



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 5497 Name Martin Sparkes Corps Medth

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

1. What is your name? ..... 1. Martin Sparkes
2. What is your full Address? ..... 2. Wesleyville  
B.B.
3. Are you a British Subject? ..... 3. Yes
4. What is your age? ..... 4. 21 Years ..... 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, Martin Sparkes 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.

28/5/18 Martin Sparkes SIGNATURE OF RECRUIT.  
A. R. Power Signature of Witness.

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

I, Martin Sparkes 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 28 day of May 1918

Signature of Attesting Officer A. B. Dicks Lieut.

### †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 ..... 191 .....  
Place ..... } 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

2497

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

Name Martin Sparkes.

Apparent age 21 years ..... months. Height 5 feet 8 1/2 inches

Chest Measurement { Girth when fully expanded 35 inches  
Range of expansion 4 inches

Distinctive marks .....

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Martin Sparkes.  
Wesleyville | Relationship Father.

BB 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 <del>British</del> engagement reckons from <u>28 5 18</u>									
Joined at <u>St. John's</u> on <u>28 5 18</u>									
<u>Discharged July 5 19</u>									
<u>Embarked St. John's S.S. Co. en route to Halifax N.S. 22 7 18.</u>									
<u>To fight for demobilization 22 5 19 19</u>									
<u>Arrives to our base 1 6 19 19</u>									
<u>Demobilization St. John's 5 7 19 19</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 5-7-1919 [date of discharge] 1 years 39 days

" " Pensions " [ " " ] " " "



5497.

C.R. ~~XXXXXXXXXX~~


May 12th. 1919.

Rev. Chas. House  
Methodist Minister  
Wesleyville.

Dear Sir-

I am directed to acknowledge receipt of your letter of the 19th. inst. regarding the early repatriation of #4597 Pte. Martin Sparks ~~for compassionate~~ reasons. I am to inform you that a message has been dispatched to the authorities on the other side to ensure that Pte. Sparks will be included in the next draft returning to this country. For your information I may add that this draft will be leaving about May 20th. from United Kingdom and a full list of those comprising the draft will be published in the daily Papers.

Yours faithfully,

  
Casualty Officer.

MAY 12 1920

MAY 13 1920

MAY 12 1920

MAY 12 1920

MAY 13 1920

MAY 12 1920

MAY 13 1920

MAY 28 1920

C.R. 5497

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

The discharge of the undernoted on demobilization  
has been confirmed by Officer i/c Records on noted date.

#5497 Pte. Martin Sparks.

5-7-19.



C. R. 5497

Extract from Daily Orders Part 11 Unit The Royal Wfld.  
Regt. Depot, St. John's June 10th, 1919.

The discharge of the undernoted on demobilization has been  
APPROVED by G.O. Discharge Depot with effect from 222229  
21-6-19

5497 Pte. Martin Sparks.

C.R. 5497

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

Date 10-6-19.

5497 Pte. Martin Sparkes

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

C.R. 5498

Extract of Telegram from Syn., London, to Military.

April 11th 1919.

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With reference to your telegram April 9th verify carefully and report whether correct regimental particulars #5499 Sparkes.

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# NEWFOUNDLAND POSTAL TELEGRAPHS

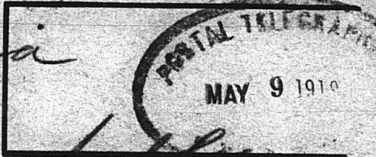
CP 5497

CABLE CONNECTION WITH ALL PARTS OF THE WORLD

Line No. \_\_\_\_\_ Sent by \_\_\_\_\_ Rec'd by \_\_\_\_\_ Check \_\_\_\_\_ No. 2000

Place from Westville

To Min of Militia



Martin Sparkes father  
54097. pke Martin  
Sparkes overseas very  
ill would like  
son return as  
soon as possible  
Charles House  
16074  
meth minister

C.R. 5497

**Extract from Daily Orders By Major M.S. Sullivan,  
Commanding Newfoundland Forestry Companies 6-12-18.**

The undermentioned having reported for duty from the 2nd Bn. Royal Wfld. Regt. is attached to the strength for rations from this date, and posted to "C" Company.

5497 Pte. Sparkes.

CR. 5497

June 30, 1918.

Sir:†

#5457 Martin Sparkes.

I return telegram received by you to which I have attached copy of the Senior Medical Officer's report. I understand that the man is at present at home on leave.

In view of the report of the M.O. it will be impossible to extend leave for the time requested.

I have the honour to be,

Sir,

Your obedient servant,

Major.

District Officer Commanding.

Newfoundland.

A.B.Morine Esq., K.C.,

City.



C.R. 5497

Extract of Telegram from Military to Syn., London.

Dated April 12th/19.

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My telegram of April 9th should be read 5497 Sparkes.

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C.R. 5497

Extract from Daily Orders part 11, from Unit The Royal  
Field Regt. Sy. Welm's, dated July 25, 1918

The following man embarked for overseas on H.M.S.  
"Columbell," July 22, 1918.

#5497 Pte. Martin Sparkes.

C.R. 5497

Extract from Daily Orders part 11, from Unit The Royal  
Wfld. Regt. St. John's, dated May 30th, 1918.

#5497 Pte. M. Sparkes.

Attested for General Service with the Royal Wfld. Regt.  
from 26.5.18



M Sparkes

C.R.

5497

U

S+R

**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 } *Fisherman*  
 2. Regtl. No. *5497* 3. Rank. *Pvt* } 7a. If the soldier claims previous service in Army, he should state—  
 4. Name *Spaikes* *McPhie* } (a) Former Regts. or Corps; with Regtl. Nos.  
 (Surname) (Christian Names)  
 5. Age last birthday. *21*  
 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? (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 (if any)  
 (b) Where  
 (c) Opinion of Court

**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."

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 ?

*Recomplaints of no Disabilities*

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.)*

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 invaded at Foreign Stations.*

*Repatriation*

*O. J. Treasner*

*Capt Rawe*

Medical Officer in charge of case.

Station *Harley Down* .. .. .

Date *5/4/19* .. .. .

\* 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







THE ROYAL NEWFOUNDLAND REGIMENT
ALLOTMENTS

I, Martin Sparker, Regl. No. 5424
hereby agree, until further notification by me, and in similar official form to make an Allotment of
Dollars and Sixty Cents, per diem, from my Pay,
to, and for the benefit of the undermentioned Person and Persons, such payment to be made on proof
of identity of, and production of the relative Identity Certificates by the Person and Persons
concerned, viz.:

Allotment begins August 1 1918

Table with 4 columns: Identity Certificate No., Whether Wife, Child, other Relative or Friend, NAME (in full), ADDRESS, AMOUNT (each person). Row 1: 4552, Mother, Mr Martin (Ellen) Sparker, 14 King Street, 60.

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

(Sig.) [Signature]
Officer Commanding
Company

(Sig.) Martin Sparker
(Rank) Pte

N.F.P./88.

NEWFOUNDLAND CONTINGENT

TELEGRAM ~~full text~~/extract from MINISTER OF MILITIA;

No. \_\_\_\_\_ Dated 9/5/19(179), received 10 5 19

Decoded by J.M. Checked by R.A.P.

Branch Records Acted upon (Initial) \_\_\_\_\_

Acknowledged per No. \_\_\_\_\_

Dated / /

<sup>5497</sup>  
Arrange-repatriation of ~~4597~~-Sparkes-next draft-

*W.C. 110 proceeded 22.5.19*



B 066997

1696/244/P&A

NEWFOUNDLAND CONTINGENT

From:

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

To:

~~Officer Commanding,  
2nd Bn. Royal Nfld. Regt.,  
Winchester.~~

28th January, 1919

*Feb 25/19* 1919

Subject: 5497, Pte. M. Sparks,

With reference to the following telegram (367) from the Hon. Minister of Militia, received

"Pay to 5497, Sparks £5:0:0.

1 Draft £5:0:0. is enclosed for payment to this Soldier.

Kindly obtain his receipt hereon.

*A. O. Munnell Maj.*  
Chief Paymaster & O. i/c Records.

Receipt hereunder

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

Received the sum of Five Pounds

on account of

\_\_\_\_\_ cable remittance from Newfoundland.

M Sparks  
No. 5497 Rank Private

Witness M. Rockett



5911  
No. ~~5020/868~~

N.F.F./79.

From: NEWFOUNDLAND CONTINGENT

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

To: Officer Commanding  
2nd Batt. Ryl. Nfld. Regt.  
Winchester.

14th April 1919

5497 Pte M. Sparkes.

With reference to the following telegram from the Minister of Militia / / (134)

"Pay to-5497 Pte M. Sparkes  
£5. 0. 0.

Cheque £ 5. 0. 0. is enclosed.  
for payment to this Soldier.  
Kindly obtain his receipt  
hereon.

*A. R. Munnell*  
Chief Paymaster & O. i/c Records.

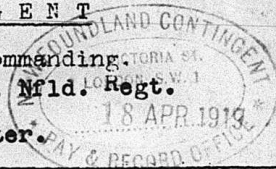
Receipt hereunder.

*Keam*  
LIEUT. COLONEL.  
COMMANDING 2ND BATT. ROYAL NEWFOUNDLAND REGT.

Received the sum of five  
Pounds in respect of  
telegraphic remittance from the  
Minister of Militia.

M Sparkes  
No. 5497 Rank pt

Witness George Perry i/c



No. 17763/1929

049928  
KB-D



NEWFOUNDLAND CONTINGENT

From:

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

To:

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

2nd November 1918

Nov 6 1918

Subject: 5497, Pte. M. Sparks

With reference to the following telegram (9426) from the Hon. Minister of Militia, received

pay to 5497 Sparks £5:19:0

Draft £5:19:0 is enclosed for payment to this Soldier. Kindly obtain his receipt hereon.

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

Receipt *Chas. J. [Signature]* hereunder. **LIEUT. COLONEL, COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.**

Officer Commdg. 2<sup>nd</sup> Batt'n, Royal Newfoundland Regiment.

Received the sum of Five ~~found remittance~~ on account of cable remittance from Newfoundland.

private  
No. 5497 Rank Private

Witness A.L. Carter, Pte.

No. 3035/450.

27 FEB 1919 N.F.P./79.

From. NEWFOUNDLAND CONTINGENT

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

To Officer Commanding,  
2nd/Bn. Ryl Nfld Regt.  
Winchester.

21st February 1919

Feb. 24<sup>th</sup> 1919

5497. Pte Sparkes. M.

With reference to the following  
telegram from the Minister of  
Militia / / ( 38 )

"Pay to-5497. Sparkes.

£5.0.0.

Cheque £ 5.0.0. is enclosed.  
for payment to this Soldier.  
Kindly obtain his receipt  
hereon.

*A. A. Minns Maj.*  
Chief Paymaster & O. i/c Records.

Receipt hereunder.

*J. J. Bartlett* LIEUT. COLONEL,  
COMMANDING 2ND BN. ROYAL NEWFOUNDLAND REGT.

Received the sum of £5.0.0.

Five pounds. in respect of  
telegraphic remittance from the  
Minister of Militia.

m sparkes  
No. 5497 Rank Pte.

Witness Geo. Parry. E/c

Sparks, L

5497

Ray Sept



July 5, 1919

#5497 Pte. Martin Sparks,

Wesleyville, C.B.

Dear Sir:-

Please find enclosed Discharge

Certificate No. 2661.

Yours truly

- Captain  
Paymaster & C. i/c Records.

The Royal Nfld. Regiment

DEMOBILIZATION

No. 5497 Rank

Name Sparkes W

Warned for demobilization on

JUN 7 1919

July 5, 1919

#5497 Pte. Martin Sparks,

Wesleyville, B.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 & Officer in Charge Records.



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..... *Markus* ..... 2. Surname..... *Sparks* .....
3. Rank..... *Pte* ..... 4. Regtl. No..... *5497* .....
5. Address in full to which future payments of gratuity are to be forwarded..... *Wesleyville Bonamasha Bay* .....
6. Date of enlistment in the Regiment..... *May 25 1918* .....
7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....  
*Not applicable.*
8. Relationship of such dependents..... *do* .....
9. Address in full of such dependents..... *do* .....
10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *no* .....
11. Were you on active service only in Nfld. If so, give dates and particulars of such service..... *Overseas* .....
12. Give total length of time which you served on active service, whether in Nfld. or Overseas..... *thirteen months* .....
- ..... 1.  $\frac{3}{4}$  .....



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

..... *Not applicable* .....

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

..... *Yes* .....

*\$70.45 Clothing & Ration money* .....

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?..... *No*

19. Are you now serving in the Regt.?..... If not give? - (a) Date of discharge. *June 20/19.* (b) Reason for discharge.....

..... *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....

..... *England* .....

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

.....

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

Signature of Applicant: *H Sparks*

Place of Residence: *Walesville, Bk.*

Declared before me at: *St Johns rd.*

This *7<sup>th</sup>* day of *Jan* 19*19*....

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

POST DISCHARGE PAY.

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



# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 5497 Rank Plt Name Sparks Martin  
 Intended place of residence Wesleyville Bonaville  
 2. Occupation Soldier  
 Classification of soldier E Medical Category A1

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 .....  
 Date ST. JOHN'S JUN 7 1919 *J. H. Mearns*  
 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 JUN 7 1919 .....  
ST. JOHN'S .....  
*M. Sparks*  
 Signature of soldier  
*A. M. Johnston*  
 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 JUN 7 1919 .....  
ST. JOHN'S .....  
*M. Sparks*  
 Signature of soldier  
*James Newman*  
 Signature of witness JN.

### STATEMENT OF SERVICE

7. Enlisted for service 28-5-18 ..... No of days on Military  
 Discharged from service 7-6-19 plus 14 days ..... Service 404

### 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 .....  
 Date JUN 21 1919 .....  
*R. H. East*  
 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 .....  
 Date July 5 1919 .....  
*M. Bowley*  
 Officer i/c Records  
 The Royal Newfoundland Regiment

*A. J. Bisset 20/9/26/1*

# 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. *5497.*

Name

*Sparkes Martin Pte*

Address

*Wesleyville*

Present Medical Category

*A-1*

Recommended for:—

- (a) Immediate discharge .....  
(b) ~~Standing Medical Board~~ .....

Members of Board

*R.H. Galt Capt*

O.C. Discharge Depot.

*Watson*

Senior Medical Officer

*W. Gordon*

M. O. Depot



# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 5497 Rank Pvt Name Sparkes Martin  
 Date of Enlistment 25-5-18 Address Wesleyville District Bivista  
 Occupation fisherman Classification for Discharge F Medical Category A 2  
 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 O. C. Discharge Depot. *[Signature]*

### PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am ..... in a position to resume civilian occupation. *by Sparkes*

Particulars passed to Vocational Officer for information and action.

Date .....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable. \$600
- (b) Clothing Supplied Amel [Signature]

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

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R. 1548 G. 614* to his home at *Wesleyville* and Release Certificate No. *2451* issued

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

Date *7-6-19* ..... *J.W. [Signature]*  
Depot Paymaster.

Discharge approved for *21-6-19* .....

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1
F 178	W 3494	B 122	Board 1st.	" 2
F 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 *7-6-19* ..... *J.A. Know Capt.*  
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

JUN 21 1919

*R.H. Sait Capt.*

Date .....  
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*

*M Sparks*

Signature of Man.

*J. D. Snowcraft*

Signature of the Vocational Officer or his Representative.

Reg. No. *5497*

Place

*M - Johns*

Date

*JUN 7 1919*

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**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 } *Fisherman*
2. Regtl. No. *54973*. Rank. *plie* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Sporkeo* } (a) Former Regts. or Corps ; }  
*Martin* } with Regtl. Nos. }
- (Surname) (Christian Names)
5. Age last birthday... *21*.....
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? (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."
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.)*

*The complain is open 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 ?

20. Do you recommend—  
 (a) Discharge as permanently unfit ?  
 (b) Change to United Kingdom ?

*Repatriation*

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

*W. J. G. [Signature]*  
W. J. G. [Signature] Giffen

Station *W. J. G. [Signature]*

Medical Officer in charge of case.

Date *8/4/19*

\* 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

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

# MEDICAL HISTORY

Surname Sparkes OF Christian Name Martin

Table I.—GENERAL TABLE.

Birthplace:—Parish	<u>St Gilesville B.B.</u>	County	<u>Nfld.</u>
	<u>SPECIAL RESERVE</u>		<u>REGULAR ARMY</u>
Examined	on <u>28th</u> day of <u>May</u> 191 <u>8</u>	on	day of 191
	at <u>St John's</u>	at	
Declared Age	<u>21</u> years	days	years days
Trade or Occupation	<u>Fisherman</u>		
Height	<u>5</u> feet <u>8 1/2</u> inches		feet inches
Weight	<u>134</u> lbs.		lbs.
Chest Measurement	Girth when fully expanded	<u>35</u> inches	inches
	Range of Expansion	<u>4</u> inches	inches
Physical Development			
Vaccination Marks	Right	Left	Right Left
	<u>/</u>	<u>/</u>	
When Vaccinated			
Vision	R.E.—V= <u>6/6</u> L.E.—V= <u>6/6</u>		R.E.—V= <u>6/6</u> L.E.—V= <u>6/6</u>
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)
(b) Slight defects but not sufficient to cause rejection	(b)		(b)
Approved by (Signature)	<u>Lammot Peterson</u>		
(Rank)	<u>Major</u>	Medical Officer.	Medical Officer.
Enlisted	at <u>St John's</u>	at	
	on <u>28th</u> day of <u>May</u> 191 <u>8</u>	on	day of 191
Joined on Enlistment	Corps. <u>Royal Nfld. Regiment.</u>	Regtl. No. <u>5497.</u>	Corps. Regtl. No.
Transferred to			
Became non-effective by	on	day of 191	on
(Signature)			day of 191
(Rank)			







## 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

*Martin Sparkes*

Regiment from which discharged **Royal Newfoundland**

Regimental number

*5499*

Intended address

*Wesleyville*

Height on discharge

*5* Feet *9*

Color of hair on discharge

*Dark Brown*

Complexion

*Fair*

Color of eyes

*Brown*

Descriptive Marks

Figure on discharge

*medium*

Christian name of Father

*Martin*

Christian name of Mother

*Helen*

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth

*Wesleyville, Aug. 25<sup>th</sup> 1898*

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)

*Martin Sparkes*

*Mt.*  
(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



Spartan.

Poor development.  $\bar{c}$   
tendency. The Chats.  
Rec. large to Dr. Br.  
necessary to reexamine.

Wm.



THE ROYAL NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, *Martin Sparkes*, Regl. No. *5497*  
 hereby agree, until further notification by me, and in similar official form to make an Allotment of  
 \_\_\_\_\_ Dollars and *Sixty* Cents, per diem, from my Pay,  
 to, and for the benefit of the undermentioned Person <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 *August 1<sup>st</sup> 1918*

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
4859	Mother	Mr Martin (Ellen) Sparkes	Wesleyville 1	60
Total Allotment, \$				60

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

(Sig.) *Watson Hunt*  
 Officer Commanding  
*E* Company  
*SA John*  
*July 5 1918*

(Sig.) *Martin Sparkes*  
 (Rank) *P6*

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39.

Regiment of The Royal Newfoundland

Number of Sheet One

Signature of O. C. Company P. Brooks Lieut

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay	
No.	<u>5497</u>	Age on <u>11</u> years months		<u>fisherman.</u>		
Joined _____	Date _____	Place and Date of Enlistment } <u>St. John's</u>	Religion			
Joined _____	Date _____		<u>Methodist.</u>			
Joined _____	Date _____	Period of } with Colours <u>1/39</u> years.	Place of Birth			
Joined _____	Date _____		with Reserve <u>3/6</u> years. <u>St. Gedeonsville, N.S.</u>			

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Name of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				Demobilized	<u>St John's 5 7/19</u>				

To be carried over.

Army Form B. 121.

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 5497 Rank Pte Name Sparkes, Martin  
 Date of Enlistment 28-5-18 Address Hesleyville District B'vista  
 Occupation Fisherman Classification for Discharge E Medical Category A I  
 Recommendation S.M.B. \_\_\_\_\_ Disability Rating \_\_\_\_\_  
 Passed to Demobilization Officer with following documents:—

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

Date 6-6-19 \_\_\_\_\_  
 \_\_\_\_\_ No. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

**r. Civil Re-Establishment.**

I am \_\_\_\_\_ in a position to resume civilian occupation. by Sparkes

Particulars passed to Vocational Officer for information and action.

Date \_\_\_\_\_

**a. Clothing.**

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable. \$65.00
- (b) Clothing Supplied \_\_\_\_\_

Date 6-7-19 \_\_\_\_\_ O i.c. Re-clothing.



3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. .... to his home  
at Reslayville and Release Certificate No. 2451 issued.

Date 7-6-19

J.A. Brown 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 7-1-19

Date 7-6-19

R. H. Sait Capt.  
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
F 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 7-6-19

J.A. Brown Capt.  
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

Date JUN 21 1919

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

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

Date June 14/1919

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

Reg. No. *2497* Rank *1st* Name *Sparker, M.*  
Attested ..... Address *Wesleyville.*  
Allotment..... Allottee .....  
Date of Allotment..... Returned from Overseas *1.6.19.*  
Returned on S.S. *Loisian* Cause *Discharge*

*6-6-19* PASSED TO DEMOBILIZATION OFFICER  
*21-6-19* DISCHARGE APPROVED ON DEMOBILIZATION