

MEDICAL REPORT
FINAL EXAMINATION



First Newfoundland Regiment

ATTESTATION PAPER

Regimental No. 273

Name in full Albert Ernest Slade Age 21

Address Loon Bay N.B.

Married Single Height 5' 8" Weight 150 lbs

Color Hair dark Eyes brown

Other distinguishing marks Cut 1 inch long on left knee

Nearest relative father Fredk.

Address as above

Dependents none

Occupation fireman Present wage \$5000 per mo.

Previous service

Decorations

General Remarks

Date of Enlistment

I, Albert Ernest Slade, 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 conditions of my service.

Declared before me this 1st day of September 1914

Albert Ernest Slade

Wm. Slade
1st Lt. 1913

Sept 2nd

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Reg. No. 2

273

Name Albert Ernest Slade

Apparent age 21 years _____ months. Height 5 feet 8 inches.

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

Distinctive marks Hair: Dark, Eyes: Brown

Other distinguishing marks: Cut one inch long on left knee

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin Frederick Slade, Loon Bay, N.D.B., Nfld.

Relationship Father

Particulars as to Marriage.

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

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

Particulars as to Children.

Christian Names	Date and Place of Birth.

STATEMENT OF THE SERVICES.

Corps in which served	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>2/9/14</u>									
Joined at <u>St. John's</u> on <u>2nd September '14</u>									
		<u>Wounded</u>		<u>1/11/15</u>					
Total Service forfeited as above									
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days									
" " " Pension _____ (") _____ " "									

DESCRIPTIVE REPORT ON ENLISTMENT.

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

Reg. No. 273

Name **Albert Ernest Slade**

Apparent age ²¹ years months. Height 5 feet 8 inches.

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

Distinctive marks **Hair: Dark, Eyes: Brown**

Other distinguishing mark: **Cut one inch long on left knee**

INFORMATION SUPPLIED BY RECRUIT.

Name and Address of next of kin **Frederick Slade, Loon Bay, N.D.B., Newfoundland**

Relationship **Father.**

Particulars as to Marriage.

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

(a)	(b)	(c)	(d) Verified from certificate.

Particulars as to Children.

Christian Names	Date and Place of Birth	(d) Verified from certificate

STATEMENT OF THE SERVICES.

Corps in which served	Regt. or Depot	Promotions, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed 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>2/9/14</u>									
Joined at <u>St. John's</u> on <u>2nd September '14</u>									
<i>Discharged 24/1/19</i>									
<i>Embarked S.S. Torbay for W. I. 3¹⁰/₁₄ Embarked to C. I. 20⁸/₁₄</i>									
<i>Disembarked W. I. and returned for leave 31³⁰/₁₄ Embarked for Halifax 13⁹/₁₄</i>									
<i>Landed Halifax 13⁹/₁₄ night of 19²⁰/₁₄ till 15¹⁵/₁₄ Disembarked to the Reg. Depot 21¹⁰/₁₄</i>									
<i>Admitted H.S. Company 7¹⁴/₁₄ Leave to return 11¹⁰/₁₄ Embarked Port Louis 14³/₁₄</i>									
<i>Arrived Port Louis 22³/₁₄ with Battalion 4⁷/₁₄ Admitted 24¹⁰/₁₄</i>									
<i>to duty 20¹⁰/₁₄ Granted leave for 8 weeks counting 22⁷/₁₄ for purpose 22⁷/₁₄</i>									
<i>Arrived London & embarked at South Wales for S.S. Torbay 24⁷/₁₄</i>									
<i>Arrived W.I. 2⁸/₁₄ Granted leave 8²/₁₄ Reported 11¹⁰/₁₄</i>									
<i>Granted conditional leave for 20¹⁰/₁₄</i>									
<i>Demobilisation Approved 1⁷/₁₄ Confirmed 15⁷/₁₄</i>									
Total Service forfeited as above									
Total Service towards Engagement to <u>15-2-19</u> (date of discharge)					<u>4</u> years		<u>166</u> days		
" " " Pension " " " " " " " "					" " " " " " " "		" " " " " " " "		

18210-9

Casualty Form—Active Service.

Regiment or Corps 1st Newfoundland

839

Regimental No. 273 Rank Pte Name E. Slade

Enlisted (a) Oct 2/14 Terms of Service (a) Duration of war Service reckons from (a) Oct 2/14

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

Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 218, 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. 218, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked St. John's, [NFLD.]		3/10/14.	
		Disembarked Alexandria		1/9/15.	
		Embarked for Gallipoli		13/9/15.	
31/10/15.	Unit.	Shrap. Wound, L. Leg B 213	Dardanelles	31/10/15.	
7/11/15.	"Dongola"	Admitted A 36	H.S. "Dongola"	7/11/15.	Auth. A 18581.
13/11/15.	Comdt., Malta.	do	Mil. Hosp., Malta.	7/11/15.	C 4892.
26/1/16	<i>D</i>	<i>Dist duty</i>	<i>Base Hospital</i>	<i>1/16</i>	<i>L 601</i>
26/1/16	<i>unit</i>	<i>to unit</i>	<i>unit</i>	<i>26/1/16</i>	<i>B 213</i>
		Embk'd Port Suez		14.3.16	
		Disembk'd MARSEILLES		22.3.16	
	<i>unit</i>	<i>With Battalion</i>	<i>Trouce</i>	<i>4.7.16</i>	<i>B 213</i>
			<i>With BATT</i>	<i>28.1.17</i>	

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

273 Pte E. Slade

18710-P

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 86, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 86, or other official documents.
Date	From whom received				
17/2/17.	Unit	Awarded 7 Day S.P. No 2.	France	3/2/17.	6810. 8 C.
30/3/18	Sq 7A	Ad special 24/3/18 to acty		30/3/18	E.D 9455
22.7.18	OC unit	Proceeded Overseas for 2 weeks for Reservations & other purposes.		24.7.18	GA NO/10 11544

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

MEDICAL HISTORY

OF

Surname Slade Christian Name Albert Ernest

Table I.—GENERAL TABLE.

Birthplace:—Parish	SPECIAL RESERVE.		REGULAR ARMY.	
	County			
Examined	on	day of 191	on	day of 191
	at		at	
Declared age		21 years days		years days
Trade or occupation		<u>Firman</u>		
Height		5 feet 8 inches		feet inches
Weight		150 lbs.		lbs.
Chest Measurement {	Girth when fully expanded	inches		inches
	Range of expansion	inches		inches
Physical development				
Vaccination marks {	Right	Left	Right	Left
	Arm ...			
Number				
When vaccinated				
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)				
(Rank)				
		Medical Officer.		Medical Officer.
Enlisted	at	<u>St John</u>	at	
	on	day of 191	on	day of 191
Joined on enlistment	Corps		Corps	
	Regtl. No.	<u>273</u>	Regtl. No.	
Transferred to				
Became non-effective by				
	on	day of 191	on	day of 191
(Signature)				
(Rank)				

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

MEDICAL HISTORY

Surname Slade OF Christian Name Albert Ernest

Table I.—GENERAL TABLE.

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY.																					
	on	day of 191	on	day of 191																				
Examined	at		at																					
Declared age	21	years																						
Trade or occupation	Fireman																							
Height	5	feet 8																						
Weight	150																							
Chest Measure. { Girth when fully expanded ..																								
	Range of expansion ..																							
Physical development	Right	Left	Right	Left																				
Vaccination marks { Arm																								
	Number																							
When vaccinated																								
Vision	R.E.—V.=		R.E.—V.=																					
	L.E.—V.=		L.E.—V.=																					
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)																					
			Original																					
(b) Slight defects but not sufficient to cause rejection	(b)		(b)																					
			<table border="1"> <thead> <tr> <th colspan="3">COPIES SENT</th> </tr> <tr> <th>To</th> <th>No.</th> <th>DATE</th> </tr> </thead> <tbody> <tr> <td>M. OF M.</td> <td>20452/201</td> <td>R+E 11/2/18</td> </tr> <tr> <td>O.C. 1st. Bd.</td> <td></td> <td></td> </tr> <tr> <td>" 2ND. Bd.</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>		COPIES SENT			To	No.	DATE	M. OF M.	20452/201	R+E 11/2/18	O.C. 1st. Bd.			" 2ND. Bd.							
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(Rank)																								
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Enlisted	at	St. Johns	at																					
	on	day of 191	on	day of 191																				
Joined on enlistment	Corps	Regtl. No.	Corps	Regtl. No.																				
	108.																							
Transferred to.. .. .	108.	273																						
	273																							
Became non-effective by	on	day of 191	on	day of 191																				
(Signature)																								
(Rank)																								

Demobilization Form 2

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 373 Rank Private Name Slade, A. E.
 Intended place of residence Loon Bay N.D.B.
 2. Occupation Fireman
 Classification of soldier C Medical Category A.I.

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

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

Place
 Date
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date
 Signature of soldier
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place and Date 20-11-19 St. John's
Requested Conditional leave to take up
employment with A. N. D. Coy. Millerton,
 Signature of soldier
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 2-9-14 No of days on Military
 Discharged from service 1-2-19 Plus 14 days Service 1628

APPROVAL OF DISCHARGE

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

Place ST. JOHN'S
 Date FEB 1 1919
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place St. John's Nfld
 Date February 15/1919
 Officer in Charge
 The Royal Newfoundland Regiment

ASB 2079/966

Dept 773
Demobilization Form 1

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. *273* Rank *Plt* Name *Maude A.E.*
 Date of Enlistment *2.9.14* Address *Lawn Bay* District *NSB*
 Occupation *Fireman* Classification for Discharge *E* Medical Category *A.T.*
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

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

Date.....*3.2.19*.....

W. H. Capps
O.C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am.....in a position to resume civilian occupation.

Granted Conditional Pt 20.11.18 to take up employment with A. N. D. Co Millertown

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable.....

(b) Clothing Supplied

Date.....

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. to his home at and Release Certificate No. 1011 issued ^{wanted}

Date 3-2-19

C. D. Dick Capt
Demobilization Officer

4. Pay and Allowances.

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

Date

Depot Paymaster.

Discharge approved for 1-2-19

Forwarded with following documents to O.C Discharge Depot.

N.F. Pj36	B 268	B 121	1	N.F. Med.	D.F. 1.	1	Ret. form 2 + TMB 1
B 178	W 3494	B 122		Board 1st.	" 2.		
B 178a	1 D 400A	B 1915		do 2nd.	" 3.	2	
B 179	D 400B	Form L.		do 3rd.	" 4.		
B 179a	D 400C	Form K.		do 4th.	" 5.		
B 179b	B 103	1 ME 2.			" 6.		
B 179c	B 120	M 93					

Date 4-2-19

C. D. Dick Capt
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—
Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

ELIGIBLE for POST DISCHARGE PAY

Date FEB 1 1919

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

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

Date 2 Aug 1919

W. J. ...
Secretary

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S. Nfld.

Fold Here

SEP 23 1921.

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

Albert E. Slade

in respect of his service as No. 273 Rank Pte.

Name A. E. Slade Royal Nfld. Regt.
Nfld.

Receipt of the same should be acknowledged hereon.

Received Both Medal's

Signature Albert E. Slade

Date Millertown Oct 20th 1921

Address Newfoundland.

[P.T.O.]

RECEIPT.

C.R. 273

✓ I hereby certify that I have received the 1914-1915

STAR.

No 279 Name Ernest Glade

Witness Ethel Glade

Date 5/1/20

Place Millertown

C.R. 273

RECEIPT FOR ISSUE OF
RIBAND OF BRITISH WAR MEDAL 1914-1919

I certify that I have received a issue of $\frac{3}{4}$ inches
of Riband of British War Medal-1914-1919.

Name *C. Glade*

(Date) *23/12/19*

(Place) *Millerstown*

RECEIPT FOR ISSUE OF
RIBAND OF 1914-15 Star.

C.P.

273

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

61

273 Name *A. E. Slade*.....

Date *2/4/19*.....

Place *Millertown*.....

Please sign this and return to Department of Militia.

C.R. 273

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. J. Readell Lieut. Col.,

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*

from *Sept. 19* 1915 to *Nov. 6th* 1915.

(Date) *April* (No) *273*.. (Rank), *Pte*.. (Name) *A. C. Slade*

(Place) *Millertown*.....

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

Riband
Posted 14/4/19
Gallipoli

C.R. 273

Extract from Daily Orders part II, Depot St. John's dated Feb. 7/1919.

The discharge of the undernoted on demobilization have been
APPROVED by C. G. Discharge Depot on 1-2-19.

#273 Pte. E. Slade.

C.R. 273

Extract from Daily Orders West 22 Unit The Royal RFA.
Regt. St. John's, Feb. 18th, 1919.

The discharge of the Undersigned on demobilisation has
been confirmed by Officer i/c Records on 15-2-19.

15-2-19

273 Pte. Albert E. Slade.

C.R. 273

Extract from Telegram from Synoptical, London dated Nov. 20th., 1918

#273 Slade.

the above mentioned granted conditional leave from Nov. 20th. 1918



DEPARTMENT OF MILITIA

ADDRESS REPLY TO
DEPARTMENT OF MILITIA
AND QUOTE NO.

273

ST. JOHN'S, NEWFOUNDLAND.

October 18, 1918.

From:- District Officer Commanding,
Newfoundland.

To:- Minister of Militia,
City.

#273 Private Ernest Slade.

I enclose communication from Officer
Commanding Depot covering letter from
the above noted soldier with refer-
ence to obtaining discharge.

This man is at present in Newfoundland
on Blue Puttee leave.

McMontgomery
Major.
District Officer Commanding.
Newfoundland.

ENCLOSURE.



THE ROYAL NEWFOUNDLAND REGIMENT
HEADQUARTERS

St. John's, Newfoundland,

October 8th/16 191

8 - 113 P A

From Officer Commanding,
Depot.

To D.O.C., Newfoundland,
Militia Department.

#275, Pte Ernest Slade.

Enclosed please find communication from above named soldier with reference to his present position. He states that there is no one left at home but an aged mother and an invalid sister and that he is the main support.

R.H. Lait

Captain,

O. C. Depot.

RHT/TJW;

ENCL:

5000

C.R. 173

Extract of Daily Orders Part 11, UNIT: The Royal Newfoundland
Regiment, dated October 2nd 1918.

BLUE PUTTEE LEAVE.

THE FOLLOWING REPORTED AT HEADQUARTERS ON THE FOLLOWING DATE:-

Pte. A.E. Slade.

1/10/18.

77 Longs Hill
St. Johns

7.10.18

To,

Capt. Tait, M.C.

Royal N.F.L.D. Regt.

Dear Sir:—

Since my
enlistment in the Army in 1914 my Father
has died leaving my mother seventy three
years of age to look after the property
and live alone; I also have a sister
very ill in hospital and a brother with
an artificial leg a private in the Army.

My mother is very aged and cannot
possibly take care of herself: my
sister has been in hospital bed for
eighteen months

you or those concerned Sir, would
oblige me greatly by giving this its
due consideration

I am Sir

your obedient servant

No 273 Pte. Ernest Gladr
Royal N.F.L.D. Regt.

C.R. 273

Extract from Daily Orders Part 11 Unit The Royal
Nfld. Regt. St. John's, dated August 9, 1918

The following Man Returned from Overseas and Reported at
Depot August 8th, 1918.

273, Pte Slade, A.E.

On "Special Blue Puttee Leave" and Granted Leave from Depot
Until 8/9/1918.

C.R. 273

Extract from Daily Orders UNIT IN THE FIELD, DATED 31/7/18.

#273 Pte. E. Slafe.

THE ABOVE MENTIONED SOLDIER HAVING PROCEEDED TO ENGLAND ON 24/7/18
FOR THE PURPOSE OF RECRUITING AND OTHER PURPOSES AND IS STRUCK UP
THE STRENGTH.

FEB 18 1916

Dear Sir,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that

No. 273, Private Albert E. Slade, who was reported at Convalescent Camp, Malta, on December 21st suffering from shrapnel wound in left leg, was discharged to active service on January 4th.

This information has been received by mail.

Yours faithfully,

Colonial Secretary.

**Mr. Frederick Slade,
Leon Bay, N.D.B.**

February 1, 1916.

Dear Sir,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that

No. 273, Private Albert E. Slade, who was previously reported as suffering from shrapnel wound in the leg at Malta, November 17th, was transferred to All Saint's Camp, Malta, on December 21st.

This information has been received by mail.

Yours faithfully,

Mr. Frederick Slade,
Loon Bay.

Colonial Secretary.

C.R. 273

Extract of Casualty list received from Pay and Record office London
dated Jan. 19 1916.

273 Pte. E. Slade,

Lst. Newfoundland Regiment, Dis. to Active Service per H.T. "Bornu" Ex All Saints

Saints C.C. Malta 4th. Jan. 1916.

SICK & WOUNDED N.C.Os & MEN OF THE EXPEDITIONARY FORCE.- MEDITERRANEAN.NEW ZEALAND CONTINGENT.LIST NO.H.4508.

16/104 Pte. Furu, M. Maori Contingent. Bubo.Slt.....Trans.to "Ghain Tuffieha"
Camp Malta ex Mil.Hos.Tigne
21st Dec.15.

12/1169 Pte. Carter, C. 16/N.Z.R.Trans.to H.T.Bornu ex St.
Anthony's H.Ghain Tuffieha
Malta 20th Dec.15.

4/771 Sap. Kessel, S. N.Z.E. -do-
9/964 Tpr. Paulin, R.N. 7/O.N.Z.R. -do-
12/2149 Pte. Warren, A.W. A.N.Z.R. -do-
11/845 Tpr. Reid, W.A. Well.N.Z.R.Trans.to H.T.Bornu (Active
Service) ex St.Anthony's H.
Ghain Tuffieha Malta 20th Dec.15.

NEWFOUNDLAND CONTINGENT.LIST NO.H.4508.

1 273 Pte. Slade, E. 1/Newfoundland. ✓ Shrap.Wd.L.Leg.Slt.....Trans.to All Saints Camp Malta
ex Mil.Hos.Tigne 21st Dec.15.

✓

ADMIRALTY.LIST NO.H.4508.

Z/1555 A.B. Ramsey, G.W. R.N.D.Anson.Trans.to H.T.Bornu ex St.Anthony's
H.Ghain Tuffieha Malta 20th Dec.15.

(16)

December 15, 1915

Dear Sir,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that No. 273, Private Albert E. Slade, who was previously reported suffering from a shrapnel wound in the left leg, was admitted to Hospital, Malta, from the Hospital Ship DONGOLA on November 17th.

This information has been received by mail.

Yours faithfully,

Mr. Frank Slade,
Leon Bay.

Colonial Secretary.

(16)

~~December 10,~~ 1915

Dear Sir,

I beg to inform you that additional information has to-day been received from the Record Office of the First Newfoundland Regiment, London, to the effect that the injury sustained by No. 273. Private Albert E. Slade, of which you have already been notified, consisted of a shrapnel wound in the left leg.

This information has been received by mail.

Yours faithfully,

Colonial Secretary.

Mr. Fredk. Slade,
Loon Bay.

C.R. 273

Extract of Casualty received from Pay & Record Office,
London, dated Dec. 1st 1915.

273 Pte. E. Slade

Shrap. W.L., Leg 1/11/15.

C.R. 273

Extract of Sick and wounded N.C.Os. and Men of the Mediterranean Expeditionary
Force, No: H. 3337, dated Nov. 26th. 1915.

273 Pte. E. Slade

1st. Newfoundland.....Shrap. L.Leg.....Adm. 26 Gas. Cl. Str.
Suvla 1st. Nov. 1915.

C.R. 273

Extract of Sick and Wounded H.C.Os. and Men of the Mediterranean Expeditionary Force, No: H. 3337, dated Nov. 25th, 1915.

273 Pte. E. Slade

1st. Newfoundland..... Shrap L. Leg.....Trans. to H.S. "Dongola"
ex 26 Gas. Cl. Stn. Suvla 3rd. Nov. 1915.

C.R. 273

**Extract of Sick and Wounded N.C.Os. and Men of the Mediterranean Expeditionary
Force, No: H. 3318, dated Nov. 25th. 1915.**

273 Pte. E. Slade.

**1 Newfoundland R..... Shrap. Wd. L. Leg..... Adm. Hospital
in Malta ex H.S. "Dongola" 17th. Nov. 1915.**

C.R. 273

Extract of Mediterranean Force Casualties. No. M. 15017. Dated Nov. 18th.
1915.

Telegram from Col. Echelon, Alexandria, dated 18th. November, 1915. (C
(No. M.F.C. 36868.) Received 18th. November, 1915.

273 Pte. E. Slade

Newfoundland Regiment..... Wounded 1st. November, 1915.

✓
S (16)

COPY OF TELEGRAM.

Dated November 18, 1915.

To Mr. Frederick Slade,
Loon Bay.

Regret to inform you that the Record Office,
London, officially reports that No. 273. Private
Albert Ernest Slade, was wounded on the first November.

Upon receipt of further information I shall immedi-
ately wire you and trust that the next report will
be of his convalescence.

J. R. BENNETT,

Colonial Secretary.

C.R. 273

Extract from Nominal Roll of "A" Co. 1st Bn. Rfld.
Regt. embarked at Devonport for Active Service, 20-8-15.

273 Pte. E. Slade.

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

C.R. 273

Extract from Nominal Roll Embarked St. John's per SLS.

"Florizel" Oct. 4, 1914.

273 Slade Albert E.

C.R.

273

Albert E. Slade was attested for General Service
with the NEWFOUNDLAND REGIMENT on Sept. 24 1914.
Regimental No. 273. was allotted to Pte Albert E. Slade.

AUTHORITY:

Record Officer

Dept. of Militia,

March 25th, 1919.

Reg. No. 273 Rank Pt Name Slade A. C.

Attested Address Loon Bay N. B.

Allotment..... Allottee

Date of Allotment..... Returned from Overseas 8-8-18.

Embarked for Overseas Cause Special Blue Letter Leave

From 8-8-18 to 8-9-18.

Granted Leave from 27-10-18 to 3-11-18
Granted Conditional leave from 20-11-18 for the purpose
of taking up civil employment for himself until end
of the year, and then with A.S. Co. Milltown.

FEB 3 1919

PASSED TO DEMOBILIZATION OF

1-2-19.

DISCHARGE APPROVED ON DEMOBILISATION.

April 3rd., 1919

#273 Pte. Albert E. Slade,
Millertown, Nfld.

Dear Sir:-

Referring to your application I enclose cheque for Seventy dollars (\$70.00), being amount of first payment due you on account of the "War Service Gratuity."

Yours truly

Captain,
Paymaster & i/c Records

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

1175
Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th. 1919.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any 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, MAY & RECORD OFFICE, ST. JOHN'S.

Christian name... *Albert*... 2. Surname... *Slade*.....

3. Rank... *Pte*..... 4. Regtl. No... *273*.....

5. Address in full to which future payments of gratuity are to ~~far~~ be forwarded... *Millertown*... *N. F. D.*.....

6. Date of enlistment in the Regiment... *Sept. 2nd. 1914*.....

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

... *No. Allowance. received*..... *left. allotment*.....

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

9. Address in full of such dependent... *Mrs. Amelia Slade*.....

... *Loon Bay*... *via*... *Lewisporte*.....

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 Nfld. If so, give dates, and particulars of such service... *Not Applicable*.....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas... *left for Overseas Oct. 6th. 1914*...

... *arrived back to Newfoundland Aug. 8th. 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.....

have received. No. Post. Discharge. Pay. or. Gratuity.

15. Have you been issued with a War Service Badge?..... *No*

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. *have received.*

Nothing from Imperial Forces. Dont know if entitled.

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. *Feb. 15th. 1919*..... (b) Reason for discharge. *Germination*

of War.

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. *Yes.*
Gallipoli. Sept. 19th. to Nov. 4th. 1915. France and Belgium.
March. 24th. 1916. till. July. 24th. 1918.

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

(b). If (a), are you in receipt of full pay and allowances from that Committee..... *Not Applicable.*

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: *Albert E. Slade*
 Place of Residence: *Millertown*
 Declared before me at: *Millertown. Hon. J. P. L.*
 This *21st* day of *May*. 19*19*



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

A. Corner
 Commissioner
 Supreme Court

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.

404

Grand Falls

10/2/19

Pay Master Royal N. Y. F. D. Regt.

Dear Sir,

Will you please forward my
pay that is due me since Nov 15. and also
my clothing allowance.

I remain

Yours Truly

L. J. Pte. Ernest Hade.

Crim House

Grand Falls

Granted Conditional Leave 20-11-18

LAST PAY CERTIFICATE ORIGINAL

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.

Atl No. 273 Rank Pte Name Slade A.R. Unit Ryl Nfld Regt who was Sent
Newfoundland on 27/7/18 Authority Draft 69 Cause Blue Puttee Leave

STATEMENT OF ACCOUNT

PARTICULARS		\$	¢	£	s	d	PARTICULARS		\$	¢	£	s	d
Balance Dr. from							Balance Cr. from 21-12-17				12	14	7
Allotment 333 days @ 60		199	80	41	1	1	Pay 333 days @ \$ 1.00		333	00			
Cash Payments:							Field Allow 333 days @ \$ 10¢		33	30			
Sub P of W Funds £ 7/18 1/10/18					5	0			336	30	75	5	4
Depot Payment per V 277					3	0	Other Allowes days @ \$						
P & R.O. V 5104				12	8	0	Other Credits:						
No 8304				2	15	0	Tation Allow				1	4	6
Other Debits							Total Credits				88	14	5
Acq Rls				7	15	8	Balance due to Paymaster						
Cable 49					4	2							
Total Debits				77	8	11					88	14	5
Balance due by Paymaster				11	5	6					88	14	5
				88	14	5					88	14	5

PERIOD: FROM 19-11-17 To 19-11-18

CHECKED.
R.C.
 27-1-19

533
 153
 5486

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

(Place) _____ (Date) 191
 signed 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, 27-1-1919
 Chief Paymaster & O. i/c Records.

RELEASE FORM FOR CIVIL EMPLOYMENT.

In consideration of having been granted leave of absence for the purpose of taking up Civil employment, I agree to free the Royal Newfoundland Regiment from all claims and responsibilities, (except as mentioned hereafter,) on my behalf from this date, and during the period of such civil employment until I receive my regular Discharge from the Regiment, subject to receiving during the said period the ordinary pay of my present Rank, and on the understanding that I forfeit Field and subsistence allowances, payable from this date.

This grant of Leave of absence is subject, also, to my reporting to Depot Headquarters for Duty whenever Ordered.

Signature of Soldier..... *E. Glade*

Witness..... *W. L. Cap*

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

NOV 19 1918

REPORT OF TRAVELLING MEDICAL BOARD.

Held NOV 19 1918at.....

Number..... *273*

Rank..... *Pfc*Name..... *Glade Ernest*

This is to certify that the above mentioned Soldier has been Medically examined and that he suffers from no disability whatsoever on account of Military Service in the Royal Newfoundland Regiment.

SIGNED..... *R. H. [unclear]* W. C. Depot.

..... *H. [unclear]* S. M. O.

..... *[unclear]* M. O.

Grand Falls.

9/2/19

Hon: J. R. Bennett.

Dear Sir.

4043

In looking over the Daily News I see a notice concerning soldiers with dependents. Sir my case is this. Since my enlistment in 1914 my father died in January 1915 leaving my mother depending on me. Now Sir. Am I entitled to an allowance for her. I would like a little consideration into the matter.

I have the honour
to be Sir.

to be
formal part

Your Obedient Servant.

E. J. Ote. Ernest Slade
Grand Falls

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 273 Rank Pvt. Name Shade A. E.
 Date of Enlistment 2.9.14 Address Loon Bay District N.S.B.
 Occupation Fireman Classification for Discharge E Medical Category AT
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

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

Date..... 5.2.19..

W. M. C. Capt.
O. C. Discharge Depot

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am.....in a position to resume civilian occupation.

Granted Conditional Lt 20.11.18 to take up employment with A. H. D. in Millertown G.W.

Particulars passed to Vocational Officer for information and action.

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable.....

(b) Clothing Supplied

Date.....

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 1011 under to his home at and Release Certificate No. issued.

Date 3-2-19 C. D. Dick Capt
Demobilization Officer

4. Pay and Allowances.

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

Date Depot Paymaster.

Discharge approved for. 1-2-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med	D.F. 1	Rel form 2 + TMB
B 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B 179c	B 120	M 93			

Date 4 2 19 C. D. Dick Capt
Demobilization Officer

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

ELIGIBLE for POST DISCHARGE PAY

FEB 1 1919

Date R. H. Sait Capt
O. C. Discharge Depot.

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

Date

February 15, 1919

#273 Pte. Albert E. Slade,
Loon Bay, N.D.B.

Dear Sir: -

Please find enclosed "Discharge
Certificate No. 966."

Yours truly,

Captain,
Paymaster & O.i/c Records

Enc' .o 1.

1918-1919

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 21 ³²/₁₀₀

Sept 30 ¹⁸/₁₉ 18

Received from the First Newfoundland Regiment

the sum of Twenty one ³²/₁₀₀ Dollars.

on account of Pay.

E. Glad

Ch. No. ... 3327	Initials
Pay Ledger .. 92	Initials .. <i>wn</i>
Gen. Ledger	Initials .. <i>[Signature]</i>

Regtl. No. Rank

No. 273.

Rank *Pl*

Name *Glade A.E.*

St. John's, Sept 30th /18

Royal Newfoundland Regiment.

Billeting Account,

To Mt. E. Slade

Billeting Soldiers as undermentioned

from Aug 8th /18 to Sept 27th /18

273. Mt. E. Slade 47 40

ACCOUNT	<u>B & m</u>
CH. NO.	<u>3357</u>
INITIALS	<u>ew</u>
PAY LEDGER	
CON. LEDGER	

Certified correct for \$ 47.40

P. D. Dickson
Billeting Officer.

E. Slade

St. John's, OCT 1

Royal Newfoundland Regiment.

Billeting Account,

To Mt. E. Slade

Billeting Soldiers as undermentioned

from Sept 27th /18 to Oct 4th /18

273. Mt. E. Slade 7 20

ACCOUNT	<u>B & m</u>
CH. NO.	<u>3617</u>
INITIALS	<u>ew</u>
PAY LEDGER	
CON. LEDGER	

Certified correct for \$ 7.20

P. D. Dickson
Billeting Officer.

E. Slade



1ST NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, E Slade, Regl. No. 273,

hereby agree, until further notification by me, and in similar official form, to make an Allotment of _____ Dollars and sixty 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).	
	Mother.	M ^r A Slade.	Loon Bay.	=	60
				Total Allotment, \$	<u>60</u>

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

(Sig.) Georp Hart
Officer Commanding
A Company

(Sig.) E Slade
(Rank) Plt

OCT 17 1914
191

Glade. A. L.

273

Ray Dept

No. 273Rank Pte.Name A. C. Slade

Pay	F.A.	Wks	Total
100	10		110
Less Allotment			60
Net Rate			50

N. P. D. 73

DEBITS	Date	£	s	d	CREDITS	Period		Days	Rate	P	C	D	s	d	
						From	To								
Balance					Balance		<u>21</u> ^{<u>13</u>} _{<u>17</u>}						<u>12</u>	<u>4</u>	<u>7</u>
Acquittance Rolls		<u>15</u>	<u>11</u>	<u>8</u>	Pay @ Net Rate	<u>22</u> ^{<u>13</u>} _{<u>17</u>}	<u>21</u> ^{<u>7</u>} _{<u>18</u>}	<u>212</u>	<u>50</u>	<u>106</u>	<u>00</u>	<u>21</u>	<u>15</u>	<u>7</u>	
Hospital Advances													<u>1</u>	<u>4</u>	<u>6</u>
A.B. 64. 30 Graces		<u>1</u>	<u>2</u>	<u>0</u>	<i>B. E. S. P. A</i>										
P.&R.O. Payments		<u>1</u>	<u>12</u>	<u>8</u>											
<i>E. S. M. Pld.</i>				<u>4</u>											

3.5.4.8

5.18.10

29.5.10

No. 273 Rank Pts Name Slade M.

Pay	F.A.	Total
100	10	110
Less: Allotment		60
Net Rate		50

DEBITS	Date	£	s	d	CREDITS	Period		Days	Rate	£	s	d
						From	To					
<u>P.M.A.</u>												
Balance			8	0	Balance		8/6/17					6 15 10
Acquittance Rolls		13	4	0	Pay @ Net Rate	9/6/17	3/1/18	209	50	109	50	21 9 5
Hospital Advances					Ration allowance							1 4 6
A.B. 34 <u>95 francs.</u>		3	9	8	10 ¹ / ₂ days @ 49	4 ¹ / ₂	18 ¹ / ₂	15	50	7	50	1 10 10
P. & R.O. Payments					£ 12 8 1							
<u>17-1-8</u>												
<u>112 5 0</u>												
<u>29 9 8</u>												
Receipt 5104		12	8	0	(1.10.11)							
AB64		1	10	11								

9-9-9
1 10 10
31-0-7

Rme

No. 273 Rank Pts Name Slade M.

Pay	F.A.	Total
100	10	110
Less: Allotment		60
Net Rate		50

DEBITS	Date	£	s	d	CREDITS	Period		Days	Rate	£	s	d
						From	To					
<u>P.M.A.</u>												
Balance			8	0	Balance		8/6/17					6 15 10
Acquittance Rolls		13	4	0	Pay @ Net Rate	9/6/17	3/1/18	209	50	104	50	21 9 5
Hospital Advances					Ration allowance							1 4 6
A.B. 34 <u>95 francs.</u>		3	9	8	10 ¹ / ₂ days @ 49	4 ¹ / ₂	18 ¹ / ₂	15	50	7	50	1 10 10
P. & R.O. Payments					£ 12 8 1							
<u>17-1-8</u>												
<u>112 5 0</u>												
<u>29 9 8</u>												
Receipt 5104		12	8	0	(1.10.11)							
AB64		1	10	11								

9-9-9
1 10 10
31-0-7

Rme

WESTERN UNION

ANGLO-AMERICAN DIRECT UNITED STATES
CABLEGRAM



Prefix	Code
WORDS	CHARGE
20 ✓	R 1/2

SENT

At _____

To _____ By _____

VIA WESTERN UNION

FOR STAMPS

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

6/1/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To E.F.M. MRS. A. SLADE,
LOON BAY,
NOTRE DAME BAY (Newfoundland)

ON LEAVE LONDON PLEASE CABLE TEN POUNDS THROUGH MINISTER
MILITIA ST. JOHNS.

CHECKED.
[Signature]

E. SLADE.

Authorized:

Charge a/c 273/Slade

20
2 1/2
40
10
50
4 1/2

CHARGED
PAY BOOK
Date 4/1/18 by R.A.M.

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.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. _____

NEWFOUNDLAND CONTINGENT

N.F.P./55.

To:

273 P. E. Glade

Pay & Record Office,
58, Victoria Street,
London, S.W. 1.

18th January 1918

Herewith

Postal Draft No $\frac{A}{1}$ 026484/5 for £10.50

~~being~~

~~REMITTANCE FROM HEADQUARTERS~~

Please acknowledge receipt hereon:

(Sig.)

P. E. Glade

(Date)

18th January '18.

H. J. Anderson
Chief Paymaster & Officer i/c Records.

Cable No 49

6/1/18

B. E. F. France

Mr Anderson:-

Dear Sir:-

Would you kindly Cable
to Mrs A. Slade, Loon Bay,
N. B. I., Via Lewisporte, N. F. L. I.
for £10 for me

I Oblige

Yours truly

273 E. Slade

To be put to my Credit
in the Pay & Records Office
Paid 18/1/18
273 E. Slade
E.S.

Cable No 49

6/1/18

B. E. F. France

Mr Anderson :-

Dear Sir :-

Would you kindly Cable
to Mrs A. Slade, Loon Bay,
N. B. I., Via Lewisporte, N. F. L. I.
for £10 for me

I Oblige

Yours truly

273 E. Slade

To be put to my Credit
in the Pay & Record Office

Paid
18/1/18

273 E. Slade

E. S.

Granted Conditional Leave 20-11-18

DRAFT PAY CERTIFICATE

OFFICE 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, 26/5/17.

Regt No. 275 Rank Pte Name Slade A.R. Unit Ryl Nfld Regt who was Sent
Newfoundland on 27 7 / 18 Authority Draft 69 Cause Blue Puttee Leave

STATEMENT OF ACCOUNT

PARTICULARS					PARTICULARS					
	£	£	s	d		£	£	s	d	
Balance Dr. from					Balance Cr. from 21-12-17			12	14	7
Allotment 333 days @ 60	199	80	41	1 1	Pay 333 days @ £ 1.00	333	00			
Cash Payments:					Field Allow 333 days @ £ 10p	35	30			
Sub P of W Funds £ 7/18 1/10/18				5 0		336	30	75	5	4
Depot Payment per V 277				3 0 0	Other Allowes days @ £					
P & R.O. V 5104			12	8 0						
Bo 9304			2	15 0	Other Credits:					
Other Debits					Tation Allow			1	4	6
Acq Rls			17	15 8						
Cable 49				4 2						
Total Debits				77 88 11 2	Total Credits			88	14	5
Balance due by Paymaster				11 5 6	Balance due to Paymaster					
				88 14 5				88	14	5

*Copy sent HQ Quarter
 N.F.P. 1750/29
 27/1/19*

CHECKED
 R.C.
 27-1-19

PERIOD: FROM 27-11-18 TO 27-1-19

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

(Place) _____ (Date) 1919
 I have 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, 27-1-19 1919
 Chief Paymaster & O. i/c Records.

27-1-19

A. E. Glade

273

P. + R. Q.



This Form is to be used in connection with Pamph. M. E. (1)
N. F. 1914

In the spaces below should be entered the findings in the routine of examination set forth in the Appendix. Care should be exercised that each finding be entered after the number below which corresponds to the number of that test.

Examination of Slade Albert Ernest 7th 119
aged _____ conducted at C L B Amnony
Date: 2/9/14 22 Recruiting Officer: _____

NO. OF TEST FINDING

1	no
2	no
3	no
4	no
5	no
6	no
7	yes
8	yes
9	yes
10	yes
11	n
12	n
13	n
14	n
15	n
16	n
17	n
18	n
19	n
20	n
21	n
22	n
23	n
24	n
25	n
26	n
27	n
28	n
29	n
30	n
31	n
32	n
33	no

yes
yes
no
↑

5' 8 1/2"

150 lbs
36 39 1/2
\$50.00 per month.
Father, Fudnick Slade, Loom Bay, N. D. B.
No.

Signature of Medical Examiner: Cherry Macpherson M.D.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

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B. 121.
25.

Number of Sheet

Signature of O. C. Company

H. C. Artz

Regiment of _____

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
No.	<i>Slade E</i>	Age on _____ years _____ months	<i>St. John's</i>	<i>Fireman</i>	
Joined _____ Date _____		Place and Date of Enlistment		Religion	
Joined _____ Date _____		Period of { with Colours _____ years. with Reserve _____ years.	<i>12/9/14</i>	<i>C of B</i>	
Joined _____ Date _____					Place of Birth
Joined _____ Date _____			<i>Loon Bay</i>		

Place	Date of Offence	Rank	Cases of Drunkenness.	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<i>Demobilized St John's 15/2/19</i>					

To be carried over