



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 3751 Name George Sheppard Corps C.C.E.

### Questions to be put to the Recruit before Enlistment.

- |  |  |
|--|--|
| 1. What is your name? .....  | 1. <u>George Sheppard</u> .....          |
| 2. What is your full Address? .....  | 2. <u>St. John's</u> .....               |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u> .....                      |
| 4. What is your age? .....   | 4. <u>27</u> Years <u>4</u> Months ..... |
| 5. What is your Trade or Calling? .....  | 5. <u>Private</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. <u>No</u> { 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, George Sheppard 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.

George Sheppard SIGNATURE OF RECRUIT.  
W. H. B. 179-17 Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, George Sheppard 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 17th day of July 1915

Signature of Attesting Officer W. H. B.

### †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.....1915 } Approving Officer.  
 Place..... }

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

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

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name George Sheppard  
 Apparent age 26 years 4 months. Height 5 feet 6 inches  
 Chest Measurement { Girth when fully expanded 37 inches  
 Range of expansion 3 1/2 inches  
 Distinctive marks None

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Edward Sheppard  
Grand Falls | 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 " _____ [ " " ] _____ " _____ "									



# FIRST NEWFOUNDLAND REGIMENT

2951

## ATTESTATION OF

No. 3951 Name George Sheppard Corps C of E.

### Questions to be put to the Recruit before Enlistment

- |  |   |
|--|---|
| 1. What is your name? .....  | 1. <u>George Sheppard</u>                 |
| 2. What is your full Address? .....  | 2. <u>Grand Falls</u>                     |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u>                             |
| 4. What is your age? .....   | 4. <u>26</u> Years <u>4</u> Months        |
| 5. What is your Trade or Calling? .....  | 5. <u>Pattern Maker</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. <u>No</u> { Name .....<br>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, George Sheppard 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.

17-9-17

George Sheppard SIGNATURE OF RECRUIT.  
R. D. [Signature] Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, George Sheppard 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 Grand Falls on this 17th day of Sept. 1917  
Signature of Attesting Officer [Signature]

### †CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the [blank].  
If enlisted by special authority, such will be attached to the original attestation.  
Date.....1917 } Approving Officer.  
Place..... }

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

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



C.R. 3951

Extract from Daily Orders Part 11 Unit The Royal Nfld.  
Regt. St. John's, April 9th, 1919.

The discharge of the undernoted has been APPROVED  
by C.O. ~~St. John's~~ Discharge Depot from 31-3-19.

3951 Pte. Geo. Sheppard

C.R. 3951

Extract of Preliminary Report of a Medical Board  
held on Thursday Evening March 27th/19. the following  
was the finding.

-----

RECOMMENDED DISCHARGE FROM THE ARMY.

#3951 Pte. G. Sheppard.

C.F. 3951

Extract from Daily Orders Part II Unit The Royal WFLD.  
Regt. St. John's, 11-2-19.

The undersigned returned from Overseas and reported to  
Depot 7-2-19.

Repaired on A.F. 1179.

3951 Pte. Geo. Sheppard.

C.R. 3951

Extract from Memorial Roll of the Royal RFLA. Regt  
Embarked S.S. Cornwall, Jan. 30/19.

3951 Sheppard.



C.R. 3951

~~Extract~~. from Daily Orders By. Lt. Col. B.J. Barton, D.S.O.  
Commanding 2nd Bn. Royal Nfld.Rgt. 31-8-18.

The following having reported back from 1st Battn. is taken  
on the Strength and posted to H<sup>n</sup> Company.

3951 Pte. G. Sheppard,

From 30-8-18.

C.R. 3951

Extract from Casualties received from P.&.R.O. London,  
Aug. 26th, 1918.

The u/m Soldier was discharged from the Spouthern Comm.  
Depot on 24/8/18 and granted furlough to 30/8/18. Vide  
A.G.I. 819 of 1918. Marked Category "A"

3951 Pte. Sheppard G.

Authority:- A.Ps. W.3016B from Comm. Depot.

C.R. 3951

Extract of Casualty received from Pay & Record Office, London,  
dated

3rd London General Hosp. S.W. 10, Reports, 1st June 1918.

Discharged 1-6-18, granted furlough to 10-6-18,

3951 Pte. G. Sheppard

Fit for 11, Command Depot.

C.R. 3951

Extract from Daily Orders part 11, from Unit The Royal  
2214. Regt. in the field, dated May 11th, 1918.

#3951 Pte. C. Sheppard.

Invalided to United Kingdom (W) April 23, 1918.

# NEWFOUNDLAND POSTAL TELEGRAPHS.

C.R. 3951



## 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 *J.R. Bennett* Address Capt of Militia

Line Number	Rcd	By	Sent	by	Check

Dated April 26th, 1918.

To Eldred Sheppard, Grand Falls.

Regret to inform you that Record Office, London, officially reports No. 3951, Private George Sheppard at Wandsworth.

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

J.R. Bennett

Acting Minister of Militia.

FOR TYPEWRITER

C.R. 3951

Extract from Casualties received from Pay & Record  
Office, London, dated April 25th, 1918.

#3951 Pte .G. Sheppard.

G.S.W. Head.

Admitted 3rd London, General Hospital, Wandsworth,

23--4-18.

# NEWFOUNDLAND POSTAL TELEGRAPHS.



**Cable Connection with all the World**

**CR 3951**

**All Messages Sent are Subject to the Following Conditions:**

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

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

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

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

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

**(NOT TRANSMITTED)**

Signature of Sender \_\_\_\_\_ Address Dept of Militia

Line Number	Rcd	By	Sent	by	Check

*Dated* **April 22 1918**

*To* **Eldred Sheppard, Grand Falls.**

Regret to inform you that Record Office, London,  
officially reports **No. 3951, Private George**  
**Sheppard at St. John Ambulance Hospital, Etaples**  
**April 13th G.S.W. head mild.**

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

**J.R. Bennett**

*Actg.* **Minister of Militia.**

C.R. 3951

Extract from Casualties received from Pay & Record Office  
London, dated May 2nd, 1918.

#3951 Pte. G. Sheppard.

Wounded April, 13th, 1918.



C.R. 3951

NEWFOUNDLAND CONTINGENT.

Extract of Nominal Roll of Draft No. 40; 80 Other Ranks from  
2nd. Bn., Royal Newfoundland Regiment, Winchester, to 1st. Bn.,  
Royal Newfoundland Regiment, B. E. F.  
Embarked Southampton, 27/3/18.

3951 Pte. G. Sheppard.

C.R. 3951

Extract from General Roll [REDACTED] returned to. John's.  
for [REDACTED], per S.S. FROTHINGHAM, Oct. 3, 1917.

3951 Pte. G. Sheppard.

C.R. 3951

Extract from Daily Orders Part 11 Unit The Royal Nfld.  
Regt., St. John's, Sept. 19th, 1917.

3951 Pte. G. Sheppard.

Attested on Sept. 17th, posted to G. Company and assigned n  
number as shown.

C.R. 3951

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

The discharge of the undernoted on demobilization has been  
CONFIRMED by Officer i/c Records from noted date  
31424-19.

3951, Sgt. Geo. Sheppard.

C.R.



G. Sheppard

C.R. 3951

P. R. O.

To The Chief Paymaster  
% Nfld Pay & Record Office  
58 Victoria St.



Sir

Please remit the sum of  
One Pound (£1) from my credit

#3951 Pte Geo Sheppard  
3rd L. G. Hospital  
Wandsworth.

FILE	BRANCH
	INITIALS

OK £1.0.0 rep.  
16<sup>5</sup>/<sub>18</sub> Receipt 7202

300 LONDON GENERAL HOSPITAL  
No. 16  
16 MAR 1919  
WANDSWORTH

No. 3957 Rank PT-1 Name Shepherd G.

Pay	F	Rate	18
100	10		
Less Allowance			110
Net Rate			60/100
			50

DEBITS	Date	£	s	d	CREDITS	Period		Days	Rate	S	s	d	
						From	To						
Balance					Balance		12					25	2
Acquittance Rolls			7	4	Pay @ Net Rate	13	4		50	50	2500	5	2
Hospital Advances		1	0	0	Ration Allow	13	7	19					
A.B. 64.					10 days @ 2/1		16	19					
P.&R.C. Payments		1	0	0									10
<i>other slips</i>			2	11									
					5-18-6								
Cash	75	19	16	5	100								8-8-9

2-10-3

*[Handwritten signature]*  
11/18

*[Handwritten scribbles]*







Sheppard, Geo.

3951

May Sept

ST. JOHN'S, Mar 29<sup>th</sup> /19

# Royal Newfoundland Regiment.

Billeting Account,

To Pte G. Sheppard

Billeting Soldiers as undermentioned

from Feb 8<sup>th</sup> /19 to Mar 31<sup>st</sup> /19

3951 Pte G. Sheppard 53 70

B 9 m

14841

EW

Certified correct for \$ 53.70

C. B. Dicks  
Billeting Officer.

A. J.  
George Sheppard

April 16, 1919

#3951 Pte. George Sheppard,  
Grand Falls.

Dear Sir:-

Please find enclosed "Discharge Certificate  
No. 1963."

Yours truly

Paymaster & O.i/c Records <sup>Capt.</sup>

April 23, 1919

#3951 Pte. George Sheppard,

P.O. Box No. 241,

Grand Falls.

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

Paymaster & C. i/c Records  
Captain,

15839

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 20th. 1919.

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

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

- Christian name, *George*..... 2. Surname..... *Sheppard*..
- 3. Rank..... *Pte.*..... 4. Regt. No..... *3951*.....
- 5. Address in full to which future payments of gratuity are to be forwarded..... *P.O. B. 241. Grand Falls Nfld.*.....
- 6. Date of enlistment in the Regiment..... *10<sup>th</sup> September 1917*.....
- 7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge..... *Not Applicable*.....
- 8. Relationship of such dependants..... *Not Applicable*.....
- 9. Address in full of such dependants..... *Not applicable*.....
- 10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *Not Applicable*
- 11. Were you on active service only in Nfld. If so, give dates and particulars of such service..... *No*.....
- 12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *18 months*.....





Signature of Applicant: *George Sheppard*

Place of Residence: *Grand Falls*

Declared before me at: *M. John Nfld*

This *31<sup>st</sup>* of *March* 19*19*

*M. John* *Barrett and Co.,*  
Notary.  
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
.....	.....	.....	<i>U. m.</i>	<i>280.00</i>
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

Certified Correct.

Paymaster.

*[Signature]*



file

P O B 21  
Grand Falls  
July 13<sup>th</sup> 1921

To the Officer in charge of Records  
The Royal M<sup>t</sup>'s Reg't.  
Dept of Militia  
St John's

Dear Sir

I wish to draw your attention to the fact, that although discharged over two years ago, I have not as yet received any Service Badge of any kind.

Would you kindly advise me if there is one for me.

Thanking you in advance  
I remain

Yours respectfully

#3951. Ex. Pte. Geo. Sheppard.

O.K. for  
pinner  
Capt. Maddick

Edward T. Ludge  
George Sheppard  
Benjamin Skinner

1891  
P. O. Box 100

The  
of  
of

to  
of

service  
of

to  
of

Dr. C. W. Skinner

Army Form B. 103.

Regimental Number 3.9.51.

**Casualty Form—Active Service.**

Regiment or Corps *Royal Newfound Land.*  
 Rank *Pte* Surname *Sheppard* Christian Name *G*  
 Religion *C of E* Age on Enlistment *26* years *4* months  
 Enlisted (a) *12.9.17* Terms of Service (a) *duration* Service reckons from (a) *17.9.17*  
 Date of promotion to present rank ..... Date of appointment to lance rank .....  
 Extended { ..... } Re-engaged { ..... } Qualification (b) .....  
 or Corps Trade and Rate .....  
 Occupation *26 Pattern Maker S. of England 2nd Unit* Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
			Embarked ... <i>27 MAR 1918</i>		
			Disembarked... <i>29 MAR 1918</i>		
		<b>Wounded in Action</b>		<i>13/4/18</i>	<i>Bn 3 1/4/18</i>
	<i>John W. As Gusshead</i>		<i>Etanches</i>	<i>13/4/18</i>	<i>RA 21945</i>
<i>23.4.18</i>	<i>---</i>	Transferred to England for 'ville de Liege' (Gusshead)		<i>23.4.18</i>	<i>N 3083</i>
	<i>9.5.18</i>			<i>12.7.18</i>	<i>MAJOR</i> <i>Infantry Section</i> <i>G.M.S. 3rd Echelon</i>



*[Handwritten signature]*

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) Signaller, Shoeing-Smith, &c.

55 ~~107~~

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
No. 1 Wing Southern Command Depot Perham Down nr. Andover Hants.		Joined.		10.6.18.	
		Occupation Card signed		21.6.18.	
		<del>2<sup>nd</sup></del>		7.7.18.	
		Notes 2 <sup>nd</sup> R. Newfoundland	Winchester		
		Category <u>III</u>		30.8.18.	180. P. 2. 23. P. 18.
					<i>[Signature]</i>
					No. 1 Wing Southern Command Depot Perham Down nr. Andover Hants.

*[Handwritten mark]*

*[Handwritten mark]*



3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R-110-9* to his home at *Grand Falls* and Release Certificate No. *190-2* issued.

Date *29. 3. 19* .....  
 Demobilization Officer *[Signature]*

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 *14-4-19*

Date *29-3-19* .....  
 Depot Paymaster. *[Signature]*

Discharge approved for *31. 3. 19* .....

Forwarded with following documents to O.C Discharge Depot.

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

Date *29. 3. 19* .....  
 Demobilization Officer. *[Signature]*

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.  
 Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date *MAR 31 1919* .....  
 O. C. Discharge Depot. *[Signature]*

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

Date *April 12. 1919* .....  
*[Signature]*



# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 3957 Rank Plt Name Sheppard, George  
 Date of Enlistment 29-8-19 Address Worlow, St. John's  
 Occupation Pattern Maker Classification for Discharge B Medical Category F  
 Recommendation S.M.B. Physically Unfit Disability Rating 20% 6 months

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 29-3-19

O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am                      in a position to resume civilian occupation.

*George Sheppard*

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                                     

Date 29-3-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R 1109.....to his home at Graw Falls and Release Certificate No. 1902 issued.

Date 29. 3. 19.....  
 Demobilization Officer [Signature]

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 14-4-19

Date 29-3-19.....  
 Depot Paymaster. [Signature]

Discharge approved for 31. 3. 19.....

Forwarded with following documents to O.C Discharge Depot.

N.F. P36.....	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.....	
B 179a.....	D 400C.....	Form K.....	do 4th.....	" 5.....	
B 179b.....	B 103.....	ME 2.....		" 6.....	
B 179c.....	B 120.....	M 93.....			

Date 29. 3. 19.....  
 Demobilization Officer. [Signature]

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.  
 Board of Pension Commissioners.

with following additional documents.

**Eligible for War Service Gratuity**

MAR 31 1919

Date .....  
 O. C. Discharge Depot. [Signature]

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

Date .....

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 3951 Rank Plt Name Sheppard George  
 Intended place of residence Grand Falls

2. Occupation Pattern-maker  
 Classification of soldier B Medical Category E

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 MAR. 29 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 29-3-19  
 Signature of soldier George Sheppard  
 Signature of witness J. A. Snowling

### 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 29-3-19  
 Signature of soldier George Sheppard  
 Signature of witness E. Wilcox Sgt.

### STATEMENT OF SERVICE

7. Enlisted for service 17-8-17 No of days on Military  
 Discharged from service 31-3-19 plus 14 days Service 606

### APPROVAL OF DISCHARGE

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

Place ST. JOHN'S Date MAR 31 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 April 14/1919  
 Officer in Charge Records  
 The Royal Newfoundland Regiment

*M. B. 2097 1963*

12  
31  
30  
31  
31  
27  
31  
14  
208

**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* } Former Trade  
or Occupation }
2. Regtl. No. *3951* 3. Rank..... *PC* 7a. If the soldier claims previous service in Army, he should state—  
(a) Former Regts. or Corps; with Regtl. Nos.
4. Name *SHEPPARD*.....  
(Surname) (Christian Names)
5. Age last birthday..... *29*.....
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. *19-4-18 G. S. W. Staffs.*
12. Place of origin of disability. *France*
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. *Wounded in head in France 12-4-18 superficial, not healed. no disability*

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. } | No                  |                   |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } *n. a.*

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? *Scar on vertex of head 2 1/2 ins long*  
*(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)* *4 lines pain on palpation*  
*complaints of tenderness even when wearing caps.*

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.

*Refatreated*  
*W. H. M. O.*  
 ROYAL NEWFOUNDLAND REG.

Station *Hazley Lower Camp.*

Date *8-1-19*

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.

**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.. *3957* 3. Rank.. *PT*.....
4. Name *SHEPPARD*.....  
(Surname) (Christian Names)
5. Age last birthday. *29*.....
6. Posted for duty on..... at.....  
in category (or grade).....
7. Former Trade or Occupation }  
7a. If the soldier claims previous service in Army, he should state—  
(a) Former Regts. or Corps ; with Regtl. Nos.  
(b) Date of Discharge ;  
(c) Cause of Discharge.  
(d) Particulars of Pension or Gratuity (if any)
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

**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. *12-4-18 G.S.W. Sculp.*
12. Place of origin of disability. *France.*
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. *Wounded in head in France 12-4-18 superficial wd. healed no disability*

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

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

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? *Scar on the head 2 1/2 ins. long. Gives pain on palpation complains of tenderness even when wearing caps.*  
 (A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the 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— *Repatriation*

(a) Discharge as permanently unfit?

(b) Change to United Kingdom?

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

*J. Rodwell*  
 ROYAL NEWFOUNDLAND REG.

Station *Hazley Down Camp.*

Date *15-1-19*

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

**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.

*G.S.W. Scalp*

(b) The present condition thereof.

*A scar across the scalp near occipito-parietal fissure. Slight loss of bone. Deaf particularly in left ear. Headaches frequently but improving*

22. State whether the disabilities are:—

(a) Attributable to

(b) Aggravated by

(i) Service during the present war .. ..

*Yes*

(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 .. ..

*No*

Give details:

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

*G.S.W.*

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).

*20% for 6 months*

(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?

*Yes.*

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?

*Yes*

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 *S. Plus*

Date *Mar 27/19*

*[Signatures]*  
 ..... } President or Chairman.  
 ..... } Members.

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

Station .....

Date .....

*Cherry Macpherson*  
 ..... } Only applicable in cases of Patients in Hospitals.  
 Officer in charge, Central Hospital.

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.





## 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

*George Sheppard.*

Regiment from which discharged

*Royal Newfoundland*

Regimental number

*3951*

Intended address

*Grand Falls.*

Height on discharge

*5.* Feet *6*

Color of hair on discharge

*Black.*

Complexion

*Fair.*

Color of eyes

*Grey*

Descriptive Marks

*1 scar on Head.*

Figure on discharge

*medium*

Christian name of Father

*Eldred*

Christian name of Mother

*Susie.*

Wife's maiden name in full

—

Date and place of marriage

—

Christian names of children

—

Place and date of soldier's birth

*St. George, 17<sup>th</sup> May, 1891*

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)

*George Sheppard*

(Rank)

*Plt*

Station

*St. John's*

Date

*25-3-18*

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

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

# MEDICAL HISTORY

OF

Surname Sheppard Christian Name George

Table I.—GENERAL TABLE,

Birthplace:—Parish St. John's Bay County St. John's

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on 17 day of Sept 1917	at Headquarters	on day of 191	at
Declared Age	26 years 4 days		years	days
Trade or Occupation	Pattern Maker			
Height	5 feet 6 inches		feet	inches
Weight	124 lbs.			lbs.
Chest Measurement	Girth when fully expanded	37 inches		inches
	Range of Expansion	3 2/3 inches		inches
Physical Development				
Vaccination Marks	Arms	—		
	Number			
When Vaccinated				
Vision	R.E.—V=	6/6	R.E.—V=	
	L.E.—V=	6/6	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)				
(Rank)				
		Medical Officer.		Medical Officer.
Enlisted	at St. John's, N.F.	at		
	on 17 day of Sept. 1917	on day of 191		
	Corps.	Regtl. No.	Corps.	Regtl. No.
Joined on Enlistment				
Transferred to	1st. Inf. Bn. 3951 Regt. ROYAL NEWFOUNDLAND REGIMENT.			
Became non-effective by				
	on day of 191	on day of 191		
[Signature]				
[Rank]				

[P.T.O.]

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 on syphilis, admission of treatment
	Day	Month	Year	Day	Month	Year			
3 <sup>rd</sup> LONDON GENERAL HOSPITAL WANDSWORTH.	23	4	18	1	6	18	G.S.W scalp Wound Superficial	39	

st in case of Warrant Officers treated in quarters.

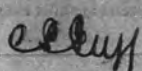
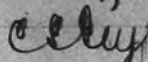

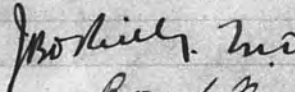
the cause, nature or treatment of the case likely to be of interest or of future use. In case of  
and re-admissions to hospital will be shown. The subsequent progress, including particulars  
sent out of hospital, transfers, etc., will be given in the special syphilis case sheet.

Signature of Medical Officer

Wounded in France 12-4-18  
Xray = nil

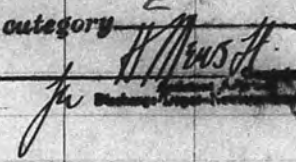
GC Hall  
Capt USM

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

Date	Brief Details, and Signature	
2 NOV 1917	Vaccination	 Capt. Kane
26 OCT 1917	<del>THB</del> v.	 Capt. Kane.
3 NOV 1917		
Perlem Down. 13.8.18	Dentally fit.	 Lt. Slake Lt. Senior Officer.
2518	Reinc. M.A.	ROYAL NEWFOUNDLAND REG.
8-1-19	Recommend Repatriation	 J. M. Slake Royal Newfoundland Regt.

COMMAND DEPOT,	
Admitted	11 6 18
Discharged	30 8 18
Category	A III

Table IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
<p style="text-align: center;">It is hereby certified that this soldier has been before the Standing Medical Board and has been classified as <u>B</u> for discharge on Demobilisation. Medical category <u>E</u></p> <p style="text-align: center;">27.3.19 Date of M.B.</p> <p style="text-align: right;">  J. M. Slake                      Major, Royal Newfoundland Regt.                 </p>					

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Form  
B. 121.  
39.

Regiment of 1<sup>st</sup> Newfoundland.

Number of Sheet First.

Signature of O. C. Company [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>3951. Sheppard Co.</u>	Age on	<u>26</u> years <u>4</u> months	<u>Pattern Maker</u>	
Joined		Date	Place and Date of Enlistment	Religion	
Joined		Date		<u>St. John's</u> <u>17-9-17</u>	
Joined		Date	Period of	with Colours	
Joined		Date		with Reserve	
			<u>210</u> years.		
			<u>365</u> years.		

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<u>Demobilized St. John's,</u>					<u>14 / 19</u>

To be carried over

Reg. No. 3957 Rank Pte. Name Sheppard Geo  
Attested ..... Address Grand Falls  
Allotment ..... Allottee .....  
Date of Allotment ..... Returned from Overseas 2-19  
Returned on S.S. .... Cause Discharge

27.3.19 Rec. Dis. from the Army.

29.3.19

**PASSED TO DEMOBILIZATION OFFICER**

31.3.19

**DISCHARGE APPROVED ON DEMOBILISATION**





The Royal Wld. Regiment

DEMOBILIZATION

No. 3951 Rank PL

Name Sheppard G.

Warned for demobilization on

MAR 29 1919

# 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. 3957.....

Name Sheppard, George.....

Address Grand Falls.....

Present Medical Category E.....

Recommended for:— { (a) ~~Immediate discharge~~ .....

(b) Standing Medical Board.....

Members of Board {

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

H. Robinson  
Senior Medical Officer

Geo Borden  
M. O. Depot

## 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*  
*(Pattern maker)*

*George Sheppard*  
Signature of Man.

Reg. No. *3957*

*Charles Cuff*  
Signature of the Vocational Officer or his Representative.

Place **ST. JOHN'S.**

Date *29-3-19* 191

Receipt for Army Book 64

No. *3951* Name *G Sheppard*

To Certify that I have received the AB 64 of the above  
named Soldier.

Date *July 28<sup>th</sup> 1920* Name *George Sheppard*  
Place *Grand Falls*

N.B. For completion and return to the Department of Militia  
insert in corner of envelope "AB 64"

*WV*

Fold Here

---

**ON HIS MAJESTY'S SERVICE**

To the Officer in Charge of Records,

The Royal Nfld Regt.,

Dept of Militia,

St. John's Nfld.

---

Fold Here

July 9th. 1921 1917.

The accompanying King's Certificate, on his discharge,

(No. 1315), is forwarded herewith to

George Sheppard,

in respect of his service as No. 3951 Rank Pvt.

Name George Sheppard, Corps Royal Nfld Regt.

Receipt of the same should be acknowledged hereon.

Received \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Address \_\_\_\_\_

*George Sheppard*

*July 13<sup>th</sup> 1921*

*21. Beau. Ave. Grand Falls.*

DEPARTMENT OF VETERANS AFFAIRS  
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS  
DEATH NOTIFICATION  
AVIS DE DÉCÈS

TO:  
À:

DATE 15 Feb 72

NAME SHEPPARD George  
NOM

Service No. 3951  
Matricule No

CPC No. 260817  
CCP No

WVA No.  
AAC No

Information Received from:  
Information reçue de:

D.V.A. 93

Date of Death 5 Nov 71  
Date du Décès

Place North Bay, Ont.  
Endroit

Distribution: WSR-DASG  
VI - ASS  
DO - BD  
HO - BC

Pour le chef  
for Chief, Central Registry Division.  
Dépôt central des dossiers.