



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 3987 Name John Steele Corps Coff

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. John Steele
- 2. What is your full Address? 2. Smith's Row
J Bay
- 3. Are you a British Subject? 3. yes
- 4. What is your age? 4. 18 Years 5 Months
- 5. What is your Trade or Calling? 5. Labourer
- 6. Are you Married? 6. no
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7. no
- 8. Are you willing to be vaccinated or re-vaccinated? } 8. yes
- 9. Are you willing to be enlisted for General Service? } 9. yes
- 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... } 10. { Name
Corps
- 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? } 11. yes

I, John Steele 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.

John Steele SIGNATURE OF RECRUIT.
James J. Wang Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, John Steele 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 Grand Falls on this 13th day of October 1917

Signature of Attesting Officer [Signature]

†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 19-10-17 1917 } Approving Officer.
Place St. John's } [Signature]

† 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 John Steele
 Apparent age 18 years 5 months. Height 5 feet 7 inches
 Chest Measurement { Girth when fully expanded 36 inches WT 117
 { Range of expansion 2 inches
 Distinctive marks Eyes - Blue - Hair - dark - Complexion Fair

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Joseph Steele
Whitney Pass | Relationship Father
South Sydney, N.S.W. 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 Re-serve 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 " _____ [" "] " _____ " _____



FIRST NEWFOUNDLAND REGIMENT

3987

ATTESTATION OF

No. 3987 Name John Steele Corps 60th

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. John Steele
- 2. What is your full Address? 2. Smith's Sound
7 Bay
- 3. Are you a British Subject? 3. yes
- 4. What is your age? 4. 18 Years 5 Months
- 5. What is your Trade or Calling? 5. Labourer
- 6. Are you Married? 6. no
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7. no
- 8. Are you willing to be vaccinated or re-vaccinated? 8. yes
- 9. Are you willing to be enlisted for General Service? 9. yes
- 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... } 10. { Name
Corps
- 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? } 11. yes

I, John Steele 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.

E 12/10/17

John Steele SIGNATURE OF RECRUIT.

James J. Wang Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, John Steele 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 Grand Falls on this 13th day of October 1917

Signature of Attesting Officer [Signature]

†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 19-10-17 Place [Signature] } 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, vis:—(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 John Sticks
 Apparent age 19 years 5 months. Height 5 feet 7 inches

Chest Measurement { Girth when fully expanded 36 inches WT 117
 Range of expansion 2 inches

Distinctive marks Eyes - Blue - Hair - dark - Complexion - Fair

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Joseph Sticks
Whitney Pass | Relationship Father
South Sydney, N.S.W. 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>12-10-17</u>									
Joined at <u>St. John's</u> on <u>October 12-17</u>									
<u>No Overseas Service</u>									
<u>Discharged Medically Capt. 22-11-17</u>									
Total Service forfeited as above.....									

Total Service towards Engagement to 22-11-17 [date of discharge] — years 42 days
 " " Pensions " " " " " " " " " " " "

C.R.

3987

Extract from Daily Orders Part 11 Unit The Royal Nfld.

Regt. St. John's, Dec. 24th, 1917.

3 3987 Pte. J. Steele,

Having been found Medically Unfit is discharged with

effect from 22/11-17. Authority K R & R 392 (iii)9(c)

C.R. 3987

Extract from Daily Orders Part 11 Unit teh Royal Nfld.
Regt., St. John's, Oct. 18th, 1917.

Attested at Grand Falls.

3 987 Pte. J. ~~Steele~~

Attached for General Service with the Royal Nfld. Regt.
posted to G. Coy, with effect from Oct. 12th, 1917.

Steele, John

3987

Hay Sept



DEPARTMENT OF MILITIA

ADDRESS REPLY TO
DEPARTMENT OF MILITIA
AND QUOTE NO.

ST. JOHN'S, NEWFOUNDLAND.

December 31st. 1917.

Mrs. Joseph Steele,
Burgoyne's Cove,
Smith's Sound,
T.B.

Dear Madam:

As you are aware, your son #3987, Pte. J. Steele was discharged from the Regiment on Nov. 22nd. being found unfit for further service.

The allotment cheque posted you from this office on Dec. 7th. was ^{the amount} in payment in full for November, which is 30 days, therefore as your boy was discharged on the 22nd. of November you have been over paid 8 days allotment at 60¢ per day, which is \$4.80. The mistake was caused through oversight, and I shall be glad if you will kindly refund the over-paid amount to me.

Pro
Capt. & Paymaster.



Department of Militia, Newfoundland.
Medical Department.

Medical Report on an Invalid.

NOTES:—

- (a) This report is solely concerned with Pensions.
- (b) A single copy only is required.
- (c) "Aggravated" being now a technical term, carrying right to pension, discrimination in its use is essential.
- (d) Be as brief as possible compatible with lucidity.
- (e) Avoid dubiety—"perhaps" "possibly" "might" and the like.
- (f) Only sufficient clinical data need be given to establish the degree of disability and assist the Board in arriving at a decision.

Statement of Case

Station

Saint John's N.F.

Date

Nov. 22. 17.

1. Unit *1st. Newfoundland*
2. Regimental No. *3987*
3. Rank. *Pte.*
4. Name. *Steele John*
5. Age last birthday. *18*
6. Enlisted on *12 Oct. 1917.*
at *Grand Falls.*
7. Former trade or occupation *Paper maker.*
8. Disability

Ship trouble.

9. History

He states that he has hip disease when a child. He also states that he was examined at Grand Falls but his own ship.

10. What is his present condition?

(This is the important question. Be brief—the clearer the case the less need be written. Read note f above.)

*His Limp and foot are normal.
His left leg is wastes from hip
down. He walk with slight
limp. No other deforming.*

11. Was sanatorium operation advised and refused?

12. Do you recommend discharge as permanently unfit?

Signature

J. W. Burden

Rank or Qualification

Remarks if any by Officer i/c Hospital.

Place

Signature

Date

Rank

Opinion of the Medical Board.

In para. 13, the President should write "may" or "cannot" at x
Erase inapplicable words.

13. For pension purposes, the disability x *Cannot* be considered as aggravated by—
due to

(a) Service during this war. (b) Climate. (c) Ordinary Military Service
Remarks if any:—

14. Does the Board concur in preceding report? (see Sect. 10) If not give differing opinion and additional findings.

*Yes left hip 10nd stiff on attempting
extension, tends to pressure. Flattening
of nates fold*

15. At present his capacity for earning a full livelihood in the general labor market is lessened by:—
(Here the president should write in Total, 4-5, 3-5, 2-5, 1-5).

Remarks if any:—

wt (on military service) 20%

16. Is the disability permanent? *Yes*

17. Has the disability been aggravated by (a) Intemperance *W* (b) Misconduct *W*

18. The refusal of operation sanatorium is— (a) Reasonable (b) Unreasonable:

Remarks if any:—

19. If fit subject for Hospital do you recommend admittance to

General Hospital,
Naval and Military Con-
valescent Hospital, *W*
Jensen Tuberculosis Camp.

20. We recommend discharge from the Army

permanently unfit

Remarks if any:—

Signatures.

H. Shan
J. J. L. Paterson *major*
President

Place

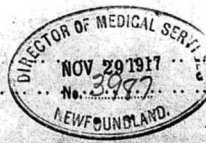
Date

S. J. J. J.
Nov 27 1917

APPROVED

Station

Date



Clayton Macpherson *major*
Administrative Medical Officer.
D. W. S. NEWFOUNDLAND.

R. Sr. Falls

1-3

C.R. 4223

Burgoyne's Cove

Oct-30th 1917

The Hon. J. R. Bennett

Dear Sir

Will you please look up the Doctor
that pronounced John Steele fit
for active service & tell him he
isn't fit he is a cripple & he can't
endure any hardship I am his
mother & I know how he is he was
very sick at Grand Falls this summer
& he is home in the winter season
& he can't endure any hard work
he has a bad side to Stomach
he enlisted at Grand Falls I didn't
know it until he was gone
it's a massacre & a murderous
act for a Doctor to pronounce
a cripple fit for active service

he may be alright there in
St Johns for a while but not
long so I must have him back
he is a poor cripple & I am
broken hearted so will you
please look up the doctor &
tell him he must not send
him away hoping you
wont fail to do so & please
answer this

I remain

Yours & etc

Mrs Joseph Steele
Burgwynes Cove

3987 John Steele.

attested at G. Falls 12-10-17-

Forms
C. 348
81

MEMORANDUM.

From D.C. COY.
1st NEWFOUNDLAND REGIMENT,
ST. JOHN S, Nfld.
To M.O.
Hqs.

From M.O.
To Ac Coy's
ANSWER.

1-11-17 1917
Re 3987 Pte Steele
Will you please
look at this man
& see if his
condition justifies
accompanying letter.
He was passed by
R. Moore as fit for
active service at
Grand Falls 13-10-17.

Nov. 7 1917
Re 3987 Pte Steele
The letter he was sent for
amount lost success with
pain in side & diarrhoea.
He gives a history of the
disease when asked. On
examination I find legs leg
abit swollen, knee the
right the ankle with a slight
hump, but no deformity to
notice.
Examination of lungs &
heart show that they are
normal.

Wolley of C. 9 COY.
1st NEWFOUNDLAND REGIMENT,
ST. JOHN S, Nfld.

Sto Borden M.O.

Forms
C. 348
61

MEMORANDUM.

From

O.C. COY.

1st NEWFOUNDLAND REGIMENT,
ST. JOHN S, NFLD.

To

B.O. How.

From

To

ANSWER.

2-11-17. 191

191

For your information
please. Also you
please cause same
to be communicated
to the D.O.B. for
his information also.

W. H. H. O.C. 9 COY.

1st NEWFOUNDLAND REGIMENT,
ST. JOHN S, NFLD.

Forms
C. 348
61

MEMORANDUM.

From _____ O.C. _____ COY.

1st NEWFOUNDLAND REGIMENT,
ST. JOHN S, NFLD.

To *b.o.*
How

From _____

To _____

ANSWER.

3-11-17 191 .

Further reference to
3987 Phi J. Stice

I annex herewith a
Statement made by
him concerning his
Medical examination
at Grand Falls Oct
13th 1917.

*This man has been placed
under observation of M.O.
11/28/17*

W. J. [Signature] O.C. _____ COY.
1st NEWFOUNDLAND REGIMENT,
ST. JOHN S, NFLD.

Statement by 3987 Pk John Steele.

I was examined in Grand Falls previous to admission into the Newfoundland Regiment by Dr. Moore on Oct 13th. I was stripped to the waist and removed my stockings, but did not let down or remove ^{my} pants. No examination of my ^{between} ~~hoop~~ ^{new} waist and ankles was made.

Signed John Steele

H. John. Steele
3-11-17.

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

MEDICAL HISTORY

OF

Surname

Steel

Christian Name

John

Table I.—GENERAL TABLE.

Birthplace:—Parish

South Down I. Bay. County

Nfed

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <i>13</i> day of <i>Oct</i> 191 <i>7</i>		on _____ day of _____ 191_____	
	at <i>Grand Falls</i>		at _____	
Declared Age	<i>18</i> years <i>5</i> Moys		years _____ days _____	
Trade or Occupation	<i>labourer</i>		_____	
Height	<i>5</i> feet <i>7</i> inches		feet _____ inches _____	
Weight	<i>117</i> lbs.		lbs. _____	
Chest Measurement	Girth when fully expanded... <i>36</i> inches		_____ inches _____	
	Range of Expansion... <i>2</i> inches		_____ inches _____	
Physical Development	_____		_____	
Vaccination Marks	Arm	Left	Right	Left
	Number	_____	_____	_____
When Vaccinated	_____		_____	
Vision	R. E.—V= _____		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)	<i>Liam Patterson</i>		_____	
(Rank)	<i>Major</i>		_____	
	Medical Officer.		Medical Officer.	
Enlisted	at <i>Grand Falls</i>		at _____	
	on <i>13th</i> day of <i>Oct</i> 191 <i>7</i>		on _____ day of _____ 191_____	
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
Transferred to	<i>1st Nfed Regt</i>	<i>3987</i>	_____	_____
Became non-effective by	on _____ day of _____ 191_____		on _____ day of _____ 191_____	
[Signature]	_____		_____	
[Rank]	_____		_____	

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

Date	Brief Details, and Signature
7-11-17	Vacc. <i>SP</i>
19-10-17	T.A.B. <i>SP</i>
29-10-17	D. <i>SP</i>
3-11-17	" <i>SP</i>

Table IV.—SERVICE TABLE.

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



Descriptive Return of a Soldier Discharged on Account of Disability

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

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

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

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

Name in full *Steele John*

Regiment from which discharged *1st. Newfoundland*

Regimental number *3987*

Intended address *Smith Point O Bay*

Height on discharge *5* Feet *8 in*

Color of hair on discharge *Dark Brown*

Complexion *Fair*

Color of eye *Grey*

Descriptive Marks *none*

Figure on discharge *medium*

Christian name of Father *Joseph*

Christian name of Mother *Eleanora*

Wife's maiden name in full _____

Date and place of marriage _____

Christian names of children _____

Place and date of soldier's birth. *Smith Point May 25 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) *John Steele*

Station *S. Johns* Date *Nov 22/17* *Pte* (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.

St. Borden

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

Station *S. Johns N.Y.* Date *Nov. 22. 17*

GRAND FALLS

Oct. 13, 1917.

THIS IS TO CERTIFY that I have examined John Steele
and find him physically fit for Military Service.

Thos. Moore M.D.

No 3744



1st. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, John Steele, Regl. No. 3987

hereby agree, until further notification by me, and in similar official form to make an Allotment of _____ Dollars and 4 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 1-11-17

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3062	Mother	Mr Joseph (Edith) Steele	Barrington Lane St. John'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.) [Signature]

Officer Commanding
Company

Ol John Steele
1-11-17

(Sig.) John Steele

(Rank) [Signature]

December 31st. 1917.

Mrs. Joseph Steele,
Burgoyne's Cove,
Smith's Sound,
T.B.

Dear Madam:

As you are aware, your son #3987, Pte. J. Steele was discharged from the Regiment on Nov. 22nd. being found unfit for further service.

The allotment cheque posted you from this office on Dec. 7th. was in payment in full for November, which is 30 days, therefore as your boy was discharged on the 22nd. of November you have been over paid 8 days allotment at 60¢ per day, which is \$4.80. The mistake was caused through oversight, and I shall be glad if you will kindly refund the over-paid amount to me.

Capt. & Paymaster.

no book
strength
-0045

22 Starr St
Halifax N.S. nov

to Capt J. J. Ogilvie 3987 7/19/19

Dear Sir as you are aware
S 3987 J. Steele enlisted at
Grand Falls Oct 12 1817 was
discharged Nov 22nd

Being found medically
unfit am i entitled to a
discharge badge. There is
a fellow from nyfld here and
he says he never was out
of the country he has one
and why not me i did not
get my discharge will you
Please send it to me and oblige

John Steele 22 Starr Street
Halifax N.S.

Major Howley

This man is still at
Halifax will you
communicate with him
please

J. J. Hardy

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms
B. 121
39

Number of Sheet

205

Regiment of

1st Newfoundland

Signature of O. C. Company

W. H. H. 7/6

Regimental No. and Name		Enlistment		Trade
No.	<i>3987</i>	Age on	<i>15 years 5 months</i>	<i>Labourer</i>
Regimental Name		Place and Date of Enlistment		Religion
<i>Stable John</i>		<i>St. John's</i>		<i>C of E</i>
Joined	Date	Period of	with Colours <i>42</i> years.	Place of Birth
Joined	Date			
Joined	Date			
Joined	Date			

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
-------	-----------------	------	----------------------	---------	--------------------	--------------------	---	-----------------	---------

Discharged Medically Unfit

St. John's, 22nd 17

To be carried over

Army Form B. 121