



THE ROYAL NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 5543 Name Freeman Starks Corp. North

Questions to be put to the Recruit before Enlistment.

- | | |
|------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| 1. What is your name? | 1. <u>Freeman Starks</u> |
| 2. What is your full Address? | 2. <u>Hippers No. Jones Street</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>24</u> Years <u>0</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Sherrman</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, Freeman Starks 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.

Freeman Starks SIGNATURE OF RECRUIT.
Freeman Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Freeman Starks 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. Johns on this 11 day of May 1915.

Signature of Attesting Officer C. B. Dicks Lieut

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the North If enlisted by special authority, such will be attached to the original attestation.

Date 1915 }
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)

C.R. 5543

Extract from Daily Orders Part II Royal Newfoundland
Regt. Depot St. John's dated Aug. 21st 1919.

The discharge of the undernoted on demobilization has
been CONFIRMED by Officer i/c Records from noted date
11-8-19.

5543, Pte. Freeman Starks.

C.R. 5543

Extract from Daily Orders Part 11 Unit The Royal Nfld,
Regt. St. John's, July 16th, 1919

The discharge of the undernoted on demobilization has been
APPROVED by O.C. Discharge Depot with effect fro, 28-7-19

5543 Pte. F. Starks.

C.R. 5543

Extract from Daily Orders Royal Field Artillery
Regt. St. John's, July 1919.

5543 Pte. M. Starkes.

5543

Reported at Headquarters 1-7-19 on "Caspar" which
sailed Glasgow June 24th, 1919.

C.R. 5543

Extract from Daily Ord no part 11, from Unit The Royal 22nd
Regt. St. John's, dated July 28, 1918.

The following was embarked for overseas on R.M.S.
"Kolumballa" July 28, 1918.

#5543 Pte. Freeman Starks.

C.R. 5543

Extract from Daily Orders part 11, from Unit The Royal
Nfld. Regt. St. John's, dated Maye 1sr, 1918

#5543 Pte. F. Starkes

Attested for General Service with the Royal Nfld. Regt.
from 31.5.18

J. Starks.

C.R.

5543

1110

Starks, A.

5543

Ray sept.

August 14, 1919

#5543 rte. Freeman Starks,
Nippers Harbor,
TWILLINGATE DIST.

Dear Sir:-

Please find enclosed Discharge Certificate #3761.

Yours truly,

Captain & Paymaster.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 5543 Rank. P/Lt Name Starks F
 Intended place of residence Dufferin H^{ts} Trullalpa

2. Occupation Fisherman
 Classification of soldier E Medical Category A 1

3. The above named man is discharged in consequence of

DEMobilIZATION Eligible for War Service Gratuity

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

Place, ST. JOHN'S

Date JUL 14 1919

H. News 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, ST. JOHN'S

Date JUL 14 1919

F. Starks
 Signature of soldier
Autolant
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

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

Place, ST. JOHN'S

Date JUL 14 1919

F. Starks
 Signature of soldier
James A. Newman
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 31-5-18 No. of days on Military
 Discharged from service JUL 28 1919 Plus 14 days Service 438

APPROVAL OF DISCHARGE

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

Place, ST. JOHN'S

Date JUL 28 1919

D. R. Cooper Capt
 Officer in Charge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed

Place, ST. JOHN'S

Date August 11/1919

H. Bowley Capt
 Officer in Charge
 The Royal Newfoundland Regiment

CRB 202915761

The Royal Newfoundland Regiment

Class for Demobilization:—

16

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

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

July 12/19

Regimental No. *5543*

Name

Charles Freeman

Address

Quayside St.

Present Medical Category

A1

Recommended for:— (a) Immediate discharge

(b) ~~Standing Medical Board~~

Members of Board

D. R. Cooper Capt.
O.C. Discharge Depot.

W. Babson
Senior Medical Officer

St. W. Burdea
M.O. Depot

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 35743 Rank Pvt. Name Starkes
 Date of Enlistment 31-5-18 Address Wapping St District St. John's
 Occupation Harborman Classification for Discharge 4 Medical Category 1
 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		" 6
B 179c	B 120	M 93		

Date 12-7-19 O. C. Discharge Depot

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.

I am.....in a position to resume civilian occupation. + starkes

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 Ambleton

Date 14-7-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. B2423 to his home
 at Suppers Hill and Release Certificate No. 3602 issued.

Date 14-7-19

G.M. Clouston
 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 11-8-19

Date 14-7-19

H. J. ...
 Depot Paymaster.

Discharge approved for 25-7-19

Forwarded with following documents to O.C Discharge Depot.

N.F. Pj36	B 268	B 121	N.F. Med.	D.F. 1.
E 178	W 3494	B 122	Board 1st.	" 2.
F 178a	D 400A	B 1915	do 2nd.	" 3. <u>2 Km B</u>
L 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 9.

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 JUL 20 1919

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

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

Date

Civil Re-establishment Committee



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

To resume former Occupation,

starks Y

Signature of Man.

Amelton
Signature of the Vocational Officer or his Representative.

Reg. No. 5543

Place

ST. JOHN'S

Date

14-7-77

191

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

MEDICAL HISTORY

Surname Starks OF Christian Name J. Newman

Table I.—GENERAL TABLE.

Birthplace:—Parish Hippers An. Par. Dist. County Newfoundland

	SPECIAL RESERVE		REGULAR ARMY	
	on	day of	on	day of
Examined	31 st	May		191
Declared Age	24	years		days
Trade or Occupation	Fisherman.			
Height	5	feet 6 ^{1/2}		inches
Weight		142		lbs.
Chest Measurement	Girth when fully expanded			
	Range of Expansion			
Physical Development	Right	Left	Right	Left
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V=	6/6 6/6	R.E.—V=	
	L.E.—V=		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>Lamm Peterson</u>			
(Rank)	<u>Major</u>			
Enlisted	at	<u>St. John's</u>	at	
	on	day of	on	day of
		191		191
Joined on Enlistment	Corps.	Regtl. No.	Corps	Regtl. No.
	<u>Royal New</u>	<u>5543</u>		
	<u>Regiment</u>			
Transferred to				
Became non-effective by	on	day of	on	day of
(Signature)		191		191
(Rank)				



Descriptive Return of a Soldier Discharged on Account of Disability

INSTRUCTIONS—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. i. c. Records together with the remainder of the man's documents.

Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

Name in full

Starkes Freeman

Regiment from which discharged **Royal Newfoundland**

Regimental number

5543

Intended address

Mippers H. G. G. G.

Height on discharge

5 Feet 7

Color of hair on discharge

Dark

Complexion

Fair

Color of eyes

Blue

Descriptive Marks

Scar on left side

Figure on discharge

Free

Christian name of Father

Wright

Christian name of Mother

Wife's maiden name in full

Date and place of marriage

Christian names of children

Place and date of soldier's birth

Mippers H. 24 June, 1894

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)

Freeman Starkes

(Rank)

Ph.

Station

Station

Date

8-7-99

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

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 Fusiliers* 7. Former Trade or Occupation } *Fisherman*
2. Regtl. No. *5343* 3. Rank. *plto* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Starkes* *Freeman* (a) Former Regts. or Corps ;
(Surname) (Christian Names) with Regtl. Nos.
5. Age last birthday. *20*
6. Posted for duty on..... at.....
in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge ;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
(a) When (d) Particulars of Pension or Gratuity
(b) Where (if any)
(c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability. *nil*
12. Place of origin of disability. *nil*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *nil*

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--------------------------------------------------------------------|---------------------|-------------------|
| (i.) Service during the present war | | |
| (ii.) Previous active service.. .. . | | |
| (iii.) Climate in pre-war service | | |
| (iv.) Ordinary military service before the war | | |
| (v.) Serious negligence or misconduct on the man's part. } | | |
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

Ide complaint of no disability

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, etc., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

16. Was an operation performed? If so, when and what was its nature?
 17. If not, was an operation advised and declined?
 18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
 19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

20. Do you recommend—

- (a) Discharge as permanently unfit?
 (b) Change to United Kingdom?

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

Repatriation

W.E. Proemier / G.P. Rame

Medical Officer in charge of case.

Station .. *Angely, born*

Date .. *7/4/19*

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



To M.O. 4c

2nd Batta R. Mfld. Regt.

Hazeley Down

The flares required for
58-43 Pl. Starks 7.

are too weak for W.O.
Supply please.

A. Coues.

CAPT.
R.A.M.O.

August 15, 1919

Mr. Frederick Starks,
Nipper s Harbor, N.D.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 War Service Gratuity.

Yours truly

Captain & Faymster.

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th. 1919.

A complete reply must be given to every question in this Declaration There must be no blanks and no dashes, if any questions are not applicable, the words "NOT APPLICABLE" must be written out.

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

Christian name..... *J. J. Starks* 2. Surname..... *Starks*

3. Rank..... *Pte* 4. Regtl. No..... *5543*

5. Address in full to which future payments of gratuity are to be forwarded..... *Nippers Hk. U.D.B.*

6. Date of enlistment in the Regiment..... *May 14/18*

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

8. Relationship of such dependents..... *No*

9. Address in full of such dependents..... *No*

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 field, if so, give dates and particulars of such service..... *England only*

12. Give total length of time which you served on active service, whether in field or Overseas..... *1 yr 1 mo*

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th. 1919.

A complete reply must be given to every question in this Declaration There must be no blanks and no dashes, if any questions are not applicable, the words "NOT APPLICABLE" must be written out.

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

Christian name..... *Fred* 2. Surname..... *Starkes*

3. Rank..... *Pte* 4. Regtl. No..... *5543*

5. Address in full to which future payments of gratuity are to be forwarded..... *Nippes's Av. U.D.D.*

6. Date of enlistment in the Regiment..... *May 14/18*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
..... *No*

8. Relationship of such dependents..... *No*

9. Address in full of such dependents..... *No*

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 Hfld. If so, give dates and particulars of such service..... *England only*

12. Give total length of time which you served on active service, whether in Hfld. or Overseas..... *1 yr 1 mo*

..... *12*

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.
..... *No*

15. Have you been issued with a War Service Badge?
..... *No*

16. Have you, during the present war, served in the Imperial Forces?
..... *No*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.
..... *No*

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?
..... *No*

(b) If so, was such reversion in consequence of misconduct or inefficiency?
..... *No*

19. Are you now serving in the Res? *No*. If not give: (a) Date of discharge *July 14/14* (b) Reason for discharge *Demot*
..... *Surf*

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.
..... *No England only*

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.
..... *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.

4 Starks

Signature of Applicant:

Place of Residence: *Nipper's Hill road*

Declared before me at: *St Johns*

This *14* day of *July* 19*19*....

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

Chas. P. Carter

POST DISCHARGE PAY.

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

.....

.....

Certified correct.

Paymaster

The Royal Newfoundland Regiment

DEMobilIZATION OF

Reg. No. 5543 Rank Plt. Name Starkes
 Date of Enlistment 31-5-18 Address Mippers Av. District St. John's
 Occupation Farmer Classification for Discharge 1 Medical Category 1
 Recommendation S.M.B. 1 Disability Rating 1
 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 12-7-19 O. C. Discharge Depot. Mippers Av.

PARTICULARS FOR DEMobilIZATION

1. Civil Re-Establishment.
 I am 7 Starkes in a position to resume civilian occupation.
 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 Amberst
 Date 14-7-19 O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. B2423 to his home at Hippers Hill and Release Certificate No. 3602 issued.

Date 14-7-19

[Signature]
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 11-8-19

Date 14-7-19

[Signature]
Depot Paymaster.

Discharge approved for 28-7-19

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
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	E 120	M 93		

Date

[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 JUL 20 1919

[Signature]
O. C. Discharge Depot.

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

Date August 7 1919

[Signature]

Reg. No. 5543 Rank Y6 Name Starkes J.

Attested Address Wipers St.

Allotment Allottee

Date of Allotment Returned from Overseas JUL 1 1919

Returned on S.S. Cassandra Cause Discharge

147 19
287 19

PASSED TO DEMOBILIZATION OFFICE

DISCHARGE APPROVED ON DEMOBILISATION.

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 New Brunswick Land* 7. Former Trade or Occupation } *Fisher*
2. Regtl. No. *543* 3. Rank. *Pte* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Shakes* *Freeman* (a) Former Regts. or Corps; with Regtl. Nos.
- (Surname) (Christian Names)
5. Age last birthday. *25*
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 (b) Date of Discharge;
- (c) on duty (d) off duty? (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—
- (a) When (d) Particulars of Pension or Gratuity (if any)
- (b) Where
- (c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 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.
12. Place of origin of disability.
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents.

nil
nil
nil

14. State whether the disabilities are (a) attributable to (b) aggravated by
- (i.) Service during the present war
 - (ii.) Previous active service
 - (iii.) Climate in pre-war service
 - (iv.) Ordinary military service before the war
 - (v.) Serious negligence or misconduct on the man's part. }
- 14 (a). If not due to any of these causes, to what specific condition do you attribute it? }

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, etc., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

He complains of no 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?

Repatriation

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.

W. E. Proemier *Capt. Rawe*
 Medical Officer in charge of case.

Station *Hazley Down*
 Date *5/4/19*

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



Magistrate's Office.

Grand Falls.

Sept. 1 St. 1922

C.R. 5543

Dear Sir,

Reference made to 19th. sitting in
connection with case No. 5543 Mr.
F. Starks. Matters stated. I have sent your
communication to Magistrate Cunningham at
Springdale N.B. who should be able to deal
with the matter.

Yours Very truly,
H. F. Fitzgerald.

Genl. Consul W. F. Rendell
Chief Staff Officer
Dept. of Marine
St. John's.

107
22

Form No. 17

C.R. 5543

Counter No. _____

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

The Postmaster General may decline to forward the Telegram, 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 Telegram shall never reach its destination by reason of any neglect or default of the Postmaster General or his Servants whilst the Telegram remains under the control of the Postmaster General, he will refund the amount paid by the Sender for such Telegram.

The Postmaster General 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 Telegram, 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 Postmaster General over the Message shall be deemed to have entirely ceased for the purpose of these Conditions at any point where, in the course of the transit of the Telegram to its destination, it may be entrusted by the Postmaster General (and the Postmaster General shall have full power so to entrust the Telegram) for further transmission by or through any system belonging to or worked by any administration or authority not controlled by the Postmaster General exclusively, although worked as a part 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	RC'D	BY	SENT	BY	CHECK

DATED ~~in~~ August 5th, 1922

H. Batstone, Postmaster, Nippers Hr.

Registered parcel No. 6830 mailed Oct. 19th, 1921
5543 Pte. F. Starks, Nippers Harbour. Please advise
if delivered. If not return this Department immediately.

Militia.

Chgs Dept of Militia.

*Have written telegram (by falls)
to have mailed
returned from*

FOR TYPEWRITER

5543

NEWFOUNDLAND POSTAL TELEGRAPHS.

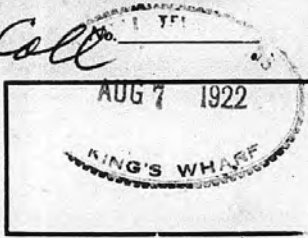
CABLE CONNECTION WITH ALL PARTS OF THE WORLD



Line No. 62 x Sent by Rec'd by Check 14 Coll

Place from St. John's

To Militia



Parcel No. 4930,5543 pte
F. Starks recd and
delivered October 28th 1921

J. Roberts

C.R. 5543

May 16th 22

No. 5543 Pte. F. Starks,
Nipper's Hr.,
Twillingate.

Dear Sir:-

Have you received a Medal from this Dept?
We have as yet received a receipt for one. If you have
received one, please make sure that it is yours -you
will see the name engraved on the edge. If your name
is not engraved on it, return the medal immediately and
the proper one will be sent you.

Yours faithfully,

Lieut.

Officer i/c Records.

CR 5543
August 18th 22

Magistrate Fitzgerald,
Grand Falls.

Dear Sir:-

Some time ago, this Department forwarded to No. 5543 Pte. F. Starke, Nippers Hr, Twillingate, a British War Medal on which another soldier's name was engraved. We have requested him several times to return the medal to us, so that we might forward him the correct one, but he has not replied.

I shall be very grateful, if you will be so kind as to get in touch with the nearest residing Magistrate to Starke, and request him to recover the medal and forward it to this Department.

Yours faithfully,

Lieut.-Col.,

Chief Staff Officer



C.R. 5543

DEPARTMENT OF MILITIA

ST. JOHN'S August 10th 1922
NEWFOUNDLAND

Magistrate Fitzgerald,
Grand Falls.

Dear Sir:-

Some time ago, this Department forwarded to No. 5543 Pte. F. Starkes, Nippers Hr, Twillingate, a British War Medal on which another soldiers name was engraved. We have requested him several times to return the medal to us, so that we might forward him the correct one, but he has not replied.

I shall be very grateful, if you will be so kind as to get in touch with the nearest residing Magistrate to Starkes, and request him to recover the medal and forward it to this Department.

Yours faithfully,

W. J. Rudell

Lieut.-Col.,

Chief Staff Officer

*Forwarded to Mgr. Cunningham
Springdale. NAB.*

23/8/22

H.F.F.

(OK)