



FIRST NEWFOUNDLAND REGIMENT 1914

ATTESTATION OF

No. 4194 Name James Rogers Corps R.L.

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. James Rogers
- 2. What is your full Address? } 40 Brun St. St. Johns
- 3. Are you a British Subject? 3. Yes
- 4. What is your age? 4. 18 Years 10 Months
- 5. What is your Trade or Calling? 5. Sgt. Gen. m. a. c.
- 6. Are you Married? 6. No
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7. No
- 8. Are you willing to be vaccinated or re-vaccinated? 8. Yes
- 9. Are you willing to be enlisted for General Service? 9. Yes
- 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... } 10. { Name
Corps
- 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? } II. Yes

I, James Rogers 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.

J. Rogers SIGNATURE OF RECRUIT.
Robert [unclear] Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at on this 1st day of Dec. 1917

Signature of Attesting Officer [Signature]

†CERTIFICATE OF APPROVING OFFICER.

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

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

Date Dec 1st 1917 } Approving Officer.
Place St. Johns

† 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 James Rogers
 Apparent age 18 years 10 months. Height 5 feet 7 inches
 Chest Measurement { Girth when fully expanded 32 inches
 Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Edward Rogers
110 Queen St. W. Toronto | Relationship Father

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>1-12-17</u>									
Joined at <u>1st Bn's</u> on <u>December 1-1917</u>									
<u>8 June 1919</u> <u>discharged</u>									
<u>Embarked 1st Bn's 5th Stryker Co. Halifax 29-1-18.</u>									
<u>Embarked for St. E. 2-7-18. Disembarked France 5-7-18.</u>									
<u>Joined 1st Bn's 9-7-18. Transferred for 2nd Bn's 22-5-19. Arrived Munich 22-5-19.</u>									
<u>Disembarked for demobilization 22-5-19. Arrived Hqs. 1-6-19</u>									
<u>Demobilization 1st Bn's 29-6-19</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 29-6-19 (date of discharge) 1 years 211 days
 " " Pensions " " " " " " " " " " " "

Reg. No. 4194 Rank Pvt Name Rogers J.
Attested 1-12-17 Address 40 Green St. St. John's
Allotment 60 Allotee Mrs. Ed Rodgers
Date of Allotment 1/1/18 Returned from Overseas _____
Embarked for Overseas _____ Cause _____

Vac 7-12-17 Succ. 11-12-17, and Dec. 17/12/17
2nd Term 2/12/17
H. S. 21-1-18 - 25-1-18, Bro. 25/1/18

C.R. 4194

Extract from Daily Orders Part 11 Unit The Royal EF14.
Regt. June 30, 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by officer i/c Records from 23-6-19.

4194 Pte. Jas. Rodgers.

C.R. 4194

Extract from Daily Orders Part II Unit The Royal WFLA. Regt.
St. John's, June 19th, 1919.

The discharge of the undernoted on demobilisation has been
APPROVED by C.O. Discharge Depot with effect from 15-6-19.

4194 Pte. Jas. Rodgers.

C.R. 4194

Extract from Daily Orders Part II Depot, St. Johns,

Date June 18th 1919.

4194, Pte. J. Rodgers.

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

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

C.R.

4194

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

#4194 Pte. J. Rodgers.

C.F. 4194

Extract from Nominal Roll to B. E. F. embarked
Folkestone. 2-7-18

#4194 Pte.H. Rogers.

C.R.4194

Extract from Telegram despatched to Synoptical, London,
dated June 4th, 1918.

Pay to a s follows:-

#4194 Pte. Rodgers,

25.

THE UNIVERSITY OF CHICAGO

PHYSICS DEPARTMENT

530 SOUTH EAST ASIAN AVENUE, CHICAGO, ILLINOIS 60607

C.R. 4194

Extract from Nominal Roll Draft "H" Company Embarked

S.S. Florizel. Jan.29th, 1918.

4194 Pte. Rodgers J.

4194

C.R.

Extract from Daily Orders Part II Unit The Royal
Nfld. Regt. St. John's Dec. 3rd, 1917.

4194 Pte. J. Rodgers.

Attested for General Service with the Nfld. Regt. with
effect from Dec. 1st, 1917.

C.R. 4294

Extract from Nominal Roll Embarked for B.E.F. (Left Hazleley
Down Camp) 21-9-18.

"End Lieut. M.J. Nugent, Conducting Officer.

4294 Pte. Hillard, W.

MM.

D. Rodgers

C.R.

4194

T.R.O.

S

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.
In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps... *Royal Household* 7. Former Trade or Occupation } *Clerk*
2. Regtl. No. *194* 3. Rank... *pl* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Rafers* *James* (a) Former Regts. or Corps ;
(Surname) (Christian Names) with Regtl. Nos.
5. Age last birthday... *19*
6. Posted for duty on *Dec. 1. 1917* at *St. John's*
in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge ;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When (d) Particulars of Pension or Gratuity
(b) Where (if any)
(c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability. *nil*
12. Place of origin of disability. *nil*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | | |
| (ii.) Previous active service.. .. . | | |
| (iii.) Climate in pre-war service | | |
| (iv.) Ordinary military service before the war | | |
| (v.) Serious negligence or misconduct on the man's part. } | | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } *na.*

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

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

He complains of no disability.

16. Was an operation performed? If so, when and what was its nature?
17. If not, was an operation advised and declined?
18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

na.
na.
na.
na.

20. Do you recommend—
- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?
- Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Repatiation
sp. Dr. D. D. D.
Capt. K. M. C.
 Medical Officer in charge of case.

Station *Mazely. Down*

Date *29/4/19*

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

A.
No. 5270/243

From: NEWFOUNDLAND

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

CONTINGENT

N.F.P./80.

To: Officer Commanding,
1/mn. Royal Newfoundland Regiment,
B.E.F.

3rd April 191 9

191

4194 Pte. Rodgers

With reference to the following telegram from the Minister of Militia, / / (1164)

"Pay to-4194 Rodgers,

£13. 0. 0.

Kindly advise whether this remittance should be

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

Leave the
Chief Paymaster & O. i/c Records

Deposited

No. 5181/389

NEWFOUNDLAND CONTINGENT

N.F.P./79

From:

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

To:

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

4th April 1918

6 APR 1918 191

Subject: 4194, Pte. J. Rodgers,

[Handwritten Signature]
Receipt hereunder.

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

RECEIVED
LIEUT. COLONEL,
OFFICER COMD'G. BATTN
1st NEWFOUNDLAND REGT.

Pay to 4194 Rodgers £2:0:0

Received the sum of Two

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

ounds - on account of cable remittance from Newfoundland.

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

Jas. Rodgers
No. 4194 Rank Private

No. 7725/641

038542

N.F.P./79.

NEWFOUNDLAND CONTINGENT

From:

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

To:

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

16th May 1918

Subject: 4194, Pte. J. Rodgers,

With reference to the following telegram (4380) from the Hon. Minister of Militia, received

Pay to 4194 Rodgers £4:0:0

Draft £ 4:0:0 is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

Chief Paymaster & O. i/c Records.

May 20th 1918

Receipt hereunder.

[Signature]

LIEUT. COLONEL

Officer Commdg. 2nd BATT'N REGT.
Royal Newfoundland Regiment

Received the sum of £4-0-0.

_____ on account of
cable remittance from Newfoundland.

J. Rodgers

No. 4194 Rank PC

0475 11

No. 8893/903

NEWFOUNDLAND CONTINGENT

N.F.P. /70.

From

To

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

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

~~Subject~~ 6th June 1918

Subject: 4194 Pte. J. Rodgers,

With reference to the following telegram (5039) from the Hon. Minister of Militia, received

Pay to 4194 Rodgers £5:0:0

Draft £ 5:0:0 is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

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

June 8th 1918.

Receipt hereunder.

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

received the sum of Five
Pounds on account of
cable remittance from Newfoundland.

J. Rodgers
No. 4194 Rank Private

10935/540

1/Bn. Royal Newfoundland Rgt.,
" B. E. F.

8th, July 8
4194, Pte. J. Rodgers

6110

*Pay to 4194 Rodgers £1.6.9

No Receipt

TO The Chief Paymaster,
Royal Newfoundland Regiment,
53 Victoria Street,
London, S.W.

Sir:-

Please charge the amounts set opposite my name to my account and pay it to the N.W.C.A. "Prisoners of War Fund" in quarterly instalments for the period of one year.

Commencing on the 1st July 1918.

Regtl. No.	Rank	Name	Amount	Signature
4194	Pte	Rodgers J	\$2 ⁵⁰ / ₁₀₀	

I have the honour to be, Sir,
~~Yours faithfully,~~
Your obedient servant.

Date

29-6-18

J. Rodgers.

No. 5493/267

N.F.P./80.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
1/Bn. Royal Newfoundland Regiment,
B.E.F.

8th April 1919

191

Subject: 4194 Pte. Rodgers Jos

ANSWER.

With reference to the following telegram (124) from the Hon. Minister of Militia, received

"Pay to:- 4194 Rodgers
£2. 0. 0.

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

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

Deposited

leaf there

5270/243

1/bn. Royal Newfoundland Regiment,
B.E.F.

3rd April

9

4194 Pte. Rodgers

1184

4194 Rodgers,

£13. 0. 0.

5493/267

1/Bn. Royal Newfoundland Regiment.
B.E.F.

8th April 9

4194 Pte. Rodgers Jos.

124 ✓

"Pay to:- 4194 Rodgers
£2. 0. 0.



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Jas. Rodgers, Regl. No. 4194 hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and Seventy Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person and Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person and Persons concerned, viz.:

Allotment begins January 1 1918.

Table with 5 columns: Identity Certificate No., Whether Wife, Child, other Relative or Friend, NAME (in full), ADDRESS, AMOUNT (each person). Row 1: 3235, Mother, Mrs Edward Bondys Rodgers, 40 Breen St., 60. Total Allotment, \$ 60.

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.) [Signature]
Officer Commanding Company
[Signature]
Dec 28 1917

(S) J Rodgers
(Rank) Pte

No. 4194 Name *Rodgers J.* Sqn., Batty., or Company *Royal Newfoundland* Date of enlistment *1-12-17* C. Badges *1* Service of Proficiency Pay *1/4*

Date of last entry in Company Conduct Sheet *18-12-18* No. and date of last drunk *18-12-18* Period not reckoning towards freedom from extra fine *1* Sheet No. *1* Signature O.C. Company, etc. *J. H. [Signature]* Character *Good*

Army Form B. 122.

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>Field</i>	<i>20/12/18</i>	<i>Pte</i>		<i>Defacement of weather</i>	<i>Lt Heale</i>	<i>Pay for same</i>	<i>20/12/18</i>	<i>Major Lewis</i>	<i>1/4 - 1/4</i>
<i>Ranger</i>	<i>18-12-18</i>	<i>Pte</i>		<i>Defacement of Red Table 3/6/18</i>	<i>Comd. Maralan</i>	<i>Pay for same</i>	<i>18-12-18</i>	<i>Major Lewis</i>	<i>1/4</i>

Rodgers, J

4194

May Sept.

5

The Royal Newfoundland Regiment

Class for Demobilization: —

R. G.

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

12.6.19

Regimental No *4194*

Name

Rodgers, Jas.

Rank

Plt

Address

270

Buen St

Present Medical Category

A1

Recommended for:—

(a) Immediate discharge

(b) Standard Medical Board

Members of Board

R. H. Lant Capt

O.C. Discharge Depot.

L. Paterson

Senior Medical Officer

W. B. Bardeen

M. O. Depot

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4194 Rank Pte Name Rodgers James
 Intended place of residence 40 Brien St

2. Occupation blank
 Classification of soldier E Medical Category A1

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

Eligible for War Service Gratuity

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

Place ST. JOHN'S
 Date JUN 13 1919
 for Mrs. [unclear]
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date ST. JOHN'S
JUN 13 1919
J. Rogers
 Signature of soldier
[Signature]
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place and Date ST. JOHN'S
JUN 13 1919
J. Rogers
 Signature of soldier
James O'Roman
 Signature of witness J.P.

STATEMENT OF SERVICE

7. Enlisted for service 1-12-17 No of days on Military
 Discharged from service 13-6-19 plus 14 days Service 576

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S
JUN 15 1919
R.H. [unclear] Major
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

CONFIRMATION OF DISCHARGE

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

Place A. Davis MEd
June 29/1919
[Signature]
 Office i/c Records
 The Royal Newfoundland Regiment

243029/2462

June 29, 1919

#4194 Pte. James [redacted] gers.
#40 Brian St.,
Cit .

Dear Sir:-

Please find enclosed Discharge
Certificate No. 2462.

Yours truly

Capt. in.
Paymaster & C. i/ c Records.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4194 Rank Pvt Name Rodgers James
 Date of Enlistment 1-12-17 Address 40 Brompton St District St John's
 Occupation Steel Maker Classification for Discharge H Medical Category A1
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

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

Date 12-6-19 _____
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation. J Rogers

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied Ambush

Date 13-6-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. _____ to his home at 400 Brun St and Release Certificate No. 2716 issued.

Date

13-6-19

J.A. Knowlton
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 29-6-19

Date

13-6-19

J.A. Knowlton
Depot Paymaster.

Discharged approved for

15-6-19

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

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B179c	B 120	M 93		

2 Form B

Date

13-6-19

J.A. Knowlton
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

JUN 15 1919

R.H. Sait Capt.

Date

O. C. Discharge Depot.

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

Date

Civil Re-establishment Committee



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

By resume former occupation

J. Rogers

Signature of Man.

Reg. No. *4494*

J. P. Knowlton

Signature of the Vocational Officer or his Representative.

Place *St John*

Date *13-6-19*

191

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

MEDICAL HISTORY

OF

Surname Rogers

Christian Name James

Table I.—GENERAL TABLE.

Birthplace:—Parish St. John's County Rfld

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>1st</u> day of <u>Dec</u> 191 <u>7</u>	on	day of	191
	at <u>St John's</u>	at		
Declared Age	<u>18</u> years	<u>10</u> years	years	days
Trade or Occupation	<u>Shell Maker</u>			
Height	<u>5</u> feet	<u>7</u> inches	feet	inches
Weight		<u>130</u> lbs.		lbs.
Chest Measurement	Girth when fully expanded	<u>34</u> inches		inches
	Range of Expansion	<u>4</u> inches		inches
Physical Development				
Vaccination Marks	Arm	<u>2</u>		
	Number	<u>Leas</u>		
When Vaccinated				
Vision	R.E.—V= <u>6/6</u>	R.E.—V= <u>6/10</u>	R.E.—V= <u>6/6</u>	R.E.—V= <u>6/10</u>
	L.E.—V= <u>6/10</u>	L.E.—V= <u>6/10</u>	L.E.—V= <u>6/6</u>	L.E.—V= <u>6/10</u>
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>James Paterson</u>			
(Rank)	<u>Major</u>			
		Medical Officer.		Medical Officer.
Enlisted	at <u>St John's</u>	at		
	on <u>1st</u> day of <u>Dec</u> 191 <u>7</u>	on	day of	191
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment	<u>1st Rfld</u>			
Transferred to	<u>Regt H194</u>			
Became non-effective by	on	day of	191	on
			day of	191
(Signature)				
(Rank)				

The Royal Wld. Regiment

DEMOBILIZATION

No. 4194 Rank _____

Name Boyle _____

Warned for demobilization on

JUN 13 1919

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.
In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. *1st Royal Newfoundland* } Former Trade or Occupation } *clerk*
2. Regtl. No. *4194* 3. Rank. *Plt* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Rogers* *James* (a) Former Regts. or Corps ;
(Surname) (Christian Names) with Regtl. Nos.
5. Age last birthday. *19*
6. Posted for duty on *Dec 1/17* at *St. Johns* in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge ;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When (d) Particulars of Pension or Gratuity
(b) Where (if any)
(c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability. *nil*

12. Place of origin of disability. *nil*

13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*
nil

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by | |
|---|---------------------|-------------------|--|
| (i.) Service during the present war | | | |
| (ii.) Previous active service.. .. . | | | |
| (iii.) Climate in pre-war service | } na | | |
| (iv.) Ordinary military service before the war | | | |
| (v.) Serious negligence or misconduct on the }
man's part. | | | |
| 14 (a). If not due to any of these causes, to what }
specific condition do you attribute it? | | na | |

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

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

He complains of no disability -

16. Was an operation performed? If so, when and what was its nature? na
17. If not, was an operation advised and declined? na
18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable? na
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions? na

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

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

Repatriation

Station Benally D Camp

Date 29-4-19

W. J. Proemier Capt R.A.M.C.
Medical Officer in charge of case.

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



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 Office 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 *Rodgers James*

Regiment from which discharged **Royal Newfoundland**

Regimental number *4194*

Intended address *410 Brixton St.*

Height on discharge *5* Feet *9*

Color of hair on discharge *Black*

Complexion *Dark*

Color of eyes *Grey*

Descriptive Marks *Scar on Adam's*

Figure on discharge *Wid*

Christian name of Father *Edward*

Christian name of Mother *Bridget*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *St. John Jan. 29 - 1900*

Nature and locality of civil employment required _____

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

(Soldier's signature in full) *James Rodgers*

(Rank) *Pvt*

Station _____ Date *11-6-19*

I certify that the above named soldier signed the foregoing declaration in my presence, and that the above description and details are, to the best of my knowledge correct.



Station _____ Date _____

Army Form B. 103.

Rogers

Regimental Number *4194*

Casualty Form—Active Service.

Regiment or Corps *Royal Newfoundland*

1-2-1898

Rank *Private* Surname *Rogers* Christian Name *James*

Religion *R.C.* Age on Enlistment *18* years *10* months

Enlisted (a) *1-12-17* Terms of Service (a) *Duration* Service reckons from (a) *1-12-17*

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

Extended *S* { } Re-engaged { } Qualification (b)
or Corps Trade and rate

Occupation *Sleeve maker* Signature of Officer *H. Allen*

*Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		<i>A I</i> Embarked ... <i>25-6-18</i> Disembarked	<i>2 JUL 1918</i>	<i>15 JUL 1918</i>	
<i>17.1.19</i>	<i>2nd Army</i>	<i>Joined to 1. Demob Camp as Staff</i>	<i>Field Cologne</i>	<i>9-7-18</i>	<i>BRISA 2/7/18</i> <i>CA No 121200/17/18</i>
		<i>Arrived in UK</i>		<i>8/4/19</i>	

Int

(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.
 W. 5527—M2093 1000m 7/17 (25686) C. P. & S., Ltd. Forms B/103 E/1555. (P.T.O.)
 NEXT OF KIN: *Edgar Rogers 40 Queen St St Johns Wfld*

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 *James Rodgers* 2. Surname *Rodgers*

3. Rank *SR* 4. Regt. No. *4194*

5. Address in full to which future payments of gratuity are to be forwarded. *45 Bruce St.*

6. Date of enlistment in the Regiment. *St. John's Dec 1/17*

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

8. Relationship of such dependents.

9. Address in full of such dependents.

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?

11. Were you on active service only in Nfld. If so, give dates and particulars of such service. *Overseas*

12. Give total length of time which you served on active service whether in Nfld. or overseas. *From Dec 1/17 to June 13/19*

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

..... *No*

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

..... *No*

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

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

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

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

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

19. Are you now serving in the Regt.?..... If not give:- (a) date of discharge..... (b) Reason for discharge.....

..... *Temporary* *Demobilization*

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

France, Belgium + Germany - From July 1/18 to April 1919 - Ypres

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: *J. Rogers.*
 Place of Residence: *46 Home St. St. John's.*
 Declared before me at: *St. John's, Nfld.*
 This *13th.* day of *June* 19*11.* *J. P. McCarthy.*

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

POST DISCHARGE PAY.					
Date paid	Sold	Sold	War Service		Net amount
	Soldier.	Dependent.	Gratuity.		due
.....
.....
.....
Certified correct.					Paymaster

S

C.R. 4194

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. 4194. NAME. *L. Rogers*...

DATE *Jan. 8/20*
PLACE *St John's Nfld*:

Receipt for Army Book 64

No. 4194 Name J. Rodgers

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

Date July 21st 1950 Name J. Rodgers
Place St. John's Nfld. (Jobian St.)

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

Handwritten initials

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of

1st Newfoundland.

Number of Sheets

One

Signature of O. C. Company

[Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>Rogers J.</u>	Age on	18 years 10 months	<u>Shoe Maker</u>	
Joined		Date	Place and Date of Enlistment	Religion	
Joined		Date	<u>St. John's</u>	<u>R.C.</u>	
Joined		Date	<u>1-12-17</u>	Place of Birth	
Joined		Date	Period of	with Colours <u>211</u> years. with Reserve <u>365</u> years.	

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<u>Demobilized St. John's 29 ⁶/₁₉</u>					

To be carried over

The Royal Newfoundland Regiment 4194

DEMOBILIZATION OF

Reg. No 4194 Rank Plt Name Rodgers James

Date of Enlistment 1-12-17 Address 110 Brompton St District St John

Occupation Steel Maker Classification for Discharge H Medical Category A1

Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N. F. P136	B 268	B 121	N. F. Med	D. F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 108	ME 2		" 6
B 179c	B 120	M 93		

Date 12-6-19

J. M. H.
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation. J. Rogers

Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied Amul Inshe

Date 13-6-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 40 Brien St to his home at 40 Brien St and Release Certificate No. 2716 issued.

Date 13-6-19 *J.A. Howlett*
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 13-6-19

Date 13-6-19 *A. M. ...*
Depot Paymaster.

Discharge approved for 13-6-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B179c	B 120	M 93		

2 Form B

Date 13-6-19 *J.A. Howlett*
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—
Officer i/c Records.
Board of Pension Commissioners.

with following additional documents

Eligible for War Service Gratuity

JUN 15 1919

Date June 24/19 *R.H. Sait Capt.*
O. C. Discharge Depot.

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

Date June 24/19 *J. ...*

Reg. No. *4194* Rank *Plt* Name *Lodgers, Jas.*
Attested Address *40 2nd St.*
Allotment Allottee
Date of Allotment Returned from Overseas *29.1.19*
Returned on S.S. *Consuean* Cause *Discharge*

12.1.19
15.1.19

PASSED TO DEMOBILIZATION OFFICER

DISCHARGE APPROVED ON DEMOBILISATION.