



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4278 Name Wm. J. Shaw Corps R/L

Questions to be put to the Recruit before Enlistment.

- | | |
|--|---------------------------------------|
| 1. What is your name? | 1. |
| 2. What is your full Address? | 2. |
| 3. Are you a British Subject? | 3. |
| 4. What is your age? | 4. Years Months |
| 5. What is your Trade or Calling? | 5. |
| 6. Are you Married? | 6. |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. |
| 9. Are you willing to be enlisted for General Service? | 9. |
| 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, Wm. J. Shaw 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.

Wm. J. Shaw SIGNATURE OF RECRUIT.

11 29/12/15

..... Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at..... on this..... day of..... 191.....

Signature of Attesting Officer Wm. J. Shaw

†CERTIFICATE OF APPROVING OFFICER.

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

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

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

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

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



FIRST NEWFOUNDLAND REGIMENT 4298

ATTESTATION OF

No. 4298 Name Wm J. Shaw Corps Rfc.

Questions to be put to the Recruit before Enlistment.

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>Wm J. Shaw</u> |
| 2. What is your full Address? | 2. <u>South West's Lane</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>23</u> Years <u>9</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Lithographer</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... | 10. { Name |
| | { Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>Yes</u> |

I Wm J. Shaw 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.

William J. Shaw SIGNATURE OF RECRUIT.

R. Bennett L.C. Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

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

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 29 day of Dec 1917.

Signature of Attesting Officer W. H. Stanley

†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 Regt Rfc.

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

Date Dec 29 1917

Place St. John's } 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 Wm. J. Shaw
 Apparent age 23 years 9 months. Height 5 feet 6 inches
 Chest Measurement { Girth when fully expanded 36 inches
 Range of expansion 4 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin John Shaw,
Little Heart's Ease | 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 limit of engagement reckons from <u>29-12-17</u>									<u>Leves Col. 16 '19</u>
Joined at <u>St. John's</u> on <u>December 29, 1917</u>									
Discharged July 7, 1919									
<u>Embarked St. John N.S. Transit to Halifax N.S. 29 '18. Embarked for 156 B. 2 '18. 20 disembarked France 5-17-18. Sailed 6th Regt. Royal Rifles 9-2-19. Transferred to 5th 8-3-19. Sailed to St. Andrew's Hospital South West London 10-3-19. Transferred to 3rd L. 9. WWandsworth 17 '19. Sailed to Winchester 17-11-19. 1st Lt. for disembarked 22-5-19. Arrived 1 '19.</u>									
<u>Disembarked St. John's 7-7-19</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 7-7-19 (date of discharge) 1 years 192 days

Reg. No. 4978 Rank Pvt. Name Shaw, Wm
Attested 30/12/17 Address Little Heath Lane 113
Allotment _____ Allottee _____
Date of Allotment _____ Returned from Overseas _____
Embarked for Overseas _____ Cause _____

2/1/18

Vac.
Leave 14¹/₈ to 28¹/₈

C.R. 4278

Extract from Daily Orders Part 11 Unit The Royal
Rifles Regt. St. John's, July 10th, 1919.

The discharge of the undernoted on demobilization has been
CONFIRMED by Officer I-c Records from 7-7-19.

4278 L/Cpl. Wm. Shaw.

C.R. 4278

Extract from Daily Orders Part II Royal Newfoundland Regiment.
Depot St. John's June 18th 1919.

The discharge of the undernoted on demobilisation has been
APPROVED by C.O. Discharge Depot with effect from 25/6/19.

4278 L/C. W. Shaw.

GR 4278

Extract from Daily Orders Part 11 Depot, St. Johns,

Date

12-5-19

4278 L/Cpl. Wm. Shaw

Reported at Headquarters 1-6-19.
which sailed Liverpool May 22/1919.

ex "Corsican"

C.R. 4278

Extract from Casualties received from Pay & Record Office.

April 7th., 1919

4278

4287 L. Cpl. W. Shaw was discharged from the 3rd. London G. Hospital on 5/4/19 and granted furlough to 14/4/19. He is marked fit for I. Duty.

C.R. 4278

Extract from Daily Orders Part 11 Unit The Royal WFLA.

Regt. "In the Field" 31-3-19.

4278 L/Cpl. W.J. Shaw

Invalided to U.K. 8-3-19 Sick.

C.R. 4278

March 31st, 1919

Mr. John Shaw

Little Heart's Ease

Dear Sir:-

I beg to inform you that additional information has to-day been received from the Visiting Committee of the Newfoundland War Contingent Association concerning the condition of No. 4278, Private W.J. Shaw, to the effect that he is now progressing favourably.

Yours faithfully,

Lieut. Col.,

Chief Staff Officer.

C.R. 4278

Extract from Casualties received from Pay & Record Office,
London dated 19th. March 1919.

The undermentioned, ~~XXXXXXXX~~ was transferred from the 2nd.
to the 3rd. London General Hospital on 17/3/19.

4278 L/C. W. Shaw.

C.R. 4278

Extract fro, Daily Orders part II, Depot Winchester by Lieut.
Col. B.J. BARTON, D.S.O., Officer Commanding 2nd., Battalion.
dated 14-4-19.

The following having reported back from the 1st Battalion is
taken on the strength of the and posted to "H" Co from 12-4-19.

#4278 L/C. W. Shaw.

C.R. 4278

Extract of telegram from Syn., London,
to Military.

March 15th/19.

INFLUENZA.

#4278 L/Cpl. Shaw.

NEWFOUNDLAND POSTAL TELEGRAPHS.

C.R. 4278
Counter No. 8



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

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

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

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

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

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

(NOT TRANSMITTED)

Signature of Sender _____

Address **Dept of Militia.**

Line Number	Recd	By	Sent	by	Check

Dated

Mar 15th, 1919

To

John Shaw, Little Heart's Ease

Regret to inform you that Record Office, London,

officially reports

No. 4278, L/Cpt. William

J. Shaw now at St. Andrews Hospital, London suffering from influenza

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

J.R. Bennett

Chge Dept of Militia

Minister of Militia.

FOR TYPEWRITER

NEWFOUNDLAND POSTAL TELEGRAPHS.



C.R. 4278

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(NOT TRANSMITTED)

Signature of Sender _____

Address _____

Line Number _____	Red _____	By _____	Sent _____	by _____	Check _____

Dated

March 15th 1919

To

John Shaw Little Heart's Ease

beg ~~request~~ to inform you that Record Office, London,
officially reports No. 4278, L/Cpl. William Shaw
at 6th General Hospital Rouen March 8th removed from
seriously ill list

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

J.R. Bennett

Chge Dept of Militia

Minister of Militia.

FOR TYPEWRITER

C.R. 4278

Extract from Casualties received from Pay & Record
Office, London, Mar. 10th, 1919.

O.C. 6th General Hospital, Rouen, reports 8-3-19 the
undermentioned is no longer SERIOUSLY ILL.

4278 L/C. Shaw, W.

CR 4278

Extract of Telegram from Syn., London, to Military
dated Mar. 10th/19.

16th General Hospital B.E.F. March 8th removed from
seriously ill list

4278 L/Cpl. Shaw.

CR. 4278

Extract from War Office List No. H. A. 17683

Admitted St. Andrews Hos. Dollis Hill, London N.W.
10th. March 1919.

#4278 I/C. W. Shaw.

Confidential.

Counter No. _____
NEWFOUNDLAND POSTAL TELEGRAPHS.



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

(NOT TRANSMITTED)

Signature of Sender _____ Address _____ Dept of Militia.

Line Number	Rcd	By	Sent	by	Check
-------------	-----	----	------	----	-------

Dated

Mar 6th, 1919

To

John Shaw, Little Heart's Base

Regret to inform you that Record Office, London,
officially reports No. 4278, L/Cpl William Shaw
at 6th General Hospital Reuen France xx Feb 24th seriously
ill no change

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

J.R. Bennett

Chge De t of Militia.

Minister of Militia.

FOR TYPEWRITER

C.R. 4278

Extract from Telegram from Synoptical to Mil. dated Mar.5/1919.

6th., General Hospital, Rouen, Feby. 24th, m seriously ill

No change 4278 Shaw.

C.R. 4278

March 4th., 1919.

Mrs. William Morris,


Grated Cove,

Dear Madam:-

I beg to inform you that we have received a reply from our Pay and Records Office, London regarding the condition of your brother 4278 L/C. Wm. J. Shaw, which states that he is still, I regret to say seriously ill.

Any further information that we get regarding him will at once be communicated to you.

Yours faithfully,



Lt ut.

Casualty Officer.

C.R. 4278

Extract from Casualties...List No. H.W.2931.

4278 L/C. W. Shaw.

Br. Pneumonia O.C. 6 Gen. Hosp. Rouen, reports Seriously
ill improving W/E Mar.3,1919.

C.R. 1278
4

Extract from telegram received from Synoptical
London, Mar.3rd,1919.

In answer to your telegram Feby.28th.

3278 Shaw.
4

Seriously ill Feby.20th.

C.R. 4278

Extract from telegram from Syn. to Mil. dated Feb. ²⁸ 9th., 1919.

Inform condition of 4278 Shaw.

C.R. 4278

Extract of War Office List No. H.A. 35116 from
Pay & Record Office, London, dated Feb. 28th/19.

ADMITTED TO 6 GENERAL HOSPITAL ROUEN FEB. 19th/19.

INFLUENZA SEVERE.

#4278 L/C. W. Shaw.

C.R. 4278

Feb. 26th 19

Mrs. Wm. Norris,
Grates Cove, T.B.

Dear Madam:

I am directed by the Minister of Militia to acknowledge receipt of your telegram of February 26th regarding the condition of your brother No 4278 L/C Wm. J. Shaw, and in reply I beg to state that we have forwarded your enquiry on to our Pay & Record Office, London, and upon receipt of an answer we will immediately communicate with you.

Yours faithfully,

Lieut.

WWW/MF.

Casualty Officer.

C.R. 4278

NEWFOUNDLAND POSTAL TELEGRAPHS.



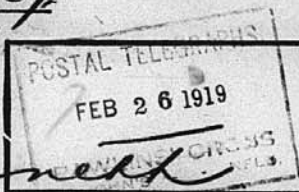
CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Li'se No. 22 Sent by Ma Rec'd by No Check 167 No. _____

Place from _____

To _____

Norton J R Bennett



Can you please advise me
how my Brother lance
Corpl William J Shaw
is reply collect

Wm William Norris

(4278)

C.R. 4278

Extract from War Office L.O. No. H. H., 2912.

Seriously
~~IMPROVED~~ ~~DANGEROUS~~ ILL (no change) in 6th, Men. H. Rouen
W/M 24th., Feb. 1919.

W/E

4278 W
\$ #4579 B/C. F. Shaw.

PNEUMONIA.

Counter No. _____

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

C.R. 4278

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

(NOT TRANSMITTED)

Signature of Sender _____ Address Dept of Militia.

Line Number	Rcd	By	Sent	by	Check

Dated **Feb'y. 22nd, 1919**
To **John Shaw, Little Heart's Ease**

Regret to inform you that Record Office, London,
officially reports **No. 4278, L/Cpl. William J. Shaw**
at 6th General Hospital Rousen Feb'y. 20th suffering from
pneumonia seriously ill.

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

J.R. Bennett
Minister of Militia.
Chge Dept of Militia.

FOR TYPEWRITER

C.R. 4278

Extract of DAILY ORDERS PART II ROYAL NEWFOUNDLAND REGIMENT
IN FRANCE DATED 31/1/19.

APPOINTED L/Cpl.

#4278 Pte. W. Shaw.

16/1/19.

C.R. 4278

Extract from Daily Telegram despatched to Synoptical, London,
dated June 5th, 1918

Pay to as follows:-

#4278 Pte. Shaw,

£5.

C.R. 4278

Extract of Nominal Roll to B. F. F. embarked
Folkestone. 2-7-18

#4278 Pte. W. J. Shaw.

C.R. 4278

Extract from Criminal Bill Book "H" Company numbered
T. S. Nicolai, Jan. 19th, 1913.

4278 Pte. Shaw W.

CP 4278

Extract of Daily Orders part 11, from Unit 4/1st
Royal Newfoundland Regiment, Headquarters,
dated December 31, 1917.

#4278 Pte. Wm. Shaw.

Attested for General Service with the 1st
Newfoundland Regiment with effect from
December 30, 1917.

W. J. Shaw.

4278.

P. + P. G.

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.

In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

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

1. Unit and Corps. *Royal Newfoundland* 7. Former Trade or Occupation } *Isolomas*
2. Regtl. No. *4278* 3. Rank. *1st Lt. Col.* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Shaw W.* (Surname) *(Christian Names)* (a) Former Regts. or Corps; with Regtl. Nos.
5. Age last birthday. *24*
6. Posted for duty on..... at..... in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—
(a) When (d) Particulars of Pension or Gratuity (if any)
(b) Where
(c) Opinion of Court

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."

11. Date of origin of disability. *nil*
12. Place of origin of disability. *nil*
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. *nil*

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | ✓ | |
| (ii.) Previous active service | ✓ | |
| (iii.) Climate in pre-war service | ✓ | |
| (iv.) Ordinary military service before the war | ✓ | |
| (v.) Serious negligence or misconduct on the man's part. } | ✓ | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it ? }

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

15. What is his present condition ?

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

No Complaints of 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

Station *Hazley Down*

Date *26/4/19*

W. E. Proctor *Cap RMC*

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

8th London General
Hospital
Woodsditch SW18

RECEIVED
21 MAR 1919
HOSPITAL

NEWFOUNDLAND CONTINGENT
OFFICE
LONDON, S.W.
31-3-19
58 VICTORIA ST
LONDON, S.W.

To Paymaster
Royal. Infld. Regt
58 Victoria Street
Sir

Please pay to me the
Sum of one Pound
and charge the same
to my account

4278 Tom Shaw
Royal. Infld. Regt

Approved

OK WDE

Witness Cash Receipt 1880

31/3/19

To London Gen. Hosp
Wandsworth S.W. 18.

19/3/19. -

To paymaster

Royal. N. F. L. D Regt

Dir please pay to me
sum of ~~1~~ pounds and
charges of the same to my
account -

L/Cpl. Wm. Shaw
4278.

19/3/19
R. 1728

Royal. N. F. L. D Regt



On found approved
Fitzmas C/o
19 3 19

047538



No. 9183/838

NEWFOUNDLAND CONTINGENT

N.F.P. / 179.

From

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

To

Officer Commanding,
2/Bn Royal Newfoundland Regt.
Winchester.

Subject: 7th June 1918

June 14th 1918

Subject: 4278, Pte. W. J. Shaw

With reference to the following telegram (5081) from the Hon. Minister of Militia, received

Receipt hereunder:

Stamp

LIEUT. COLONEL

COMMANDING 2ND BN ROYAL NEWFOUNDLAND REGT.
1st Newfoundland Regiment

Pay to 4278 Shaw £5:0:0

Draft £ 5:0:0 is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

Received the sum of Five

Pounds on account of

cable remittance from Newfoundland.

[Signature]
Chief Paymaster & O. i/c Records.

W. J. Shaw

No. 4278 Rank Private

7
TO, - The Chief Quartermaster,
Royal Newfoundland Regiment,
58 Victoria Street,
London, S.W.

Sir:-

Please charge the amounts set opposite my name to my account and pay it to the N.F.C.A. "Prisoners of War Fund" in quarterly instalments for the period of one year.

Commencing on the 1st July 1918.

Regtl. No.	Rank	Name	Amount	Signature
4278	Pte	Shaw W.	\$2 ⁵⁰ / ₁₀₀	

I have the honour to be, Sir,
~~Yours obedient servant,~~
Your obedient servant.

Date

28-6-18

W. Shaw

No. 4764/49

N.F.P./80.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding,
3rd London General Hospital,
No. Wandsworth, S.W.

27 MAR 1919

26th March 1919

27/3/1919

4278 Pte. Shaw W.E.

With reference to the following telegram from the Minister of Militia, / / (98)

"Pay to 4278 Shaw

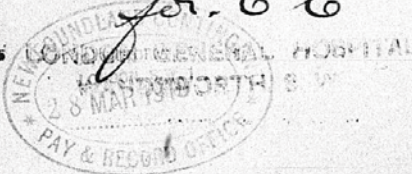
£8. 0. 0.

- Kindly advise whether this remittance should be
- (1) forwarded to you for payment to this Soldier;
 - (2) retained to credit of his account; or
 - (3) otherwise dealt with.

A.D. Murray
Chief Paymaster & O. i/c Records

Kindly place this remittance to the credit of 4278. Pte. Shaw a/c please

Morgan
for 66



3rd London General Hospital
Mar 21st 1919.

To Paymaster.

Royal A.F.L.D. Regt.
Sir

Please pay to me the
sum of Two Pounds.
to me & debit my account
accordingly I oblige

The Cpl W. Shaw.

4278 Ryl A.F.L.D. Regt.

3rd LONDON GENERAL HOSPITAL
No. _____
21 MAR 1919

As found approved

William C. P.
21/3/19

21/3/19
Receipt 1720
L & A

ES. 22/8/19

To Chief Pay. Master
royal Newfoundland
records. Please remit

To No. 4278

He

The sum of three pounds
on Account of Army
Balance may be
due to me



No 4278. un Shew

Two pounds



£2 Appnd
L & a

22/3/19
R. 1787

Shaw, D^{cu}

4278

Ag Sept.

July 8, 1919

#4278 L/C. William Shaw,

Little Hearts Base, T.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 the War
Service Gratuity.

Yours truly

Captain
Paymaster & O.i/c Records.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

A complete reply must be given to every question in this Declaration There must be no blanks and no dashes. If any 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, *William Shaw* 2. Surname.....

3. Rank, *Rep.* 4. Regtl. No. *4278*

5. Address in full to which future payments of gratuity are to be forwarded, *Hettle Street, East, S. B.*

6. Date of enlistment in the Regiment, *Dec 27/17*

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, *Oversea*

12. Give total length of time which you served on active service, whether in Nfld. or Overseas, *From Dec. 27/17*

to June 9/19 1.2

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?..... *No*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled..... *No*

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?..... *No*

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

19. Are you now serving in the Regt.?..... *No* If not give? - (a) Date

of discharge..... *June 9/19* (b) Reason for discharge..... *Temporary Demobilization*

20. Did you at any time serve at the front in an actual theatre of

War? If so give particulars of places, and dates of such service.... *France, Belgium + Germany - From June 1/18 to June 9/19 - Ypres*

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee..... *No*

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under Oath.

W Shaw

Signature of Applicant:

Place of Residence:

Little Heath Lane, P.B.

Declared before me at:

H. Johnis, Nfld

This

9th

day of

June

19*19*....

John McCarthy

Signature of Barrister of the
Supreme Court, Stipendiary Magistrate,
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

July 7, 1919

#4278 L/C. William Shaw,

Little Hearts Base, T.B.

Dear Sir:-

Please find enclosed Discharge Certificate
No. 2711.

Yours truly

Captain
Raymaster & O.i/c Records.

The Royal Nfld. Regiment

DEMOBILIZATION

No. 4278 Rank _____

Name Shaw W _____

Warned for demobilization on

JUN 9 1919

The Royal Newfoundland Regiment

Class for Demobilization:

E.

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *7.6.19*

Regimental No. *4278*

Name *Stann*

Address *Little Heath Lane*

Present Medical Category *A.1*

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

Members of Board

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

B. Robinson
Senior Medical Officer

W. Burden
M. O. Depot

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 64278 Rank Pfc Name Shaw WJ
 Date of Enlistment 29-12-17 Address St. John's District Trinity
 Occupation Bookman Classification for Discharge F Medical Category A/D
 Recommendation S.M.B. _____ Disability Rating _____

Passed to Demobilization Officer with following documents:—

N.F. P136	B 268	B 121	N.F. Med.	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 7-6-19

O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

W J Shaw

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.....

O i/c. Re-clothing.

Date... 9-6-19

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R.17159063 to his home at Hearts Case and Release Certificate No. 2533 issued.

Date 9-6-19

J.A. Snow Capt
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 7-7-19

Date 9-6-19

J.H. Mansfield
Depot Paymaster.

Discharge approved for.....

23-6-19

Forwarded with following documents to O.C Discharge Depot.

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

Form B

Date 9-6-19

J.A. Snow Capt
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 JUN. 23. 1919

R.H. Sait Capt.

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

To Shaw

Signature of Man.

J. J. Snow Capt.

Signature of the Vocational Officer or his Representative.

Reg. No. 4278

Place

St. Johns

Date

JUN 9 1919

191

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

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

1. Unit and Corps. *Royal New Jersey* 7. Former Trade or Occupation } *Fisherman*
2. Regtl. No. *4278* 8. Rank. *Private* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Shaw* (Surname) *W.* (Christian Names) (a) Former Regts. or Corps; with Regtl. Nos.
5. Age last birthday. *24*
6. Posted for duty on at in category (or grade)
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty ? (b) Date of Discharge ;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When (d) Particulars of Pension or Gratuity (if any)
(b) Where
(c) Opinion of Court

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."

11. Date of origin of disability. *nil*

12. Place of origin of disability. *nil*

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. *nil*

14. State whether the disabilities are

(a) attributable to

(b) aggravated by

(i.) Service during the present war

(ii.) Previous active service.. .. .

(iii.) Climate in pre-war service

(iv.) Ordinary military service before the war

(v.) Serious negligence or misconduct on the man's part. }

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

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &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.)

He complains of 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 ?

Repatriation

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.

W. Prosser
Medical Officer in charge of case.

Station *Hazeley Bourne*

Date *16-11-19*

* 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

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

MEDICAL HISTORY

OF

Surname Chaw

Christian Name Wesley

Table I.—GENERAL, TABLE.

Birthplace:—Parish St. John's, Nfld. County St. John's, Nfld.

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	at	on	at
Examined	29 th day of Dec 1917	St. John's		
Declared Age	23 years	9 Nov	years	days
Trade or Occupation	Fisherman			
Height	5 feet	6 inches	feet	inches
Weight		136 lbs.		lbs.
Chest Measurement	Girth when fully expanded	36 inches		inches
	Range of Expansion	4 inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	/	/		
When Vaccinated				
Vision	R.E.—V=	6/10	R.E.—V=	
	L.E.—V=	10	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>Lambert Paterson</u>			
(Rank)	Major			
	Medical Officer.		Medical Officer.	
Enlisted	at	St. John's Nfld	at	
	on	29 th day of Dec 1917	on	day of 191
Joined on Enlistment	Corps.	Royal Nfld.	Corps.	
	Regtl. No.	Regt. 4278	Regtl. No.	
Transferred to	ROYAL NEWFOUNDLAND REGIMENT.			
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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing syphilis, admission of treat
	Day	Month	Year	Day	Month	Year			
St. Andrew's Hospital, Dollis Hill, London, N.W.	3	79	17	3	19		Influenza	8.	

List in case of Warrant Officers treated in quarters.

On the cause, nature or treatment of the case likely to be of interest or of future use. In case of re-admissions to hospital will be shown. The subsequent progress, including particulars of admission out of hospital, transfers, etc., will be given in the special syphilis case sheet.

Signature of Medical Officer

Manu... 7 Dec 20



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 *Wm. Shaw*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4276*

Intended address *Little Hearts Lane*

Height on discharge *5* Feet *4"*

Color of hair on discharge *light brown*

Complexion *dusky*

Color of eyes *blue*

Descriptive Marks *—*

Figure on discharge *medium*

Christian name of Father *John*

Christian name of Mother *Ellen*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Little Hearts Lane 1896 24. March*

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)

Wm. Shaw
6.6.19.

(Rank) *Private*

Station **ST. JOHN'S.**

Date

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

Station

Date



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. *Hotel Newfoundland*
2. Regtl. No. *H278* 3. Rank. *Cpl*
4. Name *Shaw* *William*
(Surname) (Christian Names)
5. Age last birthday. *24*
6. Posted for duty on. *29-12-19* at *St. Johns*
in category (or grade).....
7. Former Trade or Occupation } *Fisherman*
- 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 ? (b) Date of Discharge ;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When (d) Particulars of Pension or Gratuity (if any)
(b) Where
(c) Opinion of Court

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."

11. Date of origin of disability. *Nil*

12. Place of origin of disability. *Nil*

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. *Nil*

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war | <i>na</i> | |
| (ii.) Previous active service | <i>na</i> | |
| (iii.) Climate in pre-war service | <i>na</i> | |
| (iv.) Ordinary military service before the war | <i>na</i> | |
| (v.) Serious negligence or misconduct on the man's part. } | <i>na</i> | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it ? } *na*

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

15. What is his present condition ?

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

The Complaint of no disability

16. Was an operation performed ? If so, when and what was its nature ? *na*
17. If not, was an operation advised and declined ? *na*
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 ? *na*
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 ? *na*

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

Station *H. D. Camp*

W. F. Proemied *Capt A. A. M. C.*
Medical Officer in charge of case.

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.

OPINION OF THE MEDICAL BOARD.

NOTES.—(1) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

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

(ii.) *The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

21. Give diagnosis and particulars of :—

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

22. State whether the disabilities are :—

- (i) Service during the present war
 - (ii) Previous active service
 - (iii) Climate in pre-war service
 - (iv) Ordinary military service before the war
 - (v.) Serious negligence or misconduct on the part of the soldier
- Give details :

(a) Attributable to

(b) Aggravated by

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

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

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

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

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

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

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

Opinion of Military Member in case of disagreement.

OR

- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

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

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

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

29. Does the soldier require :—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures :—

Station *Hayles D.B. Camp* { President or Chairman.
Date *14-5-19* } Members.

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

Station
Date Officer in charge, Central Hospital.

Only applicable in cases of Patients in Hospitals.

OR

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

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

Station
Date O.C. Discharge Centre.

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. Regtl. No. *4278* 3. Rank... *Lt Col.*
4. Name *Shaw, William.*
(Surname) (Christian Names)
5. Age last birthday... *24*
6. Posted for duty on *29-12-18* at *S. John's*
in category (or grade).....
7. Former Trade or Occupation } *Fisher*
- 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."

11. Date of origin of disability.
12. Place of origin of disability.
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.

nil
nil
nil
nil

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war
 - (ii.) Previous active service.. .. .
 - (iii.) Climate in pre-war service
 - (iv.) Ordinary military service before the war
 - (v.) Serious negligence or misconduct on the man's part. }
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } na.

} na.

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.)

He complains of no disability

16. Was an operation performed? If so, when and what was its nature? na.
17. If not, was an operation advised and declined? na.
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? na.
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? na.

Repatriation

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.

W.R. Proctor. Capt R.A.M.C.
 Medical Officer in charge of case.

Station Leeds Camp
 Date 14-5-19

* 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

OPINION OF THE MEDICAL BOARD.

NOTES.—(i) Clear and definite answers are to be filled in by the Board, as, in the event of a man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

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

(ii.) *The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases in pre-war service. (3) Ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.*

21. Give diagnosis and particulars of:—

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

22. State whether the disabilities are:—

	(a) Attributable to	(b) Aggravated by
(i) Service during the present war
(ii) Previous active service
(iii) Climate in pre-war service
(iv) Ordinary military service before the war
(v) Serious negligence or misconduct on the part of the soldier

Give details:

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

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

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

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

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

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

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?

Opinion of Military Member in case of disagreement.

OR

- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

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

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

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

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures:—

Station *Joseph D. Camp* { President or Chairman.
Date *14-5-19* } Members.

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

Station } Only applicable in cases of Patients in Hospitals.
Date } Officer in charge, Central Hospital.

OR

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

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

Station
Date O.C. Discharge Centre.

ST. JOHN'S Nfld.
NO 1

WILLIAM
100
1871

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

HEARBY EAST
100
1871
LITTLE

Fold Here

OCT 21 1921

1921.

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

William J. Shaw

in respect of his service as No. 4278 Rank Pte.

Name W.J. Shaw Royal Nfld. Regt.
Nfld. Foresters Corps.

Receipt of the same should be acknowledged hereon.

Received

Victory Medal & British War Medal

Signature

William J. Shaw

Date

Oct 27th/21

Address

Little Hearts Ease

[P.T.O.]

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Form
B. 121.
32.

Number of Sheet

Regiment of

Royal Newfoundland

Signature of O. C. Company

Conf.
W. S. [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	By whom awarded	REMARKS
No.		Age on	years	months			
<i>4278</i>	<i>Lewis W.F.</i>		<i>28</i>	<i>9</i>			
Joined	Date	Place and Date of Enlistment			Religion		
Joined	Date				<i>R.C.</i>		
Joined	Date	Period of			Place of Birth		
Joined	Date	with Colours					
		with Reserve					
Place	Date of Office	Rank	Cause of Discharge	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial
				<i>Demobilized St. Johns. 7/29</i>			

To be carried over

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4278 Rank Pfc Name Shaw W.K.
 Date of Enlistment 29-12-17 Address Little St. George District Trinity
 Occupation Fireman Classification for Discharge F Medical Category AD
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P/36	B 268	B 121	N.F. Med.	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
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 7-6-19 O. C. Discharge Depot [Signature]

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

W. Shaw

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 [Signature]

Date 9-6-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R17153663* to his home at *Hearts Case* and Release Certificate No. *2533* issued.

Date *9-6-19*

J.A. Snow Capt
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to *7-7-19*

Date *9-6-19*

J.A. Snow Capt
Depot Paymaster.

Discharge approved for *23-6-19*

Forwarded with following documents to O.C Discharge Depot.

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

Date *9-6-19*

J.A. Snow Capt
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

R.H. Jones

Date *JUN 23 1919*

O. C. Discharge Depot.

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

Date *June 19/19*

J. M. Heath
i/c Records

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4278 Rank Private Name Shaw Wm
 Intended place of residence St. John's

2. Occupation Drumman
 Classification of soldier E Medical Category AI

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

Eligible for War Service Gratuity

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

Place ST. JOHN'S
 Date JUN 9 1919
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date ST. JOHN'S
JUN 9 1919
 Signature of soldier
 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 and Date ST. JOHN'S
JUN 9 1919
 Signature of soldier
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 29-12-17 No of days on Military
 Discharged from service JUN 23 1919 Plus 14 days Service 536

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S
 Date JUN 23 1919
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed
 Place St. John's, Nfld
 Date July 7/1919
 Officer in Charge
 The Royal Newfoundland Regiment

2019/2711