



# First Newfoundland Regiment

## ATTESTATION PAPER

Regimental No. 1217

Name in full George Percival Simm Age 20

Address St Anthony North East Coast

~~Marrried~~ Height 5 ft 9 in Weight 163

Single

Color Dark Hair Dark Brown Eyes Blue

Other distinguishing marks Scarred upper lip. 2 thumbs.

Nearest relative Herbert Simm (brother)

Address St Anthony North East Coast

Dependents none

Occupation Trickerman Present Wage \$50<sup>00</sup> per month

Previous service \_\_\_\_\_

Decorations \_\_\_\_\_

General Remarks \_\_\_\_\_

Date of Enlistment March 15

*Re signed by [unclear] 4/15/14*  
*George Percival Simm*  
*Witness by: [unclear]*  
*Robert Aldershot*  
*Aug 16/14*

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

George Percival Simm

Declared before me this 25<sup>th</sup> day  
of March 1914  
[Signature]

[Signature]  
[Signature]

## DESCRIPTIVE REPORT ON ENLISTMENT.

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

Reg. No. 1217

Name George Percival Simms

Apparent age 20 years \_\_\_\_\_ months. Height 5 feet 9 inches.

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

Distinctive marks Color: Dark, Hair: Dark Brown, Eyes: Blue

Other distinguishing marks: Forehead, Upper lip, thumbs.

### INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Herbert Simms, St. Anthony, N.E. Coast, Nfld.

| Relationship Brother

#### Particulars as to Marriage.

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

| (a) | (b) | (c) | (d) |
|-----|-----|-----|-----|
|     |     |     |     |

#### Particulars as to Children.

| Christian Names | Date and Place of Birth |
|-----------------|-------------------------|
|                 |                         |

### STATEMENT OF THE SERVICES.

| Corps in which served  | Regt. or Depot | Promotions, Reductions, Casualties, &c. | Army Rank | Dates        | Service not allowed to reckon for fixing the rate of pension |      | Service in Re-serve not allowed to reckon towards G. C. Pay |      | Signature of Officers certifying correctness of entries |
|--|----------------|---|-----------|--------------|--|------|---|------|---|
|  |                |   |           |              | years  | days | years   | days |   |
| Service towards limited engagement reckons from <u>8/3/15</u>                        |                |   |           |              |  |      |   |      |   |
| Joined at <u>St. Johns</u> on <u>8 March, 1915.</u>                                  |                |   |           |              |  |      |   |      |   |
|  |                | <u>Warrant Officer</u>                  |           | <u>30/15</u> |  |      |   |      |   |
|  |                |   |           |              |  |      |   |      |   |
|  |                |   |           |              |  |      |   |      |   |
|  |                |   |           |              |  |      |   |      |   |
|  |                |   |           |              |  |      |   |      |   |
|  |                |   |           |              |  |      |   |      |   |
|  |                |   |           |              |  |      |   |      |   |
|  |                |   |           |              |  |      |   |      |   |
|  |                |   |           |              |  |      |   |      |   |
|  |                |   |           |              |  |      |   |      |   |
|  |                |   |           |              |  |      |   |      |   |
|  |                |   |           |              |  |      |   |      |   |
|  |                |   |           |              |  |      |   |      |   |
| Total Service forfeited as above .. .. .   |                |   |           |              |  |      |   |      |   |
| Total Service towards Engagement to _____ (date of discharge) _____ years _____ days |                |   |           |              |  |      |   |      |   |
| " " Pension " _____ ( " ) _____ " "  |                |   |           |              |  |      |   |      |   |



J. P. Sumner.

C.R. 1217.

P.S.O. —

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

# MEDICAL HISTORY

Surname Simms OF Christian Name George P

Table 1.—GENERAL TABLE.

Birthplace:—Parish..... County.....

|   | SPECIAL RESERVE.                       |               | REGULAR ARMY. |                  |
|---|--|---------------|---------------|------------------|
|   | Right                                  | Left          | Right         | Left             |
| Examined  | on 6 day of March 1915                 | at St John's  | on day of 191 | at               |
| Declared Age  | 21 years                               | days          | years         | days             |
| Trade or Occupation   | Fisherman                              |               |               |                  |
| Height  | 5 feet                                 | 9 inches      | feet          | inches           |
| Weight  | 163 lbs.                               |               |               | lbs.             |
| Chest Measurement   | Girth when fully expanded... 35 inches |               |               | inches           |
|   | Range of expansion... 39 inches        |               |               | inches           |
| Physical Development  |  |               |               |                  |
| Vaccination Marks   | Arm                                    |               |               |                  |
|   | Number                                 |               |               |                  |
| When Vaccinated   | never                                  |               |               |                  |
| Vision  | R. E.—V=                               | 20/20         | R. E.—V=      |                  |
|   | L. E.—V=                               | 20/20         | 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)   | <i>A. Paterson</i>                     |               |               |                  |
| (Rank)  | Capt                                   |               |               |                  |
|   | Medical Officer.                       |               |               | Medical Officer. |
| Enlisted  | at St John's                           | at            |               |                  |
|   | on 8 day of March 1915                 | on day of 191 |               |                  |
| Joined on Enlistment  | Corps.                                 | Regtl. No.    | Corps.        | Regtl. No.       |
|   | 1st Ychs                               | 1217          |               |                  |
| Transferred to  |  |               |               |                  |
| Became non-effective by   |  |               |               |                  |
|   | on day of 191                          | on day of 191 |               |                  |
| (Signature)   |  |               |               |                  |
| (Rank)  |  |               |               |                  |

**PAY LIST.**

556

to *1<sup>st</sup> July* 191*6* Voucher No.

Army Form O. 1625.

**NON-EFFECTIVE ACCOUNT.**

Regiment or corps *1<sup>st</sup> Newfoundland*  
 No. *1217* Rank *Private* Name *G.P. Simms*  
 Died (a) *Intestate* at *France* on the *1<sup>st</sup>* of *July* 191*6*  
 Deserted at \_\_\_\_\_ on the \_\_\_\_\_ of \_\_\_\_\_ 191*6*

I Certify to the correctness of above in every particular.

{ *Commanding Squadron, Troop,  
Battery or Company.*

**STATEMENT OF ACCOUNT.**

[Form I.]

| Date | Dr.  | £    | s. | d.  | Cr.  | £    | s. | d.  |
|------|--|------|----|-----|--|------|----|-----|
|      | Balance Dr. last month .....                     |      |    |     | Balance Cr. last month .....   |      |    |     |
|      | Cash issues<br>(Date of each issue to be stated) |      |    |     | Pay days at _____ from _____ to _____  |      |    |     |
|      | £ s. d.  |      |    |     | Proficiency, Service or good conduct pay<br>days at _____ from _____ to _____          |      |    |     |
|      | 191  |      |    |     | Messing allowance days at<br>from _____ to _____                                       |      |    |     |
|      | "  |      |    |     | Kit allowance .....  |      |    |     |
|      | "  |      |    |     | Amount produced by the sale of Effects from<br>Form 2 .....                            |      |    |     |
|      | Consolidated stoppage .....                      |      |    |     | Amount of Savings Bank balance, including<br>interest (if no balance, to be so stated) |      |    |     |
|      | <i>clothing</i>                                  |      | 12 | 5   | Deferred Pay or Gratuity .....   |      |    |     |
|      | Balance due by the Paymaster                     |      |    |     | Balance due to the Paymaster .....   |      |    |     |
|      |  | 23   | 8  | 3/2 |  |      |    |     |
|      |  | £ 24 | 0  | 8/2 |  | £ 24 | 0  | 8/2 |

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ \_\_\_\_\_ is correctly chargeable against the Public<sup>(b)</sup>.

Dated at this \_\_\_\_\_ day of \_\_\_\_\_ 191 \_\_\_\_\_



Paymaster.

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

No. 1217 Name *Simms G. P.* Sqa., Batty., or Company } *B* Corps *Newfoundland* Date of enlistment } *8.3.15* G.C. Badges } Service or Proficiency Pay }  
 Date of last entry in Company Conduct Sheet } *98.6.15* No. and date of last drunk } Period not reckoning towards freedom from extra fine } Sheet No. *1* Signature O.C. Company, etc. } Character *Good*



| 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 |
|-------|-----------------|-------------|----------------------|---------------------|--------------------|--------------------|---|-----------------|
|       |                 | <i>Pte.</i> |                      | <i>1 Disorderly</i> |                    |                    |   |                 |

Remarks

Army Form B. 122

**FIELD SERVICE.**

Army Form B. 2090A.

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form A. 36, or from other official documents.

REGIMENT OR CORPS } Newfoundland. Squadron, Troop, Battery or Company } B. Co.

Regimental No. 1217. Rank Private.

Surname Simms. Christian Names G.

Died { Date 1/7/16. Place France.

Cause of Death\* Killed in Action or died of Wounds received in Action.

Nature and Date of Report Burial rep. No. 16928. d/12/12/17.

By whom made Vl. Corps Burial Officer.

\* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue previous or subsequent to military duty, or from injury while on military duty.

State whether he leaves a Will or not { (a) in Pay Book (Army Book 64) Not received (b) in Small Book (if at Base) Not received (c) as a separate document Not received



SENT TO  
O.C. H.Q.  
ST. JOHNS, N.F.L.D.  
14 FEB 1918

All private documents and effects received from the front or hospital, as well as the Pay Book, should be examined, and if any will be found it should be at once forwarded to the War Office.

Any information received as to verbal expressions by a deceased soldier of his wishes as to the disposal of his estate should be reported to the War Office as soon as possible.

A duplicate of this Report is to be sent to the Fixed Centre Paymaster at Home, or to the D.F.A.G., Indian Expeditionary Force, or Field Disbursing Officer, as the case may require, together with the Deceased's Pay Book (after withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War-Office with this Report.

Station and Date } G.H.Q., 3rd Echelon. Signature of Officer in charge of Section } G. H. Q.  
Adjutant-General's Office at the Base } 26/12/17. No. of Report } 1/6 No. 1 Infantry Section.





1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, *George Percy Semms*

Regl. No. *1217*

hereby agree, until further notification by me, and in similar official form to make an Allotment of \_\_\_\_\_ Dollars and *Forty* — Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup> <sub>or</sub> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> <sub>or</sub> Persons concerned, viz.:

| Identity Certificate | Whether Wife, Child, other Relative or Friend | NAME (in full)              | ADDRESS             | AMOUNT (each person) |
|----------------------|---|-----------------------------|---------------------|----------------------|
| <i>1123</i>          | <i>Brother</i>                                | <i>Master Herbert Semms</i> | <i>St Anthony</i>   | <i>40</i>            |
|                      |   |                             |                     |                      |
|                      |   |                             |                     |                      |
|                      |   |                             |                     |                      |
|                      |   |                             |                     |                      |
|                      |   |                             |                     |                      |
|                      |   |                             |                     |                      |
|                      |   |                             |                     |                      |
|                      |   |                             |                     |                      |
|                      |   |                             | Total Allotment, \$ |                      |

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

|  |  |
|--|--|
| <p>(Sig.) <i>[Signature]</i></p> <p>_____<br/>Officer Commanding<br/>Company</p> <p><i>10/17</i></p> | <p>(Sig.) <i>Geo Percy Semms</i></p> <p>(Rank) _____</p> |
|--|--|

1915



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, George Percy Semms, Regl. No. 1217

hereby agree, until further notification by me, and in similar official form to make an Allotment of \_\_\_\_\_ Dollars and Forty Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup> <sub>or</sub> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> <sub>or</sub> Persons concerned, viz.:

| Identity Certificate | Whether Wife, Child, other Relative or Friend | NAME (in full)       | ADDRESS    | AMOUNT (each person) |
|----------------------|---|----------------------|------------|----------------------|
| 1123                 | Brother                                       | Master Herbert Piman | St Anthony | 40                   |
|                      |   |                      |            |                      |
|                      |   |                      |            |                      |
|                      |   |                      |            |                      |
|                      |   |                      |            |                      |
|                      |   |                      |            |                      |
|                      |   |                      |            |                      |
|                      |   |                      |            |                      |
|                      |   |                      |            |                      |
|                      |   |                      |            |                      |
|                      |   |                      |            |                      |
|                      |   |                      |            |                      |
|                      |   |                      |            |                      |
|                      |   |                      |            |                      |
|                      |   |                      |            |                      |
|                      |   |                      |            |                      |
|                      |   |                      |            |                      |

\*Total Allotment, \$ \_\_\_\_\_

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

(Sig.) H Bishop  
 Officer Commanding  
Atkins  
 Company  
 10/11 1915

(Sig.) George Percy + Semms  
 (Rank) Private  
 Witness John

Simms, H. S.

1217

Ray Sept.

**PAY LIST.** to 1st July 1918. Voucher No.

**NON-EFFECTIVE ACCOUNT.**

Regiment or corps 1st Newfoundland  
 No. 1217 Rank Private Name G.P. Simms  
 Died (a) Intestate at France on the 1st of July 1918.  
 Deserted at on the of 191

I Certify to the correctness of above in every particular.

(Commanding Squadron, Troop,  
 Battery or Company.)

**STATEMENT OF ACCOUNT.**

(Form 1.)

| Date | Dr.  | £       | s. | d. | Cr.   | £  | s. | d. |
|------|--|---------|----|----|---|----|----|----|
|      | Balance Dr. last month .....                     |         |    |    | Balance Cr. last month July 1/16 .....                            | 24 | 0  | 6½ |
|      | Cash issues<br>(Date of each issue to be stated) |         |    |    | Pay days at from to .....   |    |    |    |
|      | 191  | £ s. d. |    |    | Proficiency, Service or good conduct pay<br>days at from to ..... |    |    |    |
|      | "  |         |    |    | Messing allowance days at<br>from to .....                        |    |    |    |
|      | "  |         |    |    | Kit allowance .....   |    |    |    |
|      |  |         |    |    | Amount produced by the sale of Effects from .....                 |    |    |    |
|      | Consolidated stoppage .....                      |         |    |    |   |    |    |    |
|      | Clothing .....                                   | 12      | 5  |    |   |    |    |    |
|      | Balance due by the Paymaster .....               | 23      | 8  | 3½ | Balance due to the Paymaster .....                                |    |    |    |
|      |  | £       | 24 | 0  | 6½  |    |    |    |

This account is in accordance with information received at the Pay & Record Office to / / and is therefore subject to amendment if, and as may be found necessary.

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

Dated at

this FEB 03 day of 1918  
 LONDON, E.C. 4

191

Paymaster.

(a) Here state whether the soldier died intestate, or whether he left a Will. In the latter case the Will should be annexed hereto, if not already sent to War Office with Army Form B. 2090 or Army Form O. 1815.

(b) Words in Italics to be struck out when there is no debtor balance.

**PAY LIST.**

to 1st July

1916. Voucher No.

**NON-EFFECTIVE ACCOUNT.**

Regiment or corps 1st Newfoundland  
 No. 1217 Rank Private Name G.P. Simms  
 Died<sup>(a)</sup> Intestate at France on the 1st of July 1916.  
 Deserted at on the of 191.

I Certify to the correctness of above in every particular.

\_\_\_\_\_  
 { Commanding Squadron, Troop,  
 Battery or Company.

**STATEMENT OF ACCOUNT.**

Form 1.

| Date | Dr.  | £  | s. | d. | Cr.   | £  | s. | d. |    |
|------|--|----|----|----|---|----|----|----|----|
|      | Balance Dr. last month .....                     |    |    |    | Balance Cr. last month July 1/16  | 24 | 0  | 8½ |    |
|      | Cash issues<br>(Date of each issue to be stated) |    |    |    | Pay days at from to   |    |    |    |    |
|      |  | £  | s. | d. | Proficiency, Service or good conduct pay<br>days at from to                     |    |    |    |    |
|      | 191  |    |    |    | Messing allowance days at<br>from to  |    |    |    |    |
|      | "  |    |    |    | Kit allowance .....   |    |    |    |    |
|      | "  |    |    |    | Amount produced by the sale of Effects from<br>Form 2 .....                     |    |    |    |    |
|      | "  |    |    |    | of Savings Bank balance, including<br>interest (if no balance, to be so stated) |    |    |    |    |
|      | "  |    |    |    | Pay or Gratuity .....   |    |    |    |    |
|      | Balance due by the Paymaster                     | 23 | 8  | 3½ | Balance due to the Paymaster .....  |    |    |    |    |
|      |  | £  | 24 | 0  | 8½  |    |    |    |    |
|      |  |    |    |    |   | £  | 24 | 0  | 8½ |

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ \_\_\_\_\_ is correctly chargeable against the Public<sup>(b)</sup>.

Dated at \_\_\_\_\_  
 this FEB 25 1917 day of \_\_\_\_\_  
 LONDON, S.W.

191

Paymaster.

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

PAY LIST

NON-EFFECTIVE ACCOUNT

Regiment or corps 1st Cavalry  
 No. 1517 Rank Private Name A. P. Stone  
 Dtd<sup>o</sup> Intestate at France on the 1st of July 1918  
 Deceased at on the 2d 1918

I Certify to the correctness of above in every particular.

Accounting Squadron, Troop,  
 Railway or Company

STATEMENT OF ACCOUNT

Form 1

| Date | Dr.  |      | Cr.   |                   |
|------|--|------|---|-------------------|
|      | Balance Dr. last month                         |      | Balance Cr. last month                                      | July 1/18 04 0 04 |
|      | Cash items<br>(Date of each item to be stated) |      | Pay days at from to   |                   |
|      |  |      | Proficiency, Service or good conduct pay<br>days at from to |                   |
|      |  |      | Messing allowance days at<br>from to                        |                   |
|      |  |      | EM allowance  |                   |
|      |  |      | Amount produced by the sale of Effects from                 |                   |
|      | Consolidated storage                           |      |   |                   |
|      | Clothing                                       | 12 5 |   |                   |
|      | Balance due by the Paymaster                   | 0 5  | Balance due to the Paymaster                                |                   |
|      |  | 0 04 |   | 0 04              |

This account is in accordance with information received at the Pay & Record Office FEB 22/1918 and is therefore subject to amendment if, and as may be found necessary.

I hereby Certify that the above account is correct in every particular, and that the above balance of \$ \_\_\_\_\_ is correctly chargeable against the Public.

Done at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 1918

1. This form should be filled out by the paymaster or other person in charge of the pay office. It should be filled out in duplicate and one copy should be retained by the paymaster and the other copy should be sent to the Accounting Squadron, Troop, Railway or Company. 2. The paymaster should also fill out a copy of this form for each soldier or sailor in the pay office. 3. The paymaster should also fill out a copy of this form for each soldier or sailor in the pay office. 4. The paymaster should also fill out a copy of this form for each soldier or sailor in the pay office.

No 1136



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, *George Percy Simms*, Regl. No. *1217*

hereby agree, until further notification by me, and in similar official form to make an Allotment of          Dollars and *Forty* — Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup> or Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup> or Persons concerned, viz.:

| Identity Certificate No. | Whether Wife, Child, other Relative or Friend | NAME (in full)              | ADDRESS             | AMOUNT (each person) |
|--------------------------|---|-----------------------------|---------------------|----------------------|
| <i>1123</i>              | <i>Brother</i>                                | <i>Master Herbert Simms</i> | <i>St Anthony</i>   | <i>40</i>            |
|                          |   |                             |                     |                      |
|                          |   |                             |                     |                      |
|                          |   |                             |                     |                      |
|                          |   |                             |                     |                      |
|                          |   |                             |                     |                      |
|                          |   |                             |                     |                      |
|                          |   |                             |                     |                      |
|                          |   |                             |                     |                      |
|                          |   |                             |                     |                      |
|                          |   |                             | Total Allotment, \$ |                      |

*cupl 124/15*

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

(Sig.) *H. P. Simms Capt* Officer Commanding Company  
 (Sig.) *George Percy + Simms* <sup>hes</sup> mark  
 (Rank) *Private*  
*Witness*  
*Stephens* *10/17*  
 1915



**COPY.**

**Casualty Form—Active Service.**

Regiment or Corps Newfoundland

Regimental No. 127 Rank Pte Name Simms G. J.

Enlisted (a) 8.3.15 Terms of Service (a) One year Service reckons from (a) 8.3.15

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

Extended Re-engaged Duration of War Qualification (b)

| Report          |                    | Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 214, Army Form A. 86, or in other official documents. The authority to be quoted in each case. | Place              | Date            | Remarks taken from Army Form B. 213, Army Form A. 86, or other official documents. |
|-----------------|--------------------|--|--------------------|-----------------|--|
| Date            | From whom received |  |                    |                 |  |
|                 |                    | Embarked <u>St John, N. F. L. D.</u>   |                    | <u>30.4.15</u>  |  |
|                 |                    | <u>Dis do Alexandria</u>   |                    | <u>1.9.15</u>   |  |
| <u>23.10.15</u> | <u>Devanah</u>     | <u>Embarked for Gallipoli</u>  |                    | <u>13.9.15</u>  |  |
| <u>30.10.15</u> | <u>Comdt.</u>      | <u>111, Depentory. A 36.</u>   | <u>St. Devanah</u> | <u>23.10.15</u> | <u>Auth C.4291</u>   |
|                 | <u>W. afta.</u>    | <u>Admitted.</u>   | <u>Hosp Malta</u>  | <u>30.10.15</u> | <u>A. 18150</u>  |
| <u>10.2.16</u>  | <u>Hq. Spain</u>   | <u>dis. to duty.</u>   | <u>H.T Jones.</u>  | <u>26.1.16</u>  | <u>D. 4393.</u>  |
| <u>1.3.16</u>   | <u>Unit</u>        | <u>With Battalion.</u>   | <u>Unit.</u>       | <u>1.3.16</u>   | <u>Atom. Roll.</u>   |
|                 |                    | <u>Embarked Port Suez.</u>   |                    | <u>14.3.16</u>  |  |
|                 |                    | <u>Dis do Marseilles.</u>  |                    | <u>22.3.16</u>  |  |
| <u>11.7.16</u>  | <u>Unit</u>        | <u>No issuing.</u>   | <u>France.</u>     | <u>1.7.16</u>   | <u>3 213.</u>  |

*Shooting  
Squad  
1st Reg. Inf. Section.  
O. J. 101 Reg. Inf. Section.  
G. H. 3rd F. B.*

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



# FIELD SERVICE.

Army Form B. 2090A.

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form A. 36, or from other official documentary evidence.



REGIMENT OR CORPS Newfoundland. Squadron, Troop, Battery or Company B. Co.

Regimental No. 1017. Rank Private.

Surname Simes. Christian Names G.

Date 7/7/18. Place France.

Died { Cause of Death Killed in Action or died of wounds received in Action.

Nature and Date of Report Burial rep. No. 10038. d/12/10/17.

By whom made Vl. Corps Burial Officer.

\* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation or exposure while on military duty, or from injury while on military duty.

State whether he leaves a Will or not { (a) in Pay Book (Army Book 64) Not received. (b) in Small Book (if at Base) Not received.  
(c) as a separate document Not received.

All private documents and effects received from the front or hospital, as well as the Pay Book, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any information received as to verbal expressions by a deceased soldier of his wishes as to the disposal of his estate should be reported to the War Office as soon as possible.

A duplicate of this Report is to be sent to the Fixed Centre Paymaster at Home, or to the D.F.A.G., Indian Expeditionary Force, or Field Disbursing Officer, as the case may require, together with the Deceased's Pay Book (after withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War Office with this Report.

Station and Date G.H.C., 3rd Echelon, 26/12/17. Signature of Officer in charge of Section [Signature] Adjutant-General's Office at the Base [Signature] 1/0 No. Infantry Section.

ON HIS MAJESTY'S SERVICE

OFFICER i/c RECORDS,

DEPARTMENT OF MARITIME,

ST. JOHN'S, Nfld.



1217

539377

395

To ensure that as far as may be possible none of the next of kin of those who have fallen in the War shall fail to receive the Memorial Plaque, it is requested that on receipt of the enclosed Plaque this card be signed at the bottom and posted. No stamp is required.

E

Herbert Simms

RECEIPT.

C.R. 1217

I hereby certify that I have received the 1914-1915  
STAR.

No 1217 Name Pte J. Georg P. Simms

Witness Herbert Simms

Date December 23 1919

Place St Anthony

NR

C.R. 1217

Extract of Casualties received from Pa & Record Office,  
London, dated January 29, 1918.

The following casualties in the 1.1st Wfld. Regt. with  
the British Expeditionary Force, is reported under various  
dates:-

#1217 Pte. G.P. Simms. ✓

Previously reported missing now reported killed in action  
or died of wounds.

C.R. 1217

Extract of Casualty received from Pay & Record Office,  
London, dated January 2, 1918.

#1217 Pte. G. Simms. ✓

Killed in Action or Died of Wounds on or shortly  
after 1/7/16 ~~Mag.~~ Auth. Burial Reported by 6 Corp<sup>s</sup>.  
B.O. 12/12/17.

C.R. 1217

2

Extract of Casualty received from Pay & Record Office,  
London, dated January 1, 1918.

#1217 Pte. G.P. Simms. ✓

Previously Presumed Dead 1/7/16 now reported Killed  
in action or Died of Wounds on or after 1/7/16. Duty:-  
Burial Report by Cirps. Burial Officer, Forwarded on A.F.B.  
2090A, From G.H.Q. 3rd Echelon, 26/12/17. Received P & R.O.  
1/1/18.

C.R. 1217

Extract of Casualty received from Pay & Record  
Office, London, dated August 5, 1917.

#1217 Pte. G.P. Simms. J

"Missing."



C.R. 1217

1217 G.P.SIMMS. ✓

EXTRACT OF CASUALTY LIST RECEIVED FROM THE P & R O  
7.11.16.

"REPORTS MISSING JULY 1st, 1916."

C.R. 1217

Extract of Casualties received from Pay & Record Office, London, dated July 31, 1916.

(Extract from Army Form B, 215 from O.C. Field Regt. dated 1/7/16.)

#1217 Pte. G.P. Simms, B.Co., ✓

Missing 1/7/16.

Extract of Sick and Wounded N.C.Os. and Men of the Mediterranean Expeditionary Force, No: H. 5665, dated Feb. 11th 1916.

C.R. 1217

1217 Pte. G. Simms

1 Newfoundland..... trans. to H.T. "Borau" "Active Service" ex St. Barnabas Camp Ghain Tuffieha Malta 26th. Jan. 1916.

571 1214 C.R.



SICK AND WOUNDED N.C.O.'S AND MEN OF THE MEDITERRANEAN EXPEDITIONARY FORCE.

LIST No.H.4210. AUSTRALIAN IMPERIAL FORCE.

|      |                  |                          |           |  |   |
|------|------------------|--------------------------|-----------|--|---|
| 970  | Pte.Spowart,W.   | 26th.A.I.F.              |           |  | Dis.to All Saint's<br>Camp Ex.Mil.Hosp.<br>Forrest,Malta 13th.<br>Dec'15.       |
| 289  | Eglr.Lyons,J.R.  | 14th. Do.                | V.D.S.    |  | Trans.to All Saint's<br>Camp Ex.Mil.Hosp.<br>Forrest,Malta 13th.<br>Dec'15.     |
| 930  | Cpl.Murdoch,J.A. | 15th. Do.                | Debility. |  | Do.   |
| 2025 | Pte.Watt,G.K.    | 18th.Batt.               | Sick.     |  | Dis.to Ghain Tuff-<br>eiha C.C.Malta Ex.<br>St.Patrick's Mil.H.<br>13th.Dec'15. |
| 1086 | Cpl.Spargo,H.J.  | 22nd. Do.                | Do.       |  | Do.   |
| 479  | Pte.Parry,E.     | 25th. Do.                | Do.       |  | Do.   |
| 407  | " Calder,J.L.    | 28th. Do.                | Do.       |  | Do.   |
| 172  | Sgt.Mead,W.      | 3rd.Fld.Amh.A.A.<br>M.C. | Do.       |  | Do.   |
| 312  | Cpl.Jolley,V.J.  | 24th.Batt.               | Do.       |  | Trans.to Imtarfa<br>Mil.Hosp.Malta Ex.<br>St.Patrick's Mil.Hosp<br>13th.Dec'15. |

LIST No.H.4210. NEW ZEALAND CONTINGENT.

|         |                  |                               |       |  |  |
|---------|------------------|-------------------------------|-------|--|--|
| 2/1601  | Gnr.Castle,W.J.  | 6th.Howitzer<br>Batt.Fld.Art. | Sick. |  | Dis.to Ghain Tuff-<br>eiha C.C.Malta Ex.<br>St.Patrick's Mil.<br>Hosp.13th.Dec'15. |
| 6/2429  | Pte.Husband,H.A. | Canterbury Batt.              | Do.   |  | Do.  |
| 10/2557 | " Collin,E.G.    | Wellington Batt.              | Do.   |  | Do.  |

LIST No.H.4210. DUBLIN RECORD OFFICE.

|       |                |                        |      |  |  |
|-------|----------------|------------------------|------|--|--|
| 10280 | Opl.Bedford,T. | 8-Inniskilling<br>Fus: |      |  | Dis.to All Saint's<br>Camp ex Mil:Hos:<br>Forrest Malta 13th<br>Dec'15.  |
| 21555 | Pte.Doyle,P.   | 1-R.Dub.Fus:           | Sick |  | Adm:ex H.S."Assaye"<br>to St.Patrick's Mil:<br>Hos:Malta 13th<br>Dec'15. |
| 23760 | " Simpson,J.   | 1- do.                 | do.  |  | do.  |

LIST No. H. 4210. NEWFOUNDLAND CONTINGENT.

|      |                |                   |       |   |  |
|------|----------------|-------------------|-------|---|--|
| 1217 | Pte. Simms, G. | 1-Newfoundland.R. | Sick. | ✓ | Dis.to "Chain Tuffeiha"<br>C.C.Malta ex St.<br>Patrick Mil.Hpl.13th<br>Dec'15. |
|------|----------------|-------------------|-------|---|--|

C.R. 1217

Extract of Sick and Wounded N.C.O.s. and Men of the Mediterranean  
Expeditionary Force, admitted to Hospital in Malta from H.S. "Hermann"  
30th. October 1915.

List No: H. 5000. Dated Nov. 14th. 1915.

1218 Pte. G. Simms

Newfoundland Contingent..... Dysentery.

Extract from Nominal Roll Co. 1st. Bn. Nfld. Regt.  
Embarked, at Devonport for Active Service 20-8-15

C.R. 1217

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

1217 Pte. G. Simms.

C.R. 1217

Extract from Nominal Roll Embarked St. John's for Overseas, per  
S.S. "Stephano" April 22, 1915.

1217 Pte. Simms G.P.

C.R. 1217

Geo.P.Simms was attested for General service  
with the NEWFOUNDLAND REGIMENT on March 8th 1915 ..  
Regimental No 1217 was allotted to Pte. Geo.P.Simms

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th. 1919.



**FIELD SERVICE.**

C.R. 1217  
Army Form H. 2090

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form A. 36, or from other official documentary sources.

REGIMENT OR CORPS Newfoundland. Squadron, Troop, Battery or Company B.Co.

Regimental No. 1217. Rank Private.

Surname Simms. Christian Names G.

Date 1/7/16. Place France.

Died { Cause of Death Killed in Action or died of wounds received in Action.

Nature and Date of Report Burial rep. No. 18029, 1/12/17.

By whom made Vl. Corps Burial Officer.

\* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation or exposure while on military duty, or from injury while on military duty.

State whether he leaves a Will or not { (a) in Pay Book (Army Book 64) Not received. (b) in Small Book (if at Base) not received.  
(c) as a separate document Not received.

All private documents and effects received from the front or hospital, as well as the Pay Book, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any information received as to verbal expressions by a deceased soldier of his wishes as to the disposal of his estate should be reported to the War Office as soon as possible.

A duplicate of this Report is to be sent to the Fixed Centre Paymaster at Home, or to the D.F.A.G., Indian Expeditionary Force, or Field Disbursing Officer, as the case may require, together with the Deceased's Pay Book (after withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War Office with this Report.

Station and Date G.H.Q., 3rd. Echelon. Signature of Officer in Charge of Section [Signature]  
26/12/17. Adjutant-General's Office at the Base no fit. for Major,  
1/c No. 1 Infantry Section.



Casualty Form—Active Service.

Regiment or Corps Newfoundland

873

Regiment No. C.R. 1217 Rank pte Name Simms G. P.

Enlisted (a) 8.3.15 Terms of Service (a) one year Service reckons from (a) 8.3.15

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

Re-engaged duration 1 year Qualification (b) \_\_\_\_\_

| Report    |                        | Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 218, Army Form A. 26, or in other official documents. The authority to be quoted in each case. | Place          | Date       | Remarks<br>taken from Army Form B. 218, Army Form A. 149, or other official documents.<br><u>ST. JOHN'S, N.F.L.D.</u> |
|-----------|------------------------|--|----------------|------------|---|
| Date      | From whom received     |  |                |            |   |
|           |                        | Embarked St. John's, Nfld.   | NFLD.          | 30/4/15.   | <u>378</u> No. <u>6551/75</u>   |
|           |                        | Lieutenant Alexandria  |                | 1/9/15.    | <u>2 - JUL 1917</u>   |
|           |                        | Embarked for Gallipoli   |                | 15/9/15.   |   |
| 23/10/15. | "Devanah"              | Ill, Dysentery A 36  | H.S. "Devanah" | 23/10/15.  | Auth. C 4291. H.  |
| 30/10/15. | Comdt., Malta.         | Admitted   | Hosp., Malta.  | 30/10/15.  | A 18150.  |
| 10/2/16   | H. T. Brown            | des duty   | H. T. Brown    | 11/1/16    | 87393   |
| 1/2/16    | unit                   | with Battalion   | unit           | 1/2/16     | Normal roll   |
|           |                        | Embarked Aubrey  |                | 14.3.16    |   |
|           |                        | des <del>France</del>  |                | 14.3.16    |   |
| 11/7/16   | Unit <del>France</del> |  | France.        | 1 JUL 1916 | B213.   |

*Joseph* <sup>Sent</sup>  
 MAJOR FOR  
 O. 1/2 No. 1 Reg. Infantry Section  
 G. H. P. Red Cross

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

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Collich & Sons Ltd., Printers, Old Bailey, E.C. 4.  
 [522] W 12071/024 4000 2/12-1 22 5/6

Forms  
B. 121.  
22.

Regiment of First Newfoundland

Number of Sheet 1

Signature of O. C. Company James Alexander Lyffe

|                            |                                  |            |  |                   |   |                  |
|----------------------------|----------------------------------|------------|--|-------------------|---|------------------|
| Regimental Number and Name |                                  | Enlistment |  | Trade             | Good Conduct Badges, Service Pay or Proficiency Pay |                  |
| No.                        | <u>1217</u> <u>Simons, Geo S</u> | Age on     | <u>20</u> years <u></u> months   | <u>Fisherman</u>  |   |                  |
| Joined                     |                                  | Date       | Place and Date of Enlistment   | Religion          |   |                  |
| Joined                     |                                  | Date       |  |                   | <u>St John's</u><br><u>5-3-15</u>                   | <u>Methodist</u> |
| Joined                     |                                  | Date       | Period of  | Place of Birth    |   |                  |
| Joined                     |                                  | Date       | <u>with Colours</u> <u>1 1/2</u> years.<br><u>with Reserve</u> <u>3 1/2</u> years. | <u>St Anthony</u> |   |                  |

| Place         | Date of Offence | Rank       | Case of Dishonour | OFFENCE   | Names of Witnesses  | Punishment awarded | Date of award or of other proceeding with trial | By whom awarded     | REMARKS |
|---------------|-----------------|------------|-------------------|---|---|--------------------|---|---------------------|---------|
| <u>Hawick</u> | <u>24/6/15</u>  | <u>Pte</u> |                   | <u>Refusing to obey an order of the adjutant the Sgt</u><br><u>for taking about and molesting tenants of property in Kirkcaldy.</u> | <u>Sgt Reid</u><br><u>Sgt Campbell</u><br><u>Pte Ross</u> | <u>5 days plb</u>  | <u>24/6/15</u>                                  | <u>Capt O'Brien</u> |         |
|               |                 |            |                   | <u>Missing</u>  | <u>1 to</u>   |                    |   |                     |         |

To be carried over

Army Form B. 121.