

ROYAL NEWFOUNDLAND REGT.

Accessed 15-11-51

1914-1918

3971



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3971 Name Walter Royall Corps Infantry

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Walter Royall</u> |
| 2. What is your full Address? | 2. <u>107 James St. St. John's</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>19</u> Years <u>2</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>Navy</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. { |

I, Walter Royall 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.

4/13-10-17 Walter Royall SIGNATURE OF RECRUIT.
Edward SIGNATURE OF WITNESS.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Walter Royall 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 13 day of Oct 1915.

Signature of Attesting Officer Walter J. J. J.

†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 1st Battalion.

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

Date.....1915 } 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.

Name Albert Royall

Apparent age 19 years 2 months. Height 5 feet 9 inches

Chest Measurement { Girth when fully expanded 35 1/2 inches
Range of expansion 4 1/2 inches

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mr John Rowland
13 1/2 James St City | Relationship Mother.

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									
" " Pensions " _____ [" "] _____ " _____ "									



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3971 Name Albert Ryall Corps R.C.

Questions to be put to the Recruit before Enlistment

1. What is your name? 1. Albert Ryall
2. What is your full Address? 2. 137 James St. St. J.
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 19 Years 2 Months
5. What is your Trade or Calling? 5. Labourer
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. Navy
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

I, Albert Ryall 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.

4/13-10-17 A. B. Ryall SIGNATURE OF RECRUIT.
A. C. Edward Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Albert Ryall 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 13 day of Oct 1915.

Signature of Attesting Officer W. H. H. H. H.

†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 compiled 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

3971

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

Name Walter Small
 Apparent age 19 years 7 months. Height 5 feet 9 inches
 Chest Measurement { Girth when fully expanded 35 1/2 inches
 Range of expansion 4 1/2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs Helen Kewton
13 1/2 James St | Relationship Mother
 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 13-10-17
 Joined at M. J. J. J. on October 13-17

Despatched January 30 1919
Embarked M. J. J. S. Penanoke 11-7-17 Embarked for Det. 10 5/18.
Disembarked France 12-5-18 tried to get C.M. when under escort
attempting to escape. Sent to 2nd Lt. H. P. H. 17-8-18. Wounded 29-9-18
Admitted 37th Bn to Det. M. J. J. 29-9-18. Transferred to England 5-10-18
Admitted 3rd Lon. Inf. Bn. 5-10-18. Served in France to Winchester 8-2-18
6 months leave for dentistry 12-12-18. Service Newfoundland 21-12-18
10 months leave of J. J. J. 30-1-19

Total Service forfeited as above.....

Total Service towards Engagement to 30-1-19 (date of discharge) 1 years 110 days
 " " Pensions " " " " " " " "

C.R. 3971

Extract from Orders by Major G.T. Mathias, D.S.O. Commdg.
1st Batta. R. Hfld. Regt. 19-9-18.

Courts-Martial:- No 3971 Pte. A. Hyall. Tried by F.G.C.M.
5-8-18. Charge: When under escort attempting to escape (2)
Resisting an escort whose duty it was to have him in charge
(3) when in confinement, escaping. Finding: Guilty. Sentence
2 months F.P. No.1. Confirmed by Comdt. G.H.Q. Troops 7/8/18.

Encl. Oct 13th / 17 C.R. 3971
Dis. 30-1-19

21 James St.

MEMORANDUM

From

CSO

To

PM

From

To

ANSWER.

R 24/6 1919.

3971 Ryell

Mother here re letter about money. He has been in Asylum for some weeks and likely to remain there considerable time - a serious mental case. What was letter about & what shall I tell Mr Ryell, please

R

See Parsons

June 24 1919.

Don't know what letter is referred to. Is this the man who was in St. M. Penitentiary recently?

Mr. [Signature] Apparently letter written by Governor Parsons and signed by Ryell re W. S. G. Mr. Staton received S.A. but none of W. S. G.

R

P.O. Box 1204

city April 28th 1919.

Capt. Jm. Howley, R.N.R.
Paymaster

4874

militia Bldg
city

Sir,

Enclosed please find an
order re the money which
is at your office
which is seventy dollars
(\$70⁰⁰/₁₀₀) per month
please do not pay it
to any one else only
direct to me. to me.
kindly send it in
one payment that
is the total in one
lot
kindly send it - by
return of mail by post
to the above address
Capt Albert Byall
Pte 3431 R.N.R.
me
over

H.M. Penitentiary St John's nbed
April 28 1919

Captain

Jm. Howley Paymaster Royal nbed. Regt
militia Dept

militia Bldg St John's.

Please Pay over to me the undersigned at the
address P.O. Box 1204 St John's nbed.
the money which is due me by the Dept. to the
amount of seventy dollars (\$70 ⁰⁰/₁₀₀) for a period
of five months (5) making a total of three
Hundred and fifty dollars (\$350 ⁰⁰/₁₀₀)

Kindly send this in one payment. that is the
total amount due me and ~~do~~ please
pay it - do not enclose, but direct to me
Capt. Albert, Royal Private R.N.R. 3971.

C.R. 3971

Extract from Daily Orders part II, Depot St. John's dated Jan. 21/1919.

The Discharges of the undernoted on demobilization have been
confirmed by Officer i/s Records. 20-1-19.

20-1-19.

#3971 Pte. Albert Ryall.

C.R. 3971

Extract from Daily Orders part 11, Depot Sr. J M's dated ^{Jan 20-1919} ~~20~~ 20th, 1919.

The discharges of the undernoted on demobilization have been APPROVED
by G. S. Discharge depot on 16-1-19.

#3971 Pte. Albert Ryall.

C.R. 3971

Extract from Medical Board held Monday Jan. 13th, 1919.

3971 Pte. A. Ryall.

Recommended Discharge as permanently Unfit.

C.R. 3971

Extract from Daily Orders part 11, Depot St. John's dated Dec. 25rd. 1918

Thesum returned from Overseas and reported at Depot 21-12-18.

#3971 Pte. A. Ryall.

C.R. 3971

Extract from Nominal Roll of repatriation draft No. 79 from
the 2nd., Battalion of the Newfoundland Regiment, which
embarked at Tilbury Docks 12/12/18.

#3971 Pte. A. Ryall.

3971

C.R.

Extract from Nominal Roll discharged from 3rd L. G. H.
on 7-12-18 and sent to 2nd Batta. Winchester, for immediate
Repatriation, in accordance with arrangements made by Major
Pittwell.

3971 Pte. A. Ryall.

C.R. 3971

Extract from Daily Orders part II, Depot Winchester by
LIEUT. COL. B. J. BARTON, D.S.O. Officer Commanding 2nd.,
Battalion of the Royal Newfoundland Regiment dated
10-12-19.

The u/m having reported back from the 1st., Battalion
is taken on the strength and posted to "H" Co.,

8-18

3971 Pte, Ryall.

CR 3971

Extract from Casualties received from Pay & Record Office,
London, Oct. 23rd, 1918.

3971 Pte. A. Ryall,

Was transferred from the 3rd London General Hospital to
Holborn Military Hospital, Mitcham, S.W., on 22/10/18.

ISI.

C.R. 3971

Extract from Telegram to Synoptical, London, dated October 17th . 1918.

In answer your telegram:

3971 Ryall:

Progressing favorably.

C.R. 3971

Oct. 15th, 1918

Mrs. John Fowles
131 James Street
C I T Y

Dear Mrs. Fowles :

I beg to inform you that additional information has been received through the Visiting Committee of the Newfoundland War Contingent Association, to the effect that No. 3971., Private Albert Ryall is now progressing favourably

Yours faithfully,

Lieut. Col.,

Chief Staff Officer

C.R. 3971

Extract from War Office List. No. G. 1710 dated 10.10.18.

#3971 Pte. A. Ryall.

WOUNDED 29-9-18.

BC.



C.R. 3971

DEPARTMENT OF MILITIA

ST. JOHN'S Oct 8 1918
NEWFOUNDLAND

Dear Mrs. Fowle:-

I regret to have to inform you that a report has this day been received from the Record Office of the Royal Newfoundland Regiment, London, to the effect that

No. 3971, Private Albert Ryall at 3rd London General Hospital, Wandsworth suffering from G.S.W. left leg.

I trust that later reports will bring news of his convalescence.

Any further information received at this Office as to his condition will be at once notified to you.

Yours faithfully,

Minister of Militia.

Mr. John Fowle

15 1/2 James Street

C.R. 3971

Extract from Casualties received Pay & Record Office,
London.

Admitted to 3rd London General Hospital 5-10-18.

3971 Pte. A. Ryall.

G.S.W. L. Leg.

M.M.

C.R. 3971

Extract from Telegram to Synoptical, London
dated OCTOBER 5th., 1918.

3971 Ryall.

ADVISE CONDITION OF.

C.R. 3971

Extract from Daily Orders Part 11 Unit The Royal Mfld. Regt.,
B.E.F. France, 24/8/18.

3971 Pte. Ryall A.

In arrest awaiting trial, 18/7/18, T

Tried by F.G.C. M. 5/8/18.

CHARGE. (i) when under escort attempting to escape.

(ii) Resisting and escort whose duty it was

to have him in charge.

(iii) when in confinement escaping.

FINDINGS. GUILTY.

SENTENCE. TWO months F.P. No.1.

CONFIRMED. Commdt. G.H.Q. Troops, 7/8/18.

C.R. 3971

Extract from Telegram despatched to Synoptical, London,
dated May 3rd 1918.

No letters have been received from 3971 Royle please
take necessary action

6968/532/R.&C.

C.R. 3974

C. Paymaster & O. i/c Records,
Newfoundland Contingent,
London, S.W. 1.

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

Pay & Record Office,
6th May, 8

O.C. "C" Coy.,
2/Bn. R. Nfld Regt.

C.P. & O.i/c R.,
Nfld Contgt.

Hazeley Down Camp,
8/5/18.

3971, PTE. A. RYALL.

The following is an extract
from telegram dated 4/5/18
(4031) received from the Hon.
Minister of Militia.

"No- letters- have been
"received- from- 3971-
"Royle (Ryall)- please- take
"necessary action-"

Will you please cause an
enquiry to be made on this
subject, and report hereon?

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

Ref. Obverse.

The Soldier referred to
therein has been questioned
on the subject, but can give
no excuse for his not writing,
but promises a letter will be
written immediately.

(Sgd) GEO. M. EMERSON,

Capt.

O.C. "C" Coy.

In. Ref. No. 4178.

C.R. 3971

Extract of Nominal Roll of Draft to B.E.F. embarked
Southampton 10-5-14

6

#3971 Pte .E. Ryall.

C.R. 3971

Extract from Nominal Roll Subvented St. John's for Overseas,
per S.S. "Fierisel" Dec. 11, 1917.

#3971 PTE. A. RYALL.

C.R. 3971

Extract from Daily Orders Part 11 Unit The Royal
Hfld. Regt., St. John's, Oct. 15th, 1917.

3971 Pte. A. Ryall.

Attested for General Service with the Royal Hfld.
Regt., and posted to "Q" Company with effect from
Oct. 15th, 1917.

A. Ryall

C.R. 3971

F. X. O

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 Newfoundland* 7. Former Trade }
or Occupation }
2. Regt. No. *5971* 3. Rank *Plt* 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regt. Nos.
4. Name *RYALL*
(Surname) (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....
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 a (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

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

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

G.S.W. left leg.

11. Date of origin of disability. *Sept 1918.*
12. Place of origin of disability. *Belgium*
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.

wounded Belgium Sept 1918 + dis charged from 3-2-24 for repatriation

14. State whether the disabilities are
- | | | |
|---|---------------------|-------------------|
| | (a) attributable to | (b) aggravated by |
| (i) Service during the present war | <i>Yes</i> | ..... |
| (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? }

In all cases such as facial injury, loss of eye, ear, nose and throat, disfigurement, 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? *Two large incisions on inner outer side of calf healed will be unable to wear puttees for couple of months. No wasting of leg.*

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

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

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
M.M.C. 1/1
Adm. 10

Station *Hazelton Depot Camp*

Date *8/1/10*

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.

OPINION OF THE MEDICAL BOARD.

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a 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.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases 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.

21. Give diagnosis and particulars of:—
- (a) Any disability claimed or discovered.
- (b) The present condition thereof.

22. 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 part of the soldier .. .. . | ..... | ..... |
- Give details:

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

23. Is the disability in a final stationary condition? If not
- (a) How long is the present degree of disability likely to last?
- (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

To Paymaster,

R. Newfoundland Regt.,

58 Victoria St.,

Dear Sir,

Please remit to 3971

Pte. A. Ryall the sum of (£1
one pound) out of any balance that
may be due me, and oblige your
obedient servant.

[Signature]
15./11./18.1

[Signature]
A. Ryall.

HOLBORN MILITARY HOSPITAL,
WESTERN ROAD, MITCHAM.

[Signature]
1-0-0
Receipt 9815
16/11/18 C.V.

[Signature]

No. _____ Date 22 Oct 1918
* (1) To the Officer i/c Records } 58 Victoria St
* (2) The Officer Commanding } Royal Windsor
* (3) The Paymaster } 58 Victoria St Station.
* Strike out that which is inapplicable.

Regimental No. 3971

Rank and Name Pte Ryall G

Regiment or Corps R. Arty

has been granted a furlough from } transferred to Stalham Mil Hosp
don 22/10/18

His address while on leave will be } Witcham SW

I consider he is fit for
* I. DUTY.
* II. COMMAND DEPOT.
* III. EMPLOYMENT.
* Strike out that which is inapplicable.

Officer in charge G C Hall Registrar, 3rd London General Hospital, C.T.

Four copies to be made, and one copy sent to each Officer mentioned in the Schedule, 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 Army Form 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.

6968/562/R. & C. ^{Forms}
C. 248

Copy to Major Ryall
Army Form 103/18
NEWFOUNDLAND CONTINGENT
PAY & RECORD OFFICE.
Ref. Nos. IN 4178
Rec'd 9 MAY 1918

CHIEF PAYMASTER & OFFICER IN CHARGE
NEWFOUNDLAND CONTINGENT
MEMORANDUM

From VICTORIA STREET,
LONDON, S.W.1.
I.C.C. "D."

To Chief Paymaster
+ ofc. Records
ANSWER.
EY

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

Pay & Record Office,

6th May, 1918

3971, PTE. A. RYALL.

The following is an extract
from telegram dated 4/5/18
(4031) received from the Hon.
Minister of Militia.

"No- letters- have been
received- from- 3971-
"Royle (Ryall)- please- take
"necessary action-"

Will you please cause an
enquiry to be made on this
subject, and report hereon?

J. J. Anderson
Major,
Chief Paymaster & O. in Charge Records.

Hazeley Down Camp
6th May 1918

Ref obverse.
The soldier referred
to therein has been
questioned on the
subject but can give
no excuse for his
not writing but
promises a letter will
be written immediately.
J. M. Eason. Cap
I.C.C. Co.

C. 2.—Casualties.

COLONIAL CONTINGENTS ONLY.

Army Form W. 3026A.

(Continuation Sheets are supplied separately.)

HOLBORN MILITARY HOSPITAL

WESTERN ROAD, MITCHAM.

HOSPITAL, at

Affiliated to

NOMINAL ROLL of Sick and Wounded from the * France Expeditionary Force
 admitted on 22-10-18 from Hospital Ship Southampton
 or Dover.

* Here insert which Expeditionary Force.

The nature of the casualty is required for telegraphing details overseas. If the details given are insufficient, reference back to the hospital for further information is rendered necessary. The following instructions should therefore be carefully followed in all Colonial cases:

- (a) In the case of sickness, the nature and degree should be stated, e.g., enteric, slight.
- (b) In the case of wounds, the nature of the wound, the part of the body affected, and the severity of the injury should be stated, e.g., gunshot, skull, severs.

If a limb has been amputated the fact should be recorded.

NOTE.—Two copies of these Rolls to be forwarded, *not later than the day after admission*:

- (i) One copy direct to the War Office, Alexandra House, Kingsway, W.C.
- (ii) The other direct to the O. i/c of Records of the Colonial Contingent concerned.

Admissions to the outlying sections of the hospital should be shown separately. If the distance of these sections should render it impossible to forward the rolls the day after the admissions, the sections should be instructed to send lists (on these Army Forms) direct to the War Office, and to the Colonial Contingent Record Office concerned.

Regtl. No.	Rank	Name (Surname first)	Corps (Battn. numbers to be shown, also full title of Colonial Unit)	Casualty (See note in large type above).
971	Rte	Ryall Albert	E. Coy - Royal Newfoundland	Scalms (slight)
				<i>W. G. Mace Rte Capt W. G. Mace</i>

C. 2.—Casualties.

COLONIAL CONTINGENTS ONLY.

Army Form W. 3026A.

(Continuation Sheets are supplied separately.)

HOLBORN MILITARY HOSPITAL

WESTERN ROAD, MICHAM.

HOSPITAL, at _____

Affiliated to _____

NOMINAL ROLL of Sick and Wounded from the * France Expeditionary Force
admitted on 22-10-18 from Hospital Ship _____
Southampton or Dover.

* Here insert which Expeditionary Force.

The nature of the casualty is required for telegraphing details overseas. If the details given are insufficient, reference back to the hospital for further information is rendered necessary. The following instructions should therefore be carefully followed in all Colonial cases :

- (a) In the case of sickness, the nature and degree should be stated, e.g., enteric, slight.
- (b) In the case of wounds, the nature of the wound, the part of the body affected, and the severity of the injury should be stated, e.g., gunshot, skull, severe.

If a limb has been amputated the fact should be recorded.

NOTE.—Two copies of these Rolls to be forwarded, not later than the day after admission :

- (i) One copy direct to the War Office, Alexandra House, Kingsway, W.C.
- (ii) The other direct to the O. i/c of Records of the Colonial Contingent concerned.

Admissions to the outlying sections of the hospital should be shown separately. If the distance of these sections should render it impossible to forward the rolls the day after the admissions, the sections should be instructed to send lists (on these Army Forms) direct to the War Office, and to the Colonial Contingent Record Office concerned.

Regtl. No.	Rank	Name (Surname first)	Corps (Battn. numbers to be shown, also full title of Colonial Unit)	Casualty (See note in large type above).
3971	Rte	Royal, Albert	C. Coy - Royal Newfoundland	Scabies (slight)
				W. G. H. H. H. H. Cape W. H. H. H.

C. 2. Casualties.

COLONIAL CONTINGENTS ONLY.

Army Form W. 3026A.

HOLBORN (Obtain extra Sheets as supplied separately.)
WESTERN ROAD, MITCHAM.

HOSPITAL, at _____

Affiliated to _____

NOMINAL ROLL of Sick and Wounded from the * France Expeditionary Force
admitted on 22-10-18 from Hospital Ship _____ Southampton
or _____
Dover.

* Here insert which Expeditionary Force.

The nature of the casualty is required for telegraphing details overseas. If the details given are insufficient, reference back to the hospital for further information is rendered necessary. The following instructions should therefore be carefully followed in all Colonial cases:

- (a) In the case of sickness, the nature and degree should be stated, e.g., enteric, slight.
 - (b) In the case of wounds, the nature of the wound, the part of the body affected, and the severity of the injury should be stated, e.g., gunshot, skull, severe.
- If a limb has been amputated the fact should be recorded.

NOTE.—Two copies of these Rolls to be forwarded, *not later than the day after admission*:

- (i) One copy direct to the War Office, Alexandra House, Kingsway, W.C.
- (ii) The other direct to the O. /c of Records of the Colonial Contingent concerned.

Admissions to the outlying sections of the hospital should be shown separately. If the distance of these sections should render it impossible to forward the rolls the day after the admissions, the sections should be instructed to send lists (on these Army Forms) direct to the War Office, and to the Colonial Contingent Record Office concerned.

Regtl. No.	Rank	Name (Surname first)	Corps (Battn. numbers to be shown, also full title of Colonial Unit)	Casualty (See note in large type above).
3971	Pte	Ryall Albert	B. Coy: Royal Newfoundland	Scabies (Slight)
<p><i>W. G. H. Smith Capt. Namey</i></p>				

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, 28/5/17.

Regtl No. 3971 Rank Private Name Ryall A. Unit Royal Mfld. Regt. who was repatriated
to Newfoundland on 12/12/18 Authority _____ Cause _____

DR.

STATEMENT OF ACCOUNT

CR.

PARTICULARS		\$	¢	£	s	d	PARTICULARS		\$	¢	£	s	d
PERIOD: FROM 8/12/18 TO 11/12/18	Balance Dr. from 7/12/18			17	8	0	Balance Cr. from						
	Allotment 4 days @ 50	2	00		8	3	Pay 4 days @ \$ 1.00	4	00				
	Cash Payments:						Field Allow 4 days @ \$.10		40				
							<u>4 40</u>				18	1	
	Other Debits						Other Allowes days @ \$						
							Other Credits:						
							<i>N. F. P. 55 308/9</i>						
							<i>Sent to H. L. St. Johns</i>						
							<i>7/1/19</i>						
	Total Debits				17	16	3	Total Credits				18	1
Balance due by Paymaster							Balance due to Paymaster			16	18	2	
				17	16	3				17	16	3	

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

191

(Place)

(Date)

O.C. " " 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. _____
London to 31/12/18

Pay & Record Office, London,

Dec 5th 1918

Chief Paymaster & O. i/c Records.

FORM K

No. 2946



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, W. Ryall, Regl. No. 3971

hereby agree, until further notification by me, and in similar official form to make an Allotment of _____ Dollars and 50 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and}_{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and}_{or} Persons concerned, viz.:

Allotment begins November 1917

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>3015</u>	<u>mother</u>	<u>Wm. Broad Fowler</u>	<u>13 St. James</u> <u>St. John</u>	<u>50</u>

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.) <u>Wm. Broad Fowler</u>	Officer Commanding Company <u>1917</u>	(Sig.) <u>W. Ryall</u>
		(Rank) <u>Private</u>

Wm. Broad Fowler

Ryall, T.

3971

Ray Sept.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 3971 Rank Pte Name Ryall, A.
 Date of Enlistment 13.10.17 Address St. Johns District St. John's
 Occupation Lieutenant Classification for Discharge B Medical Category E
 Recommendation S.M.B. permanently unfit Disability Rating 40% 3 months
 Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1	
B 178	W 3494	B 122	Board 1st	" 2	
B 178A	D 400A	B 1915	do 2nd	" 3	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 16.1.19

W. H. Ryall Capt.
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action. A. Ryall

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$6.00
 (b) ~~Clothing~~ Supplied Joseph H. Snow

Date 16-1-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *me* to his home
 at *St John* and Release Certificate No. *821* issued.

Date

16-1-19

C.B. Dickes 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 *30-1-19*

Date

16-1-19

W. Bailey Capt
 Depot Paymaster.

Balance Pay etc to be adjusted

Discharge approved for

16 / 1 / 19

Forwarded with following documents to O.C Discharge Depot.

N.F. P[36]	B 268	B 121	N.F. Med.	D.F. 1.	
E 178	W 3494	B 122	Board 1st.	" 2.	<i>from B</i>
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

16. 1. 19

C.B. Dickes Capt
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

- Officer i/c Records.
- Board of Pension Commissioners.

with following additional documents.

ELIGIBLE for POST DISCHARGE PAY

JAN 16 1919

Date

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

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

Date

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

MEDICAL HISTORY

Surname Ryall OF Christian Name Albert

Table I.—GENERAL TABLE.

Birthplace:—Parish St. Johns County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	191	191
Examined	on	13	day of	Oct
	at	Headquarters		at
Declared Age	19	years	2	days
Trade or Occupation	Labourer			
Height	5	feet	9	inches
Weight	133	lbs.		
Chest Measurement	Girth when fully expanded	35 1/2	inches	
	Range of Expansion	4 1/2	inches	
Physical Development				
Vaccination Marks	Right		Left	
	Arm		2 years ago	
When Vaccinated				
Vision	R.E.—V=	6/6	L.E.—V=	
	L.E.—V=	6/6		
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Amund Peterson</u>			
(Rank)	Major			
	Medical Officer.			Medical Officer.
Enlisted	at	St. Johns, N. F.		at
	on	13	day of	Oct
				191
Joined on Enlistment	Corps.		Regtl. No.	
Transferred to	1st Coy. 718. 3971 ROYAL NEWFOUNDLAND REGIMENT.			
Became non-effective by	on		day of	191
(Signature)				
(Rank)				

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 future use. In case of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
London General Hospital WANDSWORTH	5	10	18	22	10	18	984 R leg severe flesh perforated Scabies.	17	Washed in Jasco 29.9.18 Do Ralt with Kopp Mikota	g c Hall Capt Rtd
3000 MILITARY HOSPITAL WESTERN ROAD, MITCHAM	22	10	18	3	12	18	Scabies Curd	4-2	Re-transferred to 3rd London General Hospital	W G Hough Major Rtd
3rd LONDON GENERAL HOSPITAL WANDSWORTH.	3	12	18	7	12	18	ASW. Rdy.	4	Relinquished to 4th London General Hospital with scabies cured.	W G Hough, Capt Rtd

LAST PAY CERTIFICATE

**DUPLICATE
MAIL COPY**

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.

Regt No. 3071 Rank Private Name Ryall A. Unit Royal Newfoundland who was repatriated
to Newfoundland on 12/13/18 Authority _____ Cause: _____

DR. STATEMENT OF ACCOUNT CR.

	PARTICULARS					PARTICULARS					
	\$	¢	£	s	d	\$	¢	£	s	d	
Balance Dr. from <u>7/12/18</u>			17	8	0	Balance Cr. from					
Allotment 4 days @ 50	2	00		8	3	Pay 4 days @ \$ 1.00	4	00			
Cash Payments:						Field Allow 4 days @ \$.10		40			
							4	40	18	1	
						Other Allowes days @ \$					
Other Debits						Other Credits:					
Total Debits			17	16	3	Total Credits			18	1	
Balance due by Paymaster						Balance due to Paymaster			16	18	2
			17	16	3				17	16	3

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

CHECKED. *[Signature]*
PERIOD: From 8/12/18 To 11/12/18

191

Made up/checked in accordance with information received in the Pay & Record Office London U.C. " " Company. CO 51 12/18
and is therefore subject to amendment if and as may be found necessary.
Pay & Record Office, London, *[Signature]*
Dec 30, 191 8 Chief Paymaster & O. i/c Records.

LAST PAY CERTIFICATE

ORIGINAL

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, 28/5/17.

Regtl No. 3971 Rank Private Name Ryall A. Unit Royal Nfld. Regt. who was repatriated
to Newfoundland on 12/12/18 Authority _____ Cause _____

DR. STATEMENT OF ACCOUNT CR.

PARTICULARS	\$			£			CR.		
	¢			s	d				
Balance Dr. from 7/12/18			17	8	0	Balance Cr. from			
Allotment 4 days @ 50	2	00		8	3	Pay 4 days @ \$ 1.00	4	00	
Cash Payments:						Field Alice 4 days @ \$.10		40	
							4	40	18 1
Other Debits						Other Allces days @ \$			
						Other Credits:			
Total Debits			17	16	3	Total Credits			18 1
Balance due by Paymaster						Balance due to Paymaster			18 18 2
			17	16	3				17 16 3

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

(Place) _____ (Date) 1918

Made up/Checked in accordance with information received in the Pay & Record Office, _____ U.C. _____ Company, _____ London to 31/12/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,
Dec 30. 1918

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

CHECKED.
[Signature]

PERIOD: From 8/12/18 To 11/12/18

January 30.1919

#3971 Pte. Albert Ryall,
#21 James St.,
City.

Dear Sir:-

Please find enclosed "Discharge
Certificate No. 703."

Yours faithfully,

Capt in,
Paymaster & O.i/c Records

Enc'l 1.

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 as Sailor

W. J. Hall

Signature of Man.

Reg. No. 3971.

W. J. Hall
Signature of the Vocational Officer or his Representative.

Place

ST. JOHN'S.

Date

16/1/19.

191

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 Newfoundland Former Trade or Occupation }
 2. Regt. No. 3971. 3. Rank... Pf 7a. If the soldier claims previous service in Army, he should state—
 4. Name... Ryall (Surname) (Christian Names) (a) Former Regts. or Corps; with Regt. Nos.
 5. Age last birthday.....
 6. Posted for duty on..... at..... in category (or grade).....
 8. If the disability is an injury was it caused
 (a) in action (b) on field service (b) Date of Discharge;
 (c) on duty (d) off duty? (c) Cause of Discharge.
 9. If a Court of Inquiry was held on an injury state :—
 (a) When (d) Particulars of Pension or Gratuity (if any)
 (b) Where
 (c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179a (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. Sept 1918
 12. Place of origin of disability. Belgium
 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. Wounded Belgium Sept 1918 discharged 3rd London General for repatriation

14. State whether the disabilities are
- | | | |
|---|---------------------|-------------------|
| | (a) attributable to | (b) aggravated by |
| (i.) Service during the present war | Yes | ..... |
| (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? }

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.)

Two large incisions on inner to outer side of calf healed will be unable to wear puttees for a couple of months. No wasting of leg

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?

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
MAR 11
Capt. W. J. ...
ROYAL NEWFOUNDLAND REG.
Medical Officer in charge of case.

HAZELEY DOWN CAMP.
Station
Date *5 DEC 1919*

* 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

OPINION OF THE MEDICAL BOARD.

NOTES.—(1) Clear and definite answers are to be filled in by the Board, as, in the event of a 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.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases 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.

21. Give diagnosis and particulars of:—

- (a) Any disability claimed or discovered.
 (b) The present condition thereof.

*Wound left leg.
 After long years of leg - weak liable to
 break down. Limp at times*

22. State whether the disabilities are:—

- (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 part of the soldier
 Give details:

(a) Attributable to

(b) Aggravated by

Yes

No

22 (a). If not due to any of these causes, to what specific condition do the Board attribute it?

by S.W.

23. Is the disability in a final stationary condition? If not

- (a) How long is the present degree of disability likely to last?
 (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

40% 3 months

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

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?
- OR
- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalidated at a foreign station)?

Opinion of Military Member in case of disagreement.

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require:—
- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signature: _____

Station S. Plus _____ { President or Chairman.

Date Jan 3 1919 _____ { Members.

Discharge Approved under Para. 392 (xvi) King's Regulations _____

Station _____ { Only in case of Patients in Hospital.

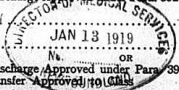
Date JAN 13 1919 _____ Officer in charge, Central Hospital.

Discharge Approved under Para. 392 () King's Regulations, or Transfer Approved _____ of the Reserve.

(insert sub-para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station _____

Date _____ O.C. Discharge Centre.





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 *Ryall Albert*

Regiment from which discharged *Royal Newfoundland*

Regimental number *3971*

Intended address *21 James St. St John's*

Height on discharge *5 Feet 11*

Color of hair on discharge *Black.*

Complexion *Dark*

Color of eyes *Brown*

Descriptive Marks *Scar Left Leg.*

Figure on discharge

Christian name of Father *William*

Christian name of Mother *Ann*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *St John's 30-8-1900*

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)

Station

Date

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

The Royal Newfoundland Regiment
HEADQUARTERS
ORDERLY ROOM
Medical Officer of Hospital
Unit, or Command Depot
St John's, Nfld.

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 question 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... *Albert* 2. Surname... *Ryall*

3. Rank... *Pte* 4. Regt. No. *2971*

5. Address in full to which future payments of gratuity are to be forwarded... *20 James St. St. John's - Newfoundland*

6. Date of enlistment in the Regiment... *13th October* 1917

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge... *None*

8. Relationship of such dependents... *Not applicable*

9. Address in full of such dependent... *Not applicable*

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?... *No*

11. Were you on active service only in Nfld. If so, give dates and particulars of such service... *Not applicable*

12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *One year and two months and eleven days in England and France in service of Sept 28 1918 and Sept 29 1918*

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

No only one enlistment

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.....

*£84 2/6 for clothes
£22 1/2*

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

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

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?.....

Not applicable

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

Jan 28 1919

Discharged

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 Sept 28 1915 and Sept 29 1915

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:

A. Ryall

Place of Residence:

20 James Street, W. 11th St.

Declared before me at:

St. Johns

This

1st

day of

March 1919

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

William P. Kelly
Barrister

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	<i>4 mos.</i>	<i>250.00</i>
.....
.....

Certified Correct.

Paymaster.

N.F.P./54

NO. 35.

From Pay & Record Office London
To Minister of Militia St. John's Nfld.

#3971 Pte. A. Ryall

Casual payment whilst at Holnorn Military Hospital
31-12-18 as per voucher 7280. 6s. 0d.

H

I feel that further words
are unnecessary
I want the money and
I want it at once.
And I want you to
see that I get it.

Kindly let me have
an explanation
by return mail
Yours faithfully

Albert Royal

Pte. R N R 3971.

Address

P.O. Box 1204

St. John's Port.

H.M. Penitentiary

City May 11 1899

5657

5653

Capt J M Stanley R.N.R.

Sir

I have already written you
in reference to the money
which is in the militia Dept
to my credit up to now
I have heard nothing
this money has been pay-
able to me for some little
time and I cannot under-
stand how it is that the
money has not been paid.
And further I cannot
understand how it is that
my letter has been ignored,
now as you already are
aware of did my bit ac-
cess the matter. And as the
money is due me I - it is but
right that I should
get it.

I advised. Also bring to your notice the fact that my letter has been completely ignored.

I would ask you if you consider it fair.

I had gone across the water did my duty for my country and came back.

It is true I was unjustly treated & get into this trouble but is that any reason that my letter should be ignored that certainly was my failing and is entirely my own affair it is no reason why the Dept of militia should refuse to answer my letter.

not only that did the Dept refuse to send the money but my letter was left unacknowledged.

now I beg to ask what is the reason that the Dept of militia refused to send this money? why was my letter unacknowledged? I want an explanation by return mail.

when you get this kindly send the money by return of post. And avoid any further trouble.

If that is the way we are to be treated after doing our bit it is no great difference about who ever is responsible for such treatment.

SEPARATION ALLOWANCE.

Claimant. *Fowler, Maud (mother)*

On account of *Albert Ryall* No. *3971* Rank. *Pte*

Decision. *Refused*
Husband is supporting
.....
.....

A. E. Hickman Minister of Militia
W. R. Rudell Capt. Col.
M. S. Fowler Capt.

Date. *June 4/1919*

Instructions.....
.....
.....
.....

Allotment of *50^c* per *day* payable to *Maud Fowler*
his *Mother* from *1/11/17* to *30/1/19*

Discontinued on account of *His being Discharged*
L. P. Ke. Sgt

NOTICE.

ROYAL NEWFOUNDLAND REGIMENT.
(Separation Allowance Branch)

MOTHER.

THIS STATUTORY DECLARATION is 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 Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace and returned to:

"The Paymaster"
Separation Allowance Branch,
St. John's, Nfld.

1. Name in full of soldier. Rank. Reg't. or Unit. Regt. No.
Albert Ryall Private inf'd Regt. 9371
2. Age of soldier. Married or Single.
19 years Single
3. Name in full of mother. Age. Occupation. Permanent Address.
Maud Ryall Fowler 40 yrs - Charwoman - 21 James St.
4. Give name of your husband. Age. Occupation Where Employed.
John Fowler 46 yrs. - Labourer. - ~~employed~~ unemployed at present.
5. If your husband is not supporting you state the reason.
yes is supporting me
6. If your husband is a chronic invalid and totally incapacitated, state nature of malady. (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.)
not applicable
7. If you are a widow, state date and place of death of your husband.
Dec 5th 1900. killed at Ryall North Sydney.
8. Have you married again since death of above mentioned husband?
yes.
9. Names of your other children. Address in full. Age. Occupation Married or Single.
*Michael Fowler. 21 James St. 13 yrs. all single
Hettie Fowler " " 11 " not working
George Fowler " " 9 "
James Fowler " " 7 "
Alice Fowler " " 4 "
Jack Fowler " " 2 "*

10. State amount earned by (a) Yourself, *About \$2.00 per week.*
 (b) Your husband *Between \$1.75 - \$1.85 per month*
-
11. State amount and source of any other income. *Have no other income*
-
12. State value of real property belonging to you and your husband. *None*
-
13. State value of personal property belonging to you and your husband. *Small amount of furniture*
-
14. If husband is dead state value of real and personal property left by him. *not applicable*
-
15. Actual amount contributed by soldier during the year prior to enlistment. *About \$10.00 a week*
-
16. Was this amount contributed weekly or monthly. *Weekly*
-
17. Did this amount include payment of son's board etc. *yes*
-
18. State your son's trade or occupation prior to enlistment. *Labourer*
-
19. State amount of his wages per week. *about \$10.00 per week*
-
20. State name and address of his last employer. *Bain Johnson & Co. 1/2
Walter Street
St. John's*
-
21. State amount of monthly support from son since enlistment. *\$15.00 per month*
-
22. State amount of allotment received by you from son since enlistment. *Same as above*
-
23. State from what date did you receive allotment? *Dec 6th 1917*
-
24. Actual amount contributed by other children. *Weekly Monthly.
nothing*
-
25. Are any of these children in the employ of you or your husband? *not applicable*

26. If not receiving support from other children, state cause. Explain fully. *Too young to work*

27. With whom are you residing at present? *Living with husband in rented house*

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

29. Are you already in receipt of Separation Allowance from any source? If so, how much? *no.*

30. Are you already in receipt of any payment from any Patriotic Fund? If so, how much. *no*

31. Was the soldier at the time of his enlistment an employee of the Nfld. Government. *no*

32. In what capacity and in what place? *not applicable.*

33. Is he in receipt of a salary as such while serving in the Royal Newfoundland Regiment? If so, how much. *not applicable*

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. *Arnold Fowler*

Place of Residence. *10 St James Street St. John's Nfld*

Declared and subscribed before me at *St. John's*

this *8th* day of *March* 191*9*

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace. *William B. Kelly*
Barrister

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 soldier first above mentioned is the sole support of the applicant.

Signature of Clergyman. *(Rev.) John W. Carter*

Signature of member of the Patriotic Fund Committee. *Honni L. Peterson*

MEDICAL CERTIFICATE.

For Information of Separation Allowance Department.

- 1. Name and regimental number of soldier in respect of whom Separation Allowance is claimed } *Albert Royal*
3971
- 2. Name and age of said soldier, father ~~of said soldier~~ } *Frank Fowler*
44
- 3. Is said father or other relative a chronic invalid and totally incapacitated. } *Not an invalid but since onset of the war*
- 4. Of what nature is disability? } *Burnt wound leg*
- 5. From what date has this total incapacity been existent? } *29 July 1918*
- 6. How long is total incapacity likely to continue and what will be the effect on earning power. } *May be able to do light work this summer*
- 7. If not totally incapacitated by what per cent in your opinion is capacity for work reduced and from what date.
- 8. Are you the regular attending physician? } *Yes - of mother*
- 9. Relationship to soldier of applicant? } *son*

I certify that the above statements are correct.

.....Place

24 *3* *1919* Date.

.....
J. L. Donaldson
.....
Physician.

MEDICAL CERTIFICATE.

For Information of Separation Allowance Department.

1. Name and regimental number of soldier in respect of whom Separation Allowance is claimed } *Albert Royal*
3971
2. Name and age of said soldier's father } *Step Father: 46*
3. Is said father or other relative invalid and totally incapacitated. } *chronic neuritis & mvs, on 11/11*
4. Of what nature is disability ? } *neuritis*
5. From what date has this total incapacity been existent ? } *9 yrs ago - knocked down by horse*
6. How long is total incapacity likely to continue and what will be the effect on earning power. } *never be better*
7. If not totally incapacitated by what per cent in your opinion is capacity for work reduced and from what date. } *—*
8. Are you the regular attending physician ? } *Yes*
9. Relationship to soldier of applicant ? } *Step Father*

I certify that the above statements are correct.

St John.....Place,

24 3.....*1919*.....Date.

John Donald
.....
Physician.

May 26, 1919

Messrs Baine Johnson & Co'y.,

Water Street,

City.

Dear Sirs:-

Will you kindly inform me if John Fowler of #21 James Street, was employed by you at any time from November 1st 1917 to February 1st 1919, and if so, what were his weekly wages during the period of said employment.

Thanking you in advance.

Yours truly

Paymaster & Of 1-c Records Captain,

CABLE ADDRESS "BAINE"
ST. JOHN'S.

ESTABLISHED 1780.

CODES: A. B. C. 4. 11 & 51 EDITION
AND PRIVATE CODES.

Baine, Johnston & Co.

AGENTS FOR:-
ALLIANCE ASSURANCE CO. LTD.
LONDON.
NEWMANS CELEBRATED NEWFOUNDLAND.
PORT WINE.
MURRAY & CRAWFORD LTD.
GLASGOW.

IMPORTERS, SHIPOWNERS
AND GENERAL MERCHANTS.

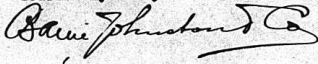
EXPORTERS:-
SHORE & LABRADOR CODFISH
HERRING
SALMON
LOBSTERS
COD & SEAL OILS.

St. John's, Newfoundland.
May 27-19.

Dear Sir:-

In reply to yours of the 26th inst regarding John Fowler of 21 James St, we have to say that he has been employed by us from time to time during the period to which you make reference.

Yours very truly



Capt. J. M. Howley

Paymaster &c. &c.

July 18, 1919

Mrs. Maude Fowler,

#21 James St.,

City

Dear Madam:-

Referring to your application for Separation Allowance, I beg to state that same cannot be granted to you, because according to your own statement, your husband is supporting you, and consequently you are not totally dependent upon your son.

Yours truly,

Captain & Paymaster.

3971
H.M. Penitentiary
May 19th, 1919.

Militia Department.
St. John's, Nfld.

Please pay my mother, Mrs. Maud
Bowler whatever American monies are in
your possession belonging to me.

Albert Ryalls

Co. Col. Rendell.

How about paying a/c man
in detention for civil conviction?

File

John

RECEIPT.

C.R. 3971

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 3971, NAME. Albert Ryall,

DATE. November, 29, 1920,
PLACE. 26, James Street..

thanks, very much.



Army Form B. 103.

Regimental Number 3971

Casualty Form - Active Service.

Regiment or Corps Royal Newfoundland

Rank Pte Surname Ryall Christian Name Albert

Religion R.C. Age on Enlistment 19 years 2 months

Extended (a) 13-10-17 Terms of Service (a) Duration Service reckons from (a) 13-10-17

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

Extended (.....) Re-engaged (.....) Qualification (b).....

or Corps Trade and rate..... C

Occupation Sailor Signature of Officer W. D. ...

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 such 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				
			Embarked ... <u>10 MAY 1918</u>		
			Disembarked <u>13 MAY 1918</u>		
			ARRIVED D I B. D.		
	<u>Ryall</u>	<u>Awarded 14 days F.P. No. 1</u>	<u>Filed</u>	<u>23/5/18</u>	<u>12 2059</u>
	--	<u>" 28 " " "</u>	--	<u>4-6-18</u>	<u>C1810 280</u>
<u>147</u>	--	<u>Awd 14 days F.P. No 1</u>	--	<u>14.7.18</u>	<u>R.2667. RSO. 39^D</u>
<u>137</u>	--	<u>Awd 14 days F.P. No 2</u>	--	<u>13.7.18</u>	<u>R.2667. R.O. 39^D</u>
<u>137</u>	--	<u>In. arrived awaiting trial</u>	--	<u>12.7.18</u>	
		<u>Tried by F.C.C. & sentenced to 3 months F.P. No 1 5/2/18 for "when under report attempting to escape (1) stealing on boat whose duty it was"</u>			

[Handwritten initials]

(*) 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.
(*) Signaller, Ghoelag-Smith, & Co. W. 5827-512093 1000m 7/17 (25866) C. P. & S., Ltd. Forms B./103 E/1535.

[P.T.O.]

D 3971 P6 Ryall a

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B.212, 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.212, Army Form A.36, or other official documents.
Date	From whom received				
		to have been in charge	} Field	18.7.18	7.8.18 8269, B.I.39 ^D
		when in confinement, occupying			
		Government Commt. 4.40 troops			
		PROVINCE SECTION	29.9.18		
30/9/18	07.20	Ad Gwylyt trans	Cas	29.9.18	807363
	30 Jan 19			1/10/18	47030
	By Brighton	Transferred to England		5/10/18	3083
			for 01/e NO 1 Infantry Section,		
			3rd Echelon, G.H.Q., B.E.F. ✓		
16.9.18	OC:	28 days I P NOT.	Field	16.9.18	Brock

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griggs & Sons Ltd., Printers, Old Bailey, E.C. 4.
Forms B. 121.

Regiment of *1st Newfoundland*

Number of pages *1st*

Signature of O. G. Company *W. J. [Signature]*

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<i>3971 Royal L</i>	Age on	<i>19 years 2 months</i>	<i>Laborer</i>	
Joined	Date	Place and Date of Enlistment	<i>St. John's 13-10-17</i>	Religion	
Joined	Date	Period of	<i>{ with Colours 11 1/2 years with Reserve 3 1/2 years.</i>	Place of Birth	

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order expiring with trial	By whom awarded	REMARKS
<i>St. John's</i>	<i>15-10-17</i>	<i>H</i>		<i>Desertion, Guard</i>	<i>Lt. Phipps</i>	<i>3 days' C.P. 3 days' hard</i>	<i>19-10-17</i>	<i>Cde Dwyer 2/18</i>	<i>NA</i>
<i>do</i>	<i>30-10-17</i>	<i>"</i>		<i>1) Inattention on Parade 2) Insolence to H.Q.</i>	<i>Sgt. Christie Sgt. Murray</i>	<i>48 hours detention</i>	<i>31-10-17</i>	<i>H. J. Canty Major</i>	<i>NA</i>
<i>Regt.</i>	<i>4/1/18</i>	<i>"</i>		<i>Absent from 6.45 am Parade till found in bed at 6.50 am.</i>	<i>Woodlaw</i>	<i>3 days' C.P.</i>	<i>4/1/18</i>	<i>Lt. S. Emerson</i>	<i>NA</i>
<i>Regt.</i>	<i>5-1-18</i>	<i>"</i>		<i>1) Failing to answer defaulter's call from 2.30 P.M. till 9.30 P.M. 2) Breaking barracks while a defaulter.</i>	<i>Woodlaw</i>	<i>10 days' C.P.</i>	<i>5-1-18</i>	<i>Capt. C. Kern</i>	<i>Profits 1 day's pay by R.W.</i>
<i>H. P. P. School</i>	<i>10/1/18</i>	<i>"</i>		<i>Absent from 9.15 AM Parade till 6.30 P.M.</i>	<i>Sgt. Jossin</i>	<i>7 days' C.P.</i>	<i>11-1-18</i>	<i>Lt. Col. Whitaker</i>	<i>Profits 1 day's pay by R.W.</i>
<i>H. P. P. School</i>	<i>12/1/18</i>	<i>"</i>		<i>Absent from 8.15 am Parade until arrested by Reg. Police at 9.30 am.</i>	<i>Pte. Evans R.P.</i>	<i>28 days' detⁿ 14/1/18</i>	<i>Lt. Col. Whitaker</i>	<i>Remobilized St. John's 30/19</i>	<i>[Signature]</i>
			<i>2) Violently resisting arrest To be carried over</i>	<i>Pte. Evans R.P.</i>					
			<i>3) Using obscene and abusive language</i>	<i>Pte. Halliday</i>					

ADJUTANT GENERAL'S OFFICE B. 121.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.
[866] W 6117/2121 1000s 6/19s 53 50Forms
B. 121
20.

Number of Sheets _____

Regiment of _____

Signature of O. C. Company _____

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<i>A Royal Pt</i>	Age on	<i>19 years 2 months</i>	<i>Laborer</i>	
Joined		Date	Place and Date of Enlistment	Religion	
Joined		Date	<i>St. Thomas</i>	<i>R.C.</i>	
Joined		Date	Period of { with Colours years.	Place of Birth	
Joined		Date	{ with Reserve years.		

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order expiring with unit	By whom awarded	REMARKS
<i>Longley Barracks</i>	<i>25-2-18</i>	<i>Pte.</i>		<i>Absent from 10.45 AM parade.</i>	<i>Corp. Delaney</i>	<i>3 days C.B.</i>	<i>26-2-18</i>	<i>Lieut. G. Emerson.</i>	<i>[Signature]</i>
<i>Longley Camp</i>	<i>27-2-18</i>	"		<i>Absent from 8.15 AM parade.</i>	<i>Cpl. Delaney</i>	<i>4 days C.B.</i>	<i>28-2-18</i>	<i>Lieut. G. Emerson.</i>	<i>[Signature]</i>
"	<i>28-2-18</i>	"		<i>Late coming on 5.45 PM. Parade.</i>	<i>Cpl. Delaney</i>	<i>5 days C.B.</i>	<i>1-3-18</i>	<i>Lt. Col. Burners D.S.O.</i>	<i>[Signature]</i>
"	<i>2-3-18</i>	"		<i>Absent from defaulters calls from 2.30 P.M. until 9.30 P.M. same date.</i>	<i>Sgt. Morrissey</i>	<i>168 hrs. Det.</i>	<i>11-3-18</i>	<i>Major March M.C.</i>	<i>[Signature]</i>
"	<i>12-3-18</i>	"		<i>Absent from 8.30 am. Parade until found in hut at 9.45 am.</i>	<i>Cpl. Spivey</i>	<i>3 days C.B.</i>	<i>14/3/18</i>	<i>Lieut. G. Emerson.</i>	<i>[Signature]</i>
"	<i>20-3-18</i>	"		<i>Talking on Parade</i>	<i>Sgt. Winter</i>				
"				<i>Reporting sick without cause</i>	<i>Cpl. Rendell</i>	<i>4 days C.B.</i>	<i>27/3/18</i>	<i>Lt. Col. J. Garland</i>	<i>[Signature]</i>
"	<i>25-3-18</i>	"		<i>Absent from 8.15 am Parade</i>	<i>Cpl. Delaney</i>	<i>5 days C.B.</i>	<i>26/3/18</i>	<i>Lt. Col. Burners D.S.O.</i>	<i>[Signature]</i>
"	<i>4-4-18</i>	"		<i>Insubordination</i>	<i>Drummajor</i>	<i>14 days Det.</i>	<i>5-4-18</i>	<i>Lt. Col. Burners D.S.O.</i>	<i>[Signature]</i>
"	<i>21-4-18</i>	"		<i>Breaking cubic window in hut 280</i>	<i>Pte. Painter</i>	<i>Pay for damage</i>			
"				<i>Absent from 8.15 am Parade</i>	<i>M. Gray</i>				
"				<i>22-4-18 until placed in Guard room at 8.40 am.</i>	<i>W.M.</i>				
"				<i>To be carried over</i>	<i>Melville</i>	<i>10 days C.B.</i>	<i>23-4-18</i>	<i>Lt. Col. Burners D.S.O.</i>	<i>[Signature]</i>

Army Form B. 121.

Brought forward

Hagley Camp 24.4.18 P.C.

Improperly dressed
on parade, not washed
on parade.

C.M. McBride 4 days etc.

23/1/18 Capt G. Emerson

Hagley Camp 27.4.18 P.C.

Breaking barracks window
defaulter and remaining
absent from 2-30 P.M. 27/4/
until apprehended by the
Military Police at Eastleigh
at 5 P.M. on the 1st. of May.

Det. Gardiner
Sgt. Macdonald

Sgt. Kian
- Lyne

168 hrs. Det.
Deprived of 4
days pay.

3.5.18 Lt. Col. R.A. Berman P.C.

The Royal Newfoundland Regiment

3971

DEMobilIZATION OF

Reg. No. 3971 Rank Pte Name Ryall, A.
 Date of Enlistment 13.10.17 Address St Johns District St. John's
 Occupation Labourer Classification for Discharge B Medical Category 1E
 Recommendation S.M.B. permanently unfit Disability Rating 40% 5 mths
 Passed to Demobilization Officer with following documents:—

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

Date 16.1.19

W. H. Eust.
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Particulars passed to Vocational Officer for information and action.

A. Ryall,

Date

a. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$ 60.00
 (b) Clothing Supplied Joseph A. Snow

Date 16-1-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *me* to his home
 at *St John* and Release Certificate No. *821* issued.

Date *16-1-19* *C.B. Dicks Capt*
 Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection
 therewith settled. He has received pay and allowances to *30-1-19*

Date *16-1-19* *Pay etc to be adjusted* *W. H. M. Capt*
 Depot Paymaster.

Discharge approved for *16-1-19*

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	<i>Form B</i>
B 178a	D 400A	B 1915	do 2nd	" 3	<i>2</i>
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			<i>Hand</i>

Date *16-1-19* *C.B. Dicks Capt*
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
 Board of Pension Commissioners.

with following additional documents.

ELIGIBLE for POST DISCHARGE PAY
 JAN 16 1919

Date *W. H. M. Capt*
 O. C. Discharge Depot.

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

Date *January 21/1919* *C. S. M. Capt*
 O. C. Discharge Depot.

Reg. No. 3971 Rank Pte Name Loyal J. A.
Attested Address 502 James St. Bk
Allotment..... Allottee
Date of Allotment..... Returned from Overseas 21/2/18
Embarked for Overseas Cause Discharged

13-1-19 Rec. Dis. Permanently unfit

16-1-19 PASSED TO DEMOBILIZATION OFFICE

16-1-19 DISCHARGE APPROVED ON DEMOBILISATION.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 3971 Rank Private Name Reall, A.
 Intended place of residence. 21 James Street, St. John's
 2. Occupation Labourer
 Classification of soldier B Medical Category 6

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

ELIGIBLE for POST DISCHARGE PAY

4. His accounts are ^{not} correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.

Place JAN 16 1919
 Date

W. M. Capl
 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. *subject to my allowances payments being repaid.*

Place and date St. John's 16-1-19
 Signature of soldier *A. Reall*
 Signature of witness *Edwards Capt.*

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place and Date 16-1-19
ST. JOHN'S.
 Signature of soldier *A. Reall*
 Signature of witness *W. J. Balou R.Q.M.S.*

STATEMENT OF SERVICE

7. Enlisted for service 13-10-17 No of days on Military
 Discharged from service 16-1-19 Plus 14 days Service 475 days

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S
JAN 16 1919
 Date

R. H. Capt
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place St. John's, Nfld.
January 30th 1919
 Date

A. Howley Capt
 Officer in Charge Records
 The Royal Newfoundland Regiment

by me unrighting so bould
I remain yours truly

Albert Ryall,

~~3971~~ ex private

3971

C.R. 3971

Dear Sir, please send me
two inches of ribbon ^{and} my
victory meadle ~~and~~ war
meadle if you have any old
magazines that you don't
need your self would
you oblige by sending

five or six down to me
at the penitentiary hoping
you won't be offendes

(over)

Wm. Van Nooy,
19/20

C.R. 3971
1915

Dear Sir Please

send some Ribbon
I lost the last Ribbon
I got issued.

as I will be more
than thankful to you
if you send to me right away.

Yours

Yours truly
Eze. Prince Albert. Ryall

Reg.

No. 3971.

3911
Nov. 20th, 1920

No. 2971, Ex-Pte. Albert Rynall
C/O H.M. Penitentiary,
City

Dear Sir:-

Reference your letter 7th Nov. regarding
Service Ribands, herewith find two inches each of Victory
and British War Medal Ribands, together with receipts in
respect of each which please sign and return to this
Department

Yours faithfully,

Lieut.-Col.,

Chief Staff Officer