



Newfoundland Forestry Companies

ATTESTATION OF

No. 7.178 Name John Ryan Corps

Questions to be put to the Recruit before Enlistment

- | | |
|--|--|
| 1. What is your name? | 1. <u>John Ryan</u> |
| 2. What is your full Address? | <u>Port Saunders</u> |
| 3. Are you a British Subject? | <u>Dict of St. Barbe</u> |
| 4. What is your age? | 3. <u>yes</u> |
| 5. What is your Trade or Calling? | 4. <u>25</u> Years <u>7</u> Months |
| 6. Are you Married? | 5. <u>Lumberman</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 6. <u>no</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 7. <u>no</u> |
| 9. What is your Religion? | 8. <u>yes</u> |
| 10. Are you willing to serve upon the conditions as embodied in this roll of service as applied to Forestry Companies? | 9. <u>R. C.</u> |
| | 10. <u>yes</u> { Name |
| | { Corps |

I, John Ryan.....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.

John Ryan.....SIGNATURE OF RECRUIT.
Frank B Ryan.....Signature of Witness.

6-17/5/17

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

John Ryan.....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 serve His Majesty, His Heirs and Successors, in the United Kingdom, 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 Grand Falls on this 17th day of May.....1917
 Signature of Attesting Officer H. J. Fitzgerald, Sub.

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the:.....
 If enlisted by special authority, such will be attached to the original attestation.
 Date.....191..... } Approving Officer.
 Place..... }

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

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

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

MEDICAL HISTORY

OF

Surname Ryan Christian Name John

Table I.—GENERAL TABLE.

Birthplace:—Parish Port Saunders St. Barbé County West

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>17th</u> day of <u>May</u> 191 <u>7</u>	on	day of	191
	at <u>Grand Falls.</u>	at		
Declared Age	<u>25</u> years <u>2 mos.</u> days		years	days
Trade or Occupation	<u>Lumberman.</u>			
Height	<u>5</u> feet <u>5</u> inches		feet	inches
Weight	<u>115</u> lbs.		lbs.	
Chest Measurement	Girth when fully expanded	<u>33½</u> inches		inches
	Range of Expansion	<u>3</u> inches		inches
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R. E.—V=		R. E.—V=	
	L. E.—V=		L. E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b) <u>Flat feet & slight systolic murmur.</u>		(b)	
Approved by (Signature)	<u>Lamont Patterson</u>			
(Rank)	<u>Major</u>			
		Medical Officer.		Medical Officer.
Enlisted	at <u>St. Johns</u>	at		
	on <u>9th</u> day of <u>May</u> 191 <u>7</u>	on	day of	191
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined-on Enlistment	<u>Inf</u>			
Transferred to	<u>Forestry Company 8178.</u>			
Became non-effective by				
	on	day of	191	on
			day of	191
[Signature]				
[Rank]				

July 21, 1919

#8178 L/C. John Ryan,

Port Saunders,

St. Barbe Dist.

Dear Sir:-

Referring to your application I enclose cheque for
Seventy dollars (\$70.00), being amount of first payment due
you on account of the war service Gratuity.

Yours truly

Captain & Paymaster.

C.R. 8178

COUNCIL NO.

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

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

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

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

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

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

(NOT TRANSMITTED)

Signature of Sender

Address

DEPT. OF MILITIA.

Line
Number

Rcd

By

Sent

by

Check

Dated

MAY 20th. 1919.

To

Jas. Ryan, Port Saunders.

Last reported at Kenmore, Scotland. Expect 8178 Lance
Corporal Ryan with Corsetan Draft sailing to-day. Further
particulars later.

J.R. Bennett,

Minister of Militia.



C.R. 8178

NEWFOUNDLAND POSTAL TELEGRAPHS

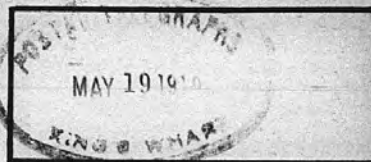
CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 95 Sent by u Rec'd by _____ Check 6p

No. _____

Place from Port Saunders

To Dept of Militia



Please advise whereabouts
8178 Lance Corp. John Ryan.

James Ryan

C.R. 8178

Apr. 28th 19

Mrs. Bridget Collins,
Port Saunders.

Dear Madam:

I am directed to acknowledge receipt of your telegram of April 28th, enquiring the whereabouts of No. 8178, Pte. John Ryan. I am to state that a telegram has to-day been despatched to the Pay & Record Office, London, asking for the required information, which will be communicated to you as soon as received.

Yours faithfully,

Lieut.

Casualty Officer.

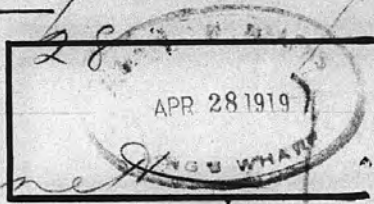
FAE/MP.

NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 10 Sent by _____ Rec'd by _____ Check 9 No. _____

Place from St. John's



To J. R. Bennett

Minimilica

£

*please wire immediately
whereabouts 8178
p/te John Ryan
Budget Collins*



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 *John Ryan*

Regiment from which discharged *Royal Newfoundland*

Regimental number *8178*

Intended address *Port Saunders, St Barbe.*

Height on discharge *5* Feet *6*

Color of hair on discharge *Black*

Complexion *Dark*

Color of eyes *Blue*

Descriptive Marks *—*

Figure on discharge *medium*

Christian name of Father *James*

Christian name of Mother *Agnes*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Port Saunders, Oct 11[#], 1893*

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)

J Ryan

LC

(Rank)

Station

St Johns

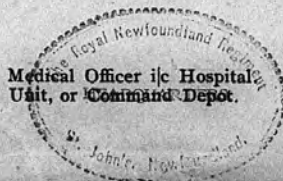
Date

16-6-19

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

Station

Date



July 17, 1919

#8178 L-C. John Ryan,

Port Saunders.

Dear Sir:-

Please find enclosed Discharge Certificate #3075.

Yours truly

&
Captain/Paymaster

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 20th. 1919.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out. On completion this Declaration is to be returned to THE OFFICER I/C

RECORDS, PAY & RECORD OFFICE ST. JOHN'S.

Christian name *John* 2. Surname *Ryan*

3. Rank *Private* 4. Regt. No. *8178*

5. Address in full to which future payments of gratuity are to be forwarded. *Post Saunders, District of St. Barbe, May 17/17*

6. Date of enlistment in the Regiment.

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

8. Relationship of such dependents.

9. Address in full of such dependents.

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

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

12. Give total length of time which you served on active service, whether in field or overseas. *From May 17/17 to June 17/19*

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

No

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

No

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

No

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

No

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.

No

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?

No

(b) If so, was such reversion in consequence of Misconduct or inefficiency?

19. Are you now serving in the Regt.?

No

If not give? - (c) date of discharge

June 17/19

(d) Reason for discharge

See of logbook

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.

No

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.

J Ryan

Signature of Applicant:

Place of Residence:

Declared before me at:

This

17th day of

Post Sanders District
89 Johns, W of St Barbe
June 1919
John H. Cashey

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

POST DISCHARGE PAY.

Date paid	Soldier.	Dependent.	War Service Clasity.	Net amount due
.....
.....
.....

Certified correct.

Paymaster

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 8178 Rank 4 Cpl Name Ryan J
 Intended place of residence Port Saunders

2. Occupation Lumberman
 Classification of soldier 2 Medical Category B11

3. The above named man is discharged in consequence of

DEMobilIZATION Eligible for War Service Gratuity

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

Place, ST. JOHN'S

Date JUN 17 1919

Miss Levent
 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, ST. JOHN'S

Date JUN 17 1919

J. Ryan
 Signature of soldier

W. J. Eaton
 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, ST. JOHN'S

Date JUN 17 1919

J. Ryan
 Signature of soldier

W. J. Eaton
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 17-5-17 No. of days on Military
 Discharged from service 1-7-19 Plus 14 days Service 79.0

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

Date JUL 1 1919

R. H. Lait Major
 Officer-Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place, ST. JOHN'S

Date July 15 1919

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

a FB 2019 / 3025

The Royal Newfoundland Regiment

Class for Demobilization: —

2.

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date 17.6.19

Regimental No. 8178

Name Ryan, John Rank R/c

Address Port Saunders, St Barbe

Present Medical Category A; B II

Recommended for: — (a) Immediate discharge

(b) ~~Standard Medical Board~~

Members of Board

R. H. East Major
O.C. Discharge Depot.

L. Peterson
Senior Medical Officer

J. W. Berden
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 8178 Rank Sydney Name Ryan J.
 Date of Enlistment 17-5-17 Address Port St. Andrew's District H. Barbic
 Occupation Lumberman Classification for Discharge E1 Medical Category B.11
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N. F. 136	B 268	B 121	N. F. Med	D. F. 1	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 19-6-19 P. O. C. Discharge Depot. H. Barbic

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am / in a position to resume civilian occupation.

J. Ryan
 Particulars passed to Vocational Officer for information and action.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$65.00

(b) Clothing Supplied new caps

Date 17-6-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. 11835 to his home at Port Saunders and Release Certificate No. 2900 312 issued.

Date 17-6-19 *J.A. Lawcraft*
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.....

Date 17-6-19 *J.A. Lawcraft*
Depot Paymaster

Discharge approved for 1-7-19
Forwarded with following documents to O.C. Discharge Depot.

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

2 Form B

Date 17-6-19 *M. C. Clouston*
O. C. Discharge Depot

APPROVED.

Documents as above forwarded to:—
Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

JUL 1 1919

Date July 11/19 *R.H. Sait*
O. C. Discharge Depot.

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

Date July 11/19 *R.H. Sait*
for the Records

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 8178 Rank Private Name Pearl J.
 Date of Enlistment 17-6-17 Address Port Saunders District St. Barbe
 Occupation Bombardier Classification for Discharge T1 Medical Category B11
 Recommendation S. M. B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N. F. 1/36	B 268	B 121	N. F. Med	D. F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
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 19-6-19 O. C. Discharge Depot. St. Barbe

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.

Date _____

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00

(b) Clothing Supplied Wool caps

Date 17-6-19

O i/c. Re-clothing

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrants No. ¹⁹¹⁸⁸⁵ to his home and Release Certificate No. 2900 issued.

Date 17-6-19

J. A. Lawless
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 15-7-19

Date 17-6-19

J. H. Mans
Depot Paymaster.

Discharge approved for 1-7-19
Forwarded with following documents to O.C. Discharge Depot.

N.F. 136	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3404	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	<u>726-1</u>	" 6
B179c	B 120	M 93		

2 Form B

Date 17-6-19

M. C. Clouston
O. C. Discharge Depot.

APPROVED.

Documents as above forwarded to:—
Officer in Records.
Board of Pension Commissioners.

with following additional documents:

Eligible for War Service Gratuity

Date JUL 1 1919

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

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

Date