



# THE ROYAL NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 1598 Name Spears Corps R.C.

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

1. What is your name? ..... 1. Alfred Spears
2. What is your full Address? ..... 2. 24 Commercial St  
St. Johns
3. Are you a British Subject? ..... 3. Yes
4. What is your age? ..... 4. 18 Years 4 Months
5. What is your Trade or Calling? ..... 5. Bookbinder
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, Alfred Spears 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.

SIGNATURE OF RECRUIT.

Signature of Witness.

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

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

### CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at .....

on this 22 day of April 1911

Signature of Attesting Officer

### †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 April 22 1911

Place St. Johns

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 Alfred Spearman  
 Apparent age 18 years 11 months. Height 5 feet 10 1/2 inches  
 Chest Measurement { Girth when fully expanded 35 1/2 inches  
 Range of expansion 3 1/2 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Annie Spearman  
28 Coleraine St | Relationship Mother  
St John 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)
2			

## 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 " \_\_\_\_\_ [ " " ] \_\_\_\_\_ " \_\_\_\_\_ "



# H FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. H 598 Name Spears Alfred Corps R/C

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

- 1. What is your name? ..... 1. Alfred Spears
- 2. What is your full Address? ..... 2. 2 Colonial St  
St John
- 3. Are you a British Subject? ..... 3. Yes
- 4. What is your age? ..... 4. 15 Years 4 Months
- 5. What is your Trade or Calling? ..... 5. Butcher
- 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, Alfred Spears 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.

Alfred Spears SIGNATURE OF RECRUIT.  
Frank E. Gunn Signature of Witness.

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

I, Alfred Spears 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.

on this 22 day of April 1915 Wm L. Hart Major  
Signature of Attesting Officer

### 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 April 27 1915  
Place St John } 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).....

Repeat 15.5.18

# DESCRIPTIVE REPORT ON ENLISTMENT

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

Name Alfred Spearus  
 Apparent age 18 years 11 months. Height 5 feet 10 1/2 inches  
 Chest Measurement { Girth when fully expanded 35 1/2 inches  
 Range of expansion 3 1/2 inches  
 Distinctive marks .....

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Annies Spearus  
28 Coloma St | Relationship Mother  
St John 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)
	2		

### 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>22-4-18</u>									
Joined at <u>St. John's</u> on <u>April 22, 1918</u>									
<del>Discharged April 29, 1919</del>									
<u>Report for duty 15-5-1918</u>									
<u>Demobilization St. John's 28-4-1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 28-4-1919 (date of discharge) 3 years 349 days  
 Pensions " " " " " " " " " " " "

C.R. 4598

Extract from Daily Orders part II, Depot  
St. John's dated April 30th. 1919.

~~XXXXXXXXXXXXXXXXXXXX~~

The discharge of the undernoted on demobilization  
has been CONFIRMED by Officer i/c Records on 28-4-19.

4598 Pte. Alfred Spearns.

C.R. 4598

Extract from Daily Orders part II, Depot St. John's dated  
16/4/19.

The discharge of the u/n on demobilisation has been APPROVED  
by C. J. Discharge Depot on 14-4-19.

14-4-19

#4598 Pte. A. Spearnes.

C.R. 4598

Extract of Daily Orders part 11, from Unit The Royal Wfld.  
Regt. St. John's, dated April 23, 1918.

#4598 Pte. Alfred Spearns.

Attested for General Service with the Royal Wfld. Regt. from  
22/4/18 to report. 15/5/18.

Spears, A.

4598

Jay Sept.



# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 4598 Rank Pvt Name Spearman Alfred  
 Intended place of residence 35 Colonial St. St. Johns
2. Occupation Packer  
 Classification of soldier B Medical Category A.II
3. The above named man is discharged in consequence of DEMobilIZATION.  
Eligible for War Service Gratuity
4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.  
 Place ST. JOHN'S  
 Date 14-4-19 Alfred Spearman Capt  
 Commanding Discharge Depot  
 The Royal Newfoundland Regiment

## CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.  
 Place and date ST. JOHN'S  
14-4-19 Alfred Spearman  
 Signature of soldier  
Alfred Spearman  
 Signature of witness

## CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.  
 Place and Date ST. JOHN'S  
14-4-19 Alfred Spearman  
 Signature of soldier  
W. J. Calvey  
 Signature of witness

## STATEMENT OF SERVICE

7. Enlisted for service 22-4-18 No of days on Military  
 Discharged from service 14-4-19 Plus 14 days Service 372

## 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  
APR 14 1919 R. H. Chait Capt  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment  
 Date .....

## CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed  
 Place St. John's Nfld  
April 28/1919 W. Bowley Capt  
 Officer i/c Records  
 The Royal Newfoundland Regiment  
 Date .....

April 28, 1919

#4536 Pte. Alfred Spearns,  
#28 Colonial St.,  
City

Dear Sir:- Please find enclosed "Discharge Certificate  
No. 2132."

Yours truly

Captain,  
Paymaster & V. i/c Records

# The Royal Newfoundland Regiment

## DEMobilIZATION OF

Reg. No. 4598 Rank Pvt. Name Spearns Alfred  
 Date of Enlistment 22-4-18 Address St John's District St John's  
 Occupation Postman Classification for Discharge B Medical Category A II  
 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	1. D 400A	B 1915	2	do 2nd	" 3	2
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K	/	do 4th	" 5	
B 179b	B 103	ME 2			" 6	
B 179c	B 120	M 93				

Date 14-4-14

J.W. H. H. H.  
O. C. Discharge Depot.

### PARTICULARS FOR DEMobilIZATION

#### 1. Civil Re-Establishment.

I am / in a position to resume civilian occupation.

Alfred Spearns

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~~ amb. Conston

Date 14-4-14

O i/c. Re-clothing.

**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrant No. Int. to his home  
 at J.P.T. and Release Certificate No. 2138 issued.  
 Date 14-4-19  
*J.A. Shaw*  
 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 28-4-19  
 Date 14-4-19  
*W. H. Capel*  
 Depot Paymaster.

Discharge approved for 14-4-19  
 Forwarded with following documents to O.C Discharge Depot.

N.F. P[36]	B 268	B 121	N.F. Med	D.F. 1
E 178	W 3494	B 122	Board 1st	" 2
R 178a	D 400A	B 1015	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 14-4-19  
*J.A. Shaw*  
 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**

APR 14 1919

Date .....  
*R.H. Sait*  
 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  
Packer

Alfred Spears  
Signature of Man.

Reg. No. 4098

J. A. Snow  
Signature of the Vocational Officer or his Representative.

Place ST. JOHN'S

Date APR 14 1919

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# The Royal Newfoundland Regiment

Class for Demobilization:

*A* ~~*B*~~ *C*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *11/11/19*

Regimental No. *4598*

Name *Alfred Shears*

Address *Colonial Street*

Present Medical Category *A I A II*

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

Members of Board

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

*L. Robinson*  
Senior Medical Officer

*T. W. Burden*  
M. O. Depot

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

# MEDICAL HISTORY

Surname Spearns OF Christian Name Alfred

Table I.—GENERAL TABLE.

Birthplace:—Parish	<u>S. Johns</u>		County	<u>Nfld</u>	
Examined	on <u>22</u> day of <u>Apr</u> 191 <u>8</u>		on		day of 191
	at <u>S. Johns</u>		at		
Declared Age	<u>18</u> years — days		years		days
Trade or Occupation	<u>Racker</u>				
Height	<u>5</u> feet <u>10 1/2</u> inches		feet		inches
Weight	<u>145</u> lbs.				lbs.
Chest Measurement	Girth when fully expanded... <u>35 1/2</u> inches				inches
	Range of Expansion... <u>3 1/2</u> inches				inches
Physical Development					
Vaccination Marks	Right	Left	Right	Left	
	<u>1 Scar</u>				
When Vaccinated	<u>14 yrs ago</u>				
Vision	R.E.—V= <u>6/6</u>	L.E.—V= <u>6/6</u>	R.E.—V=	L.E.—V=	
	(a)	(a)	(a)	(a)	
(a) Marks indicating congenital peculiarities or previous diseases					
(b) Slight defects but not sufficient to cause rejection					
Approved by (Signature)	<u>L. J. Peterson</u>				
(Rank)	<u>Major</u>				
Enlisted	at <u>S. Johns</u>		at		
	on <u>22</u> day of <u>Apr</u> 191 <u>8</u>		on		day of 191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.	
	<u>The Royal Nfld Regt</u>	<u>4598</u>			
Transferred to					
Became non-effective by	on		on		
[Signature]	day of 191		day of 191		
[Rank]					

**Table III.—Boards: Courts of Inquiry, Vaccination, Inoculations, &c.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.**

Date	Brief Details, and Signature
<p>15-5-18  <del>6-7-18</del></p>	<p>Vacc. <i>HP</i>            I. A.B. <i>HP</i></p> <p style="text-align: right;"> <i>It is hereby certified that this soldier has been before a Travelling Medical Board and has been classified as <u>CT</u> for Discharge on Demobilisation. Medical category <u>11K 19</u></i>  <i>11K 19</i>  <small>Date of T.M.B.</small>  <i>Jr</i>  <small>Discharge Agent Adjutant</small>  <small>Colonel</small>  <small>New Zealand</small> </p>

**Table IV.—SERVICE TABLE.**

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation





## 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 *Alfred Spearns.*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4598.*

Intended address *38 Colonial Street*

Height on discharge *5 Feet 10 1/2.*

Color of hair on discharge *Black*

Complexion *Dark*

Color of eyes *Blue*

Descriptive Marks *Vaccination Mark Left Arm*

Figure on discharge *Tall*

Christian name of Father *—*

Christian name of Mother *Annie.*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *St Johns 27-12-1900*

Nature and locality of civil employment required

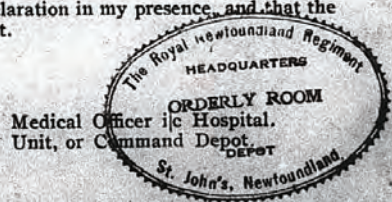
I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full) *Alfred Spearns* *Ste*

Station *St Johns* (Rank)

Date *14-4-19*

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 \_\_\_\_\_



## THE ROYAL NEWFOUNDLAND REGIMENT ALLOTMENTS

I, Alfred Spearns, Regl. No. 4598  
 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 July 1st 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
<u>6424</u>	<u>mother</u>	<u>Mrs Annie Spearns</u>	<u>28 Colonial St St John's</u>	<u>60</u>
Total Allotment, \$				<u>60</u>

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

(Sig.) S. Murphy Capt.  
 Officer Commanding  
C Company  
St John's N.F.  
July 6<sup>th</sup> 1918

(Sig.) A. Spearns  
 (Rank) Private



This Form is to be used in connection with Pamph. M. E. (1)  
N. F. 1915

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

Examination of Alfred Spearman  
aged 18 years conducted at Headquarters  
Date: April 18 Recruiting Officer:

NO OF TEST FINDING

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

1598

yes 14 years ago 10 car left. Horn  
5 ft 10 1/2  
145 lbs  
37 - 38 1/2  
n  
mother Annie 28 Bonomial St  
mother

try out

try out

Signature of Medical Examiner:

W. Burdell



## THE ROYAL NEWFOUNDLAND REGIMENT

### ALLOTMENTS

I, Alfred Spearns, Regl. No. 4598  
 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 July 1<sup>st</sup> 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
6424	<i>Mother</i>	<i>Mrs Annie Spearns</i>	<i>28 Colonial St. St. John's</i>	<i>60</i>
Total Allotment, \$				<u>60</u>

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.) *S. Murphy* Capt.  
 Officer Commanding  
*6* Company  
*St John's N.F.*

(Sig.) *A. Spearns*  
 (Rank) *Private*

*July 6<sup>th</sup> 1918*

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 *Alfred* ..... 2. Surname *Shearns* .....  
3. Rank *Pte* ..... 4. Regt. No. *4598* .....

5. Address in full to which future payments of gratuity are to be forwarded. *28 Colonial St St. Johns* .....

6. Date of enlistment in the Regiment. *April 22nd 1918* .....

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

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

9. Address in full of such dependents. *Not applicable* .....

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

11. Were you on active service only in Nfld. If so, give dates and particulars of such service. *Service in Nfld from April 22/18 to April 28/18* .....

12. Give total length of time which you served on active service, whether in Nfld. or Overseas. *Total service in Nfld 37 1/2 Days* .....

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.

*Not applicable*

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.

*Not applicable*

18. Did you revert overseas to a rank lower than the substantive rank held by you on your arrival in England? *Not applicable*

(b) If so, was such reversion in consequence of Misconduct or inefficiency? *Not applicable*

19. Are you now serving in the Rest? *No* If not give:- (a) Date of discharge *28.7.4. - 19.* (b) Reason for discharge

*To Take up Civilian Employment*

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.

*Not applicable*

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.

*Not applicable*

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

Signature of Applicant: *Alfred Spears Pte 4698*  
 Place of Residence: *28 colonial st st johns*  
 Declared before me at: *St. John's*  
 This *14<sup>th</sup>* day of *May* 19*19*.....

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

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	.....	.....	<i>1.00</i>	<i>70.00</i>
Certified correct.				Paymaster <i>N</i>

*Term 1 Year 7 days*

*Never Observed*  
*[Signature]*

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



## THE ROYAL NEWFOUNDLAND REGIMENT

### ALLOTMENTS

I, Alfred Spearms, Regl. No. 4598  
 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 July 1<sup>st</sup> 1918

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
6424	<u>Mother</u>	<u>Mrs Annie Spearms</u>	<u>28 Colonial St. St. Johns</u>	<u>60</u>
Total Allotment, \$				<u>60</u>

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.) S. Murphy Capt.  
 Officer Commanding  
B Company

St. Johns N.F.  
July 6<sup>th</sup> 1918

(Sig.) A. Spearms  
 (Rank) Private



DEPARTMENT OF MILITIA.  
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 70<sup>00</sup>

May 15 19 19

Received from the First Newfoundland Regiment  
the sum of Seventy <sup>00</sup>/<sub>100</sub> Dollars.  
on account of Pay. W S Gately  
balance

Pte A Spearns

Ch. No. 17895	Initials EWS
Pay Ledger 33	Initials EWS
Gen. Ledger	Initials

Regtl. No. Rank



No. 4598

Rank. Pte

Name O. Spears

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B 121.  
39.

Number of Sheet 1

Regiment of Royal Newfoundland

Signature of O. C. Company [Signature]

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.		Age on	years	months	
Joined	Date	Place and Date of Enlistment		Religion	
Joined	Date	} with Colours		Place of Birth	
Joined	Date	} with Reserve			

1598 Spears. A.  
18 years 4 months  
St. John's  
20.4.18  
7 years.  
36 years.  
Packer  
R.C.  
St. John's

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
				<u>Demobilized St. John's</u>		<u>28</u>	<u>19</u>		

To be carried over

Army Form B. 121.

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 4598 Rank Plt Name Spearns Alfred  
 Date of Enlistment 22-4-18 Address St Johns District St Johns  
 Occupation Post Office Classification for Discharge L Medical Category A 7  
 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	D 400A	B 1915	2	do 2nd	" 3	3
B 179	D 400B	Form L		do 3rd	" 4	
B 179a	D 400C	Form K	1	do 4th	" 5	
B 179b	B 103	ME 2			" 6	
B 179c	B 120	M 93				

Date 14-4-19 for H. M. J.  
 O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

**1. Civil Re-Establishment.**

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

Alfred Spearns

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 Ambleton

Date 14-4-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The herein named has been provided with Travelling Warrant No. 711 to his home at 125 and Release Certificate No. 2138 issued.

Date 14-4-19

J.A. Crawford  
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 28-4-19

Date 14-4-19

Albany Capt  
Depot Paymaster.

Discharge approved for 14-4-19

Forwarded with following documents to O.C Discharge Depot.

N.F. F36	B 268	B 121	N.F. Med.	D.F. 1
F 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 14-4-19

J.A. Crawford  
Demobilization Officer.

APPROVED.

Documents as above forwarded to:-

Officer in Charge Records,  
Board of Pension Commissioners.

with following additional documents.

**Eligible for War Service Gratuity**

Date APR 14 1919

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

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

Date 19/4/19

W.P. Brown Sm  
for a.p.m. of records

Reg. No. 4598 Rank Pvt. Name Spears A.  
Attested 22-4-18 Address 128 Colmar St. B.  
Allotment 60 Allotee Mrs Annie Spears (Mother)  
Date of Allotment 1-7-18 Returned from Overseas \_\_\_\_\_  
Embarked for Overseas \_\_\_\_\_ Cause \_\_\_\_\_

Report 15-5-18  
15-5-18 saw 1<sup>st</sup> June 6-7-18.

**APR 14 1919** PASSED TO DEMOBILISATION OFFICER

14.4.19. **DISCHARGE APPROVED ON DEMOBILISATION.**