

4033



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 4033 Name Percy Small Corps Metls

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

1. What is your name? ..... 1. Percy Small
2. What is your full Address? ..... } Morston H. N. D. Bay
3. Are you a British Subject? ..... 3. Yes
4. What is your age? ..... 4. 18 Years 7 Months
5. What is your Trade or Calling? ..... 5. Fisherman
6. Are you Married? ..... 6. No
7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,\* which? } 7. No
8. Are you willing to be vaccinated or re-vaccinated? ..... } 8. Yes
9. Are you willing to be enlisted for General Service? ..... } 9. Yes
10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... } 10. { Name .....  
Corps .....
11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... } 11. Yes

I, Percy Small do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

4.30-10-17 ..... Percy Small SIGNATURE OF RECRUIT.  
..... [Signature] Signature of Witness.

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

I, Percy Small do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

**CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.**

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at.....  
on this 30th day of Oct 1917

Signature of Attesting Officer ..... [Signature]

**†CERTIFICATE OF APPROVING OFFICER.**

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

Date..... Oct 29th 1917 ..... }  
Place..... [Signature] } Approving Officer.

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

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



Reg. No. 4033 Rank Pl Name Small P.

Attested 30-19-17 Address Monroe St. N.D. Bay.

Allotment 60¢ Allotee Jabry Small Fair

Date of Allotment 1-11-17 Returned from Overseas \_\_\_\_\_

Embarked for Overseas 11-17-17 Cause \_\_\_\_\_

Immoc. 1<sup>st</sup> 30-10-17 2<sup>nd</sup> 5-11-17 3<sup>rd</sup> 8-11-17 Vac 10-11-17  
H.L. 16-11-17 to 26-11-17 Ret'd 30-11-17

C.R. 4033

Extract from Daily Order. Part II Unit Royal Newfoundland  
Regiment in France, dated 28-2-19.

4033, L/Cpl. P. Small.

Appointed A/Cpl. 15-2-19.

C.R. 4033

Extract from O.R.D.E.R.S. by Lt. Col. G. Mathias, D.S.O.  
Commanding 1st Battalion Royal Newfoundland Regiment,  
dated 5/9/19.

The following arrived today and is posted to the following  
Company.

B. COMPANY.

4033, Pte. Small, P.

C.R. 4033

Extract from Daily Orders part I, Unit the Royal Field.  
Regiment dated July 9th. 1919.

The discharge of the undernoted on demobilization has been  
CONFIRMED by Officer i-c Records on 5-7-19.

#4033 Cpa. Harry Small.

C.R. 4033

Extract from Daily Orders Part II Unit The Royal NLI.  
Regt. Depot, St. John's, June 11th, 1919.

The discharge of the undernoted on demobilisation has been  
APPROVED by O.C. Discharge Depot with effect from 21-6-19.

4033 Cpl. Percy Small.

C.R. 4033

Extract from Daily Orders Part II Depot, St. John's,

Date 10-6-19.

4033 Sp. Percy Small

Reported at Headquarters 1-6-19.  
which sailed Liverpool May 22/1919.

ex "Corsican"



C.R. 4033

Extract from Nominal Roll from 1st. Battalion

Royal Newfoundland Regiment dated 30-4-19.

The undermentioned of the 1st. Battalion left  
Rouen Camps 22/4/19, embarked at Havre 22/4/19,  
disembarked at Southampton 23/4/19 and reached  
Hazeley Down Camp 23/4/19.

#4033 A/Cpl. P. Small.

C.R. 4033

Extract of DAILY ORDERS PART II ROYAL NEWFOUNDLAND REGIMENT  
IN FRANCE DATED 31/1/19.

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APPOINTED L/Cpl.

#4033 Pte. P. Small.

16/1/19.

C.R. 4033

Extract from Nominal Roll Draft #51, to B.E.F. Embarked  
Folkestone, 31-8-18.

4033 Pte. Small P.

C.R. 4033

Extract from Seminal Roll, embarked St. John's for Overseas per  
S.S. RIKER, Dec. 11th 1917.

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4033 Pte. P. Small.

C.R. 4033

Extract from Daily Orders Part 11 Unit The Royal Nfld.  
Regt., St. John's, Oct. 30th, 1917.

4033 Pte. P. Small.

Attested for General Service with the Nfld. Regt., with  
effect from Oct. 30th, 1917.

Small, P.

C.R. 4033

P.V.A.O.









No. 6892/539

*ep/*

038363

NEWFOUNDLAND CONTINGENT

N.F.P./70.

From

To

Chief Paymaster & O. i/c Records  
Newfoundland Contingent,  
58, Victoria Street,  
London, S.W. 1.

Officer Commanding,  
2/Bn Royal Newfoundland Regt.  
Winchester.

~~Subject~~ 4th May 1918

May 8<sup>th</sup> 1918

Subject: 4033, Pte. P. Small,

Receipt hereunder.

*Cham*

With reference to the following telegram (3922) from the Hon. Minister of Militia, received 1 / 5 / 18

LIEUT. COLONEL,  
OFFICER COMMANDING  
2ND BN. ROYAL NEWFOUNDLAND REGT.  
1st Newfoundland Regiment

Pay to 4033 Small £3:20:0

Received the sum of \_\_\_\_\_  
Three Pounds Two Shillings on account of  
cable remittance from Newfoundland.

Draft £ 3:2:0 is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

*J. B. Anderson*  
Chief Paymaster & O. i/c Records.

G Percy Small  
No. 4033 Rank Plr

No. 12434/1248

048552

N.F.P./79.

NEWFOUNDLAND CONTINGENT

From:

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

*[Signature]*  
Officer Commanding,  
2/Bn Royal Nfld. Regt.  
Winchester.



1st August 1918

Subject: 4033, Pte. P. Small

With reference to the following telegram (6874) from the Hon. Minister of Militia, received

Pay to 4033 Small £3:17:0

Draft £ 3:17:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

*[Signature]*  
Chief Paymaster & O. i/c Records.

Aug 2 1918

Receipt hereunder

*[Signature]*  
LIEUT. COLONEL,  
COMMANDING 2ND BN ROYAL NEWFOUNDLAND REGT.  
Officer Commandg. Batt'n  
Royal Newfoundland Regiment

Received the sum of Three pounds  
seventeen shillings on account of  
cable remittance from Newfoundland.

P. Small.  
No. 4033 Rank Pte

Witness 1227 J. Murphy Pte

TO,- The Chief Paymaster,  
Royal Newfoundland Regiment,  
58 Victoria Street,  
London, S.W.

Sir;-

Please charge the amounts set opposite my name to my account and pay it to the N.W.C.A. "Prisoners of War Fund" in quarterly instalments for the period of one year.

Commencing on 1st July 1916.

Regtl. No.	Rank.	Name	Amount	Signature.
4083	Private	Small P.	\$2.50	

I have the honour to be, Sir,  
~~Yours obedient servant,~~  
Your obedient servant.

Date

June 26 1916

Small P.

**NOTE.**—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.  
 In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

## Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. *Royal Newfoundland* 7. Former Trade or Occupation } *Fisherman*
2. Regtl. No. *4033* 3. Rank. *Capt* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Small* *Hercey* (a) Former Regts. or Corps ;  
 (Surname) (Christian Names) with Regtl. Nos.
5. Age last birthday. *19*
6. Posted for duty on *Oct 21/17* at *St. Johns*  
 in category (or grade).....
8. If the disability is an injury was it caused  
 (a) in action (b) on field service  
 (c) on duty (d) off duty? (b) Date of Discharge ;  
 (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—  
 (a) When (d) Particulars of Pension or Gratuity  
 (b) Where (if any)  
 (c) Opinion of Court

**NOTE.**—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

### Statement of Case.

**NOTE.**—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here.  
 (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."  
*Nil.*
11. Date of origin of disability. *Nil*
12. Place of origin of disability. *Nil*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *Nil*

14. State whether the disabilities are
- |   | (a) attributable to | (b) aggravated by |
|---|---------------------|-------------------|
| (i) Service during the present war .. .. .                        | .....               | .....             |
| (ii) Previous active service .. .. .                              | .....               | .....             |
| (iii) Climate in pre-war service .. .. .                          | .....               | .....             |
| (iv) Ordinary military service before the war .. .. .             | .....               | .....             |
| (v) Serious negligence or misconduct on the man's part. } .. .. . | .....               | .....             |

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

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, etc., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?  
*(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)*

*No.*

16. Was an operation performed? If so, when and what was its nature?
17. If not, was an operation advised and declined?
18. \*In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

20. Do you recommend—
- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?
- Note—(b) is only applicable to soldiers invalided at Foreign Stations.

*Repatriation*

*Major OADMS*

Station *Wingley D. Camp...*

Date *30-4-19*

Sgd. *J.P. Knight* *Capt R.A.M. 6*  
 Medical Officer in charge of case.

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

No: 4852/209

From:

NEWFOUNDLAND

CONTINGENT

N.F.P./80.

Chief Paymaster & O.i/c Records,  
Newfoundland Contingent,  
58, Victoria Street,  
London, S.W. 1.

To: Officer Commanding,  
1/Bn. Royal Newfoundland Regiment.  
B.E.F.

27th March 1919

11-4-1919

4033 A/Cpl. Small P.

4033 P/c Small P.

With reference to the following telegram from the Minister of Militia, / / ( 99 )

This NCO wishes this amount retained to credit of his account please

"Pay to- 4033 Small

£8. 4. 0.

Deposited  
27/3/19 JTB

Kindly advise whether this remittance should be

- (1) forwarded to you for payment to this Soldier;
- (2) retained to credit of his account; or
- (3) otherwise dealt with.

*A. D. [Signature]*  
Chief Paymaster & O. i/c Records

Small, A.

4033

Hay Sept.



July 5, 1919

#4033 Cpl. Percy Small,

Moreton's Harbor, N.D.B.

Dear Sir:-

Please find enclosed Discharge  
Certificate No. 2628.

Yours truly

Raymaster & O.i/c Captain,  
Records.

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 4033 Rank Capt Name Small Percy  
Intended place of residence Moncton N.B.

2. Occupation Fisherman  
Classification of soldier 2 Medical Category 2

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

Eligible for War Service Gratuity

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

Place ST. JOHN'S  
Date JUN 7 1919  
for [Signature] Commanding Discharge Depot  
The Royal Newfoundland Regiment

### CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

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

Place and date ST. JOHN'S JUN 7 - 1919  
Percy S. Small Signature of soldier  
[Signature] 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 ST. JOHN'S JUN 7 - 1919  
Percy Small Signature of soldier  
[Signature] Signature of witness

### STATEMENT OF SERVICE

7. Enlisted for service 30.10.17 No of days on Military  
Discharged from service JUN 21 1919 Plus 14 days Service 614

### APPROVAL OF DISCHARGE

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

Place ST. JOHN'S  
Date JUN 21 1919  
[Signature] Officer in Charge of Records  
The Royal Newfoundland Regiment.

### CONFIRMATION OF DISCHARGE

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

Place St. John's Nfld  
Date July 5/1919  
[Signature] Officer in Charge of Records  
The Royal Newfoundland Regiment

AT Bro 79/2628

# The Royal Newfoundland Regiment

Class for Demobilization

*E.*

Report of Demobilization  
Travelling Board, held on soldier for  
discharge.

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date ..... *6.6.19* .....

Regimental No. .... *4035* .....

Name ..... *Small Percy* ..... *Cpl.* .....

Address ..... *Morsons H. N. 13* .....

Present Medical Category ..... *A i* .....

Recommended for:— { (a) Immediate discharge .....  
(b) ~~Standing Medical Board~~ .....

Members of Board {

*R.H. Jant Capt*  
.....  
O.C. Discharge Depot.

*Paterson*  
.....  
Senior Medical Officer

*W. Burdick*  
.....  
M. O. Depot

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 4055 Rank Cpl Name Small Percy  
 Date of Enlistment 30-10-17 Address Moncton N.B. District St. John's  
 Occupation Fisherman Classification for Discharge E Medical Category A  
 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	/
B 178	W 3494	B 122	/	Board 1st	" 2	
B 178a	D 400A	B 1915	/	do 2nd	" 3	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 6-6-19 ..... O. C. Discharge Depot.

## PARTICULARS FOR DEMOBILIZATION

### 1. Civil Re-Establishment.

I am / in a position to resume civilian occupation.

Percy Small

Particulars passed to Vocational Officer for information and action.

Date .....

### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60.00 .....

(b) ~~Clothing Supplied~~ .....

Date 7-6-19 ..... O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. R.1589 to his home at Moretown H<sup>rs</sup> and Release Certificate No. 2431 issued.

Date 7-6-19 *J.A. Lamball*  
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 5-7-19

Date 7-6-19 *H. J. ...*  
Depot Paymaster.

Discharge approved for 21-6-19

Forwarded with following documents to O.C Discharge Depot.

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

Date 7-6-19 *J.A. Lamball*  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

**Eligible for War Service Gratuity**

*R.H. Sait Capt.*

Date JUN 21 1919 .....  
O. C. Discharge Depot.

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

Date .....

## Civil Re-establishment Committee



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

*To resume former Occupation*

*Percy S. Small*  
Signature of Man.

Reg. No. *4033*

*J. H. Snow Caff.*  
Signature of the Vocational Officer or his Representative.

Place *St. Johns*

Date *JUN 7 1919*

191

**The Royal Wld. Regiment**

**DEMOBILIZATION**

No. 4033 Rank

Name

Small P

Warned for demobilization on

JUN 7 1919

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

# MEDICAL HISTORY

OF

Surname

*Small*

Christian Name

*Percy*

Table I.—GENERAL TABLE.

Birthplace:—Parish

*Worsling St. N. D. Bay.*

County

*Nfld.*

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	<i>30</i>	<i>Oct.</i> 191 <i>7</i>		191
	at	<i>St. Johns</i>	at	
Declared Age	<i>18</i> years	<i>7</i> days	years	days
Trade or Occupation	<i>Fisherman</i>			
Height	<i>5</i> feet	<i>6</i> inches	feet	inches
Weight		<i>115</i> lbs.		lbs.
Chest Measurement	Girth when fully expanded	<i>34</i> inches		inches
	Range of Expansion	<i>3</i> inches		inches
Physical Development				
Vaccination Marks	Right	Left	Right	Left
	Arm			
Number				
When Vaccinated				
Vision	R.E.—V	<i>6/6</i>	R.E.—V	
	L.E.—V	<i>6/6</i>	L.E.—V	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<i>Edmund Peterson</i>			
(Rank)	<i>Major</i>			
	Medical Officer.			Medical Officer.
Enlisted	at	<i>St. Johns</i>	at	
	on	<i>30</i> day of <i>Oct.</i> 191 <i>7</i>	on	day of 191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
Transferred to	<i>1st Nfld Regt.</i>	<i>4033</i>		
Became non-effective by	on	day of 191	on	day of 191
(Signature)				
(Rank)				



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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In case of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
MILITARY HOSP No..... Date..... HAZELEY DOWN.	1	18	7	2	18	Mumps	21	Recovered. Discharged to duty	H. C. Lawson Capt. R.S.M.	



**NOTE.**—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.  
In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

## Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps. *Royal Newfoundland* 7. Former Trade or Occupation } *Seaman*
2. Regtl. No. *100 33* 3. Rank. *Ppl* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Small Percy* (Surname) (Christian Names) (a) Former Regts. or Corps ; with Regtl. Nos.
5. Age last birthday. *19*
6. Posted for duty on *Oct 21 / 17* at *H. John's* in category (or grade).....
8. If the disability is an injury was it caused  
(a) in action (b) on field service  
(c) on duty (d) off duty ?
9. If a Court of Inquiry was held on an injury state :—  
(a) When (b) Date of Discharge ;  
(b) Where (c) Cause of Discharge.  
(c) Opinion of Court (d) Particulars of Pension or Gratuity (if any)

**NOTE.**—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

### Statement of Case.

**NOTE.**—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
11. Date of origin of disability. *nil*
12. Place of origin of disability. *nil*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

14. State whether the disabilities are
- |  | (a) attributable to | (b) aggravated by |
|--|---------------------|-------------------|
| (i.) Service during the present war .. .. .                        | .....               | .....             |
| (ii.) Previous active service.. .. .                               | .....               | .....             |
| (iii.) Climate in pre-war service .. .. .                          | .....               | .....             |
| (iv.) Ordinary military service before the war .. .. .             | .....               | .....             |
| (v.) Serious negligence or misconduct on the man's part. } .. .. . | .....               | .....             |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } .. .. .

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, etc., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?  
*(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)*

*He complains of no disability*

16. Was an operation performed? If so, when and what was its nature?
17. If not, was an operation advised and declined?
18. \*In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

*No.*  
*No.*  
*No.*  
*No.*

20. Do you recommend—
- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?
- Note—(b) is only applicable to soldiers invalided at Foreign Stations.

*Repatriation*

*Wickington D.D.S.*

*Capt. R.A.M.C.*

Medical Officer in charge of case.

Station *Hazeley D. Camp.*

Date *30-4-19*

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



## Descriptive Return of a Soldier Discharged on Account of Disability

**INSTRUCTIONS**—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. i. c. Records together with the remainder of the man's documents.

Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

Name in full *Percy Small.*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4035.*

Intended address *Moncton N.S. N.D.B*

Height on discharge *5* Feet *8*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *—*  
Figure on discharge *Medium*

Christian name of Father *Joby*

Christian name of Mother *—*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Moncton N.S. 11th March, 1900*

Nature and locality of civil employment required

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full) *Corp Percy Small.*

*Opf.*  
(Rank)

Station *ST. JOHN'S.*

Date *5-6-19.*

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.

Station

Date





July 16, 1919

#4033 Cpl. Percy Small,

Moreton's Harbor, N. D. B.

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.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

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

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

On completion this Declaration is to be returned to THE OFFICER I/C

RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

Christian name..... *Percy* ..... *Small* .....

3. Rank..... *Corporal* ..... 4. Reg'tl. No. *4033* .....

5. Address in full to which future payments of gratuity are to be forwarded..... *Moreton St. U.S.B.* .....

6. Date of enlistment in the Regiment..... *Oct 30, 1917* .....

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

8. Relationship of such dependents.....

9. Address in full of such dependents.....

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....

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

12. Give total length of time which you served on active service, whether in Hfld. or Overseas..... *From Oct 30, 1917 to June 7, 1919* ..... *1 1/2* .....



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

..... *No* .....

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. *No*

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

..... *No* .....

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

..... *No* .....

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

19. Are you now serving in the Regt.?..... If not give? - (a) date of discharge.....

..... *No* ..... (b) Reason for discharge..... *New Army Demobilization*

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....

*France, Belgium + Germany - From Aug 2/18 to April 1919*

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee.....

..... *No* .....

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.

*Percy S. Small.*

Signature of Applicant:

Place of Residence:

*Mareton, Ar. N.S.B.*

Declared before me at:

*S. John's, Nfld*

This

*7th*

day of

*June*

19*19*

*John W. McCarthy*  
*J.P.*

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

POST DISCHARGE PAY.

Date paid	Paid Soldier.	Paid Dependent.	War Service Gratuity.	Net amount due
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

Certified correct.

Paymaster



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Percy Small, Regl. No. 4033

hereby agree, until further notification by me, and in similar official form to make an Allotment of          Dollars and 75 Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person <sup>and</sup>/<sub>or</sub> Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person <sup>and</sup>/<sub>or</sub> Persons concerned, viz.:

Allotment begins 1-11-17

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3087	Father	Percy Small	Horton St	60
Total Allotment, \$				60

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.) [Signature]  
Officer Commanding Company  
[Signature]  
9-11-17 191

(S) Percy Small  
Rank [Signature]

The Department of Militia:

The sum of

*Six Dollars*

ACCOU -	<i>Trans Fee</i>
CH. N <sup>o</sup>	<i>6</i>
AND EDU.	<i>8880</i>
INITIALS	<i>Lee</i>
DOLLARS IS DUE	
INITIALS	<i>Lee</i>

Mr. *Percy Small Moustans*

Reg. No. *4033* Rank.....Name.....

from *Transpotation* to *his home*

*Steamer ticket - Returned*

Amount for *\$ 6.00* *J. A. Brown*

*2-9-19*



*Captain*  
*Demobilization Office*

Moreton Harbour  
Notre Dame Bay  
June 11<sup>th</sup> 1919

Capt J. S. Snow

Dear Sir: -

I am dropping you a short  
note to see if I could get the  
money that I had to pay a man  
to get from Lewisporte to Moreton  
Harbour which was \$6.00. I could not  
get home on the steamer for ice,

I am yours truly  
Percy Small.

21-6-19

REC	RED
LETTER	
NO.	

REGISTERED
LETTER
NO.

REGISTERED
LETTER
NO.

Sept. 17, 1919

Mr. Percy Small,  
Moreton's Harbour,  
N.D.B.

*A.C.R.*

Dear Sir:

With reference to your letter of June 11th. to Capt. Snow, I am now enclosing cheque for \$6.00, amount of refund due you on account of travelling expenses whilst proceeding home.

Yours truly,

Capt.  
Paymaster

LM/  
Enc. 1

Receipt for Army Book 64

No. 4033 Name P. Small

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

Name Percy Small

Date 15-8-1940

Place Moretons Harbour

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

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B. 121  
39

Regiment of

*1<sup>st</sup> Newfoundland.*

Number of Sheet

*ONE*

Signature of O. C. Company

*[Signature]*

Regimental No. and Name		Enlistment		Trade
No.	<i>Small Percy</i>	Age on	<i>18 years 7 months</i>	<i>Siskerman</i>
Joined	Date	Place and Date of Enlistment	<i>St Johns 30-10-17</i>	Religion
Joined	Date	Period of	<i>with Colours 249 years.</i>	<i>Meth.</i>
Joined	Date			
Joined	Date			

Good Conduct Badges, Service pay or preference



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>Hayesley Down Camp</i>	<i>22/1/18</i>	<i>Pte</i>		<i>Lying in bed after Parallels</i>	<i>Cpl. Watts</i>	<i>2 days C. 13</i>	<i>23.7.18</i>	<i>Saint Jarland</i>	<i>mks</i>
<i>Hayesley Down Camp</i>	<i>24/7/18</i>	<i>"</i>		<i>Drathtion on Parade</i>	<i>Cpl. Watts</i>	<i>3 days C. 13</i>	<i>25.7.18</i>	<i>Saint Jarland</i>	<i>mks</i>
<i>Demobilized St. Johns, 5/7</i>									

To be carried over.



2403

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 4033 Rank Cpl. Name Small Percy  
 Date of Enlistment 30-10-17 Address Moncton N.B. District Twillingate  
 Occupation Fisherman Classification for Discharge E Medical Category A  
 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
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 6-6-19 ..... for O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am / in a position to resume civilian occupation.

*Percy Small*

Particulars passed to Vocational Officer for information and action.

Date 6-6-19 .....

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable. \$60.00
- (b) ~~Clothing Supplied~~ .....

*Alfred [Signature]*

Date 7-6-19 .....

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. P.1587 to his home at Moretown H. and Release Certificate No. 2431 issued.

Date 7-6-19

J.A. Howlett  
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 5-7-19

Date 7-6-19

H. M. H.  
Depot Paymaster.

Discharge approved for 21-6-19

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36.	B 268.	B 121.	N.F. Med.	D.F. 1.
F 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.		

*Form B*

Date 7-6-19

J.A. Howlett  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.  
Board of Pension Commissioners.

with following additional documents.

Date JUN 21 1919

Eligible for War Service Grately  
R.H. Sait Capt.

O. C. Discharge Depot.

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

Date June 14/19

J. M. H.  
Depot Paymaster

Reg. No. *4033* Rank *Cpl* Name *Small, A.*

Attested ..... Address *Moncton N.S.*

Allotment ..... Allottee .....

Date of Allotment ..... Returned from Overseas *29.5.19.*

Returned on S.S. *Cossican* Cause *Warrant*

*6-6-19* PASSED TO DEMOBILIZATION OFFICER

*21-6-19* DISCHARGE APPROVED ON DEMOBILISATION.