



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 1176

Name in full William Skeans Age 28

Address 10 York St.

Married Single Height 5.11 Weight 165

Color Dark Hair Light Brown Eyes Blue

Other distinguishing marks Scar on chin

Nearest relative (Uncle) Edward Skeans

Address Doat House Lane

Dependents None

Occupation Chaffan Present Wage \$40.00 per month

Previous service _____

Decorations _____

General Remarks _____

Date of Enlistment Feb. 22/1915

William Skeans, do sincerely promise and swear that I will be faithful and bear the 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 conditions of my service.

William Skeans

Declared before me this _____ day of March 1915.

Recd by Agent on 15/1/15
Wm Skeans
Chaffan
10 York St.
St. John's

Oct.25 23

Edward Skeans Esq.
Kilbride, St.John's,W.

Ref#176 Pts.Em.Skeans.(dec.)

Dear Sir,

We are forwarding by registered mail a parcel of bulbs for planting in the grave of your late nephew, the above named soldier.

In course of time the grave will be sodded over, with the exception of a strip one foot wide, in front of the headstone, where the bulbs are to be planted. Further instructions are contained in the address envelope attached to the parcel.

Your kind attention to this matter will oblige,

Very truly yours,

Lieut.

O.i/c Records.

Oct. 25 25

Thos. Grandy Esq.
Bay L'Argent.

Re #133 Ser. P. Grandy. (dec.)

Dear Sir, We are forwarding by registered mail a parcel of bulbs for planting in the grave of your late son, the above named soldier.

In course of time the grave will be sodded over, with the exception of a strip one foot wide, in front of the headstone, where the bulbs are to be planted. Further instructions are contained in address envelope attached to the parcel.

Your kind attention to this matter will oblige,

Very truly yours,

Lieut.

O 1/c records.

Oct. 25 25

Mrs. Maud B. Austin,
Elliott's Cove, T.B.

Es #989 L/Smm. L. Randell. (acc.)

Dear Madam,

We are forwarding by registered mail a parcel of bulbs for planting in the grave of your late husband, the above named sailor.

In course of time the grave will be sodded over, with the exception of a strip one foot wide, in front of the headstone. Plant the bulbs immediately in front of where the headstone will be placed, in the space as indicated above.

Thanking you to give this matter your kind attentinn,

Very truly yours,

Lient.

O i/e. Records.

W. Stearns

1176.

P. + P. U.

Medical Report on an Invalid



Station _____

Date _____

Unit 2/1 Newfoundland Regt.
 Regimental No. 1176
 Rank PTE
 Name SKEANES, WILLIAM.
 Age last birthday 30
 Enlisted { on Feb 1915
 at St John's Newfoundland

7. Former Trade or Occupation } Chauffeur
 7A. If with previous service in Army, state—
 (a) Former Unit;
 (b) Regimental No.; } n/a
 (c) Date of Discharge;
 (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.

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

44 Tubercle of Lung

COPIES SENT		
To	No.	DATE
M. of M.	<u>7472/46</u>	<u>12/5/18</u>
U.L. 1st Bn.		
" 2nd Bn.		

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.

Date of origin of disability. uncertain

Place of origin of disability. uncertain

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

Since October 1917 he always had good health. He was never in hospital save when he was wounded. The first thing he noticed was spitting of blood. He was sent to 4th Military Hospital to be treated for this & there it was discovered that he had tubercle & he was transferred to Heathfield on 23/2/18.

Entry on A-7. B178 :-
 4th Military Hsp 16/12/17
 to 23/2/18 Tubercle of Lung

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.

attributable to service during the present war: exposure on active service
n/a
no

Opinion of the Medical Board.

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

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.

(iv.) In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

1. (a.) State whether the disability is clearly attributable to—

- (i.) Service during the present war; *yes*
- (ii.) Climate; *no*
- (iii.) Ordinary military service; *no*
- (iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c.; or *no*
- (v.) Whether it is constitutional or hereditary. *n/a*

(b.) If due to one of the first three of these causes, to what specific conditions do the Board attribute it? *exposure on active service*

22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which? *n/a*

23. Is the disability permanent? *Yes*

24. If not permanent, how soon do the Board recommend re-examination? *n/a*

25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present?

Total at present - 100%

Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.

26. If an operation was advised and declined, was the refusal unreasonable? *n/a*

27. Do the Board recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

Discharge as permanently unfit for military service of any kind

28. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic training) is desirable in a—

- (a) Sanatorium;
- (b) Hospital;
- (c) Convalescent home;
- (d) Asylum; or
- (e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended.

*Sanatorium treatment desirable
He is at present in Stratfield
Sanatorium, 110, Peters. Ave.*

29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended? *n/a*

30. Does the man require the constant attendance of another person? *no*

Station

Date



Approved: *[Signature]*
SARJANT-MEDICAL OFFICER
CAILES AREA

Station

Date

175.
22 MAR 1918.
1, BURNS SQUARE.
A Y R.

[Signature] Lt.-Col. President.
S.M.O. Cailes Area.
[Signature]
Members.

[Signature] Lt.-Col.
Administrative Medical Officer.
[Signature]

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

MEDICAL HISTORY

OF

Surname SkeneChristian Name William

Table 1.—GENERAL TABLE.

Birthplace:—Parish.....


County.....

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	19	Feb		191
at	St Johns.		at	
Declared Age.....	28	years		days
Trade or Occupation.....	C haffaur.			
Height	5	feet	11	inches
Weight			165	lbs.
Chest Measurement {	Girth when fully expanded...		37	inches
	Range of expansion.....		39	inches
Physical Development.....				
Vaccination Marks {	Right	Left	Right	Left
	Arm			
Number				
When Vaccinated	Never.			
Vision	R.E.—V==		R.E.—V==	
	L.E.—V==		L.E.—V==	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to Cause Rejection	(b)		(b)	
Approved by (Signature)	Clay Macpherson			
(Rank)	Capt.			
	Medical Officer.		Medical Officer.	
Enlisted	at	St Johns.	at	
	on	22 day of Feb	on	1916
		Corps.		Regtl. No.
Joined on Enlistment	1st Nfld Regt		1176	
Transferred to.....	Newfoundland			
Became non-effective by.....	on	day of	on	day of
(Signature)		191		191
(Rank)				

COPIES SENT		
To	No.	DATE
1st. M.	7/17/16	12/3/16
2nd. Bn.		



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

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on syphilis, admission of treatment
	Day	Month	Year	Day	Month	Year			
3 rd LONDON GENERAL HOSPITAL WANDSWORTH.	5	9	16	30	9	16.	wound of hand.	26.	In France here wounded
3 rd LONDON GENERAL HOSPITAL WANDSWORTH.	23	4	14.	25	6	14.	G. S. W IX 4 R- patella	63.	
 MILITARY HOSPITAL AYR	16	12	17	23	2	18	Tubercle of Lung	69	

in the case of Warrant Officers treated in quarters

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

Signature of Medical Officer

cut his hand while pushing a wagon - on adm.
healed - convalescent.

W. M. Simpson
Capt. R.A.M.C.

Wounded 14.4.17 in France
X-ray = patella shattered
Joint-tapped, 8 cc formalin injected

G. C. Hall
Capt. M.S.

admitted to hospital which occurred twice
though not severely: two exams of sputum
both reported positive by pathologist Scott
Gen. Hosp. Elazoff; transferred to
Heathfield Inf. Division Hosp. Apr
23.2.18 to await completion of discharge
documents & arrangements for his repatriation
being completed.

W. M. Simpson
Capt. R.A.M.C.

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

SENIOR MEDICAL OFFICER
GAILLES AREA
175.
22 MAR 1918
1, BURNS STATUE SQUARE.

Army Form 319 completed and
Discharge approved.

J. J. Jones
..... Lt.-Col.
S.M.O. Gailles Area.

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
Sr John W. Hill	Feb. 22. 15	20 Mar. 15			
T. S. "Stephano"	20 Mar. 15	22 Mar. 15			
Fo S. ORDUNA	22 Mar. 15	30 Mar. 15			
Edwin George Conle	30 Mar. 15				

1176. PG SKEANS. BV.

T B.

admitted Healdsburg
Coop Apr. 17. 11. 17.

no other information
available.

W.P.

ADJUTANT GENERAL'S OFFICE
NO. 1
SEPT 1916
114

Army Form B. 117.

Report on Wounds or other Injuries, received otherwise than in Action.

NO. 1176
Date 27/4/16
HOSPITAL

114
Gen. No.
4369.

Certificate of Medical Officer.

No. 1176 Sto Spears ls. / Newfoundland Reg

was admitted to hospital on the 3. 9. 16, suffering
from W^a Index finger R.

† Here insert
"trivial" or
"serious."
† Here insert
"will" or "will
not."
* Here insert
"claims" or
"does not claim."

The disability is of a trivial nature, and in all probability
† will not interfere with his future efficiency as a soldier.

* He claims that he was in the performance of military
duty at the time of the accident.

(If the soldier makes no claim that he was on duty at the time, the certificate below should be signed by him.)

Station Bombay Phisic Lieut-Col Rame
Date 4. 9. 16 Medical Officer in Charge.

Certificate to be signed by soldier.

I, _____ hereby declare that the
injury sustained by me on the _____ did not occur
while I was in the performance of military duty.

{ Soldier's
Signature.

Station _____
Date _____
{ Signature
of Medical
Officer.

Certificate of Commanding Officer.

(This certificate will be completed only in cases of trivial injury where the soldier claims to have been injured while on duty.)

† Here insert
"occurred" or
"did not occur."

I certify that the injury to the above-named soldier † _____
while he was in the performance of military duty.

† If on duty, state
(a) The date of the
injury.
(b) The place where
it occurred.
(c) The nature of
the duty.
(d) Whether the
soldier was in any
way to blame.

† _____

The soldier has been so informed.

Station _____
Date _____ Commanding _____

This Army Form will be attached to the Medical History Sheet, on which it will be recorded whether the soldier was on duty, and whether he was to blame.

Report on Wounds or other Injuries, received otherwise than in Action.



114
Gen. No.
4209.

Certificate of Medical Officer.

No. 1176: Pte. Shreana M. (1st New York State Cavalry)

was admitted to hospital on the 2nd day of Sept 1916 suffering from traumatic wound of index finger (R) hand

If Here insert "trivial" or "serious."
If Here insert "will" or "will not."
If Here insert "claims" or "does not claim."

The disability is of a trivial nature, and in all probability will not interfere with his future efficiency as a soldier.

*He claims that he was in the performance of military duty at the time of the accident.

(If the soldier makes no claim that he was on duty at the time, the certificate below should be signed by him.)

Station _____
Date 27/9/16 R. E. M. Capt. M. M. M.
Medical Officer in Charge.

Certificate to be signed by soldier.

I, _____ hereby declare that the injury sustained by me on the _____ did not occur while I was in the performance of military duty.

Station _____
Date _____
(Soldier's Signature)
(Signature of Medical Officer)

3rd Lt. G. H.

Certificate of Commanding Officer.

(This certificate will be completed only in cases of trivial injury where the soldier claims to have been injured while on duty.)

I certify that the injury to the above-named soldier occurred while he was in the performance of military duty.

on 2.9.16 at the Transport line while moving a wagon which he was ordered to do. He was not to blame in any way.

If Here insert "occurred" or "did not occur."
If on duty, state (a) The date of the injury. (b) The place where it occurred. (c) The nature of the duty. (d) Whether the soldier was in any way to blame.

The soldier has been so informed.

Station _____
Date 5.9.16 Lt. Hadow, M.C.
Commanding Officer 1st New York State Cavalry

This Army Form will be attached to the Medical History Sheet, on which it will be recorded whether the soldier was on duty, and whether he was to blame.

2/9/16 Pushing G. S. wagon over ditch
spare wheel on wagon. fell & trapped hand,
between rail of wagon.



7. Dr. O. H. C. Military Hosp.
Ayr.

1176 Pte Skene Wm
F. Coy 2/ Nfld Regt.

Sputum for tubercle bacilli
Result is positive

R. Dornin
Lt. Col. R.A.M.C.(S)

COPIES SENT		DATE
To	No.	12/5/18
M. OF M.	7473/46	<i>[Signature]</i>
U.S. IS. I		
" 2ND. DIV.		

No. 1176 Name *W. Skeans*

Sqn., Batty.,
or Company

10, Corps *Newfoundland*

Date of
enlistment

22/2/15

G. C.
Badges

Service or
Proficiency Pay

Date of last entry in
Company Conduct Sheet

No. and date
of last drunk

Period not reckoning towards
freedom from extra fine

Sheet No.

Signature O.C.
Company, etc.

Character



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>Plc.</i>						

Proffcott

Army Form B. 122

ORIGINAL.

N.F.P./10.

NEWFOUNDLAND CONTINGENT



CANCELLATION of ALLOTMENT.

1. I, (No) 1176 (Rank) Pte (Name) S Keane, W.

hereby apply for cancellation of Allotment made by me on N.F.P/11

No. 1061 dated 27/3/15 in favour of

Rev. S. Naugle

for \$ — cts 60 per diem.

Such cancellation to take effect on the 30th day of

November 1917.

2. I agree to accept all risks and consequences of this application failing to reach Headquarters, St. John's, in time to become operative at above nominated cancelling date; and that in the event of such non-delivery, and thereby the allotment continuing to be paid to the Allottee, I also agree to such further stoppage in the Pay Books as may be necessary, or otherwise to refund such overpaid amount or amounts.

Dated at

Newton Park School,

Aggs.

Nov. 1st 1917

W Keane

Allotter.

Approved and Witnessed:

G. H. ...

O.C. "J" Company.

Noted
11/11/17
E.R.O.
G.S.W.S.
J. King

NOTED
W. Martin
Date 3/11/17 P.R.O.

To be made out in TRIPLICATE and delivered at the Pay & Record Office not later than date of cancellation, in accordance with P. & R.O. C.L./10, 9/12/16.

WESTERN UNION

ANGLO-AMERICAN DIRECT UNITED STATES

CABLEGRAM



PREFIX _____ CODE _____ WORDS _____ CHARGE _____		SENT _____ At _____ To _____ By _____	FOR STAMPS
19	19/0	VIA WESTERN UNION	

THIS FORM WILL BE ACCEPTED AT ALL
POST OFFICE TELEGRAPH STATIONS.

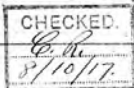
25/6/17 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To ~~(Royal Bank)~~ ROYAL BANK CANADA

STJOHNS (NEWFOUNDLAND)

CABLE ONE HUNDRED DOLLARS 1176 WILLIAM STEANS NEWFOUNDLAND
REGIMENT CARE BANK MONTREAL LONDON

WM STEANS ✓



Supress

*Charge to
1176 Steans.*

NOT TO BE
TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature _____

Address _____

58 Victoria St. S.W. 1.

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

No.

394.

ANGLO-AMERICAN

WESTERN UNION DIRECT UNITED STATES
CABLEGRAM

SENT

FOR STAMPS

Prefix Code
WORDS CHARGEAt _____
To _____ By _____

VIA ANGLO.

THIS FORM WILL BE ACCEPTED AT ALL
POST OFFICE TELEGRAPH STATIONS.

11/5/17. TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

E. F. U.

TO ROYAL BANK.
ST. JOHN'S

(NEWFOUNDLAND)

WIRE 1176 SKEANS ONE HUNDRED DOLLARS CARE SYNOPTICAL LONDON.

HANDLE

VIA SYNOPTICAL.

Charge 1176 Skeans.

CHECKED.

C. R.
20/10/17CHARGED
PAY BOOK 115/17
Date11/2
3
40
3-4NOT TO BE
TELEGRAPHED.Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western
Union Telegraph-Cable System, subject to the said conditions to which I am, VICTORIA ST. S.W.1.

Signature _____

Address _____

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE
LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

Cable 394
sent

May 8/17

Dear Major Linwell.

Please have the
following wire sent & charged to the
acc of # 1176 The W. Skanes
& oblige

yours truly
J. Langh.

~~Roybank
50 Johns Lane~~

~~Wire 1176 to Skanes 100 dollars~~

~~c/o Messrs. Linwell London.~~

~~Langh~~

1st W. FOUNDATION REGIMENT	
PAY & RECORD OFFICE	
Ref. No.	2330
Recd.	MAY 11 1917
Acc. J.	
Ans'd.	
R.	



27-XII-16.

Dear Capt Linnell.

Please send the following
message collect.

Roybanca.
(ROYBANCAN)
28 John's

Wire 1176 Shears, AYR \$100
nangle

Y oblige

Yours sincerely

J. H. G. 67.

NEWFOUNDLAND REGIMENT	
PAY & RECORD OFFICE	
Ref. No.	7
Rec'd.	JAN 1 1917
Ack'd.	Jan 7/17
Ans'd.	
File No.	

Cable No.
1 Sent.

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./19, 26/5/17.

Regt No. 1176 Rank R Name Sheans W. Unit 2nd Coy. 1176 who was upgraded
to Newfld on 10/5/18 Authority _____ Cause _____
DR. STATEMENT OF ACCOUNT OR.

PERIOD: FROM 12/4/18 TO 10/5/18

PARTICULARS		£	s	d	PARTICULARS		£	s	d	
Balance Dr. from					Balance Cr. from <u>Previous pay book</u>					
Allotment days @					Pay <u>28</u> days @ <u>£1.00</u>	28	00			
Cash Payments:					Field Allow <u>28</u> days @ <u>£1.00</u>	28	00			
	<u>3/5/18.</u>		10	0	Other Allowances days @ £					
	<u>10/5/18.</u>		10	18						
Other Debits:					Other Credits:					
	<u>Bank Damage</u>			6						
	<u>Miscellaneous Hqs.</u>			5						
Total Debits					Total Credits					
Balance due by Paymaster					Balance due to Paymaster					
			20	19	3			20	19	3

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

F. Leary
Hazley Down Camp May 10 1918.
(Place) (Date)

J. Seymour
O.C. "1" Company.

Made up/Checked in accordance with information received in the Pay & Record Office 12/4/18 to 10/5/18 and is therefore subject to amendment if and as may be found necessary.

Pay & Record Office, London,
12 MAY 1918 1918

Chief Paymaster & Officer i/c Records.

944 940
12/5

Means, D^m.

1176

Pay Sept.

March 21, 1919

#1176 Pte. William Skeams,
Jensen Camp,
City

Dear Sir:-

Please find enclosed "Discharge Certificate
No. 1358."

Yours truly,

Captain,
Paymaster & O.i/c Records

Copy
COPY

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital Army Form B. 178A to be used for Special Reserve recruits and Reservists enlisting into the Regular Army.



MEDICAL HISTORY of

Surname Sheares Christian Name William

TABLE I.—GENERAL TABLE.

Birthplace ... Parish _____ County _____

Examined on 19th day of Feb 1918
at St John's

Declared Age 28 years _____ days.

Trade or Occupation Coffin

Height 5 feet 11 inches.

Weight 165 lbs.

Chest Measurement { Girth when fully expanded _____ inches.
Range of Expansion 37 inches.
39 inches.

Physical Development _____

Vaccination Marks { Arm ... _____ Right _____ Left _____
Number _____

When Vaccinated Never

Vision { R.E.—V= _____
L.E.—V= _____

(a) Marks indicating congenital peculiarities or previous disease (a) _____

(b) Slight defects but not sufficient to cause rejection (b) _____

Approved by (Signature) Henry McPherson
(Rank) Capt Medical Officer.

Enlisted at St John's
on 25 day of Feb 1918

Joined on Enlistment	<u>1176</u> Corps.	Regtl. No.
Transferred to	<u>New Zealand</u>	

Became non-effective by _____
on _____ day of _____ 1918

(Signature) _____
(Rank) _____

AD B 20 79/1358

Table II.—Only for Admissions to Hospital or to the Sick

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks
	Day	Month	Year	Day	Month	Year			
<i>St. Joseph's Hospital Wardsworth</i>	<i>5</i>	<i>9</i>	<i>16</i>	<i>30</i>	<i>9</i>		<i>Chond of hand</i>	<i>26</i>	
<i>do</i>	<i>23</i>	<i>4</i>	<i>17</i>	<i>25</i>	<i>6</i>	<i>17</i>	<i>987 IX 4 Rt. Pakella</i>	<i>63</i>	
<i>St. Joseph's Hospital Rye</i>	<i>16</i>	<i>12</i>	<i>17</i>	<i>23</i>	<i>2</i>	<i>18</i>	<i>Pakoda of Lung</i>	<i>69</i>	

List in the case of Warrant Officers treated in quarters.

as bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions 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

In France cut his hand while putting a
waggon - on admission here wound healthy
considerant

E H Gyeby
Capt R. M. C.

Wounded 4/1/17 in France
Wray = patella shattered
Joch x tapped, Gyce Formalin injected

G C Hall
Capt. M. S.

Shattered haemoptysis which required
two thorax not severely, two exams
of sputum, both reported positive by
pathologist, Scott Eric Hapkin Glasgow
transferred to Kebleford Infirmary
Hospital by 23/1/18 to await completion
of discharge documents arrangements
for his repatriation completed

W M Jatta
Capt R. M. C.



Department of Militia, Newfoundland

Medical Department

SECOND BOARD

Medical Report on an Invalid

NOTES:—

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

STATEMENT OF CASE

ST. JOHN'S.

Station

FEB. 19th, 1919.

Date

- | | |
|-----------------------------------|-------------------------------------|
| 1. Unit <i>Royal Newfoundland</i> | 5. Age last birthday 30 |
| 2. Regimental No. 1176 | 6. Enlisted on |
| 3. Rank | at |
| 4. Name MCNEANS WILLIAM. | 7. Former trade or occupation |
| | 8. Disability PULMONARY T.B. |

9. History **SEE PREVIOUS BOARD ADMITTED TO JENSEN CAMP. JUNE 4TH 1918.**

10. What is his present condition? **POOR. COUGH & SPUTUM. T.B. PRESENT. RALES & RHONCHI ALL OVER BOTH LUNGS. HAS HAD HEMOPTYSIS RECENTLY.**
(This is the important question. Be brief—the clearer the case the less need be written. Read note f above.)

11. Was sanatorium advised and refused? **NO.**
operation

12. Do you recommend discharge as permanently unfit? **YES.**

Signature **ARCH TAIT.**

Rank or Qualification **FOR M.O. DEPOT.**

Remarks if any by Officer i/c Hospital.

Place Signature

Date Rank

Opinion of the Medical Board

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

13. For pension purposes, the disability x be considered as aggravated by:—
due to

(a) Service during this war. (b) Climate. (c) Ordinary Military Service
Remarks if any:—

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

YES.

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

(b) PENSIONABLE DISABILITY—To what extent is his capacity at present for earning a full livelihood in the general labor market lessened by that portion of his disability to or incurred during service?

(State in percentage.)

100% WHILE IN HOSPITAL.

Remarks if any:—

16. Is the disability permanent?

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

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

Remarks if any:—

19. If fit subject for Hospital do you recommend admittance to

General Hospital,
Naval and Military Con-
valent Hospital,
Jensen Tuberculosis Camp.

REMAIN IN.

20. We recommend discharge from service the Army **PERMANENTLY UNFIT.**

Remarks if any:—

N. S. FRASER,.....
President

Signature **J. S. TAIT,**.....

L. PATERSON, MAJOR.....

Place **ST. JOHN'S,**.....

Date **FEB. 20TH. 1919.**.....

APPROVED BY THE
COMMISSIONER OF MEDICAL SERVICES
FEB 20 1919
Station No.

Date **NEWFOONDLAND.**.....

(Sgd) **CLARENCE MACPHERSON,** MAJOR,
Administrative Medical Officer

COPY



B.7.23

11 MAY 1918

To M.O. etc.
Military Hospital -
Ayr.

Sputum for tubercle bacilli -
1176 Pte. Skene, William
2/1 N.F.L.D. Regt. 7 Coy.

Result is positive.

per A. Gunn
M. Col. R.A.M.C.T.
W. B. S. A.



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. & 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 *William Shean*
 Regiment from which discharged *1st. Newfoundland*
 Regimental number *1176*
 Intended address *of Mr. Sullivan Barnes Road.*

Height on discharge *5* Feet *ft 11 1/2*

Color of hair on discharge *light*

Complexion *fair*

Color of eye *blue*

Descriptive Marks

Figure on discharge *medium*

Christian name of Father *John*

Christian name of Mother *Jane*

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth. *Millbridge*

Nature and locality of civil employment required *Chaffeur.*

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 Shean*

Station *St John's* Date *May 27 1875.* (Rank) *Pvt.*

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

Station *St John's N.Y.*

Date *May 27 1875*

COPY

Casualty Form—Active Service.

ROYAL NEWFOUNDLAND REGIMENT

Rank Private Regiment or Corps ROYAL NEWFOUNDLAND REGIMENT
 Surname Shearn Christian Name William
 Religion Roman Catholic Age on Enlistment 18 years 00 months
 Enlisted (a) 1915 Terms of Service (a) Duration Service reckons from (a) 22/1/15
 Date of promotion to present rank Date of appointment to lance rank
 Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and Rate
 Occupation



Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B.213, Army Form A. 30, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 30, or other official documents.
Date.	From whom received				
		Embarked	<u>Stamilton</u>	<u>1/2/17</u>	
		Disembarked	<u>Caen</u>	<u>2/2/17</u>	
		<u>Joined Battalion</u>	<u>France</u>	<u>17/2/17</u>	<u>B 213</u>
<u>15/4/17</u>	<u>Unit</u>	<u>Wounded in Action</u>	<u>do</u>	<u>14/4/17</u>	<u>B 213</u>
<u>30/4/17</u>	<u>19 COB</u>	<u>Ad Gen R knee & L ankle</u>	<u>France</u>	<u>15/4/17</u>	<u>SD 3422</u>
<u>28/4/17</u>	<u>3 Co 9 B Coy Princess Elizabeth</u>	<u>Ad Gen R knee & L ankle</u>	<u>Boulogne</u>	<u>16/4/17</u>	<u>408584</u>
		<u>Invalided to England</u>		<u>22/4/17</u>	<u>W 3083</u>
		<u>E. Toohine</u>	<u>St. Ives</u>		
			<u>7th Bn 1 Reg Infantry Section</u>		
			<u>CO 2 3rd Echelon</u>		

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Sholing-Smith, Co. W. 2027-22000 1600m 7/17 00000 C. F. & S. Ltd. Forms B.103 E/1155. I.P.T.C.

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./19, 26/5/17.

Regtl No. 11/6 Rank Pt Name W. Sheane Unit Batt Royal Mfld who was repatriated
to Newfld on 13/5/18 Authority _____ Cause _____

DR. STATEMENT OF ACCOUNT OR.

PERIOD: FROM	TO	PARTICULARS					E	s	d	PARTICULARS	E	s	d
		£	£	£	£	£							
		Balance Dr. from							Balance Cr. from previous pay book.				
		Allotment - days @ -							Pay 28 days @ \$ 1.00	28	00	12 8	
		Cash Payments:							Field Allow 60 days @ \$ 1.00	2	80	6 6 7 1	
		3/5/18	10	0	0				Other Allowes days @ \$				
		14/5/18	10	18	0				Other Credits:				
		Other Debits:											
		Barrack Damage						6					
		Miscellaneous Shop						5					
		Total Debits							Total Credits				
		Balance due by Paymaster							Balance due to Paymaster				
						20	19	3					
												20 19 3	

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

F. Leay
Bayley Down Camp May 10th 1918.
(Place) (Date)

2. Seymour 21/18
O.C. "2" 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,

13/4/18 to 10/5/18

Chief Paymaster & Officer i/c Records.

DUPLICATE.
ORIGINAL.

N.F.P./10.

NEWFOUNDLAND CONTINGENT



CANCELLATION of ALLOTMENT.

1. I, (No) 1176 (Rank) Pte (Name) Skanees W.

hereby apply for cancellation of Allotment made by me on N.F.P/11
No. 1061 dated 27/3/15 in favour of

Rev. J. Hangle

for \$ — cts 60 per diem.

Such cancellation to take effect on the 30 day of
November 1917.

2. I agree to accept all risks and consequences of this application failing to reach Headquarters, St. John's, in time to become operative at above nominated cancelling date; and that in the event of such non-delivery, and thereby the allotment continuing to be paid to the Allottee, I also agree such further stoppage in the Pay Books as may be necessary, or otherwise to refund such overpaid amount or amounts.

Dated at

Acutor Park School,

Apr.

Nov. 1st 1917

J. Hangle

W. Skanees

Allotter.

Approved and Witnessed:

C. H. H. Co. s/o

O.C. "Z" Company.

Noted
E. H. H. Co.
22nd
8/11/17 J. Hangle

W. C. Martin
Sgt.
3/11/17 P. H. O.

To be made out in TRIPPLICATE and delivered at the Pay & Record Office not later than date of cancellation, in accordance with P. & R.O. C.L./10, 9/12/16.

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 dashed. 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/O RECORDS, PAY & RECORDS OFFICE, ST. JOHN'S.

Christian names. *William*..... 2. Surnames. *Skinner*.....
 3 Rank. *Pvt.*..... 4 Regtl. No. *1124*.....

5 Address in full to which future payments of gratuity are to be forwarded.....
Imperial Camp

6. Date of enlistment in the Regiment. *Feb. 22nd 1915*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
Not Applicable

8. Relationship of such dependents... *Not Applicable*.....

9. Address in full, of such dependents... *Not Applicable*.....

10 Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *Not Applicable*

11. Were you on active service only in Nfld. If so, Give Dates, and particulars of such service.....
No.

12. Give total length of time which you served on active service, whether in Nfld. or Overseas. *Served from Feb. 22nd 1915*.....
to March 13/18 (Overseas)

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

Had one enlistment under Reg. No 1126

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

No

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

No

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

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?.....

Not applicable

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

Mar 13th 1919

(b) Reason for discharge.....

Being medically unfit for General Service

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.....

Egyptian Frontier¹⁹¹⁵ France Belgium 1917

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

(b) If (b), are you in receipt of full pay and allowances from that Committee (a) *Yes* (b) *Yes*

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 Skanks*

Place of Residence: *Wenona Camp*

Declared before me at: *St Johns*

This *28th* day of *March* 191*9*.

Chas. O'Neil Coury Notary Public

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

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
			<i>6 mos.</i>	<i>420.00</i>
Certified Correct...			Paymaster.	

[Faint, mostly illegible text and markings, possibly bleed-through from the reverse side of the document.]

St. John's, Nfld. April 15th. 1920

Received from the Paymaster, Department of Militia, Nfld
Savings Bank Pass Book No. 4883, the property of the late
Pte. Edward Skeans, No 1176, Royal Nfld. Regiment.

Edward ^{Mrs} Skeans
Wife

Witness

Miss Jane Wood

February 14, 1920

Cashier,
Wfld. Savings Bank,
City

Dear Sir:-

I enclose two cheques amount
to Two hundred and sixty dollars (\$260.00), payable
to W. Skeans, #1176, Royal Wfld. Regiment.

Please open savings Bank
Account for Mr. Skeans, and let men have "Pass
Book" for same.

Yours truly

Major

Paymaster.

October 29th.1917.

Manager,

Royal Bank of Canada,
City.

Dear Sir,-

I enclose herewith all amount
cheques payable to Rev. T. Mangle, on account of No.
1176, Private W. Skeans. ~~100.00~~

For deposit please.

Yours truly,

Capt. & Paymaster.

JH/.

TELEPHONE 230.

ACCOUNTS COLLECTED QUARTERLY.

P. O. BOX 122.

302 WATER STREET,

St. John's, Newfoundland, 191

M

In account with Charles Ellis,

ENGLISH AND AMERICAN HIGH-CLASS TAILORING.

Please pay to my ac

\$ 150

Private 1176 W Spens

Spensby Money

[Handwritten signature]

Feb 14th 1920

Major Howley
O. I. C. Records

J.B.A.

Please pay to W. Viguers, 1171
the sum of eleven dollars and sixty six cents
in payment of allowance for week ended this date
and charge same to Civil Re-establishment Committee

\$11.66

Pension \$10.00

W. Blackhall.
Rec'd Vocational Officer

ACCOUNT	
CHK NO. <i>28785</i>	INITIALS
INT. LEDGER	INITIALS
PAY LEDGER	INITIALS
GEN. LEDGER	INITIALS

William Viguers

October 31st. 1918.

No.1176, Pte.W.Skeans,
Jensen Camp,
C i t y.

Dear Sir:

I enclose herewith cheque for
\$10.00, being amount due you as pay on account.

Yours truly,

Capt.
Paymaster

3, Sept. 1918.

Skiano
#1176, Pte. W. ~~Skiano~~,
Jensen Camp,
Blackmarsh Road.

Dear Sir:

I enclose cheque for \$10.00 being
the amount due you as pay on account.

Yours truly,

Lieut.
For Paymaster

Sept. 30th, 1919.

Pto. W. Skeans,
Jensen Camp,
Blackmarsh Road.

Dear Sir,-

I enclose herewith cheque for \$10.00

Pay on account.

Yours truly,

Capt. E. P. ymaster

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$150⁰⁰

Oct 9. 19 19

Received from the First Newfoundland Regiment
the sum of One hundred & fifty Dollars.
on account of Pay. W.L.G.
~~balance~~

Edward Mollooy
pro.

~~W.L.G.~~ b. Ellis

Ch. No. 14392	Initials. ELL
Pay Ledger 286	Initials. WR
Gen. Ledger	Initials.

No. 1176

Rank

Pf.

Name

W. Spear

per

Charles Ellis

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 190⁰⁰

Feb 14, 1920

Received from the First Newfoundland Regiment
the sum of ~~One hundred~~ ~~and~~ ~~Nine~~ ~~and~~ ~~Twenty~~ Dollars.
on account of Pay. W.S.Y. Mailed to Co. S.P.
balance

Ch. No. 28810	Initials. J.W.
Pay Ledger 287	Initials. W.S.Y.
Gen. Ledger.....	Initials.....

Regtl. No. Feb. 14/1920 Rank [Signature]

No. 1176

Rank

Pa

Name

W. Stearns per

Nfld Govt Savings Bank.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 10⁰⁰

Oct 31st 1912

Received from the First Newfoundland Regiment
the sum of ten ⁰⁰/_{xx} Dollars.
on account ~~balance~~ of Pay.

Ch. No.	4701	Initials.....	EW
Pay Ledger....	23	Initials.....	WU
Gen. Ledger.....		Initials.....	

Regtl. No. Rank 2nd Lt

No. 1176

Rank

P6-

Name

Shears, W.

Janson Camp

1918-1919

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 18.00

Aug. 31st 1918

Received from the First Newfoundland Regiment
the sum of ten ⁰⁰ Dollars.
on account of Pay
Balance

Ch. No. 1816	Initials EW
Pay Ledger 230	Initials EW
Gen. Ledger	Initials J

Regtl. No. Rank

No. 1176.

Rank Pl.

Name Sheans W.

J Camp

Small

1918 - 1918

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 15.00

Sept. 30 ¹² 1918

Received from the First Newfoundland Regiment
the sum of 15 Dollars.
on account of Pay.
~~balance~~

Ch. No. <u>3226</u>	Initials <u>EW</u>
Pay Ledger <u>230</u>	Initials <u>WR</u>
Gen. Ledger.....	Initials..... <u>CPAB</u>

Regtl. No..... Rank.....

112

No. 1176

Rank PL

Name Stearns W-

Lanson Camp.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 100⁰⁰/₁₀₀

Feb 21 1919

Received from the First Newfoundland Regiment
the sum of Ten ⁰⁰/₁₀₀ Dollars.

on account
balance of Pay. *Clatmy* David Powell
for *skan*

CA. No.	10189	Initials	<i>E</i>
Pay Ledger	287	Initials	<i>EW</i>
Gen. Ledger		Initials	

Regtl. No.

see pay ^{Bank}

A.C.S.

No. 1176

Rank

P6

Name

Sheard W

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$8¹⁰/₁₀₀

June 1st 188

Received from the First Newfoundland Regiment
the sum of Eight 10 Dollars.
on account of Pay. to 31/6/18
balance

W. Dixon

Ck. No. <u>1768</u>	Initials.....
Pay Ledger <u>[Signature]</u>	Initials <u>[Signature]</u>
Gen. Ledger.....	Initials <u>[Signature]</u>

Regtl. No. _____ Rank _____

[Signature]

No. 1176 Rank Pte

Name W. Skeans

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$10.⁰⁰

Jan 29th 18

Received from the First Newfoundland Regiment
the sum of ten Dollars.
on account of Pay.
~~balance~~

Cheque mailed 2/7/18

Ch. No.	8169	Initials	ew
Pay Ledger	15	Initials	WPK
Gen. Ledger		Initial	

Regtl. No. Rank

C.P.B.

No. 1176

Rank

Pte

Name

W^m Skeans

J. Camp.

917-1918

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY. VOUCHER.

\$ 15.00

July 30th 1918

Received from the First Newfoundland Regiment
the sum of ten Dollars.
on account of Pay.
~~balance~~

Ch. Mailed

Ch. No. 8585	Initials JH
Pay Ledger 230	Initials WM
Gen. Ledger	Initials

Regtl. No. Rank

No. 1176

Rank

P6-

Name

Skians W.

Jenson Camp.

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 5.00

May 25th 1918

Received from the First Newfoundland Regiment
the sum of Fifteen Dollars.
on account of Pay.
balance

W Skuand

J.B.B.

Ch. No. <u>6960</u>	Initials <u>EW</u>
Pay Ledger <u>RA</u>	Initials <u>YD</u>
Gen. Ledger <u>RA</u>	Initials <u>YD</u>

Regtl. No.

Rank

No.

1176

Rank

Pte

Name

W. Skeans

C.R. 1176

RECEIPT.

I hereby certify that I have received the 1914-1915

STAR.

No 1176 Name Wm William Stearns

Witness. J. W. Brown

Date Dec 12th 1919

Place Jensen Camp

Jensen Camp
Dec. 3/19.

To. Capt. M. T. Howley. ^{R. 1176}

Dear Sir.

Kindly.

Let bearer have 1914 & 1915

Star for Reg. No. 1176 Pte W. M.
Skeans.

Yours faithfully

William Skeans.

(Taken by
728 Brown)

C.R. 1176

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 W. Jones

Date 28/3/19

Place St. James

for L. Brown

Please sign, and return to Dept. 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.

W. T. Readell
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* *On the Nile*
from *August 30th* 1915 to *March* 1916.

(Date) *Aug 30th* (FC) *1176*.. (Rank) *Lt.* (Name) *William Shames*
(Place) *Egyptian Frontier.*

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

C.R. 1176

r
Extract from Daily Orders part II, Depot St. John's
dated March 19th., 1919.

1176 Pte. Wm. Skeans

App. in D. O. Pt. II, #50 (1919) as "Discharge on demobilization
confirmed from 13-3-19." Should read "Having been found medically
unfit is discharged from 13-3-19."

C.R. 1176

Extract of DAILY ORDERS PART II ROYAL NEWFOUNDLAND
REGIMENT DEPOT ST. JOHN'S DATED MARCH 18th/19.

The Discharge of the undernoted on Demobilization
has been CONFIRMED by Officer i/c Records from
noted date.

1176 Pte. Wm. Skeans.

13/3/19.

C.R. 1176

Extract from Preliminary report of Medical Board held on Thursday
Feb. 20th 1919.

1176 PTE. Wm. Skeans.

2nd Board. Recommended Discharge from the Army as Permanently
Unfit. Remain in Jenson Camp.

C.R. 1176

Extract ~~of~~ of Report from The Director of Medical Services to O.C., Depot
dated June 1st. 1918.

At a Medical Board held on Friday May 31st:-

1176 Pte. Wm. Skeans

Royal Nfld. Regt..... Recommended admission to Jensen Camp.

C.R. 1176

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. St. John's, dated May 23, 1918

The following man is reported to Headquarters from Overseas
on May 24, 1918.

#1176 Pte. W. Skeans.

C.R. 1176

Extract from Communication despatched to ~~His~~ Governor
from Major C.S.O. St. John's, dated May 16, 1918.

The following man embarked at Liverpool on March 15th
for Halifax is being sent home for discharge:-

#1176 Pte. Skeans.

2

Extract from Telegram received from London, dated
May 14^g1918.

The following embarked per Government transport at
Liverpool on March 18th, for Halifax, special duty,
in reply to your telegram of May 9th:

#1176 Ptr. Skeans.

Being sent home for discharge.

2

C.R. 1176

Extract of Casualty List received from P & R O, London Dated 11 March 1948
The following man of the 2nd. Batt. still remains in Scottish Hospital.

.1176 Pte. W. Skeans

1st. Nfld. Regt. Adm. Ayr Military Hospital.Halmoptysis. 17/12/17.

C.R. 1176

extract of Casualty List received from Pay and Record Office
London dated April 29th. 1917.

The following r/b O.C. unit 15.4.17 as "Wounded" 14.4.17.
No previous reports.

1176 Pte. W. Skeans

1st. Newfoundland Regiment.

C.R. 1176

Extract from Nominal Roll of 1214. Regt. Draft No. 17
from 2nd Bn. Depot, to 1st Bn. B.E.F. Embarked South-
ampton, 1-2-17.

1176 Pte. W. Skeans.

C.R. 1176



SICK AND WOUNDED N.C.O.'s AND MEN OF THE EXPEDITIONARY FORCE - FRANCE

CORK RECORD OFFICE

No.H.A.2200

3957 Pte. O'Donnell G. 8th Muns.Fus.

G.S.W. Buttock R.....To Eng. per H.S. 'Jan Breydel' ex 8 Sty.H.3 Sept.16.

DUBLIN RECORD OFFICE

No.H.A.2200

23782 Pte. Comerford J. 9th R.Dub.Fus.
 9502 " Moran G. 1st R.Dub.Fus.att.18
 Mobile Vet.Sect.
 9788 Sgt. Deveney J. 1st R.Dub.Fus.
 22480 Pte. Turner R. 1st Innis.Fus.
 19473 Cpl. Callaghan T. 2nd do.
 4103 Pte. Venner J. 8th do.
 8694 " Wiseley R. 2nd Irish.Rifs.
 8602 " Fitzgerald S. 2nd do.
 2126 " Grace W. 11th R.Ir.Rif.
 2134 " Tolson E.A. 11th do.
 18300 " Mc. Ilroy J. 11th do.
 18/86 " Boyd J. 12th do.
 42558 " Wilmot E. 13th do.
 18278 Sgt. Bunting R. 13th Irish.Rifs.
 18550 Pte Radcliffe D. 9th do.

N.Y.D. Mental.....Adm. 8 Sty.Hos. Wimereux ex 25 Gen.H.3 Sept 1916.
 Contus.Leg.....Adm. 8 Sty.Hos. Wimereux 4th September 1916.
 Epilepsy. do.
 Bilharzia.Haematobia.To Eng. per H.S. 'Jan Breydel' ex 8 Sty.H.3rd Sept.16
 GSW Arms.Leg L.& Back. do.
 Bronchitis Trans.to 1 Con.Dep.Boulogne ex 8 Sty.H.3rd Sept.16.
 I.C.T.Feet. Adm. 8 Sty.Hos. Wimereux 3rd September 1916.
 Trench Feet. do.
 W.Gassed Drift.....Adm. 8 Sty.Hos. Wimereux 4th September 1916.
 W.Gassed Drift..... do.
 W.Gassed Drift. do.
 W.Gassed Drift. do.
 G.S.W.Leg.L. do.
 Phlebitis.Arm.R.....Trans.to 1 Con.Dep.Boulogne ex 8 Sty.Hos.3rd Sept.16.
 D.A.H. do.

NEWFOUNDLAND CONTINGENT

No.H.A.2200

1176 Pte. Skeans W. 1st Newfoundland

Wound Index-Finger. Adm. 8 Sty.Hos. Wimereux 3rd Sept 1916.
R.(Acc).

MILITARY POLICE CORPS RECORD OFFICE ALDERSHOT

No.H.A.2200

1244 L/C. Samways F. M.F. Police. 1st Railhead. GSW Multiple.....Adm. 8 Sty.Hos. Wimereux 8th September 1916.
1st Corps.

SICK & WOUNDED N.C.O.s & MEN OF THE EXPEDITIONARY FORCE - FRANCE.

C.R. 1176

CORK RECORD OFFICE.

LIST NO. H.A.2193.

181 Pte. Donan, T.	2/Lein.R.	W.Shk.Shell &.....	Trans.to 1 Con.D.Boulogne ex 8 Sty.H.4th
		Spr.Ankle.L.	Sept.16.
5083 Sjt. O'Neil, J.	3/Conn.Rangs.att.	Nephritis.....	To Eng.per H.S.Jan Breydel ex 8 Sty.H.
	8/R.Ir.Fus.		4th Sept.16.
6083 Pte. McGrath, J.	2/Mun.Fus.	Delusional Insanity	To Eng.per H.S.Jan Breydel ex 8 Sty.H.
			4th Sept.16.
10965 Pte. Brophy, M.	6/Conn.Rangs.	Primary Dementia	-do-

DUBLIN RECORD OFFICE.

LIST NO. H.A.2193.

9335 Sjt. Hunwick, J.	1/Ir.Fus.	W.Shock Shell &.....	Adm.8 Sty.H.Wimereux 4th Sept.16.
		Epilepsy.	
2108 Pte. Thompson, H.	11/Ir.Rifs.	W.Gassed Drift.Own.	-do-
14128 Sjt. Brownlee, J.	9/Ir.Rifs.	GSW.Thigh.	-do-
12532 L/C. Armstrong, G.	8/Ir.Rifs.	ICT.Thumb.R.	-do-
8694 Pte. Kiseley, R.	2/Ir.Rifs.	ICT.Feet.....	Dis.to Base Dtls.Boulogne ex 8 Sty.H.4th
			Sept.16.
16918 Sjt. Park, T.	10/Ir.Rifs.	Frac.Old Fibula R...	Trans.to 1 Con.D.Boulogne ex 8 Sty.H.4th
			Sept.16.
25090 Pte. Brown, H.	10/Dub.Fus.	GSW.Arm.L.....	To Eng.ex HS.Jan Breydel ex 8 Sty.H.4th
			Sept.16.
953 Pte. Phair, J.	16/Ir.Rifs.	GSW.Arm.R.	-do-
16012 Pte. McGuinness, T.	2/Dub.Fus.	GSW.Milt.	-do-
42847 Pte. Wright, P.	13/Ir.Rifs.	GSW.Thigh.R.& Arm.R.	To Eng.per H.S.St.Andrew ex 8 Sty.H.4th
			Sept.16.
14500 Pte. Connor, J.	9/Ir.Fus.	Wds.Arm.L.& Scalp.Acc.	-do-
18700 Pte. Thompson, W.T.	109/ MGCo.late 19/ Innis.Fus.No.17247.	GSW.Arm.L.	-do-
1140 Pte. Montcrieff, R.J.	16/Ir.Fus.	Neurasthenia.....	Trans.to 1 Con.D.Boulogne ex 8 Sty.H.4th
			Sept.16.
22714 Pte. McGowan, M.	2/Dub.Fus.	GSW.Hand.L.	-do-

NEW FOUNDLAND CONTINGENT.

LIST NO. H.A.2193.

1176 Pte. Skeans, W.	1/Newfoundland.	Wd.Index Finger R.Acc.	To Eng.ex per H.S.St.Andrew ex 8 Sty.H.4th
			Sept.16.



1176

C.R. 1176

Extract from Casualties received from P & R Office London.

5-9-16.

1176 Pte. Skeans A.

Wd. index 2nd finger (accident)

C.R. 1176

Extract from List of Officers R. C. O's and men
of the Royal Newfoundland Regiment who were
Employed as Transport to the 1st., 2nd., 3rd.,
Composite Battalions engaged on the Western
Frontier in Egypt. Dec----Feb.

1176 Pte. W. Skeans.

The above man did not embark for Gallipoli but
was left behind at Alexandria when the Battalion
sailed on Sept. 13, 1916.

22/4/16.

C.R. 1176

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

No. 7. Platoon.

1176 Pte. W. Skeans.

C.R. 1176

Wm.Skeans was attested for General Service
with the NEWFOUNDLAND REGIMENT on ... February 22nd. 1915
Regimental No 1176 was allotted to Pte. Wm.Skeans.

AUTHORITY:

Record Ledger,

Dept. of Militia,

March 25th. 1919.

Casualty Form—Active Service.

Regiment or Corps Newfoundland
 Regimental No. 1176 Rank Pte Name Stearns H
 Enlisted (a) Feb 24/15 Terms of Service (a) 1 year Service reckons from (a) _____
 Date of promotion to present rank _____ Date of appointment to lance rank _____ Numerical position on roll of N.C.O.s. _____
 Extended Duration of the engaged Aug 1/16 Qualification (b) _____



Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 103, Army Form A. 96, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 103, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked St. John's, NFLD.		20.3.15	
		Lisembarked Alexandria		1.9.15	
		Embarked 2.3.16			
		Des Marseilles 10.3.16			
		with Battalion	Kaous	4.7.16	
		88 Ad Ad. 2/9/16 Inland W. finger band	10 CCS	2.9.16	
		Inland Eng	8 Gen	4.9.16	
			Marsou		

To	No.	DATE
M. of M.	2472/16	22/5/18
O.C. 1st. Bn.		
2nd. Bn.		

COPY SENT TO
 G. H. Q.
 ST. JOHNS, N.F.L.D.
 REF 38 No.
 DATED

FOR THE INFANTRY RECORDS
 G. H. Q. 2nd ECHOLON

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

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Regiment of NewfoundlandNumber of Sheet 1

Printed and Sold by Gale & Polden, Ltd., Wellington Works, Aldershot. 2/6 per 100,20,712-s.

Signature of O. C. Company [Signature]
Capt.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay	
No.	<u>1476</u>	Age on <u>28</u> years - months		<u>Chaffeur</u>		
Joined <u>1st N.F. & D.</u> Date <u>Feb 22 1919</u>		Date of Enlistment <u>Feb 22 1915</u>		Religion		
Joined <u>2nd N.F. & D.</u> Date <u>11-10-16</u>		Period of { with Colours <u>4³⁰</u> years. with Reserve <u>3³⁶</u> years.				
Joined _____ Date _____				<u>P. C. Kilbride</u>		
Joined _____ Date _____						

Place	Date of Offence	Rank	Case of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
		<u>Plt.</u>		<u>Medically unfit</u>	<u>Sgt. 13</u>	<u>3</u>	<u>19</u>		

COPIES SENT		
To	No.	DATE
M. OF M.	<u>7473/46</u>	<u>11/15/19</u>
O.C. 1st. BN.		
" 2nd. BN.		

To be carried over