



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3626 Name Red Spencer Corps York

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. Red Spencer
2. What is your full Address? 2. St. John's
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 19 Years 10 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? II. Yes

I, Red Spencer 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.

Red Spencer SIGNATURE OF RECRUIT.
Ed. Edward Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Red Spencer 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 19 day of April 1915

Signature of Attesting Officer W. 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.....191..... } Approving Officer.
Place.....

† 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).....

C.R. 3628

Extract of DAILY ORDERS, PART II, Depot St. John's,
dated March 1st/19.

The discharge of the undernoted on Demobilization
has been CONFIRMED by Officer i/o Records on noted
date.

#3626 Pte. F. Spencer.

19/2/19.

C.R. 3626

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt., St. John's, Jan. 28th, 1919.

3626 Pte. F. Spencer.

Admitted to N & M. Hospital 2501-19.

C.R. 3626

Extract from Daily Orders part II,
Deput St. John's dated Jan. 24th., 1849.

The discharges of the undernoted on
rehabilitation have been approved in
O. C. Discharge Dept. on 1-1-19.

#3626 Ote. F. Spencer.

CF 3626

Extract from Medical Board held on Thursday afternoon, Jan. 16th
1919.

~~XX~~

3626 Pte. F. Spencer.

Recommended discharge as permanently unfit.
Requires treatment.

C.R. 3626

Extract from Daily Orders part 11, depot St. John's dated Dec. 23/1919.

~~The undernoted discharge and rehabilitation have been approved by~~

The undernoted returned from overseas and reported at depot 21-12-18.

#3626 Pte. F. Spenser.

C.R.

3626

Extract from Nominal Roll discharged from 3rd L.G.D.
on 7-12-18 and sent to 2nd Bn., Winchester for immediate
repatriation, in accordance with arrangements made by
Major Timewell. Dec, 17, 1918.

3626 Pte. Spencer F .

C.R. 3626

Extract from Nominal Roll of repatriation draft No. 79
from the 2nd., Battalion of the Royal Newfoundland
Regiment per P.S. CORRIGAN, who had embarked at
Tilbury Docks 12/18/16.

#3626 Pte. B. Spencer.

C.R. 3626

Extract from Daily Orders part II, Depot Winchester dated
10-12-18 by Lieut. Col., B. J. BARTON, Officer Commanding 2nd Btm.

Royal Newfoundland ~~Regiment~~ Reg.

The u/m having reported back from the 1st. Batt. is taken on
the strength and posted to "H" Co., DEC-8-18

#3626 Cpl. F. Spencerr.

C.R. 3626

Oct. 31st, 18.

Mr. Mark Spencer,
Twillingate.

Dear Sir:-

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 No. 3626 Pte. Fred. Spencer, is now progressing favourably.

Yours faithfully,

Lieut. Col.

Chief Staff Officer.

C.R. 3626

Extract from Casualties received from Pay & Record
Office, London, Oct. 19th, 1918.

Admitted to 3rd London General Hospital.

3626 Pte F. Spencer.

G.S.W. L. Mand.

3626
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	Rcd	By	Sent	by	Check

Dated

Oct 21st, 1918

To

Mark Spencer, Tillingate

Regret to inform you that Record Office, London, officially reports No. 3626 Private Fred Spencer at 3rd London General Hospital Wandsworth suffering from G.S.W. left hand.

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

J.R. Bennett

Minister of Militia.

Gce. Dept of Militia FOR TYPEWRITER

C.R. 3626

Extract from Casualties. List No. H.A. 30343.

3626 Pte. F. Spencer.

Ld/Nfld. Bn. Adm. 10 Can. ~~Sty.~~ H. Calais 15 Oct. 18.

Wounded NYD Mild.

C.R. 3626

Extract No, War Office List. No. C. 1753 dated 4.11. 18

3636 Pte. F/ Spencer.

Wounded 10. 11. 18.

DC.

C 3626

Extract from Nominal Roll Draft No. 34 Embarked Southampton
1/12/17 from 2/1st Newfoundland Regiment to 1/1st Newfoundland
Regiment N. S. F.

3626 Pte. Spencer, F.

C.R. 3626

Extract from Memorial Roll, submitted Lt. John's for Overseas 19-⁵/~~7~~-17.

3626 PTE. F. SPENCER.

C.R.

3626

Extract from Daily Orders Part 11 Unit The Royal Wfld.
Regt., St. John's, April 19th, 1917.

3626 Pte. F. Spencer.

Attached to the Strength from April 19th, 1917.



DEPARTMENT OF MILITIA

ST. JOHN'S, NEWFOUNDLAND

January 25th., 1919.

From:- The Director of Medical Services.

To:- O. C. Depot.

3626, Pte. Spencer, F.

Please note that the marginally noted man entered the Naval & Military Convalescent Hospital January 25th., 1919.

Cluny Macpherson

2 Major, D. M. S.

AMB.

Copy to Board of Pension Commissioners



To be Noted

{ Part II Orders _____
Class Index _____
Statistical Sheet _____

COPY

January 25th, 1919

From D. M. S.
To O.C., Depot

3626 Pte. F. Spencer

Please note that the marginally noted man entered
the Naval & Military Convalescent Hospital on Jan. 25th.

(sgnd) Cluny MacPherson
Major, DMS.

NEWFOUNDLAND POSTAL TELEGRAPHS

No.

Received _____

_____ m. By _____

Sent out for delivery _____

_____ m. By _____

No. 50

Place from _____

No. of Words _____



To _____

Capt Butts

Coming on Return

Prospero

J. Fred Spencer

J. Spencer

C.R. 3626

1890



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

Fred Spencer

aged

19 years

conducted at

Hagerman

Date:

April 19th / 14

Recruiting Officer.

NO OF TEST

FINDING

- 1 *no*
- 2 *no*
- 3 *no*
- 4 *no*
- 5 *no*
- 6 *no*
- 7 *yes*
- 8 *yes*
- 9 *no - no*
- 10 *~*
- 11 *~*
- 12 *~*
- 13 *~*
- 14 *~*
- 15 *~*
- 16 *~*
- 17 *~*
- 18 *~*
- 19 *6/6 Both*
- 20 *~*
- 21 *~*
- 22 *~*
- 23 *~*
- 24 *~*
- 25 *~*
- 26 *~*
- 27 *~*
- 28 *~*
- 29 *~*
- 30 *~*
- 31 *~*
- 32 *~*
- 33 *no*
- 34 *5ft 2 1/2*
- 35 *120 lbs.*
- 36 *33-36 1/2*
- 37 *\$45.00 per month*
- 38 *7 alt Martin Jurlingate*
- 39 *none*

3626

[Signature]

Signature of Medical Examiner:

[Signature]

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. 3626 Rank Private Name Spencer F. Unit Royal Nfld. Regt who was repatriated
to Newfoundland on 12/12/18 Authority Draft 79 Cause _____

STATEMENT OF ACCOUNT

DR.	PARTICULARS	\$			£			PARTICULARS	\$			£			CR.
		¢			s	d					s	d			
PERIOD: From 8/12/18 To 11/12/18 CA 31-12-18.	Balance Dr. from 7/12/18				2	15	0	Balance Cr. from							
	Allotment 4 days @ 60	2	40			9	10	Pay 4 days @ \$ 1.00	4	00					
	Cash Payments:							Field Allce 4 days @ \$.10		40					
									4	40			18	1	
	Other Debits							Other Allces days @ \$							
								Other Credits:							
								<i>copy sent b m am</i>							
								<i>N.F.P. 59/3 3 49</i>							
	Total Debits				3	4	10	Total Credits					18	1	
	Balance due by Paymaster							Balance due to Paymaster				2	6	9	
				3	4	10					3	4	10		

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

(Place)

(Date)

191

O.C. " " Company.

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

Pay & Record Office, London,
191

Chief Paymaster & O. i/c Records.

No. 19663/379

From: NEW FOUNDLAND CONTINGENT

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

to: Officer Commanding,
3rd London Gen. Hospital,
Wandsworth

2nd December 1918

5th Dec 1918

Subject: 3626, Pte. F. Spencer

With reference to the following telegram (10329) from the Hon. Minister of Militia, received

Pay to 3626 Spencer £9:0:0

Kindly advise whether this amount should be remitted to you for payment to this Soldier, retained to credit of his account, or otherwise dealt with.

A. C. Maxwell Maj.
Chief Paymaster & O. i/c Records.

Kindly place this remittance to the credit of Pte Spencer's a/c please

*H. Logan
Maj. Commanding
3rd LCH*

Spencer
LONDON 1918
LONDON DISTRICT
DEC 1918
RECORDED OFFICE
N.F.P./80.
58, VICTORIA STREET, LONDON, S.W. 1

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. 7. 1. 10*
2. Regtl. No. *1446* 3. Rank. *Pte*
4. Name *SPEMBA*
(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 ? (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."
Go to 11. Left hand fracture of second metacarpal
11. Date of origin of disability. *14-10-13*
12. Place of origin of disability. *Ypres*
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.
struck by a bullet entering palm of left hand passing through hand fracturing second metacarpal. admitted 3rd Inniskilling General Hospital 16-10-13. admitted 5th L.I. H. 17-10-13.

Discharged from 3 L.I. H. for repatriation.

14. State whether the disabilities are
- | | | |
|--|---------------------|-------------------|
| | (a) attributable to | (b) aggravated by |
| (i.) Service during the present war | Yes | Yes |
| (ii.) Previous active service | Yes | |
| (iii.) Climate in pre-war service | Yes | |
| (iv.) Ordinary military service before the war | Yes | |
| (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.)

*Wound completely healed
 Residual. Scar on palmar surface
 giving no pain or pressure
 Scar on dorsal surface
 giving no pain or pressure attached
 to underlying tissues. Unable to close hands
 or flex the fingers. Flex or extend fingers*

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. / Cassin

ROYAL NEWFOUNDLAND REG.

Medical Officer in charge of case.

Station *WATERLEY DOWN 82 MP.*

Date *15 DEC 1918*

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

No. 122

pay

ANGLO-AMERICAN

WESTERN UNION



DIRECT UNITED STATES

CABLEGRAM

Prefix _____ Code _____		SENT		FOR STAMPS	
WORDS CHARGE		At _____			
12/11		To _____ By _____			
VIA ANGLO.				THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.	

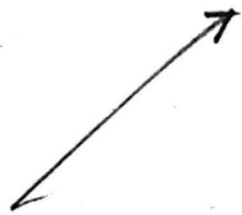
18/11/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

To MARK SPENCER
TWILLINGATE (Newfoundland)

PLEASE CABLE NINE POUNDS THROUGH MINISTER MILITIA

FRED SPENCER

charge of 26/26



12/

CHECKED.
[Signature]
25/11/18

CHARGED
PAY BOOK
Date 25/11/18

Authorised.

NOT TO BE TELEGRAPHED.

Having read the conditions printed on the back hereof, I request that the above telegram be forwarded by the Western Union Telegraph-Cable System, subject to the said conditions to which I agree.

Signature _____ Address **58 Victoria St. S.W. 1.**

CABLE ADDRESSES REGISTERED IN ANY PART OF THE WORLD, OR WITH ANY COMPANY, ARE AVAILABLE OVER THE LINES OF THE WESTERN UNION TELEGRAPH-CABLE SYSTEM.

MR 6/12/18

O.K. f 2-0-0 To Paymaster

Receipt No 10170 Royal R F & D Regt

Approved
Submission Coll Reme

Sir

Will you kindly allow me
to draw \$2 from any credit
which may be due
to me

Yours Sincerely

R F Spencer

3626

GENERAL HOSPITAL
616 WEST 117th ST
NEW YORK
EVANS SWORTHY



P.L.O.

To The Paymaster
May at 11th St



Please pay bearer the sum of
Two pounds (£2-0-0) and charge
the same to his account

A. P. Howell
C. A. M. P. Cash.
P. M. M.

3626 The 7. Spencers

O.K. £2-0-0 MR 29/11/18

Receipt No 1005598.5

2nd London General
Warehouseth

Dear Sir:—

Will you kindly
allow me one pound from
my credit. —

yours Sincerely

(3626) Pte J. Spencer

Royal Newfold Regt

Handwritten initials

Receipt 9547
Handwritten notes

Approved
Handwritten signature
P.L.N.

3rd LONDON GENERAL HOSPITAL
711 GERRARD ST. E. TORONTO
NOV 17 1918
No. 8161
EMERSON

6 R. # 1-0-0
W. R. 11/11/18

3rd London General
at Sandsworth

Receipt No 9671
Dear Sir

Will you kindly
send me a check
on my credit

Yours Sincerely
Pte H Spencer
Royal Newfld
Regt

V.P.P.

2626
The Hospital

3rd London General
Wandsworth

OK
C/P 1-0-0
16/4/8

Dear Sir

Will you kindly
allow me one pound
from my credit

yours sincerely
36 St John St Spencer

Royal Newfield Regt

Approved
Lt Col J. C. Stone

HC 9806

10/11

3rd London General
Wandsworth

Dear Sir: -

Will you kindly
allow me one pound from
my credit:

Yours sincerely
~~W. J. Spencer~~

(8626) Pte J. Spencer

Royal Wexford

Regt -



W. J. Spencer
Wandsworth

P.R. F. 1-0-0. W.R. 4/1/18
Pace B. No. 9494

P.P. 10.2

22 NOV 1918

London General
West Wandsworth

Sir
Will you kindly allow
me to draw £100 on my
Credit
Yours sincerely
P.L.A.

~~AC~~
F 3626
Piz Spencer Esq
Royal n Esq Esq Regt
Approved
Estimma Capt

[Vertical handwritten note]
Received
Nov 27/18

Ch. H. #1-0-0-11-R 7/11/18
Receipt No 95170

Approved
W. H. H. H.
New York

8-11-1
NEW YORK

AE

3626

NOV 1918

pls.

Recd

O.K. £ 1-0-0 - M.R. 18/11/18 3rd London General

Receipt No 9828.

3RD LONDON General	
Wandsworth	
No.	18 NOV 1918
WANDSWORTH, S.W. 18.	

Dear Sir

Will you ~~kindly~~ allow
me one pound from my
credit -

Yours Sincerely AC

(8626) Pte H Spencer

Royal Newfield Regt

19/11/18

P.S.A

applied
Kathryn Carr

3rd London General
Wandsworth

14-11-15

Dear Sir:—

Will you kindly
allow me one pound
from my credit

Yours Sincerely
(3626) Pte J. Spencer

Royal Newfld Regt

Approved

Laurence C. M. C. M.

P. S. D.

REGISTRY
14 NOV 1915

7566
14/11/15
10-0-12/15
10-0-12/15

Jan. 21st, 1919

From Officer Commanding, ,
Discharge Depot

To Board of Pension Commissioners,
Militia Bldg.

3626
2803 Pte. F. Spencer

Above noted man was before the Standing Medical Board on 16-1-19 and was recommended for discharge as permanently unfit and requires treatment.

His discharge on demobilization has been approved by the Officer Commanding, effective from 22-1-19 and I am sending him herewith for your attention and necessary action, please.

Copy of his Medical Board will be forwarded you in due course.

CCD/C

Spencer, A

3626

Ray sept.
J.

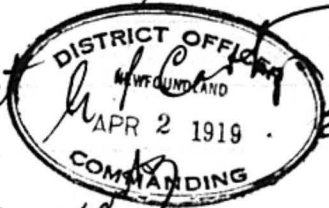
Trans
15023

NO. 15023
NO. 15023
NO. 15023
NO. 15023
NO. 15023

Pension Department

Department's Fulfillment
To Chesley Spencer

1919
March To Travelling expenses from
Leaves part of mailin card
for 3626 P. F. Spencer \$15.00



Certified Act
correct
C. E. O. R. S. S. S. S.

3626 P. F. Spencer

Correct \$15.00

31-3-19

C. E. O. R. S. S. S. S.

J. J. J.

Disability Officer
Discharge Depot-Newfoundland

PAYMASTER.

Please see attached letter from
Mogokali Robali as to sending these
31.3.19 C. E. O. R. S. S. S. S.



Magistrate's Office.

Wellington

March 10 1919

Dear Sir:—

I have been asked to collect
the amount of \$15.00 each for
traveling expenses of J. Rice of New York
& Fred Spencer of Wellington &
to pay same for them to Thomas Sims,
of Chesley, Spencer. Will you
therefore send me the cheques by
return mail.

Yours truly
Geo Roberts
Secy.

April 8th. 1919.

Mr. Chesley Spencer,

Twillingate.

Dear Sir,-

Newfoundland.

I enclose herewith cheque for \$15.00,
being the amount due you for travelling expenses from
Lewisporte to Twillingate.

Yours Faithfully,

Capt. & Paymaster.

Enc.1.

L/E



DEPARTMENT OF MILITIA

ADDRESS REPLY TO
DEPARTMENT OF MILITIA
AND QUOTE NO.

ST. JOHN'S, NEWFOUNDLAND.

Received from Militia Department "Discharge

Certificate No. 1107."

Date

28/12/19

Sgt J. Spencer

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 3626 Rank Pte Name Fred Spencer
 Intended place of residence St. John's
 2. Occupation Fisherman
 Classification of soldier B Medical Category 8

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

ELIGIBLE for POST DISCHARGE PAY

4. His accounts ^{not} correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.
 Place JAN 21 1919
 Date JAN 21 1919
W. H. Caph.
 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 trustee paying up being requested.*
 Place and date St. John's 22-1-19
F. Spencer Signature of soldier
W. H. Caph. Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

Treatment
 I hereby certify that I am in a position to resume civilian occupation immediately on discharge.
 Place and Date Jan 21 1919
ST. JOHN'S.
F. Spencer Signature of soldier
W. H. Caph. Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 19. 4. 17 No of days on Military
 Discharged from service 21-1-19 plus 14 days Service 657 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
 Date JAN 22 1919
W. H. Caph.
 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 February 19 1919
W. H. Caph.
 Officer i/c Records
 The Royal Newfoundland Regiment

12
31
30
31
31
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31
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31
31
19
20

Handwritten notes and signatures at the bottom of the page.

87 long Stue

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

MEDICAL HISTORY

Surname Spencer OF Christian Name Frederick

Table I.—GENERAL TABLE.

Birthplace:—Parish Twillingate County 6



	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>19th</u> day of <u>April</u> 191 <u>7</u>		on _____ day of _____ 191	
	at <u>Headquarters.</u>		at _____	
Declared Age	<u>19</u> years _____ days		years _____ days	
Trade or Occupation	<u>Fisherman</u>		_____	
Height	<u>5</u> feet <u>2 1/2</u> inches		feet _____ inches	
Weight	<u>120</u> lbs.		lbs. _____	
Chest Measurement	Grith when fully expanded ... <u>36 1/2</u> inches		inches _____	
	Range of Expansion .. <u>5 1/2</u> inches		inches _____	
Physical Development	_____		_____	
Vaccination Marks	Arm	_____	_____	_____
	Number	_____	_____	_____
When Vaccinated	_____		_____	
Vision	R.E.—V=	<u>4/6</u>	R.E.—V=	_____
	L.E.—V=	<u>4/6</u>	L.E.—V=	_____
(a) Marks indicating congenital peculiarities or previous disease	(a) _____		(a) _____	
(b) Slight defects but not sufficient to cause rejection	(b) _____		(b) _____	
Approved by (Signature)	<u>W.S. Provenier</u>		_____	
(Rank)	<u>Lieut.</u>		_____	
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St Johns</u>		at _____	
	on <u>19th</u> day of <u>April</u> 191 <u>7</u>		on _____ day of _____ 191	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
	<u>4/1st Regt 3626.</u>		_____	
Transferred to	<u>ROYAL NEWFOUNDLAND REGIMENT</u>		_____	
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				
8 RD LONDON GENERAL HOSPITAL WANDSWORTH	17	10	18	7	12	18	8 SW (bullet) Hand L. Tracline of 2 nd Metacarpal bone	57	Wounded in France 14. 10. 18. This the same palmar surface of hand with fracture of 2 nd Metacarpal bone - Septic condition - Salicylic, progress	<i>W. M. M. M. M.</i> Capt. M. M. M.

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 treatment in Hospital.

f. Spencer

Signature of Man.

Reg. No.

3626.

[Signature]
Signature of the Vocational Officer or his Representative.

Place

St John

Date

Jan 18th

1919

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 }
 2. Regtl. No. *3626* } or Occupation }
 3. Rank *Pte* }
 7a. If the soldier claims previous service in Army, he should state—
 4. Name *SPENSER* } (a) Former Regts. or Corps; }
 (Surname) } with Regtl. Nos. }
 (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? (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. *14-10-18* } *Hand fracture 2nd metacarpal*
 12. Place of origin of disability. *Ypres*
 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. *Struck by a bullet entering palmar surface of left hand, passing through hand, fracturing 2nd metacarpal 53rd Band adian 16-10-18. 1320 L. G. H. 7-10-18. Discharged from 305# 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 | <i>no</i> | |
| (iii.) Climate in pre-war service | <i>no</i> | |
| (iv.) Ordinary military service before the war | <i>no</i> | |
| (v.) Serious negligence or misconduct on the man's part. } | <i>no</i> | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? } *n.a*

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?
Wound completely healed, small scar on palmar surface, giving no pain on pressure. Scar on dorsal surface, gives no pain on pressure, attached to underlying tissues. Unable to close hand, ~~flex~~ fingers extend
- (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 invalided at Foreign Stations.

Repatriation
 ROYAL NEWFOUNDLAND REG.
 Medical Officer in charge of case.

Station *HAZELLY DOWN CAMP.*

Date *15 DEC 1918*

* 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.—(i) 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. *G.S.M. left hand*
- (b) The present condition thereof. *Loss of sensation over index & outer half of 2nd finger. Cannot move 1st finger & only slight extent other fingers*

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?

40% last month
(60% 3 months)

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?

Yes

Opinion of Military Member in case of disagreement.

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)?

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?

Yes

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

requires treatment

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

S. Johns

President or Chairman.

Date

16.11.19

Members.

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

Station

DIIRECTOR OF MEDICAL SERVICE
JAN. 16. 1919

Only applicable in cases of Patients in Hospitals.

Date

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

O.C. Discharge Centre.

Date

Admitted

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 3626 Rank Platoon Name Spencer Fred
 Date of Enlistment 19 11 17 Address Pullington District Pullington
 Occupation Fireman Classification for Discharge B Medical Category E
 Recommendation Permanent unfit Disability Rating 60% 3 mths
 Passed to Demobilization Officer with following documents:—

N.F. P136	B 268	B 121	N.F. Med	D.F. 1	
B 178	W 3494	B 122	Board 1st	" 2	
B 178a <u>/</u>	D 400A <u>/</u>	B 1915	do 2nd	" 3	<u>u</u>
B 179 <u>/</u>	D 400B	Form L	do 3rd	" 4	
B 179a <u>/</u>	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B 179c	B 120	M 93			

Date 21.1.19

W. A. C. Discharge Depot.
for

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

Spencer

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 A. Snowling

Date 21-1-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The herein named has been provided with Travelling Warrant No. Ind to his home
 at London and Release Certificate No. 908 issued.
 Date 21-1-19 CS Dubois
 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 5-2-19
 Date 21-1-19 W. H. W. Capt
increase pay up to be adjusted - Depot Paymaster.

Discharge approved for 22.1.19

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1	1	3-1-19
F 178	W 3494	B 122	Board 1st	" 2	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 CS Dubois Capt
 Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
 Board of Pension Commissioners.

with following additional documents.

ELIGIBLE for POST DISCHARGE PAY

Date JAN 22 1919 R. H. J. Capt
 O. C. Discharge Depot.

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

Date

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. 3628 Rank Private Name Spencer E. Unit Royal Hfld. Regt. who was repatriated
to Newfoundland on 12/12/18 Authority Draft 79 Cause _____

DR. STATEMENT OF ACCOUNT

PERIOD: FROM 8/12/18 TO 11/12/18	PARTICULARS			£ s d			PARTICULARS			CR.			
	£	s	d	£	s	d	£	s	d	£	s	d	
				2	15	0	Balance Cr. from						
							Pay 4 days @ \$ 1.00	4	00				
				2	40		Field Allow 4 days @ \$.10		40				
								4	40		18	1	
							Other Allowes days @ \$						
							Other Credits:						
							Total Credits				18	1	
							Balance due to Paymaster				2	6	9
							Total Debits				5	4	10
							Balance due by Paymaster						
				3	4	10							
				3	4	10							

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. _____
and is therefore subject to amendment if and as may be found necessary. London to 31/12/18

Pay & Record Office, London,
31/12/ 1918

Chief Paymaster & O. i/c Records.

CHECKED
EAH
31-12-18

LAST PAY CERTIFICATE ORIGINAL

N.F.P./94.

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

Regtl No. 3626 Rank Private Name Spencer F. Unit Royal Nfld. Regt who was repatriated
to Newfoundland on 12/12/18 Authority Draft 79 Cause _____

DR.

STATEMENT OF ACCOUNT

	PARTICULARS			£ s d			PARTICULARS			CR.		
	£	s	d	£	s	d	£	s	d			
PERIOD: FROM 8/12/18 TO 11/12/18	Balance Dr. from 7/12/18			2	15	0	Balance Cr. from					
	Allotment 4 days @ 60	2	40		9	10	Pay 4 days @ \$ 1.00	4	00			
	Cash Payments:						Field Allce 4 days @ \$.10		40			
								4	40		18	1
	Other Debits						Other Allces days @ \$					
							Other Credits:					
	Total Debits				3	4	10	Total Credits			18	1
	Balance due by Paymaster						Balance due to Paymaster			2	6	9
					3	4	10			3	4	10

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

(Place)

(Date)

191

O.C. " " Company.

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

Pay & Record Office, London,
31/12/ 1918

Chief Paymaster & O. i/c Records.

DEPARTMENT OF MILITIA

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claim 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 dashed. If any question are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORDS OFFICE, ST. JOHN'S.

Christian names... *Frederick* ... Surname... *Spencer*

Rank... *Private* ... 4 Regt. No. *3626*

Address in full to which future payments of gratuity are to be forwarded... *Twillingate N. B. Bay*

Date of enlistment in the Regiment... *April 1st 1917*

Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge... *Not applicable*

Relationship of such dependents... *Not applicable*

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

Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?... *No*

Were you on active service only in Nfld. if so, give dates, and particulars of such service... *Not applicable*

Give total length of time which you served on active service, whether in Nfld. or Overseas... *one year & eleven months*

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.....

Recd one months pay, in advance

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?.....

19. Are you now serving in the Regt.?..... *No* If not give:- (a) Date of discharge..... *Feb 5th 1919* (b) Reason for discharge.....

Unfit on account of wounds received in action

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service..... *Yes*

France - Oct. 1917 to Oct. 1918
Passendale, Arrmentiers, Ypres

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..... *Yes - to Feb 28th 1919*

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: *Fred Spencer*

Place of Residence:

Declared before me at: *St Johns*
This *25th* day of *July* 1919.

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

R. H. Gault
Barrister at Law

POST DISCHARGE PAY.					Net amount due
Date paid	Paid Soldier	Paid Dependent	War Service Gratuity		
<i>26.1.19</i>	<i>33.00</i>		<i>4.40</i>		<i>280.00</i>
			<i>less P.D.P.</i>		<i>33.00</i>
					<i>247.00</i>
Certified Correct.					Paymaster.

P.M.

3626 Spencer

Pay.
thence
father.

Please make first payment P. D.
Proceeding to Twillingate tomorrow
to Boston.
Wishes other payments sent to

W. F. R.

22/1/19

DEPARTMENT OF MILITIA.
REGIMENTAL PAY BRANCH.

PAY VOUCHER.

\$ 33⁰⁰/_{xx}

July 22 1919

Received from the First Newfoundland Regiment
the sum of Thirty Three ¹⁰/_{xx} Dollars.
~~on account~~ of Pay. P.O.O

Spencer

Ch. No. 8687.	Initials. J.H.
Pay Ledger. 461.	Initials. awL
Gen. Ledger.....	Initials.....

Regtl. No.

Rank

Frederic Jones

No. 3626

Rank

Pl-

Name

Spencer T.

ST. JOHN'S, FEB 24 19

Royal Newfoundland Regiment.

Billeting Account,

To Mr. Peet
Longs Hill

Billeting Soldiers as undermentioned

from Feb 14th /19 to Feb 21st /19

3626 Mr. F. Spencer 7 20

AMOUNT	<u>15 00</u>		
CH. NO.	<u>1669</u>	INITIALS	<u>EW</u>
IND LEDGER		INT.	
PAY L.			

Certified correct for \$ 15 00

Joseph A. Spencer
4-7
Billeting Officer.
J. Spencer

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B 121.
39.

Regiment of 1st Newfoundland

Number of Sheet First
Signature of O. C. Company Thas R. Oye Capt.

Regimental Number and Name		Enlistment		Trade	Good Conduct Badges, Service pay or proficiency pay
No.	<u>Spencer Fred.</u>	Age on	<u>19</u> years — months	<u>Fisherman</u>	
Joined	Date	Place and Date of Enlistment	<u>St Johns.</u> <u>19.4.17</u>	Religion	
Joined	Date	Period of	<u>2307</u> years. <u>365</u> years.	Place of Birth	
Joined	Date				

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>Barry</u>	<u>21.9.17</u>	<u>Pte.</u>		<u>Leaving the ranks without permission</u>	<u>Sgt. Farrell</u>	<u>3 days C.B.</u>	<u>22⁹/17</u>	<u>Capt. G. Robertson</u>	<u>b.s.f.</u>
<u>Nyr.</u>	<u>20.10.17.</u>	"		<u>Inattention on Parade</u>	<u>Sgt. Kean</u>	<u>3 days C.B.</u>	<u>22⁹⁰/17</u>	<u>Capt. G. Robertson</u>	<u>b.s.f.</u>
<u>Newton Park School Agr</u>	<u>3/11/17.</u>	"		<u>(a) Being in improper possession of blank ammunition</u>	<u>Sgt Stein</u>	<u>48 hrs Detention</u>	<u>5/11/17</u>	<u>Major W March M.C.</u>	<u>Sgt.</u>
				<u>(b) Occasioning a false alarm in billet by discharging firearms</u>	-				
<u>Demobilized St. Johns, 19²/19</u>									
To be carried over									

Army Form B. 121.

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

1921

1921.

The accompanying **Victory Medal** and/or **British War Medal**

is/are forwarded herewith to

Frederick Spencer

in respect of his service as No. **3626** Rank **Pte.**

Name **F. Spencer** **Royal Nfld. Regt.**
~~Nfld. Fusiliers~~

Receipt of the same should be acknowledged hereon.

Received Victory and British War Medals

Signature Fred. Spencer

Date Oct 7th

Address F. Spencers, Twillingate

[P.T.O.]

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

The Royal Nfld Regt.,

Dept of Militia,

St. John's Nfld.

Fold Here

July 7th. 1921. 1917.

The accompanying King's Certificate, on his discharge,

(No. 1234), is forwarded herewith to

Fred Spencer,

in respect of his service as No. 3626 Rank Pvte.

Name Fred Spencer, Corps Royal Nfld Regt.

Receipt of the same should be acknowledged hereon.

Received

July 16/21.

Signature

Fred Spencer

MS

Date

July 23/21.

Address

Swillingate, Nfld.



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 *Frederick Spencer*

Regiment from which discharged *Royal Newfoundland*

Regimental number *3626*

Intended address *Willingate*

Height on discharge *5 Feet 3.*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Blue.*

Descriptive Marks *Wound back left hand*

Figure on discharge *Normal*

Christian name of Father *Wark*

Christian name of Mother *Elizabeth*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth *Willingate 9-12-1899*

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)

Station *St John's* *Fred Spencer* *Plt.*
 Date *14-1-9* (Rank)

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.

Medical Officer i/c Hospital,
Unit, or Command Depot.

Station

Date

136216

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 3626 Rank Platoon Name Spencer, Fred
 Date of Enlistment 19.11.17 Address Dublingate District Dublingate
 Occupation Fisherman Classification for Discharge E Medical Category E
 Recommendation S.M.B. permanent unfit Disability Rating 100% 3 mths

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 21.1.19 Whaley Capt
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am not in a position to resume civilian occupation.

J. Spencer
 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. Snowling

Date 21-1-19 Q i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. me to his home
 at Dundee and Release Certificate No. 908 issued.
 Date 21-1-19 C. Dicks
 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 5-2-19
 Date 21-1-19 W. H. Capl
overseas pay etc to be deducted - Depot Paymaster.

Discharge approved for 22.1.19

Forwarded with following documents to O.C Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1	1	3000 ✓
E 178	W 3494	B 122	Board 1st	" 2	2	
R 178a	D 400A	B 1915	do 2nd	" 3	2	
B 179	D 400B	Form L	do 3rd	" 4		
B 179a	D 400C	Form K	do 4th	" 5		
B 179b	B 103	ME 2		" 6		
B 179c	B 120	M 93				

Date 22.1.19 C. Dicks Capt.
 Demobilization Officer.

APPROVED.

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

with following additional documents.

ELIGIBLE for POST DISCHARGE PAY

Date JAN 22 1919 R. H. Salt Capt.
 O. C. Discharge Depot.

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

Date January 19 [Signature]

Reg. No. *3626* Rank *Private* Name *Spencer G*
Attested Address *Wellington*
Allotment No. Allottee
Date of Allotment Returned from Overseas *21.12.18*
Embarked for Overseas Cause *Discharged*

*16-1-19. Recommended Discharge Permanently
temp. Requires Treatment*

21-1-19 PASSED TO DEMOBILIZATION OFFICER

27-1-19 DISCHARGE APPROVED ON DEMOBILIZATION.

CCO/JD.1201

18 May 1946

Re: #3626 - Fred SPENCER.

TO WHOM IT MAY CONCERN:

This is to certify that the above-named enlisted in the Royal Newfoundland Regiment on 19th. April, 1917 and was discharged under demobilization on 19th. February, 1919, having served 2 years, 307 days.

War Veterans Allowance

Name: *Frederick Spencer*

No: *3626*

1. THEATRES OF SERVICE

(1) South African War

Date and port of disembarkation:

(2) World War I *Newfoundland. U.K. Force.*

IF CANADA } Date(s) disembarked in U.K.
AND } Date(s) S.O.S. in U.K. for Canada
U.K., ONLY } Period(s) of desertion in U.K.

(3) World War II

Date of embarkation:

(4) Korean War

Date of embarkation:

2. Date and place of all enlistments:

19 April 1917. St. John's. Nfld.

3. Date of all discharges and reason:

19 February 1919 Demob.

4. Date and place of birth as per attestation paper:

9 December 1899. Twillingate. Nfld.

5. Marital status: If married, name in full of wife:

Single

6. Any other military service:

Nil

7. Decorations, if any.

Nil

*Montreal
29/10/58*

Clerk's Initials:



CANADA

DEPARTMENT OF VETERANS AFFAIRS

RECORD OF SERVICE
IN THE

DEPARTMENT OF
VETERANS' AFFAIRS
MAY 12 1955
WAR SERVICE RECORDS
OTTAWA - CANADA

IN YOUR REPLY REFER TO FILE NO.

DVA. 95-7-1. Vol. 1

WSR 5

~~XXXXXXXXXX~~
~~XXXXXXXXXXXXXXXXXXXX~~
~~XXXXXXXXXXXXXXXXXXXX~~

ROYAL NEWFOUNDLAND REGIMENT

- Name: Fred SPENCER
- Service Number: 3626
- Date of Birth: 19 Years of age on enlistment.
 - Date & Place of Appointment, Enlistment or Enrolment: 19th April, 1917 St. John's, Nfld.
 - Unit on Appointment, Enlistment or Enrolment: 1st Newfoundland Regiment.
 - Theatres of Service: NEWFOUNDLAND - ENGLAND - FRANCE
 - Date & Place of Retirement or Discharge: 19th February, 1919 St. John's, Nfld.
 - Type of Termination of Service: "Demobilization"
 - Rank or Rating on Retirement or Discharge: Private

AWARDS:

BRITISH WAR & VICTORY MEDALS

MARKS OR SCARS

G.S.W. (E.A.) left hand.

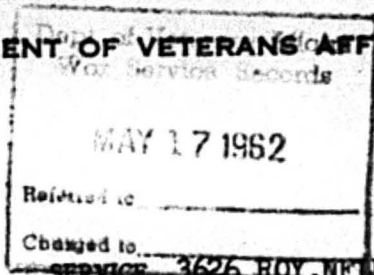
NOTE: This record is not valid without the imprint of the official stamp of the Department.

Ottawa & Ont., Canada.

May 12th, 19 55.

H.M. Jackson
for H.M. Jackson,
DIRECTOR,
WAR SERVICE RECORDS.

DEPARTMENT OF VETERANS AFFAIRS



Ottawa Ont

Date May 16/62

To **Copy for H.O. FILE**

Attention of

NAME **SPENCER, Frederick.**

Referred to _____
 Changed to _____
 SERVICE **3626 HOY. MEM** D.C.P.C. No. **260558**
 NUMBER **REGT. WW1** W.V.A. No. **220246**

NAVY
 ARMY
 R.C.A.F.

The DEPARTMENT has received information from

S.T.M.O. TEL MEMO. Montreal, P.Q. May 15/62

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death May 14/62
 Cause of Death _____
 Place of Death Queen Mary Veterans Hospital.

Name and Address of next of kin (if known) _____

Copies to: W.S.R.
 V. I.
 RAY
 B.G.
 H.O.

} Destroy form if advice of death already received.

noted WSR!

for *m j wyll*
 Chief, Central Registry