



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 2572 Name Peter Searnsbury Corps 67th

Questions to be put to the Recruit before Enlistment.

- | | |
|---|--|
| 1. What is your name?
2. What is your full Address?
3. Are you a British Subject?
4. What is your age?
5. What is your Trade or Calling?
6. Are you Married?
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which?
8. Are you willing to be vaccinated or re-vaccinated?
9. Are you willing to be enlisted for General Service? ..
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 1. <u>Peter Searnsbury</u>
2. <u>St. John's</u>
3. <u>Yes</u>
4. <u>21</u> Years Months
5. <u>long wood</u>
6. <u>no</u>
7. <u>no</u>
8. <u>Yes</u>
9. <u>Yes</u>
10.) Name
) Corps
11. <u>Yes</u> |
|---|--|

I, Peter Searnsbury do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

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

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

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

Signature of Attesting Officer E. A. Dick's Lieut

†CERTIFICATE OF APPROVING OFFICER.

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

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

Date.....1915 }
 Place..... } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Paul Saninsbury
 Apparent age 21 years 0 months. Height 5 feet 2 inches
 Chest Measurement { Girth when fully expanded 35 inches
 Range of expansion 2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Paul Saninsbury, Newton
St. Mary | Relationship Father

Particulars as to Marriage

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

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

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



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. *1572* Name *Peter Sainsbury* ~~Corps~~ *C/E*

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---------------------------|
| 1. What is your name? | 1. <i>Peter Sainsbury</i> |
| 2. What is your full Address? | 2. <i>Newtown B/B</i> |
| 3. Are you a British Subject? | 3. <i>yes</i> |
| 4. What is your age? | 4. <i>21</i> years |
| 5. What is your Trade or Calling? | 5. <i>long mees</i> |
| 6. Are you Married? | 6. <i>no</i> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <i>no</i> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <i>yes</i> |
| 9. Are you willing to be enlisted for General Service? | 9. <i>yes</i> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you? | 10. Name |
| | Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <i>yes</i> |

I, *Peter Sainsbury* do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

Peter Sainsbury SIGNATURE OF RECRUIT.
Jacob P. Thomas Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.
 The above questions were then read to the Recruit in my presence.
 I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at *St Johns* on this *1* day of *June* 191*8*
 Signature of Attesting Officer *C. B. Dick's Lieut*

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the *1st* *Regiment*
 If enlisted by special authority, such will be attached to the original attestation.
 Date.....191.....
 Place..... } Approving Officer.

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

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

DESCRIPTIVE REPORT ON ENLISTMENT

5572

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

Name Peter Saninsberg
 Apparent age 21 years months. Height 5 feet 2 inches
 Chest Measurement { Girth when fully expanded 35 inches
 Range of expansion 3 inches
 Distinctive marks

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Paul Saninsberg Newtown
B. Bay | Relationship Father

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards line of engagement reckons from <u>1-6-18</u>									[Signature of Officer] [Signature of Officer] [Signature of Officer]
Joined at <u>St. Louis</u> on <u>June 1-1918</u>									
Discharged <u>October 18/1919</u>									
Embarked <u>St. Louis</u> <u>St. Columbella to Halifax N.S.</u> <u>22-7-18</u>									
To transfer law for demobilization <u>5-9-19</u>									
Arrived Newfoundland <u>18-9-1919</u>									
Demobilization <u>St. Louis</u> <u>18-10-1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 18-10-1919 (date of discharge) 1 years 140 days
 " " Pensions " " " " " " " " " " " "

C.R. 5572

Extract from Daily Orders Part II The Royal Newfoundland
Regiment Depot St. John's dated October 20th 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer i c Records from noted date
18-10-191

5572, Pte. P. Sainsbury.

C.R.

5572

Extract from Daily Orders Part II Royal Newfoundland
Regiment, dated 20/9/19. (Special).

Returned from Overseas and reported to Militia
Department, 18/9/19.

5572, Pte. P. Sainsbury.

C.R. 5572

Extract from Daily Orders Part II Royal Newfoundland
Regiment, dated 29/9/19. (Special).

The Discharge of the undernoted on demobilization
has been APPROVED by O.C. Discharge Depot from
noted date 4/10/19.

5572, Pte. P. Sainsbury.

C.R.I.

5572

Extract from telegram received from Synoptical, London
Sept.18/19.

Remittances received as follows have not been
paid: Soldiers repatriated- you can adjust 5572 Sainsbury
£.6.11)

COPY.

NEWFOUNDLAND CONTINGENT.

C.R. 5572

MEMORANDUM.

No. 9416/R.S.C.

From
Pay & Record Office,
58 Victoria Street,
London, S.W.1.

8th July 1919.

To
Officer Commanding
Magdalen Mil. Hospital
Winchester, Hants

9th July, 1919.

REPATRIATION.

It being desirable to repatriate the remainder of this Contingent so soon as possible and opportunities being uncertain, will you kindly state so far as may be practicable, the date on which the following may be discharged from hospital, and be ready to embark

5572, Pte. Sainsbury.

It may be added that in the absence of direct transport to Newfoundland there will be no alternative but to travel via Canada, and the men's physical condition should be considered accordingly, also kindly state whether any treatment may be necessary during the voyage to Canadian port, thence overland the short sea journey to Newfoundland and thence again per rail to St. John's.

(Sgd.) H.A. Timewell

Major,
Chief Staff Officer (London)

Reference hereon.

5572 Pte. Sainsbury has paralysis following diphtheria and will not be fit for repatriation for several weeks or possibly months.

(Sgd) ?

Lieut. Colonel R.A.M.C.

O: i/c

(In. Ref. No. 4600.)

For Original see File M-9-36

CR. 5572

Extract from telegram received from Synoptical, London
Sept. 6th, 1919.

The following embarked "Saturnia" Glasgow to Quebec Sept.
5th.

5572 Sainsbury,

C.R. 5572

Extract from Daily Orders part 11, from Unit The Royal Wfld.
Regt. St. John's, dated June 5, 1918.

#5572 Pte. P. Saninsbury.

Attested for General Service with the Royal Wfld. Regt.
from 1.6.18

C.R.

5572

Extract from Daily Orders part 11, from Unit The Royal
Wfld Regt. St. John's, dated July 25, 1918.

The following man embarked for overseas on H.M.S.
"Columbella" July 22, 1918.

#5572 Pte. Peter Sainsbury.

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

MEDICAL HISTORY

OF

Surname Sainsbury

Christian Name P. W. 5572

Table I.—GENERAL TABLE.

Birthplace:—Parish New Town, B.B. County Newfoundland.

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	18 th	June	1918	
Declared Age	21	years		days
Trade or Occupation	Engineer.			
Height	5	feet 2.		inches
Weight	120	lbs.		lbs.
Chest Measurement	Girth when fully expanded... 35			inches
	Range of Expansion... 3.			inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	/		/	
When Vaccinated				
Vision	R.E.—V=	46 6/8	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>L. Munn</u>			
(Rank)	Maj			
	Medical Officer.		Medical Officer.	
Enlisted	at	<u>Seymour</u>	at	
	on	18 th day of <u>June</u>	on	day of 191
	Corps.		Corps	Regtl. No.
Joined on Enlistment	<u>Royal Nfld. Regiment.</u>			
		<u>5572.</u>		
Transferred to				
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				

Table II.—Only for admission to hospital or to the sick list

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on syphilis, admission of treatment
	Day	Month	Year	Day	Month	Year			
Hazeley Down	13	9	18				Separation of Epiphysis R. elbow	19	Wound

to hospital or to the sick list in case of Warrant Officers treated in quarters.

Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In case of syphilis, admissions and re-admissions to hospitals will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
19	Much improved. Returned to unit	CS Mivian Capt EAM

[P.T.O.]

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.
In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. *Royal Newfoundland*
2. Regt. No. *572*
3. Rank. *Sable*
7. Former Trade or Occupation } *Engineer*
4. Name *SAINSBURY, Peter.*
(Surname) (Christian Names)
- 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regt. Nos.
5. Age last birthday. *21*
6. Posted for duty on *10 June 1918* at *S. J. J. J.*
in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty?
9. If a Court of Inquiry was held on an injury state :—
(a) When
(b) Where
(c) Opinion of Court
(b) Date of Discharge;
(c) Cause of Discharge.
(d) Particulars of Pension or Gratuity (if any)

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

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

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. *Separation of epiphysis right elbow.*
Other disabilities should be reported upon in answer to question No. 19. If no disability enter "nil"
11. Date of origin of disability. *13-9-18*
12. Place of origin of disability. *Hazley Down*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.
*P. 7. Fracturing right elbow
wider than epiphysis attached
treated in Hazley Down Hospital
19 days. Unable to use rifle
after return to depot recommended
for P. 2. Duty marked B. 1.*

14. State whether the disabilities are
- | | | |
|--|---------------------|-------------------|
| | (a) attributable to | (b) aggravated by |
| (i.) Service during the present war | Yps | |
| (ii.) Previous active service | h | |
| (iii.) Climate in pre-war service | no | |
| (iv.) Ordinary military service before the war | no | |
| (v.) Serious negligence or misconduct on the man's part. | accident | |

14 (a). If not due to any of these causes, to what specific condition do you attribute it? } p.s.

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?

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

Epiphysis has reunited giving full movements at elbow joint, and complete power of muscles above and below, therefore no disability

16. Was an operation performed? If so, when and what was its nature?

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

18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

20. Do you recommend—

- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Repatriation
M.R.
Major
 Medical Officer in charge of case.
D. Adams
 Royal S. Med.

Station *H. J. Camp*.....

Date *5.4.19*.....

* 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



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, John L. James, Regl. No. 1
hereby agree, until further notification by me, and in similar official form to make an Allotment of
7 Dollars and 00 Cents, per diem, from my Pay,
to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof
of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons
concerned, viz.:

Allotment begins 15th Dec 1914

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
4726	Wife	Miss Susan James	St. John's	50
Total Allotment, \$				50

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, counter-signed by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

(Sig.) J. L. James
Officer Commanding
T
Company

(Sig.) John L. James
(Rank) Private

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of

Royal Newfoundland
Signature of O. C. Company *P. B. Dicks Lieut*

Number of Sheet

One

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<i>Sainsbury Peter</i>	Age on	<i>21</i> years <i>0</i> months	<i>Engineer</i>	
Joined		Date	Place and Date of Enlistment	Religion	
Joined		Date	<i>St. John's</i>	<i>C of E</i>	
Joined		Date	Period of } with Colours	years.	
Joined		Date	with Reserve	years.	<i>New Town 1818</i>

Place	Date of Offence	Rank	Causes of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS

To be carried over.

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (vi.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve. In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps... *Royal Newfoundland*
2. Regtl. No. *5572* 3. Rank... *Pte*
4. Name *S. A. I. W. S. B. U. R. Y.* *Peter*
(Surname) (Christian Names)
5. Age last birthday... *21*
6. Posted for duty on *1 June 14* at *St Johns*
in category (or grade).....
7. Former Trade or Occupation } *Volunteer*
- 7a. If the soldier claims previous service in Army, he should state—
(a) Former Regts. or Corps; with Regtl. Nos.
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty?
9. If a Court of Inquiry was held on an injury state:—
(a) When (b) Date of Discharge;
(b) Where (c) Cause of Discharge.
(c) Opinion of Court (d) Particulars of Pension or Gratuity (if any)

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

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

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

11. Date of origin of disability. *13-9-18*
12. Place of origin of disability. *Hazelby Levens*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

accidental fall whilst at P. J. Franchising right elbow treated in 19 days unable to use right arm

Hazelby Levens mil Hosp 19 days

with after return to depot recommended right limb marked B.I

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|---|---------------------|-------------------|
| (i) Service during the present war | yes | |
| (ii) Previous active service | no | |
| (iii) Climate in pre-war service | no | |
| (iv) Ordinary military service before the war | no | |
| (v) Serious negligence or misconduct on the man's part. } | accident | |

14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

15. What is his present condition?

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

epiphysis has reunited giving full movements at elbow joint and complete power of muscles above and below therefore no disability

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

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

20. Do you recommend—

- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Station *Hazleydown*

Date *5-4-19*

Refaturation
mine

Major L. G. D. M.S.
Royal N. F. H.

Medical Officer in charge of case.

* Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause

REPORT ON ACCIDENTAL OR SELF-INFLICTED INJURIES.*To be rendered in accordance with instructions on the back of this form.*

1. Number, Rank, Name, and Unit of injured man. —

246 P. C. Sandberg
N. Fed.

Date of Casualty.

11. 9. 18.

2. Nature, Location, and Severity of injury. (N.B. Field Ambulance to be notified at once if wound is believed to be self-inflicted.)

Separation of Epiphysis R. Elbow
Internal

C. S. M. Vivian

Medical Officer.

3. Short statement of the circumstances of the case. (Signed statements of witnesses to be attached to this form.)

4. Commanding officer's opinion as to whether the man was:—

- (a) In the performance of military duty.
(b) To blame.
(c) Whether any other person was to blame.

Date _____

Commanding _____

5. (a) Opinion of G.O.C. Brigade.
(b) Disciplinary action taken or proposed, whether against injured man or another.

Date _____

Commanding _____

Brigade. _____

[Continued Overleaf.]

Ward _____ Hospital. Hayes 11
No. of Bed _____ Date _____

Regl. No.	Rank and Name.	Corps.	Part to be X-Rayed.
5572	Pte Sansbury	2nd Regt. R.A.F.C.	

SHORT HISTORY OF CASE.
(To be completed by M.O. i/c case.)

Known at Elbow.
? Separation of Epiphysis

REPORT ON RESULT OF X-RAY EXAMINATION.
(To be completed by Radiographer.)

No. of Plate _____

Plate shows a separation
of internal condyle on
its epiphysis. Some
displacement downward.

Signature of M.O. M. J. [unclear]
Car. LaneDate 12/9/18.Signature of Radiographer J. H. HealeDate 12.9.18

Sanctus

Cannot afford me
reple. no more of reple
etc. Recommend
permanent light duty.

W. H. H. H.
C. H. H. H.

Unable to hold
reple. 20/2/18.

B. H.

P. Sainsbury.

C.R.

5572

~~1880~~



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Peter Sansbury, Regl. No. 2872.

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and fifty Cents, per diem, from my Pay,

to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons concerned, viz.:

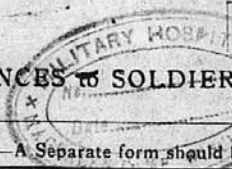
Allotment begins August 1st /18

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
4726	Father	Paul Sansbury	Newtown P. B.	50¢
			Total Allotment, \$	50¢

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, countersigned by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

(Sig.) L. G. James 2/Pr
 Officer Commanding
F Company
St. John's
July 8th 1918

(Sig.) Peter Sansbury
 (Rank) Pte



No. 4594

(To be inserted in the Central Hospital.)

Army Form O. 1823A
(In pads of 200)

ADVANCES TO SOLDIER(S) of the

Newfoundland

Regiment.

Hospital.

Month *Aug* 19*19*.

N.B.—A Separate form should be used for each Regiment or Corps to soldiers of which advances are made.

Regtl. No.	Rank.	Name.	Company, Squadron or Battery.	No.	Date	Amount.		For use in Regimental Pay Office only.		Soldier's Signature.
						s.	d.	Ledger Clerk	Check'g Clerk	
<i>5</i>	<i>Pvt.</i>	<i>Lansbury, P.</i>	<i>2 New</i>	<i>6</i>	<i>8</i>	<i>5</i>				<i>8077</i>
<i>5</i>			<i>Co. H.A.</i>	<i>19</i>						<i>AUG 19'19</i>
<i>7</i>										<i>Winslow</i>
<i>2</i>										

CHARGED
 PAY BOOK
 Date *20/8/19* by *W.E.*

Certified Correct (Please complete and return the counterfoil).

J. H. ...

Medical Officer in Charge.

To Regimental Paymaster

Pte Sainsbury

To see eye specialist.

Military Hosp.

4-8-19.

J. H. Wood
Capt R.A.M.C.

Date 12.8.19.



From Ophthalmic Surgeon, Central Military Hospital, ~~Tring, Bucks.~~

To The Medical Officer in Charge

Magdalen Camp Hoapt.

"REPORT OF VISION".

No. *5572 Pte Sainsbury P. R. Mtd Rept.*

Has V.A. R.D. $\frac{6}{9}$

+1.00 sph = R.E. $\frac{6}{6}$

With corrected lenses.

Has V.A. I.D. $\frac{6}{4}$

+1.00 sph = L.E. $\frac{6}{6}$

A. Jones.
Capt., R.A.M.C.
Ophthalmic Surgeon.

Note...

This Report should be attached to this man's Medical History Sheet for future reference.

R.H. Hypermetropia. Glaucoma ordered.

No. 7736/1512

N.F.P. / 70.

From: NEWFOUNDLAND CONTINGENT

Chief Paymaster & O. i/c Records,
Newfoundland Contingent,
Pay & Record Office,
58, Victoria Street,
London, S.W. 1.

To: Officer Commanding,
2nd Batt. Ryl. Nfld. Regiment
Winchester.

20th May 1919

5572 Pte. P. Sannisbury

_____ 1919.

With reference to the following telegram from the Minister of Militia / / 19 (195):

"Pay to- 5572 P. Sannisbury
£6. 0. 0.

Receipt hereunder.
No 71c

Officer Commandg. _____ Batt'n.

Cheque £6. 0. 0. is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

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

Received the sum of _____
_____ in respect of
telegraphic remittance from the
Minister of Militia.

No. _____ Rank _____

Witness: _____

.. The Chief Paymaster,
.. Royal Newfoundland Regiment,
London, S.W. 1.

3572

Sainsbury

NEWFOUNDLAND CONTINGENT
PAY & ACCOUNTS OFFICE
C. Nos. 4401
Amd
of. Nos. 001

The attached is passed to as this man is in Hospital.

Hazeley Down Camp,
Winchester,
June 20th 1919.

M. P. ...

COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

LIEUT. COLONEL.

[Signature]

P & A
R. C.
S. F.
P.

1
Sainsbury, A

5572

Joseph

NEWFOUNDLAND POSTAL TELEGRAPHS

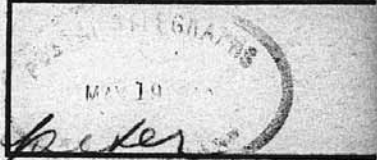
CABLE CONNECTION WITH ALL PARTS OF THE WORLD



Line No. 1 Sent by RJ Rec'd by RF No. 1

Place from Newtown

Sum of milled
Cable to 5-592



Sainsbury Hazelwood
Camp Six pounds
money used

Mamie Bangay

Remit 50¢ for cable

NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No.

Send by

Rec'd by

Check

No.

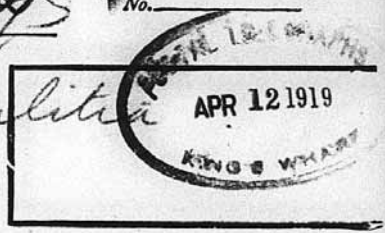
Newtown

12/12

Place from

Paymaster Dept Militia

To



Did you cancel six
pounds to Peter Sainsbury
while ago not received.

#5572.

Paul Sainsbury.
What money

Oct.16,1919

#557a Pte.Peter Sainsbury,
Newtown, B.B.

Dear Sir:-

Please find enclosed Discharged Certificate #3863.

Yours truly,

Major
Paymaster.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5572 Rank Private Name Sainsbury Peter
 Intended place of residence Newtown Bonaville Bay
 2. Occupation Engineer
 Classification of soldier B Medical Category F

3. The above named man is discharged in consequence of

DEMobilIZATION Eligible for War Service Gratuity

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

Place, ST. JOHN'S
 Date 22-9-19
J. A. Snow
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection. SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCOUNTS

Place, ST. JOHN'S
 Date 22-9-19
Peter Sainsbury
 Signature of soldier
J. A. Snow
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place, ST. JOHN'S
 Date 22-9-19
Peter Sainsbury
 Signature of soldier
J. A. Snow
 Signature of witness

30
31
31
30
18
140

STATEMENT OF SERVICE

7. Enlisted for service 1-6-18 No. of days on Military
 Discharged from service 4-10-19 Plus 14 days Service 505

APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S
 Date 4-10-19
J. A. Snow
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place, ST. JOHN'S
 Date October 18/1919
M. Howley
 Officer in Charge of Records
 The Royal Newfoundland Regiment

W. B. 2079 / 2863

June 12, 1919

**Mamie Bungay,
Newtown.**

Dear Sir:

With reference to your telegram of May 19th. I beg to advise you that I have cabled £6 to No. 5592, Peter Sainsbury, made up as follows:

~~£29.20~~ £6 - \$29.20

Cost of message .50

\$29.70

Kindly remit cost of message \$50 to cover cost of message.

Yours truly,

Lieut.
For Paymaster.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 5572 Rank Pl. Name Sainsbury Peter
 Date of Enlistment 1-6-1918 Address New Towers District Bona Vista
 Occupation Engineer Classification for Discharge B Medical Category E
 Recommendation S.M.B. Plum Unit Disability Rating 100% while in Hoop
 + Empire Hoop
 Passed to Demobilization Officer with following documents:—

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

Date 22-9-19

J. A. Snowcroft
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am.....in a position to resume civilian occupation.

Peter Sainsbury

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable..... 60.00
 (b) Clothing Supplied..... *J. A. Snowcroft*

Date 22-9-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. to his home
 at Newtown Bonaville Bay and Release Certificate No. 3856 issued.

Date 22-9-19

J.A. Shewell
 Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection
 therewith settled. He has received pay and allowances to 18-10-19

Date 22-9-19

J.A. Shewell
 Depot Paymaster.

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT

Discharge approved for 4-10-19

Forwarded with following documents to O.C Discharge Depot.

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

Date 22-9-19

J.A. Shewell
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:-
 Officer i/c Records.
 Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date 22-9-19

J.A. Shewell
 O. C. Discharge Depot.

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

Date

Civil Re-establishment Committee



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

To resume former occupation

Peter Sainsbury
Signature of Man.

Reg. No.

5572

J. H. Snowcroft
Signature of the Vocational Officer or his Representative.

Place

Date

St. John's
22 - 9 - 1911



Department of Militia, Newfoundland
Medical Department

Medical Report on an Invalid

NOTES :

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

STATEMENT OF CASE

Station.....**St. John's**.....

Date.....**September 19th, 1919**.....

- | | | | |
|-------------------|---------------------------|-------------------------------|-----------------------------------|
| 1. Unit | <i>Royal Newfoundland</i> | 5. Age last birthday | 20 Years |
| 2. Regimental No. | 5572 | 6. Enlisted on | June 1918. |
| 3. Rank | Private | at | St John's. |
| 4. Name | Sainsbury. | 7. Former trade or occupation | |
| | | 8. Disability | DIPHTHERIA WITH PARALYSIS. |

9. History **IN AUGUST 1918. FELL AT DEPOT DISLOCATING RIGHT ELBOW. HAZLEY DOWN HOSPITAL SIX WEEKS. ON LIGHT DUTY REMEDIAL EXERCISE FEEL TIRED FOR A LONG TIME AFTERWARDS. DEVELOPED DIPHTHERIA MAY 22. VICTORIA HOSPITAL WINCHESTER TWO MONTHS. THEN MAGDALEN WITH PARALYSIS BOTH LEG AND NASAL SPEECH.**

10. What is his present condition ?

**ELBOW CONDITION QUITE STRONG NOW
NO DISABILITY. WALKS WITH
DIFFICULTY STILL.**

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

11. Was sanatorium advised and refused ?
operation

12. Do you recommend discharge as permanently unfit ?

"E"

Signature **J. ST. P. KNIGHT**.....

Rank or Qualification **MAJOR**.....

Remarks if any by Officer i | c Hospital.

Place Signature

Date Rank

Opinion of the Medical Board

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

13. For pension purposes, the disability x be considered as total disability due to
- (a) Service during this war. (b) ~~Civilian~~ (c) ~~Ordinary Military Service~~
Remarks if any :—

14. Does the Board concur in preceding report? (see Sect. 10). If not give differing opinion and additional findings.

STATES THAT WHEN HE WENT ON BOARD SHIP COMING HOME HE HAD TO USE CRUTCHES, BUT CAN NOW WALK WITHOUT THEM. LEGS ARE STILL WEAK AND APT TO FALL WHEN WALKING.. REFLEXES ABOLISHED.

15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market? **TOTAL WHILE IN HOSPITAL.**

- (b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a full livelihood in the general labor market lessened by that portion of his disability to or incurred during service?
(State in percentage.) **100% WHILE IN HOSPITAL.**

Remarks if any :—

16. Is the disability permanent?

17. Has the disability been aggravated by (a) Intemperance (b) Misconduct

18. The refusal of operation sanitorium is:— (a) Reasonable (b) Unreasonable

Remarks if any :—

19. If fit subject for Hospital do you recommend admittance to { **Military (Empire)**
General Hospital
Naval and Military Convalescent Hospital,
Jensen Tuberculosis Camp

20. We recommend discharge from service the Army

Remarks if any :—

..... **SGD. W. S. FRASER**

President

Signatures..... **J. S. TAIT.**

..... **L. PATERSON, MAJOR**

Place **ST. JOHN'S,**

Date **SEPT. 19th, 1919.**

APPROVED

Station **SEP. 19. 1919**

Date

..... **SGD. CLUNY MACPHERSON, LT-COL**

Administrative Medical Officer.



The Royal Newfoundland Regiment

Class for Demobilization:—

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date _____

Regimental No. 5572

Name Sainsbury P. P.

Address Newton B.B.

Present Medical Category E

Recommended for: (a) Immediate discharge _____
(b) Standing Medical Board _____

J. A. Snowcraft
O.C. Discharge Depot.

W. P. Adams
Senior Medical Officer

G. W. Burden
M.O. Depot

It is hereby certified that this soldier's Members of Board
has been before the Standing Medical Board and has been classified as
B for discharge on demobilization.

19-9-19

J. A. Snowcraft
Captain



Descriptive Return of a Soldier Discharged on Account of Disability

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

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

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

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

Name in full

Peter Sainsbury

Regiment from which discharged

Royal Newfoundland

Regimental number

5572

Intended address

New Town B.B.

Height on discharge

5 Feet 4.

Color of hair on discharge

Dark brown

Complexion

Fair

Color of eyes

Brown

Descriptive Marks

Short

Figure on discharge

—

Christian name of Father

—

Christian name of Mother

—

Wife's maiden name in full

—

Date and place of marriage

—

Christian names of children

—

Place and date of soldier's birth

New Town. 14-5-1898

Nature and locality of civil employment required

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full)

Peter Sainsbury

HC

(Rank)

Station *ST. JOHN'S.*

Date

19-9-19

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



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

Station

Date

Oct. 23, 1919

#5572 Pte. Peter Sainsbury,
Newtown, B.B.

Dear Sir:-

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

Yours truly

Major
Paymaster.

18th

DEPARTMENT OF MILITIA.

WAR SERVICE GRANT.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th, 1919.

A complete reply must be given to every provision in this Declaration there must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C

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

Christian name *J. A. Dunsbury* *Peter* *5572*

3. Rank *Plt* 4. Regt. No. *5572*

5. Address in full to which future payments of gratuity are to be forwarded *Newtown, B.B.*

6. Date of enlistment in the Regiment *June 1/18*

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

8. Relationship of such dependents.....

9. Address in full of such dependents.....

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

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

12. Give total length of time which you served on active service whether in Nfld. or Overseas..... *From June 1/18*

To Oct 4/19 1.

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

..... *No*

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

..... *No*

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

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

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

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

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

19. Are you now serving in the Regt.? If not give:- (a) date of discharge. *Oct. 4/19* (b) Reason for discharge.

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.

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.

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.

Peter Sainburg

Signature of Applicant:

Place of Residence:

Declared before me at:

This

22nd

day of

*Newtown, B. B.
R. Johns, wife.*

19*19*

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

POST DISCHARGE PAY.

Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	Net amount due
.....
.....
.....

Certified correct.

Paymaster

Sept. 22, 1919

The O.C.,
Depot.

Sir:

Re #5572, Peter Sainsbury

The above mentioned man has made application to cancel his allotment of 50¢ (Fifty cents.) per day, from and including August 31st, 1919.

For your information, please.

5572 Pte Peter Sainsbury

Major
Paymaster.

Paymaster.

Sir.

Please pay 1951. E. Brodnick.
The sum of \$25. the same to be
deducted from my War Service Gratuity
5572 Pte Peter Dainsbury

January 24th 1920

Major Howley
O. I. C. Records

Please pay to Peter Sainsbury, 5572
the sum of two dollars and sixty six cents
in payment of allowan ce for two days to date
and charge same to Civil Re-establishment Committee

\$2.66

Pension \$20.00

ACCOUNT	2703
AM. NO.	
INCL. LEDGER	INITIALS
PAY LEDGER	INITIALS
OPEN LEDGER	INITIALS

[Handwritten signature]
Peter Sainsbury

Vocational Officer

5572 Peter Sainsbury.

Balance \$45 ⁰⁰/₁₀₀

G. B. Hefferton /

Spent
for PM

~~17/1/20~~

~~Please settle up~~

17/1/20

Feb 28th 1920

Major Howley
O. I. C. Records

Please pay to P. Sainsbury, 5572
the sum of four dollars and sixty six cents
in payment of arrears of allowance for week ended this date
and charge same to Civil Re-estab lishment Committee

\$4.66

Pension Nil

J.B.S.

30852

Vocational Officer

Peter Sainsbury

March 13th 1920

Major Howley
O. I. C. Records

Please pay to P. Sainsbury, 5572
the sum of nine dollars and thirty four cents
in payment of allowance for two weeks to date
and charge same to Civil Re-establishment Committee

\$9.34

Pension Nil

C. H. H.

W. H. Beckell,

Vocational Officer

ACCOUNT	
CK. NO.	32620
INL. LEDGER	
PAY LEDGER	

For

[Signature]

Peter Sainsbury

April 19th 1920

Major Howley
O. I. C. Records

Please pay to P. Sainsbury, 5572
the sum of sixty dollars
in payment of P. & A. Bonus
and charge same to Civil Re-establishment Committee

\$60.00

Pension Nil

ACCOUNT	
CX NO.	35278
INITIALS	<i>CS</i>
IN. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN LEDGER	INITIALS

P. S.

Peter Sainsbury
W. McNeill

Vocational Officer

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 25⁰⁰

Nov 13th 1917

Received from the First Newfoundland Regiment
the sum of Twenty Five Dollars.
on account of Pay. W.S.H
balance

Ch. No. 19582	Initials. <u>W.S.H</u>
Pay Ledger 358	Initials. <u>W.S.H</u>
Gen. Ledger.....	Initials.....

W.S.H & Brodnick
Regtl. No. Rank

No. 5572

Rank. Pte

Name Peter Sainsbury

per E. Brodnick

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 12 $\frac{32}{100}$

Oct 25 1919

Received from the First Newfoundland Regiment
the sum of Twelve $\frac{32}{100}$ Dollars.
~~on account~~ of Pay.
balance

Peter Sainsbury

Ch. No. 16555	Initials. E.S.
Pay Ledger 358	Initials. W.R.
Gen. Ledger.....	Initials.....

Regtl. No.

A. C. G.
Rank

No. 5592

Rank

Pt

Name

P. Larnsbury

DEPARTMENT OF MILITIA.

REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 45 ⁰⁰

Jan 17, 1919

Received from the First Newfoundland Regiment
the sum of Forty Five Dollars.
on account of Pay. ~~R. R. W. S. Y.~~ P
balance Sainsbury

Ch. No. <u>26497</u>	Initials <u>EW</u>
Pay Ledger <u>358/4</u>	Initials <u>EW</u>
Gen. Ledger	Initials

Regtl. No. C. J. J. B. Rank

No. 5572 ~~✱~~ Rank ~~R. A.~~ Pte

Name Peter Sainsbury

3541

5572
Newtown.

Dec 14 / 18

H M Maddock Esq
Pay Master
Military Department
St Johns

Dear Sir,

I wired you on Dec 8th
on account of receiving a
telegram from ^{my son} him for the
sum of 6 pounds

I had but one 15 dollars
come of my sons money
since he left St Johns the
first part of July

I received that in October
where is his money too

Other people sons who left
with him have received
their money every month
regularly why couldnt
my other months pay come

as well as that one, or as well
as other people
If you havent wired my
son the sum asked for
kindly send me an expla-
nation why you kept
three months pay back from
me.

If you are keeping the money
in the department as I dont
know where else it can
be kindly forward it
to me & I wont ask you
to wire any to my son

If I get no explanation
to this I will try other
authorities to know if
they can find out yours truly
Paul Sainsbury



NEWFOUNDLAND POSTAL TELEGRAPHS.

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. 71 Sent by WS Rec'd by _____ Check 9 No. _____

Place from St. John's
To Man. Militia



please cable 5572
Peter Sainsbury
Hazelby Camp Winchester
thirty dollars.

Paul Sainsbury

*Remit 30 lbs to cable
to Peter Sainsbury*

Dec. 6. 18

Mr. Paul Sainsbury,
NEWTOWN, B.B.

Dear Sir:

With reference to your telegram
of December 3rd., please remit \$20.63 to cover
cost of cable for \$30.00 to Pte. Peter Sainsbur

Yours truly,

Lieut.
For Paymaster

5572

April 15, 1919

Mr. Paul Sainsbury,
Newtown, B.R.

Dear Sir:

With reference to your telegram of April 12th, will you kindly inform me what date the money was remitted for cable transfer to Peter Sainsbury, on receipt of this information I will look up further particulars and inform you.

Yours truly,

Lieut.
For Paymaster

Newtown

5572

April 9 / 19

Pay Master
Militia Dept
St Johns

Dear Sir

In future please make my Monthly allotment
of Pte Peter Sainsbury Jayale to Miss Mamie
Bungay Newtown B Bay instead of me
yours truly

Paul Sainsbury
Newtown

Noted
[Signature]



Department of Militia, Newfoundland
 Medical Department

Medical Report on an Invalid

NOTES :

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

STATEMENT OF CASE

Station..... *St John.*
 Date..... *Sept 15.*

- 1. Unit *Royal Newfoundland*
- 2. Regimental No. *5572.*
- 3. Rank *Pte.*
- 4. Name *STAINBURY*
- 5. Age last birthday *21 yrs.*
- 6. Enlisted on *June. 1914*
- 7. Former trade or occupation *at S. 60th.*

8. Disability

Injury, Elbow joint
Diphtheria - with PARALYSIS.
with paralysis.

9. History *In August 1914 fell at depot despatch Rhs*
Elbow - REMEDIAL Surgery Done - Striptoe breaks. in left delt
and remedial exercise for leg two afterwards.
Depeloped Diphtheria May 22 - Nicholas Street Winchester
two months - then Madalen paralysed with paralysed both legs +
hoarse speech.

10. What is his present condition ?

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

*Elbow condition quite strong now
no disability
Walks with difficulty - steel.*

11. Was sanatorium advised and refused ?
operation

12. Do you recommend discharge as permanently unfit ?

F

Signature

Rank or Qualification

[Handwritten signature]
.....
[Handwritten rank/qualification]
.....

Remarks if any by Officer in Charge Hospital.

Place

Signature

Date

Rank

.....
.....
.....
.....

Opinion of the Medical Board

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

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

14. Does the Board concur in preceding report? (see Sect. 10). If not give differing opinion and additional findings.
States that when he went on board ship coming home he had to use crutches but can now walk without them. Legs are still weak & apt to fall when walking. Reflexes abolished

15. (a) THE ENTIRE DISABILITY—To what extent is his capacity lessened at present for earning a full livelihood in the general labor market? *Total while in hospital*
(b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a full livelihood in the general labor market lessened by that portion of his disability to or incurred during service? *100% while in hospital*
(State in percentage.)
Remarks if any:—

16. Is the disability permanent?
17. Has the disability been aggravated by (a) Intemperance (b) Misconduct

18. The refusal of operation sanatorium is:— (a) Reasonable (b) Unreasonable
Remarks if any:—

19. If fit subject for Hospital do you recommend admittance to Hickton Hospital (Super) Yes
~~Naval and Military Convalescent Hospital,~~
~~Jensen Tuberculosis Camp.~~

20. We recommend discharge from ~~retention in~~ the Army
Remarks if any:—

H. G. Case
.....
President
Signatures *J. J. ...*
.....
H. ...
.....

Place *St. Johns*
Date *Sept 19, 19*

APPROVED
Station
Date


Chas. Stephenson
.....
Administrative Medical Officer. *Chas. S.*

The Royal Newfoundland Regiment

D 5572

DEMobilIZATION OF
 Reg. No. 5572 Rank Plc. Name Sainsbury Peter.
 Date of Enlistment 1-6-1918 Address New Town District Bonaville
 Occupation Engineer Classification for Discharge B Medical Category E
 Recommendation S.M.B. then Capt & Empire Hoop Disability Rating 100% while in Hoop
 Passed to Demobilization Officer with following documents:—

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

Date 22-9-19 J.A. Snowcraft
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am.....in a position to resume civilian occupation.

Peter Sainsbury

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable. £ 60.00

(b) Clothing Supplied J.A. Snowcraft

Date 22-9-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. to his home
 at Newtown Bonmahon Port and Release Certificate No. 3856 issued.

Date 22-9-19

J.P. Saweef
 Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection
 therewith settled. He has received pay and allowances to 18-10-19

Date 22-9-19

J.P. Saweef
 Depot Paymaster.

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT.

Discharge approved for 4-10-19

Forwarded with following documents to O.C Discharge Depot.

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

Date 22-9-19

J.P. Saweef
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer i/c Records,
 Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date 22-9-19

J.P. Saweef
 O. C. Discharge Depot.

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

Date Sept 30 19

[Signature]