R.A.M.C.  
Officer in Charge  
*W.F. Clements*  
Lieut. Colonel, R.A.M.C.  
Officer in Charge

**"A" Form  
MESSAGES AND SIGNALS.**

Army Form C. 212  
(in Pads of 100).

No. of Message.....

Prefix.....Code.....m. Office of Origin and Service Instructions	Words	Charge.	This message is on a/c of:  .....Service.	Recd. at.....m
..... ..... .....	Sent		(Signature of "Franking Officer")	Date.....
	At.....m.			From.....
	To.....			By.....
By.....				

<b>TO</b>	<b>MILITARY</b>	<b>HOSPITAL</b>	<b>HILSEA</b>	<b>HANTS</b>
-----------	-----------------	-----------------	---------------	--------------

Sender's Number. * <b>71</b>	Day of Month. <b>21/2/18</b>	In reply to Number.	<b>AAA</b>
---------------------------------	---------------------------------	---------------------	------------

IS	2301	PRIVATE	H	ROBERTS
NEWFOUNDLAND	REGIMENT	FIT	TO	PROCEED
NEWFOUNDLAND	AAA	IF	SO	SHOULD
REPORT	DEPOT	HAZELEY	DOWN	CAMP
NOT	LATER	NOON	FRIDAY	22/2/18
AAA	ALL	ARRANGEMENTS MADE		REPATRIATION
AAA	TELEGRAPH	REPLY		
				SYNOPTICAL

From		
Place		
Time		

*The above may be forwarded as now corrected.*

**(Z)**

<i>Censor</i>	Signature of Addressor or person authorised to telegraph in his name
---------------	--

\* This line should be erased if not required.

N.B.—This Form must accompany any inquiry respecting this Telegram.

# POST OFFICE TELEGRAPHS.



If the Receiver of an Inland Telegram doubts its accuracy, he may have it repeated on payment of half the amount original and its transmission, any fraction of 1d. less than 1/2d. being reckoned as 1/2d.; and if it is found that there was any inaccuracy, the amount paid for repetition will be refunded. Special conditions are applicable to the repetition of Foreign Telegrams.

Office of Origin and Service Instructions.



ST. NEWTON RECORD OFFICE  
 PAY 22 FEB 1918  
 Ref. No. 1172  
 Handled in at ACR 11.72  
 Received here at 12.8  
 Ans'd.  
 File No.

BY *CHM*  
DATE *Headqrs Portsmouth*

TO { *Synoppical London* }

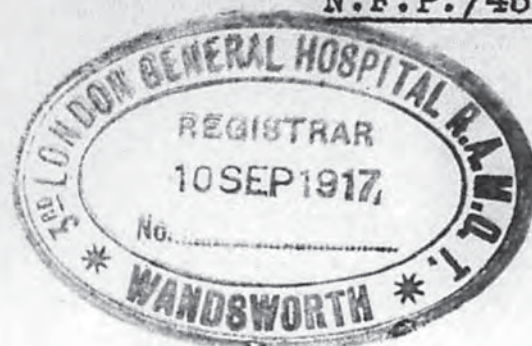
*Ref. regret unfit 12.30*  
*your. 2301 to O. I/B.*  
*wire. Private 21st Inst*  
*travel military Hospital Hulsea*  
*Nts.*

No. \_\_\_\_\_

N.F.P./45.

NEWFOUNDLAND CONTINGENT

To: Paymaster & Officer i/c Records,  
Newfoundland Contingent,  
58, Victoria Street,  
London, S.W. 1.



*C. K. ...  
RMA.*

Please remit to Pte Roberts  
1st Newfoundland Regiment

the sum of 5 five pounds \_\_\_\_\_ shillings, on  
account of any balance that may be due to me.

*approved provided  
money is paid in to  
O.C. 3rd London General  
Hospital to be held  
for Pte Roberts*

Regtl. No. 2301 Rank Pte

Name Roberts

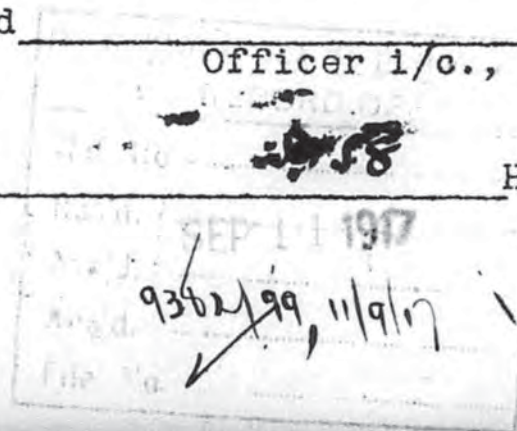
Approved \_\_\_\_\_  
Officer i/c.,

Hospital.

Dated at \_\_\_\_\_

*S. W. Myles Capt Ramos*

10/9/17 1917.



9382/99

11th, September

3rd. London General

Wandsworth, S. W. 18.

2301

Pte

Roberts

5. 0. 0.

**A 038038**

No. **6237/60**

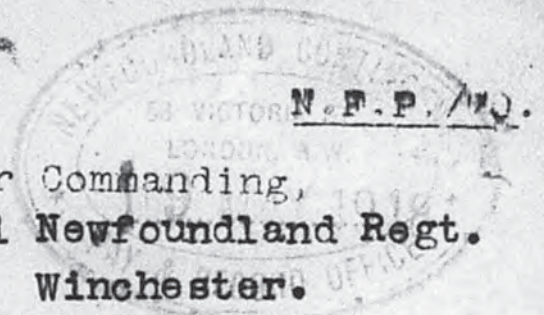
**NEWFOUNDLAND CONTINGENT**

From

To

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

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



Subject: **23rd April 1918**

**April 25th 1918**

Subject: **2301, Pte. H. Roberts,**

Receipt hereunder.

With reference to the following telegram (**3604**) from the Hon. Minister of Militia, received **21 / 4/18**

~~RECEIVED~~  
~~ROBERTS~~  
COMMANDING OFFICER **2/Bn ROYAL NEWFOUNDLAND REGT.**  
1st Newfoundland Regiment

Pay to **2301 Roberts £8:4:0**

Received the sum of **Eight**

Draft **£8:4:0** is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

**Pounds four shillings** on account of cable remittance from Newfoundland.

*M. A. [Signature]*

**Roberts**

Chief Paymaster & O. i/c Records.

No **2301** Rank **Pte H**

LAST PAY CERTIFICATE

N.F.P./94.

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

Regtl No. 2301 Rank 1st Lt. Name Robert H. Unit Parasoyal Mfld who was re-attached

to Newfld on 13/5/18 Authority \_\_\_\_\_ Cause \_\_\_\_\_

DR. \_\_\_\_\_ STATEMENT OF ACCOUNT \_\_\_\_\_ CR.

PERIOD: FROM	TO	PARTICULARS			£	s	d				£	s	d
		Balance Dr. from <u>Previous pay book</u>			3	5	6	Balance Cr. from					
		Allotment <u>28 days @ 1/60¢</u>	116	80	3	9	1	Pay <u>28 days @ \$1.00!</u>	28	00			
		Cash Payments:						Field Allow <u>28 days @ \$1.00</u>	2	80			
		<u>19/4/18</u>				10	0	Other Allowes	30	80	16	6	
		<u>26/4/18</u>				2	0	days @ \$					
		<u>3/5/18</u>				2	0	Other Credits:					
		Other Debits:											
		<u>Hospital Stoppage</u>			4	6	3						
		<u>Paras Damage</u>					6						
		<u>Miscellaneous Stop</u>			3	5							
		Total Debits						Total Credits					
		Balance due by Paymaster						Balance due to Paymaster			5	12	2
											11	18	9

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

Hazelton Down Camp May 10th 1918  
 (Place) (Date)

W. J. Seymour  
 O.C. " " Company.

Made up/Checked in accordance with information received in the Pay & Record Office 13/4/18 to 10/5/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

12 MAY 1918

Chief Paymaster & Officer i/c Records.

2000-11-11



June 18th.1918.

Pte. Herbert Roberts,  
Triton,  
Notre Dame Bay.

Dear Sir,-

I enclose herewith cheque for \$25.27, being the amount due you to the date of discharge. I also enclose Certificate of discharge dated June 14th.1918, together with special form, which kindly sign and return to this Office.

Yours faithfully,

Capt. & Paymaster &  
Officer i/c Records.

Encl. 3.  
J/H.

July 6th. 1918.

Mr. Herbert Roberts,  
TRITON, West, N.D.B.,  
Nfld.

Dear Sir:

With reference to your letter of July 2nd. I beg to state that you will be notified from the Medical authorities here as to whom you are to report to for re-examination when the time comes round.

With reference to your Discharge Badge, I shall put your application through, and as soon as it is engraved, it shall be forwarded on to you.

Yours truly,

For Paymaster

Friton West  
Notre Dame Bay  
July 2/78.

1659  
2nd Lieut J. M. Howley.  
Dear Sirs.

I have received  
the sum of \$48.00 (forty-  
eight dollars) for two  
months pay.

I received a paper from  
you saying that I got to  
report for re-examination  
at the end of the three  
months, please let me  
know what I got to do when  
the three months is up ~~so~~ if  
I got to pay my passage to  
St Johns myself. or not.  
please let me know about my  
discharge badge.

send me your advice as soon  
as possible. I remain  
yours truly  
Herbert Roberts.



DUPLICATE  
MAIL COPY  
CONTINGENT  
Posted 4 SEP

No. 18185 NEWFOUNDLAND

N.F.P./54

No. 538  
Company.

To: The Hon. the Minister of Militia,  
St. John's,  
Newfoundland.

MEMORANDUM OF STOPPAGES/CREDITS on Account of

HOSPITAL DAMAGES

NOTE: - Charge under  
Credit



ORIGINAL of this FORM to be COMPLETED and RETURNED INTACT to Chief Paymaster & Officer i/c Records, Newfoundland Contingent, 58 Victoria Street, London, S.W. 1. DUPLICATE to accompany PAY BOOK as VOUCHER.

Regtl No	Rank & Name	Particulars and Authority	AMOUNT	£	s	c
✓ 2301	Pte Roberts	26/2/18 Pay for cost of 1 Drinking Mug whilst at Hilsa Hil. Hospital as per Voucher 6289				

*AW*  
15/8/18

Pay & Record Office,  
58, Victoria Street,  
London, S.W. 1,

15th August 1918 Chief Paymaster & Officer i/c Records.

CERTIFIED that the above Stoppages/Credits have been made in the Pay Book <sup>Headquarters</sup> Company for period / / to / / and credited to Pay & Record Office, London, S.W.1.  
Dated at \_\_\_\_\_

O.C. " " Company,  
Minister of Militia

No. 10156

ORIGINAL

NEWFOUNDLAND CONTINGENT

N.F.P./54

No. 234

To: Minister of Militia,  
st. John's, Newfoundland.

" " Company.

MEMORANDUM of STOPPAGES/~~CREDITS~~ on Account of Hospital  
Stoppages per A.F.O.1643, Hilsea Mil. Hospital,

NOTE:- Charge under  
Credit P. & R. O. London, Column

ORIGINAL of this FORM to be COMPLETED and RETURNED INTACT to Chief Paymaster & O. i/c Records,  
Newfoundland Contingent, 58 Victoria Street, London, S.W. 1.  
DUPLICATE to accompany PAY BOOK as VOUCHER.

Regtl No.	Rank & Name		Particulars and Authority	AMOUNT				
				£	£	£	s	d
2301	Pte	H. Roberts	30/3/18-30/3/18 1 days @ 60¢				2	5
							2	5

CHECKED  
C.S. P. & R.O.  
27/6/18

Pay & Record Office,  
58, Victoria Street,  
London, S.W. 1,  
28th June 1918

*J.H. Marshall*  
Chief Paymaster & Officer i/c Records.

CERTIFIED that the above stoppages/credits have been made in  
the Pay Book " " Company for period / / to / /

Dated at \_\_\_\_\_

191

O.C. " " Company,  
Battalion.

DUPLICATE ORIGINAL

No. 10156

NEWFOUNDLAND CONTINGENT

N.F.P./54

No. 234

To: Minister of Militia,  
St. John's, Newfoundland.

" " Company.

MEMORANDUM of STOPPAGES/~~CREDITS~~ on Account of Hospital  
Stoppages per A.F.O.1643, Hilses Mil. Hospital,

NOTE:- Charge under  
Credit P. & R. O. London, Column

ORIGINAL of this FORM to be COMPLETED and RETURNED INTACT to Chief Paymaster & O. i/c Records,  
Newfoundland Contingent, 58 Victoria Street, London, S.W. 1.  
DUPLICATE to accompany PAY BOOK as VOUCHER.

Regtl No.	Rank & Name		Particulars and Authority	AMOUNT			
				£	s	d	
2301	Pte	H. Roberts	30/3/18-30/3/18 1 days @ 60¢			2	5
						2	5

*Received Aug 9<sup>th</sup> 1918*

*Discharged June 14<sup>th</sup> 1918*

*C. P. P. 27/6/18*

Pay & Record Office,  
58, Victoria Street,  
London, S.W. 1,

26th June 1918

*J. H. Marshall*  
Chief Paymaster & Officer i/c Records.

CERTIFIED that the above stoppages/credits have been made in  
the Pay Book " " Company for period / / to / /

Dated at \_\_\_\_\_

191

O.C. " " Company,  
Battalion.

No. 10155

NEWFOUNDLAND

DUPLICATE  
CONTINGENT  
MAIL COPY  
Posted 11 JUL 1918

N.F.P./54

No. 254

To: Minister of Militia,  
St. John's, Newfoundland.

" " Company.

MEMORANDUM of STOPPAGES/CREDITS Account of Hospital  
Stoppages per A.F.O.1645, Hilsea Mill, 58 Victoria St. LONDON, S.W.



NOTE:- Charge under  
Credit P. & R. O. London, Column

ORIGINAL of this FORM to be COMPLETED and RETURNED INTACT to Chief Paymaster & O. i/c Records,  
Newfoundland Contingent, 58 Victoria Street, London, S.W. 1.  
DUPLICATE to accompany PAY BOOK as VOUCHER.

Regtl No.	Rank & Name		Particulars and Authority	AMOUNT				
				£	s	d		
2301	Pte	H. Roberts	30/3/18-30/3/18 1 days @ 60d				2	5
							2	5

*Discharged June 14 18*

C.S. Parko  
20/6/18

Pay & Record Office,  
58, Victoria Street,  
London, S.W. 1,  
26th June 1918

*J.H. M... ..*  
Chief Paymaster & Officer i/c Records

CERTIFIED that the above stoppages/credits have been made in  
the Pay Book " " Company for period / / to / /

Dated at \_\_\_\_\_  
\_\_\_\_\_ 191

O.C. " " Company,  
Battalion.



ORIGINAL

No. 13133

N.F.P./54

NEWFOUNDLAND CONTINGENT

No. 285

To: The Hon. the Minister of Militia,  
St. John's,  
Newfoundland.

" " Company.

MEMORANDUM OF STOPPAGES/~~CREDITS~~ on Account of  
HOSPITAL DAMAGES

NOTE:- Charge under Column  
Credit Pay & Record Office, London.

Regtl No.	Rank & Name	Particulars and Authority	AMOUNT					
			£	s	d	s	c	
2301	Pte Roberts	26/2/18 Pay for cost of 1 Drinking Mug whilst at Hilsea Mil. Hospital as per Voucher 6289						6
		<i>OK</i> <i>UM</i>						
		<i>Discharged</i> <i>Jan 11/18</i>						
		<i>all</i> <i>15/8/18</i>						6

Pay & Record Office,  
58, Victoria Street,  
London, S.W. 1,

15th August 1918

Chief Paymaster & Officer i/c Records.

CERTIFIED that the above Stoppages/~~Credits~~ have been made  
in the Pay Book " <sup>Headquarters</sup> " Company for period / / to / /  
and credited to Pay & Record Office, London, S.W.1.

Dated at \_\_\_\_\_

191

\*\*\* " " Company,  
Minister of Militia

ORIGINAL of this FORM to be COMPLETED and RETURNED INTACT to Chief Paymaster & Officer i/c Records,  
Newfoundland Contingent, 58 Victoria Street, London, S.W. 1.  
DUPLICATE to accompany PAY BOOK as VOUCHER.

**DUPLICATE. ORIGINAL.**

No. **15155**

**NEWFOUNDLAND CONTINGENT**

N.F.P./54

No. **285**

To: **The Hon. the Minister of Militia,  
St. John's,  
Newfoundland.**

" " Company.

**MEMORANDUM OF STOPPAGES/CREDITS on Account of  
HOSPITAL DAMAGES**

**NOTE:-** Charge under  
Credit **Pay & Record Office, London.**

Column

Regtl No.	Rank & Name	Particulars and Authority	AMOUNT					
			£	s	d	¢	¢	
<b>2301</b>	<b>Pte Roberts</b>	<b>26/2/18 Pay for cost of 1 Drinking Mug whilst at Hilsa Mil. Hospital as per Voucher 6289</b>						
								<b>6</b>

*The man discharged  
June 14/18  
L.P.*

CHECKED  
*AW*  
15/8/18

Pay & Record Office,  
58, Victoria Street,  
London, S.W. 1,  
15th August 1918

Chief Paymaster & Officer i/c Records.

CERTIFIED that the above Stoppages, ~~credits~~ have been made  
in the Pay Book " " Company for period / / to / /  
and credited to Pay & Record Office, London, S.W.1.

Dated at \_\_\_\_\_

191

" " Company,  
Minister of Militia  
Department

ORIGINAL of this FORM to be COMPLETED and RETURNED INTACT to Chief Paymaster & Officer i/c Records, Newfoundland Contingent, 58 Victoria Street, London, S.W. 1. DUPLICATE to accompany PAY BOOK as VOUCHER.

Forms  
C. 348  
61

## MEMORANDUM.

From **Adjutant**

From

To **Paymaster**

To

ANSWER.

St John's, Nfld.,July 5th, 1918 191 .1912301 Pte. Herbert Roberts

The above mentioned man  
has written me enquiring  
about his Pension and his  
Discharge Badge.

Will you communicate  
with him direct at Triton  
West, Pilley's Island, please.

*J. J. O'Keefe Capt*

ADJT.

Depot.  
The Royal Newfoundland Regiment.  
St. John's.

Certificate to be signed by Soldier on Discharge.

---

I hereby acknowledge that I have received all my Pay and Allowances (including clothing allowances) and all just demands up to the present date.

Date June 27 1918

Sig. of Soldier *Roberts*  
*pte Herbert* 2301

Place *Griton Notre Dame Bay*

Sig. of Witness *Bertram Tucker*

*Copy* COPY

2448



To be used (a) for recruits enlisting direct into the Regular Army, and men of the Territorial Force when they are admitted to Hospital. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

### MEDICAL HISTORY of

Surname Roberts Christian Name Herbert

TABLE I.—GENERAL TABLE.

Birthplace ... Parish \_\_\_\_\_ County \_\_\_\_\_

Examined ... (on 18<sup>th</sup> day of March 1916, at St John's, N.F.)

Declared Age ... 18 years 5 mos. days.

Trade or Occupation ... \_\_\_\_\_

Height ... 5 feet 5 1/2 inches.

Weight ... 128 lbs.

Chest Measurement { Girth when fully Expanded 36 inches.

{ Range of Expansion 3 inches.

Physical Development ... \_\_\_\_\_

Vaccination Marks { Arm ... Right \_\_\_\_\_ Left \_\_\_\_\_ Number \_\_\_\_\_

When Vaccinated ... \_\_\_\_\_

Vision ... { R.E.—V= 6/6 L.E.—V= 6/6

(a) Marks indicating congenital peculiarities or previous disease ... { (a) \_\_\_\_\_

(b) Slight defects but not sufficient to cause rejection ... { (b) \_\_\_\_\_

Approved by (Signature) Lemon Parson (Rank) Capt. Medical Officer.

Enlisted ... at St John's on 18 day of March 1916.

Joined on Enlistment ...	Corps.	Regtl. No. *
<u>1st Nfld Reg</u>		<u>2307</u>
Transferred to ...	<u>Newfoundland</u>	

Became non-effective by \_\_\_\_\_

on \_\_\_\_\_ day of \_\_\_\_\_ 1916.  
(Signature) \_\_\_\_\_  
(Rank) \_\_\_\_\_

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3rd Genl Hosp Wendoverth	19	5	17	19	"	"	98% R Chest probably pact		Wounded in France 14/4/17 N. 5.7. ampyera stored part of it	J. C. Hall Capt R.A.C.
Hilsea	16	2	18	30	3	18	(42) Syphilis (20) Gonorrhoea	42	Seen on penis. Wasserman positive. 606 11/9. To continue course, no A.P. Fit to Rejoin unit.	J. J. Truagh Capt R.A.C.



*Copy 1215*

**COPY**



**SYPHILIS CASE-SHEET.**

Regtl. No. *2301* Rank and Name *Pte Roberts A* Corps *2 Newfoundland*  
 Placed on Syphilis Register at *Hilsea* on *16-2-18* No. in Register *1789*  
 Disease contracted at *London* Primary sore appeared on (date) *28-1-18*

**CONDITION WHEN PLACED ON REGISTER.**

Primary sore—character and site  
 Lymphatic glands *Ingerinal spirochlear posterior Cerv. et dentis*  
 Skin (nature and distribution of rash)  
 Mucous membranes *Sore on Glucous surface of prepuce*  
 Other symptoms

Examination of exudate from sore—Spirochaeta Pallida (present or absent) *Present Feb 27/18*  
 Examination of blood serum—(Method employed (original or modification) *original*)  
 Wassermann reaction (Result (positive or negative) *Positive*)

Station *Hilsea* Date Signature of M.O. *Spd J Louatt Capt Adams*

Struck off Syphilis Register at \_\_\_\_\_ on \_\_\_\_\_  
 Cause of being struck off Register { (a) Recovered }  
 { (b) Transferred to Army Reserve }  
 { (c) Discharged from Army }  
 Station \_\_\_\_\_ Date \_\_\_\_\_ Signature of M.O. \_\_\_\_\_



N.B.—On completion of a course of treatment a red line to be drawn across the page, and the date when the next blood test is due to be entered in red ink below the line, e.g., "Blood test due 15.5.14."

The date and result of the blood test to be entered; and if negative, the date on which the next blood test is due to be also entered.

2448

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Weight clothed, without boots—lbs.	Urine		Wassermann Reaction			Treatment			Signature of M.O. (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initials)	
				Normal (N.) Albumen (Alb.)	Method	Original (O.) Modification (M.)	Result	Positive (+) Negative (-)	Saturated	Intravenous Injection. Dose in grammes	Mercurial		Other Methods
Silsea	16-2-18	Admitted into Hospital											
	19-2-18	Wassermann Negative											
	22-2-18	SG present											
	2.3.18												
	2.3.18		BB		N			.6					
	6.3.18		BB		N			.6		+			
	6.3.18		BB		N			.9		+			
	11.3.18	Inje <sup>n</sup> Neo Karsivan	BB							+			
	14.3.18	Wassermann +++	BB							+			
	18.3.18		BB							+			
	25.3.18		Ex							+		(Sgd) Honatt Capt. R. M. C.	
	25.3.18									+			
	1.4.18												
	1.4.18		BB								+		
	8.4.18		BB								+		
8.4.18		BB								+			
15.4.18	Wassermann Test Result Negative	Duty										(Sgd) C. Campbell Capt. R. M. C.	

2448



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 Nf*

Date

*May 29, 18*

1. *Newfoundland*

5. Age last birthday. *18*

2. No. *2301*

6. Enlisted on *18 Nov. 16.*

3. Rank

at *St John's Nf*

4. Name. *Herbert*

7. Former trade or occupation

*Fisherman*

8. Disability

*Rt Chest*

*& V. D. G.*

9. History:

*Wm wounded in France in April 18*

*Developed*

*discharge*

10. What is his present condition?

2448

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

Large scar on angle of  
R. Scapula - ~~remains of~~  
bone - ~~avoids~~ scar to left of spine  
bicus side of angle of left scapula  
both wounds healed -  
No symptoms of U.S.S or U.S.S.  
at present -

11. Was sanatorium operation advised and refused?

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

Signature

Rank or Qualification

*W. W. L. deen*  
*Col. M.B.*

Remarks if any by Officer i/c Hospital.

Place

Signature

Date

Rank

### Opinion of the Medical Board.

2448

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.

*Weight 148 lbs pulse 104 temp normal  
No accompaniments in lung.  
Cannot stoop well*

15. At present his capacity for earning a full livelihood in the general labor market is lessened by:—  
(Here the president should write in Total, 4-5, 3-5, 2-5, 1-5).

Remarks if any:—

*60% 3 months*

16. Is the disability permanent?

17. Has the disability been aggravated by (a) Intemperance. *No* (b) Misconduct. *No*

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- *No*  
vallescent Hospital,  
Jensen Tuberculosis Camp.

20. We recommend discharge from sanatorium the Army *permanently unfit*.

Remarks if any:—

Signatures.

*W. W. L. deen* President

*Samuel J. Dad*

*John L. W. ...*

Place

Date

*Sophus*  
*May 31, 1918*

APPROVED

Station

Date



*Clayton Macpherson*  
Administrative Medical Officer.  
D. M. S. NEWFOUNDLAND



2448

## 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 *Herbert Roberts*  
 Regiment from which discharged *1st. Newfoundland*  
 Regimental number *20091*  
 Intended address *Initon*  
 Height on discharge *5* Feet *9"*  
 Color of hair on discharge *Light*  
 Complexion *fair*  
 Color of eye: *blue*  
 Descriptive Marks  
 Figure on discharge *medium*  
 Christian name of Father *John*  
 Christian name of Mother *Sharlit*  
 Wife's maiden name in full  
 Date and place of marriage  
 Christian names of children  
 Place and date of soldier's birth. *Initon*  
 Nature and locality of civil employment required *fisherman*

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) *Herbert Roberts*

(Rank) *PTD*

Station *St John*

Date *May 24/15*

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.

*St. Lenden*

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

Station *St John N.Y.*

Date *May 27. 18*

## Medical Report on an Invalid.

Station

3rd London General Hospital  
Wandsworth

Date

16/1



- CERTIFIED TRUE COPY**
- Unit *1st Newfoundland*
  - Regimental No. *2301*
  - Rank *Pte*
  - Name *Roberts H.*
  - Age last birthday *19*
  - Enlisted  $\left\{ \begin{array}{l} \text{on} \\ \text{at} \end{array} \right. \begin{array}{l} 19/3/15 \\ \text{St Johns} \end{array}$

7. Former Trade }  
or Occupation }*Fisherman*

7A. If with previous service in Army, state—

- Former Unit;
- Regimental No.;
- Date of Discharge;
- Cause of Discharge.

*So*

## 8. Disability in respect of which invaliding is Proposed.

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

*GSW Chest Empyema (Rt)*

## 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.

- Date of origin of disability. *April 14th 1917*
- Place of origin of disability. *Dimy Ridge*
- Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. *GSW Chest Apr. 14th 1917 operation 3rd London General Hospital 21.5.17. Empyema (R) much Streptococci pus 16.XI.17. Discharged on Furlough 23.XI.17. Readmitted = Gains in Rt Chest at Empyema utā No TB in Sputum.*
- Give your opinion as to the causation of the disability, stating whether in your opinion it is—
  - 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).
  - constitutional or hereditary, and not aggravated by service during the present war. *No*
  - attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c. *No.*

*GSW Chest (R)*

2448

## Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, in the event of the man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is, (a) caused or aggravated by service in the present war, (b) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

(iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

1. (a.) State whether the disability is clearly attributable to—

(i.) Service during the present war; *Yes*

(ii.) Climate; *—*

(iii.) Ordinary military service; *No*

(iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or *No*

(v.) Whether it is constitutional or hereditary. *No*

(b.) If due to one of the first three of these causes, to what specific conditions do the Board attribute it? *GSW*

22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which? *—*

23. Is the disability permanent? *Some disability will persist*

24. If not permanent, how soon do the Board recommend re-examination? *—*

25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present? *100*

Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.

26. If an operation was advised and declined, was the refusal unreasonable? *—*

27. Do the Board recommend— *Yes*

(a) Discharge as permanently unfit, or

(b) Change to England? *—*

28. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic training) is desirable in a— *—*

(a) Sanatorium; *—*

(b) Hospital; *—*

(c) Convalescent home; *—*

(d) Asylum; or *—*

(e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended. *—*

29. With reference to Army Council Instruction No. 114 of 1917, is any surgical appliance recommended? *No*

30. Does the man require the constant attendance of another person? *No*

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.

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

(a) In action? *Yes*

(b) On field service? *—*

(c) On duty? *—*

(d) Off duty? *—*

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

If so—(a) When? *No*

(b) Where? *No*

(c) Opinion? *No*

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

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

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. *—*

20. Do you recommend—

(a) Discharge as permanently unfit, or

(b) Change to England?

*For Re Classification*

*Sgt J. Hughes Capt RA MC*

Officer in medical charge of case.

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

except †

Station *3rd London Genl Hospital Wandsworth SW*

Date *17-1-18*

*Sgt H.E. Bruce Postie Col Amos TF*  
Officer in charge of Hospital.

\*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.

Station *3rd London Genl Hospital Wandsworth SW*

Date *Jan 17th 1918*

Station *3rd London Genl Hospital Wandsworth SW*

Date *Jan 17th 1918*

Signatures:—  
*Sgt J. Hughes Capt RA MC* President.  
*Sgt H.E. Bruce Postie Col Amos TF* Members.

*Sgt J. Hughes Capt RA MC*  
Administrative Medical Officer.

To be used for recruits enlisting direct into the Regular Army only.  
 Army Form B. 178 to be used for Special Reserve recruits  
 and Special Reservists enlisting into the Regular Army.

**MEDICAL HISTORY of**

Surname Roberts Christian Name Serbert

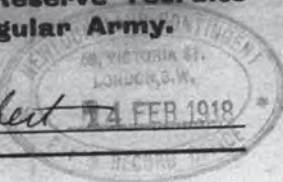


TABLE I.—GENERAL TABLE.

Birthplace ... Parish \_\_\_\_\_ County \_\_\_\_\_

Examined ... { on \_\_\_\_\_ day of \_\_\_\_\_ 191  
 at \_\_\_\_\_

Declared Age ... years \_\_\_\_\_ days.

Trade or Occupation ... \_\_\_\_\_

Height ... feet, \_\_\_\_\_ inches.

Weight ... lbs. \_\_\_\_\_

Chest Measurement { Girth when fully Expanded. \_\_\_\_\_ inches.  
 Range of Expansion \_\_\_\_\_ inches.

Physical Development ... \_\_\_\_\_

Vaccination Marks { Arm ... Right \_\_\_\_\_ Left \_\_\_\_\_  
 Number \_\_\_\_\_

When Vaccinated ... \_\_\_\_\_

Vision ... { R.E.—V= \_\_\_\_\_  
 L.E.—V= \_\_\_\_\_

(a) Marks indicating congenital peculiarities or previous disease ... { (a) \_\_\_\_\_

(b) Slight defects but not sufficient to cause rejection ... { (b) \_\_\_\_\_

Approved by (Signature) \_\_\_\_\_  
 (Rank) \_\_\_\_\_ Medical Officer.

Enlisted ... { at \_\_\_\_\_  
 on \_\_\_\_\_ day of \_\_\_\_\_ 191

Joined on Enlistment ...	Corps.	Regtl. No.
	<u>1st Newfoundland Regt</u>	<u>2301</u>
Transferred to ...	_____	_____

Became non-effective by \_\_\_\_\_  
 on \_\_\_\_\_ day of \_\_\_\_\_ 191

(Signature) \_\_\_\_\_  
 (Rank) \_\_\_\_\_

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
3rd Lon. Genl Hsp Wandsworth	23	11	17				GSW Chest Empyema R		Board held—see overleaf Disability—GSW Chest Empyema R. General condition poor Cannot walk far without shortness of breath Cause—GSW on Active Service Total—Inability to earn a livelihood at present 100%	J. Hall Capt RMC for the 3rd Lon. Genl. Hsp. Wandsworth SW



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

Date	Brief details, and signature
17-1-18	<p>Board Held            Permanently unfit            Board Approved 17-1-18            G. C. Hall Capt. S. M. S.            for the 3rd London Genl Hospital            Wandsworth SW</p>

**Table IV.—Service Table.**

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

Triton West

N Dray

June 30<sup>th</sup> / 1948

1660

M Houley

Enclosed certificate. Sir please find  
Would like for you too let  
me know about my Badge  
& pension. Please send by  
return & give particulars

Pie Herbert Roberts  
Triton West  
N Dray

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

*\$25.<sup>27</sup>/<sub>100</sub>*

*June 14<sup>th</sup> 1918*

Received from the First Newfoundland Regiment  
the sum of *Twenty five* \_\_\_\_\_ *27* Dollars.  
on account of Pay.  
balance

Ch. No. <i>1652</i>	Initials <i>JAN</i>
Pay Ledger <i>159</i>	Initials <i>RK</i>
Gen. Ledger <i>R</i>	Initials <i>RK</i>

*J.B.A.*

Regtl. No. \_\_\_\_\_ Rank \_\_\_\_\_

*Inton 7013*

No. 2301 Rank Pte

Name A. Roberts

DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

*\$15.00*

*May 25<sup>th</sup> 1918*

Received from the First Newfoundland Regiment  
the sum of *Fifteen* ..... Dollars.  
on account of Pay. *00*  
balance

*Roberts H*

Ch. No. <i>1968</i>	Initials <i>EW</i>
Pay Ledger <i>[Signature]</i>	Initials <i>[Signature]</i>
Gen. Ledger <i>[Signature]</i>	Initials <i>[Signature]</i>

Regtl. No. *2301* Rank *Pte*

No. 2301 Rank Pte

Name A. Roberts