



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4745 Name Arthur J. Rowe Corps R.C.

Questions to be put to the Recruit before Enlistment.

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

Arthur J. Rowe 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.

..... Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at on this day of 1915

Signature of Attesting Officer

†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 1915

Place } Approving Officer.

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.

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

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



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4745 Name Asther J. Rowe ~~Comp~~ R.C.

Questions to be put to the Recruit before Enlistment.

- | | |
|------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| 1. What is your name? | 1. <u>Asther J. Rowe</u> |
| 2. What is your full Address? | 2. <u>Cape St George</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>18</u> Years <u> </u> Months |
| 5. What is your Trade or Calling? | 5. <u>Teamster</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, Asther J. Rowe 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.

Asther J. Rowe SIGNATURE OF RECRUIT.

John W. [unclear] Signature of Witness.

A-76-4-18

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Asther J. Rowe 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 26th day of April 1918.

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

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)

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Arthur Howe
 Apparent age 18 years months. Height 5 feet 5 inches
 Chest Measurement { Girth when fully expanded 35 inches
 Range of expansion 2 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Henry Rowe Case
St. George | 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 L'pot	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>26-2-18</u>									
Joined at <u>St. John's</u> on <u>April 26-918</u>									
<u>Discharged by Order Jan. 11/1919.</u>									
<u>Admitted Barracks Hospital 24-8-18</u>									
<u>Discharged do do 26-8-18</u>									
<u>Special Duty Home defence Highwell King 2-9-18</u>									
<u>Returned to Headquarters 22-11-1918.</u>									
<u>Demobilization St. John's</u>									<u>11-1-1919</u>
Total Service forfeited as above.....									
Total Service towards Engagement to <u>11-1-1919</u> (date of discharge)									
Pensions " " " " " " " " " " " "									

R. 4745-

Extract of Daily Orders Part II, Depot St. John's, dated
Jan. 14th 1919.

DISCHARGE & RECALL ON DEMOBILIZATION.

The discharge of the undernoted man on demobilization
has been confirmed by Officer i/o Records on noted
date.

4745 Pte. Arthur Rowe.

Discharged 11-1-19

C.R.

4745

Extract from Daily Orders Part II Unit The Royal Wfld.
Regt, St. John's , Dqs.16th, 1918.

The undernoted Man discharges on Demobilization ~~has~~
been approved by O.C. Discharge Depot from Noted date
~~the~~ he was removed from Depot Strength and transferred
to Discharge pending confirmation by Officer I/C Records.

4745 Pte. A. Rowe.

14-12-18.

C.R. 4745

Extract from Daily Orders, Part 11, UNIT: The Royal Newfoundland Regiment, dated Nov. 23rd. 1918.

SPECIAL DUTY.

4745 Pte. A. Rowe.

Returned from SPECIAL DUTY at Stephenville 22/11/18.

C.R. 4745

Extract from Daily Orders Part III Unit The Royal 2214.

Regt. St. John's, 3-9-19

4745 Pte. A. Rowe.

Proceeded to Stephenville crossing on Special Duty
3-9-19.

C.R. 4745

Extract from Daily Orders Part 11 Unit The Royal Nfld.

Regt. St. John's dated August 26th, 1918.

4745 Pte. A. Rowe.

Discharged from Barracks hospital 24/8/18.

C.R. 4745

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt. St. John's, dated August 24th, 1918.

4745 Pte. A. Rowe.

Admitted to Barracks Hospital 24-8-18.

Extract from Daily Orders part 11, from Unit The
Royal Wfld.Regt. St.John's, dated April 29, 1918.

#4745 Pte. A.J.Rowe.

Attested for General Service with the Royal Wfld.
Regt. ~~9~~ from 26/4/18.

Rowe, Arthur

4745

Ray Sept.

January 11th., 1919.

#4745 Pte. Arthur Rowe,
Espe St. George.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 421."

Yours faithfully,

Captain,
Paymaster & Officer i/c Records.

Enc'l 1.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4745 Rank Capt Name Arthur Rowe
 Intended place of residence Capt. St John's
2. Occupation Tradesman
 Classification of soldier A Medical Category A 11
3. The above named man is discharged in consequence of Demobilization
4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.
- Place DEC 12 1918
 Date DEC 12 1918 Arthur Rowe
 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 Arthur Rowe
Dec 12th 1918 Arthur Rowe
 Signature of soldier
Edwards Capt
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.
- Place and Date St John's Dec 12th 1918
St John's Arthur Rowe
 Signature of soldier
Edwards Capt
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 26. 4. 18 No of days on Military
 Discharged from service 14. 12. 18 plus 28 days Service 256 days
261

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 R.H. Ainslie Capt
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
- Date DEC 14 1918

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
- Place St John's Med W. Howley Capt
 Officer i/c Records
 The Royal Newfoundland Regiment
- Date January 11, 1919
2079/421

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 14745 Rank. Pvt Name Rome - Arthur
 Date of Enlistment 26.4.18 Address Cape George District St George
 Occupation Farmer Classification for Discharge A Medical Category ATF
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P36	B 288	B 121	N.F. Med.	D.F. 1.
B 178	W 3494	B 122	Board 1st	" 2.
B 178a	D 400A	B 1915	do 2nd	" 3.
B 179	D 400B	Form L	do 3rd	" 4.
B 179a	D 400C	Form K	do 4th	" 5.
B 179b	B 103	ME 2		" 6.
B 179c	B 120	M 93		

Date 25.11.18

Arthur Capt
O. C. Discharge Depot.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Arthur

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$6.00

(b) ~~Clothing~~ Supplied Joseph H. Knowlton

Date 12-12-18

O. Jc. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *N 220* to his home
James Hunt and Release Certificate No. *295* issued.

Date *12-12-19*

ABDicks Capt
 Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection
 therewith settled. He has received pay and allowances to *11-1-19*

Date *12-12-18*

W. H. C. Capt
 Depot Paymaster.

Discharge approved for *14 12 18*

Forwarded with following documents to O.C Discharge Depot.

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

Date *12-12-18*

ABDicks Capt
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
 Board of Pension Commissioners.

with following additional documents.

Date *DEC 14 1918*

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

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

Date *Dec 14 1918*

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

MEDICAL HISTORY

OF

Surname

Rawe

Christian Name

Arthur J

Table I.—GENERAL TABLE.

Birthplace:—Parish

Cape St George

County

Nfld

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	<i>26</i>	<i>Apr</i>	<i>8</i>	
at	<i>S Johns</i>		at	
Declared Age	<i>18</i>	years		days
Trade or Occupation	<i>Seaman</i>			
Height	<i>5</i>	feet		inches
Weight		<i>146</i> lbs.		lbs.
Chest Measurement	Girth, when fully expanded...		<i>35</i>	inches
	Range of Expansion...		<i>3</i>	inches
Physical Development	Right	Left	Right	Left
Vaccination Marks	Arm	<i>Wca</i>		
	Number			
When Vaccinated	<i>5/20/90</i>			
Vision	R. E.—V=	<i>6/10</i>	R. E.—V=	
	L. E.—V=	<i>6/10</i>	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>Lammie Paterson</i>			
(Rank)				
	Medical Officer.		Medical Officer.	
Enlisted	at	<i>S Johns</i>	at	
	on	<i>26</i> day of <i>Apr</i>	on	day of 191
		Corps.		Regtl. No.
Joined on Enlistment	<i>Medical 4715</i>			
	<i>Nfld</i>			
Transferred to				
Became non-effective by	on	day of	on	day of
		191		191
(Signature)				
(Rank)				



Descriptive Return of a Soldier Discharged on Account of Disability

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

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

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

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

Name in full *Arthur Rowe*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *4745*
 Intended address *Mack's Point Bay St George*
 Height on discharge Feet
 Color of hair on discharge *Black*
 Complexion *Dark*
 Color of eyes *Brown*
 Descriptive Marks *none*
 Figure on discharge *Fair*
 Christian name of Father *Henry*
 Christian name of Mother *Maggie*
 Wife's maiden name in full *Jessie*
 Date and place of marriage
 Christian names of children
 Place and date of soldier's birth. *Mack's Point B.S.G. 11th Dec 1900*
 Nature and locality of civil employment required *Fishing*

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)

Arthur Rowe
Mack's Point Bay St George

(Rank)

Pte

Station

Princes Rest

Date

Dec 10 1918

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

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

Civil Re-establishment Committee.



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

To work at Fishing

his
Arthur S. Rowe Signature of Man.
mark
Reg. No. *4745*
Witness P. Keegan
Edw. S. Keegan
Signature of the Vocational Officer or his Representative.

Place *St John's*

Date *12/24/18* 191

The Royal Newfoundland Regiment

Class for Demobilization:—
A

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

NOV 27 1918

Date

 Regimental No. *4745*

 Name *Rowe Arthur*

 Address *Marches St. Bay St. George*

 Present Medical Category *A II*

 Recommended for:— { (a) Immediate discharge
 (b) ~~Standing Medical Board~~

Members of Board {	<i>R.H. Lait</i> O.C. Discharge Depot.
	<i>L. Stenson</i> Senior Medical Officer
	<i>B. Lunden</i> M. O. Depot



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 Arthur J. Rowe
aged 18 years conducted at 20 Quarters
Date: April 26/19 Recruiting Officer:

NO OF TEST	FINDING
------------	---------

1	No
2	No
3	No
4	No
5	No
6	No
7	Yes
8	Yes
9	No
10	n
11	n
12	n
13	n
14	n
15	n
16	n
17	n
18	
19	Yes both
20	n
21	n
22	n
23	n
24	n
25	n
26	n
27	n
28	n
29	n
30	n
31	n
32	

[Handwritten initials]

Yes 5 yrs ago (Scar left arm)
116
32-35

Father Henry Pope St George
no

[Handwritten initials]

Signature of Medical Examiner:

[Handwritten signature]

D. J. BETHUNE, M.D.

P.O. Box 36

ST. GEORGE'S
NEWFOUNDLAND

Medical Examination of
Arthur Joseph Rowe Age 18½

Conducted at St. George's on the 20th day
of April 1918

No. of questions

- 1- No
- 2- No
- 3- No
- 4- No
- 5- No
- 6- No
- 7- Yes
- 8- Yes
- 9- No
10. No color blindness
11. 1st Royal Mts Rest
- 12- No trouble about his legs.
- 13- Two defective teeth.
- 14- Throat all right
- 15- Ears all right
- 16, 17, 18- Chest, Heart, and Lungs all right
- 19- Illiterate. (Reading R. 050 L. 050) distance ½
- 20 to 25. Limbs and joints all right.
- 26 Feet all right
27. No anal trouble.
28. Hearing good.
- 29 to 32. No physical weakness
33. Yes - 1913
34. 5 ft 5 in
- 35- 147 lbs
- 36- 33 - Expansion 2½
- 37- \$500⁰⁰
- 38 - Henry Rowe - Cape St. George St. George's Bay.
- 39 - None

Result

Approved

Richard Mac Donnell J. S. M.
Acting Recruiting Officer
St. George's

D. J. Bethune, M.D.

REGISTRATION ALLOWANCE BRANCH

NOTICE.

THIS SUPPLEMENTARY REGISTRATION AS TO BE FILLED IN CORRECTLY IN every detail and a complete reply must be given to each question. Each statement is considered as being made on oath and the form is to be signed before a Registrar or the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace and returned to :-

WED. PAYMASTER,
Registration Allowance Branch,
St. John's, Hild.

1. Name in full of Soldier Rank Reg't or Unit Reg't No.
Arthur Rame *Private* *1st. Hild Reg't* *4745*

2. Age of Soldier Married or Single
Eighteen *Single*

3. Name in full of Mother Age Occupation Permanent Address
Margaret Rame *39 yrs* *Housewife* *Marche's Point, Cape St. George*

4. Give name of your husband Age Occupation Here Employed.
Henry Rame *39 yrs* *Fisherman* *—*

5. If your husband is not supporting you state the reason. *My husband has been an invalid for two years*

6. If your husband is a chronic invalid and totally incapacitated state nature of invalidity. (A medical certificate must be enclosed with this document stating from what date husband has been totally incapacitated and for how long incapacity is likely to continue.)
For the past two years my husband has been afflicted with angina pectoris and since October 1926 he has been an invalid and totally incapacitated from doing any work whatever.

7. If you are a widow state date and place of death of your husband.

8. Have you married again since death of above mentioned husband?

Not married
W. J. Gammage

9. Names of your other Children Address in Full Age Occupation Married or Single.

<i>Charles Rame</i>	<i>Marche's Point</i>	<i>14 years</i>	<i>Helps about the farm</i>	<i>Single.</i>
<i>Harry E. Rame</i>	" "	<i>12 "</i>	<i>Helps with home work</i>	
<i>Joseph Rame</i>	" "	<i>9 "</i>		
<i>Edith Rame</i>	" "	<i>6 "</i>	<i>Schoolgirl</i>	
<i>Amabel Rame</i>	" "	<i>5 "</i>	<i>School boy</i>	
<i>Rita Rame</i>	" "	<i>3 "</i>		

State amount earned by yourself your husband.

About fifty dollars

11. State amount and source of any other income.

None

12. State value of real property belonging to you and your husband.

Two hundred dollars

13. State value of personal property belonging to you and your husband.

Thirty dollars

14. If husband is dead state value of real and personal property left by him.

Not dead

15. Actual amount contributed by soldier during the year prior to enlistment.

Four hundred dollars

16. Was this amount contributed weekly or monthly.

By the year

17. Did this amount include payment of son's Board etc.

Yes

18. State your son's trade or occupation prior to enlistment

Fisherman

19. State amount of his wages per week.

None

20. State name and address of his last employer.

None

21. State amount of Monthly support from son since enlistment.

Nothing

22. State amount of allotment received by you from son monthly.

Nothing

23. State from what date did you receive allotment?

24. Actual amount contributed by other children.

Weekly

Monthly.

Nothing

25. Are any of these children in the employ of you or husband?

All living in the home with us

26. If not receiving support from other children state cause. Explain fully.

They are all too young to earn

27. With whom are you residing at present.

In my own house

28. Have you made a previous claim for Separation allowance? If not, why? Give particulars.

Have not made any previous claim for Separation Allowance. Did not know that I was entitled to it until a short time ago.

29. Are you already in receipt of Separation Allowance from any source? If so, how much?

No

Are you in receipt of any payment from any Patriotic Fund? If so, how much?

No.

Was the soldier at the time of his enlistment an employee of the Nfld. Government.

No.

In what capacity and in what place?

Is he in receipt of a salary as much while serving in the Ent. Nfld. Regt.

If so, how much?

No -

I herewith make this solemn declaration conscientiously believing the same to be true and knowing it to be of the same force and effect as if made under Oath and in virtue of the Evidence Act.

Signature of applicant..... Margaret ^{per} ~~Paul~~ ^{mark}

Place of Residence..... March's Point, Cape St. George

Declared and subscribed before me at..... Port au Port

This..... 24th..... day of..... August..... 1918

Signature of Barrister of the Supreme Court, District Judge, Magistrate, Notary, Public or Justice of the Peace..... J. M. Du Bourdieu J. P.

This application must be signed by two responsible Parties one of whom must be a Clergyman, the other a representative of your local Patriotic Fund Committee, certifying that to the best of their knowledge after careful investigation, the above statements are correct, and the above soldier first mentioned, is the sole support of the applicant.

Signature of Clergyman..... J. M. Du Bourdieu J. P. (Cape St George)

Signature of Member of Patriotic Fund Committee.....

approved 19/10/18
J.P.B.
W.A.P.

MEDICAL CERTIFICATE.

For Information of the Separation
Allowance Branch.

1. Name and regimental number
of soldier in respect of whom
Separation Allowance is claimed.

} *Arthur Rowe*

2. Name and age of
said soldier.

} *Arthur Rowe, 18 years*

3. Is said a chronic
invalid and totally in-
capacitated.

} *Yes.*

4. Of what nature is disability?

} *Chronic Tuberculosis.*

5. From what date has this total
incapacity been existent?

} *About two years.*

6. How long is total incapacity
likely to continue and what will
be the effect on earning power?

} *Total lifetime*

7. If not totally incapacitated
by what per cent in your opinion
is capacity for work reduced, and
from what date?

} *Totally incapacitated*

8. Are you the regular attending
physician?

} *Yes.*

Y X

9. Relationship to soldier of
applicant?

}

I certify that the above statements are correct.

Park on Park. Place.

August 29, 1918. Date.

T. J. Moore Physician.

3041

will be forwarded
month

March's Point Port-au-Port
Oct. 26th 1918

474's

The Paymaster
Separation Allowance Branch
St. John's

Dear Sir, I desire to say that Mr. Dubaudieu
of Port-au-Port made out a Separation allowance
claim for me some months ago and says
that he sent it to your department but
I have received nothing yet. Will you
please send me what is due me
as I have an invalid husband and several
small children to support and the
only help I had is in the Army.
Yours truly
(Mrs) Henry Rowe

4745
or 682

October 31st. 1918.

Mrs. Henry Rowe
Marsh's Point, Port au Port.

Dear Madam:

With reference to your letter of October 26th. I beg to inform you that on the 7th. of November a cheque for Separation Allowance will be forwarded to you in payment from the date your boy declared his allotment up to the 31st. Oct. In future all cheques will be forwarded to you on the 7th. of each month in payment for the preceding month.

Yours truly,

Lieut.
For Paymaster

4745

Oct. 3rd. 1918.

A.S. DuBourdieu, Esq.,
PORT au PORT.

Dear Sir:

With reference to your letter of Sept. 28th. on behalf of Mrs. Henry Rowe of March's Point, regarding her son's allotment, I beg to inform you that her son declared an allotment commencing from Sept. 1 therefore the first cheque will be posted to her on 7th, October in payment for the month of September.

Yours truly,

Lieut.
For Paymaster

4745
2772

Port au Port, 28th Sept 1781

Dear Sir,

Alotment ^{Sept 1st} ^{at and} ^{we} ^{mailed} ^{7 Oct}

A Mrs. Henry Rowe of Board's Point, Cape St. George, writes me that her son, Pte. Arthur Rowe, has inquired of her whether she has received his "allowance" yet. If by this he means an allotment, I may say that she has not and if any has been made her she has not received it, altho' I beg to assure you that she needs it badly.

The Paymaster
Royal Mfld. Regt.
St. Johns

Yours respectfully
A. C. DesBourcier

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Number of Sheet 02

Regiment of Royal New Forest

Signature of O. C. Company Wm. Churchill

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>Private G J.</u>	Age on	<u>18</u> years <u>00</u> months	<u>Footman</u>	
Joined	Date	Place and Date of Enlistment	<u>Stretton</u>	Religion	
Joined	Date	Period of } with Colours <u>26 1/2</u> years. with Reserve <u>36 1/2</u> years.		<u>R.C.</u>	
Joined	Date			Place of Birth	
Joined	Date				

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</u>	<u>St John's</u>	<u>11</u>	<u>19</u>		

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

9 1945

DEMOBILIZATION OF

Reg. No. 4745 Rank Plt Name Rowe Arthur
 Date of Enlistment 26.4.18 Address Cape St George District St George
 Occupation Teamster Classification for Discharge A Medical Category AIF
 Recommendation S.M.B. _____ Disability Rating _____
 Passed to Demobilization Officer with following documents:—

N.F. F36	B 268	B 121	1	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122		Board 1st	" 2	
B 178a	1 D 400A	B 1915	2	do 2nd	" 3	
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K	1	do 4th	" 5	
B 179b	B 103	ME 2	1		" 6	
B 179c	B 120	M 93				

Date 28.11.18

Arthur Rowe
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am _____ in a position to resume civilian occupation.

Arthur Rowe
with papers - relatives

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~~

Joseph H. Snowling

Date 12-12-18

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 220 to his home at Marathon Point, Cape Town and Release Certificate No. 295 issued.

Date 12-12-19

ABDicks RCAF
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 11-1-19

Date 12-12-18

Woolley Capt.
Depot Paymaster.

Discharge approved for 14. 12. 18

Forwarded with following documents to O.C Discharge Depot.

N.F. P/36	B 268	B 121	✓ 1	N.F. Med.	D.F. 1	✓ 1	
B 178	W 3494	B 122		Board 1st	" 2	✓ 1	<u>201</u>
B 178a	✓ 1 D 400A	B 1915	✓ 2	do 2nd	" 3	✓ 2	
B 179	D 400B	Form L		do 3rd	" 4		
B 179a	D 400C	Form K	✓ 1	do 4th	" 5		
B 179b	B 103	ME 2	✓ 1		" 6		
B 179c	B 120	M 93					

Date 12. 12. 18

ABDicks RCAF
Demobilization Officer.

APPROVED h

Documents as above forwarded to:—

Officer in Charge Records.
Board of Pension Commissioners.

with following additional documents.

Date DEC 14 1918

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

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

Date Dec 16 1918

W. Woolley Capt.
12-21-18

Reg. No. 4745 Rank *Pvt* Name *Rose R. P.*
 Attested *27-4-18* Address *Cape St. George*
 Allotment *50* Allotee *Maggie Rose Mother!*
 Date of Allotment *1-9-17* Returned from Overseas _____
 Embarked for Overseas _____ Cause _____

<i>47-4-18</i>	<i>Vac</i>	<i>2nd June 17-5-18</i>
<i>6-6-18</i>	<i>to 16/6/18</i>	
<i>Returned from leave 18-6-18</i>		
<i>24-9-18</i>	<i>Admitted to Barracks Hoop</i>	
<i>26-9-18</i>	<i>Discharged from Barracks Hoop</i>	
<i>3-9-18</i>	<i>Special duty Stephewell King. returned 27/11/18</i>	
<i>12-12-18</i>		
DISCHARGE APPROVED ON DEMOBILIZATION		