



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3381 Name William Ryan Corps RC

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---|
| 1. What is your name? | 1. <u>William Ryan</u> |
| 2. What is your full Address? | 2. <u>London</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>18</u> Years <u>1</u> Months |
| 5. What is your Trade or Calling? | 5. <u>farmery</u> |
| 6. Are you Married? | 6. <u>no</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>no</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... | 10. { Name <u>William Ryan</u>
Corps <u>RC</u> |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>yes</u> |

I, William 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.

2 Jan 2/17 William Ryan SIGNATURE OF RECRUIT.
Harold Knight Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

William 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 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 London on this 2 day of January 1917

Signature of Attesting Officer W. Strong

†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 RC.

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

Date.....1917

Place.....

} Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name William Ryan
 Apparent age 18 years 1 months. Height 5 feet 9 inches
 Chest Measurement { Girth when fully expanded 38 inches
 Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Goulds | Relationship James Ryan
Father
 Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from _____									Signature of Officers certifying correctness of entries
Joined at _____ on _____									
Total Service forfeited as above.....									

Total Service towards Engagement to _____ [date of discharge] _____ years _____ days
 " " " Pensions " _____ [" "] _____ " _____

3381



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

RC

No. 3381 Name William Ryan Corps

Questions to be put to the Recruit before Enlistment.

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

I, William 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.

[Signature] SIGNATURE OF RECRUIT.
[Signature] Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, William 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 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 2 day of January 1915.

Signature of Attesting Officer [Signature]

†CERTIFICATE OF APPROVING OFFICER.

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

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

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

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name William Ryan
 Apparent age 18 years 1 months. Height 5 feet 9 inches
 Chest Measurement { Girth when fully expanded 38 inches
 Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin James Ryan
Guards | Relationship Father

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>2-1-17</u>									
Joined at <u>St John's</u> on <u>January 2nd 17</u>									
<u>Discharged</u> <u>St John's</u> <u>2/5/17</u>									
<u>Embarked</u> <u>St John's</u> <u>St Helier</u> to <u>Winnis</u> <u>18-3-17</u>									
<u>Returned</u> to <u>St Helier</u> from <u>Winnis</u> <u>18-3-17</u>									
<u>Discharged Medically</u> <u>Winnis</u> <u>2-5-17</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 2-5-17 (date of discharge) _____ years 121 days
 " " " Pensions " _____ { " " } _____ " _____ "



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

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

Examination of *Wm. Ryan*

aged *18 yrs. 1 month*

conducted at *C.S.B.*

Date: *Apr. 2/18*

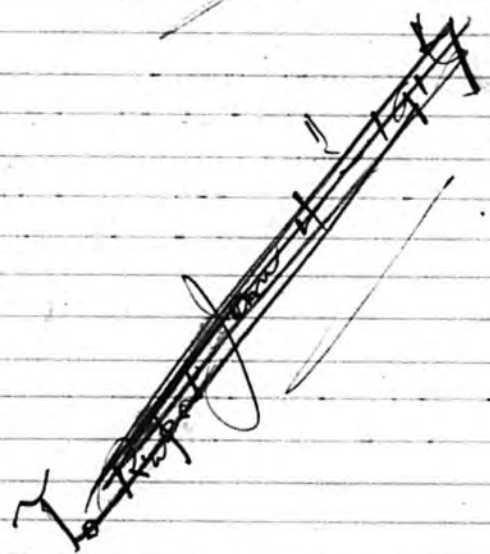
Recruiting Officer:

NO OF TEST

FINDING

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

238



33 *OK*
34 *5-9*
35 *147 lbs.*
36 *34-38*
37 *840 rev. spec.*
38 *Parents James Ryan Gould*
39 *Stone*

Signature of Medical Examiner:

D.W. Berden

Ryan, D

3381

Sept

May 3rd,

7.

Mr. William Ryan,
Goulds,

Bay Bulls Road.

Dear Sir,-

The Medical Board which examined you has reported as to your condition, and it has been found that your case is not one in which a pension can be granted.

It has however, been decided to grant you a gratuity of \$50.00 payable in two equal monthly instalments.

I therefore enclose cheque for \$25.00 being payment for month ending June 2nd 1917.

Yours truly,

Secretary.

March 6th 1920

Major Howley
O. I. C. Records

Please pay to W. Ryan, 3381
the sum of twelve dollars
in payment of allowance for six days to date
and charge same to Civil Re-establishment Committee

\$12.00

Pension Nil

ACCOUNT	
CHK NO.	3146
INITIALS	<i>FW</i>
CASH LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN LEDGER	INITIALS

FW

W. Ryan

Vocational Officer

William Ryan

May 31st 1920

Major Rowley
O. I. C. Records

Please pay to W. Ryan, 3381
the sum of sixty dollars
in payment of P. & A. Bonus
and charge same to Civil Re-establishment Committee.

\$60.00

4
Pension

111

W. S. Beckell

ACCOUNT	38631
NO. 112	
INT. BANK	
PAY ORDER	
CASH	

Occupational Officer

William Ryan

May 31st 1920

Major Howley
O. I. C. Records

Please pay to W. Ryan, 3381
the sum of **sixty dollars**
in payment of P. & A. Bonus
and charge same to Civil Re-establishment Committee

\$60.00

4
Pension

\$11

W. C. A. [Signature]
W. S. Beckell

ACCOUNT	38631	Pro	Vocational Officer
DATE			
INT. LEGAL			
PAY LEGAL			
EXP. LEGAL			

William Ryan

May 31 1920

Major Howley
O. I. C. Records

Please pay to W. Ryan, 3381
the sum of four dollars
in payment of 2 days allowance to date
and charge same to Civil Re-establishment ~~Comm~~ Committee

\$4.00

Pension Nil

W. M. Meckell

Vocational Officer

A. C. R.

Nov 3 1920

LAND SETTLEMENT

Major Howley
O. I. C. Records

Please pay to W. Ryan 3381
the sum of eighty dollars
in payment of allowance for November and travelling expences
and charge same to Civil Re-establishment Committee Land Settlement

\$80.00

Allowance
Expences

\$70.00
10.00

J. C. R.

B. Butler *W. Ryan*

Vocational Officer

above cheque to.

P. Howlett

B. Butler

ACCOUNT	
CHK. NO.	3588
INTL. LEDGER	INITIALS
PAY LEDGER	INITIALS
QBN. LEDGER	INITIALS

Please deliver

No. _____



1st NEWFOUNDLAND REGIMENT

VOUCHER


In Acct. with #3381 Pte. William Ryan Voucher No. 30179.

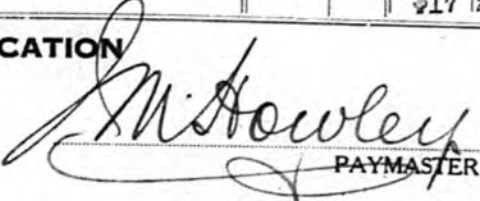
Cheque No. 30179.

Reg'l A/c No. _____ Name _____ C.B. Folio No. _____

Date	Req'n No.	Invoice No.	Particulars.	Amount.
May 2	366		Balance due when discharged	\$17 20
				\$17 20

CERTIFICATION

Dissectⁿ Sheet No. _____
Recap. Sheet No. 366
Checked by 


PAYMASTER

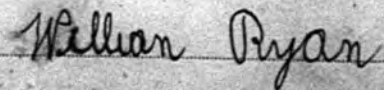
RECEIPT

May 2nd, 1917.

Received from the 1st. NEWFOUNDLAND REGIMENT the sum of
Seventeen----- Dollars
and Twenty----- Cents in Payment as above stated.

May 3rd 1917.

\$ 17.20

[Sig.] 

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 20⁰⁰
xx

Feb 3 1919

Received from the First Newfoundland Regiment
the sum of Twenty ⁰⁰/_{xx} Dollars.
~~on account~~
balance of Pay. Clothing W Ryan

Ch. No.	9369	Initials.....	EW
Pay Ledger.....	201	Initials.....	Wx
Gen. Ledger.....		Initials.....	

Regtl. No. Rank

A.C.R.

No. 3381

Rank

06

Name

Ryan W

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121.
39.

Regiment of *1st Newfoundland*

Number of Sheet *Peris*
Signature of O. C. Company *Chas. Aye Capt.*

Regimental Number and Name	
No.	<i>3381 Ryan W^m</i>
Joined	Date
Joined	Date
Joined	Date
Joined	Date

Enlistment		Trade
Age on	<i>18</i> years <i>1</i> months	<i>Farmer</i>
Place and Date of Enlistment	<i>St. John's</i>	Religion
	<i>2. 1. 17.</i>	
Period of	with Colours <i>12.1</i> years.	Place of Birth
	with Reserve <i>36.5</i> years.	

Good Conduct Badges, Service pay or proficiency pay

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<i>Windsor Barracks</i>	<i>27th 186.</i>			<i>Breaking ranks without permission</i>	<i>Lt. Taylor Sgt. Lovick</i>	<i>Admonished</i>		<i>Major Montgomerie</i>	<i>Wm</i>
				<i>Discharged Medically Unfit</i>	<i>St. John's</i>	<i>2-5-17</i>			
				To be carried over					

Army Form B. 121.

D. Ryan

C.R.

3381

~~PAID~~



Proceedings on Discharge.

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

No. <u>3281</u>	Army Rank <u>Private</u>	
Name <u>William Ryan</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>		
Corps <u>First Newfoundland Regiment</u>		
Battalion, Battery, Company, Depot, &c. <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)</small>		
Date of discharge <u>May 2nd 1917</u>		
Place of discharge <u>St John's, Nfld.</u>		
1. Description at the time of discharge.		
Age <u>17</u> years <u>4</u> months	Descriptive marks.	
Height <u>5</u> feet <u>8 3/4</u> inches		
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.		
Complexion <u>fair</u>		
Eyes <u>grey</u>		
Hair <u>light brown</u>		
Trade <u>farmer</u>		
Intended place of residence (To be given as fully as practicable) _____		
<small>(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)</small>		
2. The above-named man is discharged in consequence of <u>being no longer physically fit for war service</u>		
<small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small>		
3. Military character :— <u>Good</u>		
4. Character awarded in accordance with King's Regulations :— _____ _____ _____ _____ _____		
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.		
Initials of Commanding Officer.		
Army Form B. 2068 has been issued to*		

To be filled in on the soldier quitting the Colours.

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class _____

6. Campaigns, Medals and Decorations

Certificate of education

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

(Place) _____

(Date) _____ Commanding _____ Battn. _____ Regiment.

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) St. John's

J. A. William Ryan (Signature of Soldier.)

(Date) 3/5/17

G. F. Shee (Signature of Witness.)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. *Additional certificate in the case of a soldier who takes his discharge at his own request.*

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

_____ (Signature of Soldier.)

10. *Statement of service.*

Service towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service " " _____ (the date of confirmation of discharge) " " "

Total " " "

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for _____ (date)

(Place) _____

Signature _____

(Date) _____

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

No reservations.

William Ryan

3381

C.R.

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt., St. John's, Jan. 2nd, 1917

3381 Pte. William Ryan.

Attested this day, posted to "E Co" and assigned number
as shown.

C.R. 3381

EXTRACT FROM ROLL OF OFFICERS N. G. O's
AND MEN DISCHARGED FROM THE ROYAL
NEWFOUNDLAND REGIMENT.

<u>Regtl. #</u>	<u>rank</u>	<u>name</u>	<u>date</u>	<u>reason.</u>
3381	Pte.	Ryan William	2/5/17	MED. UNFIT.

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

MEDICAL HISTORY

Surname Ryan OF Christian Name William

Table I.—GENERAL TABLE.

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	at	on	at
Examined	2 nd day of Jan 1917	St John's R.O.	day of	191
Declared Age	18 years 1 month days		years	days
Trade or Occupation	farming			
Height	5 feet 9 inches		feet	inches
Weight	147 lbs.			lbs.
Chest Measure-ment	Grith when fully expanded	38 inches		inches
	Range of Expansion	4 inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm			
	Number			
When Vaccinated	never			
Vision	R.E.—V=	4/4	R.E.—V=	
	L.E.—V=	1/4	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	L. M. Paterson			
(Rank)	Major			
	Medical Officer.			Medical Officer.
Enlisted	at	St John's R.O.	at	
	on	2 day of Jan 1917	on	day of 191
Joined on Enlistment	Corps	37520	Corps,	Regtl. No.
				3381.
Transferred to				
Became non-effective by				
	on	day of 191	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 cases 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				
Windsor AS Military Hos	12	2	17	30	3	17	Whooping Cough	47	Complication: Mumps & Pneumonia - accompanied convalescence & return to A.S. 28/1/17	L. Henson major M.C.

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

Date	Brief Details, and Signature
70-1-17	Vacc. 28
24-1-17	} <u>TAB</u> 28
5-2-17	

TABLE IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
S.D. Hlongee Wuassor NS.	Jan 31 1917	Feb 3 1917			



Medical Report on an Invalid.

NOTES:—

- (a) This report is solely concerned with Pensions.
- (b) A single copy only is required.
- (c) "Aggravated" being now a technical term, carrying right to pension, discrimination in its use is essential.
- (d) Be as brief as possible compatible with lucidity.
- (e) Avoid dubiety—"perhaps" "possibly" "might" and the like.
- (f) Only sufficient clinical data need be given to establish the degree of disability and assist the Board in arriving at a decision.

Statement of Case

Station

Date

St John's
Apr 16/17

- | | |
|----------------------------------|---|
| 1. Unit <i>1st. Newfoundland</i> | 5. Age last birthday. <i>17</i> |
| 2. Regimental No. <i>3381</i> | 6. Enlisted on <i>2 Jan 1917</i> |
| 3. Rank. <i>Pte.</i> | at <i>St John's</i> |
| 4. Name. <i>Ryan, William</i> | 7. Former trade or occupation <i>Farmer</i> |

8. Disability

Rheumatism.

9. History *Had measles & mumps & Winder N.S. with
 sweets laid up. after this complained of pains
 in joints of legs & feet.*

10. What is his present condition?

Still Complains of pain
in leg & feet - back.

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

11. Was sanatorium operation advised and refused?

✓

12. Do you recommend discharge as permanently unfit?

Yes.

Signature

D. W. Borden

Rank or Qualification

Lieut.

Remarks if any by Officer i/c Hospital.

Place

.....

Signature

.....

Date

.....

Rank

.....

Opinion of the Medical Board.

In para. 13, the President should write "may" or "cannot" at x
Erase inapplicable words.

13. For pension purposes, the disability x *May* be considered as ~~aggravated by:~~
due to
- (a) ~~Service during this war.~~
 - (b) ~~Climate.~~
 - (c) Ordinary Military Service

Remarks if any:—

Under sec 10.

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

Remarks if any:—

less than 20%

15. Is the disability permanent?

no

16. Has the disability been aggravated by

- (a) Intemperance. *no*
- (b) Misconduct. *no*

17. The refusal of operation sanatorium is:—

- (a) Reasonable.
- (b) Unreasonable. ✓

Remarks if any:—

18. We recommend discharge from retention in the Army

Remarks if any:—

Signatures.

R. S. Francis President
J. G.
Swoboden
Pro Major Paterson

Place

Date

St Johns
Apr 18th 1917

APPROVED

Station

Date



Clay Macpherson
Administrative Medical Officer. *M.D.*



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 *Ryan William*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *3381*
 Intended address *Goueds*
 Height on discharge *5 Feet 8 3/4*
 Color of hair on discharge *Lt. Brown*
 Complexion *fair*
 Color of eyes *Grey*
 Figure on discharge *medium*
 Christian name of Father *James*
 Christian name of Mother *Jane*
 Wife's maiden name in full
 Date and place of marriage
 Christian names of children
 Place and date of soldier's birth. *Goueds. 13 Jan. 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) *William Ryan* (Rank) *Pte*
 Station *St Johns* Date *apl 16*

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.

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

Station *St Johns* Date *apl 16/17*

STATEMENT OF PAY OF NO. 3381 PTE. W. RYAN, 3/1ST. NEWFOUNDLAND
REGIMENT, WINDSOR, N. S., TO MARCH 31ST. 1917.

CR.

Balance from previous Pay Lists	\$12.00	
Mar. 1st. to Mar. 31st. @ \$1.10 per day	<u>34.10</u>	
		<u>\$46.10</u>

DR.

Allotment Mar. 1st. to Mar 31st.		
31 days @ 60¢ per day	18.60	
Kit & Equipment	.10	
Stoppages	-----	
1st. Payment Mar 10th.	-----	
2nd. " Mar. 17th.	-----	
3rd. " Mar. 24th.	-----	
Final " Mar. 31st.	<u>27.40</u>	
		<u>\$46.10</u>

WINDSOR, N. S.,
March. 31st. 1917.

Almont Jones
MAJOR,
COMMANDING DRAFT,
1ST. NEWFOUNDLAND REGIMENT.