



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 4197 Name Allen Snow Corps R.E.

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

- |  |  |
|--|--|
| 1. What is your name? .....  | 1. <u>Allen Snow</u>                                     |
| 2. What is your full Address? .....  | 2. <u>Howard St. St. John's</u>                          |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u>  |
| 4. What is your age? .....   | 4. <u>21</u> Years <u>0</u> Months                       |
| 5. What is your Trade or Calling? .....  | 5. <u>None</u>   |
| 6. Are you Married? .....  | 6. <u>No</u>   |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? .....                             | 7. <u>Yes</u>  |
| 8. Are you willing to be vaccinated or re-vaccinated? .....  | 8. <u>Yes</u>  |
| 9. Are you willing to be enlisted for General Service? .....   | 9. <u>Yes</u>  |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.....                                      | 10. { Name <u>THE DURATION OF THE WAR</u><br>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. <u>Yes</u>   |

I, Allen Snow 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.

A. 3-17-17 Allen Snow SIGNATURE OF RECRUIT.  
W. J. Waller Signature of Witness.

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

I, Allen Snow 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 St. John's on this 3 Dec day of Dec 1917.  
Signature of Attesting Officer W. J. Waller

### †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 compiled with. I accordingly approve, and appoint him to the 3rd Headquarters Headquarters.  
If enlisted by special authority, such will be attached to the original attestation.  
Date Dec 3 1917 } Approving Officer.  
Place Headquarters

† 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).....

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Allen Snow

Apparent age 19 years 8 months. Height 5 feet 10 inches

Chest Measurement { Girth when fully expanded 34 inches  
 Range of expansion 4 inches

Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Elizabeth Snow  
Change Island, N. D. Kay Relationship Mother

### Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow.		(b) Place and date of marriage.	
(a)	(b)	(c)	(d)

### Particulars as to Children

Christian Names	Date and Place of Birth

## STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, 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 _____									
Joined at _____ on _____									
Total Service forfeited as above.....									

Total Service towards Engagement to \_\_\_\_\_ [date of discharge] \_\_\_\_\_ years \_\_\_\_\_ days

" " Pensions " \_\_\_\_\_ [ " " ] \_\_\_\_\_ " \_\_\_\_\_ "



# FIRST NEWFOUNDLAND REGIMENT

4197

## ATTESTATION OF

No. 4197 Name allen Snow Corps W.C.

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

- |  |                                    |
|--|------------------------------------|
| 1. What is your name? .....  | 1. <u>allen Snow</u>               |
| 2. What is your full Address? .....  | 2. <u>Howwood, N. B. Bay</u>       |
| 3. Are you a British Subject? .....  | 3. <u>yes</u>                      |
| 4. What is your age? .....   | 4. <u>19</u> Years <u>8</u> Months |
| 5. What is your Trade or Calling? .....  | 5. <u>Lumberman</u>                |
| 6. Are you Married? .....  | 6. <u>no</u>                       |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? .....                             | 7. <u>no</u>                       |
| 8. Are you willing to be vaccinated or re-vaccinated? .....  | 8. <u>yes</u>                      |
| 9. Are you willing to be enlisted for General Service? .....   | 9. <u>yes</u>                      |
| 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. <u>yes</u>                     |

FOR THE DURATION OF THE WAR

I, allen Snow, 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.

H.3-12-17

allen Snow SIGNATURE OF RECRUIT.  
S. Waller Signature of Witness.

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

I, allen Snow, 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 St. John's on this 3 day of Dec. 1917.  
Signature of Attesting Officer T. H. H. H. H.

### †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 Dec 3 1917  
Place Headquarters } 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).....

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Allen Snow  
 Apparent age 19 years 8 months. Height 5 feet 10 inches  
 Chest Measurement { Girth when fully expanded 34 inches  
 Range of expansion 4 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Clebeth Snow  
Change Island N. D. Bay Relationship Mother  
 Particulars as to Marriage

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

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

### Particulars as to Children

Christian Names	Date and Place of Birth

## STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, 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>3-12-17</u>									
Joined at <u>St John's</u> on <u>December 3-17</u>									
<u>Discharged</u> <u>July 6-19</u>									
Embarked <u>St John's N. D. Bay</u> to <u>Halifax N.S.</u> <u>29-18</u> . Embarked for <u>St. J.</u> <u>2-7-18</u> . Disembarked <u>St. J.</u> <u>5-7-18</u> . Joined <u>Batter in the field</u> <u>9-7-18</u>									
Wounded <u>14-10-18</u> . Admitted <u>3 hrs</u> to <u>St. J. Hospital</u> <u>14-10-18</u> .									
Transferred to <u>Camp</u> <u>18-10-18</u> . Admitted <u>1 hr</u> to <u>St. J. Hospital</u> <u>18-10-18</u> .									
Transferred to <u>3rd</u> <u>4th</u> <u>Wandsworth</u> <u>31-10-18</u> . Sent to <u>Wandsworth</u> <u>8-12-18</u> . 6 days for <u>discharge</u> <u>12-12-18</u> . Arrived <u>Wandsworth</u> <u>21-12-18</u> .									
Total Service forfeited as above.....					<u>Remobilized</u> <u>St John's</u> <u>6-2-1919</u>				
Total Service towards Engagement to <u>6-2-1919</u> [date of discharge]					1 years <u>66</u> days				
Pensions " " " " " " " "									

C. 4197

Extract from Daily Orders part II, Depot St. John's dated Feb. 7/19.

The discharge of the undernoted on demobilization has been  
CONFIRMED by Officer I/c Recordson 6-2-19.

#4197 Pte. Allan Snow.

C.R. 4197

Extract from Daily Orders part 11, Depot  
St. John's dated January 23rd., 1919.

The undernoted discharge on demobilisation  
have been approved by Officer Commanding  
Discharge depot from 23-1-19.

#4197 Pte. S. Snow.

C.R. 4197

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

4197 Pte. S. Warren

Discharged without  
Discharged from Barracks Hospital 6-3-19.

C.R. 4197

**Extract from Medical Board held Jan. 14th, 1919.**

**4197 Pte. A. Snow.**

**Recommended discharge as permanently Unfit.**



C.R. 4197

Extract from Nominal Roll of repatriation draft No. 79

~~was~~ embarked at Tilbury Docks per ...COR IOAN 12/12/18.

#4197 Pte. A. Snow.

C.R. 4197

Abstract from Daily Orders part II, Depot St. John's dated Dec. 13th. 1918

These are returned from Overseas and reported at Depot 21-12-18.

#4197nPte/ A. Snow.

C.R. 4197

Extract from Orders by Lieut. Col., B. J. Barton, D.S.O. Officer  
commanding 2nd., Battalion of the Royal Newfoundland Regiment dated  
10-12-18.

The undernoted ~~having~~ reported back from the 1st., Battalion is  
taken on the strength and posted to "H" Co., ~~DEPT~~

4197 Pte. A. Snow.

4197  
C.R.

Extract from Nominal Roll discharged fr on 2nd London  
General Hospital on 7-12-18 and sent to 2nd Batta.  
Winchester, for immediate repatriation, in accordance  
with arrangements made by Major Finewell. 17 Dec. 1918.

4197 Pte. A.C. Snow.

C.R. 4197

Nov. 13th 18

Mrs. Elizabeth Snow,  
Change Islands.

Dear Madam:-

I beg to inform you that additional information has to-day been received by this department through the visiting Committee of the Newfoundland War Contingent Association, to the effect that your son No. 4197 Pte. Allan Snow, is now Progressing favourably.

Yours faithfully,

Lieut. Col.,  
Chief Staff Officer.

C.R. 4197

Extract of Casualties from Pay & Record Office London, dated Nov.  
8/11/18.

The undermentioned man was admitted 3rd London Gen. Hospital 31/10/18.  
Transferred from Mile End Hospital.

#4197 PTE. A.C. SNOW.

Memo from 3rd L.G.H. 1/11/18.

C.R. 4197

Extract from War Office List No. C. 1752 dated 1. 11. 18.  
282

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#4197 Pte. A. Snow.

Wounded 10. 11. 18.

BC.,

C.R. 4197

Extrac from War Office List No. H. A. 30422. dated 24th Oct. 1918

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ADMITTED 53 GEN. H. BOULOGNE BASE 15th OCT. 1918.

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#4197 Pte. A. C. SNOW.

TESTICLES HAND R. MILD.

BC?



C.R. 4199  
Counter No.

# NEWFOUNDLAND POSTAL TELEGRAPHS.



## Cable Connection with all the World

### All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender \_\_\_\_\_ Address **Dept of Militia.**

Line Number	Recd By	Sent by	Check
	Oct 22nd 1910		

Dated **Elizabeth Snow, Change Islands**  
To

Regret to inform you that Record Office, London, officially reports **No. 4197, Orivate Allan Snow** at **Mile End Military Hospital London** suffering from **G.S.W. right hand and thigh.**

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

J.R. Bennett

**Engs Dept of Militia.**

Minister of Militia.

**FOR TYPEWRITER**

C.R. 4197

Extract from Nominal roll of sick and  
wounded from France admitted Mile and  
Military Hospital Bancroft Road S.I.  
admitted on 18/10/18.

#4297 PTE. A. C. SNOW

G.S.W. HAND TESTICLE.

C.R. 4197

Extract from List of Wounded and Sick H.C.Os. and Men of the  
Expeditionary Force - France, dated 14th October 1918.

List No: H.A. 30027.

4197 Pte. S. Warren

1st Hfld. Regt..... G.S.W: R, Shoulder Sew.....Adm. 14 Gen. Hos.

Wimereux 7 Oct. 1918.

C.R. 4197

Extract of Nominal Roll to B. E. F. embarked  
Folkestone. 2-7-18

#4197 Pte .A. Snow.

C.R. 4+97

Extract from Hospital with notes for recording  
Name: Edward J. ...

4197 Pte. Snow A.

C.R.

4197

Extract from Daily Orders Part II Unit The Royal  
Hfld. Regt. Dec.4th/17.

4197 Pte. A. Snow.

Attested for General Service with the 1st Hfld. Regt.  
posted to H. Coy. with effect from Dec.3rd/17.

A. Snow

C.R. 4197

P. R. O.

**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* } Former Trade  
or Occupation }
2. Regtl. No. *4197* 3. Rank..... *Pvt* 7a. If the soldier claims previous service in Army, he should state—  
(a) Former Regts. or Corps ;  
with Regtl. Nos.
4. Name *Snow Allan*  
(Surname) (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....  
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) Where  
(c) Opinion of Court  
(b) Date of Discharge ;  
(c) Cause of Discharge.  
(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."

- G S W Right Middle Fingers*
11. Date of origin of disability.
12. Place of origin of disability.
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.

*small septic wound middle fingers discharged from Wandsworth for Refractory*



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, &c., 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.)

*His nail is now half off. unable at present to do any useful work whatever*

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.

*Recommended refatuation*

*M. C. [Signature]*

ROYAL NEWFOUNDLAND REG.

Medical Officer in charge of case.

Station *Hazelton*

Date *8-12-18*

\* 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



U.K. £1-0-0 W.R. 4/11/18

Receipt No 950 ~

Ward 11

St. Bartholomew's Hospital

Hospital

Sir  
I want to debit the sum  
of one pound and please  
charge to my credit.

4197 A Snow

Royal Newfoundland Regt

Arthur  
Wright  
St. John's

P.P.S.

Essex Red + Hospital

25-11-18

To The Chief Paymaster  
Royal Wfld Regt  
58 Victoria St  
London

O.K. £2.0-0

W.R.  
27/11/18

19416/120

NEWFOUNDLAND CONTINGENT, PAY & RECORD OFFICE.	
PL. Nos. 15	10178
NOV 26 1918	
19416/120	

Please pay #4197 Pte A. Snow. 27/11/18

the sum of £2.0.0 (two pounds)  
and deduct from account.

approved

*[Signature]*  
P.S.

19416/120

Red Cross  
Esher.

25th November 8

A. Snow  
2:0:0

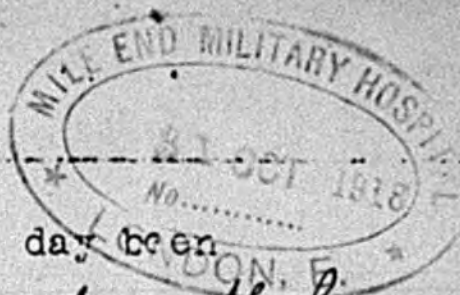
4197 Pte

*Chaque Ted III 21  
27/11/18*

*21.*

Officer in Charge Records/~~Commanding~~

*Newfoundland. 58 Victoria St E. W.*



Please note that the undermentioned ~~G.O.~~ Man has this day been transferred to *3<sup>rd</sup> Lon. Genl.* Hospital. *Handsworth Common S.W.*

No.	Rank.	Name.	Regiment.
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<i>4194</i>	<i>Pte</i>	<i>Shaw</i> <i>(A.C.)</i>	<i>1<sup>st</sup> Newfoundland</i>
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*[Handwritten signature]*

*[Handwritten signature]*

Major, R.A.M.C.  
Registrar for Officer i/c.

Mile End Military Hospital,  
Bancroft Road, E.1.

British Red Cross Society.



Kingston-upon-Thames Division.

TEL. ESHER 44.

HON. SECRETARY  
MISS HELEN TALBOT.

RED CROSS HOSPITAL,  
ESHER,  
SURREY.

Private Snow. ~~1917~~ 1917. R. N. H. Red

Please cash ~~£4~~ for above &  
debit to his a/c

A. Snow  
Hil

~~PAID~~

Approved  
Hil Talbot

U.K. £ 4-0-0  
14/1/18 M.R.

Receipt No. 9738  
R. H. J.



LAST 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.

Regtl No. 4197 Rank Private Name Snow A. Unit Royal Nfld. Regt. who was repatriated  
to Newfoundland on 18 12 18 Authority Draft No. 79 Cause \_\_\_\_\_

STATEMENT OF ACCOUNT

DR.	PARTICULARS					CR.				
	\$	¢	£	s	d	\$	¢	£	s	d
	Balance Dr. from					Balance Cr. from				
	Allotment 4 days @ 50					Pay 4 days @ \$ 7/12/18				
	Cash Payments:					Field Alice 4 days @ \$ 1.00				
	A.F.N.1510					4 00				
						40				
						4 40				
	Other Debits					Other Allces days @ \$				
						Other Credits:				
						<i>W. J. J. 55 308/9</i>				
						<i>Sent to St. J. &amp; John's</i>				
						<i>7/1/19</i>				
	Total Debits					Total Credits				
						7 18 6				
	Balance due by Paymaster					Balance due to Paymaster				
						7 18 6				
						7 18 6				

PERIOD: From 8/12/18 To 11/12/18

CHECKED  
*ESH*  
31/12/18

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

191

Made up/Checked in accordance with information received in the Pay & Record Office \_\_\_\_\_ O.C. \_\_\_\_\_ Company \_\_\_\_\_  
and is therefore subject to amendment if and as may be found necessary. \_\_\_\_\_ to \_\_\_\_\_  
Pay & Record Office, London, \_\_\_\_\_ 31 12 18

1918

Chief Paymaster & O. i/c Records.







Snow, A

H197

Gay Sept.

February 6th., 1919

#4197 Pte. Allan Snow,

Hollywood, N.D.B.

Dear Sir:-

Please find enclosed "Discharge  
Certificate No. 807."

Yours truly,

Captain,

Paymaster & Officer i/c Records.

Enc'l 1.

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 4199 Rank Plc Name Allen Snow  
 Intended place of residence. St. John's H.S.P.  
 2. Occupation Lumberman  
 Classification of soldier B Medical Category 7

## DEMobilIZATION.

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

**ELIGIBLE for POST DISCHARGE PAY**

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

Place .....  
 Date JAN 20 1919 .....  
 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, *subject to my allowances' pay being adjusted*

Place and date St. John's .....  
20-1-19 .....  
 Signature of soldier A. Snow  
 Signature of witness R. H. Sait Capt.

## 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 Jan 25<sup>th</sup> 1919 .....  
ST. JOHN'S. .....  
 Signature of soldier A. Snow  
 Signature of witness R. H. Sait Capt.

## STATEMENT OF SERVICE

7. Enlisted for service 3.12.17 ..... No of days on Military  
 Discharged from service 22.25.1-19 plus 14 days ..... Service + 31 days

## APPROVAL OF DISCHARGE

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

Place ST. JOHN'S. .....  
JAN 23 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 6/1919 .....  
 Officer i/c Records  
 The Royal Newfoundland Regiment

ad B 20191807

29  
31  
6  
66

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 4197 Rank Pl Name Alan Siron  
 Date of Enlistment 3-12-17 Address Storwood Rd District St. John's  
 Occupation Leatherman Classification for Discharge B Medical Category 1098 E  
 Recommendation S.M.B. Permanently unfit Disability Rating fit  
 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..... <u>3</u>
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 20-1-19
W. H. Kelly Capt  
 O. C. Discharge Depot

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment

 I am not in a position to resume civilian occupation.

a Siron

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 John H. SironDate 20-1-19

O. C. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R540* to his home at *Howwood BB* and Release Certificate No. *869* issued.

Date *20-1-19*

*Abduks 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 *6-2-19*

Date *20-1-19*  
*overseas pay etc to be adjusted* - Depot Paymaster. *Abduks Capt*

Discharge approved for *23.1.19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med	D.F. 1	<i>1</i>
F 178	W 3494	B 122	Board 1st	" 2	<i>2</i>
R 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 *22.1.19*

*Abduks 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**

**JAN 23 1919**

Date .....

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

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

Date .....

Institute

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

MEDICAL HISTORY

OF

Surname

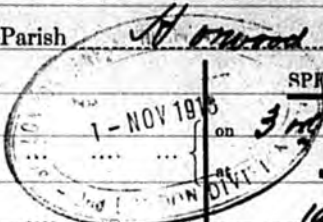
Crow

Christian Name

Allan

Table I.—GENERAL TABLE.


Birthplace:—Parish St. John's N.S.S. County Nfld



	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on 3 <sup>rd</sup> day of Dec 1917		on day of 191	
Declared Age	19 years 8 months		years days	
Trade or Occupation	Lumberman			
Height	5' feet 10 inches		feet inches	
Weight	135 lbs.		lbs.	
Chest Measurement	Grith when fully expanded ... 38 inches		inches	
	Range of Expansion ... 4 inches		inches	
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V= 6/6 L.E.—V= 6/6		R.E.—V= L.E.—V=	
	(a)		(a)	
(a) Marks indicating congenital peculiarities or previous disease				
(b) Slight defects but not sufficient to Cause rejection				
Approved by (Signature)	L. J. Patterson			
(Rank)	Major			
	Medical Officer.		Medical Officer.	
Enlisted	at St. John's		at	
	on 3 <sup>rd</sup> day of Dec. 1917		on day of 191	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	1 <sup>st</sup> Nfld			
Transferred to	Regt! H197			
	ROYAL NEWFOUNDLAND REG'T			
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 cases 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				
 3 <sup>rd</sup> LONDON GENERAL HOSPITAL WANDSWORTH	18	10	18	21	10	18	SSW. Hand (R) of low fever.	13	Her wounds healed.	J. M. Daniels
3 <sup>rd</sup> LONDON GENERAL HOSPITAL WANDSWORTH	31	10	18	7	12	8	SSW Right middle finger. Sample filed.	37	wound in drainage 14/10/18. Small septic wound at base of R middle finger Satisfactory progress.	M. Murphy Capt Lamb



## 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 work as Lumberman.*

*A. Snow*

Signature of Man.

*C. S. Dick Cup*

Reg. No. *4197*

Signature of the Vocational Officer or his Representative.

Place

*St Johns*

Date

*25/1/19.*

191

**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.. *R. A. F. L. D.*.....
2. Regtl. No. *4197.* 3. Rank... *Pte.*.....
4. Name *S. V. W. Allen.*.....  
(Surname) (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....  
in category (or grade).....
7. Former Trade }  
or Occupation }
- 7a. If the soldier claims previous service in Army, he should state—  
(a) Former Regts. or Corps ;  
with Regtl. Nos.
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) Where  
(c) Opinion of Court
- (b) Date of Discharge ;  
(c) Cause of Discharge.  
(d) Particulars of Pension or Gratuity (if any)

**NOTE.**—The foregoing particulars are to be filled in and A.F.B. 179 a (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."

*R. S. W. Right middle finger*

11. Date of origin of disability.
12. Place of origin of disability.
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.
- Small septic wound middle finger discharged from 3. L. G. H. for Repatriation*

14. State whether the disabilities are
- |  |                     |                   |
|--|---------------------|-------------------|
|  | (a) attributable to | (b) aggravated by |
| (i.) Service during the present war .. .. .                        | <i>Yes</i>          | .....             |
| (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, eyes, ear, nose and throat, disabilities, &c., 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.)*

*The nail is now half off unable at present to do any useful work at Depot.*

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*  
*W. K. M. C. P. M.*

ROYAL NEWFOUNDLAND REG

Medical Officer in charge of case.

Station *Hazelton Camp*  
 Date *21.1.18*

\* 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.

**OPINION OF THE MEDICAL BOARD.**

NOTES.—(1) Clear and definite answers are to be filled in by the Board, as, in the event of a 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.

Expressions such as "may," "might," "probably," etc., are to be avoided.

(ii.) The rates of pension vary according to whether the disability is (a) caused or aggravated by service in the present war. (b) Due to causes not connected with the present war, viz., (1) Previous active service. (2) Climatic diseases 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.

21. Give diagnosis and particulars of:—

(a) Any disability claimed or discovered. *Wound of finger (middle)*  
 (b) The present condition thereof. *Nail growing up again*

22. State whether the disabilities are:—
- |  |                     |                   |
|--|---------------------|-------------------|
|  | (a) Attributable to | (b) Aggravated by |
| (i.) Service during the present war .. .. .                              | <i>Yes</i>          | .....             |
| (ii.) Previous active service .. .. .                                    | .....               | .....             |
| (iii.) Climate in pre-war service .. .. .                                | .....               | .....             |
| (iv.) Ordinary military service before the war .. .. .                   | .....               | .....             |
| (v.) Serious negligence or misconduct on the part of the soldier .. .. . | <i>No</i>           | .....             |
- Give details:

- 22 (a). If not due to any of these causes, to what specific condition do the Board attribute it? .. .. . *Yes*

23. Is the disability in a final stationary condition? If not

- (a) How long is the present degree of disability likely to last?  
 (b) If the present degree of disability is not likely to last 12 months can a further assessment at a reduced rate be made with reasonable confidence to cover a period of 12 months in all? If so, the reduced percentage and the period to which it will be applicable should be indicated in the answer to Question 24a.

24. (a) What is the degree of disablement at which, in the Board's opinion, he should be assessed at present, independent of hospital or other treatment. (Degrees of disablement should be expressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or Nil) (Vide Royal Warrant of 17/4/18 issued as A.O. 162 of 1918, and Instructions to Pension Boards) (assessment to be stated in words as well as figures).
- (b) In case of aggravation or where there is any evidence that there was a disability on entry, what in your opinion was the degree of disablement which existed at the time of joining the Army?

*ml*

25. If an operation was advised and declined, was the refusal unreasonable?

If the Military Member is in disagreement with the Civilian Members, he is to state his opinion in the space provided.

26. (a) Do the Board recommend discharge as physically unfit for further War Service, i.e., do they place him in Grade IV. only?
- OR
- (b) In what other grade do the Board place him?
- (c) Do the Board recommend change to the United Kingdom (in the case of a soldier invalided at a foreign station)?

*Yes*

Opinion of Military Member in case of disagreement.

Only to be answered when the soldier is placed in other than Grade IV.

27. Do the Board find that the soldier has suffered any impairment in health since his entry into the Service?

*lw*

28. Is treatment being recommended on Army Form B. 179c?

29. Does the soldier require:—

- (a) An attendant for his journey home?
- (b) Transport from railway station to his home?
- (c) The constant attendance of another person in his own home?

Signatures

Station *St Johns* ..... *H. H. ...* } President or Chairman.  
 Date *Jan 14/19* ..... *General ...* } Members.  
*W. ...*

Discharge Approved under Para. 392 (xvi) King's Regulations.

Station ..... *Major ...* } Only applicable in cases of Patients in Hospitals.  
 Date *JAN 14 1919* ..... Officer in charge, Central Hospital.

Discharge Approved under Para. 392 ( ) King's Regulations.  
 or Transfer Approved to Class of the Reserve.

(insert sub para. King's Regulations under which discharge is approved or insert W. or W.(T), P. or P.(T)).

Station .....  
 Date ..... O.C. Discharge Centre.



## 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 *Allen Snow.*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4197.*

Intended address *Harwood.*

Height on discharge *5* Feet *6*,

Color of hair on discharge *Dark.*

Complexion *Fair.*

Color of eyes *Grey.*

Descriptive Marks *Fall.*

Figure on discharge *Fair.*

Christian name of Father *James*

Christian name of Mother *Lizzie*

Wife's maiden name in full \_\_\_\_\_

Date and place of marriage \_\_\_\_\_

Christian names of children \_\_\_\_\_

Place and date of soldier's birth *Stander Bay. 1897.*

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) *A. Snow*

Station *St John*

Date *13.1.19.*

(Rank) *Pte.*

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

Medical Officer i/c  
Unit, or Command Depot.



**Casualty Form—Active Service.**

Regiment or Corps Royal Newfoundland 3-4-1897

Rank Private Surname Snow Christian Name Alan

Religion C of E Age on Enlistment 19 years 8 months

Enlisted (a) 3-12-17 Terms of Service (a) Duration Service reckons from (a) 3-12-17

Date of promotion to present rank ..... Date of appointment to lance rank .....

Extended { ..... } Re-engaged { ..... } Qualification (b) .....  
S or Corps Trade and rate .....

Occupation Seaman W. H. Jones Signature of Officer.



Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		<u>AI</u> Embarked ...	<u>2 JUL 1918</u>		
		<u>28.6.18</u> Disembarked	<u>5 JUL 1918</u>		
		<u>Joined Battalion</u>	<u>Field</u>	<u>9.7.18</u>	<u>8718d 15/7/18</u>
		<u>Wounded in Action</u>	<u>14-10-18</u>		
	<u>3 Aug 18</u>	<u>to DW Detachment Head</u>		<u>14-10-18</u>	<u>C.S. 2298</u>
	<u>53</u>	<u>England</u>	<u>B'Que</u>	<u>15/10/18</u>	<u>A.A. 30422</u>
	<u>53</u>	<u>England</u>	<u>18/10/18</u>	<u>18/10/18</u>	<u>W 3083</u>
		<u>For Officer i/c No 1 Infantry Section</u>			
		<u>3rd Echelon, General Headquarters</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 given in the Report.  
 (b) Signaller, Shoshing-Smith, &c.  
 W. 5527-M2093 1000m 7/17 (25686) C.P. & S. and Forms  
NEXT OF KIN: Elizabeth Snow, 6 Range, ...  
 I.P.T.O.



LAST PAY CERTIFICATE

DUPLICATE MAIL COPY

N.F.P./94.

To be rendered for all ranks on discharge, transfer to other Units, or on return to Newfoundland in accordance with C.L./19, 26/5/17.

Regtl No. 4107 Rank Private Name Snow A. Unit Royal Nfld. Regt. who was repatriated to Newfoundland on 12 12 18 Authority Draft. No.79 Cause

DR.		STATEMENT OF ACCOUNT						CR.						
PARTICULARS		\$	¢	£	s	d	PARTICULARS		\$	¢	£	s	d	
PERIOD: From 8/12/18 To 11/12/18	Balance Dr. from						Balance Cr. from							
	Allotment 4 days @ 50	2	00		8	3	7/12/18			7	0		6	
	Cash Payments:						Pay 4 days @ \$ 1.00	4	00					
	A.F.N.1510			7	10	3	Field Alice 4 days @ \$ .10		40					
								<u>4</u>	<u>40</u>			18	1	
	Other Debits						Other Allces days @ \$							
							Other Credits:							
	Total Debits			7	18	6	Total Credits				7	18	6	
	Balance due by Paymaster						Balance due to Paymaster							
					7	18	6				7	18	6	

CHECKED  
CSA  
PERIOD: From 8/12/18 To 11/12/18

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

(Place) \_\_\_\_\_ (Date) 1918  
 Made up/Checked in accordance with information received in the Pay & Record Office O.C. " " Company, London to 31-12-18 and is therefore subject to amendment if and as may be found necessary.  
 Pay & Record Office, London, *A.D. Stewart*  
 Chief Paymaster & O. i/c Records.  
 Dec 1918

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.

Regt. No. 4197 Rank Private Name Snow A. Unit Royal Nfld. Regt. who was repatriated to Newfoundland on 12/12/18 Authority Draft. No.79 Cause \_\_\_\_\_

STATEMENT OF ACCOUNT

DR.	PARTICULARS	\$			£			CR.			
		¢	s	d	s	d					
	Balance Dr. from							Balance Cr. from 7/12/18	7	0	5
	Allotment 4 days @ 50	2	00		8	3		Pay 4 days @ \$ 1.00	4	00	
	Cash Payments:							Field Allce 4 days @ \$.10	40		
	A.F.N.1510				7	10	3		4	40	18 1
	Other Debits							Other Allces days @ \$			
								Other Credits:			
	Total Debits				7	18	6	Total Credits		7	18 6
	Balance due by Paymaster							Balance due to Paymaster			
					7	18	6			7	18 6

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

191

(Place) \_\_\_\_\_ (Date) \_\_\_\_\_ O.C. " " Company, London to 31/12/18  
 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,  
 dec 1918  
 Chief Paymaster & O. 1/c Records.

CHECKED  
*CSA*

PERIOD: From 8/12/18 To 11/12/18

Howwood

6.599

Dep 20/9/19

Dear Sir Just a word  
to ask you about my  
money I came <sup>home</sup> last-  
winter just after  
Christmas and havent  
recive no money yet  
I got my discharges  
6 ~~th~~ <sup>th</sup> Feb

My <sup>number</sup> H197 Pt Allan  
Snow Howwood  
M D B

to Capt J M Howlly  
St. John  
Pay Master

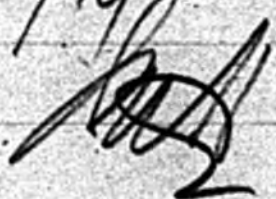
11230.

14111

18579

21860

mailed Oct 15/19



Mar  
apr  
May  
Jun

St. John's, JAN 20 1919

# Royal Newfoundland Regiment.

Billeting Account,

To H. A. Snow

Billeting Soldiers as undermentioned

from Dec 25<sup>th</sup> / 18 to Jan 12<sup>th</sup> / 19

4197 - H. A. Snow, 19 20  
a Snow

*John*

ACCOUNT	<u>B.M.</u>
CH NO	<u>8635</u>
RID LEG	INITIALS <u>EW</u>
PAY LEG	INITIALS
ENTY LG	INITIALS

Certified correct for \$ 19 20

*R.J.*

Orduke Cpl  
Billeting Officer.

Postal Department, Newfoundland.

Post Office at

Bahwood

March 8<sup>th</sup> / 9

4358

Depy of Militia  
St Johns

Have received Reg<sup>l</sup> letter  
No P. 1352 add.  
# 4199 Re Allan Snow  
Up to present it has not  
been called for.  
Would it be for  
Allan Clarke?

Sent from St Johns  
February 6<sup>th</sup> / 9.  
Awaiting your reply  
Yours &c  
E. Atkins  
P.M.

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

in respect of his service as No. 4197 Rank Pte.

Name Allan Snow Royal Nfld. Regt.

Receipt of the same should be acknowledged hereon.

Received received

Signature Allan Snow

Date Dec 12 1921

Address Howwood Nfld

[P.T.O.]



# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
30.

Regiment of 1<sup>st</sup> Newfoundland

Number of Sheet One  
Signature of O. C. Company W. B. [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>S 1197</u>	Age on	<u>19</u> years <u>8</u> months	<u>Co. [unclear]</u>	
Joined	Date	Place and Date of Enlistment	<u>St. John's</u>	Religion	
Joined	Date	Period of	<u>3-13-17</u>	<u>C of P.</u>	
Joined	Date	with Colours	<u>66</u> years.	Place of Birth	
Joined	Date	with Reserve	<u>365</u> years.		

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, 6 <sup>2</sup>/<sub>19</sub></i>					

To be carried over

# The Royal Newfoundland Regiment *D 4197*

**DEMOBILIZATION OF**

Reg. No. *4197* Rank *PL* Name *Allan Snow*  
 Date of Enlistment *3-12-17* Address *Forewood 200* District *Suburban*  
 Occupation *Lumberman* Classification for Discharge *B* Medical Category *Logo E*  
 Recommendation S.M.B. *Remanently unfit* Disability Rating *Nil.*  
 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 <i>3</i>
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 *20-1-19*

*W. H. C. Discharge Depot*  
O. C. Discharge Depot.

## PARTICULARS FOR DEMOBILIZATION

## 1. Civil Re-Establishment

I am *not* in a position to resume civilian occupation.

*a Snow*

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 *Joseph H. Snow*Date *20-1-19*

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 2540 to his home at Howwood BB and Release Certificate No. 869 issued.

Date 20-1-19

ASDicks 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 6-2-19

Date 20-1-19  
overseas pay etc to be adjusted - Depot Paymaster. W. H. Waley Capt

Discharge approved for 23.1.19

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
R 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 22.1.19

ASDicks 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**

JAN 23 1919

Date .....

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

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

Date Jan 23/19

ASDicks Capt  
Depot Records

Reg. No. *4197* Rank *Pte* Name *Andrew A.*

Attested ..... Address *Change Islands*

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

Date of Allotment ..... Returned from Overseas *21.12.18*

Embarked for Overseas ..... Cause *Discharged*

*5 leave from 21-12-18 to 6-1-19  
Extended to 15-1-19.*

*14-1-19 Re Dis Permanently Unfit*

*20-1-19* PASSED TO DEMOBILIZATION OFFICER

*23-1-19* DISCHARGE APPROVED ON DEMOBILISATION.