

3509

ROY ALNEWFOUNDLAND REGT.

Decased 21-10-57

1914-1918



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3509 Name G. Squire Corps Cofe

Questions to be put to the Recruit before Enlistment

- | | |
|--|------------------------------------|
| 1. What is your name? | 1. <u>George Squire</u> |
| 2. What is your full Address? | 2. <u>Kallag B.B.</u> |
| 3. Are you a British Subject? | 3. <u>yes</u> |
| 4. What is your age? | 4. <u>19</u> Years <u>6</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Fisherman</u> |
| 6. Are you Married? | 6. <u>no</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>no</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... | 10. { Name |
| | { Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | 11. <u>yes</u> |

I, George Squire, 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.

George Squire SIGNATURE OF RECRUIT.
Alex. Parsons Signature of Witness.

George Squire OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, George Squire, 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 explained as replied to, and the said recruit has made and signed the declaration and taken the oath before me and signed on this 31st day of March 1917.

T. Ches. R. Aye 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.....1917

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

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

Name George Squire
 Apparent age 19 years 6 months. Height 5 feet 10 inches
 Chest Measurement { Girth when fully expanded 37 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs. Robert Squire
Salvage B. B. | Relationship Mother.
 Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G.C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from _____									
Joined at _____ on _____									
Total Service forfeited as above.....									
Total Service towards Engagement to _____ (date of discharge) _____ years _____ days									
Pensions " _____ [" "] _____ " _____ "									

3509



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3509 Name G Squire Corps CofE

Questions to be put to the Recruit before Enlistment.

1. What is your name? 1. George Squire
2. What is your full Address? 2. Ballinacorney B.B.
3. Are you a British Subject? 3. Yes
4. What is your age? 4. 49 Years 6 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 } 11. yes
to be signed by you if you are accepted?

I, George Squire 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.

George Squire SIGNATURE OF RECRUIT.
Alex. E. Parson Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, George Squire 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 replies to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 31 day of March 1915.

Signature of Attesting Officer Chas. R. Ayles Bpt

†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).....

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Name George Squire
 Apparent age 19 years 6 months Height 5 feet 10 inches
 Chest Measurement { Girth when fully expanded 37 inches
 Range of expansion 3 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs. Robert Squire
Salvagi. 73. 73. | Relationship Mother.

Particulars as to Marriage

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

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

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>3-3-17</u>									
Joined at <u>St Albans</u> on <u>March 3rd 17</u>									
<u>Discharged April 11 1919</u>									
<u>Embarked at St Albans train to Halifax N.S. 4th</u>									
<u>Embarked for St. John's N.S. 6th</u>									
<u>Joined 25-1-19 transferred from St. John's to Vancouver 18-1-19</u>									
<u>to be transferred for disembarkation 20-1-19. Arrives N.S. 7 1919</u>									
<u>Demobilized at St. John's 11-4-1919</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 11-4-19 (date of discharge) 2 years 40 days
 " " " Pensions " " " " " " " " " " " "

C.R. 3509

Extract from Daily Orders part II, Depot St. John's dated
April 15th., 1919.

The discharge of the undernoted on demobilisation has been
CONFIRMED by Officer i/c Records on 11-4-19.

11-4-19

#3509 Pte. Geo. Squires.

C.R. 3509

Extract from Daily Orders Part II Unit The Royal Wfld.
Regt. St. John's, Mar. 29th, 1919.

The discharge of the undarnoted on demobilization have
been approved by G.C. ~~XXXXXXXXXX~~ Discharge Depot 29/3/19.

3509 Pte. Geo. Squires.

28-3-19.

C.R. 3509

Extract from General Roll of the Royal Field Artillery
St. John's, 11-8-19.

The undersigned returned from Overseas and reported to
Despatch 7-8-19.

Repatriated on a/c of Demobilization.

3509 Pte. Geo. Squires.

C.R. 3509²

Extract from Nominal Roll of the Royal Nfld. Regt
Embarked S.S. Jernisean, Jan. 30, 1919.

3509 Squires.

C.R. 3509

Extract from Nominal Roll of the Royal Nfld. Regt.
24-1-19.

The undermentioned who was transferred
from B.E.F. to the 2nd Bn., Winchester, 19-1-19
awaiting to be repatriated.

3509 Pte. G. Squires.

C.R. 35-09

Extract from Nominal Roll of Draft No. 25 Embarked Southampton 11/6/17
from 2/1st Newfoundland Regiment Newton-on-Ayr, to 1/1st Newfoundland
Regiment B.E.F.

3509 Pte. Squire, G.

M.P.

C.R. 3509

Extract from Nominal Roll, embarked St. John's ~~7~~4/ 17
for Overseas

#3509 Pte. G. squires.

3504

C.R.

Extract from Daily Orders Part 11 Unit The Royal Nfld.
Regt., St. John's, Mar. 3rd, 1917.

3509 Pte. Geo. Squires.

Attached to the strength from 3-3-17.

J. Squires

C.R. 3509

1880

Part

WESTERN UNION

ANGLO-AMERICAN  DIRECT UNITED STATES
CABLEGRAM

Prefix	Code	At	FOR STAMPS
WORDS	CHARGE	To	By
<i>Had</i>	<i>2 1/2</i>	VIA WESTERN UNION	

26/9/18 TO PREVENT MISTAKES PLEASE WRITE DISTINCTLY.

THIS FORM WILL BE ACCEPTED AT ALL POST OFFICE TELEGRAPH STATIONS.

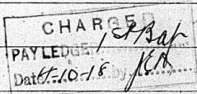
To EFM MRS ROBERT SQUIRES
SALVAGE (Newfoundland)

CABLE TEN POUNDS THROUGH MINISTER MILITIA ON FURLOUGH
WELL

3509 SQUIRES

Charge 9/- →

3/4



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.

FORM K

No. *H/* 3385



3

1st. NEWFOUNDLAND REGIMENT

George Squire
ALLOTMENTS

3509

 Sixty , Regl. No. _____

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

Allotment begins _____

Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each per d)
<i>3521</i>		<i>Mrs Robert Salvage (Elizabeth) Squire</i>	<i>R.B.</i>	<i>60</i>
Total Allotment, \$				<i>60</i>

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.

Mark Dwyer
(Sig.) _____

St John's Officer Commanding
6-3-17 Company

George Squire
(Sig.) *pte*

(Rank) _____

N^o 3385H/ 1ST. NEWFOUNDLAND REGIMENT 3

ALLOTMENTS

I, George Squire, Regl. No. 3509

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}/_{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons concerned, viz.:

Allotment begins April 1st

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3524	Mother	Mrs Robert (Elizabeth) Squire	Salvage R.S.	60
			Total Allotment, \$	60

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

(Sig.)

Officer Commanding

Company

(Sig.)

(Rank)

St John's

6-3-17

191

No. *3509* Name *Squires, George* ~~Serial~~ *C* ~~Battalion~~ } *C* Corps *2/1st Newfoundland* Date of enlistment *23-1-17* G.C. Badges } Service or Proficiency Pay }
 or Company }
 Date of last entry in Company Conduct Sheet } *Nil* No. and date of last drunk } *Nil* Period not reckoning towards freedom from extra fine } Sheet No. *1* Signature O.C. Company, etc. *Robertson Capt* Character *Good*

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
<i>Field</i>	<i>15/1/17</i>	<i>Pvt</i>		<i>Ref. of breach of duty ante Battle</i>	<i>Sept. Mills</i>	<i>Pay for same</i>	<i>23/12/17</i>	<i>A E Barron Major</i>	<i>Drink Shofc.</i>

ARMY FORM B. 122

No. 3209 Rank P6 Name G. Squires

Pay	F.A.	Wkg	Total	N.W.P. 73
1.00	10		1.10	
Less Allotment			.60	
Net Rate			.50	W.R.

DEBITS	Date	£ s d			CREDITS	Period		Days	Rate	£ s d				
						From	To			\$	p	s	d	
Balance					Balance						10	19	5	
Acquittance Rolls		16	17	4	Pay @ Net Rate	22-12-17	26-9-18	279	50	139	50	28	13	2
Hospital Advances					R. Allen 14 days				1/9			1	4	6
A.B. 64. 60 M.S.		2	4	0	B.E.R.	27-9-18	7-10-18	11	50-	5	50	1	2	7
P.&R.O. Payments						27 ⁹ / ₁₈	8 ¹⁰ / ₁₈	12	50	6	00	1	4	8
<i>19-1-4</i> Cheque 8875	<i>26¹⁰/₁₈</i>	<i>21</i>	<i>10</i>	<i>0</i>	21-15-10									
<i>4-11-4</i> P.R.O. 9036				1	1-13-1									
<i>W.R.</i> <i>26/9/18</i> Receipt No. 9059	<i>8¹⁰/₁₈</i>			1										

~~40-17-2~~
~~41-19-9~~
43-4-5

No. 3809 Rank Pte. Name Squires G.

Pay	70	10	110
Exp. Allowance			60
Net Pay			50

N. R. F. 32

DEBITS	Date	£	s	d.	CREDITS	Period		Days	Rate	Net Pay	Total	£	s	d.	
						From	To								
Balance					Balance										
Acquittance Rolls					Pay @ Net Rate	21 st 78	21 st 79	35	50	1750	311				
Hospital Advances	15-4														
A.E. 84.	2 pence				<u>Dr Bal.</u>										
Paid for	3-6-8				<u>£ - 17-8</u>										
Payments		5	0	0											
Staff wages (kit del. AA 1/4)															

£ 816 - 11

£ 9 - 19 - 7

MEMORANDUM CONTINUED

Receipt

Debit

NO. OF RECEIPTS

NO. OF DEBITS

DATE

DATE

NO. OF RECEIPTS

NO. OF DEBITS

RECORD OFFICE

RECEIPT FILE NO.

Squires Geo

3009

Pay Dept

April 11, 1919

#3509 Pte. George Squires,

Salvage, B. E.

Dear Sir:-

Please find enclosed "Discharge Certificate
No. 1772."

Yours truly

Captain,
Paymaster & V. i. c Records

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

MEDICAL HISTORY

OF

Surname Squire

Christian Name George



Table I.—GENERAL TABLE.

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>3rd</u> day of <u>March</u> 191 <u>7</u>	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>
	at <u>St. John's</u>	at _____	at _____	at _____
Declared Age	<u>19</u> years <u>6</u> <u>months</u>	_____ years _____ days	_____ years _____ days	_____ years _____ days
Trade or Occupation	_____	_____	_____	_____
Height	<u>5</u> feet <u>10</u> inches	_____ feet _____ inches	_____ feet _____ inches	_____ feet _____ inches
Weight	<u>145</u> lbs.	_____ lbs.	_____ lbs.	_____ lbs.
Chest Measurement	Grith when fully expanded ...	<u>37</u> inches	_____ inches	_____ inches
	Range of Expansion ..	<u>4</u> inches	_____ inches	_____ inches
Physical Development	_____	_____	_____	_____
Vaccination Marks	Arm	_____	_____	_____
	Number	_____	_____	_____
When Vaccinated	_____	_____	_____	_____
Vision	R.E.—V= <u>4/6</u> L.E.—V= <u>4/6</u>	R.E.—V= <u>4/6</u> L.E.—V= <u>4/6</u>	R.E.—V= <u>1917</u> L.E.—V= <u>1918</u>	R.E.—V= <u>1917</u> L.E.—V= <u>1918</u>
(a) Marks indicating congenital peculiarities or previous disease	(a) _____	(a) _____	(a) _____	(a) _____
(b) Slight defects but not sufficient to cause rejection	(b) _____	(b) _____	(b) _____	(b) _____
Approved by (Signature)	<u>J. W. Burden</u>		_____	
(Rank)	<u>Lieut</u>		_____	
	Medical Officer.		Medical Officer.	
Enlisted	at <u>St. John's</u>	at _____	at _____	at _____
	on <u>3rd</u> day of <u>March</u> 191 <u>7</u>	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>
Joined on Enlistment	<u>4/1</u>	_____	_____	_____
	<u>A. F. Y. D.</u>	<u>3509</u>	_____	_____
Transferred to	<u>Regt.</u>	_____	_____	_____
Became non-effective by	_____	_____	_____	_____
(Signature)	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>	on _____ day of _____ 191 <u>1</u>
(Rank)	_____	_____	_____	_____

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 3509 Rank P 14 Name Squires George
 Date of Enlistment 3.3.17 Address Salvage District Bonaville
 Occupation Fisherman Classification for Discharge Medical Category
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122	Board 1st	" 2	3
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 26.3.19

H. M. S. D.
 G. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

G. Squires

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable #65.00

(b) Clothing Supplied 2.00

Date 26-3-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. 29619346 to his home at Salvage and Release Certificate No. 1752 issued.

Date 26-3-19 W. D. D. Stoll
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 11-4-19

Date 26-3-19 J. H. [Signature]
Depot Paymaster.

Discharge approved for 28 3 19

Forwarded with following documents to O.C Discharge Depot.

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

Date 26-3-19 J. A. [Signature]
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 MAR 28 1919 R. H. [Signature]
O. C. Discharge Depot.

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

Date 21-8-19

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 (Fishing)

G. L. Jones

Signature of Man.

Reg. No.

3309

C. A. Dicks Capt.

Signature of the Vocational Officer or his Representative.

Place

St. Johns

Date

20/2/19

191



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 *George Squires*

Regiment from which discharged *Royal Newfoundland*

Regimental number *3509*

Intended address *Salvage B.B.*

Height on discharge *5* Feet *8*

Color of hair on discharge *Black*

Complexion *Fair*

Color of eyes *Brown*

Descriptive Marks

Figure on discharge *Medium*

Christian name of Father

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 *Salvage, 1903, Nov 24th*

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) *G Squires*

Pte
(Rank)

Station

ST. JOHN'S.

Date *24.3.19*

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

Class for Demobilization: *6/*

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date *24-3-19*

Regimental No. *2509*

Name *Squires George*

Address *Salvage Pt B*

Present Medical Category *A-1*

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

Members of Board

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

H. Palmer
Senior Medical Officer

W. Burden
M. O. Depot

April 15, 1919


#3509 Pte. George Squires,

Salvage, 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 & C. i/o Records

15709

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 26th. 1919.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes, 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 & RECORD OFFICE, ST. JOHN'S.

Christian name *George* 2. Surname *Squires*

3. Rank *Pte* 4. Regt. No. *3509*

5. Address in full to which future payments of gratuity are to be forwarded. *Salvage, Bonaveta Bay*

6. Date of enlistment in the Regiment. *March 3/17*

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

8. Relationship of such dependents. *Mother*

9. Address in full of such dependent. *Salvage, Bonaveta Bay*

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. *From Mar 3/17 to March 26/19 date of temporary discharge*

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

No

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

*Q Clothing allowance \$60 -
Food allowance 39
Total 99*

15. Have you been issued with a War Service Badge?.....

No

16. Have you, during the present war, served in the Imperial Forces?.....

No

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

No

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

No

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

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

No
March 26/19
Temporary Demobilization

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

France, Belgium & Germany - June 3/17 to
Sept 15/18
Ypres, Cambrai, Arras, etc.

21. (a) Are you receiving treatment from the Civil Re-Establishment Com.?.....

(b). If (a), are you in receipt of full pay and allowances from that Committee?.....

No

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

By Squires

Signature of Applicant:

Salvage Bonairata Bay

Place of Residence:

St. John's, Nfld

Declared before me at:

March 19, 1919

This

26th

day of

John M. McCarthy, J.P.

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

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	<i>5 mos.</i>	<i>350.00</i>
.....
.....

Certified Correct.

Paymaster.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 3509 Rank Pte Name Squires George
 Intended place of residence Salvoige
2. Occupation Trisherman
 Classification of soldier B Medical Category AI
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 MAR. 26. 1919 *J. H. Mas H.*
 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. 26. 3. 19
 Signature of soldier *G. Squires*
 Signature of witness *R. Brooks Capt.*

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place and Date ST. JOHN'S. 26-3-19
 Signature of soldier *G. Squires*
 Signature of witness *W. Jeaton R. Squires*

STATEMENT OF SERVICE

7. Enlisted for service 3-3-19 No of days on Military
 Discharged from service 28-3-19 Plus 14 days. Service 77 D.

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. *R. H. Sait Capt*
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment.
 Date MAR 28 1919

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.
 Place St. John's, Nfld. *M. Bowley Capt*
 Date April 11/1919
 Officer i/c Records
 The Royal Newfoundland Regiment

@ 213 2079 / 1972

SEPARATION ALLOWANCE.

Claimant Elizabeth Squires Mother
On account of Geo. Squires No. 3509 Rank. Regt.

Decision Approved

1/4/17 to 1/4/19

= 487.33

W. R. Ruddle Private Col.
M. Howley Major

Date May 6/1920

Instructions.....
.....
.....

Allotment of 60 ¢ per day payable to Mrs Robert Squires
his Mother from 1/4/17 to 1/4/19.

Discontinued on account of being discharged.

R. G. Gammey

Royal N.F.L.R. Regt

NOTICE

MOTHER

THIS STATUTORY DECLARATION is to be filled in correctly in every detail, and a complete reply must be given to each question.

Each statement is considered as being made on Oath, and the form is to be signed before a Barrister of The Supreme Court, Stipendiary Magistrate, Notary, Public or Justice of the Peace.

- Official Number
- (1) Name of Reservist *Soldier* *George Squires* 3509
(If more than one give all names)
- (2) Name of applicant, and age *Elizabeth Squires Age 58 years*
- (3) State whether you are the natural mother, stepmother or foster-mother. *Natural Mother*
- (4) Name of applicant's husband and his age. *Robert Squires Age 62 years*
- (5) If he is not supporting you state the reason. *Dead*
- (6) If you are a widow, state date of your husband's death. *died Jan. 19th/17*
- (7) Have you married again since death of the above mentioned husband? *No*
- (8) State names, ages of your other children, whether married or single or widowers.

Name	Age	Occupation	Married or single
<i>Job. Squires</i>	<i>11/1/08</i> <i>36 yrs.</i>	<i>Fisherman</i>	<i>Married</i>
<i>Fannie</i>	<i>26</i>		<i>Married</i>

- (9) Have any of the children mentioned in "8", volunteered for service during the great war 1914 - 1918? If so state names, and where possible give official numbers and the units in which they enlisted, with dates of enlistment. *No*

Name	Enlisted in	Official Number	Date
------	-------------	-----------------	------

(10) State amount earned by
 (a) Yourself
 (b) Your husband

Nil.

(11) State amount and source of any other income.

Nil

(12) State actual amount contributed by Reservist during the year prior to his enrollment (If more than one state amount for each separately).

*\$2.00
Two Hundred Dollars*

(13) Did this amount include the cost of his board, etc?

yes

(14) State his occupation before enrollment, and his wages per month and the name of his last employer.

*General Worker
\$4.40 (forty five).
A. H. D. Co.*

(15) State amount received as Allotment and Separation Allowance, on his account since his enrollment.

\$18 (eighteen) per month

(16) From what date have you received this amount?

*From May. 1917
To April 19. 19*

(17) State amount contributed by your other children per week.

Nil

(18) If not receiving support from other children, state cause

Family of his own to support

(19) Have you received Separation

Allowance on account of ~~any~~ any son who may have enlisted in the land forces

No.

(20) If so, state his name and the unit in which he served giving his official number.

I make this solemn declaration conscientiously believing it to be true and knowing it to be of the same force and effect as if made under oath.

Signature-----*Elizabeth Aguirre*

Address-----*Salvage B.B.*

Declared before me at *Salvage* this *16th* day of *Feb.* 19 *20*

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

E. H. Humphries
(*Priest C. of E.*)

No T.P. available at this season of year

We, the undersigned, have reviewed the replies given in the foregoing declaration, and to the best of our knowledge they are correct, and the applicant is mainly and totally dependent on the Reservist first mentioned.

Signature of Clergyman-----*E. H. Humphries.*

Signature of Member
of Patriotic Fund Committee-----

April 1, 1920

Mrs. Elizabeth Squires,
Salvage, B. B.

Dear Madam:-

Referring to your application for
separation allowance, I have been directed to
request that you kindly furnish me with Marriage
Certificate of your son JOE, or else a certified
extract from your Parish Register showing date
of his marriage.

Also kindly have your Doctor furnish
me with the following information, showing your
husband's condition prior to his death:

1. What was the nature of his disability?
2. From what date can it be considered to
have been existent?
3. By what per-cent was his earning power
reduced on account of it?

Yours truly

Major

Paymaster.

Salvage
Apr 21st 1920

This is to certify that
the late Robert Agnew
husband of Elizabeth
Agnew and of Bessie
Carroll on the
17th June 1917.

He was incapacitated
from earning his livelihood
for 18 months prior
to death. For first
9 months of illness
earning power was
reduced 60%. Last
9 months 100%.

J. Macdonald
SHEPHERD & CO

M^r J M Houley

April 12, 1920

Dear Sir with

Reference to your
letter of recent date
Please issue Marriage
Certificate of my
son Joe and also

Dr Mackdonalds hand
writing stating you
the nature of my
husband conditions

Prior to is death
Will you please send
Back this Marriage

Certificate again
to Me

Trusting to hear
from you soon

Elizabeth.

Agnes
Salvage 13 13

May 12, 1920

Mrs. Elizabeth Squires,
Salvage, B.B.

Dear Madam:-

Referring to your application for Separation Allowance, I enclose cheque for four hundred and eighty seven dollars and thirty three cents (\$487.33), being amount due to the date of your son's discharge.

I also return Marriage Certificate of your son Job.

Yours truly

Major

Raymaster.

MEMO. FROM REGISTRAR
Newfoundland
Military Service Act, 1918.

ST. JOHN'S, NEWFOUNDLAND,

July 17th 1919.

The Department of Militia

The sum of Fifteen dollars \$15.00 is due

to G. Squires Salvage. To transportation to his home.

Voucher attached.

ACCOUNT NO.	3575
INITIALS	EW
INITIALS	
INITIALS	
INITIALS	

*Corrected for
\$15.00*

J. S. [Signature]

A. M. [Signature]

W. P. R.

Director, Dept. Newfoundland

S 346

#1500

No. _____

TRAVELLING WARRANT

Date 9/23/19 The Royal Newfoundland Regiment

General

Please issue 1st Class Passage and Meals for

No. 3309 Rank Pte Name Squire Geo

From Alexander Bay - ST. JOHN'S - To Sabagum

The Royal Newfoundland Regiment
DEPOT ST. JOHN'S, N.F.

PLEASE QUOTE THIS WARRANT NUMBER
ON STATEMENT AND MEAL CHECKS

[Handwritten Signature]

SIGNATURE OF ISSUING OFFICER.

Demobilisation Office
Discharge Depot - Newfou

July 25, 1919

Pte. G. Squires,
Salvage,
Mfld.

J. C. R.

Dear Sir:

I enclose herewith cheque
for \$15.00, amount due you on account of trans-
portation to your home.

Yours truly,

Capt.
Paymaster

ST. JOHN'S, Mar 25th /19

Royal Newfoundland Regiment.

Billeting Account,

To 16 - 9 - Squires

Billeting Soldiers as undermentioned

from Feb 19th /19 to Mar 28th /19

3509 - 16 - 9 - Squires 39.30

ACCOUNT	<u>3509</u>
CH. NO.	<u>14516</u>
IND. LDD	
AMT. LDD	
CERTIFIED CORRECT FOR \$	<u>39.30</u>

Certified correct for \$

R.J

C. D. Dicks Capt

Billeting Officer.

G. Squires

ROYAL NEWFOUNDLAND REGIMENT

DR.

To Job Squires,
Alexander Bay Station

~~RECEIVED~~

To Conveyance of 3509 Pte Squires from
Salvage to Alexander Bay Station

\$6.00

Trans. Rec.

ACCOUNT	
CHI NO	12947
INITIALS	<i>EW</i>
ISSUED	
BY ORDER	
CHIEF CLERK	

As B/P attached



OK.

W. M. M. M. M.

Captain
Assistant Adjutant & Quartermaster
Discharge Depot Newfoundland

16-3-19

No. R 87

TRAVELING WARRANT

Date 10.2.19

The Royal Newfoundland Regiment

West Main

Please issue 1st Class Passage and Meals for

No. 3509 Rank Rt Lt Name Squires

To - ST. JOHN'S From Halifax

The Royal Newfoundland Regiment
DEPOT ST. JOHN'S, N.F.

PLEASE QUOTE THIS WARRANT NUMBER
ON STATEMENT AND MEAL CHECKS

\$600

W. Squires

SIGNATURE OF ISSUING OFFICER.

W. Squires

Drove Pte G Squires from
Alexandra Bay Station to
Salvage and I supplied him with
meat and my charge is
\$600

Job Squires

A. C. R.

March 18, 1919

Mr. Job Squires,
Alexander Bay Station
Nfld.

A.C.P.

Dear Sir:

I enclose herewith cheque for \$6.00
amount due you for conveyance of #3509, Pte. Squires from
Salvage to Alexander Bay Station.

Yours truly,

Capt.
Paymaster.

1931

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

Signature

Date

Address

SEP 2 1921.

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

is/are forwarded herewith to

George Squires

in respect of his service as No. 3509 Rank Pte.

Name G. Squires Royal Nfld. Regt.
~~Northamptonshire~~

Receipt of the same should be acknowledged hereon.

Received Oct 18 1921

Signature George Squires

Date 1921

Address George Squires Salvage

[P.T.O.]

Receipt for Army Book 64

No. *3509* Name *G. S. Squires*

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

Date *Aug 2th 1920*

Place *Salvage Bonavetia Bay*

Name *George Squires 3059*

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

Casualty Form—Active Service.

Regiment or Corps *21st Newfoundland Regt*
 Rank *Private* Surname *Squires* Christian Name *George*
 Religion *C of C* Age on Enlistment *19* years *6* months.
 Enlisted (a) *Johns* Terms of Service (a) *Duration* Service reckons from (a) *3/3/17*
 Date of promotion to present rank Date of appointment to lance rank
 Extended { } Re-engaged { } Qualification (b)
 Occupation *Fisherman* or Corps Trade and Rate *Robertson Capt* Signature of Officer.

Date	Report From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 215, Army Form A. 35, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 318, Army Form A. 26, or other official documents
			Embarked <i>Shampton</i>	<i>11.6.17</i>	
			Disembarked <i>Rouen</i>	<i>12.6.17</i>	
			Joined Battalion	<i>2 JUL 1917</i>	<i>B 213</i>
		<i>WITH Bn. 30-12-17.</i>			
		<i>leave to unit 25-9-18 to 9-10-18</i>			<i>Cont. 3/5.</i>
		<i>Transferred to U.K.</i>			
		<i>for repatriation</i>			<i>Capt. R. G. L.</i>
					<i>1st Lt. R. G. L.</i>
					<i>2nd Lt. R. G. L.</i>
					<i>3rd Lt. R. G. L.</i>
					<i>4th Lt. R. G. L.</i>
					<i>5th Lt. R. G. L.</i>
					<i>6th Lt. R. G. L.</i>
					<i>7th Lt. R. G. L.</i>
					<i>8th Lt. R. G. L.</i>
					<i>9th Lt. R. G. L.</i>
					<i>10th Lt. R. G. L.</i>
					<i>11th Lt. R. G. L.</i>
					<i>12th Lt. R. G. L.</i>
					<i>13th Lt. R. G. L.</i>
					<i>14th Lt. R. G. L.</i>
					<i>15th Lt. R. G. L.</i>
					<i>16th Lt. R. G. L.</i>
					<i>17th Lt. R. G. L.</i>
					<i>18th Lt. R. G. L.</i>
					<i>19th Lt. R. G. L.</i>
					<i>20th Lt. R. G. L.</i>
					<i>21st Lt. R. G. L.</i>
					<i>22nd Lt. R. G. L.</i>
					<i>23rd Lt. R. G. L.</i>
					<i>24th Lt. R. G. L.</i>
					<i>25th Lt. R. G. L.</i>
					<i>26th Lt. R. G. L.</i>
					<i>27th Lt. R. G. L.</i>
					<i>28th Lt. R. G. L.</i>
					<i>29th Lt. R. G. L.</i>
					<i>30th Lt. R. G. L.</i>

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shooing-Smith, &c.

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 *Mark Aye Capt.*

Regimental Number and Name	
No.	<i>3509 Squire, George</i>
Joined	Date
Joined	Date
Joined	Date
Joined	Date

Enlistment	Trade
Age on <i>19</i> years <i>6</i> months	<i>Fisherman</i>
Place and Date of Enlistment } <i>St. John's</i>	Religion
	<i>C of E.</i>
Period of { with Colours <i>40</i> years.	Place of Birth
{ with Reserve <i>365</i> years.	

Good Conduct Badges, Service pay or proficiency pay

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<i>Demobilized St. John's 11. ⁴/₁₉</i>					

To be carried over

Army Form B. 121.

The Royal Newfoundland Regiment

D 3509

DEMOBILIZATION OF

Reg. No. 3509 Rank P14 Name Squires George
 Date of Enlistment 3.8.17 Address Salway District Bonaville
 Occupation Fisherman Classification for Discharge Medical Category 1E
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P36.....	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.....	do 6th.....	" 6.....
B 179c.....	B 120.....	M 93.....		

Date 26.3.19
 O. C. Discharge Depot. H. Mess. H.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

G. Squires

Particulars passed to Vocational Officer for information and action.

Eligible for War Service Grant

Date.....

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable £6.00
- (b) Clothing Supplied None

Date 26-3-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *2761* to his home at *London* and Release Certificate No. *1752* issued.

Date *26-3-19* *W. P. Call*
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 *11-4-19*

Date *11-4-19* *H. H. H.*
Depot Paymaster.

Discharge approved for *28-3-19*

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.
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 *26-3-19* *J. A. Lawrence*
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer in Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date *MAR 28 1919* *R. H. J. J. J.*
O. C. Discharge Depot.

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

Date *Apr 11 1919* *W. P. Call*
For O.C. Records

EXTRACT FROM STATEMENT OF ACCOUNT TO 30-1-19 FROM PAY AND

RECORD OFFICE, LONDON

3509 Pte. Squire, G.

Dr. Bal. 25-9-9

plus 1 day's pay (31-1-19)

This transferred to Pay Office 9-4-19

Reg. No. *3109* Rank *St* Name *Squire, Geo.*
Attested Address *Salvage*
Allotment Allottee
Date of Allotment Returned from Overseas *7.2.19*
Returned on S.S. Cause *Discharge*

20.3.19
28.3.19

PASSED TO DEMOBILIZATION OFFICE

DISCHARGE APPROVED ON DEMOBILISATION.