

ROYAL NEWFOUNDLAND REGT.

1293

1914-1918

Decided 27-10-32



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 1293

Name in full John Ryder Age 19

Address Bonaventure

Married Height 5 ft 7 Weight 133

Single Color Light Hair Brown Eyes Grey

Other distinguishing marks

Nearest relative Mother (Mrs) Mrs J. Ryder

Address no more

Dependents Cher. K. Ryder Present Wage one dollar per day

Occupation

Previous service

Decorations

General Remarks John Ryder

Date of Enlistment March 17th

John Ryder do sincerely promise and swear that I will be faithful and bear true allegiance to His Majesty, and that I will faithfully serve His Majesty in any place where I may be needed (or in the Colony of Newfoundland, as the case may be), against all His enemies and opposers whatsoever, according to the condition of my service.

Declared before me this 30th day of March 1915

Ensign

DESCRIPTIVE REPORT ON ENLISTMENT.

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

1913

Name John Ryder

Apparent age 19 years _____ months. Height 5 feet 7 inches.

Chest measurement { Girth when fully expanded _____ inches.
Range of expansion _____ inches.

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Mrs. Agnes Ryder

Benavista | 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	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pens on		Service in Regt. not allowed to reckon towards G. O. Pay		Signature of Officers certifying correctness of entries
					years	days	years	days	
Service towards limited engagement reckons from <u>March 17/15</u>									<p>Signature of Officers certifying correctness of entries</p>
Joined at <u>St. John's</u> on <u>March 17/1915</u>									
		<u>Wounded</u>		<u>20/9/15</u>					
		<u>Wounded</u>		<u>14/1/16</u>					
<p>Contacted St John's St. Stephens for let 27/5 Embarked St. John's 20/9/15</p> <p>Sept and Oct 1915 for training 8-15 Embarked for Gallipoli 13-9-15 Landed Suez Bay</p> <p>Sept 1915 Wounded 20-9-15 Admitted Hospital 26-9-15 Wounded for</p> <p>Sept 1915 Admitted Hospital 29-11-15 Embarked for Gallipoli 26-9-15 Wounded for</p> <p>Embarked Southampton 28-5-16 Embarked Dover 29-5-16 Wounded 1-7-16</p> <p>Admitted 12th F. M. Bungalow 4th N. Head 4-7-16 Wounded by enemy 17-7-16</p> <p>Admitted 12th F. M. Bungalow 18-7-16 Wounded 14-9-16 In hospital 27-9-16</p> <p>Arrived Southampton 3-10-16</p>									
<p align="center"><i>Discharged medically unfit</i></p> <p align="center"><i>St John's 3-10-16</i></p>									
Total Service forfeited as above									
Total Service towards Engagement to <u>3-10-16</u> (date of discharge) <u>1</u> years <u>201</u> days									
" " " Pension " (") " " "									

DESCRIPTIVE REPORT ON ENLISTMENT.

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

1243

Name John Ryder

Apparent age 19 years _____ months. Height 5 feet 7 inches.

Chest measurement { Girth when fully expanded _____ inches.
Range of expansion _____ inches.

Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Mrs. Agnes Ryder

Bonavista | 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	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed for fixing the rate of pension		Service in Re-serve 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>March 17/15</u>									
Joined at <u>St. John's</u> on <u>March 17/1915</u>									
Total Service forfeited as above									
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days									
" " " Pension " " " (") " " "									

Decided at John's 22/12/16

Notification by President of Medical Board of Approval of a Soldier's Discharge under Paragraph 392 (xvi) King's Regulations.

(To be completed and dispatched on the day on which the discharge is approved)

To the Secretary.-

Pensions & Disabilities Board.
St. John's. Nfld.

The Soldier named below has appeared before an Army Medical Board at this station and his discharge from the Service as "no longer Physically fit for War Service" has THIS DAY been approved. (The discharge will be confirmed for a date 14 days after the date on this notification, See A C I 1623 of 1916.

Soldier's surname Byde Christian Names John
(in full)

Regt No & Rank 293. Pte Regt or Corps 1st Bde
(If T.F. this should be stated)

His address on discharge will be Porters

The Soldier states that An allotment is being issued
in respect of him. ~~No~~

Station St John's
Date Dec 8/16

Cluny Macpherson
President of Board
Approving Officer.



Notification by President of Medical Board of Approval of a Soldier's Discharge under Paragraph 392 (xvi) King's Regulations.

(To be completed and dispatched on the day on which the discharge is approved)

To the Officer I/C Records _____

The Soldier named below has appeared before an Army Medical Board at this Station and his discharge from the Service as "no longer physically fit for War Service" has THIS DAY been approved. (The discharge will be confirmed for a date 14 days after the date on this notification, See A C I 1623 of 1916.

Soldier's surname Raydon, Christian names John
(in full)

Regt.No.and Rank 298 Pk, Regt.or Corps 1st Hoped.

His address on discharge will be Bonaville

The Soldier states that an allotment is being issued in respect of him.

Army Form D 4000A and Army Form B 179 for the above-named Soldier are enclosed

Station St John's also B179a.

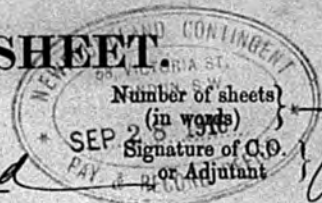
Amey Macpherson
~~President of Board~~
(Approving Officer)

Date Dec 8/16



Company
REGIMENTAL CONDUCT SHEET

COPY.



Number of sheets
 (in words) }
 Signature of C.O.
 or Adjutant }

J. G. Demister

Regiment of Newfoundland

Regiment.

Regimental Number
 and Name

1293 Lydes J.

Attested

19

Joined

17. 3.

1915.

Place	Date of Offence	Rank	Names of Prisoners	OFFENCE	Names of Witnesses	PUNISHMENT awarded	Date of award, or of order dispensing with trial	By whom	Date of Commencement	Date of Expiration	REMARKS
		<i>Pl.</i>									

To be carried over

No. 1293 Name *J. Sydes*

Sqn. Batty., or Company } *E.*

Corps *1st Newfoundland*

Date of enlistment } *193.15*

G.C. Badges }

Service or Proficiency Pay }

Date of last entry in Company Conduct Sheet }

No. and date of last drunk }

Period not reckoning towards freedom from extra fine }

Sheet No. *1*

Signature O.C. Company, etc. }

Character }

A.A. Gordon S.H.

COPY



Wounded

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>Pte.</i>							

Army Form B. 125

F.R.A.

COPY.



Army Form B. 179.

Medical Report on an Invalid.

Station King George Hosp. S.G.

Date Aug 29. 16

1. Unit Newfoundland

5. Age last birthday 20 yrs

2. Regimental No. 1293

6. Enlisted { on 17 March 1915
at St. John's

3. Rank Pte

7. Former Trade or Occupation { Operator Telegraph

4. Name Ryder John

8. Disability.

G.S.W. Head 1.3 (1101)

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. 3 July 1916

10. Place of origin of disability. France

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. G.S.W. Head by shrapnel

Operation 4.7.16 13 General Hospital Trepine.
Wound situated over longitudinal sinus.
Admitted 18.7.16 to H.Q.H. with unhealed wound
in posterial parietal region & weakness of legs
X Ray no. J.D. shows Trepine

12. (a) Give your opinion as to the causation of the disability.

G.S.W. Head

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3).

Active Service

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

Healed wound of head. Trephine with ~~absent~~ absence of bone in posterior parietal region. Crossing middle line. Both plantar reflexes? exhausted? other reflexes? normal. Sensation & sphincter? not affected?

Mental condition good
Sense of pricks deficient in Rt foot
Weakness of toes & ankles both feet
Skull cap has been supplied

14. If the disability is an injury, was it caused

- (a) In action? *Yes*
- (b) On field service? *Yes*
- (c) On duty? *Yes*
- (d) Off duty? *—*

15. Was a Court of Inquiry held on the injury? *No*

If so—(a) When?

(b) Where? *✓*

(c) Opinion?

16. Was an operation performed? If so, what? *Trephine*

17. If not, was an operation advised and declined? *} Not applicable*

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

19. Do you recommend

- (a) Discharge as permanently unfit, or
- (b) Change to England?

Discharge as unfit

Sgt
H. J. Swinvale

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith,

except
King George Hospital
Station *London S.E.*

C. Mackay Major R.A.M.C.

Officer in charge of Hospital

Date *2 Sept 1916*

* 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.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1913).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

Active Service

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

G.S.W. in action in France

21. Has the disability been aggravated by

(a) Intemperance?

(b) Misconduct?

No

22. Is the disability permanent?

Yes

23. If not permanent, what is its probable minimum duration?

✓

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

Total 12 Months

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$, or total incapacity.

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

Not applicable

26. Do the Board recommend

(a) Discharge as permanently unfit, or

(b) Change to England?

Discharge as permanently unfit for War Service and for Home Service

Signatures:—

St. George's Hospital
Station *London S.E.*

H. G. Army *Major R.A.M.C. President.*
C. Mackay *Major R.A.M.C. Members.*

Date _____

St. George's Hospital
Station *London S.E.*

H. G. Army *Major R.A.M.C. Administrative Medical Officer.*

Date _____

DUPLICATE
For Newfoundland Govt.



Army Form B. 179.

Medical Report on an Invalid.

Station Wgt.

Date 11th September 1916

1. Unit 1st Newfoundland Rgt.
2. Regimental No. 1293
3. Rank Private
4. Name RYDER, John
5. Age last birthday 20
6. Enlisted { on 7th March 1916.
 { at St Johns.
7. Former Trade { Telegraph Operator
 or Occupation

8. Disability.

G. S. W. Skull.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability.

3rd July 1916.

10. Place of origin of disability.

Beaumont Hamel.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

He states that he was knocked down by the explosion of a shell. He was removed to 13th Gen Hosp. Boulogne. A fortnight later transferred to King George's Hospital for three weeks.

12. (a) Give your opinion as to the causation of the disability.

Explosion of Shell

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3).

Caused by Active Service

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

There is a semi-spherical healed scar 1 1/2" long over biparietal junction: a linear wound over left parietal eminence.

There appears to be a loss of bone over the foramen of these two scars where brain pulsation are felt. States he suffers from headaches & does not sleep well.

14. If the disability is an injury, was it caused

- (a) In action? *yes*
- (b) On field service? *yes*
- (c) On duty? *yes*
- (d) Off duty? *no*

15. Was a Court of Inquiry held on the injury?

If so—(a) When?

(b) Where? *No*

(c) Opinion?

16. Was an operation performed? If so, what? *yes.*

17. If not, was an operation advised and declined? *} Not applicable*

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

19. Do you recommend

- (a) Discharge as permanently unfit, or
- (b) Change to ~~England~~

Discharge as permanently unfit.

H. H. Holson, M.D.

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except†

Station _____

Officer in charge of Hospital.

Date _____

* 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.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165. Pay Warrant, 1913).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

Active Service.

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

21. Has the disability been aggravated by

- (a) Intemperance?
- (b) Misconduct?
- (c) Any of the conditions mentioned in Question 20, and if so which?

} *No*

22. Is the disability permanent?

23. If not permanent, what is its probable minimum duration?

At least 12 months.

To be stated in months

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

1/2 for 12 months

In defining the extent of his inability to earn a livelihood, estimate it at 1/2, 1/4, 1/8, or total incapacity.

24a. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?

Not applicable

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

—

26. Do the Board recommend

- (a) Discharge as permanently unfit, or
- (b) Change to England?

Yes

Signatures:—

H. S. Haas President.

Station *St. John's*

L. Paterson Major } Members.

Date *Dec 8th 1916*

W. Sinclair Tait }

Approved.

Station _____

Clayton Macpherson, Major
Administrative Medical Officer.

Date _____



D. W. S.

PTE. JOHN RYDER

States nothing in condition to hinder him taking up his former occupation as Telegraph Operator but "Don't like that job"

(Sgd) CLUNY MACPHERSON - MAJOR.

COPY.

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

MEDICAL HISTORY

Surname *Ryder*

OF
Christian Name *John*



Table I.—GENERAL TABLE.

Birthplace:—Parish *Douarita*

County

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	8	Mar	191	
at	<i>Douarita</i>		at	
Declared age	19	years		
Trade or occupation	<i>clerk</i>			
Height	5	feet	7	inches
Weight	<i>133</i> lbs.			
Chest Measure- ment { Girth when fully expan- ded Range of expansion	<i>36</i> inches			
	<i>2</i> inches			
Physical development	Right	Left	Right	Left
Vaccination marks { Arm Number				
When vaccinated	<i>Never</i>			
Vision	R.E.—V.=	<i>N</i>	R.E.—V.=	
	L.E.—V.=		L.E.—V.=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
	(b)		(b)	
(b) Slight defects but not sufficient to cause rejection				
Approved by (Signature)	<i>Haterton</i>			
(Rank)	<i>Capt</i>			
Enlisted	at	<i>St John's</i>	at	
	on	17 day of <i>Mar</i>	on	day of 191
Joined on enlistment	Corps	<i>Inf Regt</i>	Corps	
	Regtl. No.	<i>1293</i>	Regtl. No.	
Transferred to				
Became non-effective by	on	day of	on	day of
(Signature)				
(Rank)				

Table II.—Only for admissions to hospital or to the sick list in the case of Warrant Officers treated in quarters.

Name of hospital	Admitted to hospital			Discharged from hospital			Disease	Number of 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, &c., will be given in the special syphilis case sheet	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
London Sea Hospital Wandsworth	29	11	15	5	1	16	G.W. Left Chest	38	G.W. Left Chest. Dardanelles Sep 20/16 Shrapnel taken out of chest wall. Cough no blood. Lump now well a hole nearly L'airly line.	W. Chaulk R.A.M.C.
King George Hospital London S.E.	18	7	16	8	9	16	G.W. Head 1-3	53	July 3/16. Wounded by shrapnel in head. Knocked them over, could not walk. July 4/16. Operation at *13 Genl. Hospital. Inflamed. On admission— large open wound. Marked weakness of Rt. Leg, especially ankle & toes. July 29/16. Wound still discharging & some boginess on Rt. side of scalp. Aug 4/16. Temp. 99, pale & complaint of much pain in back, in lower lumbar region. Aug 17/16. Much improved, wound healed. No pain in back. Now discharged as an invalid.	C. Mackay Major R.A.M.C.

ORIGINAL.
For Newfoundland Govt.



Army Form B. 179.

Medical Report on an Invalid.

Station Ayfe.
Date 11th September 1916.

- 1. Unit 1st Newfoundland Regt.
- 2. Regimental No. 1293
- 3. Rank Private
- 4. Name RYDER; JOHN
- 5. Age last birthday 20
- 6. Enlisted { on 7th March 1915
at St. John's.
- 7. Former Trade { Telegraph Operator.
or Occupation

8. Disability.

G. S. W. Skull

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

- 9. Date of origin of disability. 3rd July 1916
- 10. Place of origin of disability. Beaumont Hamel

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

He states that he was knocked down by the explosion of a shell. He was removed to 13th Gen. Hosp. Boulogne, a fortnight later transferred to King George's Hospital for 3 weeks.

- 12. (a) Give your opinion as to the causation of the disability. Explosion of shell.
- (b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3). caused by Active Service.

18. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

There is a hemispherical
healed scar 1 1/2" long over
biparietal junction: a lesser
wound over left parietal
eminence:
There appears to be loss of bone
over the former of these two scars
where Brain Pulsations are
felt:
States he suffers from headaches
& does not sleep well.

14. If the disability is an injury, was it caused

- (a) In action? *yes*
- (b) On field service? *yes*
- (c) On duty? *yes*
- (d) Off duty? *no.*

15. Was a Court of Inquiry held on the injury?

- If so—(a) When?
- (b) Where?
- (c) Opinion?

no.

16. Was an operation performed? If so, what?

yes

17. If not, was an operation advised and declined?

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

} inapplicable

19. Do you recommend

- (a) Discharge as permanently unfit,
or
- (b) ~~Change to England?~~

discharge as permanently unfit.

A. Wilson Lt Col.

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except

Station _____

Officer in charge of Hospital.

Date _____

* 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.

+ Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

Notes.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

- (ii.) Expressions such as "may," "might," "probably," &c., should be avoided.
- (iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Articles 1162 and 1165. Pay Warrant, 1913).
- (iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.
- (v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

Active Service

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

21. Has the disability been aggravated by

- (a) Intemperance?
- (b) Misconduct?
- (c) Any of the conditions mentioned in Question 20, and if so which?

} *no.*

22. Is the disability permanent?

23. If not permanent, what is its probable minimum duration?

At least 12 months.

To be stated in months

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{2}$, $\frac{1}{3}$, $\frac{1}{4}$, or total incapacity.

$\frac{1}{2}$ for 12 months.

24a. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?

*A. Wilson
S. Rams.*

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

26. Do the Board recommend

- (a) Discharge as permanently unfit, or
- (b) Change to England?

Signatures :—

_____ President.

Station _____

Date _____

} _____ Members.

Approved. _____

Station _____

Date _____

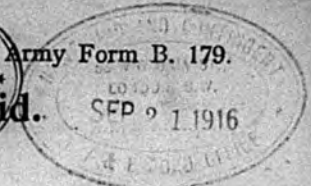
_____ Administrative Medical Officer.

#:

8134

ORIGINAL

Medical Report on an Invalid.



Station King Georges Hospital SE.

Date Aug. 29. 1916.

- 1. Unit 1. Newfoundlanders.
- 2. Regimental No. 1293.
- 3. Rank Rt.
- 4. Name Ryder, John:

- 5. Age last birthday 20 yrs.
- 6. Enlisted { on 17. March 1915.
at St. Johns.
- 7. Former Trade or Occupation { operator:
telegraph.

8. Disability.

gsw head. 1-3. (1101)

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. 3 July. 1916.

10. Place of origin of disability. France.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. gsw head. by shrapnel

op. ear: 4.7.16 13 lower traps: Trephined.

head situated over Logithurial sinus:

admitted: 15.7.16 to KGH: with a head wound in posterior parietal region & weakness of legs.

X Ray no FB: shows hepatic mass

12. (a) Give your opinion as to the causation of the disability.

gsw head.

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 8).

Active Service

13. What is his present condition ?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

healed wounds of head. trophic with absence of bone in posterior parietal region crossing middle line.

Both plantar reflexes extensor: other reflexes normal:

Sensibility - sphincter not affected.

Mental condition good.

Sense of position dependent in R. foot.

Weakness of toes & weaker both feet:

Shull cap has been supplied.

14. If the disability is an injury, was it caused

(a) In action ? *yes*

(b) On field service ? *yes.*

(c) On duty ? *yes*

(d) Off duty ?

15. Was a Court of Inquiry held on the injury ?

no.

If so—(a) When ?

(b) Where ?

(c) Opinion ?

16. Was an operation performed ? If so, what ?

Theo lines --

17. If not, was an operation advised and declined ?

— } Not applicable.

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service ?

19. Do you recommend

discharge as unfit.

(a) Discharge as permanently unfit,

or

(b) Change to England ?

H. Swindle.

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith,

~~except~~

KING GEORGE HOSPITAL,
LONDON, S.E.

Station _____

C. Mackay Major R.A.M.C.

Date _____

2 SEP 1916

Officer in charge of Hospital.

H. Swindle

*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.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165, Pay Warrant, 1918).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

Active Service.

U.S.M. in action in France.

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

21. Has the disability been aggravated by

(a) Intemperance?

(b) Misconduct?

(c) Any of the conditions mentioned in question 20, and if so, which?

No
Yes

22. Is the disability permanent?

23. If not permanent, what is its probable minimum duration?

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

Total 12 months

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{2}$, $\frac{1}{3}$, $\frac{1}{4}$, or total incapacity.

24A. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?

Yes
Not applicable.

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

26. Do the Board recommend

(a) Discharge as permanently unfit,

or

(b) Change to England?

Discharge as permanently unfit for War Service and for Home Service.

Signatures:—

KING GEORGE HOSPITAL,
LONDON S.E.

Station

Date



H. G. Denny President.
J. Mackay Member.

Approved.

Station

Date



H. G. Denny Administrative Medical Officer.

C. 2.—Casualties.

2294
COLONIAL CONTINGENTS ONLY.

THE KING GEORGE

HOSPITAL, at

STAMFORD

STREET,

65, VICTORIA ST.

LONDON, S. E.

JUL 20 1916

Affiliated to

NOMINAL ROLL of Sick and Wounded from the * French

Expeditionary Force

admitted on 18th July, 1916

from Hospital Ship "Cambria"

Southampton

* Here insert which Expeditionary Force. "Newhaven" etc.

or
Dover.

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.—These rolls should be forwarded direct to the War Office, Alexandra House, Kingsway, W.C., not later than the day after admission; envelopes to be marked C. 2, Casualties: rolls are not to be telegraphed in advance. The duplicate of the rolls should be sent to the Officer in charge 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).
1293	Pte.	Ryder, J.	1st Newfoundland Rgt	G.S.W. SKULL Severe

Signed by the Major, R.A.M.C.

Adjutant & Registrar,
The King George Hospital
London, S. E.

No. 1293 Name J. Rogers Sqn., Batty., or Company } E. Corps P Newfoundlan, Date of enlistment } 19/3/15. G.C. Badges } Service or Proficiency Pay }

Date of last entry in Company Conduct Sheet } Nil No. and date of last drunk } Nil Period not reckoning towards freedom from extra fine } ORIGINAL Sheet No. } Signature O.C. Company, etc. } HK Goodyear Character 2/Pl.

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	Character
		<u>Pl</u>							<u>S. Rogers</u> <u>LONDON SW</u>
									<u>OCT 5 1916</u>

Wounded

Casualty Form—Active Service.

Regiment or Corps 1st Newfoundland

Regimental No. 1293 Rank Pte. Name J. Ryder

Enlisted (a) 17-3-15 Terms of Service (a) Duration Service reckons from (a) 17-3-15

Date of promotion } Date of appointment } Numerical position on }
to present rank } to lance rank } roll of N.C.Os. }

Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
	Emb'k'd Southampton		28. 3. 16		
	Disembk'd ROUEN		30. 3. 16		
	13 th Bn Ad. Gsw. Head		Boulogne	4.7.16	NA 609.
	St Denis Iuvto Eng		- 20	14.7.16	W 3083
	<u>Int</u>				

A. R. Clerk
CAPTAIN,
FOR O.I/c INFANTRY RECORDS
G. H. Q.; 3rd ECHELON.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

Casualty Form—Active Service.

Regiment or Corps Newfoundland

Regimental No. C.R. 1293 Rank Pte Name John Ryder

Enlisted (a) 17/2/15 Terms of Service (a) one year Service reckons from (a)

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N.C.Os. }

Extended Re-engaged 15/8/15 Qualification (b)



Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked St. John's, NFLD.		20/4/15.	
		Disembarked Alexandria		1/9/15.	
		Embarked for Gallipoli		13/9/15.	
22/9/15.	26 C.C.S.	Shrap. Wound, L. Side.	26 C.C.S.	20/9/15.	Auth. A 36, 22/9/15. JP
30/9/15.	Comdt., Malta.	Admitted	Hosp., Malta.	26/9/15.	" A 11493, 3/10/15. JP
7/12/15.	"Egypt"	Invalided to England	H.S. "Egypt"	22/11/15.	Auth. B 734. JP

Jmt.

H. Parkhouse Captain,
Officer i/c Records, T. F. 61
3rd. Echelon, M. E. F.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered. (P.T.O.)
(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

Squadron, Troop, Battery and Company Conduct Sheet

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 3.
Forms B. 121.
(533) W12871/604 400m 3/15x-1 53 58 39.

ORIGINAL

Regiment of First Newfoundland

Number of Sheets 1

Signature of O. C. Company J. P. Oliver



Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<u>1293</u>	Age on	<u>19</u> years <u>11</u> months	<u>Clerk</u>	
Joined _____ Date _____		Place and Date of Enlistment <u>St John's 11-9-15</u>		Religion	
Joined _____ Date _____		Period of { with Colours <u>20 1/2</u> years. with Reserve <u>3 1/2</u> years.		<u>C. of E.</u>	
Joined _____ Date _____				Place of Birth <u>Bonaville</u>	

Place	Date of Offence	Rank	Cases of Drunkenness.	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
		<u>Pte</u>							<u>Medically Unfit St John's 3¹⁰/₁₆</u>

To be carried over

Army Form B. 121.



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 Commissioners of Chelsea Hospital. Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and 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, to be completed by the Officer i/c Records when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W. Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

A Name in full *John Heyde*
Regiment from which discharged *1st Newfoundland*
Regimental Number *1293*
Intended address *St. Marita Newfoundland*
Height on discharge *5 Feet 8 1/2 Inches*
Colour of Hair on discharge *Brown* **Colour of Eyes** *Brown*
Figure on discharge *Medium*
Christian name of Father *Fred*
Christian name of Mother *Agnus*
Wife's Maiden name in full } *Not applicable*
Date and Place of Marriage }
Christian names of Children }

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) *John Heyde* (Rank) *Pl.*
King George Hospital Date *2/9/16*

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.
King George Hospital *C. V. Mackay* Medical Officer i/c
London S.C. *Royal Reg. H. C. Hospital.*
 Station Date *2/9/16*

B Period of Service and in what Corps ...	Regiment	Years	Days	All Service Abroad with Stations	Years	Days
					India S. Africa	
Disallowed ...						
Service towards Pension ...						
Date inclusive to which pay has been issued				Sum due on account of advance of Pension }		
Sums due on account of public debts ...						

Rank on Discharge
 Character (as on Certificate of discharge)
 Where born, and on what date
 Date and Place of first Enlistment
 Trade on Enlistment
 Cause of Discharge
 Number of G.C. Badges
 Wounds, and Actions in which received

Medals

Other distinguishing marks

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.

Station _____ Officer in Charge
 Date _____ Records.

Allotment 14/7 per week to Mother

ORIGINAL.

Army Form D. 400A.

Descriptive Return of a Soldier discharged on account of Disability.

INSTRUCTIONS.—This form is to be completed in the case of every discharged soldier on account of disability, is to be submitted for the consideration of the Commissioners of Chelsea Hospital, Chelsea, London, S.W. Statement A should be completed in the Hospital at which the man is attending at the time of his examination by a Medical Board, and the soldier should be given a full opportunity of examining it, as, if awarded a pension, the subsequent distribution 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, to be completed by the Officer in Charge when received by him, and will be forwarded by him, together with the remainder of the man's documents, to the Secretary, Royal Hospital, Chelsea, London, S.W. Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.



A Name in full *John Ryder*
Regiment from which discharged *1st Newfoundland*
Regimental Number *1293*
Intended address *Bonavista Newfoundland*
Height on discharge *5* Feet *8 1/2* Inches
Colour of Hair on discharge *Brown* **Colour of Eyes** *Brown*
Figure on discharge *Medium*
Christian name of Father *Fred.*
Christian name of Mother *Agnes.*
Wife's Maiden name in full
Date and Place of Marriage } *not applicable*
Christian names of Children }

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.

John Ryder (Soldier's Signature in full) *Pte* (Rank)
Station *King George Hospital* **Date** *2/9/16*

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.

C. Mackay Medical Officer i/c *Major Rank* Hospital.

KING GEORGE HOSPITAL,
LONDON, S.E.

Station _____ **Date** *2 SEP 1916*

B Period of Service and in what Corps ...	Regiment	Years	Days	All Service Abroad with Stations	Years	Days
				India		
				S. Africa		
Disallowed ...						
Service towards Pension ...						
Date inclusive to which pay has been issued				Sum due on account	}	
Sums due on account of public debts ...				of advance of Pension	}	

Rank on Discharge
Character (as on Certificate of discharge)
Where born, and on what date
Date and Place of first Enlistment
Trade on Enlistment
Cause of Discharge
Number of G.C. Badges
Wounds, and Actions in which received

Medals

Other distinguishing marks

I certify that the above details of service and other particulars are, to the best of my knowledge, correct.

Station _____ **Officer in Charge**
Date _____ **Records.**

No. _____

Date 5th January, 1916

(1) To the Officer i/c Records,

58, Victoria Street,

Westminster, (Station).

(2) The Officer Commanding,

Newfoundland Contingent,

Ayr. (Station).

(3) The Paymaster,

58, Victoria Street,

Westminster. (Station).

Regimental No. 1293

Rank and Name Pte. Ryder, J.

Regiment or Corps 1st Newfoundlands.

has been granted a furlough from 5th Jan. to 14th Jan.

His address while on leave will be :-

Peel House,

Regency Street,

Vauxhall Bridge Road.

I consider he is fit for Duty.
 Light duty.

A. Hope Gosse, Capt., R.A.M.C.T.

Registrar,

Officer in charge 3rd Ldn. General Hospital,

Wandsworth. (Station).

* Strike out that which is inapplicable.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the Office.

PAY LIST.

to

191

Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps *2/1 Newfoundland Regiment*
 No. *1293* Rank *Private* Name *Ryder J.*
 Died (a) at on the of 191 .
 Deserted at on the *26th* of *Sept.* 1916 .
Repatriated *Asy*
 Certify to the correctness of above in every particular.

R. J. Rowell { Commanding Squadron, Troop,
Capt Battery of Company.

STATEMENT OF ACCOUNT.

[FORM 1.]

Date.	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month <i>7/11/16 paid</i>	<i>2</i>	<i>3</i>	<i>9 1/2</i>
	Cash issues (Date of each issue to be stated)				Pay days at from to			
		£	s.	d.	Proficiency, Service or good conduct pay			
					days at from to			
	<i>Sept 15 1916</i>	<i>1</i>	<i>00</i>		Messing allowance days at			
	<i>" 22 "</i>	<i>1</i>	<i>00</i>		from to			
	<i>26 "</i>	<i>1</i>	<i>00</i>	<i>0</i>	Clothing and kit allowance			
				<i>2 0 0</i>	Amount produced by the sale of Necessaries			
	Consolidated stoppage.....				Personal Clothing and Effects from Form 2...			
					Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
	Balance due by the Paymaster			<i>3 9 1/2</i>	Deferred Pay or Gratuity			
		<i>£</i>	<i>2 3 9 1/2</i>		Balance due to the Paymaster.....	<i>£</i>	<i>2 3 9 1/2</i>	

I hereby Certify that the above account is correct in every particular, ~~and that the debtor balance of £~~ is correctly chargeable against the Public^(b).

Dated at this



191

Paymaster.

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with A.F.B. 2090 or Army Form O. 1815.
 (b) Words in Italics to be struck out when there is no debtor balance.

CHECKED.
[Signature]

~~FOR~~ FOR USE IN THE CASE OF SOLDIERS RETURNED FROM AN EXPEDITIONARY FORCE, OR FROM GARRISONS ABROAD. *etc*

1 Newfoundland (Regiment).

No. 1293, Rank

Pte

, Name

Ryder J

is discharged from Hospital with orders to proceed to his home

(Address

Newfoundland
58 Victoria

St John's

and there await further instructions as to his discharge from the Service.

W. F. Hough

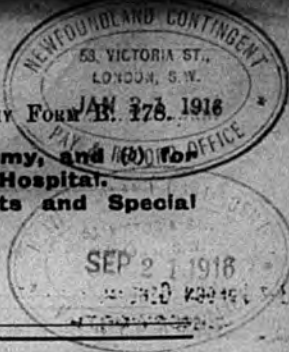
Officer Commanding,



} Hospital.



Temporary



ORIGINAL

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital.
Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Ryder Christian Name J.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish _____ County _____

Examined ... { on _____ day of _____ 191 ,
at _____

Declared Age ... years _____ days.

Trade or Occupation ... _____

Height ... feet _____ inches.

Weight ... lbs. _____

Chest Measurement { Girth when fully Expanded _____ inches.
Range of Expansion _____ inches.

Physical Development ... _____

Vaccination Marks { Arm ... Right _____ Left _____
Number _____

When Vaccinated ... _____

Vision ... { R.E.—V= _____
L.E.—V= _____

(a) Marks indicating congenital peculiarities or previous disease ... { (a) _____

(b) Slight defects but not sufficient to cause rejection ... { (b) _____

Approved by (Signature) _____
(Rank) _____

Medical Officer.

Enlisted ... { at _____
on _____ day of _____ 191 .

Joined on Enlistment	Corps.	Regtl. No.
...	<u>1st Newfoundland</u>	<u>1293</u>
Transferred to

Became non-effective by ...
on _____ day of _____ 191 .

(Signature) [Signature]
(Rank) _____

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of 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, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
8 th LONDON GENERAL HOSPITAL WANDSWORTH.	29	11	15	5	1	16	GSW Left Chest	38	GSW. Wound admitted Sept 23 1914. Sharp laceration of chest wall. Cough & rattles. Dry, lump wound site & little density visible, but	<i>[Signature]</i> COMMON
KING GEORGE HOSPITAL, LONDON, S.E.	18	7	16	8	9	16	GSW Head 1-3	53	July 3/16 Wounded by shrapnel in head. Penetrated him over, could not walk. July 4/16 Operation at No 13 Genl Hspl. Inephrined. On admission - Large open wound. Marked weakness of Rt Leg, especially ankle & toes. July 29/16 Wound still discharging & some boggyness on Rt side of scalp. Aug 4/16 Temp 99, pall & complains of much pain in back, in lower lumbar region. Aug 19/16 Much improved, wound healed. No pain in back. Now discharged as an Invalid.	<i>[Signature]</i> Major, R.A.M.C.

H.I.

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

MEDICAL HISTORY

Surname Ryder OF Christian Name John



Table 1.—GENERAL TABLE.

Birthplace:—Parish Bonavista County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	day of	191
Examined	on	8 day of <u>March</u> 1915	at	<u>Bonavista</u>
Declared Age	19	years		
Trade or Occupation	<u>Clerk</u>			
Height	5	feet	7	inches
Weight	<u>133</u> lbs.			
Chest Measure	<u>34</u> inches			
Girth when fully expanded	<u>36</u> inches			
Physical Development	Right	Left	Right	Left
Vaccination Marks	Arm Number			
When Vaccinated	<u>Never</u>			
Vision	R.E.—V=	<u>S</u>	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)		(b)	
Approved by (Signature)	<u>D. Paterson</u>			
(Rank)	<u>Capt.</u>			
	Medical Officer.			Medical Officer.
Enlisted	at	<u>St Johns</u>	at	
	on	17 day of <u>March</u> 1915	on	day of 191
Joined on Enlistment	Corps.	<u>1st Nfld</u>	Regtl. No.	<u>1293</u>
Transferred to				
Became non-effective by				
	on	day of 191	on	day of 191
(Signature)				
(Rank)				

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

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
<i>St Johns H⁷</i>					

ORIGINAL

FOR USE IN THE CASE OF SOLDIERS RETURNED FROM AN EXPEDITIONARY FORCE, OR FROM GARRISONS ABROAD.

11 Newfound land Regiment.



*The Officer Commanding _____

The Officer in Charge of Records 58 Victoria St SW

The Regimental Paymaster - do -

With reference to No. 1293 Pte Ryder J of the above Regiment, who appeared before a Medical Board and was approved by the D.D.M.S., London Command, on the 4-9-16 for discharge from the Service as permanently unfit, please note that this man has been sent to his home on warrant with orders to await instructions as to his final discharge; he has been given ~~advance~~ advance and ~~a suit of plain clothes~~.

He proceeded to report to Newfoundland Offices, 58 Victoria St SW on [date] 8-9-16.



Tom Langman Officer Commanding
.....CAPT..R.A.M.C. Hospital.

Place _____

Date _____

Four copies to be made, and one copy sent to each Officer mentioned above, and one copy filed in the Office.

C.R. 1293

**Extract from Nominal Roll 3rd Draft to B.H.F. arrived
29, I.B.D. 30-5-16 Joined Battalion 15-1-16**

#1293 Pte. J. Ryder.

C.R. 1293

Extract of Casualties received from Pay & Record Office,
London, dated July 11, 1916.

#1293 Pte. J. Ryder. ✓

Gunshot wound Head. Good.

Admitted 13 General Hospital, Boulogne 4th July 1916.

C.R. 1293

Extract of Nominal Roll Draft (All Ranks) to 1st Bn.,
B.E.F. embarked Southampton.

1293 Pte. J. Ryder

28-3-16.

C.R. 1293

Extract from Daily Orders received from P.&.R.O.
January 9th 1916.

1293, Pte J. Ryder.

ARRIVALS.

The following man having reported back from the 1st Battalion
is attached to "E" Company.

C.R. 1293

Extract of Daily Orders Part 11 from Unit Newfoundland Regiment.
Dated 4/1/16.

1293 Pte. J. Ryder, D Co., ✓

Invalided to England H.S. "Egypt" 22/11/15.....Auth: B 734, 7/12/

15

C.R. 1293

Extract of Sick and wounded N.C.Os. and Men of the Mediterranean Expeditionary Force, No: H. 3679, dated Dec. 8th. 1915.

Transferred from Hospital in Malta and Embarked for England on H.S. Egypt 22nd. November, 1915.

1293 Pte. J. Ryder.

Newfoundland Contingent,.....Shell Wound, Left Side.

CR. 1293

Extract of Sick and Wounded N.C.O.s. and Men of the Mediterranean Expeditionary Force, No: H. 3655, dated Dec. 6th. 1915.

1293 Pte. J. Ryder.

1st. Newfoundland. Bomb Wound Chest.....Trans. to H.S. to England
ex ST. Peter's Hospital Malta, 22nd. Nov. 1915.

C.R. 1293

Extract of Casualty received from Pay & Record Office,
London, dated Dec. 6th 1915.

1293 Pte. J. Ryder

G.S.W. Chest

Adm. 3, London G.H. Wandsworth, S.W. 29 Nov. 1915.

C.R. 1293

Copy of Cablegram to Gofernor st. Jonn's Hfld.
from P. & R. O. December 1st. 1915.

1293, Pte Ryder. ✓

Admitted Wandsworth. Wounded

C.R. 1293

Extract of Casualty received from Pay & Record Office,
London, dated Dec. 1st, 1915.

1293 Pte. J. Ryder

G.S.W. Chest

Adm. 3rd London General Hosp. on 29th November 1915 from Hosp. Ship.

C.R.

1293

Extract of Casualty List Received from P.&.R.O
Nov. 18th. 1915.

1293, Pte John Ryder. ✓

Shr. Wd. Lt. Sidh Malta.

C.R. 1293

Extract from List of Casualties to Oct. 31st. 1915

WOUNDED.

#1293 PTE. JOHN RYDER

SHR. WD. LEFT. SIDE. MALTA.

HC.

C.R. 1293

Extract of Sick and Wounded N.C.Os. and Men of the Mediterranean Expeditionary

Force, No: H. 3198, dated Oct. 18th. 1915.

1293 Pte. J. Ryder.

1st. Newfoundland Shell Wound L.Side Adm.
to Hospital in Malta ex H.T. "Assaye" on 28th. September 1915.

C.R. 1293

Extract of Mediterranean Force Casualties, NO: M. 8667, dated Oct. 7th.
1915.

Third Echelon, Mediterranean Expeditionary Force, Alexandria, telegraphed
October, 1915 (M.F.C. 19778 Received 4th. October, 1915.)

Reported Wounded -----no date given.

1293 Pte. J. Ryder

Newfoundland Regiment.

C.R. 1293

Extract from Nominal Roll of No. 1st Bn. N.S.I. Regt.
Embarked at Devenport for Active Service 20-8-15.

1293 Pte. J. Ryder.

Disembarked Alexandria, 31-8-15. Proceeded to Abbassia,
Cairo, same date. Embarked Alexandria for Gallipoli
13-9-15.

C.R. 1293

Extract from Nominal roll embarked St. John's, for Overseas,
per. S.S. Stephano. April 22, 1915.

1293 Pte. Ryder J.

C.R. 1293

John Rider was attested for General service
with the NEWFOUNDLAND REGIMENT on **March 17th 1915**
Regimental No **1293** was allotted to Pte. **John Rider**

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th, 1919.

C.R. 1293

Copu of Cablegram to Governor St. John's Nfld.
from P.&.R.O. 11/7/16.

1293, Ryder ,



Thirteenth Gen. Hosp. Boulogne 4th. July GSW Head.
good

C.R. 1293

Extract of Casualties received from Pay & Record Office,
London, dated July 21, 1916.

(Extract from Army Form B 219, from C.O. 1st. Bn. Regt.
dated 11/7/16.)

#1293 Pte. J. Ryder. ✓

Wounded in Action 1/7/16.

C.R. 1293

Extract from Telegram received from London, dated
September, 30, 1918

Leaving Liverpool, Scandinavian. September 27th
passage has been provided, Quebec following for
discharge:

#1293 Pte. Ryder.

C.R. 1293

SICK AND WOUNDED N.C.O's AND MEN OF THE EXPEDITIONARY FORCE - FRANCE.LICHFIELD RECORD OFFICE.

LIST No. H.A. 1064.

28150	Pte. Gosling, C.	17-	Notts & Derby	G.S.W. Chest & R. Arm.	To Eng. ex 7 Gen. Hos. St. Omer	16th July '16
35450	Cpl. Gildersthorne, A.	15-	do.	do. Forearm	do.	do.
27034	L/C. Winter, H.	16-	do.	do. Chest & L. Arm	do.	do.
24144	Pte. Sheraton, W.	15-	do.	Internal Appendix	do.	do.
13480	" Rotchell, A.	8-	S. Staffs	G.S.W. Frac. L. Humerus	To Eng. ex 23 Gen. Hos. Etaples	16th July '16
13214	" Hamblin, W.A.	9-	Leicesters	do. L. Wrist	Transit to 8 Con. Dep. Etaples ex 23 Gen. Hos.	16th July '16
211	" Chaplin, H.	7-	Leic, R.	do. VIII (4) Humerus	To Eng. per Hos. Ship "Jan Breydel" ex 13 Gen. Hos.	17th July '16
12885	" Hall, G.	6-	Leic. Regt.	do. V. (1) Sev: & IX (4) Ilium	do.	do.
13840	" Thrall, C.	7-	do.	do. IX (1) Sev:	do.	do.
15413	" Blackwell, A.	6-	Leic. R.	do. VIII (1) Slt.	do.	do.
13650	" Ramsden, F.	9-	do.	do. VIII (1) "	do.	do.
18708	Sgt. Hewins, A.	9-	do.	do. IX (1) "	do.	do.
13364	Pte. Arthur, E.	9-	do.	do. I. (1) "	do.	do.
16821	L/C. Chambers, G.H.	7-	do.	do. IV. (1) VIII (1) & IX (1.) Sev:	To Eng. per Hos. Ship "St. Denis" ex 13 Gen. Hos.	17th July '16
18663	Pte. Hollins, G.W.	8-	N. Staff R.	do. IV (1) Sev:	do.	do.
12951	Cpl. Lester, E.	8-	Leic. R.	do. XV Testicle.	do.	do.
15936	Pte. Broome, C.	7-	do.	do. Legs Frac. Good	Adm: 13 Gen. Hos. Boulogne	17th July '16
8450	" Smith, F.	7-	Linc. R.	do. IV (5)	To Eng. per Hos. Ship "St. David" ex 13 Gen. Hos.	17th July '16
6867	" Byrne, J.	1-	do.	do. VI (3)	DIED in 13 Gen. Hos. Boulogne at 11.50 a.m.	17th July '16
18887	" Machin, J.T.	12-	N. & D. Regt	do. Abdomen, Good	Adm: 13 Gen. Hos. Boulogne	17th July '16

TERRITORIAL FORCE - LICHFIELD RECORD OFFICE.

3695	Pte. Taylor, G.A.	4-	Lincs att 182 Tunn. Co.	?. Diphtheria	Adm: 7 Gen. Hos. St. Omer ex anr. Hos.	17 July '16
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LIST No. H.A. 1064.

NEWFOUNDLAND CONTINGENT.

1293	Pte. Ryder, J.	1-	Newfoundland R.	G.S.W. IX. (1) Slt and I (3)	To Eng. per Hos. Ship "St. Denis" ex 13 Gen. Hos.	17th July '16
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LIST No. H.A. 1064.



2350

2773



CASUALTIES

No. 1293 Pte. J. Ryder.

DISCHARGED FROM HOSPITAL,

goes to DEPOT TO AWAIT

DISCHARGE.

8th September, 1916.

C.R. 1293

CIRCULAR LETTER

CR 1293

St. John's,

March 15th 1919.

Riband of 1914-15 Star.

Please complete the following claim and return it to this Department. If possible, call at Room No. 3 for your issue.

W. F. Readell
Lieut. Colonel.

Chief Staff Officer.

CLAIM FOR ISSUE OF RIBAND
of 1914-15 STAR.

Department of Militia,

St. John's.

I hereby make claim for issue of Riband of 1914-15 Star.

I certify that I am entitled to this issue, having served on*

from *Sept 18th 1915* to *Sept 22nd 1915*. *On Gallipoli*
(Date) *1915*..(NO) *1293*..(Rank) *Pte*..(Name) *John Ryder*
(Place) *C.L. Bonavista 1915*

*Fill in theatre of War where you served in Gallipoli, Mudros, Lemnos, or Western Egyptian Frontier.

Ant 24/3/19
P.S. Left England with the 1st Battalion
and was with them until wounded
the 22nd Sept 1915 on Gallipoli
was at Gallipoli, Mudros, Lemnos and Egypt and
also Malta
Ex Pte John Ryder

RECEIPT.

C.R. 1293

I hereby certify that I have received the 1914-15
STAR.

No. 1293

Name John Ryder

Witness H.G. Duffer

Date Jun 5 20

Place Boonville

AW

RECEIPT FOR ISSUE OF
RIBAND OF 1914-15 Star.

C.R. 1293

I certify that I have received an issue
of 3 inches of Riband of 1914-15 Star.

1293

Name.....

St. John Ryder

Date.....

Mar 26/19

Place.....

Bonaville

J. Ryder.

CR.

1293.

D.K. @

1501

1200 1000 1000 1000 1000 1000 1000 1000 1000 1000

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

Fold Here

Signature

Date

Address

10101

SEP 23 1921.

The accompanying **Victory Medal** and/or **British War Medal**
is/are forwarded herewith to

John Ryder

in respect of his service as No. **1293** Rank **Pte.**

Name **J. Ryder** **Royal Nfld. Regt.**
~~Nfld. Forestry Corps.~~

Receipt of the same should be acknowledged hereon.

Received September 28 / 21

1293

Signature John Ryder

Date _____

Address Bonavista

[P.T.O.]

~~Blitzman~~
Blitzman

Have phoned Newfoundland record office and they have this man reported wounded (no particulars given) under the number 1293. They can deal with the case if we send it over.

Address - Newfoundland Pay
and Record Office,
58, Victoria St.

Phone number Victoria 147.

ACB.

12-10-15

5

ORIGINAL CABLEGRAM

No. _____



C. L. C.

RECEIVED
 No. of Message
 11 OCT 1915

Date, _____

THE COMMERCIAL CABLE COMPANY
 TELEPHONE NOS.
 100CL 1515
 1148, 1147, & 1148
 AVENUE
 ST. MARYS, N.S.W.

The following CABLEGRAM received, at *10:25 AM* M. "Via Commercial Cables."

AJM EFM 5 PASJOHN BONAVISTANF 17
 EFM WAR OFFICE LN
 WIRE IMMEDIATELY PARTICULARS INJURIES
 OF NUMBER TWELVE NINE~~TY~~ THREE PRIVATE
 JOHN RYDER
 RYDER

57 1/2

(Handwritten mark)

*see W. Sm. to
 Ryder. Bonavista
 disposed of
 JTB*

RECEIVED
 WAR OFFICE
 11 OCT. 1915



3/64, Grt. Courch

CABLEGRAM



NO.

Week End Letter Telegram 67m

*War office
London*

SW

PAY NO CHARGES TO MESSENGER.

No. 55/16.

WESTERN UNION



ANGLO-AMERICAN DIRECT UNITED STATES CABLEGRAM

<i>Prefix</i> _____		<i>Code</i> _____		<i>SENT</i>		<i>FOR STAMPS</i>
<i>WORDS</i>	<i>CHARGE</i>	<i>At</i> _____	<i>To</i> _____	<i>By</i> _____		
VIA WESTERN UNION				THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.		

TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.
Casualty Cablegram.

To W.S.M. Mrs. Angus Ryder
BONAVISTA (NEWFOUNDLAND)

PRIVATE RYDER SHRAPNEL WOUND LEFT SIDE SEPTEMBER

TWENTYNINTH.

TIMEWELL.

NOT TO BE TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature _____ Address _____

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

No.

559/98

WESTERN UNION

ANGLO-AMERICAN DIRECT UNITED STATES CABLEGRAM



SENT

FOR STAMPS

RDS	Code
	CHARGE

At _____
To _____ By _____

VIA WESTERN UNION

THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.

1/8/16. TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.
Casualty Cablegram.

To W.S.M. COLONIAL SECRETARY
ST. JOHNS (NEWFOUNDLAND)

ANSWER YOUR ENQUIRIES 22nd JULY PROGRESSING
FAVOURABLY 1293 HYDER.

SYNOPTICAL.

NOT TO BE TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature _____ Address **58, Victoria St., S.W.**

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

No.

559/98

WESTERN UNION

ANGLO-AMERICAN



DIRECT UNITED STATES

CABLEGRAM

SENT

FOR STAMPS

Prefix

WORDS

CHARGE

At

To

By

VIA WESTERN UNION

THIS FORM WILL BE ACCEPTED AT ALL
POST OFFICE TELEGRAPH STATIONS.

1/8/16

TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

Casualty Cablegram.

To W.S.M. COLONIAL SECRETARY
ST. JOHN (NEWFOUNDLAND)

ANSWER YOUR ENQUIRIES 22nd JULY PROGRESSING

FAVOURABLY 1293 RYDER.

SYNOPTICAL.

NOT TO BE
TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature

Address

58, Victoria St., S.W.

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

NEWFOUNDLAND CONTINGENT.

MEMORANDUM.



From

PAY & RECORD OFFICER
 58, VICTORIA STREET,
 LONDON, S.W.
 27th July, 1916.

To

Medical Officer i/c
 King George's Hospital,
 Stamford Street,
 S.E.

SUBJECT: No. 1293, RYDER,
 488, MOUBAND,
 1/1 NEWFOUNDLAND REGIMENT.
Reference Nos.

REPLY

Dated 29th July, 1916

A cable enquiry concerning the above men has been received from Newfoundland.

What is their present condition, please?

H.A. Anderson

for Paymaster & O.i/c Records.

No. 1293, Pte. J. Ryder, 1st Newfoundland Regiment, is suffering from a gun-shot wound of the head. He is not out of bed yet, but is progressing favourably.

No. 488, Pte. T. Moulant, 1st Newfoundland Regiment, has lost his right eye, and he can see very little with the left. He has a piece of shrapnel in his head, which cannot be removed. He has lost two fingers of the right hand, which are now quite healed. The Visiting Surgeon in charge of his case thinks it would be very beneficial to him if he could be removed from hospital to the care of some friends, or a cheerful Convalescent Establishment, and that some light employment, suitable to his condition, could be obtained for him. He could leave hospital when any arrangements can be made for him.

H. J. Army

Major, R.A.M.C.,
 Adjutant and Registrar.
 For Officer Commanding.

NEWFOUNDLAND CONTINGENT
 PAY & RECORD OFFICE
 Ref. No. 271
 Recd. JUL 31 1916
 A.C.O.
 Att'd.
 File No.

58 DICK ST

Bonaville
Nov 25/15



The Times
Dear Sir
P. 101

I am sending
a parcel addressed
to my son Private
John Ryder which
you will please
forward as quick as
you can to Malta
We received 5 letters
since he was wounded
and he gave us
the address to write
to him and here
his is address he told

(2)

address his letter
me two weeks to

Address
Private John Ryder
1st Cold Regt
C. Company
No 1293
H.M. Hospital, Valletta
Ward D. 41
Malta



Hope you will do me
this favour and see
that my son gets the
parcel as quick as
he can he may go back
again and will want
this parcel. I have all
the address on the
parcel and in c/o



Pay and Record Office,
I thought I would write
you and let you
know so as you
would oblige me by
trying to do the best
you can. As were
in a rush for him
to get this parcel.
Hope everything his
"ok" and you will do
the best you can.

I am yours sincerely

Mrs Agnes Ryder

P.S. Let me know when
you receive the parcel and
if he get it. Ryder

3, December, 5.

2052/1.

Mrs. Agnes Ryder,
Bonavista,
Newfoundland.

Madam,-

Referring to your letter 5/11/15, which being insufficiently addressed was delayed in reaching this Office; parcels addressed here are immediately forwarded to the latest known postal address.

About a month ago a parcel for your son was received and forwarded accordingly, since then none have come to hand. As you will already doubtless be aware your son, No.1293 Pte. J.Ryder, was admitted to Wandsworth Hospital, London, on 29/11/15, and if any parcels should arrive, for the time being there should be no difficulty in them reaching him promptly.

I may say that owing to the very large number of parcels sent to the British Mediterranean Expeditionary Force, and the difficulties of transport, transhipments &c., considerable delays and possible losses seem inevitable.

I am,
Madam,
Your obedient servant,

Capt.

Paymaster & O. i/c Records.

Ryder, J

1293

Ray Sept

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 Bonavista X J. Ryder (Signature of soldier) X
Date Jan 15/17 _____ (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.)

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.

ADMITTED TO

KING GEORGE HOSPITAL.

Army Form W. 3202.

DUPLICATE 7-16

FOR USE IN THE CASE OF SOLDIERS RETURNED FROM AN EXPEDITIONARY FORCE, OR FROM GARRISONS ABROAD. etc

11 Newfoundland Regiment.

*The Officer Commanding

The Officer in Charge of Records

58 Victoria St SW

The Regimental Paymaster

- do -



With reference to No. 1293 Pte Ryder J of the above Regiment, who appeared before a Medical Board and was approved by the D.D.M.S., London Command, on the 4-9-16 for discharge from the Service as permanently unfit, please note that this man has been sent to his home on warrant with orders to await instructions as to his final discharge; he has been given advance and a suit of plain clothes.

He proceeded to report to Newfoundland Office, 58 Victoria St SW on [date] 8-9-16.

Wm Longman Officer Commanding
CAPT., R.A.M.G.

Hospital.

Place
Date



Four copies to be made, and one copy sent to each Officer mentioned above, and one copy filed in the Office.

PAY LIST.

to

191

Voucher No.

NON-EFFECTIVE ACCOUNT.

Regiment or corps *2/1 Newfoundland Regiment*
 No. *1293* Rank *Private* Name *Ryder, J.*
 Died (a) at _____ on the _____ of _____ 191
 Deserted at *Repatriated* *Apr.* on the *26th* of *Sept.* 1916
 Certify to the correctness of above in every particular.

R.S. Rowell [Commanding Squadron, Troop,
Capt Battery or Company.]

STATEMENT OF ACCOUNT.

[FORM 1.]

Date.	Dr.	£	s.	d.	Cr.	£	s.	d.
	Balance Dr. last month				Balance Cr. last month <i>22/11/16 P.R.O.</i>	<i>23</i>	<i>9 1/2</i>	<i>1</i>
	Cash issues (Date of each issue to be stated)				Pay days at _____ from _____ to _____			
		£	s.	d.	Proficiency, Service or good conduct pay			
	<i>Sept 15 1916</i>		<i>10</i>	<i>0</i>	days at _____ from _____ to _____			
	<i>22 "</i>		<i>10</i>	<i>0</i>	Messing allowance days at _____			
	<i>26 "</i>		<i>10</i>	<i>0</i>	from _____ to _____			
				<i>200</i>	Clothing and kit allowance			
	Consolidated stoppage.....				Amount produced by the sale of Necessaries			
					Personal Clothing and Effects from Form 2...			
					Amount of Savings Bank balance, including interest (if no balance, to be so stated)			
					Deferred Pay or Gratuity			
	Balance due by the Paymaster		<i>3</i>	<i>9 1/2</i>	Balance due to the Paymaster.....			
		£	<i>23</i>	<i>9 1/2</i>		£	<i>23</i>	<i>9 1/2</i>
			<i>23</i>	<i>9 1/2</i>			<i>23</i>	<i>9 1/2</i>

I hereby Certify that the above account is correct in every particular, ~~and that the debtor balance of £ _____ is correctly chargeable against the Public~~

Dated at

this



191

J.M. Marshall CONTINGENT.
 PAYMASTER & OFFICER IN CHARGE RECORDS

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with A.F.B. 2090 or Army Form O. 1815.
 (b) Words in Italics to be struck out when there is no debtor balance.

CHECKED.
[Signature]

March 17, 1919

#1293 Pte. John Ryder,

Bonavista, Nfld.

Dear Sir:-

With reference to your application
I enclose cheque for Seventy dollars (\$70.00),
being amount of first payment on account of the
"War Service Gratuity.

Yours truly.

Paymaster & ^{Captain.} U. i/c Records

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

1102
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... *Ryder*..... 2. Surname... *John*.....

3. Rank... *Private*..... 4. Regtl. No. *1293*.....

5. Address in full to which future payments of gratuity are to be forwarded..... *Bonaville Newfoundland*.....

6. Date of enlistment in the Regiment. *17th March 1915*.....

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
Not applicable.....

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? *Not applicable*

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... *Served Overseas March 17th 1915 - 4th December 22nd 1916*.....

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

..... *Not applicable*

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... *I received \$87.50*

..... *Eighty seven dollars and fifteen cents Post Discharge Pay - J. M. Howley Capt*

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

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. *Not applicable*

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.? *No* ... If not give: - (a) Date of discharge *December 22nd 1916* (b) Reason for discharge *Being*

no longer physically fit for War Services on account of wounds received in action

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.....

Served at Isonzo Gallipoli Sept. 19th 1915
and near France March 17th 1916 to July 2nd 1916 when Wounded

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? *Not applicable*

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.

John Ryder

Signature of Applicant:

Place of Residence:

Declared before me at: *Romaville*

This *14* day of *March* 19*19*

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

Wm. Kopy

POST DISCHARGE PAY.				
Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
<i>Incurred Post discharge</i>			<i>4.60</i>	<i>280.00</i>
<i>on Jan. 23rd 1919 the sum</i>				
<i>of \$87.15</i>				
Certified Correct.				Paymaster.

Bonavista
Feb 20th 19

To the Pay-Master
Royal ~~Inf~~ Regt

Dear Sir

I wrote to Capt
Dicks a long time ago about my
board money and he told me he
forwarded ^{bill} to you to look up and
pay me same, But I never got
the money yet I think it will
soon be time to send it along
Trusting to receive same by
return mail and oblige

I am yours very
Sincerely
John Ryder

No 1293

Bonavista B.B.

Recd No 10
Ret. [unclear]

II
Capt. Dicks discharged
This man was discharged
in 1917 so you know
what he refers to
above

III
Lieut. Mandick

Please see my
letter to Paymaster
dated Jan 24-1919
which is all I know
of the matter.

1-3-19. M. Dicks

ROYAL NEWFOUNDLAND REGIMENT
(Separation Allowance Branch)
(Information for Board of Review)

W I F E

Notice:

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 Regt or Unit. Regt. No.

Pte John Ryder Pte 1st C.P.L.S. 1293

2. Age of soldier *24 yrs 3 months* Married or single

Married

3. Name in full of Wife

(Miss Irene Moulton) Mrs Irene Ryder

4. Address in full.

Bonavista, Nfld

5. Date of Marriage.

March 8th 1918

6. Place of Marriage.

Bonavista

7. Did marriage take place since soldier's enlistment?

Yes

8. Was Commanding Officer's permission obtained? If not, why?

No Not Necessary

9. If not married, how long have you been dependent on the soldier for your maintenance, and supported regularly by him on a bona fide permanent domestic basis?

Not Necessary

10. Were you living with your husband immediately prior to his enlistment? If not, how long have you been separated?

Not Necessary

11. Is separation a legal one.

Not Necessary

12. If legal are you in receipt of alimony? If so state amount.

Not Necessary

13. If not legal, how long since your husband contributed to your support? explain fully.

Not Necessary

14. State amount of Allotment received by you from soldier monthly?

None

15. From what date have you received Allotment.

None

16. Names of children. Age last Birthday Names of Children. Age last Birthday

Louis May Ryder 2 yrs (deceased)

17. Are you already in receipt of Separation Allowance from any source. If so, state amount.

No I received no Separation Allowance

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

No

19. Have you made a previous claim for Separation Allowance? If not, Why? Give particulars.

No Because I did not receive any Separation Allowance

20. Was your husband at the time of his enlistment an employee of the Nfld. Government.

No

21. In what capacity and in what place?

Not Necessary

22. Is he in receipt of a salary as such, while serving in the Nfld. Regiment. If so, how much.

No

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

Signature of Applicant

Mrs. John Ryder

Place of Residence-----*Bonnarshi*-----

Declared and subscribed before me at-----*Bonnarshi*-----

this-----*Seventeenth*-----day of-----*May*-----19*20*

Signature of Barrister of the Supreme
court, Stipendiary Magistrate, Notary
Public or Justice of the Peace.-----*John R. G. G.*-----

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 enquiry, the above statements are correct.

Signature of Clergyman-----*Augustus G. Bazly M.A.*-----

Signature of Member of
Patriotic Fund Committee-----*John S. Russell*-----

N.B. Marriage certificate must accompany this application, and will be returned after perusal. If marriage is after enlistment, Commanding Officer's permission in writing must be forwarded.

July 23, 1920.

Mrs. John Ryder,
Bonavista.

Dear Madam:-

I am in receipt of your application for Separation Allowance, accompanied by your Marriage certificate, which I return herewith. I beg to advise you that Separation Allowance is not payable to you because you were not married until sometime after your husband's discharge, and you were not dependent on him whilst he was serving in the Royal Nfld. Regiment.

Yours faithfully,

Major
Paymaster.

paid ^{board} ^{date of} ^{meeting}
up to (2)
4461
Hon. J. R. Bennett. ^{March 29} ^{all}
Mar 31 / 1945

Dear Sir

^{penk}
^{difficult}
^{clothing}

would you ~~at~~
please speak to Capt. Honley,
paymaster, and ask him why
he did not send me ~~money~~
board money due me before
discharge as I have wrote
to him several times & did
not receive any answer so
I think its time for me to
receive it as it have been
two years since I have been
discharged, and all other
soldiers I know have
received there board money
so why should I not receive
mine. I also wrote him about
money due me on my clothes
but haven't receive it yet and
it seems to me that I am

(2)
was treated right according
to other soldiers although I
have done my service & have
been honourably discharged though
wounds would you please to
find out about this money
for me. J. Ellidge & Popley.

Ex 1293 Pte John Ryder
Bonaville

STATEMENT OF ACCOUNT

No. 1293

Name Sydes John

1881

Date	Particulars	Ch. No.	Dr.	Cr.	Bal.
Sept 29	Balance due by Sm 3-9/2			92	92
Oct 9	Pay to date			11 00	11 92
31	"			35 20	47 12
Nov 30	"			40 70	
Dec 22	"			55 59	102 62
	Bonus			40 70	143 32
	clothing			12 95	156 27
	Ration Allowance Ls-			25 00	181 27
				4 86	186 13
Sept 30	To Allot		60		185 53
Oct 30	To Pay	22	15 00		170 53
31	To allotment		18 60		151 93
Nov 30	"		18 00		133 93
Dec 7	To Pay	62	25 00		108 93
18	To Pay	72	104 07		4 86
	war Service Gratuity 4 mo @ 70.00			280 00	284 86
	clothing			10 00	294 86
	Bonus				
Jan 23	To Pay	8692	12 95 87 15		281 91 194 76
Mar 1	"	11102	70 00		124 76
29	"	14938	10 00		54 76
Apr 1	"	14000	70 00		4 86
May 1	"	18486	39 90		
			471 27	476 13	476 13

Signed Af Loany Sm

Bonavioita
April 23/19

Hon J. R. Bennett. Esq
St John

Dear sir
I received answer from
paymaster few days ago in answer
to letter wrote to you about
my board. he says it was
included in my final cheque.
with so far as that is concerned.
I think myself. he has made a
mistake. as I now enclose letter
that I received with my final
check. and I am ~~sure~~ ^{sure} there must
be something wrong. somewhere. anything
I don't think any soldier was for
board money. was included in
his final check. I should think
myself. if the board money
was included in my final check
I would receive more than 66.12
for twenty days. I have home
here before discharged. including
allowance for December of that

year which I never received &
also board & pay. so you can see
for yourself. there is something
very wrong here. the paymaster
need not think that I have forgotten
all about this because I have
been discharged somewhere about 2 years.
No. I want to see as a return soldier
fair play. which I think. I can not
getting. trust you will see that
this thing his fixed right.
as soon as possible. I am yours
1813
1240 Es 26
truly John Ryden

p) enclose please find letter that
I received with my final check.

~~Capt Maddick Bonaville~~
1020 April 6th 20

Lieut Col Rendell

Dear Sir

I received
your letter on the
2nd Inst But never
received the Form
Please send form
by return mail
and oblige

That his form to fill
in for my Allowance
in regards to my
Husband No 1293^{En} Pte
John Ryder

Yours Sincerely
Mrs John Ryder
Bonaville

Form forwarded
Apr. 30 - 20
L.H.

W.H.

Bonavista
Feb 24/10
Paymaster 1st Newfoundland Reg.

Dear Sir

would you kindly forward
me my conduct sheet. and papers
to show that I am a discharged
Souldier. and Oblidge.

1293. Ite John Ryder

April 8 , 1919

Mr. John Ryder,
Bonafista.

Dear Sir:

With reference to your letter of March 31st. I beg to inform you that your Board allowance up to the date of your discharge, was included in your final cheque.

With reference to your difference in Clothing Allowance, I may say that this cheque was forwarded you on March 29th.

Yours truly ,

Lieut
For Paymaster

Bonavista
March 27/29

L. Ray Master
Royal Rfld Regt

Dear Sir

Please send
(War Service Gravity) Form for me to fill out
and oblige by return mail

yours truly
Ex Pk John Ryder
No 1293

Bonavista B.F.B.

Rfld.

Bonavista

April 3/17

Commanding Officer
H/ Newfoundland Reg

Dear Sir

would you
kindly oblige and
forward discharge
badge to the following
address. I am yours truly

#1293 Pte John ✓ Ryder
H/ Newfoundland Reg
Bonavista

OK
M. Bowley
a/c to.

1104

BB/OR.

Major Howley,
O.I.C. Pay and Records.

J. Ryder, 1293

August 10, 1920.

ACCOUNT	
CHK. NO.	1540
INITIALS	<i>[Signature]</i>
INT. LEASE	
EXT. LEASE	
DATE	

Kindly pay to the man named above,
the sum of eleven dollars and ten cents,
being transportation and ~~breaks~~ from Bonavista to St. John's.
charge same to Civil Re-establishment Committee.

\$11.10

Lowell Beckall

Vocational Officer.

J. C. R.

John Ryder

BB/OR.

October 1, 1920.

Major Howley,
O.I.C. Pay and Records.

J. C. R.

J. Ryder, 1293

Kindly pay to the man named above,
the sum of eighteen dollars and fifty cents
in payment of arrears to date.
Charge same to Civil Re-establishment Committee.

\$18.00

W. W. Mitchell,
Vocational Officer.

John Ryder

ACCOUNT	
CHK NO.	2888
INL. LEDGER	INIT
PAY LEDGER	INIT
GEN. LEDGER	INIT

Nov 10 1920

Major Howley
O. I. C. Records

Please pay to J. Ryder, 1293
the sum of ten dollars and fifty cents
in payment of allowance for week ending Nov 13th 1920
and charge same to Civil Re-establishment Committee

\$10.50

Pension \$15.00

2 C.R.

ACCOUNT		INITIALS	
CHK. NO.	3763	INITIALS	<i>[Signature]</i>
INTL. LEDGER		INITIALS	
PAY LEDGER		INITIALS	
GEN. LEDGER		INITIALS	

[Signature]
Vocational Officer

[Signature]
John Ryder

Nov 10 1920

Major Howley
O. I. C. Records

Please pay to J. Ryder, 1293
the sum of forty five dollars
in payment of P. & A. Bonus
and charge same to Civil Re-establishment Committee

\$45.00

Pension \$15.00

ACCOUNT		
CHK. NO.	3776	INITIALS <i>JH</i>
INTL. LEDGER		INITIALS
PAY LEDGER		INITIALS
GEN. LEDGER		INITIALS

J. C. A. Ryder
Vocational Officer *John Ryder*

December 20th

6

1293

Pte. John Ryder,
Bonavista.

Dear Sir,-

Referring to my letter enclosing Discharge certificate I enclose herewith Cheque for balance of pay due you as follows:-

Balance of pay	\$66.12
Bonus	12.95
Clothing.	<u>25.</u>
	<u>104.07</u>

Please sign the attached voucher, and also the special form enclosed, and return to me.

Yours truly,

2nd. Lieut. & D/Paymaster.

August 16th 1921.

Major Howley,
I/C Pay & Records

J. Ryder

ACCOUNT		INITIALS	<i>JB</i>
CH. NO.	<i>383</i>	INITIALS	<i>JB</i>
INL. LEDGER	---	INITIALS	<i>JB</i>
PAY LEDGER	---	INITIALS	<i>JB</i>
GEN. LEDGER	---	INITIALS	<i>JB</i>

Please pay Miss Winnie Smith
the sum of sixty dollars
in payment of tuition given to the above-named man.
Charge same to the Civil Re-establishment Committee.
\$60.00

W. Hunter
Vocational Officer

ACCOUNT		INITIALS	<i>JB</i>
CH. NO.	<i>383</i>	INITIALS	<i>JB</i>
INL. LEDGER	---	INITIALS	<i>JB</i>
PAY LEDGER	---	INITIALS	<i>JB</i>
GEN. LEDGER	---	INITIALS	<i>JB</i>

W. Howley J. C. R.

Bonavista
April 26th 21

B Butter
Vocational Officer
Johns.

For six months teaching Pte Donald Ryder
Telegraphy. = \$ 60.00.

OK for \$ 60.00
MS

J. C. R.
Hinnie Smith
Operator.

Bonavista
June 18th/19

To The Pay Master
Royal N. F. L. D. Regt
Militia Department
St Johns

Dear Sir

Frederick Jones

Please forward my
3 months Bonus money due me
as I see ~~some~~ ^{the} soldiers are
receiving theirs and Oblige

Yours Very
Truly

Pte John Rydes

1293

Bonavista, B.B.

A. P. D.

January 23. 1919

Pte. J. Ryder,
BONAVISTA.

Fred. J. Green

Dear Sir:

I enclose herewith cheque
for \$87.15 being three months' bonus due you
after discharge.

Yours truly,

Capt.
Paymaster.

Bonavista

March 25th 1899

J. M. Howley, Esq.

Dear Sir

4341

I wrote you a long
time ago about my board money and
also sent bill but I never got
any reply so please reply
as I am waiting on answer.

It seems as you have forgotten
about it, so I wish to hear
from you by return mail

Yours Truly

Ex Pte John Ryder

No 1293

~~Bonavista~~
A.P.O.

P.S. Please forward
money due me on
my clothes

April 4, 1919

#1293, Pte. J. Ryder,
BONAVISTA.

A. C. B.

I enclose herewith cheque for
\$10,.00 (Ten Dollars) balance of Clothing
Allowance due you.

Yours truly,

Capt.
Paymaster.

1293

April 26th, 7.

Mr. John Ryder,
Benavista.

Dear Sir,-

I beg to enclose cheque for \$4.86, being amount of
Rationals Money due you whilst on Hospital Furlough in
England.

Yours truly,

Lieut.
D/Paymaster

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 87 $\frac{15}{x}$

July 23 1919

Received from the First Newfoundland Regiment
the sum of Eighty Seven $\frac{15}{x}$ Dollars.
~~on account~~ of Pay. P. & S.
balance

Ch. No. 8692 Initials J.S.

Pay Ledger 188 Initials W.N.

Gen. Ledger Initials

Regtl. No.

Rank

Frederic Jones

No. 1293.

Rank

Pl-

Name

Ryder, J

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 1600

Mar 29 1917

Received from the First Newfoundland Regiment
the sum of Ten _____ Dollars.

~~amount~~
balance of Pay. *Electing*

Ch. No. 14938	Initials. <i>J. C. W.</i>
Pay Ledger. 188	Initials. <i>J. C. W.</i>
Gen. Ledger.....	Initials.....

Regtl. No.

Recd

J. C. W.

No.

1293

Rank

66

Name

J. Ryder



Casualty Form—Active Service.

Regiment or Corps Newfoundland

Regimental No. 1293 Rank Pte. Name John Ryder

Enlisted (a) 17/3/15 Terms of Service (a) One year Service reckons from (a) _____

Date of promotion to } _____ Date of appointment } _____ Numerical position on }
 present rank } to lance rank } roll of N.C.Os. }

Extended _____ Re-engaged 15/8/15 Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked St. John's, Nfld.		30/4/15	
		Disembarked Alexandria		1/9/15	
		Embarked for Gallipoli		13/9/15	
22/9/15	26 C.C.S.	Shrap. Wound, L. Side	26 C.C.S.	20/9/15	Auth. A 36, 22/9/15 " A 11493, 3/10/15
30/9/15	Comdt., Malta	Admitted	Hosp., Malta	26/9/15	" A 13748
7/12/15	"Egypt"	Invalided to England	HS. "Egypt"	22/11/15	" B 734

(Sgd.) H. Parkhouse, Captain,
 Officer i/c Records, T.F. 6,
 3rd Echelon, M. E. F.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) e.g., Signaller, Shoeing Smith, etc., etc. also special qualifications in technical Corps duties. [P.T.O.]

Casualty Form—Active Service.



Certificate true Copy

Regiment or Corps Newfoundland

Regimental No. 1293 Rank Pte Name Byrnes J

Enlisted (a) 17.3.15 Terms of Service (a) one year Service reckons from (a) _____

Date of promotion to present rank } _____ Date of appointment to lance rank } _____ Numerical position on roll of N.C.Os. } _____

Extended _____ Re-engaged 15.8.15 Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 86, or other official documents.
Date	From whom received				
		Embarked <u>St. Pauls Afld</u>		<u>30.4.15</u>	
		Disembarked <u>St. Pauls Afld</u>		<u>1.9.15</u>	
		Embarked for <u>Gallipoli</u>		<u>13.9.15</u>	
<u>22.9.15</u>	<u>26 C.C.S.</u>	<u>Shrap. Wd. Lt Side</u>	<u>26 C.C.S.</u>	<u>20.9.15</u>	<u>Auth. A.36. 22.9.15</u>
<u>30.9.15</u>	<u>Comat Malta</u>	<u>Admitted</u>	<u>Hosp Malta</u>	<u>26.9.15</u>	<u>A11493. 3.10.15</u> <u>A13748 H.P.</u>
<u>7.12.15</u>	<u>Egypt</u>	<u>Invalided to England</u>	<u>H.P. Egypt</u>	<u>22.11.15</u>	<u>B 734 H.P.</u>

Sgt J. Parkhouse
Officer in Charge Records
3rd Echelon
 Captain
J. J. G.
M. C. S.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) e.g., Signaller, Shoehorn Smith, etc., etc., also special qualifications in technical Corps duties.

Casualty Form—Active Service.



Certified true Copy

Regiment or Corps Newfoundland

Regimental No. 1293

Rank Pte

Name Ryder J.

Enlisted (a) 17.3.16

Terms of Service (a) Duration

Service reckons from (a) 17.3.16

Date of promotion }
to present rank }

Date of appointment }
to lance rank }

Numerical position on }
roll of N.C.Os. }

Extended _____

Re-engaged _____

Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 86, or other official documents.
Date	From whom received				
		Embarked Southampton		28.3.16	
		Disembarked Rouen		30.3.16	
	13 Gen St. Adam G.S.W. Head		Boulogne	4.7.16	N.C. Coy
	S.S. St. Denis "In to England"		Log	17.7.16	N 3043
					<i>AB. Clerk</i>
					<i>Capt</i>
					<i>for the Infantry Records</i>
					<i>Lt. Col. 3rd Echelon</i>

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.