



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 1040

Name in full William Joseph Innott Age 24

Address 12 Water Street

Married Single Height 5.5 Weight 134

Color White Hair Brown Eyes Brown

Other distinguishing marks None

Nearest relative Mrs. W. Innott (Mother)

Address 12 Water Street

Dependents None

Occupation None Present Wage 15/- a month

Previous service None

Decorations None

General Remarks None

Date of Enlistment 15

of the date of death of William Joseph Innott

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

Declared before me this 13th day of Sept. 1914

Witness Edward Wellman

Edward Wellman

DESCRIPTIVE REPORT ON ENLISTMENT.

(To correspond with Entries on the Medical History Sheet.)
Applicable to all ranks.

Reg. No. 1040

Name William Joseph Sinnott

Apparent age 24 years months. Height 5 feet 5 inches.

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

Color:

Distinctive marks Ruddy, Hair: Light Brown, Eyes: Brown

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Mrs. William Sinnott, Battery Road, St. John's

Relationship Mother

Particulars as to Marriage.

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

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

Particulars as to Children.

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES.

Corps in which served	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of 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 <u>18/1/15</u>							<i>[Signature]</i> 25/1/15
Joined at <u>St. John's</u> on <u>18th January '15</u>							
Embarked S.S. Stephens 20 ³ / ₁₅ . Embarked by C. 20 ⁸ / ₁₅ . Disembarked H.M.S.							25/1/15
and embarked for Cairns 31 ³ / ₁₅ . Embarked for Gallipoli 13 ³ / ₁₅ .							
Landed Solva Bay night of 19-20 Sept. 1915. Disembarked and arrived							
H.M.S. 15 ³ / ₁₅ . Proceeded to sea 16 ³ / ₁₅ . Embarked H.M.S. 14 ³ / ₁₅ . Disembarked H.M.S. 23 ³ / ₁₅ .							
Transferred 1-7-16 Admitted Gen. S.P.N. (H.M.S.) 27 ³ / ₁₅ (H.M.S.) Involved to Cyprus 8-7-16							
Admitted H.M.S. 8-7-16 Embarked H.M.S. 7-10-16							
Boarded at Stanley down Camp near 1-11-17. H.M.S. 21 ³ / ₁₅ .							
Attached Headquarters Newfoundland 1-11-17.							
Discharged medically unfit H.M.S. 23-8-18.							
Total Service forfeited as above							

Total Service towards Engagement to 23-8-18 (date of discharge) 3 years 218 days

" " " Pension " " " " " " " " " " " "

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					years	days	years	days	
Service towards limited engagement reckons from <u>18/1/15</u>									
Joined at <u>St. John's</u> on <u>18th January '15</u>									
<u>Dischd. St. John's Aug. 31/1918</u>									
Total Service forfeited as above									
Total Service towards Engagement to (date of discharge) ... years ... days									
" " " Pension " " " " " " " " " " " "									

Copy

COPY,

This space to be left blank for the Chelsea Number.



Proceedings on Discharge

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 10740 Army Rank Serjeant

Name Simons Wm. Joseph
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps The Royal Newfoundland Regt.

Battalion, Battery, Company, Depôt, &c.
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge August 23rd 1918

Place of discharge St. John's, Nfld.

1. Description at the time of discharge.

Age <u>27</u> years <u>1</u> months	Descriptive marks. <u>Incision on right hand.</u> <u>contraction of ring & little fingers</u>
Height <u>5</u> feet <u>6</u> inches	
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.	
Complexion <u>fair</u>	
Eyes <u>brown</u>	
Hair <u>dark brown</u>	
Trade <u>Labourer</u>	
Intended place of residence (To be given as fully as practicable) <u>Battery Road</u> <u>Battery Road</u> <u>St. John's.</u>	

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of being no longer physically fit for war service on account of wounds received in action

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character :-

4. Character awarded in accordance with King's Regulations :-

To be filled in on the soldier quitting the Colours.

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 480 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

* Strike out if not applicable.

[OVER.

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class _____

6. Campaigns, Medals and Decorations

Certificate of education

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

(Place) _____

(Date) _____ Commanding _____ Battn. _____ Regiment.

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) St. John's Wld. H. J. Sinnett (Signature of Soldier.)

(Date) Aug 31st 1918. C. Walsh (Signature of Witness.)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. *Additional certificate in the case of a soldier who takes his discharge at his own request.*

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier.)

10. *Statement of service.*

Service towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service " " _____ (the date of confirmation of discharge) ... " " "

Total ... " " "

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for _____ (date)

(Place) _____

Signature _____

(Date) _____

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

No reservations

W. J. ^{his} ~~W. J.~~ Bennett
C. Walsh

LAST PAY CERTIFICATE

DUPLICATE
MAIL COPY

N.F.P./94

To be rendered for all ranks on discharge, transfer to other units, or on return to Newfoundland in accordance with C.L./19, 28/5/17.

Regtl No. 1040 Rank Rt Name Smith J Unit Royal Newfoundland who was Repatriated
to Newfoundland on 20/7/18 Authority _____ Cause _____

Posted: _____

DR.

STATEMENT OF ACCOUNT

CR.

PERIOD: From 6.7.18 to 20.7.18	PARTICULARS					PARTICULARS				
	£	s	d	£	s	d	£	s	d	
Balance Dr. from						Balance Cr. from				
Allotment 15 days @ 50¢	17	00	1	10	10	Pay 15 days @ \$1.00	15	00		
Cash Payments:						Field Allowance 15 days @ \$1.00	15	00		
12-7-18				15	0	Other Allowances days @ \$	16	50	13 7 10	
19-7-18				15	0	Other Credits:				
Other Debits:										
Barrack Damages					6					
Office stops				2	5					
Total Debits						Total Credits				
Balance due by Paymaster				1	4	1				
				13	7	10				

I have carefully examined this Statement of Account and find it to be a correct extract from the Pay Book of

F. 44
(Place) Windsor 20-7-18 191

(Sgd.) J. G. A. Reynolds (Lieut.)
P.O.C. " " Company.

Made up/Checked in accordance with information received in the Pay & Record Office and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,

A. D. Minshall Maj.
Chief Paymaster & Officer i/c Records.

JUL 1918 191

7 JUL 1918



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 *Sennott W. J.*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *1040*
 Intended address *St John's*
 Height on discharge *5* Feet *6*
 Color of hair on discharge *Dark Brown*
 Complexion *Fair*
 Color of eye *Brown*
 Descriptive Marks *—*
 Figure on discharge *Medium*
 Christian name of Father *William*
 Christian name of Mother *Catherine*
 Wife's maiden name in full *—*
 Date and place of marriage *—*
 Christian names of children *—*
 Place and date of soldier's birth. *St John's July 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) *William J. Sennott* (Rank) *Plc*

Station *St John's* Date *Aug 1918*

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.

W. Borden
 Medical Officer i/c Hospital.
 Unit or Command Depot.

Station *St John's* Date *Aug 16/18*

*Witness
 P. Hammond
 Sfc*

WFB/ME

February 19. 1920

To:- Major Howley
G. I. C. Pay and Records
Captain Murphy
Employment Officer
G. Pomeroy)
(Accountants
C. McGrath)

From:- V. O.

W. Sinnott 1040

This is to certify that the man named in
the margin will complete his course on February
28th. If any extension is, in the meantime,
granted I will notify you.

W.W. Beckall
Vocational Director

FORM K

Nº 882



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, William Sinnott, Regl. No. 1040

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

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
845	Mother	Catherine Sinnott	Battery Road	50
Total Allotment, \$				

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

(Sig.) W. S. Keefe
 Officer Commanding
St John's Company
Mar 4th 1915

(Sig.) William Sinnott
 (Rank) Private
His mark witness Jun 7. 1915

W. Sinnott.

CR. 1040

P. R. O.

y

SYPHILIS CASE-SHEET.

Regtl. No. *1040* Rank and Name *175 Sinnott W* Corps *2/1 Highland*
 Placed on Syphilis Register at *Aberdeen* on *20.7.17* No. in Register *85.*
 Disease contracted at *?* Primary sore appeared on (date) *?*

CONDITION WHEN PLACED ON REGISTER.

Primary sore—character and site *Hard chancres outer surface prepuce S^o.*
 Lymphatic glands *Several adenitis. Bubo l. groin.*
 Skin (nature and distribution of rash) *nil.*

Mucous membranes *Throat red & inflamed.*

Other symptoms *nil.*

COPIES SENT		
To	No.	DATE
M. of M.	<i>1779</i>	<i>27/2/23</i>
O.C. 1st LH.		<i>3-AUG 1916</i>
" 2nd LH.		

Examination of exudate from sore—Spirochaeta Pallida (present or absent) *not done.*
 Examination of blood serum—Method employed (original or modification) *w.*
 Wassermann reaction (Result (positive or negative)) *Positive +*

Station *THE SCOTISH GENERAL HOSPITAL* Date *20.7.17* Signature of M.O. *Albrow. Capt Name*
ABERDEEN.

Struck off Syphilis Register at _____ on _____

Cause of being struck off Register $\left(\begin{array}{l} (a) \text{ Recovered} \\ (b) \text{ Transferred to Army Reserve} \\ (c) \text{ Discharged from Army} \end{array} \right)$

Station _____ Date _____ Signature of M.O. _____

M.E.—On completion of a course of treatment a red line to be drawn across the page, and the date when the next blood test is due to be entered in red ink below the line, e.g., "Blood test due 15.5.17."
 The date and result of the blood test to be entered; and if negative, the date on which the next blood test is due to be also entered.

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Wassermann Reaction		Treatment			Inj. Calylt. grs.	Signature of M.O. (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialed)
			Weight (lb.)	Result	Arterial	Mercurial			
						Other Methods	Other Methods		
THE SCOTTISH GENERAL HOSPITAL ALBANY	12.7.17	Admitted to Hospital							Arbrazee Capt AMF AMF AMF AMF AMF AMF AMF AMF AMF AMF AMF AMF AMF
	20.7.17	WASSERMANN POSITIVE.		M +					
	16.7.17		146	N				3	
	19.7.17		146	N			1	3	
	23.7.17		146	N			1	3	
	30.7.17		146	N			1		
	7.8.17	Nores healed.	146	N			1		
	14.8.17	Throat no longer inflamed. General condition improving.	146	N			1	4	
	21.8.17		146	N			1	5	
	27.8.17		146	N			1		
	28.8.17		146	N			1		
	4.9.17		146	N			1	5	
	11.9.17		146	N			1	5	
	21.9.17	WASSERMANN NEGATIVE. No Active Signs	146	N			1	5	
24.9.17	DISCHARGED FROM HOSPITAL.			M -					
		Next blood test due 21-XII-17							
J. H. L. & Co Military Hos.	27/5/17	Wassermann negative.							AMF Capt W. H. H.

VETERANS AFFAIRS
 AFFAIRES DES ANCIENS COMBATTANTS

RG 38 Vol. 542
 File/Dossier: 1040
 SINNOTT William Joseph

Form
O 64
1940

MEMORANDUM.



From M. O. Ruffa Regt.

From

To R. Arch Hillier.

To Mrs. Ruffa Regt.

ANSWER.

May 28 1918

May 31st 1918.

Refr. No 1040 P. Linnett
sent to you in May 16th
for blood test. can you
let me know finding
please

Ref. No. 1040 P. Linnett
The above man's
Wassermann Test.
Result is Negative

[Handwritten signature]
Camp

4

FORM to be used (1) when a Soldier is placed under Medical Surveillance for Venereal Disease. (2) for furnishing information between Medical Officers when cases are transferred from one Station to another.

Corps	Company	Regimental No.	Rank and Name	* Date on which case originally came under treatment
<i>21 Newfoundland</i>	<i>A</i>	<i>1040</i>	<i>Pte Summott 15th J</i>	<i>12-7-17</i>
REMARKS				
<i>WARTIME MARK POSITIVE 20-7-17.</i>				
<i>21-9-17.</i>				
<i>Next blood test due</i>				
<i>21-XII-17</i>				

To *M. O. 21 Newfoundland*

Station and date *24-9-17*

Al Ruser Capt Ram C

The Officer who places the man under surveillance will prepare this form in duplicate. One copy will be forwarded to the Officer Commanding, and the other to the Medical Officer who will have the surveillance of the man. When any circumstances arise likely to interfere with the regular attendance of men on the continued treatment list, such as transfer to another station, musketry course, imprisonment, and especially furlough, their Commanding Officer will apprise the Medical Officer of the fact.

* When cases are transferred Medical Officers will be careful to insert the date on which the case was first placed on a syphilis register, irrespective of the number of registers the case may have passed through.

FORM to be used (1) when a Soldier is placed under Medical Surveillance for Venereal Disease. (2) for furnishing information between Medical Officers when cases are transferred from one Station to another.

Corps	Company	Regimental No.	Rank and Name	* Date on which case originally came under treatment
71 Newfoundland	H	1040	Pte Simmott Wm J	12.7.17
				REMARKS
				20.7.17
				21.9.17
				Next blood test due
				21-XII-17

To C. O. 71 Newfoundland

Station and date 24.9.17

AM Raser Cap Tam ©

The Officer who places the man under surveillance will prepare this form in duplicate. One copy will be forwarded to the Officer Commanding, and the other to the Medical Officer who will have the surveillance of the man. When any circumstances arise likely to interfere with the regular attendance of men on the continued treatment list, such as transfer to another station, infantry course, imprisonment, and especially furlough, their Commanding Officer will apprise the Medical Officer of the fact.

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LAST PAY CERTIFICATE

N.F.P. / 94

To be rendered for all ranks on discharge, transfer to other Units, or on return to Newfoundland in accordance with C.L. / 18, 26/5/17.

Regtl. No. 1040 Rank Pte Name Smith W. Unit R. Field. who was repatriated
 to Nfld. on 20/7/18 Authority _____ Cause _____

STATEMENT OF ACCOUNT

PARTICULARS	\$				PARTICULARS	\$			
	£	s	d			£	s	d	
Balance Dr. from					Balance Cr. from				
Allotment 18 days @ 50	17	50	1	10	Pay 18 days @ \$/00	15	00		
Cash Payments:					Field Allow 18 days @ \$/00	11	00		
12. 7. 18			15	0	Other Allow 18 days @ \$	16	50	1	37
19. 7. 19			15	0	Other Credits:				
Other Debits:					Total Credits				
Barrack Dages.				6	Balance due to Paymaster			12	7
Misc. Stg.				5					10
Total Debits									
Balance due by Paymaster			12	7					

I have carefully examined this Statement of Account and find it to be correct extract from the Pay Book of

S. Boy
Winchester
 (Place) _____ (Date) 28.7.1918

COPY SENT TO
 O.C. H.Q.
 ST. JOHN'S N.F.P.
 N.F.P. 98 No. 12186
 DATED 30 JUL 1918

G. A. Rendell
 C.O. 7 Company Link
 to / /

Made up/Checked in accordance with information received in the Pay & Record Office and is therefore subject to amendment if and as may be found necessary.
 Pay & Record Office, London, 191

Chief Paymaster & Officer i/c Records

Temp. n/c

NO. 1040 RAVN Private NAME W J SmittCO. D.ALLOTMENT. 50

Amount

PAY

Dr. Balance

Credit Balance 17/3 191

Hospital

1 100 ✓

Exchange " 191

12 7 9 ✓

PAY @ 11 RATE

A.S. 84

From 1/3 To 27/6 - 195 days

Acq. Acc.

8 2 0 ✓ 60

17 ✓

24 0 10 ✓

Surv. Pay.

2 5 ✓

From

To

days

136 8 7 ✓

Cap

2 0 ✓

P. & R.
Milport

4 19 0 ✓

From

To

days

Handwritten signature

14 15 5 ✓

From

To

days

No. 11476/1135 ✓ *J. Coy.*

N.F.P./79.

NEWFOUNDLAND CONTINGENT

From:

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

Officer Commanding,
The Royal Nfld. Regiment,
Witchester.



Handwritten scribbles and initials, possibly 'D.H. 1918' and 'J.P.' with a large '7'.

17th, July 1918

Handwritten: July 20th 1918

Subject: 1040, Pte. W. Sinnott

Receipt hereunder.
LIEUT. COLONEL.
OFFICER COMMANDING THE ROYAL NEWFOUNDLAND REGIMENT
Batt'n
Royal Newfoundland Regiment

With reference to the following telegram (6407) from the Hon. Minister of Militia, received

"Pay to 1040 Sinnott £4. 0. 0

Received the sum of Four
pounds on account of
cable remittance from Newfoundland.

Draft £4. 0. 0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

Handwritten signature: W. Sinnott
Handwritten: this list made in London

Handwritten signature: A. A. Sinnott
Chief Paymaster & O. i/c Records.

No. 1040 Rank Pte

Medical Report on an Invalid.

Station Hagley Down Camp
Date July 1st 1918

1. Unit 8th BATTN. ROYAL NEWFOUNDLAND REGT.

7. Former Trade or Occupation } Labourer.

2. Regimental No. 1040

7A. If with previous service in Army, state—

3. Rank Pte

(a) Former Unit;

4. Name SINNOTT, WILLIAM. 405

(b) Regimental No.;

5. Age last birthday 27 yrs

(c) Date of Discharge;

6. Enlisted { on Jan 18th 1915
at St. John's, Nfld

(d) Cause of Discharge. } No.

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

Left Right Hand.

Statement of Case.

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

9. Date of origin of disability.

1st July 1916.

10. Place of origin of disability.

Beaumont Hamel

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

He states. That during the advance he was struck on head a piece of shell-fragment from a whizzbang which must have hit head. He landed in England and was 82 days in the 3rd London Sec. where they removed the 4th metacarpal. Vide DP 8774.

COPIES SENT		
TO	NO.	DATE
1. G. O. C.	<u>200/405</u>	<u>26 JUL 1918</u>
2. ST. J.		
3. 2ND LH		

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—

- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
- (b) constitutional or hereditary, and not aggravated by service during the present war.
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

wounded in active service.

na.

na.

13. What is his present condition?

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

- On drawing of hand there is an incision 3" long: the ring and little fingers are contracted - limited movement of 2nd phalanx. The hand is cramped, and he had not the power of clenching his fist upon anything.

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

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

na.

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

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

na.

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

yes.
Sequesterotomy.

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

no.

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

na.

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

na.

20. Do you recommend—
(a) Discharge as permanently unfit, or
(b) Change to England?

Discharge as permanently unfit for active service.

DRK. Capt. R.A.M.C.
Officer in medical charge of case.

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

Station Hazley Wood Camp _____
Date July 1st 1916 _____
Officer in charge of Hospital.

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

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

Space to be left blank
for the Colours Number.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 10750 Army Rank Private
Name Simmott W. J.
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps _____

Battalion, Battery, Company, Det., &c.

(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge _____

Place of discharge _____

1. Description at the time of discharge.

Age _____ years _____ months

Height _____ feet _____ inches

Chest measurement { girth when fully expanded _____ ins.
range of expansion _____ ins.

Complexion _____

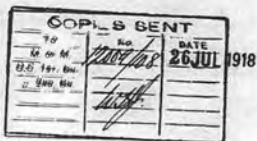
Eyes _____

Hair _____

Trade _____

Intended place of residence
(To be given as fully as practicable)

Descriptive marks.



(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of _____

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character:—

4. Character awarded in accordance with King's Regulations:—

To be filled in on the soldier quitting the Colours.

Certified that the above is an accurate copy of the character given by me on Army Form B. 268* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 268 has been issued to*

* Strike out if not applicable.

27/12/16

Report Form
APRIL 1916

to be used only for Special Reserve Recruits, and for Special Reservists enlisting in the Regular Army.

MEDICAL HISTORY

Surname Sinnott OF Christian Name William Joseph

Table 1.—GENERAL TABLE.

Birthplace:—Parish..... County.....

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	15	Jan		
Declared Age.....	24	years		
Trade or Occupation.....	Labourer			
Height	5	feet	5	inches
Weight	134 lbs.			
Chest Measurement (Girth when fully expanded...)	35 inches			
(Range of expansion..)	37 1/2 inches			

Vaccination Marks	Right		Left	
	Arm	Number	Arm	Number
When Vaccinated	1901			

Vision	R.E.—V=		L.E.—V=	
	Right	Left	Right	Left

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to Cause Rejection

COPIES SENT		
No.	DATE	
1st. En.	26 JUL 1918	
2nd. En.		

Approved by (Signature)

Cherry Macpherson
Cpt.

(Rank)

Medical Officer.

Medical Officer.

Enlisted

at	on	day of	1915	on	day of	1915
at	on	day of	1915	on	day of	1915
St John's	18	Jan				
Corps.			1040	Corps.		

Joined on Enlistment

1st Mfd Regt.

Transferred to

Became non-effective by

on day of 191 on day of 191

(Signature)

(Rank)

[P. T. O.]

W.K. 80

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

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In cases of syphilis, admission and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
8 th LONDON GENERAL HOSPITAL WANDSWORTH.	9	7	16	28	9	16	C.S.W. VIII & IX 1	82	Wound in & cure 1/7/16 - on adm. sept. wound hand & foot. Op. 2 ^d metacarpal bone removed ft. removed from foot. Convalescent	W. S. S. S. S. S. S. Capt. R. A. M. E. T.
4 th SCOTTISH GENL. HOSPITAL GLASGOW.	27	11	16	27	12	16	Gonorrhoea 20	30	Transferred to Brighton Grove Military Hospital Newcastle-on-Tyne.	J. B. M. S. S. S. S.
BRIGHTON BRIGADE HOSPITAL NEWCASTLE-ON-TYNE	27	12	16	10	1	17	Gonorrhoea	15		W. H. O. G. S. S. S. S. (G. W. S. S. S. S. S.)
1 st SCOTTISH GENL. HOSPITAL ABERDEEN.	12	7	17	24	9	17	Syphilis 42	74	24-9-17 ROSBERMAN NEGATIVE. 21-9-17. No Active Signs Next Blood test due 21-XII-17 Course in 3-3grms Salysol for 9 Hrs.	Alf. P. S. S. S. S. Capt. R. A. M. E. T. 24-9-17.

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
27 JUN 1918	<p>Boarded at Hayley Down Camp Marked "E" Cat <i>W. J. Copson</i> <i>Major Rame</i> <i>not</i> <i>Capt Rame</i></p>

TABLE IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
<i>Sr John Mcell.</i>	<i>18 Jun. 15</i>	<i>20 Mar. 15</i>			
<i>To S. "Stephans"</i>	<i>20 Mar. 15</i>	<i>22 Mar. 15</i>			
<i>To S. ORDUNA</i>	<i>22 Mar. 15</i>	<i>30 Mar. 15</i>			
<i>Edinburgh Castle</i>	<i>30 Mar. 15</i>				

Sinnott, W. J.

1040

Ray Sept.



THE ROYAL NEWFOUNDLAND REGIMENT
HEADQUARTERS

St. John's, Newfoundland,

August 22nd. 1918 191

From :-

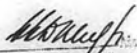
Assistant Adjutant / Headquarters

To :-

Paymaster and Officer i/c of Records
' Militia ' Dept.

IO40, Sinnott, Wm. J. (Pte)

Above noted man has been recommended for discharge as permanently unfit, by Medical Board, held on Saturday, August 17th. I am sending him herewith for your attention, and necessary action please.


Deputy Assistant Adjutant
Depot The Royal Newfoundland Regiment
St. John's, Nfld.

LAST PAY CERTIFICATE

ORIGINAL

H.F.P. /94

To be rendered for all ranks on discharge, transfer to other Units, or on return to Newfoundland in accordance with C.L. /18, 26/5/17.

Regt. No. 1040 Rank Pte Name Smith W. Unit R. Hld. who was repatriated
 at W. H. on 1/1 Authority STATEMENT OF ACCOUNT Cause

PARTICULARS						PARTICULARS					
	£	s	d			£	s	d			
Balance Br. from					Balance Cr. from						
Allotment 15 days @ 50	17	50	1	10	10						
Cash Payments:					Pay 15 days @ \$100	15	00				
12-7-18				15	0						
19-7-18				15	0						
Other Debits:					Field Allow 15 days @ \$10	1	50				
B. charges					Other Allowances days @ \$	116	50	3	7	10	
Miscellaneous				2	5						
Total Debits				4	1						
Balance due by Paymaster	17	51	10						1	2	10

CS. Total Debits
 Balance due by Paymaster

Total Credits
 Balance due to Paymaster

I have carefully examined this Statement of Account and find it to be correct extract from the Pay Book of

W. H. Coy
Wimborne 25-7- 1918
 (Place) (Date)

S. A. Russell
 Lieut.
 C. G. P. Company
 100 JUL 1918
 Chief Paymaster & Officer in Charge Records

Made or issued in accordance with information received in the Pay & Record Office and is therefore subject to amendment if and as may be found necessary.
 Pay & Record Office, London,
 27 JUL 1918 191

OK
W.H.

St. John's.

April 21, 1919.

Capt. J. M. Howley,
Militia Department.

Dear Sir:-

Please pay to Messrs. Conroy, Higgins & Hunt the sum of \$179.90, being balance of pay due to me, as they have advanced me this amount.

I have spoken to Lieut. Colonel Rendell concerning same and he has consented to my making this arrangement in view of the fact that I am about to leave the Colony.

Yours very truly,

^{his}
William X. Sinnott
mark



Witness

Chas. E. Hunt

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

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

Christian name..... *William* 2. Surname..... *Sinnett*
3. Rank..... *Private* 4. Regt. No. *1040*

5. Address in full to which future payments of gratuity are to be forwarded..... *East Battery, St. John's*

6. Date of enlistment in the Regiment..... *Jan. 8/15*

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

8. Relationship of such dependents..... *Mother*

9. Address in full of such dependent..... *East Battery, St. John's*

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *No.*

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

12. Give total length of time which you served on active service, whether in Mfld. or Overseas..... *From Jan 8/15 to*

Sept. 1918.

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

Not applicable

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

*Clothing allowance \$60.
(Pension of \$30 - per month)*

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

Yes

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

No

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

No

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

No

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

19. Are you now serving in the Regt.?..... If not give:- (a) Date of discharge..... (b) Reason for discharge.....

Sept. 1918

No

Physical Unfitness

20. Did you at any time serve at the front in an actual theatre of war? If so give particulars of places, and dates of such service.....

*Gallipoli - From Sept. 1915 to Feb. 1916
France - From March 1916 to July 1916
Wounded at Battle of the Somme*

21. (a) Are you receiving treatment from the Civil Re-Establishment Com.

(b). If so, are you in receipt of full pay and allowances from that Committee.....

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

Signature of Applicant: *William X. Linnott*
 Place of Residence: *East Battery St. John's*
 Declared before me at: *St. John's, Nfld.*
 This *25th* day of *Feb* 191*7*

John W. G. G. G.

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

POST DISCHARGE PAY.				Net amount due
Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	
17.12.18	100.00		6.00	420.00
			less PDP	100.00
				<u>319.00</u>

Certified Correct.

Prynaster.

March 6th 1920

Major Howley
O. I. C. Records

Please pay to W. Sinnott, 1040
the sum of eleven dollars and eight cents
in payment of allowance for week ended this date
and charge same to Civil Re-establishment Committee

\$11.08

Pension \$12.50

W. Sinnott
W. Sinnott

Vocational Officer

ACCOUNT	
CH. NO.	31413
INITIALS	<i>W.S.</i>
INL. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN LEDGER	INITIALS

W. Sinnott

April 17th 1920

Major Howley
O. I. C. Records

Please pay to W. Sinnott, 1040
the sum of forty seven dollars and fifty cents
in payment of P. & A. Bonus
and charge same to Civil Reestablishment Committee

\$47.50

Pension \$12.50

A.C.A.

No.	35290
Pay to the order of	<i>W. Sinnott</i>
Pay to the order of	<i>[Signature]</i>
Pay to the order of	<i>[Signature]</i>

W. Sinnott
Vocational Officer

W. Sinnott

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 35⁰⁰/₁₀₀

Feb 14 19 19

Received from the First Newfoundland Regiment
the sum of Thirty Five ⁰⁰/₁₀₀ Dollars.
on account of Pay. Clothing
balance

W. J. Bennett
mark

CA. No. 9756	Initials. <i>ew</i>
Pay Ledger 925	Initials. <i>wn</i>
Gen. Ledger	Initials.

Regtl. No.

Rank
W. J. Bennett

No. 1040

Rank

Pt.

Name

Sinnott W

1918 - 1919

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 44²⁴

Aug 31²⁴ 1918

Received from the First Newfoundland Regiment
the sum of forty four ²⁸ Dollars.
on account of Pay.
balance

W. J. X. Bennett
his mark

Regtl. No. _____ Rank Witness Eve

Ck. No.	<u>1994</u>	Initials.....	<u>EW</u>
Pay Ledger....	<u>183</u>	Initials.....	<u>EW</u>
Gen. Ledger.....		Initials.....	<u>EW</u>

No. 1040 Rank PL

Name Sinnott W J.



Casualty Form - Active Service.

Regiment or Corps Newfoundland
 Rank plc. Surname Sinnott Christian Name W. J.
 Religion R.C. Age on Enlistment 24 years 11/15 months
 Enlisted (a) 11/15 Terms of Service (a) 1 year Service reckons from (a) 11/15
 Date of promotion to present rank _____ Date of appointment to lance rank _____
 Extended Duration of war Re-engaged 15/1/15 Qualification (b) _____
 or Corps Trade and rate _____
 Occupation _____ Signature of Officer _____

COPY

Report		Place of Casualty	Date of Casualty	Remarks Taken from Army Form B-22, Army Form A-30, or other official documents.
Date	From whom received			
		Embarked <u>St. John's</u>	<u>20.3.15</u>	
		Disembarked <u>Alexandria</u>	<u>1.9.15</u>	
		<u>Emb. for Gallipoli</u>	<u>13.9.15</u>	
		<u>Emb. at Port. Suez</u>	<u>14.3.16</u>	
		<u>Disembarked Marseilles</u>	<u>22.3.16</u>	
	<u>1600 H. Z.</u>	<u>Ad. SW. R. O'Hare</u>	<u>1600 H. Z.</u>	
		<u>Etaples</u>	<u>2/7/16</u>	<u>HA. 522</u>
	<u>1st Lt. Dupre</u>	<u>Trans. to England</u>	<u>8/9/16</u>	
		<u>Sgt. W. E. Clark</u>		<u>Capt</u>
		<u>for 2 1/2 years</u>		

(a) In the case of a man who has been engaged for, or attached into, beyond B. Army Reserve, particulars of such re-engagement or attachment will be entered.

(b) Signaller, Shipping Branch, &c.

Army Form W. 3854.

WILL. 774

Name Sinnott W. J.

Regtl. No. 1040 Rank Pte.

Regiment ROYAL NEWFOUNDLAND REGIMENT.

Date of:— 5/2/18

Receipt

~~_____~~

Transfer

Final disposal and
to whom sent

C.R. 1040

RECEIPT.

I hereby certify that I have received the 1914-1915

STAR.

No 1040 Name W^{his} + Sisscott
mark.

Witness. W. Hardy

Date 5/12/19

Place St John's

C.R. 10410

RECEIPT FOR ISSUE OF
RIBAND OF 1914-15 STAR.

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

Name... ^{his} *W. J. Pinnott*...

Date *21/6/19*.....

Witness. *A. Parry (Cpl)*

Place *St. John's*.....

Please sign this and return to Department of Militia.

CIRCULAR LETTER

St. John's,

March 13th 1919.

Riband of 1914-15 Star.

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

Lieut. Colonel.

Chief Staff Officer.

CLAIM FOR ISSUE OF RIBAND
of 1914-15 STAR.

Department of Militia,

St. John's.

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

I certify that I am entitled to this issue, having served on* *Gallipoli* from *Sept 19th* 1915 to *Dec* 1915. (*Examination*)
(Date) *2/19/12* (NO) *1040*... (Rank) *Pte*... (Name) *Sinnott W.*
(Place) *St. John's.*

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

C.R 1040

Extract from Daily Orders Part 11 Unit The Royal, NZld.

Regt. Sth. John's 3/9/18.

1040 Pte. W. Sinnott,

Discharged having been found medically, is struck off the strength from 23-8-18.

C.R. 1040

Extract from list of men of the Royal Newfoundland Regiment discharged on various dates.

1040 Pte. W. Sinnott,

Discharged 23 - 8 - 18, Medically unfit

C.R. 1040

Extract from Daily Orders part II, from Unit the Royal
Hild. Regt., St. John's, dated August 5, 1918.

The following men returned from Overseas and reported
to Depot August 4th.

#1040 Pte. W. J. Sinnott.

C.R. 1040

Extract from Casualties received from Pay & Record
Office. London, Sep.30,1916.

Discharged from Hospital, Granted Furlough 28-9-16 to
7-10-16.

1040 Pte. W. Sinnott,

Light Duty Class B.

C.R. 1040

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P. & L R. O. Sep. 30th. 1916.

1040, Pte W. Sinnott. ✓

Discharged from Hospital and granted furlough from 28/9/16 to 7/10/16.

Fit for Light Duty Class B.

C.R. 1040

Extract of Communication List received from P. & R. O. Aug. 15th 18.
From Officer Commanding 3rd London General Hospital,
To Officer i/c Records Newfoundland Contingent 58 Victoria St. S.W.

1040, Pte Wl Sinnott. ✓

To Brooklands Mil. Hosp. Weybridge 11.8.18.

In accordance with your Memo of 30th June, I beg to inform you that
the undermentioned man was transferred to the Convalescent home on 10/8/18

(Sgd) Horace Fagen, Capt. R.A.M.C.T.

Registrar, R.A.M.C.T.

3rd London General Hospital,

Wandsworth S. W.

Wandsworth S.W.,

12th August, 1918.

C.R. 1040

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

(Extract from Army Form B 213, from O.C. 1st. Nfld. Regt.
dated 11/7/16.)

#1040 Pte. W. Sinnott. ✓

Wounded in Action 1/7/16.

C.R.

1040

Extract from Casualties received from Pay & Record
Office, London, Jul.19th,1916.

Admitted to 3rd London General Hospital Wandsworth S.W.
July 8th 1916.

1040 Pte. W.J. Sinnott.

G.S.W. R. Foot, R. Hand.

C.R. 1040

Extract of Casualty List received from P.&.R.O.
July 10th. 1916.

1040, Pte W.J. Sinnott. ✓

At 3rd London General Hospital Wandsworth Stn. July 1916
G.S.W. Right Foot Right Hand.

C.R. 1040

NEWFOUNDLAND CONTINGENT

Extract of Casualty List received from P.S.R.O.

July 10th. 1916.

1040, Pte W. Sinnott. ✓

1st Newfoundland B. (SW) Hand R.

Act. 1 Can.

Men. Hon. Staples 2nd July 1916.

C.R. 1040

Extract from Nominal Roll of "D" Co. 1st Bn. Nfld. Regt.
Embarked Devenport for Active Service, 20-8-15.

1040 Pte W.J. Sinnott.

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

C.R. 1040

Extract from Nominal Roll of Draft embarked for.
Overseas per S.S. ~~Stephano~~ March 20th 1915.

NO. 7. Platoon.

1040 Pte. W.J. Sinnott.

C.R./ 1040

William J. Sinnott was attested for General Service
with the NEWFOUNDLAND ENGINEERS onJan. 18th 1915.
Regimental No. 1040 was allotted to Pte William J. Sinnott.

AUTHORITY:

Record Officer

Dept. of Militia,

March 20th 1913.

Casualty Form-Active Service.

876

Regiment or Corps Newfoundland
 Retirement No. CR 1040 Rank Pte Name Sinnott W J
 Enlisted (a) Jan 18 15 Terms of Service (a) 1 year Service reckons from (a) Jan 18 15
 Date of promotion to } present rank } Date of appointment } to lance rank } Numerical position on } roll of N.C.Os. }
 Extended Re-engaged Dec 4 15 Qualification (b) _____

Report Date	From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
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COPIES SENT

TO	NO.	DATE
M or M	<u>10/15/15</u>	<u>26 JUL 1918</u>
O.L. Ser. Lic.	<u>[Signature]</u>	
" 2nd Div.	<u>[Signature]</u>	

Embarked St. John's, Nfld.	20.3.15	
Disembarked Alexandria	1.9.15	
Embarked for Gallipoli	13.9.15	
EMBRD FOR GALLI	14.3.16	
Disembk'd MARSEILLE S	22.3.16	

1st Lt. [Signature] 2nd Lt. [Signature] 1st Lt. [Signature]

[Signature]

[Signature]
 Transferred to England

[Signature] CAPTAIN,
 FOR O.110 INFANTRY RECORDS
 G. H. Q.; 8th ECHELON.

(4) 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.
 (5) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. (P.T.O.)

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.

Forms
B. 121
2A

Regiment of

Newfoundland

Signature of O. C. Company

Number of Sheet

J. L. ...

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<i>1040 Sinnott W</i>	Age on	<i>24</i> years - months	<i>Cabourer</i>	
Joined	<i>10-18-79</i>	Place and Date of Enlistment	<i>St. John's Jan 18 1915</i>	Religion	
Joined	<i>22/10/16</i>	Date	<i>10-10-16</i>	<i>R. Catholic</i>	
Joined	Date	Period of	{ with Colours years with Reserves years	Place of Birth	
Joined	Date			<i>St. John's</i>	

Place	Date of Offence	Rank	Case of Disobedience	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order cancelling with total	By whom awarded	REMARKS
<i>Edinburgh Castle</i>	<i>5/4/15</i>	<i>Plt.</i>		<i>absent from Tattoo to 8:30 PM, April 2</i>	<i>Capt. Munn</i>	<i>Forfeit 2 days pay 3 days BB</i>	<i>5/4/15</i>	<i>Capt. Marsh</i>	<i>2 days pay</i>
<i>do</i>	<i>25/4/15</i>			<i>Breaking out of barracks (illegible) when on quarantine</i>	<i>Sgt Murphy</i>	<i>3 days BB</i>	<i>1/5/15</i>	<i>Lt. Col. Burton</i>	
<i>do</i>	<i>1/5/15</i>			<i>Absent from all details parade 5:30 - 9:30 PM</i>	<i>Sgt Greene</i>	<i>6 days BB</i>	<i>3/5/15</i>	<i>Capt. Marsh</i>	
<i>do</i>	<i>2/5/15</i>			<i>5 Dirty boots on barracks parade</i>					
<i>do</i>	<i>1/5/15</i>			<i>neglect of duty</i>	<i>Sgt Duff</i>	<i>warned</i>		<i>do</i>	
<i>Stobbs</i>	<i>13/4/15</i>			<i>absent from church parade</i>	<i>Cpl Bethune</i>	<i>2 days C.C.</i>	<i>14/4/15</i>	<i>do</i>	<i>2 days</i>
	<i>22/4/15</i>			<i>absent from garrison parade 10 p.m.</i>	<i>Cpl Stale</i>	<i>Forfeit 1 day pay 3 days C.C.</i>	<i>23/4/15</i>	<i>do</i>	<i>Forfeit 1 day pay 2 days</i>
	<i>28/4/15</i>	<i>1</i>		<i>Drunk in Camp at 3.15 pm.</i>	<i>Sgt Rean</i>	<i>4 days C.C.</i>	<i>29/4/15</i>	<i>Lt. Col. Burton</i>	<i>2 days</i>

To be carried over

COPIES SENT	TO	NO	DATE
	1	1	26 JUL 1918
	2	1	
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M O F M		ALL INFORMATION	

Army Form B. 121.

W. Simcox #1040.

Brought forward

Shoba	1 ^{7/15}	Pk	Absent from 2pm pioneer parade.	Cpl. m mugit.	2 days cc.	2 ^{7/15}	Sept 7 th March	AK
	3 ^{7/15}		Absent from all defaulter parades 5.30 to 9.30 pm.	Cpl Noail.	4 days cc.	5 ^{7/15}	do.	FKK
	11 ^{7/15}	2	Drunk at 10.15 pm and using obscene language.	Sgt Troine Chanay.	Fines 1/3 5 days cc.	12 ^{7/15}	Lt Col Burton.	FKK
	17 ^{7/15}	3	Drunk in Hawick at 8.35 pm.	Sgt Garrison Garrison	Fines 5/- 7 days cc.	10 ^{7/15}	do.	FKK
	19 ^{7/15}		Absent defaulter parade 5.30 to 9.30 pm.	Cpl m. Vail.	} 48 hours. 2.5/-	} 22 ^{7/15}	} do.	} forfeits 2 days pay. FKK.
	20 ^{7/15}		absent tattoo till tattoo 20 th defaulter when absent all defaulter parade 5.30 to 9.30 pm.	Cpl Fowlow. Cpl m. Vail.				
	21 ^{7/15}		Drunk in Carlisle tawic h. 10.35 pm.	Sgt Gunnell McLachlan	Fines 5/- 2 shrs 2/-	2 ^{7/15}	do.	FKK
	18 ^{7/15}		Deficient water Bath.	Sgt Duley	20 more paid loss.	12 ^{7/15}	Lt Col Burton.	FKK
Chapman	12 ^{7/15}							
Reynolds, Sgt.	10.11.16		I Absent from 2 PM Parade.					
	11.11.16		II 7 am. 2.10.15 am.	1/11 Butler	7 days L.B.	11.11.16	Capt. D. Summers.	FKK
			III Incline to noc. on duty					

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

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Number of Sheet Second

Regiment of

Signature of O. C. Company [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Incentive Certificate DATE <u>26 JUL 1917</u> BY <u>[Signature]</u> FOR <u>[Signature]</u>
No. <u>1040</u>	<u>Sinnett W.</u>	Age on <u>24</u> years — months	<u>Labourer</u>		
Joined _____ Date _____	Place and Date of Enlistment <u>St. John 18-1-15</u>	Religion <u>R. C.</u>			
Joined _____ Date _____	Period of { with Colours _____ years. { with Reserve _____ years.	Place of Birth <u>St. John</u>			
Joined _____ Date _____					

Place	Date of Offence	Rank	Case of Disobedience	OFFENCE	Names of Witnesses	Punishment	By whom awarded	REMARKS
<u>Raccoon</u>	<u>14-1-17</u>	<u>Pte</u>		<u>1. Absent from tattoo 14-1-17 until Rescille 14-1-17</u>	<u>Sgt Winalow</u>	<u>7 days C.B.</u>	<u>Pt. Col. Whitaker</u>	<u>50s. forfeit 3 days pay by P.W.</u>
<u>Raccoon</u>	<u>2-2-17</u>	<u>"</u>		<u>2. In Sainley without pass Adens from Tattoo 2-2-17. Certificate apprehended by the Police 8-2-17.</u>	<u>Documentary Sgt. John - Fusier - Shilke</u>	<u>168 hrs detention</u>	<u>Lt Col Whitaker</u>	<u>Forfeit 7 days pay R.R. money</u>
<u>Raccoon</u>	<u>11/3/17</u>	<u>"</u>		<u>Absent from 10.45 AM parade about 10.45 AM. Case & Rescille 2/4/17.</u>	<u>Sgt. Humphrey</u>	<u>2 days P.B.</u>	<u>2/Lt S. Barnes</u>	<u>sd. 10.</u>
<u>do</u>	<u>5/4/17</u>	<u>"</u>		<u>Quartermaster in dress hall 5/4/17.</u>	<u>Cpl + iild</u>	<u>9/4/17</u>	<u>Capt [Signature]</u>	<u>Forfeit 1 day pay</u>
<u>do</u>	<u>16/4/17</u>	<u>"</u>		<u>Absent from Tattoo Rescille to 10.45 p.m.</u>	<u>Sgt. [Signature]</u>	<u>2 days C.B.</u>	<u>[Signature]</u>	<u>Forfeit 1 day pay</u>
<u>capt.</u>	<u>20-5-17</u>	<u>"</u>		<u>Absent from Tattoo until Rescille To be carried over 21st-5-17.</u>	<u>Sgt. [Signature]</u>	<u>3 days C.B.</u>	<u>Pt. Johnson</u>	<u>Forfeit 1 day pay by P.W.</u>

Army Form B. 121.

		Brought forward						
Army Camp.	8-7-17.	No.	Found in bed at 7:50 AM	Carroll	2 day CB.	8-7-17	St. Johnson	PT
Stuckum in bed	17/11/17	"	Went from Latta till 10:50 (see above)	1st King	3 days CB	17/11/17	2nd Munson	Wk
Capt.	22-12-17	"	Drunk in High St abt 8:40 ^{PM}	Documentary	48 hours detention	24/12/17	Jessie and Major	
Carroll	14/1/18	"	Smiling parade while in line of front without permission about 6 PM until reporting M.F.P. 9:30 PM 14/1/18.	Docty	4 days CB.	18/1/18	Lt Col Whiteaker	25
Sydney Down	27-6-18		Absent from 2 PM parade. Has reported 2 ⁵	Capt Powers	2 days C.B.	29/6/18	2 ¹ / ₂ Lt. Seymour	25.



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 1041

Name in full Eliaz Pike Gore Age 19

Address Burgeo

Married Single Height _____ Weight _____

Color Fair Hair Dark Brown Eyes Brown

Other distinguishing marks Marks on each cheek

Nearest relative (Mother) Marie

Address _____

Dependents of one

Occupation Steward Present Wage \$20.00 Per Month

Previous service _____

Decorations _____

General Remarks _____

Date of Enlistment Jan. 26/15

Eliaz Pike Gore, 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.

Eliaz Pike Gore

Declared before me this 13 day
of February 1915

Eric S. [Signature]

*Recruited for the 1st Newfoundland Regiment
at Burgeo
Jan. 26/15
Eliaz Pike Gore*